



Dedicated Freight Corridor Corporation of India Ltd.

(A Government of India Enterprises)

5th Floor, Pragati Maidan, Metro Station Building Complex, New Delhi- 110001

Corporate Identity Number U60232DL2006GOI155068

Web: www.dfccil.com

No. 2020/HQ/Admin/RTI-26

New Delhi: 16.01.2020

Sh. Rakesh Nayak
Rajasthan

Subject: Providing information w.r.t. Original Application received under the RTI Act.2005.

Reference: Your RTI Application dated 09.01.2020 received through DOPT.

Information i. r. o. your above RTI application as received is attached.

Appellate Authority's name and address is as under;

Shri Satish Kothari, GGM/Administration DFCCIL,
5th Floor, Pragati Maidan Metro Station Building, New Delhi-110001.

(S.K.PANDA)

Dy. G.M./Admn.(PIO)

E-mail: skpanda@dfcc.co.in

9717636811

DA: 05 sheets

दिनांक: 15.01.2020

Name of Applicant: Online RTI Application of Sh. Rakesh Nayak, Kota.

Ref: DGM/Admin.(PIO)'s Note No. 2020/HQ/ADMIN/RTI-26 Dated: 10.01.2020

The above online RTI application received by the undersigned on 10.01.2020, which is forwarded by the deemed PIO. On scrutiny, it is found that in the above said online RTI application pertains to Rectt. Section. Information sought in details and proposed reply/ remarks are as under:

Item No.	Information Sought	Proposed Reply/Remarks
1	Medical examination report of Rakesh Nayak , Post- Junior Executive(S&T), Roll No. 27061080023. Advertisement number- 11/2018.	As per available record, copy of Medical Report of Roll No. 27061080023 (Rakesh Nayak), Post- Jr. Executive (S&T) is attached (04 pages).

DGM/Admin.(PIO) may obtain the necessary fee for providing the above information, as per RTI Act. 2005.

RAM
15-01-2020

उप महाप्रबन्धक / मानव संसाधन-IV

उप महाप्रबन्धक/ प्रशासन (पी. आई. ओ.)

28/1/20
15/1

RECEIVED IN PIO'S OFFICE
Dy. No.: 65/2020
Date: 15-1-20
Sign.:

Medical Report

Roll No. 27061080023

Post Jr. Executive (S.R) Medical At. Kailash Hospital



RAKESH NAYAK

(a) Candidate's statement and declaration.

The candidate must make the statement required below prior to his Medical Examination and must sign the declaration 'appended thereto'.

1. State your name in full (in block letters):

RAKESH NAYAK

3(b). Any other disease or accident requiring confinement to bed and medical or surgical treatment:

NO

2(a). State your age and birth place.

Age-28 year / Kota (RAJASTHAN)

3(c) Whether underwent any eye surgery (Radical Keratotomy/ Lasik/ Excimer etc.) at any time. If yes, details thereof:

NO

2(b) Do you belong to races such as Gorkhas, Garhwalis, Assamese, Nagaland Tribal etc, whose average height is distinctly lower? Answer 'Yes' or 'No' and if the answer is 'Yes' state the name of the tribe race:

NO

4. Have you suffered from any form of nervousness due to overwork or any other causes

NO

3(a). Have you ever had small-pox intermittent or any fever, enlargement or suppuration of glands, spitting of Blood, asthma, heart diseases lung disease, fainting attacks, rheumatism, appendicitis:

NO

5. Have you been allotted to any service/posts on the basis of previous years exams. If yes, give details thereof

Have you joined the said service/post.....

NO

6. Furnish the following particulars concerning your family:-

Father's age, if living & state of health	Father's age at death & cause of death	No. of brothers living, their ages & state of health	No. of brothers dead, their ages & cause of death	Mother's age, if living & state of health	Mother's age at death & cause of death	No. of sister living, their ages & state of health	No. of sisters dead, their ages & cause of death
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)

55 year

58 year

1

32 year

good

good

good

Contd.....

Roll No. 27061080023

Present Address 98/A Railway work shop colony Kota Junction Kota RAJASTHAN - 324002

Identification marks 10. 98/A RWS Colony Kota

Table with 2 columns and 3 rows. Row 1: 7. Have your been examined by Medical Board before? NO; 10. When & where was the Medical Board held?; Row 2: 8. If answer to the above is 'Yes' please state what Service (s)/ Post(s) you were examined for? N/A; 11. Result of the Medical Board's examination. If communicated to you or if known:-; Row 3: 9. Who was the examining authority.

12. All the above answers are to the best of my knowledge & belief, true and correct and I shall be liable for action under law for any material inaccuracy in the information furnished by me or suppression of relevant material information. The furnishing of false information or suppression of any factual information would be a disqualification and is likely to render me unfit for employment under the Government. If the fact that false information has been furnished or that there has been suppression of any factual information comes to notice at any time during my service, my service would be liable to be terminated.

Rakesh Candidate's Signature

Signed in my presence Signature of the Chairman of the Board With date and stamp of the Board

(b) Report of the Medical Board on (name of candidate)

Physical examination

Good..... Fair..... Poor..... Nutrition Thin..... average..... Obese..... NO Height (without shoes)..... 163 cm Weight..... 49.2 kg Best Weight..... When?..... Any recent change in Weight..... Temperature..... (10) Girth of chest:- (i) (After full inspiration)..... 84 cm (ii) (After full expiration)..... 80 cm 2. Skin - Any obvious disease..... MAN

3. Eyes i. Any disease..... ii. Night Blindness..... iii. Colour vision..... a) Ishihara..... b) EGL 1.3 mm..... c) EGL 13 mm..... iv. Field of vision..... (NA) v. Binocular vision..... vi. Visual acuity..... (16) vii. Fundus Examination..... (16)

In case of color blindness please state clearly whether the candidate is fit for services requiring High Grade Color perception/Low Grade Perception of totally color blind.

Contd.....

Visual Acuity

Acuity of vision	Naked eye	With glasses	Strength of glasses		
			Spherical	Cylindrical	Axis
Distant Vision	R.E.	6/36	-0.5	-2.5	90
	L.E.	6/36	-0.5	-2.5	90
Near Vision	R.E.	24/24			
	L.E.	24/24			
Hypermetropia (Manifest)	R.E.				
	L.E.				

DR. ATUL SINGH
MBBS, MS
EYE Surgeon & Specialist Phaco IOL Surgery
KAILASH HOSPITAL & HEART INSTITUTE
Reg. No. 19356

4. Ears: Inspection NAD
 Hearing C.V.E.F.W. Right Ear 650 cm
 Left Ear 650 cm
 5. Glands NP Thyroid NP
 6. Condition of teeth NAD
 7. Respiratory System: Does physical examination reveal anything abnormal in the respiratory system? NAD
 If yes, explain fully NAD
 8. Circulatory system: NAD
 (a) Heart: Any organic lesions? NAD
 Rate 64 beats/min
 Standing Systolic
 After hopping 25 times Systolic
 Two minutes after hopping Systolic
 (b) Blood Pressure: Systolic 130 mmHg
 Diastolic 100 mmHg
 9. Abdomen: Girth 74 cm
 Tenderness NAD
 Hernia NAD
 (a) Palpable:
 Liver NAD Spleen NAD
 Kidneys NAD Tumors NAD

9.(b) Haemorrhoids NAD
 Fistula NAD
 10. Nervous System: Indications of nervous or mental diseases NAD
 11. Loco-Motor System: Any abnormality NAD
 12(A) Genito Urinary System: Any evidence of Hydrocele, Varicocele etc. NAD
 Urine analysis: NAD
 (a) Physical Appearance pale yellow
 (b) Sp. Gravity NAD
 (c) Albumin NAD
 (d) Sugar NAD
 (e) Casts NAD
 (f) Cells NAD
 12(B) Report of X-ray examination of chest NAD

13. Is there anything in the health of the candidate likely to render him unfit for the efficient discharge of his duties in the service for which he is a candidate?
NAD

NOTE: In the case of a female candidate, if it is found that she is pregnant of 12 weeks standing or over, she should be declared temporarily unfit.

Contd...

Roll No. 27061080023

Is the candidate fit for the field service? Yes

NOTE: The Board should record their findings strictly in the following certificate

CERTIFICATE

Shri RAKESH NAYAK, Roll No., 27061080023 a candidate of Advt. 11/2018 who has appeared for his first medical examination /re-examination (date) is found to be:

- (i) Fit in B, medical category
- (ii) Unfit on account of _____
- (iii) Temporarily unfit on account of _____
- (iv) Fit only for specified vacancy reserved for physically impaired _____

Sign of Member
with Stamp

Sign of Member
with Stamp

Sign. of Chairman
with stamp

Date:

Place:

2/8/19
ANAN GROVER
M.B.B.S., D.H.A.
133054
All India Institute, Noida