

प्रति,

सम्बन्धक,
Mediwheel (Arcofemi Healthcare Limited)
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ोदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे कारर के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	DESHANTAR DEVI
जन्म की तारीख	20-03-1990
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	23-03-2024
सुकिंग संदर्भ सं.	23M105318100099428S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. KUMAR RANJIT
कर्मचारी की क.संख्या	105318
कर्मचारी का पद	SINGLE WINDOW OPERATOR A
कर्मचारी के कार्य का स्थान	JAINAMORE
कर्मचारी के जन्म की तारीख	30-06-1984

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ोदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 12-03-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं सुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ोदा



(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



भारत सरकार
Government of India



देवना ६६
Devana Devi
जन्म तिथि (DOB) : 2003/11/09
महिला / Female



3242 2474 5186

मेरा आधार, मेरी पहचान



भारतीय सूचना प्रसारण प्राधिकरण
Ministry of Information Authority of India



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Information



3242 2474 5186



1947



Mediwheel Department of General Medicine

Regd. No. : MAR23-44296 Visit : OPD/230324/202046

Patient Name : MRS. DESHANTAR DEVI Mobile : 8409020545

Age/Sex : 34 Y 0 M 3 D / Female Date : 23-Mar-2024 3:29 pm

Address : JAINAMORE , BOKARO - 828301 , Jharkhand , INDIA

Doctor : Dr. Sumeet Kr. MD, Medicine OPD Timing :

Referred By :

Allergies : Height : Ft In Temp. : C SPO2 : 99 %
Weight : 45.5 Kg Pulse : 75 BPM B.P. : 100/80 mm/Hg

History and complaints :

Examination:

→ Chronz LBP

Diagnosis:

Investigations:

Medicines Prescribed:

— T. Ezast MR 60u
1 Box x 5 days

— T. gabapin NT 100/10u
1 Box x 5 days

— T. Calcicart 100 x 20da
Signature of Doctor

Follow up:

Days

Advice
(Diet/ Lifestyle / Rehab)

Date :

Time :

*This document is not valid for Medico-Legal purposes.



Rate 61 . Sinus rhythm.....normal P axis, V-rate 50- 99
- Baseline wander in lead(s) I, aVL, V1

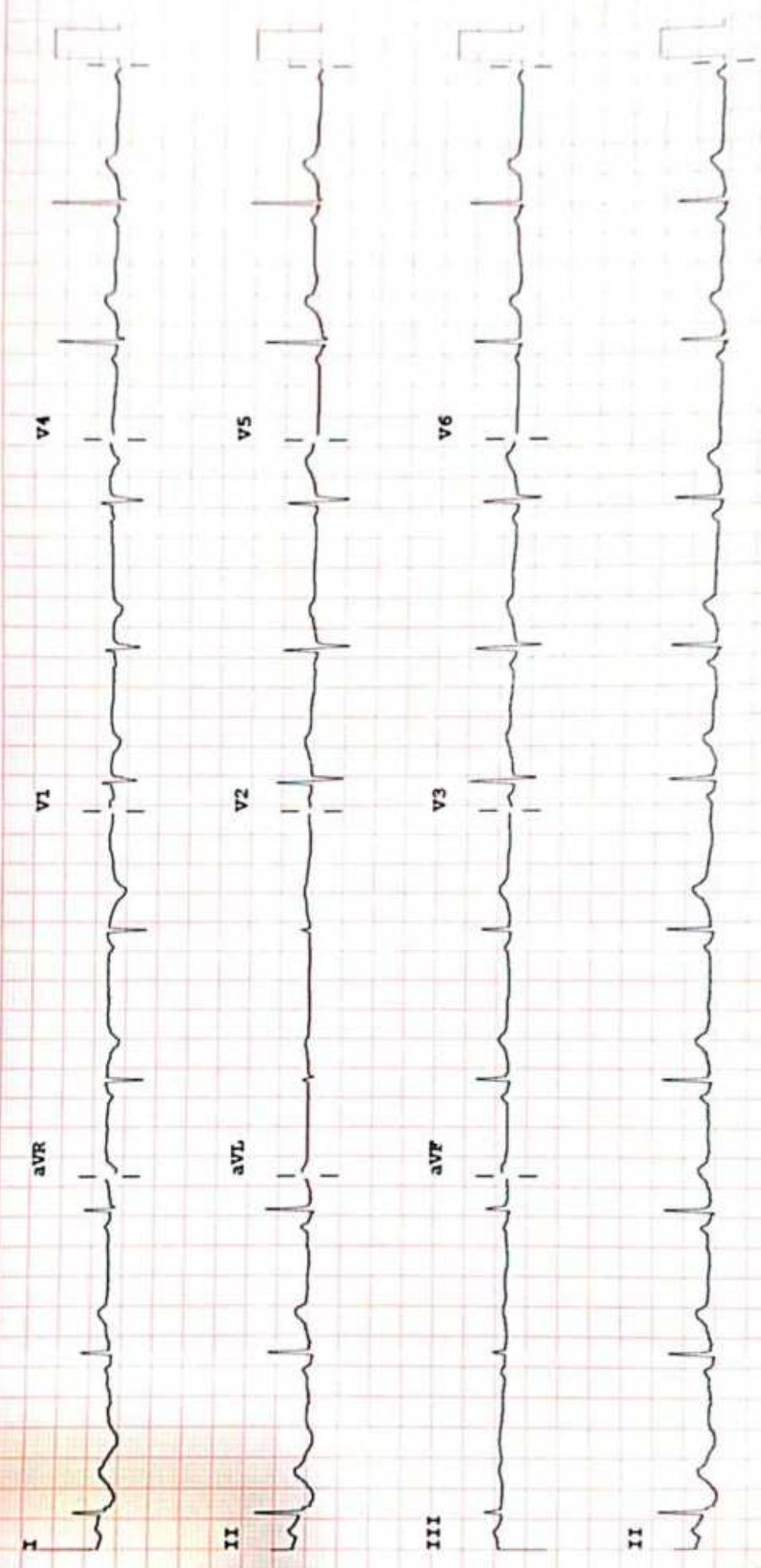
PR 132
QRS 74
QT 387
QTc 390

--AXIS--
P 60
QRS 52
T 43

12 Lead: Standard Placement

- NORMAL ECG -

Unconfirmed Diagnosis



Device:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

F 50~ 0.50-100 Hz W

PH100B CL P?

REPORT

ECHOCARDIOGRAPHY REPORT

Name: MRS DESHANTAR DEVI

Age: 34

Sex: Female

Date: 23/03/2024

2D & M-MODE MEASUREMENTS

LA Diam	3.0 cm
Ao Diam	2.6 cm
IVSd	1.1 cm
LVIDd	3.6 cm
LVPWd	1.1 cm
IVSs	1.4 cm
LVIDs	2.3 cm

2D & M-MODE CALCULATIONS

EDV(Teich)	53 ml
ESV(Teich)	19 ml
EF(Teich)	65 %
%FS	35 %
SV(Teich)	34 ml
LVd Mass	132.72 g
RWT	0.61

MITRAL VALVE

MV E Vel	1.03 m/s
MV DecT	189 ms
MV Dec Slope	5.5 m/s ²
MV A Vel	0.65 m/s
MV E/A Ratio	1.60

AORTIC VALVE

AV Vmax	1.41 m/s
AV maxPG	7.95 mmHg

TRICUSPID VALVE

PV Vmax	1.25 m/s
PV maxPG	6.21 mmHg

PULMONARY VALVE

COMMENTS:

- NORMAL SIZE CARDIAC CHAMBERS
- NO LVRWMA
- GOOD LV SYSTOLIC FUNCTION (EF-60%)
- NORMAL MITRAL INFLOW PATTERN
- NO MR, AR, NO TR, NO PAH
- IAS, IVS INTACT
- NO CLOT, PE
- IVC NORMAL

IMPRESSION:

- NORMAL ECHO STUDY

DR.S.H CHAVAN
(CONSULTANT CARDIOLOGIST)

TECH. SIG



RADIOLOGY REPORT

Reg. No.	44296	Ref. Dr.	SELF
Name	MRS. DESHANTAR DEVI	Study	USG WHOLE ABDOMEN
Age & Sex	34Y /F	Reporting Date	23.03.2024

USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size, shape & echotexture. No obvious focal lesion is seen. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated.
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 9.4cm in size.
- KIDNEYS** : The right kidney measures 8.8 x 3.9cm. The left kidney measures 9.1 x 3.8cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. A simple cyst measuring 9 x 9mm is seen at the upper pole of left kidney.
- URINARY BLADDER** : Urinary bladder is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- UTERUS** : Uterus is normal in size, shape & echotexture. It measures 7.8 x 3.2 x 4.5cm. Endometrium is central and measures 9.1mm.
- OVARIES** : The right ovary measures 2.2 x 1.4cm. The left ovary measures 2.2 x 1.6cm. Both ovaries are normal in shape, size & position.
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.

IMPRESSION :

- A left renal simple cyst.




Dr. VAISHALI PATEL
 MBBS, DNB (Radio-diagnosis)
 Consultant Radiologist

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RADIOLOGY REPORT

Patient Name :	MRS.DESHANTAR DEVI	Patient ID :	44296
Modality :	DX	Sex :	F
Age :	34Y	Study :	CXR
Reff. Dr. :	DR.SELF	Study Date :	23-03-2024

X-RAY CHEST

No focal lung lesion seen
Costophrenic angles are clear
Hila-Normal
Cardio-thoracic ratio is normal.
Bony cage is normal.

IMPRESSION: Normal study.

Clinical correlation and further investigations suggested.
sb



Dr. Mrinal Kanti Ghosh
MD, (Radio diagnosis)

Date 23-03-2024 Time 17-15-31



Disclaimer: - It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.



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ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur P.O., Ghazipur, Ghazipur, Bihar 828 130
Ph. No.: 7808368888 / 9234681514



MC-5939

FINAL REPORT



Name : MRS. DESHANTAR DEVI
Reg. No. : MAR23-44296
Age / Sex : 34 Y O M S D / Female
Doctor :
Pat. Type : Mediwheel

Collection Time : 25-03-2023 12:16:10
Receiving Time : 25-03-2023 12:21:00
Reporting Time : 25-03-2024 10:58:14
Publish Time : 25-03-2024 11:06 am

Test Name	Result	Flag	Unit	Reference Range
Biochemistry				
Glucose, PP				
Method: GOD-POD				
Glucose, PP	119.4		mg/dl	70-140

Note: Additional tests available for Diabetic control are Glycated Hemoglobin (HbA1c), Fructosamine



DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

(1) This report is for a specific test only. (2) This report is for the patient named or identified and the verification of the particulars have been carried out by the laboratory representative at the point of generation of the said specimen(s)/ Sample(s). (3) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (4) Tests results are not valid for medico legal purposes. (5) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate (haemolysed/clotted/specim. etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (6) The Results of the Test May vary from lab and also from time to time for the same patient. (7) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (8) In case of queries or unexpected test results please call at +91 9297662282, Email-labasarfi@gmail.com

Page 2 of 2

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MC-5939

FINAL REPORT

Name : MRS. DESHANTAR DEVI
Reg. No. : MAR23-44296
Age / Sex : 34 Y O M 3 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 23-03-2024 10:39:28
Receiving Time : 23-03-2024 10:39:59
Reporting Time : 23-03-2024 14:50:09
Publish Time : 23-03-2024 3:17 pm

Test Name	Result	Flag	Unit	Reference Range
Routine Urine Examination; Urine				
Method : Microscopic		Machine Name: Microscope		
Leukocytes	NEGATIVE			
Appearance	CLEAR			
Colour	STRAW			
Volume	20		ml.	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	7.0			
Specific Gravity	1.015			
Bilirubin	NEGATIVE			
Ketone Bodies	NEGATIVE			
Bile Salts	XX			
Bile Pigments	XX			
Nitrite	NEGATIVE			
Pus Cells	0-1		/hpf.	
Epithelial Cells	1-2		/hpf.	
R.B.C.	NIL		/hpf.	
Casts	NOT SEEN		/hpf.	




DR N N SINGH
MD. (PATHOLOGY)

Conditions of Laboratory Testing & Reporting

(1) It is presumed that the listed parameters are on the specimen(s) (s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s)(2) Laboratory investigations are only to facilitate in arriving at diagnosis and should be clinically correlated. (3) These results are not valid for medico legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/serum etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email: labasarfi@gmail.com

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FINAL REPORT

Name : MRS. DESHANTAR DEVI
Reg. No. : MAR23-44296
Age / Sex : 34 Y O M 3 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 23-03-2024 10:39:28
Receiving Time : 23-03-2024 10:39:59
Reporting Time : 23-03-2024 14:50:09
Publish Time : 23-03-2024 3:17 pm

Test Name	Result	Flag	Unit	Reference Range
Crystals	NOT SEEN		/hpf.	
others	NOT SEEN		.	
Protein:Creatinine Ratio; Urine				
<i>Method : Immunoturbidimetry, Spectrophotome</i>				
Protein	82.8		mg/L	
Creatinine	28.7		mg/dl	
PCR	2.89		mg/g	0-0.5



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MD (PATHOLOGY)

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Ph. No.: 7808368888, 7808368889, 7808368890, 7808368154



FINAL REPORT

Name : MRS. DESHANTAR DEVI
Reg. No. : MAR23-44296
Age / Sex : 34 Y 0 M 7 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel



Collection Time : 23-03-2024 10:39:28
Receiving Time : 23-03-2024 10:39:59
Reporting Time : 27-03-2024 11:02:32
Publish Time : 27-03-2024 12:15 pm

Test Name	Result	Flag	Unit	Reference Range
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Microbiology

Culture & Sensitivity (Urine)

Method: vitek 2 compact

Machine Name: vitek 2 compact

Organism Isolated

NO GROWTH OF ANY ORGANISM

Note:

In view of developing antibiotics resistance in inida. It is advisalbe to use anitbiotics belonging to Group B & C only if the patient is resistant to antibiotics.

* Insturment used Bact/Alert 3D 60 & vitek 2 compact.



DR N N SINGH
MD (PATHOLOGY)

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Ph. No. : 7808368888, 0352-2657933, 0352-34681514



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 Pat. Type : Mediwheel



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 Publish Time : 23-03-2024 3:17 pm

Test Name	Result	Flag	Unit	Reference Range
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Haematology

BLOOD GROUP, ABO & RH TYPING

Method: Agglutination

ABO GROUP	A	.	.	0-0
RH TYPING	POSITIVE	.	.	0-0


ESR (Erythrocyte Sedimentaion Rate)

Method: Westergren

ESR	18	H	mm/hr	0-10
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Machine Name: VES-MATIC 20




 DR N N SINGH
 MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting

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Test Name	Result	Flag	Unit	Reference Range
Nature of Material: EDTA Blood Sample				
Complete Blood Count (CBC)				
Method: Electronical Impedence				
Machine Name: Sysmex 6 part				
Hemoglobin (Photometry)	11.0	L	g/dl	13-18
PCV (Calculated)	32.3	L	%	40-50
MCH (Calculated)	30.6		Pg	27-31
MCHC (Calculated)	34.1		g/dl	31.5-35.5
Red Cell Distribution Width (RDW) (Electrical Impedence)	13.7		%	11.6-14
Total Leukocyte Count (TLC) (Electrical Impedence)	5,300		/cu-mm	4000-11000
RBC Count (Electrical Impedence)	3.59	L	million/mm ³	4.5-5.5
Mean Carpuscular Volume (MCV) (Electrical Impedence)	90.9		fL	83-101
Platelet Count (Electrical impedence)	1.16	L	lakhs/cumm	1.5-4.5
Neutrophils (VCS Technology)	46	L	%	55-75
Lymphocytes (VCS Technology)	45	H	%	15-30
Eosinophils (VCS Technology)	05		%	1-6
Monocytes (VCS Technology)	04		%	2-10
Basophils (VCS Technology)	00		%	0-1



DR N N SINGH
MD (PATHOLOGY)

Conditions of Laboratory Testing & Reporting

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Name : MRS. DESHANTAR DEVI
Reg. No. : MAR23-44296
Age / Sex : 34 Y 0 M 3 D / Female
Doctor : Self-Walkin
Pat. Type : Mediwheel

Test Name	Result	Flag	Unit	Reference Range
Immunology and Serology				
THYROID PROFILE, TOTAL, SERUM				
Method: ECLIA				
T3, Total	1.63		ng/ml	0.8-2.0
T4, Total	8.04		µg/dL	5.10-14.10
TSH (Ultrasensitive)	1.57		mIU/mL	0.27-4.2

Machine Name: Vitros ECI

Interpretation:

1. 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.
2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
3. Unbound fraction (Free, T4 / Free, T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.



[Signature]
DR N N SINGH
MD (PATHOLOGY)

Conditions of Laboratory Testing & Reporting

(1) It is presumed that the patient has given consent for the test. (2) The test results are for the patient named or identified and the verification of the particulars have been carried out by the staff of the hospital. (3) The results are representative at the point of generation of the said specimen(s)/ Sample(s). (4) Laboratory investigations are only a tool to facilitate in arriving at diagnosis and should be clinically correlated. (5) Test results are not valid for medico-legal purposes. (6) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (haemolysed/clotted/serum etc.) (b) Incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (7) The Results of the Test May vary from lab and also from time to time for the same patient. (8) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (9) In case of queries or unexpected test results please call at +91 9297862282. Email: labasarfi@gmail.com

24 HOUR EMERGENCY

PHC

नयनश्री नेत्रालय

(A Unit of Asarfi Hospital Limited)

Baramuri, Bishunpur Polytechnic, Dhanbad - 828 130 (Jharkhand)
7707013096, 7808368888 | www.asarfihospital.com, info@asarfihospital.com

PRESCRIPTION FOR GLASS

Reg No. 44296 Date: 23/03/24
Name: MRS DESHANTAR DEVI Age: 34 Gender: M F

	RIGHT EYE				LEFT EYE			
	D SPH	D CYL	AXIS	VISION	D SPH	D CYL	AXIS	VISION
FOR DISTANCE VISION	—	-0.25	140°	6/6	—	-0.50	90°	6/6
ADD FOR NEAR VISION	—	—	—	N6	—	—	—	N6

Lens : White / Photo Chromic / Tinted / Kryptok / Executive / Bifocal / CR 39

P.D/- m.m. For DV m.m. For NV

Remarks : Constant use / Distance use / near use

Refractionist [Signature]
AHLD/079/13/October/23

c/o. Regular checkup.

NO H/O Ocular Head Trauma

NO H/O Systemic disease

$D_{1/2}$ $\left\{ \begin{array}{l} 6/9 \\ 6/9 \end{array} \right.$ $N_{1/2}$ $\left\{ \begin{array}{l} N5 \\ N6 \end{array} \right.$ } iff

Pupils - R/R/R.

Guji
24/3/21.

