

SAI GANESH HOSPITAL



DR .MILIND DESHPANDE (MBBS, MS AFIH)

Certifying Surgeon, Govt. Of Maharashtra Factories Rules, Act 1948

MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
MOLE ON CHEST	03/01/2024		MARRIED

Name of Examinee	Age	Sex	Date of birth
VASANT VISHNU BADE	32 YRS	MALE	09/05/1991

Height (Cm)	WEIGHT[KG]	Pulse /bpm	Blood Pressure (mm of Hg)
167 CM	65 KG	80 BPM	126/84 MM OF HG

Personal History	Diet/Alohol/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

General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>
Anemia	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	NAD

DR. UMAKANT KARALKAR
MBBS, D.Ortho, DNB Ortho
AFIH ENDOSCOPIC SPINE
SURGEON REG. NO. 200802018

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	Color Vision	Right Eye	Left Eye
Vision / Ophthalmic check up	NORMAL	6/6	6/6
ENT check up	NAD		
Dental check up	NAD		
Investigation	TEMP :-95.4 F		
	SPO2 :-98%		
	NOT SUFFERING FROM SYMPTOMS		
Result / Remarks	COVID -19		
	FIT FOR WORK .		


Signature of Patient


Dr. UMAKANT KARMALKAR
MBBS, D.ORTHO, DNB ORTHO,
AFIH, ENDOSCOPIC SPINE
SURGEON, REG. NO. 20060204