उत्तर प्रदेश असाधारण गजट, 04 मार्च ,2014 शासनादेश संख्या:474/5-6-14-1082-87टीसी, दिनांक:04.03.2014

परिशिष्ट-ग (भाग पाँच नियम-18 तथा 18)

संवा में

माननीय जनपद न्यायाधीश

शाहणां पुर

विषय

चिकित्सा उपचार पर किये गये व्यय की प्रतिपूर्ति।

महोदय.

मेर पारिवारिक सदस्य मुसुम लाता देवी (मामा) मेर पारिवारिक सदस्य मुसुम लाता देवी (मामा) में Multiple teeth decay किए दिनाक 13/03/2024 से 03/04/2024 तक Deutal Care Clivic में उपचार करवाया है। वे निम्नलिखित दस्तावेजों के साथ प्रतिपूर्ति के लिए दावा प्रस्तुत कर रहा हूँ

- उपचारी चिकित्सक / चिकित्सालय के अधीक्षक द्वारा हस्ताक्षरित / प्रतिहस्ताक्षरित अनिवार्यता प्रमाण पत्र।
- उपचारी चिकित्सक द्वारा विधिवत हस्ताक्षरित एव सत्यापित मूल नकद पर्ची (कैश मेमो), बीजक (बिल), बाउचर।
- यह प्रमाणित किया जाता है कि ऊपर नामित पारिवारिक सदस्य मुझपर पूर्णतया आश्रित है और सामान्यतया मेर साध

मेरे द्वारा खर्च किये गये रूपये 64,20% - (नीसह स्वार का प्रतिपूर्ति के लिए यथा आवश्यक कार्यवाही करने की कृपा करें। यह प्रमाणित किया जाता है कि उपरोक्त धनराशि का भुग्तान मेरे द्वारा किसी अन्य संस्था एवम् बीमा कम्पनी से नहीं लिया गया है न ही भुग्तान हेतु कोई दावा प्रस्तुत किया गया है ।

दिनांकः 16 04/2024

कर्मचारी /अधिकारी का नाम

पद नाम तैनाती का स्थानः

परिशिष्ट ''इ''

अनिवार्यता प्रमाण-पत्र

प्रमाणित किया जाता है	क की श्री/श्रीमती	sum L	ATA DEVI
पुत्र/पति/पली श्रीर्	HAMAR SIN	g. H	
आयु59 वर्ष	Multiple teeth	decay	
		7	
रोग से पीड़ित हैं। इनका उपच	R Dontal care cl	ihíc	(चिकित्सालय का नाम)
में मरीज की अपरिहार्य परिस्थि	ते/आकस्मिकता को देखते हुये	दिनांक. <i>13\3\2 ७</i> ?	से शुरू किया गया। Mob:-9450390838
		Dr.	चिकित्सक का नीमा वृमुहर
		B.D.S	., M.D.S., (Conservative & Endodontics) Dental Care Clinic
		Firs	t Floor-TVC-71, Shree Ganesh Tower

ESSENTIALITY CERTIFICATE CERTIFICATE 'A'

CERTIFICATE A	•
(To be completed in the case of patients who are Not Adr	nitted to the Hospital for treatment)
(To be completed in the case of patients who are Not Adr Certificate granted to Mr./Mrs./Miss KUS wife/Son/Daughter of Mr. J. H. M. A.R	La-a Atul
(To be completed in the	UM LATA DEVI
Cortificate granted to Mr./Mrs./Miss	
Certificate of Mr. J.H.B.M.A.R.	
wife/Son/Daughter of the Employed in the Charge	
Employed in the Charge	of the case at the Hospita
Employed in the(To be signed by the Medical Officer-In-Charge	
(To be signed by the Medical Singh here	eby, certify:-
L. Dr. Bouleau	12 12 12024 (date to be
(a) That I charged and received Rs. 500 for co	onsultation on 19.13.13.13
(a) That I charged and received Rs Q.U. To the consulting room /at the residence given) at my consulting room /at the residence	of the patient.
given) at my desired Rs	of administrations of the patient.
That I coame all to the	room, the losida
given) at my consulting foom rat the given at my consulting form rat the given at my consulting on A. A for the injections were for/were not for immunity.	at hospital. Dontal Clinic Care Curve and hospital Dontal Clinic Care Curve and medicines, prescribed by me in this and medicines, prescribed by me in the approvention of serious deterioration in the approvention of serious deterioration in the approvention of serious deterioration in the
(a) To the injections were	No Tal Edition
(d) That the patient has been under treatment a my consulting room and the under mention my consulting room and the under treatment and the under treatment and the under treatment and the under treatment and the under mention my consulting room and the under my consulting	at nospital prescribed by me in this
(d) That the patient has been under treatment or my consulting room and the under mentior connection were essential for the recovery connection were patient. The medicines are	hed medicined, serious deterioration in the
my consuling room essential for the recovery	pot stocked in the (name of the
my consulting room and the under monaction were essential for the recovery connection of the patient. The medicines at condition of the patient, to private patients and or supply to private patients and or	to not include proprietary preparations for
connection were essential for the recovery connection of the patient. The medicines at Hospital) for supply to private patients and which cheaper substance of equal therape which cheaper substance of equal therape.	utic value are available nor preparations
	CHO FOR
which cheaper sods, toilets. which are primary foods, toilets.	PRICES
NAME OF MEDICAL	1200/
1 Cohare Hertigen + DPG	80001-
A IT I A COLUMN TO THE TOTAL OF	12 KG1-
3 falling + Glen Post	641,00
stelling & landae	
4 Storgery + Bridge	13/8887 (Stock of Part
and is/was suffering from	2 Johnson Singh
(e) That the patient from 13.1312029	B.S. M.D., (Conservative & Endodontics)
under my treatment	Dental Care Clinic
notion is/was not given prenatal o	r postnatal treatment. r which an expenditure of Rs
(f) That the patient is aboratory test etc. fo	r Which all oxportation on my advice at hour Khand, Lucknow
(g) that the x-ray, were necessary and	oratory). Criff for specialist consultation (Name of the Chief
was (Name of the Hospital/Lat	for specialist consultation
That I referred the patient to Dr.	(Name of the Chief equired under the Rules, was obtained.
(h) That I teleflow approval of the	envired under the Rules, was obtained.
(h) That I referred the patient to the and that the necessary approval of the Administrative Officers of the State) as re Administrative officers of the State as re	penitalization.
	Mobi- 9450390888
(i) Lust the bassing are	D Athingir Singh
	Dr. Africav Singh The
e	D.D.S. M.D.S. (CONTIESIGNATION CONTINUES)
Place: Lucknow N	ignature Dent Officer Clinic of the ledical Dent Officer Clinic of
Place:	edical Demonitorion attached ospital/Dispensary to which attached
COUNTERS	GNED - Com Climits
COUNTE	Mental Concorne
ationt has been un	der treatment at the same which were
I certify that the patient has	silities provided were the minimum which were
Hospital and that the fac	der treatment at the Dental Care Clinic Silities provided were the minimum which were Mob:-9450390888
	D Anchinay Singh
essential for the patient's treatment.	DEMINITED DITIES
	B.D.S., M.D.S., (Conservative & Endodontics)
	MEDICAL SUPERINTENDENT
1 description	Desdal Care Clant HOSPITAL
Place: Lycknow	Miniti mano, Luckion

2		WILLIAM I ATA	NEW
Wife	Certificate granted to Mrs./Mr./Miss Son/Daughter of Mr	R SINGH	D N 2 14
Empl	oved in the	RTIFICATE "B"	
	(To be Completed in the case of page 1)		nital for treatment)
	(To be Completed in the case of page 1)	PART -A_	pital for deathern)
	(To be signed by the Medical	Officer in charge of the case a	t the hospital)
I, Dr.	Abbinar Sindly	hereby certify	
(a)	that the patient was admitted to hospit	tal on my advice/the advice of	
	that the patient has been under treat	e of medical officer).	and that the under
(b)	mentioned medicines prescribed by	me in this connection were	essential for the recovery/
	prevention of serious deterioration in	the condition of the patient. I	he medicines are not stocked
	in the	(name of	hospital) for supply to private
	patients and do not include proprie	etary preparations for which c	cheaper substances of equal
	therapeutic value are available, for p	of medicines	Prices
S.N.		of medicines	
1. (ionsultation tork		8000/-
2.	PCT + extraction		12,000/
3.	ionsultation + 0PG PCT + extraction fillings + Fiber Post Surgeory + Bridge		43,000/-
4.	Surgion + Bridge		Mobi-s
5.	0,	lotel	B.D.S., M.D.S., (Contents)
(c)	That the injections administered were	e not for immunizing or prophy	lactic purposes. Denta vire Clinic
(d)	That the injections administered were That the patient is/was suffering from	om Multple teach	Vibrati Khand, Lucknow
	and is/was under my treatment from	13 3 2024 to	31912021
(e)	That the X-ray, Laboratory tests, etc. was incurred were necessary and wer	for which an expenditure of <	4.13
	was incurred were necessary and wer	(Name of	of hospital or laboratory)
(f)	That I called in Dr. Abhihau Sinthe Chief Administrative Medical Of	al.	himay Singh (Name of
(-)	the Chief Administrative Medical Of	ficer of the State), as required to	inder the rules, was obtained.
		Signature and	Designation of
		The Medical (Officer-in-charge
		PART-B	a Maria
	I certify that the patient has been und	ler treatment at the	Se corre (Street
	expenditure of ₹		
and e	essential for the recovery/prevention of	f serious deter-oration in the co	ndition of the patient.
were	essential for the recovery/prevention of	Signature of t	
		Officer-in-ch	ange of the case at the Hospital
	CC	DUNTERSIGNED	arge of the case at the Hospital Dental Care Clinic
		Medical Super	Dental Care Clinic intendent/C-71, Shree Ganesh Tower
		Do	Vibhuti Khand, Luclo Tospital
	I certify that the patient has been under	treatment at the Dended C	asse Colors Hospital
and t	nat the facilities provided were minimum v	which were essential for the patient	ts treatment. Mob:- 945
		Dendad	car Colline Hospital matting & End
		Place: Luc \ Date \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Courtai Care Clinic
		Dat 3/4/20	2_Y First Floor-TVC-71, Shree Ganesh Vibhuti Khand, Lucknow
N.B.	:- Certificate not applicable should be s by the Medical Officer in all cases.	struck off. Certificate (d) is Cor	mpulsory and must be filled in

कार्यालय मुख्य चिकित्सा अधिकारी

	गर्ग/कादालर	क, नाम				
रोगी	का नाम श्री	श्रीमती/कु KUSUM	1 A T	1 010	,	
17.00	कत्सा का विव	रण तालिका दिनांक 13 3 202 पु	7.5	- 1. 1.		
ताः,	T .	10.10.10.10.10.20.29.	· · · · · · · · · · · · · · · · · · ·	3.14.120	24	तक
सं.		बाउचर संख्या एवं एजेन्सी का नाम	बाउचर की धनराशि	वेय धनराशि	धनराशि देय योग्य नहीं है।	अभ्युक्तिः
1.	13/3/24	1214- Consudedtop	500/-	,	पाग्य नहां हा	
	11	11 084	700/-		North Address of the Annual Property of the Annual	
3. A	24.64	1024				And the state of t
5.	3/4/24	FIC! 2113	2000/-		The state of the s	
6.	1	1) Extration 14	1000/-	-		
7.	11	1) Composite filling 17,18,22	2 4500f		week the particular accounts on the second s	
8.		1) Surgery			Total to Secretaria and Control of the Control of t	
9.	-11	11 Bridge (21,11,12,13,	5000)-			-
10.		14, 15, 16, 17	38,000		parasing and the state of the s	
11.			00/ 04/			
12.		Totals	64,20	22		
14.		10/10/			-	-
15.		17 12:				-
16.		Jack			The second section and the second section is the second section of the second section section is a second section of the second section sectio	And the second s
17.						None and the second of the second
18.		W.	Mon: Ma	1301888		-
19.		Dr. Abh	inav Si	ngh		
20.		B.D.S., M.D.S., (C	care Clinic	odontics)	Manufacture and the same and th	The second of the second of
21.		Mist Floor IVG				15 1 Barriera 148 (may 1 4 a andre 14 may 1
22.		2.0.0	Manus Lucknow			A CONTRACTOR OF THE PARTY AND
24.			J.			
25.					200 A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
26.	-				**************************************	
27.						Place of Minimum Control
28.						-
29,				The second secon		
		The second secon		1.		



Mob.: 9450390888

DENTAL CARE CLINIC

Shree Ganesh Tower, TVC - 71, First Floor In-front of Lohia Hospital OPD Gate, Vibhuti Khand, Lucknow-226010

Receipt Number 2024 / 1214	Date: 13 3 2024
Received with thanks from Mrs. Mr. Kushim late Devi	
the sum of Rupees Twelve Hundred Repers On	ly1-
	113/3/2024
Description Consuldation de (500/-) + OPC	1 (700/-)
X	

All Disputes Subject to Lucknow Jurisdiction

B.D.S., M.D.S., (C Dental CReceived by
First Floor-TVC-71, Shree Ganesh Tower
Vibhuti Khand, Lucknow

RECEIPT

Mob.: 9450390888

DENTAL CARE CLINIC

Shree Ganesh Tower, TVC - 71, First Floor In-front of Lohia Hospital OPD Gate, Vibhuti Khand, Lucknow-226010

1236	Date: 3/04/2024
Receipt Number 2024 / Received with thanks from Mrs. Mr. Lushumks	la Dave
Received with thanks from Mrs. Mr	the Deol
the sum of Rupees Sixtythmer Thousand	el Pupes only !-
by Cash/Card/Paytm/Net Banking 63,580/	Dated 3/04/2024
by Cash/Card/Paytm/Net Banking	(- 1
	(1000/) + Composite filling 17,18,22 4500
Description ReT 21,13 (7000/-) + Extraction + fiber Post 11,21,13 (7500/-) + Sungery (50 (38,000/-))	500/) + Bridge 21/11/22/3/14/15/6/17,
(38,000/)	Dr. Abbar Singh
	B.D.S., M.D.S., (Constructive & Endodontics)
All Disputes Subject to Lucknow Jurisdiction	First Floor-TVC-71, Shree Ganesh Tower Vibhuti Khand, Lucknow
	violeta initiro, Euchitow



Dental Care



Clinic Nos: 0522-4009528

8887922379 8948590444 9473871737

Dr. Abhinav Singh B.D.S M.D.S Conservative & Endodontics	Name Age/Sex 59/p Date 13/3/2 Medical History - B.P./ Diabetes Thyroid
Dr. Priya Singh B.D.S M.D.S Oral Medicine & Radiology	Allergy Blood Cardiac Condition C/c: Padient C/o dishedged proshes & hissing
Dr. Satya Prakash B.D.S M.D.S Oral & maxillofacial surgery	teeth in upper and lower region of the jaw. Needs replacement for the same.
Dr. Saurabh Bhalla B.D.S M.D.S Orthodontics	OF:-
Dr. Rita Gupta B.D.S M.D.S Conservative & Endodontics	Prostrosis! - [13 - 21] canous! - 22; 24; 17; 16; 34; 44 RS! - 14.
Dr. Barkha B.D.S M.D.S Prosthodontist	perel compres from the period of the period
Dr. Priyamvada Singh B.D.S M.D.S Orthodontics	4 4 5 7 5 6 70
Dr. Nadia B.D.S M.D.S Pedòdontics	67 (5 y 3 2
Dr. Arnika Periodontics	PCT-21;13 PerCT-16 P-S-14 Clinic Address
7 3 24 Timi	C-71, 1st floor, In Front Of Lohia Hospital OPD Gate, Vibhuti Khand, Gomti Nagar Lucknowngs 11:30 AM to 8:30 PM Mondays - Closed Appointments Online- www.dentistinlucknow.com

1 56000/ Comporte het den aut 18; 22 Bodnes 13WL= 18-mm }_40-61. ghol. 21WL= 16-5mm? (Card) 21; 13- PCT Completed; Extractor dore west 14 Tab Zorod Spras Bal-26000 Adv 20,000



Dental Care Cli

Clinic Nos: 0522-4009528

8887922379 8948590444 9473871737

Quality Redefined

Dr. Abhinav Singh
B.D.S M.D.S
Conservative & Endodontics

Dr. Priya Singh
B.D.S M.D.S
Oral Medicine & Radiology

Dr. Satya Prakash B.D.S M.D.S Oral & maxillofacial surgery

Dr. Saurabh Bhalla B.D.S M.D.S Orthodontics

Dr. Akansha Pandey B.D.S M.D.S Orthodontics

Dr. Mohit
B.D.S M.D.S
Prosthodontics

Dr. Rita Gupta
B.D.S M.D.S
Conservative & Endodontics

Dr. Malika Agarwal B.D.S M.D.S Pedodontics 717 Périapical enucleation d'aretter de UL AIX 13

Name Kushum Lata Devi Age/Sex 58/F Date 17/03/24

-> PRF, suture placed.

> Postopentive gunt jiven

Recall after 7 days for suture remained

23/3/2024 Suture removal done 84. 13

- Fiber Post given wet 11; 21; 13 & Pinjournale - Compart Rest dore (By Dr. Nobia) wet 17 - CAD-CAM Imposion talen. 21 to 17

Bridge Cemeteten dre 21 to 17

Clinic Address

Shree Ganesh Tower TVC-71, 1st floor, In Front Of Lohia Hospital OPD Gate, Vibhuti Khand, Gomti Nagar Lucknow

Timings 3:00 PM to 11:00 PM

Mondays - Closed

Book Appointments Online- www.dentistinlucknow.com

- Fracture of 31/1 post comfort - Filling cloud 7/ 28000]

- post commenter (+ Cose building, cloude

- croupe pedice (ion cloud 731/1) Tob Zendol SP = 30 30 Says. 03/04/2014 Ro 28,000/poud
(card)

Rhipam