

Patient Name : Mrs.TEJASWINI SHIROLKAR
Age/Gender : 37 Y 8 M 13 D/F
UHID/MR No : SPUN.0000052200
Visit ID : SPUNOPV72168
Ref Doctor : Dr.SELF
Emp/Auth/TPA ID : 493465

Collected : 27/Feb/2025 10:34AM
Received : 27/Feb/2025 11:17AM
Reported : 27/Feb/2025 12:03PM
Status : Final Report
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
HEMOGRAM , WHOLE BLOOD EDTA				
HAEMOGLOBIN	11.9	g/dL	12-15	Spectrophotometer
PCV	36.10	%	36-46	Electronic pulse & Calculation
RBC COUNT	4.37	Million/cu.mm	3.8-4.8	Electrical Impedance
MCV	82.5	fL	83-101	Calculated
MCH	27.3	pg	27-32	Calculated
MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,760	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYtic COUNT (DLC)				
NEUTROPHILS	52.4	%	40-80	Electrical Impedance
LYMPHOCYTES	34.5	%	20-40	Electrical Impedance
EOSINOPHILS	6.5	%	1-6	Electrical Impedance
MONOCYTES	6.2	%	2-10	Electrical Impedance
BASOPHILS	0.4	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	3542.24	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2332.2	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	439.4	Cells/cu.mm	20-500	Calculated
MONOCYTES	419.12	Cells/cu.mm	200-1000	Calculated
BASOPHILS	27.04	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.52		0.78- 3.53	Calculated
PLATELET COUNT	318000	cells/cu.mm	150000-410000	Electrical impedance
MPV	7.7	fL	8.1-13.9	Calculated
ERYTHROCYTE SEDIMENTATION RATE (ESR)	21	mm at the end of 1 hour	0-20	Modified Westergren

PERIPHERAL SMEAR

RBC Microcytes+

WBC are normal in number and morphology

Platelets are Adequate

Page 1 of 6



DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist



SIN No:BED250016401

Apollo Speciality Hospitals Private Limited
This test has been performed at Apollo Health and Lifestyle Rd- Sadashiv Peth Pune, Diagnostics Lab

(Formerly known as a Nova Speciality Hospitals Private Limited)

CIN- U85100TG2009PTC099414

Regd Off:1-10-62/62,5th Floor, Ashoka RaghupathiChambers,
Begumpet, Hyderabad, Telangana - 500016

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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

No hemoparasite seen.



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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Comment:

1. This tests determines ABO & Rh blood groups (testing for other blood group systems not performed) through immunological reaction between RBC antigen & antibody.
2. ABO system also has Subgroups of A, B and rare phenotype as Bombay blood group which requires further testing and required recommendations as per the case will be provided.
3. Rh system in certain individual can have weak or partial Rh D expression which can result in weaker agglutination reactions and hence all Rh D Negative groups need to be further cross verified using Rh Du testing.
4. In case of Newborn - Only forward typing is performed, reverse typing is not performed, since the antibodies are not fully formed. Hence it is recommended to re-test blood grouping after 6 months.
5. In certain cases History of Recent blood transfusion (within 3-4mths), of bone marrow transplantation, certain drugs (especially monoclonal antibody) & certain malignancies may interfere with interpretation of blood grouping.
6. It is always recommended for reconfirmation of the Blood Group along with cross matching before blood transfusion.



DR.Sanjay Ingle
M.B.B.S,M.D(Pathology)
Consultant Pathologist



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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	99	mg/dL	70-100	HEXOKINASE

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Sneha Shah
Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:PLF02220643



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	101	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.



DR. Sanjay Ingle
M.B.B.S, M.D (Pathology)
Consultant Pathologist



SIN No: PLP1494142

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ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM	12.5	U/L	10-35	IFCC with Pyridoxal Phosphate

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes.

ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear.

The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	0.24	mg/dL	0-1.2	Diazo

Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.82	mg/dL	0.5-0.9	Jaffe
.eGFR - ESTIMATED GLOMERULAR FILTRATION RATE, SERUM	90.95	mL/min/1.73m ²	>60	CKD-EPI FORMULA

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

Result/s to Follow:

COMPLETE URINE EXAMINATION (CUE)

Sneha Shah
Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:SE04878353



This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab

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TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.


Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:SE04878353



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Pune, Maharashtra

Name : Mrs. Tejaswini Shirolkar

Age: 37 Y

UHID:SPUN.0000052200

Sex: F



Address : PUNE

OP Number:SPUNOPV72168

Plan : ARCOFEMI MEDIWHEEL PMC CREDIT PAN INDIA OP AGREEMENT

Bill No :SPUN-OCR-12861

Date : 27.02.2025 09:18

Sno	Service Type/ServiceName	Department
1	ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324	
✓ 1	BILIRUBIN, TOTAL - SERUM	
✓ 2	GLUCOSE, FASTING	
✓ 3	HEMOGRAM + PERIPHERAL SMEAR	
✓ 4	ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM	
✓ 5	GYNACOBG CONSULTATION	
✓ 6	COMPLETE URINE EXAMINATION	
✓ 7	PERIPHERAL SMEAR	
✓ 8	ECG	
✓ 9	CREATININE, SERUM	
✓ 10	GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL)	
✓ 11	X-RAY CHEST PA	
12	FITNESS BY GENERAL PHYSICIAN	
✓ 13	BLOOD GROUP ABO AND RH FACTOR	
✓ 14	OPHTHAL BY GENERAL PHYSICIAN	
✓ 15	BUN/CREATININE RATIO	

CERTIFICATE OF MEDICAL FITNESS

This is to certify that I have conducted the clinical examination

of Tejaswini Shirolkar on 27/2/25

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> • Medically Fit 	✓
<ul style="list-style-type: none"> • Fit with restrictions/recommendations <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> • Currently Unfit. Review after _____ recommended • Unfit 	

Dr. Samrat Shah
MBBS MD

Reg No. 202109730
Consultant Internal Medicine
Apollo Speciality Hospital

General Physician

Apollo Spectra Hospital Pune

This certificate is not meant for medico-legal purposes

Date : 27/2/25
MRNO :
Name : Tejaswini Shiralkar
Age/Gender : 37/F
Mobile No :

Department :
Consultant : Internal Medicine
Reg. No :
Qualification : DR. SAMRAT SHAH
MBBS, MD
Consultation Timing :

Pulse : 60bpm	B. P. : 100/60mmHg	Resp : 20bpm	Temp : Afebrile
Weight : 89.2kg	Height : 159cm	BMI : -	Waist Circum : -

SpO2 - 100%

General Examination / Allergias
History

Clinical Diagnosis & Management Plan

found fit to join duty

Dr. Samrat Shah
MBBS MD
Reg No. 2021097302
Consultant Internal Medicine
Apollo Speciality Hospital

Follow up date:

Doctor Signature

Date : Tejaswini Shivolkar
MRNO :
Name :
Age/Gender : 37y F.
Mobile No : 2712125

Department :
Consultant : Gynecology
Reg. No :
Qualification : DR. RUCHA TEJE
MBBS, MS
Consultation Timing :

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

General Examination / Allergias

History

37y — Regular periods.
MH: 3-4/28-35d/20ml
LMP - 27/2/25

OH: PILA₂-LSCS

PH: NAD

PA: Soft

Scar (+)

Clinical Diagnosis & Management Plan



Follow up date:

Doctor Signature

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Test Name	Result	Unit	Bio. Ref. Interval	Method
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MCHC	33.1	g/dL	31.5-34.5	Calculated
R.D.W	14.5	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,760	cells/cu.mm	4000-10000	Electrical Impedence
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MPV	7.7	Fl	8.1-13.9	Calculated
ERYTHROCYTE SEDIMENTATION RATE (ESR)	21	mm at the end of 1 hour	0-20	Modified Westergren

PERIPHERAL SMEAR

RBC Microcytes+

WBC are normal in number and morphology

Platelets are Adequate

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DR.Sanjay Ingle
M.B.B.S.,M.D(Pathology)
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DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

No hemoparasite seen.

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BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA				
BLOOD GROUP TYPE	O			Microplate Hemagglutination
Rh TYPE	Positive			Microplate Hemagglutination

Comment:

1. This tests determines ABO & Rh blood groups (testing for other blood group systems not performed) through immunological reaction between RBC antigen & antibody.
2. ABO system also has Subgroups of A, B and rare phenotype as Bombay blood group which requires further testing and required recommendations as per the case will be provided.
3. Rh system in certain individual can have weak or partial Rh D expression which can result in weaker agglutination reactions and hence all Rh D Negative groups need to be further cross verified using Rh Du testing.
4. In case of Newborn - Only forward typing is performed, reverse typing is not performed, since the antibodies are not fully formed. Hence it is recommended to re-test blood grouping after 6 months.
5. In certain cases History of Recent blood transfusion (within 3-4mths), of bone marrow transplantation, certain drugs (especially monoclonal antibody) & certain malignancies may interfere with interpretation of blood grouping.
6. It is always recommended for reconfirmation of the Blood Group along with cross matching before blood transfusion.



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Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	99	mg/dL	70-100	HEXOKINASE

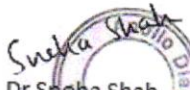
Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of $> \text{ or } = 126 \text{ mg/dL}$ and/or a random / 2 hr post glucose value of $> \text{ or } = 200 \text{ mg/dL}$ on at least 2 occasions.
2. Very high glucose levels ($>450 \text{ mg/dL}$ in adults) may result in Diabetic Ketoacidosis & is considered critical.


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GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	101	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.



DR.Sanjay Ingle
M.B.B.S.,M.D(Pathology)
Consultant Pathologist

SIN No:PLP1494142

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



Patient Name : Mrs.TEJASWINI SHIROLKAR	Collected : 27/Feb/2025 10:34AM
Age/Gender : 37 Y 8 M 13 D/F	Received : 27/Feb/2025 12:36PM
UHID/MR No : SPUN.0000052200	Reported : 27/Feb/2025 02:07PM
Visit ID : SPUNOPV72168	Status : Final Report
Ref Doctor : Dr.SELF	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 493465	

DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - PMC PACK I - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
ALANINE AMINOTRANSFERASE (ALT/SGPT), SERUM	12.5	U/L	10-35	IFCC with Pyridoxal Phosphate

Comment:

ALT elevations are noted in liver parenchymal diseases, leading to injury / destruction of hepatocytes. ALT levels are seen to be elevated even before the signs and symptoms of the liver injury appear. The ALT levels remain high longer in blood as compared to AST levels. And though both the enzymes increase in liver injury, the rise in ALT is more compared to AST, thus also altering the ALT:AST ratio.

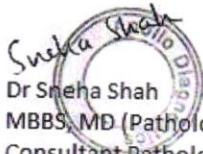
Test Name	Result	Unit	Bio. Ref. Interval	Method
BILIRUBIN, TOTAL, SERUM	0.24	mg/dL	0-1.2	Diazo

Test Name	Result	Unit	Bio. Ref. Interval	Method
CREATININE, SERUM	0.82	mg/dL	0.5-0.9	Jaffe
.eGFR - ESTIMATED GLOMERULAR FILTRATION RATE, SERUM	90.95	mL/min/1.73m ²	>60	CKD-EPI FORMULA

*** End Of Report ***

Result/s to Follow:
COMPLETE URINE EXAMINATION (CUE)

Page 6 of 6



Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:SE04878353

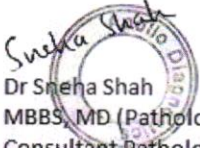
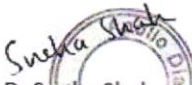
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Patient Name	: Mrs.TEJASWINI SHIROLKAR	Collected	: 27/Feb/2025 10:34AM
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Ref Doctor	: Dr.SELF	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 493465		

TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr Sneha Shah
MBBS, MD (Pathology)
Consultant Pathologist

SIN No:SE04878353

This test has been performed at Apollo Health and Lifestyle Ltd- Sadashiv Peth Pune, Diagnostics Lab



MRS. TEJASWINI SHIROLKAR
37Y
37 Years

Gender: F
Image Count: 1
Arrival Time: 27-Feb-2025 10:17

MR No:

Location:

Physician:

Date of Exam:

Date of Report:

SPUN.00052209

Apollo Spectra Hospital Pune
(Swargate)

SELF

27-Feb-2025

27-Feb-2025 10:24

X-RAY CHEST PA VIEW

FINDINGS

Normal heart and mediastinum.

There is no focal pulmonary mass lesion is seen.

No collapse or consolidation is evident.

The apices, costo and cardiophrenic angles are free.

No hilar or mediastinal lymphadenopathy is demonstrated.

There is no pleural or pericardial effusion.

No destructive osseous pathology is evident.

IMPRESSION:

No significant abnormality is seen.



Dr. Santhosh Kumar DMRD, DNB
Consultant Radiologist
Reg.No: 59248

CONFIDENTIALITY:

This transmission is confidential. If you are not the intended recipient, please notify us immediately. Any disclosure, distribution or other action based on the contents of this report may be unlawful.

PLEASE NOTE:

This radiological report is the professional opinion of the reporting radiologist based on the interpretation of the images and information provided at the time of reporting. It is meant to be used in correlation with other relevant clinical findings.

EYE REPORT



ASH/PUN/OPHTH/06/02-0216

Name: Mrs. Tejaswini Shibolkar Date: 27/2/2021

Age / Sex: 37 yrs, F Ref No.:

Complaint: Was using distance glasses, around 5 years ago.

Examination
 Vision } } unaided
 R 6/36p, N6
 L 6/18p, N6
 6/6, N6 aided in BE.

Spectacle Rx * IPD = 63mm * Distance with A-R, wearing

	Right Eye				Left Eye			
	Vision	Sphere	Cyl.	Axis	Vision	Sphere	Cyl.	Axis
Distance	6/6	0.75	2.25	50°	6/6	1.25	—	—
Read	N6	—	—	—	N6	—	—	—
	Sphere	CYL	Axis	Vision	Sphere	CYL	Axis	Vision

Remarks:

* slit lamp exam }
 * Colour vision } Normal
 PGP } } R
} L

Medications:

Trade Name	Frequency	Duration

Follow up: —

Consultant: Dr. A. C. Bhargava

27.02.2025 9:50:59
APOLLO SPECTRA HOSPITAL
SADASHIV PETH
PUNE-411030

Location:
Order Number:
Visit:
Indication:
Medication 1:
Medication 2:
Medication 3:

Room:

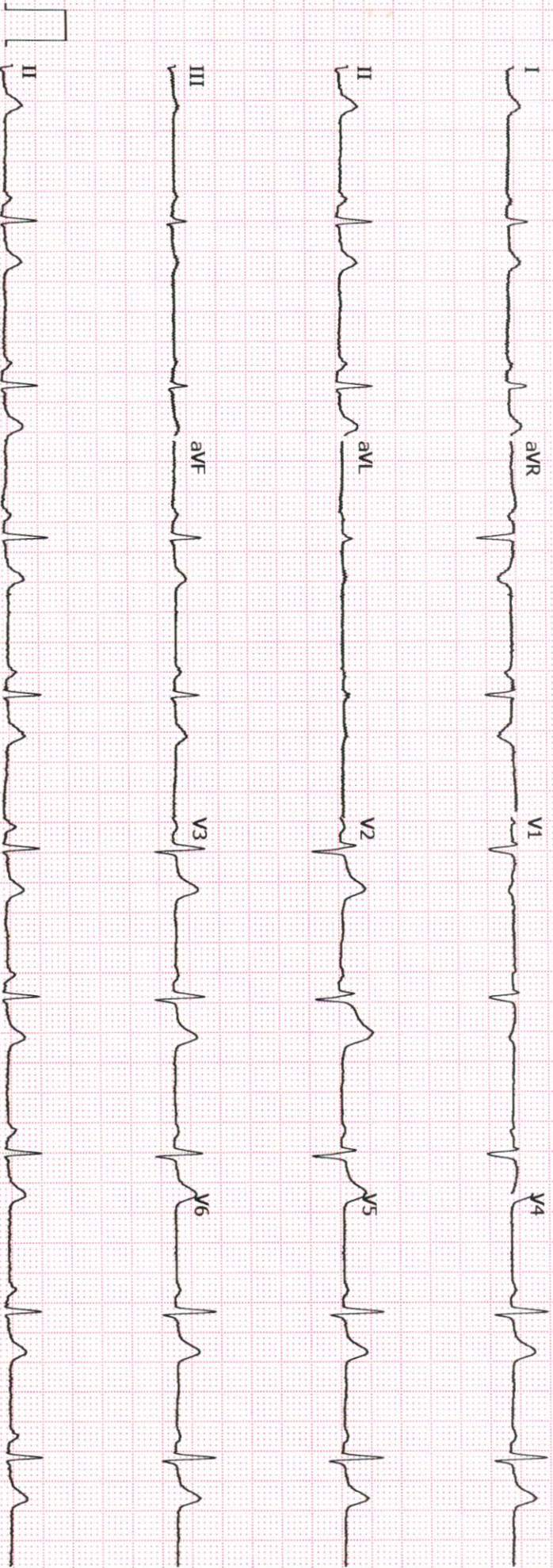
58 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QRS : 84 ms
QT / QTcBaz : 408 / 400 ms
PR : 154 ms
P : 102 ms
RR / PP : 1028 / 1034 ms
P / QRS / T : 59 / 50 / 44 degrees

Sinus bradycardia
Low voltage QRS
Borderline ECG

Mrs. Tejaswini Subrokan
37y1m



GE MAC2000 1.1 12SL™ V241 25 mm/s 10 mm/mV ADS 0.56-40 Hz 50 Hz 4x2.5x3.25 R1 1/1

Unconfirmed



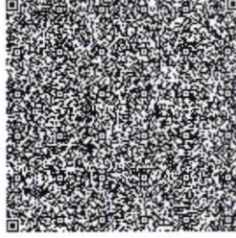
भारत सरकार
Government of India

भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

नोंदणी क्रमांक:/ Enrolment No.: 2722/19485/11888

To
तेजस्विनी अतुल शिरोळकर
Tejaswini Atul Shiroolkar
plot no. 31,
gujrath colony kothrud,
VTC: Pune City,
PO: Ex. Serviceman Colony,
Sub District: Pune City,
District: Pune,
State: Maharashtra,
PIN Code: 411038,
Mobile: 9156991987

Signature Not Verified
Digitally signed by UIDAI Unique
Identification Authority of India
DN:
Date: 2025.02.26 11:02:20
IST



आपला आधार क्रमांक / Your Aadhaar No. :

3458 8014 0961

VID : 9157 4988 6310 3359

माझे आधार, माझी ओळख



भारत सरकार
Government of India



Aadhaar no. issued: 26/09/2011



तेजस्विनी अतुल शिरोळकर
Tejaswini Atul Shiroolkar
जन्म तारीख/DOB: 14/06/1987
महिला/ FEMALE

आधार हा ओळखीचा पुरावा आहे, नागरिकत्व किंवा जन्मतारखेचा नाही.
हे फक्त पडताळणीसाठी वापरले जावे (ऑनलाइन प्रमाणीकरण किंवा QR कोडचे स्कॅनिंग/ ऑफलाइन XML)
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).

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Government of India



माहिती / INFORMATION

- आधार हा ओळखीचा पुरावा आहे, नागरिकत्वाचा किंवा जन्मतारखेचा नाही. जन्मतारीख आधार क्रमांक धारकाने प्रस्तुत केलेल्या नियमांमध्ये निर्दिष्ट केलेल्या जन्मतारीख दस्तऐवजाच्या पुराव्याद्वारे समर्थित असलेल्या माहितीवर आधारित आहे.
- ह्या आधार पत्राची पडताळणी UIDAI-नियुक्त प्रमाणीकरण एजन्सीद्वारे ऑनलाइन प्रमाणीकरणाद्वारे किंवा ॲप स्टोरमध्ये उपलब्ध mAadhaar किंवा Aadhaar QR स्कॅनर ॲप वापरून किंवा www.uidai.gov.in वर उपलब्ध सुरक्षित QR कोड रीडर ॲप वापरून QR कोड स्कॅनिंगद्वारे सत्यापित केले जावे.
- आधार अद्वितीय आणि सुरक्षित आहे.
- ओळख आणि पत्त्याला आधार देणारी कागदपत्रे आधार नोंदणीच्या तारखेपासून दर 10 वर्षांनी आधारमध्ये अद्यतनित केली जावीत.
- आधार तुम्हाला विविध सरकारी आणि गैर-सरकारी लाभ/सेवांचा लाभ घेण्यास मदत करते.
- आधारमध्ये तुमचा मोबाईल नंबर आणि ईमेल आयडी अपडेट ठेवा.
- आधार सेवांचा लाभ घेण्यासाठी mAadhaar ॲप डाउनलोड करा.
- आधार/बायोमेट्रिक्स वापरत नसताना सुरक्षितता सुनिश्चित करण्यासाठी लॉक/अनलॉक आधार/बायोमेट्रिक्सचे वैशिष्ट्य वापरा.
- आधारची मागणी करणाऱ्या संस्थांनी संमती घेणे बंधनकारक आहे.
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- Aadhaar is unique and secure.
- Documents to support identity and address should be updated in Aadhaar after every 10 years from date of enrolment for Aadhaar.
- Aadhaar helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in Aadhaar.
- Download mAadhaar app to avail of Aadhaar services.
- Use the feature of Lock/Unlock Aadhaar/biometrics to ensure security when not using Aadhaar/biometrics.
- Entities seeking Aadhaar are obligated to seek consent.

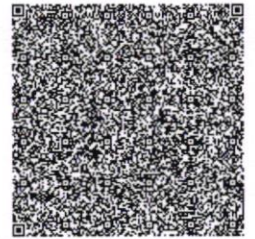


भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India



पत्ता:
प्लॉट नं. 31, गुजराथ कॉलनी कोथरूड, पुणे शहर, एक्स.
सर्विसमन कॉलनी, पुणे,
महाराष्ट्र - 411038
Address:
plot no. 31, gujrath colony kothrud, Pune City, PO:
Ex. Serviceman Colony, DIST: Pune,
Maharashtra - 411038

Details as on: 24/02/2025



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