



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 JAIN SUNIL
EC NO	103091
DESIGNATION	BRANCH HEAD
PLACE OF WORK	KASNA
BIRTHDATE	10-04-1975
PROPOSED DATE OF HEALTH CHECKUP	12-06-2021
BOOKING REFERENCE NO	21J103091100000620E

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 **09-06-2021** 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).)



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
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
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
General Tests	General Tests
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



બંક ઑફ બરોડા
Bank of Baroda



SUNIL JAIN

103091





भारत सरकार
GOVERNMENT OF INDIA



सुनील जैन
Sunil Jain
जन्म तिथि/DOB: 10/04/1975
पुरुष / MALE



9125 7354 0325

आधार-आम आदमी का अधिकार

DR. D. C. TEWARI
Medical Superintendent
MCI - 1857
Aakash Hospital
90/43, Malviya Nagar,
New Delhi - 110017



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
S/O. पवन कुमार जैन, जी -
2/80, नवीन पार्क, श्याम
पार्क विस्तार, माहिवाबाद,
माहिवाबाद, गाजियाबाद,
उत्तर प्रदेश - 201005

Address
S/O Pawan Kumar Jain, G - 2/80,
Naveen Park, Shyam Park extension,
Sahibabad, Sahibabad, Ghaziabad,
Uttar Pradesh - 201005

9125 7354 0325

Aadhaar-Aam Admi ka Adhikar



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90/43, Malviya Nagar, New Delhi-110017

#011 40501000 (100 Lines), 9871027922

info@aakashhospital.com, www.aakashhospital.com

Name	Mr. SUNIL JAIN	Srl No.	27	Sample Coll.	18/08/202116:07:07
Ref. By	SELF	Age	46 Yrs. Male	Report printing	18/08/202117:06:02
UHID	01	Dep.	BANK OF BAROD	Patient Id	2108180027

Test Name	Result	Unit	Normal Value
<u>COMPLETE HAEMOGRAM</u>			
HAEMOGLOBIN (Hb)	15.4	gm/dl	13.5 - 18.0
TOTAL LEUCOCYTE COUNT (TLC)	4,600	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHIL	63	%	40 - 75
LYMPHOCYTE	30	%	20 - 45
EOSINOPHIL	03	%	01 - 06
MONOCYTE	04	%	02 - 10
BASOPHIL	00	%	0.0 - 1.0
ESR (WESTEGREN'S METHOD)	38	mm/1st hr	0 - 15
R B C COUNT	4.90	Millions/cmm	4.5 - 5.5
P.C.V / HAEMATOCRIT	47.6	%	40 - 54
M.C.V	97.1	fl	80 - 100
M.C.H	31.4	Picogram	27.0 - 31.0
M.C.H.C	32.4	gm/dl	33 - 37
PLATELET COUNT	1.59	Lakh/cmm	1.50 - 4.00
RDW	13.3	FL	11.6 - 14.0

**** End Of Report ****

Page 1

Dr. MEENA METRE
MBBS, MD
CONSULTANT PATHOLOGIST



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Name	Mr. SUNIL JAIN	Srl No.	27	Sample Coll.	18/08/202116:07:07
Ref. By	SELF	Age	46 Yrs. Male	Report printing	18/08/202117:06:05
UHID	01	Dep.	BANK OF BARODA	Patient Id	2108180027

Test Name	Result	Unit	Normal Value
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HAEMATOLOGY

BLOOD GROUP ABO

"B"

RH TYPING

POSITIVE

**** End Of Report ****



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Test Name	Result	Unit	Normal Value
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BIOCHEMISTRY

BLOOD SUGAR FASTING GOD-POD Method	96	mg/dl	70 - 110
BLOOD SUGAR PP GOD-POD Method	152	mg/dl	80 - 140
<u>LIVER FUNCTION TEST (LFT)</u>			
BILIRUBIN TOTAL Diazo Method	0.7	mg/dl	0 - 1.0
CONJUGATED (D. Bilirubin) Diazo Method	0.4	mg/dl	0.00 - 0.25
UNCONJUGATED (I.D. Bilirubin)	0.3	mg/dl	0.00 - 0.70
TOTAL PROTEIN Biuret Method	5.6	gm/dl	6.6 - 8.3
ALBUMIN BCG Method	4.0	gm/dl	3.4 - 4.8
GLOBULIN	1.6	gm/dl	2.3 - 3.5
A/G RATIO	2.5		
SGOT IFCC Method	26	IU/L	0 - 40
SGPT IFCC Method	37	IU/L	0.0 - 41.0
ALKALINE PHOSPHATASE IFCC Method	92	U/L	40.0 - 130.0
GAMMA GT Glupa C Method	37	IU/L	8.0 - 71.0
LFT INTERPRET			



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UHID	01	Dep. BANK OF BARODA	Patient Id	2108180027

Test Name	Result	Unit	Normal Value
BLOOD UREA Urease GLDH Method	21.6	mg /dl	15.0 - 45.0
SERUM CREATININE ENZYMATIC Method	0.8	mg%	0.7 - 1.2
SERUM URIC ACID Uricase-POD Method	6.4	mg%	3.4 - 7.0
BLOOD UREA NITROGEN (BUN)	10	mg%	6.0 - 20.0
<u>LIPID PROFILE</u>			
TRIGLYCERIDES GPO-Method	86	mg/dL	40.0 - 165.0
TOTAL CHOLESTEROL	205	mg/dL	123.0 - 199.0
H D L CHOLESTEROL DIRECT	75	mg/dL	40.0 - 79.4
V L D L	17.2	mg/dL	4.7 - 22.1
L D L CHOLESTEROL CALCULATED	112.8	mg/dL	63.0 - 129.0
TOTAL CHOLESTEROL/HDL RATIO	2.733		0.0 - 4.97
LDL / HDL CHOLESTEROL RATIO	1.504		0.00 - 3.55

INTERPRETATION

TRIGLYCERIDE:- Level > 250mg/dL is associated with an approximately 2-fold greater risk of coronary vascular disease. Elevation of triglycerides can be seen with obesity, medication, fast less than 12 hrs., alcohol intake, diabetes melitus, and pancreatitis.

CHOLESTEROL:- Its fractions and triglycerides are the important plasma lipids in defining cardiovascular risk factors and in the management of cardiovascular disease. Highest acceptable and optimum values of cholesterol values of cholesterol vary with age. Values above 220 mgm/dl are associated with increased risk of CHD regardless of HDL & LDL values.

HDL-CHOLESTEROL:- Level <35 mg/dL is associated with an increased risk of coronary vascular disease



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UHID	01	Dep.	BANK OF BARODA	Patient Id	2108180027

Test Name	Result	Unit	Normal Value
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even in the face of desirable levels of cholesterol and LDL - cholesterol.

LDL - CHOLESTEROL & TOTAL CHOLESTEROL:- Levels can be strikingly altered by thyroid, renal and liver disease as well as hereditary factors. Based on total cholesterol, LDL- cholesterol, and total cholesterol/HDL - cholesterol ratio, patients may be divided into the three risk categories :-

	<u>CHOLESTEROL</u>	<u>LDL-CHOLESTEROL</u>	<u>CHO/HDL RATIO</u>
Acceptable/Low Risk	: < 200 mg/dL	: <130 mg/dL	: < 4.5
Borderline High Risk	: 200-239 mg/dL	: 130-159 mg/dl	: 4.5 - 6.0
High Risk	: > 240 mg /dL	: > 160 mg/dL	: > 6.0

APO A1 & APO B:- Recent studies have shown that Apolipoproteins A1 & B might be the best indicators of Coronary Artery Disease risk in an individual. Patients who have normal lipid profile may have abnormal Apo A1 & Apo B values. Ratio of Apo B : Apo A1 is >1 in cases of increased CHD risk.

URINE SUGAR FASTING	NIL	NIL
URINE FOR PP	:	NIL

URINE EXAMINATION TEST

URINE EXAMINATION

PHYSICAL EXAMINATION

QUANTITY	20	ml.
COLOUR	PALE YELLOW	Pale yellow
TRANSPARENCY	CLEAR	
SPECIFIC GRAVITY	1.005	1.005-1.030



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UHID	01	Dep.	BANK OF BARODA	Patient Id	2108180027

Test Name	Result	Unit	Normal Value
PH	6.0		6.0-7.5

CHEMICAL EXAMINATION

ALBUMIN	NIL		Nil
REDUCING SUGAR	NIL		Nil
KETON	NIL		
LEUCOCYTE	NIL		
NITRITES	NEGATIVE		
BLOOD	NIL		

MICROSCOPIC EXAMINATION

PUS CELLS	1-2	/HPF	0-5
RBC'S	NIL	/HPF	0-2
CASTS	NIL		Occasional
CRYSTALS	NIL		
EPITHELIAL CELLS	2-3	/HPF	0-3
BACTERIA	NIL		Nil

STOOL EXAMINATION

STOOL ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

COLOUR/ APPEARANCE	BROWNISH
CONSISTENCY	SEMI-FORMED
PUS	NIL
MUCUS	NIL



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Ref. By	SELF	Age 46 Yrs. Male	Report printing	18/08/202117:06:13
UHID	01	Dep. BANK OF BAROD	Patient Id	2108180027

BLOOD NIL

CHEMICAL REACTION

REACTION 7.0

MICROSCOPY EXAMINATION

PUS CELLS NIL /HPF

RBC'S NIL /HPF

OVA NOT SEEN

CYST NOT SEEN

VEG. MATTER ABSENT

OTHERS NIL

**** End Of Report ****

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PATIENT NAME : MR. SUNIL JAIN 01

REG No : 2021087802

UID No : 101437692

REF. BY Dr. : SELF

AGE / SEX : 46 Years / M

REG. DATE/TIME : 18/08/2021

PRINT DATE : 18/08/2021

AREA : SAKET



BIOCHEMISTRY

Investigation

Result

Unit

Biological Reference Interval

HbA1c WHOLE BLOOD (HPLC)

4.80

%

4.8 - 5.9

CLINICAL EVALUATION:

RECOMMENDED DCCT NGSP GUIDELINES FOR HbA1c LEVELS :

Normal : 4.8 % - 5.9 %

Target for diabetics : < 7 %

Therapeutic action required : > 8 %

-----END OF REPORT-----



Sherry Khanna

Dr. Sherry Khanna
DNB(Pathology)
Head-Lab



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PATIENT NAME : MR. SUNIL JAIN 01 AGE / SEX : 46 Years / M
REG No : 2021087802 REG.DATE/TIME : 18/08/2021
UID No : 101437692 PRINT DATE : 18/08/2021
REF. BY Dr. : SELF AREA : SAKET



HORMONE

<u>Investigation</u>	<u>Result</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
T3 SERUM (CLIA)	1.63	nmol/L	0.92 - 2.79
T4 SERUM (CLIA)	121.00	nmol/L	58.1 - 140.6
TSH SERUM (CLIA)	4.74	uIU/ml	0.35 - 5.5

Remarks :

(1) 4.2 to 15 uIU/mL - Correlate clinically as physiological and other factors may falsely elevate TSH level. (2) TSH Values may be transiently altered because of non thyroidal illness. (3) Some drugs may decrease TSH values, e.g., L-dopa, Glucocorticoids. (4) Some drugs may increase TSH values, e.g., Iodine, Lithium, Amiodarone. Abbreviations.

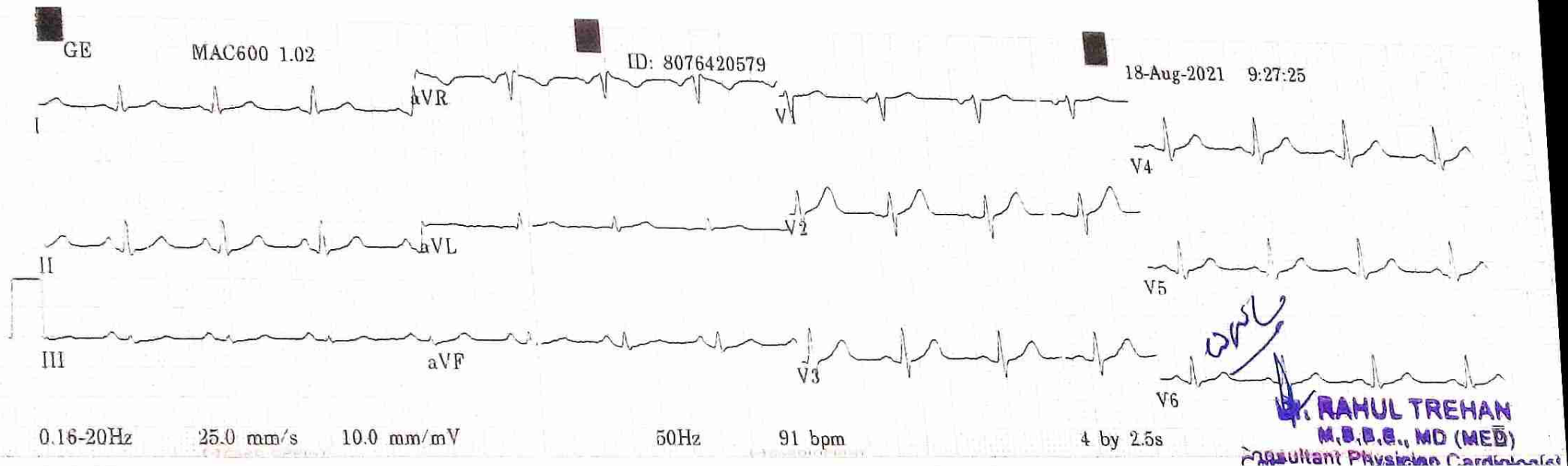
PROSTATIC SPECIFIC ANTIGEN CLIA (TOTAL) , SERUM 0.32 ng/ml 0 - 4

NOTE: The prostate-specific antigen (PSA) values should be interpreted in accordance with current clinical guidelines for defining biochemical recurrence following radical prostatectomy (e.g., The 2013 American Urological Association (AUA) Guidelines or the 2015 European Association of Urology (EAU)). These guidelines define biochemical recurrence of prostate cancer as a detectable or rising PSA value post-radical prostatectomy that is ≥ 0.2 ng/mL (ug/L) with a second confirmatory level of ≥ 0.2 ng/mL (ug/L).



Sherry Khanna

Dr. Sherry Khanna
DNB(Pathology)
Head-Lab



DR. RAHUL TREHAN
 M.B.B.S., MD (MED)
 Consultant Physician Cardiologist

ID: 8076420579
 46years Male

SUNIL JAIN

Vent. rate 91 bpm
 QRS duration 86 ms
 QT/QTc 358/440 ms
 PR interval 138 ms
 P duration 100 ms
 RR interval 659 ms
 P-R-T axes 68 39/46

DR. RAHUL TREHAN
 M.B.B.S., MD (MED)
 Consultant Physician Cardiologist

MAC600 1.02 12SL™ v239

R

SUNIL JAIN 46YRS AKH 23113 M CHEST PA 2021-06-18
AAKASH HOSPITAL 90/43, MALVIYA NAGAR, PH-40501000



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info@aakashhospital.com, www.aakashhospital.com

NAME: MR SUNIL JAIN

AGE: 46 Y

SEX: MALE

REF.BY: MEDICAL

DATE: 18.08.21

X RAY NO: 23113

CHEST (PA VIEW)

The diaphragmatic domes have smooth contours, a normal arched shape and occupy a normal position.

The costophrenic angles are clear.

Both lungs are normally aerated and are applied to the chest wall on all sides.


The mediastinum is centered and of normal width.

The cardiac and vascular shadows show a normal configuration.

The thoracic skeleton is symmetrically shaped and the spine is unremarkable.

The soft tissue envelope of chest shows no abnormalities.

IMP: NORMAL STUDY


DR. R. DUGGAL
MD(RADIOLOGY)
DMC-2595

AREA OF EXPERTISE

- Interventions
(Vascular & Nonvascular)
- FNAC

- Biopsy
- Drainages
- Doppler Scans

- 3D & 4D Scans
- Varicose Vein
Laser Treatment





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ECHOCARDIOGRAM REPORT

NAME : MR SUNIL JAIN
AGE/SEX : 46/M
DATE : 18.08.21

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

In device ECG and TDI unavailable.
Poor Echo windows.

MEASUREMENT	VALUE	NORMAL RANGE
AORTIC ROOT DIAMETER	28	20 - 37 mm
AORTIC VALVE OPENING	N	15 - 26 mm
LEFT ATRIAL DIMENSION	31	19 - 40 mm
RV DIMENSION	N	07 - 26 mm
RV THICKNESS	N	03 - 09 mm
LV ED DIMENSION	38	37 - 56 mm
LV ES DIMENSION	23	22 - 40 mm
IVS THICKNESS	ED -12	06 - 10 mm
LVPW THICKNESS	ED -12	05 - 10 mm
IVS LVPW RATION	N	
MITRAL VALVE	Normal in structure and function.	
INDICES OF LV FUNCTION		
LVEF	(60) %	60 +/- 5 %

IMAGING

AREA OF EXPERTISE

- Interventions (Vascular & Nonvascular)
- FNAC
- Biopsy
- Drainages
- Doppler Scans
- 3D & 4D Scans
- Varicose Vein Laser Treatment





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- ❖ LV shows concentric LVH. Normal LV systolic function. No thrombus.
- ❖ LA is normal in size. No clot.
- ❖ RV and RA normal in size. Normal RV function. TAPSE = 22 mm
- ❖ RA normal in size.
- ❖ Mitral valve normal in structure. No MS. No MR.
- ❖ Normal tricuspid & pulmonic valves. No TR detected, RVSP could not be estimated.
- ❖ Aortic valve- tricuspid, normal in structure and mobility. No AR, no AS.
- ❖ Pericardium normal.
- ❖ IVC--- normal in size and collapsing.

RWMA: none

DOPPLER:- Grade I LVDD

MV	E -0.54 m/sec, A -0.8 m/sec, DT -187 msec.	MR	0.4
TV	--	TR	0.4
AV	0.8 m/sec, max PG -2.6 mmhg	AR	0.4
PV	1.0 m/sec, max PG -4.0 mmhg	PR	0.4

COLOUR FLOW MAPPING: Normal

FINAL IMPRESSION:-

- ❖ Concentric LVH
- ❖ Grade I LVDD
- ❖ No RWMA
- ❖ Normal LV systolic function.
- ❖ No LV clot, Vegetation, pericardial effusion.

DR. Mohit S Tandon
MD, Medicine
PGPCC, Dip. Advance ECHO
IAE(accredited.)
Consultant Physician and non invasive cardiology.

AREA OF EXPERTISE

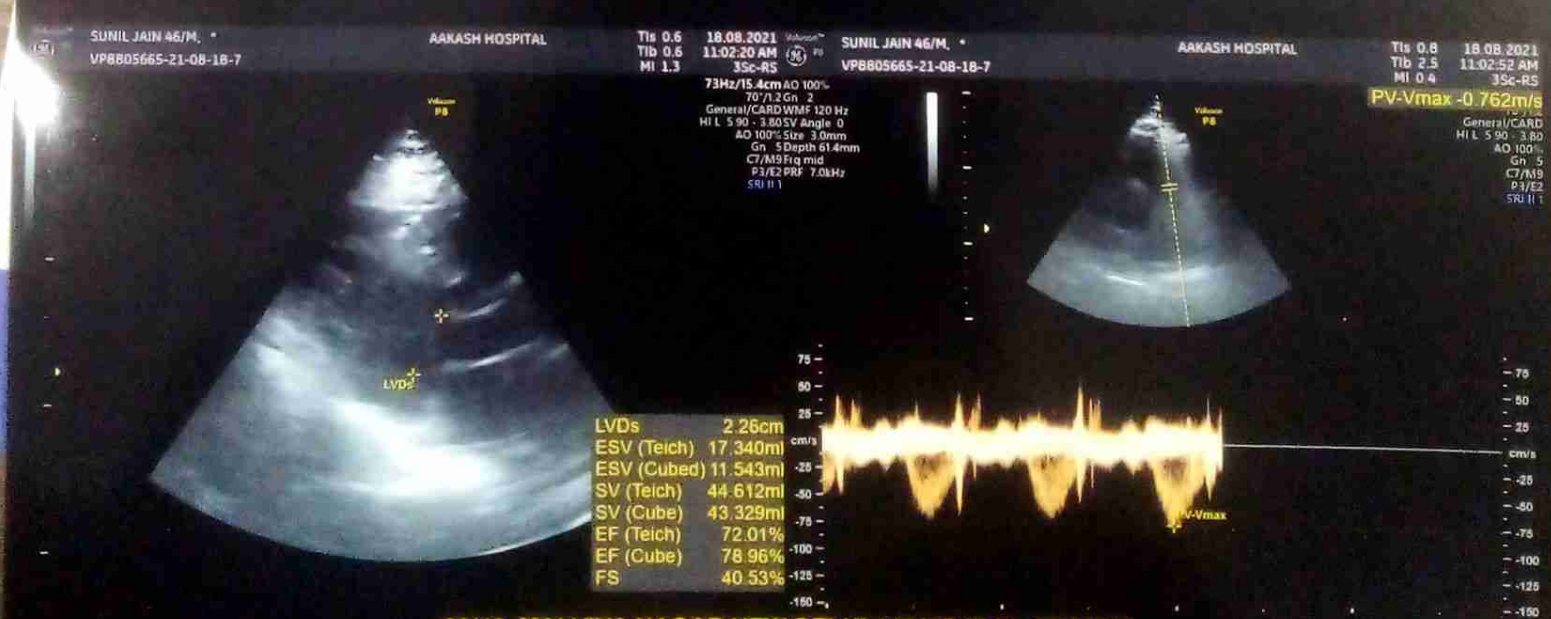
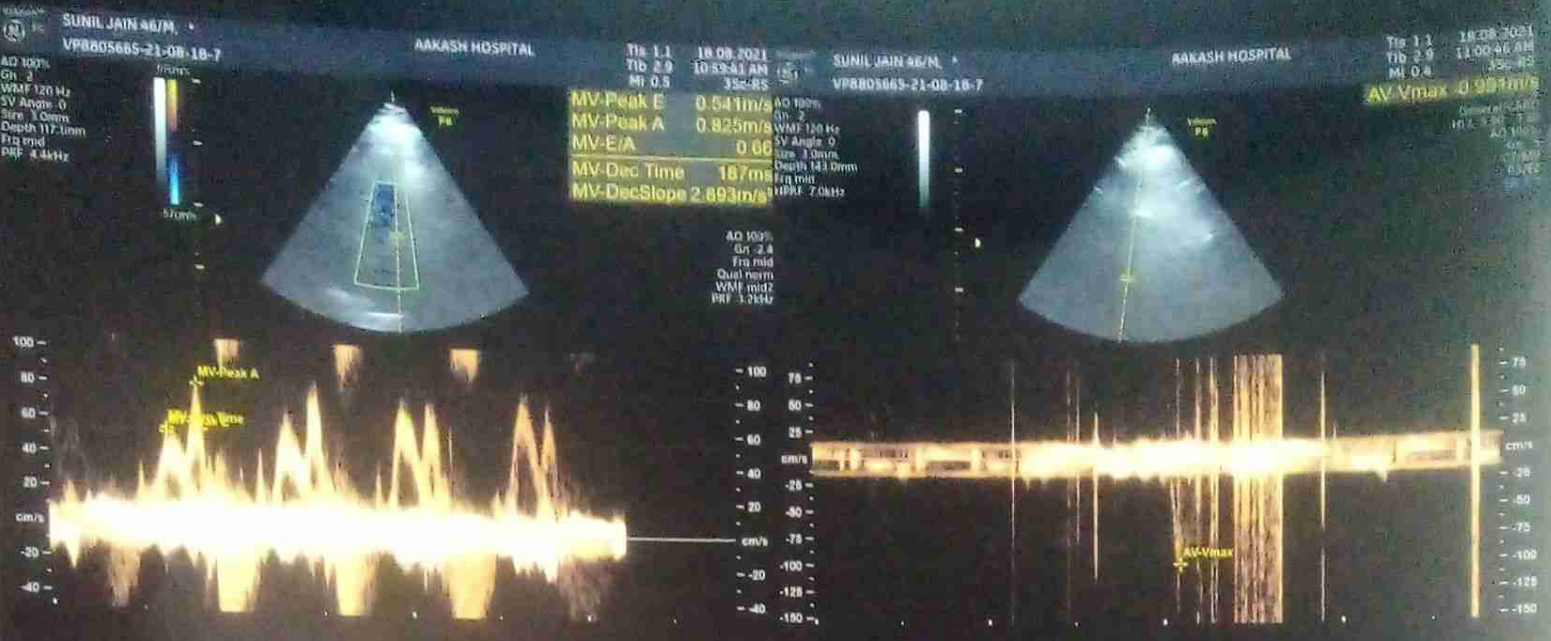
- Interventions
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NAME: MR SUNIL JAIN	AGE: 46 YRS	SEX: MALE
REF.BY: MEDICAL	DATE: 18.08.21	

ULTRASOUND WHOLE ABDOMEN

LIVER: - Normal sized, with homogeneously increased echotexture. No focal lesion seen. Intra hepatic biliary system not dilated. Intra hepatic veins radicles are normal.

GALL BLADDER: - Normal distension. Walls are normal. No calculus or mass lesion seen. Extra hepatic biliary system is not dilated.

PANCREAS: - Normal size and echotexture. No focal lesion seen. Pancreatic duct not dilated.

SPLEEN: - Mildly enlarged size (12.3 cm). No focal lesion seen. Spleno-portal axis is normal.

KIDNEYS: - Both kidneys normally identified in the respective renal fossae. They demonstrate normal size and cortical echotexture. Corticomedullary differentiation well made out with a normal renal parenchymal thickness. No evidence of calculus or hydronephrosis seen on both side.
Right kidney measures approx. 10.6 cm in the long axis.
Left kidney measures approx. 10.2 cm in the long axis.

URINARY BLADDER: - Moderately distended. No calculus or diverticulum is seen. Walls are normal. Both UV Junctions are normal.

SEMINAL VESICLES: - Shows normal sonographic appearances.

PROSTATE:- Is normal in size (17.2 cc). Echotexture is normal with no focal lesion. Outline is distinct with no contour bulge.

Retroperitoneum does not show any abnormally enlarged lymph nodes. No free peritoneal fluid or pleural effusion seen. Bowel loops are unremarkable. Both iliac fossae are normal. *Colon is fecal loaded.*

IMPRESSION:

- **Grade-II fatty infiltration of liver. Advice - LFT correlation.**
- **Mild Splenomegaly.**

Kindly correlate clinically.

DR.SALSABEEL.S
DMRD.DNB(RADIOLOGY)
DMC-35954

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- Varicose Vein Laser Treatment



