≪ Repiv all ∨ III Delete O Junk Block

# Fwd: Health Check up Booking Confirmed Request(bobS4554), Package Code-PKG10000241, Beneficiary Code-75621

\*\*सावधान: यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें. \*\*CAUTION: THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.

----- Forwarded message -----

From: Mediwheel <santosh@policywheel.com>

Date: Tue, 2 Nov 2021, 5:32 pm

Subject: Health Check up Booking Confirmed Request(bobS4554), Package Code-PKG10000241, Beneficiary Code-75621

To: sunny.bti.007@gmail.com <sunny.bti.007@gmail.com>

Cc: Mediwheel CC < customercare@mediwheel.in >, Mediwheel CC < mediwheelwellness@gmail.com >

011-41195959 Email:wellness@mediwheel.in

Dear Madhu Bala.

Please find the confirmation for following request.

**Booking Date** 

: 02-11-2021

Package Name

: Metro BOB Full Body Health Checkup Female Below 40

Name of

Diagnostic/Hospital: Pace Hospitals

Address of Diagnostic/Hospital: Plot No. 23 Kedar Towers, Huda Techno Enclave, Madhapur

**Contact Details** 

: 7288887052

City

: Hyderabad

State

: Telangana

Pincode

: 500081

Appointment Date: 05-11-2021

Confirmation

Status

: Confirmed

**Preferred Time** 

: 10:00:AM

Comment

APPOINTMENT TIME 09:00 AM ( PLEASE BRING YOUR HRM

LETTER ,BOB ID CARD and ID PROOF)

#### 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.
- 2. It is advisable not to undergo any Health Check during menstrual cycle.

Request you to reach half an hour before the scheduled time.

In case of further assistance, Please reach out to Team Mediwheel.

© 2021-2022 . Arcofemi Healthcare Limited

Reply Forward



# ਭਾਰਤ ਸਰਕਾਰ GOVERNMENT OF INDIA



ਮਧੂ ਬਾਲਾ Madhu Bala ਜਨਮ ਦਾ ਸਾਲ / Year of Birth : 1995 ਇਸਤਰੀ / Female



9193 3525 7278

ਆਧਾਰ - ਆਮ ਆਦਮੀ ਦਾ ਅਧਿਕਾਰ



# ਭਾਰਤੀ ਵਿਲੱਖਣ ਪਛਾਣ ਅਥਾਰਿਟੀ UNIQUE IDENTIFICATION AUTHORITY OF INDIA

ਪਤਾ:

D/O ਮਹਿੰਦਰ ਪਾਲ, ਬੰਤਾਬਾਦ, ਵਾਰਡ ੧੧, ਗਿੱਦੜਬਾਹਾ, ਮੁਕਤਸਰ, ਪੰਜਾਬ, 152101 Address:

D/O Mahinder Pal, BENTABAD, WARD 11, Giddarbaha, Muktsar, Punjab, 152101



1947 1800 180 1947



help@uidai.gov.in



www.uidai.gov.in

P.O. Box No.1947. Bengaluru-560 001



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	MADHU BALA
DATE OF BIRTH	26-08-1995
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	05-11-2021
BOOKING REFERENCE NO.	21D178037100006190S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. KUMAR BALDEV
EMPLOYEE EC NO.	178037
EMPLOYEE DESIGNATION	DR SITE OPERATIONS
EMPLOYEE PLACE OF WORK	HYDERABAD, DISASTER RECOVERY SI
EMPLOYEE BIRTHDATE	10-10-1990

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 **02-11-2021** 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

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



Emp No

Med/Wap No: 5124448

S.No Service Name

#### PACE HOSPITALS

Hitech City: Beside Avasa Hotel, Pillar No. 18, Hyderabad -Miyapur: Beside South India Shoping, Madinaguda, Hyderal E:info@pacehospitals.in W:pacehospital.com

**Corporate OP Bill** 

Pt Name : Mrs.MADHU BALA

: BIL107325 Bill No

: 05-Nov-2021 Bill Dt

UMR NO

: UMR63444 : 26Y(s)/Female Age/Sex

Consultant: Dr.Dr.MARKANDEYULU AKURUTHI

Organization: MediWheel

Ref No : 5124448051121

**Emp Name** : MADHU BALA

Service Cd Qty Rate Amount (Rs)

2,150.00 **HEA145** 2,150.00

**These Services Are Under Package** 

: 5124448

COMPLETE URINE EXAMINATION GLYCATED HEMOGLOBIN (HBA1C)

LIVER FUNCTION TESTS (LFT)

ESR - ERYTHROCYTE SEDIMENT RATE

US ABDOMEN AND PELVIS BLOOD UREA NITROGEN(BUN)

MARKANDEYULU AKURUTHI

BLOOD GLUCOSE FASTING AND POST P

LIPID PROFILE

**ECG** 

STOOL EXAMINATION CREATININE SERUM X-RAY CHEST PA VIEW

Print Dt

**BLOOD GROUPING & RH TYPING** 

COMPLETE BLOOD PICTURE (CBP)

URIC ACID-SERUM 2D ECHO / TMT THYROID PROFILE **OPHTHALMOLOGIST** 

Bill Amt

**Emp Payable Amt** 

2,150.00 2,150.00

Create By : 8509RAMYA Create Dt : 05-Nov-2021 8:34 am : 05-Nov-2021 08:34:29 AM

(Authorised Signatory)

: 8509RAMYA Print By

Produce this receipt for the collection of reports.

remained unclaimed over 15 days from due date of delivery

1 MediWheel Full Body Health Checkup Female Below 40

Note: 1.Lab & Radiology Reports for both IP & OP available at the hospital does not bear any responsibility for reports which www.pacehospital.com->Online lab Reports, Register with UMR & Register Mobile No. then login into your profile & download reports

2. Report may get delayed due to technical problem, if any

3. Report time is calculated from the sample time/test

done time/procedure done time.





# **DEPARTMENT OF CARDIOLOGY**

Patient Name: Mrs. MADHU BALA

Age /Sex: 26 Y(s)/Female

Ref By : Dr. MARKANDEYULU AKURUTHI MBBS, DNB - Internal M UMR No : UMR63444

 Bill Date
 : 05-Nov-21 08:34 am
 Bill No : BIL107325

 Lab No : 0
 Result No : RES276272

Samp.Coll : 05-Nov-21 08:34 am Auth. Tim :

**Reported On** : 05-Nov-21 02:51 pm

## 2D ECHO / TMT

MITRAL VALVE : Normal

TRICUSPID VALVE : Normal

AORTIC VALVE : Normal

PULMONARY VALVE : Normal

RIGHT ATRIUM : Normal

RIGHT VENTRICLE : Normal

LEFT ATRIUM : 2.8cms

LEFT VENTRICLE : EDD: 4.6cms IVS: 0.7cms FS: 37%

ESD: 2.9cms LVPW: 0.6cms

LVEF : 67%

IAS : Intact

IVS : Intact

AORTA : 2.3cms

IVC : Normal

PULMOANRY VEINS : Normal

## **DEPARTMENT OF CARDIOLOGY**

Patient Name : Mrs. MADHU BALA

Age /Sex

: 26 Y(s)/Female

Ref By

: Dr. MARKANDEYULU AKURUTHI MBBS, DNB - Internal M UMR No

: UMR63444

**Bill Date** 

:05-Nov-21 08:34 am

Bill No

: BIL107325

Lab No

:0

Result No: RES276272

Samp.Coll

:05-Nov-21 08:34 am

Auth. Tim:

**Reported On** 

:05-Nov-21 02:51 pm

**PERICARDIUM** 

No effusion

**INTRACARDIAC MASSES** 

Nil

SVC/IVC/CS

Normal

PJV

1.0m/se

AJV

1.6m/sec

MVF-E

1.0m/sec

MVF-A

0.6m/sec

NO MR, NO AR, NO TR

TRIVIAL TR / NO PAH

**IMPRESSION** 

NORMAL SIZE CARDIAC CHAMBERS NO RWMA

GOOD LV /RV FUNCTION

TRIVIAL TR / NO PAH NO CLOT / PE / VEGETATION

Dr. RAJESH KANCHARLA, D.CARD

**CONSULTANT CARDIOLOGIST** 

Page 2 of 2







# **DEPARTMENT OF RADIOLOGY**

Patient Name :Mrs. MADHU BALA Age / Gender : 26 Y(s) / Female

Requested Date:05-Nov-2021 8:34 AM UMR No : UMR63444

Reported Date :05-Nov-2021 10:31 AM Result/ Bill No : RES276190 / BIL107325

Referred By :Walk-In Lab No : 0

Advised By :Dr.MARKANDEYULU AKURUTHI MBBS, DNB - Internal Medicine

## **US ABDOMEN AND PELVIS**

#### **FINDINGS**

LIVER: Normal in size (12.8cms)and echotexture. No focal lesions noted. No intra hepatic biliary dilatation. CBD (4mm)and Portal vein (9mm)appear normal in course and calibre.

GALL BLADDER: Well distended. No intraluminal echoes. No evidence of wall thickening / pericholecystic collection.

PANCREAS: Normal in size and echotexture. Pancreatic duct appears normal. No peri pancreatic collection.

SPLEEN: Normal in size (8cms)and echotexture. No focal lesion. SPV normal.

BOTH KIDNEYS: Right: 9.5 x 3.9cms. Left: 10.2 x 4.5cms. Both are normal in size and echotexture. CMD is maintained. No evidence of calculi. Pelvicalyceal system normal on both sides. URINARY BLADDER: Well distended. Wall thickness is normal.

UTERUS: Normal in size (7 x 3.6 x 3.8cms)and echotexture. Endometrial thickness is 4mm.

OVARIES: Right ovary:  $7 \times 3.6 \times 3.8$ cms, Left ovary:  $2.7 \times 1.5$ cms. Both ovaries are normal in size and echotexture.

Adnexa appears normal. No evidence of ascites. Aorta and IVC: Visualized portions are normal. No evidence of para-aortic or paracaval lymphadenopathy.

#### **IMPRESSION**

NO OBVIOUS ABNORMALITY.

Suggested clinical correlation.

Dr. G S B RAO, MBBS, DMRD CONSULTANT RADIOLOGIST







# **DEPARTMENT OF RADIOLOGY**

Patient Name :Mrs. MADHU BALA Age / Gender : 26 Y(s) / Female

Requested Date:05-Nov-2021 8:34 AM UMR No : UMR63444

Reported Date :05-Nov-2021 10:15 AM Result/ Bill No : RES276184 / BIL107325

Referred By :Walk-In Lab No : 0

Advised By :Dr.MARKANDEYULU AKURUTHI MBBS, DNB - Internal Medicine

## X-RAY CHEST PA VIEW

### **FINDINGS**

Heart size is normal.

Both lung fields clear.

Both hila normal.

Both CP angles free.

Soft tissue chest wall and bony cage normal.

Suggested clinical correlation.

Dr. G S B RAO, MBBS, DMRD CONSULTANT RADIOLOGIST