

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	ABHINAV TYAGI			
DATE OF BIRTH	30-06-1988			
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	14-01-2023			
BOOKING REFERENCE NO.	22M109270100035920S			
SPOUSE DETAILS				
EMPLOYEE NAME	MS. POOJA			
EMPLOYEE EC NO.	109270			
EMPLOYEE DESIGNATION	CLEARING HUB			
EMPLOYEE PLACE OF WORK	GHAZIABAD			
EMPLOYEE BIRTHDATE	06-08-1989			

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 **07-01-2023** till **31-03-2023**. 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))







## **RADIOLOGY REPORT**

Name	Abhinav TYAGI	Modality	DX
Patient ID	MH010712617	Accession No	R5037235
Gender/Age	M / 34Y 6M 16D	Scan Date	14-01-2023 11:14:28
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	14-01-2023 11:32:56

### XR- CHEST PA VIEW

### FINDINGS:

LUNGS: Normal. TRACHEA: Normal. CARINA: Normal.

RIGHT AND LEFT MAIN BRONCHI: Normal.

PLEURA: Normal. HEART: Normal.

RIGHT HEART BORDER: Normal. LEFT HEART BORDER: Normal. PULMONARY BAY: Normal. PULMONARY HILA: Normal.

AORTA: Normal.

THORACIC SPINE: Normal.

OTHER VISUALIZED BONES: Normal. VISUALIZED SOFT TISSUES: Normal.

DIAPHRAGM: Normal.

VISUALIZED ABDOMEN: Normal. VISUALIZED NECK: Normal.

### IMPRESSION:

No significant abnormality noted.

Recommend clinical correlation.

(Marica)

Dr. Monica Shekhawat, MBBS, DNB, Consultant Radiologist, Reg No MCI 11 10887



### RADIOLOGY REPORT

Name	Abhinav TYAGI	Modality	US
Patient ID	MH010712617	Accession No	R5037236
Gender/Age	M / 34Y 6M 16D	Scan Date	14-01-2023 11:59:48
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	14-01-2023 12:02:32

### **USG ABDOMEN & PELVIS**

#### **FINDINGS**

LIVER: appears enlarged in size (measures 170 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 116 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 11.6 mm. COMMON BILE DUCT: Appears normal in size and measures 4.7 mm.

IVC, HEPATIC VEINS: Normal. BILIARY SYSTEM: Normal.

GALL BLADDER: Gall bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained.

Rest normal.

Right Kidney: measures 112 x 46 mm. Left Kidney: measures 124 x 52 mm. PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged. FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal. PROSTATE: Prostate is normal in size, shape and echotexture. It measures 37 x 26 x 19 mm with volume 10 cc. Rest

normal.

SEMINAL VESICLES: Normal.

BOWEL: Visualized bowel loops appear normal.

#### **IMPRESSION**

-Hepatomegaly with diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.

Dr. Prabhat Prakash Gupta,

MBBS, DNB, MNAMS, FRCR(I)

Consultant Radiologist, Reg no DMC/R/14242

**MANIPAL HOSPITALS** 

This document is Regitally signed នាដី កែសម៉ែង ស សាធារជាងវង្សានិយាយនៃ required Teleradiology services presided by ប្រាស្រ្យ ក្រុងប្រែងក្រុងប្រែងក្រុងប្រាស្រ្យ Radiology Group

This report is subject to the terms and conditions mentioned overleaf

Page 1 of 1



Name

MR ABHINAV TYAGI

Age

34 Yr(s) Sex :Male

**Registration No** 

MH010712617

Lab No

32230105103

**Patient Episode** 

H18000000150

**Collection Date:** 

14 Jan 2023 20:28

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Jan 2023 21:56

**Receiving Date** 

14 Jan 2023 21:03

#### BIOCHEMISTRY

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

### THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA) 1.16 ng/ml [0.70 - 2.04]T4 - Thyroxine (ECLIA) 7.96 micg/dl [4.60-12.00] Thyroid Stimulating Hormone (ECLIA) 4.410 # µIU/mL [0.340-4.250]

Note: TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm. Factors such as change of seasons hormonal fluctuations, Ca or Fe supplements, high fibre diet, stress and illness affect TSH results.

- \* References ranges recommended by the American Thyroid Association
- 1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128
- 2) http://www.thyroid-info.com/articles/tsh-fluctuating.html

Page1 of 8

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

Dr. Neelam Singal

CONSULTANT BIOCHEMISTRY



Name

MR ABHINAV TYAGI

: 34 Yr(s) Sex :Male

**Registration No** 

: MH010712617

COMPLETE BLOOD COUNT (AUTOMATED)

Lab No : 202301001480

Patient Episode

H18000000150

SPECIMEN-EDTA Whole Blood

Referred By

1110000000150

Collection Date: 14 Jan 2023 10:27

Receiving Date

: HEALTH CHECK MGD : 14 Jan 2023 16:46 **Reporting Date:** 14 Jan 2023 12:52

#### **HAEMATOLOGY**

TEST

Lymphocytes Monocytes

Eosinophils

Basophils

ESR

RESULT

28.0

7.0

4.0

0.0

8.0

UNIT

양

/1sthour

Age

**BIOLOGICAL REFERENCE INTERVAL** 

RBC COUNT (IMPEDENCE)	5.00	millions/cu mm	[4.50-5.50]
HEMOGLOBIN	16.5	g/dl	[13.0-17.0]
Method: cyanide free SLS-colorim	netry		
HEMATOCRIT (CALCULATED)	48.3	8	[40.0-50.0]
MCV (DERIVED)	96.6	fL	[83.0-101.0]
MCH (CALCULATED)	33.0 #	pg	[27.0-32.0]
MCHC (CALCULATED)	34.2	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	12.4	%	[11.6-14.0]
Platelet count	258	x 103 cells/cumm	[150-400]
MPV(DERIVED)	11.5		
WBC COUNT(TC)(IMPEDENCE) DIFFERENTIAL COUNT	8.25	x 10³ cells/cumm	[4.00-10.00]
(VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	61.0	8	[40.0-80.0]
-			

Page 2 of 8

[0.0-

[17.0-45.0]

[2.0-10.0]

[2.0-7.0]

[0.0-2.0]



Name

MR ABHINAV TYAGI

Age

34 Yr(s) Sex :Male

**Registration No** 

MH010712617

Lab No

202301001480

**Patient Episode** 

H18000000150

**Collection Date:** 

14 Jan 2023 10:27

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Jan 2023 17:21

**Receiving Date** 

14 Jan 2023 16:46

BIOCHEMISTRY

**TEST** 

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)

6.0 #

[0.0-5.6]

Method: HPLC

As per American Diabetes Association (ADA

HbA1c in %

Non diabetic adults >= 18years <5.7

Prediabetes (At Risk ) 5.7-6.4 Diagnosing Diabetes >= 6.5

Estimated Average Glucose (eAG)

126

mg/dl

Comments: HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour

PALE YELLOW

(Pale Yellow - Yellow)

Appearance

CLEAR

Reaction [pH]

6.0 1.005 (4.6-8.0)(1.003-1.035)

Specific Gravity

CHEMICAL EXAMINATION

Protein/Albumin

Negative

(NOT DETECTED)

Glucose

Normal

(NOT DETECTED) NegativeKetone BodiesNegative(NOT DETECTED)

Ketone Bodies Urobilinogen

Normal

(NORMAL)

Page 3 of 8



MR ABHINAV TYAGI Name

34 Yr(s) Sex: Male Age

**Registration No** 

MH010712617

202301001480

**Patient Episode** 

H18000000150

Lab No 14 Jan 2023 10:51 **Collection Date:** 

Referred By

HEALTH CHECK MGD

14 Jan 2023 12:54 Reporting Date:

**Receiving Date** 

14 Jan 2023 10:51

#### **CLINICAL PATHOLOGY**

MICROSCOPIC EXAMINATION (	Automated	/Manual)
---------------------------	-----------	----------

Pus Cells	1-2 /hpf	(0-5/hpf)
RBC	NIL	(0-2/hpf)
Epithelial Cells	nil /hpf	
CASTS	nil	
Crystals	nil	
OTHERS	nil	

### Serum LIPID PROFILE

DOI (211 111 111 111 111 111 111 111 111 11			
Serum TOTAL CHOLESTEROL	209 #	mg/dl	[<200] Moderate risk:200-239
			High risk:>240
(	212 #	mg/dl	[<150]
TRIGLYCERIDES (GPO/POD)	213 #	mg/dr	Borderline high:151-199
			High: 200 - 499
			Very high: >500
		/ 17	
HDL- CHOLESTEROL	49.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibiti	on		2 1 2 2 2 3
VLDL- CHOLESTEROL (Calculated)	43 #	mg/dl	[0-35]
CHOLESTEROL, LDL, DIRECT	117.0	mg/dl	[<120.0]
A second section and the second of above the second			Near/
Above optimal-100-129			
Thove opermar reading			Borderline High:130-159
			High Risk:160-189
T.Chol/HDL.Chol ratio(Calculated	4.3		<4.0 Optimal
1.CHOI/HDH.CHOI Tatlo(Calculated	.,		4.0-5.0 Borderline
			>6 High Risk
			70 High Kibk
			-3 Ontimal
LDL.CHOL/HDL.CHOL Ratio(Calculate	(d) 2.4		<3 Optimal
			3-4 Borderline

Note:

Page 4 of 8

>6 High Risk



MR ABHINAV TYAGI Name

34 Yr(s) Sex :Male Age

**Registration No** 

MH010712617

202301001480 Lab No

**Patient Episode** 

H18000000150

**Collection Date:** 

14 Jan 2023 10:27

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Jan 2023 12:51

**Receiving Date** 

14 Jan 2023 16:46

#### BIOCHEMISTRY

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

Reference ranges based on ATP III Classifications.

#### KIDNEY PROFILE

Specimen: Serum			
UREA	19.6	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay		in the second	200 60 00000 002
BUN, BLOOD UREA NITROGEN	9.2	mg/dl	[8.0-20.0]
Method: Calculated		4.00	
CREATININE, SERUM	0.92	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization		/ 22	[4 0 0 5]
URIC ACID	7.0	mg/dl	[4.0-8.5]
Method:uricase PAP			
	126 7	mmol/L	[136.0-144.0]
SODIUM, SERUM	136.7	IIIIIOI/ L	[130.0-144.0]
POTASSIUM, SERUM	4.91	mmol/L	[3.60-5.10]
SERUM CHLORIDE	101.9	mmol/l	[101.0-111.0]
Method: ISE Indirect		8	8
eGFR (calculated)	108.1	ml/min/1.73sq.m	[>60.0]
Technical Note			

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.

Page 5 of 8



Name : MR ABHINAV TYAGI

Age

34 Yr(s) Sex: Male

**Registration No** 

MH010712617

Lab No

202301001480

Patient Episode

H18000000150

**Collection Date:** 

14 Jan 2023 10:27

Referred By

: HEALTH CHECK MGD

**Reporting Date:** 

14 Jan 2023 12:51

**Receiving Date** 

: 14 Jan 2023 16:46

**BIOCHEMISTRY** 

	TEST	RESULT	UNIT	BIOLO	GICAL REFERENCE INTI	ERVAL
	LIVER FUNCTION TEST					
)	BILIRUBIN - TOTAL Method: D P D	0.58	mọ	g/dl	[0.30-1.20]	
	BILIRUBIN - DIRECT Method: DPD	0.13	1	mg/dl	[0.00-0.30]	
	INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.45 #	. 1	mg/dl	[0.10-0.30]	
	TOTAL PROTEINS (SERUM) Method: BIURET	7.80	200	gm/dl	[6.60-8.70]	
	ALBUMIN (SERUM) Method: BCG	4.74	-	g/dl	[3.50-5.20]	
	GLOBULINS (SERUM) Method: Calculation	3.10		gm/dl	[1.80-3.40]	
)	PROTEIN SERUM (A-G) RATIO Method: Calculation	1.55			[1.00-2.50]	
	AST(SGOT) (SERUM) Method: IFCC W/O P5P	70.00 #		U/L	[0.00-40.00]	
	ALT(SGPT) (SERUM) Method: IFCC W/O P5P	136.00 #		U/L	[17.00-63.00]	
	Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	125.0 #		IU/L	[32.0-91.0]	
	GGT	118.0 #	*		[7.0-50.0]	

Page 6 of 8



Name

MR ABHINAV TYAGI

Age

34 Yr(s) Sex :Male

**Registration No** 

MH010712617

Lab No

202301001480

Patient Episode

: H18000000150

**Collection Date:** 

14 Jan 2023 10:27

Referred By

: HEALTH CHECK MGD

Reporting Date:

14 Jan 2023 16:54

**Receiving Date** 

: 14 Jan 2023 16:46

**BLOOD BANK** 

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing

B Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 7 of 8

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

Dr. Charu Agarwal Consultant Pathologist



Name

MR ABHINAV TYAGI

Age

34 Yr(s) Sex :Male

**Registration No** 

MH010712617

Lab No

202301001481

Patient Episode

H18000000150

**Collection Date:** 

14 Jan 2023 10:26

Referred By

HEALTH CHECK MGD

Reporting Date:

14 Jan 2023 12:51

Receiving Date

: 14 Jan 2023 10:26

**BIOCHEMISTRY** 

TEST

RESULT

UNIT

**BIOLOGICAL REFERENCE INTERVAL** 

GLUCOSE-Fasting

Specimen: Plasma

GLUCOSE, FASTING (F)

Method: Hexokinase

102.0

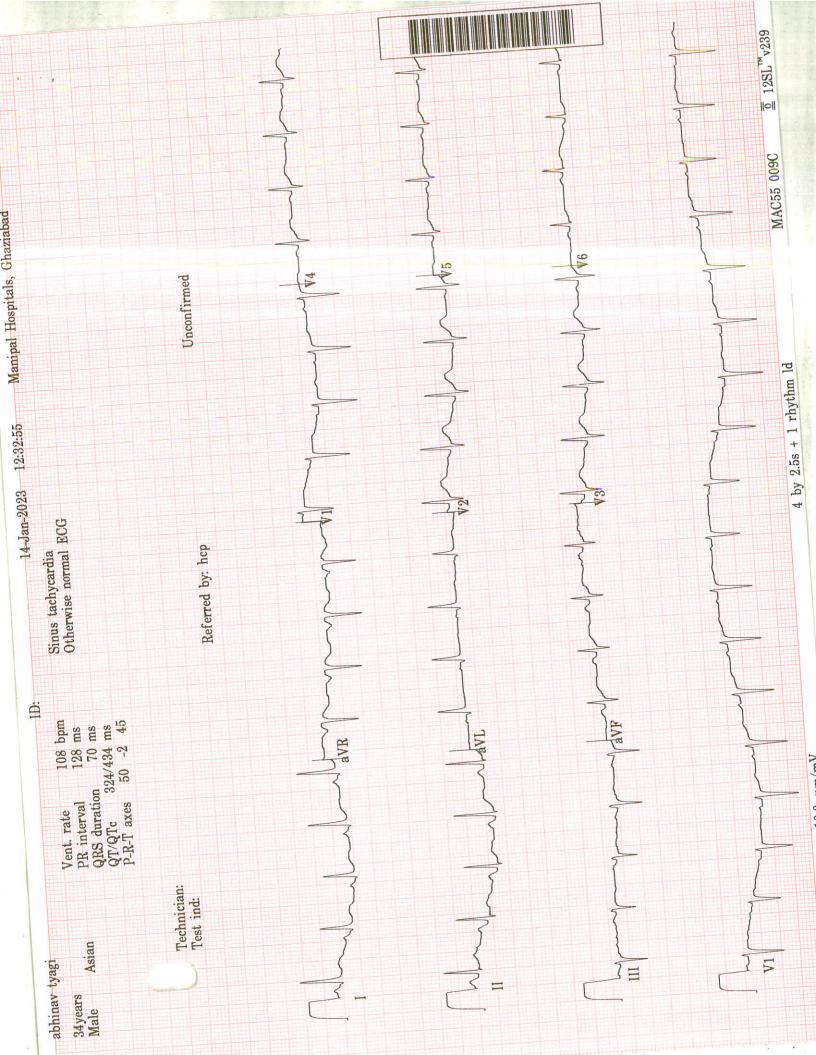
mg/dl

[70.0-110.0]

Page 8 of 8

----END OF REPORT--

Dr. Charu Agarwal Consultant Pathologist







### TMT INVESTIGATION REPORT

Patient Name: Mr. Abhinav TYAGI

Location

: Ghaziabad

Age/Sex

: 34Year(s)/male

Visit No

: V000000001-GHZB

MRN No

:MH010712617

Order Date

: 14/01/2023

Ref. Doctor : HCP

Report Date

: 14/01/2023

Protocol

: Bruce

MPHR

: 186BPM

**Duration of exercise** 

: 5min 06sec

85% of MPHR

: 158BPM

Reason for termination : THR achieved

Peak HR Achieved : 162BPM **% Target HR** : 87%

Blood Pressure (mmHg) : Baseline BP : 134/90mmHg

Peak BP

: 146/90mmHg

METS

: 7.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	112	134/90	Nil	No ST changes seen	Nil
STAGE 1	3:00	146	140/90	Nil	No ST changes seen	. Nil .
STAGE 2	2:06	162	146/90	Nil	No ST changes seen	Nil
RECOVERY	3:05	111	140/90	Nil	No ST changes seen	Nil

### **COMMENTS:**

- No ST changes in base line ECG.
- No ST changes during exercise and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

**IMPRESSION:** 

Treadmill test is negative for exercise induced reversible myocardial ischemia.

Dr. Bhupendra Singh

Dr. Abhishek Singh

Dr. Sudhanshu Mishra

MD, DM (CARDIOLOGY), FACC MD, DNB (CARDIOLOGY), MNAMS MD Sr. Consultant Cardiology

Sr.Consultant Cardiology

Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002 P: 0120-616 5666

Page 1 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017