



# ELITE DIAGNOSTIC

Email - elitediagnostic4@gmail.com

PROPOSAL NO. : 6155  
S. NO. : 110253  
**NAME** : **MRS. ANITA ANAND** **AGE/SEX: 56/F**  
REF. BY : LIC  
Dat : OCTOBER, 26, 2024

## BIOCHEMISTRY

Test	Result	Units	Normal Range
Blood Sugar Fasting	103.45	mg/dl	70-115

\*\*\*\*\*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.

Date: 26/10/2024

To,  
LIC of India  
Branch Office

Proposal No. 6155

Name of the Life to be assured ANITA ANAND

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. BINDU**  
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.

*Anand*

(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)	YES
SPECIAL BIO-CHEMICAL TESTS - 13 (SBT-13)		PGBS (Post Glucose Blood Sugar)	YES
ROUTINE URINE ANALYSIS		Proposal and other documents	
REPORT ON X-RAY OF CHEST (P.A. VIEW)		Hb%	
ELISA FOR HIV		Other Test	

Comment Medsave Health Insurance TPA Ltd.

Authorized Signature,





## LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

## ELECTROCARDIOGRAM

Zone Division Branch

Proposal No.

6155

Agent/D.O. Code:

Introduced by: (name &amp; signature)

Full Name of Life to be assured: ANITA ANAND

Age/Sex

: 56+21/F

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.

*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 26/10/2024  
on the day of 2023

Dr. BINDU  
MBS, MD  
Reg. No. 33435

Signature of L.A.



Signature of the Cardiologist  
Name & Address  
Qualification Code No.



Clinical findings

(A)

Height (Cms)	Weight (kgs)	Blood Pressure	Pulse Rate
160	68	116/78	74/4

(B) Cardiovascular System

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Rest ECG Report:

Position	Supine	P Wave	2
Standardisation Imv	2	PR Interval	2
Mechanism	2	QRS Complexes	2
Voltage	2	Q-T Duration	2
Electrical Axis	2	S-T Segment	2
Auricular Rate	74/4	T-wave	2
Ventricular Rate	74/4	Q-Wave	2
Rhythm	Regular		
Additional findings, if any.	HR		

Conclusion: ECG-WNL

Dated at DELHI 26/10/2024 on the day of 200



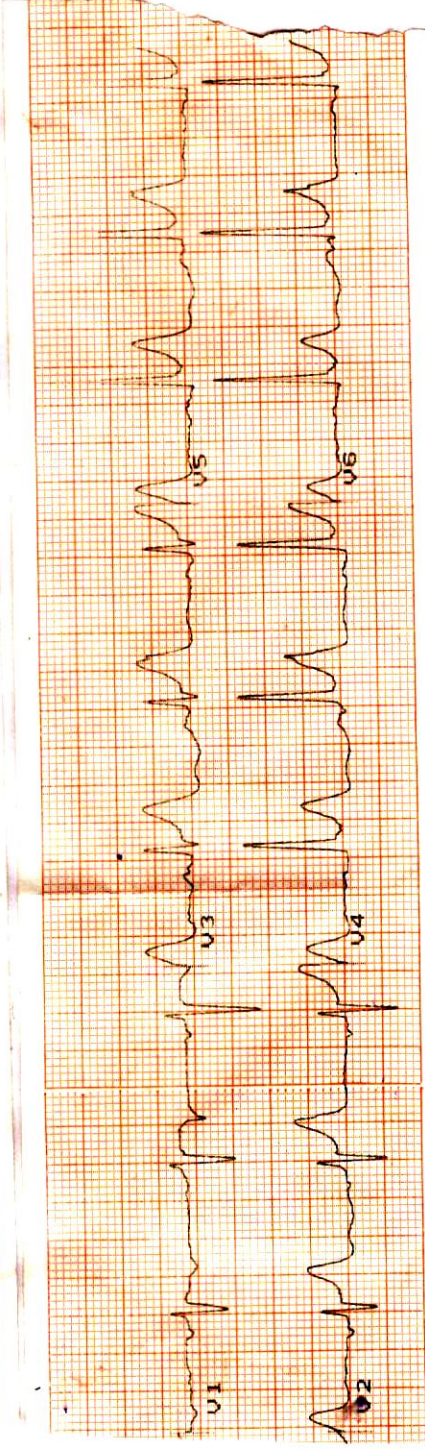
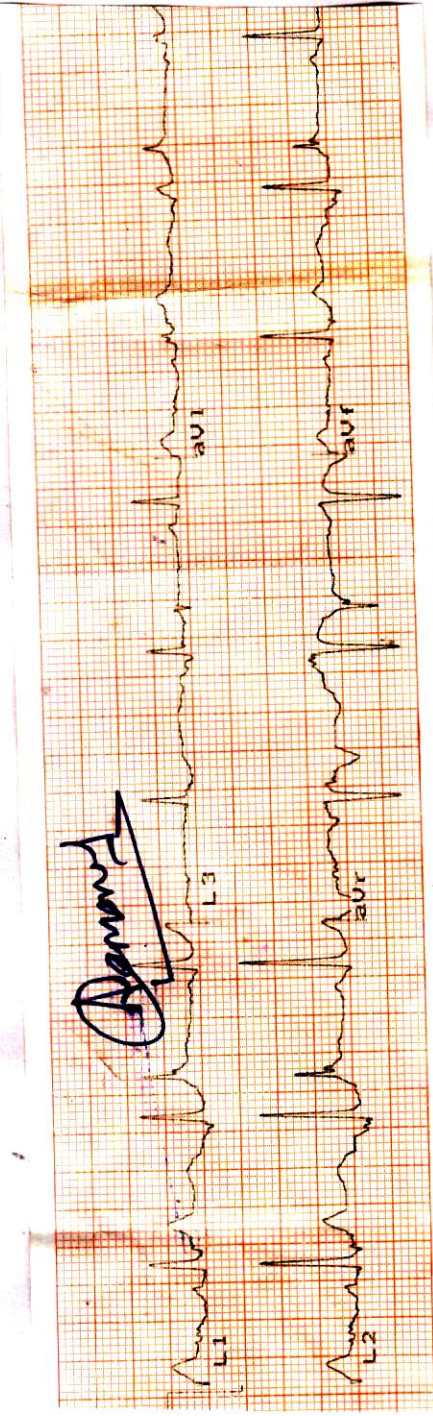
Dr. BINDU

MBBS, MD  
Reg. No. 93435



Signature of the Cardiologist  
Name & Address  
Qualification  
Code No.

*Demond*



ANITA ANAND

AGE  $\Rightarrow$  58-16/F

ECG - WNL

DATE  $\Rightarrow$  26/10/2024

Dr. BINDU

MBBS, MD

Reg. No. 33435

