PERSONAL MEDICAL FORM

Name: <u>DIPANG</u>	BHAI GOHIL	: <u>25.12.2024</u>			
DOB/AGE:11.12	1.1997/ <u>27</u>	Designation:			
Sex:MALE		DIVISION/BU:			
History:					
Present History	NO				
Past History	Diabetes / Hyperten	sion / Tuberculosis / As	thma / Epilepsy / Other:NO		
Family History	NIL				
Personal History	NIL				
Addiction	Tobacco / Gutkha / Smoking / Alcohol: NO				
General Exam	nination:				
Height:	<u>157</u> c.m.	T/P/R	N/76/17		
Weight:	64 kg	B. P	100/80mm Hg		
R.S.	NAD				
	NAD				
C.V.S		NAD			
C.N.S		NAD			
A.S	NAD				
ACUITY O	DE VISION	RT.EYE	LT.EYE		
WITHOUT GLASS	DISTANT	6/6	6/6		
	NEAR	N/6	N/6		
WITH GLASS	DISTANT	NIL			
			NIL		
	NEAR .	NIL	NIL		
COLOUR BLINDNESS	:	NO			
Remark:					
Advice:					

Dr Jayesh M Patel

(MBBS.CIH) REG.NO.G-34998

The Worker is FIT/UNFIT for the assigned job.

FORM NO. 33

(Prescribed under Rule 68-T and 102)

Certificate of Fitness of employment in hazardous process and operations.

(TO BE ISSUED BY FACTORY MEDICAL OFFICER)

1. Serial number in the register of adult:

worker

2. Name of the person examined : DIPANGBHAI GOHIL

3. Father's Name : MANUBHAI GOHIL

4 Sex : MALE

5. Residence : SIM VISTAR AMRAPARA

SINDHROT VADODARA

6. Date of birth, if available : 11.11.1997

7. Name & address of the factory

8. The worker is employed/proposed :

(a) Hazardous process

(b) Dangerous operation

I certify that I have personally examined the above named person whose identification marks are MOLE ON CHEST and who is desirous of being employed in above mentioned process/operation and that his/her age, as can be ascertained from my examination, is 27 years.

In my opinion he/she is fit for employment in the Said manufacturing process/operation.

In my opinion he/she is unfit for employment in the said manufacturing process/operation for the reason. He/She is referred for further examination to the Certifying Surgeon.

The serial number of previous certificate is ______.

Dr.jayesh patel MBBS.CIH REG NO.G-34998

Signature or left hand thumb impression of the person examined

Signature of the Factory Medical Officer Stamp of factory Medical Officer with Name of the Factory FORM NO. 32 (Prescribed under Rule 68-T and 102)

Health Register

1. Serial Number in the Register of adult Workers: 2. Name of Worker: DIPANGBHAI GOHIL

3. Sex:MALE

4. Date of birth: 11.11.1997

	Signature with date PO lesibəM yrotset	17		Dr.jayesh patel MBBS.CIH
ırk	Date of issuing fitness Certificate	16		ΨN
If declared unfit for work	Date of declaring Him Unfit for that work	15		٧N
clared u	Reasons for such withdrawal	14		ΑN
If de	Period of temporary Withdrawal from that work	13		ΑN
	Result Fit/Unfit	12		TIH
mination refore	Nature of tests & results thereof	11		EXAMINITON BLOOD, X RAY
Medical examination Results therefore	Signs and symptoms Observed during notinination	10		
4	Date	6	•	4202.21.2
Discharge/ leaving or transfer	Keasons	8		
Dischar leaving transfer	Date	7		
	Date of posting	9		
	Raw materials, produc By-products likely to exposed to	5		
noite	Nature of job or occup	4		
noits:	Dangerous process/oper	3		
SSƏO	Vame of Hazardous pro	2		
S	Department Work	-		



PRACHI HEALTH CARE CENTRE



Name: Dipangbhai M Gohil

Sex: Male

Ref.By.DR.Jayesh Patel

Age: 27 year

Date: 25/12/2024

Lab No: 511

HEMATOLOGY REPORT

INVESTIGATIONS	Result	DEEEDENCE DANCE		
Hemoglobin	13.9	REFERENCE RANGE		
RBC Count		M: 13-18, F: 11.5-16.5 gm/dl		
	5.02	M: 4.6-6.5, F: 3.9-5.6 / cumm		
P.C.V	41.3	34-54 %		
M.C.V	82.3	79-101 fl		
M.C.H	27.8	26-36 pg		
M.C.H.C	33.8	31-37 g/dl		
Total Count (WBC)	8500	4000-11000/cumm		
Differential WBC Count	(M)			
Polymorphs	55	40-75 %		
Lymphocytes	37	20-45 %		
Eosinophils	02	1.6 %		

Erythrocyte Sedimentation Rate

After One hour	05	M: 0-15 F: 0-20 mm
Platelet Count	2.19	1.5-4.0 lacs/cumm
		2.0 1.0 racs/ curint

06

Malarial Parasites

Monocytes

Blood Group "B" Rh Positive

BIOCHEMISTRY

<u>Result</u> 70	Reference Range <140 mg/dl
	140 mg/ tr
29	Up to 40 IU/L
0.89	0.5-1.4 mg/dl
	70

OTH

2-10

Dr.Dipak Patanvadiya (M.D.D.C.P)

(Consultant Pathologist & Microbiologist)



Audiometry Report

Sr. No. -

12

Organization - ABB

Name -

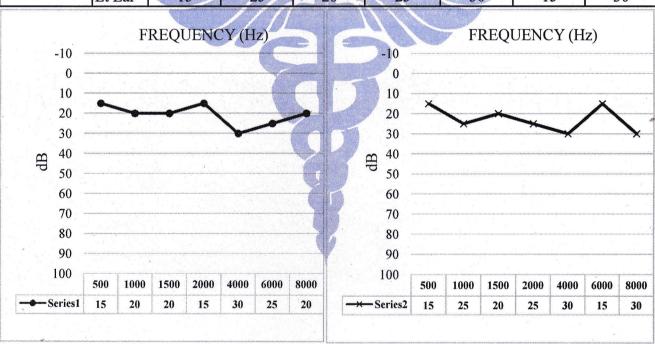
DIPANGBHAI MANUBHAI GOHIL

Age (yrs) -

27 Sex - Male

Date of Examination - 25.12.2024

	HTZ	500	1000	1500	2000	4000	6000	8000
DECIBLE	Rt Ear	15	20	20	15	30	25	20
	Lt Ear	15	25	20	25	30	15	30



Observation -

Right Ear -

Normal Hearing

Left Ear -

Normal Hearing

Remarks -

B/l Normal Hearing

Dr. Jayesh M. Patel

Reg No. G-34998(MBBS.,CIH)