			Date: 11 11 9	24
To, LIC of India Branch Office	3			
Proposal No	2950			
Name of the Life t	to be assured	IYOTI	GROVER	-
The Life to be ass	sured was identifie	ed on the basis of		
examination for w presence.	hich reports are e	BINDU MSBS DAD	ife to be assured before condu be assured has signed as belo	cting tests / w in my
Name:	i alliologica po			
with my consent.	n fasting for last 1		Examination / tests as mention	ned below were done
Name of life to b	oe assured:			

# Reports Enclosed:

Reports Name	Yes/No	Reports Name	Yes/No
FLECTROCARDIOGRAM	YES	PHYSICIAN'S REPORT	
COMPUTERISED TREADMILL TEST		IDENTIFICATION & DECLARATION FORMAT	
HAEMOGRAM		MEDICAL EXAMINER'S REPORT	
LIPIDOGRAM		RST (Blood Sugar Test-Fasting & PP) Both	
BLOOD SUGAR TOLERANCE REPORT		FBS (Fasting Blood Sugar)	458
SPECIAL BIO-CHEMICAL TESTS - 13 (5BT- 13)		PGBS (Post Glucose Blood Sugar)	TES
ROUTINE URINE ANALYSIS	Yas	Proposal and other documents	
REPORT ON X-RAY OF CHEST (P.A. VIEW)		ньж	
EUSA FOR HIV		Other Test	

# Comment Medsave Health Insurance TPA Ltd.

Authorized Signature,





Dr. BINDU



### ANNEXURE II - 1

# LIFE INSURANCE CORPORATION OF INDIA

Form No. LIC03 - 002

		ELECTR	COCAR	DIOGRAM		
Zone		Division			Branch	
Proposal 1	No	2950	5			
Agent/D.C	D. Code:	Introduce	d by:	(name & signa	ature)	
Full Name	e of Life to be a	assured: ブソ	TTO	GROVER		
Age/Sex	3	5140/1	=	43		
Instruction	ns to the Cardio	ologist:				
i.	Please satisfy impersonation		ut the id	lentity of the	examiners to gu	ard against
ii.	not use the fo	rm signed in a	dvance.	Also obtain sig	t sign in your pr natures on ECG	tracings.
iii.	The base line	must be steady	y. The to	acing must be j	pasted on a folde	r.
iv.	Rest ECG sh minimum of wave change	ould be 12 lead 3 complexes, l	ds along long lead e record	with Standard III, If L-III an led additionally	lization slip, cac d AVF shows d in deep inspirat	h lead with eep Q or T
		DE	CLARA	TION		
questions	. They are true		and no i	nformation has	after fully unders s been withheld. me to LIC of Inc	I do agree
Witness			Si		imb Impression	of L.A.
			plain fo	llowing questi	ons to L.A. and	to note the
	iswers thereof.				20 10	
i.	Have you ev	er had chest pa	ain, palp	itation, breath	lessness at rest of	or exertion?
ii.	kidney diseas	se? Y/N			gh or low Blood	i i
iii.	Have you eve test done?		- Ray, B 	CG, Blood Sug	gar, Cholesterol o	or any other
If the ans	wer/s to any/a	ili above quest	ions is '	Yes', submit 4	th pelevant pape	with this
form.	DE.	HI	ון און	<b>~</b> ?4	MBB8,	MD
Dated at	on the	day of	202		Reg. No. 133	435
the table	19640				the Cardiologist	( * E
Signature	of L.A.			Name & Add Qualification		(A)

### Clinical findings

Cardiovascular System

(A)

(B)

Height (Cms)	Weight (kgs)	Blood Pressure	Pulse Rate
160	63	122/84	82/4

Position	0 .	P Wave	0
Standardisation Imv	wicker	PR Interval	(20
	0	The company of the	P
Mechanism	P	QRS Complexes	O
Voltage ·	æ	Q-T Duration	P
Electrical Axis	Ø	S-T Segment	(A
Auricular Rate	82 m	T-wave	P
Ventricular Rate	82/4	Q-Wave	0
Rhythm	Rayular		
Additional findings, if any.	Chie		

Conclusion: ECG- WHL

Dated at on the day of

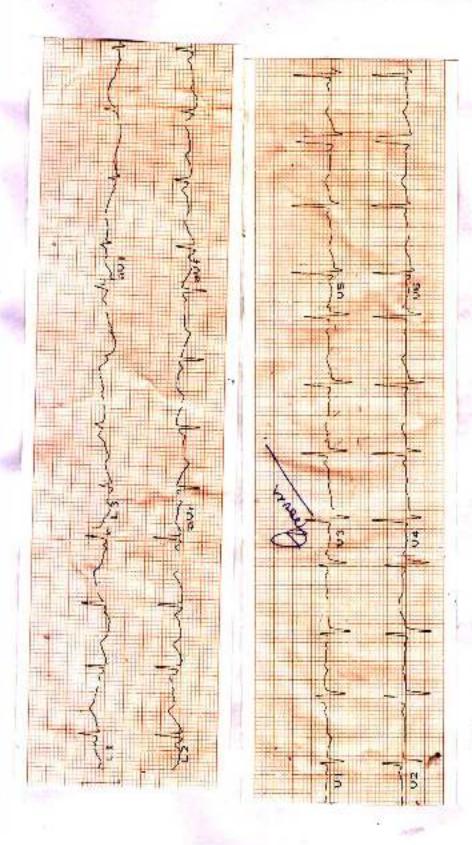
Dr. BINDU Mare, MD Reg. Mo. 33435

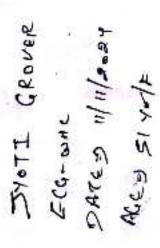
200

(

distance of

Signature of the Cardiologist
Name & Address
Qualification
Code No.











Email - elitediagnostic4@gmail.com

PROP. NO.

2950

S. NO.

110414

NAME

MRS. JYOTI GROVER

AGE/SEX - 51/F

REF. BY

LIC

2

:

:

2

Date

NOVEMBER, 11, 2024

#### BIOCHEMISTRY

Test	Result	Units	Normal Range
Blood Sugar Fasting	161.12	mg/dl	70-115

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

Please correlate with clinical conditions.

DR.T.K.MATHUR
M.B.B.S. MD (PATH)
REGOLANO. 19792
Consultant Pathologist

7091, Oali no. 10, Mata Rameshwari Marg, Netru Nager Karol Bagh, Delta- 110005 Comact: 91-9650089041, 9871144570

NOTE: Not to the final Diagnosis if highly absumal or do not correlate clinically. Please refer to the lab without any has tonon. This report is not fair medico—local uses.



Email - elitediagnostic4@gmail.com

PROP. NO.

2950

S. NO.

110414

MRS. JYOTI GROVER

NAME REF. BY

LIC

Date

NOVEMBER, 11,2024

# ROUTINE URINE ANALYSIS

# PHYSICAL EXAMINATION

20.ml Quantity P. YELLOW Colour Clear : Transparency 1.011 Sp Gravity

# CHEMICAL EXAMINATION

CHEMICAL EXAMINATION	20	ACIDIC	
Reaction	2	N1 2	/HPF
Albumin		Ni 1 -	/HPF
Reducing Sugar			

#### VICEOCCODIC EXAMINATION

MICROSCOPIC EXAMINATION	*.	1-2.	/HPF
Pus Cells/WBCs	- 2	NII.	/HPF
RBCs .	- 2	0-1.	/HPF
Epithelial Cells		Nil-	0.000
Casts		Nil.	/HPF
Crystals		Nil.	
Bacteria		NII.	
Others			

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

Please correlate with clinical conditions.

DR. T.K. MATHUR M.B.B.S. MD (PATH) REGIONO. 19792 Consultant Pathologist

AGE/SEX - 51/F

7091, Calino 10, Mata Rameshwari Mung, Neura Nagar Karol Bagh, Delhi- | 10005 Consuct: +91-9530059041, 9871144570 NOTE: Not to the final Diagnosis of highly abnormal or do not correlate clinically. Please refer to the lab without any hasitation. This report is not five medica - legal cases