



ELITE DIAGNOSTIC

Email - elitediagnostic4@gmail.com

PROP. NO. : 2787
S. NO. : 109198
NAME : MR. AMBAR PRAKASH RASTOGI AGE/SEX - 40/M
REF. BY : LIC
Date : OCTOBER, 22, 2024

ROUTINE URINE ANALYSIS

PHYSICAL EXAMINATION

Quantity : 20. ml
Colour : P. YELLOW
Transparency : Clear
Sp Gravity : 1.011

CHEMICAL EXAMINATION

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

MICROSCOPIC EXAMINATION

Pus Cells/WBCs : 1-2. /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 hesitation. This report is not for medico - legal cases.



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HAEMATOLOGY

Test	Result	Units
Glycosylated Haemoglobin (HbA1c)	5.78	%

INTERPRETATION

Normal	: 5.0 - 6.7
Good Diabetic Control	: 6.8 - 7.3
Fair Control	: 7.4 - 9.1
Poor Control	: more than 9.1

Note: - Glycosylated Haemoglobin is a specific component of HbA1c and is the blood glucose bound to it. This test is an index of carbohydrate in balance during the preceding two Months. The estimation is of greater importance for specific group of patient. This result are not affected by time, meal intake exercise, diabetic drugs, emotional Stress etc. HbA1c should be routinely monitored ideally at least every 3 months.

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

Please correlate with clinical conditions.



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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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HAEMOGRAM

Test	Result	Units	Normal Range
Hemoglobin	14.36	gm/dl	12-18

BIOCHEMISTRY-(SBT-13)

Blood Sugar Fasting	89.48	mg/dl	70-115
S. Cholesterol	165.70	mg/dl	130-250
H.D.L. Cholesterol	62.70	mg/dl	35-90
L.D.L. Cholesterol	94.48	mg/dl	0-160
S. Triglycerides	101.26	mg/dl	35-160
S. Creatinine	0.80	mg/dl	0.5-1.5
Blood Urea Nitrogen (BUN)	11.20	mg/dl	06-21
Albumin	4.3	gm/dl	3.2-5.50
Globulin	3.1	gm/dl	2.00-4.00
S. Protein Total	7.4	gm/dl	6.00-8.5
AG/Ratio	1.38		0.5-3.2
Direct Bilirubin	0.2	mg/dl	0.00-0.3
Indirect Bilirubin	0.6	mg/dl	0.1-1.00
Total Bilirubin	0.8	mg/dl	0.1-1.3
S.G.O.T.	30.11	IU/L	00-42
S.G.P.T.	32.30	IU/L	00-42
Gamma Glutamyl Transferase (GGT)	40.60	IU/L	00-60
S. Alk. Phosphatase	103.40	IU/L	28-111

(Children 151-471)

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

Please correlate with clinical conditions.



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Date: 22/10/2024

To,
LIC of India
Branch Office

Proposal No. 2787

Name of the Life to be assured AMBAR PRAKASH RASTOGI

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:

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	Hba1c
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) _____

Remarks of: Med Save TPA Services PVT LTD
Authorized Signature.



ANNEXURE II - 1
LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

ELECTROCARDIOGRAM

Zone

Division

Branch

Proposal No. -

2787

Agent/D.O. Code:

Introduced by: (name & signature)

Full Name of Life to be assured:

AMBAR PRAKASH RASTOGI

Age/Sex

40-45 / M

Instructions to the Cardiologist:

- Please satisfy yourself about the identity of the examiners to guard against impersonation
- 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.
- The base line must be steady. The tracing must be pasted on a folder.
- 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.

- Have you ever had chest pain, palpitation, breathlessness at rest or exertion? Y/N
- Are you suffering from heart disease, diabetes, high or low Blood Pressure or kidney disease? Y/N
- 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 reports with this form.

Dated at

DELHI

on the day of

22/10/2024

2023

Signature of L.A.

[Signature]



Signature of the Cardiologist
Name & Address
Qualification Code No.

Dr. BINDU

MBBS MD

Reg. No. 203435



Clinical findings

(A)

Height (Cms)	Weight (kgs)	Blood Pressure	Pulse Rate
180	96.9	122/84	80/w

(B) Cardiovascular System

.....

Rest ECG Report:

Position	Supine	P Wave	e
Standardisation Imv	e	PR Interval	e
Mechanism	e	QRS Complexes	e
Voltage	e	Q-T Duration	e
Electrical Axis	e	S-T Segment	e
Auricular Rate	80/w	T-wave	e
Ventricular Rate	80/w	Q-Wave	e
Rhythm	Regular		
Additional findings, if any.	116		

Conclusion: ECG - WNL



Dated at DELHI on the day of 22/10/2024 200

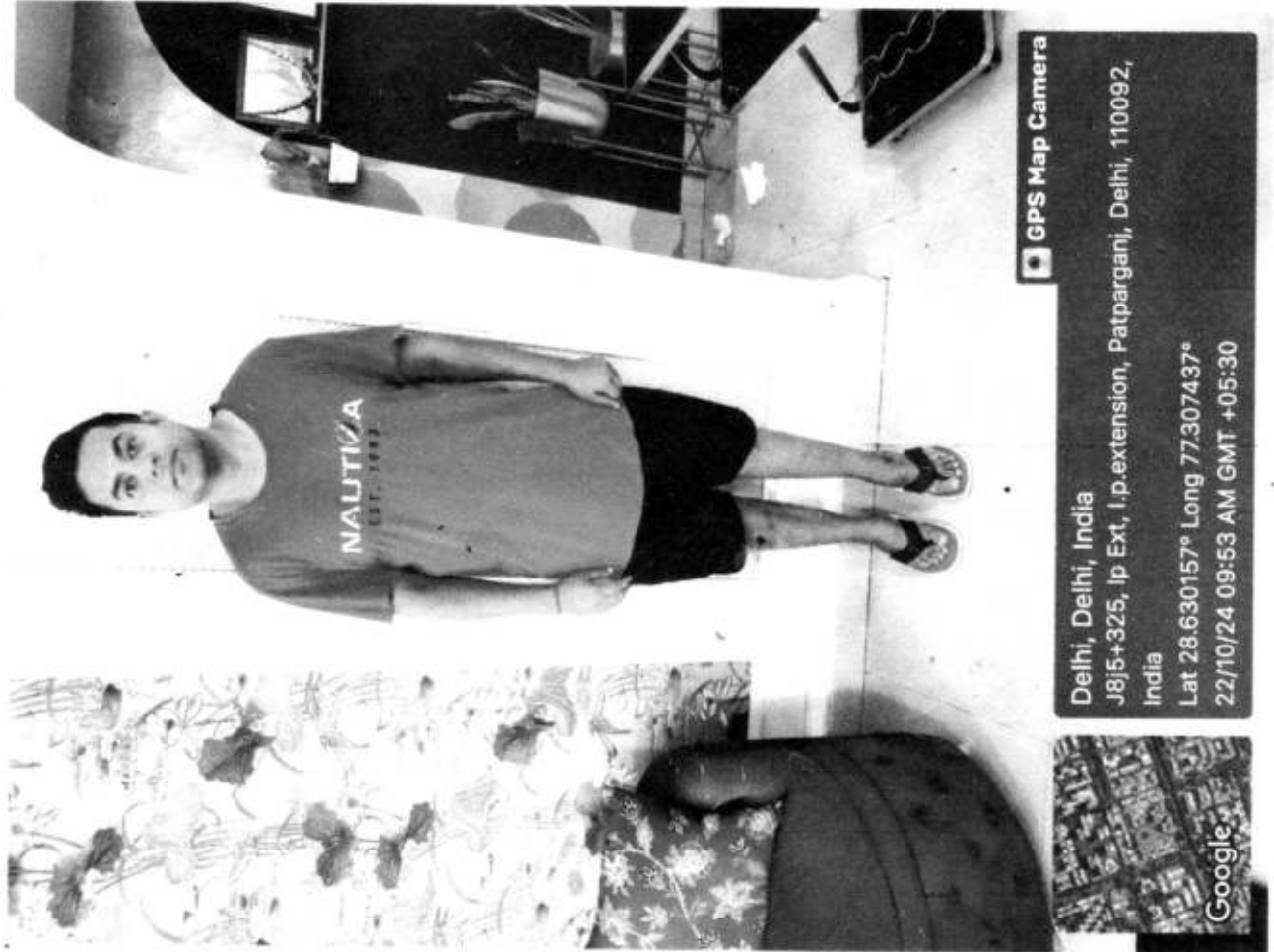
Dr. BINDU
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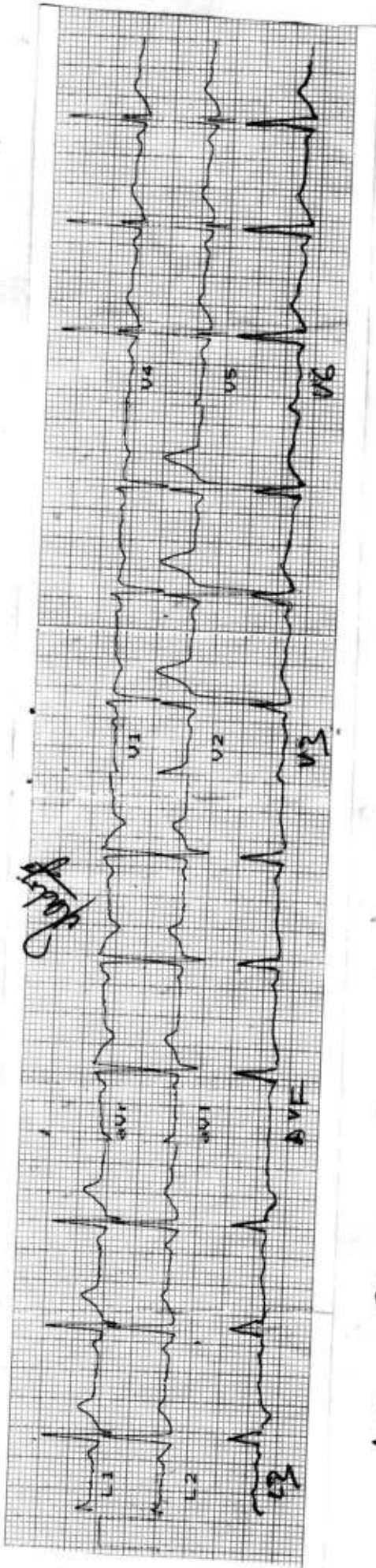


Signature of the Cardiologist
 Name & Address
 Qualification
 Code No.



Dr. BINDU
MBBS MD
Reg. No. 83435





Handwritten signature

ANBAR PRAKASH RASTOGI Dr. BINDU
 Age \rightarrow 70 y 6 m
 ECG WNL
 Reg. No. ~~333435~~ MBBS



DATE = 22/10/2024