



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	MS. PANDEJI DHARA MADHUKAR
EC NO.	168739
DESIGNATION	SINGLE WINDOW OPERATOR B
PLACE OF WORK	AHMEDABAD,SERVICE BRANCH
BIRTHDATE	16-05-1987
PROPOSED DATE OF HEALTH CHECKUP	15-01-2022
BOOKING REFERENCE NO.	21M168739100008782E

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 **27-12-2021** 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 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



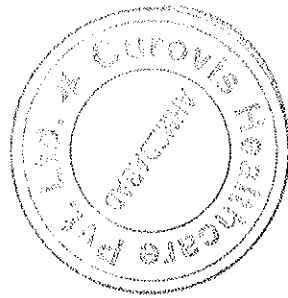
भारत सरकार  
Ministry of Health and Family Welfare  
New Delhi



8174 4627 6528

अधिसूचना - सामान्य माएसनो अधिसूचना

*Shah*



*Shah*  
Dr. Jinar M. Shah  
DNB (Medicine) FCCS (USA)  
Reg. No. G-20693

Patient's name : DHARA PANDEJI  
Referred by : Self  
Date : 15/01/2022  
Patient's Id : DP536

Age/Sex : 34 Years/Female  
Reg. No : 6685  
Mobile : 9925470926  
Ref ID. :

**Fitness Certificate**

GENERAL EXAMINATION

Height (cms) : 155

Weight (kgs) : 64.9

Blood Pressure : 108/68mmHg

Pulse : 76/Min

No Clubbing/Cynosis/Pallor/Pedel Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

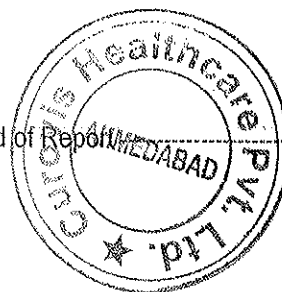
Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly

End of Report

This is an electronically authenticated report.  
Note: (LL-Very Low, L-Low, HH-Very High)

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Dr Jinen M Shah  
DNB (Medicine) FDCS (USA)

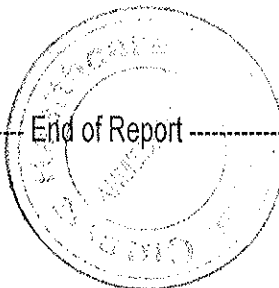
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**HEMOGRAM REPORT**

Performed on 5-Part Fully Auto Hematology Analyzer SIEMENS ADVIA 2120i)

Test	Result	Unit	Biological Reference Interval
Sample Type:	EDTA		
<b>Haemoglobin:</b>	11.7	gm/dL	12.5 - 16.0
<b>Total WBC Count:</b>	7800	/microlitre	4000 - 10500
<b>Platelets Count:</b>	260000	/microlitre	1,50,000 - 4,50,000
<b>Differential Count:</b>			
Neutrophils:	79	%	40-80
Lymphocytes:	18	%	20-40
Eosinophils:	02	%	Upto 6
Monocytes:	01	%	2-10
Basophils:	00	%	<1-2
<b>RBC indices:</b>			
RBC Count:	4.43	*10 <sup>6</sup> /microL	3.8 - 4.8
HCT:	36.8	%	36 - 46
MCV:	83.1	fL	83 - 101
MCH:	26.4	pg	27-32
MCHC:	31.8	%	31.5-34.5
RDW:	13.1	%	11.6 - 14.0
<b>Erythrocytes Sedimentation Rate(ESR):</b> (By AUTO ESR-10, USA)			
ESR 1st Hr:	05	mm	2 - 20 mm in 1Hr.
<b>Thick Smear Preparation:</b>			
Haemoparasite:	Malarial parasites are not seen.		
Result :	N		
<b>Peripheral Smear Examination:</b>			
RBCs:	Normocytic & Normochromic.		
Platelet:	Platelet adequate & normal on smear.		



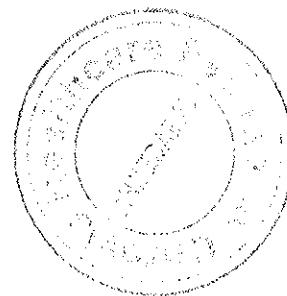
*J. Panchal*  
Dr. Jainin Panchal  
MBBS,MD(Pathology)

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**BLOOD GROUP**

Sample Type: EDTA  
ABO Group : "B"  
Rh Type : Positive

**BLOOD GLUCOSE LEVEL**

Test	Result	Unit	Biological Reference Interval
Sample Type:	Flouride		
Fasting Blood Glucose (Hexokinase)	93.6	mg/dl	70-110
Collection Time:			
Collection Time:			
Post Prandial Blood Glucose (2 Hrs) (Hexokinase)	84.5	mg/dl	80-140

Tests Performed on Fully Auto DRY Chemistry Analyzer VITROS-250

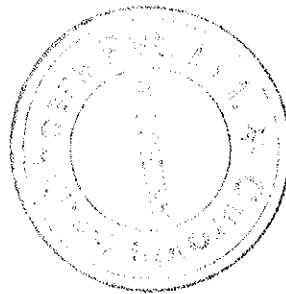
Dr. Jaimin Panchal

MBBS,MD(Pathology)

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**GLYCOSYLATED HAEMOGLOBIN (HbA1C) ESTIMATION**

Test	Result	Unit	Biological Reference Interval
Sample Type: EDTA			
Glycosylated Haemoglobin (HbA1C)	4.80	%	Pre-Diabetic (Adult): 5.7 - 6.4 Diabetic (Adult): >6.5 Therapeutic goal for glycemic control: <7.0
Mean Blood Glucose Level (An average of 2 -3 Months)	91.06		

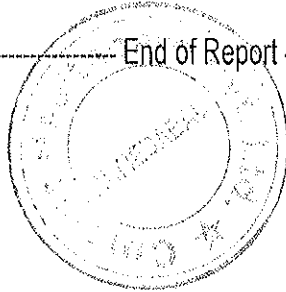
Method : HPLC on D-10, Bio-Rad,USA

**INTERPRETATION:**

- \* Blood sample can be drawn at any time. Fasting is not required.
- \* Reflects average blood sugar levels for the 2 to 3 months period before the test.
- \* Provides information for evaluating diabetic treatment modalities and tracks control of blood glucose of particular value in diabetic children, diabetics in whom the renal threshold for glucose is abnormal, unstable insulin dependent diabetics where blood sugars vary markedly from day to day.
- \* High value in poorly controlled DM and moves towards normal in patients with optimal control.

Dr. Jaimin Panchal  
MBBS,MD(Pathology)

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**LIPID PROFILE**

(Performed on Semi Auto Chemistry Analyzer BeneSphera)

Test	Result	Unit	Biological Reference Interval
Sample Type: Fasting Serum			
<b>S.Cholesterol</b> (Oxidase Peroxidase)	194	mg/dl.	< 200 Desirable 200-239 Boderline High > 240 High
<b>S.HDLC (Direct)</b> (Phosphotungsstic Acid)	53.2	mg/dL	< 40 Low > 60 High
<b>S.Triglyceride</b> (GPO-POD)	67.1	mg/dL	< 150 mg/dl Normal 150-199 Boderline High 200-499 High > 500 Very High
<b>S.VLDL</b> (Calculated)	13.42	mg/dL	10-40 Normal
<b>S.LDLC</b> (Calculated)	127.38	mg/dL	< 100 Optimal 100-129 Near to above optimal 130-159 Boderline high 160-189 High >190 Very High
<b>S.Cholesterol / HDLC Ratio</b> (Calculated)	3.65		< 4 Normal 4-6 Borderline 6-8 Risklevel > 8 High Risk
<b>S.LDLC / HDLC Ratio</b> (Calculated)	2.39		< 3 Normal 3-4 Borderline 4-6 Risk Level > 6 High Risk
<b>Cholesterol / HDLC Ratio</b> (Calculated)	3.65		< 3.5 Normal
<b>Triglyceride / HDLC Ratio</b> (Calculated)	1.26		< 2 Normal > 4 Risk Level > 6 High Risk
<b>Non HDLC</b> (Calculated)	140.8		< 130 Normal 130 - 159 Near Normal 160 - 189 Borderline 190 - 219 Risklevel > 220 High Risk

End of Report

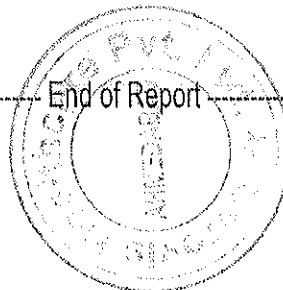
*J. Panchal*

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**LIVER FUNCTION TEST**

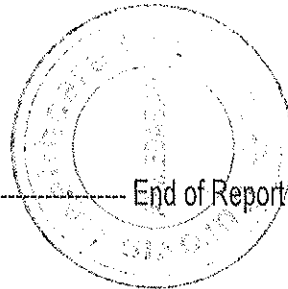
(Performed on Fully Auto DRY Chemistry Analyzer VITROS-250)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>S.Bilirubin</b>			
Total Bilirubin (Azobilirubin)	0.96	mg/dl	0 - 1.2
Conjugated Bilirubin (Dual Wavelength spectrophotometric)	0.27	mg/dl	0 - 0.4
Unconjugated Bilirubin (Dual Wavelength spectrophotometric)	0.69	mg/dl	0.0 - 1.1
<b>S.G.P.T. (ALT)</b> (Kinetic with Pyridoxal 5-Phosphate)	45.3	IU/L	0 - 49
<b>S.G.O.T. (AST)</b> (Kinetic with Pyridoxal 5-Phosphate)	41.8	IU/L	Up to 46
<b>S.ALP</b> (Alkaline Phosphatase) (4-Nitrophenyl phosphate)	196.6	U/L	64 - 306
<b>S.Protein</b>			
Total Protein (Biuret)	6.80	gm/dl	6.3 - 8.2
Albumin (BCG)	4.42	gm/dl	3.5 - 5.2
Globulin (Calculated)	2.38	gm/dl	1.9 - 3.5
Albumin Globulin Ratio	1.86		
<b>S.GammaGT</b> (L-Gamma Glutamyl-4-Nitroanalide)	52.8	IU/L	12-43

**SERUM LDH LEVEL**

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>LDH Activity</b> ( Lactate Dehydrogenase ) : Pyruvate to lactate Kinetic Method	143.43	U/L	120 - 246

#Tests Performed on Fully Auto DRY Chemistry Analyzer VITROS-250



*J.Panchal*

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**RENAL FUNCTION TEST**

(Performed on Fully Auto DRY Chemistry Analyzer VITROS-250)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>S.Urea</b> (Urease with indicator dye)	20.6	mg/dl	Male: 19.6-43.6 Female: 15.2-37.0
<b>S.Creatinine</b> (Enzymatic)	0.67	mg/dL	0.55 - 1.30
<b>S.Uric Acid</b> (Uricase)	3.91	mg/dL	Male: 3.5-8.5 Female: 2.5-6.2

*J. Panchal*

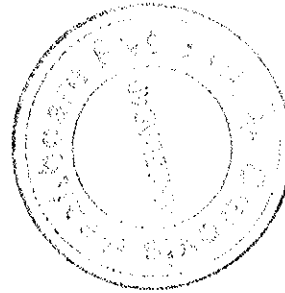
Dr. Jaimin Panchal

MBBS,MD(Pathology)

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**THYROID FUNCTION TEST**  
(by CLIA on SIEMENS ADVIA Centaur XP)

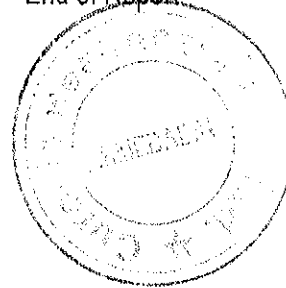
Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>S.T3</b> (Total Triiodothyronine by CLIA)	1.26	ng/mL	1 - 23 Months: 1.17 - 2.39 2 - 12 Years: 1.05 - 2.07 13 - 20 Years: 0.86 - 1.92 Adult: 0.6 - 1.81
<b>S.T4</b> (Total Thyroxine by CLIA)	10.20	mcg/dL	3.2 - 12.6
<b>S.TSH</b> (Thyroid Stimulating Hormone by CLIA)	2.034	microU/mL	0 -12 Yrs: 0.77 - 5.64 12-19 Yrs: 0.75-3.69 19-100 Yrs: 0.35 -5.50

Dr. Jaimin Panchal  
MBBS,MD(Pathology)

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Date : 15/01/2022  
Patient's Id : DP536

Age/Sex : 34 Years/Female  
Reg. No : 6685  
Mobile : 9925470926  
Ref ID. :

**URINE ROUTINE ANALYSIS**

Sample Type: Fresh Urine

**Physical Examination**

(Naked Eye Observation)

	Result	Biological Ref. Value
Amount	20 ml	>10 ml
Colour	Pale Yellow	Pale Yellow
Appearance	Clear	Clear

**Chemical Examination**

pH (Dip stick )	6.0	4.5-8.0
Specific Gravity (Bromothymol Blue)	1.015	1.002-1.030
Albumin (Tetrabromophenol)	Absent	Absent
Glucose (Specific Glucose Oxidase/Peroxidase)	Absent	Absent
Bilirubin (Azo-coupling reaction)	Absent	Absent
Acetone (Sodium Nitroprusside Reaction)	Absent	Absent
Urobilinogen (Modified Ehrlich Reaction)	Absent	Absent
Nitrites (Diazotization Reaction)	Absent	Absent

**Microscopic Examination**

(After centrifugation at 1500 RPM for 10min./hpf)

Pus Cells(WBCs)	Absent	Absent
Red Blood Cells(RBCs)	Absent	Absent
Epithelial cells	Absent	
T.Vaginals	Absent	Absent
Spermatozoa	Absent	Absent
Casts	Absent	Absent
Crystals	Absent	Absent
Amorphous Material	Absent	Absent



Dr. Jaimin Panchal

MBBS,MD(Pathology)

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**Electrocardiogram**

**Findings**

Normal Sinus Rhythm.

Within Normal Limit.

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Dr Jinen M Shah  
MD (Medicine) FCS (USA)

Name: Dhara Pandey  
Patient ID: 6

Date: 14.01.2022 09:25:38  
Standard 12-Lead

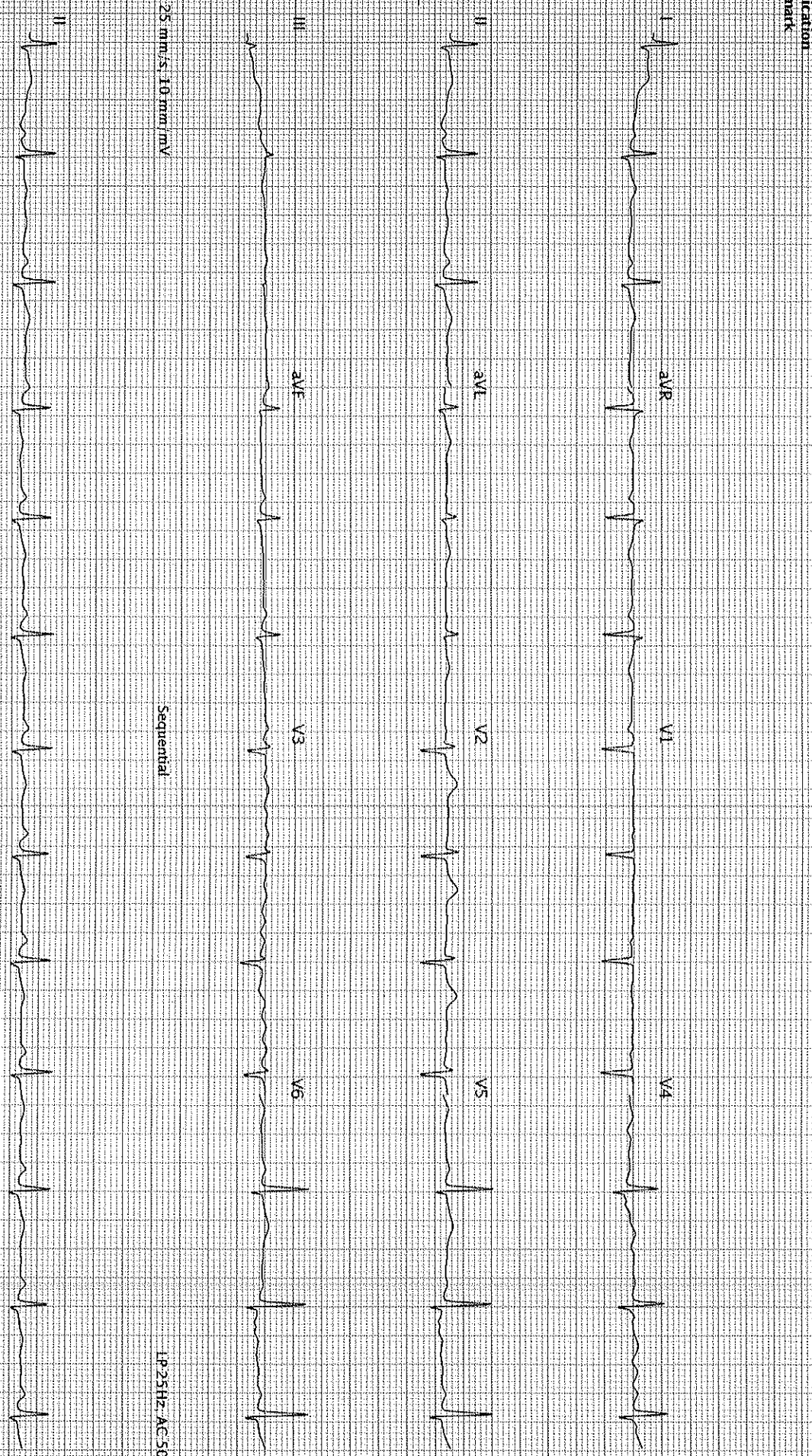
Age: 034Y  
Gender: Female  
Height: 155 cm  
Weight: 65 kg  
Date of birth: Unknown  
Referrer: Unknown

HR: 76 bpm  
P axis: 50°  
QRS axis: 39°  
T axis: 30°

RR: 793 ms  
PR: 99 ms  
QRS: 67 ms  
QTcB: 437 ms

Unconfirmed report

Location:  
mark



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz, AC 50Hz

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**2D Echo Colour Doppler**

**OBSERVATION:**

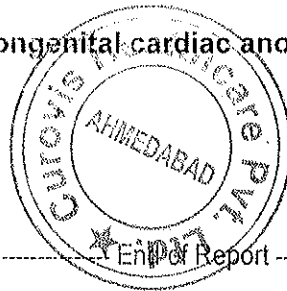
2 D Echo and color flow studies were done in long and short axis, apical and Sub coastal views.

1. Normal LV size. No RWMA at rest.
2. Normal RV and RA. No Concentric LVH.
3. All Four valves are structurally normal.
4. Good LV systolic function. LVEF = 60%.
5. Normal LV Compliance.
6. Trivial TR. Mild MR. No AR.
7. No PAH. RVSP = 32 mmHG.
8. Intact IAS and IVS.
9. No Clot, No Vegetation.
10. No pericardial effusion.

**CONCLUSION**

1. Normal LV size with Good LV systolic function.
2. No Concentric LVH. Normal LV Compliance
3. Trivial TR with No PAH. Mild MR. No AR
4. No RWMA at rest.

**This echo doesn't rule out any kind of congenital cardiac anomalies.**



  
Dr. Jinen M Shah  
MBBS (M.D.) FRCGS (USA)

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'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad-380054, Gujarat.

Patient's name	: DHARA PANDEJI	Age/Sex	: 34 Years/Female
Referred by	: Self	Reg. No	: 6685
Date	: 15/01/2022	Mobile	: 9925470926
Patient's Id	: DP536	Ref ID.	:

**X RAY CHEST PA**

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

**COMMENT: No significant abnormality is detected.**

----- End of Report -----

*Atul Patel*

Dr. Atul Patel

MD Radio-Dignosis

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**USG ABDOMEN**

**Liver** appears normal in size , show homogenous parenchymal echo. No evidence of focal solid or cystic lesion seen. No evidence of dilatation of intra-hepatic biliary or portal radicals. PV is normal in caliber.

**Gall bladder** is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

**Pancreas** Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

**Spleen** appears normal in size & echopattern. No evidence of focal lesions.

**Both kidney are** normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass seen.

**Urinary bladder** contour is normal, no calculus or wall thickening seen.

**Uterus** appears normal. No adnexal mass is seen.

No evidence of free fluid in peritoneal cavity.  
No evidence of para-aortic lymph adenopathy.  
No evidence of dilated small bowel loops,

**COMMENTS :**

**Normal study.**

----- End of Report -----

*Atul Patel*

**Dr. Atul Patel**

MD Radio-Dignosis



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**Eye Check - Up**

**RIGHT EYE**

SP: +0.25  
CY: -0.75  
AX: 173

**LEFT EYE**

SP: +0.25  
CY: -0.75  
AX: 174

	<b>Without Glasses</b>	<b>With Glasses</b>
Right Eye	6/5	N.A
Left Eye	6/5	N.A

Near Vision: Right Eye -N/6, Left Eye - N/6

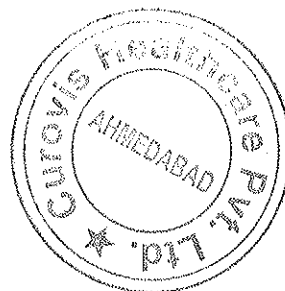
Fundus Examination: Within Normal Limits.

Colour Vision: Normal

Comments: Normal

Dr.Kejal Patel  
MB,DO(Ophth)

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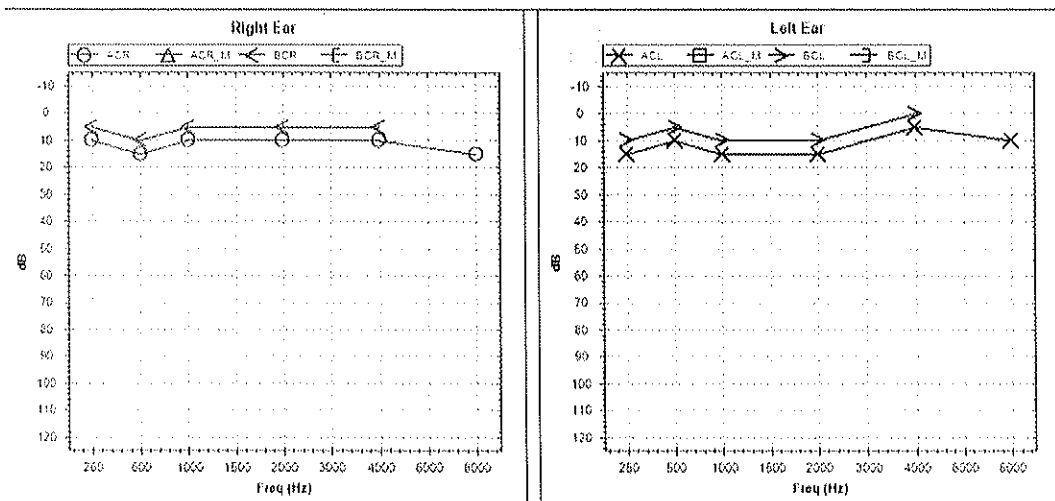


CLIENT NAME: - DHARA PANDEJI.

AGE:- 34Y/ M

DATE:- 15/01/2022

## AUDIOGRAM



EAR	MODE	Air Conduction		Bone Conduction		Colour Code	Threshold in dB	
		Masked	UnMasked	Masked	UnMasked		RIGHT	LEFT
LEFT		□	X	□	>	Blue	AIR CONDUCTION	10
RIGHT		Δ	O	□	<	Red	BONE CONDUCTION	
NO RESPONSE : Add ↓ below the respective symbols							SPEECH	

Comments:- Bilateral Hearing Sensitivity Within Normal Limits.

