

CERTIFICATE OF MEDICAL FITNESS

NAME: Mr. Ravi. J. S

AGE/ GENDER: 31yr.

HEIGHT: 177cm

WEIGHT: 73.1kg

IDENTIFICATION MARK: ✓

BLOOD PRESSURE: 130/80 mm of Hg

PULSE: 64b/min

CVS: }
RS:P } Normal

ANY OTHER DISEASE DIAGNOSED IN THE PAST: Nil

ALLERGIES, IF ANY: Nil.

LIST OF PRESCRIBED MEDICINES: Nil

ANY OTHER REMARKS: - NO -

I Certify that I have carefully examined Mr/Mrs. Ravi. J. S son/daughter of Ms. Slo Shivaraj who has signed in my presence. He/ she has no physical disease and is fit for employment.

RAVI JS
Signature of candidate

Dr. BINDURAJ. R
M.D.
Internist
Reg. No. 62396
Signature of Medical Officer

Place: Spectrum diagnostic & health care

Date: 06/09/24

Disclaimer: The patient has not been checked for COVID. This certificate does not relate to the covid status of the patient examined

SCAN FOR LOCATION



Dr. Ashok S
Bsc., MBBS., D.O.M.S
Consultant Ophthalmologist
KMC No: 31827

DATE: 6/09/2024.

EYE EXAMINATION

NAME: RAVI JS

AGE: 31/M

GENDER: F / M ✓

	RIGHT EYE	LEFT EYE
Vision	6/6	6/6
Vision With glass	6/6	6/6
Color Vision	Normal	Normal
Anterior segment examination	Normal	Normal
Fundus Examination	Normal	Normal
Any other abnormality	Nil	Nil
Diagnosis/ impression	Normal	Normal

Dr. ASHOK SARODHE
B.Sc., M.B.B.S., D.O.M.S.
Eye Consultant & Surgeon
KMC 31827
(Signature)
Consultant (Ophthalmologist)



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ID: 0043

06-09-2024 10:58:11

FO BPL

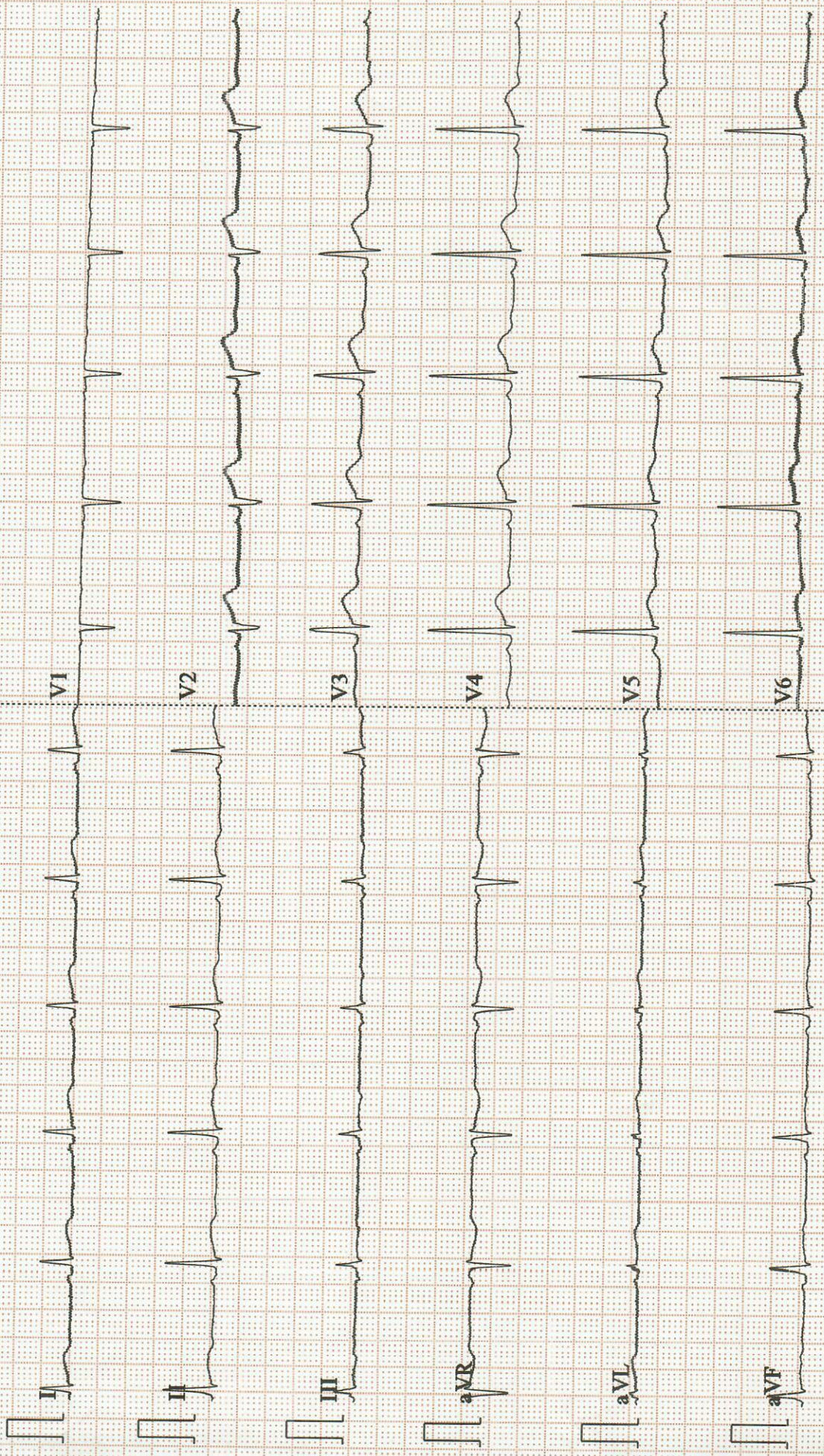
MR RAVI J S
Male 31Years

HR : 66 bpm
P : 91 ms
PR : 135 ms
QRS : 82 ms
QT/QTc : 383/402 ms
P/QRS/T : 10/53/19 °
RV5/SV1 : 1.478/0.625 mV

Diagnosis Information:
Sinus Rhythm
QS Wave in lead V1



Report Confirmed by:



Name	: MR. RAVI J S	UHID	: 0609240043	Bill Date	: 06-Sep-2024 10:03 AM
Age / Gender	: 31 years / Male			Sample Col. Date	: 06-Sep-2024 10:03 AM
Ref. By Dr.	: Dr. APOLO CLINIC			Result Date	: 06-Sep-2024 03:16 PM
Reg. No.	: 0609240043			Report Status	: Final
C/o	: Apollo Clinic				

Test Name	Result	Unit	Reference Value	Method
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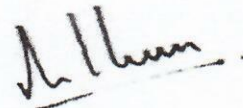
CHEST PA VIEW

- Visualised lungs are clear.
- Bilateral hila appears normal.
- Cardia is normal in size.
- No pleural effusion.

IMPRESSION: No significant abnormality.



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Dr. Nithun Reddy C,MD,Consultant Pathologist



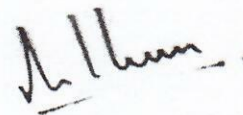
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Test Name	Result	Unit	Reference Value	Method
Urine Routine Examination-Urine				
Physical Examination				
Colour	Pale Yellow		Pale Yellow	Visual
Appearance	Clear		Clear	Visual
Reaction (pH)	5.5		5.0-7.5	Dipstick
Specific Gravity	1.025		1.000-1.030	Dipstick
Biochemical Examination				
Albumin	Negative		Negative	Dipstick/Precipitation
Glucose	Negative		Negative	Dipstick Benedicts
Bilirubin	Negative		Negative	Dipstick/Fouchets
Ketone Bodies	Negative		Negative	Dipstick/Rotheras
Urobilinogen	Normal		Normal	Dipstick/Ehrlichs
Nitrite	Negative		Negative	Dipstick
Microscopic Examination				
Pus Cells	2-3	hpf	0.0-5.0	Microscopy
Epithelial Cells	1-2	hpf	0.0-10.0	Microscopy
RBCs	Absent	hpf	Absent	Microscopy
Casts	Absent		Absent	Microscopy
Crystals	Absent		Absent	Microscopy
Others	Absent		Absent	Microscopy

Comments: The kidneys help infiltration of the blood by eliminating waste out of the body through urine. They also regulate water in the body by conserving electrolytes, proteins, and other compounds. But due to some conditions and abnormalities in kidney function, the urine may encompass some abnormal constituents, which are not normally present. A complete urine examination helps in detecting such abnormal constituents in urine. Several disorders can be detected by identifying and measuring the levels of such substances. Blood cells, bilirubin, bacteria, pus cells, epithelial cells may be present in urine due to kidney disease or infection. Routine urine examination helps to diagnose kidney diseases, urinary tract infections, diabetes and other metabolic disorders.



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Test Name	Result	Unit	Reference Value	Method
Aspartate Aminotransferase (AST/SGOT)-Serum	30.00	U/L	15.0-37.0	UV with Pyridoxal - 5 - Phosphate

Comments:

Aspartate Amino Transferase (AST/SGOT) enzyme is found in many organs including the liver. Though nonspecific, it is used to detect and monitor liver disease and other medical conditions. This is a more sensitive test in alcoholic liver disease than SGPT. Normal ranges in Adult male:<35 and Adult female:<31 U/L.

Alanine Aminotransferase (ALT/SGPT)-Serum	38.00	U/L	Male:16.0-63.0 Female:14.0-59.0	UV with Pyridoxal - 5 - Phosphate
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Comments: Alanine Aminotransferase (ALT/SGPT) is an enzyme found mainly in liver tissue and to a lesser extent in heart, kidney and skeletal muscle. It's measurement is clinically useful in the diagnosis of liver and biliary disease. Normal ranges in Adult male:<45 and Adult female:<34 U/L.



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Test Name	Result	Unit	Reference Value	Method
Cholesterol Total-Serum	164.00	mg/dL	Desirable: 0.0-200 Borderline High: 200-239 High:>240	Cholesterol Oxidase/Peroxidase (Spectrophotometer)

Comments: Cholesterol is a lipophilic molecule that is essential for human life. It has many roles that contribute to normally functioning cells. For example, cholesterol is an important component of the cell membrane. It contributes to the structural makeup of the membrane as well as modulates its fluidity. Cholesterol functions as a precursor molecule in the synthesis of vitamin D, steroid hormones (e.g., cortisol and aldosterone and adrenal androgens), and sex hormones (e.g., testosterone, estrogens, and progesterone). Cholesterol is also a constituent of bile salt used in digestion to facilitate absorption of fat-soluble vitamins A, D, E, and K. Since cholesterol is mostly lipophilic, it is transported through the blood, along with triglycerides, inside lipoprotein particles (HDL, IDL, LDL, VLDL, and chylomicrons). These lipoproteins can be detected in the clinical setting to estimate the amount of cholesterol in the blood. Chylomicrons are not present in non-fasting plasma. Increasing concentrations of Total cholesterol and LDL cholesterol are both correlated with increasing risk of cardiovascular disease. The levels are used to monitor response to cholesterol lowering therapy.

Creatinine, Serum	0.98	mg/dL	Male: 0.70-1.30 Female: 0.55-1.02	Modified kinetic Jaffe
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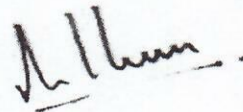
Comments: Creatinine is the product of creatine metabolism. Creatinine is a chemical compound left over from energy-producing processes in your muscles. Healthy kidneys filter creatinine out of the blood. Creatinine exits your body as a waste product in urine. It is a measure of renal function and elevated levels are observed in patients typically with 50% or greater impairment of renal function.

Urea-Serum	16.80	mg/dL	11.0 - 43.0	Urease-GLDH, UV Method
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Comments: Urea is the end product of protein metabolism. It reflects on the functioning of the kidney in the body. Elevated levels are seen in prerenal azotemia, renal disease, post-renal disease and reduced glomerular perfusion due to shock, dehydration, diarrhea etc. Decreased levels are seen in malnutrition, overhydration, liver disease etc.



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Test Name	Result	Unit	Reference Value	Method
Fasting Blood Sugar (FBS)- Plasma	88	mg/dL	60.0-110.0	Hexo Kinase

Comments: Glucose, also called dextrose, one of a group of carbohydrates known as simple sugars (monosaccharides). Glucose has the molecular formula $C_6H_{12}O_6$. It is found in fruits and honey and is the major free sugar circulating in the blood of higher animals. It is the source of energy in cell function, and the regulation of its metabolism is of great importance (fermentation; gluconeogenesis). Molecules of starch, the major energy-reserve carbohydrate of plants, consist of thousands of linear glucose units. Another major compound composed of glucose is cellulose, which is also linear. Dextrose is the molecule D-glucose. Blood sugar, or glucose, is the main sugar found in the blood. It comes from the food you eat, and it is body's main source of energy. The blood carries glucose to all of the body's cells to use for energy. Diabetes is a disease in which your blood sugar levels are too high. Usage: Glucose determinations are useful in the detection and management of Diabetes mellitus.

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine & Microalbumin urine

Comments: Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying & brisk glucose absorption.

Probable causes : Early Type II Diabetes / Glucose intolerance, Drugs like Salicylates, Beta blockers, Pentamidine etc..Alcohol ,Dietary – Intake of excessive carbohydrates and foods with high glycemic index ? Exercise in between samples ? Family history of Diabetes, Idiopathic, Partial / Total Gastrectomy.



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Test Name	Result	Unit	Reference Value	Method
Complete Haemogram-Whole Blood EDTA				
Haemoglobin (HB)	13.50	g/dL	Male: 14.0-17.0 Female:12.0-15.0 Newborn:16.50 - 19.50	Spectrophotometer
Red Blood Cell (RBC)	3.74	million/cumm	3.50 - 5.50	Volumetric Impedance
Packed Cell Volume (PCV)	38.20	%	Male: 42.0-51.0 Female: 36.0-45.0	Electronic Pulse
Mean corpuscular volume (MCV)	102.10	fL	78.0- 94.0	Calculated
Mean corpuscular hemoglobin (MCH)	36.10	pg	27.50-32.20	Calculated
Mean corpuscular hemoglobin concentration (MCHC)	35.40	%	33.00-35.50	Calculated
Red Blood Cell Distribution Width SD (RDW-SD)	49.00	fL	40.0-55.0	Volumetric Impedance
Red Blood Cell Distribution CV (RDW-CV)	14.70	%	Male: 11.80-14.50 Female:12.20-16.10	Volumetric Impedance
Mean Platelet Volume (MPV)	10.60	fL	8.0-15.0	Volumetric Impedance
Platelet	2.02	lakh/cumm	1.50-4.50	Volumetric Impedance
Platelet Distribution Width (PDW)	12.30	%	8.30 - 56.60	Volumetric Impedance
White Blood cell Count (WBC)	9200.00	cells/cumm	Male: 4000-11000 Female 4000-11000 Children: 6000-17500 Infants : 9000-30000	Volumetric Impedance
Neutrophils	62.10	%	40.0-75.0	Light scattering/Manual
Lymphocytes	30.70	%	20.0-40.0	Light scattering/Manual
Eosinophils	1.60	%	0.0-8.0	Light scattering/Manual



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Test Name	Result	Unit	Reference Value	Method
Monocytes	5.50	%	0.0-10.0	Light scattering/Manual
Basophils	0.10	%	0.0-1.0	Light scattering/Manual
Absolute Neutrophil Count	5.71	10 ³ /uL	2.0- 7.0	Calculated
Absolute Lymphocyte Count	2.83	10 ³ /uL	1.0-3.0	Calculated
Absolute Monocyte Count	0.51	10 ³ /uL	0.20-1.00	Calculated
Absolute Eosinophil Count	140.00	cells/cumm	40-440	Calculated
Absolute Basophil Count	0.01	10 ³ /uL	0.0-0.10	Calculated
Erythrocyte Sedimentation Rate (ESR)	02	mm/hr	Female : 0.0-20.0 Male : 0.0-10.0	Westergren

Peripheral Smear Examination-Whole Blood EDTA

Method: (Microscopy-Manual)

- RBC'S : Normocytic Normochromic.
- WBC'S : Are normal in total number, morphology and distribution.
- Platelets : Adequate in number and normal in morphology.
No abnormal cells or hemoparasites are present.
- Impression : Normocytic Normochromic Blood picture.



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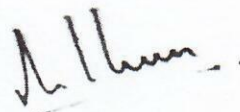
Test Name	Result	Unit	Reference Value	Method
Blood Group & Rh Typing-Whole Blood EDTA				
Blood Group	O			Slide Tube agglutination
Rh Type	Positive			Slide Tube agglutination

Note: Confirm by tube or gel method.

Comments: ABO blood group system, the classification of human blood based on the inherited properties of red blood cells (erythrocytes) as determined by the presence or absence of the antigens A and B, which are carried on the surface of the red cells. Persons may thus have type A, type B, type O, or type AB blood.



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Dr. Nathan Reddy, MD, Consultant Physician

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