



# ELITE DIAGNOSTIC

Email – elitediagnostic4@gmail.com

PROPOSAL NO. : 3285  
S. NO. : 109126  
NAME : MR. RAJAN JAIN AGE/SEX: 50/M  
REF. BY : LIC  
Dat : OCTOBER, 06, 2024

## SEROLOGY

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.*

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: 06/10/2024

To,  
LIC of India  
Branch Office

Proposal No. 3285

Name of the Life to be assured RAJAN JAIN

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]  
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.

[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	Elsa 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 Mod 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. - 3285  
 Agent/D.O. Code: \_\_\_\_\_ Introduced by: (name & signature)  
 Full Name of Life to be assured: RAJAN JAIN  
 Age/Sex : 50-10/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 papers with this form.

Dated at DELHI on the day of 06/10/2024 2023

Signature of L.A.





Signature of the Cardiologist  
Name & Address  
Qualification Code No.



**Dr. BINDU**  
MBS, MD  
Reg. No. -33435

## Clinical findings

(A)

Height (Cm)	Weight (kgs)	Blood Pressure	Pulse Rate
165	78	118/84	78/ur

(B) Cardiovascular System

.....

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## Rest ECG Report:

Position	Supine	P Wave	A
Standardisation Imv	D	PR Interval	D
Mechanism	D	QRS Complexes	D
Voltage	D	Q-T Duration	D
Electrical Axis	D	S-T Segment	D
Auricular Rate	78/m	T-wave	D
Ventricular Rate	78/m	Q-Wave	D
Rhythm	Regular		
Additional findings, if any	NIL		

Conclusion: ECG - NHL

Dr. BINDU

MD  
Reg. No. - 33435

DELHI 06/10/2024

Dated at on the day of 200



Signature of the Cardiologist

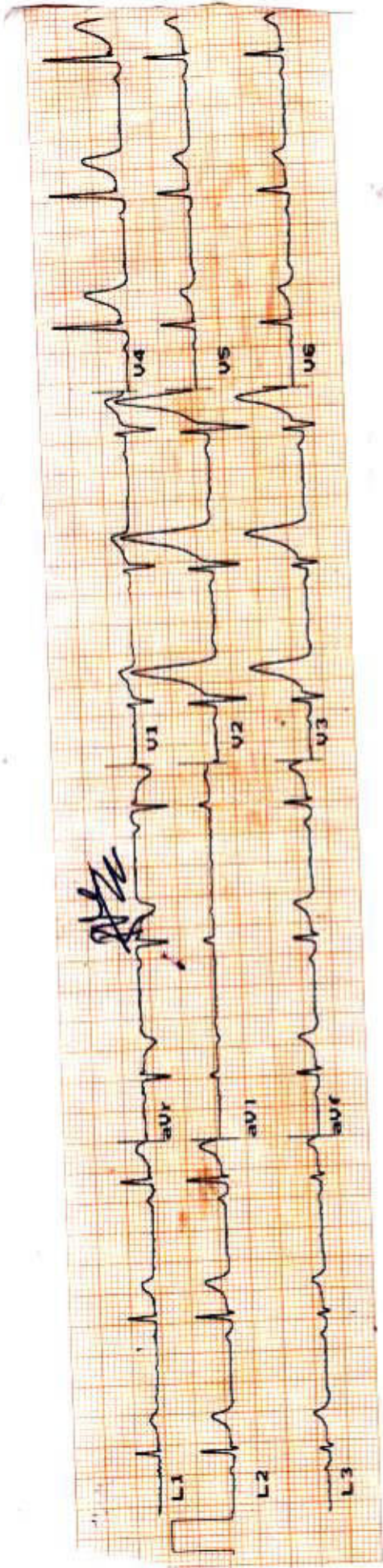
Name &amp; Address

Qualification

Code No.







DR. BHADU  
 MBBS, MD  
 Reg. No.-33435



NAME RASWAN  
 AGE 50  
 SEX M  
 DATE 28/01/2024





# ELITE DIAGNOSTIC

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## HAEMOGRAM

Test	Result	Units	Normal Range
Hemoglobin	14.55	gm/dl	12-18

## BIOCHEMISTRY-(SBT-13)

Blood Sugar Fasting	96.08	mg/dl	70-115
S. Cholesterol	179.58	mg/dl	130-250
H.D.L. Cholesterol	66.58	mg/dl	35-90
L.D.L. Cholesterol	132.52	mg/dl	0-160
S. Triglycerides	112.58	mg/dl	35-160
S. Creatinine	0.88	mg/dl	0.5-1.5
Blood Urea Nitrogen (BUN)	14.60	mg/dl	06-21
Albumin	4.2	gm%	3.2-5.50
Globulin	3.2	gm%	2.00-4.00
S. Protein Total	7.4	gm%	6.00-8.5
AG/Ratio	1.31		0.5-3.2
Direct Bilirubin	0.2	mg/dl	0.00-0.3
Indirect Bilirubin	0.8	mg/dl	0.1-1.00
Total Bilirubin	1.0	mg/dl	0.1-1.3
S.G.O.T.	24.58	IU/L	00-42
S.G.P.T.	25.41	IU/L	00-42
Gamma Glutamyl Transferase (GGT)	46.51	IU/L	00-60
S. Alk. Phosphatase	78.69	IU/L	28-111

(Children 151-471)


## SEROLOGY

Test Name : **Human Immunodeficiency Virus I&II (HIV) (Elisa method)**  
 Result : "Non-Reactive"  
 Normal-Range : "Non-Reactive"

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

Please correlate with clinical conditions.

DR. T.K. MATHUR  
 M.B.B.S. MD (PATH)  
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