

To,

The Coordinator,  
Mediwheel (Arcofemi Healthcare Limited)  
Helpline number: 011- 41195959

Dear Sir / Madam,

**Sub: Annual Health Checkup for the employees of Bank of Baroda**

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS OF HEALTH CHECK UP BENEFICIARY	
NAME	SANJU KUMARI
DATE OF BIRTH	22-03-1991
PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE	27-01-2024
BOOKING REFERENCE NO.	23M162647100086050S
<b>SPOUSE DETAILS</b>	
EMPLOYEE NAME	MR. KUMAR SUMANT
EMPLOYEE EC NO.	162647
EMPLOYEE DESIGNATION	JOINT MANAGER
EMPLOYEE PLACE OF WORK	JAMSHEDPUR, TISCO
EMPLOYEE BIRTHDATE	01-03-1986

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **25-01-2024** till **31-03-2024**. The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager**  
**HRM Department**  
**Bank of Baroda**



(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



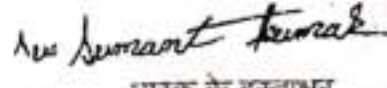
बैंक ऑफ बड़ौदा  
Bank of Baroda



नाम सुमन्त कुमार  
Name Sumant Kumar

कर्मचारी कूट क्र.  
E.C No. 162647

  
प्रदारीकर्ता प्राधिकारी  
Issuing Authority

  
धारक के हस्ताक्षर  
Signature of Holder

मिलने-पर, कृपया निम्नलिखित को लौटार्ण  
अंचल कार्यालय (बृहन्मुंबई) पी ओ बॉ नं 1674,  
3 वालचंद हीराचंद मार्ग, बॉलार्ड पियर, मुंबई 400 001, भारत  
दूरध्वनि: 91-22 2261 0341, 4206 0780

If found, please return to  
Zonal Office (Greater Mumbai), P.O. Box no. 1674  
3, Walchand Hirachand Marg, Ballard Pier, Mumbai 400 001, India  
Phone 91-22 2261 0341, 4206 0780

रक्त समूह / Blood Group O+ve  
पहचान चिन्ह / Identification Marks Burn mark on chik left

COLOUR COPY



भारत सरकार  
Government of India



संजु कुमारी  
Sanju Kumari  
जन्म तिथि/DOB: 22/03/1991  
लिंग/FEMALE



4651 0311 0496

UID: 9187 1660 9967 3732

मेरा आधार, मेरी पहचान


 विश्वव्यापी पहचान प्राधिकरण  
 Unique Identification Authority of India

पता:  
W/O सुमंत कुमार, हाउस नं 15, अनुग्रह नगर धनसार  
धनसार, बेरा, धनबाद,  
झारखण्ड - 828106

**Address:**  
W/O Sumant Kumar, house no  
15anugrah nagar dhansar dhanbad,  
Bera, Dhanbad,  
Jharkhand - 828106



QR Code with Photograph

4651 0311 0496

UID: 9187 1660 9967 3732

For more information visit [www.uidai.gov.in](http://www.uidai.gov.in)





# असर्फी हॉस्पिटल

सबके लिए स्वास्थ्य

## OUT PATIENT DEPARTMENT

Mediwheel

Department of General Medicine

Regd. No. : JAN24-75565 Visit : OPD/270124/184518  
 Patient Name : MRS. SANJU KUMARI Mobile : 7415495295  
 Age/Sex : 32 Y 10 M 5 D / Female Date : 27-Jan-2024 1:27 pm  
 Address : HOUSE NO-15, ANUGRAH NAGAR, DHANSAR, Dhanbad - 828106, JHARKHAND,  
 Doctor : Dr. Sumeet Kr. MD, Medicine OPD Timing :

Allergies : Referred By :  
 Height : Ft In Temp. : 96.5 F SPO2 : 99 %  
 Weight : 55.5 Kg Pulse : 109 BPM B.P. : 110/80 mm/Hg

History and complaints :

Examination:

- Mild Anaemia

Diagnosis:

- subclinical Hypothyroidism

Investigations:

Medicines Prescribed:

- ureg pelvis  
 H/O. PCOP

- T. Calcitriol 100 after food  
 x month

- Repeat H/TSH after  
 6week

- T. Thyronorm 25mcg 100  
 BBF  
 x 6week

Follow up:

Days

Advice (Diet/ Lifestyle / Rehab)

Date :

Time :

- R. SINGH AAI

- for 303

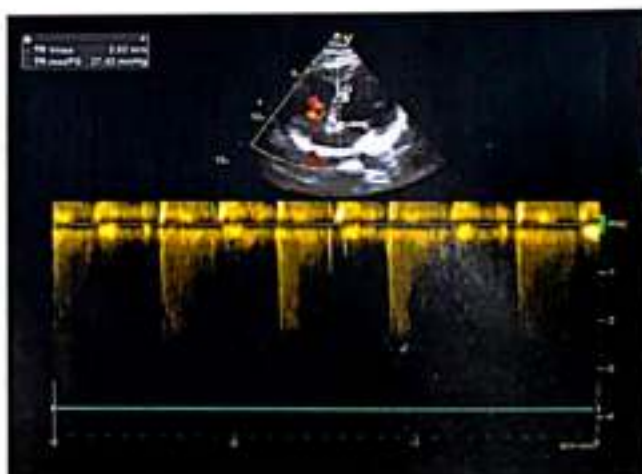
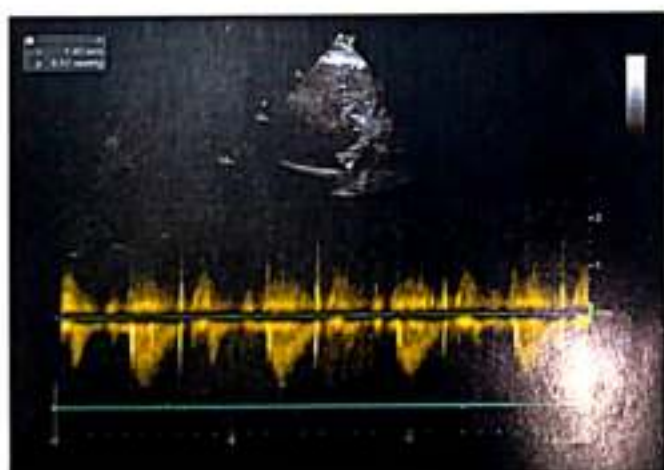
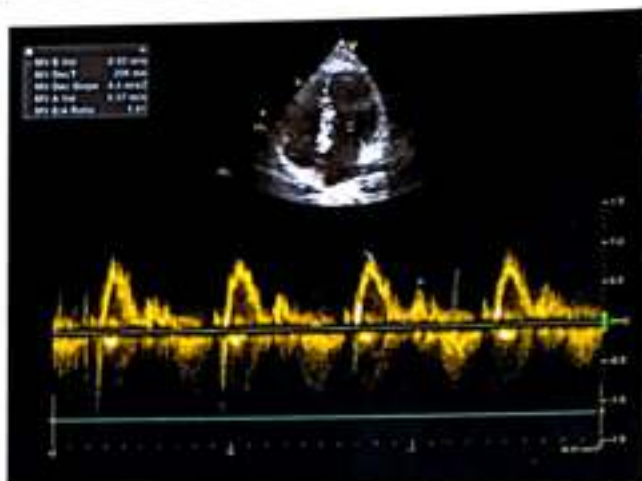
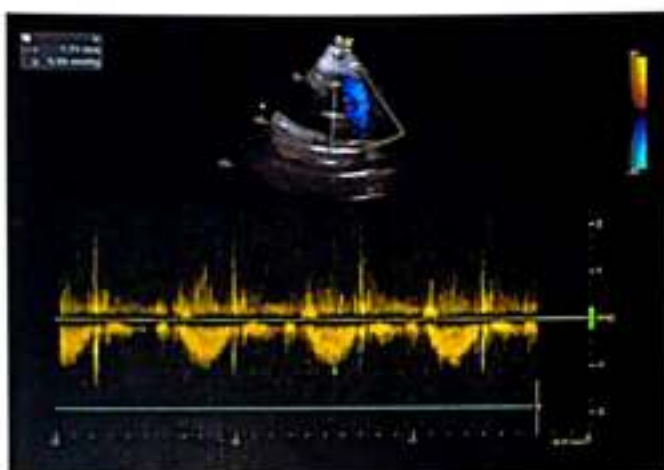
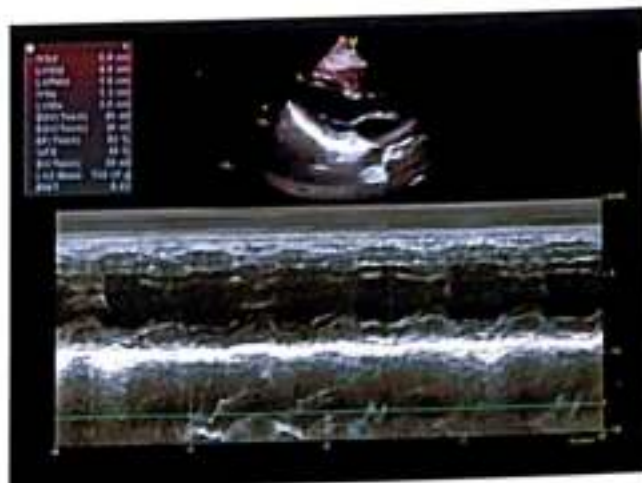
Signature of Doctor

\*This document is not valid for Medico-Legal purposes.

# ASARFI INSTITUTE OF CARDIAC SCIENCES

Name : MRS SANJU KUMARI  
Patient Id : 75565

Date : 27/01/2024





### REPORT

Patient's Name : MRS SANJU KUMARI	Patient ID : 75565
Age : 32 Yrs.	Sex : FEMALE
Referred by Dr. : DR. SELF	Report Date : 27.01.2024
Test Date : 27.01.2024	

### ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENTS	ABSOLUTE VALUE	NORMAL VALUE
Aortic Root Diameter	2.5	2.0-3.7cm < 2.2cm/M2
Aortic Valve Opening	N	1.5-2.6cm
Left Atrial Dimension	3.2	1.9-4.0cm < 2.2cm/M2
RV Dimensions	N	0.7-2.6cm
RV thickness	N	0.3-0.9cm
LV ED Dimension	4.6	3.7-5.6 cm < 3.2cm /M2
LV ES Dimension	3.0	2.2-4.0 cm
IVS thickness	ED - 0.8      ES-1.3	0.6-1.2cm
LVPW Thickness	ED - 1.0      ES-1.5	0.5-1.1cm
IVS/ LVPW Ratio	N	
Mitral Valve	DE-N      EF -N	

INDICES OF LV FUNCTION		
EPSS		<9mm
FS%	34%	24 - 42%
LV Ejection Fraction	60%	55-75%

### MORPHOLOGICAL DATA

Mitral Valve : AML PML	Normal	Interatrial Septum	Normal
Aortic Valve	Normal	Interventricular Septum	Normal
Tricuspid Valve	Normal	Pulmonary Artery	Normal
Pulmonary Valve	Normal	Aorta	Normal
Right Ventricle	Normal	Right Atrium	Normal
Left Ventricle	Normal	Left Atrium	Normal



**DOPPLER STUDY**

	Cm/s	PG (mmHg)	
MITRAL VELOCITY	E- 92    A- 57		MR - Nil
TRICUSPID VELOCITY	262cm/s	27.4	TR - Mild
AORTIC VELOCITY	145cm/s	8.4	AR - Nil
PULMONARY VALVE	114cm/s	5.2	PR
PA Pressure	Mild		

- Normal cardiac chamber dimension.
- No RWMA, normal LV systolic function, LVEF=60%.
- Normal MIP.
- No MR, No AR, mild TR , RVSP=27+5, Mild PAH
- Intact IAS & IVS
- No LA, LV clot/ mass/ vegetation.
- IVC is normal in size with normal inspiratory collapse.

**IMPRESSION:**

- Normal cardiac chamber dimension.
- No RWMA, normal LV systolic function, LVEF=60%.
- Mild TR , Mild PAH

↓  
Dr. Uday Shankar  
MBBS, MD, D. Cardio, FCCS  
ECHOCARDIOLOGIST

**For The perusal of a medical professional only**

The content of this report is only an opinion based on images and is therefore subject to inherent technical limitations.  
It is not the diagnosis & must be correlated clinically.

**NOT FOR MEDICOLEGAL PURPOSES**



## RADIOLOGY REPORT

Reg. No.	75565	Ref. Dr.	SELF
Name	MRS. SANJU KUMARI	Study	USG WHOLE ABDOMEN
Age & Sex	32Y /F	Reporting Date	27.01.2024

### USG WHOLE ABDOMEN

- LIVER** : Liver is normal in size, shape & echotexture. No obvious focal lesion is seen. IHBR are not dilated.
- GALL BLADDER** : GB is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- CBD** : CBD is normal in course & caliber.
- PV** : PV is normal in course & caliber.
- PANCREAS** : Pancreas is normal in size, shape & echotexture. Peripancreatic soft tissues appear normal. MPD is not dilated.
- SPLEEN** : Spleen is normal in shape, size & echotexture. It measures 8.4cm in size.
- KIDNEYS** : The right kidney measures 9.8 x 3.7cm. The left kidney measures 9.6 x 4.5cm. Both kidneys are normal in shape, size & position. The pelvicalyceal system is normal. Corticomedullary differentiation is maintained. No focal lesion is seen.
- URINARY BLADDER** : Urinary bladder is well distended. No obvious calculus or mass lesion is seen. The wall thickness is normal.
- UTERUS** : Uterus is normal in size, shape & echotexture. It measures 9.2 x 4.4 x 5.1cm. Endometrium is central and measures 5.6mm.
- OVARIES** : The right ovary measures 3.3 x 2.5 x 1.8cm (volume - 8.2cc). The left ovary measures 2.1 x 3.3 x 2.1cm (volume - 8.2cc). Both ovaries are normal in shape, size & position.
- OTHERS** : No ascites or retroperitoneal lymphadenopathy is seen.
- IMPRESSION** : • No significant abnormality detected.




**Dr. VAISHALI PATEL**  
MBBS, DNB (Radio-diagnosis)  
Consultant Radiologist

**24 HOUR EMERGENCY**

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MRS SANJU KUMARI  
Female

27-Jan-24 11:42:33

ASAHI INST. OF CARDIAC SCIENCES



Rate 80 . Sinus rhythm.....normal P axis, V-rate 50-99  
Atrial premature complex.....SV complex w/ short P-R interval

PR 121  
QRS 88  
QT 338  
QTc 390

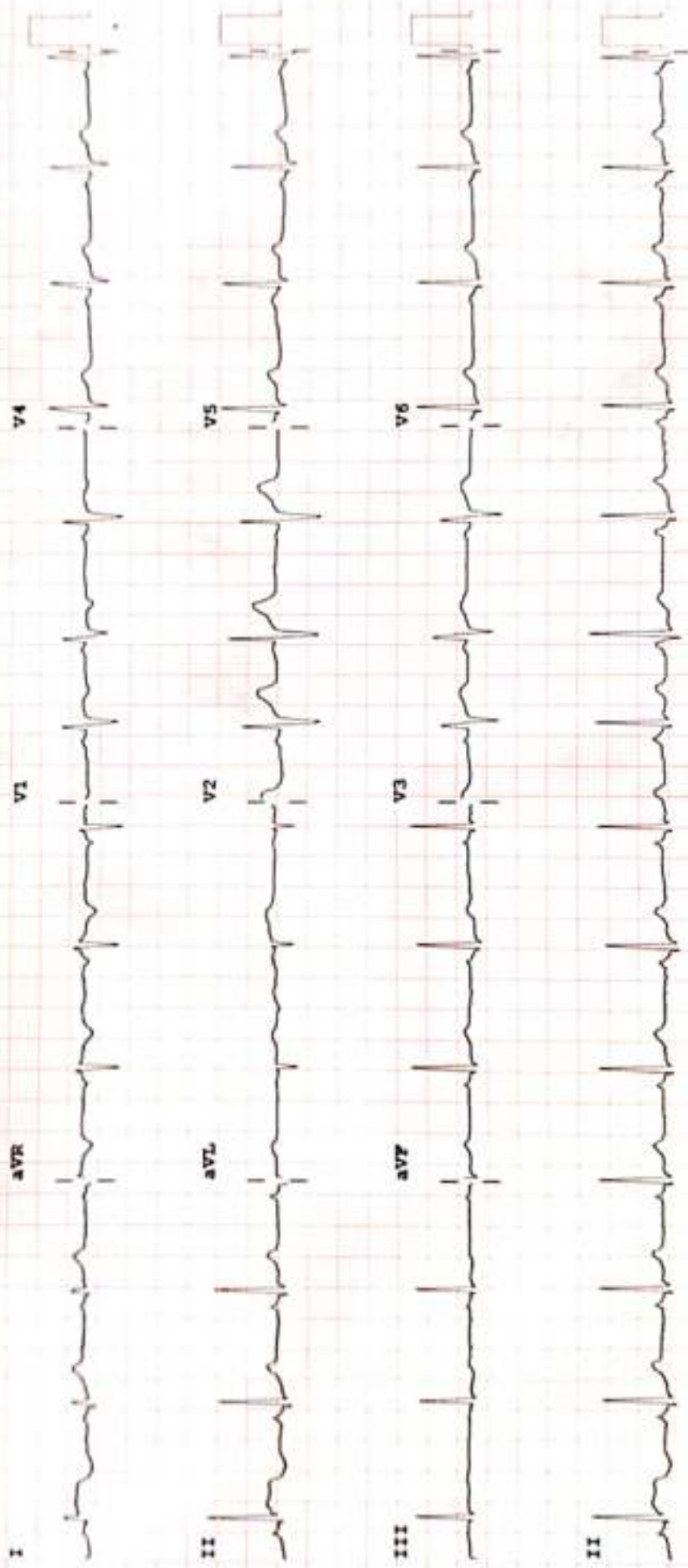
--AXIS--

P 60  
QRS 75  
T 22

12 Lead: Standard Placement

- OTHERWISE NORMAL ECG -

Unconfirmed Diagnosis



Device: Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10.0 mm/mV

P 50- 0.50-100 Hz W

PH100B CL P?



**FINAL REPORT**

Name : MRS. SANJU KUMARI  
Reg. No. : JAN24-75565  
Age / Sex : 32 Y 10 M 5 D / Female  
Doctor : Self-Walkin  
Pat. Type : Mediwheel



Collection Time : 27-01-2024 09:56:25  
Receiving Time : 27-01-2024 09:57:41  
Reporting Time : 27-01-2024 13:55:44  
Publish Time : 27-01-2024 2:20 pm

Test Name	Result	Flag	Unit	Reference Range
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**Biochemistry**

**Creatinine, Serum**

Method: Enzymatic

Creatinine, Serum

0.5

L

Machine Name: XL640

mg/dl 0.6-1.4

**Uric Acid, Serum**

Method: Enzymatic

Uric Acid, Serum

4.2

Machine Name: XL640

mg/dl 3.4-7.0

**Blood Urea Nitrogen (BUN)**

Method: Calculated

Blood Urea Nitrogen (BUN)

8.7

Machine Name: XL640

mg/dl 07-21

**Fasting Blood Glucose, Plasma**

Method: GOD-POD

Fasting Blood Glucose, Plasma

87.1

Machine Name: XL640

mg/dl 70-110

**LIPID PROFILE, SERUM**

Method: Spectrophotometry

Triglycerides (Enzymatic)

85.0

Machine Name: XL640

mg/dl Normal: <150  
Borderline-high:  
150-199 High risk  
200-499  
Very high risk >500

Cholesterol, Total (CHOD/PAP)

129.0

mg/dl

<200 No risk 200-239  
Moderate  
risk >240 High risk

VLDL Cholesterol (Calculated)

17

mg/dl

0-30

HDL Cholesterol (Enzymatic)

35.2

L

mg/dl

<40 High Risk ; >60 No  
Risk



DR N N SINGH  
MD (PATHOLOGY)

**Condition of Laboratory Testing & Reporting**

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**24 HOUR EMERGENCY**

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**FINAL REPORT**

Name : MRS. SANJU KUMARI  
Reg. No. : JAN24-75565  
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Pat. Type : Mediwheel



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Test Name	Result	Flag	Unit	Reference Range
LDL Cholesterol (Calculated)	76.8		mg/dl	Optimum:<100 Above optimum: <130; Moderate risk:130-159; High risk:>160
Cholesterol Total : HDL Ratio (Calculated)	3.66		mg/dl	1.2-6.0
<b>GLYCOCYLATED HEMOGLOBIN (HbA1C), BLOOD</b>				
Method : HPLC / Nephelometry				
HbA1C	3.5	L	%	4.4-6.2
Estimated average glucose (eAG)	53.75		mg/dl	
<b>Glucose, PP</b>				
Method : GOD-POD				
Glucose, PP	97.2		mg/dl	70-140

Machine Name: BIO-RAD, D-10 / MISPA



  
**DR N N SINGH**  
MD (PATHOLOGY)

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PAGE 2 OF 3

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Test Name	Result	Flag	Unit	Reference Range
<b>Liver Function Test (LFT)</b>				
Method: Spectrophotometry				
Bilirubin Total (Diazo)	0.5		mg/dl	0.3-1.2
Bilirubin Direct (Diazo)	0.2		mg/dl	0.00-0.2
Bilirubin Indirect (Calculated)	0.3		mg/dl	0.00-1.0
SGPT (IFCC without PDP)	13.3		U/L	7-50
SGOT (IFCC without PDP)	16.7		U/L	5-45
Alkaline Phosphate (PNP AMP Kinetic)	195.0		U/L	70-306
GGT (Enzymatic)	12.2		U/L	0-55
Protein Total (Biuret)	7.0		g/dl	6.4-8.3
Albumin (BCG)	4.0		g/dl	3.5-5.2
Globulin (Calculated)	3		g/dl	2.3-3.5
A : G Ratio (Calculated)	1.33			0.8-2.0

Machine Name: XL-640



  
**DR N N SINGH**  
MD (PATHOLOGY)

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**24 HOUR EMERGENCY**

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Test Name	Result	Flag	Unit	Reference Range
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Clinical Pathology



*[Signature]*  
**DR N N SINGH**  
 MD (PATHOLOGY)

**Disclaimer/Labouratory Testing Information**  
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Test Name	Result	Flag	Unit	Reference Range
<b>Routine Urine Examination; Urine</b>				
Method: Microscopic				
Leukocytes	NEGATIVE			Machine Name: Microscope
Appearance	CLEAR			
Colour	STRAW			
Volume	25		ml,	
Protiens	NEGATIVE			
Glucose	NEGATIVE			
PH	6.0			
Specific Gravity	1.010			
Bilirubin	NEGATIVE			
Ketone Bodies	NEGATIVE			
Bile Salts	XX			
Bile Pigments	XX			
Nitrite	NEGATIVE			
Pus Cells	2-3		/hpf.	
Epithelial Cells	3-4		/hpf.	
R.B.C.	1-2		/hpf.	
Casts	NOT SEEN		/hpf.	



**DR N N SINGH**  
MD (PATHOLOGY)

**Constitution of Laboratory Tests & Reporting**

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**24 HOUR EMERGENCY**



# ASARFI HOSPITAL LABORATORY

(A Unit of Asarfi Hospital Ltd.)

Baramuri, Bishunpur Polytechnic, Dhanbad 828 130

Ph. No.: 7808368888, 9297862282, 9234681514



MC-5930

## FINAL REPORT



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 Doctor : Self-Walkin  
 Pat. Type : Mediwheel

Test Name	Result	Flag	Unit	Reference Range
Crystals	NOT SEEN		/hpf.	
others	NOT SEEN		.	
<b>Protein:Creatinine Ratio; Urine</b>				
Method : Immunoturbidimetry, Spectrophotometer				
Protein	53.3		mg/L	
Creatinine	62.11		mg/dl	
PCR	0.86		mg/g	0-0.5



DR N N SINGH  
 MD (PATHOLOGY)

**Disclaimer of Liability, Faults & Limiting** (1) It is presumed that the test(s) performed are on the specimen(s) (Sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s)/ Sample(s)(2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medical legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Haemolysed/diluted/serum etc. (c) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282. Email: labasarfi@gmail.com

**24 HOUR EMERGENCY**

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"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"





MC-4938

**FINAL REPORT**

Name : MRS. SANJU KUMARI  
Reg. No. : JAN24-75565  
Age / Sex : 32 Y 10 M 5 D / Female  
Doctor : Self-Walkin  
Pat. Type : Mediwheel



Collection Time : 27-01-2024 09:56:25  
Receiving Time : 27-01-2024 09:57:41  
Reporting Time : 27-01-2024 13:55:44  
Publish Time : 27-01-2024 2:20 pm

Test Name	Result	Flag	Unit	Reference Range
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**Haematology**

**BLOOD GROUP, ABO & RH TYPING**

Method: Agglutination

ABO GROUP AB - 0-0

RH TYPING POSITIVE - 0-0

**ESR (Erythrocyte Sedimentation Rate)**

Method: Westergren

ESR 36 H mm/hr 0-10

Machine Name: VES-MATIC 20



*[Signature]*  
**DR N N SINGH**  
MD (PATHOLOGY)

\*This Document is not valid for Medical and  
Condition of Laboratory Testing & Reporting

(1) It is presumed that the test(s) performed are on the specimen(s) (Sample(s)) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the said specimen(s) (Sample(s)). (2) Laboratory investigations are only tool to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal Purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate, (haemolysed/clotted/lipemic etc.) (b) incorrect specimen type for requested test. (c) Specimen quality is unsatisfactory. (d) There is a discrepancy between the label on the specimen container and the Name on the test requisition form. (5) The Results of the Test May vary from lab and also from time to time for the same patient. (6) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexpected test results please call at +91 9297862282, Email-lab@asarfihospital.com

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**24 HOUR EMERGENCY**

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FINAL REPORT

Name : MRS. SARUJ KUMARI
Reg. No. : JAN24-75545
Age / Sex : 33 Y 10 M 5 D / Female
Doctor : Self Walkin
Pat. Type : Medisocial



Collection Time : 27-01-2024 09:56:25
Receiving Time : 27-01-2024 09:57:41
Reporting Time : 27-01-2024 13:55:44
Publish Time : 27-01-2024 2:20 pm

Table with 5 columns: Test Name, Result, Flag, Unit, Reference Range

Nature of Material: EDTA Blood Sample

Complete Blood Count (CBC)

Method: Electrical Impedance

Machine Name: Sysmex 6 part

Main results table with columns: Test Name, Result, Flag, Unit, Reference Range. Includes Hemoglobin, PCV, MCH, MCHC, RDW, TLC, RBC Count, etc.



Signature of Dr. N N Singh
DR N N SINGH
MD (PATHOLOGY)

Condition of Laboratory Testing & Reporting
(1) It is presumed that the tests performed are on the specimens (samples) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or higher representatives at the point of generation of the said specimens/ samples (2) Laboratory investigations are only for to facilitate in arriving at diagnosis and should be clinically correlated. (3) Tests results are not valid for medico legal purposes. (4) Test requested might not be performed due to following Reason: (a) Specimen received is insufficient or inappropriate. (b) Hemolyzed/clotted/panic etc. (5) Incorrect specimen type for requested test. (6) Inadequate quality of sample. (6) There is a discrepancy between the label on the specimen container and the name on the test requisition form. (7) The Results of the test may vary from test to test and from time to time for the same patient. (8) The results of a laboratory test are dependent on the quality of the sample as well as the assay technology. (7) In case of queries or unexplained results please call at 9297562292. Email lab@asarfihospital.com

24 HOUR EMERGENCY

"KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL"



**FINAL REPORT**

Name : MRS. SANJU KUMARI  
Reg. No. : JAN24-75565  
Age / Sex : 32 Y 10 M 5 D / Female  
Doctor : Self-Walkin  
Pat. Type : Mediwheel



Collection Time : 27-01-2024 09:56:25  
Receiving Time : 27-01-2024 09:57:41  
Reporting Time : 27-01-2024 13:55:44  
Publish Time : 27-01-2024 2:20 pm

Test Name	Result	Flag	Unit	Reference Range
<b>Immunology and Serology</b>				
<b>THYROID PROFILE, TOTAL, SERUM</b>				
Method: ECLIA				
Machine Name: Vitros EI				
T3, Total	1.33		ng/ml	0.8-2.0
T4, Total	8.22		µg/dL	5.10-14.10
TSH (Ultrasensitive)	4.90	H	mIU/mL	0.27-4.2



  
**DR N N SINGH**  
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## RADIOLOGY REPORT

Patient Name :	MRS. SANJU KUMARI	Patient ID :	75565
Modality :	DX	Sex :	F
Age :	32Y	Study :	CHEST PA
Reff. Dr. :	DR. SELF	Study Date :	27-01-2024

### Report of X-RAY CHEST PA VIEW

The lung fields are clear.

The cardio thoracic ratio is within normal limit.

The apices, costo and cardio phrenic angles are clear.

The cardio vascular shadow and hila show no abnormal feature.

The bony thorax shows no significant abnormality.

The domes of diaphragm are well delineated.

**IMPRESSION : No significant abnormality noted .**

Suggested clinical correlation & Further investigation .

*Pranat Tudu*  
**Dr. Pranat Tudu**  
DMRD, (Radio diagnosis)  
(Consultant Radiologist)  
Reg. No: 59894

Date 27-01-2024 Time 11-57-07

**Disclaimer:** - It is an online interpretation of medical imaging based on clinical data. All modern machines/ procedures have their own limitation. If there is any clinical discrepancy, this investigation may be repeated or reassessed by other tests. Patient's identification in online reporting is not established, so in no way can this report be utilized for any medico legal purpose.



clo. for Routine check up

VA  $\left\{ \begin{array}{l} b/g \\ b/g \end{array} \right\} \left\{ \begin{array}{l} M_2 \\ M_2 \end{array} \right\} / \text{unwed}$   
AC  $\left\{ \begin{array}{l} \text{Piano } b/g \\ \text{Piano } \left\{ \begin{array}{l} M_2 \\ M_2 \end{array} \right\} \end{array} \right\}$

adv

→ ① R/Anos

1 pt. treated at outside  
@ 1 year ago, report not available

now - by oral/head tumor

now - by cystic area

AC  $\left\{ \begin{array}{l} \text{Pup} \\ \text{Pup} \end{array} \right\} \text{msk}$

AC  $\left\{ \begin{array}{l} \text{LW} \\ \text{LW} \end{array} \right\} \text{msk}$

→ 12.4.59

# नयनश्री नेत्रालय

PHC

(A Unit of Asarfi Hospital Limited)

Baramuri, Bishunpur Polytechnic, Dhanbad - 828 130 (Jharkhand)  
7707013096, 7808368888 | www.asarfihospital.com, info@asarfihospital.com

## PRESCRIPTION FOR GLASS

Reg No. 75565

Date: 22/01/24

Name: MRS. SANJU KUMARI

Age: 32

Gender: M  F

	RIGHT EYE				LEFT EYE			
	D SPH	D CYL	AXIS	VISION	D SPH	D CYL	AXIS	VISION
FOR DISTANCE VISION								
ADD FOR NEAR VISION								

Lens: White / Photo Chromic / Tinted / Kryptok / Executive / Bifocal / CR 39

P.D:-

m.m. For DV

m.m. For NV

Remarks: Constant use / Distance use / Near use

Refractionist

AHL/D/079/13/August/23