

Date: 16/11/2024

To,
LIC of India
Branch Office

Proposal No. 126695929

Name of the Life to be assured HEERAJ GUPTA

The Life to be assured was identified on the basis of _____

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.

Dr. BINDU

Signature of the Pathologist/ Doctor

[Signature]
MBBS, MD
Reg. No.-33435

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]
(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)		Hb%	Yes
LISA FOR HIV		Other Test	

Comment Medsave Health Insurance TPA Ltd.

Authorized Signature,



ANNEXURE II - 1

LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

ELECTROCARDIOGRAM

Zone Division Branch

Proposal No. 126695929

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

Full Name of Life to be assured: NEERAJ GUPTA

Age/Sex : 47-18/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 ___ given by me to LIC of India.

Witness

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 DELHI on the day of 16/11/2023 2023

Signature of L.A.



Signature of the Cardiologist
Name & Address
Qualification



Code No.
Dr. BINDU
MBBS, MD
Reg. No.-33435

Clinical findings

(A)

Height (Cms)	Weight (kgs)	Blood Pressure	Pulse Rate
174	64.1	120/82	78/4

(B) Cardiovascular System

..... (w)

.....

Rest ECG Report:

Position	Supine	P Wave	(w)
Standardisation Imv	(w)	PR Interval	(w)
Mechanism	(w)	QRS Complexes	(w)
Voltage	(w)	Q-T Duration	(w)
Electrical Axis	(w)	S-T Segment	(w)
Auricular Rate	78/4	T-wave	(w)
Ventricular Rate	78/4	Q-Wave	(w)
Rhythm	Regular		
Additional findings, if any.	nil		

Conclusion:

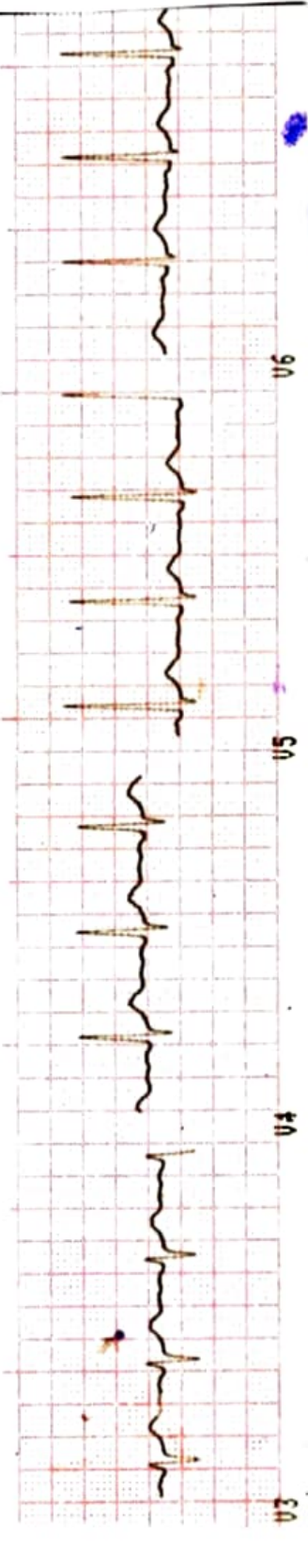
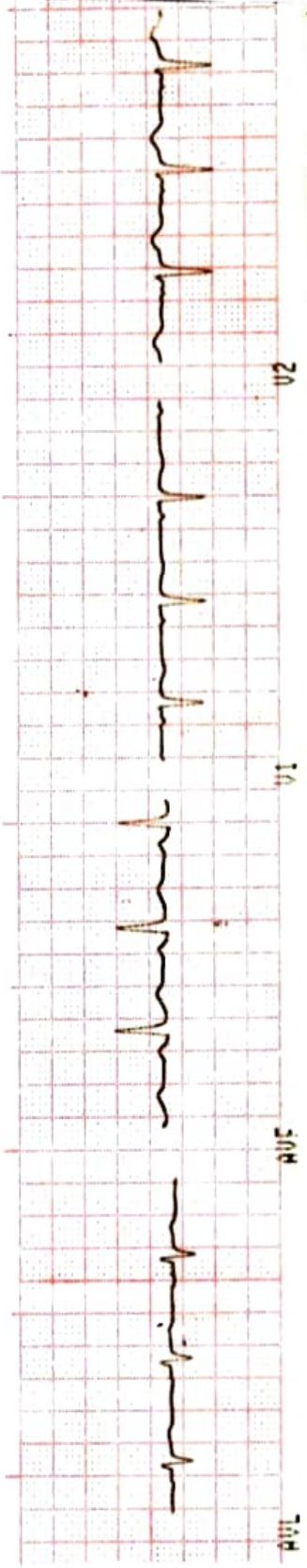
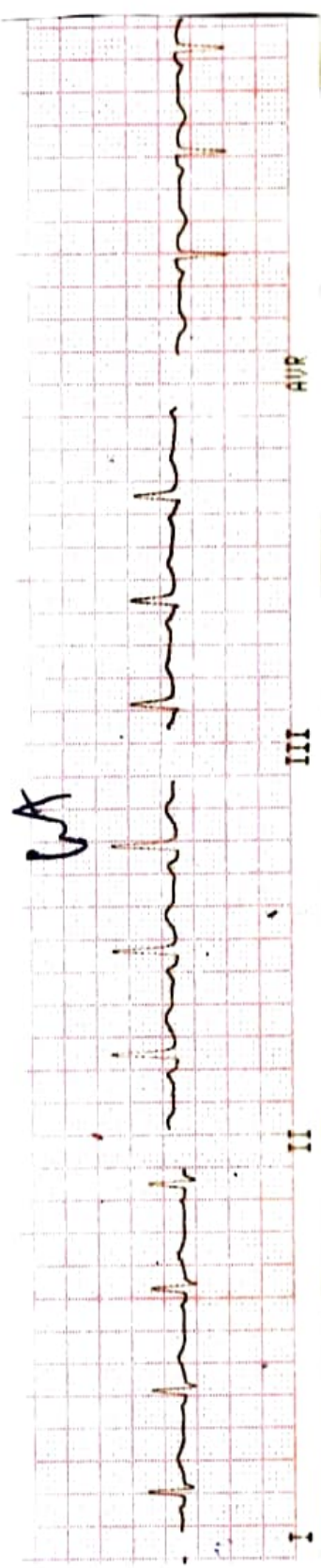
ECG-NORMAL

Dr. BINDU
MBBS, MD
Reg. No. - 33435

Dated at DELHI on the day of 16/11/2024 200



Signature of the Cardiologist
Name & Address
Qualification
Code No.



Dr. BINDU
M.B.B.S., MD
Reg. No. - 33435

NEERAJ GUPTA

EKG - W.R.L

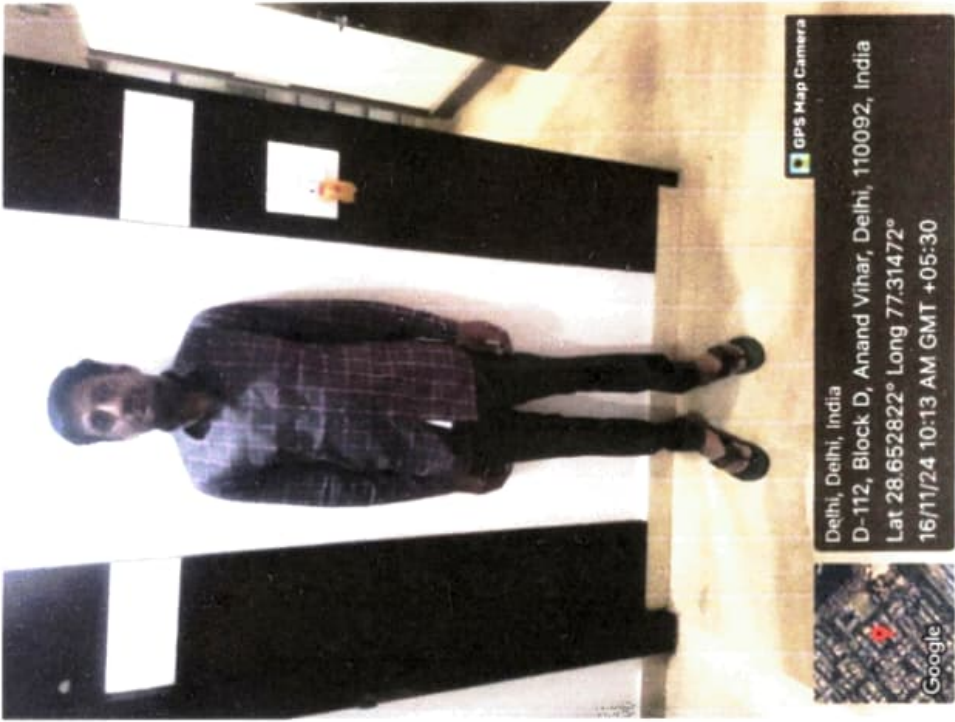
AGE - 47 Y/M

DATE - 16/11/2024





DR. BINDU
 MBBS, MD
 Reg. No.-33435





ELITE DIAGNOSTIC

Email – elitediagnostic4@gmail.com

PROP. NO. : 126695929
S. NO. : 110490
NAME : **MR. NEERAJ GUPTA** **AGE/SEX - 47/M**
REF. BY : LIC
Date : NOVEMBER, 16, 2024

ROUTINE URINE ANALYSIS

PHYSICAL EXAMINATION

Quantity : 20.ml
Colour : P. YELLOW
Transparency : Clear
Sp Gravity : 1.015

CHEMICAL EXAMINATION

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

MICROSCOPIC EXAMINATION

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

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

Please correlate with clinical conditions.



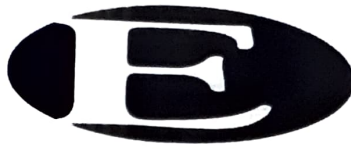
DR. T.K. MATHUR

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

REGD. NO. 19702

Consultant Pathologist

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.



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S. NO. : 110490
NAME : **MR. NEERAJ GUPTA** **AGE/SEX - 47/M**
REF. BY : LIC
Date : NOVEMBER, 16, 2024

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"
Normal-Range : "Non-Reactive"

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

Please correlate with clinical conditions.



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NAME : **MR. NEERAJ GUPTA** **AGE/SEX - 47/M**
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Date : NOVEMBER, 16, 2024

HAEMOGRAM

Test	Result	Units	Normal Range
Hemoglobin	14.45	gm/dl	12-18

BIOCHEMISTRY-(SBT-13)

Blood Sugar Fasting	95.31	mg/dl	70-115
S. Cholesterol	181.53	mg/dl	130-250
H.D.L. Cholesterol	73.93	mg/dl	35-90
L.D.L. Cholesterol	121.17	mg/dl	0-160
S. Triglycerides	115.68	mg/dl	35-160
S. Creatinine	0.89	mg/dl	0.5-1.5
Blood Urea Nitrogen {BUN}	14.55	mg/dl	06-21
Albumin	4.7	gm%	3.2-5.50
Globulin	3.1	gm%	2.00-4.00
S. Protein Total	7.8	gm%	6.00-8.5
AG/Ratio	1.51		0.5-3.2
Direct Bilirubin	0.2	mg/dl	0.00-0.3
Indirect Bilirubin	0.8	mg/dl	0.1-1.00
Total Bilirubin	1.0	mg/dl	0.1-1.3
S.G.O.T.	39.15	IU/L	00-42
S.G.P.T.	37.85	IU/L	00-42
Gamma Glutamyl Transferase (GGT)	40.77	IU/L	00-60
S. Alk. Phosphatase	94.17	IU/L	28-111

(Children 151-471)

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

Please correlate with clinical conditions.



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