

Date: 11/10/2024

To,  
LIC of India  
Branch Office

Proposal No. 6315

Name of the Life to be assured VARUN MIDDHA

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**  
MBBS  
Reg. No. 53435

Signature of the Pathologist/ Doctor  
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 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
ELISA FOR HIV		Other Test	OCT/MBAIC

**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. - 6315

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

Full Name of Life to be assured: VARUN MIDDHA

Age/Sex : 36-10/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.

*[Handwritten Signature]*

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 DEHA on the day of 10/10/2024 2023

Signature of L.A.

*[Handwritten Signature]*

Signature of the Cardiologist  
Name & Address  
Qualification Code No.



Dr. BINDU

MBBS MD  
Reg. No. 33435



Clinical findings

(A)

Height (Cm)	Weight (kgs)	Blood Pressure	Pulse Rate
164	63	116/84	70/4

(B) Cardiovascular System

.....  
 .....

Rest ECG Report:

Position	Supine	P Wave	Normal
Standardisation Inv	Standard	PR Interval	Normal
Mechanism	Normal	QRS Complexes	Normal
Voltage	Normal	Q-T Duration	Normal
Electrical Axis	Normal	S-T Segment	Normal
Auricular Rate	70/4	T-wave	Normal
Ventricular Rate	70/4	Q-Wave	Normal
Rhythm	Regular		
Additional findings, if any	None		

Conclusion: ECG - NHL



Dated at Dehra Dun on the day of 11/10/2024 200



Signature of the Cardiologist  
 Name & Address **Dr. BINDU**  
 Qualification **MBBS, MD**  
 Code No. **Reg. No. - 33435**



Delhi, Delhi, India  
 GH - 5&7, syed nangloi, paschim vihar, Delhi, 110041, India  
 Lat 28.648775°  
 Long 77.182541°  
 11/10/24 11:13 am GMT +05:30

XXXX XXXX 7203

भारत सरकार, शक्ति प्रणाली

Download Date: 30/12/2023



Varun Middha  
 2nd Floor/DOB: 01-11-1987  
 gen/ MALE

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XXXX XXXX 7203

भारत सरकार, शक्ति प्रणाली

Issue Date: 05/04/2023

शक्ति प्रणाली - शक्ति प्रणाली  
 Unique Identification Authority of India

Address:  
 510 Paschim, Kumar Middha, Plot No-4,  
 2/2, 3rd Floor Blue-A, Sector 4  
 Dwarka, Bahadra, PO Raj Nagar - II,  
 Dist. South West Delhi,  
 Delhi, 110077





शुभकर विभागी  
 INCOME TAX DEPARTMENT  
 VARUN MIDDHA  
 PAWAN KUMAR MIDDHA  
 01/11/1987  
 Permanent Account Number  
 BPHPM7622D

Signature: 

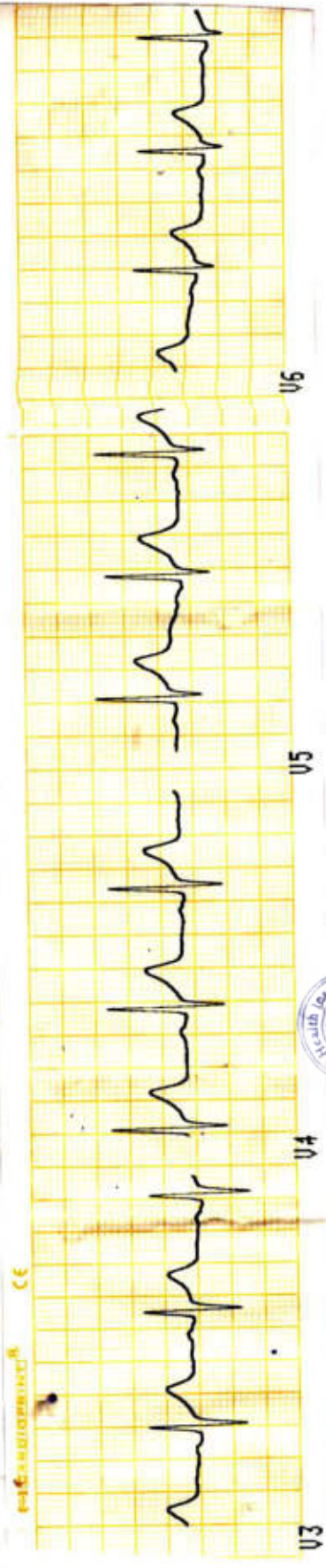
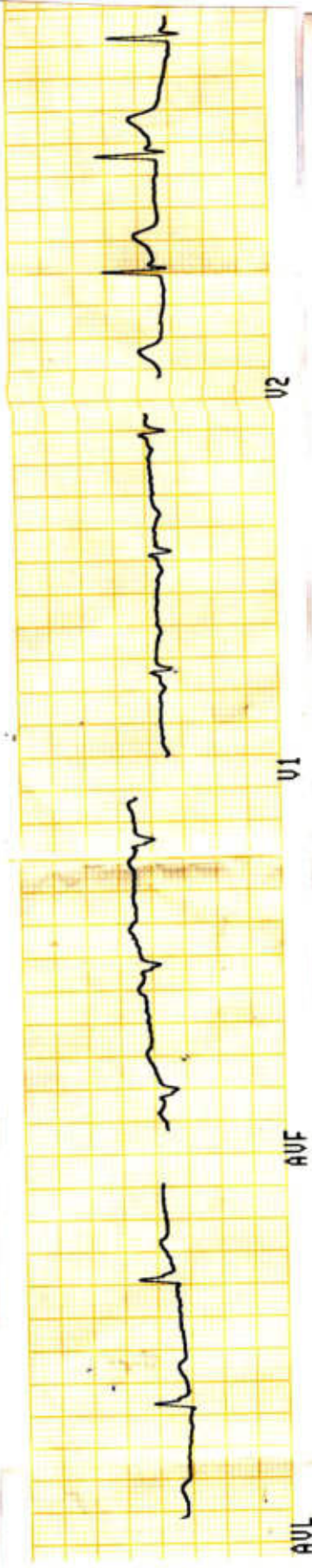
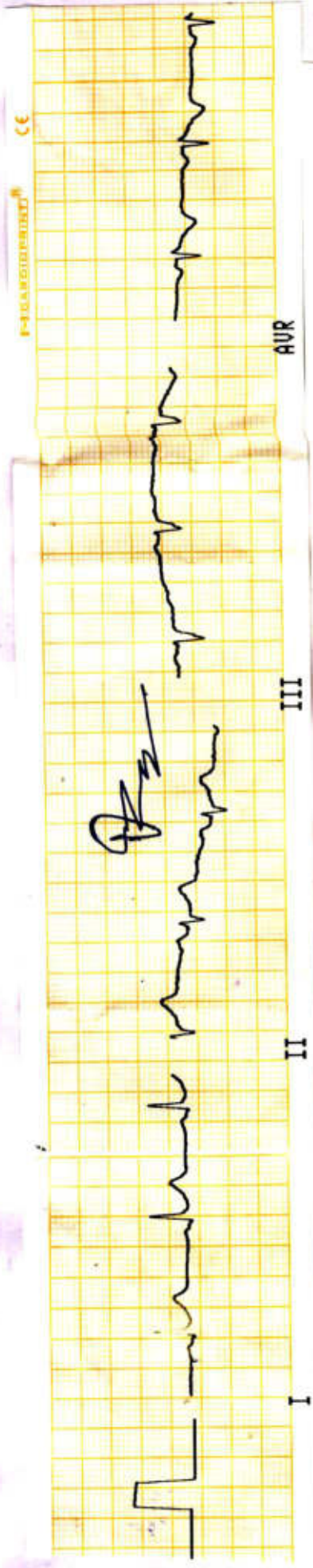
भारत सरकार  
 GOVT. OF INDIA




28092011



Dr. BINDU  
 MD  
 Reg. No. 33435



VARUN MIDHA  
 AGE 36-Y/M  
 ECG - WNL  
 DATED 11/10/2024



Dr. BINDU  
 MBBS, MD  
 Reg. No. 33435



# ELITE DIAGNOSTIC

Email - [elitediagnostic4@gmail.com](mailto:elitediagnostic4@gmail.com)

PROP. NO. : 6315  
S. NO. : 109180  
NAME : MR. VARUN MIDDHA AGE/SEX - 36/M  
REF. BY : LIC  
Date : OCTOBER, 11, 2024

## ROUTINE URINE ANALYSIS

### **PHYSICAL EXAMINATION**

Quantity : 20.ml  
Colour : P. YELLOW  
Transparency : Clear  
Sp Gravity : 1.014

### **CHEMICAL EXAMINATION**

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

### **MICROSCOPIC EXAMINATION**

Pus Cells/WBCs : 1-2. /HPF  
RBCs : Nil. /HPF  
Epithelial Cells : 0-1. /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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Date : OCTOBER, 11, 2024  
AGE/SEX - 36/M

## HAEMATOLOGY

Test	Result	Units
Glycosylated Haemoglobin (HbA1c)	5.66	%
<u>INTERPRETATION</u>		
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 preceeding 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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## HAEMOGRAM

Test	Result	Units	Normal Range
Hemoglobin	14.86	gm/dl	12-18

## BIOCHEMISTRY-(SBT-13)

Blood Sugar Fasting	92.91	mg/dl	70-115
S. Cholesterol	151.78	mg/dl	130-250
H.D.L. Cholesterol	68.78	mg/dl	35-90
L.D.L. Cholesterol	112.74	mg/dl	0-160
S. Triglycerides	98.21	mg/dl	35-160
S. Creatinine	0.86	mg/dl	0.5-1.5
Blood Urea Nitrogen (BUN)	14.21	mg/dl	06-21
Albumin	3.8	gm%	3.2-5.50
Globulin	3.2	gm%	2.00-4.00
S. Protein Total	7.0	gm%	6.00-8.5
AG/Ratio	1.18		0.5-3.2
Direct Bilirubin	0.2	mg/dl	0.00-0.3
Indirect Bilirubin	0.5	mg/dl	0.1-1.00
Total Bilirubin	0.7	mg/dl	0.1-1.3
S.G.O.T.	28.41	IU/L	00-42
S.G.P.T.	26.39	IU/L	00-42
Gamma Glutamyl Transferase (GGT)	56.59	IU/L	00-60
S. Alk. Phosphatase	88.74	IU/L	28-111

(Children 151-471)

\*\*\*\*\*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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## Cotinine

Test	Result
Cotinine	NEGATIVE

## Cotinine Levels

- <10 ng/mL - Non-active smoker.
- 10 ng/mL to 100 ng/mL - Light smoker or moderate passive exposure.
- >200 ng/mL - Considered to be heavy smokers

**NOTE :-** We are using Nano Card method in Urine cotinine. In This method only Negative & Positive values are there.

*Cotinine test is a rapid, self-controlled immunoassay for the qualitative detection of cotinine in human urine. Cotinine is a primary metabolite of nicotine and remains in the body of habitual tobacco users for approximately 17 hours..*

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

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