



LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MS. CHAHANDE PRANJALI AJAY
EC NO.	105793
DESIGNATION	CUSTOMER SERVICE ASSOCIATE
PLACE OF WORK	NAGPUR, SERVICE BRANCH
BIRTHDATE	10-07-1983
PROPOSED DATE OF HEALTH	14-09-2024
CHECKUP	
BOOKING REFERENCE NO	24S105793100111090E

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 17-08-2024 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 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.

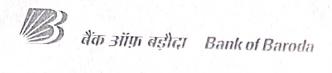
We solicit your co-operation in this regard.

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.))





List of tests & consultations to be covered as part of Annual Health Check-up

S.No.	For Male	For Female
1	CBC	CBC
2	ESR A CONTRACTOR OF	ESR
3	Blood Group & RH Factor	Blood Group & RH Factor
4	Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
5	Blood and Urine Sugar PP	Blood and Urine Sugar Pasting Blood and Urine Sugar PP
6	Stool Routine	Stool Routine
	Lipid Profile	
7	Total Cholesterol	Lipid Profile Total Cholesterol
8	HDL	HDL
9	LDL	
10	VLDL	LDL
11	Triglycerides	VLDL
12	HDL/ LDL ratio	Triglycerides
	Liver Profile	HDL/ LDL ratio
13	AST	Liver Profile
14	ALT	AST Comment of Assert Comment of the
15	GGT	ALT
16	Bilirubin (total, direct, indirect)	GGT. AND A SECOND SECON
17	ALP	Bilirubin (total, direct, indirect)
18	ALP Proteins (T, Albumin, Globulin)	ALP
	Vidney Brafile	Proteins (T, Albumin, Globulin)
19	Kidney Profile A A Section Serum Creatinine	Kidney Profile
20		Serum Creatinine
21	11: 4:1	Blood Urea Nitrogen
22	and the contract of the contra	Uric Acid
23	Routine Urine Analysis	HBA1C
24	11001411 1 11 1	Routine Urine Analysis
27	USG Whole Abdomen General Tests	USG Whole Abdomen
25	X Ray Chest	General Tests
26	500	X Ray Chest
27	2D/3D ECHO / TMT	ECG CONTROL OF THE
28		2D/3D ECHO / TMT
	Stress Test	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammography (above 40 years)
30	Thyroid Profile (T3, T4, TSH)	Thyroid Profile (T3, T4, TSH)
31	Dental Check-up Consultation	Dental Check-up Consultation
32	Physician Consultation	Physician Consultation
33	Eye Check-up Consultation	Eye Check-up Consultation
34	Skin/ENT Consultation	Skin/ENT Consultation
