

40

Subject: Health Check up Booking Confirmed Request(bobE48168),Package Code-PKG10000228,  
Beneficiary Code-57912

Medi.wheel <wellness@mediwheel.in>

Sent: Thu, 12 Oct 2023 12:56:15 GMT+0530

To: You

Cc: customercare@mediwheel.in

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MedSave

011-41195959

Email:wellness@mediwheel.in

Hi Metro Hospital & Heart Institute,

Diagnostic/Hospital Location :Plot No. F - 1, Sector 6A, SIDCUL Sector 8A, Road, Integrated Industrial Estate, BHEL Township ,City:Haridwar

We have received the confirmation for the following booking .

- Beneficiary Name : PKG10000228
- Beneficiary Name : MS. DEVI ASHA
- Member Age : 35
- Member Gender : Female
- Member Relation : Employee
- Package Name : Medi-Wheel Full Body Health Checkup Female Below 40
- Location : MANALI,Himachal Pradesh-175131
- Contact Details : 9418803613
- Booking Date : 12-10-2023
- Appointment Date : 14-10-2023

**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.

We request you to facilitate the employee on priority.

**Subject: Health Check up Booking Request(bobE48168), Beneficiary Code-57912**

Mediwheel <wellness@mediwheel.in>

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Dear **Metro Hospital & Heart Institute,**

**City :** Haridwar . **Address :** Plot No. F - 1, Sector 6A, SIDCUL Sector 8A, Road, Integrated Industrial Estate, BHEL Township ,

We have received the confirmation for the following booking .

**Name** : MS. DEVI ASHA  
**Age** : 35  
**Gender** : Female  
**Package Name** : Medi-Wheel Full Body Health Checkup Female Below 40  
**Contact Details** : 9418803613  
**Booking Date** : 12-10-2023  
**Appointment Date** : 14-10-2023

Member Information			
Booked Member Name	Age	Gender	Cost(In INR)
MS. DEVI ASHA	35	Female	Cashless
Total amount to be paid			Cashless

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

**Package Name** : Medi-Wheel Full Body Health Checkup Female Below 40 - Includes (37)Tests

**Tests included in this Package**

Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Blood Sugar Postprandial, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Fasting Blood Sugar, Ultrasound Whole Abdomen , Glycosylated Haemoglobin (hba1c), Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total & Direct and Indirect, Albumin, Globulin



Patient Name: Devi Asha Age/Sex: ..... Reg. No. ....

Doctor: Dr. Naman Agarwal

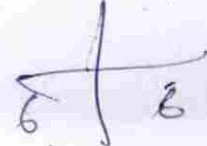
Date: .....

Time: .....

DENTAL EXAMINATION

➤ **TEETH STATUS** = good

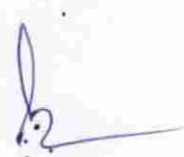

• **MISSING** - None

• **DECAYED** - Filling done 

➤ **ORAL HYGIENE STATUS** = Good

• **STAINS** - NIL

• **CALCULUS** - NIL



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. DEVI ASHA
EC NO.	97965
DESIGNATION	CREDIT
PLACE OF WORK	ROORKEE, RAMNAGAR
BIRTHDATE	21-05-1985
PROPOSED DATE OF HEALTH CHECKUP	14-10-2023
BOOKING REFERENCE NO.	23D97965100071818E

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 **10-10-2023** till **31-03-2024** 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))



# METRO

HOSPITAL & HEART INSTITUTE

(A unit of Sunhill Hospitals Private Limited)

(NABH & ISO 9001: 2008 Certified)



we treat...HE CURES

## Metro Hospital & Heart Institute

(A unit of Sunhill Hospital Private Limited)

OPD CONSULTATION

Patient Name Ashu Devi Age/Sex 35A/F Reg. No. \_\_\_\_\_

Doctor's Name Dr. Sushil Kumar

Date 14/10/23 Time \_\_\_\_\_

### OPHTHALMIC EXAMINATION

#### VISION

##### DISTANCE VISION-

Rt 6/6  
Lt 6/6

##### NEAR VISION-

Rt N/6  
Lt N/6

##### COLOUR VISION

Normal

#### EYE EXAMINATION

- Cornea
- Ant Chamber
- Pupil
- Fundus Examination

#### ADVICE-

Dr. Sushil Kumar, MBBS, MS (Ophtho)  
 Consultant Ophthalmology  
 Metro Hospital & Heart Institute  
 Sidcul, Haridwar, U.P. 249403 (UK)  
 Signature [Signature]

Plot No. F-1, Sector-6A, SIDCUL, Haridwar - 249 403

Emergency : +91 8191902600, Phone : 01334 - 239040 / 42 / 43, Fax : 01334 - 239043

E-mail : metroharidwar@metrohospitals.com, Website: www.metrohospitals.com

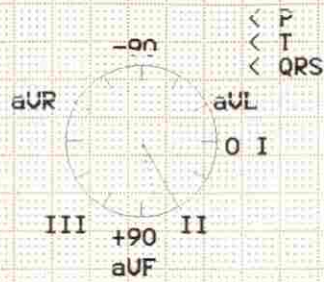
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CIN No.: U33201DL2006PTC156918

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Measurement Results:

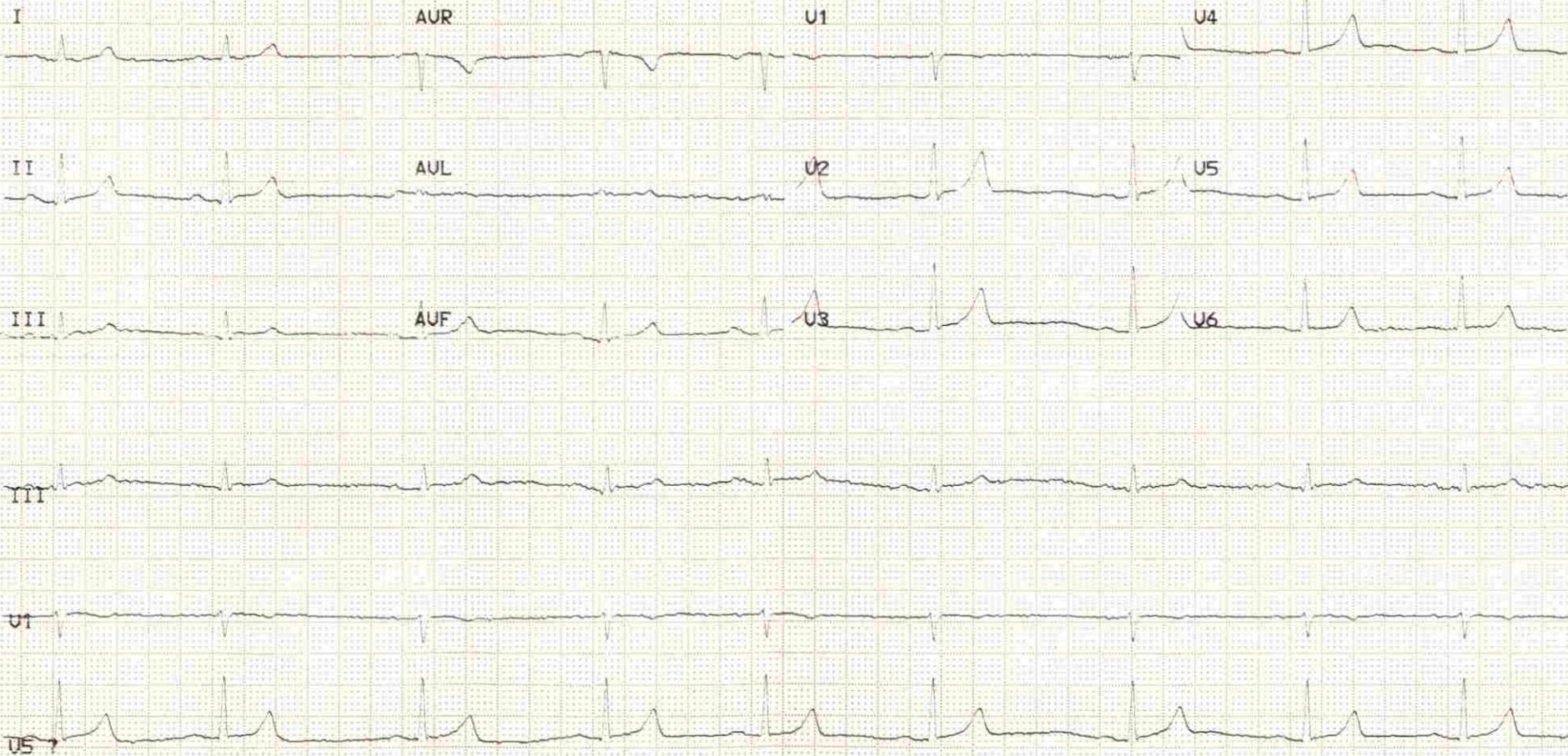
QRS	:	88 ms
QT/QTcB	:	424 / 399 ms
PR	:	186 ms
P	:	112 ms
RR/PP	:	1132 / 1040 ms
P/QRS/T	:	75 / 60 / 60 degrees
QTd/QTcBD	:	40 / 38 ms
Sokolow	:	1.3 mV
NK	:	7



Interpretation:

R/S inversion area between U1 and U2 probably normal ECG

Unconfirmed report.



**Radiology Investigation Report**

**Name** : Mrs. Asha Devi  
**Ref. By** : Dr. ANIL SINGH  
**IP/OP** : OP/202311311  
**Date** : 14/10/2023

**Age/Sex** : 35 Y/F  
**UHID NO** : 2023018007  
**Request No** : 70240493

**USG WHOLE ABDOMEN**

The diaphragm is normal in contour & respiratory excursion. There is no ascitis or lymph node mass.

Liver is normal in shape, outline & echotexture. No focal lesion of abnormal ecogenecity is seen. Intrahepat biliary radicles are not dilated. Portal vein & portal venous radicles are normal.

Gall bladder is well distended, its outlines are smooth & its wall are not thick. No calculus /mass lesion is see in its lumen. Common bile duct is normal in course & caliber. No calculus is seen in its lumen.


Spleen & pancreas appears normal in shape, size, outline & echotexture.

Both the kidneys are normal in shape, size, outline & echotexture. Renal parenchymal thickness is norma Corticomedullary junction is defined & is normal. There is no hydronephrosis. No echogenic renal calculus seen.

Urinary bladder is normal in contour & capacity. Bladder wall is not thick. No pathological filling defect / vesic calculus is seen in bladder. Ureterovesical junctions appear normal.

Uterus is normal in size shape, outline & echotexture. Myometrial & endometrial echoes are normal. No uterin mass is seen. Both the ovaries appear normal. There is no free fluid seen in cul de sac.

**IMPRESSION : NORMAL STUDY**

  
**DR.PRAKASH CHANDRA PANDEY**  
MBBS, DMRD  
CONSULTANT RADIOLOGIST

**Note:**

- (1) Not Valid for medical-legal purposes.
- (2) This is a professional opinion based on imaging finding and not the diagnosis.
- (3) In case of any discrepancy due to machine error or typing error, please get it rectified immediately.



## Radiology Investigation Report


**Name** : Mrs. Asha Devi  
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**IP/OP** : OP/202311311  
**Date** : 14/10/2023

**Age/Sex** : 35 Y/F  
**UHID NO** : 2023018007  
**Request No** : 70240493

### X-RAY CHEST PA View

Cardiac contour & size are normal.  
Trachea is central.  
Lung fields are clear.  
Hilar shadows are normal.  
Costophrenic angles are clear.  
Bony rib cage is normal.

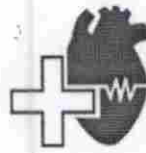
**IMPRESSION: NORMAL CHEST.**

  
**DR. PRAKASH CHANDRA PANDEY**  
MBBS, DMRD  
CONSULTANT RADIOLOGIST

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# METRO

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## 2D ECHOCARDIOGRAPHY

Name:	Mrs. Asha Devi	UHID No:	2023018007
Age/Sex:	35Y/F	Ward:	OPD
Referred by:	Dr. Anil Singh	Date:	14.10.2023

**ACOUSTIC WINDOW:** Normal

### MEASUREMENTS AND CALCULATIONS

Measurements	Observed Value	Reference Value
IVS (ED)	1.0	(0.6 – 1.1 cm)
LVPW (ED)	1.0	(0.6 – 1.1 cm)
LVID (ED)	3.6	Male (3.7 – 5.5 cm) Female (3.7 – 5.2 cm)
Aortic root diameter	2.5	(2.0 – 3.7 cm)
LA dimension	3.2	Male (1.9 – 4.0 cm) Female (1.7 – 3.8 cm)
LV EF	60%	(55 – 75%)

### MORPHOLOGICAL DATA

Mitral valve	Normal	Right Atrium	Normal
Aortic valve	Normal	Right Ventricle	Normal
Tricuspid valve	Normal	PA	Normal
Pulmonary valve	Normal	IVS	Intact
		IAS	Intact

### DOPPLER STUDY

Valve	Regurges	Velocities (cm/s)	Gradients (mmHg)
Mitral	Trace	E – 66, A – 70, E/A<1	
Aortic	Nil	Vel – 125	
Tricuspid	Trace	Vel – 224	PASP – 21
Pulmonary	Trace	Vel – 82	

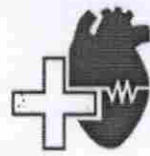
Plot No. F-1 Sector – 6A, SIDCUL, HARIDWAR – 249 403

Emergency: +91 8191902600, Phone : 01334 – 239040 / 42 43, Fax : 01334 – 239043

E-mail: [metroharidwar@metrohospitals.com](mailto:metroharidwar@metrohospitals.com), Website: [www.metrohospitals.com](http://www.metrohospitals.com)

Regd. Office : 21, Community Center, Preet Vihar, New Delhi – 110092

CIN No.: U33201DL20063PTC156918



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## FINAL IMPRESSION

- Normal Acoustic Window
- Normal Chambers Dimensions
- No RWMA
- LVEF~60%
- Grade I LVDD
- Trace MR, Trace TR, Trace PR, PASP 21 mmHg
- No pericardial effusion
- No Intracardiac clot

### Dr. Krishna CK

MD, DNB (Medicine), DNB (Cardiology)  
Consultant Interventional Cardiology  
UKMC Reg. No: 12883

### Dr. Ajit Kumar

MBBS, PGDCC  
Associate Consultant, Cardiology  
UKMC Reg. No: 7569

*(Note: This document is not for medico-legal purpose)*

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## Pathology Report

Name : Mrs. Asha Devi  
 Ref. By : Dr. ANIL SINGH  
 IP/OP : OP/202311311  
 Sample Date : 14/10/2023  
 Reporting Date : 15/10/2023

Age/Sex. : 35 Y/F  
 UHID : 2023018007  
 Request No. : 10374727  
 Sample Time : 10:07  
 Reporting Time : 01:07

Test	Result	Unit	Bio. Ref.	Inter. Test Method
<b>Hematology</b>				
BLOOD GROUP				
ABO	O			
Rh	POSITIVE			
CBC (COMPLETE BLOOD COUNT/HAEMOGRAM)				
HB	11.1	gm/dl	F - 11.5-15	
TLC	6720	/cumm	4000-11000	
DLC (WBC DIFFERENTIAL)				
NEUTROPHILS	50	%	45-75	
LYMPHOCYTES	40	%	25-45	
EOSINOPHILS	05	%	1-6	
MONOCYTES	05	%	2-8	
BASOPHILS	00	%	--<2	
RBC	3.79	million	3.5-5.5	
PCV	37.7	%	36-52	
MCV	99.5	fL	80-100	
MCH	29.3	PG	27-32	
MCHC	29.4	gm/dl	31-37	
PLATELET COUNT	1.72	lakh/cumm	1.5-4.5	
RDW	12.6	%	11.5-15	
ESR	20	mm/hr	20	
<b>Serology &amp; Immunology</b>				
THYROID PROFILE				
T3	2.14	nmol/L	1.70-3.10	
T4	10.7	µg/dl	5.95-15.4	
TSH	2.36	µIU/L	0.46-4.68	

\*\*\* End of Reports \*\*\*

Dr. Vishal Arora  
 MBBS, DCP  
 (Consultant Pathologist)

Checked By

**Note:**

1. These reports are mere estimation of values at that particular time and are liable to vary/change in different conditions in different laboratories.
2. The values are to be collaborated with clinical findings by qualified doctor and any alarming and unexpected results should be reported to Lab urgently for recheck and manual typing errors.
3. These reports are not valid for medicolegal purposes and all doctor unsigned reports should be considered provisional only.
4. All card based tests are screening test therefore need confirmation by other alternative test like (PCR, ELISA).

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10/15/2023 1:53 AM



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Age/Sex : 35 Y/F  
 UHID : 2023018007  
 Request No. : 10374727  
 Sample Time : 10:07  
 Reporting Time: 01:07

Test	Result	Unit	Bio. Ref. Inter. Test Method
<b>Biochemistry</b>			
HBIAC	5.4	%	4.5-6.3
BLOOD SUGAR -PP	78.0	mg/dl	70.0-140.0
BLOOD SUGAR -FASTING	83.0	mg/dl	70.0-110.0
<b>LIPID PROFILE</b>			
TOTAL CHOLESTEROL	147	mg/dl	00-250.0
HDL-CHOLESTEROL	45.0	mg/dl	00-50.0
LDL	82.0	mg/dl	00-150.0
TRIGLYCERIDES	103.0	md/dl	30-150
VLDL	21.0	mg/dl	0-50
CHOL/HDL Ratio	3.3		<4.5
<b>LFT (LIVER FUNCTION TEST)</b>			
BILIRUBIN INDIRECT	0.52	mg/dl	0.2-0.8
SGOT	29.0	U/L	10-42
SGPT	31.0	U/L	10-42
BILIRUBIN TOTAL	1.12	mg/dl	0.2-1.0
ALKALINE PHOSPHATASE	76.0	IU/L	28-111
BILIRUBIN DIRECT	0.60	mg/dl	0.1-0.4
TOTAL PROTEIN	7.5	gm/dl	6.4-8.2
ALBUMIN	4.5	g/dl	3.5-5.0
GLOBULIN	3.0	gm/dl	2.0-4.0
AG RATIO	1.5		-
<b>KFT (KIDNEY FUNCTION TEST)</b>			
UREA	27.6	mg/dl	15-45
SODIUM	145.0	mmol/L	135-155
CREATININE	0.74	mg/dl	0.6-1.3
URIC ACID	4.6	mg/dl	3.0-7.6
BUN	12.8	mg/dl	05-20
POTASSIUM	4.1	mmol/L	3.5-5.5
CALCIUM	9.5	mg/dl	8.5-10.5

\*\*\* End of Reports \*\*\*

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 UIID : 2023018007  
 Request No. : 10374727  
 Sample Time : 10:07  
 Reporting Time: 01:07

Test	Result	Unit	Bio. Ref.	Inter.	Test Method
<b>Urine Examination</b>					
URINE SUGAR	NIL				
URINE ROUTINE ANALYSIS					
PHYSICAL EXAMINATION					
COLOUR	PALE				
	YELLOW				
TRANSPARENCY	CLEAR				
S. GRAVITY	1.030				
CHEMICAL EXAMINATION					
ALBUMIN	NIL				
SUGAR	NIL				
pH	6.5				
BLOOD	NIL				
KETONE	NIL				
MICROSCOPIC EXAMINATION					
PUS CELLS	2-3				
EPITHELIAL CELLS	1-2				
RBC	NIL				
CRYSTALS	NIL				
CAST	NIL				
BACTERIA	NIL				
AMORPHOUS PHOSPHATE	NIL				
AMORPHOUS URATES	NIL				

\*\*\* End of Reports \*\*\*

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