

Date: 07/03/25

To,  
LIC of India  
Branch Office

Proposal No. 8211

Name of the Life to be assured USHA KAUSHIK

The Life to be assured was identified on the basis of PAN CARD

I have satisfied myself with regard to the identity of the Life to be assured before conducting tests / examination for which reports are enclosed. The Life to be assured has signed as below in my presence.

Sunita

Signature of the Pathologist/ Doctor

Name: DR. SUNITA RANI

Dr SUNITA RANI  
M.B.B.S  
DMC Reg No. 15290

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

Usha Kaushik

(Signature of the Life to be assured)

Name of life to be assured:

**Reports Enclosed:**

Reports Name	Yes/No	Reports Name	Yes/No
ELECTROCARDIOGRAM	✓	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)		PGBS (Post Glucose Blood Sugar)	
ROUTINE URINE ANALYSIS		Proposal and other documents	
REPORT ON X-RAY OF CHEST (P.A. VIEW)		Hb%	
ELISA FOR HIV		Other Test	

**Comment Medsave Health Insurance TPA Ltd.**

Authorized Signature,

**आयकर विभाग**  
**INCOME TAX DEPARTMENT**

**भारत सरकार**  
**GOVT. OF INDIA**

स्थायी लेखा संख्या कार्ड  
 Permanent Account Number Card

**IJIPK5704E**


 नाम / Name  
**USHA KAUSHIK**

पिता का नाम / Father's Name  
**KRISHAN DUTT**

जन्म की तारीख /  
 Date of Birth  
**03/06/1985**

*Usha Kaushik*  
 हस्ताक्षर / Signature



14-03-2018

*Sunita*  
**Dr SUNITA RANI**  
**M.B.B.S**  
**DMC Reg No. 15290**





**NABL**  
ACCREDITED LAB

1441-A, WARD NO.-1, (Opp. R.H.T.C),  
NAJAFGARH, NEW DELHI-110043  
Tel : 011-25014099  
Mob : +91-8588864117 / 136  
Email : doctorsdiagnostic1996@gmail.com

# DDC DOCTORS DIAGNOSTIC CENTRE

Consultant Pathologist  
**DR. HEMANT KAPOOR**  
MD, DPB (Pathology)

Consultant Radiologist  
**DR. BIPUL BISWAS**  
MD (Radiology)

*Sunita*  
**Dr SUNITA RANI**  
M.B.B.S  
DMC Reg No. 15290



GPS Map  
Camera Lite

37, Mundka Village, Mundka, New Delhi, Delhi, 110041,

India

Longitude  
77.02699927°  
Altitude 217 meters  
Friday, 07.03.2025

Latitude  
28.6791014°  
Local 10:20:56 AM  
GMT 04:50:56 AM



This Report is for the persual of doctors only, Not for Medico-Legal cases. Clinical Co-relation is essential. Please Contact us in Case of Unexpected results.

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LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

ELECTROCARDIOGRAM

Zone Division Branch

Proposal No. 8211

Agent/D.O. Code: Introduced by: (name & signature)

Full Name of Life to be assured: USHA KAUSHIK

Age/Sex : 59/F

Instructions to the Cardiologist:

- i. Please satisfy yourself about the identity of the examiners to guard against impersonation
- ii. The examinee and the person introducing him must sign in your presence. Do not use the form signed in advance. Also obtain signatures on ECG tracings.
- iii. The base line must be steady. The tracing must be pasted on a folder.
- iv. Rest ECG should be 12 leads along with Standardization slip, each lead with minimum of 3 complexes, long lead II. If L-III and AVF shows deep Q or T wave change, they should be recorded additionally in deep inspiration. If V1 shows a tall R-Wave, additional lead V4R be recorded.

DECLARATION

I hereby declare that the foregoing answers are given by me after fully understanding the questions. They are true and complete and no information has been withheld. I do agree that these will form part of the proposal dated 7/3/25 given by me to LIC of India.

Witness

Usha Kaushik  
Signature or Thumb Impression of L.A.

*Note : Cardiologist is requested to explain following questions to L.A. and to note the answers thereof.*

- i. Have you ever had chest pain, palpitation, breathlessness at rest or exertion? Y/N
- ii. Are you suffering from heart disease, diabetes, high or low Blood Pressure or kidney disease? Y/N
- iii. Have you ever had Chest X- Ray, ECG, Blood Sugar, Cholesterol or any other test done? Y/N

If the answer/s to any/all above questions is 'Yes', submit all relevant papers with this form.

Dated at 7/3/25 on the day of 200

Signature of L.A.

Usha Kaushik.

Signature of the Cardiologist  
Name & Address  
Qualification Code No.

DR. GANESH SINGH  
MBBS, DNB General Medicine  
DMC Regn. No. 28332  
Senior Consultant and Diabetes Clinic  
Deeyash Medical and Diabetes Clinic  
S-45 A, 46 New Roshanpura,  
Noida-2013043

7/3/25

Clinical findings

(A)

Height (Cms)	Weight (kgs)	Blood Pressure	Pulse Rate
149	70	125/82 127/84	79

(B) Cardiovascular System

.....

.....

Rest ECG Report:

Position	-	P Wave	J
Standardisation Imv	Yes	PR Interval	
Mechanism	-	QRS Complexes	
Voltage	Normal	Q-T Duration	
Electrical Axis	Normal	S-T Segment	
Auricular Rate	87 Bb	T-wave	
Ventricular Rate	89 Bb	Q-Wave	
Rhythm	Sinus		
Additional findings, if any.			

Conclusion:

ECG - Normal

Dated at 7/3/25 on the day of 200

Signature of the Cardiologist

Name & Address

Qualification

Code No.

JA

MBBS, DNB General Medicine  
 DMC Regn. No. 28332  
 Senior Consultant Medicine  
 Deeyash Medical and Diabetes Clinic  
 S-45 A 46 A, New Roshanpura,  
 110043



REF I019778LSI CE LOT D751

GE Healthcare

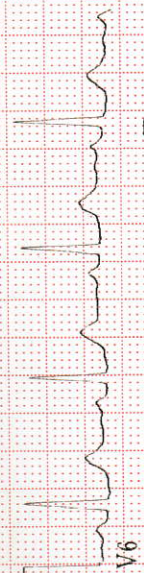
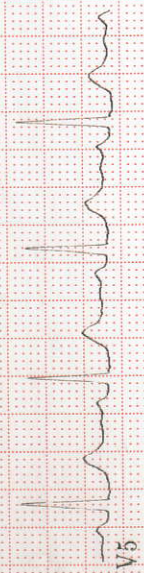
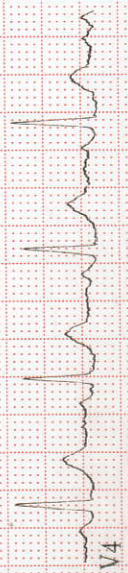
USHA KAUSHIK

07/03/2025

ID:

Usha Kaushik S91P

Normal sinus rhythm  
Normal ECG



Heart rate	87 bpm
QRS duration	68 ms
QT/QTc	382/459 ms
PR interval	146 ms
P duration	96 ms
RR interval	689 ms
P-R-T axes	67 5 74

DR. GAJULAKRISHN SINGH  
 Senior Consultant, Diabetes Clinics  
 MBBS, DNB General Medicine  
 DMC Regn No. 28332  
 Dejay Medical and Diagnostics Centre  
 S-45, 46-A, New Rosepura  
 Nalagarh, Karnal, India-110043

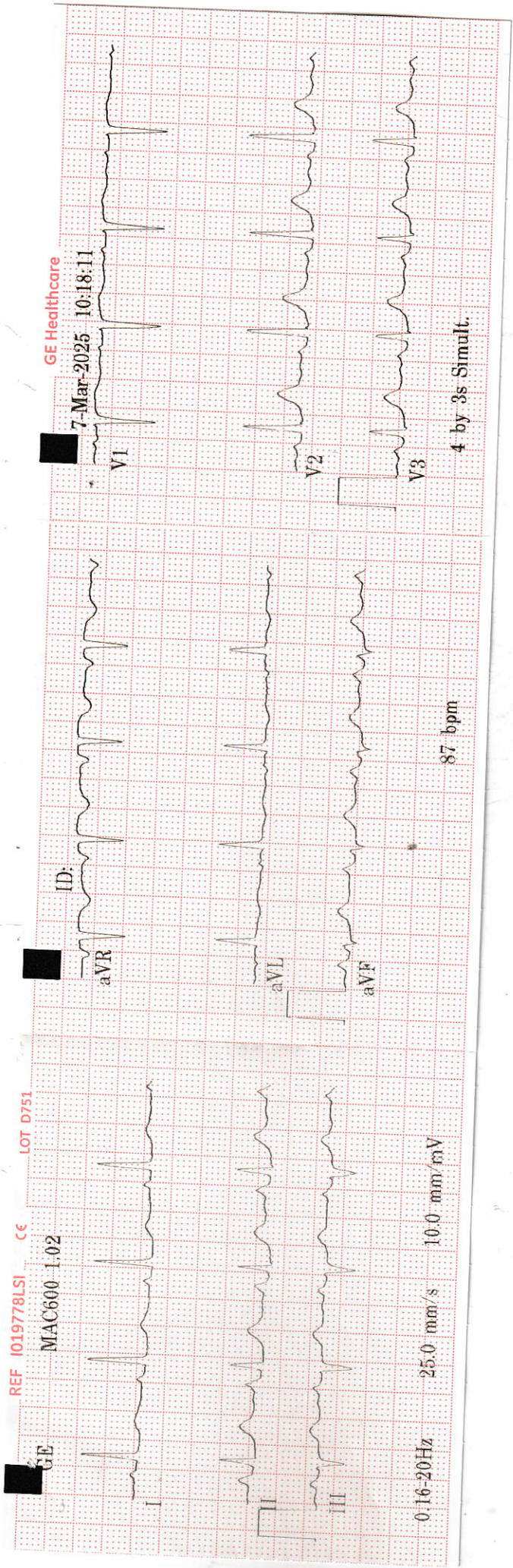
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**DR. BIPUL BISWAS**  
MD (Radiology)

Lab NO	072503070003	Sr.No	502
NAME	MRS.USHA KAUSHIK	Ref. BY	LIC
Age / Sex	59 YRS/FEMALE	Sample Coll DATE	07/Mar/2025 11:19AM
W/O	RAVINDRA	Approved ON	08/Mar/2025 03:10PM
DATE	07/Mar/2025 11:16AM	Printed ON	10/Mar/2025 08:49AM
		B A.310	

Test Name	Result	Status	Bio. Ref. interval	Unit
<b>BIOCHEMISTRY</b>				
<b>BLOOD SUGAR FASTING (FBS), Sod.Fluoride</b>				
Blood Sugar Fasting <i>Method : GOD/POD</i>	107		70-110	mg/dL
Urine for Glucose	NIL			

**NOTE:**

- 1) The diagnosis of Diabetes requires a fasting plasma glucose of  $\geq 126$  mg/dl and /or a random/ 2hr postglucose value of  $\geq 200$  mg/dL on least 2 occasions.
- 2) Very high glucose levels ( $> 450$  mg/dl in adults) may result in diabetic ketoacidosis & is considered critical.

Interpretation: (As per WHO guidelines)

Status	Fasting plasma glucose in mg/dl	PP plasma glucose in mg/dl
Normal	70 - 110	70 - 140
Impaired fasting glucose	110 - 125	70 - 140
Impaired glucose tolerance / PP	70 - 110	141 - 199
Pre-Diabetes	110 - 125	141 - 199
Diabetes mellitus	$>126$	$>200$

Note :- Each individual's target range should be agreed by their doctor or diabetic consultant.

Instrument Used: Vitros 250 Microslide (Dry-Biochemistry)

\*\*\* End Of Report \*\*\*

Tests marked with NABL symbol are accredited by NABL vide Certificate no MC-3237; Validity till 03/01/2029



DR. JAI PRABHAN  
MBBS, MD  
PATHOLOGIST

*Signature*  
DR. HEMANT  
MD, DPB  
PATHOLOGIST

CHECKED  
TECHNICAL OFFICER

Page 1 of 1

Printed By: DHEERAJ  
Duplicate Report



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नाम / Name

USHA KAUSHIK

पिता का नाम / Father's Name

KRISHAN DUTT

जन्म की तारीख /

Date of Birth

03/06/1965

*Usha Kaushik*

हस्ताक्षर / Signature

14042019





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