





Name

: KARTHIGA P

Sex / Age : Female / 35 Years

: APOLLO HEALTH AND LIFESTYLE Ref By

LIMITED

Reference:

Sample Collected At:

Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powai, Mumbai-400076

Processing Location: - Sea Bird Medicare

105-107 Gateway Plaza, Central Avenue, Hiranandani

Gardens, Powai, Mumbai-400076

Reg. Date

28-Sep-2024 / 8:48 am

Coll Date

28-Sep-2024 / 8:53 am

Report Date

28-Sep-2024 / 1:46 pm

REPORT

BLOOD GLUCOSE

<u>Test</u>	<u>Result</u>	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
Blood Glucose (Fasting), plasma	90.89	ma/dl	70.00 - 100.00 mg/dl

Blood Glucose (Fasting), plasma

(Plasma, Method-Hexokinase)

Interpretation:

NORMAL: 70 - 100 mg/dl Pre-Diabetic: 100 - 125 mg/dl Diabetic: >125 mg/dl

(ON MORE THAN ONE OCCASION)

Reference: American diabetes association guidelines 2022

Urine Glucose (Fasting) Absent Absent

Urine Ketones (Fasting) Absent Absent

97.50 70.00 - 140.00 Blood Glucose (PP) plasma mg/dl

(Plasma, Method-Hexokinase)

Interpretation:

Non-Diabetic: 70 - 140 mg/dl Pre-Diabetic: 140 - 199 mg/dl

Diabetic: >200 mg/dl

Powai: 022-25701053 / 25704157

(ON MORE THAN ONE OCCASION)

Reference: American diabetes association guidelines 2022

Urine Glucose (PP) Absent Absent

Urine Ketones (PP) Absent Absent

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

Molly R

Lab Technician

DR.RITESH KHARCHE MBBS, MD PATHOLOGY

Pathologist MMC Reg No.2006031680

Kochi: 0484- 2322022 / 4032022

Page 1 of 15

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28-Sep-2024 / 8:48 am

Coll Date

28-Sep-2024 / 8:53 am

Report Date

28-Sep-2024 / 3:45 pm

REPORT

BLOOD GLUCOSE

Result **Units BIOLOGICAL REFERENCE INTERVAL Test**

----- End of Report -----

Molly R Lab Technician

DR.RITESH KHARCHE MBBS, MD PATHOLOGY

Pathologist

MMC Reg No.2006031680

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HO- Sea Bird Medicare Centre (ISO 9001:2015): A-101-102, Heritage Plaza, Teli Cross Lane, Andheri East (Nr. Station), Mumbai- 69. Tel: 022- 46032704 Kochi: 0484- 2322022 / 4032022 Powai: 022-25701053 / 25704157







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28-Sep-2024 / 8:53 am

Report Date

28-Sep-2024 / 1:46 pm

REPORT

Blood Group

Units BIOLOGICAL REFERENCE INTERVAL Test Result

BLOOD GROUP

ABO Group "O"

RH (D) Positive

Method: Cell (Forward) grouping by Manual Slide Method.

Sample: Whole Blood (EDTA)

----- End of Report -----

PRIYA PANDEY Lab Technician

DR.RITESH KHARCHE MBBS, MD PATHOLOGY **Pathologist**

MMC Reg No.2006031680

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28-Sep-2024 / 8:48 am

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28-Sep-2024 / 8:53 am

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28-Sep-2024 / 1:46 pm

REPORT

Complete Blood Count

	•		
<u>Test</u>	Result	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
Hemoglobin	10.5	gm/dl	12.0 - 15
RED BLOOD CELLS	4.00	:II: /	20.40
R.B.C. Count	4.33	million / cumm	3.8- 4.8
HCT	33.4	%	35-48
MCV	77.1	fL	83 - 101
MCH	24.3	pg	27 - 32
MCHC	31.5	gm / dl	31.5 - 34.5
		g, =:	
RDW (CV)	13.7	%	11.6- 14.0
Total W.B.C. Count	6850	/cu.mm.	4000-10000
DIFFERENTIAL COUNT			
DIFFERENTIAL COUNT Neutrophils	69	%	40 - 80
Мешторина	03	70	40 - 00
Lymphocytes	27	%	20 - 40
•			
Eosinophils	02	%	1 - 6



LATHA SONAWANE

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Pathologist

Kochi: 0484- 2322022 / 4032022

MMC Reg No.2006031680

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REPORT

Complete Blood Count

	•						
Test	Result Units BIOLOGICAL REFERENCE INTERVAL						
Monocytes	02	%	2 - 10				
Basophils	00	%	0 - 1				
Platelet Count	296000 /cumm 150000 - 410000						
MORPHOLOGY							
RBC Morphology	Mild Anisocytosis with Microcytic and Hypochromic Cells.						
WBC Morphology	Normal Morphology.						
Platelets on Smear	Adequate on smear						
Advice	Serum Iron Studies profile						
(EDTA Whole Blood - Tests done Automated TI Cyanmeth free method. Rest are calculated par	. ,						

----- End of Report -----



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REPORT

Erythrocyte Sedimentation Rate (ESR)

<u>Test</u>	<u>Result</u>	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
FSR	12	mm at 1hr	0 - 20

Method: Westergren. Sample: Whole Blood (EDTA)

----- End of Report -----

Pig-

PRIYA PANDEY
Lab Technician

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MMC Reg No.2006031680

Kochi: 0484- 2322022 / 4032022

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28-Sep-2024 / 8:48 am

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Report Date

28-Sep-2024 / 1:46 pm

REPORT

Glycosylated Haemoglobin (HbA1c)

<u>Test</u>	Result	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
HbA1c Pre-Diabetic: 5.7 - 6.4 % Diabetic: > = 6.5 (EDTA Whole Blood, Turbidimetric)	6.44	%	4 - 5.69
Mean Blood Glucose (MBG)	151.96	mg/dl	

Interpretation & Remark:

- 1. HbA1c is used for mointoring diabetic control. It reflects the estimated average glucose (eAG).
- 2. HbA1c has been endorsed by clinical groups & ADA (American Diabetes Association guideline 2022, for diagnosis of diabetes using a cut-off points of 6.5 %.
- 3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- 4. Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases. Clinical correlation sugested.
- 5. To estimate the eAG from the HbA1C value, the following equation is used: eAg(mg/dl)=28.7*A1c-46.7.
- 6. Interference of Haemoglobinopathies in HbA1c estimation.
 - A. For HbF> 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
 - B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
 - C. Heterozygous state detected.
- 7. In known diabetic patients, following values can be considered as a guide for monitoring the glycemic control. Excellent Control - 6 to 7 %

Fair to Good Control - 7 to 8 % Unsatisfactory Control - 8 to 10 %

and Poor Control - More than 10 %

Powai: 022-25701053 / 25704157

8. Test done on Mispa i3 Automated Cartridge Based Specific Protein Analyser.

---- End of Report -----



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MMC Reg No.2006031680

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Report Date

28-Sep-2024 / 1:47 pm

REPORT

LIPID PROFILE

<u>Test</u>	Result	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
Total Cholesterol Serum, Method: CHOD-PAP	138.78	mg/dl	CHILD Desirable - Less than: 170 CHILD Borderline High: 170 - 199 CHILD High - More than: 200 ADULT Desirable - Less than: 200 ADULT Borderline High: 200 - 239 ADULT High - More than: 240
Triglycerides Serum, Method: GPO-PAP	60.82	mg/dl	NORMAL : <150 Borderline High : 150 - 199 High : 200 - 499 Very High : >500
HDL Cholesterol-Direct Serum, Method: Cholesterol-esterase-Direct	72.87	mg/dl	Desirable - Above : 60 Borderline Risk : 40 - 59 Undesirable - Below : 40
LDL Cholesterol Calculated	53.75	mg/dl	Desirable - Below : 130 Borderline Risk : 130 - 159 Undesirable - Above : 160
VLDL-Cholesterol Calculated	12.16	mg/dl	5 - 51
T.CHOL/HDLC Ratio Calculated	1.90		Acceptable for Male : < 5.00 Acceptable for Female : <4.50



LATHA JUNAWANE

Lab Technician



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MBBS, MD PATHOLOGY

Pathologist

MMC Reg No.2006031680

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Reg. Date

28-Sep-2024 / 8:48 am

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28-Sep-2024 / 8:53 am

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28-Sep-2024 / 1:47 pm

REPORT

LIPID PROFILE

TestResultUnitsBIOLOGICAL REFERENCE INTERVALLDLC/HDLC Ratio0.74Acceptable for Males: < 3.60</td>CalculatedAcceptable for Females: < 3.20</td>

NOTE:

- 1) Biological Reference Intervals are as per ATP III, NCEP Guidelines and National Lipid Association (NLA) 2014 Recommendations.
- 2) Tests done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.
- 3) The LDL-Cholesterol is calculated by the Friedewald equation which provides a reliable LDL-Cholesterol value estimate when triglyceride levels are below 400 mg/dL. A direct measurement is advised if the triglyceride levels are >400mg/dL.

----- End of Report -----



Lab Technician

DR.RITESH KHARCHE

MBBS, MD PATHOLOGY

Pathologist MMC Reg No.2006031680

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28-Sep-2024 / 8:53 am

Report Date

28-Sep-2024 / 1:46 pm

REPORT

LIVER FUNCTION TEST

Test	<u>Result</u>	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
S.G.O.T. (Serum ,Method-IFCC / UV without P5P)	14.23	U/L	0 - 32
Sr. Alkaline Phosphatase (Serum, Kinetic Method by IFCC)	77.17	U/L	35 - 104
S.G.P.T. (Serum,Method- IFCC / UV without P5P)	12.81	U/L	0 - 33
GGT (Serum ,Method- IFCC Method)	13.94	U/L	5 - 36
Bilirubin (Total) (Serum ,Method-Diazo- End point)	0.11	mg/dl	0.0 - 1.20
Bilirubin (Direct) (Serum,Method-Diazo-End point)	0.1	mg/dl	0.0 - 0.40
Bilirubin (Indirect) Calculated	0.01	mg/dl	0.0 - 0.90
Total Proteins (serum,Method-Biuret)	6.69	g/dl	6.6 - 8.7
Albumin (Serum,Method-Bromocresol Green)	4.3	g/dl	3.5 - 5.2
Globulin Calculated	2.39	g/dl	1.90 - 3.70
A/G ratio Calculated	1.80		

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.



LATHA SONAWANE

Lab Technician

ofth

DR.RITESH KHARCHE MBBS, MD PATHOLOGY

Pathologist

MMC Reg No.2006031680

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Powai: 022-25701053 / 25704157

Ref By

: KARTHIGA P Name

Sex / Age : Female / 35 Years

LIMITED

: APOLLO HEALTH AND LIFESTYLE

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28-Sep-2024 / 1:46 pm

REPORT

LIVER FUNCTION TEST

Result **BIOLOGICAL REFERENCE INTERVAL Test Units** ----- End of Report -----



Lab Technician

DR.RITESH KHARCHE MBBS, MD PATHOLOGY **Pathologist**

MMC Reg No.2006031680

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Report Date

28-Sep-2024 / 1:47 pm

REPORT

RENAL PROFILE

<u>Test</u>	<u>Result</u>	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
Blood Urea Serum, Method-Urease	16.4	mg/dl	16.6 - 48.5 mg/dl
Blood Urea Nitrogen Serum, Method-Urease	7.66	mg/dl	06 - 20 mg/dl
Creatinine Serum, Method-Kinetic Jaffes	0.55	mg/dL	0.5 - 0.95 mg/dl
Uric Acid Serum, Method: Uricase-POD	4.85	mg/dl	2.4 - 5.7

Test Done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analyser.

----- End of Report -----



Lab Technician

DR.RITESH KHARCHE MBBS, MD PATHOLOGY

Pathologist MMC Reg No.2006031680

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28-Sep-2024 / 8:48 am

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28-Sep-2024 / 8:53 am

Report Date

28-Sep-2024 / 3:39 pm

REPORT

THYROID FUNCTION TEST

I	<u>'est</u>	Result	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
Т	SH	2.77	μIU/ml	0.25-5 μIU/mI
Т	3	1.74	nmol/l	0.92-2.33 nmol/l
Т	4	93.42	nmol/l	60-120 nmol/l

The assay principle combines an enzyme immunoassay competition method with a final fluorescent detection (ELFA).

INTERPRETATION

Powai: 022-25701053 / 25704157

TSH: A high TSH result often means an under active thyroid gland that is not responding adequately to the stimulation of TSH due to some type of acute or

chronic thyroid dysfunction. A high TSH value can also occur when someone with a known thyroid disorder or who has had their thyroid gland

receiving too little thyroid hormone medication. A low TSH result can indicate an over active thyroid gland (hyperthyroidism) or excessive amounts of thyroid

hormone medication in those who are being treated for an under active (or removed) thyroid gland. An abnormal TSH test result is usually followed by

additional testing to investigate the cause of the increase or decrease.

T3: Triiodothyronine T3 contributes significantly to the maintenance of the euthyroid state, and the total T3 concentration has a role in screening for thyroid disease

in conjunction with other tests. T3 alone cannot diagnose hypothyroidism, but it may be more sensitive than thyroxine (T4) for hyperthyroidism.

T4: Thyroxine accounts for at least 90% of circulating protein-bound iodine. While >99.9% of T4 is protein-bound, primarily to thyfoKine-binding globulin(TBG), it

is the free fraction that is biologically active. In most patients the total T4 level is a good indicator of thyroid status, however it can sometimes be

diagnostic efficiency may be improved by use of a total T4 test in conjunction with other tests.

---- End of Report ------



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MBBS, MD PATHOLOGY **Pathologist**

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REPORT

URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL		
PHYSICAL EXAMINATION					
Colour	Pale Yellow		Pale Yellow		
Quantity	30 ml	ml	20 - 50		
Appearance	Clear		Clear		
Reaction (pH)	6.0		5.0 - 9.0		
Specific Gravity	1.010		1.000 - 1.030		
CHEMICAL EXAMINATION					
Proteins	Absent		Absent		
Sugar	Absent		Absent		
Ketone Bodies	Absent		Absent		
Bilirubin	Absent		Absent		
Nitrite	Absent		Absent		
Urobilinogen	Normal	mg/dl	Normal (0.1 - 1.0 mg/dl)		



LATHA SONAWANE

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Pathologist

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Ref By : /

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REPORT

URINE ANALYSIS

<u>Test</u>	<u>Result</u>	<u>Units</u>	BIOLOGICAL REFERENCE INTERVAL
Ocult Blood	Absent		Absent
MICROSCOPIC EXAMINATION			
Pus Cells	1 - 2 / hpf		2 - 3 / hpf
Red Blood Cells	Absent		Absent
Epithelial cells	1 - 2 / hpf		2 - 5 / hpf
Casts	Absent		Absent
Crystals	Absent		Absent
Other Findings	Absent		

METHOD:

Physical Examination : Visual Strip Method.

Chemical Examination: Bilirubin(Azo-coupling), Blood(Peroxidase), Glucose(Specific glucose-oxidase/peroxidase reaction), Ketone(Rothera's test), Leukocytes(Reflectance Photometer(Leucocyte esterase)), Nitrite(Diazotization), pH(Double Indicator), Protein(Protein Error of

Indicators), Specific Gravity(Refractometric method), Urobilinogen(Ehrlich).

Microscopy Examination : Automation/Manual Microscopy

----- End of Report -----



LATRA SUNAWANE

Lab Technician

DD DITTES II KHADOU

DR.RITESH KHARCHE

MBBS, MD PATHOLOGY

Pathologist

MMC Reg No.2006031680

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This is computer generated medical diagnostics report that has been validated by an Authorized Medical Practitioner/Doctor. The report does not need physical signature. Results relate only to the sample as received. Refer to conditions of reporting overleaf.

Patient Details

Date: 28-Sep-24

Time: 1:15:36 PM

Age: 35 y

Name: KARTHIGA ID: 2955

Sex: F

Height: 174 cms.

Weight: 86 Kg.

Clinical History:

NIL

Medications: NIL

Test Details

Protocol: Bruce

Pr.MHR: 185 bpm

THR: 157 (85 % of Pr.MHR) bpm

Total Exec. Time: 7 m 36 s

Max. HR: 158 (85% of Pr.MHR)bpm

Max. BP x HR: 25280 mmHg/min

Max. Mets: 10.20

Min. BP x HR: 680 mmHg/min

Max. BP: 160 / 100 mmHg Test Termination Criteria:

THR ACHIEVED

Protocol Details

I	Canan Manan	Ctono Timo	80.00	Cd	C		DD		
	Stage Name	Stage Time (min : sec)	Mets	Speed (mph)	Grade (%)	Heart Rate (bpm)	Max. BP (mm/Hg)	Max. ST Level (mm)	Max. ST Slope (mV/s)
ı	Supine	0:21	1.0	0	0	85	120 / 8	-0.85 aVR	1.06 II
ļ	Standing	0:3	1.0	0	0	86	120 / 8	-0.85 aVR	1.06 II
ı	Hyperventilation	0:4	1.0	0	0	86	120 / 8	-0.85 aVR	1.06 II
ļ	1	3:0	4.6	1.7	10	118	130 / 80	-0.85 aVR	1.771
į	2	3:0	7.0	2.5	12	141	140 / 90	-1.06 aVL	2.83 11
ļ	Peak Ex	1:36	10.2	3.4	14	158	150 / 100	-1.06 II	2.48 11
ł	Recovery(1)	1:0	1.8	1	0	121	160 / 100	-0.85	3.18 11
ļ	Recovery(2)	1:0	1.0	0	0	99	140 / 90	-0.64 aVR	2.83 11
ł	Recovery(3)	1:0	1.0	0	0	95	120 / 80	-0.21	1.42 11
ł	Recovery(4)	0:2	1.0	0	0	95	120 / 80	-0.21	1.06 11
_	The second secon								The second second second second

Interpretation

The patient exercised according to the Bruce protocol for 7 m 36 s achieving a work level of Max. METS: 10,20 Resting heart rate initially 85 bpm, rose to a max, heart rate of 158 (85% of Pr.MHR) bpm. Resting blood Pressure 120 / 8 mmHg, rose to a maximum blood pressure of 160 / 100 mmHg., No sigificant \$T- T changes, TMT negative for inducible ischemia for the workload achieved

> TANK EDIC MBES, DNZ, E. J. Reg. No. 2019/02/03/82

> > Doctor: ---

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Ref. Doctor: APOLLO

Summary Report edited by user)

SEA BIRD MEDICARE CENTRE POWAI ID: 2955 KARTHIGA (35 F) Date: 28-Sep-24 Exec Time | 0 m 0 s Stage Time | 0 m 21 s HR: 85 bpm Protocol: Bruce Stage: Supine (THR 157 bpm) B.P: 120 / 80 Speed: 0 mph Grade: 0 % ST Slope ST Level ST Slope (mV/s) ST Level (mm) (mV/s) (mm) V1 V2 0.6 0.0 V3 0.2 0.2 0.4 0.0 aVR V4 -0.B 0.4 0.4 aVL V5 0,6 0.7 aVF V6 0.4 0.4 0.6 V3 Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt ON Amp: 10 mm Iso = R - 60 ms J = R + 60 msPost J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAL ID 2955 KARTHIGA (35 F) Date: 28 Sep-24 Exec Time: 0 m 0 s Stage Time: 0 m 3 s HR: 86 bpm Protocol: Bruce Stage: Standing Speed: 0 mph Grade: 0 % (THR: 157 bpm) B.P: 120 / 80 ST Slope (mV / s) ST Level ST Slope (mV/s) ST Level (mm) (mm) V1 -0.4 0.0 V2 0.0 Ш V3 0.4 0.2 0.0 0.0 aVR V4 -0.8 0.4 aVL V5 0.2 0,6 0.4 aVF V6 0.4 0.4 V3 Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt: ON Amp: 10 mm Iso = R - 60 ms $J = R + 60 \, ms$ Post J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAI ID: 2955 KARTHIGA (35 F) Date: 28-Sep-24 Exec Time: 0 m 0 s Stage Time: 0 m 4 s HR: 86 bpm Protocol: Bruce Stage: Hyperventilation Speed: 0 mph Grade: 0 % (THR: 157 bpm) B.P: 120 / 80 ST Slope (mV/s) ST Level ST Slope ST Level (mm) (mm) (mV/s) 0.8 0.7 -0.4 V2 1.1 0.0 Ш V3 0.2 0.0 0.4 0.0 aVR V4 -0.8 AP 0.4 aVL V5 0.2 0.0 0.6 0.4 aVF 0.4 0.4 0.6 V3 Chart Speed: 25 mm/sec Filter: 35 Hz Amp: 10 mm Mains Filt: ON Iso = R - 60 ms J = R + 60 ms Post J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAI KARTHIGA (35 F) ID: 2955 Date: 28-Sep-24 Exec Time | 3 m 0 s Stage Time | 3 m 0 s HR: 118 bpm Protocol: Bruce Speed: 1.7 mph Stage: 1 Grade: 10 % (THR: 157 bpm) B.P: 130 / 80 ST Level ST Slope (mV/s) ST Level ST Slope (mm) (mV/s) (mm) V1 0.2 -0.4 0.2 H V2 0.0 0.7 8.0 0.7 Ш V3 0.0 0.4 0.0 0.0 aVR V4 -0.2 0.2 0.4 aVL V5 0.0 0.0 0.2 0.7 aVF V6 0.4 0.0 0.2 0.7 Mains Filt ON Chart Speed: 25 mm/sec Filter: 35 Hz Amp: 10 mm Iso = R - 60 ms $J = R + 60 \, ms$ Post J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAI ID: 2955 KARTHIGA (35 F) Date: 28-Sep-24 Exec Time: 6 m 0 s Stage Time: 3 m 0 s HR: 141 bpm Protocol: Bruce Stage: 2 Speed: 2.5 mph Grade: 12 % (THR: 157 bpm) B.P: 140 / 90 ST Slope (mV / s) ST Level ST Level ST Slope (mm) (mV/s) (mm) 1.1 0.0 0.0 -0.7 -0.2 0.6 0.4 V3 -0.2 -0.2 0.7 0.4 aVR V4 0.0 -1.8 -0.2 0.7 aVL V5 0.0 0.0 -0.2 0.7 aVF -0.2 0.0 V3 Chart Speed: 25 mm/sec Filter: 35 Hz Mains Fift: ON Amp: 10 mm Iso = R - 60 ms $J = R + 60 \, ms$ Post J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAI ID: 2955 KARTHIGA (35 F) Exec Time: 7 m 36 s Stage Time: 1 m 36 s HR: 158 bpm Date: 28-Sep-24 Stage: Peak Ex Speed: 3.4 mph Grade: 14 % Protocol: Bruce (THR 157 bpm) B.P: 150 / 100 ST Slope (mV/s) ST Level ST Slope (mV/s) ST Level (mm) (mm) V1 0.0 1.1 -1.1 Ħ V2 0.2 0.0 HI V3 -0.2 NA -0.6 0.7 0.7 aVR -14 0.7 -0.2 aVL V5 0.0 0.0 1.1 aVF -0.8 0.7 0.7 Filter: 35 Hz Chart Speed: 25 mm/sec Mains Filt: ON Amp: 10 mm Iso = R - 60 ms $J = R + 60 \, ms$ Post J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAI ID: 2955 KARTHIGA (35 F) Date: 28-Sep-24 Exec Time : 7 m 36 s Stage Time : 1 m 0 s HR: 121 bpm Stage: Recovery(1) Speed: 0 mph (THR: 157 bpm) B.P: 160 / 100 Protocol: Bruce Grade: 0 % ST Slope (mV/s) ST Level ST Slope (mV/s) ST Level (mm) (mm) 0.4 1.1 -1.1 V2 0.8 2.8 0.8 Ш V3 0.4 aVR V4 -0.6 AN 8.0 aVL V5 0.0 0.0 0.6 aVF V6 0.6 0.6 V3 Chart Speed: 25 mm/sec Mains Filt: ON Iso = R - 60 ms Post J = J + 60 msFilter: 35 Hz $J = R + 60 \, ms$ Amp: 10 mm Schiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAL Exec Time | 7 m 36 s Stage Time | 1 m 0 s HR: 99 bpm KARTHIGA (35 F) ID: 2955 Date: 28-Sep-24 Stage: Recovery(2) Speed: 0 mph Protocol: Bruce Grade: 0 % (THR 157 bpm) B.P: 140 / 90 ST Slope (mV/s) ST Level ST Level ST Slope (mV/s) (mm) (mm) V1 0.7 0.2 0.2 V2 0.0 0.2 0.4 V3 III 0.4 0.0 1.1 aVR V4 -0,2/14 0.4 1.1 aVL V5 0.0 0.0 0.2 aVF V6 0.2 0.0 0.7 V3 Chart Speed: 25 mm/sec Mains Filt: ON Amp: 10 mm Filter: 35 Hz Iso = R - 60 ms $J = R + 60 \, ms$ Post J = J + 60 msSchiller Spandan V 4.7 VINAYAK

SEA BIRD MEDICARE CENTRE POWAI KARTHIGA (35 F) Date: 28-Sep-24 Exec Time : 7 m 36 s Stage Time : 1 m 0 s HR: 95 bpm ID 2955 Stage: Recovery(3) Protocol: Bruce Speed: 0 mph Grade: 0 % (THR: 157 bpm) B.P: 120 / 80 ST Level ST Slope (mV/s) ST Level ST Slope (mm) (mm) (mV/s) V1 0.7 -0.7 0.0 0.2 V2 0.0 0.6 0.4 III V3 0.0 -0.2 0.4 aVR V4 47/20 0.0 0.7 V5 aVL 0.0 0.0 0.7 0.0 aVF V6 0.0 0.7 0.2 V3 Chart Speed: 25 mm/sec Filter: 35 Hz Mains Filt: ON Amp: 10 mm J = R + 60 ms Post J = J + 60 msIso = R - 60 ms Schiller Spandan V 4.7 VINAYAK

Annexure-2

Self-Health Declaration

(Please √ Mark Where Applicable)

PASTE YOUR RECENT PASSPORT SIZE PHOTOGRAPH

1 PERSONAL DETAILS:		
Name: P. Karthiga.	Middle Name	Surname
Address: Flat No. 902,	9th floor Subh-	Heritage, Padmavati 1
Mara Opp. 117 mark		
City: Mumberi	_ Pin: ,	
Birth Place: TN. Birth Da	te: 19 07 1989 Religi	on: Minclu
(dd/mm	/yyyy) Marital Status: Married /	Unmarried Gender: M / F
Post applied for:	Marital Status: Married /	Offiliarried Gender, M7 F
2 PREVIOUS EMPLOYMENT: Yes / N	lo If yes specify	
Name	Nature of work	Duration
1)		
iii)		
3 NAME OF FAMILY DOCTOR:		
Address:		
Contact Details:		
4 PERSONAL HABITS: i) Smoking		
ii) Tobacco chewing		
iii) Alcohol	*	
iv) Any other		
5 MEDICAL HISTORY:		
i) ANY DISABILITY: Yes / No If y	es specify with disability %	
i) Alti bishbieri i resi iio ii j	co specif, illustration,	
MA		
ii) PERSONAL HISTORY:		
		Yes No
Are you in good health and cap		
Have you ever suffered from jo		412
Have you ever been discharge	or rejected on medical groun	C-Section

		and the state of t
lave y	you ever suffered from any of the N	e following (Answer Yes or No. if yes, give details) Y N
a -	Hypertension	Hepatitis-B
	Diabetes	Cancer
	Heart disease	Stroke
	Kidney diseases	Bronchitis
	Tuberculosis	Any allergy
	Chronic lung disease (e.g. Pleurisy Pneumonia etc	Any chronic ear or hearing problem c.) (e.g. sinusitis, rhinitis otitis etc.)
	Epilepsy, Fits, Fainting or Dizziness	Mental disorder of any kind
	Any major operation or inju	ry - Any other illness
etails	s of the above if "Yes")	
	male candidates only) u pregnant at present?	Date of L.M.P. 14 9 24 .
muniz	zation: Yes No	
Teta	anus Toxoid patitis B	ed (3) doses)

6 FAMILY HISTORY:

Has anyone of your parents suffered from any of the following: Yes / No

(If yes, Please √ Mark Where Applicable)

	Father	Mother
Hypertension		
Heart Disease		
Cancer		
Diabetes	~	
Tuberculosis		
Epilepsy		
Any other Disease		

	IF LIVING		IF DEAD	
	AGE	HEALTH (Good, Bad, Fair)	AGE AT DEATH CAUSE OF DEATH	
Father	64	Good.		
Mother	58	and.		
Spouse	39	Good.		
Children-1	7	Good)	
Children -2	4	Grad.		

7 I declare that the above statements are true and complete to the best of my knowledge and belief. In case this information is found to be false by the company, then the company reserves the right to terminate my services without giving any notice. I agree that the results of this medical examination in general terms may be revealed to the company if required. I also fully understand that in case I am declared medically unfit due to any reason, I shall not be entitled for the employment in the company. However, the decision taken by recruitment committee about my medical fitness will be final and binding to me.

Date: 28 9 24 .

(Signature of Candidate)

MER- MEDICAL EXAMINATION REPORT

NAME PKARTHIGA	28-09 2024
A STATE OF THE STA	
AGE 35	Gender F
HEIGHT(cm)	174 WEIGHT (kg) 86
B.P.	120/80 mm/Hg
ECG /TMT	Whe
X Ray	Normal
Vision Checkup	Color Vision: N Far Vision Ratio: 6/6 N Near Vision Ratio: N/5 N
Present Ailments	_
Details of Past ailments (If Any)	
Comments / Advice : She /He is Physically Fit	

Signature with Stamp of Medical Examiner

Dr. Mrinalini Singh Consultant Physician MBBS, DNB, MHCP (UK), EDIC Reg. No. 2019/02/0392

CERTIFICATE OF MEDICAL FITNESS

	Saider Ton THE	
	Medically Fit	
•	Fit with restrictions/recommendations	1
	Though following restrictions have been revealed, in my opinion, these are not impediments to the job.	
	1. Parediabetes	
	2	
	3	
	However the employee should follow the advice/medication that has been communicated to him/her.	
	Review after	
	Currently Unfit. Review after	+
	recommended	l
٠	Unfit	H

This certificate is not meant for medico-legal purposes





இந்திய அரசாங்கம் Unique Identification Authority of India Government of India

MARIN SCHOOL L. MICH. MICH. MICH. MICH. MICH. MICH.

பதிவு அடையாளம் / Enrollment No.: 2043/66313/01096

To апрафал Karthiga W/O: Nagaraj PLOT no 35 19th cross street S padmavathy nagar extn Madambakkam Madambakkam 80 Tamil Nadu 600126 9790804174 Tambaram Kancheepuram

MA007663980FT



உங்கள் ஆதார் எண் / Your Aadhaar No. :

4907 0464 1317

ஆதார் - சாதாரண மனிதனின் அதிகாரம்



இந்திய அரசாங்கம்

Government of India



anhadan Karthiga பிறந்த நாள் / DOB: 19/07/1989 பென்பால் / Female



4907 0464 1317



Report ID

Ref By

: PKM289141322

Patient Name : Ms. P KARTHIGA

: DR.PARAG ARVIND PRADHAN

: 28-Sep-2024

Report Date

: 28-Sep-2024

Company Name : M/S. APOLLO HEALTH AND LIFESTYLE

: 35 Year / Female Age/Sex

CHEST X RAY REPORT

X-Ray No: 5682

Investigation: Chest PA View.

Bony thoracic cage is normal.

Cardiac silhouette appears normal in size and configuration.

Both lungs shows equal translucency and normal vasculature.

Both Hemidiaphragm visualised normal.

No evidence of any active parenchymal lesion seen.

Impression:

Normal Chest X-Ray.





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