

**Health Check up Booking Request(bobE40812), Beneficiary Code-19549**

1 message

Mediwheel <wellness@mediwheel.in>  
To: primehospitaldewas@gmail.com  
Cc: customercare@mediwheel.in

Thu, Jun 15, 2023 at 2:50 PM

**011-41195959**  
Email:wellness@mediwheel.in

Dear **Prime Hospital and Research Centre,**  
City : Dewas . Address : Shop No- 105 A Civil Line Main Road Dewas,  
We have received the confirmation for the following booking .

**Name** : MR. VERMA SUNIL  
**Age** : 34  
**Gender** : Male  
**Package Name** : Medi-wheel Full Body Health Checkup Male Below 40  
**User Location** : M.G.ROAD,BAGLI, Madhya Pradesh,455227  
**Contact Details** : 8878290076  
**Booking Date** : 15-06-2023  
**Appointment Date** : 24-06-2023

Member Information			
Booked Member Name	Age	Gender	Cost(In INR)
MR. VERMA SUNIL	34	Male	Cashless
Total amount to be paid			Cashless

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

**Package Name** : Medi-wheel Full Body Health Checkup Male Below 40 - Includes (37)Tests

**Tests included in this Package** : Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Blood Sugar Postprandial, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Fasting Blood Sugar, Ultrasound Whole Abdomen , Glycosylated Haemoglobin (hba1c), Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Billirubin Total & Direct and Indirect, Albumin, Globulin

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LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. VERMA SUNIL
EC NO.	103220
DESIGNATION	DAFTARY
PLACE OF WORK	BAGLI
BIRTHDATE	01-08-1986
PROPOSED DATE OF HEALTH CHECKUP	24-06-2023
BOOKING REFERENCE NO.	23J103220100062060E

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 **16-06-2023** till **31-03-2024** 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 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
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
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
<b>General Tests</b>	<b>General Tests</b>
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

*Handwritten signature*



आयकर विभाग  
INCOME TAX DEPARTMENT

भारत सरकार  
GOVT. OF INDIA

SUNIL VERMA

RAMRATAN VERMA

01/08/1986

Permanent Account Number

AUEPV0051A

*Sunil Verma*



17032014

इस कार्ड के खोने / पाने पर कृपया सूचित करें / लौटाएं :  
आयकर पैन सेवा इकाई, एन एस डी एल  
5 वीं मंजिल, मन्त्री स्टर्लिंग, प्लॉट नं. 341, सर्वे नं. 997/8,  
मॉडल कॉलोनी, दीप बंगला चौक के पास,  
पुणे - 411 016

If this card is lost / someone's lost card is found,  
please inform / return to :  
Income Tax PAN Services Unit, NSDL  
5th floor, Mantri Sterling,  
Plot No. 341, Survey No. 997/8,  
Model Colony, Near Deep Bungalow Chowk,  
Pune - 411 016


Tel: 91-20-2721 8080, Fax: 91-20-2721 8081  
e-mail: [tininfo@nsdl.co.in](mailto:tininfo@nsdl.co.in)

*Sunil Verma*



भारत सरकार  
Government of India

नाम  
Sund Verma  
जन्म तिथि (DOB) : 08/1988  
लिंग: MALE



3927 3791 6987  
VID : 9143 0189 2369 5854  
मेरा आधार मेरी पहचान

भारतीय पहचान प्राधिकरण  
Unique Identification Authority of India

नाम  
S/O Kamran, C-25 KALANI BAGH, Dewas  
पिन कोड : 455001

Address:  
S/O Kamran, C-25 KALANI BAGH, Dewas,  
Dewas,  
Madhya Pradesh- 455001



3927 3791 6987  
VID : 9143 0189 2369 5854

*Sund Verma*

*Verma*

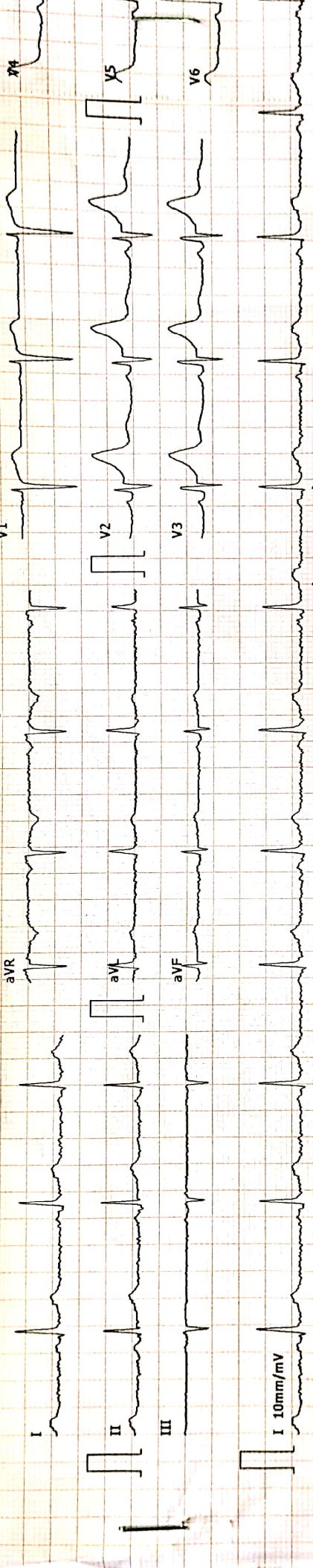
प्राईम हास्पिटल एण्ड रिसर्च सेंटर  
Reg. No.  
NH/2056/JUN-2016  
सिविल लाईसंस

24-6-2023

MR. SUMIL VERMA

Age 37 years

10mm/mV



5-35Hz

25mm/s

AC-ON 0.05-35Hz

PRIME HOSPITAL ICU

CE

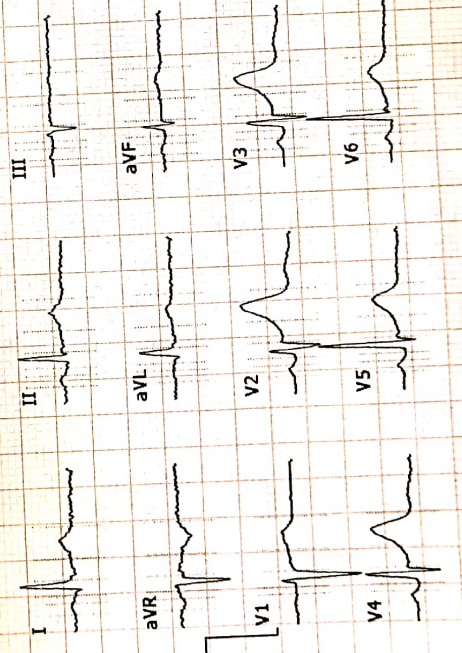
Arrow

2023-6-24 0:44:47 ID:00002844

ID Card:		Gender:	
Name:		Height(cm):	
Age:		BP(mmHg):	/
Weight(Kg):		HR:	bpm 65
		P-R:	ms 110
		Q-R-S:	ms 86
		QT/QTc:	ms 393/406
		P/QRS/T AXES:	deg 54/7/54
		RV5/SV1:	mV 1.17/0.91
		RV5+SV1:	mV 2.08

\*The result must be confirmed by doctor!  
Report Confirmed by: DR P K CHILLORIA

<< Conclusion >>  
801 Sinus Rhythm  
\*\* NORMAL ECG \*\*



25mm/s

Arrow

CE





देवास का नं. 1 स्वच्छ हॉस्पिटल *Better Diagnosis, Better Care*

# प्राइम हॉस्पिटल एण्ड रिसर्च सेन्टर

105-ए, सिविल लाईन, मेन रोड, देवास फोन: 07272 -400060, मो. 98272 65457

## ECHO REPORT

Date: 24/06/2023.....

Patient's Name : Mr SUNIL VERMA

AGE/SEX 37/M

Ref. Doctor : DR. PAWAN KUMAR CHILLORIA MBBS, MD.

M. Mode  
PARAMETERS

MEASUREMENT mm.

1. LV ID (Diastolic)	37
2. LVID (Systolic)	25
3. EF	61%
4. IVS	09
5. Posterior wall	09
6. Aorta	29
7. LA	34
8. RV	29

### 2-D ECHO

1. RWMA ARE NOT PRESENT AT REST
2. IAS / IVS intact.
3. No clot / vegetation/ NO Pericardial Effusion.

### DOPPLER

1. MV flow E > A, AV flow vP m/sec
2. NO MR/TR/AR
3. No significant gradient across any valves.

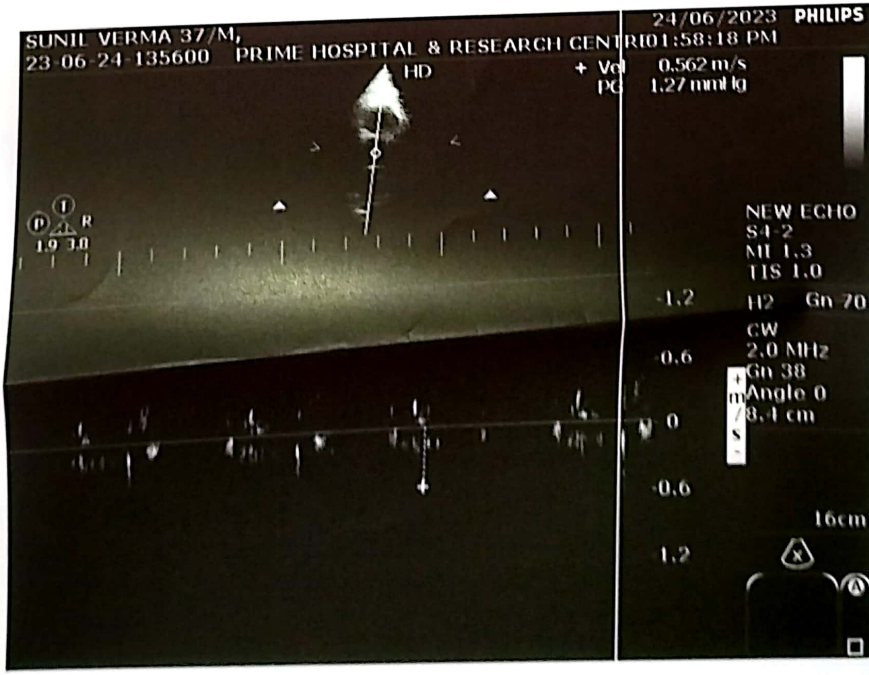
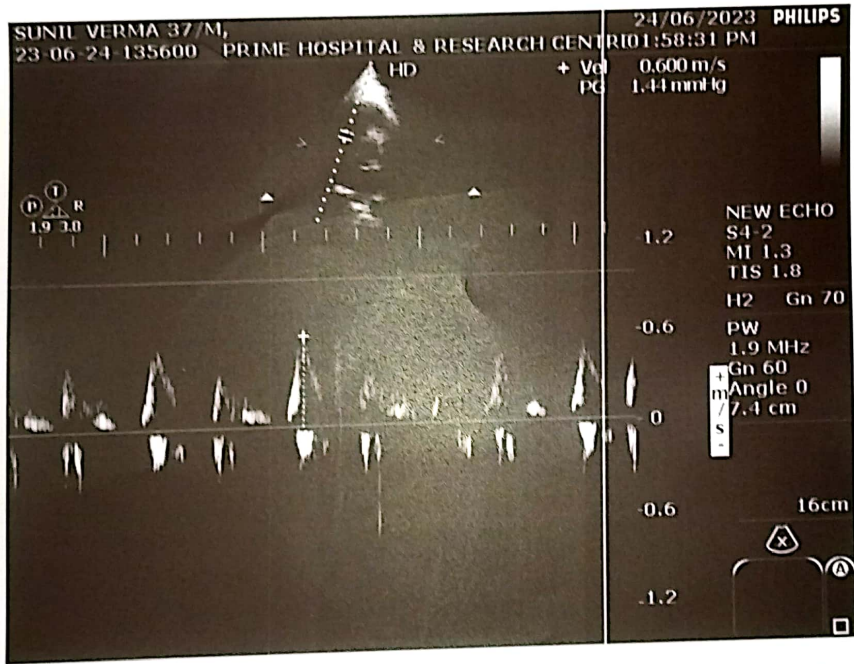
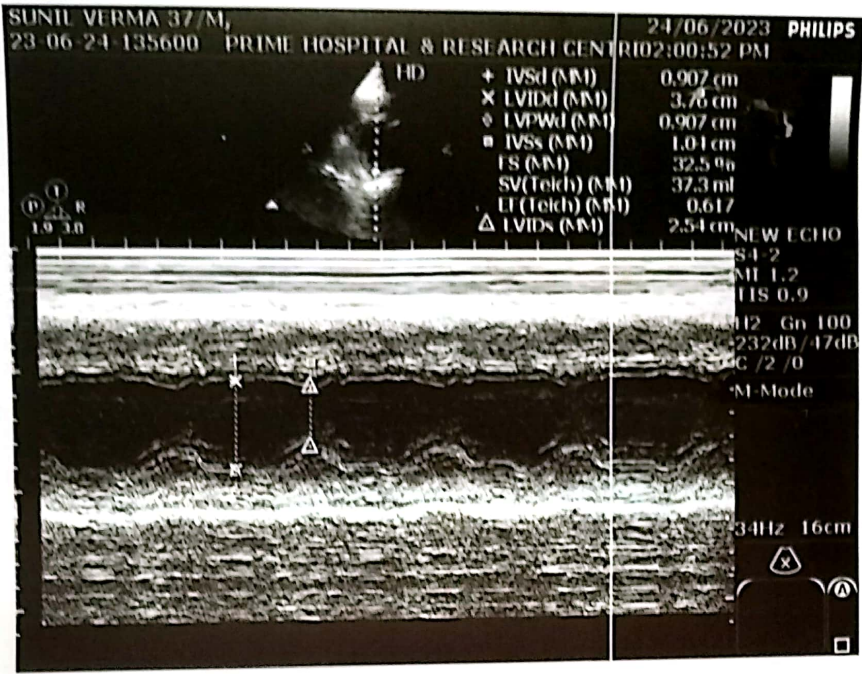
IMPRESSION : NORMAL ECHO STUDY  
LVEF- 61%

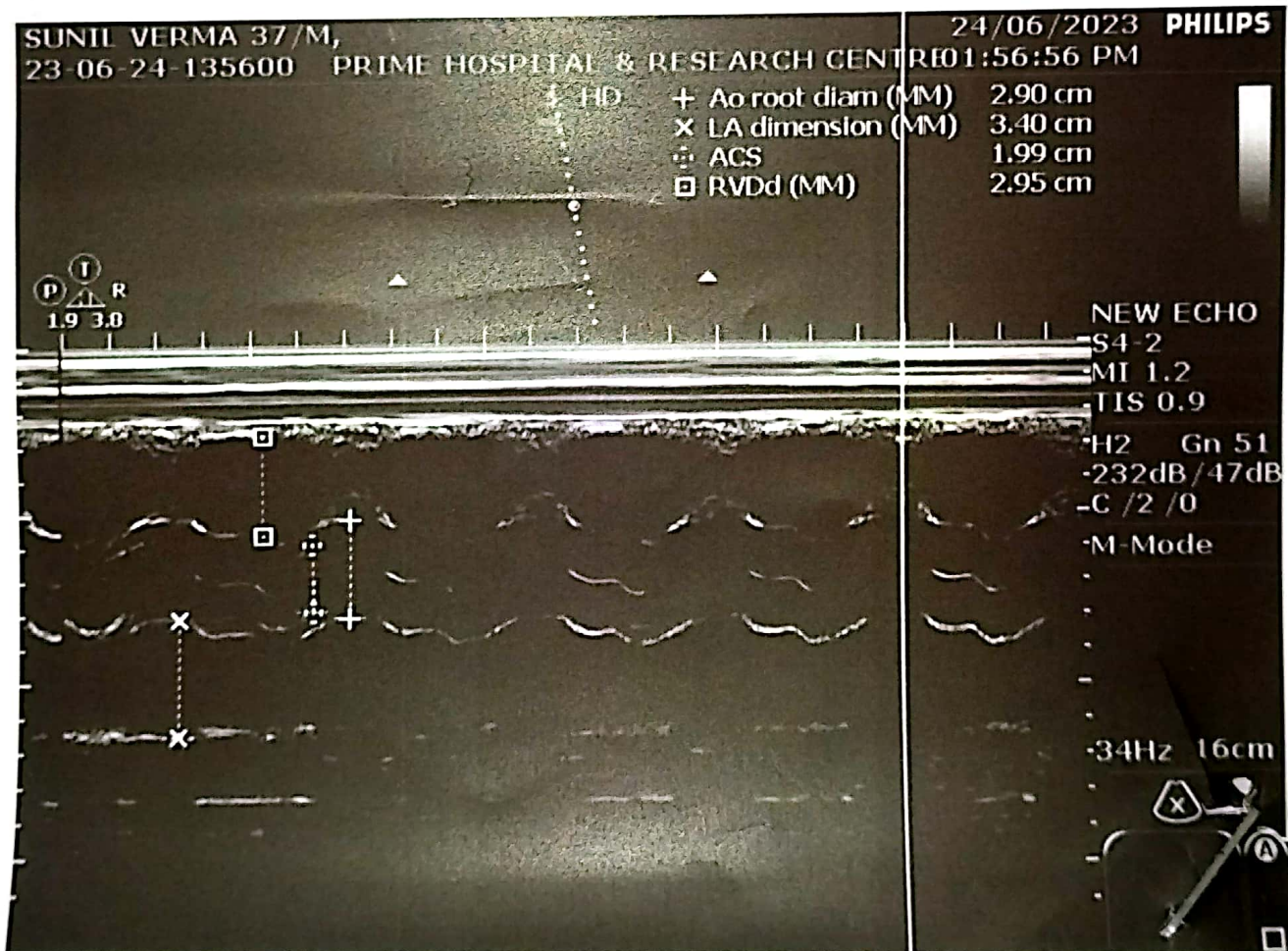
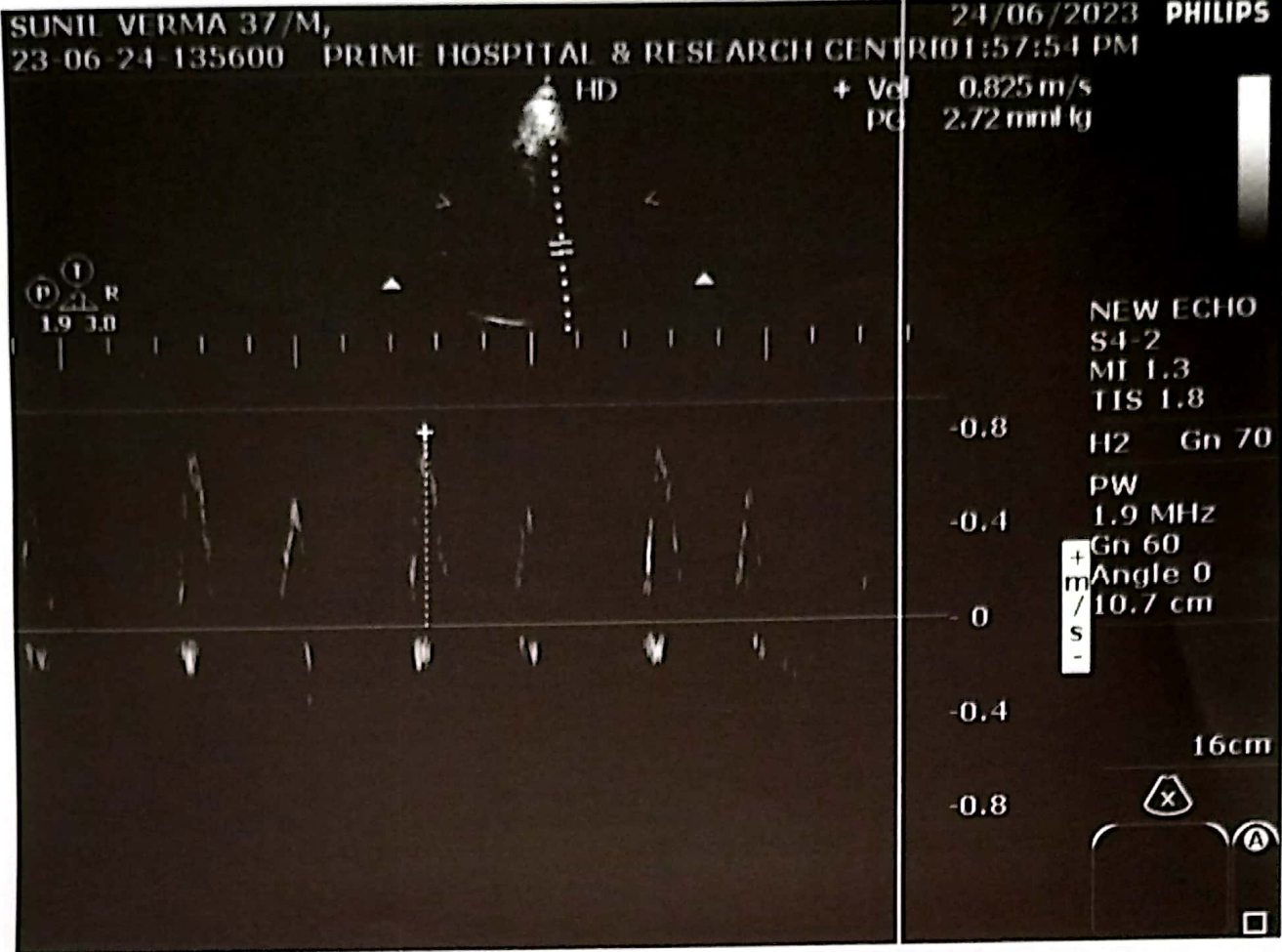
DR. PAWAN KUMAR CHILLORIA  
MBBS, MD.













देवास का नं. 1 स्वच्छ हॉस्पिटल

Better Diagnosis, Better Cure

# प्राइम हॉस्पिटल एण्ड रिसर्च सेन्टर

105-ए, सिविल लाईन, मेन रोड़, देवास फोन : 07272 -400060, मो. 9827265457

डॉ. पवन कुमार चिल्लौरिया

M.B.B.S., M.D. (Med.), FCCS, PGCDM

कन्सल्टिंग फिजिशियन, हृदय, श्वास एवं मधुमेह रोग विशेषज्ञ

Regl. No. MP-3899

Mob. 98272-65457

Refer by : .....

समय : दोप 12.00 से रात 9.00 बजे तक

TIMING : Daily 12.00 Noon to 9.00 p.m.

Name : Sunita Verma Age : 34 Resi : M Date : 24/6/2023

pt. came for medical check up  
BP. 130/80 No of chest pain/no SOB.

on examination found clinically  
Normal/Fit.

Pam



# प्राईम हॉस्पिटल एण्ड रिसर्च सेन्टर

105-ए, सिविल लाईन, मेन रोड़, देवास फोन : 07272 -400060, मो. 98272 65457

Date .....

Date :-10/05/2023

Patient's Name :- Mr. VERMA SUNIL

Age & Sex :- 34 Year / Male

Consultant Doctor :- DR. PAWAN KUMAR CHILLORIA

## Radiologist's Report

### X-RAY CHEST PA VIEW

- CHEST X-RAY PA VIEW TAKEN IN FULL INSPIRATION
- TRACHEA IN A CENTRAL POSITION
- CARDIOPHERENIC AND COSTOPHERENIC ANGLES ARE FREE
- CARDIAC SHADOW APPEARS NORMAL
- NO BONY ABNORMALITIES DETECTED
- PROMINENT BRONCHO VASCULAR MARKIN
- IMPRESSIV- NORMAL X-RAY STUDY





Patient's Name: MR. SUNIL VERMA  
Age & Sex : 36 Yrs., Male  
Referred by : DR. PAWAN CHILLORIA M.B.B.S.M.D.  
Consultant Dr. : DR. PAWAN CHILLORIA M.B.B.S.M.D.

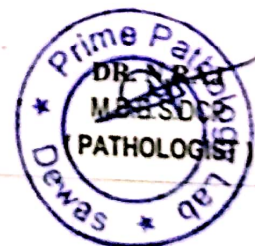
Ref.No. : 2324-0000350  
Date : 24/06/2023

## Haematology Examination



Test Name	Result	Normal Range
Hemoglobin	12.5 gm/dl	M: 13.5 - 18.0 F: 11-16
Total WBC Count	9,200 /cumm	4,000 - 11,000
Neutrophils	66 %	40 - 75
Lymphocytes	30 %	20 - 50
Monocytes	02 %	0 - 10
Eosinophils	02 %	1 - 6
Basophils	00 %	0 - 1
E.S.R. (Wintrob's Method)	16 mm	M: 1- 13 F: 1-20
P.C.V.	42.0 %	M: 40-52 F: 35-45
R.B.C. Count	4.18 mili/cumm	M: 4.5 - 6.5 F: 3.5-5.5
M.C.V.	100.48 fl.	74 - 96
M.C.H.	29.90 pg.	27 - 32
M.C.H.C	29.76 g/dl	30 - 35
Platelet Count	3.25 lacs/cumm	1.5 - 4.5
Blood Group	"B"	
Rh (D)	Positive	

PRIME  
HOSPITAL



All Investigations have technical and biological limitations. Please correlate clinically as well as with other investigative findings.  
A Review should be requested in case of any disparity. This Report is not valid for medicolegal purpose.



Patient's Name: MR. SUNIL VERMA  
Age & Sex : 36 Yrs. Male  
Referred by : DR. PAWAN CHILLORIA M.B.B.S.M.D.  
Consultant Dr. : DR. PAWAN CHILLORIA M.B.B.S.M.D.

Ref.No. : 2324-0000350  
Date : 27/06/2023



Test Name	Result	Normal Range
<b>Biochemical Examination</b>		
GLUCOSE RANDOM	103.0 mg/dl	upto 140
BLOOD UREA	25.0 mg/dl	15 - 40
S. CREATININE	0.84 mg/dl	0.5- 1.5
S. URIC ACID	5.2 mg/dl	M: 2.5-7 F: 1.5 - 6
GAMMA -GT	32 IU/L	M 8-61 F 5-36
<b>Lipid Profile</b>		
TOTAL LIPIDS	551.26	400-700
S. CHOLESTEROL	179.0 mg/dl	150-240
HDL CHOLESTEROL	42.0 mg/dl	30 - 70
S. TRIGLYCERIDES	189.0 mg/dl	< 150 Normal 150-200 Border line high > high
L.D.L. CHOLESTEROL	99.20 mg/dl	Low Risk < 100 , Normal Risk 139-160 >160 High Risk
V.L.D.L.	37.80 mg/dl	upto 40
RISK RATIO	4.26	Up to 4.97

PRIME HOSPITAL



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A Review should be requested in case of any disparity. This Report is not valid for medicolegal purpose.



Patient's Name: MR. SUNIL VERMA  
Age & Sex : 36 Yrs., Male  
Referred by : DR. PAWAN CHILLORIA M.B.B.S.M.D.  
Consultant Dr. : DR. PAWAN CHILLORIA M.B.B.S.M.D.

Ref.No. : 2324-0000350

Date : 24/06/2023

## Liver Profile



Test Name	Result	Normal Range
TOTAL BILIRUBIN	0.99 mg/dl	0.0 - 1.00
DIRECT BILIRUBIN	0.54 mg/dl	0.0 - 0.25
INDIRECT BILIRUBIN	0.45 mg/dl	0.0 - 0.75
S.G.O.T.	25.0 IU/L	upto 49
S.G.P.T.	31.0 IU/L	upto 40
ALKALINE PHOSPHATASE	179.0 IU/L	Ad. 100-250 Ch. 250-770
TOTAL PROTEINS	7.1 g/dl	6.2 - 8.3
ALBUMIN	4.2 g/dl	3.5 - 5.0
GLOBULIN	2.90 g/dl	2.3 - 3.5
A/G RATION	1.45:1	1.2-1.8:1
HbsAg	Non Reactive	

PRIME  
HOSPITAL



All Investigations have technical and biological limitations. Please correlate clinically as well as with other investigative findings.  
A Review should be requested in case of any disparity. This Report is not valid for medicolegal purpose.



Patient's Name: MR. SUNIL VERMA

Age & Sex : 36 Yrs., Male

Referred by : DR. PAWAN CHILLORIA M.B.B.S.M.D.

Consultant Dr. : DR. PAWAN CHILLORIA M.B.B.S.M.D.

Ref.No. : 2324-0000350

Date : 24/06/2023

## EXAMINATION OF URINE



### Physical Examination

Collection From : Lab  
Sample Collection : Random  
Quantity : 25 ml  
Colour : Pale Yellow  
Appearance : Clear  
Specific Gravity : 1.010

### Chemical Examination

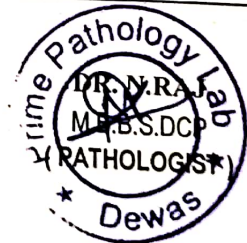
Reaction : Acidic  
Albumin : Nil  
Sugar : Nil  
Ketone Bodie : Absent  
Bile Salts : Absent  
Bile Pigment : Absent  
Occult Blood : Negative

### Microscopic Examination

(After Centrifugation at 2000 rpm. for 5 minuts)

Leucocytes(Pus Cells) : 2-3 /hpf  
Epithelial Cells : 1-2 /hpf  
Red Blood Cells : NIL /hpf  
Crystals : Absent  
Spermatozoa : Absent  
Parasites : Absent  
Cast : Nil  
Yeast Cells : Absent  
Bacteria : Nil

Trichomonas Vaginalls: Absent



All Investigations have technical and biological limitations. Please correlate clinically as well as with other investigative findings.  
A Review should be requested in case of any disparity. This Report is not valid for medicolegal purpose.





# KIRAN PATHOLOGY

9926164397

arvindparmar6446@gmail.com

20, Chamunda Complex, Opp. Sayaji Gate  
Near ICH, A. B. Road, Dewas



## TEST REPORT

Patient	: MRS. SUNILK VERMA	Reg. No	: 2108108995
Age/Sex	: 36 YRS MALE	Reg. Date	: 24/06/2023
Ref. By	: PAWAN KUMAR	Report Date	: 25/06/2023
Associate	: PRIME PATHOLOGY DEWAS	Laboratory	:

### HEMOGLOBIN A1 C ESTIMATION (EDTA BLOOD)

Parameter	Result	Unit	Biological Reference Interval
Hb A1C	5.8	% of Total Hb	>8.0 Action Suggested <7.0 Goal <6.0 Non-diabetic level

METHOD -BIO-RAD HPLC

Mean Blood Glucose	113.0	mg/dL	0 - 154
--------------------	-------	-------	---------

Calculated

Degree of Glucose Control Normal Range:

Poor Control >7.0% \*

Good Control 6.0 - 7.0 %\*\*Non-diabetic level < 6.0 %

\* High risk of developing long term complication such as retinopathy, nephropathy, neuropathy, cardiopathy, etc.

\* Some danger of hypoglycemic reaction in Type I diabetics.

\* Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1c levels in this area.

HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose (eAG).-

Trends in HbA1c are a better indicator of diabetic control than a solitary test.-

To estimate the eAG from the HbA1C value, the following equation is used:  $eAG(mg/dl) \approx 28.7 * A1c - 46.7$ -

HbA1C Estimation can get affected due to .1) Anaemia .2) Chronic renal failure .3) Vitamin A .4) Vitamin C .5) HbA1


c is falsely low in diabetics with hemolytic disease Fructosamine is recommended in these patients which indicates diabetes control over 15 days .6

) Interference of Haemoglobinopathies in HbA1c estimation .A) HbF > 5%, an alternate platform (Boronate affinity chromatography) is recommended for testing of HbA1c.B) Homozygous hemoglobinopathy is detected,

fructosamine is recommended for monitoring diabetic statusC) Heterozygous state detected (D10/ turbo is

corrected for HbS and HbC trait).Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

----- End Of Report -----

  
N. RAM  
M.B.B.S.DCP  
(PATHOLOGIST)

HOME COLLECTION FACILITY AVAILABLE



Scanned with OKEN Scanner



# KIRAN PATHOLOGY

9926164397

arvindparmar6446@gmail.com

20, Chamunda Complex, Opp. Sayaji Gate  
Near ICH, A. B. Road, Dewas



## TEST REPORT

Patient	: MR.SUNI VERMA	Reg. No	: 2109105611
Age/Sex	: 36Y / male	Reg. Date	: 24-06-2023
Ref. By	:PAWANKUMAR	Report Date	: 25 -06-2023
Associate	:PRIME PATHOLOGY DEWAS	Laboratory	:

### THYROID FUNCTION TEST SPECIMEN: SERUM

Parameter	Result	Unit	Biological Reference Interval
T3 (Triiodothyronine) <i>Method : By Chemiluminescen</i>	1.25	ng/mL	upto 2 years 1.17 to 2.39 (Infant) 2 - 12 years 1.05 to 2.07 (Children) 13- 21 years 0.86 to 1.92 (Adolscent) 0.6 to 1.80 (Adult) 1st Trimester 0.81-----1.90 2nd Tri Trimester 1.00-----2.60 3rd Trimester 1.00-----2.60
T4 (Thyroxine ) <i>Method : By Chemiluminesc</i>	5.26	mcg/dl	upto 2 years 6.00 to 19.9 (Infant) 2 - 12 years 5.50 to 15.10 (Children) 13- 21 years 5.50 to 14.10 (Adolscent) 4.5 to 14.10 (Adult)
TSH <i>Method : By Chemiluminescence</i>	2.36	μIU/ml	0.35 to 5.55 up to 1 years :0.5 - 10.0 During Pregnancy First Trimester : 0.26 - 2.66 Second Trimester : 0.55 - 2.73 Third Trimester : 0.43 - 2.91

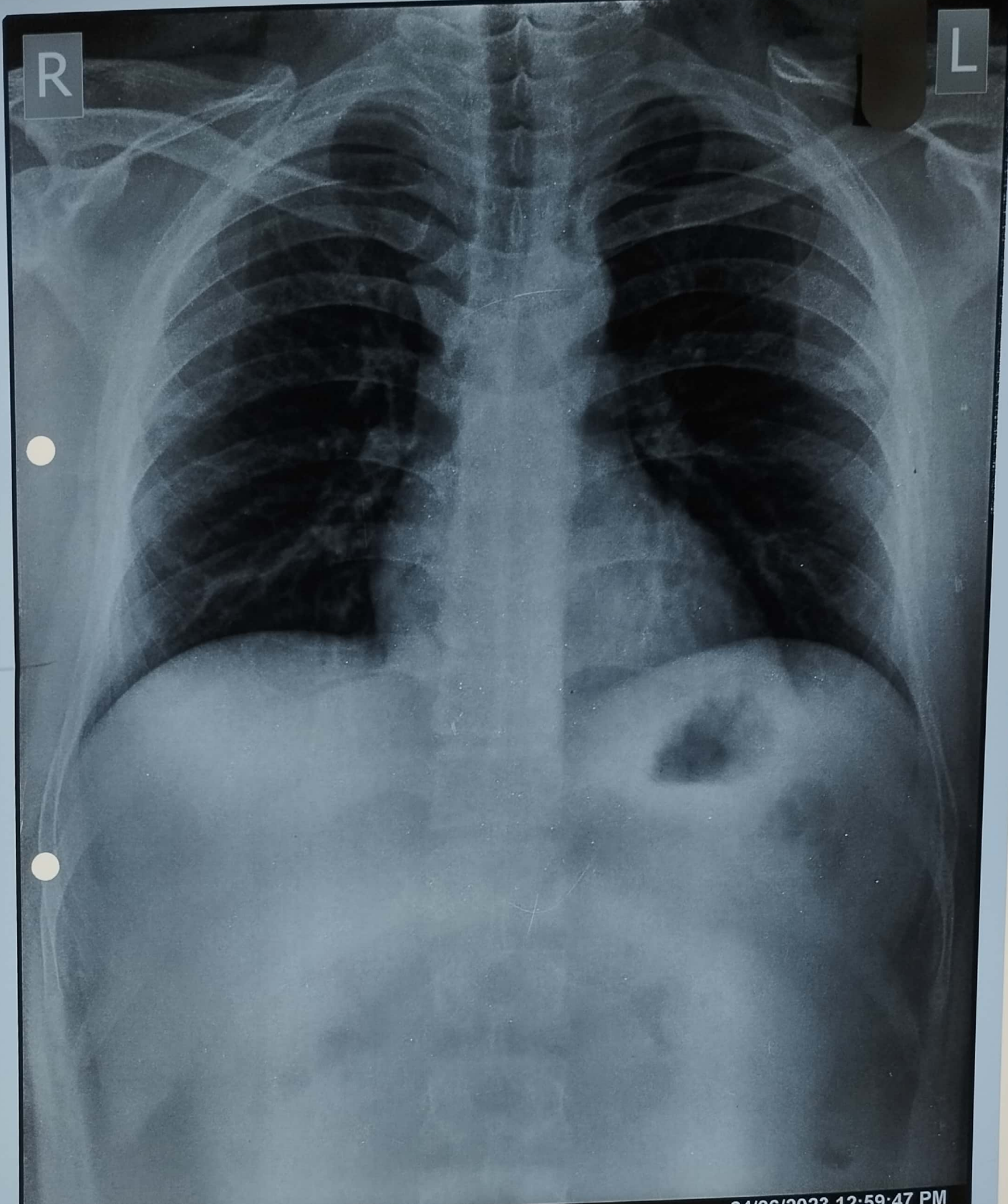
#### Interpretation :

TSH levels may be affected by acute illness and drugs like doapamine and gluco corticoids.Low or undetectable TSH is suggestive of Grave~s disease.  
TSH between 5.5 to 15.0 with normal T3 T4 indicates impaired thyroid hormone or subclinical hypothyroidism or normal T3 T4 wi this lightly low TSH suggests subclinical Hyperthyroidism.TSH suppression does not reflect severity of hyperthyroidism therefore , measurement of FT3 ,FT4 is important.FreeT3 is first hormone to increase in early Hyperthyroidism.Only TSH level can prove to be misleading in patients on treatment. Therefore FreeT3 , FreeT4 along with TSH should be checked.During pregnancy clinically T3 T4 can be high and TSH can be slightly low.

----- End Of Report -----

  
M.P.S.DCP  
(PATHOLOGIST)




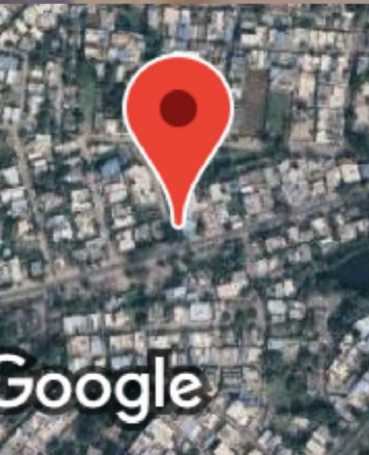


MR. SUNEEL VERMA 37Y/M 37 year(s) Male Chest  
DR.P.K. CHILLORIA (MBBS MD) Chest PA  
PRIME HOSPITAL & RESEARCH CENTRE , DEWAS (M.P.)

24/06/2023 12:59:47 PM



 GPS Map Camera



## Dewas, Madhya Pradesh, India

Makan 105, Gr Flr, WN 17, Main Rd, Civil Lines, Pachunkar Colony, Ram Nagar, Dewas, Madhya Pradesh 455001, India

Lat 22.964888°


Long 76.045027°

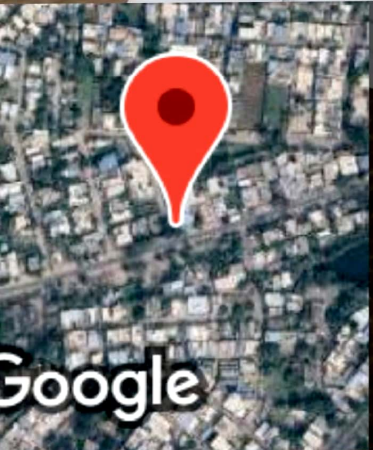
24/06/23 12:30 PM GMT +05:30



Scanned with OKEN Scanner



 GPS Map Camera



Google

# Dewas, Madhya Pradesh, India

Makan 105, Gr Flr, WN 17, Main Rd, Civil Lines, Pachunkar Colony, Ram Nagar, Dewas, Madhya Pradesh 455001, India

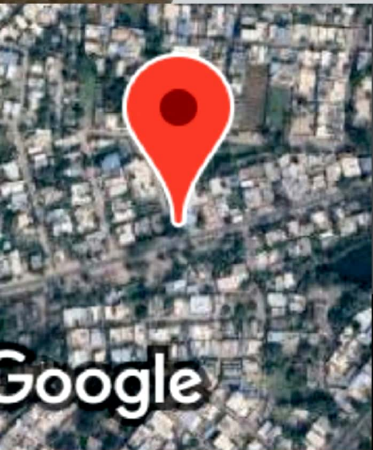
Lat 22.964858°

Long 76.045027°

24/06/23 02:10 PM GMT +05:30



 GPS Map Camera



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Makan 105, Gr Flr, WN 17, Main Rd, Civil Lines, Pachunkar Colony, Ram Nagar, Dewas, Madhya Pradesh 455001, India

Lat 22.96486°

Long 76.045031°

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