

**Patient Name** : Mr. REYYI PRAVEEN KUMAR

**Age/Gender** : 44 Y/M

**UHID/MR No.** : CBAS.0000087705

**OP Visit No** : CBASOPV92478

**Sample Collected on** :

**Reported on** : 10-06-2023 16:12

**LRN#** : RAD2018971

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 101703

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**DEPARTMENT OF RADIOLOGY**

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**X-RAY CHEST PA**

Both lungs fields appears normal and shows normal bronchovascular markings.

Bilateral hila appears normal.

Cardiac silhouette appears normal.

Both costophrenic and cardiophrenic angles are clear.

Both diaphragms are normal in position and contour.

Thoracic wall and soft tissues appear normal.

**IMPRESSION:**

**No obvious abnormality seen in the present study.**



**Dr. V K PRNAV VENKATESH**  
MBBS,MD  
Radiology

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**UHID/MR No.** : CBAS.0000087705

**OP Visit No** : CBASOPV92478

**Sample Collected on** :

**Reported on** : 10-06-2023 14:38

**LRN#** : RAD2018971

**Specimen** :

**Ref Doctor** : SELF

**Emp/Auth/TPA ID** : 101703

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND - WHOLE ABDOMEN

**Liver:** appears normal in size (14.0 cm) and increased in echotexture. No focal lesion is seen. Portal vein and Common Bile Duct appear normal. No dilatation of the intrahepatic biliary radicals.

**Gall bladder** is well distended. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

**Spleen** appears normal. No focal lesion seen. Splenic vein appears normal.

**Pancreas** appears normal in echo-pattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

**Right kidney** appear normal in size 11.0x1.4 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

**Left kidney** appear normal in size 11.5x1.5 cm, shape and echopattern. Cortical thickness and Cortico-medullary differentiation are maintained.

**Urinary Bladder** is well distended and appears normal. No evidence of any wall thickening or abnormality. No evidence of any intrinsic or extrinsic bladder abnormality detected.

**Prostate** is normal in size (volume 22 cc) and echo texture.

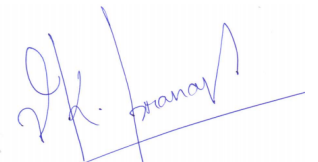
- No thickened or tender bowel loops. No mass lesion. No ascites / pleural effusion.

### IMPRESSION:-

**Grade I Fatty Liver.**

Suggested clinical correlation.

(The sonography findings should always be considered in correlation with the clinical and other investigation finding where applicable.) It is only a professional opinion, Not valid for medico legal purpose



**Dr. V K PRNAV VENKATESH**  
**MBBS, MD**



**Patient Name** : Mr. REYYI PRAVEEN KUMAR

**Age/Gender** : 44 Y/M

Radiology

**ECHOCARDIOGRAPHY REPORT**

**Name: MR REYYI PRAVEEN KUMAR**

**Age: 44YEARS**

**GENDER: MALE**

**Consultant: Dr.VISHAL KUMAR.H.**

**Date : 10/06/2023**

**Findings**

**2D Echo cardiography**

**Chambers**

- Left Ventricle: Normal, No RWMA'S,
- Left Atrium: Normal
- Right Ventricle: Normal
- Right Atrium: Normal

**Septa**

- IVS: Intact
- IAS: Intact

**Valves**

- Mitral Valve: Normal
- Tricuspid Valve: Normal
- Aortic Valve: Tricuspid, Normal Mobility
- Pulmonary Valve: Normal

**Great Vessels**

- Aorta: Normal
- Pulmonary Artery: Normal

**Pericardium: Normal**

**Doppler echocardiography**

Mitral Valve	E	0.91	m/sec	A	0.84	m/sec	NO MR
Tricuspid Valve	E	0.64	m/sec	A	0.29	m/sec	No TR
Aortic Valve	Vmax	1.19	m/sec				No AR
Pulmonary Valve	Vmax	1.02	m/sec				No PR
astolic Dysfunction							

**1VI-Mode Measurements**

P Parameter	Observed Value	Normal Range	
A aorta	2.7	2.6-3.6	cm
LI left Atrium	3.2	2.7-3.8	cm
A Aortic Cusp Separation	1.6	1.4-1.7	cm
II IVS - Diastole	1.0	0.9-1.1	cm
L left Ventricle-Diastole	4.6	4.2-5.9	cm
P Posterior wall-Diastole	1.0	0.9-1.1	cm
I IVS-Systole	1.2	1.3-1.5	cm
LL left Ventricle-Systole	3.1	2.1-4.0	cm
P Posterior wall-Systole	1.2	1.3-1.5	cm
E ejection Fraction	60	≥ 50	%
F Fractional shortening	30	≥ 20	%
R Right Ventricle	2.6	2.0-3.3	cm

**Impression -**

- Normal Sized Cardiac Chambers
- No RWMA,S
- normal LV and RV Systolic Function, LVEF 60%
- Normal Valves
- No Pericardial Effusion/Vegetation/Clot

**DR. VISHAL KUMAR .H**

**CARDIOLOGIST**

Date: 15/11/2023-06-10 13:08:40

## Personal Details

UHID: 01P3FGAT6LU10HX

PatientID: 7705

Name: MR REYYI PRAVEEN KUMAR

Age: 44

Gender: Male

Mobile: 643434367676

Pre-Existing Medical-  
Conditions

## Symptoms

## Vitals

## Measurements

HR: 83 BPM

PR: 156 ms

PD: 140 ms

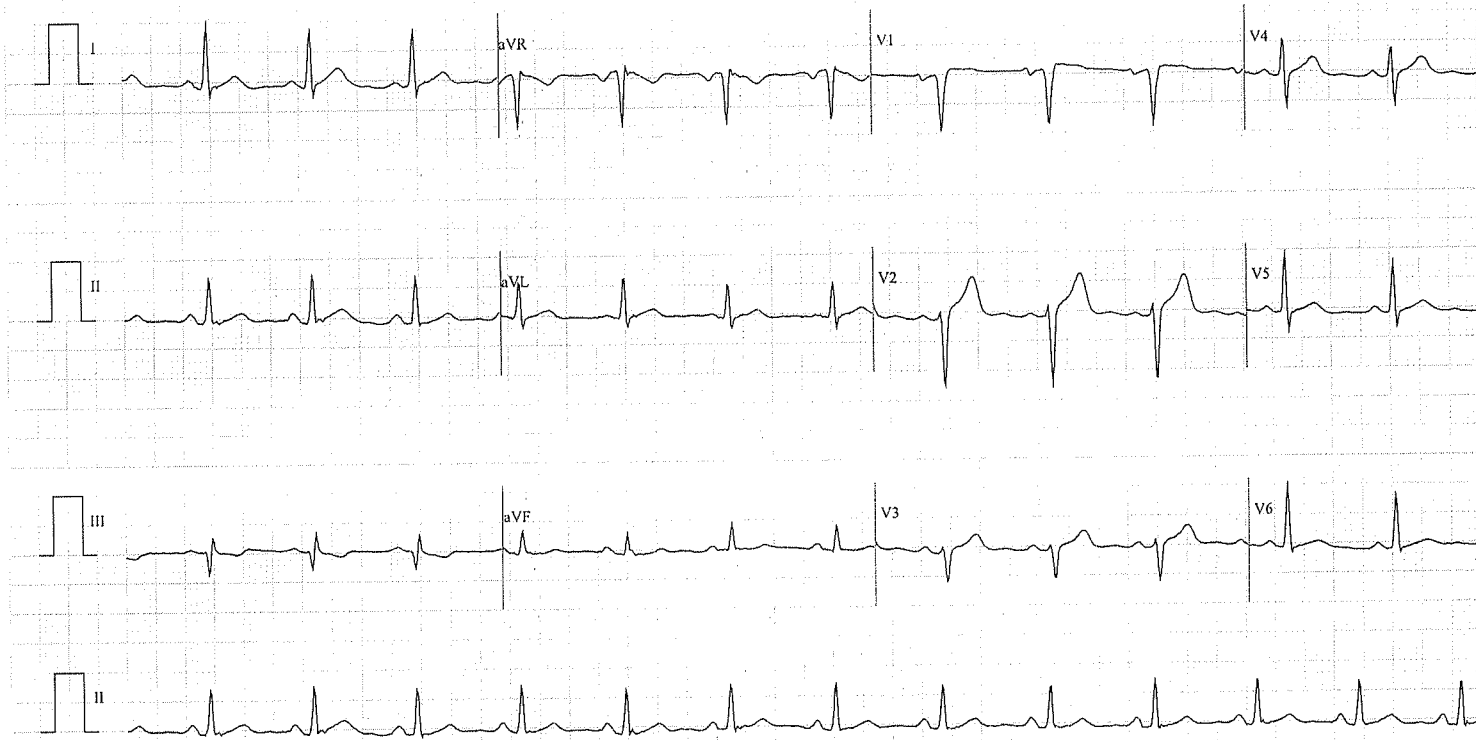
QRSD: 106 ms

QRS Axis: 24.0 deg

QT/QTc: 345/384 ms

## Interpretation (Unconfirmed)


This trace is generated by KardiosScreen: Cloud-Connected, Portable, Digital, 6-12 Lead Scalable ECG Platform from IMEDRIX



Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm/mV Chest: 10 mm/mV

Disclaimer: ECG plot for inference by qualified Medical Practitioners only

Version 8.2 Copyright ©

<b>Name</b> : Mr. REYYI PRAVEEN KUMAR  <b>Address</b> : blr  <b>Plan</b> : ARCOFEMI MEDIWHEEL MALE AHC CREDIT PAN INDIA OP AGREEMENT	<b>Age:</b> 44 Y  <b>Sex:</b> M	<b>UHID:</b> CBAS.0000087705  <b>OP Number:</b> CBASOPV92478 <b>Bill No :</b> CBAS-OCR-56276 <b>Date</b> : 10.06.2023 09:52
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Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS ABOVE 50Y MALE - 2D ECHO - PAN INDIA - FY2324	
<del>1</del>	<del>URINE GLUCOSE(FASTING)</del>	
<del>2</del>	<del>GAMMA GLUTAMYL TRANSFERASE (GGT)</del>	
<del>3</del>	<del>PROSTATIC SPECIFIC ANTIGEN (PSA TOTAL)</del>	
<del>4</del>	<del>HbA1c, GLYCATED HEMOGLOBIN</del>	
<del>5</del>	<del>2 D ECHO</del>	
<del>6</del>	<del>LIVER FUNCTION TEST (LFT)</del>	
<del>7</del>	<del>X-RAY CHEST PA</del>	4
<del>8</del>	<del>GLUCOSE, FASTING</del>	
<del>9</del>	<del>HEMOGRAM + PERIPHERAL SMEAR</del>	
<del>10</del>	<del>ENT CONSULTATION</del>	pending
<del>11</del>	<del>FITNESS BY GENERAL PHYSICIAN</del>	
<del>12</del>	<del>DIET CONSULTATION</del>	
<del>13</del>	<del>COMPLETE URINE EXAMINATION</del>	
<del>14</del>	<del>URINE GLUCOSE(POST PRANDIAL)</del>	
<del>15</del>	<del>PERIPHERAL SMEAR</del>	
<del>16</del>	<del>ECG</del>	3
<del>17</del>	<del>BLOOD GROUP ABO AND RH FACTOR</del>	
<del>18</del>	<del>LIPID PROFILE</del>	
<del>19</del>	<del>BODY MASS INDEX (BMI)</del>	
<del>20</del>	<del>OPHTHAL BY GENERAL PHYSICIAN</del>	pending
<del>21</del>	<del>RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)</del>	
<del>22</del>	<del>ULTRASOUND - WHOLE ABDOMEN</del>	5
<del>23</del>	<del>THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)</del>	
<del>24</del>	<del>DENTAL CONSULTATION</del>	
<del>25</del>	<del>GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)</del>	

HT
BP
FB  
WT
PR
WAIST

RE: Appointment No. 11 (annual)

Corporate Apollo Clinic <corporate@apolloclinic.com>

Wed 5/31/2023 5:29 PM

To: 'Customer Care :Mediwheel : New Delhi' <customercare@mediwheel.in>

Cc: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>; Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>; Basavanagudi Apolloclinic <basavanagudi@apolloclinic.com>; AHCN Apollo Clinic <ahcn@apolloclinic.com>; Devendra Singh <devendra.singh@apolloclinic.com>; Dilip Baniya <Dilip.b@apolloclinic.com>; Megha Avhad <megha.a@apolloclinic.com>; Pritam Padyal <pritam.padyal@apolloclinic.com>; Rahul Rai <rahul.rai@apolloclinic.com>; Hsr Apolloclinic <hsr@apolloclinic.com>

1 attachments (18 KB)

310 00052023 Booking (1).xlsx;

Namaste Team,

Greetings from Apollo clinics,

With regards to the below request, below appointments are confirmed at 9:00 AM

Thanks & Regards,

**Sanjeev kumar** | Apollo Clinics | Pan India Toll No: 1860 500 7788 | Contact E-Mail: [corporate@apolloclinic.com](mailto:corporate@apolloclinic.com) | [www.apolloclinic.com](http://www.apolloclinic.com) |

From: Customer Care :Mediwheel : New Delhi <customercare@mediwheel.in>

Sent: 31 May 2023 12:27

To: Corporate Apollo Clinic <corporate@apolloclinic.com>

Cc: Wellness : Mediwheel : New Delhi <wellness@mediwheel.in>; Network : Mediwheel : New Delhi <network@mediwheel.in>; deepak <deepak.c@apolloclinic.com>

Subject: Appointment No. 11 (annual)

Dear Team

Please find the attached booking details sheet and confirm the same.

### Corporate Apollo Clinic

Mob :

Direct :

Board No : 040 4904 7777

#### Apollo Health & Lifestyle Limited

#7-1-617/A, 615 & 616, Imperial Towers,  
7th Floor, Opp. Amecpet Metro Station,  
Amecpet, Hyderabad 500038, Telangana.

 <b>Over 1.75 Lakh Deliveries</b>	 <b>Over 10,000 IVF Cycles</b>	 <b>Over 1.3 Lakh Surgeries</b>	 <b>Over 10 million High-quality Diagnostic Tests</b>
 <b>Over 2 million Health Checks</b>	 <b>Over 4.2 Lakh Lives touched</b>	 <b>Over 3.9 Lakh Healthy Smiles</b>	 <b>Over 6 Lakh Dialysis Sessions</b>





## 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. REYYI PRAVEEN KUMAR
EC NO.	101703
DESIGNATION	BRANCH HEAD
PLACE OF WORK	BANGALORE,RT NAGAR
BIRTHDATE	05-06-1979
PROPOSED DATE OF HEALTH CHECKUP	10-05-2023
BOOKING REFERENCE NO.	23J101703100060668E

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 **30-05-2023** 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 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))



Bank of Baroda

ATM

Name

REYVI PRAVEEN KUMAR

संख्या क्र. (Serial No.)

E.C. No. 101703

*Handwritten signature*

Testing Authority



*Handwritten signature*

CHIEF OFFICER

