



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	Paras Kamboj
DATE OF BIRTH	25-08-1992
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	13-08-2022
BOOKING REFERENCE NO.	22S180014100023240S
SPOUSE DETAILS	
EMPLOYEE NAME	MS. MONIKA
EMPLOYEE EC NO.	180014
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	GURGAON,SECTOR 7
EMPLOYEE BIRTHDATE	04-03-1994

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 **10-08-2022** 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
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



Park Hospital

GROUP SUPER SPECIALITY HOSPITAL



ITDOSE INFOSYSTEMS PVT. LTD.

Diagnostics S. No. : LSHHI271442	MR No. : MR/22/005403
Patient Name : Mr. PARAS KAMBOJ	Doctor : Dr. ANIL SHARMA
Age/Sex : 30 YRS Sex : Male	Date & Time : 13-Aug-2022 10:51 AM
OPD/IPD : OPD	Sample Collection : 13-Aug-2022 11:07 AM
IPDNo :	Reporting Date/Time : 13-Aug-2022 01:57 PM
	Refer Doctor :

BIO-CHEMISTRY

Test Name	Status	Result	Biological Reference Interval	Unit
<u>BLOOD GLUCOSE FASTING</u>				
BLOOD SUGAR FASTING		91	70-110	mg/dl

HAEMATOLOGY

BLOOD GROUP And RH TYPE

BLOOD GROUP ABO & Rh "O" POSITIVE

CBC (COMPLETE BLOOD COUNT)

HAEMOGLOBIN		16.0	13.0-17.0	gm/dl
TLC (Total Leucocyte Count)		8000	4000-11000	/cumm
NEUTROPHILS		46	45-75	%
LYMPHOCYTES	H	50	20-45	%
EOSINOPHILS		01	0-06	%
MONOCYTES		03	02-10	%
BASOPHILS		00	0-2	%
RBC	H	5.58	3.8-5.5	Millions/cmm
PCV/HAEMATOCRIT	H	50.6	35-45	%
MCV		90.7	76-96	fl
MCH		28.7	27-31	Picogram
MCHC		31.6	30-35	gm/dl
RDW		12.6	11.5-14.5	%
PLATELETS		3.69	1.5-4.0	Lacs

BIO-CHEMISTRY

CREATININE SERUM

CREATININE 1.1 0.6-1.4 mg/dl

Thanks Sir



(This is only professional opinion and not the diagnosis, Please correlate clinically)



Park Hospital

GROUP SUPER SPECIALITY HOSPITAL



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	ReferDoctor :

HAEMATOLOGY

ESR

ESR 10 0-20 mm/1sthr

BIO-CHEMISTRY

LFT(LIVER FUNCTION TEST)

BILIRUBIN (TOTAL)	0.71	0.1-1.2	mg/dl
BILIRUBIN DIRECT	0.21	0.0-0.3	mg/dl
BILIRUBIN INDIRECT	0.50	0.1-0.9	mg/dl
SGOT (AST)	34	0-40	IU/L
SGPT (ALT)	H 77	0-40.0	IU/L
ALK.PHOSPHATASE	60	42.0-119	IU/L
TOTAL PROTEIN	6.5	6.0-8.0	gm/dl
ALBUMIN	4.0	3.20-5.0	gm/dl
GLOBULIN	2.5	2.30-3.80	gm/dl
A/G Ratio	1.6	1.0-1.60	

LIPID PROFILE

TOTAL CHOLESTEROL	207	0-250	mg/dL
TRIGLYCERIDE	132	0-161	mg/dL
HDL-CHOLESTEROL	46	35.0-85	mg/dL
LDL CHOLESTEROL	H 134.6	0-130	mg/dL
VLDL	26.5	0-40	mg/dL
LDL / HDL RATIO	2.92	0.0-3.55	

UREA

BLOOD UREA 22 13.0-45.0 mg/dl

URIC ACID, SERUM

URIC ACID 6.6 3.0-7.2 mg/dl

CLINICAL PATHOLOGY

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Diagnostics S. No.	: LSHHI271442	MR No.	: MR/22/005403
Patient Name	: Mr. PARAS KAMBOJ	Doctor	: Dr. ANIL SHARMA
Age/Sex	: 30 YRS Sex : Male	Date & Time	: 13-Aug-2022 10:51 AM
OPD/IPD	: OPD	Sample Collection	: 13-Aug-2022 11:07 AM
IPDNo	:	Reporting Date/Time	: 13-Aug-2022 01:57 PM
		ReferDoctor	:

URINE ROUTINE EXAMINATION

VOLUME	20	-	ml
COLOUR	P. YELLOW	-	
APPEARANCE	CLEAR	-	
URINE pH	6.0	5.5-8.5	
SPECIFIC GRAVITY	1.010	1.005-1.030	
KETONE	NEG	-	
URINE PROTEIN	NEG	-	
URINE SUGAR	NEG	-	
PUS CELLS	4-5	1-2	/HPF
RBC CELLS	0-1	-	/HPF
EPITHELIAL CELLS	1-2	2-3	/HPF
CRYSTALS	NIL	-	
CASTS	NIL	-	



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ITDOSE INFOSYSTEMS PVT. LTD.

Diagnostics S. No.	: LSHHI271442	MR No.	: MR/22/005403
Patient Name	: Mr. PARAS KAMBOJ	Doctor	: Dr. ANIL SHARMA
Age/Sex	: 30 YRS Sex : Male	Date & Time	: 13-Aug-2022 10:51 AM
OPD/IPD	: OPD	Sample Collection	: 13-Aug-2022 11:07 AM
IPDNo	:	Reporting Date/Time	: 14-Aug-2022 12:03 PM
		ReferDoctor	:

HAEMATOLOGY

HBA1C

HBA1C

5.9 %

< 6.0 Non diabetic

Diabetic :-

6-7 -good control.

7-8 weak control

> 8 poor control



LAB
TECHNICIAN

Bharat Jindal
Dr. BHARAT JINDAL
MD (PATHOLOGY)

Nishtha Kherra
Dr. NISHTHA KHERA
MBBS, MD (PATHOLOGY)

Pardip Kumar
Dr. PARDIP KUMAR
CONSULTANT(MICROBIOLOGY)

(This is only professional opinion and not the diagnosis, Please correlate clinically)



ECHOCARDIOGRAPHY REPORT

Date : 13-08-2022

O.P.D.NO. :

Patient name : MR. PARAS KAMBOJ

AGE/Sex: 30 Y/M

Dr. Name : SANJAY KUMAR GUPTA

2D ECHO

- Mitral value **Normal** Pulmonary value**Normal**...
- Pulmonary artery.....**Normal**..... Aortic valve... **Normal**.....
- Tricuspid valve.....**Normal**

2D RWMA

- ... **No RWMA** (Regional wall motion abnormality at rest).

COLOUR DOPPLER

- ...**No..** Significant vavular stenosis/ regurgitation

COMMENTS AND SUMMARY

- All cardiac chambers of...**Normal**..... Size and shape...**Concentric LVH** ...
- ...dilatation or hypertrophy
- ... **No RWMA** (regional wall motion abnormality) at rest.
- ...**No**...clot/ vegetation/ pericardial effusion
- LV**Normal LV function**.....systolic function
- ...**No**.... Significant valvular stenosis / regurgitation

FINAL IMPRESSION:

- EF AT REST55%.....



Dr. SANJAY KUMAR GUPTA
SENIOR CONSULTANT
MD (MED), DNB CARDIOLOGY
FNB (INTERVENTION) CARDIOLOGY

(This is only professional opinion and not the diagnosis, Please correlate clinically)



Prognosis Laboratories

National Reference Lab.: 515-516, Sector-19, D.D.A. Plotted Development, Dwarka, New Delhi-110075

☎ 8130192290 🌐 www.prlworld.com ✉ care@prlworld.com

Lab No.	012208140027	Age/Gender	30 YRS/MALE	Coll. On	14/Aug/2022 07:36AM
Name	Mr. PARAS KAMBOJ			Reg. On	14/Aug/2022
Ref. Dr.				Approved On	14/Aug/2022 09:17AM
Rpt. Centre	Self			Printed On	15/Aug/2022 01:50PM

Test Name	Value	Unit	Biological Reference Interval
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IMMUNOLOGY

TSH (Hypersensitive), serum
Method : ECLIA
1.37 uIU/ml 0.27 - 4.2

Please note the change in reference ranges

Interpretation:

1. Primary hyperthyroidism is accompanied by elevated serum FT3 and FT4 values alongwith depressed TSH levels.
2. Primary hypothyroidism is accompanied by depressed serum FT3 and FT4 values and elevated serum TSH levels.
3. High FT3 levels accompanied by normal FT4 levels and depressed TSH levels may be seen in T3 toxicosis.
4. Central hypothyroidism occurs due to pituitary or thalamic malfunction (secondary and tertiary hypothyroidism respectively). This relatively rare but important condition is indicated by presence of low serum FT3 and FT4 levels, in conjunction with TSH levels that are paradoxically either low/normal or are not elevated to levels that are expected.

The following ranges are recommended for pregnant females:

Trimester	Unit	Reference Range
First trimester	uIU/ml	0.1 - 2.5
Second trimester	uIU/ml	0.2 - 3.0
Third trimester	uIU/ml	0.3 - 3.0



*Disclaimer: This is an electronically validated report, if any discrepancy found should be confirmed by user.
This test was performed at Prognosis Laboratories, 515-516, Sector 19, Dwarka, New Delhi-110075.
*** End Of Report ***



Dr. Parvati Sadwani
MD (Chemistry)
Lab Director

Dr. Mukesh Sharma
MD (Microbiology)
Consultant Microbiologist

Dr. Deepak Sadwani
MD (Pathology)
Lab Director

Dr. Ashish Gautam
MD, PGDCC
Consultant Cardiologist

Dr. Moushmi Mukherjee
MBBS, MD (Pathology)
Consultant Pathologist

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Diagnostics S. No.	: LSHHI271442	MR No.	: MR/22/005403
Patient Name	: Mr. PARAS KAMBOJ	Doctor	: Dr. ANIL SHARMA
Age/Sex	: 30 YRS Sex : Male	Reporting Date/Time	: 13-Aug-2022 05:05 PM
Visit Date & Time	: 13-Aug-2022 10:51 AM		
OPD/IPD	: OPD	IPD No	:

ULTRASOUND

Liver is normal in size & echo pattern. There is no focal hepatic lesion present. CBD is normal in course & calibre & measures 3 mm at porta hepatis. There is no calculus defined in the CBD. Intra hepatic biliary radicals are normal. Gallbladder is normal in distension & contains no calculi.

Pancreas is normal in size, contour & echo pattern The pancreatic duct is not dilated. Pancreatic contour is regular & peri pancreatic planes are maintained.

Spleen is normal in size & echo pattern.

Both kidneys are normal in shape size contour & echo pattern. There is no hydronephrosis defined on either side. Both ureters are obscured by bowel gas.

Bladder is normal in distension & contains no calculi. There is no mass defined in the bladder.

There is no free fluid present in the abdomen.

Aorta & IVC are normal in course & calibre.

There is no mass defined in relation to Aorta or IVC.

There is no collection in right Iliac fossa. Local tenderness is not elicited in right iliac fossa.

There is no pleural effusion present on either side.



(This is only professional opinion and not the diagnosis, Please correlate clinically)

CHD City, Sector-45, G.T. Road, Karnal, Haryana - 132116 Ph.: 0184-7110000, 9643000000, 8222008811, 2

PARK GROUP OF HOSPITALS : West Delhi • South Delhi • Gurgaon • Karnal • Panipat • Hodal • Ambala • Behr