


 भारत सरकार
 GOVERNMENT OF INDIA



पूजा सुरेश वाघ
 Pooja Suresh Wagh
 आई : सविता सुरेश वाघ
 Mother : Savita Suresh Wagh
 जन्म वर्ष / Year of Birth : 1997
 लिंग / Female



5906 7917 7936

आधार – सामान्य माणसाचा अधिकार

Pooja
 19/03/2022

भारत सरकार
 GOVERNMENT OF INDIA

1947
 1947

help@uidai.gov.in
 www.uidai.gov.in

P.O. Box No. 1947
 Maharashtra, 421203

Address: KACHRU KALAN
 CHAWL, KALYAN ROAD, NEAR
 DATTA MANDIR, AZDEGAON,
 DOMBIVLI EAST, Thane,
 महाराष्ट्र, 421203

भारत सरकार
 UNIQUE IDENTIFICATION AUTHORITY OF INDIA



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	Pooja RahulBankar
DATE OF BIRTH	03-03-1997
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	12-02-2022
BOOKING REFERENCE NO.	21M181144100011002S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. BANKAR RAHUL ARJUN
EMPLOYEE EC NO.	181144
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	MUMBAI,COLABA
EMPLOYEE BIRTHDATE	02-06-1993

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 **09-02-2022** 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))

PERIODIC MEDICAL EXAMINATION REPORT

Name	: Pooja Rahul Bankar	Test Code	: 90-630
Emp Code	:	Test Date	: 19-03-2022
Age	: 25 Years	Sex	: Female
Contact No	: 0	Dep. Name	: --
Company Name	:	Job Nature	: --

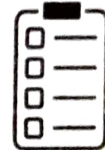
PHYSIOLOGICAL DATA

Height	: 150 Cms	Weight	: 47 Kgs	Expected Weight	: 50 Kgs
B.P	: 130/80 mmHg	PULSE	: 74 /min	Body Mass Index	: 20.89



MEDICAL HISTORY

<input type="checkbox"/> NO <input checked="" type="checkbox"/> Frequent Cold	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Frequent Sneezing	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Joint Pain
<input type="checkbox"/> NO <input checked="" type="checkbox"/> Shortness of breath	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Frequent Headache	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Chronic Cough
<input type="checkbox"/> NO <input checked="" type="checkbox"/> Backache	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Intestinal trouble	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Ear Discharge
<input type="checkbox"/> NO <input checked="" type="checkbox"/> Impaired Hearing	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Chest Pain Or Pressure	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Diabetes
<input type="checkbox"/> NO <input checked="" type="checkbox"/> Recent Loss Of Weight	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Allergy To Drugs / Chemical	<input type="checkbox"/> NO <input checked="" type="checkbox"/> High BP



PAST OPERATIVE HISTORY

<input type="checkbox"/> NO <input checked="" type="checkbox"/> Hydrocele	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Renal Calculus	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Duodenal Ulcer
<input type="checkbox"/> NO <input checked="" type="checkbox"/> Hernia	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Tonsillitis	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Appendicitis
<input type="checkbox"/> NO <input checked="" type="checkbox"/> Cataract	<input type="checkbox"/> NO <input checked="" type="checkbox"/> DNS	<input type="checkbox"/> NO <input checked="" type="checkbox"/> Piles



OTHER PAST OPERATIVE HISTORY : No

OTHER COMPLAINTS : No

PAST HISTORY : No

FAMILY HISTORY : No

ADDICTIONS : Smoke : No | Drinks : No | Diet : Veg | Pan : No | Tobacco : No | Gutka : No

VISION

WITHOUT GLASSES		WITH GLASSES		COLOUR BLINDNESS
NEAR	R [N-6] L [N-6]	NEAR	R [X] L [X]	NO
FAR	R [6/6] L [6/6]	FAR	R [X] L [X]	



VISION REMARK : NORMAL WITHOUT GLASS

Medical Test Date : 19-03-2022
Name : Pooja Rahul Bankar

Test Code : 90-630
Emp Code :

CLINICAL EXAMINATION

GENERAL & DERMATOLOGY EXAMINATION

General Condition : Good	Nails : NAD
Oedema Feet : Absent	Skin : Normal
Temperature : Normal	Deformities : None

CARDIOVASCULAR

Heart Sound : Normal

ABDOMEN

Liver : Not Palpable	Spleen : Not Palpable
	Other Masses : NAD

GENITO URINARY

Ext. Genitalia : Normal	Discharge : No
	Hydrocele : Normal

LYMPHATIC AND ENDOCRINE

Lymph Nodes : Not Palpable	Thyroid : Not Palpable
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MUSCULO SKETAL

Bones : NAD	Joints : NAD
	Posture Spine : Normal

NERVOUS SYSTEM

Sensory System : Normal	Reflexes : Normal
	Motor System : Normal

EYE CHECKUP

Conjunctiva : Normal	Cornea : Normal
Pupil : Normal	Fundus : NAD

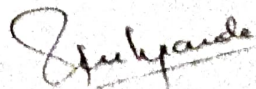
E.C.G : Within Normal Limits

PFT : NA

ADVICE : Normal Health.

RESULT : This is to certify that the employee is free from contagious and obnoxious disease including skin & Tuberculosis. Hence found to be fit for the respective job.

*NAD - No Abnormality Ditected
NA - Not Applicable



Dr. Rahul S Deshpande
M.B.B.S., D. Ortho A.J. 1 B (Mumbai)
Regd. No. 081019
HARDEV. HEALTH. CARE

Dr. Rahul Deshpande
M.B.B.S., ORTHO, A.F.I.H. (C.L.I.)
Industrial Health Consultant

Medical Test Date : 19-03-2022

Test Code : 90-630

Name : Pooja Rahul Bankar

Emp Code :

BLOOD GROUP & RH FACTOR

Blood Group : 'B'

Rh Typing : 'Positive'

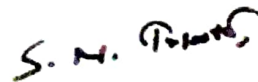
EXAMINATION OF HEMATOLOGY

NAME	RESULT	UNITS	NORMAL RANGE
Haemoglobin	13.1	mg/dl	12 - 15
RBC	4.52	mill/cumm	4.3 - 5.3
PCV / HCT	40.5	%	36 - 46
MCV	89.6	fl	83 - 101
MCH	29	pg	27 - 32
MCHC	32.3	g/dl	31.5 - 34.5
RDW	12.9	%	11.6 - 14
Total WBC Count	6500	mill/cumm	4000 - 10000
Neutrophils	60	%	40 - 80
Lymphocytes	37	%	20 - 40
Monocytes	02	%	2 - 10
Eosinophils	01	%	1 - 6
Basophils	00	%	0 - 1
Platelet Count	280000	per cu. mm.	150000 - 410000
ESR	18	mm	0 - 20
DIABETIC PROFILE	RESULT	UNITS	NORMAL RANGE
HbA1c	5.5	mg/dl	4 - 6.5
Blood sugar fasting	95.3	mg/dl	70 - 120
Blood sugar post lunch	115	mg/dl	80 - 160
KIDNEY FUNCTION TEST			
S. creatinine	0.98	mg/dl	0.5 - 1.5
Uric acid	2.8*	mg/dl	4.5 - 6.7
Urea	22.69	mg/dl	14 - 40
Blood urea nitrogen	10.596	mg/dl	6 - 21

EXAMINATION OF URINE

PHYSICAL EXAMINATION	CHEMICAL EXAMINATION	MICROSCOPIC EXAMINATION
Quantity : 10ml	Proteins : Absent	Erythrocytes : Absent
Color : Pale Yellow	Glucose : Absent	Epithelial Cell : 1-2 hpf
Appearance : Slightly Hazy	Specific Gravity : 1.010	Pus Cell : 2-3 hpf
Deposit : Absent	Ketones : Absent	Bacteria : Not seen
Urobilinogen : Absent	Occult Blood : Negative	Casts : Not seen
	Nitrite : Absent	Crystals : Not seen
		A. Material : Not seen

N.B. : Above investigation have their limitations and should be interpreted by referring physician accordingly. Solitary Radiological/Pathological and other investigations do not confirm the final diagnosis of disease.



Dr. Surya N. Tripathi

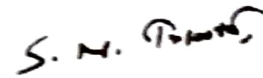
Consulting Pathologist

Reg. No. 2000/04/1994

Medical Test Date : 19-03-2022 Test Code : 90-630
Name : Pooja Ranul Bankar Emp No :

BIOCHEMICAL EXAMINATION

LIPID PROFILE	RESULT	UNITS	NORMAL RANGE
Total cholesterol	131	mg/dl	130 - 200
Hdl cholesterol	44	mg/dl	40 - 60
Ldl cholesterol	139	mg/dl	95 - 145
VLDL	25	mg/dL	2 - 30
LDL/HDL RATIO	2.5	-NA-	0.5 - 3.5
Tnglycerides	116.7	mg/dl	70 - 140
Cholesterol/HDL Ratio	4.1	mg/dl	0 - 4.5
LIVER FUNCTIN TEST			
Total bilirubin	0.5	mg/dl	0.2 - 1.2
Direct bilirubin	0.2	mg/dl	0 - 0.5
Indirect bilirubin	0.3	mg/dl	0 - 0.3
SGOT	26.19	/ml	0 - 40
SGPT	22.78	/ml	0 - 40
Protein	6.7	g/dl	6 - 8
Albumin	4.3	g/dl	3.5 - 5.5
S. Globulin	2.4*	g/dl	2.5 - 3.5
Alkaline phosphatase	86	u/l	50 - 150
GGT	12	u/l	10 - 50
A/G Ratio	2.0	-NA-	1 - 2.3



Dr. Surya N. Tripathi
Consulting Pathologist
Reg No - 2000/04/1994

TEST DATE : 19-03-2022
REF. BY : HARDEV HEALTH CARE
EMP CODE :
NAME : Pooja Rahul Bankar
TEST ASKED: TSH

TEST NAME	TECHNOLOGY	VALUE	UNITS	REFERENCE RANGE
T3	C.L.I.A.	101	ng/dl	60 - 200
T4	C.L.I.A.	10.2	µg/dl	4.5 - 12
Thyroid Stimulating Hormone (TSH)	C.L.I.A.	2.3	µIU/mL	0.3 - 5.5

Comments : ***

Please correlate with clinical conditions.

Method :

TSH - ULTRA SENSITIVE SANDWICH CHEMI LUMINESCENT IMMUNO ASSAY

---End Of Report---

Sample Collected on (SCT) : 19-03-2022

Sample Received on (SRT) : 20.03.2022

Report Released on (RRT) : 21 March 2022

Sample Type : SERUM

Labcode : 110741711/AND45

Test Code : 90-630

Dr.Durgaprasad N Agrawal MD Dr.Caesar Sengupta MD

Date : 19-03-2022

FITNESS CERTIFICATE

This is to certify that **Ms. Pooja Rahul Bankar** Emp. No. age **25** Yrs. has undergone the medical examination with us on **19-03-2022**. based on examination and investigation results she is free from infection / Contagious disease including skin & Tuberculosis for which diagnostic tests has been carried out and She is medically fit to continue her duties.


Dr. Rahul S. Deshpande
M.B.B.S. D. Ortho A.C.I.H (Mumbai)
Regd. No. 081019
HARDEV. HEALTH. CARE

Authorised Medical Practitioner

19-03-2022

Pooja Kshah Banar 1720 J



2022-3-19 10:54:14
 ID Card:
 Name:
 Age:
 Weight(Kg):
 HR:
 P-R:
 Q-R-S:
 QT/QTc:
 P/QRS/T AXES:
 RV5/SV1:
 RV5+SV1:
 *The result must be confirmed by
 Report Confirmer*