

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	ANAND PRIYADARSHI			
DATE OF BIRTH	01-01-1992			
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	09-07-2022			
BOOKING REFERENCE NO.	22S126431100021608S			
	SPOUSE DETAILS			
EMPLOYEE NAME	MRS. BHARTI PREETI			
EMPLOYEE EC NO.	126431			
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A			
EMPLOYEE PLACE OF WORK	ALLAHABAD, KHULDABAD			
EMPLOYEE BIRTHDATE	03-08-1991			

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 **07-07-2022** 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))

भारत सरकार Government of India आनंद प्रियदर्शी Anand Priyadarshi जन्म तिथि / DOB : 01/11/1992 पुरुष / Male 7598 5058 0726 मेरा आधार, मेरी पहचान

Anand Prizadarshi yor medical check-up.



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

Patient Name	: Mr.ANAND PRIYADARSHI - 126431	Registered On	: 10/Jul/2022 09:12:13
Age/Gender	: 29 Y 8 M 7 D /M	Collected	: N/A
UHID/MR NO	: ALDP.0000098894	Received	: N/A
Visit ID	: ALDP0088262223	Reported	: 10/Jul/2022 11:42:35
Ref Doctor	: Dr.Mediwheel - Arcofemi Health Care Ltd.	Status	: Final Report

DEPARTMENT OF CARDIOLOGY-ECG

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ECG / EKG *

1. Machnism, Rhythm	Sinus, Regular	
2. Atrial Rate	66	/mt
3. Ventricular Rate	66	/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	Normal	

9. 1 – wa <u>FINAL IMPRESSION</u>

Sinus Rhythm, Normal Axis, with Short PR, Early Repolarization Pattern. This is a normal variant for Healthy Individuals.Please correlate clinically.





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Dationt No		126421	Deciste						
Patient Name Age/Gender	: Mr.ANAND PRIYADARSH : 29 Y 8 M 7 D /M	11 - 126431	Registered C Collected	0n : 10/Jul/2022 09 : 10/Jul/2022 09					
UHID/MR NO	: ALDP.0000098894		Received	: 10/Jul/2022 10					
Visit ID	: ALDP0088262223		Reported	: 10/Jul/2022 12					
Ref Doctor	: Dr.Mediwheel - Arcofem	ni Health Care Ltd.		: Final Report					
		DEPARTMENT	OF HAEMATO	LOGY					
	MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS								
Test Name		Result	Unit	Bio. Ref. Interval	Method				
Blood Group (A)	BO & Rh typing) * , Blood								
Blood Group		О							
Rh (Anti-D)		POSITIVE							
		TOSHIVE							
Complete Blood	I Count (CBC) * , Whole Blo	ood							
Haemoglobin		13.90	g/dl	1 Day- 14.5-22.5 g/dl					
				1 Wk- 13.5-19.5 g/dl					
				1 Mo- 10.0-18.0 g/dl					
				3-6 Mo- 9.5-13.5 g/dl					
				0.5-2 Yr- 10.5-13.5					
				g/dl 2-6 Yr- 11.5-15.5 g/dl					
				6-12 Yr- 11.5-15.5 g/d	I				
				12-18 Yr 13.0-16.0	1				
				g/dl					
				Male- 13.5-17.5 g/dl					
				Female- 12.0-15.5 g/d	I				
TLC (WBC)		7,600.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE				
DLC									
Polymorphs (Neu	utrophils)	54.00	%	55-70	ELECTRONIC IMPEDANCE				
Lymphocytes		36.00	%	25-40	ELECTRONIC IMPEDANCE				
Monocytes		4.00	%	3-5	ELECTRONIC IMPEDANCE				
Eosinophils		6.00	%	1-6	ELECTRONIC IMPEDANCE				
Basophils		0.00	%	<1	ELECTRONIC IMPEDANCE				
ESR		0.00	70						
Observed		16.00	Mm for 1st hr.						
Corrected		10.00	Mm for 1st hr.	< 0					
		-		-					
PCV (HCT)		36.00	cc %	40-54					
Platelet count									
Platelet Count		2.13	LACS/cu mm	1.5-4.0	ELECTRONIC IMPEDANCE/MICROSCOPI				
PDW (Platelet Di	stribution width)	16.60	fL	9-17	ELECTRONIC IMPEDANCE				
P-LCR (Platelet La	arge Cell Ratio)	47.10	%	35-60	ELECTRONIC IMPEDANCE				
PCT (Platelet Her	natocrit)	0.28	%	0.108-0.282	ELECTRONIC IMPEDANCE				
MPV (Mean Plate		13.00	fL	6.5-12.0	ELECTRONIC IMPEDANCE				
RBC Count									
RBC Count		4.48	Mill./cu mm	4.2-5.5	ELECTRONIC IMPEDANCE				

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Age/Gender	: 29 Y 8 M 7 D /M	Collected	: 10/Jul/2022 09:34:33
UHID/MR NO	: ALDP.0000098894	Received	: 10/Jul/2022 10:05:16
Visit ID	: ALDP0088262223	Reported	: 10/Jul/2022 12:28:56
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 Indices (MCV, MCH, MCHC)				
MCV	81.90	fl	80-100	CALCULATED PARAMETER
MCH	31.00	pg	28-35	CALCULATED PARAMETER
MCHC	37.90	%	30-38	CALCULATED PARAMETER
RDW-CV	13.80	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	52.80	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	4,104.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	456.00	/cu mm	40-440	



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Dr. Akanksha Singh (MD Pathology)

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Age/Gender	: 29 Y 8 M 7 D /M	Collected	: 10/Jul/2022 13:37:59
UHID/MR NO	: ALDP.0000098894	Received	: 10/Jul/2022 14:00:18
Visit ID	: ALDP0088262223	Reported	: 10/Jul/2022 14:25:17
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 * , Plasma				
Glucose Fasting	94.70	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 *	118.60	mg/dl	<140 Normal	GOD POD
Sample:Plasma After Meal			140-199 Pre-diabetes	
			>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.



Dr. Akanksha Singh (MD Pathology)

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Age/Gender	: 29 Y 8 M 7 D /M	Collected	: 10/Jul/2022 09:34:33
UHID/MR NO	: ALDP.0000098894	Received	: 11/Jul/2022 11:52:20
Visit ID	: ALDP0088262223	Reported	: 11/Jul/2022 14:50:08
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
GLYCOSYLATED HAEMOGLOBIN (HBA1C)	** , EDTA BLOOD			
Glycosylated Haemoglobin (HbA1c)	5.60	% NGSP		HPLC (NGSP)
Glycosylated Haemoglobin (Hb-A1c)	38.00	mmol/mol/IFCC		

Interpretation:

NOTE:-

- 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.
- 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

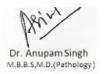
c. Alcohol toxicity d. Lead toxicity

*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.





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Visit ID Ref Doctor	: ALDP0088262223 : Dr.Mediwheel - Arcofemi H	Health Care Ltd.	Reported Status	: 10/Jul/2022 11:32:3 : Final Report	33
·	D		OF BIOCHEMIST	RY	
	MEDIWHEEL BAN	NK OF BARODA	A MALE & FEMA	LE BELOW 40 YRS	
Test Name		Result	Unit	Bio. Ref. Interval	Method
BUN (Blood Urea N Sample:Serum	litrogen) *	8.03	mg/dL	7.0-23.0	CALCULATED
Creatinine *		1.10	mg/dl	0.5-1.3	MODIFIED JAFFES
Sample:Serum e-GFR (Estimated G Rate) * Sample:Serum	Glomerular Filtration	91.00	ml/min/1.73m2	2 - 90-120 Normal - 60-89 Near Normal	CALCULATED
Uric Acid * Sample:Serum		6.30	mg/dl	3.4-7.0	URICASE
LFT (WITH GAMN	MA GT) * , Serum				
SGOT / Aspartate	Aminotransferase (AST)	39.50	U/L	< 35	IFCC WITHOUT P5P
-	minotransferase (ALT)	89.30	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)		26.50	IU/L	11-50	OPTIMIZED SZAZING
Protein		6.50	gm/dl	6.2-8.0	BIRUET
Albumin		4.30	gm/dl	3.8-5.4	B.C.G.
Globulin		2.20	gm/dl	1.8-3.6	
A:G Ratio		1.95		1.1-2.0	
Alkaline Phosphat	tase (Total)	133.90	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)		0.70	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	1	0.30	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	1	0.40	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (I	•				
Cholesterol (Total	1)	158.00	mg/dl	<200 Desirable 200-239 Borderline High > 240 High	CHOD-PAP
HDL Cholesterol (Good Cholesterol)	41.40	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (B		92	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optimal 130-159 Borderline High 160-189 High > 190 Very High	1
VLDL Tricksonidae		24.98	mg/dl	10-33	CALCULATED
Triglycerides		124.90	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

Test Name

Result

Unit

Method

200-499 High >500 Very High

Bio. Ref. Interval



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Dr. Akanksha Singh (MD Pathology)

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Age/Gender	: 29 Y 8 M 7 D /M	Collected	: 10/Jul/2022 13:41:04
UHID/MR NO	: ALDP.0000098894	Received	: 10/Jul/2022 14:00:18
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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
JRINE EXAMINATION, ROUTINE *	, Urine			
Color	PALE YELLOW			
Specific Gravity	1.010			
Reaction PH	Acidic (6.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+) 40-200 (++) 200-500 (+++) > 500 (++++)	DIPSTICK
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++) > 2 (++++)	DIPSTICK
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT			
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:				
Epithelial cells	1-2/h.p.f			MICROSCOPIC
				EXAMINATION
Pus cells	1-2/h.p.f			MICROSCOPIC
				EXAMINATION
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			

Urine Microscopy is done on centrifuged urine sediment.

SUGAR, FASTING STAGE *, Urine

Sugar, I	Sugar, Fasting stage		gms%
Interpr (+) (++)	retation: < 0.5 0.5-1.0		

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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	

(+++) 1-2 (++++) > 2

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

- (+) < 0.5 gms% (++) 0.5-1.0 gms% (+++) 1-2 gms%
- (++++) > 2 gms%



Dr. Akanksha Singh (MD Pathology)

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UHID/MR NO	: ALDP.0000098894	Received	: 11/Jul/2022 11:41:45
Visit ID	: ALDP0088262223	Reported	: 11/Jul/2022 12:19:26
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)	114.52	ng/dl	84.61-201.7	CLIA
T4, Total (Thyroxine)	9.36	ug/dl	3.2-12.6	CLIA
TSH (Thyroid Stimulating Hormone)	3.01	µIU/mL	0.27 - 5.5	CLIA
Interpretation:				
-		0.3-4.5 μIU/n	nL First Trimes	ter
		0.5-4.6 µIU/n	nL Second Trim	nester
		0.8-5.2 μIU/n	nL Third Trimes	ster
		0.5-8.9 μIU/n	nL Adults	55-87 Years
		0.7-27 μIU/n	nL Premature	28-36 Week
		2.3-13.2 μIU/n		
		0.7-64 μIU/n	nL Child(21 wk	- 20 Yrs.)
		1-39 μIU	/mL Child	0-4 Days
		1.7 - 9.1 μIU/n	nL Child	2-20 Week

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.

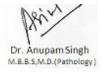
5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.

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) <u>CHEST P-A VIEW</u>

- Both lung field did not reveal any significant lesion.
- Costo-phrenic angles are bilaterally clear.
- Trachea is central in position.
- Cardiac size & contours are normal.
- Hilar shadows are normal.
- Soft tissue shadow appears normal.
- Bony cage is normal.

Please correlare clinically.



Nidhikant.

Dr Nidhikant (MBBS, DMRD, DNB)

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DEPARTMENT OF ULTRASOUND

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER) *

LIVER: - Normal in size (13.7 cm), shape and echogenicity. No focal lesion is seen. No intra hepatic biliary radicle dilation seen.

GALL BLADDER :- Well distended, walls are normal. No e/o calculus / focal mass lesion/ pericholecystic fluid.

CBD :- Normal in calibre at porta.

PORTAL VEIN: - Normal in calibre and colour uptake at porta.

PANCREAS: - Head is visualised, normal in size & echopattern. No e/o ductal dilatation or calcification. Rest of pancreas is obscured by bowel gas.

SPLEEN: - Normal in size (8.1 cm), shape and echogenicity.

RIGHT KIDNEY: - Normal in size (9.6 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

LEFT KIDNEY: - Normal in size (10.3 cm), shape and echogenicity. No focal lesion or calculus seen. Pelvicalyceal system is not dilated.

URINARY BLADDER :- Normal in shape, outline and distension. No e/o wall thickening / calculus.

PROSTATE :- Normal in size, shape and echo pattern.

Visualized bowel loops are normal in caliber. No para-aortic lymphadenopathy

No free fluid is seen in the abdomen/pelvis.

IMPRESSION : No significant abnormality seen.

Please correlate clinically

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.



Nidhikant.

Dr Nidhikant (MBBS, DMRD, DNB)

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

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bone Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition Velocity (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing * 365 Days Open *Facilities Available at Select Location