

Name : Mrs. Vani Neela

Age: 38 Y

UHID:CELE.0000129877

Address : ECITY

Sex: F



Plan : ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT

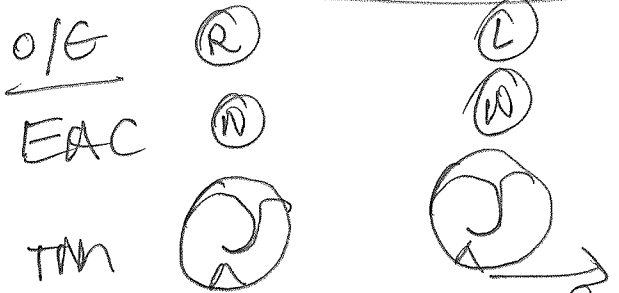
OP Number:CELEOPV342127

Bill No :CELE-OCR-55532

Date : 08.03.2024 08:44

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324	
1	GAMMA GLUTAMYL TRANSFERASE (GGT) - 12	
2	2D ECHO - 11	
3	LIVER FUNCTION TEST (LFT)	
4	GLUCOSE, FASTING	
5	HEMOGRAM + PERIPHERAL SMEAR	
6	GYNAECOLOGY CONSULTATION - 16	
7	DIET CONSULTATION	
8	COMPLETE URINE EXAMINATION	
9	URINE GLUCOSE(POST PRANDIAL)	
10	PERIPHERAL SMEAR	
11	ECG - 13	
12	LBC PAP TEST- PAPSURE not done, next week.	
13	RENAL PROFILE/RENAL FUNCTION TEST (RFT/KFT)	
14	DENTAL CONSULTATION - 15	
15	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
16	URINE GLUCOSE(FASTING)	
17	HbA1c, GLYCATED HEMOGLOBIN	
18	X-RAY CHEST PA - 09	
19	ENT CONSULTATION - 25	
20	FITNESS BY GENERAL PHYSICIAN	
21	BLOOD GROUP ABO AND RH FACTOR	
22	LIPID PROFILE	
23	BODY MASS INDEX (BMI)	
24	OPHTHAL BY GENERAL PHYSICIAN - 05	
25	ULTRASOUND - WHOLE ABDOMEN - 08	
26	THYROID PROFILE (TOTAL T3, TOTAL T4, TSH)	

c/s/r Dr. Yashasvi



Nose - mild DNS
Throat - NAD
clinically ENT - NAD

Dr. YASHASVI, MBBS, DLO
FELLOW IN RHEUMATOLOGY
ALLERGY SPECIALIST
REG. No. 71513
MOB.: 9448989291 / 9948426633

MEDICAL FITNESS CERTIFICATE

NAME:

AGE/SEX:

UHID:

DATE:

CHIEF COMPLAINTS:

-c/o right shoulder pain

PAST/FAMILY HISTORY:-

ALLERGIES:-

GENERAL EXAMINATION:-

PULSE: 109	BP: 150/79	TEMP:	RR:
HT: 151	WT: 60.2	WAIST: 58	BMI: 26.2

SYSTEMIC EXAMINATION: -

HIP 9/1

VISION SCREENING

<u>Vision</u>	<u>Rt</u>	<u>Lt</u>	<u>With Corrections</u>
<u>DISTANT</u>	6/6	6/6	
<u>NEAR</u>	Ng	Ng	
<u>COLOUR</u>			

Chest:

CVS:

P/A:

} NAD

IMPRESSION:-

FINAL RECOMMENDATIONS:-

Adv: ~~Dr~~ Nirmaya
Thermal Scan

GENERAL PHYSICIAN

Patient Name	: Mrs. Vani Neela	Age	: 38 Y F
UHID	: CELE.0000129877	OP Visit No	: CELEOPV342127
Reported on	: 08-03-2024 14:21	Printed on	: 08-03-2024 14:21
Adm/Consult Doctor	:	Ref Doctor	: SELF

DEPARTMENT OF RADIOLOGY

X-RAY CHEST PA

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

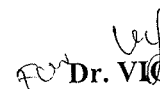
Thoracic wall and soft tissues appear normal.

CONCLUSION :

No obvious abnormality seen

Printed on:08-03-2024 14:21

---End of the Report---

For 
Dr. VIGNESH K
MBBS, MD Radio-Diagnosis
Radiology

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.


Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

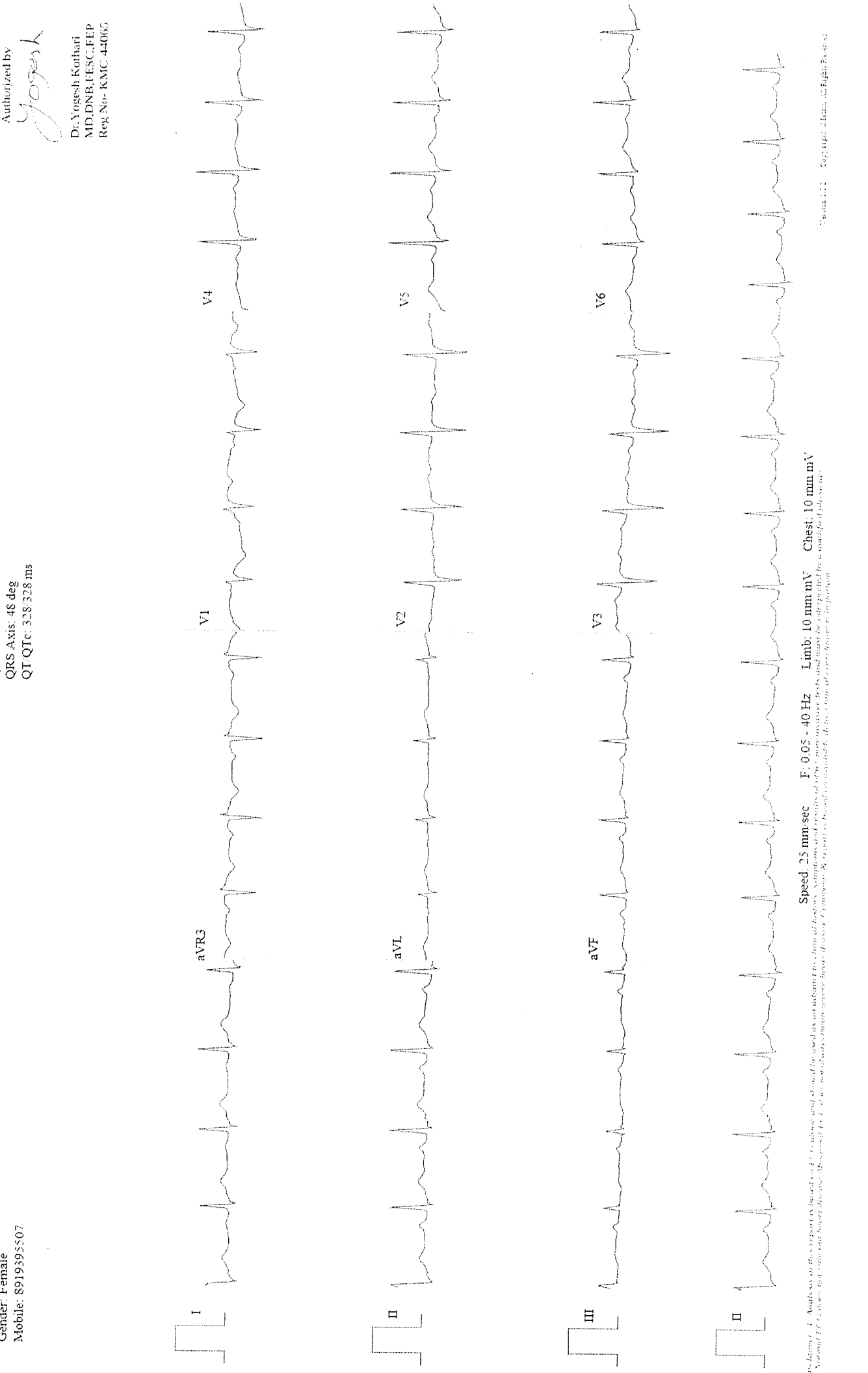
APOLLO CLINICS NETWORK KARNATAKA

Bangalore (Basavanagudi | Bellandur | Electronic City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) **Mysore** (VV Mohalla)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**



Speed: 25 mm/sec F: 0.05 - 40 Hz Limb: 10 mm mV Chest: 10 mm mV
 This ECG was recorded on a standard 12-lead ECG machine. The rhythm is normal sinus rhythm with a normal axis. The PR interval is 154 ms, the PD is 111 ms, the QRS duration is 84 ms, and the QTc is 328.328 ms. The QRS axis is 48 degrees. The rhythm is normal sinus rhythm with a normal axis.

2-D ECHO-CARDIOGRAPHY DOPPLER & COLOUR DOPPLER REPORT

NAME : MRS VANI NEELA

DATE:08/03/2024

AGE/SEX: 38Y/ F

REF : ARCOFEMI – MEDIWHEEL

UHID:129877/03/37

*** MEASUREMENTS & FLOW VELOCITIES AS DEPICTED IN IMAGES OVERLEAF.

1. NORMAL VALVES.
2. NORMAL FLOW ACROSS ALL VALVES.
3. NO MR/ AR/ TR.
4. NORMAL GREAT VESSELS.
5. NORMAL SYSTEMIC VEINS & AT LEAST 3 PULMONARY VEINS SEEN DRAINING INTO LA.
6. NORMAL SIZED CHAMBERS.
7. NO REGIONAL WALL MOTION ABNORMALITIES.
8. INTACT SEPTAE (IVS & IAS).
9. GOOD LV & RV SYSTOLIC FUNCTION.
10. PERICARDIUM : NORMAL
11. NO OBVIOUS VEGETATION / CLOTS.


DR (CAPT.)S.V KRISHNA RAO

MD (PGI), DNB (Card)

Senior Consultant – Cardiologist

Reg No : ANP 19780000746KTK

To correlate with clinical findings & other relevant investigations .

Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Regd. Office: 1-10-60/62, Ashoka Raghupathi Chambers, 5th Floor, Begumpet, Hyderabad, Telangana - 500 016.


Ph No: 040-4904 7777, Fax No: 4904 7744 | Email ID: enquiry@apollohl.com | www.apollohl.com

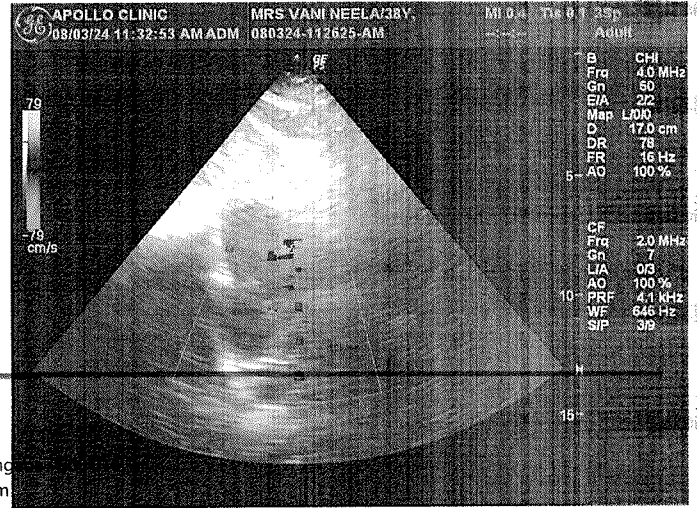
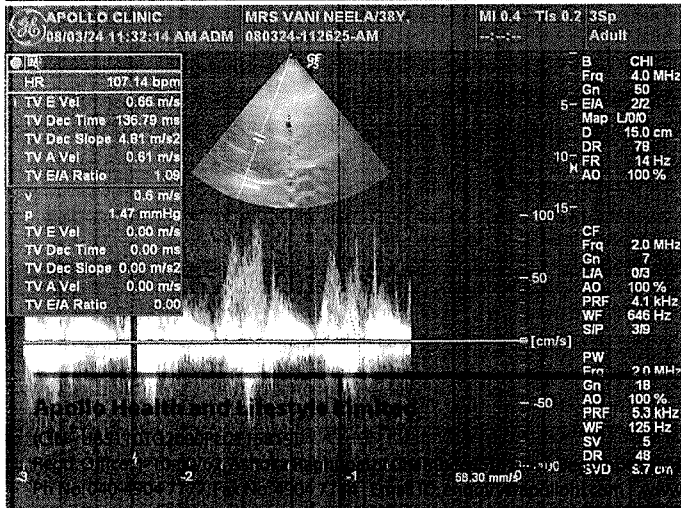
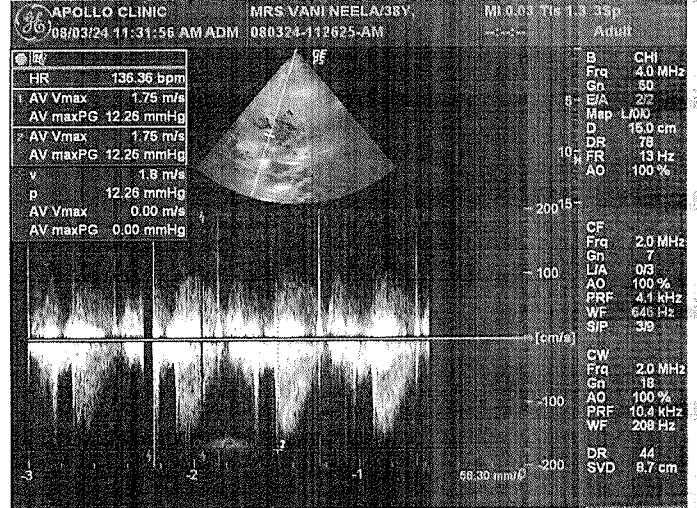
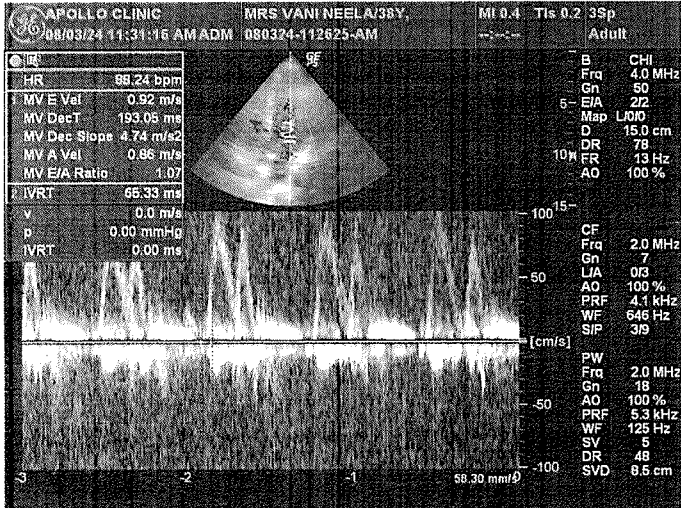
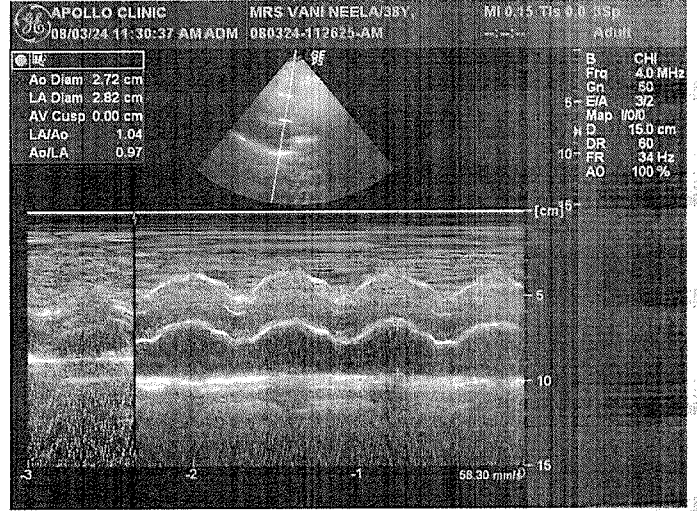
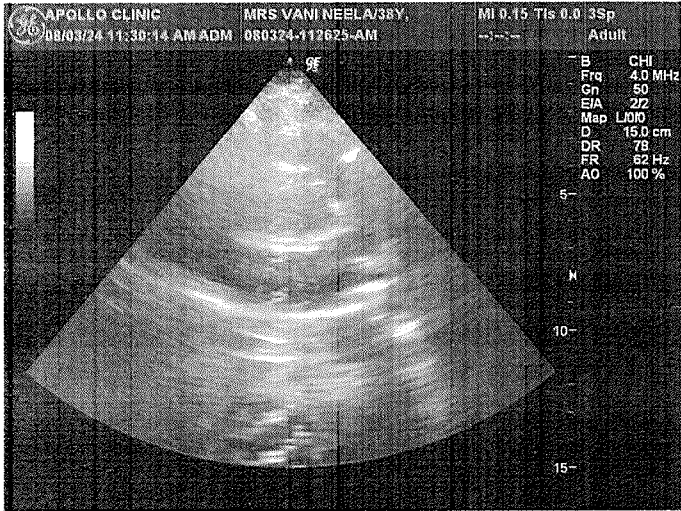
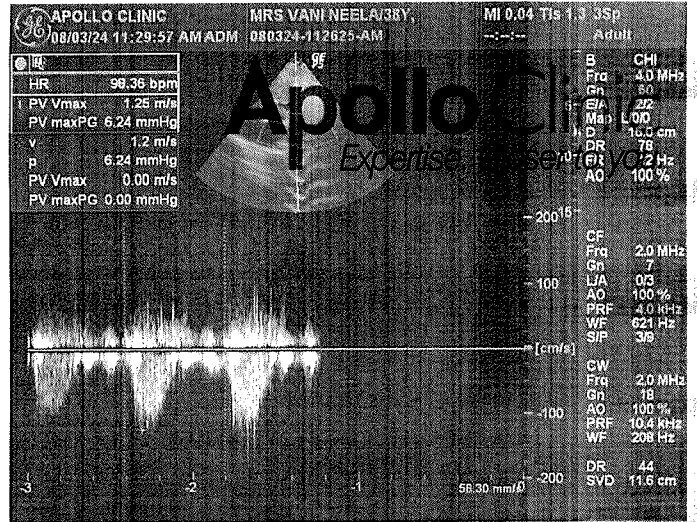
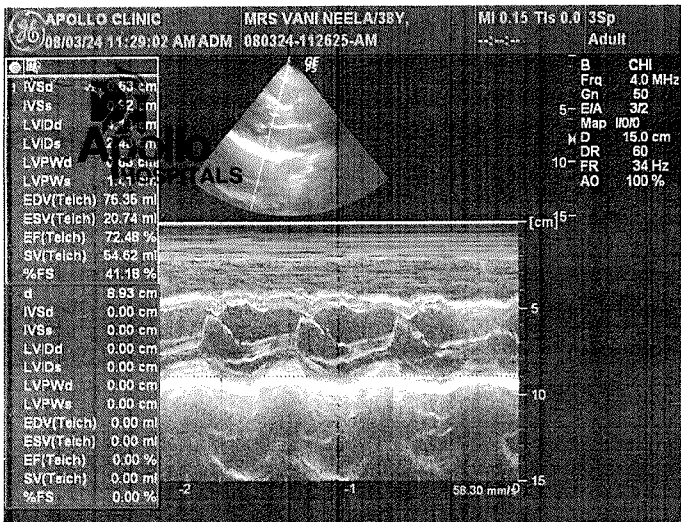
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TO BOOK AN APPOINTMENT

 **1860 500 7788**



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Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

1860 500 7788

NAME:	Mrs. Vani Neela
AGE / SEX:	38 YRS/ FEMALE
DATE:	08/03/2024
REFERRED BY:	ARCOFEMI

ABDOMINAL ULTRASONOGRAPHY REPORT

LIVER: Appear normal in size and echogenicity. No focal lesion seen. The intra hepatic biliary and portal venous radicals are normal. Portal vein and CBD is normal.

GALL BLADDER: moderately distended and appears normal. No abnormal wall thickening / pericholecystic fluid seen.

Pancreas: normal to the extend visualized.

SPLEEN: Normal in size and echo texture. No focal lesion noted

KIDNEYS: Both kidneys are normal in position, size and echo texture. Normal cortico-medullary differentiation is maintained. No calculus/ hydronephrosis on both sides.

PELVIC ORGANS:

Urinary bladder well distended and appears normal in size, contour and wall thickness.

Uterus appear normal in size and echo texture . Myometrial echoes appear normal.
ET measures ~ 10 mm.

Bilateral ovaries are normal in size, shape and echo texture.

No free fluid in the abdomen and pelvis.

IMPRESSION:

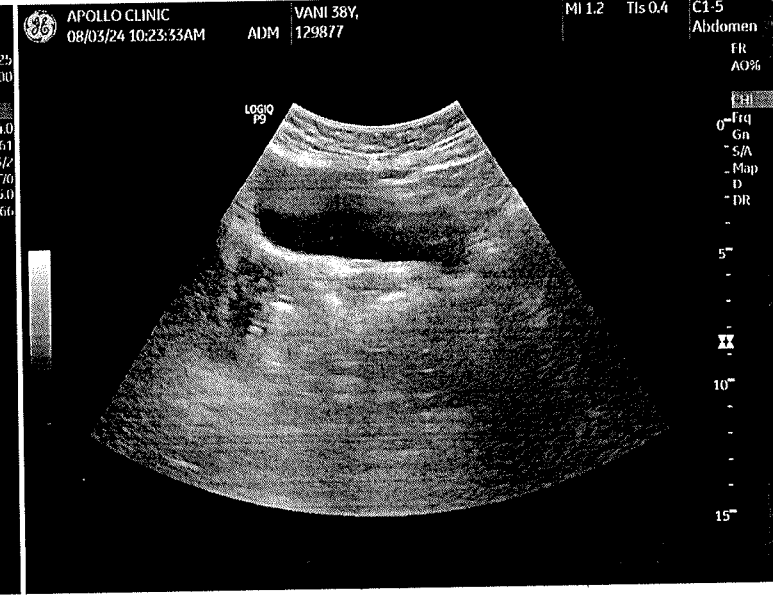
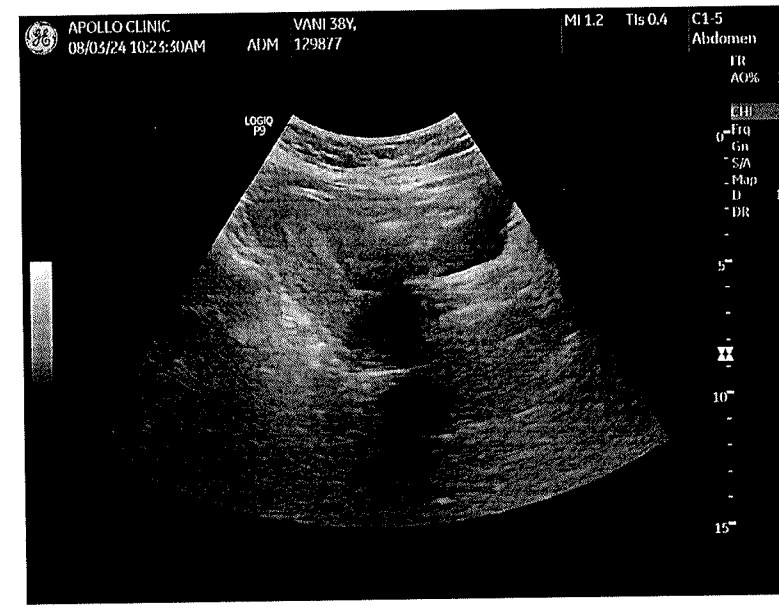
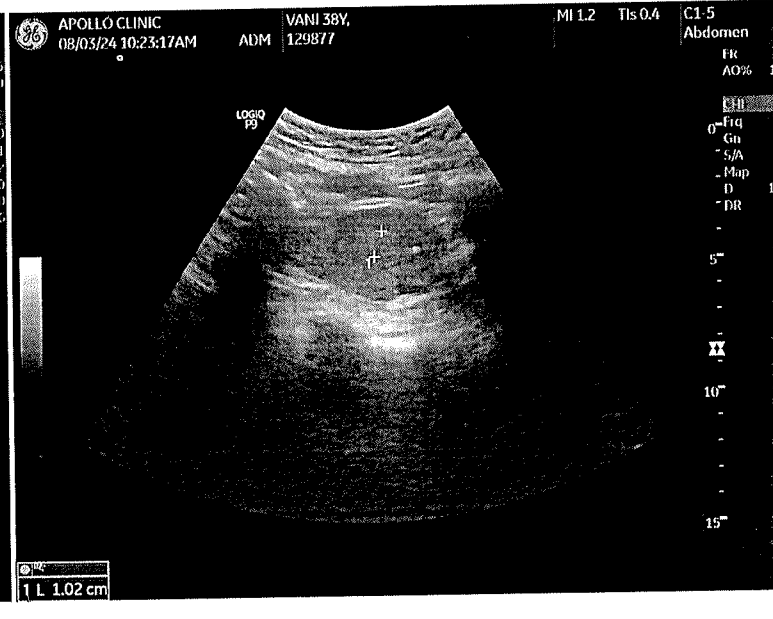
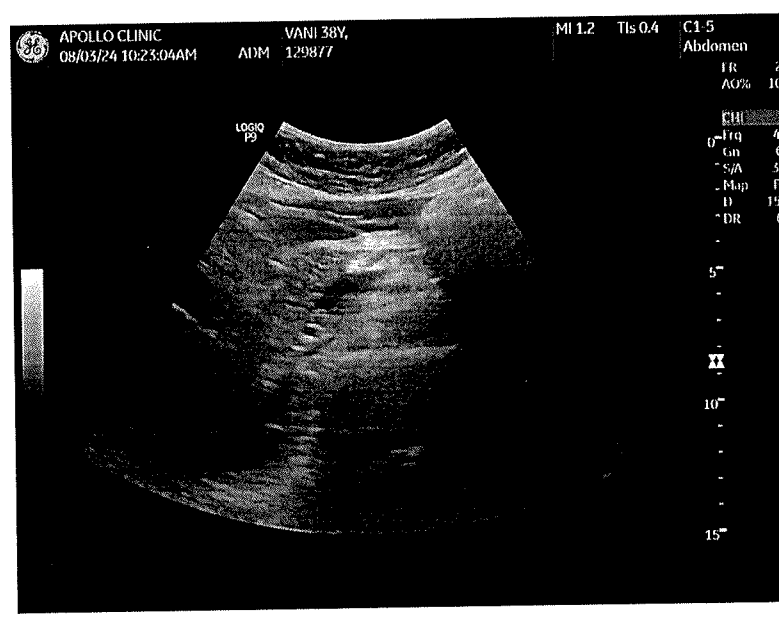
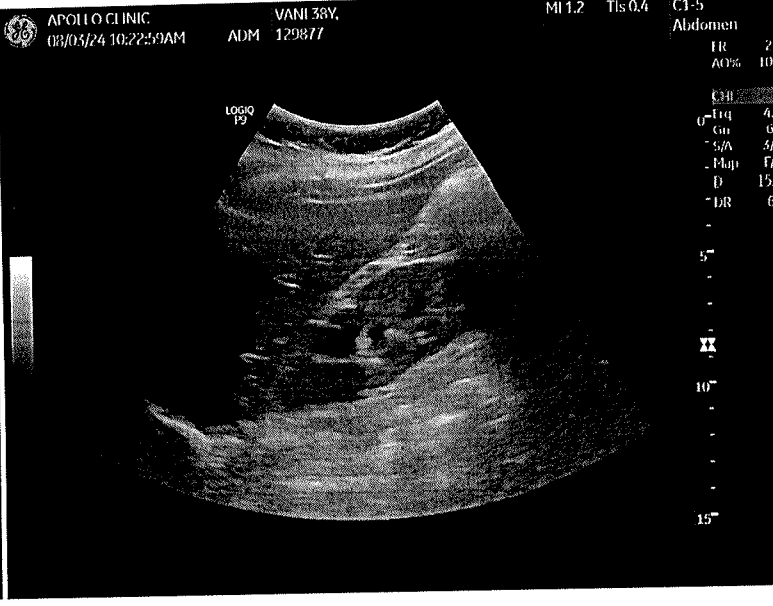
- ***No definitive sonological abnormality detected in present scan .***

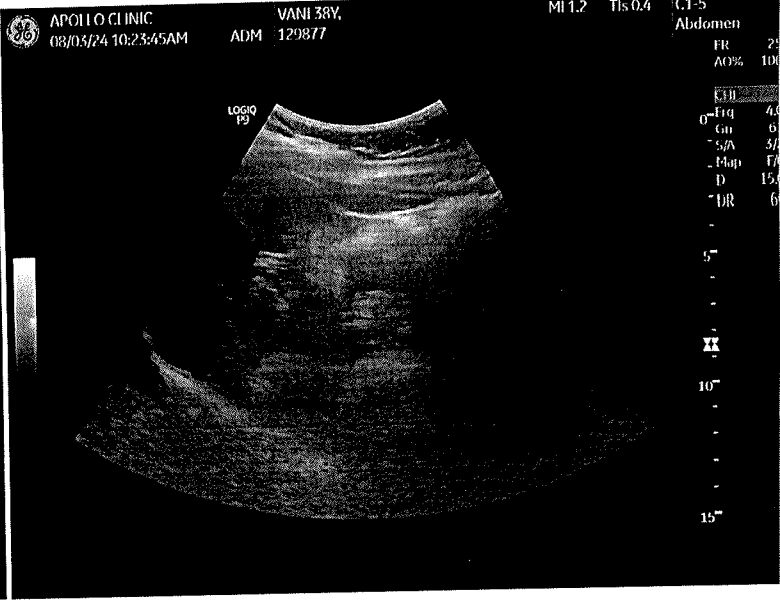
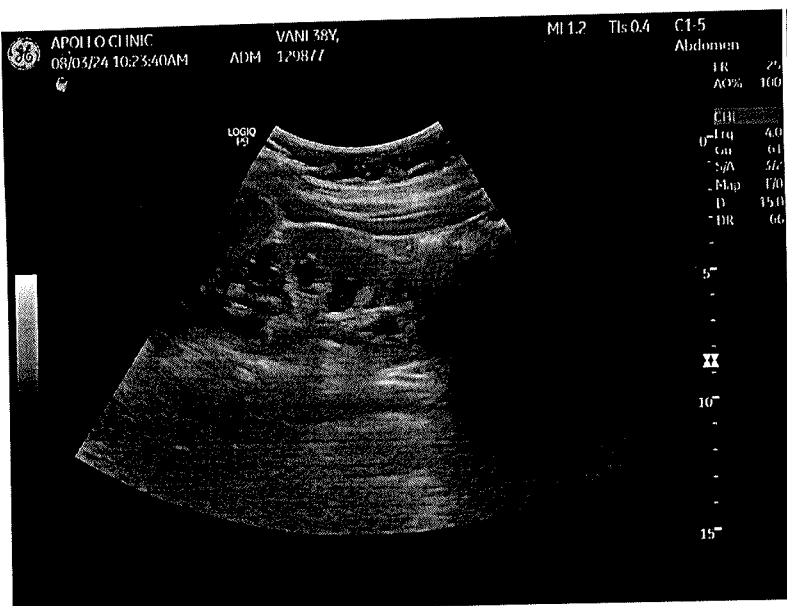
*To correlate clinically & with other investigations.
Not for medico-legal purpose*



DR. VIGNESH K

CONSULTANT RADIOLOGIST





Mrs. Vani Meela 38 F.

8/24/24

Dr. KRISHNA SHANMUGA
Gynaecologist

HCT + LBC (Pregnancy)

Height :	Weight :	BMI :	Waist Circum :
Temp :	Pulse :	Resp :	B.P :

General Examination / Allergies
History

Clinical Diagnosis & Management Plan

Niramai done

RT-br. Pain P/M - NR
-15 day
LMP. 10/2/24

Cyclos Reg.

Pallor f.

B/L2 - Both LSCS.

+ TT done

P 1A - abd soft

P 1V

P 1S

| not done

LBC Pending

B/L - Br. NO lyp.

Adv

R/W Reports



Follow up date:

Doctor Signature



Apollo Clinic

Consent Form

Patient Name: Mrs. Vani Neela Age: 38y/f

UHID Number: 129877 Company Name: Ascochem

I Mr/Mrs/Ms. Mrs. Vani Neela Employee of Ascochem

(Company) want to inform you that I am not getting the Dental and Diet consultation test done which is a part of routine health check package.

Reason if any: Doctor not available

And I claim the above statement in my full consciousness.

Patient signature: N. Vani Date: 8/3/24



Apollo Clinic

Consent Form

Patient Name: Mrs. Vani Neela Age: 38y/F

UHID Number: 129877 Company Name: Arcofemi

I Mr/Mrs/Ms. M. Vani Employee of Bank of Baroda

(Company) want to inform you that I am not getting the LBC Pap Test

test done which is a part of routine health check package.

Reason if any: LBC pap test Brush is not available
so next week.

And I claim the above statement in my full consciousness.

Patient signature: N. Vani Date: 8-3-24



భారత ప్రభుత్వం
Government of India

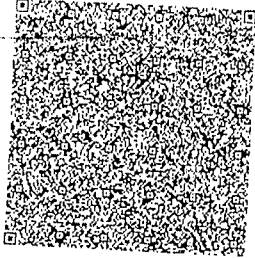
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Unique Identification Authority of India

రిజిస్ట్రేషన్/ Enrolment No.: 2935/50027/01247

To
నీల వాణి
Neela Vani
C/O: Unnam Anand Babu
4-83
Pedapulivarru
Guntur Andhra Pradesh - 522257
8618809004

Signature valid

Digital Signer
Name: Neela Vani
AUID: 2935/50027/01247
Date: 2022-09-04 14:44:17



మీ ఆధార్ సంఖ్య / Your Aadhaar No. :

6998 6177 5645

VID : 9159 8247 0082 5816

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
Government of India



నీల వాణి
Neela Vani
పుట్టిన తేదీ/DOB: 15/08/1985
సెక్స్/ FEMALE

6998 6177 5645

VID : 9159 8247 0082 5816

నా ఆధార్, నా గుర్తింపు



భారత ప్రభుత్వం
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సమాచారం

- ఆధార్ ఒక గుర్తింపు మాత్రమే పౌరసత్వం కాదు
- సురక్షితమైన క్యూఆర్ కోడ్ / ఆఫ్లైన్ ఎక్స్ఎంఎల్ / ఆన్లైన్ ప్రామాణీకరణను ఉపయోగించి గుర్తింపును ధృవీకరించండి.
- ఇది ఎలక్ట్రానిక్ సర్దుబాటు వ్రాయబడిన లేఖ.

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- ఎమ్. ఆధార్ ఆఫ్ ఉపయోగించండి. మీ ఆధార్ ఎల్లప్పుడూ మీ స్మార్ట్ ఫోన్ లో ఉంచండి.

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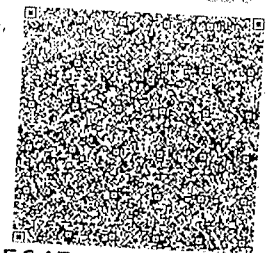


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Unique Identification Authority of India

చిరునామా:
సంబంధితులు: ఉన్నం అనంత్ బాబు, 4-83, పెదపులివర్రు,
గుంటూరు,
ఆంధ్ర ప్రదేశ్ - 522257

Address:
C/O: Unnam Anand Babu, 4-83,
Pedapulivarru, Guntur,
Andhra Pradesh - 522257

Download Date: 29/09/2022



6998 6177 5645

VID : 9159 8247 0082 5816

1947

help@uidai.gov.in

www.uidai.gov.in



प्रति,

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

महोदय/ महोदया,

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

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

स्वास्थ्य जांच लाभार्थी के विवरण	
नाम	VANI NEELA
जन्म की तारीख	15-08-1985
कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख	11-08-2023
बुकिंग संदर्भ सं.	23S111648100066270S
पत्नी/पति के विवरण	
कर्मचारी का नाम	MR. UNNAM ANAND BABU
कर्मचारी की क.कू.संख्या	111648
कर्मचारी का पद	SINGLE WINDOW OPERATOR A
कर्मचारी के कार्य का स्थान	BANGALORE, SARJAPUR ROAD
कर्मचारी के जन्म की तारीख	31-08-1986

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 11-08-2023 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 बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इन्वॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

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

SUGGESTIVE LIST OF MEDICAL TESTS

FOR MALE	FOR FEMALE
CBC	CBC
ESR	ESR
Blood Group & RH Factor	Blood Group & RH Factor
Blood and Urine Sugar Fasting	Blood and Urine Sugar Fasting
Blood and Urine Sugar PP	Blood and Urine Sugar PP
Stool Routine	Stool Routine
Lipid Profile	Lipid Profile
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
Liver Profile	Liver Profile
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
Kidney Profile	Kidney Profile
Serum creatinine	Serum creatinine
Blood Urea Nitrogen	Blood Urea Nitrogen
Uric Acid	Uric Acid
HBA1C	HBA1C
Routine urine analysis	Routine urine analysis
USG Whole Abdomen	USG Whole Abdomen
General Tests	General Tests
X Ray Chest	X Ray Chest
ECG	ECG
2D/3D ECHO / TMT	2D/3D ECHO / TMT
Stress Test	Thyroid Profile (T3, T4, TSH)
PSA Male (above 40 years)	Mammography (above 40 years) and Pap Smear (above 30 years).
Thyroid Profile (T3, T4, TSH)	Dental Check-up consultation
Dental Check-up consultation	Physician Consultation
Physician Consultation	Eye Check-up consultation
Eye Check-up consultation	Skin/ENT consultation
Skin/ENT consultation	Gynaec Consultation

Fwd: Health Check up Booking Request(bobS12776), Beneficiary Code-162978

anand babu unnam <unnam.anandbabu@gmail.com>

Thu 07/03/2024 14:22

To: Sarjapura branch <Sarjap@bankofbaroda.com>

यह बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक न करें.
THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS

----- Forwarded message -----

From: **Mediwheel** <wellness@mediwheel.in>

Date: Sat, 2 Mar, 2024, 7:07 pm

Subject: Health Check up Booking Request(bobS12776), Beneficiary Code-162978

To: <unnam.anandbabu@gmail.com>

Cc: <customercare@mediwheel.in>

011-41195959

Dear ANAND BABU UNNAM,

We have received your booking request for the following health checkup, please upload your approval letter as soon as possible to enable us to confirm your booking.

User Package Name : Mediwheel Full Body Health Checkup Female Below 40

Name of Diagnostic/Hospital : Apollo Clinic - Electronic City

Address of Diagnostic/Hospital : Apollo Clinic, 323/100, Opp.Ajmera infinity Apartment, Neeladri Nagar, Electronic city Phase -1, Electronic city - 560100

Appointment Date : 08-03-2024

Preferred Time : 8:00am

Member Information		
Booked Member Name	Age	Gender
Vani neela	38 year	Female

Tests included in this Package

- Bmi Check
- Pap Smear
- Ent Consultation
- Dietician Consultation
- Gynae Consultation
- Thyroid Profile