

#### LETTER OF APPROVAL / RECOMMENDATION

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

PARTICULARS	EMPLOYEE DETAILS	
NAME	MR. KUMAR SACHIN	
EC NO.	171067	
DESIGNATION	HEAD CASHIER "E"_II	
PLACE OF WORK	PANIPAT, JAWA COMPLEX RAILWAY R	
BIRTHDATE	02-12-1989	
PROPOSED DATE OF HEALTH	26-03-2022	
CHECKUP		
BOOKING REFERENCE NO.	21M171067100017106E	

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 25-03-2022 till 31-03-2022 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 Department Bank of Baroda

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



help@uktai.gov.in

2532 3496 0859

www.uidaii.g

Address: S/O: Parth Singh, house no-31, saini colony, model town, Karnal, Karnal Haryana, 132001

पताः SO: पार्थं सिंहः हाउस नदाः सैनी कॉलोनी,मॉडल टॉउन, ब्यूनादः करनारः करनाल, हरियाणाः 122001

Unique Identification Authority of India 一年 一大学 一大学 TDOSE INFOSYSTEMS PVT. LTD.



Diagnostics S. No. : LSHHI247247 MR No. : MR/22/002152
Patient Name : Mr. SACHIN KUMAR Doctor : Dr. RMO

Age/Sex : 33 YRS Sex : Male Date & Time : 26-Mar-2022 10:53 AM
OPD/IPD : OPD Sample Collection : 26-Mar-2022 10:58 AM

IPDNo : Reporting Date/Time : 26-Mar-2022 01:18 PM

ReferDoctor:

#### **BIO-CHEMISTRY**

Test Name	Status	Result	Biological Reference Interval	Unit
<b>BLOOD GLUCOSE FASTING</b>				
BLOOD SUGAR FASTING		96	70-110	mg/dl
<b>BLOOD GLUCOSE PP</b>				
BLOOD SUGAR PP		106	80-140	mg/dl
	HAI	EMATOLOGY		
<b>BLOOD GROUP And RH TYPE</b>				
BLOOD GROUP ABO & Rh		"B" POSITIVE	-	
CBC(COMPLETE BLOOD COUN	<u>T)</u>			
HAEMOGLOBIN		14.0	13.0-17.0	gm/dl
TLC (Total Leucocyte Count)		6600	4000-11000	/cumm
NEUTROPHILS		48	45-75	%
LYMPHOCYTES	Н	47	20-45	%
EOSINOPHILS		02	0-06	%
MONOCYTES		03	02-10	%
BASOPHILS		00	0-2	%
RBC		4.86	3.8-5.5	Millions/cmm
PCV/HAEMATOCRIT		43.5	35-45	%
MCV		89.5	76-96	fl
MCH		28.8	27-31	Picogram
MCHC		32.2	30-35	gm/dl
RDW		13.3	11.5-14.5	%
PLATELETS		1.50	1.5-4.0	Lacs
	BIO	-CHEMISTRY	<b>X</b>	

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(This is only professional opinion and not the diagnosis, Please correlate clinically)

CHD City, Sector-45, G.T. Road, Karnal, Haryana - 132116 Ph.: 0184-7110000, 9643000000, 8222008811,22



**BLOOD UREA** 

**URIC ACID, SERUM** 



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ReferDoctor:

CKLATININE SEKUM			
CREATININE	0.9	0.6-1.4	mg/dl

#### **HAEMATOLOGY**

ESR		e e		
ESR	Н	40	0-20	mm/1sthr
		<b>BIO-CHEMISTRY</b>		
LFT(LIVER FUNCTION TEST)				
BILIRUBIN (TOTAL)		0.73	0.1-1.2	mg/dl
BILIRUBIN DIRECT		0.21	0.0-0.3	mg/dl
BILIRUBIN INDIRECT		0.52	0.1-0.9	mg/dl
SGOT (AST)		30	0-40	IU/L
SGPT (ALT)		21	0-40.0	IU/L
ALK.PHOSPHATASE	Н	134	42.0-119	IU/L
TOTAL PROTEIN		7.3	6.0-8.0	gm/dl
ALBUMIN		4.2	3.20-5.0	gm/dl
GLOBULIN		3.1	2.30-3.80	gm/dl
A/G Ratio		1.3	1.0-1.60	
LIPID PROFILE			9	
TOTAL CHOLESTEROL		173	0-200	mg/dL
TRIGLYCERIDE	Н	382	0-161	mg/dL
HDL-CHOLESTEROL		40	35.0-85	mg/dL
LDL CHOLESTEROL		56.6	0-130	mg/dL
VLDL	Н	76.4	0-40	mg/dL
LDL / HDL RATIO		1.4	0.0-3.55	
UREA				
		200000000 T		- 10 CONTROL OF THE REAL PROPERTY AND THE RE

PARTHUM THOUSE

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mg/dl

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PARK GROUP OF HOSPITALS: West Delhi • South Delhi • Gurgaon • Karnal • Panipat • Hodal • Ambala • Behror

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ReferDoctor:

**URIC ACID** 5.2 3.0 - 7.2mg/dl

#### **CLINICAL PATHOLOGY**

#### **URINE ROUTINE EXAMINATION**

VOLUME		,	25	( <del>-</del> 1	ml
COLOUR			P.YELLOW	-	
APPEARANCE			CLEAR	-	
URINE pH			6.0	5.5-8.5	
SPECIFIC GRAVITY			1.010	1.005-1.030	
KETONE			NEG	· -	
URINE PROTEIN	×		NEG	<u>-</u>	
URINE SUGAR			NEG		
PUS CELLS			1-2	1-2	/HPF
RBC CELLS			1-2		/HPF
EPITHELIAL CELLS	* 27		0-1	2-3	/HPF
CRYSTALS			NIL	-	
CASTS			NIL	-	

LAB **TECHNICIAN** 

Dr. BHARAT JINDAL MD (PATHOLOGY)

MBBS, MD (PATHOLOGY)

Dr. NISHTHA KHERA

Dr. PARDIP KUMAR

CONSULTANT(MICROBIOLOGY)

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# ECHOCARDIOGRAPHY REPORT

ate : 26-03-2022

I.P.D.NO.: 0000

Patient name: MR. SACHIN KUMAR

AGE/Sex: 33 Y/M

Dr.Name

: SANJAY KUMAR GUPTA

#### 2D ECHO

Mitral value ....Normal ..... Pulmonary value ....Normal ..... Aortic valve ....Normal ....

Tricuspid valve.....Normal.....

#### 2 D RWMA

No RWMA (Regional wall motion abnormality at rest.

#### COLOUR DOPPLER

- ...No..|Significant vavular stenosis/ regurgitation

## COMMENTS AND SUMMARY

- All cardiac chambers of....Normal..... Size and shape... No......dilatation or hypertrophy
- ... No RWMA (regional wall motion abnormality) at rest.
- No...clot/vegetation/pericardial effusion
- LV ....Normal LV function ..... systolic function
- No... Significant valvular stenosis / regurgitation

#### FINAL IMPRESSION:

EF AT REST ....55%......

Dr. SANJAY KUMAR GUPTA SENIOR CONSULTANT MD (MED), DNB CARDIOLOGY FNB (INTERVENTION) CARDIOLOGY



# gnosis Laboratories



National Reference Lab.: 515-516, Sector-19, D.D.A. Plotted Development, Dwarka, New Delhi-110075

Lab No.

012203270100

Age/Gender 33 YRS/MALE Coll. On

27/Mar/2022 07:57AM

Name

Mr. SACHIN KUMAR

Reg. On

27/Mar/2022

Ref. Dr.

Approved On 27/Mar/2022 10:43AM

**Rpt. Centre** undefined **Printed On** 

30/Mar/2022 03:44PM

**Test Name** 

Value

Unit

**Biological Reference** 

**Interval** 

## BIOCHEMISTRY

HbA1c (Glycosylated haemoglobin), whole blood Method : HPLC

5.4

4.0 - 6.0

Estimated average plasma Glucose Method : Calculated

108.28

mg/dL

65 - 136

The test is approved by NGSP for patient sample testing.

Interpretation:

Metabolically normal patients	%	4.0 - 6.0
Good control:	%	< 7.0
Fair control:	%	7.0 - 8.0
Poor control:	%	> 8.0

Glycosylated hemoglobin or HbA1C is a reliable indicator of mean plasma glucose levels for a period of 8-12 weeks preceding the date on which the test is performed and is a more reliable indicator of overall blood sugar control in known diabetic patients than blood sugar levels. A value of 4-6 % is usually seen in metabolically normal patients, however diabetics with very good control can also yield similar values. The HbA1c test, thus can not be used to differentiate between diabetic patients with very good control over the plasma glucose levels from metabolically normal, non-diabetic subjects as both groups may reveal very similar values in the assay.

Dr. Smita Sadwani MD(Biochemistry) **Technical Director** 

Dr. Mukesh Sharma MD(Microbiology) Consultant Microbiologist Lab Director

MD(Pathology)

Dr. Deepak Sadwani Dr. Ashish Gautam MD, PGDCC **Consultant Cardiologist** 

Dr. Moushmi Mukherjee MBBS,MD (Pathology) **Consultant Pathologist** 



# gnosis Laboratories



National Reference Lab.: 515-516, Sector-19, D.D.A. Plotted Development, Dwarka, New Delhi-11007

Lab No.

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Age/Gender 33 YRS/MALE Coll. On

27/Mar/2022 07:57AM

Name

Mr. SACHIN KUMAR

Reg. On

27/Mar/2022

Ref. Dr.

Approved On 27/Mar/2022 10:33AM

undefined **Rpt. Centre** 

**Printed On** 

30/Mar/2022 03:44PM

**Test Name** 

Value

Unit

**Biological Reference** 

Interval

## **IMMUNOLOGY**

TSH (Hypersensitive), serum Method : ECLIA

1.61

uIU/ml

0.27 - 4.2

Please note the change in reference ranges

Interpretation:

1. Primary hyperthyroidism is accompanied by elevated serum FT3 and FT4 values alongwith depressed TSH levels.

2. Primary hypothyroidism is accompanied by depressed serum FT3 and FT4 values and elevated serum TSH levels.

3. High FT3 levels accompanied by normal FT4 levels and depressed TSH levels may be seen in T3 toxicosis.

4. Central hypothyroidsm occurs due to pitutary or thalamic malfunction (secondary and tertiary hypothyroidism respectively). This relatively rare but important condition is indicated by presence of low serum FT3 and FT4 levels, in conjunction with TSH levels that are paradoxically either low/normal or are not elevated to levels that are expected.

The following ranges are recommended for pregnant females:

First trimester	uIU/ml	0.1 - 2.5
Second trimester	uIU/ml	0.2 - 3.0
Third trimester	uIU/ml	0.3 - 3.0

\*Disclaimer: This is an electronically validated report, if any discrepancy found should be confirmed by user. This test was performed at Prognosis Laboratories, 515-516, Sector 19, Dwarka, New Delhi-110075. End Of Report \*\*

Dr. Smita Sadwani MD(Biochemistry) **Technical Director** 

Dr. Mukesh Sharma MD(Microbiology)

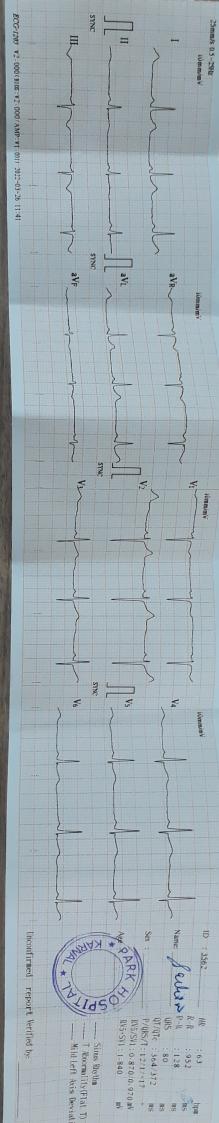
Consultant Microbiologist Lab Director

MD(Pathology)

Dr. Deepak Sadwani Dr. Ashish Gautam MD, PGDCC **Consultant Cardiologist** 

Dr. Moushmi Mukherjee MBBS,MD (Pathology) **Consultant Pathologist** 

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SACHIN KUMAR 33YRS 50469 M CHEST PA VIEW PARK HOSPITAL CHD CITY, NH-1, KARNAL 26/3/2022