 GPS Map Camera



Raipur, Chhattisgarh, India
6j6w+f8v, Krishna Nagar, Santoshi Nagar, Raipur, Chhattisgarh
492013, India
Lat 21.211118° Long 81.64568°
22/02/2025 10:14 AM GMT +05:30



भारत सरकार
Government of India

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

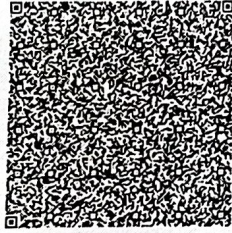
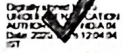
नामांकन क्रम/ Enrolment No.: 0013/18002/01187

Download Date: 26/10/2020

To
नोवदुरु वेंकटेश
Nowduru Venkatesh
S/O: N. Udaya Bhaskar
Housed No-C-45
Ward No-10
Sector-01
Ekta Nagar
Raipur
Gudhiyari
Raipur Chhattisgarh - 492009
88339537696

Issue Date: 18/06/2020

Signature valid



आपका आधार क्रमांक / Your Aadhaar No. :

~~6974 7058~~ 0492
VID : 9126 0862 1561 3855

मेरा आधार, मेरी पहचान



भारत सरकार
Government of India



Download Date: 26/10/2020



नोवदुरु वेंकटेश
Nowduru Venkatesh
जन्म तिथि/DOB: 22/08/1998
पुरुष/ MALE

Issue Date: 18/06/2020

~~6974 7058~~ 0492
VID : 9126 0862 1561 3855

मेरा आधार, मेरी पहचान



Government of India



सूचना

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- सुरक्षित QR कोड / ऑफलाइन XML / ऑनलाइन ऑथेंटिकेशन से पहचान प्रमाणित करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

- आधार देश भर में मान्य है।
- आधार कई सरकारी और गैर सरकारी सेवाओं को पाना आसान बनाता है।
- आधार में मोबाइल नंबर और ईमेल ID अपडेट रखें।
- आधार को अपने स्मार्ट फोन पर रखें, mAadhaar App के साथ।

- Aadhaar is valid throughout the country.
- Aadhaar helps you avail various Government and non-Government services easily.
- Keep your mobile number & email ID updated in Aadhaar.
- Carry Aadhaar in your smart phone – use mAadhaar App.



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

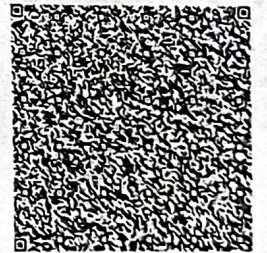


पता:

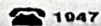
आत्मज: एन. उडया भास्कर, मकान-सी-45, वॉर्ड न-10,
एकता नगर, सेक्टर-01, रायपुर, छत्तीसगढ़ - 492009

Address:

S/O: N. Udaya Bhaskar, Housed No-C-45,
Ward No-10, Ekta Nagar, Sector-01, Raipur,
Raipur, Chhattisgarh - 492009



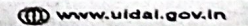
~~6974 7058~~ 0492
VID : 9126 0862 1561 3855



1047



help@uidai.gov.in



www.uidai.gov.in

DR. HULESH MANDLE
MBBS, MD.
CGMC 223/04

Yankatesh

Shri Sai Advance Imaging & Diagnostic Center
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar
Raipur (C.G.) 492001

Date: 22/02/2025

To, _____
Insurer _____
Branch Office

298
Proposal No. 8247
Sum Insured: _____

Unlque Transaction No: _____
Type: WALK IN / Scheduled / Home Visit

Name of the Life to be assured MR. NOWDURU VENKATESH

The Life to be assured was identified on the basis of ADHAR CARD (0492)

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.

Signature of the Pathologist/ Doctor DR. HULESH MANDLE
Name; MBBS, MD.
CGMC 223/04

All the Examination / tests as mentioned below were done with my consent.

Venkatesh
(Signature of the Life to be assured)

Shri Sai Advance Imaging & Diagnostic Center
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar
Raipur (C.G.) 492001

Name of life to be assured:

Reports Enclosed:

Sr. No	Reports Name	Sr. No	Reports Name
1	FMR	9	Lipidogram
2	Rest ECG with Tracing	10	BST (Blood Sugar Test-Fasting & PP) Both
3	Haemogram	11	Hb a1c
4	Hb%	12	FBS (Fasting Blood Sugar)
5	SBT-13	13	PGBS (Post Glucose Blood Sugar)
6	Elisa for HIV	14	CTMT with Tracing
7	RUA	15	Proposal and other documents
8	Chest X-Ray with Plate (PA View)		

16. Questionnaires: _____
17. Others (Please Specify) URINE COFININE

Remarks of TPA

Authorized Signature,
Insurance TPA Ltd.



LIFE INSURANCE CORPORATION OF INDIA

ELECTROCARDIOGRAM

Zone: Division:
Proposal No.: **8247** Branch: **298**
Full Name of Life to be assured: **MR. NOWDURU VENKATESH**
Age/ Sex: **26 Y/M**
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 22-02-2025 given by me to LIC of India.

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 No
- ii. Are you suffering from heart disease, diabetes, high or low Blood Pressure or kidney disease? Y/N No
- iii. Have you ever had Chest X- Ray, ECG, Blood Sugar, Cholesterol or any other test done? Y/N No

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

Dated at Raipur on the 22 /02 day of 2025.... At 10:22 a.m./p.m.

Signature of the Cardiologist

Cardiologist's Name & Address

DR. RAJESH SHARMA
MD, PGDCC (Cardiologist).
CGMC 686/2007

Dr. Sai Advance Imaging & Diagnostic Centre
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar,
Raipur (C.G.) 492001

Clinical findings

(A)

Height (cms)	Weight (kgs)	Blood Pressure	Pulse Rate
174 Cms	90 Kg	126/80 mmHg	72 bpm

(B) Cardiovascular System

.....**Normal**.....

.....

Rest ECG Report:

Position	Supine	P Wave	114 ms
Standardisation Imv	10 mv	PR Interval	180 ms
Mechanism	Sinus	QRS Complexes	86 ms
Voltage	1 mv	Q-T Duration	366 ms
Electrical Axis	Normal	S-T Segment	Normal
Auricular Rate	66 bpm	T-wave	Normal
Ventricular Rate	66 bpm	Q-Wave	Normal
Rhythm	Regular		
Additional findings, if any.	No		

Conclusion: WNL

 Dated at **Raipur** on the **22 / 02** day of **2025** At **10:22** a.m./p.m.

Signature of the Cardiologist

Name & Address:

Qualification:

Rajesh
DR. RAJESH SHARMA
 MD, PGDCC (Cardiologist).
 CGMC 686/2007

[Signature]
Shri Sai Advance Imaging & Diagnostic Center
 Address- Near Tarun Market, Krishna Nagar,
 Radha Vihar Gali, Santoshi Nagar,
 Raipur (C.G.) 492001

Patient: **ndwduru venkatesh**
 26 year / M
 cm / kg

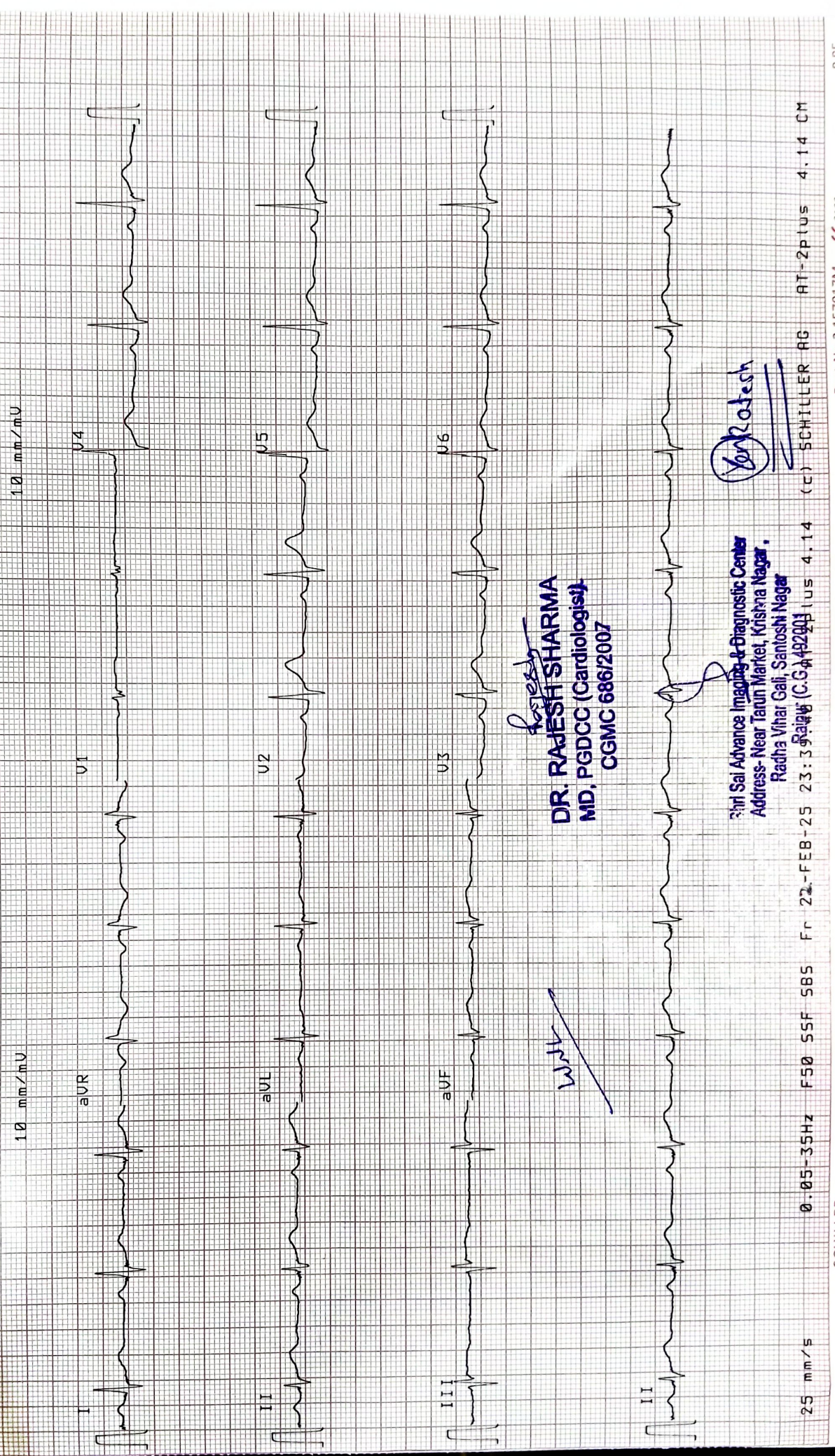
HR 66/min
 Intervals:
 RR 907 ms
 P 114 ms
 PR 180 ms
 QRS 86 ms
 QT 366 ms
 QTc 385 ms

Axis:
 P 26°
 QRS -12°
 T 28°

SINUS RHYTHM
 LEFTWARD AXIS
 QRS(T) CONTOUR ABNORMALITY
 CONSISTENT WITH INFERIOR MYOCARDIAL DAMAGE

UNCONFIRMED REPORT

10 mm/mV



Rajesh
DR. RAJESH SHARMA
 MD, PGDCC (Cardiologist)
 CGMC 686/2007

Venkatesh

Shri Sai Advance Imaging & Diagnostic Center
 Address- Near Tarun Market, Krishna Nagar,
 Radha Vihar Gali, Santoshi Nagar
 Bangalore (C.G.) 560001



LIFE INSURANCE CORPORATION OF INDIA
HAEMOGRAM

Zone:

Division:

Proposal No.: 8247

Branch: 298

Full Name of Life to be assured: **MR. NOWDURU VENKATESH**

Age/ Sex: 26 Y/M

Description	Result	Unit	Biological Ref. Range
CBC WITH ESR			
<u>W.B.C. Indices</u>			
TOTAL WBC COUNT	8400	/cumm	4000 - 11000
NEUTROPHILS	62	%	40 - 70
LYMPHOCYTES	32	%	20 - 52
MONOCYTES	04	%	4 - 12
EOSINOPHILS	02	%	1 - 6
BASOPHILS	00	%	0 - 1
<u>R.B.C. Indices</u>			
HB %	14.2	gm/dL	12.5 - 16.5
RBC COUNT	4.56	Mill/c umm	4.2 - 5.5
HEMATOCRIT (PCV)	42.0	%	37.5 - 49.5
MCV	84.0	fL	80 - 95
MCH	28.3	pg	26 - 32
MCHC	34.10	g/dl	32 - 36
RDW-CV	14.0	%	11.5 - 16.5
<u>Platelet Indices</u>			
PLATELET COUNT	217000	/ μ L	150000-400000
MPV	8.3	fl	7.0 - 11.0
PDW	15.5	%	12 - 18
P-LCR	24.6	%	13 - 43
ESR	10	after 1 hr	0 - 15
Advice (Method Westergren)			

I declare that the person examined signed (affixed his/her thumb impression) in the space earmarked below, in my presence and I am not related to him/her or the Agent or the Development Officer.

Dated at **Raipur**

on the **22/02**

day of **2025**

At **10:14** a.m./p.m.

Signature of the Pathologist

Pathologist's Name & Address **DR. MIKAEL KUJUR**

Qualification:

DR. MIKAEL KUJUR
MD (PATHOLOGY)

CGMC- 2996/2010

Shri Sai Advance Imaging & Diagnostic Center
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar
Raipur (C.G.) 492001



CGMC-2996/2010
WD (HYPERTENSION)
DR. MIKAL KUJUR

LIFE INSURANCE CORPORATION OF INDIA

HAEMATOLOGY

Zone: Division:
Proposal No.: 9247 Branch: 298
Full Name of Life to be assured: MR. NOWDURU VENKATESH
Age/ Sex: 26Y/M

Test Name	Value	Unit
HbA1c	5.1 %	%

REFERENCE VALUES

Non-diabetic Level <6 %
Good Control 6 - 7 %
Fair Control 7 - 8 %
Unsatisfactory Control 8 - 10 %
Poor Control > 10 %

SUMMARY & EXPLANATION OF THE TEST

Diabetes Mellitus is a leading cause of kidney failure, blindness and amputation in adults. It is also a major risk factor for heart disease, stroke and birth defects and shortens average life expectancy any up to 15 years. It is now well accepted that in patients with diabetes there is a direct relationship between blood sugar levels and complications associated with the disease.

The measurement of HbA1c is recommended for monitoring the long-term care of people with diabetes because the concentration of HbA1c within red blood cells reflects the average level of blood sugar over the previous 2-3 months. The level of HbA1c therefore rises proportionately in patients with higher levels of blood sugar, such as those with uncontrolled or undiagnosed diabetes.

I declare that the person examined signed (affixed his/her thumb impression) in the space earmarked below, in my presence and I am not related to him/her or the Agent or the Development Officer.

Dated at Raipur on the 22/02 day of 2025 At 10:14 a.m./p.m.

Signature of the Pathologist

Pathologist's Name & Address

Qualification:

Mikal Kujur
DR. MIKAL KUJUR
MD (PATHOLOGY)
CGMC-2996/2010

Shri Sai Advance Imaging & Diagnostic Center
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar
Raipur (C.G.) 492001



Full Name of Life to be assured: **MR. NOWDURU VENKATESH**

Age	26 YRS	Sex	Male
Division		Branch	298
Proposal No.:	8247	Agent Coad No.:	
		Dev. Officer Coad No.	
Introducer	Name	Designation/Club Membership	Signature (In Full)
Agent			
Second Introducer			

1. Physical Examination

(i)	Colour	YELLOW	(ii)	Sediment	CLEAR
(iii)	Transparency	CLEAR	(iv)	Reaction	Acidic

2. Chemical Examination

(i)	Protein	NIL	(ii)	Sediment	NIL
(iii)	Bile salt	NIL	(iv)	Bile pigments	Nii

3. Microscopy Examination

(i)	Red Blood Cells	NIL	(ii)	Epithelial Cells	1-2/hpf
(iii)	Crystals	NIL	(iv)	Pus Cells	1-2/hpf
(v)	Cast	NIL	(vi)	Deposit	Clear
(vii)	Bacteria	Absent			

Remarks

If pus cells are present GRAM STAIN is necessary
 If haematuria is present ZIEHL NEELSEN METHOD is necessary

I declare that the person (investigated) signed (affixed his/her thumb impression) in the space earmarked below, in my presence and that I am not related to him/her or the Agent of the Development Officer.

Dated at	Raipur	on the	22	day of	02	2025	At	10:14	AM
----------	--------	--------	-----------	--------	-----------	-------------	----	--------------	-----------

Signature of the Pathologist

Pathologist's Name & Address

[Handwritten Signature]

Qualification:

DR. MIKAL KUJUR
MD (PATHOLOGY)
CGMC- 2996/2010

Shri Sai Advance Imaging & Diagnostic Center
 Address- Near Tarun Market, Krishna Nagar,
 Radha Vihar Gali, Santoshi Nagar,
 Raipur (C.G.) 492001



LIFE INSURANCE CORPORATION OF INDIA

SBT-13 Report

Zone:

Division:

Proposal No.: 8247

Branch: 298

Full Name of Life to be assured: MR. NOWDURU VENKATESH

Age/ Sex: 26 Y/Male

Sr. No	Type of Test	Actual Reading	Normal Values		
1	Fasting Blood Sugar	84.5	Mg/dl	70 - 110	
2	Total Cholesterol	167	Mg/dl	200 - 239	
	High Density Lipid (HDL)	42	Mg/dl	30 - 70	
	Low Density Lipid (LDL)	101	Mg/dl	50 - 140	
3	S. Triglycerides	118	Mg/dl	150 - 200	
4	S. Creatinine	0.74	Mg/dl	0.66 - 1.25	
5	Blood Urea Nitrogen (BUN)	14	Mg/dl	7 - 18	
6	S. Proteins	6.2	g/dl	6.3 - 8.2	
	a) Albumin	4.1	g/dl	3.5 - 5.0	
	b) Globulin	2.1	g/dl	2.3 - 3.6	
	c) AG Ratio	2.0		1.1 - 2.0	
7	S. Bilirubin				
	a) Direct	0.33	Mg/dl	0 - 0.3	
	b) Indirect	0.42	Mg/dl	0 - 1.1	
	c) Total	0.75	Mg/dl	0.2 - 1.3	
8	SGOT (AST)	27	U/L	17 - 59	
9	SGPT (ALT)	24	U/L	21 - 72	
10	GGTP (GGT)	20	U/L	<55	
11	S. Alkaline Phosphatase	108	U/L	38 - 126	
12	HbsAg (Australia antigen)	Negative		Non - Reactive	
13	Elisa for HIV (Method)	Negative	0.32	Non - Reactive	

I declare that the person examined signed (affixed his/her thumb impression) in the space earmarked below, in my presence and I am not related to him/her or the Agent/DO.

Dated at	Raipur	on the	22	day of	02	2025	At	10:14	AM
----------	--------	--------	----	--------	----	------	----	-------	----

Signature of the Pathologist

Pathologist's Name & Address

Phujur
DR. MIKAL KUJUR
MD (PATHOLOGY)
CGMC- 2996/2010

Qualification:

S
Sri Sai Advance Imaging & Diagnostic Center
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar
Raipur (C.G.) 492001



A Unit of Diagnostic Care with Trust

श्री साई एडवांस इमेजिंग एण्ड डायग्नोस्टिक सेंटर PVT. LTD.

हर जीवन  अमूल्य है

पुराना धमतरी रोड, सब्जी बाजार के सामने,
संतोषी नगर, रायपुर (छ.ग.) ☎ **0771-4023900**

MRI | C.T. Scan | 4-D Colour USG | Digital X-Ray | Advanced Pathology | 2D Echo / E.C.G. / TMT / E.E.G / OPG / SPIRO


PT. NAME	:- MR. NOWDURU VENKATESH	Sample Collected On	:- 22/02/2025
PT. AGE/SEX	:- 26 Y / M	Report Released On	:- 24/02/2025
MOBILE NO	:-	Accession On	:- 10
Ref. By.	:- SELF	Patient Unique ID No.	:- 11331
Company	:- LIC (Life insurance Corporation)	TPA	:- MEDSAVE

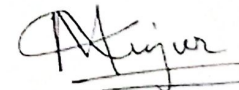
CLINICAL PATHOLOGY

Description	Result	Unit	Biological Ref. Range
URINE COTININE			
URINE COTININE	NEGATIVE		NEGATIVE

--- End Of Report ---

CHECKED BY


Shri Sai Advance Imaging & Diagnostic Center
Address- Near Tarun Market, Krishna Nagar,
Radha Vihar Gali, Santoshi Nagar,
Raipur (C.G.) 492001


DR. MAIKAL KUJUR MBBS, MD
PATHOLOGY (AIIMS, NEW DELHI)
REG. NO. : CG MCI-2996/2010


DR. MIKAL KUJUR
MD (PATHOLOGY)
CGMC- 2996/2010

सही जाँच ही सही ईलाज का आधार है...