



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	SONAM KHARI
DATE OF BIRTH	04-02-1993
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	13-05-2023
BOOKING REFERENCE NO.	23J109224100059232S
SPOUSE DETAILS	
EMPLOYEE NAME	MR. MAVI VEDPAL
EMPLOYEE EC NO.	109224
EMPLOYEE DESIGNATION	HEAD PEON
EMPLOYEE PLACE OF WORK	GHAZIABAD
EMPLOYEE BIRTHDATE	02-07-1995

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 **09-05-2023** 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'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

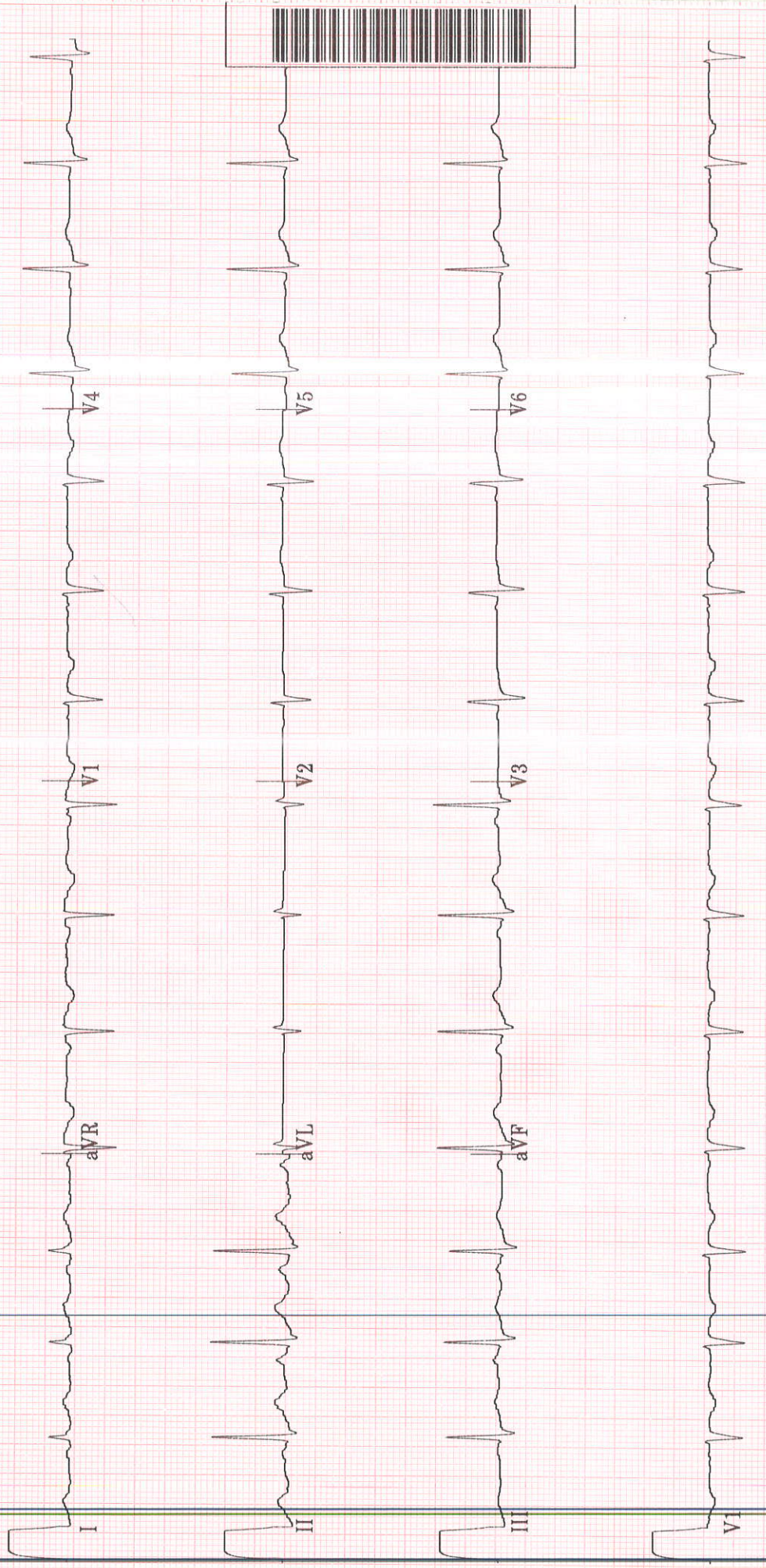
Normal sinus rhythm with sinus arrhythmia
Normal ECG

Vent. rate 84 bpm
PR interval 132 ms
QRS duration 80 ms
QT/QTc 358/423 ms
P-R-T axes 44 71 52

Technician:
Test ind.

Referred by:

Unconfirmed





TMT INVESTIGATION REPORT

Patient Name : Mrs SONAM KHARI	Location : Ghaziabad
Age/Sex : 30Year(s)/Female	Visit No : V000000001-GHZB
MRN No : MH010992452	Order Date : 13/05/2023
Ref. Doctor : HCP	Report Date : 13/05/2023

Protocol : Bruce **MPHR** : 190BPM
Duration of exercise : 5min **85% of MPHR** : 161BPM
Reason for termination : THR achieved **Peak HR Achieved** : 179BPM
Blood Pressure (mmHg) : Baseline BP : 130/78mmHg **% Target HR** : 94%
Peak BP : 146/78mmHg **METS** : 7.0METS

STAGE	TIME (min)	H.R (bpm)	BP (mmHg)	SYMPTOMS	ECG CHANGES	ARRHYTHMIA
RE- EXC.	0:00	113	130/78	Nil	No ST changes seen	Nil
STAGE 1	3:00	163	140/78	Nil	No ST changes seen	Nil
STAGE 2	2:00	179	146/78	Nil	No ST changes seen	Nil
RECOVERY	3:02	110	130/78	Nil	No ST changes seen	Nil

COMMENTS:

- No ST changes in base line ECG.
- No ST changes during exercise and recovery.
- Normal chronotropic response.
- Normal blood pressure response.
- Fair effort tolerance.

IMPRESSION:

Treadmill test is **negative** for exercise induced reversible myocardial ischemia.

Dr. Bhupendra SinghMD, DM (CARDIOLOGY), FACC
Sr. Consultant Cardiology**Dr. Abhishek Singh**MD, DNB (CARDIOLOGY), MNAMS
Sr. Consultant Cardiology**Dr. Sudhanshu Mishra**MD
Cardiology Registrar

Manipal Hospital, Ghaziabad

NH - 24, Hapur Road, Opp. Bahmeta Village, Ghaziabad, Uttar Pradesh - 201 002

P : 0120-616 5666

Page 1 of 2

Manipal Health Enterprises Private Limited

CIN: U85110KA2003PTC033055

Regd. Off. The Annexe, #98/2, Rustom Bagh, Off. HAL Airport Road, Bengaluru - 560 017

P +91 80 4936 0300 E info@manihospitals.com www.manipalhospitals.com

RADIOLOGY REPORT

Name	Sonam KHARI	Modality	US
Patient ID	MH01G992452	Accession No	R5533042
Gender/Age	F / 30Y 3M 6D	Scan Date	13-05-2023 11:48:06
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	13-05-2023 12:24:20

USG ABDOMEN & PELVIS**FINDINGS**

LIVER: appears enlarged in size (measures 154 mm) but normal in shape and shows diffuse increase in liver echotexture, in keeping with diffuse grade I fatty infiltration. Rest normal.

SPLEEN: Spleen is normal in size (measures 87 mm), shape and echotexture. Rest normal.

PORTAL VEIN: Appears normal in size and measures 10.4 mm.

COMMON BILE DUCT: Appears normal in size and measures 4.7 mm.

IVC, HEPATIC VEINS: Normal.

BILIARY SYSTEM: Normal.

GALL BLADDER: not seen (surgically removed ;post cholecystectomy status).

PANCREAS: Pancreas is normal in size, shape and echotexture. Rest normal.

KIDNEYS: Bilateral kidneys are normal in size, shape and echotexture. Cortico-medullary differentiation is maintained. Rest normal.

Right Kidney: measures 104 x 48 mm.

Left Kidney: measures 93 x 42 mm. It shows a concretion measuring 3.2 mm at upper calyx.

PELVI-CALYCEAL SYSTEMS: Compact.

NODES: Not enlarged.

FLUID: Nil significant.

URINARY BLADDER: Urinary bladder is well distended. Wall thickness is normal and lumen is echofree. Rest normal.

UTERUS: Uterus is retroverted, normal in size (measures 72 x 46 x 39 mm), shape and echotexture.

Endometrial thickness measures 4.7 mm. Cervix appears normal and shows few nabothian cysts within with the largest one measuring 6 x 4 mm.

Both ovaries are normal in size and show multiple (15-18) tiny follicles arranged peripherally with central echogenic stroma suggesting bilateral polycystic appearing ovaries.

RIGHT OVARY: measures 39 x 37 x 15 mm with volume 11.6 cc. The largest follicle measures 5 x 4 mm.

LEFT OVARY: measures 32 x 27 x 18 mm with volume 8 cc. The largest follicle measures 6 x 6 mm.

Bilateral adnexa is clear.

BOWEL: Visualized bowel loops appear normal.

IMPRESSION

-Hepatomegaly with diffuse grade I fatty infiltration in liver.

-Left renal concretion.

-Bilateral polycystic appearing ovaries.

ADV: Serum LH/FSH estimation for further evaluation, if clinically indicated.

Recommend clinical correlation.

This document is digitally signed and hence no manual signature is required

Teleradiology services provided by Manipal Hospitals Radiology Group

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

Page 1 of 2

www.manipalhospitals.com

This report is subject to the terms and conditions mentioned overleaf

RADIOLOGY REPORT

Name	Sonam KHARI	Modality	US
Patient ID	MHI010992452	Accession No	R5533042
Gender/Age	F / 30Y 3M 6D	Scan Date	13-05-2023 11:48:06
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	13-05-2023 12:24:20



Dr. Monica Shekhawat, MBBS, DNB,
Consultant Radiologist, Reg No MCI 11 10887

This document is digitally signed and hence no manual signature is required

Teleradiology services provided by Manipal Hospitals Radiology Group

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

Page 2 of 2

www.manipalhospitals.com

This report is subject to the terms and conditions mentioned overleaf

RADIOLOGY REPORT

Name	Sonam KHARI	Modality	DX
Patient ID	MH010992452	Accession No	R5533041
Gender/Age	F / 30Y 3M 6D	Scan Date	13-05-2023 11:25:19
Ref. Phys	Dr. HEALTH CHECK MGD	Report Date	13-05-2023 12:26:17

XR- CHEST PA VIEW

FINDINGS:

LUNGS: Normal.
TRACHEA: Normal.
CARINA: Normal.
RIGHT AND LEFT MAIN BRONCHI: Normal.
PLEURA: Normal.
HEART: Normal.
RIGHT HEART BORDER: Normal.
LEFT HEART BORDER: Normal.
PULMONARY BAY: Normal.
PULMONARY HILA: Normal.
AORTA: Normal.
THORACIC SPINE: Normal.
OTHER VISUALIZED BONES: Normal.
VISUALIZED SOFT TISSUES: Normal.
DIAPHRAGM: Normal.
VISUALIZED ABDOMEN: Normal.
VISUALIZED NECK: Normal.

IMPRESSION:

No significant abnormality noted.
Recommend clinical correlation.



Dr. Monica Shekhawat, MBBS, DNB,
Consultant Radiologist, Reg No MCI 11 10887

This document is digitally signed and hence no manual signature is required

Teleradiology services provided by Manipal Hospitals Radiology Group

MANIPAL HOSPITALS

NH-24, Hapur Road, Near Landcraft Golflinks, Ghaziabad - 201002

Page 1 of 1

www.manipalhospitals.com

This report is subject to the terms and conditions mentioned overleaf

LABORATORY REPORT

Name : MRS SONAM KHARI Age : 30 Yr(s) Sex :Female
 Registration No : MH010992452 Lab No : 32230504803
 Patient Episode : H1800000559 Collection Date : 13 May 2023 19:35
 Referred By : HEALTH CHECK MGD Reporting Date : 14 May 2023 09:33
 Receiving Date : 13 May 2023 20:06

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
------	--------	------	-------------------------------

Specimen Type : Serum

THYROID PROFILE, Serum

T3 - Triiodothyronine (ECLIA)	1.37	ng/ml	[0.70-2.04]
T4 - Thyroxine (ECLIA)	7.16	µg/dl	[4.60-12.00]
Thyroid Stimulating Hormone (ECLIA)	0.601	µIU/mL	[0.340-4.250]

1st Trimester:0.6 - 3.4 micIU/mL
 2nd Trimester:0.37 - 3.6 micIU/mL
 3rd Trimester:0.38 - 4.04 micIU/mL

Note : TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m.and at a minimum between 6-10 pm.Factors such as change of seasons hormonal fluctuations,Ca or Fe supplements,high fibre diet,stress and illness affect TSH results.

* References ranges recommended by the American Thyroid Association

1) Thyroid. 2011 Oct;21(10):1081-125.PMID .21787128

2) <http://www.thyroid-info.com/articles/tsh-fluctuating.html>

Page 1 of 9

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



Dr. Neelam Singal
 CONSULTANT BIOCHEMISTRY

LABORATORY REPORT

Name : MRS SONAM KHARI **Age** : 30 Yr(s) Sex :Female
Registration No : MH010992452 **Lab No** : 202305001542
Patient Episode : H1800000559 **Collection Date** : 13 May 2023 11:07
Referred By : HEALTH CHECK MGD **Reporting Date** : 13 May 2023 16:06
Receiving Date : 13 May 2023 11:57

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
COMPLETE BLOOD COUNT (AUTOMATED)		SPECIMEN-EDTA Whole Blood	
RBC COUNT (IMPEDENCE)	4.55	millions/cumm	[3.80-4.80]
HEMOGLOBIN	11.4 #	g/dl	[12.0-16.0]
Method:cyanide free SLS-colorimetry			
HEMATOCRIT (CALCULATED)	35.2 #	%	[36.0-46.0]
MCV (DERIVED)	77.4 #	fL	[83.0-101.0]
MCH (CALCULATED)	25.1 #	pg	[27.0-32.0]
MCHC (CALCULATED)	32.4	g/dl	[31.5-34.5]
RDW CV% (DERIVED)	15.4 #	%	[11.6-14.0]
Platelet count	172	x 10 ³ cells/cumm	[150-400]
MPV (DERIVED)	12.7		
WBC COUNT (TC) (IMPEDENCE)	8.78	x 10 ³ cells/cumm	[4.00-10.00]
DIFFERENTIAL COUNT (VCS TECHNOLOGY/MICROSCOPY)			
Neutrophils	51.0	%	[40.0-80.0]
Lymphocytes	41.0	%	[17.0-45.0]
Monocytes	6.0	%	[2.0-10.0]
Eosinophils	2.0	%	[2.0-7.0]
Basophils	0.0	%	[0.0-2.0]
ESR	15.0	/1sthour	[0.0-]

LABORATORY REPORT

Name	: MRS SONAM KHARI	Age	: 30 Yr(s) Sex :Female
Registration No	: MH010992452	Lab No	: 202305001542
Patient Episode	: H18000000559	Collection Date	: 13 May 2023 11:07
Referred By	: HEALTH CHECK MGD	Reporting Date	: 13 May 2023 17:55
Receiving Date	: 13 May 2023 11:57		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Glycosylated Hemoglobin			
Specimen: EDTA			
HbA1c (Glycosylated Hemoglobin)	6.0 #	%	[0.0-5.6]
Method: HPLC			
As per American Diabetes Association(ADA)			
HbA1c in %			
Non diabetic adults >= 18years <5.7			
Prediabetes (At Risk)5.7-6.4			
Diagnosing Diabetes >= 6.5			
Estimated Average Glucose (eAG)	126	mg/dl	

Comments : HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycemic control.

ROUTINE URINE ANALYSIS (Semi Automated) Specimen-Urine

MACROSCOPIC DESCRIPTION

Colour	PALE YELLOW	(Pale Yellow - Yellow)
Appearance	SLIGHTLY TURBID	
Reaction[pH]	7.0	(4.6-8.0)
Specific Gravity	1.015	(1.003-1.035)

CHEMICAL EXAMINATION

Protein/Albumin	-	(NEGATIVE)
Glucose	NIL	(NIL)
Ketone Bodies	++	(NEGATIVE)
Urobilinogen	Normal	(NORMAL)

LABORATORY REPORT

Name	: MRS SONAM KHARI	Age	: 30 Yr(s) Sex :Female
Registration No	: MH010992452	Lab No	: 202305001542
Patient Episode	: H1800000559	Collection Date	: 13 May 2023 11:57
Referred By	: HEALTH CHECK MGD	Reporting Date	: 13 May 2023 15:56
Receiving Date	: 13 May 2023 11:57		

CLINICAL PATHOLOGY

MICROSCOPIC EXAMINATION (Automated/Manual)

Pus Cells	6-8 /hpf	(0-5/hpf)
RBC	2-4 /hpf	(0-2/hpf)
Epithelial Cells	4-6 /hpf	
CASTS	NIL	
Crystals	NIL	

Serum LIPID PROFILE

Serum TOTAL CHOLESTEROL	192	mg/dl	[<200] Moderate risk:200-239 High risk:>240
TRIGLYCERIDES (GPO/POD)	118	mg/dl	[<150] Borderline high:151-199 High: 200 - 499 Very high:>500
HDL- CHOLESTEROL	56.0	mg/dl	[35.0-65.0]
Method : Enzymatic Immunoimhibition			
VLDL- CHOLESTEROL (Calculated)	24	mg/dl	[0-35]
CHOLESTEROL, LDL, CALCULATED	112.0	mg/dl	[<120.0] Near/ Borderline High:130-159 High Risk:160-189
Above optimal-100-129			<4.0 Optimal 4.0-5.0 Borderline >6 High Risk
T.Chol/HDL.Chol ratio(Calculated)	3.4		
LDL.CHOL/HDL.CHOL Ratio(Calculated)	2.0		<3 Optimal 3-4 Borderline >6 High Risk

Note:
Reference ranges based on ATP III Classifications.

LABORATORY REPORT

Name	: MRS SONAM KHARI	Age	: 30 Yr(s) Sex :Female
Registration No	: MH010992452	Lab No	: 202305001542
Patient Episode	: H18000000559	Collection Date	: 13 May 2023 11:07
Referred By	: HEALTH CHECK MGD	Reporting Date	: 13 May 2023 15:53
Receiving Date	: 13 May 2023 11:57		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
KIDNEY PROFILE			
Specimen: Serum			
UREA	29.5	mg/dl	[15.0-40.0]
<i>Method: GLDH, Kinatic assay</i>			
BUN, BLOOD UREA NITROGEN	13.8	mg/dl	[8.0-20.0]
<i>Method: Calculated</i>			
CREATININE, SERUM	0.78	mg/dl	[0.70-1.20]
<i>Method: Jaffe rate-IDMS Standardization</i>			
URIC ACID	4.9	mg/dl	[4.0-8.5]
<i>Method:uricase PAP</i>			
SODIUM, SERUM	137.10	mmol/L	[136.00-144.00]
POTASSIUM, SERUM	4.60	mmol/L	[3.60-5.10]
SERUM CHLORIDE	104.8	mmol/l	[101.0-111.0]
<i>Method: ISE Indirect</i>			
eGFR (calculated)	102.3	ml/min/1.73sq.m	[>60.0]
Technical Note			
eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years.			
eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis Icterus / Lipemia.			

LABORATORY REPORT

Name	: MRS SONAM KHARI	Age	: 30 Yr(s) Sex :Female
Registration No	: MH010992452	Lab No	: 202305001542
Patient Episode	: H1800000559	Collection Date	: 13 May 2023 11:07
Referred By	: HEALTH CHECK MGD	Reporting Date	: 13 May 2023 15:54
Receiving Date	: 13 May 2023 11:57		

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
LIVER FUNCTION TEST			
BILIRUBIN - TOTAL <i>Method: D P D</i>	0.34	mg/dl	[0.30-1.20]
BILIRUBIN - DIRECT <i>Method: DPD</i>	0.05	mg/dl	[0.00-0.30]
INDIRECT BILIRUBIN (SERUM) <i>Method: Calculation</i>	0.29	mg/dl	[0.10-0.90]
TOTAL PROTEINS (SERUM) <i>Method: BIURET</i>	7.50	gm/dl	[6.60-8.70]
ALBUMIN (SERUM) <i>Method: BCG</i>	4.51	g/dl	[3.50-5.20]
GLOBULINS (SERUM) <i>Method: Calculation</i>	3.00	gm/dl	[1.80-3.40]
PROTEIN SERUM (A-G) RATIO <i>Method: Calculation</i>	1.51		[1.00-2.50]
AST (SGOT) (SERUM) <i>Method: IFCC W/O P5P</i>	30.00	U/L	[0.00-40.00]
ALT (SGPT) (SERUM) <i>Method: IFCC W/O P5P</i>	29.00	U/L	[14.00-54.00]
Serum Alkaline Phosphatase <i>Method: AMP BUFFER IFCC)</i>	52.0	IU/L	[40.0-98.0]
GGT	18.0		[7.0-50.0]

LABORATORY REPORT

Name : MRS SONAM KHARI Age : 30 Yr(s) Sex :Female
Registration No : MH010992452 Lab No : 202305001542
Patient Episode : H18000000559 Collection Date : 13 May 2023 11:07
Referred By : HEALTH CHECK MGD Reporting Date : 13 May 2023 17:42
Receiving Date : 13 May 2023 11:57

BLOOD BANK

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
------	--------	------	-------------------------------

Blood Group & Rh Typing (Agglutination by gel/tube technique) Specimen-Blood

Blood Group & Rh typing AB Rh(D) Positive

Technical note:

ABO grouping and Rh typing is done by cell and serum grouping by microplate / gel technique.

Page 7 of 9

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



Dr. Alka Dixit Vats
Consultant Pathologist

LABORATORY REPORT

Name : MRS SONAM KHARI Age : 30 Yr(s) Sex :Female
Registration No : MH010992452 Lab No : 202305001543
Patient Episode : H18000000559 Collection Date : 13 May 2023 11:06
Referred By : HEALTH CHECK MGD Reporting Date : 13 May 2023 12:24
Receiving Date : 13 May 2023 11:06

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
GLUCOSE-Fasting Specimen: Plasma GLUCOSE, FASTING (F) Method: Hexokinase	101.0	mg/dl	[70.0-110.0]

Page 8 of 9

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


Dr. Charu Agarwal
Consultant Pathologist

LABORATORY REPORT

Name : MRS SONAM KHARI Age : 30 Yr(s) Sex :Female
Registration No : MH010992452 Lab No : 202305001544
Patient Episode : H18000000559 Collection Date : 13 May 2023 14:54
Referred By : HEALTH CHECK MGD Reporting Date : 13 May 2023 17:06
Receiving Date : 13 May 2023 14:54

BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
PLASMA GLUCOSE Specimen:Plasma GLUCOSE, POST PRANDIAL (PP), 2 HOURS	136.0	mg/dl	[80.0-140.0]

Method: Hexokinase

Note:

Conditions which can lead to lower postprandial glucose levels as compared to fasting glucose are excessive insulin release, rapid gastric emptying, brisk glucose absorption , post exercise

Page 9 of 9

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

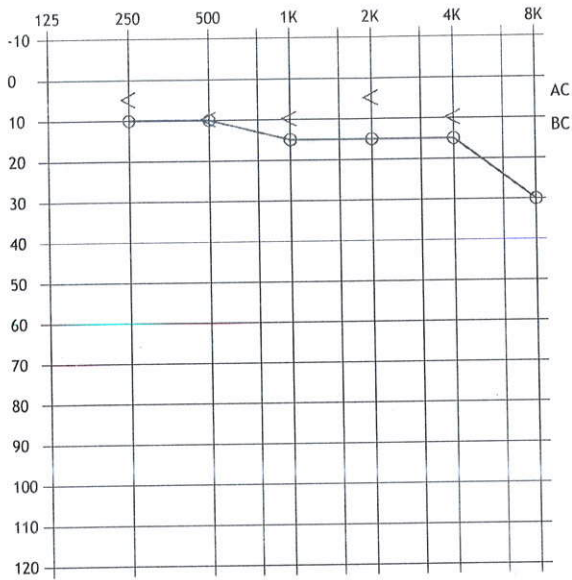
Alka

Dr. Alka Dixit Vats
Consultant Pathologist

Patient Name Sonam, Khari

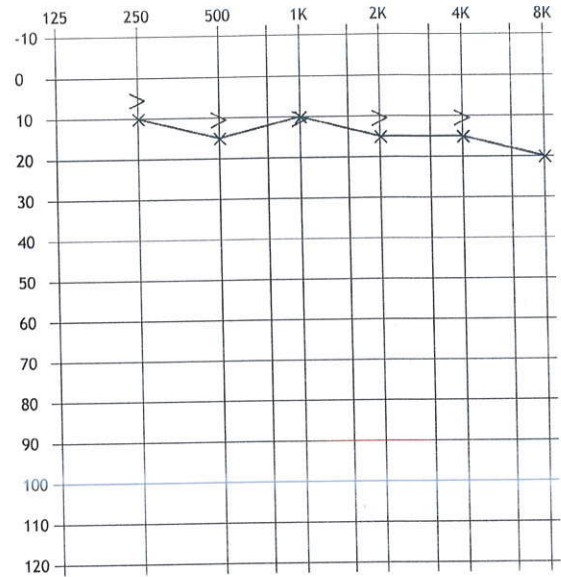
Date of birth 02-02-1993

Test date: 13-05-2023



Legend

R B L
 ○ ×
 < >



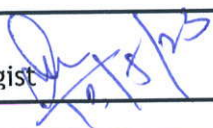
Report comments:

Bilateral Normal hearing Sensitivity

Recommendation:

Aural Hygiene
 Follow up

Name
 Audiologist



13-05-2023