



To,

The Coordinator,  
MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.)

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	RUPA SINGH
DATE OF BIRTH	24-01-1991
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	09-11-2024
BOOKING REFERENCE NO.	24D117817100119324S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. KUMAR VIKASH
EMPLOYEE EC NO.	117817
EMPLOYEE DESIGNATION	REGIONAL WEALTH MANAGER
EMPLOYEE PLACE OF WORK	SABARKANTHA,RO SABARKANTHA
EMPLOYEE BIRTHDATE	10-02-1990

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **01-11-2024** till **31-03-2025**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager  
HRM & Marketing Department  
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact MediWheel (M/s. Arcofemi Healthcare Pvt. Ltd.))

Doctor Name:-

S/B Dr. Shreya Chauhan

UHID:

Date:

9/11/24

Time:

3:50 PM

Patient Name:

Rupa Singh

Age/Sex:

33 years / female

Height:

Weight:

Chief Complaint:

Came here for health check up.

History:

not known

Allergy History:

Fluoroquinolone

Nutritional Screening: Well-Nourished / Malnourished / Obese

Examination:

HR = 90/min

SpO<sub>2</sub> = 96% on RA

BP = 90/50 mm Hg

All reports were

Diagnosis:

Pt is fit.

Investigation

Rx


No	Dosage Form	Name of drug (IN BLOCK LETTERS ONLY)	Dose	Route	Frequency	Duration

Advice:

Follow-up:

Consultant's Sign: 

DR. SEJAL J AMIN  
B.D.S , M.D.S (PERIODONTIST)  
IMPLANTOLOGIST  
REG NO: A-12942

UHID:	Date:	Time:
Patient Name: Rupa Singh	Age /Sex: Height: Weight:	
Chief Complain: Regular check	History:	
Allergy History:		
Nutritional Screening: Well-Nourished / Malnourished / Obese		
Examination: Extra oral : Intra oral – Teeth Present : Teeth Absent :	Stem & Crown ↓ Class I car	
Diagnosis:		







## LABORATORY REPORT



Name : RUPA SINGH	Sex/Age : Female/ 33 Years	Case ID : 41102200134
Ref.By :	Dis. At :	Pt. ID : 5020829
Bill. Loc. : Aashka hospital		Pt. Loc. :
Reg Date and Time : 09-Nov-2024 10:35	Sample Type :	Mobile No. :
Sample Date and Time : 09-Nov-2024 10:35	Sample Coll. By :	Ref Id1 : OSP35388
Report Date and Time :	Acc. Remarks : Normal	Ref Id2 : O24256569

### Abnormal Result(s) Summary

Test Name	Result Value	Unit	Reference Range
<b>Haemogram (CBC)</b>			
Haemoglobin	11.7	G%	12.0 - 15.0
RBC (Electrical Impedance)	3.77	millions/cu mm	3.80 - 4.80
PCV(Calc)	35.25	%	36.00 - 46.00
<b>Lipid Profile</b>			
LDL Cholesterol	102.23	mg/dL	0.00 - 100.00
Plasma Glucose - F	106.65	mg/dL	70.0 - 100

Abnormal Result(s) Summary End

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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## LABORATORY REPORT



Name : **RUPA SINGH** Sex/Age : **Female/ 33 Years** Case ID : **41102200134**  
 Ref.By : Dis. At : Pt. ID : **5020829**  
 Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 09-Nov-2024 10:35	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 09-Nov-2024 10:35	Sample Coll. By :	Ref Id1 : OSP35388
Report Date and Time : 09-Nov-2024 11:14	Acc. Remarks : Normal	Ref Id2 : O24256569

TEST	RESULTS	UNIT	BIOLOGICAL REF. INTERVAL	REMARKS
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### HAEMOGRAM REPORT

#### HB AND INDICES

Haemoglobin	L 11.7	G%	12.0 - 15.0
RBC (Electrical Impedance)	L 3.77	millions/cumm	3.80 - 4.80
PCV(Calc)	L 35.25	%	36.00 - 46.00
MCV (RBC histogram)	93.5	fL	83.00 - 101.00
MCH (Calc)	31.0	pg	27.00 - 32.00
MCHC (Calc)	33.1	gm/dL	31.50 - 34.50
RDW (RBC histogram)	12.4	%	11.00 - 16.00

#### TOTAL AND DIFFERENTIAL WBC COUNT (Flowcytometry)

		UNIT	EXPECTED VALUES	[Abs]	EXPECTED VALUES
Total WBC Count	6720	/μL	4000.00 - 10000.00		
Neutrophil	[%] 58.0	%	40.00 - 70.00	3898	/μL 2000.00 - 7000.00
Lymphocyte	36.0	%	20.00 - 40.00	2419	/μL 1000.00 - 3000.00
Eosinophil	2.0	%	1.00 - 6.00	134	/μL 20.00 - 500.00
Monocytes	4.0	%	2.00 - 10.00	269	/μL 200.00 - 1000.00
Basophil	0.0	%	0.00 - 2.00	0	/μL 0.00 - 100.00

#### PLATELET COUNT (Optical)

Platelet Count	213000	/μL	150000.00 - 410000.00
Neut/Lympho Ratio (NLR)	1.61		0.78 - 3.53

#### SMEAR STUDY

RBC Morphology	Normocytic Normochromic RBCs.
WBC Morphology	Total WBC count within normal limits.
Platelet	Platelets are adequate in number.
Parasite	Malarial Parasite not seen on smear.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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### Neuberg Diagnostics Private Limited

Laboratory : "KEDAR" Opposite Krupa Petrol Pump, Near Parimal Garden,  
 Ahmedabad - 380006 ☎ 079-40408181 / 61618181  
 contact@neubergsupratech.com

Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Salai, Perungudi,  
 Chennai - 600096, Tamil Nadu, India. | CIN - U85300TN2017PTC114099  
 www.neubergsupratech.com







## LABORATORY REPORT



Name : **RUPA SINGH** Sex/Age : **Female/ 33 Years** Case ID : **41102200134**  
Ref.By : Dis. At : Pt. ID : **5020829**  
Bill. Loc. : **Aashka hospital** Pt. Loc :

Reg Date and Time : 09-Nov-2024 10:35	Sample Type : Whole Blood EDTA	Mobile No :
Sample Date and Time : 09-Nov-2024 10:35	Sample Coll. By :	Ref Id1 : OSP35388
Report Date and Time : 09-Nov-2024 11:14	Acc. Remarks : Normal	Ref Id2 : O24256569

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### HAEMATOLOGY INVESTIGATIONS

#### BLOOD GROUP AND RH TYPING (Erythrocyte Magnetized Technology) (Both Forward and Reverse Group )

ABO Type	B
Rh Type	POSITIVE

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

**Dr. Shreya Shah**

M.D. (Pathologist)

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## LABORATORY REPORT



Name : RUPA SINGH      Sex/Age : Female/ 33 Years      Case ID : 41102200134  
Ref.By :      Dis. At :      Pt. ID : 5020829  
Bill. Loc. : Aashka hospital      Pt. Loc :

Reg Date and Time : 09-Nov-2024 10:35      Sample Type : Plasma Fluoride F, Plasma Fluoride PP, Serum      Mobile No :  
Sample Date and Time : 09-Nov-2024 10:35      Sample Coll. By :      Ref Id1 : OSP35388  
Report Date and Time : 09-Nov-2024 11:53      Acc. Remarks : Normal      Ref Id2 : O24256569  
TEST      RESULTS      UNIT      BIOLOGICAL REF RANGE      REMARKS

Plasma Glucose - F <i>Photometric, Hexokinase</i>	H	106.65	mg/dL	70.0 - 100
Plasma Glucose - PP <i>Photometric, Hexokinase</i>		117.10	mg/dL	70.0 - 140.0
BUN (Blood Urea Nitrogen) <i>GLDH</i>		8.7	mg/dL	7.00 - 18.70
Uric Acid <i>Uricase</i>		5.91	mg/dL	2.6 - 6.2
Creatinine		0.59	mg/dL	0.50 - 1.50

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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CAP  
ACCREDITED  
COLLEGE of AMERICAN PATHOLOGISTS

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## LABORATORY REPORT



Name : RUPA SINGH      Sex/Age : Female/ 33 Years      Case ID : 41102200134  
 Ref.By :      Dis. At :      Pt. ID : 5020829  
 Bill. Loc. : Aashka hospital      Pt. Loc. :

Reg Date and Time : 09-Nov-2024 10:35      Sample Type : Serum      Mobile No :  
 Sample Date and Time : 09-Nov-2024 10:35      Sample Coll. By :      Ref Id1 : OSP35388  
 Report Date and Time : 09-Nov-2024 11:53      Acc. Remarks : Normal      Ref Id2 : O24256569

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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### BIOCHEMICAL INVESTIGATIONS

#### Lipid Profile

Cholesterol <i>CHOD-POD</i>	164.95	mg/dL	110 - 200	
HDL Cholesterol <i>Accelerator Selective Detergent</i>	50.1	mg/dL	40 - 60	
Triglyceride <i>Glycerol Phosphate Oxidase</i>	63.11	mg/dL	<150	
VLDL <i>Calculated</i>	12.62	mg/dL	10 - 40	
Chol/HDL <i>Calculated</i>	3.29		0 - 4.1	
LDL Cholesterol <i>Calculated</i>	H 102.23	mg/dL	0.00 - 100.00	

#### NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

LDL CHOLESTEROL	CHOLESTEROL	HDL CHOLESTEROL	TRIGLYCERIDES
Optimal <100	Desirable <200	Low <40	Normal <150
Near Optimal 100-129	Border Line 200-239	High >60	Border High 150-199
Borderline 130-159	High >240	-	High 200-499
High 160-189	-	-	-

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assesment from HDL and Triglyceride has been revised. Also LDL goals have changed.
- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits.
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

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## LABORATORY REPORT



Name : RUPA SINGH      Sex/Age : Female/ 33 Years      Case ID : 41102200134  
 Ref.By :      Dis. At :      Pt. ID : 5020829  
 Bill. Loc. : Aashka hospital      Pt. Loc. :

Reg Date and Time : 09-Nov-2024 10:35      Sample Type : Serum      Mobile No :  
 Sample Date and Time : 09-Nov-2024 10:35      Sample Coll. By :      Ref Id1 : OSP35388  
 Report Date and Time : 09-Nov-2024 11:39      Acc. Remarks : Normal      Ref Id2 : O24256569

**Interpretation Note:**

Ultra sensitive-thyroid-stimulating hormone (TSH) is a highly effective screening assay for thyroid disorders. In patients with an intact pituitary-thyroid axis, s-TSH provides a physiologic indicator of the functional level of thyroid hormone activity. Increased s-TSH indicates inadequate thyroid hormone, and suppressed s-TSH indicates excess thyroid hormone. Transient s-TSH abnormalities may be found in seriously ill, hospitalized patients, so this is not the ideal setting to assess thyroid function. However, even in these patients, s-TSH works better than total thyroxine (an alternative screening test), when the s-TSH result is abnormal, appropriate follow-up tests T4 & free T3 levels should be performed. If TSH is between 5.0 to 10.0 & free T4 & free T3 level are normal then it is considered as subclinical hypothyroidism which should be followed up after 4 weeks & If TSH is > 10 & free T4 & free T3 level are normal then it is considered as overt hypothyroidism.

Serum triiodothyronine (T3) levels often are depressed in sick and hospitalized patients, caused in part by the biochemical shift to the production of reverse T3. Therefore, T3 generally is not a reliable predictor of hypothyroidism. However, in a small subset of hyperthyroid patients, hyperthyroidism may be caused by overproduction of T3 (T3 toxicosis). To help diagnose and monitor this subgroup, T3 is measured on all specimens with suppressed s-TSH and normal FT4 concentrations.

Normal ranges of TSH & thyroid hormones vary according trimester in pregnancy.

TSH ref range in Pregnancy	Reference range (microIU/ml)
First trimester	0.24 - 2.00
Second trimester	0.43-2.2
Third trimester	0.8-2.5

	T3	T4	TSH
Normal Thyroid function	N	N	N
Primary Hyperthyroidism	↑	↑	↓
Secondary Hyperthyroidism	↑	↑	↑
Grave's Thyroiditis	↑	↑	↑
T3 Thyrotoxicosis	↑	N	N/↓
Primary Hypothyroidism	↓	↓	↑
Secondary Hypothyroidism	↓	↓	↓
Subclinical Hypothyroidism	N	N	↑
Patient on treatment	N	N/↑	↓

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shreya Shah

M.D. (Pathologist)

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PATIENT NAME: RUPA SINGH  
GENDER/AGE: Female / 33 Years  
DOCTOR: DR. HASIT JOSHI  
OPDNO: OSP35388

DATE: 09/11/24

**2D-ECHO**

MITRAL VALVE	: NORMAL	
AORTIC VALVE	: NORMAL	
TRICUSPID VALVE	: NORMAL	
PULMONARY VALVE	: NORMAL	
AORTA	: 31mm	
LEFT ATRIUM	: 33mm	
LV Dd / Ds	: 45/31mm	EF 60%
IVS / LVPW / D	: 10/9mm	
IVS	: INTACT	
IAS	: FLOPPY	
RA	: NORMAL	
RV	: NORMAL	
PA	: NORMAL	
PERICARDIUM	: NORMAL	
VEL	: PEAK	MEAN
M/S	: Gradient mm Hg	Gradient mm Hg
MITRAL	: 1/0.7m/s	
AORTIC	: 1.2m/s	
PULMONARY	: 1.1m/s	
COLOUR DOPPLER	: MILD MR/ TR	
RVSP	: 30mmHg	
CONCLUSION	: NORMAL LV SIZE / SYSTOLIC FUNCTION.	

CARDIOLOGIST  
DR. HASIT JOSHI (9825012235)

REPORT REPORT REPORT REPORT REPORT

PATIENT NAME: RUPA SINGH

GENDER/AGE: Female / 33 Years

DATE: 09/11/24

DOCTOR:

OPDNO: OSP35388

**X-RAY CHEST PA**

Both lung fields show increased broncho-vascular markings.


**No evidence of collapse, consolidation, mediastinal lymph adenopathy, soft tissue infiltration or pleural effusion is seen.**

Both hilar shadows and C.P. angles are normal.

Heart shadow appears normal in size. Aorta appears normal.

Bony thorax and both domes of diaphragm appear normal.

No evidence of cervical rib is seen on either side.

  
DR. SNEHAL PRAJAPATI  
CONSULTANT RADIOLOGIST

REPORT REPORT REPORT REPORT REPORT

**PATIENT NAME:**RUPA SINGH  
**GENDER/AGE:**Female / 33 Years  
**DOCTOR:**  
**OPDNO:**OSP35388

**DATE:**09/11/24

## SONOGRAPHY OF ABDOMEN AND PELVIS

**LIVER:** Liver appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen. No evidence of dilated IHBR is seen. Intrahepatic portal radicles appear normal. No evidence of solid or cystic mass lesion is seen.

**GALL BLADDER:** Gall bladder is physiologically distended and appears normal. No evidence of calculus or changes of cholecystitis are seen. No evidence of pericholecystic fluid collection is seen. CBD appears normal.

**PANCREAS:** Pancreas appears normal in size and shows normal parenchymal echoes. No evidence of pancreatitis or pancreatic mass lesion is seen.

**SPLEEN:** Spleen appears normal in size and shows normal parenchymal echoes. No evidence of focal or diffuse lesion is seen.

**KIDNEYS:** Both kidneys are normal in size, shape and position. Both renal contours are smooth. Cortical and central echoes appear normal. Bilateral cortical thickness appears normal. No evidence of renal calculus, hydronephrosis or mass lesion is seen on either side. No evidence of perinephric fluid collection is seen.

Right kidney measures about 9.9 x 4.2 cms in size.  
Left kidney measures about 10.1 x 4.3 cms in size.

No evidence of suprarenal mass lesion is seen on either side.

**Aorta, IVC and para aortic region** appears normal.  
No evidence of ascites is seen.

**BLADDER:** Bladder is normally distended and appears normal. No evidence of bladder calculus, diverticulum or mass lesion is seen. Prevoid bladder volume measures about 146 cc.

**UTERUS:** Uterus is anteverted and appears normal in size, shape and position. Endometrial and myometrial echoes appear normal. Endometrial thickness measures about 4.1 mm. No evidence of uterine mass lesion is seen.

Bilateral adnexa appears normal.

**COMMENT:** Normal sonographic appearance of liver, GB, pancreas, spleen, kidneys, para aortic region, bladder and uterus.

  
**DR. SNEHAL PRAJAPATI**  
CONSULTANT RADIOLOGIST

REPORT



Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

Rupa Singh  
33/F

QRS : 66 ms      Normal sinus rhythm  
QT / QTcBaz : 380 / 464 ms      Nonspecific T wave abnormality  
PR : 142 ms      Abnormal ECG  
P : 98 ms  
RR / PP : 664 / 666 ms  
P / QRS / T : 56 / 44 / 29 degrees

