

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination	
of Arport Singher on on After reviewing the medical history and on clinical examination it has been found	
After reviewing the medical history and on extract	Tr: ale
that he/she is	Tick
Medically Fit	
Fit with restrictions/recommendations	
Though following restrictions have been revealed, in my opinion, these are not impediments to the job.	
1. Thes diplot denice	
2	
3	
However the employee should follow the advice/medication that has been communicated to him/her.	
Review after 1 YV	
Currently Unfit. Review after	nded

Medical Officer

The Apollo Clinic, (Goldfien)

MBBS, MD

This certificate is not meant for medico-legal purposeing Physician Regd. No. 7513 (HMC)





डायितसिस, डायग्नोस्टिक एवं ओ.पी.डी. भारत विकास परिषद, महाराणा प्रताप न्यास द्वारा संवातित

Radiology Report

Name : Mr. Arpit

: 28 Y/M

Prescribed Doctor: Self

Age/Gender

MR No

: MR007504

Visit ID

: OP015669

Report Date

: 25-05-2019 12:53

Ultrasound

USG EXAMINATION: WHOLE ABDOMEN

Liver shows normal shape and size with homogenous echo texture. Intrahepatic biliary radicals are not dilated. No focal lesion is seen. **Portal Vein** shows normal calibre.

Gall bladder shows physiological distension and normal wall thickness. No calculus or mass is seen in the lumen.

CBD is normal in diameter. No calculus is seen

Pancreas is normal in size, shape and echo texture.

Spleen is normal in shape, size and echo texture.

Right kidney show normal shape & size. Cortico-medullary differentiation is maintained. Right kidney show no calculus or hydronephrosis.

Left kidney show normal shape & size. Cortico-medullary differentiation is maintained. Left kidney show no calculus or hydronephrosis.

No free fluid is seen in the intra-peritoneal cavity. No evidence of mesenteric lymphadenopathy is seen.

Urinary bladder is over distended and is normal in shape, size and wall thickness. No mass or calculus is seen.

Prostate is normal in shape, size & echo texture. Volume of prostate is 12cc.

IMP: Normal study.

PLEASE CORRELATE CLINICALLY.

Dr. Pawan Joon

MD (Radio-diagnosis)



डायितिसिस, डायग्नोस्टिक एवं ओ.पी.डी.



भारत विकास परिषद्, महाराणा प्रताप न्यास द्वारा संचालित

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: 25-05-2019 15:13

X-Ray

X-RAY CHEST PA VIEW

Bilateral lung fields appears to be clear. No obvious pulmonary parenchymal lesion is seen.

Trachea is central.

Cardiac configuration appears to be normal with normal cardio-thoracic ratio.

Both costo phrenic angles and domes of diaphragm are normal.

Visualized soft tissue and bony thoracic cage appears to be normal.

PLEASE CORRELATE CLINICALLY.

DR. PAWAN JOON MD (Radio-diagnosis)



466 P, सेक्टर 12 A, नजदीक माधव भवन, गुरूग्राम (भारत विकास परिषद् महाराणा प्रताप न्यास, गुरूग्राम द्वारा संचालित)



Ref. No.:	Date:

TRANSTHORACIC ECHO-DOPPLER REPORT

Name

- Mr Arpit

Regn No.
Diagnosis

- 007504

ECHOCARDIOGRAPHY

Age/Sex - 28 YEARS / MALE

Date - 25/05/2019

OPD NO.- 0015669

M-Mode/2 -D Description:

Left Ventricle: No LVRWMA seen, normal LVEF=55%

<u>Left Atrium</u>: It is normal sized.

<u>Right Atrium</u>: It is normal sized.

Right Ventricle: It is normal sized. RV systolic function normal.

<u>Aortic Valve</u>: Aortic cusps normal.

<u>Mitral Valve</u>: It opens normally.

<u>Tricuspid Valve</u>: It appears normal.

Pulmonic Valve: its appears normal.

Main Pulmonary artery& its branches: Appear Normal.

Pericardium: There is no pericardial effusion.

Inter atrial septum: It is intact

Inter ventricular Septum: It is intact.

IVC: Normal size & respiratory variability.

Measurement (mm)

LEFT HEART			RIGHT HEART		
	Observed values (mm)	Normal values		Observed values (mm)	Normal values
Aortic root	26	20-36 (22mm/m2)	IVC size	SMALL CALIBRE	17-24 mm
Aortic valve opening	16	15-26(mm/m2)	IVC respiratory variability	normal	>50%
La size	22	19-40(mm/m2)	RA size	normal	<18cm2



466 P. सेवटर 12 A. नजदीक माधव भवन, सुरुग्राम (भारत विकास परिषद् महाराणा प्रताप न्यास, सुरुग्राम द्वारा संचातित)



LA volume index (ml/m2)	*	<34ml/m2			
LVID(D)	42	(ED=37-56)	RV basal		24-42mm
LVID(S)	26	1	RV mid cavity		20-35mm
IVS(D)	7	(ED=6-12)	RV longitudinal		56-86mm
IVS(S)	11		RVOT PROXIMAL	-	18-33mm
PW(D)	7	ED=(5-10)	RVTDI	16	>12cm/sec
PW(S)	10		RV free wall thickness	-	<5mm
LVEF (%)	55%	55%-80%	RVEF	normal	>44%

Doppler velocities (cm/sec)

Aortic valve		Pulmonary valve		
Max/Mean \	velocity cm/sec	112	Max velocity	normal
Max/Mean		mmHg	Max PG	-
	Mitral valve		Tricuspid valve	
E cm/sec	69	Max PG =	Max Velocity cm/sec	146
A cm/sec	59	Max Velocity =	E/A (0.8 -2.1)	-
DT		Max PG =	E/E(>6)	
E/E'	-	Mean Velocity =	S, Velocity(10 cm2/sec)	- 101 102

Regurgitation

MR		TR	
Severity	Nil	Severity	trivial
VC(mm)		VC (mm)	40
ERO (mm)			
RV (ml)			~ 15mmHg
Max velocity		RVSP	Tattiming



Ref. No.:...

विवेकानन्द आरोग्य केन्द्र

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			Date:
AR		PR	The state of the s
Severity	nil	Severity	nil
PHT (m sec)			

Final Interpretation

VC (mm)

Study done at HR of 85 beats per minute.

- 1. No LVRWMA seen, normal LVEF=55% seen.
- 2. Rest CCD normal.
- 3. Nil MR, trace TR (RVSP~ 15 mmHg), RV function normal present.
- 4. MIP- normal.
- 5. Aortic cusps normal, nil AR seen. Peak Aortic Velocity around 112 cm/sec.
- 6. IVC small calibre and respiratory variability >50% Present.
- 7. No I/C Clot / no Vegetation / no PE seen.

DR. ARUN KUMAR GARG (MBBS PGDCC FNIC FICC) (CLINICAL CARDIOLOGIST)