



भारत सरकार  
Government of India



Biswa Ranjan Das  
Date of Birth/DOB: 07/12/1986  
Male/ MALE

4315 9539 0951

VID : 9159 8624 1952 2552

मेरा **आधार**, मेरी पहचान

*Biswa Ranjan Das*



भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



Address:  
S/O: Ashoke Kumar Das, 64/3, MASKAR PARA  
LANE, Haora (M.Corp), Howrah,  
West Bengal - 711101



4315 9539 0951

VID : 9159 8624 1952 2552

1047 | help@uidai.gov.in | www.uidai.gov.in

not verified by UIDAI



बैंक ऑफ बरोडा  
Bank of Baroda

नाम : विश्व रंजन दास  
Name : Biswa Ranjan Das  
कर्मचारी क्र. नं.  
E.C. No. 100172

जातिवाणी अधिकारी  
Issuing Authority CIM (Coord) EZ



*Biswa Ranjan Das*

धारक के हस्ताक्षर  
Signature of Holder

*Biswa Ranjan Das*

*Bina Benjamin Das*

EZ

हैच व् प्रोडिगस अँ श्चोड  
अप्रेअर रेपुअरे (एग्रे), डैअर अँअर अँअर अँअर अँअर  
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If found, please return to:  
Asst. General Manager (Security), Bank of Baroda, Baroda Corporate Centre  
C-28, G Block, Bandra-Kurla Complex, Mumbai, 400 051, India  
Phone - 91 22 6889 5196 Fax: 91 22 2652 5747

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Name & Ph. / Person of emergency contact: Nilanjan Das (Brother) 9674746522  
B+ Alergy: Nil  
Alergy / Allergy: Nil

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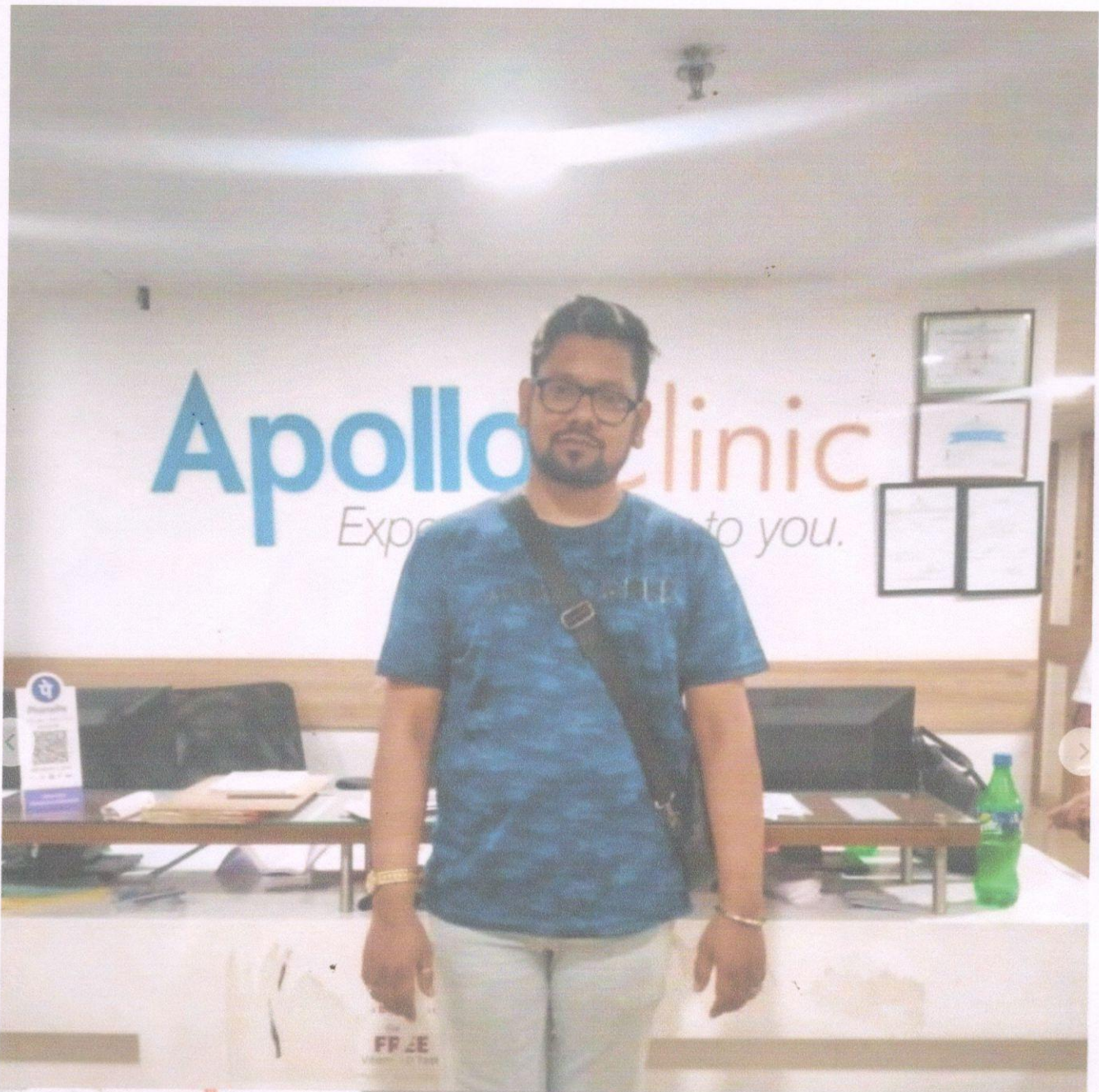
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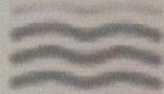


36C, Barrackpore Trunk Rd, CIT, Sanchasi Para, Kolkata, West Bengal 700002, India

Kolkata  
West Bengal  
India

2022-05-12(Thu) 09:08(am)

32°C  
90°F





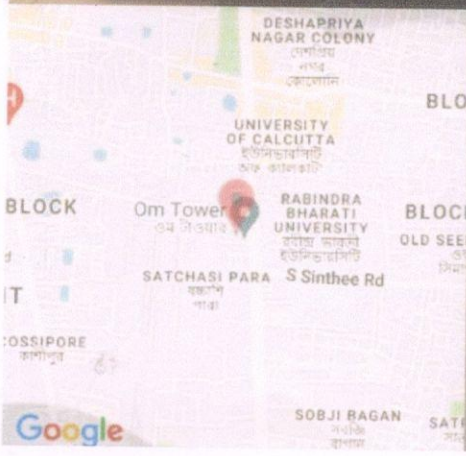
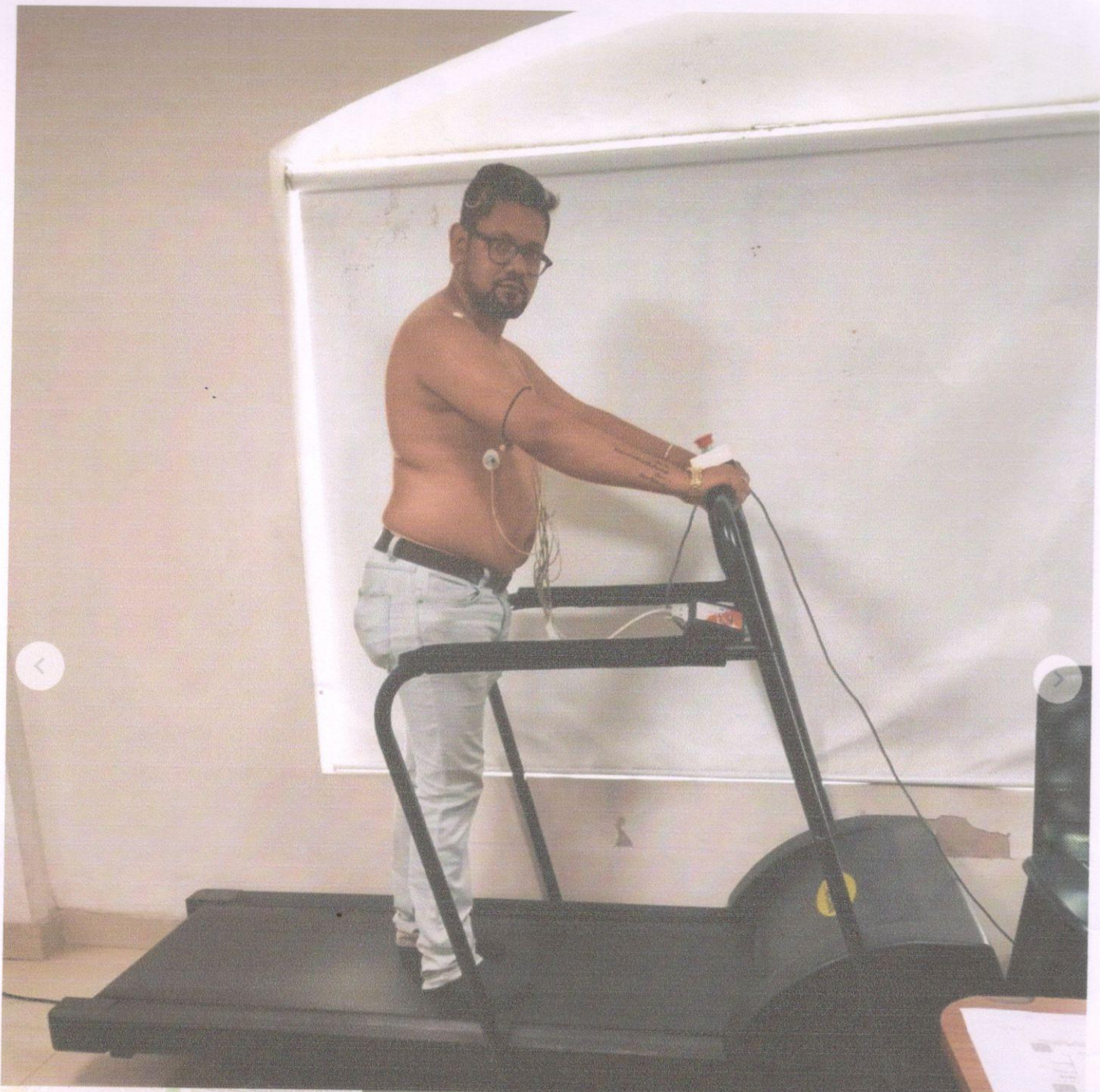
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Kolkata  
West Bengal  
India



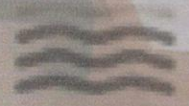
29°C  
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2022-05-12(Thu) 09:53(am)



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Kolkata  
West Bengal  
India



33°C  
91°F

2022-05-12(Thu) 01:18(pm)



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. DAS BISWARANJAN
EC NO.	100172
DESIGNATION	HEAD CASHIER "E" _II
PLACE OF WORK	KOLKATA, COLOOTLA
BIRTHDATE	07-12-1986
PROPOSED DATE OF HEALTH CHECKUP	12-05-2022
BOOKING REFERENCE NO.	22J100172100018674E

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 10-05-2022 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 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**

<b>FOR MALE</b>	<b>FOR FEMALE</b>
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

Patient Name: MR. BISWA RANJAN DAS  
UHID/MR No.: FSIN.0000014641  
Visit Date: 12.05.2022  
Sample collected on: 12.05.2022  
Ref Doctor: SELF

Age/Gender: 36 Years / Male  
OP Visit No.: FSINOPV17710  
Reported on: 12.05.2022  
Specimen: BLOOD

**DEPARTMENT OF SEROLOGICAL EXAMINATION**

<u>TEST NAME</u>	<u>RESULT</u>
<u>Blood Group (A, B &amp; O) &amp; Rh factor</u>	"B"
BLOOD GROUP	POSITIVE (+Ve)
RH TYPE	

Results are to be correlate clinically.

\*\*\* End of the report\*\*\*

*BK*

Lab Technician / Technologist  
Ranit Bhattacharjee

DR. BIPARNAK HALDAR  
MBBS, MD (PATHOLOGY)  
CONSULTANT PATHOLOGIST

Patient Name: MR. BISWA RANJAN DAS  
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**DEPARTMENT OF HAEMATOLOGY**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE</u>	<u>UNIT</u>
<b>COMPLETE BLOOD COUNT</b>			
HEMOGLOBIN	14.2	Female 11.5-14.5	gm%
Method: Cyanmethemoglobin		Male 12.5-16.5	
RBC COUNT	4.7	Female 3.8-4.8	mill/Cumm
Method: Electronic Impedance		Male 4.5-5.5	
HEMATOCRIT (PCV)	45.0	Female 36-46	%
		Male 42-52	
MCV	95.7	83-101 fl	fl
Method: Calculated			
MCH	30.2	27-32 pg	pg
Method: Calculated			
MCHC	31.5	31.5-34.5	%
Method: Calculated			
PLATELET COUNT	2.20	1.5-4.5 lakhs/cu mm	Lakhs/cumm
Method: Electronic Impedance			
TOTAL WBC COUNT	5,300	4000-11000	/cumm
Method: Electronic Impedance			
NEUTROPHIL	55	40-70	%
Method: Microscopy			
LYMPHOCYTE	40	20-45	%
Method: Microscopy			
MONOCYTE	02	2-8	%
Method: Microscopy			
EOSINOPHIL	03	1-4	%
Method: Microscopy			
BASOPHIL	00	<1-2	%
Method: Microscopy			
ESR	18	Male:12	mm/hr
Method: westergreen		Female:19	mm/hr

**Note:** RBC are normocytic with normochromic.

**INSTRUMENT USED:**

SYSMEX (XP 100)

\*Please correlate with clinical conditions.

\*\*\*End of the report\*\*\*

*BK*

Lab Technician/Technologist  
Ranit Bhattacharjee

Dr. BIPARNAK HALDAR  
MBBS, MD(PATHOLOGY)  
CONSULTANT PATHOLOGIST



Patient Name: MR. BISWA RANJAN DAS  
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Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE- (FASTING) Method: (GOD-POD)	90.0	70.0- 110.0	mg/dl
GLUCOSE- (POST PRANDIAL) Method: (GOD-POD)	119.0	80.0- 140.0	mg/dl

End of the report  
Results are to be correlate clinically

*BL*

Lab Technician / Technologist  
Ranit Bhattacharjee

DR. BIPARNAK HALDAR  
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Specimen: BLOOD

**DEPARTMENT OF SPECIAL BIOCHEMISTRY**  
**REPORT PREPARED ON PATHOLOGY**

Test Name	Value	Unit	Normal Range
Glycosylated Haemoglobin (HbA1c), HPLC	4.8	%	Excellent Control: <4 Good Control: 4-6 Fair Control : >6-7 Action Suggested: >7-8 Poor Control : >8
<i>Methodology: HPLC</i>			
<i>Instrument Used: Bio-Rad D-10</i>			
Estimated Average Glucose (EAG)	125	mg/dL	Excellent Control: 90-120 Good Control: 120-150 Fair Control: > 150-180 Action Suggested: 181-210 Panic Value: >211

**Comment**

- For patients with Hb variant diseases there may be lowering of HbA1c due to low HBA synthesis.
- EAG is value calculated from HbA1c & indicates average glucose level over past three months.

**Factors that interfere with HbA1c Measurement:** Genetic variants (e.g. Hbs trait, HbC trait), elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements. The effects vary depending on the specific Hb variant or derivative and the specific HbA1c method.

**Factors that affect interpretation of HbA1c Results:** Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g. recovery from acute blood loss, hemolytic anemia) will falsely lower HbA1c test results regardless of the assay method used.

\*\*\*\*\* End Of Report\*\*\*\*\*

*BL*

Lab Technician / Technologist

Susmita Saha

DR. BIPARNAK HALDAR

MBBS, MD (PATHOLOGY)

CONSULTANT PATHOLOGIST

Patient Name: MR. BISWA RANJAN DAS  
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Reported on: 12.05.2022  
Specimen: BLOOD

**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>LIVER FUNCTION TEST (PACKAGE)</b>			
BILIRUBIN- TOTAL Method: Daizo	0.74	1.1 Adult	mg/dl
BILIRUBIN- DIRECT Method: Daizo with DPD	0.13	Adult & Children: <0.25	mg/dl
BILIRUBIN- INDIRECT Method: calculated	0.61	0.1-1.0	mg/dl
TOTAL- PROTIEN Method: Photometric UV test	6.6	Adult: 6.6-8.8	gms/dl
ALBUMIN Method: BCG	3.8	3.5-5.2	gms/dl
GLOBULIN Method: calculated	2.8	1.8-3.0	gms/dl
A:G Ratio	1.3:1		
SGOT/AST Method: IFCC WITHOUT P5P	23.6	up to 45	U/L
SGPT/ALT Method: IFCC WITHOUT P5P	20.8	up to 40	U/L
ALKA-PHOS Method: PNPP- AMP BUFFER	104.3	Adult: 20-220 Child: 104-380	U/L
GGT [Gamma Glutamyl Transferase] *Please correlate with clinical conditions.	16	7-32	U/L

\*\*\*End of the report\*\*\*

*BL*

Lab Technician / Technologist  
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Specimen: BLOOD

**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
<b>LIPID PROFILE</b>			
Triglyceride Method: GPO-POD	196.0	<200	mg/dl
Cholesterol Method: CHO - POD	<b>228.0</b>	Desirable blood cholesterol :< 220 Borderline High: 170.0-199.0 High: > 199.0 mg/dl	mg/dl mg/dl
HDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	51.0	30-80mg/dl	mg/dl
LDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	<b>137.8</b>	<130.0 mg/dl	mg/dl
VLDL CHOLESTEROL	<b>39.2</b>	20-35 mg/dl	mg/dl
CHOLESTEROL: HDL RATIO	4.47		
LDL: HDL RATIO	2.70		

End of the report  
Results are to be correlate clinically

*BK*

Lab Technician / Technologist  
Ranit Bhattacharjee

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**DEPARTMENT OF LABORATORY MEDICINE**

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD UREA NITROGEN (BUN) Method: Calculated	11.3	8 - 20	mg/ dl
CREATININE Methodology: Jaffe Reaction Instrument Used: FULLY AUTOMATED ANALYZER EM-200	1.02	Male: 0.7-1.4 Female: 0.6-1.2 Newborn: 0.3-1.0 Infant: 0.2-0.4 Child: 0.3-0.7 Adolescent: 0.5-1.0	mg/dl
BUN: CREATININE RATIO	11.0		
URIC ACID Method: Uricase	4.32	Female: 2.6 - 6.0 Male: 3.4 - 7.0	mg/dl

End of the report  
Results are to be correlate clinically

*BL*

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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNIT</u>
TSH:THYROID STIMULATING HORMONE-SERUM Method : CLIA	2.36	0.35-5.50	μU/ml
TOTAL T3: TRI IODOTHYRONINE – SERUM Method : CLIA	1.46	0.87 – 1.78	ng/dl
TOTAL T4: THYROXINE – SERUM Method : CLIA	8.95	8.09 – 14.03	μg/Dl

Comment: Note :>1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations  
> 2. Values <0.03 μU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.  
Clinical Use:> Primary Hypothyroidism > Hyperthyroidism > Hypothalamic – Pituitary hypothyroidism  
> Inappropriate TSH secretion > Nonthyroidal illness > Autoimmune thyroid disease  
>Pregnancy associated thyroid disorders > Thyroid dysfunction in infancy and early childhood.

Results are to be correlate clinically .

\*\*\*End of the report\*\*\*

*BL*

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Age/Gender: 36 Years / Male  
OP Visit No.: FSINOPV17710  
Reported on: 12.05.2022  
Specimen: URINE

**URINE ROUTINE EXAMINATION**

URINE FOR ROUTINE EXAMINATION

<u>Test Name</u>	<u>Result</u>	<u>Unit</u>	<u>Method</u>
<b><u>PHYSICAL EXAMINATION</u></b>			
QUANTITY	40	ml	Container Measurement
COLOUR	Pale yellow		Naked Eye Observation
APPEARANCE	Slightly hazy		Naked Eye Observation
REACTION	Acidic		Multiple Reagent Strip
SPECIFIC GRAVITY	1.015		Multiple Reagent Strip
<b><u>CHEMICAL EXAMINATION</u></b>			
BLOOD	Nil		Multiple Reagent Strip
ALBUMIN	Nil		Multiple Reagent Strip / Heat & Acetic Acid
BILE PIGMENT	Nil		Fuchet's Test
BILE SALT	Nil		Hey's Sulphur Test
KETONE BODIES	Nil		Multiple Reagent Strip / Rothera Test
SUGAR	Nil		Multiple Reagent Strip / Benedict
<b><u>MICROSCOPIC EXAMINATION</u></b>			
PUS CELL	3-4	/HPF	Light Microscopy
RBC	Not found	/HPF	Light Microscopy
EPITHELIAL CELL	1-2	/HPF	Light Microscopy
MICRO ORGANISM	Present(+)		
Others	Not found		

Note : Any Abnormal Chemical Analysis Rechecked By Respective Manual Method

\*\*\* End of Report\*\*\*

*BL*

Lab Technician / Technologist  
Madhumita\_Biswas

Dr. BIPARNAK HALDER  
MBBS, MD (PATHOLOGY)  
CONSULTANT PATHOLOGIST

