

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	ANJALI VERMA
DATE OF BIRTH	20-07-1970
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	02-03-2023
BOOKING REFERENCE NO.	22M61460100045318S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. VERMA RAMESH CHANDRA
EMPLOYEE EC NO.	61460
EMPLOYEE DESIGNATION	JOINT MANAGER
EMPLOYEE PLACE OF WORK	GHAZIABAD,RAJNAGAR
EMPLOYEE BIRTHDATE	15-02-1967

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 **01-03-2023** 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))

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





भारत सरकार  
Government of India



आधार



अंजली वर्मा  
Anjali Verma  
जन्म तिथि/DOB: 20/07/1970  
महिला/ FEMALE

**7797 0755 2597**

VID : 9154 5538 3495 5605

मेरा आधार, मेरी पहचान

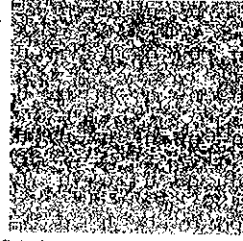


भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



पता:  
अर्पणिनी: रमेश चंद वर्मा, ए 42, सेक्टर - 11, विजय नगर,  
गाजियाबाद, गाजियाबाद,  
उत्तर प्रदेश - 201009

Address:  
W/O: Ramesh Chand Verma, A 42, Sector -  
11, Vijay Nagar, Ghaziabad, Ghaziabad,  
Uttar Pradesh - 201009



7797 0755 2597

VID : 9154 5538 3495 5605



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help@uidai.gov.in



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## TMT INVESTIGATION REPORT

Patient Name : Mrs. Anjali VERMA	Location : Ghaziabad
Age/Sex : 52Year(s)/Female	Visit No : V000000001-GHZZ
MRN No : MH010817694	Order Date : 02/03/2023
Ref. Doctor : HCP	Report Date : 02/03/2023

**Protocol** : Bruce **MPHR** : 168BPM  
**Duration of exercise** : 5min 01sec **85% of MPHR** : 142BPM  
**Reason for termination** : THR achieved **Peak HR Achieved** : 153BPM  
**Blood Pressure (mmHg)** : Baseline BP : 136/70mmHg **% Target HR** : 91%  
 Peak BP : 150/70mmHg **METS** : 7.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
PRE- EXC.	0:00	111	136/70	Nil	No ST changes seen	Nil
STAGE 1	3:00	134	144/70	Nil	No ST changes seen	Nil
STAGE 2	2:01	153	150/70	Nil	No ST changes seen	Nil
RECOVERY	3:12	102	140/70	Nil	No ST changes seen	Nil

### COMMENTS:

- No ST changes in base line ECG.
- No ST changes seen during test and recovery.
- Normal chronotropic response.
- Normal blood pressure response.

### IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

**Dr. Bhupendra Singh**  
MD, DM (CARDIOLOGY),FACC  
Sr. Consultant Cardiology

**Dr. Abhishek Singh**  
MD, DNB (CARDIOLOGY),MNAMS  
Sr. Consultant Cardiology

**Dr. Sudhanshu Mishra**  
MD  
Cardiology Registrar

Manipal Hospital, Ghaziabad

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

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Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

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

P +91 80 4936 0300 E info@manihospitals.com www.manipalhospitals.com

## RADIOLOGY REPORT

Name	Anjali VERMA	Modality	US
Patient ID	MH010817694	Accession No	R5230162
Gender/Age	F / 52Y 7M 13D	Scan Date	02-03-2023 12:59:45
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	02-03-2023 14:21:05

**USG ABDOMEN & PELVIS****FINDINGS**

LIVER: appears normal in size (measures 140 mm) and shape but shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 112 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 8.9 mm.

COMMON BILE DUCT: Appears normal in size and measures 4 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 95 x 30 mm.

Left Kidney: measures 113 x 44 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.

UTERUS: Uterus is anteverted, normal in size (measures 70 x 52 x 32 mm), shape and echotexture.

Endometrial thickness measures 4.5 mm. Cervix appears normal.

OVARIES: Right ovary is normal in size (measures 20 x 19 x 11 mm with volume 2.3 cc), shape and echotexture. Rest normal.

Left ovary is obscured.

BOWEL: Visualized bowel loops appear normal.

**IMPRESSION**

-Diffuse grade I fatty infiltration in liver.

Recommend clinical correlation.

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**MANIPAL HOSPITALS**

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

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## RADIOLOGY REPORT

Name	Anjali VERMA	Modality	US
Patient ID	MH010817694	Accession No	R5230162
Gender/Age	F / 52Y 7M 13D	Scan Date	02-03-2023 12:59:45
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	02-03-2023 14:21:05



Dr. Prabhat Prakash Gupta,  
MBBS,DNB,MNAMS,FRCR(I)  
Consultant Radiologist, Reg no DMC/R/14242

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## RADIOLOGY REPORT

Name	Anjali VERMA	Modality	DX
Patient ID	MH010817694	Accession No	R5230161
Gender/Age	F / 52Y 7M 13D	Scan Date	02-03-2023 10:18:17
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	02-03-2023 10:48:16

## XR- CHEST PA VIEW

**FINDINGS:**

LUNGS: Prominent bronchovascular markings are seen on both sides.  
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: Knuckle calcification is seen  
THORACIC SPINE: Normal.  
OTHER VISUALIZED BONES: Normal.  
VISUALIZED SOFT TISSUES: Normal.  
DIAPHRAGM: Normal.  
VISUALIZED ABDOMEN: Normal.  
VISUALIZED NECK: Normal.

**IMPRESSION:**

**Prominent bronchovascular markings are seen on both sides.  
Aortic knuckle calcification is seen.**

*Please correlate clinically*

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## RADIOLOGY REPORT

Name	Anjali VERMA	Modality	DX
Patient ID	MH010817694	Accession No	R5230161
Gender/Age	F / 52Y 7M 13D	Scan Date	02-03-2023 10:18:17
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	02-03-2023 10:48:16



Dr. Prabhat Prakash Gupta,  
MBBS,DNB,MNAMS,FRCR(I)  
Consultant Radiologist, Reg no DMC/R/14242

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## LABORATORY REPORT

Name : MRS ANJALI VERMA Age : 52 Yr(s) Sex : Female  
 Registration No : MH010817694 Lab No : 202303000122  
 Patient Episode : H18000000293 Collection Date : 02 Mar 2023 09:53  
 Referred By : HEALTH CHECK MGD Reporting Date : 02 Mar 2023 12:41  
 Receiving Date : 02 Mar 2023 09:53

### HAEMATOTOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	4.21	millions/cu mm	[3.80-4.80]
HEMOGLOBIN	12.8	g/dl	[12.0-16.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	39.6	%	[36.0-46.0]
MCV (DERIVED)	94.1	fL	[83.0-101.0]
MCH (CALCULATED)	30.4	pg	[27.0-32.0]
MCHC (CALCULATED)	32.3	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	11.7	%	[11.6-14.0]
Platelet count	152	x 10 <sup>3</sup> cells/cumm	[150-400]
MPV (DERIVED)	13.5		
WBC COUNT (TC) (IMPEDENCE)	4.96	x 10 <sup>3</sup> cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	55.0	%	[40.0-80.0]
Lymphocytes	36.0	%	[17.0-45.0]
Monocytes	7.0	%	[2.0-10.0]
Eosinophils	2.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	22.0 #	/1sthour	[0.0-

## LABORATORY REPORT

Name : MRS ANJALI VERMA Age : 52 Yr(s) Sex :Female  
 Registration No : MH010817694 Lab No : 202303000122  
 Patient Episode : H18000000293 Collection Date : 02 Mar 2023 10:27  
 Referred By : HEALTH CHECK MGD Reporting Date : 02 Mar 2023 15:16  
 Receiving Date : 02 Mar 2023 10:27

### CLINICAL PATHOLOGY

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

#### MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	CLEAR	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.010	(1.003-1.035)

#### CHEMICAL EXAMINATION

Protein/Albumin	Negative	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	Negative	(NEGATIVE)
Urobilinogen	NORMAL	(NORMAL)

#### MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	2-3/hpf	(0-5/hpf)
RBC	1-2 /hpf	(0-2/hpf)
Epithelial Cells	1-2/HPF /hpf	
CASTS	NIL	
Crystals	NIL	
OTHERS	NIL	



## LABORATORY REPORT

Name : MRS ANJALI VERMA Age : 52 Yr(s) Sex :Female  
 Registration No : MH010817694 Lab No : 202303000122  
 Patient Episode : H18000000293 Collection Date : 02 Mar 2023 09:53  
 Referred By : HEALTH CHECK MGD Reporting Date : 02 Mar 2023 17:55  
 Receiving Date : 02 Mar 2023 09:53

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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#### Glycosylated Hemoglobin

Specimen: EDTA

HbA1c (Glycosylated Hemoglobin)	6.6 #	%	[0.0-5.6]
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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)	143	mg/dl
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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.

#### Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	169	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	108	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	54.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	22	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	93.0	mg/dl	[<120.0]
Near/ Borderline High:130-159 High Risk:160-189			

Above optimal-100-129

## LABORATORY REPORT

Name	: MRS ANJALI VERMA	Age	: 52 Yr(s) Sex :Female
Registration No	: MH010817694	Lab No	: 202303000122
Patient Episode	: H18000000293	Collection Date	: 02 Mar 2023 09:53
Referred By	: HEALTH CHECK MGD	Reporting Date	: 02 Mar 2023 11:22
Receiving Date	: 02 Mar 2023 09:53		

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
T.Chol/HDL.Chol ratio(Calculated)	3.1		<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
LDL.CHOL/HDL.CHOL Ratio(Calculated)	1.7		<3 Optimal 3-4 Borderline >6 High Risk

Note:  
Reference ranges based on ATP III Classifications.

### KIDNEY PROFILE

Specimen: Serum			
UREA	28.6	mg/dl	[15.0-40.0]
Method: GLDH, Kinatic assay			
BUN, BLOOD UREA NITROGEN	13.4	mg/dl	[8.0-20.0]
Method: Calculated			
CREATININE, SERUM	0.53 #	mg/dl	[0.70-1.20]
Method: Jaffe rate-IDMS Standardization			
URIC ACID	4.5	mg/dl	[4.0-8.5]
Method:uricase PAP			
SODIUM, SERUM	137.0	mmol/L	[136.0-144.0]
POTASSIUM, SERUM	4.08	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.2	mmol/l	[101.0-111.0]
Method: ISE Indirect			
eGFR (calculated)	109.5	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 to 1.73 sq.m BSA and is not applicable to individuals below 18 years.

## LABORATORY REPORT

Name : MRS ANJALI VERMA Age : 52 Yr(s) Sex : Female  
 Registration No : MH010817694 Lab No : 202303000122  
 Patient Episode : H18000000293 Collection Date : 02 Mar 2023 09:53  
 Referred By : HEALTH CHECK MGD Reporting Date : 02 Mar 2023 11:22  
 Receiving Date : 02 Mar 2023 09:53

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
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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.

#### LIVER FUNCTION TEST

BILIRUBIN - TOTAL Method: D P D	1.11	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT Method: DPD	0.23	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) Method: Calculation	0.88 #	mg/dl	[0.10-0.30]
TOTAL PROTEINS (SERUM) Method: BIURET	7.50	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) Method: BCG	4.35	g/dl	[3.50-5.20]
GLOBULINS (SERUM) Method: Calculation	3.20	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO Method: Calculation	1.38		[1.00-2.50]
AST (SGOT) (SERUM) Method: IFCC W/O P5P	19.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) Method: IFCC W/O P5P	17.00	U/L	[14.00-54.00]
Serum Alkaline Phosphatase Method: AMP BUFFER IFCC)	61.0	IU/L	[40.0-98.0]



## LABORATORY REPORT

Name : MRS ANJALI VERMA Age : 52 Yr(s) Sex : Female  
Registration No : MH010817694 Lab No : 202303000122  
Patient Episode : H18000000293 Collection Date : 02 Mar 2023 09:53  
Referred By : HEALTH CHECK MGD Reporting Date : 02 Mar 2023 11:23  
Receiving Date : 02 Mar 2023 09:53

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GGT	15.0		[7.0-50.0]

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.

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



Dr. Charu Agarwal  
Consultant Pathologist

## LABORATORY REPORT

Name : MRS ANJALI VERMA Age : 52 Yr(s) Sex : Female  
Registration No : MH010817694 Lab No : 202303000123  
Patient Episode : H18000000293 Collection Date : 02 Mar 2023 09:52  
Referred By : HEALTH CHECK MGD Reporting Date : 02 Mar 2023 11:22  
Receiving Date : 02 Mar 2023 09:52

### BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma			
GLUCOSE, FASTING (F)	131.0 #	mg/dl	[70.0-110.0]
Method: Hexokinase			

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



Dr. Charu Agarwal  
Consultant Pathologist

LABORATORY REPORT

Name : MRS ANJALI VERMA  
Registration No : MH010817694  
Patient Episode : H18000000293  
Referred By : HEALTH CHECK MGD  
Receiving Date : 02 Mar 2023 14:14  
Age : 52 Yr(s) Sex :Female  
Lab No : 202303000124  
Collection Date : 02 Mar 2023 14:14  
Reporting Date : 02 Mar 2023 15:10

BIOCHEMISTRY  
RESULT UNIT BIOLOGICAL REFERENCE INTERVAL

PLASMA GLUCOSE  
Specimen: Plasma  
GLUCOSE, POST PRANDIAL (PP), 2 HOURS 252.0 # mg/dl [80.0-140.0]  
Method: Hexokinase

Note:  
Conditions which can lead to lower postprandial glucose levels as compared to  
fasting glucose are excessive insulin release, rapid gastric emptying,  
brisk glucose absorption, post exercise

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

*Alka*  
Dr. Alka Dixit Vats  
Consultant Pathologist