

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. ZALA ABHISHEK
EC NO.	
DESIGNATION	122834
PLACE OF WORK	SWACHHTA SAHAYAK EVAM SAHAYAK
BIRTHDATE	VITHLAPUR
	20-07-1997
PROPOSED DATE OF HEALTH	14-08-2021
CHECKUP	
BOOKING REFERENCE NO.	21S122834100002134E

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 12-08-2021 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/-

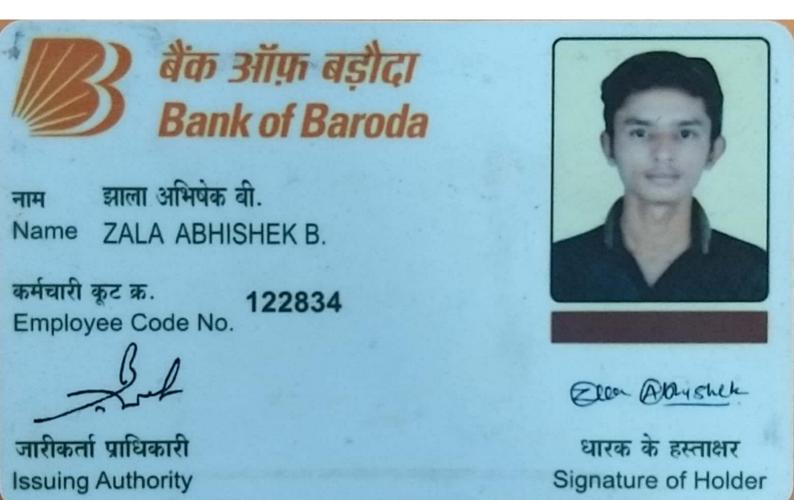
Chief General Manager HRM Department Bank of Baroda

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



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
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	
VLDL	LDL
Triglycerides	
HDL / LDL ratio	Triglycerides
Liver Profile	HDL / LDL ratio
AST	Liver Profile
ALT	AST
GGT	ALT
Bilirubin (total, direct, indirect)	GGT
ALP	Bilirubin (total, direct, indirect)
Proteins (T, Albumin, Globulin)	ALP
Kidney Profile	Proteins (T, Albumin, Globulin)
Serum creatinine	Kidney Profile
Blood Urea Nitrogen	Serum creatinine
Uric Acid	Blood Urea Nitrogen
HBA1C	Uric Acid
Routine urine analysis	HBA1C
USG Whole Abdomen	Routine urine analysis
General Tests	USG Whole Abdomen
X Ray Chest	General Tests
ECG	X Ray Chest
2D/3D ECHO / TMT	ECG
Stress Test	2D/3D ECHO / TMT
PSA Male (above 40 years)	Thyroid Profile (T3, T4, TSH)
(2200)	Mammography (above 40 years)
Thyroid Profile (T3, T4, TSH)	and rap Smear (above 30 years)
Dental Check-up consultation	Dental Check-up consultation
Physician Consultation	Physician Consultation
Eye Check-up consultation	Eye Check-up consultation
Skin/ENT consultation	SKIN/EN I consultation
Ziti Conductation	Gynaec Consultation





ભારત સરકાર Government of India





ઝાલા અભિષેક Zala Abhishek જન્મ તારીખ/DOB: 20/07/1997 પુરુષ/ MALE

9832 4360 6829

VID: 9155 8438 4300 0278

મારો આધાર. મારી ઓળખ



ભારતીય વિશિષ્ટ ઓળખાણ પ્રાધિકરણ Unique Identification Authority of India



सरनाम् :

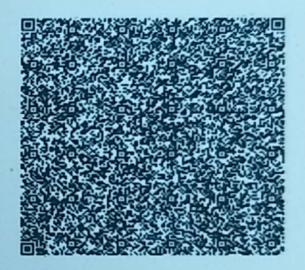
ના ક્ષારો: ભાઇલાલભાઇ, બદરખા, અમદાવાદ,

ગુજરાત - 387810

Address:

C/O: Bhailalbhai, Badarkha, Ahmedabad,

Gujarat - 387810



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www.uidai.gov.in