



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 spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	AMITA GUPTA
DATE OF BIRTH	14-11-1964
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	17-06-2021
BOOKING REFERENCE NO.	21J151986100000714S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. GUPTA MANOJ KUMAR
EMPLOYEE EC NO.	151986
EMPLOYEE DESIGNATION	HEAD CASHIER "E" _II
EMPLOYEE PLACE OF WORK	LUCKNOW,MUNSIPULIA_VB
EMPLOYEE BIRTHDATE	10-06-1961

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 **16-06-2021** 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's spouse 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 Département  
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

आयकर विभाग  
INCOME TAX DEPARTMENT



भारत सरकार  
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड  
Permanent Account Number Card

ACRPG2656H

नाम/ Name  
AMITA GUPTA

पिता का नाम/ Father's Name  
RAMESHWAR DAS PURWAR

जन्म की तारीख/ Date of Birth  
14/11/1964

*P Gupta*  
हस्ताक्षर/ Signature



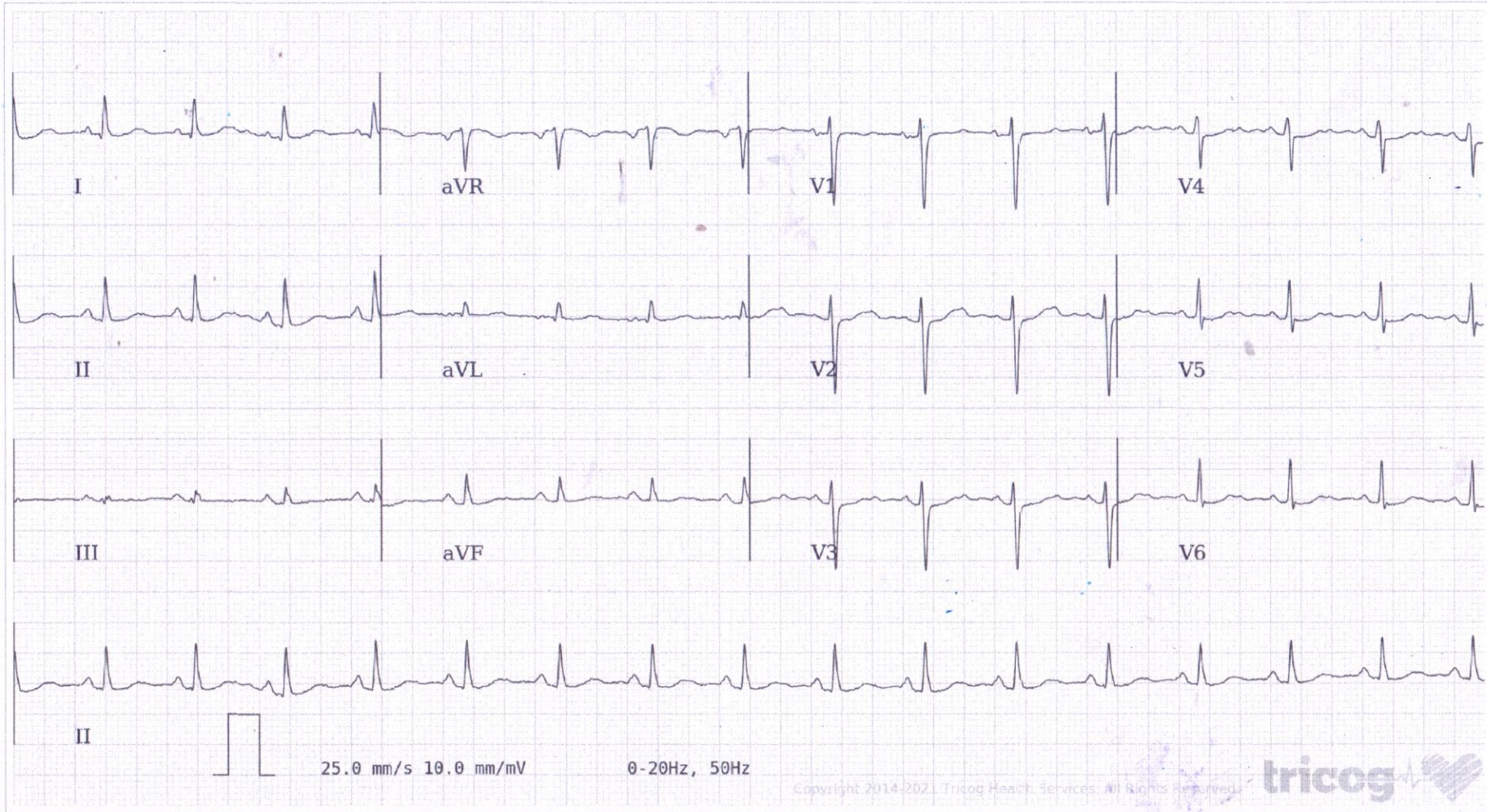
01062017

Indra Diagnostic Centre, Indira Nagar



Age / Gender: 56/Female  
Patient ID: IDC0147062122  
Patient Name: Mrs.AMITA GUPTA

Date and Time: 18th Jun 21 9:32 AM



AR: 101 bpm VR: 101 bpm QRSD: 80 ms QT: 352 ms QTc: 456 ms PRI: 122 ms P-R-T: 64° 44° 44°

Sinus Tachycardia, Nonspecific ST Abnormality. Please correlate clinically.

AUTHORIZED BY

Dr. Charit  
MD, DM: Cardiology

REPORTED BY

Dr Kavitha Girish

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

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