



TEST REPORT

Reg.No : VIJ0125881	Reg.Date : 21-Oct-2024 /09:56
Name : MR.MADHU PRABHAKAR	Collection : 21-Oct-2024 /09:53
Age\Sex : 35 Years\Male	Received : 21-Oct-2024 /10:11
Referred By : APOLLO CLINIC	Report : 21-Oct-2024 /10:50
Referral Dr : APOLLO CLINIC	Barcode : 002178520000

**Clinical Biochemistry
 BILIRUBIN (TOTAL & DIRECT)**

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
TOTAL BILIRUBIN Method: DIAZO METHOD	0.40	mg/dL	0.3-1.2
DIRECT BILIRUBIN Method: DIAZO METHOD	0.10	mg /dl	0-0.2
INDIRECT BILIRUBIN Method: CALCULATED	0.30	mg /dl	0.2-0.8

Sample Type : SERUM

Please Correlate With Clinical Findings If Necessary Discuss
 * This Is an Electronically Authenticated Report *



G. Pratyusha

Dr.G PRATYUSHA
 MD PATH
 Consultant Pathologist

**** END OF REPORT ****



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Clinical Biochemistry
CREATININE SERUM

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
SERUM CREATININE	1.10	mg/dL	0.70-1.30

Method:Jaffes Kinetic

Sample Type : SERUM

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Clinical Biochemistry
FASTING BLOOD GLUCOSE (FBS)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
FASTING PLASMA GLUCOSE-	109	mg/dL	74-99

Method:HEXOKINASE

Sample Type : FLOURIDE PLASMA (F)

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Referred By : APOLLO CLINIC	Report : 21-Oct-2024 /12:51
Referral Dr : APOLLO CLINIC	Barcode : 002178520001

Clinical Biochemistry
POST LUNCH BLOOD GLUCOSE (PLBS)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
POST LUNCH PLASMA GLUCOSE	118	mg/dL	Non Diabetic State: :70-140

Method:HEXOKINASE

Sample Type : Flouride plasma(P)

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Clinical Biochemistry
ALANINE TRANSAMINASE (ALT/SGPT)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
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ALT / SGPT	31.2	-	UP TO 41
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Method:SPECTROPHOTOMETRY

Sample Type : SERUM

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Haematology
COMPLETE BLOOD COUNT WITH ESR

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
HAEMOGLOBIN Method:SPECTROPHOTOMETRY	14.52	g/dL	13.0-17.0
P C V Method:AUTOMATED CELL COUNTER	45.7	%	40-50
M C V Method:CALCULATED	83.5	fl	83-101
M C H Method:CALCULATED	27.8	pg	27-32
M C H C Method:CALCULATED	31.8	g/dL	31.5-34.5
TOTAL RBC COUNT Method:Electrical Impedance	5.47	mil./cmm	4.5-5.5
PLATELET COUNT Method:Electrical Impedance	1.87	lakhs/cumm	1.5-4.1
TOTAL WBC COUNT Method:Electrical Impedance	5200	cells/cmm	4000-10000
CORRECTED WBC COUNT			
NEUTROPHILS. Method:Flow Cytometry / Microscopy.	54	%	40-80
LYMPHOCYTES Method:Flow Cytometry / Microscopy.	41	%	20-40
EOSINOPHILS Method:Flow Cytometry / Microscopy.	02	%	1-6
MONOCYTES Method:Flow Cytometry / Microscopy.	02	%	2-10
BASOPHILS Method:Flow Cytometry / Microscopy.	00	%	0-2
R B C MORPHOLOGY	NORMOCYTIC NORMOCHROMIC		
W B C	WITHIN NORMAL LIMITS		
PLATELETS	ADEQUATE		
ERYTHROCYTE SEDIMENTATION RATE (ESR)			
I HOUR Method:Modified Westergren (Automated)/Manual	14	mm/hr	Upto 15

Sample Type : WB EDTA

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Referral Dr : APOLLO CLINIC	Barcode : 002178519800

Clinical Pathology
COMPLETE URINE EXAMINATION (CUE)

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
<u>PHYSICAL EXAMINATION</u>			
COLOUR	PALE YELLOW	-	Straw to Yellow
APPEARENCE	CLEAR	-	Clear
<u>CHEMICAL EXAMINATION</u>			
REACTION	6.5	-	4.6 - 8.0
Method:pH (Double) Indicator			
SPECIFIC GRAVITY	1.020	-	1.003 - 1.035
Method:pH Indicator			
PROTEINS	NEGATIVE	-	Negative
Method:Protein error of Indicator			
GLUCOSE	NEGATIVE	-	Negative
Method:GOD POD			
BILIRUBIN (BILE PIGMENTS)	NEGATIVE	-	Negative
Method:Diazonium Method/Fouchets Method			
BILE SALTS	ABSENT	-	Absent
Method:Hays Method			
KETONE BODIES	NEGATIVE	-	Negative
Method:Nitroprusside Reaction/Rotheras Method			
UROBILINOGEN	NORMAL	-	Normal
Method:Diazonium Method			
NITRITE	NEGATIVE	-	Negative
Method:Diazonium Method			
<u>MICROSCOPIC EXAMINATION</u>			
Pus Cells	0-03	cells/hpf	0 - 4
RBC	NIL	cells/hpf	0 - 2
Epithelial Cells	01-02	cells/hpf	0 - 4
CASTS	ABSENT	-	Absent
CRYSTALS	ABSENT	-	Absent
Others	NIL	-	

Sample Type : URINE

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Haematology
BLOOD GROUPING AND Rh TYPING MANUAL

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
BLOOD GROUP	" O "	-	
Method:MANUAL			
RH (D) FACTOR	POSITIVE	-	

Sample Type : WB EDTA

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Clinical Biochemistry
BLOOD UREA NITROGEN/CREATININE RATIO

TEST NAME	OBSERVED VALUE	UNITS	BIOLOGICAL REF. RANGE
BLOOD UREA NITROGEN Method:CALCULATED	10	mg/dL	6-20
SERUM CREATININE Method:Jaffes Kinetic	1.10	mg/dL	0.70-1.30
BLOOD UREA NITROGEN (CREATININE RATIO) Method:Urease	10	mg/dL	6-20

Sample Type : SERUM

Please Correlate With Clinical Findings If Necessary Discuss
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G. Pratyusha

Dr.G PRATYUSHA
 MD PATH
 Consultant Pathologist

**** END OF REPORT ****

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Madhu Prabhakar on 21/10/24

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none">• Medically Fit	<input checked="" type="checkbox"/>
<ul style="list-style-type: none">• Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none">• Currently Unfit. <p>Review after _____ recommended</p>	
<ul style="list-style-type: none">• Unfit	

Dr. _____
Medical Officer
The Apollo Clinic, (Location)

This certificate is not meant for medico-legal purposes

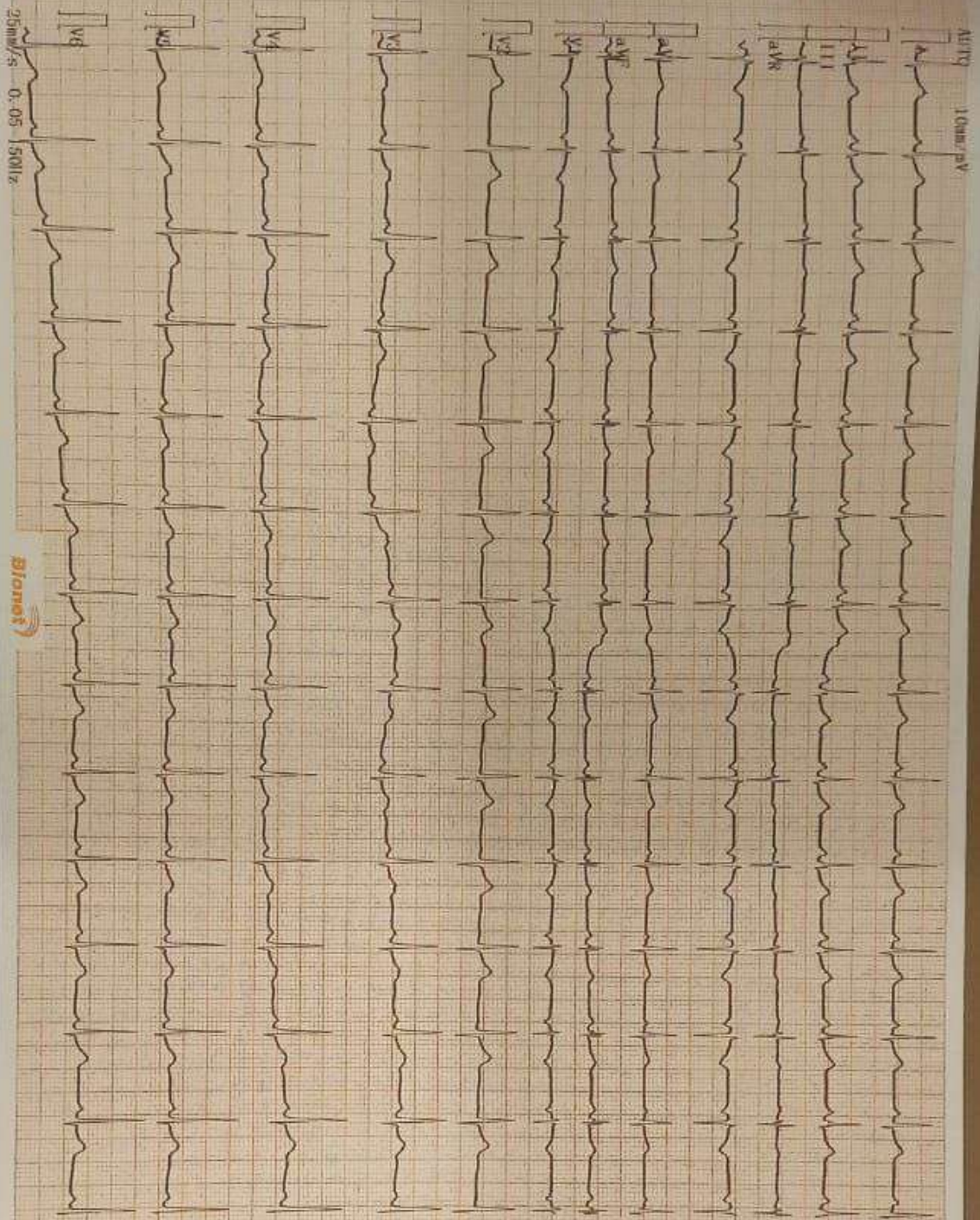
Dr. G. PRATYUSHA
MBBS, MD
Reg. No. 1663337

MIR- MEDICAL EXAMINATION REPORT

Date of Examination	21/10/24		
NAME	Radhu P Subhakar		
AGE	35	Gender	Male
HEIGHT(cm)	174	WEIGHT (kg)	75 Kgs
B.P.	120/80		
ECG	Normal		
X Ray	Normal		
Vision Checkup	Color Vision : Far Vision Ratio : Near Vision Ratio :		
Present Ailments	NO		
Details of Past ailments (If Any)	NO		
Comments / Advice : She /He is Physically Fit	fit		

Dr. G. PRATYUSHA
MBBS, MD
Reg. No. 1663337

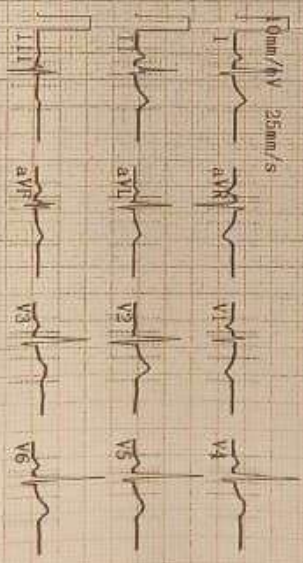
Signature with Stamp of Medical Examiner.



Blonot

2024 10 21 10:39
 Name : M. PRADHAKAR
 Sex : Male Age : 35
 Section: eng
 RoomID:
 BedID:
 ID:
 Operator: hgfd
 Custom3:

HR	bpm	: 80
PR Interval	ms	: 138
P Duration	ms	: 104
QRS Duration	ms	: 64
T Duration	ms	: 176
QT/QTc	ms	: 336/386
P/QRS/T Axis	deg	: 49.8/31.4/39.1
R(V5)/S(V1)	mV	: 1.28/0.40
R(V5)+S(V1)	mV	: 1.68



<< Conclusions >>
 Normal Sinus Rhythm,
 Cardiac electric axis normal.
 Report need physician confirm

Physician:
 Dr. G. PRATHYUSHA
 MBBS, MD
 Reg No 1663337

आयकर विभाग

INCOME TAX DEPARTMENT



भारत सरकार

GOVT. OF INDIA

MADHU PRABHAKAR

SUBBARAO MADHU

18/05/1989

Permanent Account Number

CBPPM3620Q

M. P. Subbarao

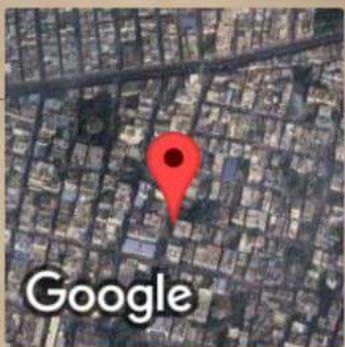
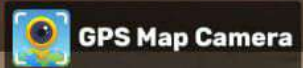
Signature



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LIKU THA'S



Vijayawada, Andhra Pradesh, India
#29-6-8, Nakkala Rd, Beside Central Bank Of India, Suryaraopeta,
Governor Peta, Vijayawada, Andhra Pradesh 520002, India
Lat 16.512829°
Long 80.632298°
21/10/24 08:03 AM GMT +05:30



ఫోన్: 0866 - 2439190

సాయి

వర్ణ కంటి ఆస్పత్రి

రెటినా (కంటి నరముల), కార్మియా వ్యాధులకు ప్రత్యేక చికిత్స
29-6-10, పెద్దిబొట్ల టవర్స్, నక్కలరోడ్డు, సూర్యారావుపేట, విజయవాడ-2.

M. Pyabhaikar 35/M

21/10/24

colour vision BE:- Normal

	(R)	(L)
'A DU	6/6	6/6
NV	NG	NG
S/L	N/A	N/A

SAI VARNHA EYE HOSPITAL

29-6-10, Peddibotla Towers, Nakkala Road, Suryaraopet, VIJAYAWADA - 520 002. Andhra Pradesh, India.

Ph : 0866 - 2439190, Mobile : +91 93981 72762

Dr. C. మనోహర్

M.B.B.S., D.O., FERC, FVRS,
Vitreo Retinal Surgeon

Ex. IOL L.V. ప్రసాద్ కంటి ఆస్పత్రి, Hyd.

Ex. Consultant అరవింద్ కంటి ఆస్పత్రి, మద్యరై.

Fellow-Laser & I/O Soopy అరవింద్ కంటి ఆస్పత్రి, మద్యరై.

Ex. FI. Retina S.B. Dr. సోమేశ్ సింగ్ కంటి ఆస్పత్రి, అమృతసర్

Consultant అమెరికన్ ఆసుపత్రి, విజయవాడ.

Dr. C. MANOHAR
Regd. No: 16359 A.P., M.B.B.S. DO, FERC, FVRS

SAI VARNHA EYE HOSPITAL
29-6-10, Peddibotla Towers, Nakkala Road, Suryaraopet, VIJAYAWADA - 520 002, A.P., INDIA

హాస్పిటల్ ప్రత్యేకతలు :

ఫాలో సర్జరీ (కుట్టు లేకుండా శుక్రము తీసి కంటిలో (అద్దము) అమర్చుట,

మైక్రో సర్జరీ (అపరేషన్ చేసిన వెంటనే ఇంటికి వెళ్ళవచ్చు.)

ఘగర్ వ్యాధితో వచ్చే రెటినోపతికి లేజర్ చికిత్స, కంటి దెబ్బలకు చికిత్స

రెటినాలోని రంధ్రాలకు లేజర్ చికిత్స