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ENT for Ear, Nose & Throat Checkup				✓
Eye Checkup				✓
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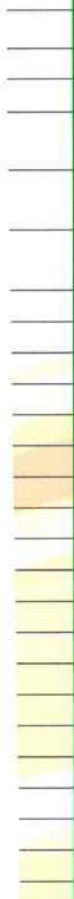


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आधुनिक पुस्त तथा ते हैं जब

श्य अच्छे खिम को प्रारम्भिक

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# INDRA DIAGNOSTIC CENTRE

Add: Kamla Nehru Road, Old Katra, Prayagraj  
Ph: 9235447965, 0532-2548257  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs. MONICA KIRAN KUJUR - PKG1000023	Registered On	: 03/Oct/2021 09:55:38
Age/Gender	: 38 Y 1 M 6 D /F	Collected	: 03/Oct/2021 10:09:24
UHID/MR NO	: ALDP.0000082218	Received	: 03/Oct/2021 10:19:38
Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 13:46:33
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### Blood Group (ABO & Rh typing) \* , Blood

Blood Group	AB
Rh ( Anti-D)	POSITIVE

#### COMPLETE BLOOD COUNT (CBC) \* , Blood

Haemoglobin	<b>12.10</b>	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	8,700.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE

#### DLC

Polymorphs (Neutrophils )	69.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	26.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	2.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	< 1	ELECTRONIC IMPEDANCE

#### ESR

Observed	14.00	Mm for 1st hr.
Corrected	-	Mm for 1st hr. < 20
PCV (HCT)	<b>33.00</b>	cc % 40-54

#### Platelet count

Platelet Count	1.60	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
PDW (Platelet Distribution width)	15.80	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	<b>62.20</b>	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.23	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	<b>14.60</b>	fL	6.5-12.0	ELECTRONIC IMPEDANCE

#### RBC Count

RBC Count	<b>5.56</b>	Mill./cu mm	3.7-5.0	ELECTRONIC IMPEDANCE
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## DEPARTMENT OF HAEMATOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>Blood Indices (MCV, MCH, MCHC)</b>				
MCV	61.10	fl	80-100	CALCULATED PARAMETER
MCH	21.80	pg	28-35	CALCULATED PARAMETER
MCHC	35.70	%	30-38	CALCULATED PARAMETER
RDW-CV	13.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	38.80	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	6,003.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	174.00	/cu mm	40-440	



  
Dr. Akanksha Singh (MD Pathology)





# INDRA DIAGNOSTIC CENTRE

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Age/Gender	: 38 Y 1 M 6 D /F	Collected	: 03/Oct/2021 13:39:52
UHID/MR NO	: ALDP.0000082218	Received	: 03/Oct/2021 13:56:29
Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 14:31:09
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>Glucose Fasting</b> <i>Sample: Plasma</i>	85.90	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

#### Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impaired Glucose Tolerance.

<b>Glucose PP</b> <i>Sample: Plasma After Meal</i>	135.50	mg/dl	<140 Normal 140-199 Pre-diabetes >200 Diabetes	GOD POD
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#### Interpretation:

- a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
- b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetes in future, which is why an Annual Health Check up is essential.
- c) I.G.T = Impaired Glucose Tolerance.



  
Dr. Akanksha Singh (MD Pathology)





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UHID/MR NO	: ALDP.0000082218	Received	: 04/Oct/2021 10:50:17
Visit ID	: ALDP0196782122	Reported	: 04/Oct/2021 11:32:04
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### GLYCOSYLATED HAEMOGLOBIN (HBA1C) \*\*, EDTA BLOOD

Glycosylated Haemoglobin (HbA1c)	5.70	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	39.00	mmol/mol/IFCC		
Estimated Average Glucose (eAG)	117	mg/dl		

#### Interpretation:

##### NOTE:-

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes management.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%) NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

\*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

\*\*Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.





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## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### Clinical Implications:

- \*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- \*With optimal control, the HbA 1c moves toward normal levels.
- \*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated \*Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy c. Alcohol toxicity d. Lead toxicity
- \*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- \*Pregnancy d. chronic renal failure. Interfering Factors:
- \*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.



*Anupam Singh*  
Dr. Anupam Singh  
M.B.B.S, M.D. (Pathology)





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Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 12:18:47
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BUN (Blood Urea Nitrogen) *</b> <i>Sample: Serum</i>	8.80	mg/dL	7.0-23.0	CALCULATED
<b>Creatinine</b> <i>Sample: Serum</i>	0.70	mg/dl	0.5-1.2	MODIFIED JAFFES
<b>e-GFR (Estimated Glomerular Filtration Rate)</b> <i>Sample: Serum</i>	100.00	ml/min/1.73m <sup>2</sup>	90-120 Normal - 60-89 Near Normal	CALCULATED
<b>Uric Acid</b> <i>Sample: Serum</i>	4.93	mg/dl	2.5-6.0	URICASE
<b>L.F.T. (WITH GAMMA GT) * , Serum</b>				
SGOT / Aspartate Aminotransferase (AST)	28.10	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	25.20	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	27.00	IU/L	11-50	OPTIMIZED SZAIZING
Protein	8.00	gm/dl	6.2-8.0	BIRUET
Albumin	4.20	gm/dl	3.8-5.4	B.C.G.
Globulin	<b>3.80</b>	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.11		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	89.50	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.50	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.10	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.40	mg/dl	< 0.8	JENDRASSIK & GROF
<b>LIPID PROFILE ( MINI ) * , Serum</b>				
Cholesterol (Total)	158.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	38.30	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	85	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	CALCULATED
VLDL	<b>34.70</b>	mg/dl	10-33	CALCULATED
Triglycerides	173.50	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP





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Age/Gender	: 38 Y 1 M 6 D /F	Collected	: 03/Oct/2021 10:09:24
UHID/MR NO	: ALDP.0000082218	Received	: 03/Oct/2021 10:19:38
Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 12:18:47
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF BIOCHEMISTRY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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200-499 High  
>500 Very High



*Akanksha*  
Dr. Akanksha Singh (MD Pathology)







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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### URINE EXAMINATION, ROUTINE \* , Urine

Color	LIGHT YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic ( 6.0 )			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT			DIPSTICK
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
<b>Microscopic Examination:</b>				
Epithelial cells	0-2/h.p.f			MICROSCOPIC EXAMINATION
Pus cells	0-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC EXAMINATION
Others	ABSENT			

#### SUGAR, FASTING STAGE \* , Urine

Sugar, Fasting stage	ABSENT	gms%
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#### Interpretation:

(+)	< 0.5
(++)	0.5-1.0
(+++)	1-2
(++++)	> 2





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## DEPARTMENT OF CLINICAL PATHOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### SUGAR, PP STAGE \* , Urine

Sugar, PP Stage ABSENT

#### Interpretation:

- (+) < 0.5 gms%
- (++) 0.5-1.0 gms%
- (+++) 1-2 gms%
- (++++) > 2 gms%



  
Dr. Akanksha Singh (MD Pathology)





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UHID/MR NO	: ALDP.0000082218	Received	: 04/Oct/2021 10:03:52
Visit ID	: ALDP0196782122	Reported	: 04/Oct/2021 11:22:53
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF IMMUNOLOGY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
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#### THYROID PROFILE - TOTAL \*\*, Serum

T3, Total (tri-iodothyronine)	132.65	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	9.56	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	2.59	μIU/mL	0.27 - 5.5	CLIA

#### Interpretation:

0.3-4.5	μIU/mL	First Trimester
0.5-4.6	μIU/mL	Second Trimester
0.8-5.2	μIU/mL	Third Trimester
0.5-8.9	μIU/mL	Adults 55-87 Years
0.7-27	μIU/mL	Premature 28-36 Week
2.3-13.2	μIU/mL	Cord Blood > 37Week
0.7-64	μIU/mL	Child(21 wk - 20 Yrs.)
1-39	μIU/mL	Child 0-4 Days
1.7-9.1	μIU/mL	Child 2-20 Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.



*Anupam Singh*  
Dr. Anupam Singh  
M.B.B.S, M.D. (Pathology)





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Ph: 9235447965, 0532-2548257  
CIN : U85110DL2003PLC308206



Patient Name	: Mrs. MONICA KIRAN KUJUR - PKG100023	Registered On	: 03/Oct/2021 09:55:40
Age/Gender	: 38 Y 1 M 6 D /F	Collected	: N/A
UHID/MR NO	: ALDP.0000082218	Received	: N/A
Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 13:41:45
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF X-RAY

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

#### X-RAY DIGITAL CHEST PA \*

#### X-RAY REPORT


(300 mA COMPUTERISED UNIT SPOT FILM DEVICE)

#### CHEST P-A VIEW

- Soft tissue shadow appears normal.
  - Bony cage is normal.
  - Diaphragmatic shadows are normal on both sides.
  - Costo-phrenic angles are bilaterally clear.
  - Trachea is central in position.
  - Cardiac size & contours are normal.
  - Hilar shadows are normal.
  - Pulmonary vascularity & distribution are normal.
  - Pulmonary parenchyma did not reveal any significant lesion.
- NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.**

#### IMPRESSION :



  
DR. ANIL KUMAR  
MD (Radiology)





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UHID/MR NO	: ALDP.0000082218	Received	: N/A
Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 15:55:06
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF CARDIAC

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

#### ECG / EKG \*

- |                     |   |
|---------------------|---|
| 1. Machnism, Rhythm | Sinus, Regular  |
| 2. Atrial Rate      | 81 /mt  |
| 3. Ventricular Rate | 81 /mt  |
| 4. P - Wave         | Normal  |
| 5. P R Interval     | Normal  |
| 6. Q R S            | Axis : Normal<br>R/S Ratio : Normal<br>Configuration : Normal |
| 7. Q T c Interval   | Normal  |
| 8. S - T Segment    | Normal  |
| 9. T - Wave         | Normal  |

#### FINAL IMPRESSION

ECG Within Normal Limits: Sinus Rhythm, Normal Axis. Please correlate clinically.



Dr. R. K. VERMA  
MBBS, PGDGM





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UHID/MR NO	: ALDP.0000082218	Received	: N/A
Visit ID	: ALDP0196782122	Reported	: 03/Oct/2021 11:08:51
Ref Doctor	: Dr. Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

## DEPARTMENT OF ULTRASOUND

### MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

#### ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) \*

**The liver is mildly enlarged in size (16.3 cm),** with normal shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen. Gall bladder is well distended and is normal. Portal vein and CBD are not dilated. Pancreas is normal in size, shape and echogenicity. Spleen is normal in size (10.4 cm), shape and echogenicity. Right kidney is normal in size, shape and echogenicity. No focal lesion or calculus seen. Right pelvicalyceal system is not dilated. Right kidney measures : 10.9 x 4.4 cm. Left kidney is normal in size, shape and echogenicity. No focal lesion or calculus seen. Left pelvicalyceal system is not dilated. Left kidney measures : 10.2 x 4.8 cm. Urinary bladder is normal in shape, outline and distension. Lumen is anechoic and no wall thickening seen. Uterus is anteverted, and is normal in size (6.9 x 3.5 x 3.9 cm). No focal myometrial lesion seen. Endometrium is normal in thickness (11 mm). Bilateral ovaries are normal in size, shape and echogenicity. Right ovary measures: 1.9 x 1.5 cm. Left ovary measures: 1.7 x 1.7 cm. Bilateral adnexa are clear. No free fluid is seen in the abdomen/pelvis.

**High Resolution USG** - No abnormal bowel wall thickening or bowel loop dilatation is seen. Ileocecal junction and cecum is seen normally. Appendix is not visualized. No mesenteric lymphadenopathy is seen.

**IMPRESSION:-- Mild hepatomegaly.**

**Please correlate clinically.**

*Note :- Impression is a professional opinion & not a diagnosis ( Not for medico legal purpose). All modern machine / procedures have their limitations. If there is variance clinically this examination may be repeated or re-evaluated by other investigations. Discrepancies due to technical or typing errors should be reported for correction within seven days. No compensation liability stands.*

**\*\*\* End Of Report \*\*\***

(\*) Test not done under NABL accredited Scope, (\*\*) Test Performed at Chandan Speciality Lab.



HOW:  
NE EXAMINATION

**DR. ANIL KUMAR**  
MD (Radiology)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing \*  
365 Days Open \*Facilities Available at Select Location

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Customer Care No.: +91-9918300637 E-mail: customercare.diagnostic@chandan.co.in Web: www.chandan.co.in

Home Sample Collection  
1800-419-0002

Mar. 2018



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	MS. KUJUR MONICA KIRAN
EC NO.	161276
DESIGNATION	SPECIAL ASSISTANT
PLACE OF WORK	ALLAHABAD, V N MARG
BIRTHDATE	27-08-1983
PROPOSED DATE OF HEALTH CHECKUP	03-10-2021
BOOKING REFERENCE NO.	21D161276100004834E

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 **28-09-2021** 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))

Dear **MS. KUJUR MONICA KIRAN**,

Please find the confirmation for following request.

**Booking Date** :28-09-2021

**Package Name** :Full Body Health Checkup Female Below 40

**Name of Diagnostic/Hospital** :Chandan Healthcare Limited

**Address of Diagnostic/Hospital** :55/23/1 Kamla Nehru Road, Old Katra

**Contact Details** :9839574407

**City** :Allahabad

**State** :Uttar Pradesh

**Pincode** :221503

**Appointment Date** :03-10-2021

**Confirmation Status** :Confirmed

**Preferred Time** :09:00:AM

**Comment** :APPOINTMENT TIME 09:30AM ( PLEASE BRING YOUR HRM LETTER ,BOB ID CARD and ID PROOF

**Instructions to undergo Health Check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.

2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.




 भारत सरकार  
 Government of India



 मोनिका किरन कुजुर  
 MONICA KIRAN KUJUR  
 जन्म तिथि/DOB: 27/08/1983  
 महिला/ FEMALE




**6875 2150 6837**

मेरा आधार, मेरी पहचान


  
**Dr. R.K. Verma**  
**M.B.B.S.**  
**Reg. No.-40019**


  
**INDRA DIAGNOSTIC CENTRE**  
**49/19-B, Kamia Nehru Road**  
**Katra, Prayagraj**


 भारतीय विशिष्टता पहचान प्राधिकरण  
 Unique Identification Authority of India

**Address:**  
 W/O Amit Kujur, M.M.I.G-27,  
 A.D.A Colony, Muirabad,  
 Dahiawan, Allahabad,  
 Uttar Pradesh - 211002

**पता:**  
 W/O अमित कुजुर, एम.एम.आई.जी.-27,  
 ए.डी.ए कॉलोनी, मुईराबाद, दहियावन,  
 इलाहाबाद,  
 उत्तर प्रदेश - 211002

**6875 2150 6837**

