



Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SADHANA MAURYA - 186453 Registered On : 08/Apr/2023 09:08:13

 Age/Gender
 : 31 Y 11 M 6 D /F
 Collected
 : N/A

 UHID/MR NO
 : ALDP.0000091979
 Received
 : N/A

Visit ID : ALDP0007352324 Reported : 08/Apr/2023 18:15:56

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 81 /mt

3. Ventricular Rate 81 /mt

4. P - Wave Normal

5. P R Interval Normal

6. Q R S

Axis: Normal R/S Ratio: Normal Configuration: Normal

7. Q T c Interval Normal

8. S - T Segment Normal

9. T – Wave Normal

FINAL IMPRESSION

ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically











CIN: U85110DL2003PLC308206



Patient Name : Mrs.SADHANA MAURYA - 186453 Registered On : 08/Apr/2023 09:08:10 Age/Gender Collected : 31 Y 11 M 6 D /F : 08/Apr/2023 09:20:37 UHID/MR NO : ALDP.0000091979 Received : 08/Apr/2023 09:45:11 Visit ID : ALDP0007352324 Reported : 08/Apr/2023 13:31:11

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

Α

Rh (Anti-D)

POSITIVE

Complete Blood Count (CBC) *, Whole Blood

Haemoglobin 12.20 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/dl 12-18 Yr 13.0-16.0

g/dl

Male- 13.5-17.5 g/dl

Female- 12.0-15.5 g/dl

TLC (WBC)	5,400.00	/Cu mm	4000-10000	ELECTRONIC IMPEDANCE
DLC				
Polymorphs (Neutrophils)	61.00	%	55-70	ELECTRONIC IMPEDANCE
Lymphocytes	35.00	%	25-40	ELECTRONIC IMPEDANCE
Monocytes	3.00	%	3-5	ELECTRONIC IMPEDANCE
Eosinophils	1.00	%	1-6	ELECTRONIC IMPEDANCE
Basophils	0.00	%	<1	ELECTRONIC IMPEDANCE
ESR				
Observed	16.00	Mm for 1st hr.		
Corrected	, -	Mm for 1st hr.	< 20	
PCV (HCT)	33.00	%	40-54	
Platelet count				
Platelet Count	2.58	LACS/cu mm	1.5-4.0	ELECTRONIC
				IMPEDANCE/MICROSCOPIC
PDW (Platelet Distribution width)	16.00	fL	9-17	ELECTRONIC IMPEDANCE
P-LCR (Platelet Large Cell Ratio)	44.00	%	35-60	ELECTRONIC IMPEDANCE
PCT (Platelet Hematocrit)	0.32	%	0.108-0.282	ELECTRONIC IMPEDANCE
MPV (Mean Platelet Volume)	12.50	fL	6.5-12.0	ELECTRONIC IMPEDANCE
RBC Count				
RBC Count	4.39	Mill./cu mm	3.7-5.0	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	77.00	fl	80-100	CALCULATED PARAMETER
MCH	27.80	pg	28-35	CALCULATED PARAMETER
MCHC	36.10	%	30-38	CALCULATED PARAMETER
RDW-CV	12.90	%	11-16	ELECTRONIC IMPEDANCE
RDW-SD	45.90	fL	35-60	ELECTRONIC IMPEDANCE
Absolute Neutrophils Count	3,294.00	/cu mm	3000-7000	
Absolute Eosinophils Count (AEC)	54.00	/cu mm	40-440	

Dr. Akanksha Singh (MD Pathology)







CHANDAN DIAGNOSTIC CENTRE

Add: 49/19-B, Kamla Nehru Road, Katra, Prayagraj

Ph: 9235447965,0532-2548257 CIN: U85110DL2003PLC308206



Patient Name : Mrs.SADHANA MAURYA - 186453 Registered On : 08/Apr/2023 09:08:11 Age/Gender : 31 Y 11 M 6 D /F Collected : 08/Apr/2023 09:20:36 UHID/MR NO : ALDP.0000091979 Received : 08/Apr/2023 09:45:11 Visit ID : ALDP0007352324 Reported : 08/Apr/2023 11:58:41

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 83.30 mg/dl < 100 Normal GOD POD

100-125 Pre-diabetes

≥ 126 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)









CIN: U85110DL2003PLC308206



Patient Name : Mrs.SADHANA MAURYA - 186453 : 08/Apr/2023 09:08:12 Registered On Collected Age/Gender : 31 Y 11 M 6 D /F : 08/Apr/2023 09:20:36 UHID/MR NO : ALDP.0000091979 Received : 09/Apr/2023 11:54:01 Visit ID : ALDP0007352324 Reported : 09/Apr/2023 13:41:02

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)	5.00	% NGSP	HPLC (NGSP)
Glycosylated Haemoglobin (HbA1c)	31.00	mmol/mol/IFCC	
Estimated Average Glucose (eAG)	96	mg/dl	

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.

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

Clinical Implications:

- *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





^{**}Some danger of hypoglycemic reaction in Type 1diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.





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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

c. Alcohol toxicity d. Lead toxicity



Dr. Anupam Singh (MBBS MD Pathology)





^{*}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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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	9.20	mg/dL	7.0-23.0	CALCULATED
Creatinine * Sample:Serum	0.70	mg/dl	Serum 0.5-1.5 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid *	4.40	mg/dl	2.5-6.0	URICASE
Sample:Serum				
LFT (WITH GAMMA GT) * , Serum				
SGOT / Aspartate Aminotransferase (AST)	16.70	U/L	< 35	IFCC WITHOUT P5P
SGPT / Alanine Aminotransferase (ALT)	18.00	U/L	< 40	IFCC WITHOUT P5P
Gamma GT (GGT)	24.90	IU/L	11-50	OPTIMIZED SZAZING
Protein	6.60	gm/dl	6.2-8.0	BIRUET
Albumin	4.00	gm/dl	3.8-5.4	B.C.G.
Globulin	2.60	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.54		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	78.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.60	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.20	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.40	mg/dl	< 0.8	JENDRASSIK & GROF
LIPID PROFILE (MINI) * , Serum				
Cholesterol (Total)	217.00	mg/dl	<200 Desirable 200-239 Borderline Hig > 240 High	CHOD-PAP h
HDL Cholesterol (Good Cholesterol)	51.40	mg/dl	30-70	DIRECT ENZYMATIC
LDL Cholesterol (Bad Cholesterol)	131	mg/dl	< 100 Optimal 100-129 Nr. Optimal/Above Optima	CALCULATED
			130-159 Borderline Hig 160-189 High > 190 Very High	
VLDL	34.86	mg/dl	10-33	CALCULATED
Triglycerides	174.30	mg/dl	< 150 Normal 150-199 Borderline Hig 200-499 High	GPO-PAP h









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DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

>500 Very High



Dr. Akanksha Singh (MD Pathology)









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Patient Name : Mrs.SADHANA MAURYA - 186453 Registered On : 08/Apr/2023 09:08:11 Age/Gender Collected : 08/Apr/2023 10:52:25 : 31 Y 11 M 6 D /F UHID/MR NO : ALDP.0000091979 : 08/Apr/2023 11:30:28 Received Visit ID : ALDP0007352324 Reported : 08/Apr/2023 13:46:57

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 * , Uri	ine			
Color	PALE YELLOW			
Specific Gravity	1.030			
Reaction PH	Acidic (5.0)			DIPSTICK
Protein	ABSENT	mg %	< 10 Absent 10-40 (+)	DIPSTICK
			40-200 (++)	
			200-500 (+++) > 500 (++++)	
Sugar	ABSENT	gms%	< 0.5 (+) 0.5-1.0 (++) 1-2 (+++)	DIPSTICK
			> 2 (++++)	
Ketone	ABSENT	mg/dl	0.2-2.81	BIOCHEMISTRY
Bile Salts	ABSENT		and the same of	A STATE OF THE STA
Bile Pigments	ABSENT			
Urobilinogen(1:20 dilution)	ABSENT			
Microscopic Examination:			The state of the s	
Epithelial cells	3-5/h.p.f			MICROSCOPIC
	The second			EXAMINATION
Pus cells	1-3/h.p.f			
RBCs	ABSENT			MICROSCOPIC
				EXAMINATION
Cast	ABSENT			
Crystals	ABSENT			MICROSCOPIC
				EXAMINATION
Others	ABSENT			
Urine Microscopy is done on centrifuged u	rine sediment.			
SUGAR, FASTING STAGE * , Urine				

Sugar, Fasting stage **ABSENT** gms%

Interpretation:

(+)< 0.5

0.5 - 1.0(++)

(+++) 1-2









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Patient Name : Mrs.SADHANA MAURYA - 186453 Registered On Collected

: 08/Apr/2023 09:08:11 : 08/Apr/2023 10:52:25

Age/Gender

: 31 Y 11 M 6 D /F

Received

: 08/Apr/2023 11:30:28

UHID/MR NO Visit ID

: ALDP.0000091979 : ALDP0007352324

Reported

: 08/Apr/2023 13:46:57

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

(++++) > 2













CIN: U85110DL2003PLC308206



Patient Name : Mrs.SADHANA MAURYA - 186453 : 08/Apr/2023 09:08:12 Registered On Age/Gender : 31 Y 11 M 6 D /F Collected : 08/Apr/2023 09:20:36 UHID/MR NO : ALDP.0000091979 Received : 09/Apr/2023 10:20:58 Visit ID : 09/Apr/2023 11:36:59 : ALDP0007352324 Reported Ref Doctor : Dr.Mediwheel - Arcofemi Health Care Ltd. Status : Final Report

DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Result	Unit	Bio. Ref. Interva	l Method
116.32	ng/dl	84.61-201.7	CLIA
8.40	ug/dl	3.2-12.6	CLIA
1.22	μIU/mL	0.27 - 5.5	CLIA
	0.3-4.5 μIU/	mL First Trimes	ster
	0.5-4.6 µIU/	mL Second Trin	nester
	0.8-5.2 μIU/	mL Third Trime	ester
	0.5-8.9 µIU/	mL Adults	55-87 Years
	0.7-27 μIU/	mL Premature	28-36 Week
			> 37Week
			x - 20 Yrs.)
			0-4 Days
			2-20 Week
	8.40	8.40 ug/dl 1.22 μIU/mL 0.3-4.5 μIU/π 0.5-4.6 μIU/π 0.8-5.2 μIU/π 0.5-8.9 μIU/π 0.7-27 μIU/π 2.3-13.2 μIU/π 0.7-64 μIU/π 1-39 μIU/π	8.40 ug/dl 3.2-12.6 1.22 μIU/mL 0.27 - 5.5 0.3-4.5 μIU/mL First Trimes 0.5-4.6 μIU/mL Second Trin 0.8-5.2 μIU/mL Third Trime 0.5-8.9 μIU/mL Adults 0.7-27 μIU/mL Premature 2.3-13.2 μIU/mL Cord Blood 0.7-64 μIU/mL Child(21 wk) 1-39 μIU/mL Child

- 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.

Brin

Dr. Anupam Singh (MBBS MD Pathology)









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 : ALDP.0000091979
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Visit ID : ALDP0007352324 Reported : 08/Apr/2023 12:52:04

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

DEPARTMENT OF X-RAY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

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

- 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.

Widhirant (MBBS,DMRD,DNB)









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Visit ID : ALDP0007352324 Reported : 08/Apr/2023 10:48:10

Ref Doctor : 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) *

LIVER: - Normal in size (12.6 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, shape and echogenicity.

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

LEFT KIDNEY: - Normal in size, 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.

UTERUS: Anteverted, and is normal in size. No focal myometrial lesion seen. Endometrium is normal in thickness 9.8 mm.

OVARIES:- Bilateral ovaries are normal in size, shape and echogenicity. Right Ovary:-(23 x 15 mm), Left Ovary:-(25 x 17 mm)

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.

NE EXAMINATION, GLUCOSE PP, SUGAR, PP STAGE

Dr Nidhikant (MBBS, DMRD, DNB)

Widhirant.

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 *

*Facilities Available at Select Location









sanjeet singh <idcallahabad.corporate@gmail.com>

Fw: Health Check up Booking Confirmed Request(bobS32585), Package Code-PKG10000239, Beneficiary Code-49450

1 message

mrigendra kumar <mrig_kumar1@yahoo.co.in> To: idcallahabad.corporate@gmail.com

Sat, Apr 8, 2023 at 9:06 AM

Sent from Yahoo Mail for iPhone

Begin forwarded message:

On Friday, April 7, 2023, 6:18 PM, Mediwheel <wellness@mediwheel.in> wrote:



011-41195959 Email:wellness@mediwheel.in

Dear Sadhana maurya,

Please find the confirmation for following request.

Booking Date : 09-03-2023

Package Name : Full Body Health Checkup Female Below 40

Name of

City

Status

Diagnostic/Hospital Chandan Healthcare Limited

: Allahabad

Address of

Diagnostic/Hospital 55/23/1 Kamla Nehru Road, Old Katra

Contact Details : 9839574407

State : Uttar Pradesh

Pincode : 221503 Appointment Date: 08-04-2023

Confirmation : Confirmed

Preferred Time : 9:30am-12:30pm

Comment : APPOINTMENT TIME 8:00AM

Instructions to undergo Health Check:

- 1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
- 2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
- 3. Bring urine sample in a container if possible (containers are available at the Health Check
- 4. Please bring all your medical prescriptions and previous health medical records with you.
- 5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.



9953689569

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.

OF HEALTH CHECK UP BENEFICIARY SADHANA MAURYA
05-04-1990 31-03 - 2023
22M186453100054612S SPOUSE DETAILS
MR. KUMAR MRIGENDRA 186453 WEALTH EXECUTIVE ALLAHABAD,KRISHI MANDI 05-05-1985

This letter of approval / recommendation is valid if submitted along with copy of the Bons . I Baroda employee id card. This approval is valid from 29-03-2023 till 31-03-2023. The fist 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

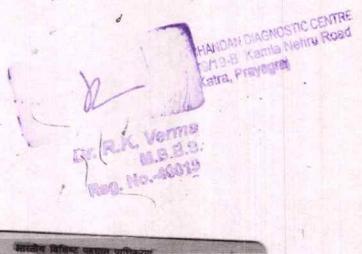
Yours faithfully,

Sd/-

Chief General Manager **HRM Department** Bank of Baroda

(Note: This is a computer generated letter, No Signature required. For any clanfication, please contact Mediwinest Archanic Healthcare Limited))







Smaurya