

Date: 20-11-2024

To,  
LIC of India  
Branch Office

Proposal No. 4211

Name of the Life to be assured ANIL 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.

  
(Signature of the Life to be assured)

Name of life to be assured:

**Reports Enclosed:**

Reports Name	Yes/No	Reports Name	Yes/No
ELECTROCARDIOGRAM		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)		PGBS (Post Glucose Blood Sugar)	
ROUTINE URINE ANALYSIS		Proposal and other documents	
REPORT ON X-RAY OF CHEST (P.A. VIEW)		Hb%	
ELISA FOR HIV		Other Test <u>UCT</u>	

**Comment Medsave Health Insurance TPA Ltd.**

Authorized Signature,



Dr. RAJESH KUMAR  
Reg. No. 15500





# irine diagnostic

healthpartner

S. No. : 20/NOV/19  
Name : MR ANIL KUMAR  
Ref. by : LIFE INSURANCE CORPORATION  
Date : 20-11-2024  
AGE : 34Years  
SEX : MALE

## Cotinine

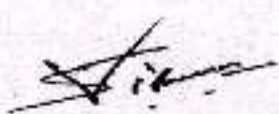
Test

Result

Cotinine

NEGATIVE



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

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