

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. SHAKTAWAT JITENDRA SINGH
EC NO.	158869
DESIGNATION	BRANCH HEAD
PLACE OF WORK	AHMEDABAD, THALTEJ
BIRTHDATE	24-06-1978
PROPOSED DATE OF HEALTH CHECKUP	26-01-2022
BOOKING REFERENCE NO.	21M158869100009886E

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 **21-01-2022** 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))

બંક ઓફ બરોડા  
For, BANK OF BARODA

મુખ્ય પ્રબંધક/CHIEF MANAGER  
થલતેજ શાખા, અહમદાબાદ.  
THALTEJ BR., AHMEDABAD.



21/1/22



Dr. Jiten M. Shah  
DNB (Resident) FCCS (USA)  
Reg. No.: G-20883

Jitendra Singh  
26/1/2022



Patient's name : SHAKTAWAT JITENDRA SINGH  
Referred by : Self  
Date : 26/01/2022  
Patient's Id : SS478

Age/Sex : 43 Years/Male  
Reg. No : 6873  
Mobile : 9879140299  
Ref ID. :

**Fitness Certificate**

**GENERAL EXAMINATION**

Height (cms) : 172

Weight (kgs) : 75.1

Blood Pressure : 120/70 mmHg

Pulse : 72/Min

No Clubbing/Cynosis/Pallor/Pedel Oedem

Systemic Examination:

Cardio vascular System - S1,S2 Normal, No Murmur

Respiratory system - AEBE

Central Nervous System - No FND

Abdomen - Soft, Non Tender, No Organomegaly



  
Dr Jinen M Shah  
DNB (Medicine) FCCS (USA)

This is an electronically authenticated report.  
Note:((LL-Very Low, L-Low, HH-Very High)

Approved On : 26/01/2022 3:40:00 PM  
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<b>Date</b> : 26/01/2022	<b>Mobile</b> : 9879140299
<b>Patient's Id</b> : SS478	<b>Ref ID.</b> :

**HEMOGRAM REPORT**

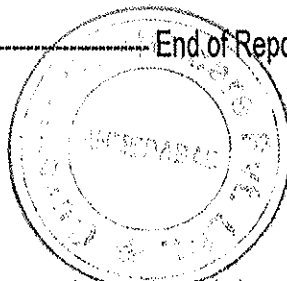
Performed on 5-Part Fully Auto Hematology Analyzer SIEMENS ADVIA 2120i)

Test	Result	Unit	Biological Reference Interval
Sample Type:	EDTA		
<b>Haemoglobin:</b>	13.6	gm/dL	13.5 - 18.0
<b>Total WBC Count:</b>	5300	/microlitre	4000 - 10500
<b>Platelets Count:</b>	211000	/microlitre	1,50,000 - 4,50,000
<b>Differential Count:</b>			
Neutrophils:	57	%	40-80
Lymphocytes:	39	%	20-40
Eosinophils:	02	%	Upto 6
Monocytes:	02	%	2-10
Basophils:	00	%	<1-2
<b>RBC indices:</b>			
RBC Count:	4.97	*10 <sup>6</sup> /microL	4.5 - 5.5
HCT:	42.2	%	40 - 50
MCV:	84.9	fL	83-101
MCH:	27.4	pg	27-32
MCHC:	32.2	%	31.5-34.5
RDW:	13.4	%	11.6 - 14.0
<b>Erythrocytes Sedimentation Rate(ESR):</b> (By AUTO ESR-10, USA)			
ESR 1st Hr:	09	mm	2 - 15 mm in 1Hr.
<b>Thick Smear Preparation:</b>			
Haemoparasite:	Malarial parasites are not seen.		
<b>Peripheral Smear Examination:</b>			
RBCs:	Normocytic & Normochromic.		
Platelet:	Platelet adequate & normal on smear.		

*J. Panchal*  
**Dr. Jaimin Panchal**  
MBBS,MD(Pathology)

-----End of Report-----

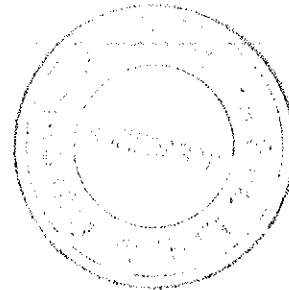
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**GLYCOSYLATED HAEMOGLOBIN (HbA1C) ESTIMATION**

Test	Result	Unit	Biological Reference Interval
Sample Type: EDTA			
Glycosylated Haemoglobin (HbA1C)	5.7	%	Pre-Diabetic (Adult): 5.7 - 6.4 Diabetic (Adult): >6.5 Therapeutic goal for glycemc control: <7.0
Mean Blood Glucose Level (An average of 2 -3 Months)	116.89		

Method : HPLC on D-10, Bio-Rad,USA

**INTERPRETATION:**

- \* Blood sample can be drawn at any time. Fasting is not required.
- \* Reflects average blood sugar levels for the 2 to 3 months period before the test.
- \* Provides information for evaluating diabetic treatment modalities and tracks control of blood glucose of particular value in diabetic children, diabetics in whom the renal threshold for glucose is abnormal, unstable insulin dependent diabetics where blood sugars vary markedly from day to day.
- \* High value in poorly controlled DM and moves towards normal in patients with optimal control.

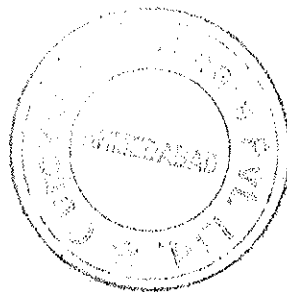
Dr. Jaimin Panchal

MBBS,MD(Pathology)

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**BLOOD GROUP**

Sample Type: EDTA  
ABO Group : "B"  
Rh Type : Positive

**BLOOD GLUCOSE LEVEL**

Test	Result	Unit	Biological Reference Interval
Sample Type:	Flouride		
Fasting Blood Glucose (Hexokinase) Collection Time:	100.4	mg/dl	70-110
Collection Time: Post Prandial Blood Glucose (2 Hrs) (Hexokinase)	90.6	mg/dl	80-140

Tests Performed on Fully Auto DRY Chemistry Analyzer VITROS-250



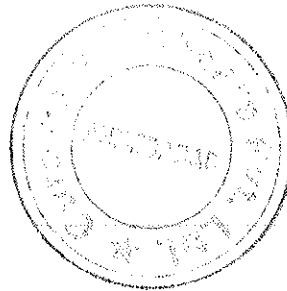
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 Date : 26/01/2022 Mobile : 9879140299  
 Patient's Id : SS478 Ref ID. :

**LIPID PROFILE**

(Performed on Semi Auto Chemistry Analyzer BeneSphera)

Test	Result	Unit	Biological Reference Interval
Sample Type: Fasting Serum			
<b>S.Cholesterol</b> (Oxidase Peroxidase)	264	mg/dL	< 200 Desirable 200-239 Boderline High > 240 High
<b>S.HDLC (Direct)</b> (Phosphotungsstic Acid)	62.2	mg/dL	< 40 Low > 60 High
<b>S.Triglyceride</b> (GPO-POD)	292.0	mg/dL	< 150 mg/dl Normal 150-199 Boderline High 200-499 High > 500 Very High
<b>S.VLDL</b> (Calculated)	58.4	mg/dL	10-40 Normal
<b>S.LDLC</b> (Calculated)	143.4	mg/dL	< 100 Optimal 100-129 Near to above optimal 130-159 Boderline high 160-189 High >190 Very High
<b>S.Cholesterol / HDLC Ratio</b> (Calculated)	4.24		< 4 Normal 4-6 Borderline 6-8 Risklevel > 8 High Risk
<b>S.LDLC / HDLC Ratio</b> (Calculated)	2.31		< 3 Normal 3-4 Borderline 4-6 Risk Level > 6 High Risk
<b>Cholesterol / HDLC Ratio</b> (Calculated)	4.24		< 3.5 Normal
<b>Triglyceride / HDLC Ratio</b> (Calculated)	4.69		< 2 Normal > 4 Risk Level > 6 High Risk
<b>Non HDLC</b> (Calculated)	201.8		< 130 Normal 130 - 159 Near Normal 160 - 189 Borderline 190 - 219 Risklevel > 220 High Risk



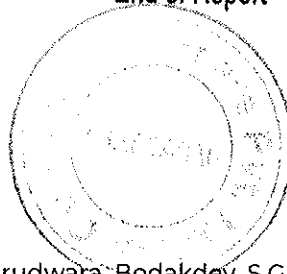
Dr. Jainin Panchal

MBBS, MD(Pathology)

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'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad-380054, Gujarat.



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<b>Patient's Id</b> : SS478	<b>Ref ID.</b> :

**LIVER FUNCTION TEST**

(Performed on Fully Auto DRY Chemistry Analyzer VITROS-250)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>S.Bilirubin</b>			
Total Bilirubin	1.31	mg/dl	0 - 1.2
(Azobilirubin)			
Conjugated Bilirubin	0.24	mg/dl	0 - 0.4
(Dual Wavelength spectrophotometric)			
Unconjugated Bilirubin	1.07	mg/dl	0.0 - 1.1
(Dual Wavelength spectrophotometric)			
<b>S.G.P.T. (ALT)</b>	28.2	IU/L	0 - 49
(Kinetic with Pyridoxal 5-Phosphate)			
<b>S.G.O.T. (AST)</b>	35.1	IU/L	Up to 46
(Kinetic with Pyridoxal 5-Phosphate)			
<b>S.ALP (Alkaline Phosphatase)</b>	187.4	U/L	80 - 306
(4-Nitrophenyl phosphate)			
<b>S.Protein</b>			
Total Protein	6.67	gm/dl	6.3 - 8.2
(Biuret)			
Albumin	4.70	gm/dl	3.5 - 5.2
(BCG)			
Globulin	1.97	gm/dl	1.9 - 3.5
(Calculated)			
Albumin Globulin Ratio	2.39		
<b>S.GammaGT</b>	95.7	IU/L	15-73
(L-Gamma Glutamyl-4-Nitroanalide)			

**SERUM LDH LEVEL**

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>LDH Activity( Lactate Dehydrogenase ):</b>	117.27	U/L	120 - 246
Pyruvate to lactate Kinetic Method			

#Tests Performed on Fully Auto DRY Chemistry Analyzer VITROS-250

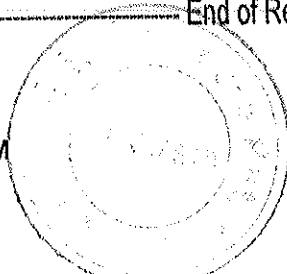
*J. Panchal*

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**RENAL FUNCTION TEST**

(Performed on Fully Auto DRY Chemistry Analyzer VITROS-250)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>S.Urea</b> (Urease with indicator dye)	22.8	mg/dl	Male: 19.6-43.6 Female: 15.2-37.0
<b>S.Creatinine</b> (Enzymatic)	0.96	mg/dL	0.55 - 1.30
<b>S.Uric Acid</b> (Uricase)	4.66	mg/dL	Male: 3.5-8.5 Female: 2.5-6.2



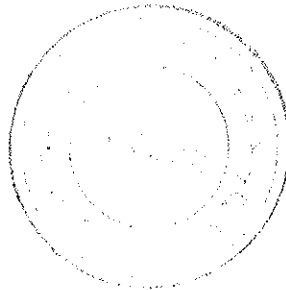
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**THYROID FUNCTION TEST**  
(by CLIA on SIEMENS ADVIA Centaur XP)

Test	Result	Unit	Biological Reference Interval
Sample Type: Serum			
<b>S.T3</b> (Total Triiodothyronine by CLIA)	1.17	ng/mL	1 - 23 Months: 1.17 - 2.39 2 - 12 Years: 1.05 - 2.07 13 - 20 Years: 0.86 - 1.92 Adult: 0.6 - 1.81
<b>S.T4</b> (Total Thyroxine by CLIA)	7.1	mcg/dL	3.2 - 12.6
<b>S.TSH</b> (Thyroid Stimulating Hormone by CLIA)	1.012	microU/mL	0 - 12 Yrs: 0.77 - 5.64 12-19 Yrs: 0.75-3.69 19-100 Yrs: 0.35 -5.50

**Prostate Specific Antigen**  
(Carried out on miniVIDAS, Biomerieux)

Test	Result	Unit	Reference Interval
<b>S.PSA :</b> (Prostate Specific Antigen)	0.250	ng/ml	M : Healthy Male upto 4.00

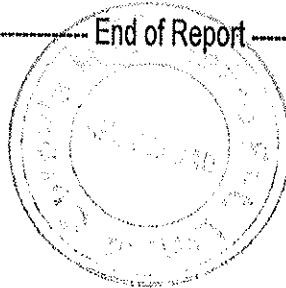
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Dr. Jainmin Panchal  
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<b>Patient's Id</b> : SS478	<b>Ref ID.</b> :

**URINE ROUTINE ANALYSIS**

Sample Type: Fresh Urine

**Physical Examination**

(Naked Eye Observation)

	<b>Result</b>	<b>Biological Ref. Value</b>
Amount	20 ml	>10 ml
Colour	Pale Yellow	Pale Yellow
Appearance	Clear	Clear

**Chemical Examination**

pH (Dip stick )	6.0	4.5-8.0
Specific Gravity (Bromothymol Blue)	1.005	1.002-1.030
Albumin (Tetrabromophenol)	Absent	Absent
Glucose (Specific Glucose Oxidase/Peroxidase)	Absent	Absent
Bilirubin (Azo-coupling reaction)	Absent	Absent
Acetone (Sodium Nitroprusside Reaction)	Absent	Absent
Urobilinogen (Modified Ehrlich Reaction)	Absent	Absent
Nitrites (Diazotization Reaction)	Absent	Absent

**Microscopic Examination**

(After centrifugation at 1500 RPM for 10min./hpf)

Pus Cells(WBCs)	Absent	Absent
Red Blood Cells(RBCs)	Absent	Absent
Epithelial cells	Absent	
T.Vaginals	Absent	Absent
Spermatozoa	Absent	Absent
Casts	Absent	Absent
Crystals	Absent	Absent
Amorphous Material	Absent	Absent

*J. Panchal*

**Dr. Jaimin Panchal**

MBBS,MD(Pathology)

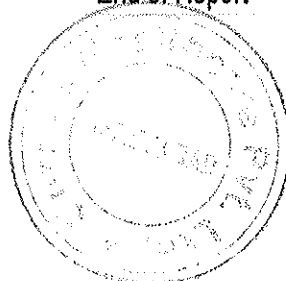
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**Electrocardiogram**

**Findings**

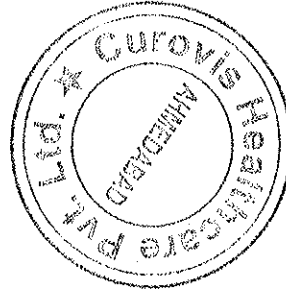
Normal Sinus Rhythm.

Within Normal Limit.

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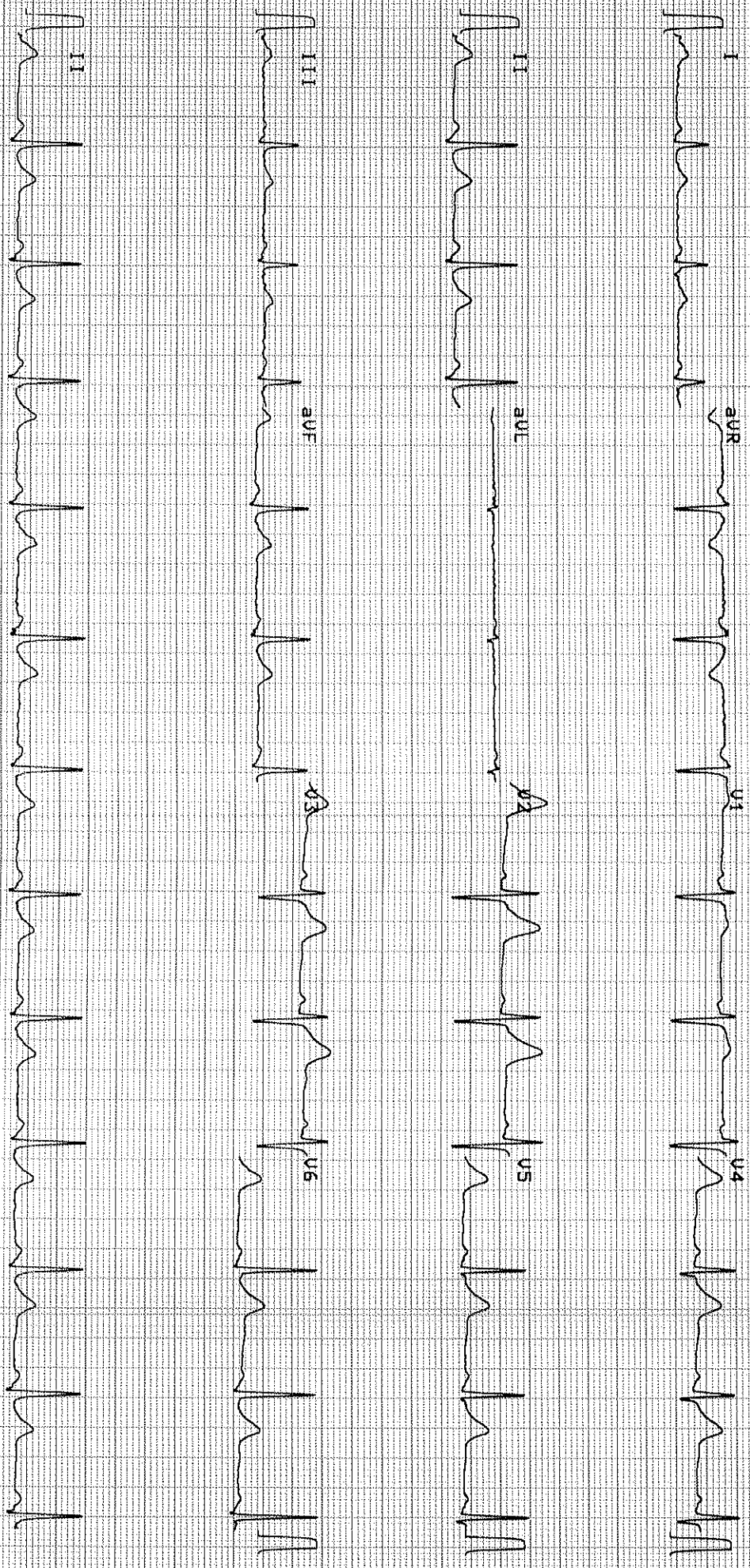
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Dr Jinen M Shah  
DNB (Medicine) FCCS (USA)

Shaktawat  
 Singh  
 21  
 43 years  
 172 cm / 75 kg  
 Male

HR 72/min  
 Paxis: P 44°  
 QRS 62°  
 T 57°  
 Intervals:  
 RR 834 ms  
 P 110 ms  
 PR 126 ms  
 QR5 82 ms  
 QT 356 ms  
 QTc 391 ms (Bazett)  
 P (I1) 0.12 mV  
 S (V1) -0.98 mV  
 R (V5) 1.40 mV  
 Sokol. 2.96 mV  
 10 mm/mV



10 mm/mV  
 25 mm/s

SCHILLER

0.05-25 Hz ES0 S5E S8S 26.01.2022 11:05:56

CURIOUS HEALTHCARE

*Shaktawat Singh*

GT-102plus 1.24 C

039

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**2D Echo Colour Doppler**

**OBSERVATION:**

2 D Echo and color flow studies were done in long and short axis, apical and Sub costal views.

1. Normal LV size. No RWMA at rest.
2. Normal RV and RA. Mild Concentric LVH.
3. All Four valves are structurally normal.
4. Good LV systolic function. LVEF = 60%.
5. Reduced LV Compliance.
6. Trivial TR. Mild MR. No AR.
7. Mild PAH. RVSP = 40 mmHG.
8. Intact IAS and IVS.
9. No Clot, No Vegetation.
10. No pericardial effusion.

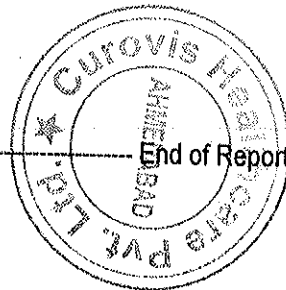
**CONCLUSION**

1. Normal LV size with Good LV systolic function.
2. Mild Concentric LVH . Reduced LV Compliance
3. Trivial TR with Mild PAH. Mild MR. No AR
4. No RWMA at rest.

**This echo doesn't rule out any kind of congenital cardiac anomalies.**

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DNB (Medicine) FCCS (USA)

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**X RAY CHEST PA**

Both lung fields appear clear.

No evidence of any active infiltrations or consolidation.

Cardiac size appears within normal limits.

Both costo-phrenic angles appear free of fluid.

Both domes of diaphragm appear normal.

**COMMENT: No significant abnormality is detected.**

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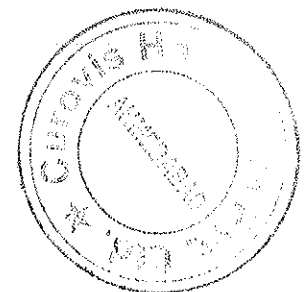
*Atul Patel*

**Dr. Atul Patel**

MD Radio-Diagnosis

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Referred by	: Self	Reg. No	: 6873
Date	: 26/01/2022	Mobile	: 9879140299
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**USG ABDOMEN**

Liver appears normal in size, show homogenous parenchymal echo. No evidence of focal solid or cystic lesion seen.

No evidence of dilatation of intra-hepatic biliary or portal radicals. PV is normal in caliber.

Gall bladder is normally distended. No evidence of calculus or mass seen. Gall bladder wall thickness appears normal.

Pancreas Visualized portion appears normal in size and echopattern. No evidence of focal lesions.

Spleen appears normal in size & normal in echopattern. No evidence of focal lesions.

Both kidneys are normal in size, shape and position. C.M. differentiation on both sides is maintained. No evidence of hydronephrosis, calculus or solid mass on either side.

Urinary bladder contour is normal, No evidence of calculus or mass.

Prostate is normal in size and show homogenous echo, outline is smooth.

No evidence of para-aortic lymph adenopathy.

No evidence of dilated small bowel loops.

No evidence of free fluid in peritoneal cavity.

**COMMENTS :**

**NO SIGNIFICANT ABNORMALITY DETECTED.**

----- End of Report -----

*Atul Patel*  
**Dr. Atul Patel**

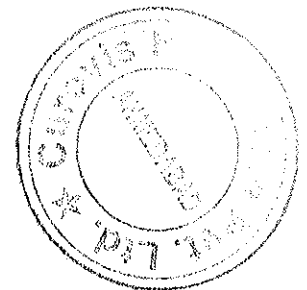
MD Radio-Dignosis

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'B' Block, Mondeal Business Park, Near Gurudwara, Bodakdev, S.G. Highway, Ahmedabad-380054, Gujarat.

**Patient's name** : SHAKTAWAT JITENDRA SINGH  
**Referred by** : Self  
**Date** : 26/01/2022  
**Patient's Id** : SS478

**Age/Sex** : 43 Years/Male  
**Reg. No** : 6873  
**Mobile** : 9879140299  
**Ref ID.** :

**Eye Check - Up**

**RIGHT EYE**

SP: -3.56  
CY: -0.50  
AX: 98

**LEFT EYE**

SP: -3.25  
CY: -0.75  
AX: 80

	<b>Without Glasses</b>	<b>With Glasses</b>
<b>Right Eye</b>	6/36	6/5
<b>Left Eye</b>	6/36	6/5

**Near Vision:** Right Eye -N/6, Left Eye - N/6

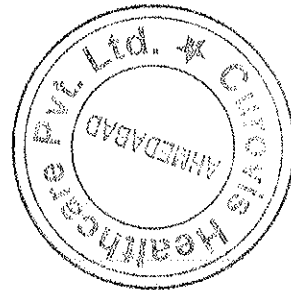
**Fundus Examination:** Within Normal Limits.

**Colour Vision:** Normal

**Comments:** Normal

**Dr.Kejal Patel**  
**MB,DO(Ophth)**

**Approved On** : 26/01/2022 3:23:00 PM  
**Generated On** : 26/01/2022 16:05

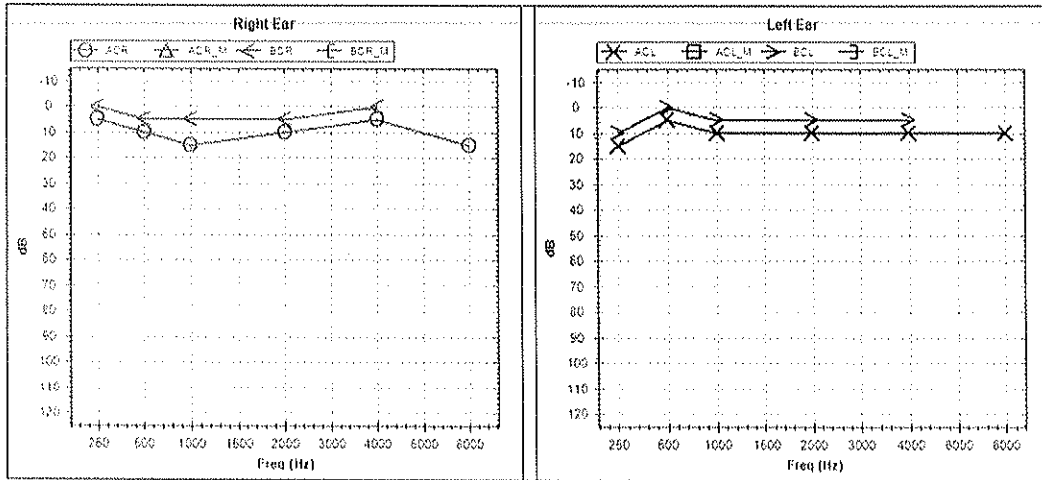


CLIENT NAME: JITENDRASINGH SHAKTAWAT.

AGE:- 43Y / M

DATE:- 26/01/2022.

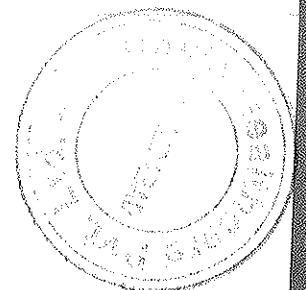
## AUDIOGRAM



EAR	MODE	Air Conduction		Bone Conduction		Colour Code	Threshold In dB	RIGHT	LEFT
		Masked	UnMasked	Masked	UnMasked				
LEFT		□	×	□	>	Blue		11	11
RIGHT		△	○	□	<	Red			
NO RESPONSE: Add ↓ below the respective symbols							SPEECH		

Comments:-

Bilateral Hearing Sensitivity Within Normal Limits.



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