## 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. ROSHAN SANDEEP KUMAR
EC NO.	104304
DESIGNATION	HEAD CASHIER "E" II
PLACE OF WORK	TARAPUR,MUNGER
BIRTHDATE	27-01-1985
PROPOSED DATE OF HEALTH CHECKUP	24-06-2023
BOOKING REFERENCE NO.	23J104304100062084E

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))



# भारताय ।वाराष्ट परुषान प्रााधपारण

# भारत सरकार Unique Identification Authority of India Government of India

नामांकन कम / Enrollment No. :

1213/50640/00549

1/03/2015

To Sandeep Kumar Roshan संदीप कुमार रोशन S/O: Shailendra Kumar gram-ghorghat post-ghorghat thana-bariyarpur Bariarpur

Bariarpur, Munger Bihar - 811211 7870238884



KH267401774FT

26740177



आपका आधार क्रमांक / Your Aadhaar No. :

2437 0975 5580

आधार - आम आदमी का अधिकार



भारत सरकार Government of India



संदीप कुमार रोशन Sandeep Kumar Roshan

जन्म तिथि / DOB: 27/01/1985 पुरुष / Male

2437 0975 5580



Bullina

आधार - आम आदमी का अधिकार

## MEDICAL EXAMINATION REPORT

Name SANDEED KUNAR ROSH	A N Gender ✓M / F Date of Birth	27/01/1	985
Position Selected For MEAD CASH!	If & 1 Identification marks A com	11 A) our	1 lue
HISTORY:			
1. Do you have, or are you being trea	ted for, any of the following coeditions? (pl	ease tick all	that apply
Anxiety	Cancer - High	Blood Press	sure
Arthritis	Depression/ bipolar disorder High	n Cholesterol	
Asthama, Bronchitis, Emphysema	Diabetes Migr	raine Headac	hes
Back or spinal problems		sitis or Allerg	ic Rhinitis
Epilepsy	Any other serious problem for which you are receiving medical attention	y Fever)	
2. List the medications taken Regula	arly.		
3. List allergies to any known medic	ations or chemicals NO		
4. Alcohol : Yes No VO	ccasional		
5. Smoking: Yes No Q	uit(more than 3 years)		
6. Respiratory Function :			
<ul> <li>a. Do you become unusually short of</li> </ul>	breath while walking fast or taking stair - case?	Yes	No 🗸
b. Do you usually cough a lot first the	ning in morning?	Yes	No 🗸
c. Have you vomited or coughed or	ut blood?	Yes	No
7. Cardiovascular Function & Physic	cal Activity:		
a. Exercise Type: (Select 1)			
<ul> <li>No Activity</li> </ul>			
<ul> <li>Very Light Activity (Seated At De</li> </ul>			
<ul> <li>Light Activity (Walking on level see</li> </ul>	urface, house cleaning)		
<ul> <li>Moderate Activity (Brisk walking,</li> </ul>	dancing, weeding)		
<ul> <li>Vigrous Activity (Soccer, Running</li> </ul>	g)		
b. Exercise Frequency: Regular (le	ess than 3 days/ week) / Irregular (more than 3	3 days/ Week	()
c. Do you feel pain in chest when e	ngaging in physical activity?	Yes	No 🗸
8. Hearing :		_	
<ul> <li>a. Do you have history of hearing tr</li> </ul>	oubles?	Yes	No 🗸
b. Do you experiences ringing in yo	ur ears?	Yes	No
c. Do you experience discharge fro	m your ears?	Yes	No 🗸
d. Have you ever been diagnosed v	with industrial deafness?	Yes	No 🗸
9. Musculo - Skeletal History			🗀
a. Neck : b. Back :	Have you ever injured or experienced pain?  If Yes; approximate date (MM/YYYY)	Yes	No 🗸
c. Shoulder, Elbow, Writs, Hands	Consulted a medical professional?	Yes	No 🗸
d. Hips, Knees, Ankles, Legs	Resulted in time of work?	Yes	No 🗸
veneral range A. Communication of the Control of t	Surgery Required ?	Yes	No 🗸

10. Function History			
	or discomfort when lifting o		Yes No
b. Do you have knee	pain when squatting or kne	eeling?	Yes No No
c. Do you have back	pain when forwarding or tw	visting?	Yes No
d. Do you have pain o	or difficulty when lifting obje	ects above your shoulder he	ight? Yes No
e. Do you have pain appropriate respon	when doing any of the se)	following for prolonged pe	
•Walking: Yes N	•Kneeling:	Yes No No	quating: Yes No
	•Sitting:	Yes No	quality: 105 110
•Standing: Yes N		Yes No	
	when working with hand too	34.7	
	any difficulty operating ma		Yes No
	Ity operating computer inst		Yes No
	ny operating computer met	Turnorit:	Yes No
CLINICAL EXAMINATIO			
a. Height 165cm	b. Weight 70kg	Blood Pressure	130 / 90 mmhg
Chest measurements:	a. Normal 95cm	b. Expanded	97cm
Waist Circumference	34	Ear, Nose & Throat	MML
Skin	MML	Respiratory System	BAET
Vision	MNIC	Nervous System	NEND
Circulatory System	MUL	Genito- urinary System	NORMAL
Gastro-intestinal System	MNL	Colour Vision	NORMAL
REMARKS OF PATHOL	OGICAL TESTS:		
KEMAKKS OF PATRIOL	HNL	ECG	MNIL
Chest X -ray			
	146:13.9 day 15:7900	Urine routine	NH (
Chest X -ray	146:13.69mx7c:7900	Urine routine  Blood sugar	
Chest X -ray Complete Blood Count Serum cholesterol	185 mg/ou	Blood sugar	FBS-Stragu, ppB1.103m
Chest X -ray Complete Blood Count	146:13.69mx7c:7900		
Chest X -ray Complete Blood Count Serum cholesterol Blood Group	185 mg/ou B+ve	Blood sugar	FBISTMYW, PPBI.105m
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION:	185 mg/ou B+ve	Blood sugar  S.Creatinine	FBI-Starger, ppBI.103mg
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations	185 mg/ou B+VL	Blood sugar  S.Creatinine	FBI-STANGW, PPBI-105 mg
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations FITNESS CERTIFICATIO	IRS my low  B+VL  required	Blood sugar  S.Creatinine  Any precautions suggest	FRISTAGE, PPBI.103 m
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations FITNESS CERTIFICATIO	IRS my low  B+VL  required	Blood sugar  S.Creatinine  Any precautions suggest	FBI-STANGW, PPBI-105 mg
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations  FITNESS CERTIFICATIO Certified that the above	IRS my low  B+VL  required	Blood sugar  S.Creatinine  Any precautions suggest	FRISTAGE, PPBI.IGS M
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations  FITNESS CERTIFICATIO Certified that the above	IRS my or Required  Polyman and recruit does not a stutional weakness or	Blood sugar  S.Creatinine  Any precautions suggest  appear to be suffering from bodily informity except	FRISTAGE, PPBI.103 m
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations  FITNESS CERTIFICATIO Certified that the above	IRS my or Required  Polyman and recruit does not a stutional weakness or	Blood sugar  S.Creatinine  Any precautions suggest  appear to be suffering from bodily informity except	FRISTAGIM, PPBI.ITS A
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations  FITNESS CERTIFICATIO Certified that the above or otherwise, constit	IRS my or Required  Polyman and recruit does not a stutional weakness or	Blood sugar  S.Creatinine  Any precautions suggest  appear to be suffering from bodily informity except er this as disqualification for e	red In any disease communicable employment in the Company. S
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations  FITNESS CERTIFICATIO Certified that the above or otherwise, constit	IPS my ow B+VL  required  IND  named recruit does not a tutional weakness or  I do not consider	Blood sugar  S.Creatinine  Any precautions suggest  appear to be suffering from bodily informity except er this as disqualification for e	fill my W, ppp
Chest X -ray Complete Blood Count Serum cholesterol Blood Group CONCLUSION: Any further investigations  FITNESS CERTIFICATIO Certified that the above or otherwise, constit	IPS my ow B+VL  required  IND  named recruit does not a tutional weakness or  I do not consider	Blood sugar  S.Creatinine  Any precautions suggest  appear to be suffering from bodily informity except er this as disqualification for e	red in any disease communicable employment in the Company. S

#### **Eye Examination Report**

Candidate Name: SANDEEP KUMAR ROSHAR

Age/Gender: 371 M

Date: 94/06/2025

This is to certify that I have examined Mr. /Ms. ANDEEP LUNAD hereby, his/her visual standards are as follows:

Without Glasses				With (	Glasses	Color Vision (Normal/Defective)		
R	66	L	61	6	R		L	MORMAL

ABLE TO DIFFERENTIATE COLOR

Doctor Signature:

Dr. Chandra Snekhar Kuma

M.8.B.S. MD (OPHTHALMOOGY)

REG. No.- 41209

M.D. Pathologist (BHU)

Reg. No. : 52269

## MD. SHAHNAWAZKHAN

B.M.L.T. Reg. No. : BR1822



Address: Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134

Call: 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Date: 24/06/2023

Ref.by Dr: AMAR JYOTI HOSPITAL

Sex M Age: 37Y

#### **Haematological Test Report**

		And the second second	
Cama	ata	Dland	Count
COILID	lete	DIUUU	Count

TEST	RESULTS	UNIT	REFERENCE RANGE
Haemoglobin:	13.8	gm %	12.5-16.4
WBC Count			
Total WBC Count:	7900	/cumm	4000-11000
Differencial Count			
Neutrophil Lymphocyte Eosinophil Monocyte Basophil	60 36 03 01 00	% % % %	40-70 20-40 01-09 02-10 00-05
RBC Indices R.B.C.Count: Haematocrit (PCV) MCV MCH MCHC	4.66 43.0 92.1 29.7 32.2	mil./cumm % fL pg gm/dl	3.9-5.6 36-47 75-96 27-32 30-36
Platelet Indices Platelet Count	1,80,000	/cumm	150000-400000
ESR :	15	mm/1 <sup>st</sup> hr.	00-15



M.D. Pathologist (BHU) Reg. No. : 5226¶ MD. SHAHNAWAZKHAN B.M.L.T.

Reg. No. : BR1822



Address: Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134

Call: 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Date: 24/06/2023

Ref.by Dr: AMAR JYOTI HOSPITAL

Sex M Age: 37Y

#### LIVER FUNCTION TEST

TEST	RESULTS	<u>UNIT</u>	REFERENCE RANGE
S.Bilirubin		- 1	
Total	1.3	mg/dl	up to 1.2
Conjugate	0.4	mg/dl	up to 0.4
Unconjuate	0.9	mg/dl	up to 0.8
SGPT	65.0	U/L	up to 40
SGOT	61.0	U/L	up to 38
Alkaline Phosphatase	161	U/L	37-167
S.Protein			
Total	6.3	gm%	6.0-8.0
Albumin	3.9	gm%	3.7-5.3
Globulin	2.4	gm%	1.5-3.5
A/G Ratio	1.62	d of conout***	1.0-2.0



M.D. Pathologist (BHU)

Reg. No. : 52264 Address: Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134

# MD. SHAHNAWAZKHAN

B.M.L.T.

Reg. No.: BR1822



Call: 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Ref.by Dr : AMAR JYOTI HOSPITAL

Date: 24/06/2023

Sex M Age:37Y

Report on Blood Examination

	Report on bi	OOU LAUIIIII	-
TEST B.Urea	RESULTS 32.0	UNIT mg/dl	REFERENCE RANGE 17-45
	1.1	mg/dl	0.6-1.4
S.Creatinine		mg/dl	2.5-7.0
S. Uric Acid	6.5	m mpl/L	135-155
S.Sodium	143		3.5-5.5
S.Potassium	4.1	m mpl/L	97-109
S.Cholride	98.0	meq/L	
S.Calcium	8.2	mg%	8.5-10.5
O. Calciulii			



M.D. Pathologist (BHU)

Reg. No. : 52264

## MD. SHAHNAWAZKHAN

B.M.L.T.

Reg. No.: BR1822



Call: 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Date: 24/06/2023

Ref. by Dr : AMAR JYOTI HOSPITAL

Sex M Age: 37Y

#### LIPID PROFILE

TEST	RESULTS	UNIT	REFERENCE RANGE
S.Trigiyceride	115	mg%dL	10-170
Total Cholesterol	185	mg%dL	130-200
H D.L.Cholesterol	43	mg%dL	40-75
L. D.H. Cholesterol	142	mg%dL	80-120
TC/HDL Cholesterol	4.30	Ratio	3.0-5.0
LDL/HDL	3.30	Ratio	1.5-3.5
V.L.D.L Cholesterol	23	mg%dL	07-30



M.D. Pathologist (BHU)

Reg. No. : 5226

## MD. SHAHNAWAZKHAN

B.M.L.T.

Reg. No.: BR1822



Address : Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134 Call : 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Date: 24/06/2023

Ref. by Dr: AMAR JYOTI HOSPITAL

Sex M Age: 37Y

#### **BLOOD GLUCOSE EXAMINATION**

TEST	RESULTS	<u>UNIT</u>	REFERENCE RANGE
Fasting Blood Sugar	85.0	mg/dl	70-110
2Hrs After Lunch (PP)	105	mg/dl	80-140



M.D. Pathologist (BHU)

Reg. No. : 5226

### MD. SHAHNAWAZKHAN

B.M.L.T.

Reg. No.: BR1822



Address : Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134 Call : 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

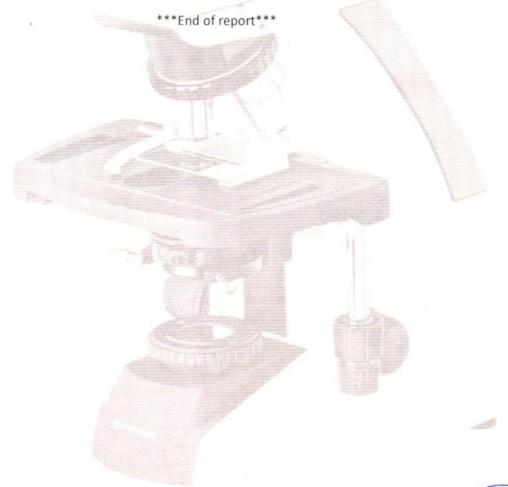
Date: 24/06/2023

Ref.by Dr : AMAR JYOTI HOSPITAL

Sex M Age: 37Y

#### Report on Blood Examination

TEST Blood Group Rh	RESULTS 'B' Positive	<u>UNIT</u>	REFERENCE RANGE
HbA1c(HPLC)	4.93	%	5.7-6.4
Average Blood Glucose(ABG	s): 94.73	mg/dL	90-120





#### DR. SASHIBHUSHAN M.D. Pathologist (BHU) Reg. No. : 5226

MD. SHAHNAWAZKHAN

B.M.L.T. Reg. No. : BR1822



Address: Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134

Call: 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Date: 24/06/2023

Ref. by Dr: AMAR JYOTI HOSPITAL

Sex M Age: 37Y

Report on E	Blood	Examinat	ion
-------------	-------	----------	-----

TEST	RESULTS	UNIT	REFERENCE RANGE
T3, Total	1.35	ng/mL	0.80-2.00
T4, Total	9.79	ng/mL	4.87-13.72
TSH	2.86	μIU/mL	0.35-4.94





#### DR. SASHIBHUSHAN M.D. Pathologist (BHU) Reg. No.: 52264

## MD. SHAHNAWAZKHAN

B.M.L.T.

Reg. No.: BR1822



Address: Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai, Bihar-851134

Call: 8877770366, 8873831650

Patient Name: SANDEEP KR ROSHAN

Date: 24/06/2023

Ref.by Dr : AMAR JYOTI HOSPITAL

Sex M Age: 37Y

URINE REPORT

PHYSICAL EXAMINATION:

QUANTITY: 05ml

COLOUR : Straw

APPEARANCE: Hazy

PH

: 6.1

DEPOSITS: Present

REACTION: Acidic

SP.Gravity :1.015

CHEMICAL EXAMINATION:

PROTEIN

BILE PIGMENT: Absent

UROBILINOGEN: Absent

NITRITE:

Neagtive

SUGAR :

Nil

BILI SALT: Absent

KETONE BODIES: Absent

MICROSCOPIC EXAMINATION:

EPTHELIAL CELL: 1-2/hpf

PUS CELL

2-3/hpf

CASTS

Absent

BACTERIA

Absent

RBC:

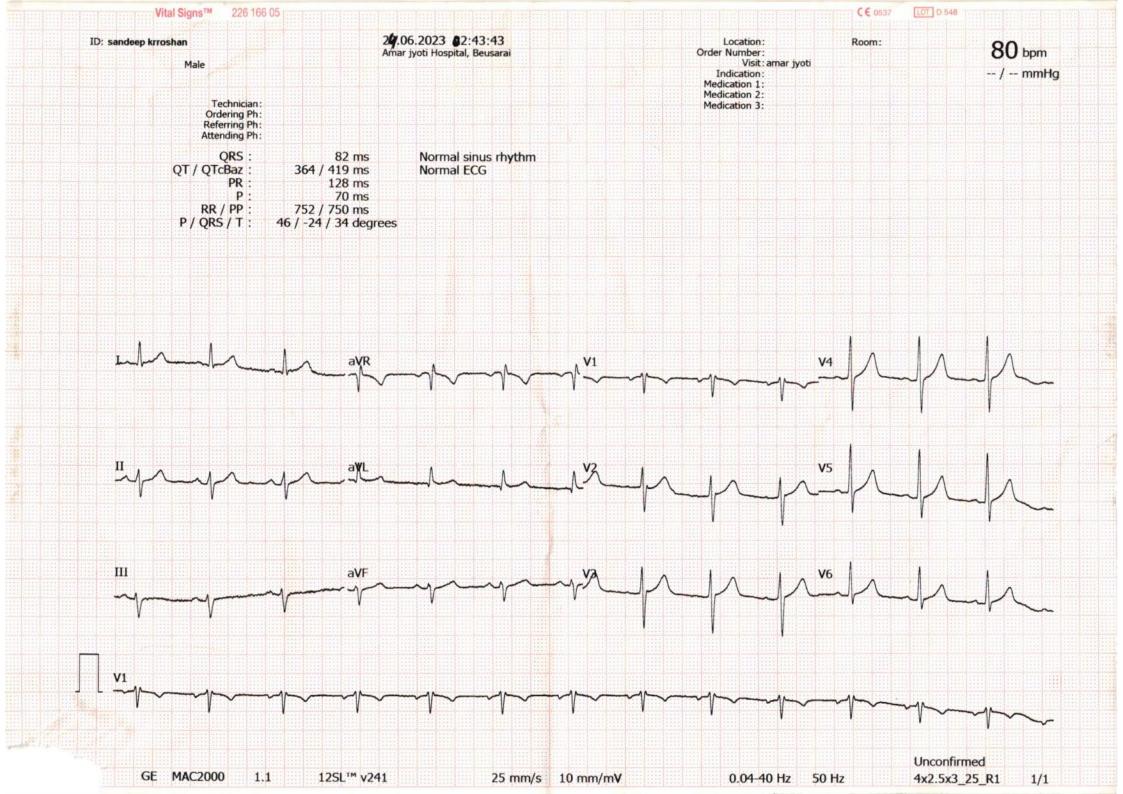
Absent

Crystals: Absent

YEAST: Absent

TRICHOMONAS: Absent







# AMAR JYOTI HOSPITAL

# A Multi Speciality Hospital Modern ICU, HDU, OT, Dialysis Facility

E-mail: amarjyotihospitalbgs@gmail.com

Add.: Near Anushka Pvt. ITI, NH-31, Sushil Nagar, Begusarai (Bihar), Call: 8877770366, 8873831650

PATIENT NAME:- SANDEEP KR.ROSHAN

AGE:-37/M

ADDRESS:-MUNGER
DATE:-24/06/2023

#### \*\*USG-ABDOMEN REPORT \*\*

**LIVER:-** liver is normal in size(.cranio cadually- 120mm)no focal or diffuse fatty changes.I.H.D are not dilated P.V is **normal** 

GB: - G.B. is normal in size and volume.no calculus or mass seen in the g.b lumen

C.B.D: C.B.D appear normal .no calculuas seen

PANCREAS: pancreas appear normal.

SPLEEN: spleen is normal in size and echotexture normal

KIDNEY: both kidney are normal in size, no calculus is seen in both kidneys.

U.BLADDER: it is of normal capacity . no calculus or mass seen

PROSTATE: - normal in size

IMPRESSION: - normal study





SANDEEP KUMAR ROSHAN 125 37 CHEST, FRN P->A 24-JUNE AMAR JYOTI HOSPITAL, SUSHIL NAGAR, BEGUSARAI.