



PATIENT NAME: DEVIKA SUTARIYA

AGE/SEX: 35 YRS/F

DATE: Saturday, 13 January 2024

**ULTRASOUND OF ABDOMEN & PELVIS**

**LIVER** appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion. No evidence of dilated IHBR or portal vein. CBD appears normal.

**GALL BLADDER** is distended. No evidence of abnormal wall thickening or any significant calculus within.

**PANCREAS** appears normal. MPD is WNL.

**SPLEEN** appears normal in size and shows normal parenchymal echogenicity. No evidence of focal lesion.

**BOTH KIDNEYS** appear normal in size, shape and position. Show normal cortical echogenicity. Corticomedullary differentiation is maintained. No evidence of calculus or hydronephrosis on either side.

**URINARY BLADDER** is partially full. No evidence of abnormal wall thickening or any significant calculus within.

**UTERUS** appears normal in size and position. CET is 9.4 mm WNL. No evidence of focal lesion noted. Bilateral ovaries appear normal in size. No evidence of focal or obvious mass lesion noted.

**BOWEL LOOPS** appear normal and show normal peristalsis. No evidence of LYMPHADENOPATHY noted. No evidence of ASCITES noted.

**IMPRESSION:**

- NO SIGNIFICANT ABNORMALITY AT PRESENT SCAN.

DR SHARAD BUNGTA (MD & DNB)  
CONSULTANT RADIOLOGIST

*Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.*



PATIENT NAME: DEVIKA SUTARIYA

AGE/SEX: 35 YEARS/F

DATE: Saturday, 13 January 2024

**CHEST X-RAY (PA)**

Both lung fields appear normal.

Both hila appear normal

Bilateral costo-phrenic angles appear grossly clear

Mediastinum and cardiac shadow appear normal

Bony thorax appears unremarkable

No evidence of free gas under domes of diaphragm

**IMPRESSION:**

- NO SIGNIFICANT ABNORMALITY NOTED IN LUNG FIELDS
- NORMAL CARDIAC SHADOW

  
DR SHARAD NUNGTA (MD & DNB)  
CONSULTANT RADIOLOGIST

*Not all pathologies can be detected on ultrasound in each scan. Further radiographic evaluation is suggested if required.*



## **2D-ECHOCARDIOGRAPHY AND COLOR DOPPLER REPORT**

**NAME: DEVIKA SUTARIYA**

**AGE/SEX:35 YRS/FEMALE**

**DATE: 13/01/2024**

**REF BY: DIRECT**

### **OBSERVATION:**

- NORMAL LV SIZE AND NORMAL LV SYSTOLIC FUNCTION. LVEF = 60% (VISUAL).
- NO RWMA AT REST.
- NO LV DIASTOLIC DYSFUNCTION.
- TRIVIAL MR. NO MS.
- NO AR. NO AS.
- MILD TR. NO PAH.RVSP : 26 MMHG.
- NORMAL SIZED LA, RA & RV WITH NORMAL RV SYSTOLIC FUNCTION.
- NORMAL SIZED MPA, RPA & LPA.
- IAS : THIN,INTACT IVS.
- NO E/O INTRACARDIAC CLOT/VEGETATION/PE.
- NORMAL IVC.
- NORMAL PERICARDIUM.

**LA: 30MM**

**AO: 27MM**


**IVS: 10/12MM**

**LVPW: 09/12MM**

**LVID: 40/21MM**

### **CONCLUSION:**

- NORMAL LV/RV SIZE AND SYSTOLIC FUNCTION.
- NO RWMA AT REST.
- LVEF = 60% (VISUAL).

  
**DR.NIRAV BHALANI**  
[CARDIOLOGIST]

**DR.ARVID SHARMA**  
[CARDIOLOGIST]

35 Years

Female

Rate 66

PR 120

QRSD 80

QT 396

QTc 415

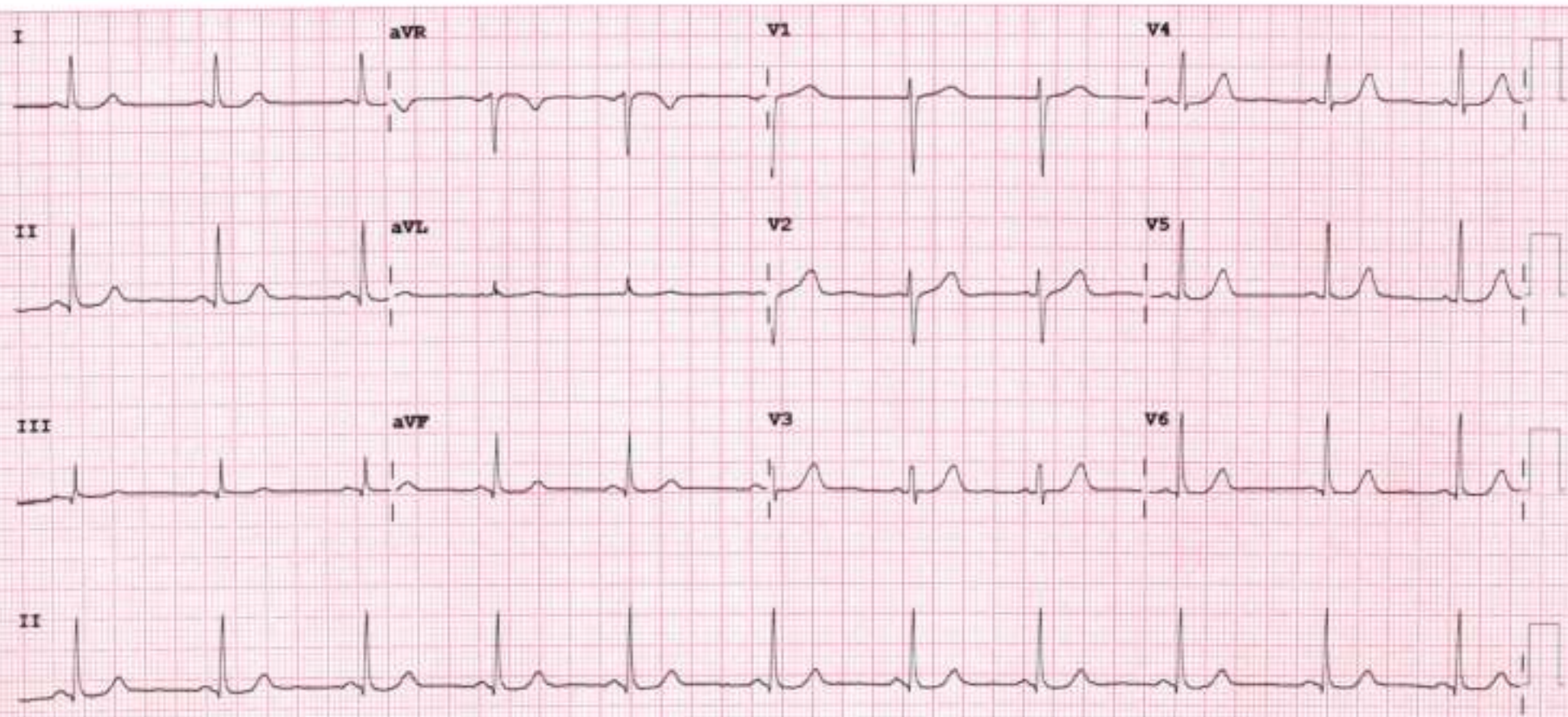
--AXIS--

P 48

QRS 41

T 37

12 Lead; Standard Placement





Patient Name : Devika Vijay Sutariya

Sample No. : 20240111960



Patient ID : 20240107150

Visit No. : OPD20240122835

Age / Sex : 35y/Female

Call. Date : 13/01/2024 10:03

Consultant : DR SAURABH JAIN

S. Coll. Date : 13/01/2024 10:28

Ward : -


Report Date : 13/01/2024 16:14

### CBC, ESR

Investigation	Result	Normal Value
Hemoglobin :	13.9 gm/dl	12.5 to 16.0 gm/dl
P.C.V. :	43 %	37.0 to 47.0 %
M.C.V. :	83.7 fL	78 to 100 fL
M.C.H. :	27 pg	27 to 31 pg
M.C.H.C. :	32.3 g/dl	32 to 36 g/dl
RDW :	11.8 %	11.5 to 14.0 %
RBC Count :	5.14 X 10 <sup>6</sup> /cumm	4.2 to 5.4 X 10 <sup>6</sup> /cumm
Polymorphs :	64 %	38 to 70 %
Lymphocytes :	32 %	15 to 48 %
Eosinophils :	2 %	0 to 6 %
Monocytes :	2 % [L]	3 to 11 %
Total :	100	< 100 > 100
WBC Count :	7800 /cmm	4000 to 10000 /cmm
Platelets Count :	301000 /cmm	1,50,000 to 4,50,000 /cmm
ESR - After One Hour :	41 mm/hr [H]	1 to 20 mm/hr

**Dr. Mehul Desai**  
M.B.D.C.P  
Reg.No.G-9521



<b>Patient Name :</b> Devika Vijay Sutariya	<b>Sample No. :</b> 20240111960
<b>Patient ID :</b> 20240107150	
<b>Age / Sex :</b> 35y/Female	<b>Visit No. :</b> OPD20240122835
<b>Consultant :</b> DR SAURABH JAIN	<b>Call. Date :</b> 13/01/2024 10:03
<b>Ward :</b> -	<b>S. Coll. Date :</b> 13/01/2024 10:28
	<b>Report Date :</b> 13/01/2024 16:14

### Blood Group

Investigation	Result	Normal Value
<b>BLOOD GROUP :</b>		
<b>ABO</b>	AB	
<b>Rh</b>	Positive	

### FBS & PPBS


Investigation	Result	Normal Value
Blood Sugar (FBS) :	97 mg/dl	74 - 100 mg/dl
Urine Sugar ( FUS ) :	Nil	
Blood Sugar (PP2BS) :	96 mg/dl	70 to 120 mg/dl
Urine Sugar ( PP2US ) :	Nil	

### HBA1C

Investigation	Result	Normal Value
Glycosylated Hb :	5.7 %	Near Normal Glycemia : 6 to 7 Excellent Control : 7 to 8 Good Control : 8 to 9 Fair Control : 9 to 10 Poor Control : > 10
Average Plasma Glucose of Last 3 Months :	116.89	

**Dr.Mehul Desai**  
M.B.D.C.P  
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<b>Patient ID :</b> 20240107150	
<b>Age / Sex :</b> 35y/Female	<b>Visit No. :</b> OPD20240122835
<b>Consultant :</b> DR SAURABH JAIN	<b>Call. Date :</b> 13/01/2024 10:03
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**LFT (Liver Function Test)**

Investigation	Result	Normal Value
Total Bilirubin :	0.6 mg/dl	0.2 to 1.0 mg/dl
Direct Bilirubin :	0.2 mg/dl	0.0 to 0.2 mg/dl
Indirect Bilirubin :	0.4 mg/dl	0.0 to 0.8 mg/dl
AST (SGOT) :	35 U/L [H]	5 to 34 U/L
ALT (SGPT) :	28 U/L	0 to 55 U/L
Total Protein (TP) :	6.9 g/dL	6.4 to 8.3, g/dl
Albumin (ALB) :	3.9 g/dl	3.5 to 5.2 g/dl
Globulin :	3 g/dl	2.3 to 3.5 g/dl
A/G Ratio :	1.3	
Alkaline Phosphatase (ALP) :	110 U/L	40 to 150 U/L
GAMMA GT. :	25 U/L	7 to 35 U/L

**Dr. Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**



<b>Patient Name :</b>	Devika Vijay Sutariya	<b>Sample No. :</b>	20240111960
<b>Patient ID :</b>	20240107150		
<b>Age / Sex :</b>	35y/Female	<b>Visit No. :</b>	OPD20240122835
<b>Consultant :</b>	DR SAURABH JAIN	<b>Call. Date :</b>	13/01/2024 10:03
<b>Ward :</b>	-	<b>S. Coli. Date :</b>	13/01/2024 10:28
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### Lipid Profile

Investigation	Result	Normal Value
Sample :	Fasting	
Sample Type :	Normal	
Cholesterol (Chol) :	155 mg/dl	Low risk : < 200 Moderate risk : 200 - 239 High risk : > or = 240
Triglyceride :	130 mg/dl	Normal : < 200.0 High : 200 - 499 Very High : > or = 500
HDL Cholesterol :	42 mg/dl	Low risk : >or = 60 mg/dL High risk : Up to 35 mg/dL
LDL :	87 mg/dl [L]	131.0 to 159.0(N) < 130.0(L) > 159.0(H)
VLDL :	26 mg/dl	Up to 0 to 34 mg/dl
LDL/HDL Ratio :	2.07	Low risk : 0.5 to 3.0 Moderate risk : 3.0 to 6.0 Elevted level high > 6.0
Total Chol / HDL Ratio :	3.69	Low Risk : 3.3 to 4.4 Average Risk : 4.4 to 7.1 Moderate Risk : 7.1 to 11.0 High Risk : > 11.0
Total Lipids :	627 mg/dl	400 to 700 mg/dl

**Note :-** Lipemic samples give high triglyceride value and falsely low LDL value.

**Dr. Mehul Desai**  
M.B.D.C.P  
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<b>Patient ID :</b> 20240107150	
<b>Age / Sex :</b> 35y/Female	<b>Visit No. :</b> OPD20240122835
<b>Consultant :</b> DR SAURABH JAIN	<b>Call. Date :</b> 13/01/2024 10:03
<b>Ward :</b> -	<b>S. Coll. Date :</b> 13/01/2024 10:28
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**RENAL FUNCTION TEST**

Investigation	Result	Normal Value
Creatinine :	0.6 mg/dl	0.6 - 1.4 mg/dl
Urea :	21 mg/ dl	13 - 45 mg/dl
Uric Acid :	3.6 mg/dl	3.5 - 7.2 mg/dl
Calcium :	8.2 mg/dl	8.5 - 10.5
Phosphorus :	4.8 mg/dl	1.5 - 6.8

**Dr. Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**

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6. Results relate only to the sample tested. Result of laboratory tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient; may be due to physiological variations, different methodology, technology & its limitations etc.
7. A requested test might not be performed in case of following reasons: a) Insufficient quantity of specimen (inadequate collection/spillage in transit) b) Specimen quality unacceptable (hemolysed/clotted/lipemic etc) c) Incorrect specimen type d) Incorrect identity of specimen. In above mentioned circumstances it is expected that a fresh specimen will be sent for the purpose of the reporting on the same parameter.
8. In unanticipated circumstances (non-availability of kits, instrument breakdown & natural calamities) tests may not be reported as per schedule. However USL(B), LLP, will ensure that the delay is minimized.
9. The sex of the fetus will not be revealed as per the Prenatal Diagnostic Technique (Regulation and Prevention of Misuse Act, 1994)
10. Tests parameters marked by asterisks (\*) are excluded from the "scope" of NABL accredited tests.
11. It is mandatory to send Biopsy/Histopathology specimen in 10% formalin.
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13. These reports are not valid for medico-legal purposes.
14. Any queries regarding possible interpretation / clinical - pathological correlation from referring doctor/patient should be directed to the pathologists.
15. Subject to Baroda Jurisdiction only.

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1. Under the best of circumstances, no test is having 100% sensitivity & 100% specificity. In the majority of laboratory parameters, the combination of short-term physiologic variation & analytical error/technological limitations are sufficient to render the interpretation of single determinations difficult especially when the concentrations are in borderline range. Any particular laboratory test result may be misleading (not correlating with clinical findings) for large varieties of reasons, regardless of high quality of laboratory, such results should be rechecked. If indicated new specimen should be submitted.
2. Reference ranges (biological reference interval) vary from one laboratory to another and with age, sex, race, size, physiologic status (e.g. pregnancy & lactation) that apply to the particular patient. Reference values represent the statistical data for 95% of the population; values outside these ranges do not necessarily represent disease. Result may still be within the reference range but be elevated above the patient's baseline, which is why serial testing is important in a number of conditions.
3. The effects of drugs on laboratory test values must never be overlooked. Laboratory values in elderly must be interpreted in light of many factors that affects "normal" values in this group.
4. Negative laboratory test results do not necessary rule out a clinical diagnosis.

## TEAM OF DOCTORS

Dr. Girish Gupta, MD (Path)	Dr. Rakesh Shah MD (Path) , DCP
Dr. Ankit Jhaveri MD (Path)	Dr. Vishal Jhaveri, DCP
Dr. Rachna Parekh DCP	Dr. Hetal Parikh MD (Path) FRCPATH (UK)
Dr. Priya Mangukiya MD (Microbiology)	Dr. Sukanya Patra MBBS, MD (Path)
Dr. Varsha Raimalani, PhD	Dr. Shreyas Nisarta MD(Path)
Dr. Nehal Tiwari MD (Path)	Dr. Vaishali Bhatt, MD

## OUR UNITS

- a) Aayu Path Lab (Tarsali) - 9376224836, 7043940202
- b) Purak Hi-Tech Lab (Nizampura) - 7229046350, 9377559900
- c) Dr. Jhaveri Laboratory (Akota) - 0265-2329428, 9998724579
- d) Dr. Jhaveri Laboratory (Polo Ground) - 0265-2424335, 9725282172
- e) Jhaveri Advanced Path Lab (Subhanpura)
- f) Jhaveri Advanced Path Lab (Waghodiya road)



Unipath Speciality Laboratory (Baroda) LLP - Platinum Complex, Opp. HDFC Bank, Nr. Radha Krishna char rasta, Akota, Vadodara - 390020  
Unipath Speciality Laboratory (Baroda) LLP - Plot No. 22, T3, 269, 1st Flr, Opp. HDFC Bank, Nr. Radha Krishna char rasta, Akota, Vadodara - 390020  
Mobile: 7228800500 / 8155028222 | Email: info.baroda@unipathllp.in  
Home Visit / OPD Reception : 9998724579



### TEST REPORT

Reg. No. : 40101006487      Reg. Date : 13-Jan-2024 12:47      Collected On : 13-Jan-2024 12:47  
Name : Ms. DEVIKA SUTARIYA      Approved On : 13-Jan-2024 13:53  
Age : 35 Years      Gender : Female      Ref. No. :      Dispatch At :  
Ref. By :      Tele No. :  
Location : SAVITA SUPERSPECIALTY HOSPITAL @ WAGHODIYA ROAD

Test Name	Results	Units	Bio. Ref. Interval
<b>THYROID FUNCTION TEST</b>			
T3 (triiodothyronine) Method:CLIA	1.28	ng/mL	0.5 - 1.81
T4 (Thyroxine) Method:CLIA	9.00	µg/dL	4.5 - 12.6
TSH ( ultra sensitive) Method:CLIA	2.797	µIU/mL	0.55 - 4.78
Sample Type:Serum			

**Comments:**  
Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulates the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

**TSH levels During Pregnancy :**

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burris,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

End Of Report

This is an electronically authenticated report


Test done from collected sample.

Printed On: 13-Jan-2024 13:54

We are open 24 x 7 & 365 days

Dr. Vishal Jhaveri  
M.B.B.S, D.C.P  
Reg. G-13043  
LLP Identification Number: AAN-8932  
Page 1 of 1



<b>Patient Name :</b>	Devika Vijay Sutariya	<b>Sample No. :</b>	20240111960
<b>Patient ID :</b>	20240107150		
<b>Age / Sex :</b>	35y/Female	<b>Visit No. :</b>	OPD20240122835
<b>Consultant :</b>	DR SAURABH JAIN	<b>Call. Date :</b>	13/01/2024 10:03
<b>Ward :</b>	-	<b>S. Coll. Date :</b>	13/01/2024 10:28
		<b>Report Date :</b>	13/01/2024 16:14

### Urine R/M

Investigation	Result	Normal Value
Quantity - :	20 ml	
Colour - :	Pale Yellow	
Reaction (pH) :	6.0	4.6-8.0
Turbidity :	Clear	
Deposit :	Absent	Absent
Sp.Gravity :	1.010	1.005-1.010
Protein :	Absent	Absent
Glucose :	Absent	Absent
Bile Salts :	Absent	Absent
Bile pigments :	Absent	Absent
Ketones :	Absent	Absent
Urobilinogen :	Absent	
Blood :	Absent	Absent
Pus Cells :	Absent /hpf	0-5/hpf
Red Blood Cells :	Absent /hpf	Absent
Epithelial Cells :	0-1 /hpf	

**Dr.Mehul Desai**  
**M.B.D.C.P**  
**Reg.No.G-9521**



# Savita

## Superspecialty Hospital

(A Unit of Solace Healthcare Pvt.)

Parivar Char Rasta, Waghodia-Dabhoi Ring Road, Vadodara-390019

0265-2578844 / 2578849 63596-88442

mh@savitahospital.com savitahospital.com



### Examination by Physician

Name: Devika V Sutarika Reg. No: 20240122938

Age/ Sex: 35f DOE: 13/01/2024

#### Physical Examination

Height: 149 cm Weight: 56 kg BMI: 25.22

Temperature: \_\_\_\_\_ Pulse: 84 BP: 118/80

#### Chief Complaints:

SPO2-99%  
pain in great toe

#### Past History:

NAD

#### Examination:

##### General Examination:

NAD

##### Systemic Examination:

NAD

#### Investigation:

RBS \_\_\_\_\_

ECG \_\_\_\_\_

Others \_\_\_\_\_

Advice: - Surgery Ref. 9/1/20 Nail pain & inf.

- T. Zeredol sp 1 tab sos,

Signature \_\_\_\_\_





# Savita

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0265-2578844 / 2578849 63596 88442

mh@savitahospital.com savitahospital.com



### Examination by Ophthalmologist

Name: Devika Suteriya Reg. No: 20240122938

Age/ Sex: 35 F

DOE: 13/11/2024

#### Present Complaints:

CUO DV for near

#### Medical History:

Nil

#### Examination of Eye:

	Right	LEFT
External Examination:	<u>WNL</u>	<u>WNL</u>
Anti seg Examination:	<u>WNL</u>	<u>WNL</u>
Schiot Tonometry IOP:	<u>(BE) digitally WNL</u>	

#### Fundus:

	Right	LEFT
Without Glass	Distant Vision: <u>6/6</u>	<u>6/6</u>
	Near Vision: <u>N8</u>	<u>N8</u>
With Glass	Distant Vision: <u>6/6</u>	<u>6/6</u>
	Near Vision: <u>N6</u>	<u>N6</u>

Colour Vision (With Ishihara Chart): (BE) WNL

#### Impression:

(BE) Accomodative lag.

#### Advice:

Near glass use

Signature: \_\_\_\_\_





Patient ID : 20240107150  
Age / Sex : 35y / F  
Patient Name : DEVIKA VIJAY SUTARIYA  
Dr. Name : DR SAURABH JAIN  
Referred By : self  
City/Village : Vadodara  
Class : Contract  
PAN Card : AAQCS5566G

Visit No. : OPD20240122835(OPD)  
Bill No. : OPD20240122835  
Bill Date : N/A  
Speciality : Internal Medicine  
Company Name : Mediwheel Health Check Up  
GSTIN : 24AAQCS5566G2ZW  
SAC : 999312 "Medical Service covered under healthcare service"  
Mobile No. : 9727421457

Expense Details	Qty	Rate	Gross Amount	Waive	Net Amount
<b>Visit Charge</b>					
13/01/2024 Physician First Consultation OPD	1.0	0.0	0.00	0.0	0.00
Ophthalmologist First Consultation OPD	1.0	0.0	0.00	0.0	0.00
<b>Visit Charge (Subtotal)</b>			<b>0.0</b>	<b>0.0</b>	<b>0.00</b>
<b>PATHOLOGY</b>					
13/01/2024 CBC, ESR	1.0			0.0	
Urine R/M	1.0			0.0	
STOOL EXAMINATION	1.0			0.0	
Blood Group	1.0			0.0	
FBS & PPBS	1.0			0.0	
TFT (Thyroid Function Test)	1.0			0.0	
RENAL FUNCTION TEST	1.0			0.0	
LFT (Liver Function Test)	1.0			0.0	
Lipid Profile	1.0			0.0	
HBA1C	1.0			0.0	
MediWheel Full Body Health Check-Up(Female Below 40)	1.0	2000.0	2000.00	0.0	2000.00
<b>PATHOLOGY (Subtotal)</b>			<b>2000.0</b>	<b>0.0</b>	<b>2000.00</b>
<b>Radiology</b>					
13/01/2024 X-RAY CHEST PA	1.0			0.0	
USG WHOLE ABDOMEN SCREENING	1.0			0.0	
X-RAY CHEST PA	1.0	0.0	0.00	0.0	0.00
USG WHOLE ABDOMEN SCREENING	1.0	0.0	0.00	0.0	0.00
<b>Radiology (Subtotal)</b>			<b>0.0</b>	<b>0.0</b>	<b>0.00</b>
<b>Non Invasive Cardiology</b>					
13/01/2024 ECG Charge(OPD Base)	1.0	0.0	0.00	0.0	0.00
ECHO COLOUR DOPPLER SCREENING	1.0	0.0	0.00	0.0	0.00
<b>Non Invasive Cardiology (Subtotal)</b>			<b>0.0</b>	<b>0.0</b>	<b>0.00</b>
<b>Total Bill Amount</b>					<b>2000.00</b>
<b>Net payable amount</b>					<b>2000.00</b>
<b>Bill Outstanding</b>					<b>2000.00</b>

Received With Thanks From DEVIKA VIJAY SUTARIYA of Rs 0.0/-  
(Rs Zero Only)

Printed By : [Signature]  
For : Savita Hospital-Live

प्रति,

समन्वयक,  
Mediwheel (Arcofemi Healthcare Limited)  
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार है हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MS. SUTARIYA DEVIKA VIJAY
क.कू.संख्या	111282
पदनाम	SINGLE WINDOW OPERATOR A
कार्य का स्थान	LIMDA
जन्म की तारीख	20-05-1987
स्वास्थ्य जांच की प्रस्तावित तारीख	13-01-2024
बुकिंग संदर्भ सं.	23M111282100083116E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 09-01-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ोदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)