

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. S SIDDAGANGAIAH B |
| EC NO. | 171455 |
| DESIGNATION | DAFTARY |
| PLACE OF WORK | BENGALURU,ZO BENGALURU |
| BIRTHDATE | 20-06-1977 |
| PROPOSED DATE OF HEALTH CHECKUP | 29-03-2022 |
| BOOKING REFERENCE NO. | 21M171455100016508E |

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 **23-03-2022** 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 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/-

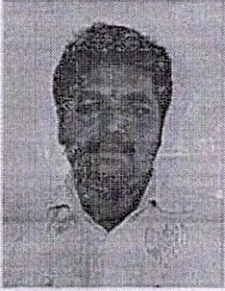
Chief General Manager
HRM Department
Bank of Baroda

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



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Government of India



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Siddagangaiah B S

ಜನ್ಮ ದಿನಾಂಕ / DOB : 20/06/1977

ಪುರುಷ / Male

BS Siddagangaiah

6350 7727 7890



ಆಧಾರ್ - ಶ್ರೀಸಾಮಾನ್ಯನ ಅಧಿಕಾರ

| | | | |
|---------|-----------------------|--------------|------------|
| NAME: | Mr. SIDDAGANGAIAH B S | DATE: | 29-03-2022 |
| AGE: | 45 YEARS | ID. NO: | 182663 |
| GENDER: | MALE | REFERRED BY: | MEDIWHEEL |

USG REPORT - ABDOMEN AND PELVIS

OBSERVATION:

LIVER:

Liver is normal in size (15.2 cm) and shows mild diffuse increase in echotexture. No focal lesion seen. Intrahepatic biliary radicles not dilated. Hepatic & portal veins are normal. CBD is normal.

GALL BLADDER:

Normal in distension. Lumen echo free. Wall thickness is normal.

PANCREAS:

Body and head appears normal. No focal lesion seen. Pancreatic duct not dilated. Tail not visualized.

SPLEEN:

Normal in size (10.4 cm) with normal homogenous echotexture. No focal lesion seen.

RIGHT KIDNEY:

Right kidney measures 10.8 x 5.2 cm with normal echo pattern and cortical thickness.

The shape, size and contour of the right kidney appear normal.

Cortical medullary differentiation is maintained. No evidence of pelvicalyceal dilatation.

No sonological detectable calculi seen.

LEFT KIDNEY:

Left kidney measures 11.2 x 5.8 cm with normal echo pattern and cortical thickness.

There is a small simple cortical cyst measuring 2.6 x 1.8 cm in the lower pole with no evidence of internal septations / solid component.

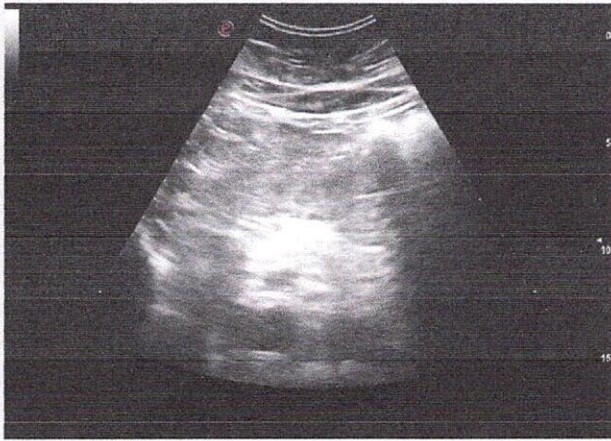
The shape, size and contour of the left kidney appear normal.

Cortical medullary differentiation is maintained. No evidence of pelvicalyceal dilatation.

No sonological detectable calculi seen.



MR SIDDAGANGAIAH B S 45Y M
29 03 2022 12:45:24 PM
RES L G --
TEI D 163 mm XM C11-
P 80% MI 1.1
ABDOMINAL AC2541 MEDICLU



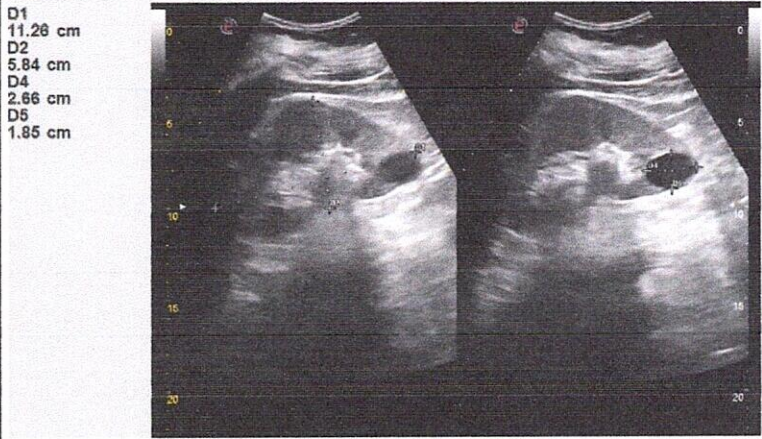
MR SIDDAGANGAIAH B S 45Y M
29 03 2022 12:45:38 PM
RES L G --
TEI D 157 mm XM C11-
P 80% MI 1.1
ABDOMINAL AC2541 MEDICLU



MR SIDDAGANGAIAH B S 45Y M
29 03 2022 12:46:11 PM
RES L G --
TEI D 157 mm XM C11-
P 80% MI 1.1
ABDOMINAL AC2541 MEDICLU



MR SIDDAGANGAIAH B S 45Y M
29 03 2022 12:47:15 PM
RES L G --
TEI D 157 mm XM C11-
P 80% MI 1.1
ABDOMINAL AC2541 MEDICLU



MR SIDDAGANGAIAH B S 45Y M
29 03 2022 12:47:31 PM
RES L G --
TEI D 157 mm XM C11-
P 80% MI 1.1
ABDOMINAL AC2541 MEDICLU



MR SIDDAGANGAIAH B S 45Y M
29 03 2022 12:48:37 PM
RES L G --
TEI D 157 mm XM C11-
P 80% MI 1.1
ABDOMINAL AC2541 MEDICLU



TRANS THORACIC 2D ECHO - DOPPLER STUDY

| | | | |
|---------|-----------------------|--------------|------------|
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| GENDER: | MALE | REFERRED BY: | MEDIWHEEL |

M-Mode


| | | |
|------------------------------------|-----|------|
| AORTA | 27 | mm |
| LEFT ARTIUM | 30 | mm |
| RIGHT VENTRICLE(Diastole) | 18 | mm |
| LVID (Diastole) | 42 | mm |
| LVID (Systole) | 24 | mm |
| INTERVENTRICULAR SEPTUM (Diastole) | 10 | mm |
| L V POSTERIOR WALL (Diastole) | 11 | mm |
| L V MASS | 132 | grms |
| FRACTIONAL SHORTENING | 30 | % |
| EJECTION FRACTION | 60 | % |

DOPPLER / COLOR FLOW

| | | | | |
|-----------------|--------|---------|-------|-------|
| MITRAL VALVE | E- 0.8 | A - 0.6 | m/sec | NO MR |
| AORTIC VALVE | 1.4 | - | m/sec | NO AR |
| TRICUSPID VALVE | E- 0.4 | A - 0.2 | m/sec | NO TR |
| PULMONARY VALVE | 0.8 | - | m/sec | NO PR |



Diagnosics & Speciality Centre

| | | | |
|-------------|-------------------------|--------------------|---|
| NAME | : Mr. SIDDAGANGAIAH B S | MR NO. | : 22031616 |
| AGE/SEX | : 45 Yrs / Male | VISIT NO. | : 152592 |
| REFERRED BY | : | DATE OF COLLECTION | : 29-03-2022 at 09:07 AM |
| | | DATE OF REPORT | : 29-03-2022 at 12:12 PM |
| REF CENTER | : MEDIWHEEL | |  |

| TEST PARAMETER | RESULT | REFERENCE RANGE | SPECIMEN |
|----------------|--------|-----------------|----------|
|----------------|--------|-----------------|----------|

COMPLETE BLOOD COUNT (CBC) WITH ESR

| | | | |
|--|-------------------|-------------------------|--|
| HAEMOGLOBIN <i>Colorimetric Method</i> | 16.0 gm/dL | 13 - 18 gm/dL | |
| HEMATOCRIT (PCV) <i>Calculated</i> | 48.4 % | 40 - 54 % | |
| RED BLOOD CELL (RBC) COUNT <i>Electrical Impedance</i> | 5.5 million/cu.mm | 4.5 - 5.9 million/cu.mm | |
| PLATELET COUNT <i>Electrical Impedance</i> | 2.1 Lakhs/cumm | 1.5 - 4.5 Lakhs/cumm | |
| MEAN CELL VOLUME (MCV) <i>Calculated</i> | 87.6 fl | 80 - 100 fl | |
| MEAN CORPUSCULAR HEMOGLOBIN (MCH) <i>Calculated</i> | 29.0 pg | 26 - 34 pg | |
| MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION (MCHC) <i>Calculated</i> | 33.1 % | 31 - 35 % | |
| TOTAL WBC COUNT (TC) <i>Electrical Impedance</i> | 5950 cells/cumm | 4000 - 11000 cells/cumm | |
| NEUTROPHILS <i>VCS Technology/Microscopic</i> | 56 % | 40 - 75 % | |
| LYMPHOCYTES <i>VCS Technology/Microscopic</i> | 36 % | 25 - 40 % | |
| DIFFERENTIAL COUNT | | | |
| EOSINOPHILS <i>VCS Technology/Microscopic</i> | 03 % | 0 - 7 % | |
| MONOCYTES <i>VCS Technology/Microscopic</i> | 05 % | 1 - 8 % | |
| BASOPHILS <i>Electrical Impedance</i> | 00 % | | |
| ESR <i>Westergren Method</i> | 10 mm/hr | 0 - 15 mm/hr | |

Krishna M.



Lab Seal



Vamseedhar A.

Dr. KRISHNA MURTHY
MD
BIOCHEMIST

Dr. VAMSEEDHAR.A
D.C.P, M.D
CONSULTANT PATHOLOGIST

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No 7 - Kendra Upadyayara Sangha Layout, Nagarbhavi Circle, Nagarbhavi, Bengaluru - 560 077

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For Home Sample Collections Contact: +91 99867 333 33

Email: info@mediclu.com

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Diagnostics & Speciality Centre

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| TEST PARAMETER | RESULT | REFERENCE RANGE | SPECIMEN |
|---|------------|--|----------|
| PROSTATIC SPECIFIC ANTIGEN (PSA) | | | |
| PROSTATIC SPECIFIC ANTIGEN (PSA) <small>CMIA</small> | 0.41 ng/mL | Up to 4ng/mL: Normal 4-10 ng/mL Hypertrophy & benign genito urinary conditions. >10 ng/mL Suspicious of malignancy. | |

PSA is used for monitoring patients with a history of prostate cancer and as an early indicator of recurrence and response to treatment. The test is commonly used for Prostate cancer screening.

Krishna M.

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| TEST PARAMETER | RESULT | REFERENCE RANGE | SPECIMEN |
|---|--------------|----------------------------|----------|
| THYROID PROFILE | | | |
| TOTAL TRIIODOTHYRONINE (T3) CMIA | 1.25 ng/mL | 0.87 - 1.78 ng/mL | |
| TOTAL THYROXINE (T4) CMIA | 10.23 µg/dL | 6.09 - 12.23 µg/dL | |
| THYROID STIMULATING HORMONE (TSH) CMIA | 2.962 µIU/mL | 0.38 - 5.33 µIU/mL | |
| | | 1st Trimester: 0.05 - 3.70 | |
| | | 2nd Trimester: 0.31 - 4.35 | |
| | | 3rd Trimester: 0.41 - 5.18 | |

Note:

- TSH levels are subject to circadian variation, reaching peak levels between 2 - 4 a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
- Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use:

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic - Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

| | | |
|---|-------------|-----------------|
| POST PRANDIAL BLOOD SUGAR Hexokinase | 436.3 mg/dl | 80 - 150 mg/dl |
| CREATININE Jaffe Method | 0.65 mg/dL | 0.8 - 1.4 mg/dL |

Krishna M.



Lab Seal



A. Vamseedhar

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| TEST PARAMETER | RESULT | REFERENCE RANGE | SPECIMEN |
|--|------------|------------------|----------|
| BLOOD UREA <i>UREASE-GLUTAMATE DEHYDROGENASE (GLDH)</i> | 24.0 mg/dL | 15 - 50 mg/dL | |
| CREATININE <i>Jaffe Kinetic</i> | 0.65 mg/dL | 0.4 - 1.4 mg/dL | |
| URIC ACID <i>Uricase-Peroxidase</i> | 4.3 mg/dL | 3 - 7.2 mg/dL | |
| SERUM ELECTROLYTES | | | |
| SODIUM <i>Ion Selective Electrode (ISE)</i> | 137 mmol/L | 136 - 145 mmol/L | |
| POTASSIUM <i>Ion Selective Electrode (ISE)</i> | 3.7 mmol/L | 3.5 - 5.2 mmol/L | |
| CHLORIDE <i>Ion Selective Electrode (ISE)</i> | 102 mmol/L | 97 - 111 mmol/L | |

Krishna Murthy

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Lab Seal

Vamseedhar A

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| TEST PARAMETER | RESULT | REFERENCE RANGE | SPECIMEN |
|--|-------------|--|----------|
| LIPID PROFILE TEST | | | |
| TOTAL CHOLESTEROL <i>Cholesterol Oxidase-Peroxidase (CHOD-POD)</i> | 211 mg/dL | up to 200 mg/dL Border Line: 200 – 240 mg/dL High: > 240 mg/dL | |
| TRIGLYCERIDES <i>Glycerol Peroxidase-Peroxidase (GPO-POD)</i> | 235.3 mg/dL | up to 150 mg/dL Desirable: <150 mg/dL Border Line: 150 – 200 mg/dL High: >200 – 500 mg/dL Very High: > 500 mg/dL | |
| HDL CHOLESTEROL - DIRECT <i>PEG-Cholesterol Esterase</i> | 31.1 mg/dl | 40 - 60 mg/dl >= 60mg/dL - Excellent (protects against heart disease) 40-59 mg/dL - Higher the better <40 mg/dL - Lower than desired (major risk for heart disease) | |
| LDL CHOLESTEROL - DIRECT <i>Cholesterol Esterase-Cholesterol Oxidase</i> | 132.8 mg/dL | up to 100 mg/dL 100-129 mg/dL - Near optimal/above optimal 130-159 mg/dL - Borderline High 160-189 mg/dL - High 190->190 mg/dL - Very High | |
| VLDL CHOLESTEROL <i>Calculation</i> | 47.1 mg/dL | 2 - 30 mg/dL | |
| TOTAL CHOLESTROL/HDL RATIO <i>Calculation</i> | 6.8 | up to 3.5 3.5-5.0 - Moderate >5.0 - High | |
| LDL/HDL RATIO <i>Calculation</i> | 4.3 | up to 2.5 2.5-3.3 - Moderate >3.3 - High | |

Krishna M.



Lab Seal



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|--|---------------|-----------------|----------|
| <u>LIVER FUNCTION TEST (LFT)</u> | | | |
| TOTAL BILIRUBIN <i>Colorimetric Diazo Method</i> | 0.87 mg/dL | 0.2 - 1.2 mg/dL | |
| DIRECT BILIRUBIN <i>Colorimetric Diazo Method</i> | 0.27 mg/dL | 0 - 0.4 mg/dL | |
| INDIRECT BILIRUBIN <i>Calculation</i> | 0.60 mg/dl | | |
| S G O T (AST) <i>IFCC Without Pyridoxal Phosphates</i> | 15.0 U/L | up to 35 U/L | |
| S G P T (ALT) <i>IFCC Without Pyridoxal Phosphates</i> | 14.7 U/L | up to 50 U/L | |
| ALKALINE PHOSPHATASE <i>p-Nitrophenyl Phosphate</i> | 69 U/L | 36 - 113 U/L | |
| SERUM GAMMA GLUTAMYLTRANSFERASE (GGT) <i>GCNA-IFCC</i> | 23.5 U/L | 15 - 85 U/L | |
| TOTAL PROTEIN <i>Biuret Colorimetric</i> | 7.28 g/dl | 6.2 - 8 g/dl | |
| S.ALBUMIN <i>Bromocresol Green (BCG)</i> | 3.91 g/dl | 3.5 - 5.2 g/dl | |
| S.GLOBULIN <i>Calculation</i> | 3.4 g/dl | 2.5 - 3.8 g/dl | |
| A/G RATIO <i>Calculation</i> | 1.2 | 1 - 1.5 | |
| FASTING BLOOD SUGAR <i>Hexokinase</i> | 368.9 mg/dl | 70 - 110 mg/dl | |
| BLOOD GROUP & Rh TYPING <i>Tube Agglutination (Forward and Reverse)</i> | "AB" Positive | | |

Krishna M.



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|---|--------|---|----------|
| GLYCATED HAEMOGLOBIN (HbA1C) <small>HPLC</small> | 11.0 % | American Diabetic Association (ADA) recommendations: Non diabetic adults : <5.7 % At risk (Pre diabetic): 5.7 – 6.4% Diabetic : >= 6.5% Therapeutic goal for glycemic control : Goal for therapy: < 7.0% Action suggested: > 8.0% | |

ESTIMATED AVERAGE GLUCOSE (eAG) Calculation 269 mg/dL

Comments:

This assay is useful for diagnosing Diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks and is a better indicator of long term glycemic control as compared with blood and urine glucose measurements. This provides a additional criterion for assessing glucose control because glycated hemoglobin values are free of day-to-day glucose fluctuation and are unaffected by exercise or food ingestion.

After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.

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|----------------|--------|-----------------|----------|
|----------------|--------|-----------------|----------|

URINE ROUTINE & MICROSCOPIC

PHYSICAL EXAMINATION

| | | |
|--|-------------|---------------------|
| Colour <i>Visual Method</i> | Pale Yellow | Pale yellow- yellow |
| Appearance <i>Visual Method</i> | Clear | Clear/Transparent |
| Specific Gravity <i>Strips Method</i> | 1.015 | 1.005-1.035 |
| pH | 6.0 | 4.6-8.5 |

CHEMICAL EXAMINATION (DIPSTICK)

| | | |
|---------------------------------------|----------|------------|
| Protein <i>Strips Method</i> | Nil | Nil -Trace |
| Glucose <i>Strips Method</i> | 1 % | Nil |
| Blood <i>Strips Method</i> | Negative | Negative |
| Ketone Bodies <i>Strips Method</i> | Absent | Negative |
| Urobilinogen <i>Strips Method</i> | Normal | Normal |
| Bile Salt <i>Strips Method</i> | Negative | Negative |
| Bilirubin <i>Strips Method</i> | Negative | Negative |
| Bile Pigments | Negative | NIL |

MICROSCOPY

| | | |
|--|---------------|---------|
| Pus Cells (WBC) <i>Light Microscopic</i> | 3 - 4 /hpf | 0-5/hpf |
| Epithelial Cells <i>Light Microscopic</i> | 1 - 2 /hpf | 0-4/hpf |
| RBC <i>Light Microscopic</i> | Not Seen /hpf | 0-2/hpf |
| Cast <i>Light Microscopic</i> | NIL | NIL |
| Crystal <i>Light Microscopic</i> | NIL | Nil |

Chlorine u.



Lab Seal



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BIOCHEMIST

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D.C.P, M.D
CONSULTANT PATHOLOGIST

The laboratory values And Normal values need to be interpreted based on patients clinical characteristics. The values in reference range is for an average normal individual which may vary depending upon age, sex and other characteristics.

No 7 - Kandra Upadyayara Sangha Layout, Nagarbhavi Circle, Nagarbhavi, Bengaluru - 560 072

Enquiry: +91 99867 33 333, Appointments : +91 98863 55 135, Reports: +91 74063 11 116

For Home Sample Collections Contact: +91 99867 333 33

Email: info@mediclu.com

Website: www.mediclu.com



(A Unit of Vijayalakshmi Diagnostics Pvt. Ltd.)

Diagnostics & Speciality Centre

| | | | |
|---------------------------|-----|-----|---------------|
| FASTING URINE SUGAR (FUS) | 1 % | NIL | FASTING URINE |
| POSTPRANDIAL URINE SUGAR | 2 % | NIL | URINE |

Dispatched by: Sumalatha

**** End of Report ****

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| | | | |
|---------|-----------------------|--------------|------------|
| NAME: | Mr. SIDDAGANGAIAH B S | DATE: | 29-03-2022 |
| AGE: | 45 YEARS | ID. NO: | 182663 |
| GENDER: | MALE | REFERRED BY: | MEDIWHEEL |

X-RAY CHEST PA VIEW

OBSERVATIONS:

The lung fields are clear bilaterally.

CP angles are clear.

Both the hila appear normal.

Cardiac diameter is within normal limits.

Tracheal appears in mid line.

Visible bony thoracic cage is normal.

Adjacent soft tissues appear normal.

IMPRESSION:

- No significant abnormality in the visualized lung fields.



Dr. Shruthi P. DMRD, FFM, DNB
Consultant Radiologist