

**Health Check up Booking Confirmed Request(bobE7313),Package Code-  
PKG1000238, Beneficiary Code-34288**

1 message

Mediwheel &lt;santosh@policywheel.com&gt;

Wed, Feb 2, 2022 at 4:12 PM

To: "idc.allahabad.corporate@gmail.com" &lt;idc.allahabad.corporate@gmail.com&gt;

Cc: Mediwheel CC &lt;customercare@mediwheel.in&gt;, Mediwheel CC &lt;mediwheelwellness@gmail.com&gt;

**Mediwheel**  
...Your wellness partner

011-41195959

Email:wellness@mediwheel.in

Hi **Chandan Healthcare Limited,**

Diagnostic/Hospital Location :55/23/1 Kamla Nehru Road, Old Katra, City:Allahabad

We have received the confirmation for the following booking .

**Beneficiary Name** : PKG1000238**Beneficiary Name** : MR. MISHRA NITESH KUMAR**Member Age** : 30**Member Gender** : Male**Member Relation** : Employee**Package Name** : Full Body Health Checkup Male Below 40**Location** : KATRA GULAB SINGH,Uttar Pradesh-230146**Contact Details** : 8544327036**Booking Date** : 02-02-2022**Appointment Date** : 05-02-2022**Instructions to undergo Health Check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

**For Women:**

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.

We request you to facilitate the employee on priority.



बैंक ऑफ बड़ोदा  
Bank of Baroda

ए.सी. क्र. 127276  
E.C. No.

नाम | Name : NITESH KUMAR MISHRA

पद नाम | Designation : JMG/S-1

धारक के हस्ताक्षर | Signature of Holder

01.01.2022

जारी करने की तारीख  
Date of Issue

जारीकर्ता प्रधिकारी  
Issuing Authority



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. MISHRA NITESH KUMAR
EC NO.	12727E
DESIGNATION	BRANCH OPERATIONS
PLACE OF WORK	KATRA GULAB SINGH
BIRTHDATE	01-08-1990
PROPOSED DATE OF HEALTH CHECKUP	05-02-2022
BOOKING REFERENCE NO.	21M127276100110364E

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 **02-02-2022** 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 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))