

SAI GANESH HOSPITAL

DR.PANKAJ AGARWAL (MBBS, DCH, AFIH).

Certifying Surgeon, Govt. Of Maharashtra Factories Rules, 1963

MEDICAL EXAMINATION REPORT			
Identification Mark	Date	Referred By	Marital Status
MOLE ON NECK	26/04/2023		MARRIED

Name of Examinee	Age	Sex	Date of birth
JITENDRA KUMAR	33 YRS	MALE	08/02/1990

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)			
168 CM	62 KG	70 BPM	116/76 MM OF HG			
Personal History		Diet/Alcohol/Tobacco/Smoking/Medical/NAD✓				
Family History		Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓				
Past History		Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓				
Present Complaints		NAD				
Clinical Examination (General)		General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>
		Anem ia	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
		Jaundice :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
		Cyanosis :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
		Lymphadenopathy :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
		Oedema :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
J.V.P. :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>		
Clinical Examination (Systemic)		Respiratory System	AEBE			
		Central Nervous Systems :	CONSCIOUS ORIENTED			
		Cardiovascular System	S ₁ S ₂ NORMAL			
		Abdominal System	NORMAL			

	Color Vision	Right Eye	Left Eye
Vision / Ophthalmic check up	NORMAL	6/6	6/6
ENT check up	NAD		
Dental check up	NAD		
Investigation	<p>TEMP :- 94.6F</p> <p>SPO2:- 97%</p> <p><u>NOT SUFFERING FROM SYMPTOMS</u></p> <p><u>COVID -19</u></p>		
Result / Remarks	FIT FOR WORK		

J. Bhaeri

Signature of Patient
Examiner.

Dr. Umakant Karmalkar

DR. UMAKANT KARMALKAR
MBBS, D.ORTHO, DNB ORTHO,
AFI ENDOSCOPIC SPINE
MARK Seal & Sign. Of Medical
SURGEON. REG. NO: 2000029416

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MEDICAL EXAMINATION REPORT			
Identification Mark	Date	Referred By	Marital Status
MOLE ON CHEST	26/04/2023		MARRIED

Name of Examinee	Age	Sex	Date of birth
KOKANE VIJAY SHIVAJI	32 YRS	MALE	04/03/1991

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)		
168 CM	68 KG	74 BPM	112/86 MM OF HG		
Personal History	Diet/Alcohol/Tobacco/Smoking/Medical/NAD✓				
Family History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓				
Past History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓				
Present Complaints	NAD				
Clinical Examination (General)	General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>
	Anem ia	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Jaundice :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Cyanosis :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Lymphadenopathy :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Oedema :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	J.V.P. :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
Clinical Examination (Systemic)	Respiratory System	AEBE			
	Central Nervous Systems :	CONSCIOUS ORIENTED			
	Cardiovascular System	S ₁ S ₂ NORMAL			
	Abdominal System	NORMAL			

Vision / Ophthalmic check up	Color Vision	Right Eye	Left Eye
	NORMAL	6/6	6/6
ENT check up	NAD		
Dental check up	NAD		
Investigation	TEMP :- 95.2F		
	SPO2:- 99%		
	<u>NOT SUFFERING FROM SYMPTOMS</u>		
	<u>COVID -19</u>		
Result / Remarks	FIT FOR WORK		

V. Skolankar

Signature of Patient
Examiner.

U. Karmalkar

Dr. UMAKANT KARMALKAR
MBBS, D.ORTHO,DNB ORTHO,
AFIIL ENDOSCOPIC SPINE
MARK Seal & Sign. Of Medical
SURGEON.REG. NO. 2006020416

Plot No.X 67 Shop No1 Maharana Pratap Chowk, Bajaj Nagar MIDC, AURANGABAD

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MEDICAL EXAMINATION REPORT			
Identification Mark	Date	Referred By	Marital Status
MOLE ON NECK	26/04/2023		MARRIED

Name of Examinee	Age	Sex	Date of birth
BHAGAWAT VITTHALRAO SHINDE	34 YRS	MALE	12/08/1988

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)			
171 CM	64 KG	78 BPM	122/76 MM OF HG			
Personal History	Diet/Alcohol/Tobacco/Smoking/Medical/NAD✓					
Family History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓					
Past History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓					
Present Complaints	NAD					
Clinical Examination (General)	General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>	
	Anem ia	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Jaundice :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Cyanosis :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Lymphadenopathy :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Oedema :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	J.V.P. :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
Clinical Examination (Systemic)	Respiratory System	AEBE				
	Central Nervous Systems :	CONSCIOUS ORIENTED				
	Cardiovascular System	S ₁ S ₂ NORMAL				
	Abdominal System	NORMAL				

Vision / Ophthalmic check up	Color Vision	Right Eye	Left Eye
	NORMAL	6/6	6/6
ENT check up	NAD		
Dental check up	NAD		
Investigation	TEMP :- 95.1F		
	SPO2:- 98%		
	<u>NOT SUFFERING FROM SYMPTOMS</u>		
	<u>COVID -19</u>		
Result / Remarks	FIT FOR WORK		
<p>Signature of Patient Examiner.</p> <p><i>B. Shinde</i></p> <p><i>U. Karmalkar</i></p> <p>Dr. UMAKANT KARMALKAR MBBS, D.ORTHO,DNB ORTHO, AFIH,ENDOSCOPIC SPINE SURGEON,REG. NO. 2006020416 MARKI Seal & Sign. Of Medical</p>			

Plot No.X 67 Shop No1 Maharana Pratap Chowk, Bajajnagar MIDC, AURANGABAD

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DR.PANKAJ AGARWAL (MBBS, DCH, AFIH).

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MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
MOLE ON CHEST	26/04/2023		MARRIED

Name of Examinee	Age	Sex	Date of birth
SHIVPRASAD DATTARAO THENGE	30 YRS	MALE	12/03/1993

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)			
168 CM	56 KG	80 BPM	126/86 MM OF HG			
Personal History	Diet/Alcohol/Tobacco/Smoking/Medical/NAD✓					
Family History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓					
Past History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓					
Present Complaints	NAD					
Clinical Examination (General)	General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>	
	Anem ia	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Jaundice :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Cyanosis :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Lymphadenopathy :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
	Oedema :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>	
J.V.P. :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>		
Clinical Examination (Systemic)	Respiratory System	AEBE				
	Central Nervous Systems :	CONSCIOUS ORIENTED				
	Cardiovascular System	S₁ S₂ NORMAL				
	Abdominal System	NORMAL				

Vision / Ophthalmic check up	Color Vision	Right Eye	Left Eye
	NORMAL	6/6	6/6
ENT check up	NAD		
Dental check up	NAD		
Investigation	TEMP :- 96.1F		
	SPO2:- 98%		
	<u>NOT SUFFERING FROM SYMPTOMS</u>		
	<u>COVID -19</u>		
Result / Remarks	FIT FOR WORK		

S. D. H. ...

Signature of Patient
Examiner.

Dr. Umakant Karmalkar

Dr. UMAKANT KARMALKAR
 MBBS, D.ORTHO, DNB ORTHO,
 MARKSHEET SIGNIFICANT
 SURGEON, REG. NO. 2006020416

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MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
MOLE ON CHEST	26/04/2023		MARRIED

Name of Examinee	Age	Sex	Date of birth
GAJANAN SAMADHAN MALI	31 YRS	MALE	02/01/1992

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
162 CM	68 KG	82 BPM	120/82 MM OF HG

Personal History	Diet/Alcohol/Tobacco/Smoking/Medical/NAD✓
Family History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓
Past History	Allergy/Asthma/Skin Disease/T.B./D.M./R.H. Arthritis/H.T./I.H.D. Cancer/Surgeries/Mental Stress/Paralysis/Any Other / Nil✓
Present Complaints	NAD

Clinical Examination (General)	General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>
	Anem ia	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Jaundice :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Cyanosis :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Lymphadenopathy :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Oedema :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	J.V.P. :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>

Clinical Examination (Systemic)	Respiratory System	AEBE
	Central Nervous Systems :	CONSCIOUS ORIENTED
	Cardiovascular System	S₁ S₂ NORMAL
	Abdominal System	NORMAL

	Color Vision	Right Eye	Left Eye
Vision / Ophthalmic check up	NORMAL	6/6	6/6
ENT check up	NAD		
Dental check up	NAD		
Investigation	<p>TEMP :- 96.2F</p> <p>SPO2:- 97%</p> <p><u>NOT SUFFERING FROM SYMPTOMS</u></p> <p><u>COVID -19</u></p>		
Result / Remarks	FIT FOR WORK		

Gavarambadi

Signature of Patient
Examiner.

U. Umakant Karmalkar

Dr. UMAKANT KARMALKAR
 MBBS, D.ORTHO, DNB ORTHO,
 AFIH, ENDOSCOPIC SPINE
 SURGEON, DEPT. OF ORTHO
 MARKS & SIGNATURE MEDICAL