

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.

EMPLOYEE DETAILS
MR. KUMAR RAVI
181707
HEAD CASHIER "E" II
DARANAGAR
15-12-1990
03-10-2021
21D181707100005060E

This letter of approval i recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from 01-10-2021 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 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.

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Healthcare Limited))

Chief General Manager HRM Department Bank of Baroda



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	
Lipid Profile	Lipid Profile	
Total Cholesterol	Total Cholesterol	
HDL	HDL	
LDL	LDL	
VLDL	VLDL	
Triglycerides	Triglycerides	
HDL / LDL ratio	HDL/LDL ratio	
Liver Profile	Liver Profile	
AST	AST	
ALT	ALT	
GGT	GGT	
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)	
ALP	ALP	
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin	
Kidney Profile	Kidney Profile	
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	
General Tests	General Tests	
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	

*

Ur. R.K. Verma M.B.S.S. Reg. No.-40019

INDRA DIAGNOSTIC CENTRE 49/19-B, Kamla Nehru Road Katra, Prayagraj

30 m 9

\$





Add: Kamla Nehru Road, Old Katra,Prayagraj Ph: 9235447965,0532-2548257 CIN : U85110DL2003PLC308206



Patient Name	: Mr.RAVI KUMAR - 181707	Registered On	: 03/Oct/2021 10:28:25
Age/Gender	: 30 Y 1 M 30 D /M	Collected	: 03/Oct/2021 10:55:25
UHID/MR NO	: ALDP.0000063721	Received	: 03/Oct/2021 11:57:37
Visit ID	: ALDP0196932122	Reported	: 03/Oct/2021 14:13:52
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Group (ABO & Rh typing) * , Blood				
Blood Group	В			
Rh (Anti-D)	POSITIVE			
COMPLETE BLOOD COUNT (CBC) * , Blood				
Haemoglobin	16.00	g/dl	13.5-17.5	PHOTOMETRIC
TLC (WBC)	7,300.00	/Cu mm	4000-10000	ELECTRONIC
Dia.				IMPEDANCE
DLC	C. C. C. C.			
Polymorphs (Neutrophils)	44.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	50.00	%	25-40	ELECTRONIC
Managetes	2.00	0/	2.5	
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosin <mark>ophils</mark>	3.00	%	1-6	ELECTRONIC
			and a service of the	IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	4.00	Mm for 1st hr.		
Corrected	-	Mm for 1st hr.	< 9	
PCV (HCT)	42.00	cc %	40-54	
Platelet count				
Platelet Count	1.71	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE
PDW (Platelet Distribution width)	16.90	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	59.60	%	35-60	ELECTRONIC
PCT (Platelet Hematocrit)	0.25	%	0.108-0.282	ELECTRONIC
MPV (Mean Platelet Volume)	14.70	fL	6.5-12.0	ELECTRONIC
RBC Count				
RBC Count	5.37	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE





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DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Blood Indices (MCV, MCH, MCHC)				
MCV	78.40	fl	80-100	CALCULATED PARAMETER
МСН	29.80	pg	28-35	CALCULATED PARAMETER
MCHC	38.10	%	30-38	CALCULATED PARAMETER
RDW-CV	13.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	49.90	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,212.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	219.00	/cu mm	40-440	



Dr. Akanksha Singh (MD Pathology)

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Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
Glucose Fasting Sample:Plasma	99.80	mg/dl	< 100 Normal 100-125 Pre-diabetes ≥ 126 Diabetes	GOD POD

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
c) I.G.T = Impared Glucose Tolerance.

Glucose PP Sample:Plasma After Meal	118.90	mg/dl	<140 Normal 140-199 Pre-diabetes	GOD POD
			>200 Diabetes	

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.
b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.
c) I.G.T = Impared Glucose Tolerance.



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UHID/MR NO	: ALDP.0000063721	Received	: 04/Oct/2021 10:50:36
Visit ID	: ALDP0196932122	Reported	: 04/Oct/2021 11:51:57
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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** . EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.00	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	31.00	mmol/mol/IFCC		

mg/dl

Interpretation:

NOTE:-

Estimated Average Glucose (eAG)

- eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.

96

• eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP	mmol/mol / IFCC Unit	eAG (mg/dl)	Degree of Glucose Control Unit
> 8	>63.9	>183	Action Suggested*
7-8	53.0 -63.9	154-183	Fair Control
< 7	<63.9	<154	Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

*High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc. **Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.

N.B. : Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name

Result

Unit

Method

Bio. Ref. Interval

<u>Clinical Implications:</u>

*Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.

*With optimal control, the HbA 1c moves toward normal levels.

*A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy

c. Alcohol toxicity d. Lead toxicity

*Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss

*Pregnancy d. chronic renal failure. Interfering Factors:

*Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.



Dr. Anupam Singh M.B.B.S,M.D.(Pathology)

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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea Nitrogen) * Sample:Serum	8.20	mg/dL	7.0-23.0	CALCULATED
Creatinine Sample:Serum	1.20	mg/dl	0.7-1.3	MODIFIED JAFFES
e-GFR (Estimated Glomerular Filtration Rate) Sample:Serum	76.00	ml/min/1.73m2	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid Sample:Serum	6.99	mg/dl	3.4-7.0	URICASE
L.F.T.(WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	33.70	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	51.10	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	22.80	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.90	gm/dl	6.2-8.0	BIRUET
Albumin	4.40	gm/dl	3.8-5.4	B.C.G.
Globulin	2.50	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.76	5117 01	1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	122.50	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	2.00	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.80	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	1.20	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	149.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	36.00	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	83	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal	CALCULATED
			130-159 Borderline High 160-189 High > 190 Very High	1
VLDL	29.92	mg/dl	10-33	CALCULATED
Triglycerides	149.60	mg/dl	< 150 Normal 150-199 Borderline High	GPO-PAP





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Result

Unit

Method

200-499 High >500 Very High

Bio. Ref. Interval



Dr. Akanksha Singh (MD Pathology)

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Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE EXAMINATION, ROUTINE *	, Urine			
Color	LIGHT YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (6.5)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent	DIPSTICK
		, č	10-40 (+)	
			40-200 (++)	
			200-500 (+++)	
			> 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+)	DIPSTICK
			0.5-1.0 (++)	
			1-2 (+++)	
Ketone	ABSENT		> 2 (++++)	DIPSTICK
Bile Salts	ABSENT			DIPSTICK
	ABSENT			
Bile Pigments Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:	ADJENT		and the second	
Epithelial cells	1-3/h.p.f			MICROSCOPIC
Due celle	0.2/h = f			EXAMINATION
Pus cells	0-2/h.p.f			MICROSCOPIC EXAMINATION
RBCs	ABSENT			MICROSCOPIC
NBCS	ADJENT			EXAMINATION
Cast	ABSENT			ENAMINATION
Crystals	ABSENT			MICROSCOPIC
	ADJENT			EXAMINATION
Others	ABSENT			
STOOL, ROUTINE EXAMINATION *	, Stool			
Color	YELLOWISH			
Consistency	SEMI SOLID			
, Reaction (PH)	Neutral (7.0)			
Mucus	ABSENT			
Blood	ABSENT			
	ABSENT			



Pus cells

ABSENT



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DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name		Result	Unit	Bio. Ref. Interval	Method
RBCs		ABSENT			
Ova		ABSENT			
Cysts		ABSENT			
Others		ABSENT			
SUGAR, FAS	STING STAGE * , Urine				
Sugar, Fasti	ng stage	ABSENT	gms%		
Interpretat	ion				
).5				
· · ·	5-1.0				
(++) 0					
(++++) > 2					
			1 × 2		
SUGA <mark>R,</mark> PP	STAGE * , Urine				
Sugar, PP S	tage	ABSENT			
				in the second second	
Interpretat	ion:				
-).5 gms%				
	5-1.0 gms%				
	gms%				
(++++) > 2	2 gms%				



Dr. Akanksha Singh (MD Pathology)

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Visit ID	: ALDP0196932122	Reported	: 04/Oct/2021 11:24:15
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	
THYROID PROFILE - TOTAL ** , Serum					
T3, Total (tri-iodothyronine)	125.68	ng/dl	84.61-201.7	CLIA	
T4, Total (Thyroxine)	9.60	ug/dl	3.2-12.6	CLIA	
TSH (Thyroid Stimulating Hormone)	1.63	µlU/mL	0.27 - 5.5	CLIA	
Interpretation:					

0.3-4.5

0.5-4.6

0.8-5.2	µIU/mL	Third Trime	ster
	μIU/mL	Adults	55-87 Years
0.7-27	μIU/mL	Premature	28-36 Week
2.3-13.2	µIU/mL	Cord Blood	> 37Week
0.7-64	µIU/mL	Child(21 wk	- 20 Yrs.)
1-39	µIU/mL	Child	0-4 Days
1.7-9.1	µIU/mL	Child	2-20 Week

µIU/mL

µIU/mL

First Trimester Second Trimester

1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.

2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis. 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.

4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.

5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.

7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.

8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.



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DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

<u>X-RAY REPORT</u> (300 mA COMPUTERISED UNIT SPOT FILM DEVICE) CHEST P-A VIEW

- Soft tissue shadow appears normal.
- Bony cage is normal.
- Diaphragmatic shadows are normal on both sides.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Pulmonary vascularity & distribution are normal.
- Pulmonary parenchyma did not reveal any significant lesion.

IMPRESSION :

• NO SIGNIFICANT RADIOLOGICAL ABNORMALITY SEEN ON PRESENT STUDY.





DR. ANIL KUMAR MD (Radiology)







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DEPARTMENT OF CARDIAC

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ECG / EKG *

1. Machnism, Rhythm	Sinus, Regular		
2. Atrial Rate	62	/mt	
3. Ventricular Rate	62	/mt	
4. P - Wave	Normal		
5. P R Interval	Normal		
6. Q R S Axis : R/S Ratio : Configuration :	Normal Normal Normal		
7. Q T c Interval	Normal		
8. S - T Segment	Normal		
9. T – Wave <u>FINAL IMPRESSION</u>	Normal		

ECG Within Normal Limits: Sinus Rhythm, Normal Axis.Please correlate clinically





Home Sample Collection

1800-419-0002





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Visit	ID	: ALDP0196932122	Reported	: 03/Oct/2021 11:21:37
Ref D	octor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

The liver is normal in size (13.6 cm), shape and echogenecity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

Gall bladder is well distended and is normal.

Portal vein and CBD are not dilated.

Pancreas is normal in size, shape and echogenecity.

Spleen is normal in size (9.5 cm), shape and echogenecity.

Right kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Right pelvicalyceal system is not dilated.

Right kidney measures : 8.3 x 3.6 cm

Left kidney is normal in size, shape and echogenecity. No focal lesion or calculus seen. Left pelvicalyceal system is not dilated.

Left kidney measures : 9.8 x 4.6 cm

Urinary bladder is normal in shape, outline and distension. Lumen is anechoic and no wall thickening seen. The prostate is normal in size (vol- 11.5 cc), shape and echopattern.

No free fluid is seen in the abdomen/pelvis.

High Resolution USG - No abnormal bowel wall thickening or bowel loop dilatation is seen. Ileocecal junction and cecum is seen normally. Appendix is not visualized. No mesenteric lymphadenopathy is seen. **IMPRESSION : No significant abnormality seen.**

Please correlate clinically

<u>Note</u> :- Impression is a professional opinion & not a diagnosis (Not for medico legal purpose). All modern machine / procedures have their limitations. If there is variance clinically this examination may be repeated or re-evaluated by other investigations. Discrepancies due to technical or typing errors should be reported for correction within seven days. No compensation liability stands.

*** End Of Report ***

(*) Test not done under NABL accredited Scope, (**) Test Performed at Chandan Speciality Lab.

DR. ANIL KUMAR MD (Radiology)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days

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Indra Daignostic Centre RAVI KUMAR, 03/10/21 10:47:03AM ADM 031021-104544AM LOGIC II 10 -

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Obstetrician & Gynaecologist Checkup ENT for Ear, Nose & Throat Checkup Eye Checkup **Dental Checkup** Diet advice by Dietician Final Expert Opinion by the Doctor

LIVER

1 L 13.66 cm 8.31 cm

3.64 cm 3 L

2 L

861

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