

Patient Name : Mr.SATISH NAIK	Collected : 12/Aug/2023 08:18AM
Age/Gender : 37 Y 0 M 15 D/M	Received : 12/Aug/2023 10:48AM
UHID/MR No : CINR.0000155283	Reported : 12/Aug/2023 12:55PM
Visit ID : CINROPV201685	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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HEMOGRAM , WHOLE BLOOD EDTA

HAEMOGLOBIN	16.2	g/dL	13-17	Spectrophotometer
PCV	47.70	%	40-50	Electronic pulse & Calculation
RBC COUNT	5.34	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	89.5	fL	83-101	Calculated
MCH	30.3	pg	27-32	Calculated
MCHC	33.9	g/dL	31.5-34.5	Calculated
R.D.W	13.9	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	8,710	cells/cu.mm	4000-10000	Electrical Impedence

DIFFERENTIAL LEUCOCYTIC COUNT (DLC)

NEUTROPHILS	54.5	%	40-80	Electrical Impedence
LYMPHOCYTES	36.1	%	20-40	Electrical Impedence
EOSINOPHILS	1	%	1-6	Electrical Impedence
MONOCYTES	8	%	2-10	Electrical Impedence
BASOPHILS	0.4	%	<1-2	Electrical Impedence

ABSOLUTE LEUCOCYTE COUNT

NEUTROPHILS	4746.95	Cells/cu.mm	2000-7000	Electrical Impedence
LYMPHOCYTES	3144.31	Cells/cu.mm	1000-3000	Electrical Impedence
EOSINOPHILS	87.1	Cells/cu.mm	20-500	Electrical Impedence
MONOCYTES	696.8	Cells/cu.mm	200-1000	Electrical Impedence
BASOPHILS	34.84	Cells/cu.mm	0-100	Electrical Impedence

PLATELET COUNT

PLATELET COUNT	300000	cells/cu.mm	150000-410000	Electrical impedence
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ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR)	12	mm at the end of 1 hour	0-15	Modified Westergren
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PERIPHERAL SMEAR

RBCs: are normocytic normochromic

WBCs: are normal in total number with normal distribution and morphology.

PLATELETS: appear adequate in number.

HEMOPARASITES: negative

IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE

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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method



SIN No:BED230190381

Patient Name : Mr.SATISH NAIK	Collected : 12/Aug/2023 08:18AM
Age/Gender : 37 Y 0 M 15 D/M	Received : 12/Aug/2023 10:48AM
UHID/MR No : CINR.0000155283	Reported : 12/Aug/2023 03:06PM
Visit ID : CINROPV201685	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA

BLOOD GROUP TYPE	AB			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination



Patient Name : Mr.SATISH NAIK	Collected : 12/Aug/2023 08:18AM
Age/Gender : 37 Y 0 M 15 D/M	Received : 12/Aug/2023 10:50AM
UHID/MR No : CINR.0000155283	Reported : 12/Aug/2023 11:28AM
Visit ID : CINROPV201685	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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GLUCOSE, FASTING , NAF PLASMA	142	mg/dL	70-100	HEXOKINASE
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Comment:

As per American Diabetes Guidelines

Fasting Glucose Values in mg/d L	Interpretation
<100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes

GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	170	mg/dL	70-140	HEXOKINASE
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Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.

Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.

Ref: Marks medical biochemistry and clinical approach

Patient Name : Mr.SATISH NAIK	Collected : 12/Aug/2023 08:18AM
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C, GLYCATED HEMOGLOBIN , WHOLE BLOOD EDTA	6.7	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG) , WHOLE BLOOD EDTA	146	mg/dL		Calculated

Comment:

Reference Range as per American Diabetes Association (ADA):

REFERENCE GROUP	HBA1C IN %
NON DIABETIC ADULTS >18 YEARS	<5.7
AT RISK (PREDIABETES)	5.7 – 6.4
DIAGNOSING DIABETES	≥ 6.5
DIABETICS	
· EXCELLENT CONTROL	6 – 7
· FAIR TO GOOD CONTROL	7 – 8
· UNSATISFACTORY CONTROL	8 – 10
· POOR CONTROL	>10

Note: Dietary preparation or fasting is not required.

1. A1C test should be performed at least two times a year in patients who are meeting treatment goals (and who have stable glycemic control).
2. Lowering A1C to below or around 7% has been shown to reduce microvascular and neuropathic complications of type 1 and type 2 diabetes. When mean annual HbA1c is <1.1 times ULN (upper limit of normal), renal and retinal complications are rare, but complications occur in >70% of cases when HbA1c is >1.7 times ULN.
3. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present. Fructosamine may be used as an alternate measurement of glycemic control



Patient Name : Mr.SATISH NAIK	Collected : 12/Aug/2023 08:18AM
Age/Gender : 37 Y 0 M 15 D/M	Received : 12/Aug/2023 10:52AM
UHID/MR No : CINR.0000155283	Reported : 12/Aug/2023 12:33PM
Visit ID : CINROPV201685	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIPID PROFILE , SERUM

TOTAL CHOLESTEROL	154	mg/dL	<200	CHO-POD
TRIGLYCERIDES	153	mg/dL	<150	GPO-POD
HDL CHOLESTEROL	40	mg/dL	40-60	Enzymatic Immunoinhibition
NON-HDL CHOLESTEROL	114	mg/dL	<130	Calculated
LDL CHOLESTEROL	83.6	mg/dL	<100	Calculated
VLDL CHOLESTEROL	30.6	mg/dL	<30	Calculated
CHOL / HDL RATIO	3.85		0-4.97	Calculated

Comment:

Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

	Desirable	Borderline High	High	Very High
TOTAL CHOLESTEROL	< 200	200 - 239	≥ 240	
TRIGLYCERIDES	<150	150 - 199	200 - 499	≥ 500
LDL	Optimal < 100 Near Optimal 100-129	130 - 159	160 - 189	≥ 190
HDL	≥ 60			
NON-HDL CHOLESTEROL	Optimal <130; Above Optimal 130-159	160-189	190-219	>220

Measurements in the same patient can show physiological and analytical variations.

NCEP ATP III identifies non-HDL cholesterol as a secondary target of therapy in persons with high triglycerides.



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Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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LIVER FUNCTION TEST (LFT) , SERUM

BILIRUBIN, TOTAL	0.63	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.52	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	32	U/L	<50	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	22.0	U/L	<50	IFCC
ALKALINE PHOSPHATASE	58.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.10	g/dL	6.6-8.3	Biuret
ALBUMIN	4.73	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.37	g/dL	2.0-3.5	Calculated
A/G RATIO	2		0.9-2.0	Calculated



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Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM

CREATININE	0.87	mg/dL	0.72 – 1.18	JAFFE METHOD
UREA	21.30	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	10.0	mg/dL	8.0 - 23.0	Calculated
URIC ACID	5.93	mg/dL	3.5–7.2	Uricase PAP
CALCIUM	9.40	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.20	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	139	mmol/L	136–146	ISE (Indirect)
POTASSIUM	4.4	mmol/L	3.5–5.1	ISE (Indirect)
CHLORIDE	105	mmol/L	101–109	ISE (Indirect)



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM	40.00	U/L	<55	IFCC



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UHID/MR No : CINR.0000155283	Reported : 12/Aug/2023 11:44AM
Visit ID : CINROPV201685	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
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THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM

TRI-IODOTHYRONINE (T3, TOTAL)	1.08	ng/mL	0.7-2.04	CLIA
THYROXINE (T4, TOTAL)	9.79	µg/dL	6.09-12.23	CLIA
THYROID STIMULATING HORMONE (TSH)	2.390	µIU/mL	0.34-5.60	CLIA

Comment:

Serum TSH concentrations exhibit a diurnal variation with the peak occurring during the night and the nadir occurring between 10 a.m. and 4 p.m. In primary hypothyroidism, thyroid-stimulating hormone (TSH) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroid-ism, respectively. Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

Note:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 - 3.0
Third trimester	0.3 - 3.0



Patient Name : Mr.SATISH NAIK	Collected : 12/Aug/2023 08:18AM
Age/Gender : 37 Y 0 M 15 D/M	Received : 12/Aug/2023 11:21AM
UHID/MR No : CINR.0000155283	Reported : 12/Aug/2023 12:32PM
Visit ID : CINROPV201685	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 9731730439	

DEPARTMENT OF CLINICAL PATHOLOGY


ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Range	Method
URINE GLUCOSE(POST PRANDIAL)	POSITIVE (++)		NEGATIVE	Dipstick
URINE GLUCOSE(FASTING)	POSITIVE (++)		NEGATIVE	Dipstick

*** End Of Report ***

Result/s to Follow:

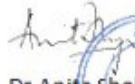

COMPLETE URINE EXAMINATION (CUE), PERIPHERAL SMEAR

Dr. Anita Shobha Flynn
M.B.B.S, MD(Pathology)
Consultant Pathologist




DR. SHIVARAJA SHETTY
M.B.B.S, M.D(Biochemistry)
CONSULTANT BIOCHEMIST

Dr. Anita Shobha Flynn
M.B.B.S MD(Pathology)
Consultant Pathologist



Name : Mr. Satish Naik Age: 37 Y
 Sex: M

Address : bangalore

Plan : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN
 INDIA OP AGREEMENT

UHID: CINR.0000155283
 CINR.0000155283
 OP Number: CINROPV201685
 Bill No : CINR-OCR-87611
 Date : 12.08.2023 08:03

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS MALE - 2D ECHO - PAN INDIA - FY2324	
1	URINE GLUCOSE (FASTING)	
2	GAMMA GLUTAMYL TRANSFERASE (GGT)	
3	HbA1c, GLYCATED HEMOGLOBIN	
4	2D ECHO - 9:30	
5	LIVER FUNCTION TEST (LFT)	
6	X-RAY CHEST PA - 10	
7	GLUCOSE, FASTING	
8	HEMOGRAM + PERIPHERAL SMEAR	
9	ENT CONSULTATION -	
10	FITNESS BY GENERAL PHYSICIAN	
11	DIET CONSULTATION	
12	COMPLETE URINE EXAMINATION	
13	URINE GLUCOSE (POST PRANDIAL)	
14	PERIPHERAL SMEAR	
15	ECG - 0	
16	BLOOD GROUP ABO AND RH FACTOR	
17	LIPID PROFILE	
18	BODY MASS INDEX (BMI) - 6	
19	OPHTHAL BY GENERAL PHYSICIAN (5)	
20	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
21	ULTRASOUND - WHOLE ABDOMEN	
22	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	
23	DENTAL CONSULTATION - 1	
24	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) 11.9 mm	

physio - (14)

9731730439

Audiometry - (R) - Minimal hearing loss
 (L) - Normal



Date : 12-08-2023
MR NO : CINR.0000155283

Department : GENERAL
Doctor :

Name : Mr. Satish Naik

Registration No :

Age/ Gender : 37 Y / Male

Qualification :

Consultation Timing: 08:03

Height : 163 cm ^{77.6kg}	Weight : 57.8kg	BMI : 28.9	Waist Circum :
Temp : 98.8	Pulse : 78 ^{6pm}	Resp : 20 ^{6pm}	B.P : 124/80 ^{mmHg}

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Follow up date:

Doctor Signature

9731730439

OPHTHAL PRESCRIPTION

PATIENT NAME : Satish naik
UHID NO : CINR-0000155283
OPTOMETRIST NAME: Mr Gowtham M H

DATE : 12/08/23
AGE : 37
GENDER: Male

This is to certify that I have examined
years and findings of his/her eye examination are as follows,

	RIGHT EYE				LEFT EYE			
	SPH	CYL	AXIS	BCVA	SPH	CYL	AXIS	BCVA
Distance	+0.25	-0.75	180	6/6	+0.25	-0.75	180	6/6
Add				Nb				Nb

PD - RE: 31 LE: 31

Colour Vision: Nsnt

Remarks:

Apollo clinic Indiranagar

12.08.2023

Mr. Sathish naik

37 yrs/M.

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Acrorfeani - Alte

Ears: Nil

Nose: Nil

Throat: Nil

Follow up date:

Dr. RAVINDRANATHAN
M.B.B.S., D.L.O.

Ravindranathan

Apollo Clinic, Indiranagar

#2012, 1st Floor, 100 Feet Road, HAL 2nd Stage, Indiranagar - 560038

Phone: (080) 2521 4614/15

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BOOK YOUR APPOINTMENT TODAY!
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Whatsapp Number : 970 100 3333
Toll Number : 1860 500 7788
Website : www.apolloclinic.com

NAME: MR SATISH N	AGE/SEX: 37Y/M	OP NUMBER: 155283
Ref By : SELF	DATE: 12-08-2023	

M mode and doppler measurements:

CM	CM	M/sec	
AO: 2.1	IVS(D): 1.4	MV: E Vel: 0.9	A Vel : 0.6
LA: 2.6	LVIDD(D): 3.9	AV Peak: 1.0	
	LVPW(D): 1.2	PV Peak: 0.9	
	IVS(S): 1.5		
	LVID(S): 2.4		
	LVPW(S): 1.5		
	LVEF: 68%		
	TAPSE: 2.1		

Descriptive findings:

Left Ventricle	Concnetric LVH
Right Ventricle:	Normal
Left Atrium:	Normal
Right Atrium:	Normal
Mitral Valve:	Normal
Aortic Valve:	Normal
Tricuspid Valve:	Normal
IAS:	Normal
IVS:	Normal
Pericardium:	Normal

IVC:	Normal
Others	---

IMPRESSION :

Concnetric LVH

No Regional wall motion abnormality

No MR/AR/TR

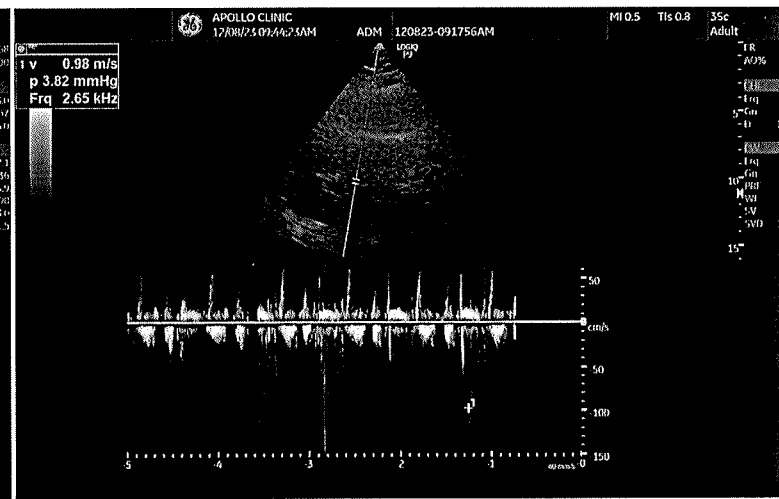
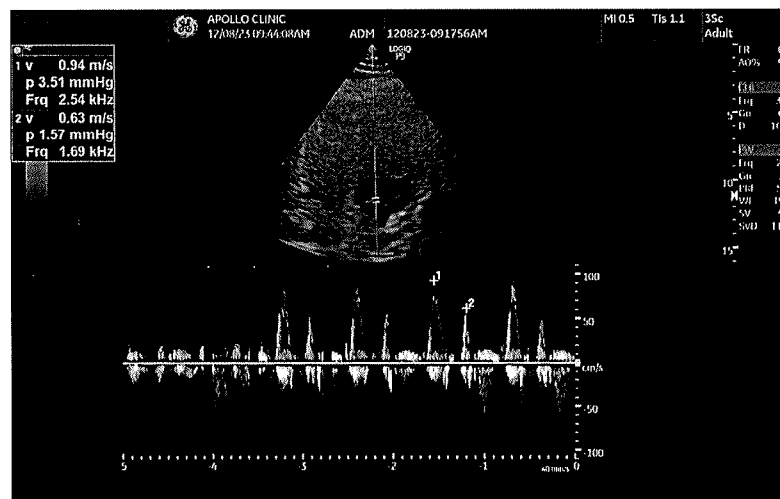
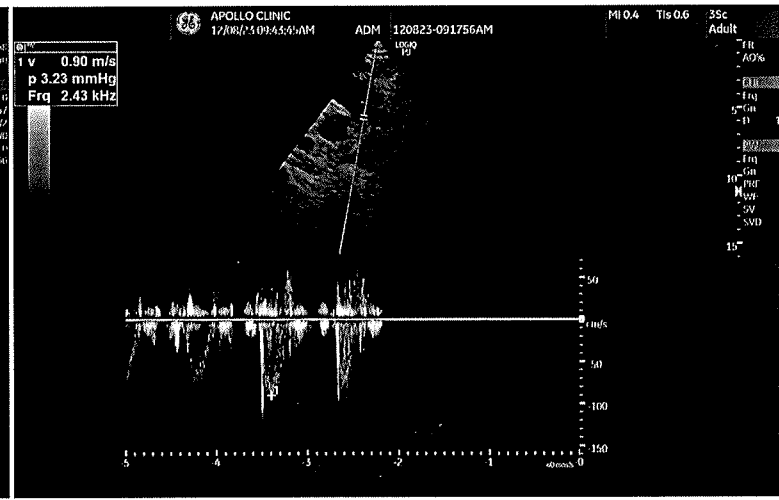
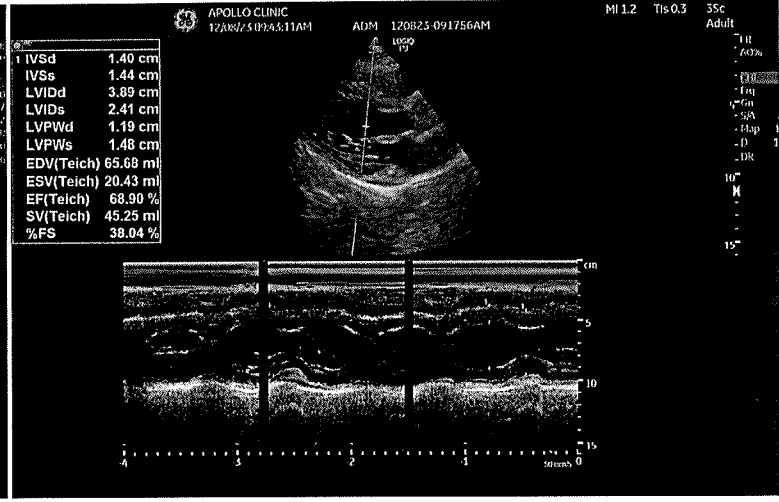
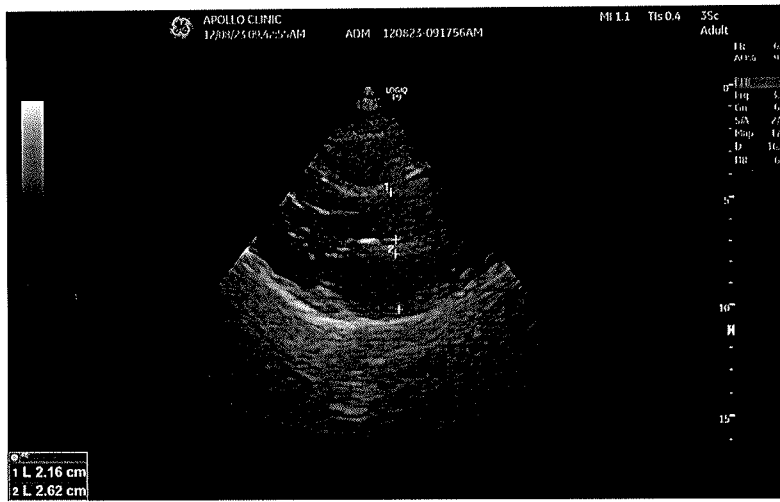
No clot/vegetation/pericardial effusion

Normal LV systolic function - LVEF= 68%

DR JAGADEESH H V MD,DM

CONSULTANT CARDIOLOGIST





mr. sathish
ID: 155283

18.07.1986
37 Years

Male

12.08.2023 10:12:14
APOLLO CLINIC
INDIRANAGAR
BANGALORE

Location:
Room:
Order Number:
Indication:
Medication 1:
Medication 2:
Medication 3:

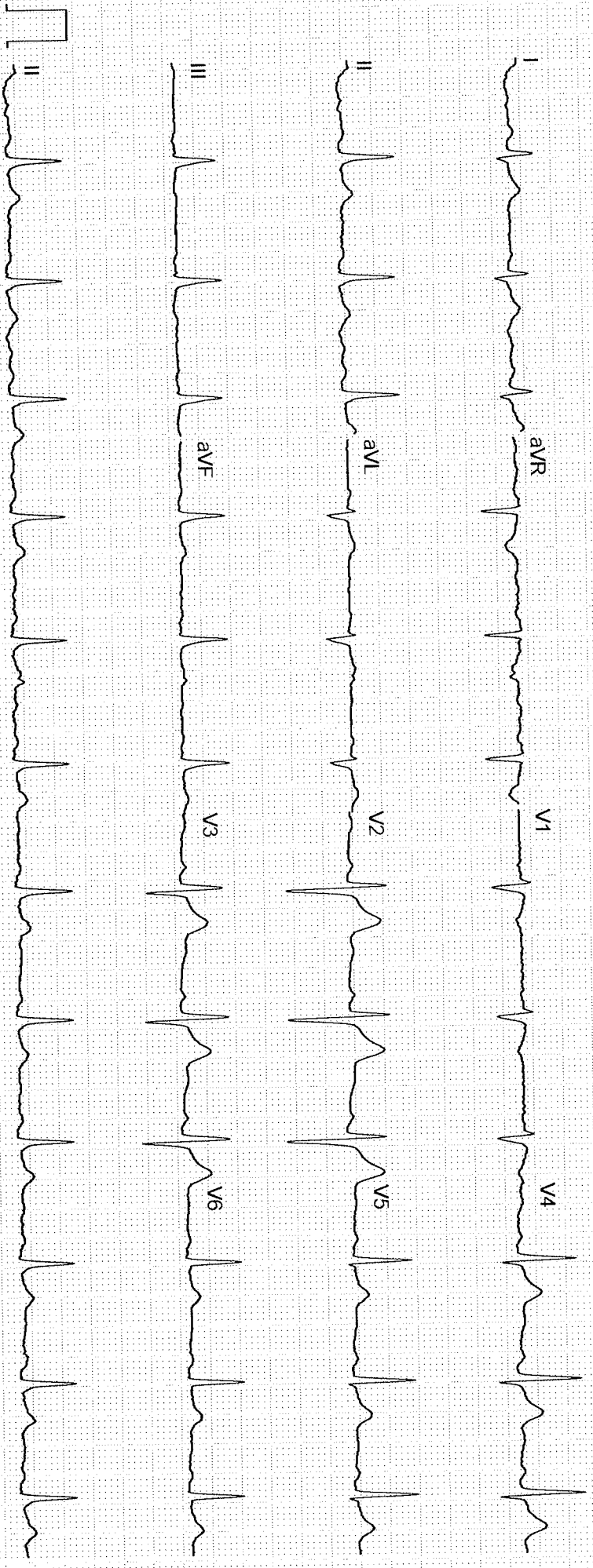
74 bpm
- / - mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 86 ms
QT / QTcBaz : 372 / 412 ms
PR : 154 ms
P : 100 ms
RR / PP : 814 / 810 ms
P / QRS / T : 15 / 78 / 27 degrees

Normal

Signature



Unconfirmed



प्रति,

समन्वयक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	SATISH NAIK SATISH NAIK
जन्म की तारीख	28-07-1986
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	29-07-2023
बुकिंग संदर्भ सं.	23S163646100064870S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MS. NAIK PRATIMA SHRIDHAR
कर्मचारी की क.कू.संख्या	163646
कर्मचारी का पद	BRANCH OPERATIONS
कर्मचारी के कार्य का स्थान	BANGALORE, COX TOWN
कर्मचारी के जन्म की तारीख	09-09-1990

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक **25-07-2023** से **31-03-2024** तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

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	SATISH NAIK SATISH NAIK
DATE OF BIRTH	28-07-1986
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	29-07-2023
BOOKING REFERENCE NO.	23S163646100064870S
SPOUSE DETAILS	
EMPLOYEE NAME	MS. NAIK PRATIMA SHRIDHAR
EMPLOYEE EC NO.	163646
EMPLOYEE DESIGNATION	BRANCH OPERATIONS
EMPLOYEE PLACE OF WORK	BANGALORE, COX TOWN
EMPLOYEE BIRTHDATE	09-09-1990

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 **25-07-2023** till **31-03-2024**. 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 Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



DL No KA47 20120004683
NAME SATISH NAIK
D.O.B 28/07/1985
VALID TILL 23/09/2032(NT)

DOI 24/09/2012
S.G.

FORM - 7
(See Rule 16(2))



VALID THROUGHOUT INDIA
COV. MCWG 24/09/2012
LMV 13/09/2017

C 101 15/09/2017

S/o HONNAPPA NAIK
ADDRESS # 116 NADUCHITTE KARKI HONNAVAR
KARWAR DIST (YASH MDTs) 581341

Sign. Of Holder

Sign. Licencing Authority
K R PURAM BLORE

Patient Name	: Mr. Satish Naik	Age/Gender	: 37 Y/M
UHID/MR No.	: CINR.0000155283	OP Visit No	: CINROPV201685
Sample Collected on	:	Reported on	: 12-08-2023 18:00
LRN#	: RAD2071054	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 9731730439		

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

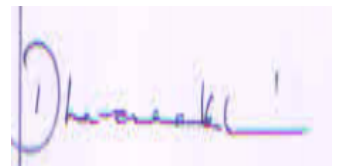
Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen



Dr. DHANALAKSHMI B
MBBS, DMRD
Radiology

Patient Name	: Mr. Satish Naik	Age/Gender	: 37 Y/M
UHID/MR No.	: CINR.0000155283	OP Visit No	: CINROPV201685
Sample Collected on	:	Reported on	: 12-08-2023 15:10
LRN#	: RAD2071054	Specimen	:
Ref Doctor	: SELF		
Emp/Auth/TPA ID	: 9731730439		

DEPARTMENT OF RADIOLOGY

ULTRASOUND - WHOLE ABDOMEN

LIVER: Appears normal in size, shape and echopattern **mildly increased**. No focal parenchymal lesions identified. No evidence of intra/extrahepatic biliary tree dilatation noted. Portal vein appears to be of normal size.

GALLBLADDER: Moderately distended. No definite calculi identified. No evidence of abnormal wall thickening noted.

SPLEEN: Appears normal in size, shape and echopattern. No focal parenchymal lesions identified.

PANCREAS: Obscured by bowel gas. However, the visualized portion appear normal.

KIDNEYS: Both kidneys appear normal in size, shape and echopattern. Corticomedullary differentiation appears maintained. No evidence of calculi or hydronephrosis on either side.

Right kidney measures 10.7x6.5 cm.

Left kidney measures 10.5x6.0 cm.

URINARY BLADDER: Distended and appears normal. No evidence of abnormal wall thickening noted.

PROSTATE: Prostate is normal in size and echo-pattern.

No free fluid is seen.

IMPRESSION:

GRADE I FATTY LIVER.

Dr. RAMESH G
MBBS DMRD
RADIOLOGY