

Seema P  
Solanki



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# CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Seema Solanki on \_\_\_\_\_

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

<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	Tick
<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. <u>Hypertension with Mild LUN with S.I.L.V.D.D</u></p> <p>2. <u>Small Multiple Fibroids</u></p> <p>3. <u>Cervicitis</u></p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after <u>3 m,</u></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. Ashok  
 Medical Officer  
 The Apollo Clinic, (Location)

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

**Dr. ASHOK K. GUPTA**  
**MBBS, MD**  
 Consulting Physician  
 Regd. No. 7513 (HMC)

## उपलब्ध ओ.पी.डी. सुविधाएँ

- हृदय रोग चिकित्सा  
(Cardiology)
- बाल एवं भ्रूण रोग चिकित्सा  
(Paediatrics & Fetal Medicine)
- बाल रोग चिकित्सा  
(Paediatrics)
- स्त्री रोग चिकित्सा  
(Gynaecology)
- हड्डी रोग चिकित्सा  
(Orthopaedics)
- दन्त चिकित्सा  
(Dental Care)
- सामान्य चिकित्सा  
(General Physician)
- फिजियोथैरेपी  
(Physiotherapy)
- चर्म रोग चिकित्सा  
(Dermatology)
- मूत्र रोग चिकित्सा  
(Urology)
- गुर्दा रोग चिकित्सा  
(Nephrology)

## उपलब्ध जाँच

- डायलिसिस (Dialysis)
- अल्ट्रासाउण्ड (Ultrasound)
- ईको (Echo)
- स्ट्रेस ईको (Stress Echo)
- टी.एम.टी. (T.M.T.)
- पी.एफ.टी. (Lung Function Test)
- ई.सी.जी. (E.C.G.)
- ई.ई.जी. (E.E.G.)
- एक्स-रे (X-Ray)
- मैमोग्राफी (Mammography)
- ओ.पी.जी. (Dental X-Ray)
- हॉल्टर टेस्ट (Holter Test)

Not for Medico Legal Purpose

Ref. No.:.....

Date:.....

Name of patient: Mrs. Seema Solanki	Age: 53	M/F: F
Consultant:	Speciality: Package	
MR No : MR007561	Visit No: OP015792	Date: 27-05-2019

No complaints.

HT - 5' 11"  
WT - 74 kg  
RR - 90 / min  
BP - 170 / 100 mm Hg

खून एवं मल-मूत्र की जाँच NABL द्वारा मान्यता प्राप्त MoIQ लैब द्वारा की जाती है।

सम्पर्क सूत्र: 0124-2224102 / 103 / 104 | Mob.: 8683061905, 8683061906

ओ.पी.डी. पर्ची का शुल्क केवल तीन दिन के लिए मान्य रहेगा।

## Radiology Report

Name : Mrs. Seema Solanki  
Age/Gender : 53 Y/F  
Prescribed Doctor : Self

MR No : MR007561  
Visit ID : OP015792  
Report Date : 27-05-2019 09:34

## 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 normal shape and size with normal wall thickness. No mass or calculus is seen.

**Uterus (Postmenopausal status)** it appears to be mildly bulky and measures 80 x 45 x 40mm. A small relatively defined hypoechoic lesion measuring approx. 22 x 18mm is seen in right anterior wall of uterus. Another similar hypoechoic lesion measuring approx. 11 x 10mm is also seen in anterior wall.

A similar hypoechoic lesion measuring approx. 18 x 15mm is also seen in the posterior wall.

Endometrial thickness is 4.1mm.


**Both ovaries** are not visualized likely due to postmenopausal atrophy.

**Bilateral adnexae** are clear.

**Cul-de-sac** is clear

**Impression:- Mildly bulky uterus with ? few small uterine fibroids.**

**Adv:- Clinical correlation and TVS for further evaluation.**

  
Dr. Pawan Joon  
MD ( Radio- diagnosis)

## Radiology Report

Name : Mrs. Seema Solanki  
Age/Gender : 53 Y/F  
Prescribed Doctor : Self

MR No : MR007561  
Visit ID : OP015792  
Report Date : 28-05-2019 15:16

## X-Ray

### X-RAY CHEST PA VIEW

*Rotated & mid expiratory radiograph.*

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


Trachea is central.

**Cardiac shadow appears to be mildly enlarged ? cardiomegaly ? due to rotation.**

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)



# विवेकानन्द आरोग्य केन्द्र

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



Ref. No.:.....

Date:.....

## TRANSTHORACIC ECHO-DOPPLER REPORT

Name - MRS Seema Solanki Age/Sex - 53 YEARS FEMALE  
Regn No. - 007561 Date - 53/05/2019  
Diagnosis - ECHOCARDIOGRAPHY OPD NO.- 015792

### M-Mode/2 -D Description:

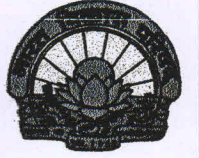
- Left Ventricle: No LVRWMA seen, normal LVEF=55%  
Left Atrium : It is normal sized.  
Right Atrium: It is normal sized.  
Right Ventricle: It is normal sized. RV systolic function normal.  
Aortic Valve : Aortic cusps normal.  
Mitral Valve: It opens normally.  
Tricuspid Valve: It appears normal.  
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		
	<u>Observed values (mm)</u>	<u>Normal values</u>		<u>Observed values (mm)</u>	<u>Normal values</u>
Aortic root	28	20-36 (22mm/m <sup>2</sup> )	IVC size	109	17-24 mm
Aortic valve opening	11	15- 26(mm/m <sup>2</sup> )	IVC respiratory variability	normal	>50%
La size	33	19- 40(mm/m <sup>2</sup> )	RA size	normal	<18cm <sup>2</sup>

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LA volume index (ml/m <sup>2</sup> )		<34ml/m <sup>2</sup>		-	
LVID(D)	39	(ED=37-56)	RV basal	-	24-42mm
LVID(S)	31		RV mid cavity	-	20-35mm
IVS(D)	11	(ED=6-12)	RV longitudinal	-	56-86mm
IVS(S)	13		RVOT PROXIMAL	-	18-33mm
PW(D)	10	ED=(5-10)	RVTDI	17	>12cm/sec
PW(S)	12		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	135	Max velocity	85 cm/sec
Max /Mean PG	mmHg	Max PG	-
Mitral valve		Tricuspid valve	
E cm/sec	77	Max Velocity cm/sec	120
A cm/sec	91	E/A (0.8 -2.1)	-
DT		E/E(>6)	-
E'	06	S, Velocity(10 cm <sup>2</sup> /sec)	-
		Max PG =	
		Max Velocity =	
		Mean Velocity =	

### Regurgitation

MR		TR	
Severity	Nil	Severity	Nil
VC (mm)		VC (mm)	
ERO (mm)			
RV (ml)			
Max velocity		RVSP	~ 10mmHg



# विवेकानन्द आरोग्य केन्द्र

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



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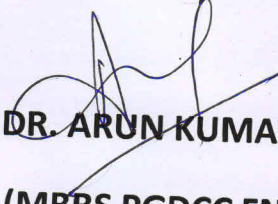
Date:.....

AR		PR	
Severity	nil	Severity	Trace
PHT (m sec)			
VC (mm)			

## Final Interpretation

Study done at HR of 70 beats per minute.

1. No LVRWMA seen, normal LVEF=55% seen.
2. Mild concentric LVH seen, Rest CCD normal.
3. Nil MR, Nil TR (RVSP~ 10 mmHg), trace PR, RV function normal present.
4. MIP- grade 1 diastolic dysfunction.
5. Aortic cusps normal, nil AR seen. Peak Aortic Velocity around 135 cm/sec.
6. IVC small caliber 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)

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