

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. DIXIT ANSHUL
EC NO.	167821
DESIGNATION	BRANCH HEAD
PLACE OF WORK	AMILIHA
BIRTHDATE	30-09-1989
PROPOSED DATE OF HEALTH CHECKUP	06-01-2023
BOOKING REFERENCE NO.	22M167821100035758E

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 **06-01-2023** 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))



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INDRA DIIIAGNOSSIIICCCENTRE



Add: 24/22, Vrindawaa ib Biswaniik Kaniulik Kimulik Kanggun

Ph: 9235432757,

CIN: U85110DL2000BLEURI8206

Patient Name : Mr.ANSHUL DIXIT - 3229988 Age/Gender : 33 Y 3 M 7 D /M

UHID/MR NO : IKNP.0000022641 : IKNP0058952223 : Dr.MediWheel Knp RægigilsterddDin

Reported

: D66/de/22223111177499

Collected : 06/Jan/2/02028113535151 Received : 06/14/4/02/02/87: 2224:040

: 06/Jan/a/120328919828313 Status : Final Repeptrt

DEPARTMENT OF HAEMATOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 440 PROPE

Test Name	Result	Unit	Bio. Ref. Interval	Method	

Blood Group (ABO & Rh typing) ** , Blood

Blood Group Rh (Anti-D)

Visit ID

Ref Doctor

POSITIVE

Complete Blood Count (CBC) ** , Whole Blood

Haemoglobin

14.20

g/dl

1 Day- 14.5-22.5 g/dl

1 Wk- 13.5-19.5 g/dl 1 Mo- 10.0-18.0 g/dl

3-6 Mo- 9.5-13.5 g/dl 0.5-2 Yr- 10.5-13.5

g/dl

2-6 Yr- 11.5-15.5 g/dl 6-12 Yr- 11.5-15.5 g/dl

12-18 Yr 13.0-16.0

Male- 13.5-17.5 g/dl Female- 12.0-15.5 g/dl TLC (WBC) 8,000.00 4000-10000 /Cu mm **ELECTRONIC IMPEDANCE** DLC Polymorphs (Neutrophils) 68.00 % 55-70 **ELECTRONIC IMPEDANCE** Lymphocytes 23.00 % 25-40 **ELECTRONIC IMPEDANCE** Monocytes 5.00 % 3-5 **ELECTRONIC IMPEDANCE** Eosinophils 4.00 % 1-6 **ELECTRONIC IMPEDANCE** Basophils 0.00 % < 1 ELECTRONIC IMPEDANCE **ESR** Observed 10.00 Mm for 1st hr. Corrected 8.00 Mm for 1st hr. < 9 PCV (HCT) 44.00 % 40-54 Platelet count Platelet Count 2.3 LACS/cu mm 1.5-4.0 **ELECTRONIC** IMPEDANCE/MICROSCOPIC PDW (Platelet Distribution width) 15.70 fL 9-17 ELECTRONIC IMPEDANCE P-LCR (Platelet Large Cell Ratio) 48.10 % 35-60 **ELECTRONIC IMPEDANCE** PCT (Platelet Hematocrit) 0.27 % 0.108-0.282 **ELECTRONIC IMPEDANCE** MPV (Mean Platelet Volume) 11.60 fL 6.5-12.0 **ELECTRONIC IMPEDANCE RBC Count RBC Count** 4.23 Mill./cu mm 4.2-5.5 **ELECTRONIC IMPEDANCE**

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Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757.

CIN: U85110DL2003LC308206



 UHID/MR NO
 : IKNP.0000022641

 Visit ID
 : IKNP0058952223

 Ref Doctor
 : Dr.MediWheel Knp

Registered On : 06/Jan/2023 11:17:49
Collected : 06/Jan/2023 11:35:51
Received : 06/Jan/2023 17:22:40
Reported : 06/Jan/2023 19:28:13

Status : Final Report



MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Took Name							
Test Name	Result	Unit	Bio. Ref. Interval	Method			
Blood Indices (MCV, MCH, MCHC)							
MCV MCH MCHC RDW-CV RDW-SD Absolute Neutrophils Count Absolute Eosìnophils Count (AEC)	95.40 33.60 35.20 12.20 48.80 5,440.00 320.00	fl pg % % fL /cu mm /cu mm	80-100 28-35 30-38 11-16 35-60 3000-7000 40-440	CALCULATED PARAMETER CALCULATED PARAMETER CALCULATED PARAMETER ELECTRONIC IMPEDANCE ELECTRONIC IMPEDANCE			

Print

Dr. Anupam Singh (MBBS MD Pathology)

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Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757,

CIN: U85110DL2003LC308206

Patient Name

: Mr.ANSHUL DIXIT - 322918 : 33 Y 3 M 7 D /M

: IKNP.0000022641 : IKNP0058952223 : Dr.MediWheel Knp

Registered On Collected

: 06/Jan/2023 11:17:49 : 06/Jan/2023 11:35:51

Received : 06/Jan/2023 17:30:55 Reported

: 06/Jan/2023 18:22:02 : Final Report



DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS.

Test Name	Result	Uthinit	BBio Reef I Antervalal	Méthodd	

GLUCOSE FASTING ** , Plasma

Glucose Fasting

Age/Gender

UHID/MR NO

Visit ID

Ref Doctor

97.60

mgédál

<d.000/Normabl

GEODPEDD

100-125 Pre-diabetes

≥ 126 Diabetes

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.

c) I.G.T = Impared Glucose Tolerance.

Glucose PP **

Sample:Plasma After Meal

106.90

mg/dl

<140 Normal

GOD POD

140-199 Pre-diabetes

>200 Diabetes

Interpretation:

a) Kindly correlate clinically with intake of hypoglycemic agents, drug dosage variations and other drug interactions.

b) A negative test result only shows that the person does not have diabetes at the time of testing. It does not mean that the person will never get diabetics in future, which is why an Annual Health Check up is essential.

c) I.G.T = Impared Glucose Tolerance.

GLYCOSYLATED HAEMOGLOBIN (HBA1C) ** , EDTA BLOOD

Glycosylated Haemoglobin (HbA1c) Glycosylated Haemoglobin (HbA1c) Estimated Average Glucose (eAG)	5.80 40.00	% NGSP mmol/mol/IFCC	HPURL(NORFSP)
assimuted Average Glucose (eAG)	119	mg/dl	

Interpretation:

NOTE:-

- · eAG is directly related to A1c.
- An A1c of 7% -the goal for most people with diabetes-is the equivalent of an eAG of 154 mg/dl.
- eAG may help facilitate a better understanding of actual daily control helping you and your health care provider to make necessary changes to your diet and physical activity to improve overall diabetes mnagement.

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Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757.

CIN: U85110DL2003LC308206







DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method	

The following ranges may be used for interpretation of results. However, factors such as duration of diabetes, adherence to therapy and the age of the patient should also be considered in assessing the degree of blood glucose control.

Haemoglobin A1C (%)NGSP > 8 7-8 < 7	mmol/mol / IFCC Unit >63.9 53.0 -63.9 <63.9	eAG (mg/dl) >183 154-183 <154	Degree of Glucose Control Unit Action Suggested* Fair Control Goal**
6-7	42.1 -63.9	126-154	Near-normal glycemia
< 6%	<42.1	<126	Non-diabetic level

^{*}High risk of developing long term complications such as Retinopathy, Nephropathy, Neuropathy, Cardiopathy, etc.

N.B.: Test carried out on Automated G8 90 SL TOSOH HPLC Analyser.

Clinical Implications:

- *Values are frequently increased in persons with poorly controlled or newly diagnosed diabetes.
- *With optimal control, the HbA Ic moves toward normal levels.
- *A diabetic patient who recently comes under good control may still show higher concentrations of glycosylated hemoglobin. This level declines gradually over several months as nearly normal glycosylated *Increases in glycosylated hemoglobin occur in the following non-diabetic conditions: a. Iron-deficiency anemia b. Splenectomy
- c. Alcohol toxicity d. Lead toxicity
- *Decreases in A 1c occur in the following non-diabetic conditions: a. Hemolytic anemia b. chronic blood loss
- *Pregnancy d. chronic renal failure. Interfering Factors:
- *Presence of Hb F and H causes falsely elevated values. 2. Presence of Hb S, C, E, D, G, and Lepore (autosomal recessive mutation resulting in a hemoglobinopathy) causes falsely decreased values.

BUN (Blood Urea Nitrogen) ** Sample:Serum	13.72	mg/dL	7.0-23.0	CALCULATED
Creatinine ** Sample:Serum	0.88	mg/dl	Serum 0.7-1.3 Spot Urine-Male- 20- 275 Female-20-320	MODIFIED JAFFES
Uric Acid ** Sample:Serum	6.10	mg/dl	3.4-7.0	URICASE

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^{**}Some danger of hypoglycemic reaction in Type 1 diabetics. Some glucose intolerant individuals and "subclinical" diabetics may demonstrate HbA1C levels in this area.



Visit ID

Ref Doctor

Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757,

CIN: U85110DL2003LC308206

: IKNP0058952223

: Dr.MediWheel Knp





DEPARTMENT OF BIOCHEMISTRY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Reported

Status

: 06/Jan/2023 18:22:02

: Final Report

Test Name	Result	1	Jnit Bio. Ref. Interv	al Method
				in inetilod
T (WITH GAMMA GT) ** , Serum				
GGOT / Aspartate Aminotransferase (AST)	29.30	U/L	< 35	IFCC WITHOUT PSP
SGPT / Alanine Aminotransferase (ALT)	58.60	U/L	< 40	IFCC WITHOUT PSP
Samma GT (GGT)	97.80	IU/L	11-50	OPTIMIZED SZAZING
Protein	7.52	gm/dl	6.2-8.0	BIRUET
Albumin	4.91	gm/dl	3.8-5.4	B.C.G.
Globulin	2.61	gm/dl	1.8-3.6	CALCULATED
A:G Ratio	1.88		1.1-2.0	CALCULATED
Alkaline Phosphatase (Total)	77.00	U/L	42.0-165.0	IFCC METHOD
Bilirubin (Total)	0.62	mg/dl	0.3-1.2	JENDRASSIK & GROF
Bilirubin (Direct)	0.25	mg/dl	< 0.30	JENDRASSIK & GROF
Bilirubin (Indirect)	0.37	mg/dl	< 0.8	JENDRASSIK & GROF
PID PROFILE (MINI) ** , Serum				
Cholesterol (Total)	235.00		2000	
,	233.00	mg/dl	<200 Desirable	CHOD-PAP
			200-239 Borderline High > 240 High	
DL Cholesteral (Good Cholesteral)	62.30	mg/dl	30-70	DIDECT FAIR ALL
DL Cholesterol (Bad Cholesterol)	128	mg/dl		DIRECT ENZYMATIC
	120	nig/ui	< 100 Optimal 100-129 Nr.	CALCULATED
			Optimal/Above Optimal	
			130-159 Borderline High	
			160-189 High	
			> 190 Very High	
LDL	44.48	mg/dl	10-33	CALCULATED
riglycerides	222.40	mg/dl	< 150 Normal	GPO-PAP
			150-199 Borderline High	
			200-499 High	
			>500 Very High	

Dr. Anupam Singh (MBBS MD Pathology)

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Visit ID

Ref Doctor

Test Name

Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757,

CIN: U85110DL2003LC308206

Patient Name : Mr.ANSHUL DIXIT - 322918

Age/Gender : 33 Y 3 M 7 D /M

UHID/MR NO : IKNP 0000023641

: IKNP.0000022641 : IKNP0058952223 : Dr.MediWheel Knp Registered On Collected

: 06/Jan/2023 11:17:49 : 06/Jan/2023 11:35:51

Received : 06/Jan/2023 11:36:18 Reported : 06/Jan/2023 14:07:08

Status : Final Report



DEPARTMENT OF CLINICAL PATHOLOGY MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name	Result	Unit	Bio. Ref. Interval	Method
RINE EXAMINATION, ROUTINE * , Urine				
Color Specific Gravity Reaction PH Protein	PALE YELLOW 1.025 Acidic (5.0) ABSENT	mg %	< 10 Absent 10-40 (+)	DIPSTICK DIPSTICK
Sugar	ABSENT	gms%	40-200 (+++) 200-500 (++++) > 500 ((+++++) < 0.5 ((++)) 0.5-1_((+++))	DDFSTUSK
Ketone	ABSENT		1-2 (+ ++++) > 2 (+ +++++)	
Bile Salts Bile Pigments	ABSENT ABSENT	mg/dl	0.2-2.81	HINDREHERMISSTRY
Jrobilinogen(1:20 dilution) Microscopic Examination:	ABSENT			
pithelial cells	1-2/h.p.f			MICROSCOPIC
Pus cells BCs	OCCASIONAL ABSENT			EXAMINATION
ast	ABSENT			MICROSCOPIC EXAMINATION
rystals	ABSENT			MICROSCOPIC
thers	ABSENT			EXAMINATION

Dr. Seema Nagar(MD Path)

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Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757.

CIN: U85110DL2003LC308206



Patient Name : Mr.ANSHUL DIXIT - 322918

Age/Gender UHID/MR NO Visit ID

Ref Doctor

: 33 Y 3 M 7 D /M : IKNP.0000022641 : IKNP0058952223 : Dr.MediWheel Knp Registered On Collected

: 06/Jan/2023 11:17:49 : 06/Jan/2023 11:35:51

Received Reported

: 06/Jan/2023 17:10:11 : 06/Jan/2023 17:55:34

Status

: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name Result Unit Bio. Ref. Interval Method

STOOL, ROUTINE EXAMINATION ** , Stool

Color **BROWNISH** Consistency SEMI SOLID Reaction (PH) Acidic (6.5) Mucus ABSENT Blood **ABSENT** Worm **ABSENT** Pus cells OCCASIONAL RBCs **ABSENT** Ova **ABSENT** Cysts ABSENT Others ABSENT

SUGAR, FASTING STAGE ** , Urine

Sugar, Fasting stage

ABSENT

gms%

Interpretation:

(+) < 0.5 (++) 0.5-1.0 (+++) 1-2 (++++) > 2

Skin

Dr. Anupam Singh (MBBS MD Pathology)

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Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757,

CIN: U85110DL2003LC308206

Patient Name Age/Gender

: Mr.ANSHUL DIXIT - 322918

: 33 Y 3 M 7 D /M UHID/MR NO : IKNP.0000022641 Visit ID : IKNP0058952223 Ref Doctor : Dr.MediWheel Knp Registered On Collected

: 06/Jan/2023 11:17:49 : 06/Jan/2023 12:58:48

Received Reported

: 06/Jan/2023 12:59:35 : 06/Jan/2023 14:07:08

Status

: Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

Test Name

Result

Bio. Ref. Interval

Method

SUGAR, PP STAGE * , Urine

Sugar, PP Stage

ABSENT

Interpretation:

(+)< 0.5 gms%

(++)0.5-1.0 gms%

(+++) 1-2 gms%

(+++++) > 2 gms%

Dr. Seema Nagar(MD Path)

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Age/Gender

UHID/MR NO

Visit ID

Ref Doctor

Add: 24/22, Vrindawan Bhawan, Karachi Khana, Kanpur Ph: 9235432757.

CIN: U85110DL2003LC308206

Patient Name



Status

: Final Report



DEPARTMENT OF IMMUNOLOGY

MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

		WINNER OF LEIAIN	ALL DELOW 40 FK	3
Test Name	Result	Unit	Bio. Ref. Interval	Method
THYROID PROFILE - TOTAL **, Serum				
T3, Total (tri-iodothyronine) T4, Total (Thyroxine) TSH (Thyroid Stimulating Hormone)	136.63 8.50 1.28	ng/dl ug/dl μIU/mL	84.61–201.7 3.2-12.6 0.27 - 5.5	CLIA CLIA
Interpretation:				
		0.3-4.5 µIU/n 0.5-4.6 µIU/n 0.8-5.2 µIU/n 0.5-8.9 µIU/n 0.7-27 µIU/n 2.3-13.2 µIU/n 0.7-64 µIU/n 1-39 µIU/ 1.7-9.1 µIU/n	nL Second Trimest L Third Trimest L Adults L Premature L Cord Blood L Child(21 wk - mL Child	ster er 55-87 Years 28-36 Week > 37Week

- 1) Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
- 2) Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
- 3) Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary
- 4) Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- 5) Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
- 6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
- 7) There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
- 8) Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Dr. Anupam Singh (MBBS MD Pathology)

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CIN: U85110DL2003LC308206

Patient Name : Mr.ANSHUL DIXIT - 322918

Age/Gender UHID/MR NO

Visit ID

Ref Doctor

: 33 Y 3 M 7 D /M : IKNP.0000022641 : IKNP0058952223

: Dr.MediWheel Knp

Registered On

: 06/Jan/2023 11:17:50

Collected : N/A

Received : N/A Reported : 06/Jan/2023 11:53:53

Status : Final Report



MEDIWHEEL BANK OF BARODA MALE & FEMALE BELOW 40 YRS

X-RAY DIGITAL CHEST PA *

X- Ray Digital Chest P.A. View

- · Lung fields are clear.
- · Pleural spaces are clear.
- Both hilar shadows appear normal.
- · Trachea and carina appear normal.
- · Heart size within normal limits.
- · Both the diaphragms appear normal.
- · Soft tissues and Bony cage appear normal.

IMPRESSION

* NO OBVIOUS DETECTABLE ABNORMALITY SEEN

*** End Of Report ***

(**) Test Performed at Chandan Speciality Lab.

Result's to Follow:

ECG / EKG, ULTRASOUND WHOLE ABDOMEN (UPPER & LOWER)

Dr Raveesh Chandra Roy (MD-Radio)

This report is not for medico legal purpose. If clinical correlation is not established, kindly repeat the test at no additional cost within seven days.

Facilities: Pathology, Bedside Sample Collection, Health Check-ups, Digital X-Ray, ECG (Bedside also), Allergy Testing, Test And Health Check-ups, Ultrasonography, Sonomammography, Bono Mineral Density (BMD), Doppler Studies, 2D Echo, CT Scan, MRI, Blood Bank, TMT, EEG, PFT, OPG, Endoscopy, Digital Mammography, Electromyography (EMG), Nerve Condition (NCV), Audiometry, Brainstem Evoked Response Audiometry (BERA), Colonoscopy, Ambulance Services, Online Booking Facilities for Diagnostics, Online Report Viewing * 365 Days Open *Facilities Available at Select Location

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