

आयकर विभाग  
INCOME TAX DEPARTMENT  
RITURAJ PATHAK  
ATUL PATHAK  
30/06/1982  
Permanent Account Number  
ARPPP9245C  
Rituraj Pathak  
Signature

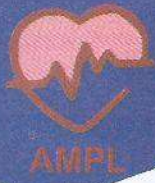
भारत सरकार  
GOVT. OF INDIA



02062011

R. Pathak

  
Dr. Shree Balraj Kapoor M.D.  
Regd. No. - 2011  
Cell No. 705202211



# ALOKA MEDICARE PVT. LTD.

(DEPARTMENT OF LABORATORY SERVICES)

Website : www.alokamedicare.in, Email : mail@alokamedicare.in  
CIN : U85110WB1992PTC055426

Visit ID	: AMP5146	Registration	: 26/Aug/2023 02:30PM
UHID/MR No	: AMP.0000004818	Collected	: 26/Aug/2023 02:34PM
Patient Name	: MR. RITURAJ PATHAK	Received	: 26/Aug/2023 02:54PM
Age/Gender	: 41 Y O M O D /M	Reported	: 26/Aug/2023 05:07PM
Ref Doctor	: ARCOFEMI-MEDIWHEEL	Status	: Final Report
Barcode No	: 10075532	Client Code	: 106
Client Name	: APOLLO		

## DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range
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### PLASMA GLUCOSE- FASTING (FBS)

Sample Type : FLOURIDE PLASMA

Plasma Glucose Fasting (FBS) GOD-POD	106	mg/dl	70-110
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### PLASMA GLUCOSE- POST PRANDIAL (PPBS)

Sample Type : FLOURIDE PLASMA (PP)

PLASMA GLUCOSE POST PRANDIAL (PPBS) TRINDERS , END POINT	127	mg/dl	90-140
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### SERUM UREA

Sample Type : SERUM

SERUM UREA Urease GLDH, Fixed Time	29	mg/dL	13-45
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### SERUM CREATININE

Sample Type : SERUM

SERUM CREATININE JAFFES. INITIAL RATE	1.29	mg/dl	MALE : 0.6 - 1.4-FEMALE : 0.6 - 1.2
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### SERUM URIC ACID

Sample Type : SERUM

SERUM URIC ACID URICASE-TRINDER, End Point	7.20	mg/dl	2.5-6.8
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### SERUM SODIUM

Sample Type : Serum

SERUM SODIUM ISE	137.0	mEq/L	136-145
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Checked By

*Kamalesh Chatterjee*

Dr. Kamalesh Chatterjee  
Ph.D. (FAIC, UK)  
Sr. Consultant Biochemistry

H.O. & Lab :  
114-B, Sarat Bose Road, Kolkata-700 029, 78900 78966, 95200 95201

Other Clinics :  
169, G. T. Road (S), Shibpur, Near Alok Cinema, Hwh - 002, 98368 12298  
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## DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range
<b>SERUM POTASSIUM</b>			
Sample Type : Serum			
SERUM POTASSIUM ISE	3.80	mEq/L	3.5-5.0
<b>SERUM CHLORIDE</b>			
Sample Type : Serum			
SERUM CHLORIDE ISE	103.00	mEq/L	98.0-106.0



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## DEPARTMENT OF BIOCHEMISTRY

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### LIVER FUNCTION TEST

Sample Type : SERUM

TOTAL BILIRUBIN Diazo	0.62	mg/dl	0.1-1.2
CONJUGATED ( D. Bilirubin) Diazo	0.26	mg/dl	0.1-0.3
UNCONJUGATED ( I.D. Bilirubin) Calculated	0.36	mg/dl	0.2-0.7
TOTAL PROTEINS Biuret, End point	7.20	gm/dl	5.5-8.0
ALBUMIN BCG DYE, End point	4.40	g/dl	3.5-5.0
GLOBULIN Calculated	2.80	g/dl	2.0-3.5
A/G RATIO Calculated	1.57		1.0-2.1
Aspartate Transaminase (AST/ SGOT) IFCC, KINETIC	<b>51</b>	IU/L	< 45
Alanine Aminotransferase (ALT/ SGPT) IFCC, KINETIC	<b>80</b>	IU/L	< 45
ALKALINE PHOSPHATASE MODIFIED IFCC, KINETIC	<b>140</b>	U/L	MALE : 41-137 FEMALE : 39-118

"CHECKED TWICE".

"PLEASE CORRELATE CINICALLY."



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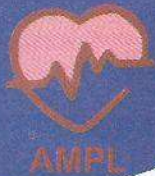
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## DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range
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### LIPID PROFILE

Sample Type : SERUM

TOTAL CHOLESTEROL TRINDERS , END POINT	203	mg/dl	< 200 Desirable 200 - 239 Border line high > 240 high
TRIGLYCERIDES GPO-Trinders End Point	255	mg/dl	UPTO 170
HDL CHOLESTEROL DIRECT	45	mg/dl	45-65
L D L CHOLESTEROL Calculated	107	mg/dl	Desirable < 130-Borderline high 130-159-High > 160
VLDL Calculated	51	mg/dl	20-50
NON HDL CHOLESTEROL Calculated	158	mg/dl	Desirable: <130-BorderLine : 150-199-High : 200-499-Very High : >=500
T. CHOLESTEROL/ HDL RATIO Calculated	4.51		< 4.5
LDL / HDL RATIO Calculated	2.38		Desirable: 0.5-3.0-BorderLine : 3.0-6.0-High Risk : >6.0

"CHECKED TWICE".

"PLEASE CORRELATE CINICALLY."

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Dr. Kamallesh Chatterjee  
Ph.D. (FAIC, UK)  
Sr. Consultant Biochemistry



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## DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range
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### HbA1C-Glycosylated Hemoglobin

Sample Type : WHOLE BLOOD EDTA

Glycosylated Hemoglobin- HbA1C HPLC	5.40	%	Non-diabetic 4-5.7-Pre-diabetic 5.7-6.4-Diabetic > 6.5
Estimated Average Glucose Calculated	108.28	mg/dl	

#### Comments:

1. HbA1c is used for monitoring diabetic control.
2. HbA1c has been endorsed by clinical groups & ADA(American Diabetes Association) guidelines
3. Trend in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low glycosylated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases. Chronic anaemia (especially severe iron deficiency & haemolytic anaemia), chronic renal failure and liver diseases.. Clinical correlation suggested.
5. Interference of haemoglobinopathies in HbA1c estimation:
6. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
7. Homozygous haemoglobinopath is detected, fructosamine is recommended for monitoring diabetic status
8. Heterozygous state detected(D10/turbo is corrected for HbS and HbC trait).
9. In known diabetic patients, following values can be considered as a tool for monitoring the glycaemic control. Excellent Control-6 to 7 %, Fair to Good Control -7 to 8 %, Unsatisfactory Control. 8 to 10 % and Poor Control – More than 10 %.

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting haemoglobinopathy.

- =====
- \* This result is true for the sample from this laboratory.
  - \* Remarks : Clinical correlation suggested
  - \* Test results may show interlaboratory variations.
  - \* Typed by :
  - \* Checked by:



Checked By

Dr. Arindam Das  
M.B.B.S., M.D.(Path)  
Consultant Pathologist

H.O. & Lab :  
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## DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range
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### BLOOD UREA NITROGEN (BUN)

Sample Type : SERUM

BLOOD UREA NITROGEN (BUN)	13	mg/dl	5-25
SERUM UREA Urease GLDH, Fixed Time	29	mg/dL	13-45

### GGT

Sample Type : Serum

GGT CARBOXY SUBSTRATE	24	U/L	5-32
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### BICARBONATE

Sample Type : SERUM

Biocarbonate Phosphoenolpyruvate carboxylase	22.00	mmol/L	22-29
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### SERUM CALCIUM

Sample Type : SERUM

SERUM IONIC CALCIUM ARSENAZO	8.6	mg/dL	8.4-10.9
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Sr. Consultant Biochemistry

Page 6 of 16

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Other Clinics : Test Performed at: No.28,80 Feet Raod Hal 3rd Stage  
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## DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range
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### URINE FOR SUGAR PP

Sample Type : URINE

URINE FOR SUGAR PP	NIL		
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\*\*\* End Of Report \*\*\*



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Consultant Pathologist

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## DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range
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### URINE FOR SUGAR - FASTING

Sample Type : Urine

Result	NIL	Unit	Nil
Benedicts test			

#### INTERPRETATION:

When the glucose level in blood exceeds the renal thresholds of glucose (160-180mg/dl) glucose starts to appear in urine. Glucose in urine gets excreted in diabetes mellitus. Elevated level of glucose in urine may also be a result of renal glucosuria. Other causes of glucose in urine are hyperthyroidism, high sugar diet, liver cirrhosis.



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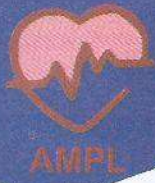
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### URINE ROUTINE EXAMINATION (URE)

Sample Type : URINE

#### PHYSICAL EXAMINATION

VOLUME	30	ml	
COLOUR	PALE YELLOW		STRAW YELLOW
APPEARANCE	SLIGHTLY HAZY		CLEAR
SEDIMENT	ABSENT		ABSENT

#### CHEMICAL EXAMINATION

SPECIFIC GRAVITY	1.015		1.005-1.030
pKa change			
REACTION (PH)	ACIDIC (6.5)		ACIDIC (6.0-6.8)
PH : double indicator principle			
PROTEIN	TRACE		NIL
protein-error-of-indicators principle			
SUGAR	NIL		NIL
double sequential enzyme reaction			
UROBILINOGEN	NORMAL		NORMAL
Ehrlichs Reaction			
BILE SALT	ABSENT		ABSENT
Sulpher power method			
BILE PIGMENTS	ABSENT		ABSENT
Fouchets method			
KETONE BODIES	ABSENT		ABSENT
Nitroprusside			
BLOOD	NEGATIVE		NEGATIVE
peroxide-like activity of hemoglobin			

#### MICROSCOPIC EXAMINATION

PUS CELLS	0-1	/HPF	0-5/HPF
RBCs	NOT FOUND	/HPF	NIL
EPITHELIAL CELLS	OCCASIONAL		F - 8-10/hpf-M - 2-3/hpf
CRYSTALS	NOT FOUND		ABSENT
CASTS	NOT FOUND		ABSENT
BACTERIA	PRESENT		ABSENT



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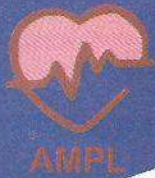


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## DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range
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### PERIPHERAL SMEAR

Sample Type : WHOLE BLOOD EDTA

RBC	Normocytic Normochromic
WBC	No Abnormal Cell Seen
PLATELET	Adequate



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## DEPARTMENT OF HAEMATOLOGY

### BLOOD GROUP ABO & RH

#### Blood Group

#### Test Name

Blood Group ABO  
RH Typing

#### Result

"O"  
POSITIVE

KIT USED : SPANCLONE  
MFG BY : ARKRAY HEALTH PVT Ltd.  
LOT NO : 4000028712

KIT USED : ERY SCREEN  
MFG BY : TULIP DIAGNOSTIC (P) LTD  
LOT NO : 1242305



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# ALOKA MEDICARE PVT. LTD.

(DEPARTMENT OF LABORATORY SERVICES)

Website : www.alokamedicare.in, Email : mail@alokamedicare.in  
CIN : U85110WB1992PTC055426

Visit ID : AMP5146	Registration : 26/Aug/2023 02:30PM
UHID/MR No : AMP.0000004818	Collected : 26/Aug/2023 02:34PM
Patient Name : MR. RITURAJ PATHAK	Received : 26/Aug/2023 02:54PM
Age/Gender : 41 Y O M O D /M	Reported : 26/Aug/2023 05:39PM
Ref Doctor : ARCOFEMI-MEDIWHEEL	Status : Final Report
Barcode No : 10075532	Client Code : 106
Client Name : APOLLO	

## DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range
-----------	--------	------	-----------------

### COMPLETE HAEMOGRAM

Sample Type : WHOLE BLOOD EDTA

HAEMOGLOBIN (HB) Spectrophotometry	14.5	gm/dl	13.0-17.0
RBC COUNT (RED BLOOD CELL COUNT) Electronic Impedance	4.69	m./cu.mm	4.5-5.5
PCV/ Haematocrit Electronic Impedance	44.8	%	40-50
MCV Calculated	95.5	fL	83-101
MCH Calculated	30.9	pg	27-32
MCHC Calculated	32.4	g/dL	31.5-34.5
TOTAL LEUCOCYTE COUNT (TLC) Electronic Impedance	5,100	/cu.mm	4000-10000
<b>DLC (Flow cytometry by Laser/ Microscopy Leishman Staining)</b>			
NEUTROPHIL Microscopy	59	%	40-80
LYMPHOCYTE Microscopy	37	%	20-40
MONOCYTE Microscopy	1	%	2-10
EOSINOPHIL Microscopy	3	%	1-6
BASOPHIL Microscopy	0	%	<1-2
PLATELET COUNT Electrical Impedance	1,75,000	/cu mm	150000-410000
ERYTHROCYTE SEDIMENTATION RATE Modified Westergren	5	mm	<10 mm after 1st hour



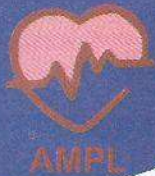
Checked By

Dr. Arindam Das  
M.B.B.S., M.D.(Path)  
Consultant Pathologist

H.O. & Lab :  
114-B, Sarat Bose Road, Kolkata-700 029, 78900 78966, 95200 95201

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Age/Gender	: 41 Y O M O D /M	Reported	: 26/Aug/2023 05:39PM
Ref Doctor	: ARCOFEMI-MEDIWHEEL	Status	: Final Report
Barcode No	: 10075532	Client Code	: 106
Client Name	: APOLLO		

## DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range
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\*\*\* End Of Report \*\*\*



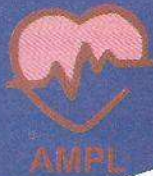
Checked By

Dr. Arindam Das  
M.B.B.S., M.D.(Path)  
Consultant Pathologist

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CIN : U85110WB1992PTC055426

Visit ID : AMP5146	Registration : 26/Aug/2023 02:30PM
UHID/MR No : AMP.0000004818	Collected : 26/Aug/2023 02:34PM
Patient Name : MR. RITURAJ PATHAK	Received : 26/Aug/2023 02:54PM
Age/Gender : 41 Y O M O D /M	Reported : 26/Aug/2023 04:42PM
Ref Doctor : ARCOFEMI-MEDIWHEEL	Status : Final Report
Barcode No : 10075532	Client Code : 106
Client Name : APOLLO	

## DEPARTMENT OF HORMONE ASSAYS

Test Name	Result	Unit	Bio. Ref. Range
-----------	--------	------	-----------------

### THYROID PROFILE TOTAL (T3,T4,TSH)

Sample Type : SERUM

T3- TRI-iodothyronine Total CLIA	1.37	ng/mL	0.69-2.15
T4 - Thyroxine Total CLIA	91.7	ng/mL	52-127
Thyroid Stimulating Hormone (TSH) CLIA	<b>4.89</b>	µIU/mL	0.3-4.5

#### INTERPRETATION:

- Serum T3, T4 and TSH are the measurements form three components of thyroid screening panel and are useful in diagnosing various disorders of thyroid gland function.
- Primary hyperthyroidism is accompanied by elevated serum T3 and T4 values along with depressed TSH levels.
- Primary hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels.
- Normal T4 levels accompanied by high T3 levels are seen in patients with T3 thyrotoxicosis. Slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol and propylthiouracil.
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism, rarely they can result from TSH secreting pituitary tumors (secondary hyperthyroidism).
- Low levels of Thyroid hormones (T3, T4 & FT3, FT4) are seen in cases of primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also.
- Increased levels are found in Grave's disease, hyperthyroidism and thyroid hormone resistance.
- TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

#### 9. REFERENCE RANGE :

PREGNANCY	TSH in uIU/mL
1st Trimester	0.60 - 3.40
2nd Trimester	0.37 - 3.60
3rd Trimester	0.38 - 4.04

Age	TSH in uIU/mL
0 - 4 Days	1.00 - 39.00
2 Weeks to 5 Months	1.70 - 9.10
6 Months to 20 Yrs.	0.70 - 6.40
>55 Yrs.	0.50 - 8.90

(References range recommended by the American Thyroid Association)

#### Comments:

- During pregnancy, Free thyroid profile (FT3, FT4 & Ultra-TSH) is recommended.
- TSH levels are subject to circadian variation, reaches peak levels between 2-4 AM and at a minimum between 6-10 PM. The variation of the day has influence on the measured serum TSH concentrations.



Checked By

Dr. Arindam Das  
M.B.B.S., M.D.(Path)  
Consultant Pathologist

H.O. & Lab :  
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Patient Name	: MR. RITURAJ PATHAK	Received	: 26/Aug/2023 02:54PM
Age/Gender	: 41 Y O M O D /M	Reported	: 26/Aug/2023 06:42PM
Ref Doctor	: ARCOFEMI-MEDIWHEEL	Status	: Final Report
Barcode No	: 10075532	Client Code	: 106
Client Name	: APOLLO		

## DEPARTMENT OF HORMONE ASSAYS

Test Name	Result	Unit	Bio. Ref. Range
-----------	--------	------	-----------------

### PROSTATE SPECIFIC ANTIGEN (PSA) - TOTAL

Sample Type : SERUM

PROSTATE SPECIFIC ANTIGEN CLIA	0.85	ng/mL	0-4
-----------------------------------	------	-------	-----

#### INTERPRETATION:

Raised Total PSA levels may indicate prostate cancer, benign prostate hypertartion (BPH), or inflammation of the prostate. Prostate manipulation by biopsy or rigorous physical activity may temporarily elevate PSA levels. The blood test should be done before surgery or six weeks after manipulation. The total PSA may be ordered at regular intervals during treatment of men who have been diagnosed with Prostate cancer and in prostatic cancer cases under observation.

\*\*\* End Of Report \*\*\*



Checked By

Dr. Arindam Das  
M.B.B.S., M.D.(Path)  
Consultant Pathologist

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CHRC

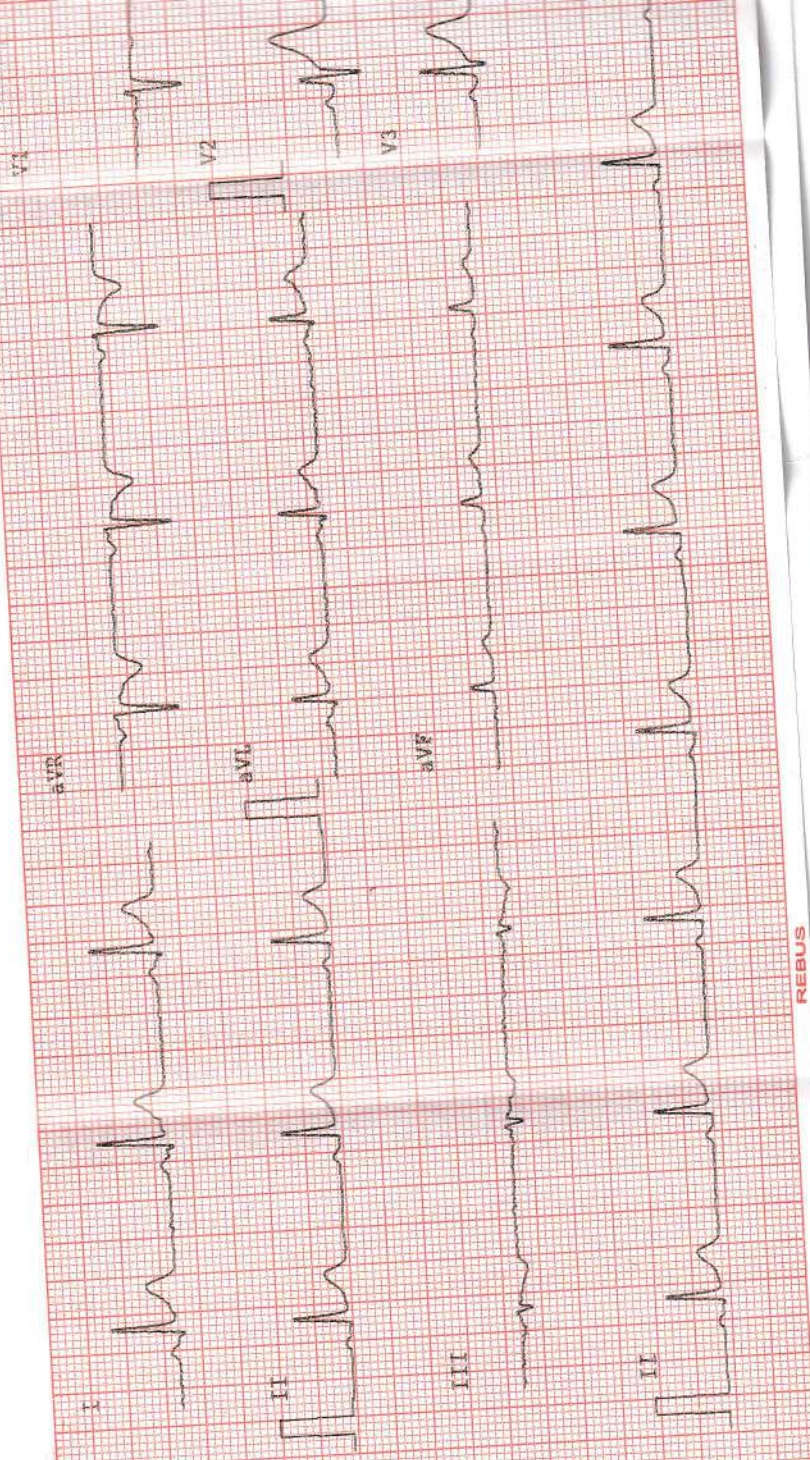
PATIENT INFORMATION

ID: RITURAJ PATHAK  
NAME: RITURAJ PATHAK  
AGE: 41 GENDER: M SMOKER: N  
HEIGHT: cms WEIGHT: KG  
DOCTOR: APOLLO  
Ref: APOLLO  
TIME/DATE: 21-46-14 25-08/23

ECG SETTINGS

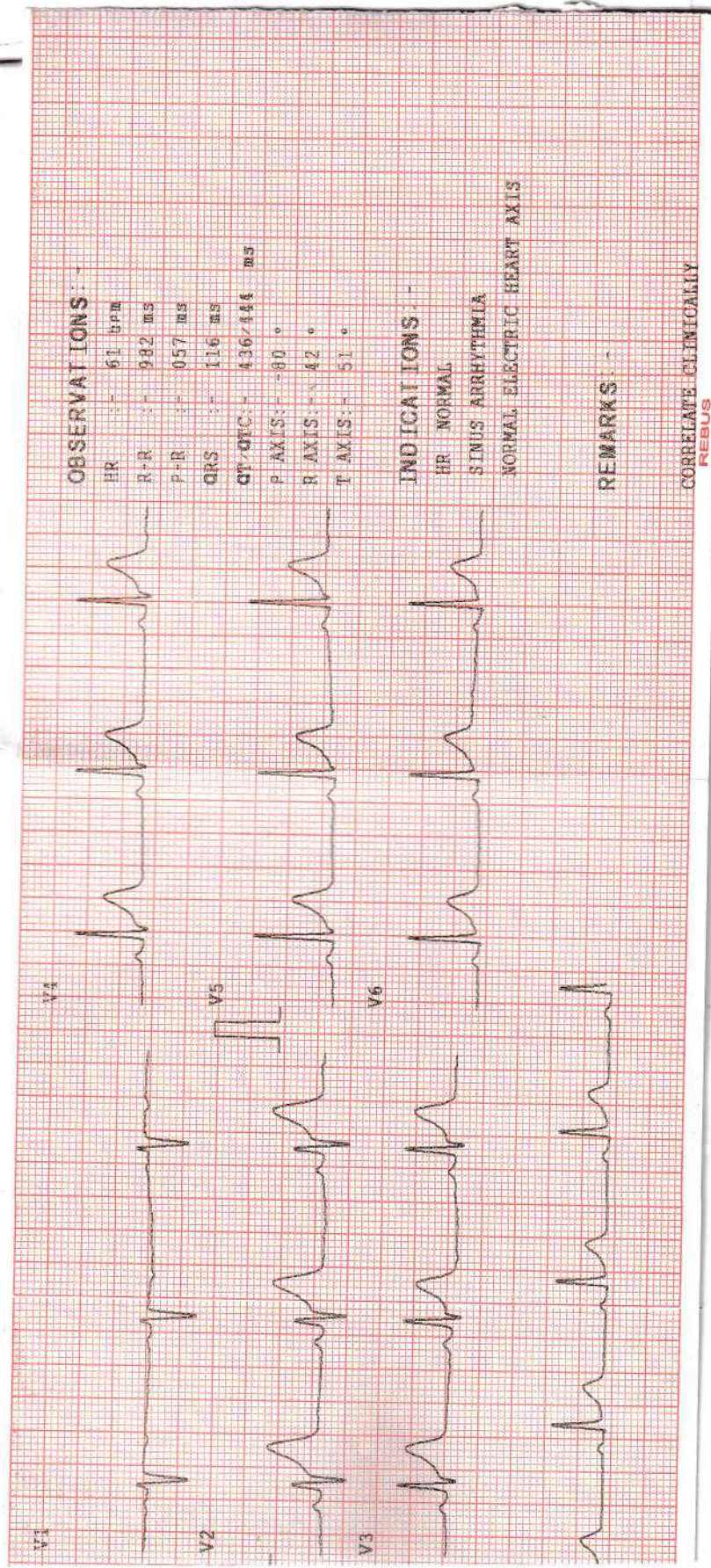
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GAIN: 10 mm/mV  
SPEED: 25mm/Sec  
FILTER: 1-20Hz  
NOTCH: ON  
PAPATHM LEAD: II

ALLENGERS PISCES-A-103(Ver-1.0 MI)



REBUS

F



REPORT :

*Sinus rhythm  
- tracing within normal limit*

*Bm  
24/8/23*

Dr. Shree Ballabh Nagori M.D.  
Regd. No. - 36968  
Cell No. : 7890076911

**Dr. S. B. Nagori, M. D.**  
Chief Cardiologist

Consultant Cardiologist



# ALOKA MEDICARE PVT. LTD.

Formerly *Calcutta Heart Research Centre*

Website : www.alokamedicare.in, Email : mail@alokamedicare.in  
CIN : U85110WB1992PTC055426

<b>Patient Name</b> : Mr. RITURAJ PATHAK	Bill No	: AMP5146
Age/Gender : 41 Y O M O D /M	Reg. Date	: 26/Aug/2023 02: 30PM
Referred By : Dr. ARCOFEMI-MEDIWHEEL	Reported	: 26/Aug/2023 02: 45PM
Centre Name : APOLLO	Report Status	: Final Report

## DEPARTMENT OF CARDIOLOGY

### ECHOCARDIOGRAPHY COLOUR DOPPLER

M.Mode Data Parameter	Test value	Normal range (Adult)	Unit	M.Mode Data Parameter	Test value	Normal range (Adult)	Unit
Aortic Root Diameter	32	20-40	mm	EF slope	65	50-150	mm/sec
Aortic Cusp Opening	24	15-20	mm	DE Amplitude	18	15-20	Mm
Left Atrial Diameter	40	20-40	mm	EPSS	04	01-10	mm
IV Septal thickness (diastole)	11	06-11	mm	LV ejection fraction	66	55-75	%
LV internal diameter (diastole)	50	35-56	mm	Fraction shortening	36	20-45	%
LV Posterior wall thickness(diastole)	09	06-11	mm	RV Internal Diameter		6-23	mm
LV internal diameter (systole)	31	24-42	mm				
Doppler Data Structure	Flow Velocity(m/Sec)	Pressure Gradient (mmHg)		Regurgitation in Grade			
Mitral valve	E : 0.72 A : 0.61	2.09		0/4			
Tricuspid Valve	1.16	4.92		0/4			
Aortic Valve	1.38	7.69		0/4			
Pulmonary Valve	1.38	7.69		0/4			

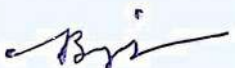
#### IMPRESSION:

- Left ventricle shows :

The cavity size & wall thickness are within normal limits.  
No regional wall motion abnormality.  
Good systolic function with LVEF – 66%

- Normal size LA, RV & RA. Good RV systolic function.
- Normal cardiac valves.
- No pulmonary arterial hypertension (PASP – 18 mmHg).
- No intra cardiac shunt / mass.
- No pericardial effusion. ----- Please correlate clinically.



Checked By   
Dr. S.B. Nagori M.D.  
Chief Cardiologist

DR. ADITYA VERMA, MD  
Consultant Cardiologist





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CIN : U85110WB1992PTC055426

<b>Patient Name</b> : Mr. RITURAJ PATHAK	Bill No	: AMP5146
Age/Gender : 41 Y O M O D /M	Reg. Date	: 26/Aug/2023 02: 30PM
Referred By : Dr. ARCOFEMI-MEDIWHEEL	Reported	: 26/Aug/2023 02: 42PM
Centre Name : APOLLO	Report Status	: Final Report

## DEPARTMENT OF ULTRASOUND

### ULTRA SOUND WHOLE ABDOMEN

**Liver:** Is normal in size, its parenchyma presents homogenous echopattern. No hepatic focal lesions. No intrahepatic biliary duct dilatation.

**CBD:** Not dilated. (4 mm)

**Portal vein:** Normal in caliber. (7 mm)

**Gall bladder:** It is normally distended. The wall appears to be of normal thickness. No evidence of calculi or biliary mud in the visualized lumen.

**Spleen:** Is of normal size (105 mm) and uniform echopattern.

**Pancreas:** Normal sonographic appearance of the visualized parts.  
Aorta and IVC appears normal. No significant paraaortic lymphadenopathy.

**Both kidneys:** Are of normal size, shape with regular outline. No evidence of calculi, backpressure or cystic changes on both sides. Good corticomedullary differentiation and adequate parenchymal thickness.

Right kidney measures – 94 mm. Left kidney measures – 97 mm.  
No evidence of free or loculated intraperitoneal or pelvic fluid collections.

**Urinary bladder:** Is normally distended with no masses or calculi. Visualized lumen appears clear.

**Prostate:** Is normal in size (15 cc) with homogenous echopattern, intact capsule and peripheral zone.

### IMPRESSION:

- No significant abnormality detected.



Checked By

M. Nuruzzaman

DR. M. NURUZAMAN  
MBBS, DMRD, MD  
Consultant Radiologist





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CIN : U85110WB1992PTC055426

<b>Patient Name</b> : Mr. RITURAJ PATHAK	Bill No	: AMP5146
Age/Gender : 41 Y O M O D /M	Reg. Date	: 26/Aug/2023 02: 30PM
Referred By : Dr. ARCOFEMI-MEDIWHEEL	Reported	: 26/Aug/2023 05: 00PM
Centre Name : APOLLO	Report Status	: Final Report

## DEPARTMENT OF X-RAY

### X-RAY CHEST PA VIEW

### STUDY SHOWS

- **Prominent bilateral vascular markings.**
- Both hila are normal.
- Mediastinum is central.
- Transverse cardiac diameter is within normal limits.
- Both CP angles are clear.
- Both hemidiaphragm are normal.
- Rib cage and spine appears normal.

\*\*\* End Of Report \*\*\*



Checked By

DR. J. PAL  
M.D.  
RADIOLOGIST

Page 3 of 3

H.O. & Lab :  
114-B, Sarat Bose Road, Kolkata-700 029, 78900 78966, 95200 95201

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## CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of RITURAJ PATHAK on 26.08.2023

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

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	<input checked="" type="checkbox"/>
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <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"> <li>• Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	

Dr. [Signature] M.D.  
**Medical Officer**  
**The Apollo Clinic, (Location)**

*This certificate is not meant for medico-legal purposes*



MER- MEDICAL EXAMINATION REPORT

Date of Examination	26.08.2023		
NAME	RITURAJ PATHAK		
AGE	41	Gender	M
HEIGHT(cm)	170	WEIGHT (kg)	70
B.P.	130/80 - 78		
ECG	Normal		
X Ray	Normal.		
Vision Checkup	NY-M6 DV - L/E - 6/36 1 CV - Normal R/E - 6/60.		
Present Ailments	NO		
Details of Past ailments (If Any)	NIL		
Comments / Advice : <input checked="" type="checkbox"/> She / <input type="checkbox"/> He is Physically Fit	YES		

*[Handwritten Signature]*

Dr. Shree Sankar Singh M.D.  
 Regd. No. 10000  
 Cell No. 9722 26 1211  
 Signature with Stamp of Medical Examiner



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Website : www.alokamedicare.in, Email : mail@alokamedicare.in  
CIN : U85110WB1992PTC055426

Patient Name:	Rituraj Pathak	Patient ID:	5146
Age:	41 Yrs	Sex:	Male
Ref by:	Apollo	Study Date	26/08/2023

## OPHTHALMIC REPORT

### Chief complaints:

*Routine checkup.*

### Physical Examination:

#### VISUAL ACUITY:

		<u>RIGHT EYE</u>	<u>LEFT EYE</u>
DISTANT VISION: -	Without glasses	6/60	6/36
	With glasses	6/6	6/6
NEER VISION: -	Without glasses	N6	N6
	With Glasses	N6	N6

COLOUR VISION: - NAD (By modified Ishiara's Chart)

<u>Exam</u>	<u>Right Eye</u>	<u>Left Eye</u>
Cornea	Clear	Clear
Lens	Clear	Clear

**Diagnosis:** Normal parameters with refractive error.

Dr. P. K. Dadawala  
M.B.B.S., M.S. (Oph)

H.O. & Lab :  
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# Calcutta Heart Research Centre

114B, SARAT BOSE ROAD, KOLKATA - 700 029

PHONE : 2454-6083 / 84, 2474-7613

FAX : (033) 2474-4848, E-mail : chrc@mail.com

## REPORT OF SPEECH & AUDIOLOGICAL EVALUATION

Consultancy available for SPEECH THERAPY

- Deaf Child • Voice Disorder • Aphasia • Stuttering
- M. R. & other brain damage children.

### AUDIOLOGICAL EVALUATION

- Pure Tone • Speech • A. B. L. B. S. I. S. I.
- Tone Decay Test

Name : RITURAJ PATHAK

Age : 41.7 Sex : M/F

Refd. by : APOLLO

Tested by :  
(Patients are requested to make prior appointment to avoid inconvenience.)

### PURE TONE RESULTS

i) Right Ear

ii) Left Ear

Bilateral hearing sensitivity within normal limits

### SPEECH EVALUATION

Brief history of the problems :

Special Language Characteristics :

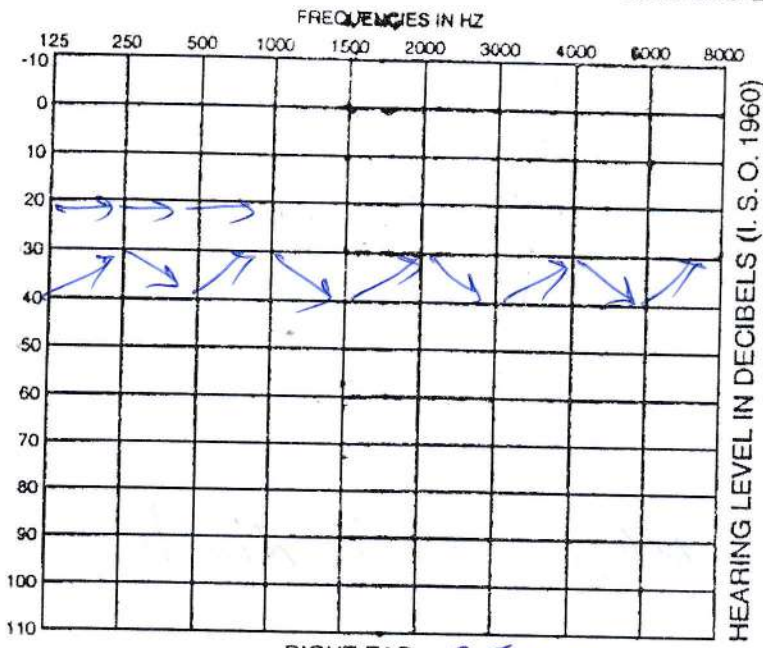
Recommendation :

Date : 28-08-23

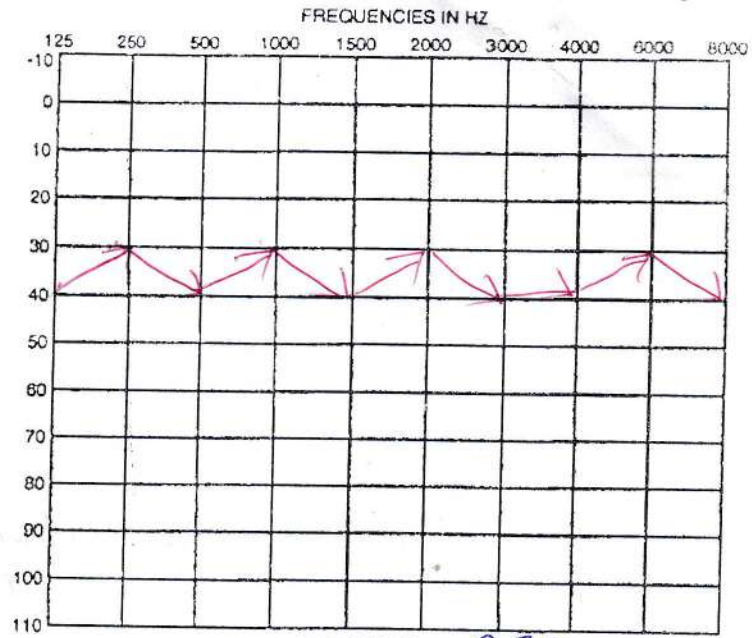
Signature (Audiologist) 

Dr. Shree Dattab Nigam  
Regd. No. - 30938  
Cell No. : 7890078911

# AUDIOGRAM

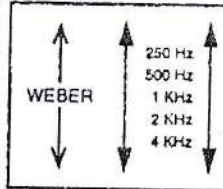


RIGHT EAR ← 25 dB



LEFT EAR → 25 dB

	A.C.	B.C.	A.C. MASK	B.C. MASK	NOT HEARD	
					A.C.	B.C.
Rt.	0	1	△	▷	0	↓
Lt.	X	1	▽	◁	X	↓



	RIGHT EAR	LEFT EAR
SRT		
SDS%		
Freq		
Rinne		
Webe		
Bing		

Special Tests	RIGHT					LEFT				
	500	1000	2000	3000	4000	500	1000	2000	3000	4000
SISI										
TDT										
ABLB										

AUDIOMETER : ARPHI 500 MK IIS