

To,
LIC of India
Branch Office

Date: 26/10/2024

Proposal No. 6542

Name of the Life to be assured MR. SANJAY 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.

Dr. BINDU
MBBS, MD
Reg. No.-33455



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 | YES | 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% | |
| ELISA FOR HIV | | Other Test | |

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. - 6542

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

Full Name of Life to be assured: MR SANJAY KUMAR.

Age/Sex : 53/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 26/Oct/2024

Signature of L.A.



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 |
|-------------|--------------|----------------|------------|
| 175 | 77.7 | 112/74 | 70/M |

(B) Cardiovascular System

..... (N)

.....

Rest ECG Report:

| | | | |
|-----------------------------|---------|---------------|-----|
| Position | Supine | P Wave | (N) |
| Standardisation Imv | (N) | PR Interval | (N) |
| Mechanism | (N) | QRS Complexes | (N) |
| Voltage | (N) | Q-T Duration | (N) |
| Electrical Axis | (N) | S-T Segment | (N) |
| Auricular Rate | 70/M | T-wave | (N) |
| Ventricular Rate | 70/M | Q-Wave | (N) |
| Rhythm | Regular | | |
| Additional findings, if any | HR | | |

Conclusion: ECG- CONL

Dated at DELHI on the day of 26/Oct/2004

Dr. BINDU
MBBS, MD
Reg. No.-33435



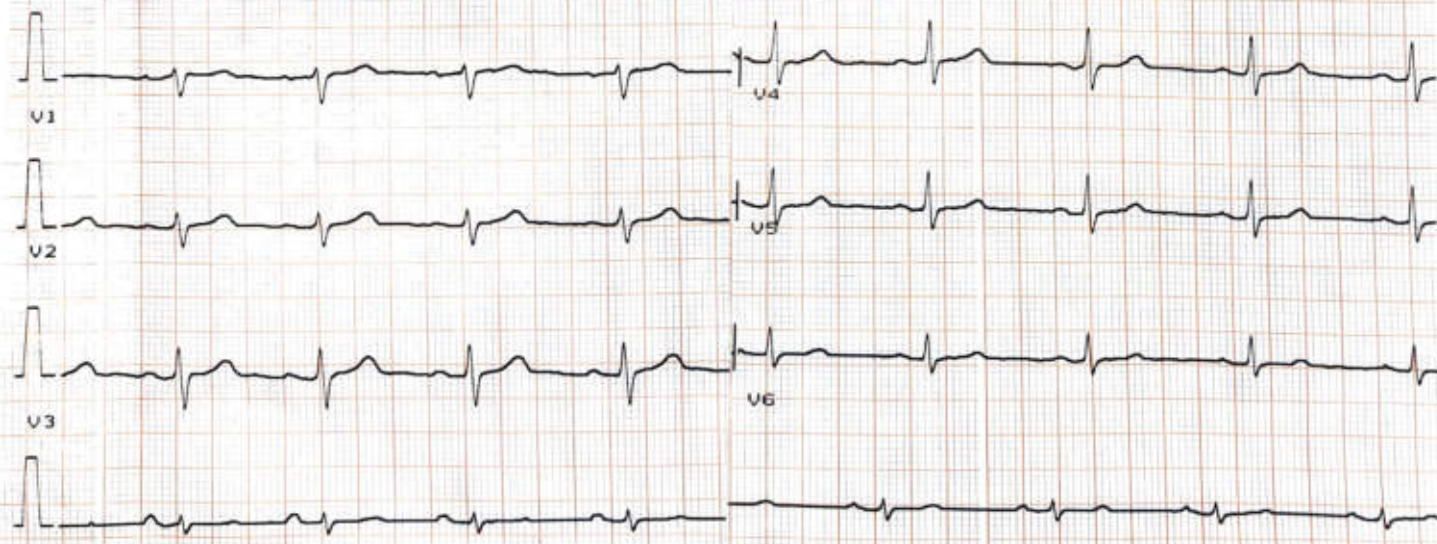
Signature of the Cardiologist
Name & Address
Qualification
Code No.

Name: _____
yrs cm Kg BP



L2
10mm/mV Time:

Name: _____
yrs cm Kg BP



L2
Ver 10mm/mV Time:
I.9 25mm/sec Date:

CARDIOPRIN

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





ELITE DIAGNOSTIC

Email - elitediagnostic4@gmail.com

PROP. NO. : 6542
S. NO. : 110258
NAME : MR. SANJAY KUMAR AGE/SEX - 53/M
REF. BY : LIC
Date : OCTOBER, 26, 2024

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.



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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REF. BY : LIC
Date : OCTOBER, 26, 2024

BIOCHEMISTRY-(SBT-13)

| | | | |
|----------------------------------|--------|-------|-----------|
| Blood Sugar Fasting | 92.90 | mg/dl | 70-115 |
| S. Cholesterol | 151.78 | mg/dl | 130-250 |
| H.D.L. Cholesterol | 68.69 | mg/dl | 35-90 |
| L.D.L. Cholesterol | 112.74 | mg/dl | 0-160 |
| S. Triglycerides | 98.21 | mg/dl | 35-160 |
| S. Creatinine | 0.69 | 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 | 2.86 | | 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. | 21.41 | IU/L | 00-42 |
| S.G.P.T. | 20.39 | IU/L | 00-42 |
| Gamma Glutamyl Transferase (GGT) | 45.59 | 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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Date : OCTOBER, 26, 2024

ROUTINE URINE ANALYSIS

PHYSICAL EXAMINATION

Quantity : 20. ml
Colour : P. YELLOW
Transparency : Clear
Sp Gravity : 1.012

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.



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HAEMOGRAM

| Test | Result | Units | Normal Range |
|--|--------|-------|------------------------|
| Hemoglobin | 14.66 | gm/dl | 12-18 |
| Red Blood Cell [RBC] | 5.60 | mill. | M-4.6-6.5 F-3.9-5.6 |
| Hematocrit: [PCV] | 50.48 | % | 37-54 |
| Mean Cell Value [MCV] | 80.11 | | 76-96 |
| Mean Cell Hemoglobin [MCH] | 31.29 | pg | 27-32 |
| Mean Cell Hemoglobin Conc. [MCHC] | 33.52 | % | 30-35 |
| Total Leucocytes Count [TLC] | 7,100 | cumm | 4000-11000 |
| Differential Leucocytes Count [D.L.C] | | | |
| Neutrophils | 61 | % | 40-75 |
| Lymphocytes | 29 | % | 20-45 |
| Eosinophils | 06 | % | 02-10 |
| Monocytes | 04 | % | 01-06 |
| Basophills | 00 | % | 00-01 |
| Platelet count | 2.74 | LACKS | 1.5-4.5 |
| E S R (Wintrob's method) | 14 | M.M. | 0 - 20 |

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

Please correlate with clinical conditions.



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भारत सरकार

Government of India



संजय कुमार

Sanjay Kumar

जन्म तिथि / DOB : 26/01/1971


पुरुष / Male

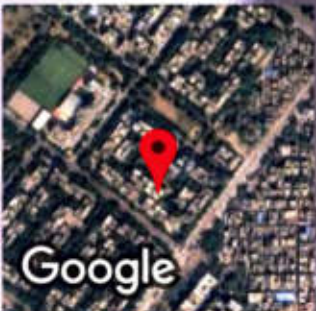


9015 7957 8191

आधार - आम आदमी का अधिकार



 **GPS Map Camera**



New Delhi, Delhi, India
33/48/1, Pocket 6, Sector 23, Rohini, New Delhi, Delhi, 110041,
India
Lat 28.720407° Long 77.084061°
26/10/24 08:05 AM GMT +05:30