

Date: 08/10/2024

To,  
LIC of India  
Branch Office

Proposal No. 2532

Name of the Life to be assured DEVINDER KUMAR

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.

Signature of the Pathologist/ Doctor



Dr. RAINA KHAN  
MBBS; DMRD  
Reg. No. 25508

Name: \_\_\_\_\_

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

Duendes

(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: UCT

17. Others (Please Specify) \_\_\_\_\_

Remarks of HealthIndia Insurance TPA Services PVT LTD  
Authorized Signature,





GPS Map Camera  
 New Delhi, Delhi, India  
 DD-23, Block DD, Kalkaji, New Delhi, Delhi 110019, India  
 Lat 28.544656°  
 Long 77.258192°  
 08/10/24 09:45 AM GMT +05:30



Dr. RAINA KHAN  
 MBBS/DMRD  
 Reg. No. 5508



GPS Map Camera  
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# irine diagnostic

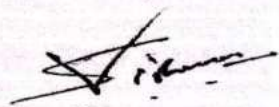
healthpartner


S. No. : 08/OCT/10  
Name : MR DEVINDER KUMAR  
Ref. by : LIFE INSURANCE CORPORATION  
Date : 08-10-2024  
AGE : 48Years  
SEX : MALE

## Cotinine

Test	Result
Cotinine	NEGATIVE



  
DR. SHILPI GUPTA  
M.B.B.S.MD(Path) 64715  
Consultant Pathologist

 8595347044

 irinediagnostic@gmail.com

 DD-23 KALKAJI DELHI :- 110019



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## H A E M A T O L O G Y

Test	Result	Units	Normal Range
Hemoglobin	13.3	gm%	12-16



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## URINE EXAMINATION

### PHYSICAL EXAMINATION

COLOUR	YELLOW
REACTION	ACIDIC
APPEARANCE	CLEAR
ALBUMIN	NIL
SUGAR	NIL
SPECIFIC GRAVITY	1.014

### CHEMICAL EXAMINATION

ALBUMIN	NIL
SUGAR	NIL
ACETONE	NIL
BLOOD	NIL
BILE SALT	NIL
BILE PIGMENT	NIL
UROBILINOGEN	NIL

### MICROSCOPIC EXAMINATION

PUS CELLS	2-3/HPF
EPITHELIAL CELLS	2-3/HPF
RBC	NIL /HPF
BACTERIA	NIL
CASTS	NIL
CRYSTALS	NIL
OTHERS	NIL



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DD-28 KALKAJI DELHI :- 110019



# irine diagnostic

healthpartner

S. No. : 08/OCT/10  
Name : MR DEVINDER KUMAR  
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Date : 08-10-2024  
AGE : 48Years  
SEX : MALE

## B I O C H E M I S T R Y

Test	Result	Units	Normal Range
FASTING BLOOD SUGAR	89	mg/dl.	(60-110)
TOTAL BILIRUBIN	0.72	mg/dl.	(0.1-1.2)
CONJUGATED (D.Bilirubin)	0.42	mg/dl.	(0.00-0.6)
UNCONJUGATED (I.D.Bilirubin)	0.20	mg/dl.	(0.1-1.0)
TOTAL PROTEIN	6.5	mg/dl.	(6.0-8.3)
ALBUMIN	4.4	mg/dl.	(3.5-5.0)
GLOBULIN	2.1	mg/dl.	(2.3-3.5)
A/G RATIO	2.09		(1.0-3.0)
S.G.O.T. (AST)	28	IU/L	(5.0-34.0)
S.G.P.T. (ALT)	25	IU/L	(5.0-40.0)
GAMMA GT	30	U/L	(9-45)
ALKALINE PHOSPHATASE	125	U/L	(80-200)
URIC ACID	5.8	mg/dl.	(4.4-7.2)
SERUM CHOLESTEROL	172	mg/dl.	(150-200)
HDL CHOLESTEROL	44	mg/dl.	(30-63)
S. TRIGLYCERIDES	110	mg/dl.	(60-160)
LDL	113	mg/dl.	(UPTO-150)
VLDL	38	mg/dl.	(23-45)
SERUM CREATININE	0.72	mg%	(0.6-1.2)
BUN	15	mg/dl	(02-18)



*Shilpi Gupta*

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Consultant Pathologist

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DD-28 KALKAJI DELHI :- 110019

## LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

## ELECTROCARDIOGRAM

Zone Division Branch

Proposal No. -

2532

Agent/D.O. Code:

Introduced by: (name &amp; signature)

Full Name of Life to be assured: DEVINDER KOMAR

Age/Sex

: 48 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 \_\_\_\_\_ given by me to LIC of India.

*Devinder*

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 08/10/2024 2023

Signature of L.A.

*Devinder*



Signature of the Cardiologist  
Name & Address  
Qualification Code No.

Dr. RAINAKHAN  
MBBS, DMRD  
Reg. No. 25508





## Clinical findings

(A)

Height (Cm)	Weight (kgs)	Blood Pressure	Pulse Rate
175	67.7	116/76	72/m

(B) Cardiovascular System

.....

.....

## Rest ECG Report:

Position	Supine	P Wave	Ⓟ
Standardisation Imv	Ⓟ	PR Interval	Ⓟ
Mechanism	Ⓟ	QRS Complexes	Ⓟ
Voltage	Ⓟ	Q-T Duration	Ⓟ
Electrical Axis	Ⓟ	S-T Segment	Ⓟ
Auricular Rate	72/m	T-wave	Ⓟ
Ventricular Rate	72/m	Q-Wave	Ⓟ
Rhythm	Regular		
Additional findings, if any	n/c		

Conclusion: ECG-NL

Dated at DELHI 08/10/2024 on the day of 200

Signature of the Cardiologist  
Name & Address  
Qualification  
Code No.

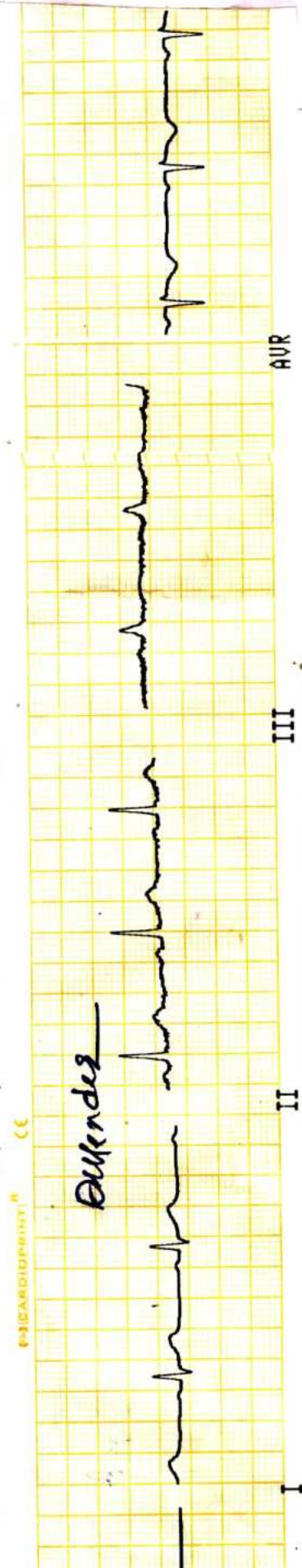
Dr. RAJESH KHAN  
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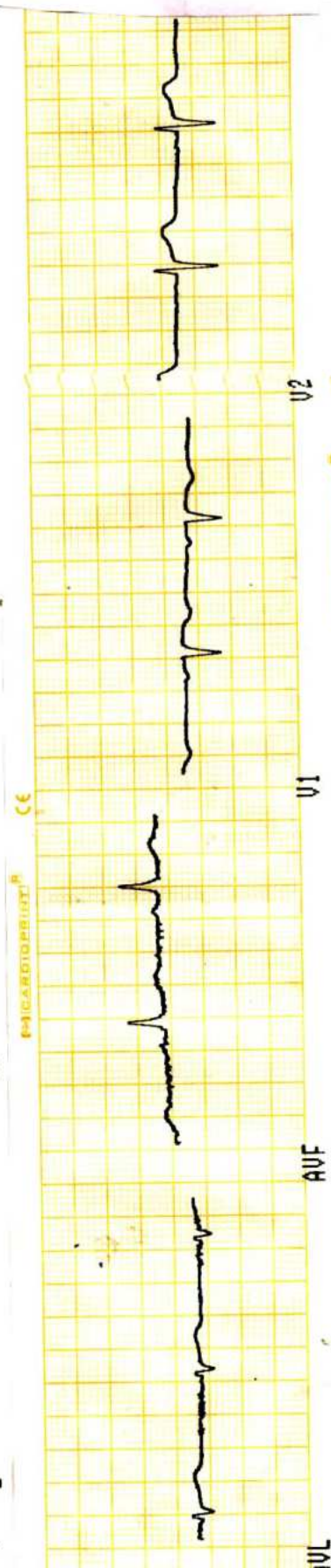


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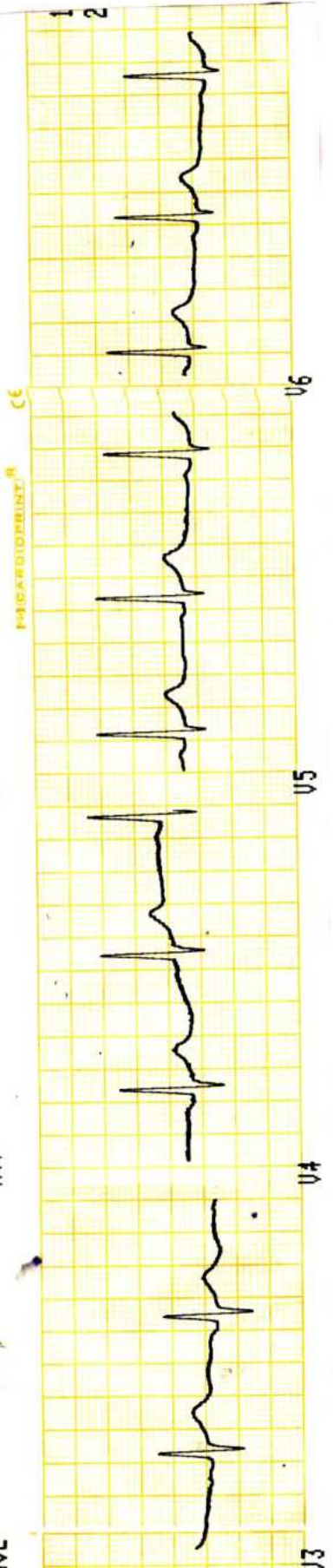
Devinder



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ECG - WNL  
 DATE - 08-10-2024  
 AGE - 48 years / MALE  
 NAME :- DEVINDER KUMAR



Dr. RAINAKHAN  
 MBBS, DMRD  
 Reg. No. ~~25588~~





**Irene Hospital**  
DD-23, Kalkaji Extension, New Delhi-110019  
Tel.: 011-4992 2225

यहाँ पर प्रसव पूर्व लिंग (पैदा होने से पहले लड़का या लड़की) का पहचान नहीं की जाती। यह दण्डनीय अपराध है।  
बच्चे के लिंग के लिए पूछना या मांगना और पीएनडीटी अधिनियम के तहत एक अपराध है।

Here Pre-Natal Sex determination and disclosure (before birth) of foetus is not done. It is prohibited under law.

**SEEKING / ASKING FOR THE SEX OF THE FETUS IS ALSO A PUNISHABLE OFFENCE UNDER THE PNDT ACT**

**In Case Of Any Complaint/querrelance, please contact the following number: 011-4992 2225**

Contact : Dm, South East District  
LAJPAT NAGAR  
PH: 011-4992 2225



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**Google**





KA433774256FH

43377425



आपका **आधार** क्रमांक / Your **Aadhaar** No. :

**3986 6547 5626**

मेरा आधार, मेरी पहचान



भारत सरकार

Government of India



Devinder Kumar

DOB: 14/08/1976

Male

3986 6547 5626



मेरा आधार, मेरी पहचान

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