

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	SANGEETA SURENDRA KATGHARE	
DATE OF BIRTH	22-06-1973	
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	14-09-2024	
BOOKING REFERENCE NO.	24S67027100111172S	
	SPOUSE DETAILS	
EMPLOYEE NAME	MR. KATGHARE SURENDRA VITTHAL	
EMPLOYEE EC NO.	67027	
EMPLOYEE DESIGNATION	CUSTOMER SERVICE ASSOCIATE	
EMPLOYEE PLACE OF WORK	NAGPUR,NANDANVAN ROAD	
EMPLOYEE BIRTHDATE	15-08-1969	

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'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.

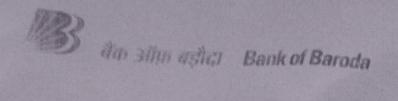
We solicit your co-operation in this regard.

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.))





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

S.No.	For Male	covered as part of Annual Health Check-up
1	CBC	For Female
2	ESR	CBC
3	Blood Group & RH Factor	ESR
4	Blood and Urine Sugar Fasting	Blood Group & RH Factor
5	Blood and Urine Sugar PP	Blood and Urine Sugar Faction
6	Stool Routine	Blood and Urine Sugar DD
		Stool Routine
7	Lipid Profile Total Cholesterol	Lipid Profile
8	HDL	Total Cholesterol
9	LDL	HDL
10	VLDL	LDL
11		VLDL
12	Triglycerides	Triglycerides
	HDL/ LDL ratio	HDL/ LDL ratio
13	AST Liver Profile	Liver Profile
14	ALT	AST
15		ALT
16	GGT	GGT
17	Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
18	ALP	ALP
10	Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
19	Kidney Profile	
20	Serum Creatinine	Kidney Profile Serum Creatinine
1/1	Blood Urea Nitrogen	
21	Uric Acid	Blood Urea Nitrogen
22	HBA1C	Uric Acid
23	Routine Urine Analysis	HBA1C
24	USG Whole Abdomen	Routine Urine Analysis
	General Tests	USG Whole Abdomen
25	X Ray Chest	General Tests
26	ECG	X Ray Chest
27	2D/3D ECHO / TMT	ECG
28	Stress Test	2D/3D ECHO / TMT
	Chess rest	Gynaec Consultation
29	PSA Male (above 40 years)	Pap Smear (above 30 years) & Mammograph
0	Thyroid Profile (T3, T4, TSH)	(above 40 years)
1	Dental Check-up Consultation	Thyroid Profile (T3, T4, TSH)
2	Physician Consultation	Dental Check-up Consultation
3	Eye Check-up Consultation	Physician Consultation
4	Skin/ENT Consultation	Eye Check-up Consultation
	OMMENT Consultation	Skin/ENT Consultation