



MRS REKHA WAGH 37/Y CHEST PA 22-Jan-22  
SADGURU HOSPITAL NASHIK.

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	REKHA ANILWAGH
DATE OF BIRTH	01-06-1983
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	22-01-2022
BOOKING REFERENCE NO.	21M85010100009726S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. WAGH ANIL WALMIK
EMPLOYEE EC NO.	85010
EMPLOYEE DESIGNATION	DAFTARY
EMPLOYEE PLACE OF WORK	SONAJ
EMPLOYEE BIRTHDATE	01-06-1975

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 **18-01-2022** 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'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))





### SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
<b>General Tests</b>	<b>General Tests</b>
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation







Patient Name : MRS. REKHA ANIL WAGH

Date : 22 Jan 2022

Referred By : SADGURU HOSPITAL

Age : 38 YEARS Sex : F

## ULTRASONOGRAPHY ABDOMEN & PELVIS

- \* LIVER : Normal in contour and parenchymal texture.  
No focal parenchymal lesion seen.  
CBD and Intrahepatic biliary channels are normal.
- \* G B : Physiologically distended. No gall stones seen.
- \* PANCREAS : Normal in size and parenchymal echo pattern with normal peripancreatic planes.
- \* SPLEEN : Normal in size, contour with homogenous echo pattern.
- \* AORTA & I V C: Normal. No evidence of paraaorta/ paracaval lymphadenopathy
- \* KIDNEYS : Normal in size, contour and echotexture.  
No calculus or hydronephrosis is seen on both sides.  
Renal sinus and cortical echoes are normal.  
Peri renal planes are normal.  
Cortico-Medullary differentiation is maintained.  
RK -9.1 x 3.8 cms LK -9.7 x 3.7 cms.
- \* URINARY BLADDER : Partially distended. Walls are normal.
- \* UTERUS: Normal in size, shape and myometrial echotexture. IUCD seen insitu.
- \* OVARIES: Both ovaries are normal.

### **IMPRESSION :**

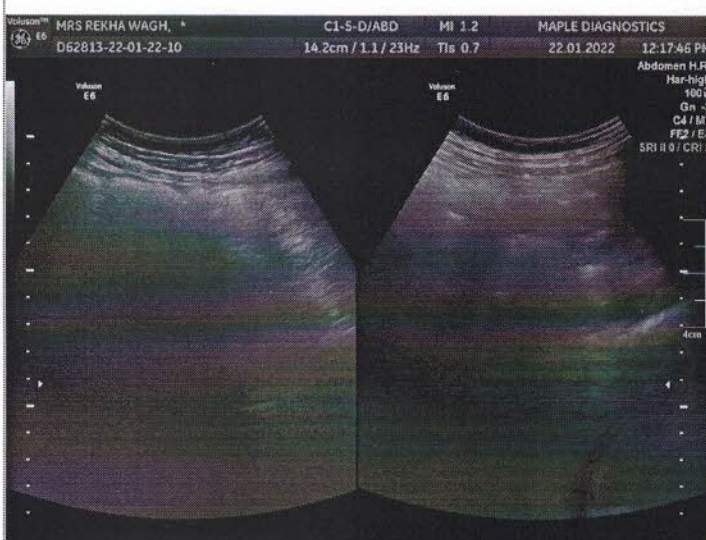
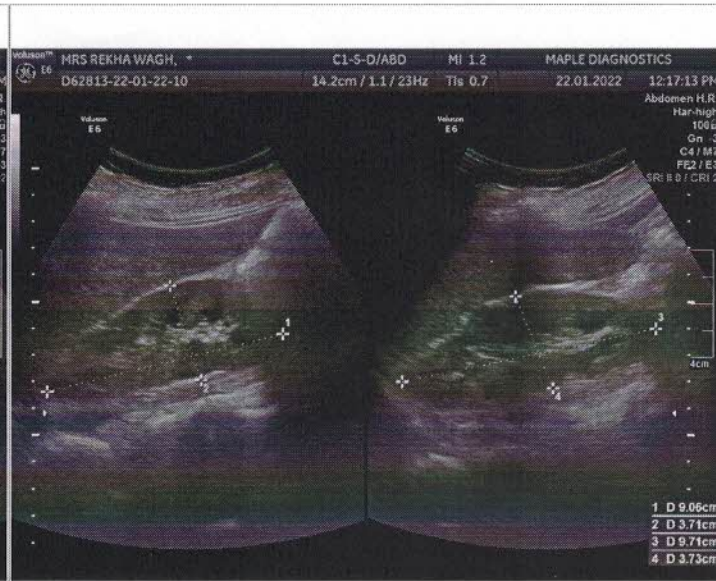
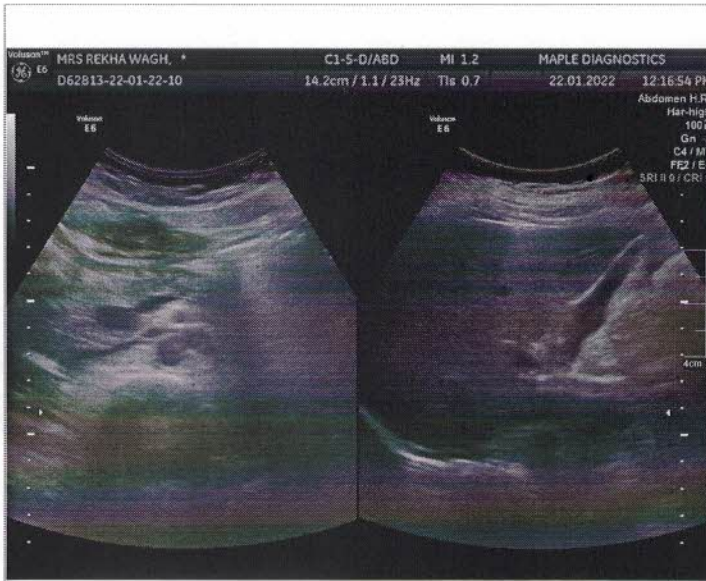
→No significant abnormality seen




  
**DR. HARDIK PATEL**  
**DNB Radiodiagnosis**



# MRS REKHA WAGH, : US From 1/22/2022





Patient ID	: 021	UHID No.	: MEDIWHEEL
<b>Patient Name</b>	: <b>MRS. REKHA ANIL WAGH</b>	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
<b>Referred By</b>	: SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	 * 0 2 1 *

**COMPLETE BLOOD COUNT**

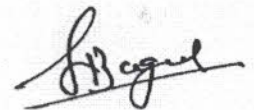
Investigation	Result	Unit	Bio. Ref. Range
<b>Haemoglobin (HB)</b>	13.2	gm/dl	12-16
RBC	4.21	10 <sup>6</sup> /uL	4.2-5.4
PCV	39.8	%	37-47
MCV	94.5	fl	70-100
MCH	<b>31.4</b>	pg	27-31
MCHC	33.2	g/dl	32-36
RDW-CV	13.0	%	11.5-14.5
<b>Platelet count</b>	318000	/cumm	150000-450000
<b>Total Leucocytes Count</b>	5800	/cumm	4000-11000
<b>DIFFERENTIAL LEUCOCYTES COUNT</b>			
Neutrophils	56	%	44-76
Lymphocytes	35	%	20-40
Monocytes	04	%	2-10
Eosinophils	05	%	1-6
Basophils	00	%	0-2

----- END OF REPORT -----




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**Dr. Pravin Bagul**  
(MD Path  
Consulting Pathologist)

Patient ID	: 021	UHID No.	: MEDIWHEEL
<b>Patient Name</b>	: <b>MRS. REKHA ANIL WAGH</b>	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
<b>Referred By</b>	: SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	 * 0 2 1 *


**HAEMATOLOGY.**


Investigation	Result
<b>BLOOD GROUP ABO &amp; RH TYPING</b> (EDTA Whole Blood)	
Blood group (ABO Typing)	AB
RhD Factor (Rh typing)	POSITIVE
Method	Manual Slide Hemagglutination
Note	Kindly recheck Blood Group before blood transfusion
<b>ESR (Wintrobe)</b> (EDTA Whole Blood)	<b>29</b> mm/1hr. 0-19

END OF REPORT

  
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Consulting Pathologist)

Patient ID	: 021	UHID No.	: MEDIWHEEL
Patient Name	: <b>MRS. REKHA ANIL WAGH</b>	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	 * 0 2 1 *

**LIVER FUNCTION TEST**

Investigation	Result	Unit	Bio. Ref. Range
<b>LIVER FUNCTION TEST</b>			
SGOT (AST) (Serum,IFCC)	20.3	U/L	Upto 40
SGPT (ALT) (Serum,IFCC)	36.7	U/L	Upto 40
Bilirubin-Total (Serum,Diazo)	1.00	mg/dL	0.1-1.2
Bilirubin-Direct (Serum,Diazo)	0.40	mg/dL	0.0-0.5
Bilirubin- Indirect	0.60	mg/dL	0.1-1.0
Alkaline Phosphatase (Serum, ALP-AMP)	122.6	U/L	54-306
Total Protein (Serum, Modified Biuret)	6.40	g/dl	6.0-8.5
Albumin (Serum,Bromocresol green)	3.20	g/dl	3.0-5.4
Globulin	3.20	g/dl	1.8-3.6
A/G Ratio (Calculated)	<b>1.00</b>		1.1-2.2

----- END OF REPORT -----

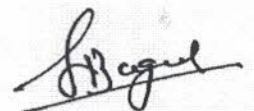


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Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	

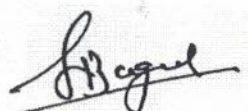
**BIOCHEMISTRY**


Investigation	Result	Unit	Bio. Ref. Range
<b>Fasting Blood Glucose</b> (Plasma-F,GOD-POD)	87.7	mg/dL	60-110
Parallel Urine Glucose	NIL		
<b>Gamma GT (GGTP)</b> (Serum, Enzymatic)	12.5	U/L	9-36
<b>Sr. Uric Acid</b> (Serum, Uricase Peroxidase)	6.0	mg/dL	2.5-6.0
<b>BLOOD UREA NITROGEN (BUN)</b>			
Sr. Blood Urea (Serum,Urease)	25.0	mg/dL	10-50
BUN-Blood Urea Nitrogen	12	mg/dL	8-23
Remark : In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.			
<b>Sr. Creatinine</b> (Serum,Picrate Alcalin)	0.90	mg/dL	0.5-1.2
<b>Sr. Blood Urea</b> (Serum,Urease)	25.0	mg/dL	10-50
Remark : In blood, Urea is usually reported as BUN and expressed in mg/dl. BUN mass units can be converted to urea mass units by multiplying by 2.14.			

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Patient ID	: 021	UHID No.	: MEDIWHEEL
Patient Name	: MRS. REKHA ANIL WAGH	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: SERUM
		Barcode	


**LIPID PROFILE**

Investigation	Result	Unit	Bio. Ref. Range
Nature Of Sample (Serum, Enzymatic)	Fasting		
Serum Cholesterol -Total	185.3	mg/dL	Desirable - Upto 200 Borderline High - 200-239 High - Above 240
Serum Triglycerides	140.7	mg/dL	Normal: Below 150 Borderline High :150-199 High : 200-499 Very High : >= 500
HDL Cholesterol	41.3	mg/dL	Major risk factor for heart disease: < 40 Negative risk factor for heart disease: >=60
LDL Cholesterol	116	mg/dL	Optimal: < 100 Near Optimal/Above Optimal: 100-129 Borderline High: 130-159 High : 160-189 Very High : >= 190
VLDL Cholesterol	28	mg/dL	Upto 40
CHOL/HDL Ratio	4.49	Ratio	0-4.5
LDL / HDL Ratio	2.8	Ratio	1.5-3.5

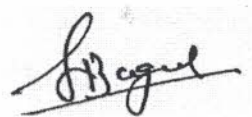
Note: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.

VLDL,CHOL/HDL Ratio, LDL/HDL Ratio, LDL Cholesterol,serum, are calculated parameter


----- END OF REPORT -----

  
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Patient ID	: 021	UHID No.	: MEDIWHEEL
Patient Name	: MRS. REKHA ANIL WAGH	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
Referred By	: SADGURU HOSPITAL	Sample Type	: Whole Blood
		Barcode	

**BIOCHEMISTRY.**

Investigation	Result	Unit	Bio. Ref. Range
HbA1C	5.2	%	Non-diabetic: <= 5.8 Pre-diabetic: 5.9-6.4 Diabetic: = >6.4
Mean Blood Glucose level	103	mg/dL	
Method	Nephelometry		

INTERPRETATION :

- 1] HbA1c is used for monitoring diabetic control . If reflects the estimated average glucose (eAG) .
- 2] HbA1c has been endorsed by clinical groups & ADA(American Diabetes Association ) guidelines 2012 , for diagnosis of diabetes using a cut- off point of 6.5%. ADA defined biological reference range for HbA1c is 4% - 6%. Patient with HbA1c value between 6.0% to 6.5% are considered at risk for developing diabetes in the future .
- 3] Trends in HbA1c are a better indicator of diabetes control than a solitary test .
- 4] In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent Control - 6 to 7 % , Fair to Good Control - 7 to 8 % , Unsatisfactory Control - 8 to 10 % and Poor Control - More than 10 % .

----- END OF REPORT -----




*Dr. Pravin Bagul*

**Dr. Pravin Bagul**  
(MD Path  
Consulting Pathologist)

*sadguru\_Admin*

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Patient ID	: 021	UHID No.	: MEDIWHEEL
<b>Patient Name</b>	: <b>MRS. REKHA ANIL WAGH</b>	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 01.25 PM
<b>Referred By</b>	: SADGURU HOSPITAL	Sample Type	: URINE
		Barcode	

**REPORT ON URINE ROUTINE**


<b>Investigation</b>	<b>Result</b>
Specimen Name	Urine
<b>PHYSICAL EXAMINATION</b>	
Nature of specimen	Random
Colour	Pale Yellow
Transparency (Appearance)	Clear
Reaction (pH)	Acidic
Quantity	10 ml
Deposits	Absent
Specific Gravity	1.015
<b>CHEMICAL EXAMINATION</b>	
Urine Protein (Albumin)	Absent
Urine Glucose (Sugar)	Absent
Urine Ketones (Acetone)	Absent
Bile pigments	Absent
Bile Salt	Absent
<b>MICROSCOPIC EXAMINATION</b>	
Red blood cells	Not Seen
Pus Cells (WBCs)	2-4/hpf
Epithelial cells	2-3/hpf
Crystals	Not seen
Cast	Not seen
Bacteria	Absent

----- END OF REPORT -----

  
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(MD Path  
Consulting Pathologist)



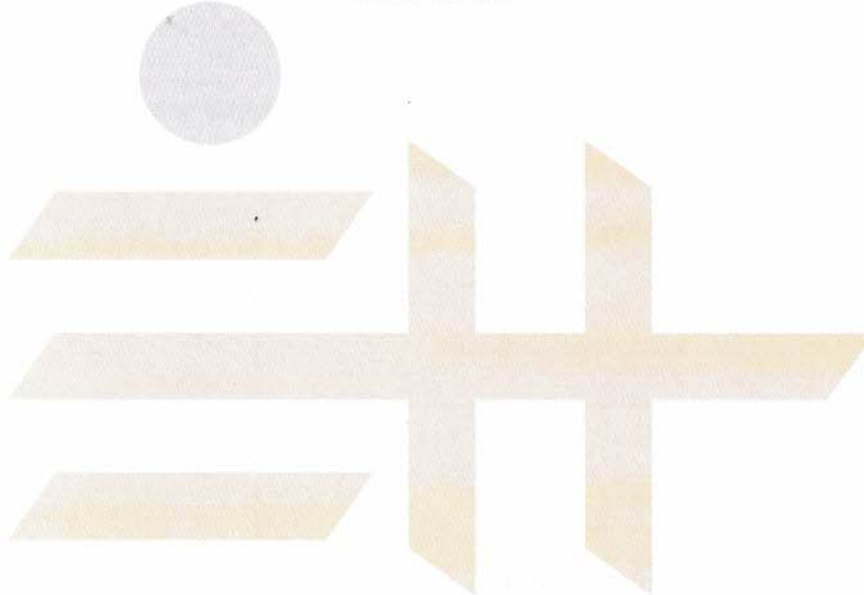
# SADGURU PATHOLOGY LABORATORY

Patient ID	: 021	UHID No.	: MEDIWHEEL
<b>Patient Name</b>	: <b>MRS. REKHA ANIL WAGH</b>	Regn/Sample Date	: 22-Jan-2022 01.17 PM
Age / Sex	: 39 Years / Female	Report Date	: 22-Jan-2022 02.57 PM
<b>Referred By</b>	: SADGURU HOSPITAL	Sample Type	: PLASMA PP
		Barcode	 * 0 2 1 *

## BIOCHEMISTRY

Investigation	Result	Unit	Bio. Ref. Range
<b>Postmeal Blood Glucose</b> (Plasma-PM,GOD-POD)	92.1	mg/dL	Upto 140
Parallel Urine Glucose	SNR		

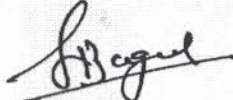
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**Dr. Pravin Bagul**  
(MD Path  
Consulting Pathologist)



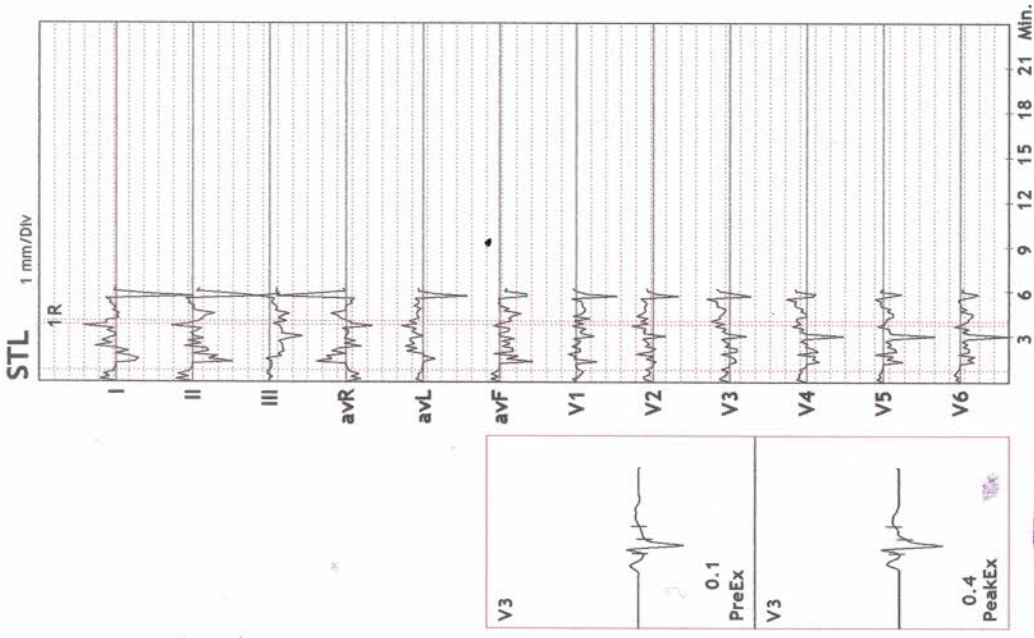
**NASHIK**  
 45916/MRS REKHA WAGH 39 Yrs/Female 53 Kg/161 Cms  
 Date: 22-Jan-2022 12:00:00 AM

Ref. By : BOB	Protocol : BRUICE1				
Medication : NO ANY	History : NO ANY	H.R. (bpm)	R.P.P. (mmHg)	PVC	Comments
Objective : NYA	Phase Time (Min:Sec)	Speed (mph)	Grade (%)	METs	
Supine				1.0	111 130/80 144 -
Standing				1.0	107 130/80 139 -
HV				1.0	119 130/80 154 -
ExStart				1.0	116 130/80 150 -
Stage 1	3:00	1.5	10.0	4.2	150 140/92 210 -
PeakEx	0:16	2.5	12.0	4.5	149 140/92 208 -
Recovery	1:00	1.1	0.0	1.0	131 140/92 183 -
Recovery	2:00	1.1	0.0	1.0	87 150/104 130 -
Recovery	2:05	1.1	0.0	1.0	90 150/104 135 -

*RA. Wagh.*

**Findings :**  
 Exercise Time : 3:17 minutes  
 Max HR attained : 150 bpm 83% of Max Predictable HR 181  
 Max BP : 140/92(mmHg)  
 WorkLoad attained : 4.5 (Poor Effort Tolerance )  
 No significant ST segment changes noted during exercise or recovery.  
 No Angina/Arrhythmia/S3/murmur  
 Final Impression : Test is **POSITIVE** for inducible ischaemia.  
 Maximum Depression: 3:17

Advice /Comments:







NASHIK  
45916/MRS REKHA WAGH  
39 Yrs/Female  
53 Kg/161 Cms

Date: 22-Jan-2022 12:00:00 AM

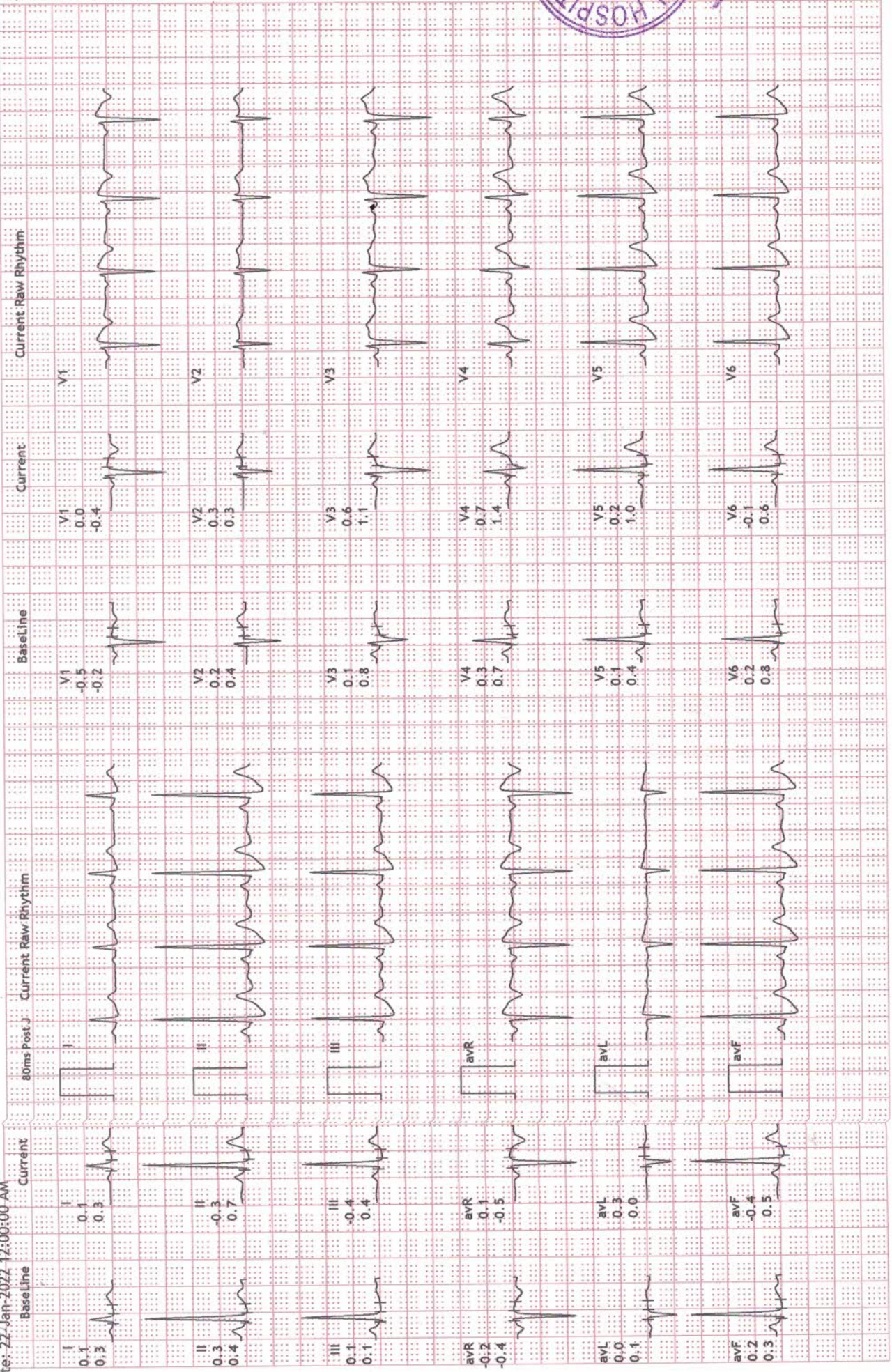
HR: 87 bpm  
METS: 1.0  
BP: 150/104

MPHR: 48% of 181  
Speed: 1.1 mph  
Grade: 0.0%

Raw ECG  
BRUICE1  
(1.0-100)HZ

Ex Time 03:16  
BLC : On  
Notch : On

Recovery : ( 02:00 )  
10.0 mm/mV  
25 mm/Sec.





**NASHIK**  
 45916/MRS REKHA WAGH  
 39 Yrs/Female  
 53 Kg/161 Cms  
 Date: 22-Jan-2022 12:00:00 AM

**12 Lead + Comparison**

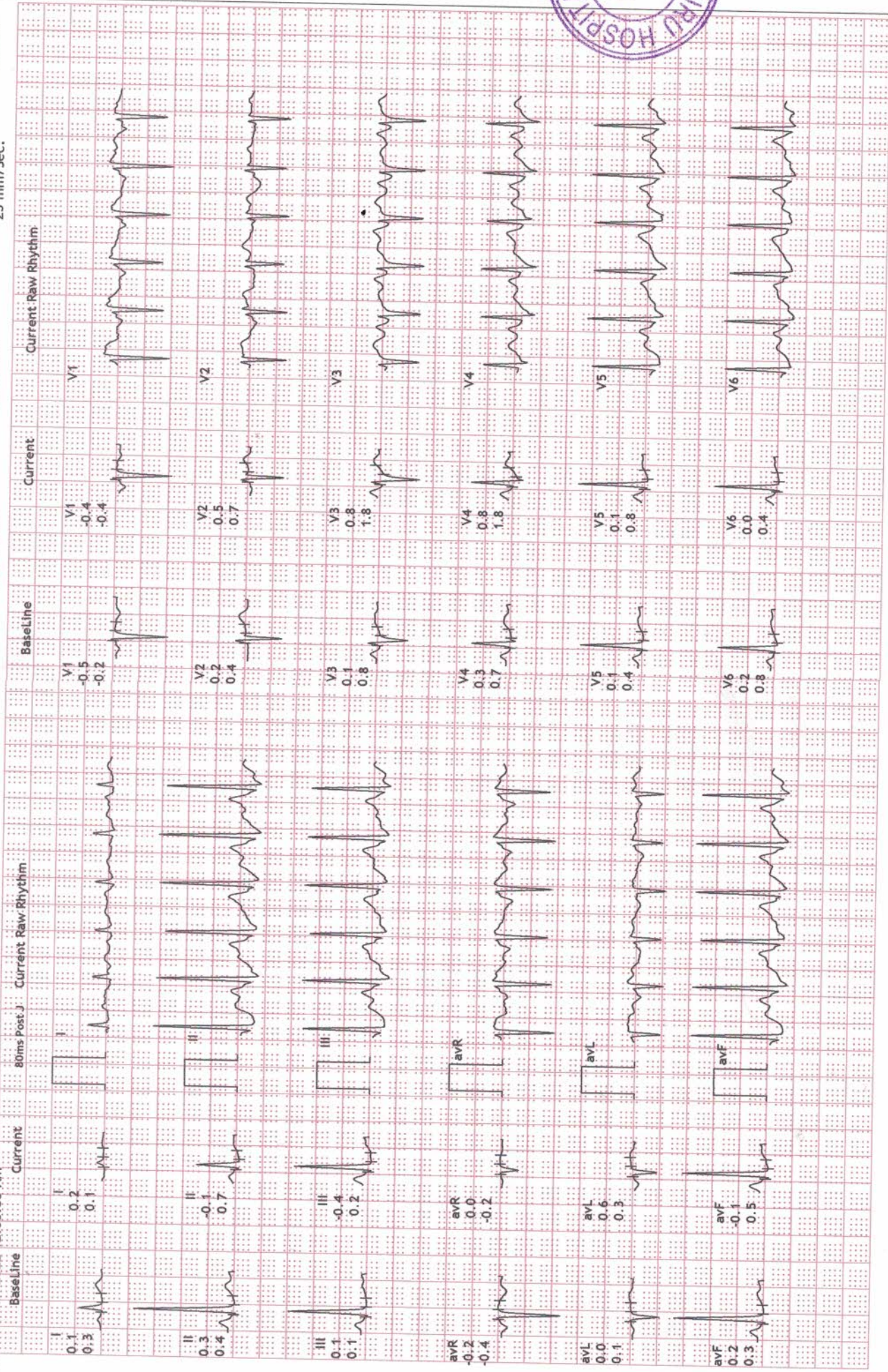
HR: 131 bpm  
 METS: 1.0  
 BP: 140/92

MPHR: 72% of 181  
 Speed: 1.1 mph  
 Grade: 0.0%

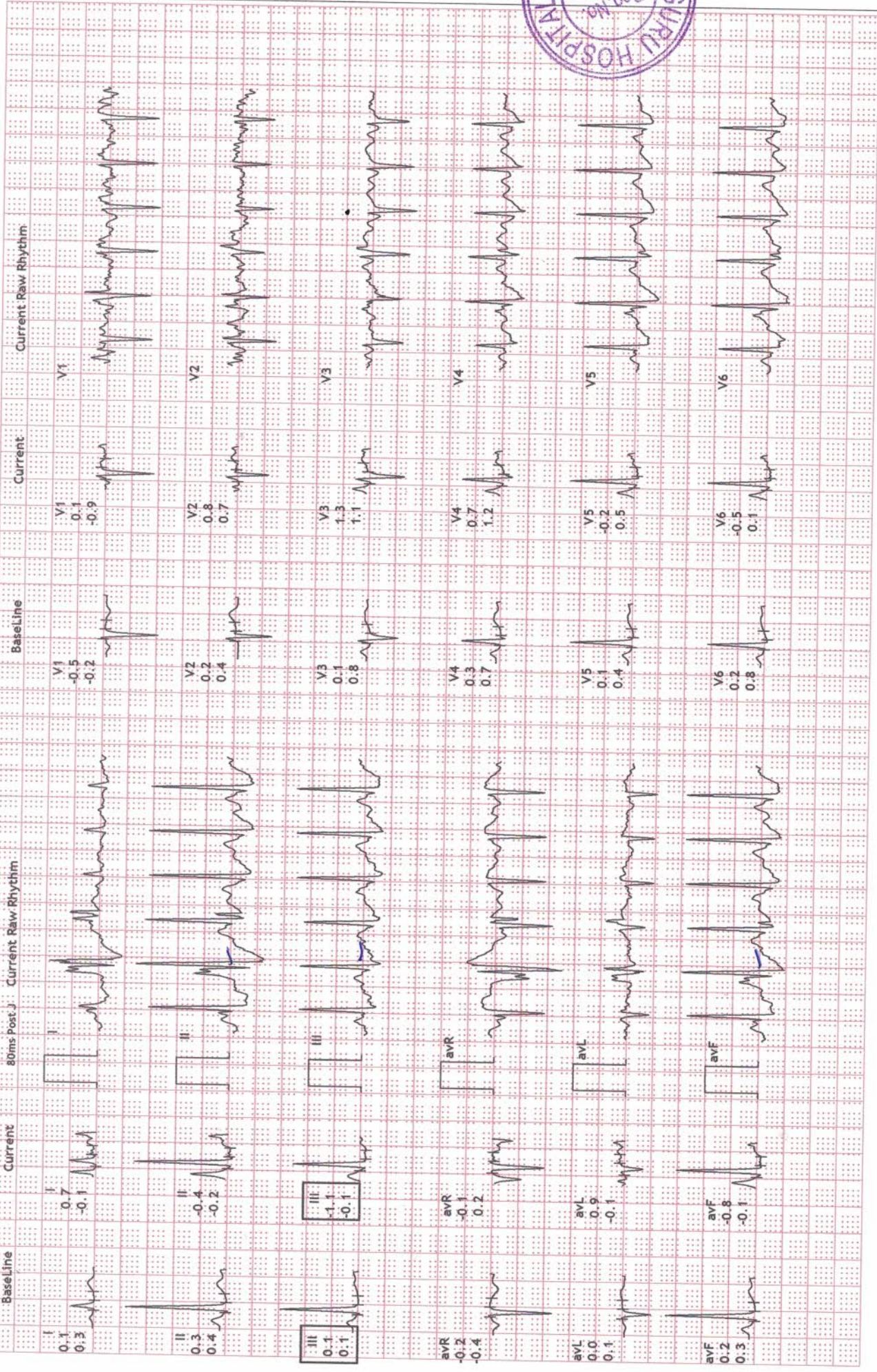
Raw ECG  
 BRUJICE1  
 (1.0-100)HZ

Ex Time 03:16  
 BLC : On  
 Notch : On

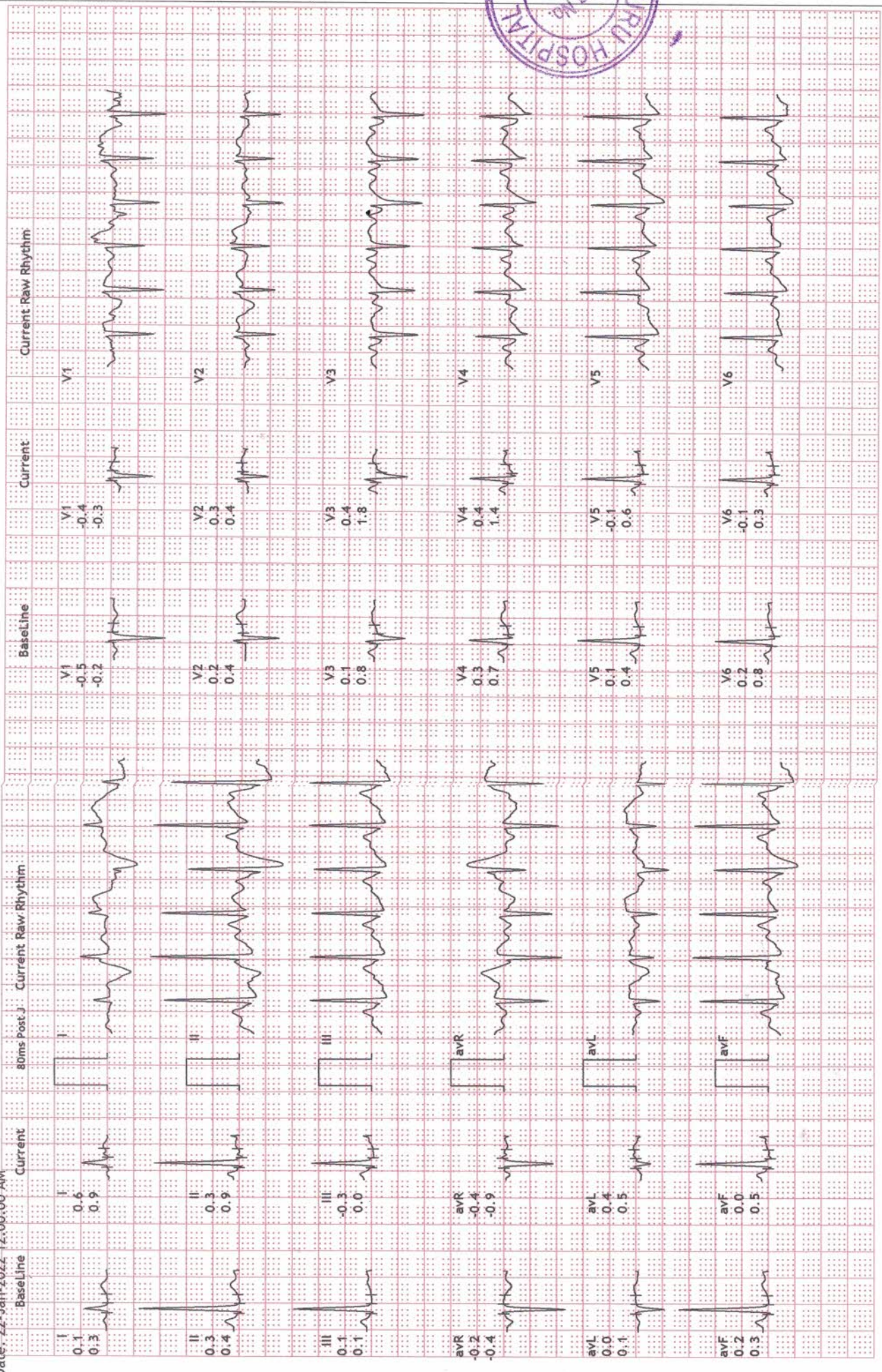
Recovery : ( 01:00 )  
 10.0 mm/mV  
 25 mm/Sec.















**NASHIK**  
 45916/MRS REKHA WAGH  
 39 Yrs/Female  
 53 Kg/161 Cms

HR: 115 bpm  
 METS: 1.0  
 BP: 130/80

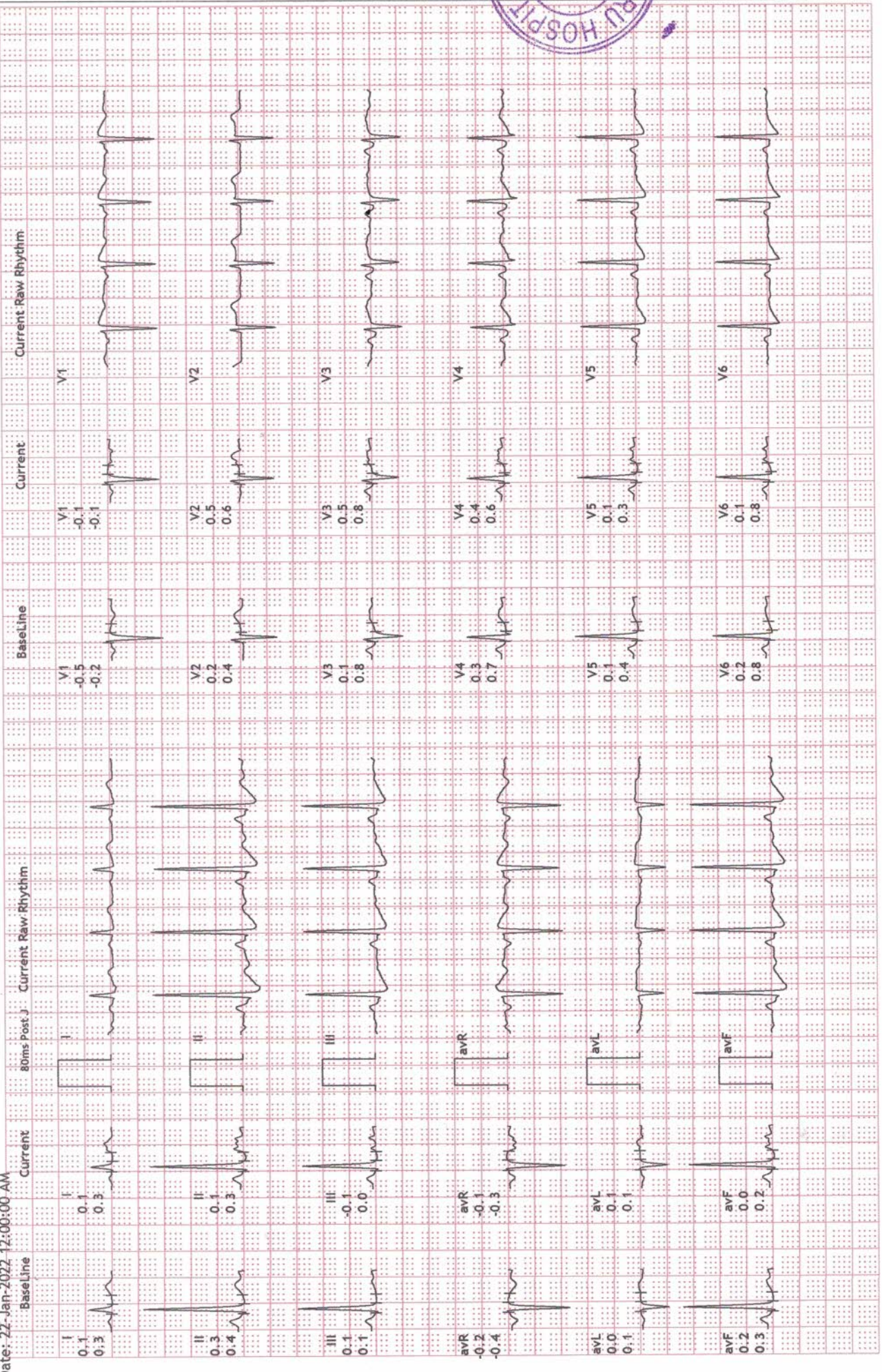
MPHR: 63% of 181  
 Speed: 0.0 mph  
 Grade: 0.0%

Raw ECG  
 BRUICE1  
 (1.0-100)Hz

Ex Time 00:00  
 BLC :On  
 Notch :On

ExStrt  
 10.0 mm/mV  
 25 mm/Sec.

Date: 22-Jan-2022 12:00:00 AM







**NASHIK**  
45916/MRS REKHA WAGH  
39 Yrs/Female  
53 Kg/161 Cms

Date: 22-Jan-2022 12:00:00 AM

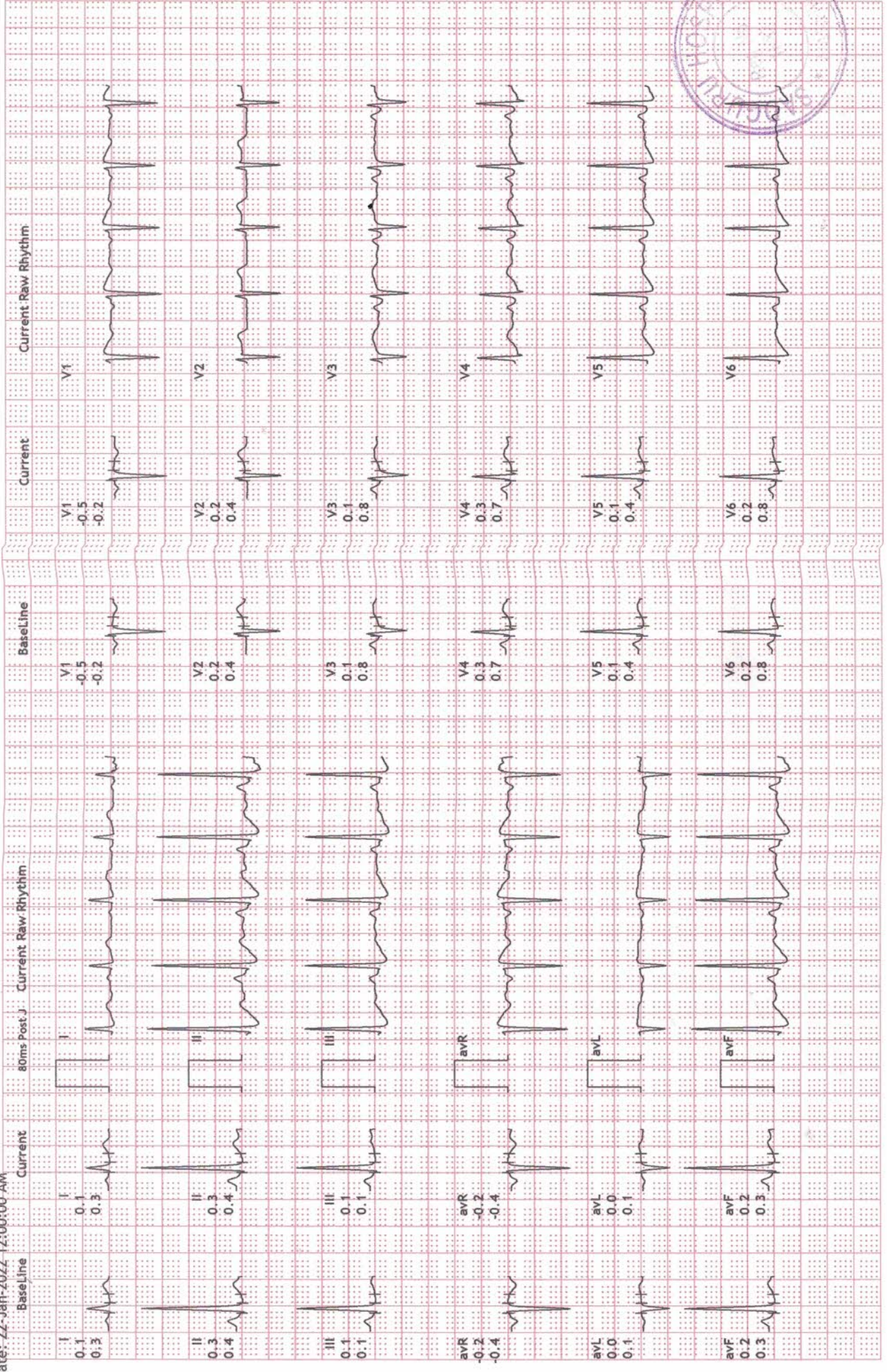
HR: 119 bpm  
METS: 1.0  
BP: 130/80

MPHR: 65% of 181  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUCE1  
(1.0-100)Hz

Ex Time 00:36  
BLC :On  
Notch :On

HV  
10.0 mm/mV  
25 mm/Sec.







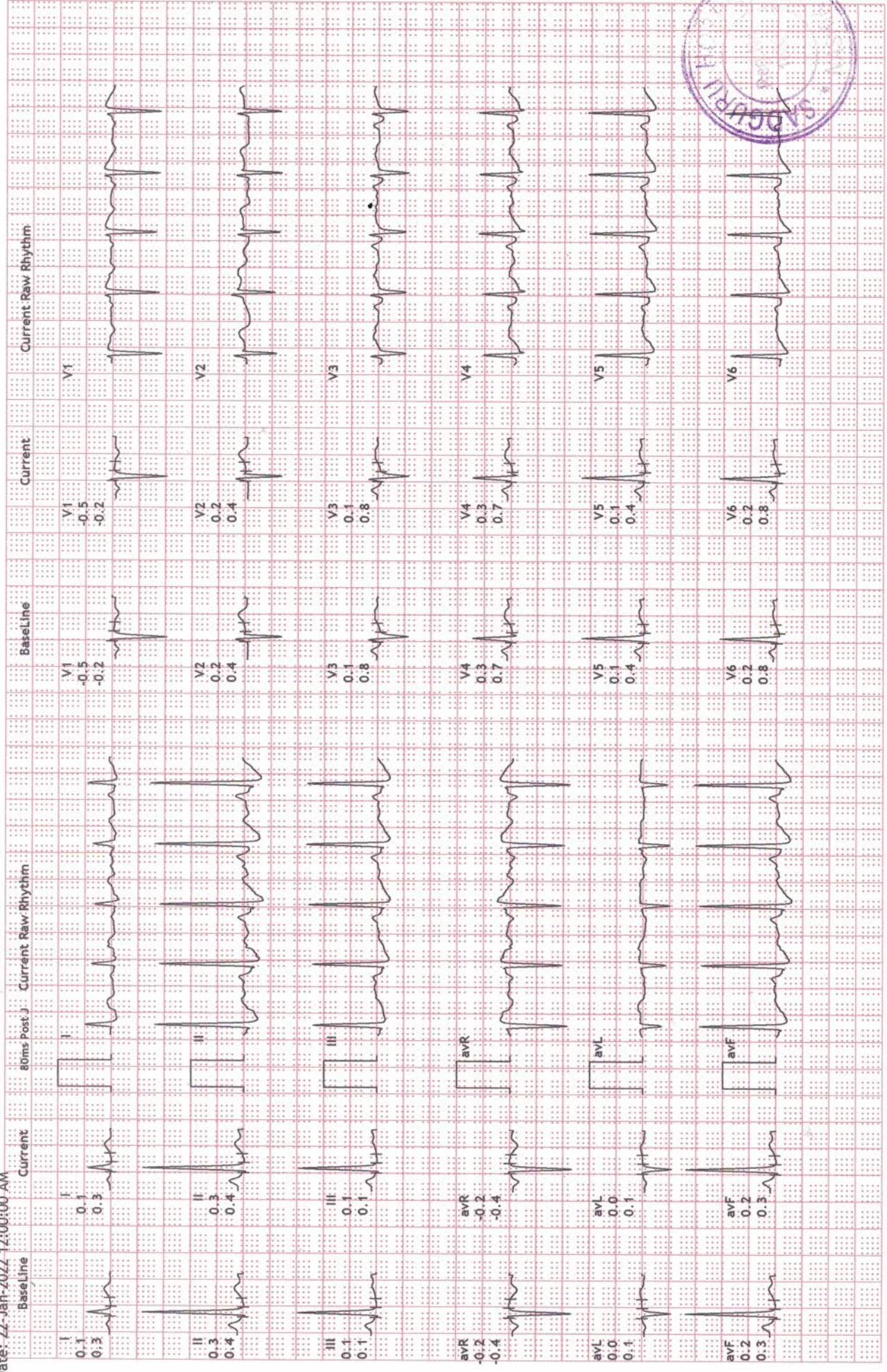
**NASHIK**  
45916/MRS REKHA WAGH  
39 Yrs/Female  
53 Kg/161 Cms  
Date: 22-Jan-2022 12:00:00 AM

HR: 106 bpm  
METS: 1.0  
BP: 130/80

MPHR: 58% of 181  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUCE1  
(1.0-100)HZ

STANDING  
10.0 mm/mV  
25 mm/Sec.







NASHIK  
45916/MRS REKHA WAGH  
39 Yrs/Female  
53 Kg/161 Cms

HR: 107 bpm  
METS: 1.0  
BP: 130/80

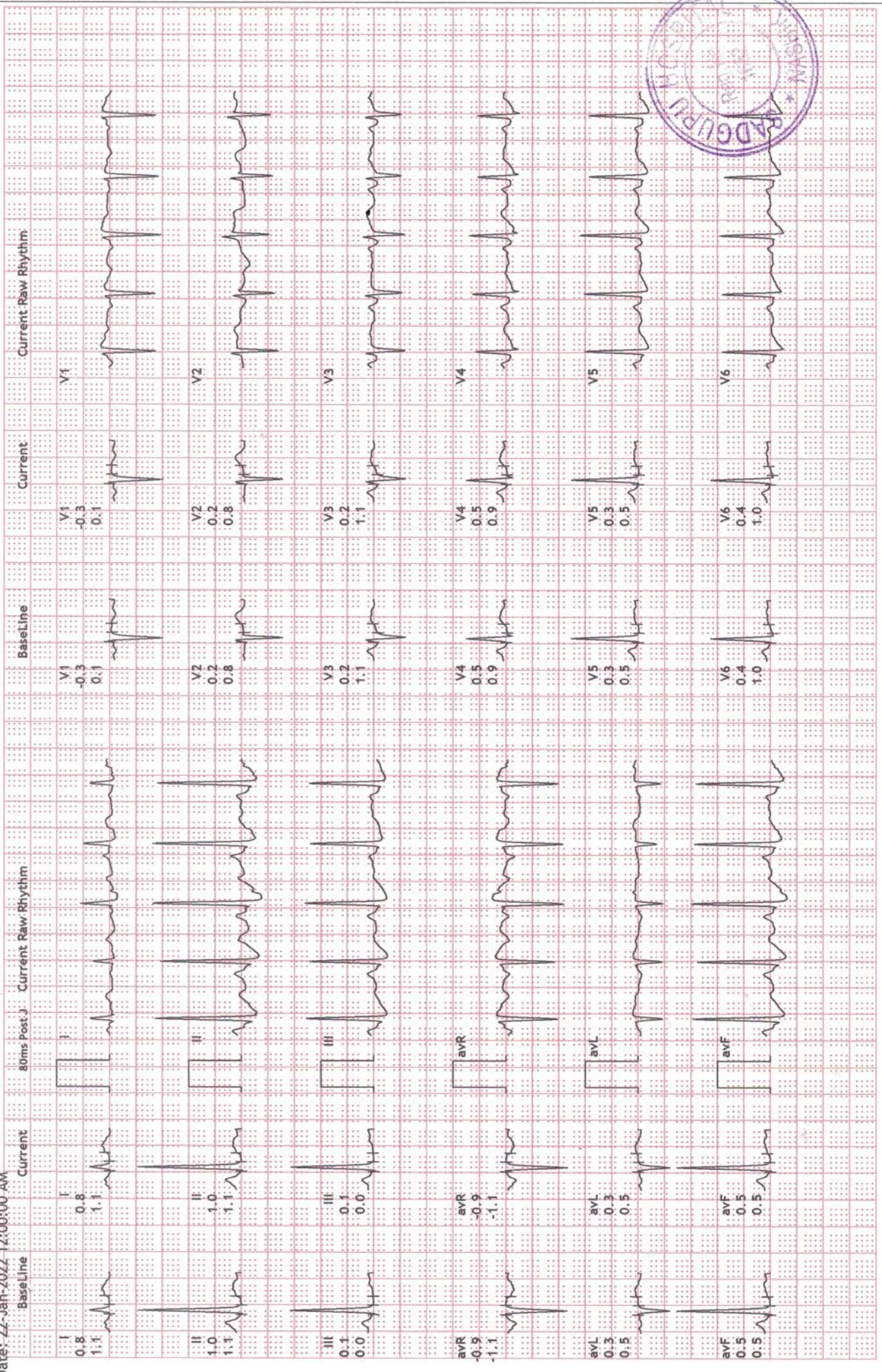
MPHR: 59% of 181  
Speed: 0.0 mph  
Grade: 0.0%

Raw ECG  
BRUICE1  
(1.0-100)HZ

Ex Time 00:32  
BLC :On  
Notch :On

SUPINE  
10.0 mm/mV  
25 mm/Sec.

Date: 22-Jan-2022 12:00:00 AM





- MULTI SPECIALITY
- CRITICAL CARE
- TRAUMA CARE CENTER

<b>Patient Name</b> : MRS REKHA WAGH	<b>Patient ID</b> : 0
<b>Age</b> : 37	<b>Sex</b> : Female
<b>Referring Physician</b> : Dr. SADGURU HOSPITAL	<b>Date</b> : Jan. 22, 2022

### X-RAY CHEST PA

MRS REKHA WAGH's plain P.A. Radiograph of chest shows :-

Both lung fields show normal and equal radiolucency.

There is no pulmonary parenchymal abnormal density.

The broncho vascular markings show normal size and distribution.

The hilar shadows are normal in size, position and density.

Both Cardiophrenic and Costophrenic angles are clear.

The Cardiac silhouette is within normal limits.

Aortic shadow is normal.

Rest of the visualized mediastinum shadows are normal.

Both domes of diaphragms are normal.

The visualised bony thorax is normal.

**CONCLUSION : NO SIGNIFICANT ABNORMALITY NOTED IN THE CHEST P.A. VIEW RADIOGRAPH.**



DR. Nikunj Kothia  
MBBS, DMRD Reg -2009093218



"Under one roof" Quality Healthcare Centre





Patient Name : Mr. Rekha Anil Wagh  
Age/Sex : 39 Years / Male | Regn. No. : 211281  
Reference By : Self | Regn. Date : 22/01/2022 15:00  
Collection Center : Sadguru Hos./Lab (Panchavati) | Report Date : 22/01/2022 18:55

## IMMUNO ASSAY

Test Name	Result	Units	Biological Reference Interval
Total Triiodothyronine (T3) :	136.7	ng/dl	[80 - 200 ng/dl] For Pregnancy: First Trimester: 81-190 Second Trimester: 100-260 Third Trimester: 100-260
Total Thyroxine (T4) :	7.89	µg/dl	[4.5 - 14.1 ug/dl]
Thyroid Stimulating Hormone (ultra TSH) :	1.63	µIU/ml	[0.270 - 4.2] For Pregnancy: First Trimester: 0.1-2.5 Second Trimester: 0.2-3.0

**Method:** Fully Automated ElectroChemiluminescence System


**Test Done On Fully Automated Cobas e411\_Japan**

\*Result relates only to the sample as received. Kindly correlate with clinical conditions.

### NOTE:

1. Decreased T3 (normal T4 & TSH) have minimal clinical significance and are not recommended for diagnosis of hypothyroidism
2. Total T3 may be decreased by < 25% in healthy older individuals.
3. Total T3 & T4 values may also be altered under other conditions like pregnancy, drugs (androgens,estrogens, O C phenytoin) nephrosis etc. In such cases free T3 and Free T4 are preferred tests.
4. Clinically correlate the result or repeat the tests with fresh sample if TSH values are between 5 - 15 mIU/L as physiological factors may give falsely high TSH.

----- END OF REPORT -----

  
Dr. Pravin Bagul  
M.D. (Pathology)  
Consulting Pathologist

