



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	ANUMANDLA KIRAN KUMAR
DATE OF BIRTH	24-10-1983
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	12-03-2022
BOOKING REFERENCE NO.	21M169585100014516S
SPOUSE DETAILS	
EMPLOYEE NAME	MS. VORUGONDA RAJANI
EMPLOYEE EC NO.	169585
EMPLOYEE DESIGNATION	SINGLE WINDOW OPERATOR A
EMPLOYEE PLACE OF WORK	VIJAYAWADA, ONE TOWN
EMPLOYEE BIRTHDATE	30-05-1986

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 **09-03-2022** 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 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



बैंक ऑफ बड़ोदा
Bank of Baroda

नाम वी. रजनी
Name V. Rajani
EC No. 169585



१ २
उपरोक्त प्राधिकारी
Issuing Authority

नाम के समान
Signature of Name

Name : MS. VORUGONDA RAJANI
 Age /Sex : 35 Y / F
 Ref. By : BANK OF BARODA (MW)

Reg. No : 022-2977
 Registration Date : 12-03-2022
 Alt ID : 8897258299

MEDICAL CHECK UP FORM

Physical Examination :

Height (Cms): Weight (KG)
 Body Mass Index (BMI) :
 Pulse Rate : /Min Regular / Abnormal
 B P :
 Skin :
 Nails :
 Oral Hygenic :

Personal History

Smoking : Yes / No
 Alcoholism : Yes / No
 Diabetes : Yes / No
 Hypertension : Yes / No
 Allergy : Yes / No
 Accidents if any
 Surgeries if any

Complaints if any : _____

Family History : _____

Systemic Examination - Abnormality - If Yes Please explain)

* CVS - Yes / No
 * CNS - Yes / No
 * GI Tract - Yes / No
 * Abdomen - Yes / No
 Respiratory Tract - Yes / No

E N T EXAMINATION

Investigations : (N = Normal; R - See Report)

Any abnormality

Diagnosis (if any)

Recommendations / Impression :

PHYSICIAN SIGNATURE & STAMP

Name : MS. VORUGONDA RAJANI
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Ultrasound Scan Of Abdomen

- Liver** Size (133 mm), Shape, contour and echotexture normal. No localized or diffused mass lesions are seen. Intrahepatic vascular system, Portal vein, C.B.D and biliary radicals are normal
- Gall Bladder** Size, shape and wall thickness are normal. No calculus or no mass lesions are seen.
- Spleen** Size : 102 mm, Shape and echotexture normal, No abnormal calcifications seen.
- Pancreas** Head, body and tail echotexture are normal. Pancreatic duct normal. No mass or cystic lesions seen. No calcifications are seen.
- Kidneys** Right kidney Measures : 109 x 45 mm
Left kidney Measures : 113 x 48 mm

Peri renal areas normal, Renal capsule normal, Cortical thickness, Cortical echopattern and corticomedullary differentiation are normal. Pelvicalyceal system normal. No calculus or no mass lesions are seen.
- Urinary Bladder** Minimally distended, Normal wall thickness. No evidence of calculi. No focal lesions.
- Uterus** Size : 64 x 43 X 51 mm. Echotexture normal, No calcification seen. Endometrium thickness
- Ovarie** Both ovaries are normal in size, shape and echotexture.
Right Ovary : 39 x 22 mm. Left Ovary : sub optimal window.
- Others** Aorta and IVC are normal. No lymphadenopathy. No ascitis.
- Impression:** * **NORMAL STUDY**


Dr. A. Zam,
Consultant Radiologist

ADITYA DIAGNOSTICS MRS V RAJINI,
 12/03/22 20:30:18 ADM 2977

MI 0.6 TIS 0.1 4C
 Abdomen



0:1:238 (0:0:54.1 s)

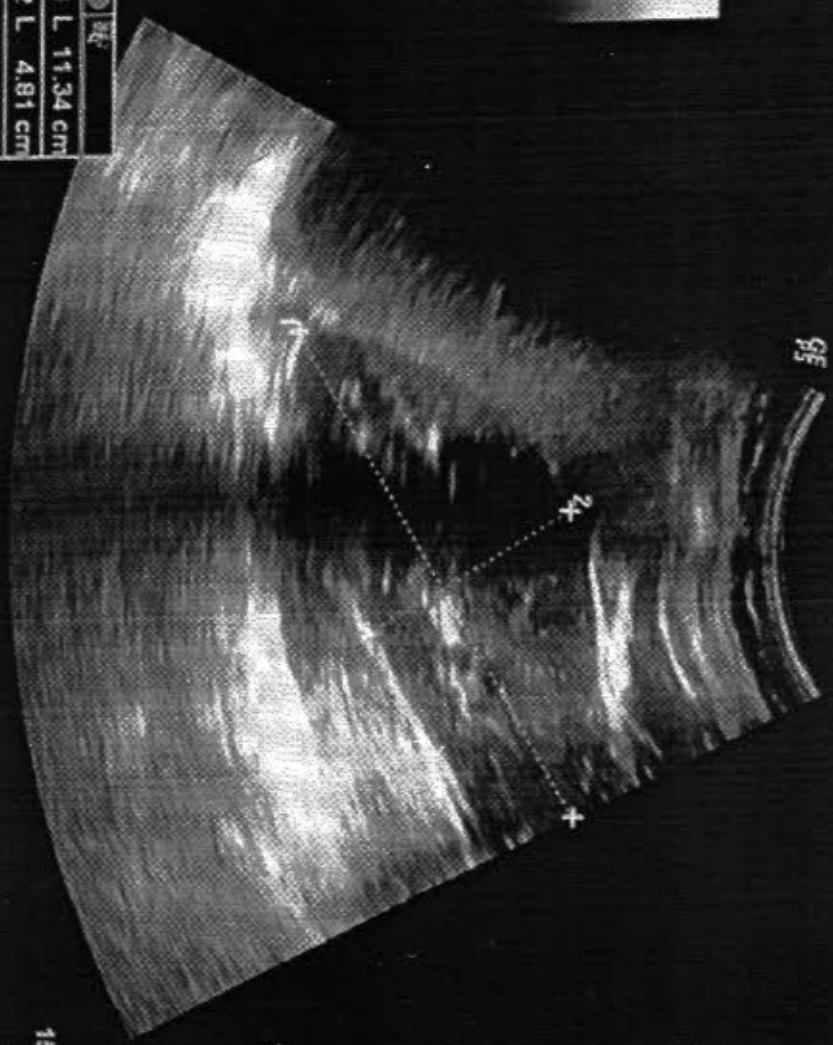
Abdomen

Rt Lt

- [Z] % Stenosis
- [X] Volume
- [C] Angle
- [V] Renal Volume
- [I] A/B Ratio
- [J] Aorta Diameter
- [V] Renal Length

Worksheet Direct Rep.

1 L	11.34 cm
2 L	4.81 cm
÷ d	8.35 cm
L	0.00 cm



B: CHI
 0- Frq 4.0 MHz
 Gn 44
 E/A 2/3
 Map J10/0
 D 16.0 cm
 DR 66
 FR 30 Hz
 AO 100 %

B Mode

12/03/22 20:39:25

Frequency Virtual Curves
 GreenBeam
 Dynamic Range
 Gray Map
 SRI HD Rotation
 Focus Position
 Focus Number
 Menu

Preview



0:1823

(0:0:54.1 s)

Abdomen

Rt Lt

(Z) % Stenosis

(X) Volume

(C) Angle

(V) Renal Volume

(I) A/B Ratio

(J) Aorta Diameter

(/) Renal Length

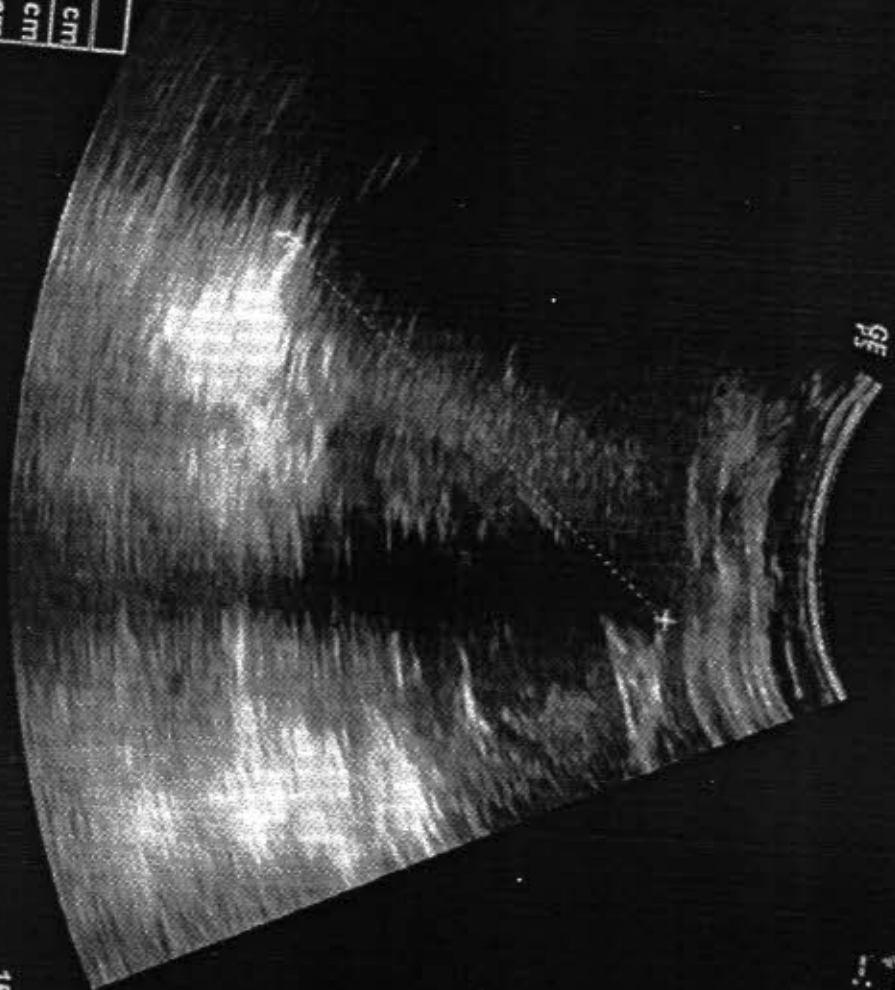
Worksheet Direct Rep.



ADITYA DIAGNOSTICS
12/03/22 20:30:08

MRS V RAJINI,
ADM 2977

1 L	10.24 cm
d	2.95 cm
L	0.00 cm



Mf 0.6 Tis 0.1 4C

Abdomen

B CHI
0-Frq 40 MHz
Gn 44
E/A 2/3
Map J0/0
D 16.0 cm
DR 66
FR 30 Hz
AO 100%

B Mode

12/03/22 20:35:22

Virtual Convex

CrossBeam

Dynamic Range

SRH HD

Rotation

Focus Position

Focus Number

Menu

Preview



0:1888 (0:0:54.1 s)

Abdomen

Rt

Lt

- (Z) % Stenosis
- (X) Volume
- (C) Angle
- (V) Renal Volume
- (I) A/B Ratio
- (.) Aorta Diameter
- (l) Renal Length

Worksheet Direct Rep.

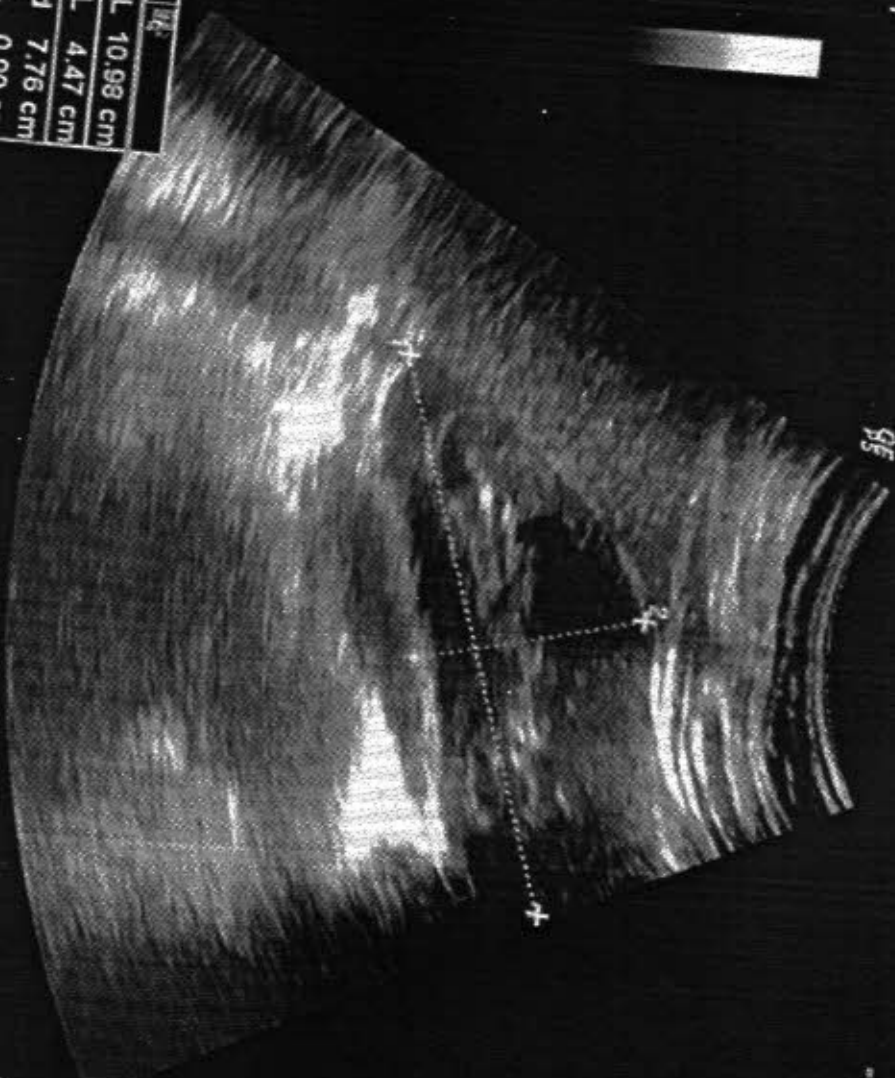


ADITYA DIAGNOSTICS

MRS V RAJINI,

ADM 2977

12/03/22 20:29:26



1 L	10.98 cm
2 L	4.47 cm
d	7.76 cm
L	0.00 cm

MI 0.16 TIS 0.1 AC

Abdomen

B CH1 4.0 MHz
 0-Frq Gn 44
 E/A 2/3
 Map J10/0
 D 15.0 cm
 DR 66
 FR 30 Hz
 AO 100%

Mode B

12/03/22 20:35:19

Virtual Curvex

CurvBeam 2

Dynamic Range

SRI HD

Focus Position

Menu

Focus Number

Rotation

Gray Map



Name : MS. VORUGONDA RAJANI
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X-RAY CHEST PA VIEW

- Hilar regions are normal.
- Both C P angles are free.
- Domes of diaphragms are normal.
- Bony cage is normal
- Cardio thoracic ratio is normal.
- Lung - clear. No Evidence of any Signs of active Tuberculosis

IMPRESSION :

**** NORMAL STUDY**

~~8~~
Radiologist

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Investigation

Result

Normal Ranges

HAEMOGRAM

Investigation

Result

Normal Range

Haemoglobin	11.8 gm%	Male : 14.0 - 18.0 gm % Female : 11.5 - 16.0 gm % Children : 12 - 14 gm%
R B C. mil/cmm	4.2 mil/cmm	Male : 4.5 - 6.5 mil/cmm Female : 4.0 - 5.5 mil/cmm
Packed Cell volume (PCV)	33 %	Male : 40 - 54 % Female : 36 - 49 %
MCV	74 Cubic microns	76 - 96 Cubic microns
MCH	26 Picograms	27- 32 Picograms
MCHC	36 gm%	30 - 36 gm%
WBC (Total)	7,800 cells/cmm	4,000 - 11,000 cells/cmm


DIFFERENTIAL COUNT

Neutrophils (Polymorphs)	67 %	Adults : 40 - 75 % Children : 36- 50 %
Lymphocytes	29 %	Adults : 20 - 40 % Children : 36- 50 %
Eosinophils	02 %	1 - 6 %
Monocytes	02 %	2 - 10 %
Basophils	00 %	00 - 01 %
Platelet count	3,19,000 cells/cmm	1,50,000 - 4,00,000 cells/cmm
ESR 1st Hour	20 mm/hour	Male : 0 - 10 mm / hour Female : 0 - 14 mm / hour
Reticulocyte count	0.6 %	0.5 - 1.0 %

PERIPHERAL SMEAR EXAMINATION

RBC's Morphology	Normocytic / Normochromic
WBC	With in normal limits
Plateletes	Adequate
Abnormal Cells	Nil

Method : Automated Cellcounter&Microscopy


Dr Rajani Gutha, PhD
Chief Biochemist


Verified By


Dr K. Mahesh Kumar MD
Consultant Pathologist



Name : MS. VORUGONDA RAJANI
Age / Sex : 35 Y / F
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Department of Biochemistry

Investigation	Result	Reference Range
Fasting Plasma Glucose * Blood Sugar Method GOD-POD	105 mg/dl	70 - 110 mg/dl
Post Prandial Glucose * (Blood Sugar) Method GOD-POD	121 mg/dl	70 - 160 mg/dl

*End of Report *

Dr Rajini G, PhD
Chief Biochemist

Dr K Mahesh Kumar, MD
Consultant Pathologist

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Department of Biochemistry

Investigation	Result	Reference Range
Blood Urea * Method GLDH	20 mg/dl	10 - 50 mg/dl
Blood Urea Nitrogen * Calculated	9.2 mg/dl	6 - 25.5 mg/dl
Serum Creatinine * Method Enzymatic	0.7 mg/dl	Male : 0.7 - 1.3 mg/dl Female : 0.6 - 1.1 mg/dl New Born 1 - 4 days : 0.3 - 1.0 mg/dl Infant (upto 1year) : 0.2 - 0.4 mg/dl Children : 0.3 - 0.7 mg/dl
Serum Uric Acid * Method:Uricase POD	3.5 mg/dl	Male : 3.5 - 7.2 mg/dl Female : 2.6 - 6.0 mg/dl
	*End of Report *	

Dr Rajini G, PhD
Chief Biochemist

[Signature]
Dr K Mahesh Kumar, MD
Consultant Pathologist

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Department of Biochemistry

Investigation

Result

Reference Range

Lipid Profile

Total Cholesterol * <i>Method CHOD-POD</i>	160 mg/dL	Normal : < 200 mg/dL Borderline High : 200 - 239 mg/dL High : > 240 mg/dL
Serum Triglycerides * <i>Method GPO - POD</i>	70 mg/dL	Normal : < 150 mg/dL Borderline High : 150 - 199 mg/dL High : 200 - 499 mg/dL Very High : =/> 500 mg/dL
H D L Cholesterol * <i>Method Direct CHOD-PAD</i>	46 mg/dL	Low : < 40 High : > 60
L D L Cholesterol * <i>Method Calculated</i>	100 mg/dL	Optimal : < 100 Near Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : =/> 190
V L D L Cholesterol * <i>Method Calculated</i>	14 mg/dL	10 - 30 mg/dL
TC / HDL Cholesterol Ratio * <i>Method Calculated</i>	3.4 Ratio	3.0 - 5.0 Ratio
LDL / HDL Ratio * <i>Method Calculated</i>	2.1 Ratio	1.5 - 3.5 Ratio

*End of Report *

Dr Rajini G. Phd
Chief Biochemist

Dr K. Mahesh Kumar, MD
Consultant Pathologist

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Department of Biochemistry

Investigation	Result	Reference Range
Liver Function Tests		
Total Bilirubin (Method: Walter &Gerarde)	0.31 mg/dl	0.3 - 1.2 mg/dl
Direct Bilirubin (Conjugated) (Method: Walter &Gerarde)	0.11 mg/dl	0.0 - 0.2 mg/dl
Indirect Bilirubin (Unconjugated)	0.2 mg/dl	
Alkaline Phosphatase (Method: GSCC)	68 U/L	Male : 53 - 128 U/L Female : 42 - 98 U/L Children : 54 - 369 U/L
SGPT (Method: IFCC)	16 IU/L	UP TO 55 IU/L
SGOT (Method: IFCC)	28 IU/L	UP TO 55 IU/L
Total Proteins (Method: Biuret)	6.7 gm/dl	6.0 - 8.3 gm/dl
Albumin (Method: BCG)	4 gm/dl	3.5 - 5.2 gm/dl
Globulin (Method: Calculated)	2.7 gm/dl	
A/G Ratio	1.48	
Gamma GT IFCC Method	21 U/L	Male : 10 - 50 U/L Female : 7 - 35 U/L

Lab Incharge

*End of Report *

Dr Rajini G, PhD
 Chief Biochemist

Dr K. Mahesh Kumar, MD
 Consultant Pathologist

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Department of Biochemistry

Investigation

Result

Reference Range

% HbA1c (Glycosylated Haemoglobin)
(Method: HPLC-NGSP Certified)

5.3 %

< 6.0 : Pre Diabetic
6-7 : Good Control
7-8 : Weak Control
> 8.0 : Poor Control

Intpretation :

HbA1c is an indicator of glycemic control. HbA1c represents average glycemia over the past six to eight weeks. Glycation of hemoglobin occurs over the entire 120 day life span of the red blood cell, but with in this 120 days. Recent glycemia has the largest influence on the HbA1c value. Clinical studies suggest that a patient in stable control will have 50% of their HbA1c formed in the month before sampling, 25% in the month before that, and the remaining 25% in months two to four.

Mean Plasma Glucose mg/dl = (HbA1c x 35.6) - 77.3)

Correlation between HbA1c and Mean Plasma Glucose (MPG) is not "perfect" but rather only .81 (1.0 would be a straight line, which has "perfect" correlation...) This means that to predict or estimate average glucose from Hb-A1c or vice-versa is not "perfect" but gives a good working ballpark estimate. Afternoon and evening results correlate more closely to HbA1c than morning results, perhaps because morning fasting glucose levels vary much more than daytime glucose levels, which are easier to predict and control.

*End of Report *

Dr Rajini G, PhD
Chief Biochemist

Dr K. Mahesh Kumar, MD
Consultant Pathologist

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<u>Investigation</u>	<u>Result</u>	<u>Normal Ranges</u>
Trilodothyronine Total (TT3)	0.93 ng/mL	0.60 - 1.81 ng/mL
Thyroxine - Total (TT4)	9.92 mg/dL	3.5 - 12.6 mg/dL
Thyroid Stimulating Hormone(TSH) Method: C.L.I.A	3.50 μ IU/ml	0.35 - 5.50 μ IU/ml

Interpretation

Primary malfunction of the thyroid gland may result in excessive (hyper) or below normal (hypo) release of T3 or T4. In addition, as thyroid function is directly affected by TSH. Diagnostically, T3 concentration is more sensitive to certain thyroid conditions than T4. While T4 levels are a sensitive (and superior) indicator of hypothyroidism, T3 blood levels better define hyperthyroidism. Because T3 concentration in serum changes faster and more markedly than T4, the T3 level is also an excellent indicator of the ability of the thyroid to respond to both stimulatory and suppressive tests. Under conditions of strong thyroid stimulation, the T3 level offers a good.

It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.


Dr Rajani Gutta, PhD
Chief Biochemist


Verified By


Dr K Mahesh Kumar MD
Consultant Pathologist

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Ref. By : BANK OF BARODA (MW)

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Investigation

Result

Complete Urine Examination

Investigation

Result

PHYSICAL EXAMINATION

Colour : Pale Yellow
Apperance : Clear
Reaction : Acidic
Specific Gravity : 1.030

CHEMICAL EXAMINATION

Albumin : Nil
Glucose : Nil

MICROSCOPIC EXAMINATION

Pus Cells : 2 - 3 /HPF
Epithelial Cells : 2 - 3 /HPF
RBC : Nil /HPF
Crystals : Nil
Casts : Nil
Bacteria : Nil
Others : Nil

End of report

Dr K Mahesh Kumar, MD
Consultant Pathologist

Verified by

Dr Rajani Gutha
Chief Biochemist

ADITYA DIAGNOSTICS & RESEARCH LABS ECG REPORT

ID : 1670 Years : 71 Male cm kg / mmHg Race: Unknown Room No.: Department: m:

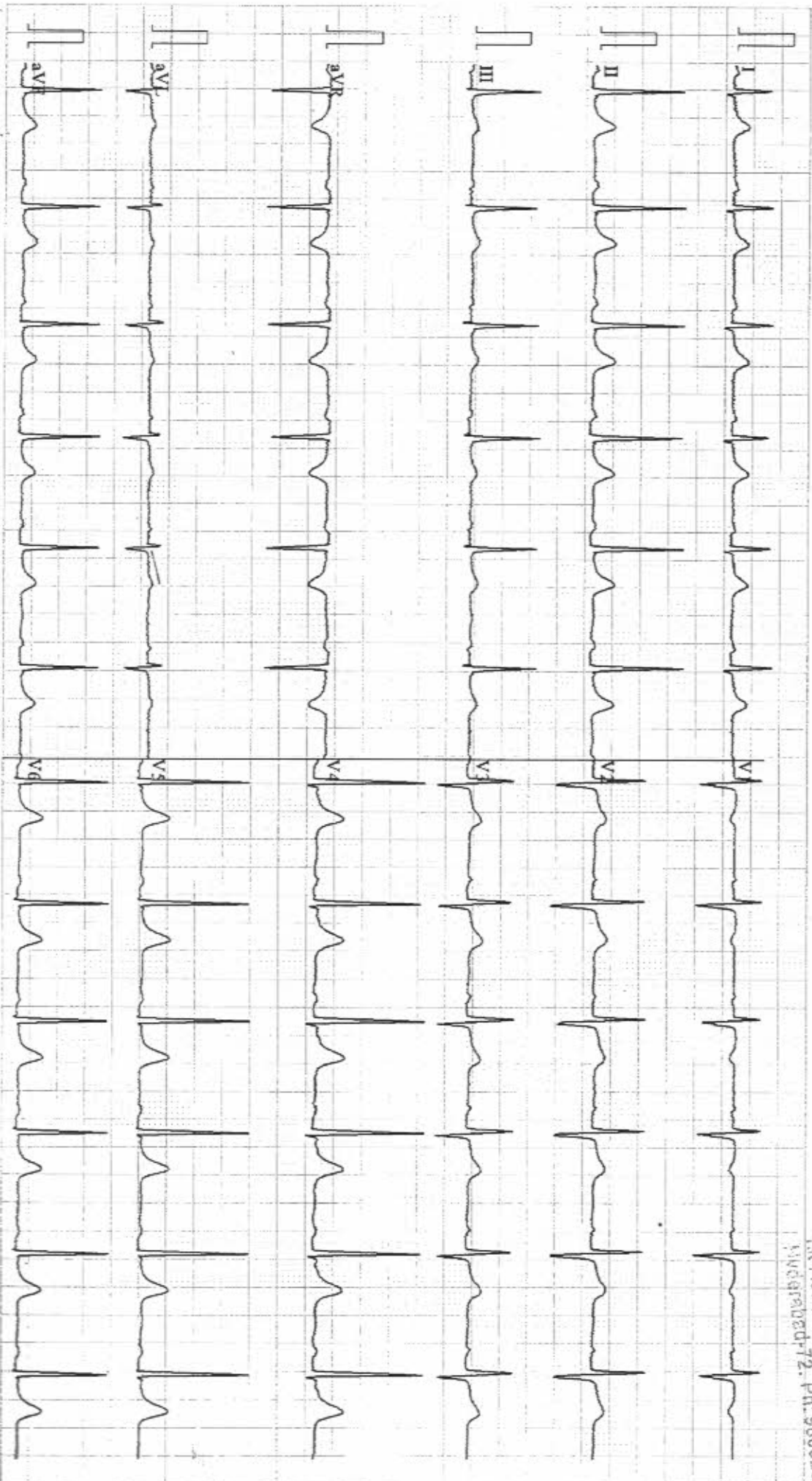
Diagnosis Information:
 Sinus Rhythm
 Normal ECG

HR : 71 bpm
 P : 90 ms
 PR : 170 ms
 QRS : 75 ms
 QT/QTc : 380/415 ms
 P/QRS/T : 43/69/50 °
 RV5/SV1 : 1947/0.622 mV

022-2917 F / 35 Y
 MS VORUGONDA RAJANI
 Aditya Diagnostics 12-03-2022

Ref-Phys. :
 Report Confirmed by:

HARI'S HEART CLINIC
 1st Floor, Mig:321, 4th Road, K...
 Mangaluru-575012. Ph: 9866253971



0.67-100Hz AC50 25mm/s 10mm/mV 2*5s 71 SE-301 V105 SEMIP V1.81

12-03-2022 07:07:05 PM