

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	POONAM KUMARI 39/F
DATE OF BIRTH	01-01-1983
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	24-03-2023
BOOKING REFERENCE NO.	22M73944100051418S
	SPOUSE DETAILS
EMPLOYEE NAME	MR. KUMAR MANISH
EMPLOYEE EC NO.	73944
EMPLOYEE DESIGNATION	BRANCH HEAD
EMPLOYEE PLACE OF WORK	CANSA
EMPLOYEE BIRTHDATE	01-03-1983

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 21-03-2023 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))



### आस्त सरकार



Poonam Kumari Date of Birth/DOB: 01/01/1983 Female/ FEMALE

Mobile No: 9403560230

7408 3630 7698 VID: 9162 4069 7400 4039

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण UNIQUE BENTIFICATION AUTHORITY OF INDIA

#### Address :

W/O Manish Kumar, House no-110, Panahar Ka Tola Imadapur, Imadapur, Panhar, Nalanda, Bihar - 801303



AL DURING BURNESS











Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website: www.savaikarhospital.com email: drsavalkar@gmail.com

Patient: MRS. POONAM KUMARI

UHID No: SHLC/28726

Ref.by: DR.MEGHA SAVAIKAR

Bill No: 8672

Test Done

Age/Sex:

40/Female

Date:

24.03.2023

Print Date: 24.03.2023 01:28:12 PM

### HAEMATOLOGY REPORT

ESR	26 mm/hr	0 - 20 mm/hr
COMPLETE BLOOD COUNT	Observed values	Ref. Range
NOTE: 1	30.4 %	40 to 54 %
нст	3.82 millions/cu mm	4.5 - 6.5 / cu mm
RBC COUNT	1,56,000 /cu mm	1,50,000 - 4,00,000 /cu mm
PLATELETS		0-1%
BASOPHILS	00 %	2 - 8 %
MONOCYTES	03 % 04 %	1 - 4 %
EOSINOPHILS	36 %	20 - 45 %
LYMPHOCYTES	55 %	40 - 70 %
STAB CELLS (IMMATURAL NEUTROPHILS) NEUTROPHILS		0 - 5 %
DIFFERENTIAL COUNT	6,400 Cells/cu mm	4,000-10,500 /cu mm
HAEMOGLOBIN (HB)  TOTAL WBC COUNT	10.2 g/dl	M: 13.5 - 19.5 g/dl, F: 11.5 - 16.5 g/dl
COMPLETE BLOOD COUNT	Observed values	Ref. Range

..... End of Report

CHECKED BY AB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

DR. USH.



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Patient: MRS. POONAM KUMARI

UHID No: SHLC/28726

Ref.by: DR.MEGHA SAVAIKAR

Bill No: 8672

Age/Sex: 40/Female

Date: 24.03.2023

Print Date: 24.03.2023 03:19:05 PM

Test Done Observed values Ref. Range

**FASTING BLOOD SUGAR** 

FASTING BLOOD SUGAR 80.1 mg/dl 60 to 110

**BLOOD SUGAR POST PRANDIAL** 

BLOOD SUGAR POST PRANDIAL 96.3 mg/dl 70 to 150 mg/dl

HBA1C

HBA1C 4.61 % Normal 0.0-6.0% Good Control

6.0-7.0% Fair Control 7.0-8.0% Poor Control 8.0-10.0%

Unsatisfactory c

Test Done Observed values Ref. Range

HBA1C

Mean Blood Glucose 86.81 mg% 100-140

. End of Report ..

CHECKED BY

LAB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

DR. USHA PRIOLKAR

OMC Description

GMC.Res. vs. 0613



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website: www.savaikarhospital.com email: drsavaikar@gmail.com

Patient: MRS. POONAM KUMARI

UHID No: SHLC/28726

DR.MEGHA SAVAIKAR Ref.by:

Bill No :

40/Female Age/Sex:

24.03.2023 Date:

Print Date: 24.03.2023 03:25:04 PM

Observed values **Test Done** 

Ref. Range

**BLOOD GROUP RH TYPING** 

'B' Rh Positive **BLOOD GROUP RH TYPING** 

#### BIOCHEMISTRY REPORT

<u>Test Done</u>	Observed values	Ref. Range
RENAL FUNCTION TEST		
Blood Urea	30.8 mg/dl	15.0 - 40.0
BUN	14.38 mg/dl	5.0 - 21.0
CREATININE	0.82 mg/dl	0.5 - 1.5
URIC ACID	3.61 mg/dl	Male: 3.5 - 7.2, Female: 2.5 - 6.2
LIPID PROFILE		
SERUM CHOLESTEROL	148.0 mg/dl	130 to 240 mg/dl
HDL CHOLESTEROL	49.3 mg/dl	M:35-80,F:42-88
SERUM TRIGLYCERIDES	83.6 mg/dl	0 to 200
VLDL CHOLESTEROL	16.72 mg/dl	0 - 35
LDL CHOLESTEROL	81.98 mg/dl	0 - 160
LDL/HDL CHOLESTROL (R)	1.66	0.0 - 4.0
TOTAL CHOL / HDL CHO	3.00	0.0 - 4.5

..... End of Report ..

CHECKED BY AB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR M.B.B.S., M.D.

Polher

neutrant Pathologist As DR. USHE PRIOLKAR O.(PATH.) GMC, Rc ...... 7613 Nursing Home, Pon



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Patient: MRS. POONAM KUMARI

UHID No: SHLC/28726

Ref.by: DR.MEGHA SAVAIKAR

Bill No: 8672

Age/Sex:

40/Female 24.03.2023

Date: 24

Print Date: 24.03.2023 03:28:07 PM

### **BIOCHEMISTRY REPORT**

Test Done LIVER FUNCTION TEST WITH PROTEINS	Observed values	Ref. Range
SGOT	23.0 U/L	5 - 40
SGPT BILIRUBIN	27.1 U/L	7 - 50
TOTAL DIRECT INDIRECT ALKALINE PHOSPHATASE SERUM PROTEIN	0.31 mg/dl 0.16 mg/dl 0.15 mg/dl 107.6 U/L	0.1 - 1.2 0.058 - 0.3 0.2 - 0.7 53 - 128
TOTAL PROTEINS ALBUMIN GLOBULIN A:G RATIO	6.01 gms % 3.32 gms % 2.69 gms % 1.23	6.0 - 8.5 3.2 - 5.5 2.1 - 3.3 1.5 - 2.1:1

..... End of Report

CHECKED BY

DR MRS USUA V DOLO

DR. MRS. USHA V. PRIOLKAR

DR. USH

GMC.R. 1813

ar Nursing Home, Pondi



Warkhandem, Ponda, Goa 403 401

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Patient: MRS. POONAM KUMARI

UHID No: SHLC/28726

DR.MEGHA SAVAIKAR Ref.by:

Bill No : 8672 Age/Sex:

40/Female

Date:

24.03.2023

Print Date: 24.03.2023 03:13:49 PM

### CLINICAL PATHOLOGY REPORT

**Test Done** Observed values

Ref. Range

**URINE ROUTINE** 

PHYSICAL EXAMINATION

Colour Pale Yellow Odour Fainty Aromatic Appearance Slightly Hazy

CHEMICAL EXAMINATION

Reaction 6.0

Specific Gravity 1.025

Deposit Absent Protein Absent Sugar Absent

Ketones

MICROSCOPIC EXAMINATION

Pus Cells 6-8 /hpf 3-4 /hpf

**Epithelial Cells** 

RBC's

Absent

nil /hpf

0 - 5 hpf

5.5 - 7.5

1.010 - 1.025

0 - 2hpf

..... End of Report

**CHECKED BY** 

AB TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

Willen-

M.B.B.S., M.D.

ensultant Philhologist

ar Nursing Home, Ponda



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Patient: MRS. POONAM KUMARI

UHID No: SHLC/28726

Ref.bv : DR. MEGHA SAVAIKAR

Bill No: 8672

Age/Sex:

40/Female

Date:

24.03.2023

Print Date: 24.03.2023 03:17:43 PM

### **CLINICAL PATHOLOGY REPORT**

**Test Done** 

Observed values

Ref. Range

STOOL REPORT

PHYSICAL EXAMINATION

Colour

Brownish Consistency Semi-solid Mucus Absent

Blood

Absent

CHEMICAL EXAMINATION

Reaction

6.0

Occult Blood

Negative

Reducing Substances

Absent

MICROSCOPIC EXAMINATION

**Epithelial Cells** 

1-2 /hpf

Pus Cells

2-3 /hpf

**RBCs** 

Nil /hpf

Ova

Absent

cysts

Absent

veg. forms

Present

End of Report

CHECKED BY

TECHNICIAN

DR. MRS. USHA V. PRIOLKAR

William-

M.B.B.S., M.D. POSHEANT PALLOGETSE A

DR. USHA

GMC.R41.No. 0513

Nursing Home, Pont



CID

: 2308318757

Name

: MS. POONAM KUMARI

Age / Gender

: 39 Years / Female

Consulting Dr.

: MEGHA SAVAIKAR

Reg. Location

: Margao, South Goa



Use a QR Code Scanner Application To Scan the Code

Collected Reported : 24-Mar-2023 / 13:51 : 24-Mar-2023 / 15:42

THYROID FUNCTION TEST

PARAMETER

RESULTS

BIOLOGICAL REF RANGE M

METHO

RR

PP

RR

TT

Total T3, Serum

1.5

1,3-3,1 nmol/L

ECLIA

NOTE: The unbound fraction of total T3 concentrations, free triiodothyronine (FT3) is metabolically active hence, more useful than measuring total T3 as altered levels of total T3 occur due to changes in T3 binding proteins, especially TBG as in case of normal pregnancy and steroid therapy.

Total T4, Serum

99.6

66-181 nmol/l

ECLIA

NOTE: T4 circulates in the blood as an equilibrium mixture of free and protein bound hormone. FT4 is a better indicator of thyroid hormone action than Total T4 because it is not affected by changes in Thyroxine Binding Globulin (TBG) or other Thyroxine Binding Proteins like in illness, drug intake or pregnancy.

sensitiveTSH, Serum

7,72

0.35-5.5 microIU/ml First Trimester:0.1-2.5 Second Trimester:0.2-3.0 Third Trimester:0.3-3.0 ECLIA

Page 1 of 2



CID

: 2308318757

Name

: MS. POONAM KUMARI

Age / Gender

: 39 Years / Female

Consulting Dr.

: MEGHA SAVAIKAR

Reg. Location

: Margao, South Goa

Authoriticity Check

Use a QR Code Scanner

Collected Reported

:24-Mar-2023 / 13:51 :24-Mar-2023 / 15:42 RR

EE

PP

00

RR

TT

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

1)TSH Values between high abnormal upto 15 microlUml should be correlated clinically or repeat the test with new sample as physiological factors

2)TSH values may be trasiently altered becuase of non thyroidal illness like severe infections, liver disease, renal and heart severe burns,

trauma and surgery etc. TSH FT4/T4 FT3/T3		FT3/T3	Interpretation	
High	Normal	Normal	Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-	
High	Low	Low	Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrost kinese inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism.	
Low	High	High	Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine make preparative related (hyperemesis gravidarum, hydatiform mole)	
Low	Normal	Normal	Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & doparnine), Non thyroidal illness.	
Low	Low	Low	Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.	
High	High	High	Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti- epileptics.	

Diurnal Variation: TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation: 19.7% (with in subject variation)

Reflex Tests: Anti thyroid Antibodies, USG Thyroid , TSF: receptor Antibody. Thyroglobulin, Calcitonin

#### Limitations:

- Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.
- 2. Patient samples may contain heterophilic antibodies that could react in immunoassays to give falsely elevated or depressed results. this assay is designed to minimize interference from heterophilic antibodies.

- O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
   Interpretation of the thyroid function tests, Dayan et al. THE LANCET. Vol. 357
- 3. Tietz , Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation: From principles to Practice-Callum G Fraser (AACC Press)

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Goa Lab, Margao \*\*\* End Of Report \*\*







bin Dags Dr.VII-EETH NAIR M.D. (PATH) Pathologist

Page 2 of 2



Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.; 2311031 Fax No. 2319870

website: www.savaikarhospital.com email: drsavaikar@gmail.com



#### **ECHOCARDIOGRAPHY REPORT**

Name: Poonam Kumari 40Y/F

Referred by:

Date: 24th March - 2023

PASP = + RAP mmHg

Gradient (mmHg): PG/MG = nil

Gradient (mmHg): PG/MG = normal

### M Mode Measurements:

IVSd (cms) = 0.998	LVsD (cms) = 2.26	
LVdD (cms) = 3.66	Aorta (cms) = 2.7	
PWd (cms) = 0.998	LA (cms) = 3.1	
EF (%) = 65%	RVD (cms) =	

A (m/s) = 0.72

Doppler Data:

Mitral Valve:

E(m/s) = 0.83

Regurgitation: nil

Stenosis: nil

Tricuspid Valve:

Regurgitation - nil

Stenosis: Nil Aortic Valve:

Peak velocity (m/s+) = 1.03

Regurgitation: nil

Stenosis: nil

Pulmonary valve:

Peak velocity (m/s)1.36

Regurgitation: nil

Stenosis: Nil

Regional Wall Motion Abnormality (RWMA): nil

#### **FINAL IMPRESSION:**

NORMAL SIZE ALL 4 CARDAC CHAMBERS

VALVES NORMAL

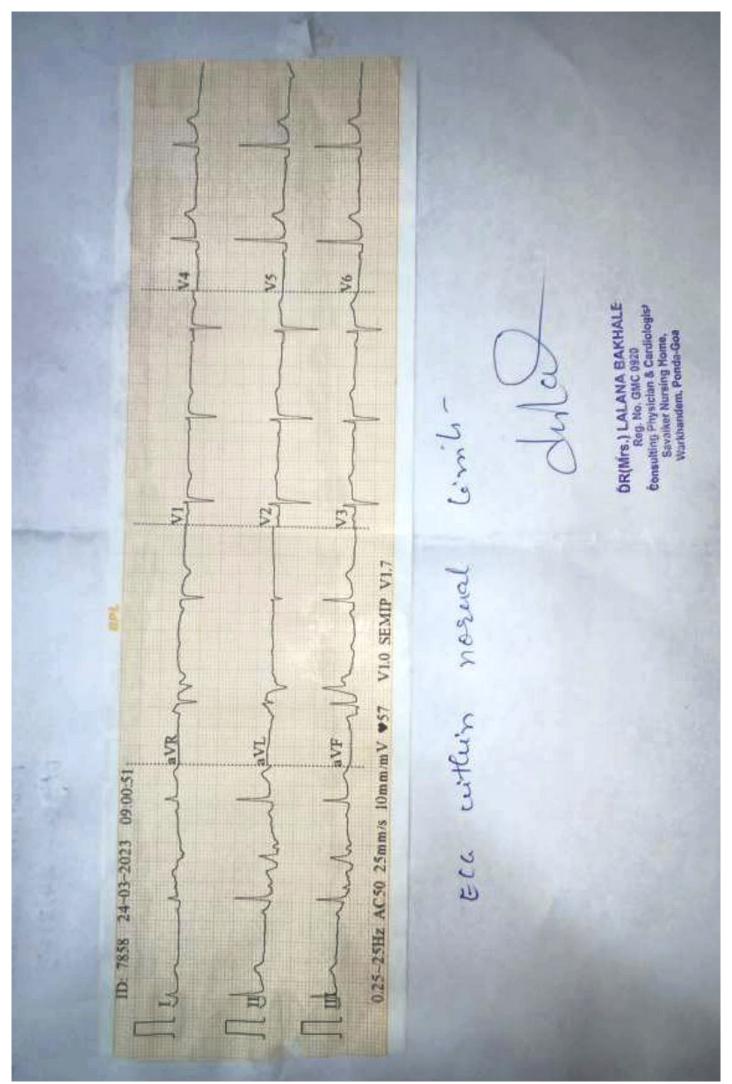
MVA -

NO RWMA, IAS/IVS INTACT.

NORMAL LV FUNCTION(EF= 65%)

NO CLOT/VEGETATION/PE

Dr. Sabyasachi Mukhopadhyay Consultant Cardiologist





### SHAHIUHR HOZBITHE & FUBBROZCOBA CEL

Warkhandem, Ponda, Goa 403 401

Hosp. Reg. No. T/0/412

Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website: www.savaikarhospital.com email: drsavaikar@gmail.com



NAME: POONAM KUMARI REF BY: HEALTH CHECK UP

DATE: 24/03/2023

### RADIOGRAPH OF THE CHEST-PA VIEW

The trachea is central The lung fields are clear Both CP angles are clear Cardiothoracic ratio is within normal limits The rib cage is normal Both the diaphragm contours are normal

With warm regards.

Dr. RESHMA DALVI M.D, D.N.B (RADIO-DIAGNOSIS)

Keshwar

Dr. Reshma Dalvi Reg. No. 0896



Warkhandem, Ponda, Goa 403 401

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website: www.savaikarhospital.com email: drsavaikar@gmail.com

Name: POONAM KUMARI 40/F

HEALTH CHECKUP

Date:24-03-2023

### USG ABDOMEN & PELVIS

Liver: normal in size, with normal echotexture. Hepatic veins are normal. No focal mass lesion noted. The Portal Vein is normal.

There is no dilatation of intra-hepatic biliary radicals. The CBD is normal in caliber.

Gall bladder: contracted. No calculi. No wall thickening. No peri-cholecystic fluid.

Spleen: normal in size, with normal echotexture. No focal mass lesion.

Pancreas: normal in size and echotexture. No focal mass noted. The pancreatic duct is normal. No calculi / calcification. No peri-pancreatic collection.

Right kidney: measures 10.6 cm. The cortical echogenicity is normal. Cortico-medullary differentiation is maintained. No dilatation of pelvicalyceal system noted. No calculi. No focal lesion.

Left kidney: measures 10.2 cm. The cortical echogenicity is normal. Cortico-medullary differentiation is maintained. No dilatation of pelvicalyceal system noted. No calculi. No focal lesion.

Urinary bladder: adequately distended. No calculi. No focal mass. No wall thickening. No e/o internal echoes.

The uterus is anteverted.

The endometrial echo is central, well-defined. Endometrial thickness measures 5 mm. Both the ovaries are normal in size and appearance. There is no adnexal mass.

The great vessels are normal.

No bowel wall thickening.

No intra-abdominal lymphadenopathy.

No free fluid in the abdominal cavity.

No basal pleural effusion.

No obvious mass lesion.

Impression:

No significant abnormality detected during present examination R HOS

Dr. Sarvest L. S. Dubhashi Couspling Radiologist

Thanks for the refere



Warkhandem, Ponda, Goa 403 401

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Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website : www.savaikarhospital.com email : drsavaikar@gmail.com

Name: POONAM KUMARI 40/F

HEALTH CHECKUP



Date: 24-03-2023

#### SONOMAMMOGRAPHY-BOTH BREASTS

#### Right breast:

There is no solid / cystic lesion in any quadrant of the right breast.

There is no axillary lymphadenopathy.

### Left breast:

There is no solid / cystic lesion in any quadrant of the left breast.

There is no axillary lymphadenopathy.

#### Impression:

#### Right breast:

No significant abnormality detected during present examination.

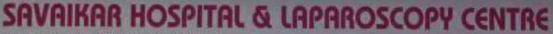
#### Left breast:

No significant abnormality detected during present examination.

Dr. Sarvesh L. S. Dubhashi Consulting Radiologist

Thanks for the reference





Warkhandem, Ponda, Goa 403 401

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Tel. No. 2312603, 2319202 OPD.: 2311031 Fax No. 2319870

website: www.savaikarhospital.com email: drsavaikar@gmail.com



Date: - 24.03.2023

NAME:- Poorcem	kumasi	
AGE:- 39		
SEX:- Female		
COMPANY NAME :-		

### **OPHTHALMIC EXAMINATION:**

VISION	DISTANT		NEAR	
VISUAL ACUITY	RIGHT.	LEFT	RIGHT	LEFT
WITH SPECTS				
WITHOUT SPECTS	616	616	MIG	oile
COLOUR VISION	NORMAI		MIG	MIE
SIGNS OF NIGHT BLINDNESS:- Yes (No)		PHORIAS :- Nil		

SIGNATURE OF THE EMPLOYER

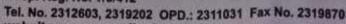
## Sawaikar Hospital & Laparoscopy Centre Warkhandem, Ponda - Goa 403 401. Hosp. Reg.No.: T/0/412 Phone: Hosp.: (0832) 2312603 Dr. S. V. Sawaikar M.B.B.S., M.D. (Delhi) (0832) 2319202 Obstetrician & Gynaecologist Res. :(0832) 2314913 Reg. No. 0834 GMC Timings: 10 a.m. to 12 30 p.m EX. CONSULTANT 5 p.m. to 6.30 p.m. CHRISTIAN MEDICAL COLLEGE & HOSPITAL, VELLORE AGE: - 40/F WANLESS MISSION HOSPITAL MEDICAL COLLEGE, MIRAJ Poonam Kumasi Date: 24.03.2023 · Married 15 ym. wt - 48 kg 42 P2 12 11 6 8 N. das. 120/80-Mentanel Listory - Nil Ling. -->13.3-23. Cycles. Normal. 2-3/30dy: 1/5 U/- CX health dish. healthy. IV. NG. W. Adnessue Gynaccological Check up

Dr. S. V. SAVANKAR M.B.E.S. M.D. (Delhi)

OBST & Gyn. Reg. No. 0834
Savaikar Hospital & Laparoscopy Centre
Ponda-Goa 403 401



Warkhandem, Ponda, Goa 403 401 Hosp. Reg. No. T/0/412



website: www.savaikarhospital.com email: drsavaikar@gmail.com



Poonan Kurau

thelese: walking shoul

Water Irdake: 3 Wes

Supplying: 7 shouls.

Stess &.

Hg0=40 weight = 48 neight-152

Edily morning: Almonds + Dates + Igless westel

Briakfast: - Veg Pora -> I Bourd

Ragi Dosa -> 2nos. Chuthey -> 1 Hosp.

hunch: - Resourn Ruie -> 1 Rout. Sprouts /Pannel /

peadal and - larp.

Agood > 1 cup

5:00/m:- ABC fuice or boronnet matters Veglulan : OR : Spoont Salad | Kala Chook gibolm:chaat - JBand.

### Savaikar Hospital Health Check Summary

Date :- 24.03.2023 Name :- Poonam Kumaxi Height - 152 Age :- 20 weight - 48 Sex : Female Address :- Chimbel Cont. No. :- 72196296 33 Past History : - - Ni . Obstetric History: and Pang 1, FTMD. Mentrual History: 4-5, Heary How Personal History: - Apprehite-good.

Steep + ADD steeps late. Stool - norual: 1 Family History :-Mother or asterna. Pather - healthy On Examination :cvs: Hs. normal. No munu R/S: Luy dear - 13.5. nowal CNS: No defeat P/A: copt no rendercies Spleen IN. P. No mass

Lab Investigations:- Hb 10.2.9m/dh TSH 7.72 poor nomal-
Significant Findings:-
Resting ECG: - norual
Ultrasound: -
X-Ray:- norual
Summary: TSH. marginally with
Advice: - Tab Zental Hs.
Refuel- Hs after-2miles du Gerl
Dr.(Mrs.) Lalana Bakhale  M.B.B.S. M.D.ALE  DR(Mrs.) LALANA M.D.ALE  Reg. No. GMC 0920  Consulting Physician & Cardiologist  Savaiker Nursing Home,  Savaiker Nursing Home,  Warkhandem, Ponda-Goa