



## 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  |                               |
| EC NO.  | MR. SINGH ASHISH KUMAR        |
| DESIGNATION   | 126597                        |
| - management of the second of | MSME BANKING                  |
| PLACE OF WORK   | MUMBALBKC, BARODA CORPORATE C |
| BIRTHDATE   | 10-03-1996                    |
| PROPOSED DATE OF HEALTH<br>CHECKUP  | 09-11-2024                    |
| BOOKING REFERENCE NO.   | 24D126597100120588E           |

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 08-11-2024 till 31-03-2025 The fist 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 gonerated letter No Signature required. For any clarification, please contact MedWhoe (Mrs. Accolumn Healthcare P.4, Utd.f)

## 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                                 | ESR   |
| 3     | Blood Group & RH Factor             | Blood Group & RH Factor                                   |
| 4     | Blood and Urine Sugar Fasting       | Blood and Unite Sugar Fashing                             |
| 5     | Blood and Urine Sugar PP            | Blood and Urine Sugar PP                                  |
| 6     | Stool Routine                       | Slool Routine   |
|       | Lipid Profile                       | Lipid Profile   |
| 7     | Total Cholesterol                   | Total Cholestero:   |
| В     | HOL                                 | HDL   |
| 9     | LDL                                 | LDL   |
| 10    | VLDL                                | VLDL  |
| 11    | Triglycerides                       | Triglycerides   |
| 12    | HDL/ LDL ratio                      | HDL/LDL ratio   |
|       | Liver Profile                       |   |
| 13    | AST                                 | AST Liver Profile   |
| 14    | ALT                                 | ALT   |
| 15    | GGT                                 | GGT   |
| 16    | Billiruom (total, direct, indirect) |   |
| 17    | ALP                                 | Bilirubin (total, direct, indirect) ALP                   |
| 18    | Proleins (T. Albumin, Globulin)     | Proteins (T, Abumin, Globulin)                            |
| 30.5  | Kidney Profile                      | Kidney Profile  |
| 19    | Serurn Creatinine                   | Serum Creatinine  |
| 20    | Blood Urea Nitrogen                 | Blood Ures Nilmgen  |
| 21    | Uric Acid                           | Une And   |
| 22    | HBA1C                               | HBA1C   |
| 23    | Rouline Urine Analysis              | Rouline Urine Analysis                                    |
| 24    | USG Whole Abcomen                   | USG Whole Abdomen   |
|       | General Tests                       | General Tests   |
| 25    | X Ray Chest                         | X Ray Chest   |
| 26    | ECG                                 | ECG   |
| 27    | 2D/3D ECHO / TMT                    | 20/3D ECHO / TMT  |
| 25    | Stress Test                         | Gynaec Consultation                                       |
| 29    | PSA Male (above 40 years)           | Pao Smear (above 30 years) & Mammography (above 40 years) |
| 30    | Thyroid Profile (T3, T4, TSH)       | Thyroid Profile (T3, T4, TSH)                             |
| 31    | Denial Check-up Consultation        | Dental Check-up Consultation                              |
| 32    | Physician Consultation              | Physic an Consultation                                    |
| 33    | Eye Check-up Consultation           | Eye Chock-up Consultation                                 |
| 34    | Skin/ENT Consultation               | Skin/ENT Consultation                                     |