_	Date: 12 03 2025
To, LIC of India Branch Office	
Proposal No. 24 6 /	,
Name of the Life to be assured UMED SINGH	NEGI
The Life to be assured was identified on the basis of	No.
I have satisfied myself with regard to the identity of the Life to be as examination for which reports are enclosed. The Life to be assured presence. BIND BIND	ssured before conducting tests / has signed as below in my
Signature of the Pathologist/ Doctor	

Name:

I confirm, I was on fasting for last 10 (ten) hours. All the Examination / tests as mentioned below were done with my consent.

(Signature of the Life to be assured)

Name of life to be assured:

Reports Enclosed:

Reports Name	Yes/No	Reports Name	Yes/No
ELECTROCARDIOGRAM	YES	PHYSICIAN'S REPORT	
COMPUTERISED TREADMILL TEST		IDENTIFICATION & DECLARATION FORMAT	
HAEMOGRAM		MEDICAL EXAMINER'S REPORT	
LIPIDOGRAM		BST (Blood Sugar Test-Fasting & PP) Both	
BLOOD SUGAR TOLERANCE REPORT		FBS (Fasting Blood Sugar)	
SPECIAL BIO-CHEMICAL TESTS - 13 (SBT- 13)	YES	PGBS (Post Glucose Blood Sugar)	
ROUTINE URINE ANALYSIS	YES	Proposal and other documents	
REPORT ON X-RAY OF CHEST (P.A. VIEW)		НЬ%	YES
ELISA FOR HIV	YES	Other Test	UCT

Comment Medsave Health Insurance TPA Ltd.

Authorized Signature,



ANNEXURE II - 1

LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

Zone	ELECTROCAR	DIOGRAM
Proposal No	Division	Branch
Agent/D.O. Code: Full Name of Life to be assu Age/Sex : Instructions to the Cardiolog i. Please satisfy you impersonation ii. The examinee ar	Introduced by: ured: UMED S 48/M gist: Durself about the id	lentity of the examiners to guard against
iv. The base line multive Rest ECG shoul minimum of 3 c wave change, th	ast be steady. The trade d be 12 leads along	Also obtain signatures on ECG tracings. acing must be pasted on a folder. with Standardization slip, each lead with I.I. If L-III and AVF shows deep Q or T
The total	DECLARA	TION
		given by me after fully understanding the nformation has been withheld. I do agree given by me to LIC of India.
Witness	Si	gnature or Thumb Impression of L.A.
answers thereof.		llowing questions to L.A. and to note the
i. Have you ever h	iad chest pain, paip	itation, breathlessness at rest or exertion?
ii. Are you sufferin kidney disease?	g from heart disease	e, diabetes, high or low Blood Pressure or
iii. Have you ever h test done? Y/N	ad Chest X- Ray, E0	CG, Blood Sugar, Cholesterol or any other
If the answer/s to any/all a	bove questions is "	Yes', submit all relevant papers with this
Dated at DECIST on the day	y of 12/03/202	5 Signature of the Cardiologist
Signature of L.A.	W DELTH C	Name & Address Qualification Code No.

Clinical findings (A)

Height (Cm)	Weight (kgs)	Blood Pressure		Pulse Rate	
173	75.3	120	82	70/	1

(B)	Cardiovaceul			
	Cardiovascular System			
		······)	••••••	
		••••		
Rest E	CCG Report:			
	Position			
	Standardisation Imv	SyAnc.	P Wave	(N)
	Mechanism	(N)	PR Interval	(N)
		(A)	QRS Complexes	(A)
	Voltage		Q-T Duration	
	Electrical Axis	N		(\vec{N})
		(N)	S-T Segment	
	Auricular Rate	71.	T -wave	NO)
	Ventricular Rate	70m		
	Rhythm	4 day	Q-Wave	(N)
		Red Jan		
	Additional findings, if any	Marilan		

Conclusion: WWL

Dated at NSLNT on the day of $|\omega|^{0.3}$ 2025

25 Dr. BINDU

MBBS. MD

Reg. No. 334 35

Signature of the Cardiologist

Name & Address

Qualification Qualification Code No.

Ate- 18/2/2017

Bote- 18/2

Ate- 48/2

Ate- 48/2 And No. 155 Name: ARROW

Email – elitediagnostic4@gmail.com

AGE/SEX - 48/M

PROP. NO. S. NO.

2461

NAME

Date

112390

REF. BY

MR. UMED SINGH NEGI

LIC

MARCH, 12, 2025

BIOCHEMISTRY-(SBT-13)

Test	Result	<i>Units</i>	Normal Range
Blood Sugar Fasting S. Cholesterol H.D.L. Cholesterol L.D.L. Cholesterol S.Triglycerides S.Creatinine Blood Urea Nitrogen (BUN) Albumin Globulin S.Protein Total AG/Ratio Direct Bilirubin Indirect Bilirubin Total Bilirubin S.G.O.T. S.G.P.T. Gamma Glutamyl Transferase (GGT) S. Alk. Phosphatase	98.11 184.17 71.50 122.97 120.50 0.91 13.30 4.6 2.9 7.5 1.58 0.2 0.6 0.8 29.20 30.74 45.50 95.40	mg/dl mg/dl mg/dl mg/dl mg/dl mg/dl gm% gm% gm% IU/L IU/L IU/L	70-115 130-250 35-90 0-160 35-160 0.5-1.5 06-21 3.2-5.50 2.00-4.00 6.00-8.5 0.5-3.2 0.00-0.3 0.1-1.00 0.1-1.3 00-42 00-42 00-42 00-60 28-111 mildren 151-471)
		(C11	11101011 101 1/1/

SEROLOGY

Test Name :Human Immunodeficiency Virus I&II {HIV}(Elisa method)

:

Result

"Non-Reactive"

Normal-Range

"Non-Reactive"

Test Name

:Hepatitis B Surface Antigen {HbsAg}} (Elisa method)

Result

"Non-Reactive"

"Non-Reactive"

Normal-Range

*******End of The Report *******

Please correlate with clinical conditions.

DR. T.K. MATHUR

M.B.B.S. MD (PATH)

REGD.NO. 19702

Ensultant Pathologist

7091, Gali no. 10, Mata Rameshwari Marg, Nehru Nagar Karol Bagh, Delhi-110005 Contact: +91-9650089041, 9871144570 7091, Call no. 10, Iviata Ramosinian to a correlate clinically. Please refer to the lab without any hasitation. This report is not for medico – legal cases.

Email - elitediagnostic4@gmail.com

PROP. NO.

S. NO. NAME

2461

REF. BY

112390 MR. UMED SINGH NEGI

Date

LIC MARCH, 12, 2025 AGE/SEX - 48/M

<u>Cotinine</u>

Test

Result

Cotinine

NEGATIVE

Cotinine Levels

<10 ng/mL – Non-active smoker.

10 ng/mL to 100 ng/mL – Light smoker or moderate passive exposure.

>200 ng/mL – Considered to be hea

vy smokers

NOTE: We are using Nano Card method in Urine cotinine. In This method only Negative & Positive values are there.

Cotinine test is a rapid, self-controlled immunoassay for the qualitative detection of cotinine in human urine. Cotinine is a primary metabolite of nicotine and remains in the body of habitual tobacco users for approximately 17 hours..

*******End of The Report******

Please correlate with clinical conditions.

DR. T.K. MATHUR

M.B.B.S. MD (PATH) REGD.NO. 19702 Consultant Pathologist



Email – elitediagnostic4@gmail.com

PROP. NO.

2461

S. NO.

112390

NAME

MR. UMED SINGH NEGI

REF. BY

Date

LIC

MARCH, 12, 2025

HAEMOGRAM

Test	Result	Units	Normal Range
Hemoglobin	14.39	am/dl	12-18

<u>ROUTINE URINE ANALYSIS</u>

PHYSICAL EXAMINATION

Quantity 20.ml Colour P. YELLOW Transparency Clear Sp Gravity 1.013

CHEMICAL EXAMINATION

Reaction ACIDIC Albumin Nil /HPF Reducing Sugar Nil. /HPF

MICROSCOPIC EXAMINATION

Pus Cells/WBCs 1-2. /HPF Nil. *RBCs* /HPF Epithelial Cells 2-3. /HPF Nil. Casts Nil. /HPF Crystals Nil. Bacteria Nil. Others

*******End of The Report ******

Please correlate with clinical conditions.

DR. T.K. MATHUR

M.B.B.S. MD (PATH) REGD.NO. 19702 **c**onsultant Pathologist

AGE/SEX - 48/M

7091, Gali no. 10, Mata Rameshwari Marg, Nehru Nagar Karol Bagh, Delhi- 110005 Contact: +91-9650089041, 9871144570 NOTE: Not to the final Diagnosis if highly abnormal or do not correlate clinically. Please refer to the lab without any hasitation. This report is not for medico - legal cases.



भारत सरकार GOVERNMENT OF INDIA



उमेद सिंह नेगी Umed Singh Negi DOB: 14-07-1976

Gender:Male



9246 8823 5226

आधार- आम आदमी का अधिकार

