

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. CHAUDHARY SANTOSH KUMAR
EC NO.	188547
DESIGNATION	WEALTH EXECUTIVE
PLACE OF WORK	DHANBAD
BIRTHDATE	04-05-1988
PROPOSED DATE OF HEALTH CHECKUP	25-03-2023
BOOKING REFERENCE NO.	22M188547100049844E

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 **17-03-2023** 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 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))



**बैंक ऑफ बड़ोदा**  
**Bank of Baroda**

नाम : सतोष कुमार चौधरी  
 Name : SANTOSH KUMAR CHAUDHARY

कर्मचारी कूट नं : 188547  
 E.C. No. : 188547

*[Signature]*

Bank of Baroda Ltd. 1908  
 Banking Act, 1949. Bank of India Act, 1949.

If found, please return to:  
 Dy General Manager  
 Bank of Baroda, Baroda Surya Bhawan, Main Road Bistupur  
 Jamshedpur - 831001, Jharkhand  
 Phone +91 657 2249410

PERMANENT ADDRESS : At- Gunjra, P.O- Jhurjhuri, Barhi, Hazaribagh- 825405

EMERGENCY CONTACT NO. : 9576151431

रक्त समूह / Blood Group : A+

चिह्नित निशान / Identification Marks : Cut Mark On The Nose





34 Years

Male

MEDICA DHANBAD

Rate 75 . Sinus rhythm.....Normal P axis, V-rate 50-99

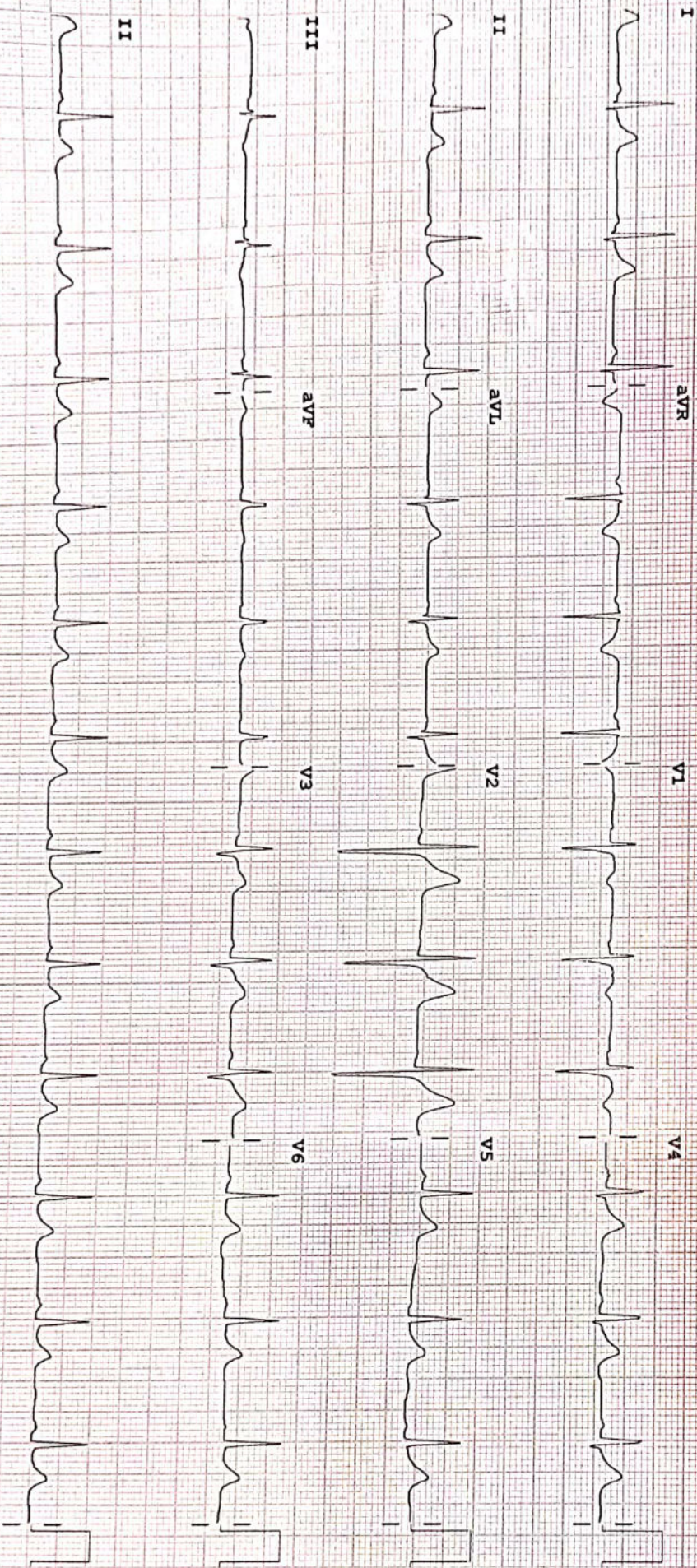
PR	131
QRSD	79
QT	341
QTc	381

--AXIS--  
 P 30  
 QRS 46  
 T 13

12 Lead: Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec

Limb: 10 mm/mV

Chest: 10.0 mm/mV

F 50~ 0.50-100 Hz W

PH100B CL

P?







असर्फी हॉस्पिटल  
सबके लिए स्वास्थ्य

Baramuri, P.O. - Bishunpur Polytechnic, Dhanbad (Jharkhand) - 828130  
Regd. Office : Phulariland, Kharkaree, Dhanbad (Jharkhand) - 828125  
Mob.: 78083 68888  
CIN : U85110JH2005PLC011673

## RADIOLOGY REPORT

Patient Information			
Patient Name	MR SANTOSH KUMAR CHOUDHARY	Patient ID	44287
Age   Gender	34 YRS /MALE	Scan Date	MAR 25 2023
Referring Doctor	SELF	Report Date	MAR 25 2023

## CHEST X-RAY

Trachea and mediastinum central.  
Cardio thoracic ratio within top normal limits.  
Right hilum prominent.  
Both diaphragm are of equal height and normal in shape and position.  
*Non homogeneous opacity Rt lower zone.? Resolving PNEUMONITIS*  
Left lung field clear.  
Both Cp angles indistinct.

**Impression..Resolving PNEUMONITIS Rt**

*R. K. Airon*

**Dr. R. K. Airon**

MD Radiodiagnosis (HN-008701/77)

Consultant Radiologist



MR SANTOSH KUMAR CHOUDHARY 34Y DR SELF | 1



**24 HOUR EMERGENCY**

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An ISO 9001 : 2015  
Organisation



# असर्फी हॉस्पिटल

सबके लिए स्वास्थ्य

## ECHOCARDIOGRAPHY REPORT

Name: **MR SANTOSH KUMAR  
CHOUDHARY**

Age: **34**

Sex: **Male**

Date: **25/03/2023**

### 2D & M-MODE MEASUREMENTS

LA Diam	2.7 cm
Ao Diam	2.5 cm
IVSd	0.7 cm
LVIDd	4.3 cm
LVPWd	0.9 cm
IVSs	1.1 cm
LVIDs	3.0 cm

### 2D & M-MODE CALCULATIONS

EDV(Teich)	83 ml
ESV(Teich)	34 ml
EF(Teich)	59 %
%FS	31 %
SV(Teich)	49 ml
LVd Mass	109.45 g
RWT	0.40

### MITRAL VALVE

MV E Vel	1.04 m/s
MV DecT	183 ms
MV Dec Slope	5.7 m/s <sup>2</sup>
MV A Vel	0.80 m/s
MV E/A Ratio	1.30
E'	0.15 m/s
E/E'	7.04

### AORTIC VALVE

### TRICUSPID VALVE

### PULMONARY VALVE

### COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- NORMAL LV SYSTOLIC FUNCTION (EF-63%)
- NO MR, NO AR, NO TR
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

### IMPRESSION:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- NORMAL LV SYSTOLIC FUNCTION (EF-63%)

DR. UDAY SHANKAR  
(NON-INVASIVE CARDIOLOGIST)

TECH. SIG

## Asarfi Hospital Limited

© AHL/D/0065/4021/Jan/23



Baramuri, P.O. - Bishunpur Polytechnic, Dhanbad - 828130 CIN : U85110JH2005PLC011673  
Branch Office : Dhaiya Khatal Road, ISM, Dhanbad. Regd. Office : Phularitand, Kharkharee, Dhanbad - 828130  
Ph.: 9234302735, 9234651512, 9234681514 Email : info@asarfihospital.com / www.asarfihospital.com

## RADIOLOGY REPORT

Reg. No.	44287	Ref. Dr.	SELF
Name	MR SANTOSH KR CHOUDHARY	Study	USG WHOLE ABDOMEN
Age & Sex	34Y/M	Rep Date	25.03.2023

### USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size, shape & echotexture. No obvious focal lesion is seen. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated.
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 11.8cm in size.
- KIDNEYS** : The right kidney measures 8.4 x 4.8cm. The left kidney measures 9.4 x 4.8cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. No focal lesion is seen.
- URINARY BLADDER** : Urinary bladder is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- PROSTATE** : Prostate is normal in size, shape & echotexture. It measures 3.5 x 3.3 x 2.8cm in size (volume – 17.5gram).
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.

**IMPRESSION** : • **No significant abnormality detected.**  
Clinical correlation is suggested.



**Dr. VAISHALI PATEL**  
MBBS, DNB (Radio-diagnosis)  
Consultant Radiologist



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Age / Sex : 34 Yrs / Male  
Doctor :  
Reg. No. : MAR23-44287  
Pat. Type : Mediwheel

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Test Name	Result	Flag	Unit	Reference Range
<b>Biochemistry</b>				
<b>Creatinine, Serum</b>				
Method : Enzymatic			Machine Name: XL640	
Creatinine, Serum	0.9		mg/dl	0.6-1.4
<b>Uric Acid, Serum</b>				
Method : Enzymatic			Machine Name: XL640	
Uric Acid, Serum	10.3	H	mg/dl	3.4-7.0
<b>Blood Urea Nitrogen (BUN)</b>				
Method : Calculated			Machine Name: XL640	
Blood Urea Nitrogen (BUN)	7.4		mg/dl	07-21
<b>Fasting Blood Glucose, Plasma</b>				
Method : GOD-POD			Machine Name: XL640	
Fasting Blood Glucose, Plasma	132.1	H	mg/dl	70-110
<b>LIPID PROFILE, SERUM</b>				
Method : Spectrophotometry			Machine Name: XL640	
Cholesterol, Total (CHOD/PAP)	142.0		mg/dl	0-200
Triglycerides (Enzymatic)	65.0		mg/dl	0-150
HDL Cholesterol (Enzymatic)	50.0		mg/dl	0-50
LDL Cholesterol (Calculated)	79.0		mg/dl	0-100
VLDL Cholesterol (Calculated)	13.0		mg/dl	0-30
<b>GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD</b>				
Method : HPLC / Nephelometry			Machine Name: BIO-RAD, D-10 / MISPA	
HbA1C	6.7	H	%	4.4-6.2
Estimated average glucose (eAG)	146		mg/dl	

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DR N N SINGH  
(PATHOLOGIST)

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Age / Sex : 34 Yrs / Male  
Doctor :  
Reg. No. : MAR23-44287  
Pat. Type : Mediwheel



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Test Name	Result	Flag	Unit	Reference Range
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Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.  
Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbA1C | FACTORS THAT AFFECT INTERPRETATION | MEASUREMENT | OF HBA1C RESULTS |

-----|-----|  
| Hemoglobin variants, elevated fetal | Any condition that shortens erythrocyte |  
| hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte |  
| modified derivatives of hemoglobin | age (e.g., recovery from acute blood loss, |  
| (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) |  
| with renal failure) can affect the | will falsely lower HbA1c test results |  
| accuracy of HbA1c measurements | regardless of the assay method used. Iron |  
| | deficiency anemia is associated with |  
| | higher HbA1c |

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Test Name	Result	Flag	Unit	Reference Range
<b>Liver Function Test (LFT)</b>				
Method: Spectrophotometry			Machine Name:	XL-640
Bilirubin Total (Diazo)	1.08		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.50	H	mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.52		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	20.1		U/L	7-50
SGOT (IFCC without PDP)	21.1		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	267.5		U/L	70-306
GGT (Enzymatic)	33.7		U/L	0-55
Protein Total (Biuret)	6.7		g/dl	6.4-8.3
Albumin (BCG)	4.3		g/dl	3.5-5.2
Globulin (Calculated)	2.4		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.7			0.8-2.0

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# ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130  
Ph. No.: 7808368888, 9297862282, 9294681514



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Test Name	Result	Flag	Unit	Reference Range
<b>Routine Urine Examination; Urine</b>				
<i>Method: Microscopic</i>				
Appearance	CLEAR	.		
Colour	STRAW	.		
Volume	30		ml.	
Protiens	NIL	.		
Glucose	NIL	.		
PH	6.5	.		
Specific Gravity	1.005	.		
Bilirubin	NEGATIVE	.		
Ketone Bodies	XX	.		
Bile Salts	XX	.		
Bile Pigments	XX	.		
Nitrite	NEGATIVE	.		
Pus Cells	1-2		/hpf.	
Epithelial Cells	2-3		/hpf.	
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN		/hpf.	
Crystals	NOT SEEN		/hpf.	
others	NOT SEEN	.		

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Test Name	Result	Flag	Unit	Reference Range
<b>Protein:Creatinine Ratio; Urine</b>				
<i>Method : Immunoturbidimetry, Spectrophotometry</i>				
Protein	22.0		mg/L	
Creatinine	150.0		mg/dl	
PCR	0.14		mg/g	0-0.5

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Test Name	Result	Flag	Unit	Reference Range
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## Haematology

### BLOOD GROUP, ABO & RH TYPING

Method : Agglutination

ABO GROUP	A	.		0-0
RH TYPING	POSITIVE	.		0-0


### ESR (Erythrocyte Sedimentaion Rate)

Method : Westergren

Machine Name: VES-MATIC 20

ESR	27	H	mm/hr	0-10
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Test Name	Result	Flag	Unit	Reference Range
<b>Complete Blood Count (CBC)</b>				
Method : Electronical Impedence				Machine Name: Sysmex 6 part
Hemoglobin	13.0		g/dl	13-18
Total Leukocyte Count (TLC)	4,400		/cu-mm	4000-11000
PCV	39.9	L	%	40-50
MCH	27.9		Pg	27-31
MCHC	32.5		g/dl	31.5-35.5
Red Cell Distribution Width (RDW)	15.0	H	%	11.6-14
Neutrophils	65		%	55-75
Lymphocytes	29		%	15-30
Eosinophils	04		%	1-6
Monocytes	02		%	2-10
Basophils	00		%	0-1
RBC Count	4.64		million/mm3	4.5-5.5
Mean Carpuscular Volume (MCV)	86.1		fL	83-101
Platelet Count	0.82	L	lakhs/cumm	1.5-4.5

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सबके लिए स्वास्थ्य

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(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishnupur Polytechnic, Dhanbad 828 130  
Ph. No.: 7808368888,9297862282,9234681514



Name : MR. SANTOSH KUMAR CHOUDHARY  
Age / Sex : 34 Yrs / Male  
Doctor :  
Reg. No. : MAR23-44287  
Pat. Type : Mediwheel

Collection Time : 25-03-2023 12:13 pm  
Receiving Time : 25-03-2023 12:21 pm  
Reporting Time : 25-03-2023 2:39 pm  
Publish Time : 25-03-2023 3:04 pm

Test Name	Result	Flag	Unit	Reference Range
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## Immunology and Serology

### THYROID PROFILE, TOTAL, SERUM

Method : ECLIA

Machine Name: Vitros ECI

T3, Total	1.24		ng/ml	0.8-2.0
T4, Total	7.72		µg/dL	5.10-14.10
TSH (Ultrasensitive)	2.66		mIU/mL	0.27-4.2

#### Interpretation:

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations.
2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction ( Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.

\*This Document is not valid for Medico-Legal purposes.

DR N N SINGH  
(PATHOLOGIST)

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#### Condition of Laboratory Testing & Reporting

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**24 HOUR EMERGENCY**

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Collection Time: 25-03-2023 12:13 pm  
Receiving Time: 25-03-2023 12:21 pm  
Reporting Time: 26-03-2023 5:10 pm  
Publish Time: 26-03-2023 5:16 pm

Test Name	Result	Flag	Unit	Reference Range
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### Interpretation:

HbA1c result is suggestive of at risk for Diabetes (Prediabetes)/ well controlled Diabetes in a known Diabetic.

Note: Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

### FACTORS THAT INTERFERE WITH HbA1C | FACTORS THAT AFFECT INTERPRETATION | MEASUREMENT | OF HBA1C RESULTS |

-----|-----|  
| Hemoglobin variants,elevated fetal | Any condition that shortens erythrocyte |  
| hemoglobin (HbF) and chemically | survival or decreases mean erythrocyte |  
| modified derivatives of hemoglobin | age (e.g.,recovery from acute blood loss, |  
| (e.g. carbamylated Hb in patients | hemolytic anemia, HbSS, HbCC, and HbSC) |  
| with renal failure) can affect the | will falsely lower HbA1c test results |  
| accuracy of HbA1c measurements | regardless of the assay method used.Iron |  
| | deficiency anemia is associated with |  
| | higher HbA1c |

### Glucose, PP

Method: GOD-POD

Glucose, PP	142.2	H	mg/dl	70-140
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Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine

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Age / Sex : 34 Yrs / Male  
Doctor :  
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Pat. Type : Mediwheel

Collection Time: 25-03-2023 12:13 pm  
Receiving Time : 25-03-2023 12:21 pm  
Reporting Time: 27-03-2023 10:58 am  
Publish Time : 27-03-2023 11:54 am

Test Name	Result	Flag	Unit	Reference Range
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### Microbiology

#### Culture & Sensitivity (Urine)

Method : vitek 2 compact

Machine Name: vitek 2 compact

Organism Isolated  
NO GROWTH OF ANY ORGANISM

#### Note:

In view of developing antibiotics resistance in india. It is advisalbe to use anitbiotics belonging to Group B & C only if the patient is resistant to antibiotics.

\* Insturment used Bact/Alert 3D 60 & vitek 2 compact.

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