





PID NO. : CBA0445

CDMD4#3

: ABHISHEK RANJAN SINHA

Sex / Age : Male / 35 Years

sex / Mge . Middle / SS Teals

Ref By

Name

: APOLLO HEALTH AND LIFESTYLE

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

10-Feb-2024 /11:47 am

Coll Date

10-Feb-2024 /11:52 am

Report Date

11-Feb-2024 / 3:42 pm

REPORT

BLOOD GLUCOSE

			THE REPORT OF THE PROPERTY OF
Total	December	I I as Show	DIOLOGICAL DEFENDENCE INTERVAL
Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
1 0 0 0	1.3.00.00.00.13		THE RESERVE OF THE PARTY OF THE

ma/dl

mg/dl

Blood Glucose (Fasting), plasma 132.34

(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)

Present (+ +)

Absent

70.00 - 100.00 mg/dl

Urine Ketones (Fasting)

Absent

155.82

Absent

70.00 - 140.00

Blood Glucose (PP) plasma

(Plasma, Method-Hexokinase)

Interpretation:

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

Diabetic : >200 mg/dl

(ON MORE THAN ONE OCCASION)

Reference: American diabetes association guidelines 2022.

Urine Glucose (PP)

Present (++)

Absent

Urine Ketones (PP)

Absent

Absent

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



Pritam Dhanawade Lab Technician

anawade

RITESH KHARCHE

Pathologist MMC Reg No.2006031680

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HO- Sea Bird Medicare Centre (ISO 900):2015): A-101-102, Heritage Plaza, Teli Cross Lane, Andheri East (Nr. Station), Mumbai- 69. Teli 022- 46032704

Powei: 022-25701053 / 25704157

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A. SEA BIRD MEDICARE CENTRE

- B. Enquiry and Home Visit Booking 022 25701053 / 9324924370 or admin@seabirdhf.com
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REPORT

BLOOD GLUCOSE

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

End of Report -----



Pritam Dhanawade Lab Technician

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AD PATHOLOGY Pathologist MMC Reg No.2006031680

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REPORT

Blood Group

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

BLOOD GROUP

ABO Group

"B"

RH(D)

Positive

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

Sample: Whole Blood (EDTA)

Power 022-25701053 / 25704157

End of Report -

Pritam Dhanawade Lab Technician

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DR.RITESH KHARCHE 5. MD PATHOLOGY Pathologist teg No.2006031680

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REPORT

Complete Blood Count

	Comp	iete pioon con	IL.	
Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL	
Hemoglobin	15.5	gm/dl	13.0 -17.0	
RED BLOOD CELLS				
R.B.C. Count	5.29	million / cumm	4.5- 5.5	
PCV	47.3	%	40-50	
MCV	89.3	fL	83 - 101	
MCH	29.2	pg	27 - 32	
MCHC	32.7	gm / dl	31.5 - 34.5	
RDW (CV)	13.7	%	11.6- 14.0	
Total W.B.C. Count	7860	/cu.mm.	4000 - 10000	
DIFFERENTIAL COUNT				
Neutrophils	53	%	40 - 80	
Lymphocytes	40	%	20 - 40	
Eosinophils	02	%	1 - 6	



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Pritam Dhanawade Lab Technician



DR.RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

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REPORT

Complete Blood Count

	Comp	iere pioon or	ount	
Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL	
Monocytes	05	%	2 - 10	
Basophils	00	%	0 - 1	
Platelet Count	223000	/cumm	150000 - 410000	
MORPHOLOGY				
RBC Morphology	Predominanti	ly Normocytic and	Normochromic.	
WBC Morphology	Normal Morp	hology.		
Platelets on Smear	Adequate on	smear		

(EDTA Whole Blood - Tests done Automated Three part cell counter (RBC, WBC, Platelets count by impedance, Haemoglobin by colorimetric Cyanmeth free method. Rest are calculated parameters. Microscopy and DLC is done manually by the Pathologist.)

- End of Report --



Pritam Dhanawade Lab Technician

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DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist MMC Reg No.2006031680

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REPORT

Erythrocyte Sedimentation Rate (ESR)

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

ESR

17

mm at 1hr

0 - 15

Method: Westergren. Sample: Whole Blood (EDTA)

End of Report —

Pritam Dhanawade Lab Technician

rangwade

DR.RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist MMC Reg No.2006031680

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REPORT

Glycosylated Haemoglobin (HbA1c)

Test Result **BIOLOGICAL REFERENCE INTERVAL** Units HbA1c 6.11 < 5.7 Non-diabetic : <= 5.7 %

Pre-Diabetic : 5.7 - 6.4 % >=6.5 Diabetic:

(EDTA Whole Blood, Turbidimetric)

Mean Blood Glucose (MBG)

140.22

Interpretation & Remark:

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

mg/di

Trends in HbA1c are a better indicator of diabetic control than a solitary test.

 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 suggested.

To estimate the eAG from the HbA1C value, the following equation is used: eAg(mg/dl)=28.7*A1c-46.7.

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.

In known diabetic patients, following values can be considered as a guide for monitoring the glycemic control. Excellent Control - 5 to 7 % Fair to Good Control - 7 to 8 % Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 %

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

-- End of Report -----

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Pritam Dhanawade Lab Technician



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REPORT

LIPID PROFILE

Result	Units	BIOLOGICAL REFERENCE INTERVAL
130.2	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
152.76	mg/dl	NORMAL: <150 Borderline High: 150 - 199 High: 200 - 499 Very High: >500
46.24 e-Direct	mg/dl	Desirable - Above : 60 Borderline Risk : 40 - 59 Undesirable - Below : 40
53.41	mg/dl	Desirable - Below : 130 Borderline Risk : 130 - 159 Undesirable - Above : 160
30.55	mg/dl	5 - 51
2.82		Acceptable for Male: < 5.00 Acceptable for Female: <4.50
	130.2 152.76 46.24 e-Direct	130.2 mg/dl 152.76 mg/dl 46.24 mg/dl 53.41 mg/dl 30.55 mg/dl



Pritam Dhanawade Lab Technician



anawade

DR.RITESH KHARCHE
MBBS, MD PATHOLOGY
Pathologist
MMC Reg No 2006031680

Kochi 0484- 2322022 / 4032022

Page 8 of 15

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HQ- See Bird Medicare Centre (ISO 9001:2015): A-101-102, Heritage Plaza, Teli Cross Lene, Andheri East (Nr. Station), Mumbai- 69, Tel: 022- 46032704

Pewei: 022-25701053 / 25704157

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: CBA0445 PID NO.

Name

: ABHISHEK RANJAN SINHA

Sex / Age : Male / 35 Years

Ref By

: APOLLO HEALTH AND LIFESTYLE

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

10-Feb-2024 /11:47 am

Coll Date

10-Feb-2024 /11:52 am

Report Date

11-Feb-2024 / 3:42 pm

REPORT

LIPID PROFILE

Test

Calculated

LDLC/HDLC Ratio

Result

1.16

Units

BIOLOGICAL REFERENCE INTERVAL

Acceptable for Males: < 3.60 Acceptable for Females: < 3.20

NOTE:

1) Biological Reference Interval is as per National Cholestrol Education Program (NCEP) guidelines.

2) Tests done on Fully Automated Mispa CXL PRO PLUS Biochemistry Analysier.

- End of Report -----



Pritam Dhanawade Lab Technician

anawade



DR.RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

MMC Reg No 2006031680

Kochi: 0484- 2322022 / 4032022

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PID NO. : CBA0445

Name

: ABHISHEK RANJAN SINHA

Sex / Age : Male / 35 Years

Ref By

: APOLLO HEALTH AND LIFESTYLE

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REPORT

LIVER FUNCTION TEST

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
S.G.O.T. (Serum ,Method-IFCC / UV without P5P)	32.36	U/L	0 - 40
Sr Alkaline Phosphatase (Serum, Knetic Method by IFCC)	97.44	U/L	40 - 129
S.G.P.T. (Serum,Method-IFCC / UV without P5P)	85.38	U/L	0 - 41
GGT (Serum ,Method- IFCC Method)	47.58	U/L	8 - 61
Bilirubin (Total) (Serum ,Method-Diazo- End point)	0.48	mg/dl	0.0 - 1.20
Bifirubin (Direct) (Serum,Method-Diazo-End point)	0.12	mg/dl	0.0 - 0.30
Bilirubin (Indirect) Calculated	0.36	mg/dl	0.0 - 0.90
Total Proteins (serum,Method-Bluret)	6.96	g/dl	6.6 - 8.7
Albumin (Serum,Method-Bromocresol Green)	4.3	g/dl	3.5 - 5.2
Globulin Calculated	2.66	g/dl	1.90 - 3.70
A/G ratio Calculated	1.62		

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



Pritam Dhanawade Lab Technician

RITESH KHARCHE MD PATHOLOGY Pathologist Reg No.2008031680

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REPORT

LIVER FUNCTION TEST

Test

Result

Units

BIOLOGICAL REFERENCE INTERVAL

- End of Report -



Pritam Dhanawade Lab Technician

on awarde

DR.RITESH KHARCHE BBS, MD PATHOLOGY Pathologist MC Reg No.2006031680

Kochi 0484- 2322022 / 4032022

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REPORT

RENAL PROFILE

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
Blood Urea Serum, Method-Urease	42.2	mg/dl	16.6- 48.5 mg/di
Blood Urea Nitrogen Serum, Method-Urease	19.71	mg/dl	06 - 20 mg/di
Creatinine Serum, Method-Kinetic Jaffes	0.95	mg/dL	0.7 - 1.2 mg/dl
Unic Acid Serum, Method: Unicase-POD	5.39	mg/dl	3.4 - 7.0

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

-- End of Report ----



Pritam Dhanawade Lab Technician

ongwade

DR.RITESH KHARCHE MBBS, MD PATHOLOGY

Pathologist

C Reg No.2005031680

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Name

: ABHISHEK RANJAN SINHA

Sex / Age : Male / 35 Years

Ref By : APOLLO HEALTH AND LIFESTYLE

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REPORT

THYROID FUNCTION TEST

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
TSH	5.39	µIU/mI	0.25-5 µIU/mI
Т3	1.8	nmol/l	0.92-2.33 nmol/l
T4	101.66	nmol/l	60-120 nmol/l

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

INTERPRETATION

Powei 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 (hyperthyroidsim) 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

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

T3: Trilodothyronine 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 hypothyroidism.

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 inadequate, and

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

- End of Report -

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Pritam Dhanawade

Lab Technician

DR RITESH KHARCHE BS, MD PATHOLOGY Pathologist Reg No.2006031680

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REPORT

URINE ANALYSIS

Test	Result	Units	BIOLOGICAL REFERENCE INTERVAL
PHYSICAL EXAMINATION	ON		
Colour	Pale Yellow		Pale Yellow
Quantity	35 ml	ml	20 - 50
Appearance	Slightly Hazy		Clear
Reaction (pH)	5.5		5.0 - 9.0
Specific Gravity	1.020		1.000 - 1.030
CHEMICAL EXAMINATE	ON		
Proteins	Absent		Absent
Sugar	Present (+ +)		Absent
Ketone Bodies	Absent		Absent
Bile Salts	Absent		Absent
Bile Pigment	Absent		Absent
Urobilinogen	Normal	mg/dl	Normal (0.1 - 1.0 mg/dl)

Pritam Dhanawade

Lab Technician

DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

MMC Reg No.2006031680

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REPORT

URINE ANALYSIS

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

METHOD:

Physical Examination: Visual Strip Method.

Chemical Examination: Bilinubin(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 -----

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Pritam Dhanawade Lab Technician

DR. RITESH KHARCHE MBBS, MD PATHOLOGY Pathologist

MMC Reg No.2006031680

Kochii 0484- 2322022 / 4032022

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Name: Mr. ABHISHEK SINHA Age: 35Y Sex: Male

Date: 10/02/2024 Ref Dr : SELF

USG ABDOMEN AND PELVIS

LIVER: Liver appears normal in size 14.0cm and shows diffuse increased echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

GALL BLADDER: Gall bladder is distended and appears normal. Wall thickness is within normal limits. There is no evidence of any calculus. Portal vein is normal. CBD is normal.

PANCREAS: Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

KIDNEYS: Both kidneys are normal in shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

Right kidney measures 10.5 x 4.3cm. Left kidney measures 10.4 x 4.0cm.

SPLEEN: Spleen is normal in size, shape and echotexture. No focal lesion is seen.

URINARY BLADDER: Urinary bladder is distended and normal. Wall thickness is within normal limits.

PROSTATE: Prostate is normal in size measuring 3.1 x 2.7 x 3.2cm (24gm) and echotexture. No evidence of any focal lesion.

No free fluid or significant lymphadenopathy is seen.

IMPRESSION: Fatty liver grade I. Advice: Clinical co-relation and further evaluation.

DR. PRIYANKA NERLIKAR

CONSULTANT RADIOLOGIST

Thanks For Reference: Note the above report represents interpretation of various radiographic shadows, and has its own limitations. This report has to be co-related clinico-pathologically by the referring physician and it does not reposit

Proudly... Caring For You



: ARSM102122236

Report Date

: 10-Feb-2024 : 10-Feb-2024

Patient Name : Mr. ABHISHEK RANJAN SINHA

Company Name : M/S. APOLLO HEALTH AND LIFESTYLE

Ref By

DR.PARAG ARVIND PRADHAN

: 35 Year / Male

CHEST X RAY REPORT

X-Ray No: 914

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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SEA BIRD MEDICARE CENTRE POWAL

Patient Details Date: 10-Feb-24

Name: ABHISHEK SINHA ID: 2082

Sex: M Age: 35 y

Clinical History: DM & HTN Time: 11:02:29 AM

Height: 167 cms.

Weight: 84 Kg.

ON TREATMENT Medications:

Test Details

Protocol: Bruce

Pr.MHR: 185 bpm

Max. BP x HR:

THR: 157 (85 % of Pr MHR) bpm

Total Exec. Time: 7 m 41 s Max. HR: 158 (85% of Pr.MHR)bpm 23700 mmHg/min

Max. Mets: 10.20

Min. BP x HR: 7680 mmHg/min

Max. BP: 150 / 90 mmHg Test Termination Criteria:

THR ACHIEVED

Protocol Details

-										
	Stage Name	Stage Time	Mets	Speed	Grade	Heart	Max. BP	Max. ST	Max. ST	
		(min : sec)		(mph)	(%)	Rate	(mm/Hg)	Level	Slope	
						(bpm)		(mm)	(m·V/s)	
	Supine	0:14	1.0	0	0	96	110 / 80	-1.27 aVR	1.42 II	
	Standing	0:2	1.0	0	0	96	110 / 80	-1.27 aVR	1.42 11	
	Hyperventilation	0:2	1.0	0	0	96	110 / 80	-1.27 aVR	1.42 II	
	1	3:0	4.6	1,7	10	125	120 / 80	-2.34 aVR	3,18 (/	
	2	3:0	7.0	2,5	12	145	130 / 90	-2.34 aVR	3.89 II	
	Peak Ex	1:41	10.2	3,4	14	158	150 / 90	-2.12 aVR	4.95 II	
	Recovery(1)	1:0	1.8	1	0	142	150 / 90	-2.12 aVR	4.25 ()	
	Recovery(2)	1:0	1,0	0	0	126	140 / 90	-1.70 aVR	3.54 0	
	Recovery(3)	1 0	1.0	0	0	122	130 / 80	-1.06 aVR	2.83 II	Ę
	Recovery(4)	0:21	1.0	0	0	127	130 / 80	-1.06 aVR	2 12 11	

Interpretation

The patient exercised according to the Bruce protocol for 7 m 41 s achieving a work level of Max. METS: 10:20. Resting heart rate initially 96 bpm, rose to a max, heart rate of 158 (85% of Pr.MHR) bpm. Resting blood Pressure 110 / 80 mmHg, rose to a maximum blood pressure of 150 / 90 mmHg. No sigificant ST-T changes, TMT negative for inducible ischemia for the workload achieved

Dr. PARAG A. PRADHAN

MBBS

Approved by DG Shipping (GOI)

Reg. No. (MMC) 61264

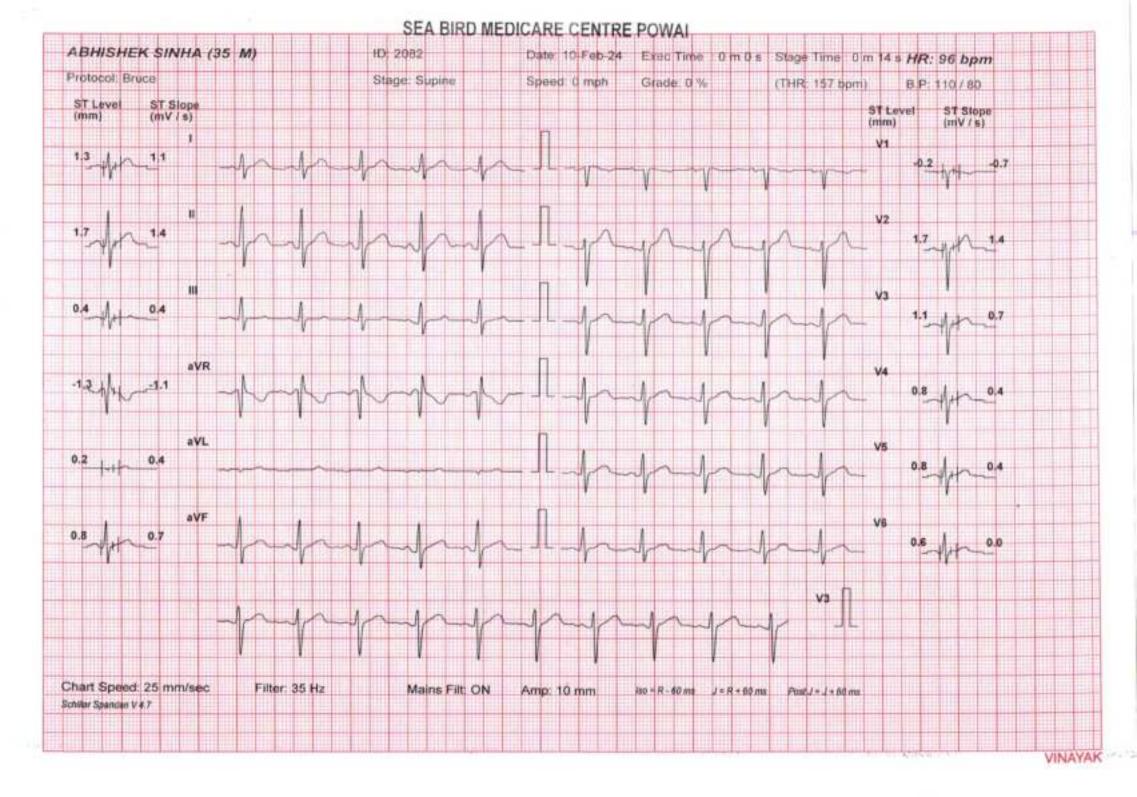
102-103-104, Gateway Plaza, Central

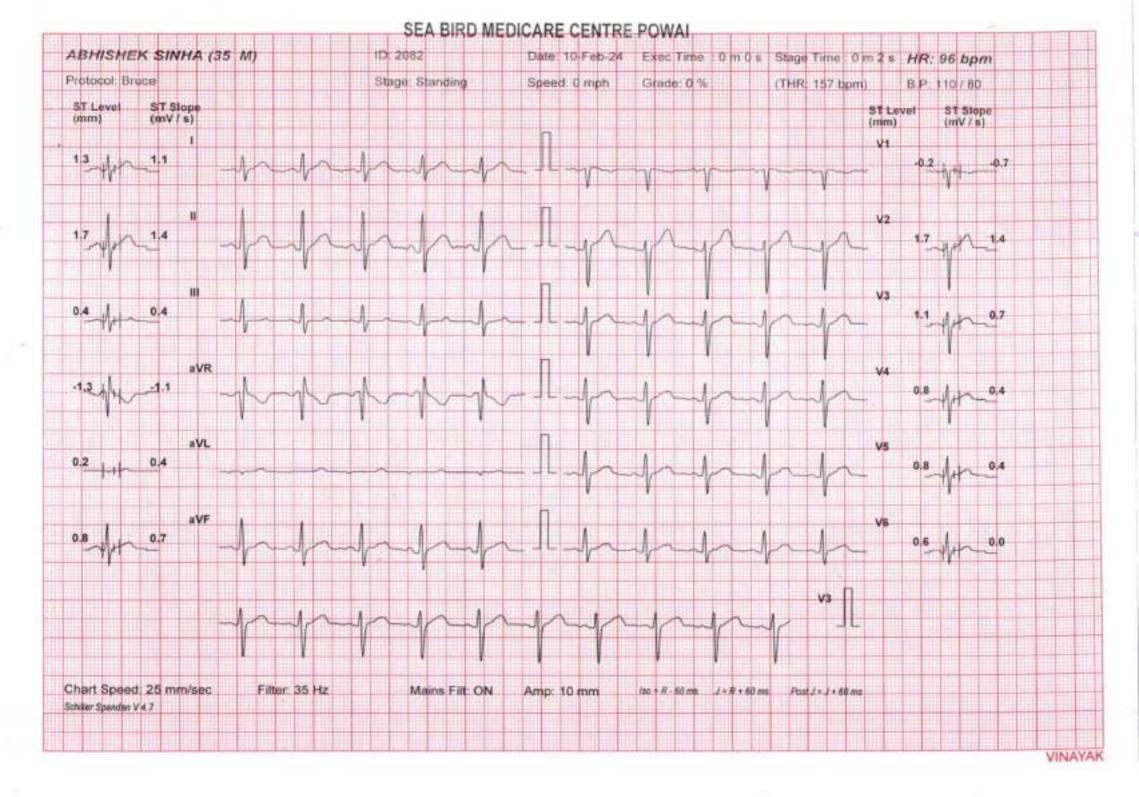
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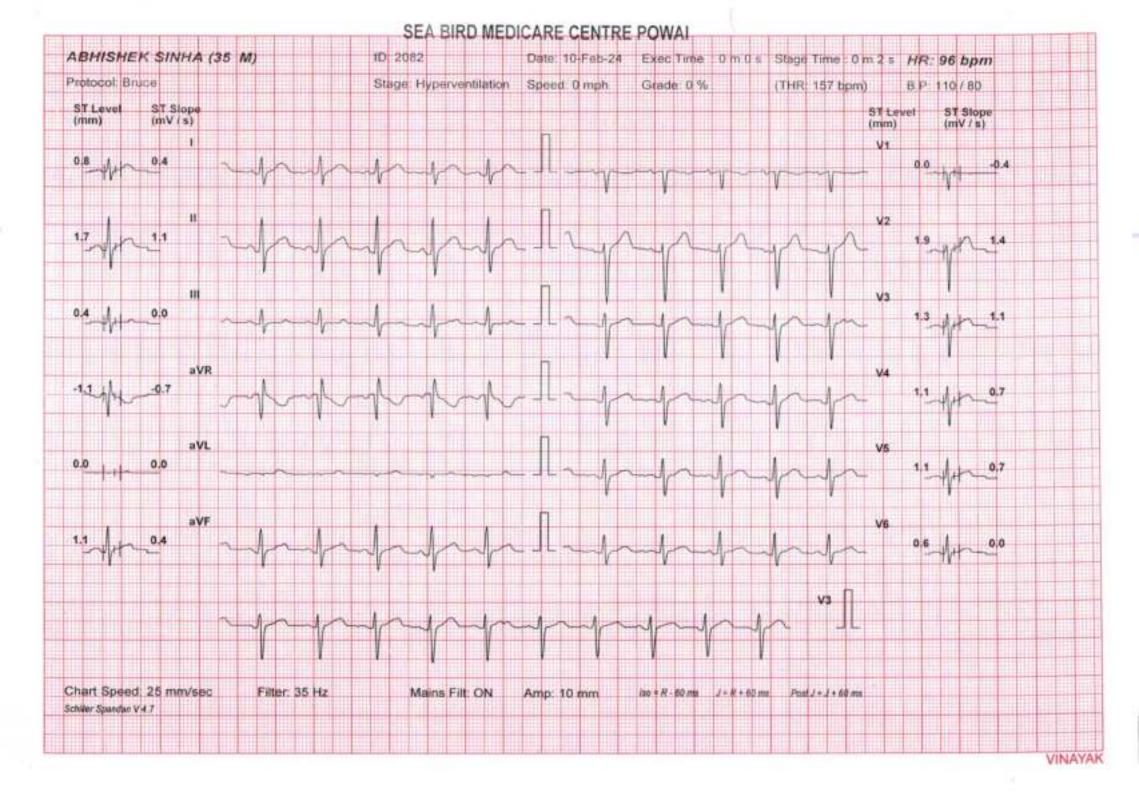
SEA BIRD MEDICARE CENTREScriber Healthcare India Pvt. Ltd. V 4.7

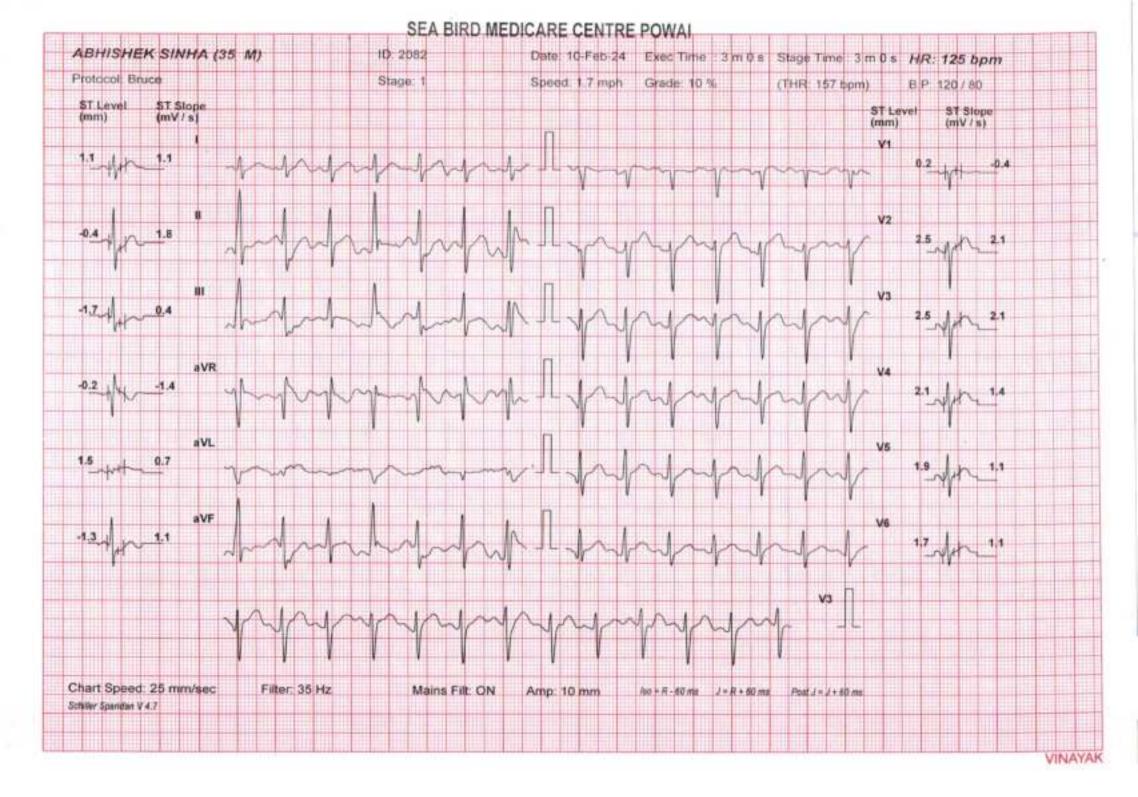
Ref Doctor: APOLLO

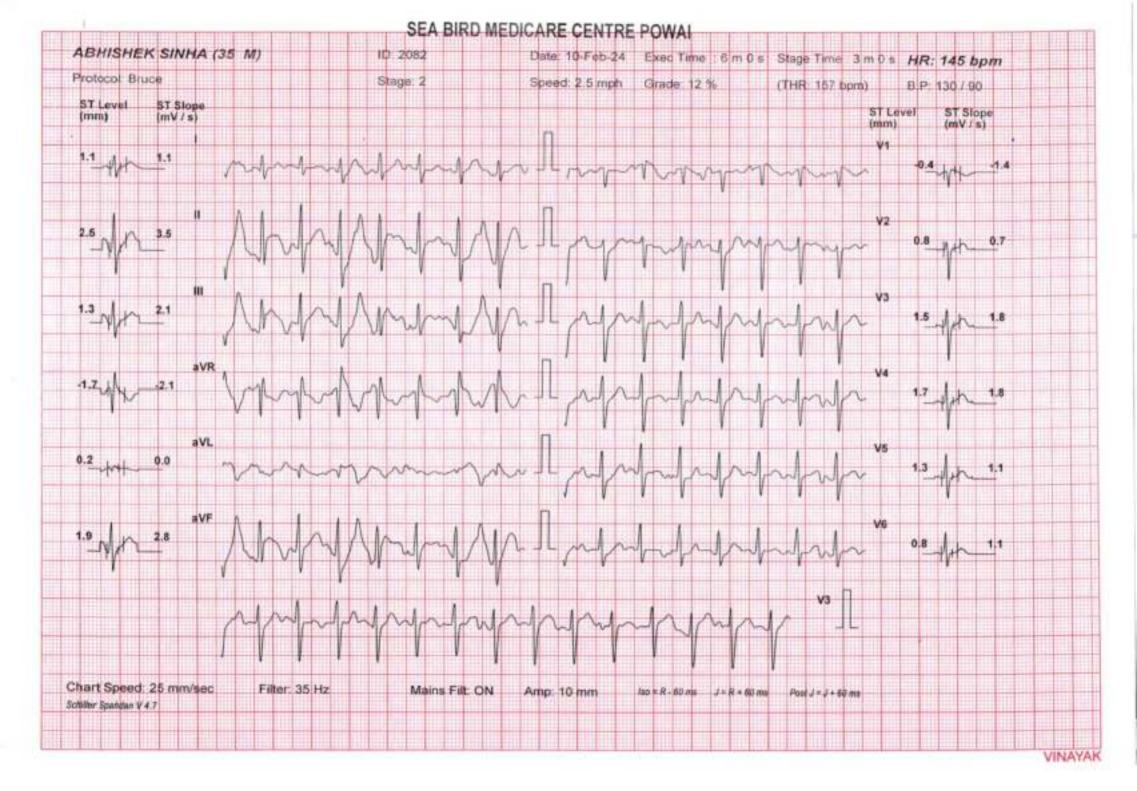
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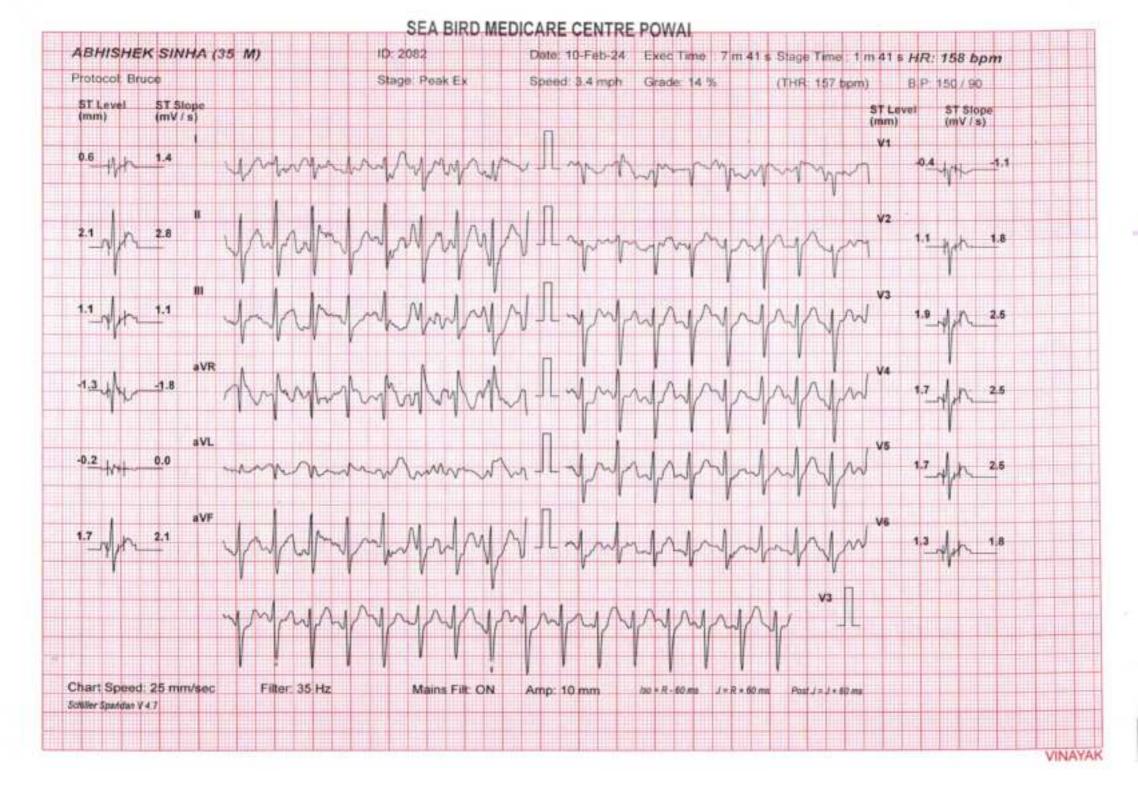


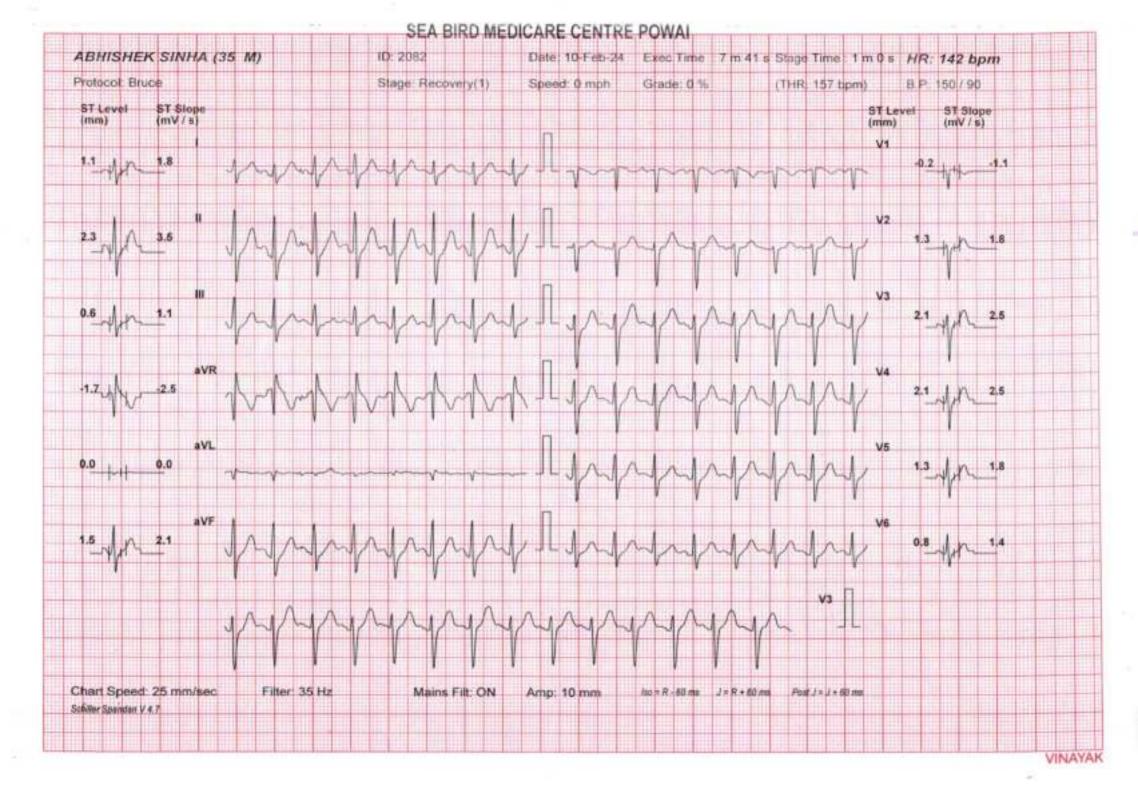


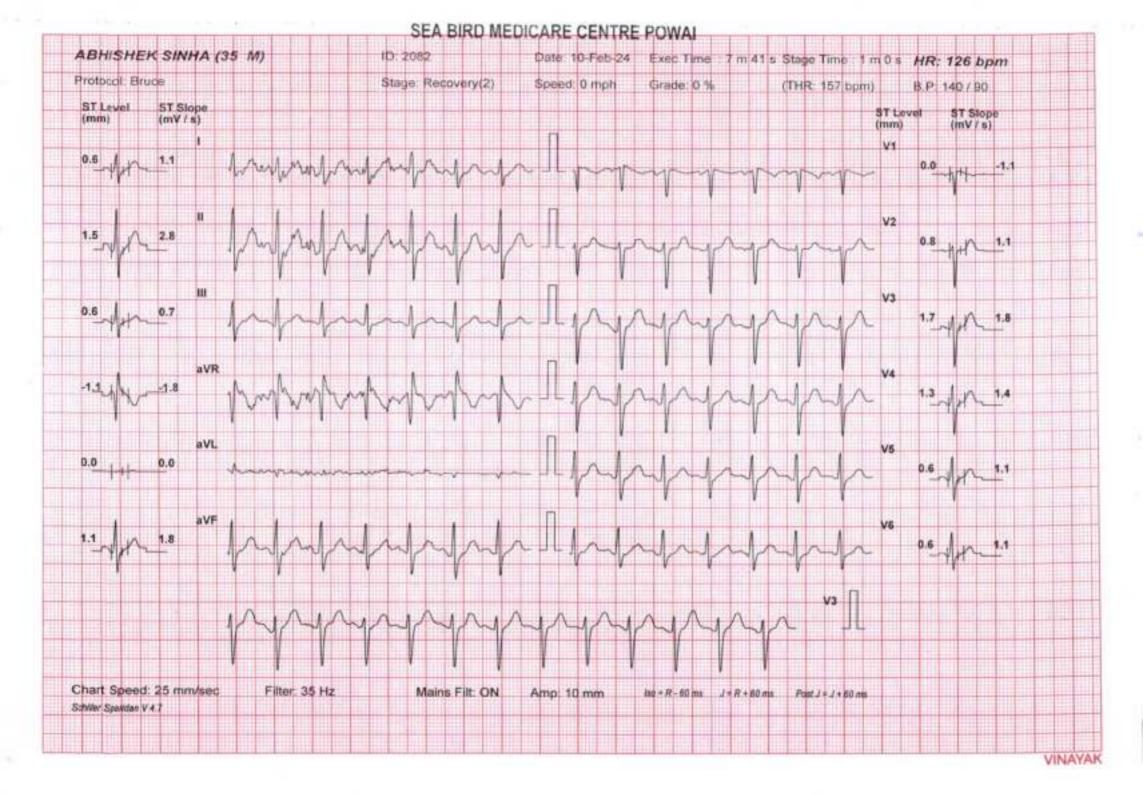


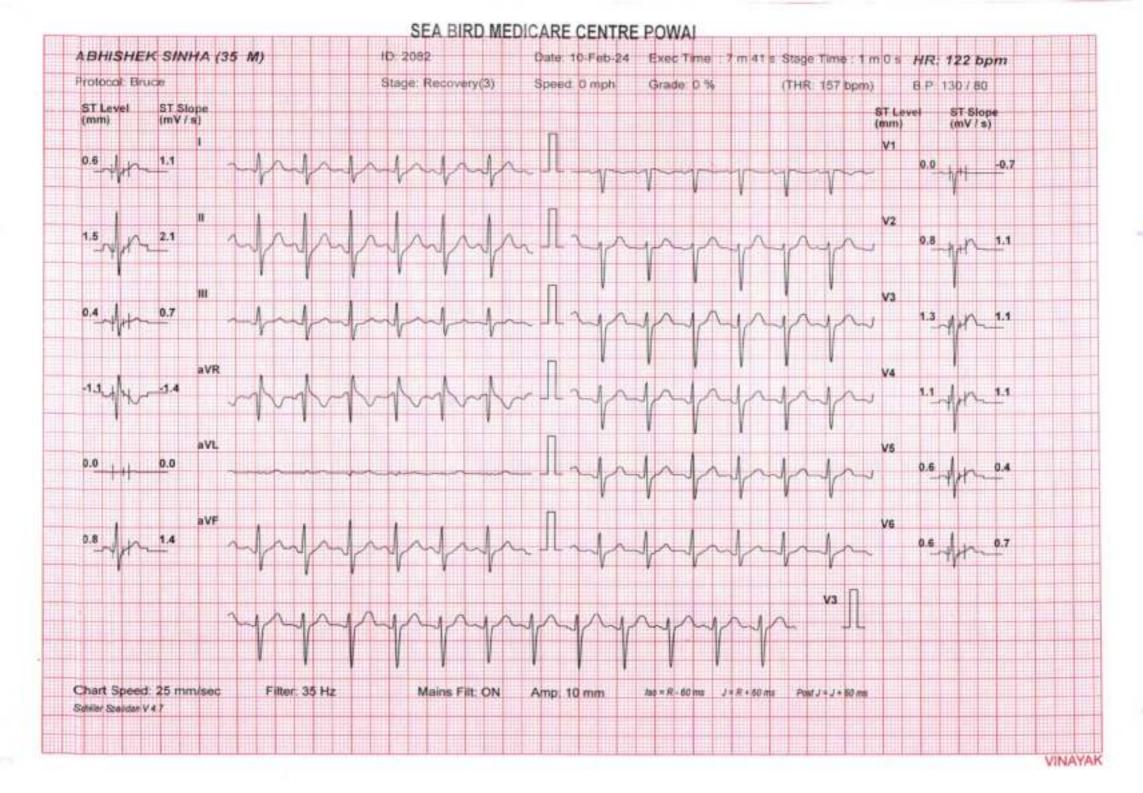












Annexure-2

Self-Health Declaration

(Please √ Mark Where Applicable)

PASTE YOUR RECENT PASSPORT SIZE PHOTOGRAPH

1 PERSONAL DETAILS:

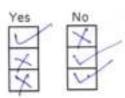
First Name	Middle Name	Surname
Name: ABHISHEK	RAMJAN	AHMIS
Address: CIA - 804	, Parina CHS, Ka	reforming (East)
Mumbai	- 400042	0 0 0
city: Mumbai	Pin: 400042_	
Birth Place: Riky Birth !	Date: 25 09 1988 Religio	n: Hindu
	nm/yyyy)	and the same of
Post applied for: N/A	Marital Status: Married / L	Inmerried Gender: M / P
2 PREVIOUS EMPLOYMENT: Yes	No If yes specify	
Name	Nature of work	Duration
0		
ii)	- 11	
110		
3 NAME OF FAMILY DOCTOR:		
	- Satish	
V3.90		
Contact Details:		
4 PERSONAL HABITS:		
i) Smoking		
ii) Tobacco chewing 🔀		
iii) Alcohol		
Iv) Any other		
5 MEDICAL HISTORY:		
i) ANY DISABILITY: Yes / No I	f yes specify with disability %	
NO	A 18	

ii) PERSONAL HISTORY:

Are you in good health and capable of full work

Have you ever suffered from job related disease or injury?

Have you ever been discharged or rejected on medical grounds?



	- NA		
-	- / / / /		
III) Have you ever	suffered from any of the fo	llowing (A	Answer Yes or No . if yes, give details)
Hy	pertension	-	Hepatitis-B
V X Di	abetes	-	Cancer
He He	art disease	-	Stroke
Kid	iney diseases		Bronchitis
Tu	berculosis		Any allergy
	ronic lung disease J. Pleurisy Pneumonia etc.)	-	Any chronic ear or hearing problem (e.g. sinusitis, rhinitis otitis etc.)
	ilepsy. Fits. Fainting or	-	Mental disorder of any kind
	y major operation or injury	1	Any other illness
Details of the a	bove if "Yes")	Dia	betic -
		V4	
(For female can	didates only)	1	V/F
Are you pregnar	it at present? Y N	Date o	f L.M.P
	Yes No		
v) Immunization:			
iv) Immunization : Tetanus Toxi	pid Did		
iv) Immunization:	pid Did		

. .

6 FAMILY HISTORY:

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

(If yes, Please V 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	70	Good		
Mother	_	-	48	LOW BP
Spouse	29	Good		
Children-1	31/2 450	Good		
Children -2			7.0-	

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: 10/2/2024

(Signature of Candidate)



Only for health cabiod check up at Cartre

