

AJANTA HOSPITAL

DR. PRAVEEN CHABUKSWAR MBBS. MD (AFIH)

Certifying Surgeon, Govt. Of Maharashtra Factories Rules, 1963

MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
Mole on right hand	05/08/22		married

Name of Examinee	Age	Sex	Date of birth
Ajit yadav	26 yrs	Male	10/08/1995

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
161cm	56kg	82bpm	122/82 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"/>
	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 (N)
	Abdominal System	NAD

	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 :- 95.2 f		
	SpO2 :- 99 %		
Result / Remarks	Not suffering from symptoms Covid-19		
	fit for work.		

Abityadar
Signature of Patient

Umakant Karmalkar
Dr. UMAKANT KARMALKAR
MBBS, D.ORTHO, DNB ORTHO,
AFIH, ENDOSCOPIC SPINE
SURGEON. REG. NO. 2006020416

Seal & Sign. Of Medical Examiner.

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
male on left cheek	08/08/22		married



Name of Examinee	Age	Sex	Date of birth
Ashok Govind Dhimate	40yrs	male	12/01/1980

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
161 cm	47 kg	74 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	✓	Negative	
	Anemia	Positive		Negative	✓
	Jaundice :	Positive		Negative	✓
	Cyanosis :	Positive		Negative	✓
	Lymphadenopathy :	Positive		Negative	✓
	Oedema :	Positive		Negative	✓
	J.V.P. :	Positive		Negative	✓

Clinical Examination (Systemic)	Respiratory System	AEBE
	Central Nervous Systems :	conscious-oriented
	Cardiovascular System	S1 S2 (N)
	Abdominal System	NAD

	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 :- 99%		
Result / Remarks	Not suffering from symptoms covid-19		
	Fit for work.		
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Signature of Patient </div> <div style="text-align: right;">  Dr. UMAKANT KARMALKAR MBBS, D.ORTHO, DNB ORTHO, AFIH, ENDOSCOPIC SPINE SURGEON. REG. NO. 2006020416 Seal & Sign. Of Medical Examiner. </div> </div>			

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
male on neck	30/07/22		Married

Name of Examinee	Age	Sex	Date of birth
Amvind Baburao Jadhav	40 yrs	male	01/07/1982

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
163 cm	51 kg	82 bpm	120/70 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	Negative
	Anemia	Positive	Negative
Jaundice :	Positive	Negative	
Cyanosis :	Positive	Negative	
Lymphadenopathy :	Positive	Negative	
Oedema :	Positive	Negative	
J.V.P. :	Positive	Negative	

Clinical Examination (Systemic)	Respiratory System	AEBE
	Central Nervous Systems :	conscious oriented
	Cardiovascular System	S1 S2 (N)
	Abdominal System	NAD

	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 :- 95.3 f		
	SpO2 :- 99.1.		
Result / Remarks	Not suffering from symptoms Covid-19		
	fit for work.		
Signature of Patient	 Seal & Sign. Of Medical Examiner. <div style="text-align: right;">  Dr. UMAKANT KARMALKAR MBBS, D.ORTHO DNB ORTHO, AFIH, ENDOSCOPIC SPINE SURGEON, REG. NO. 2006020416 </div>		

SAI GANESH HOSPITAL

DR. PANKAJ AGARWAL MBBS. DCH (AFIH)

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MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
Mole on neck	30/07/22		married



Name of Examinee	Age	Sex	Date of birth
Namde Madhav Ambatwad	42yrs	male	08/06/1980

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
174cm	73kg	82bpm	130/80mm 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"/>
	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 (N)
	Abdominal System	NAD

	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 :- 96.3°f SpO2 :- 98%		
Result / Remarks	Not suffering from symptoms Covid-19 fit for work		
<p style="text-align: right;">  Dr. UMAKANT KARMALKAR MBBS, D.ORTHO, DNB ORTHO, AFII, ENDOSCOPIC SPINE SURGEON, REG. NO. 2006020416 </p> <p>Signature of Patient, </p> <p style="text-align: right;">Seal & Sign. Of Medical Examiner.</p>			

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
Male on left cheek	03/08/22		Married

Name of Examinee	Age	Sex	Date of birth
Shyamdev Santaraj yadav	34yrs	Male	1988


Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
164cm	59kg	74bpm	120/80 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

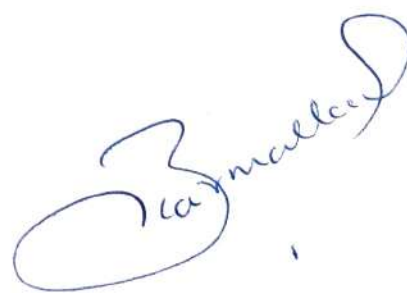
Clinical Examination (General)	General Condition	Positive	<input checked="" type="checkbox"/>	Negative	<input type="checkbox"/>
	Anemia	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	Jaundice :	Positive	<input type="checkbox"/>	Negative	<input checked="" type="checkbox"/>
	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 (N)
	Abdominal System	NAD

	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 :- 97%		
Result / Remarks	Not suffering from symptoms of Covid-19		
	fit for work.		



Signature of Patient



Dr. UMAKANT KARMALKAR
MBBS, D.ORTHO, DNB ORTHO,
AFIH, ENDOSCOPIC SPINE
SURGEON REG. NO. 1005020410
Seal & Sign. Of Medical Examiner.

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
Male on neck	03/08/22		married

Name of Examinee	Age	Sex	Date of birth
Jeevan Sakharam Deshamukh	50yrs	Male	16/11/1972

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
157cm	60kg	86bpm	130/80 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 ✓	Negative
	Anemia	Positive	Negative ✓
	Jaundice :	Positive	Negative ✓
	Cyanosis :	Positive	Negative ✓
	Lymphadenopathy :	Positive	Negative ✓
	Oedema :	Positive	Negative ✓
	J.V.P. :	Positive	Negative ✓
Clinical Examination (Systemic)	Respiratory System	AEBE	
	Central Nervous Systems :	Conscious oriented	
	Cardiovascular System	S1 S2 (N)	
	Abdominal System	NAD	

	with spect		
	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 :- 96.3 f		
	SpO2 :- 97%		
Result / Remarks	Not suffering from symptoms covid - 19		
	fit for work.		
Signature of Patient	 Dr. UMAKANT KARMALKAR MBBS, D.ORTHO, DNB ORTHO, AFII, ENDOSCOPIC SPINE SURGEON. REG. NO. 2006020416 Seal & Sign. Of Medical Examiner.		

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MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
Mole on left cheek	30/07/22		married

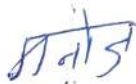
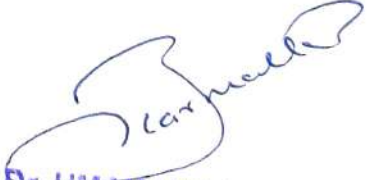
Name of Examinee	Age	Sex	Date of birth
Manoj Kumar	37 yrs	male	01/01/1985

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
168cm	59kg	74bpm	122/82 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"/>
	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 (N)
	Abdominal System	NAD

	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 :- 94.4 f SPO2 :- 99% Not suffering from symptoms of covid-19		
Result / Remarks	fit for work		
Signature of Patient	 Seal & Sign. Of Medical Examiner.  Dr. UMAKANT KARMALKAR MBBS, D. ORTHO, DNB ORTHO, AFH ENDOSCOPIC SPINE SURGEON, REG. NO. 2006020416		

AJANTA HOSPITAL

DR. PRAVEEN CHABUKSWAR MBBS. MD (AFIH)

Certifying Surgeon, Govt. Of Maharashtra Factories Rules, 1963

MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
Mole on chest	08/08/22		unmarried

Name of Examinee	Age	Sex	Date of birth
Vinay Kumar	21 yrs	Male	04/08/22

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
164 cm	56 kg	86 bpm	120/70 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	Negative
	Anemia	Positive	Negative
	Jaundice :	Positive	Negative
	Cyanosis :	Positive	Negative
	Lymphadenopathy :	Positive	Negative
	Oedema :	Positive	Negative
	J.V.P. :	Positive	Negative
Clinical Examination (Systemic)	Respiratory System	AEBE	
	Central Nervous Systems :	conscious oriented	
	Cardiovascular System	S1 S2 (N)	
	Abdominal System	NAD	

	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 :- 95.2.f		
	SpO2 :- 98%.		
Result / Remarks	Not suffering from symptoms Covid-19		
	fit for work.		

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Signature of Patient



Dr. UMAKANT KARMALKAR
 MBBS, D.ORTHO, DNB ORTHO,
 AFH, ENDOSCOPIC SPINE
 SURGEON. REG. NO. 2006020416

Seal & Sign. Of Medical Examiner.

AJANTA HOSPITAL

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MEDICAL EXAMINATION REPORT			
Identification Mark	Date	Referred By	Marital Status
Mole on neck	10/08/22		married



Name of Examinee	Age	Sex	Date of birth
Vinod Marchhindra yeole	45 yrs	male	05/01/1977

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
156cm	52kg	86bpm	124/86mm of Hg

Personal History	Diet/Alcohol/Tobacco/Smoking/Medical/NAD
Family History	
Past History	
Present Complaints	

Clinical Examination (General)	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 (N)
	Abdominal System	NAD

	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 :- 96.8 f		
	SpO2 :- 98 %		
Result / Remarks	Not suffering from symptoms of Covid-19		
	fit for work.		
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Signature of Patient </div> <div style="text-align: right;">  Dr. UMAKANT KARMALKAR MBBS, D.ORTHO, DNB ORTHO, AFIH, ENDOSCOPIC SPINE SURGEON. REG. NO. 2006020416 Seal & Sign. Of Medical Examiner. </div> </div>			

AJANTA HOSPITAL

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MEDICAL EXAMINATION REPORT

Identification Mark	Date	Referred By	Marital Status
Mole on left cheek	10/08/22		unmarried



Name of Examinee	Age	Sex	Date of birth
Ankan Maheshkumar Dhimate	29 yrs	Male	1999

Height (Cm)	Weight (kg)	Pulse /bpm	Blood Pressure (mm of Hg)
169 cm	64 kg	82 bpm	112 / 72 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"/>
	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 (N)
	Abdominal System	NAD

	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 :- 97%		
Result / Remarks	Not suffering from symptoms of Covid-19		
	fit for work.		
Signature of Patient	 Seal & Sign. Of Medical Examiner. <div style="text-align: right;">  Dr. UMAKANT KARMALKAR MBBS, D.ORTHO,DNB ORTHO, AFIH,ENDOSCOPIC SPINE SURGEON.REG. NO. 2006020416 </div>		