

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	GEETIKA YADAV
DATE OF BIRTH	30-12-1994
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	31-10-2021
BOOKING REFERENCE NO.	21D84788100006062S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. ANURAG
EMPLOYEE EC NO.	84788
EMPLOYEE DESIGNATION	CREDIT
EMPLOYEE PLACE OF WORK	LUCKNOW, TRANSPORT NAGAR
EMPLOYEE BIRTHDATE	03-07-1989

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 **29-10-2021** 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'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


[Handwritten Signature]
Branch Manager
Bank of Baroda Transport Nagar

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



भारत सरकार
GOVERNMENT OF INDIA



गीतिका यादव

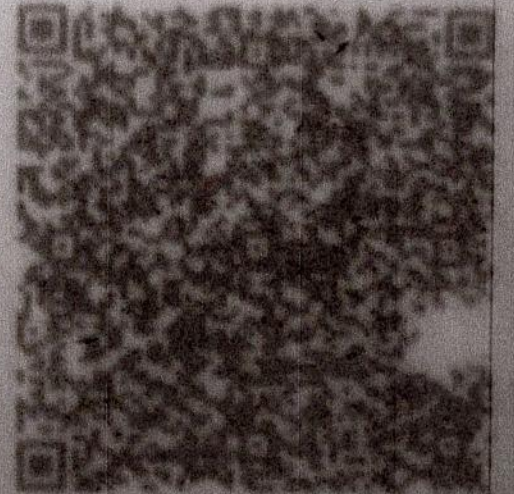
Geetika Yadav

जन्म तिथि / DOB: 30/12/1994

महिला / FEMALE

Geetika Yadav

5830 7559 8237



मेरा आधार, मेरी पहचान



Age / Gender: 27/Female

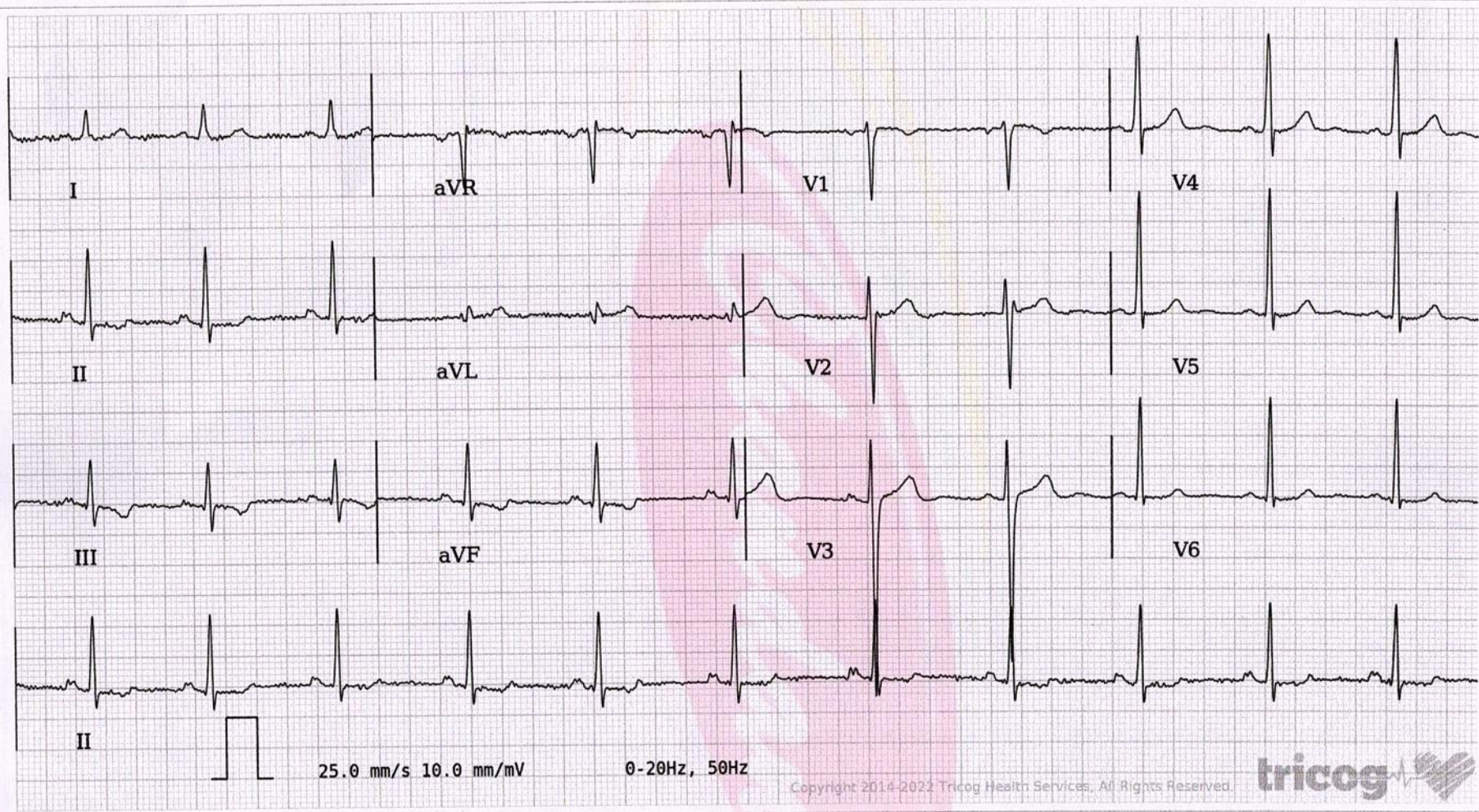
Date and Time: 2nd Jan 22 3:10 PM

Patient ID: CDCA0259572122

Patient Name: Mrs. GEETIKA YADAV C/O ANURAG YADAV



Customer Care No.: 0522-666600 E-mail: customercare_diagnostic@chandan.co.in Web: www.chandan.co.in



AR: 71 bpm VR: 71 bpm QRSD: 80 ms QT: 368 ms QTc: 399 ms PRI: 140 ms P-R-T: 58° 54° -25°

Normal Rhythm, Normal Axis, Abnormal T waves suggestive of Inferior Wall Ischemia. Please correlate initially.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

63382

REPORTED BY



Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.