

Appendix as herby substituted
APPENDIX-"C"
(SEE PART-V, RULE 16 and 18)

To,
The Registrar General
Hon'ble High Court of Judicature at
Allahabad

No. 201/22

Dated: 31-08-2022

Subject: Reimbursement of expenditure done on medical treatment
Amounting to Rs. 2,204/-.

Sir,


I **Mitra Pal Singh** took treatment of My wife Smt. Savita Singh at
K.G.M.U., LUCKNOW for HTN from 08.07.2021 to 06.08.2021.

I am submitting the claim with following documents for reimbursement:

1. Essentiality Certificate duly signed/countersigned by treating
doctor/Medical Superintendent of the Hospital.
2. Original Cash memo Bills/Vouchers and Prescription duly signed and
verified by treating doctor/C.M.S.
3. It is certified that above named family member is wholly dependent
upon me and generally resides with me.

Kindly do the needful for reimbursement of my claim after adjusting the
advance of Rs nil sanctioned for my treatment vide letter no.X..... dated
.....X..... ofX.....

Dated. 31.8.2022.


Name of Officer - **Mitra Pal Singh**
Designation - Principal Judge
Place of Posting - Family Court, Sitapur
I.D. No. - U.P.-5775

1. Original letter of C.M.S. Sitapur (Regarding
technical examination.)
2. Essentiality Certificate "A"
3. List of Medical expenses calculation sheet
4. Original Bills & Vouchers
5. Original Slip of K.G.M.U, Lucknow

प्रेषक,

मित्र पाल सिंह
प्रधान न्यायाधीश
परिवार न्यायालय
सीतापुर।

सेवा में,

संयुक्त निबन्धक
प्रशासन अनुभाग A-1 & A-4
माननीय उच्च न्यायालय
इलाहाबाद।

पत्रांक: 202/2022

दिनांक: 31-08-2022

विषय- कालबाधित चिकित्सीय प्रतिपूर्ति दावे के सम्बन्ध में।

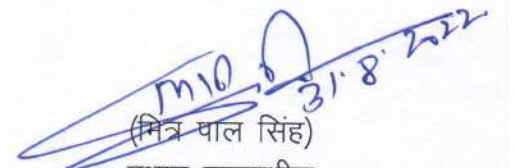
महोदय,

उपरोक्त विषयक माननीय न्यायालय के पत्रांक 10029/IV-2706/Admin-A-1 Sec. Dated 16-08-2022 के सन्दर्भ में माननीय न्यायालय से निवेदन करना है कि मैंने अपनी पत्नी का इलाज किंग जार्ज मेडिकल कालेज, लखनऊ में कराया था जिससे सम्बन्धित चिकित्सीय प्रतिपूर्ति दावा मु० 2,204/- में माननीय न्यायालय द्वारा दावा विलम्ब से प्रस्तुत किये जाने की आपत्ति इंगित की गयी है। उक्त के सम्बन्ध में माननीय न्यायालय को अवगत कराना है कि मेरी पत्नी का किंग जार्ज मेडिकल कालेज लखनऊ में इलाज निरन्तर चल रहा है जिस कारण एक दावे को अलग से प्रस्तुत न कर कई दावों को एक साथ जोड़ कर प्रस्तुत कर दिया गया था इसके अतिरिक्त चिकित्सीय प्रपत्रों को संयोजित करने व सम्बन्धित चिकित्सको से उन्हें सत्यापित कराने में काफी समय लग गया जिस कारण चिकित्सीय प्रतिपूर्ति दावा माननीय न्यायालय को प्रेषित करने में विलम्ब हो गया।

अतः आपसे अनुरोध है कि उपरोक्त चिकित्सीय प्रतिपूर्ति दावे के प्रस्तुतीकरण में हुये विलम्ब को मर्षित किये जाने के सम्बन्ध में इस प्रार्थना पत्र को माननीय न्यायालय के समक्ष अवलोकनार्थ प्रस्तुत करने का कष्ट करे।

संलग्नक- चिकित्सीय प्रतिपूर्ति दावा मूल रूप से।

भवदीय,


(मित्र पाल सिंह)
प्रधान न्यायाधीश
परिवार न्यायालय
सीतापुर।

प्रेषक,

मुख्य चिकित्सा अधीक्षक,
जिला चिकित्सालय, सीतापुर।

सेवा में,

मा० श्री मित्र पाल सिंह,
प्रधान न्यायाधीश,
परिवार न्यायालय, सीतापुर।

पत्रांक:-जि०चि०/चिकित्सा प्रतिपूर्ति/2022-23/598

दिनांक 17/05/2022

विषय:-मा० श्री मित्र पाल सिंह, प्रधान न्यायाधीश, परिवार न्यायालय, सीतापुर की पत्नी श्रीमती सविता सिंह के चिकित्सा प्रतिपूर्ति के सम्बन्ध में।

महोदय,

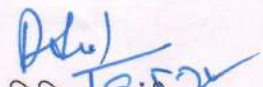
उपर्युक्त विषयक आपके पत्र सं०-95/2022 दिनांक 07-05-2022 के क्रम में शासनादेश संख्या-56/2019/578-पांच-6-2019-04(जी०)/2019 दिनांक 07 मार्च 2019 के क्रम में चिकित्सा प्रतिपूर्ति दावे का परीक्षण किया गया।

- 1-लाभार्थी का नाम/पदनाम : मा० श्री मित्र पाल सिंह, प्रधान न्यायाधीश ✓
- 2-लाभार्थी के पिता/पति का नाम :
- 3-उपचार प्राप्तकर्ता का नाम/पिता/पत्नी का नाम: श्रीमती सविता सिंह ✓
- 4-उपचार प्राप्तकर्ता का लाभार्थी से सम्बन्ध : पत्नी
- 5-निवास का पता :
- 6-चिकित्सा प्रतिष्ठान/संस्थान का नाम व पता (जिससे उपचार प्राप्त किया गया हो) : डा० रिषी सेठी ✓
के०जी०एम०यू० लखनऊ ✓
- (निजी हैं अथवा सरकारी) : सरकारी
- 7-बीमारी का नाम : HTM
- 8-उपचार की अवधि : दि० 08-07-2021 से 06-08-2021 ✓
- 9-चिकित्सा पर कुल व्यय धनराशि : मु०रू० 2204.00 ✓
- 10-परीक्षण के उपरान्त भुगतान हेतु संस्तुति धनराशि : मु०रू० 2204.00 (दो हजार दो सौ चार रुपये मात्र)

प्रमाणीकरण

प्रमाणित किया जाता है, कि चिकित्सा अनुभाग-6, उ०प्र० शासन की उ०प्र० सरकारी सेवक (चिकित्सा परिचर्या) नियमावली 2011, अधिसूचना संख्या-2275/पांच-6-11-1082-87 दिनांक 20 सितम्बर, 2011 उ०प्र० सरकारी सेवक (चिकित्सा परिचर्या) प्रथम संशोधन नियमावली, 2014, अधिसूचना संख्या-474/पांच-6-14-1082/87 टी०सी० दिनांक 04 मार्च 2014 एवं उ०प्र० सरकारी सेवक (चिकित्सा परिचर्या) (द्वितीय संशोधन) नियमावली 2016 अधिसूचना संख्या-365/2016/3124/पांच-6-2016-19जी/16 दिनांक 27 दिसम्बर 2016 में निहित प्राविधानों के अन्तर्गत प्रदेश के अन्दर करायी गयी चिकित्सा व्यय प्रतिपूर्ति की संस्तुति के०जी०एम०यू०/एस०जी०पी०जी०आई, लखनऊ की दर पर की जाती हैं। सुसंगत अभिलेख मूल रूप में संलग्न कर प्रेषित हैं।

संलग्नक:-यथोक्त (मूल रूप में)


मुख्य चिकित्सा अधीक्षक,
जिला चिकित्सालय, सीतापुर।
मुख्य चिकित्सा अधीक्षक
जिला चिकित्सालय
सीतापुर

I

APPENDIX VIII
Form of Certificates A

Certificate granted to the Smt. Savita Singh W/o Sri Mitra Pal
Singh, Principal Judge, Family Court, Sitapur.

Certificate 'A'

(To be completed in the case of patient who are not admitted to hospital for treatment)

I Dr. Pravesh Vishwakarma , hereby certify:-

- (a) That I charged/received Rs..... for consultation on (dates to be given) at my consulting room/at the residence for the patient.
- (b) That I charged and received Rs..... for administering..... intra-muscular- injections on.....sub-cutaneous at my consulting room..... the residence of the patient.
- (c) that the injections administered were for immunizing or prophylactic purposes. were not.
- (d) that the patient has under treatment at hospital/my consulting room and the under mentioned medicines prescribed by me in this connection were essential for the recovery/prevention of serious, deterioration in the condition of the patient. The medicines are not stocked in the for the supply to private patients (name of the hospital) and do not include proprietary preparations for which cheaper substances of equal therapeutic value are available nor preparations which are primarily/ foods toilets or

Sl. No.	Voucher No.	Date	Institute/Chemist's Name	Amount
1	27393	8.7.2021	AMA MEDICAL STORE, LUCKNOW	677
2	12555	8.7.2021	OLD LUCKNOW PHARMACY, LUCKNOW	369
3	9537	13.7.2021	LAL PATHLABS, SITAPUR	600
4	13825	14.7.2021	SATYAM DIAGNOSTIC CENTER, SITAPUR	300
5	6481	6.8.2021	SHUKLA MEDICAL STORE, SITAPUR	258
Total				2204

(e) That the patient is/was suffering from and is/ was under my treatment from 08.7.2021 to 6.8.2021

दिनांक 08.07.2021 की सकल धनराशि रु. 2204/-

परीक्षणोपकरण अर्थात् धनराशि रु. 2204/-

शुद्ध देय धनराशि रु. 2204/-

धनराशि शब्दों में रु. Two Thousand Two Hundred and Four only

Dr. P. V.

मुख्य चिकित्सा अधिकारी
जिला चिकित्सालय
सितापुर

Dr. Vish Sethi
Professor
Department of Cardiology
KG's Medical University, Lko.

(f) That the patient is/was not given prenatal or postnatal treatment
(g) that the X-Ray, laboratory test, etc. for which on expenditure of
Rs. was incurred were necessary and were undertaken
on my advice at
.....
.....(Name of hospital or laboratory)

(h) That I referred the patient to Dr.
for specialist consultation and that the necessary approval of the
..... as required under
the rules (Administrative Medical Officer of State.)

(i) that the patient did not required hospitalization
.....required.

Dated.....

Signature & Designation of the
Medical Officer and hospital
dispensary to which attached.
Dr. Rishi Sethi
Professor
K.G.'s Medical University, K.G.

N.B.:- Certificate not applicable should be struck off.
Certificate (a) is compulsory and must be filled in by the Medical
Officer in all cases.

COUNTERSIGNED

Medical Superintendent
.....Hospital

I certify that the patient has been under treatment at the
.....hospital and that
facilities provided were minimum which were essential for the patient's
treatment. *Counter Signed for Rs. 2,204/-*
(Rupees Two thousand two hundred four Only)

Place.....

Date.....

D.N. 27789
02/12/2021

Superintendent
G.M. & Associated Hospital
Medical Superintendent
.....Hospital

DETAIL OF VOUCHERS / EXAMINATION CHART

Name of Patient: Smt. Savita Singh W/o Sri Mitra Pal Singh, Principal Judge, Family Court, Sitapur

Disease- ✓

Name of Institution:- K.G.M.U. LUCKNOW

Period of Treatment:- 8.7.2021 to 6.8.2021

Sl. No.	Voucher No.	Date	Institute/Chemist's Name	Amount	Payable Amount	Non Payable Amount
1	27393	8.7.2021	AMA MEDICAL STORE, LUCKNOW	677		
2	12555	8.7.2021	OLD LUCKNOW PHARMACY, LUCKNOW	369		
3	9537	13.7.2021	LAL PATHLABS, SITAPUR	600		
4	13825	14.7.2021	SATYAM DIAGNOSTIC CENTER, SITAPUR	300		
5	6481	6.8.2021	SHUKLA MEDICAL STORE, SITAPUR	258		
Total				2204		

कि० प्र० पू० की सकल धनराशि रु० 2204/-
परीक्षणोंप्राप्त अदेय धनराशि रु० _____
शुद्ध देय धनराशि रु० 2204/-
धनराशि शब्दों में रु० Two Thousand Two Hundred and Four only

Dr. Rishi Sathi
Professor
Department of Cardiology
K.G. Medical University, Lko

Dr. Rishi Sathi
मुख्य चिकित्सा अधिकारी
जिला चिकित्सालय
सितापुर



KING GEORGE'S MEDICAL UNIVERSITY, U.P., LUCKNOW

Gandhi Memorial & Associated Hospitals

UHD: 20210155155
 DATE: 08-07-2021 08:55:21 AM
 MRS. SAVITA SINGH Age: 53 (Female)
 W.D: NITRA PAL SINGH
 Address: HN-41 CHHAPPUR NAKUR SAHARANPUR, UTTAR PRADESH, INDIA
 Patient Type: NON MLC

Fees: ₹ 50

GENERAL
 TOKEN NO: 2
 Monthly income: 9 to 19999
 CLINIC Unit: Cardiac
 OPD UNIT -1
 Room No. 1,2,3

RE-VISIT

Main OPD, Cardiology
 Dr. Praveesh Vishwakarr
 Main OPD, Cardiology
 Dr. Praveesh Vishwakarr
 Main OPD, Cardiology
 Dr. Praveesh Vishwakarr

BP 185 / 104

P = 100

HTN (25 yrs) uncontrolled.

DOE II.

Creat (u) → 1.22

CBC → WNL

ECG: LVH ±
 Atrial pattern

मुख्य चिकित्सा अधिकारी
 जिला चिकित्सालय
 सीतापुर

2 DECHO today to

① rule out cardiomyopathy,
 See for any coarctation.

② X USG Abdomen for kidney size

③ Urine - R/E

④ Renal Artery Doppler to
 rule out Renal Artery
 Stenosis.

⑤ FT₄, TSH, FT₃.

⑥ Fundus examination.

Regular
 BP check up

Enno today

① Tab Nicardia (R) 20 mg
 TDS

② Tab Amloras 2 mg BD

③ Tab Embeta XR 50 mg 100

④ Tab cloze MD 5 mg 1Hs
 (रात में)

⑤ Tab pantop 40 mg 100 BBF

1 month

Signature

GST INVOICE CASH
AMA MEDICAL STORE
 CHEMIST & DRUGGISTS

G.M. & A. HOSPITAL K.G.M. UNIVERSITY CAMPUS CHOWK, LUCKNOW
 D.L.NO. UP32200000651 UP32210000348 .GSTIN NO-09AAGFA46556E1Z1

Pt. Name: **SAVITA SINGH**
 Dr. Name: K.G.MEDICAL UNIVERSITY LKO

Bill No.: **UP027393**
 Bill Dt.: 06/07/2021
 Time 12:57:04

PARTICULARS	Unit	QTY	Batch No	Expiry	Mrp	SpDis%	RATE	Amount
PANTANAM TAB	1X10	30	AMZTP028	Mar/22	77.00	0.00%	77.00	169.78
NICARDIA RETARD 20 T	1X15	90	AKG20037	Aug/23	53.01	0.00%	53.01	233.77
CLOZE MD .05 TAB(HR)	1X10	30	1029THI	Jan/24	33.20	0.00%	33.20	73.21
MOXDIVAS 0.2 TAB	1X10	10	KMS2004A	Aug/22	79.00	0.00%	79.00	58.06
EMBETA XR-50 TAB	1X30	30	IM21004B4	Nov/23	193.51	0.00%	193.51	142.25

No of Product	S.Tax	Taxable	SGST	CGST	GROSS AMOUNT	DISC	NET	ROUNDING	VALUE
POOJA GUPTA	12%	36.27	36.27	36.27	144.13		36.27		36.27
E.& O.E.									



Verified that the following was/were prescribed in the hospital.
 Physician Incharge
 Deptt. of Cardiology, KGMU, Lko

PAID

Rupees Six Hundred Seventy Seven Only
 Subject to Lucknow Jurisdiction Only.
 Replacement Within 30 Days With Cash Memo Only.
 We do not RETURN Cut/Open Medicines.
 Please Get Verify Medicines From Prescription By Dr. Before Use.
 Software By: RECKON SALES PVT. LTD.

OLD LUCKNOW PHARMACY

MEDICAL COLLEGE CROSSING

LUCKNOW

MOB-9695721135

E-Mail : lucknowpharmacy24x7@gmail.com

Patient Name : SAVITA SINGH

Patient Address :

Dr Name : .K.G.M.U LKO

Dr Reg No.

GSTIN : 09AAGFO7599E1ZO
D.L.No. : UP32200001498,UP32210001495

Invoice No. : 0012555 Date: 08-07-2021

GST TAX INVOICE

SN.	PRODUCT NAME	PACK	HSN	BATCH	EXP.	QTY	MRP	RATE	AMOUNT
1.	MOXOVAS 0.2MG ✓	1X10	3003	KMG21001A	12/22	4:0 ✓	79.00	79.00	316.00
2.	MOXOVAS 0.2MG ✓	1X10	3003	904A	9/21	1:0 ✓	72.00	72.00	72.00

SUB TOTAL 388.00**Terms & Conditions**

Goods once sold will not be taken back after 3 days.
 Bills not paid due date will attract 24% interest.
 All disputes subject to LUCKNOW Jurisdiction only.
 Please get Medicines verify from Prescription Doctor before use.

Remark :
 Rs. Three Hundred Sixty Nine Only ✓

For OLD LUCKNOW PHARMACY

Authorised Signatory

DISCOUNT- 19.40**GRAND TOTAL 369.00**

Verified that the following was / were
 prescribed in the hospital
 Deptt. of Cardiology Physician Incharge
 KGMU, Lko.

Dr Lal PathLabs
 011-3988-5050 (National Customer Care)

VINEET KUMAR MISHRA
 HALWAPUR HOUSE STATION ROAD NEAR CHASKA
 RESTURANT , Sitapur, Sitapur261001 UTP ,IND
 9044589760
Authorised Collection Center

INVOICE CUM CASH RECEIPT
 (PLEASE BRING THIS RECEIPT FOR REPORT COLLECTION)

Patient Name : Mrs. SAVITA SINGH
Age & Sex : 53 Year, F
Ref. Doctor : Dr. KGMU
Contact No : 9458475244

Invoice cum Receipt no : CC9086/0721/009537
Lab No : 305908734
LPL Client Code : CC9086
Date & Time : 13/07/2021 11:56:14 AM
Reporting Location : KRISHNA CARE CENTRE-CC

S.No.	Test Code	Test Name	Estimate of report by #	Amount (Rs.)
1	Z045	THYROID PROFILE, FREE	13/07/2021 04:00 PM	600.00
Miscellaneous Charges				0.00
Amount				600.00

Note :

1. Please check your Name, Tests and contact details. These will be used to send Report related notifications.
2. To download the Reports, please visit www.lalpathlabs.com or Download the App and click on 'VIEW ALL YOUR TEST REPORTS'.
3. Enter Lab No. (as given on receipt) as your Lab/Visit ID' and your surname (as given on receipt) as password. e.g. if your name is RAM KUMAR, then KUMAR is your Password.
4. Partially paid or unpaid reports cannot be accessed on the Website or App.
5. You can now get the Cumulative Report (One Report for all your Values) by downloading the App and creating an account with the same mobile number given at the time of registration. All your previous reports will also be available on the same dashboard. Download the App now from Play Store/ App Store or Give a missed call on 9222002333
6. Services provided hereunder are healthcare services which are exempt from GST under serial no. 74 of notification 12/2017 - Central Tax(Rate).
7. # Reports may be delayed due to unforeseen circumstances; inconvenience regretted.
8. You may experience delay in your report delivery time on account of COVID-19/Coronavirus situation.Regret inconvenience and appreciate your understanding.
9. By accepting this invoice / transacting with the Company, I agree/confirm having understood the Terms and Conditions mentioned in Dr. Lal PathLabs Privacy Policy and Terms of Use (as available on the website).

Verified that the following was / were prescribed in the hospital.

डा० लाल पैथलेब्स कलेक्टरा केंद्र
 कृष्णा केरार रोड
 निकट चस्का रेस्टोरंट हलुवापुर हावरा
 रोडवेज बस अड्डा रोड, सातपुर
 आफिस P007433046, विनीत मिश्रा-9044589760
For VINEET KUMAR MISHRA
 Authorised Signatory
 GSTIN-0907075124

Physician Incharge
 Deptt. of Cardiology, KGMU, Lko.

L30 - KRISHNA CARE CENTRE-CC
 Halwapur House, Bus Stand Chouraha Near
 Chaska Restaurant Sitapur-261001
 Sitapur

Name : Mrs. SAVITA SINGH Collected : 13/7/2021 11:53:00AM
 Lab No. : 305908734 Age: 53 Years Gender: Female Received : 13/7/2021 12:19:06PM
 A/c Status : P Ref By : Dr. KGMU Reported : 13/7/2021 6:58:45PM
 Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE, FREE, SERUM (CLIA)			
T3, Free; FT3	3.41	pg/mL	2.30 - 4.20
T4, Free; FT4	1.10	ng/dL	0.89 - 1.76
TSH, Ultrasensitive	2.773	µIU/mL	0.550 - 4.780

Note

1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.

2. TSH Values <0.03 µIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals

Reference Ranges for pregnancy

PREGNANCY	REFERENCE RANGE for TSH in µIU/mL (As per American Thyroid Association)	REFERENCE RANGE for FT3 in pg/mL	REFERENCE RANGE for FT4 in ng/dL
1st Trimester	0.100 - 2.500	2.11-3.83	0.70 -2.00
2st Trimester	0.200 - 3.000	1.96-3.38	0.50 -1.60
3st Trimester	0.300 - 3.000	1.96-3.38	0.50 -1.60

Jai Ram

Pragati Agnihotri

Dr Jai Ram Prasad Kushwaha
 Ph.D, Biochemistry
 Consultant Biochemist
 Dr Lal PathLabs Ltd

Dr Pragati Agnihotri
 MD, Pathology
 Chief of Laboratory
 Dr Lal PathLabs Ltd

-----End of report-----



L30 - KRISHNA CARE CENTRE-CC
Halwapur House, Bus Stand Chouraha Near
Chaska Restaurant Sitapur-261001
Sitapur

Name	: Mrs. SAVITA SINGH	Collected	: 13/7/2021 11:53:00AM		
Lab No.	: 305908734	Age: 53 Years	Gender: Female	Received	: 13/7/2021 12:19:06PM
A/c Status	: P	Ref By: Dr. KGMU	Reported	: 13/7/2021 6:58:45PM	
			Report Status	: Final	

Test Name	Results	Units	Bio. Ref. Interval
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IMPORTANT INSTRUCTIONS

*Test results released pertain to the specimen submitted.*All test results are dependent on the quality of the sample received by the Laboratory.
*Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician.*Sample repeats are accepted on request of Referring Physician within 7 days post reporting.*Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted.*Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting.*Test results may show interlaboratory variations.*The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s).*Test results are not valid for medico legal purposes. *Contact customer care Tel No. +91-11-39885050 for all queries related to test results.
(#) Sample drawn from outside source.





जिला चि सीतापुर (उ०प्र०)

Container - 411225
DH-177438 / 180106
53 Y F : Shavita Singh / 13 Jul 10:16
URM

177433

रुपया
1
RUPEE

वैधता की अवधि 15 दिन

ओ.पी.डी. संख्या		आयुष्मान लाभार्थी हैं <input type="checkbox"/> नहीं <input type="checkbox"/>	कार्ड संख्या
कक्ष संख्या	रोगी का नाम	अश्विनी सिंह	
श्रेणी	वर्ग	लिंग	अनुमोदित आयु
निदान			दिनांक

Rx	विवरण/जाँच/उपचार
	<p>12 JUL 2014</p> <p>Usc. Abdomen</p> <p>Urine R/m.</p> <p>1. आपका अपना शौचालय है या नहीं।</p> <p>2. अपने निजी व्यक्तिगत शौचालय का निर्माण कराकर उसका उपयोग करें।</p>

नोट-कुत्ता काटे का इन्जेक्शन प्रत्येक सामुदायिक स्वास्थ्य केन्द्र पर उपलब्ध है। अतः अपने निकटतम सामुदायिक स्वास्थ्य केन्द्र पर ही कुत्ता काटे का इन्जेक्शन लगवायें।

Toll Free No. : 1800-180-5145

- ईकोकार्डियोग्राफी तथा रक्तकोष में रक्त की सुविधा उपलब्ध है।
- एक्स-रे/अल्ट्रासाउण्ड व पैथॉलोजी की जाँच का समय प्रातः 8.00 बजे से 11.00 बजे तक एवं एक्स-रे 8.00 बजे से 1.00 बजे तक।
- क्षय एवं कुष्ठ रोगियों के लिए निःशुल्क सुविधाएं उपलब्ध है एवं कटरेक्ट का निःशुल्क आपरेशन।
- चिकित्सालय में धूम्रपान करना एवं पान व पान मसाला खाकर प्रवेश करना वर्जित है। पकड़े जाने पर 200/- जुर्माना देना होगा।
- सार्वजनिक/राजकीय अवकाश एवं हर माह के द्वितीय शनिवार को ओपीडी का पर्चा 11 बजे तक ही बनाया जायेगा।
- 24 घंटे आकस्मिक एम्बुलेंस सेवा उपलब्ध है।
- राष्ट्रीय स्वास्थ्य बीमा योजना की सेवायें उपलब्ध है। बीपीएल0 कार्ड धारक एवं निर्धन मरीजों का मुफ्त उपचार।

चिकित्सालय आपका है इसे स्वच्छ रखने में सहयोग प्रदान करें। छोटा परिवार सुखी परिवार

U.P.G.S.S.

DISTRICT HOSPITAL

SITAPUR, (UTTAR PRADESH)
DEPARTMENT OF PATHOLOGY
"AN ISO 9001:2015 CERTIFIED LABORATORY"

Date : 13-Jul-2021 Reg/Ref: DH-177438 / 180106 Collected At : DCH
Name : MRS. SHAVITA SINGH Age/Sex : 53 Yrs./Female
Ref.By : Dr. SELF Ward : OPD
Receipt : NA
Requested Test : URM
Coll Time : 13-Jul-2021 10:16 AM Validate : 13-Jul-2021 11:27 AM Prn. Time: 13-Jul-2021 11:27 AM

URINE EXAMINATION ROUTINE

PHYSICAL EXAMINATION

Colour	Yellow
Appearance	Pale Yellow
Specific Gravity	1.015
pH	6:0
Proteins	Negative
Glucose	Nil
Ketones	Nil
Nitrate	Nil
Bilirubin	Nil
Urobilinogen	Normal
Leucocyte Esterase	Nil

MICROSCOPIC EXAMINATION

R.B.C.	Nil	
Pus Cells	1-2	/HPF
Epithelial Cells	1-2	/HPF
Casts	Nil	
Crystals	Nil	
Other Observations	Nil	

----- End of report -----

Checked By :-
Technician
Marked in NABL scope

PATHOLOGIST

Page 1 of 1

Note- this is report to help clinician for better patient management. This is not valid for medical legal purpose.
Discrepancies due to technical or typing should be reported with in three days for correction. No compensation liability stand.

mindray

DISTRICT HOSPITAL

13-07-2021 12:01:15

DC-N3

3C5A AP 97% MI 0.7 TS 0.1

3C5A AP 97% MI 0.7 TS 0.1

Adult ABD

D

I 10.0M

D 22.2

G 37

IH 18

DR 110

iClear 7

iBeam

0

10

20

M

0

10

3 Spleen 11.76 cm

Power 30dB 30dB 30dB

mindray

DISTRICT HOSPITAL

13-07-2021 11:59:05

DC-N3

3C5A AP 97% MI 0.7 TS 0.1

3C5A AP 97% MI 0.7 TS 0.1

Adult ABD

D

I 10.0M

D 22.2

G 37

IH 18

DR 110

iClear 7

iBeam

0

10

20

Kidney

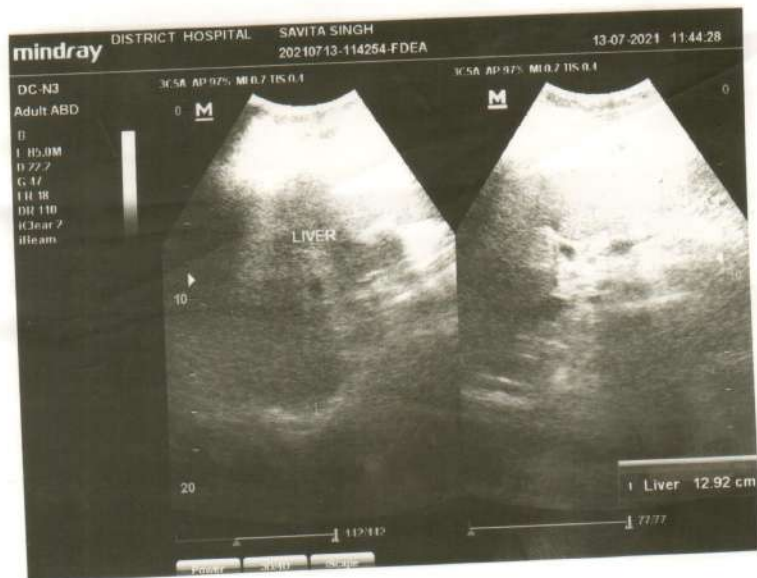
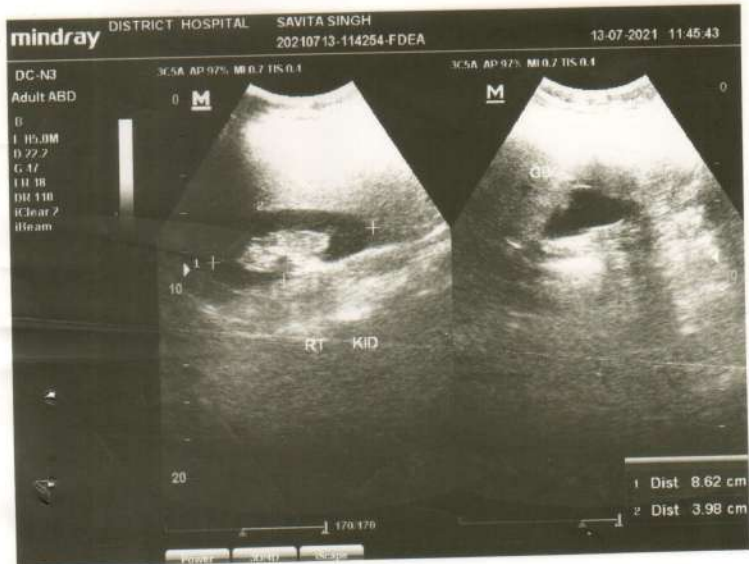
M

0

10

1 Rt Renal L 9.62 cm
2 Rt Renal H 4.65 cm
3 Spleen 11.76 cm

Power 30dB 30dB 30dB



Department of Cardiology

KING GEORGE'S MEDICAL UNIVERSITY, LUCKNOW
2D-ECHOCARDIOGRAPHY & DOPPLER STUDY REPORT

S. No. _____

Patient Name Sarita Singh Age/Sex 53/m Date 8/7/21

Consultant Incharge Prof. R. Sethi (cm, FRC)

Resident Performing Echo Dr. Amind MD

2D-Echo & M-mode :

Mitral Value : Normal Annulus
 AML PML EF slope(mm/sec) DE(cm) EPSS(cm)
 Commisures Thickness Mobility Calcium Subvalvular
 Wilkin's score PHT Gradient(peak/mean) (mmHg)
 Area(PHT) (Perimetry) (cm²) PG/MG

Tricuspid value: Normal

Aortic value: Annulus
 Morphology Aortic Root (cm) 2.6 Opening(cm) 1.8 Asc Aorta (cm)

Pulmonary value: Normal Annulus
 Left Atrium(cm) LA Volume Index LA/AO ratio Right Atrium (cm)

Right Ventricle Normal D3= (length)=
 Wall thickness(cm) Basal(cm)D1 Mid RV(cm)D2 RVOT PSAX(cm)

RVOT PLAX (cm) Fractional Area Change(%) TAPSE
 Any chamber mass(clot/myxoma/other) S' (DVI)

IVC diameter (cm) 1.6 Inspiratory collapse 75% collapsible

Interatrial Septum: Intact

Interventricular Septum: Intact

Pericardium:

Thickness(cm) Effusion RAVRV collapse

LV STUDY

IVS (d) 1.2 IVS (s) 1.5 LVPW (d) LVPW (S) (cm)

LVID (d) LVID (s) 1.2 (cm)

EDV(ml) 3.8 2.4 SF% 34% EF% 66%
50 24

SEGMENTAL WALL MOTION ABNORMALITIES: NO

Any other abnormality:

Doppler and color flow imaging

Mitral Study

E(m/s) **0.50** A(m/s) **0.69** IVRT(sec) E/A **0.73** % of Resp variation
 DT(m/s) E'(m/s) **2.06** A' (m/s) E/E' **12.16** LVDD grade
 Regurgitation % of LA area Vena contracta(cm)
 PISA(2Ar2) ERO(cm2) RF (%) Regurgitant volume (ml)

{RF=PISAxAliasing velocity, ERO=RF ÷ Peak MR velocity, Regurgitant vol = EOAxMR VTI}

Aortic study

Peak velocity (m/s) **1.31** Aortic VTI Peak/Mean Gradient (mmHg)
 AT (msec) Regurgitation % of LVOT Extent
 PHT (msec) Slope(msec) vena contracta(cm)
 PISA (2Ar2) ERO(cm2) Regurgitant volume(ml) RF(%)
Pulmonary Study: Normal MPA RPA LPA
 Peak velocity (m/s) Peak/Mean Gradient (mmHg) AT (msec)
 Regurgitation Peak PR velocity (m/s) PREDG
 Peak PR gradient (mmHg) Predicted mean PA Pressure(mmHg) PREDV

Tricuspid Study:

E(m/s) A(m/s) E/A ratio % of respiratory variation E'(m/s)
 Regurgitation **mild TR** % of RA area Peak TR Velocity (m/s) **2.1**
 Peak TR gradient Predicted RAP RVSP/PASP (mmHg)

Pulmonary venous flow

Hepatic venous flow

Any other findings

Summary of findings & final diagnosis:

NO RWMA
 LVDD 3.8cm
 EF = 66%
 Conc LVH
 Grade I LVDD (E/A 0.73)
 mild TR (2.1 m/sec)
 NO MR / NO AR
 NO clot / reg / PE
 IAS / IVS intact.

Amind
 Resident

Consultant

08-07-2021 12:07:46 PM

REF: 2104772-801

Location:
Order Number:
Medication:
Medication:
Medication:

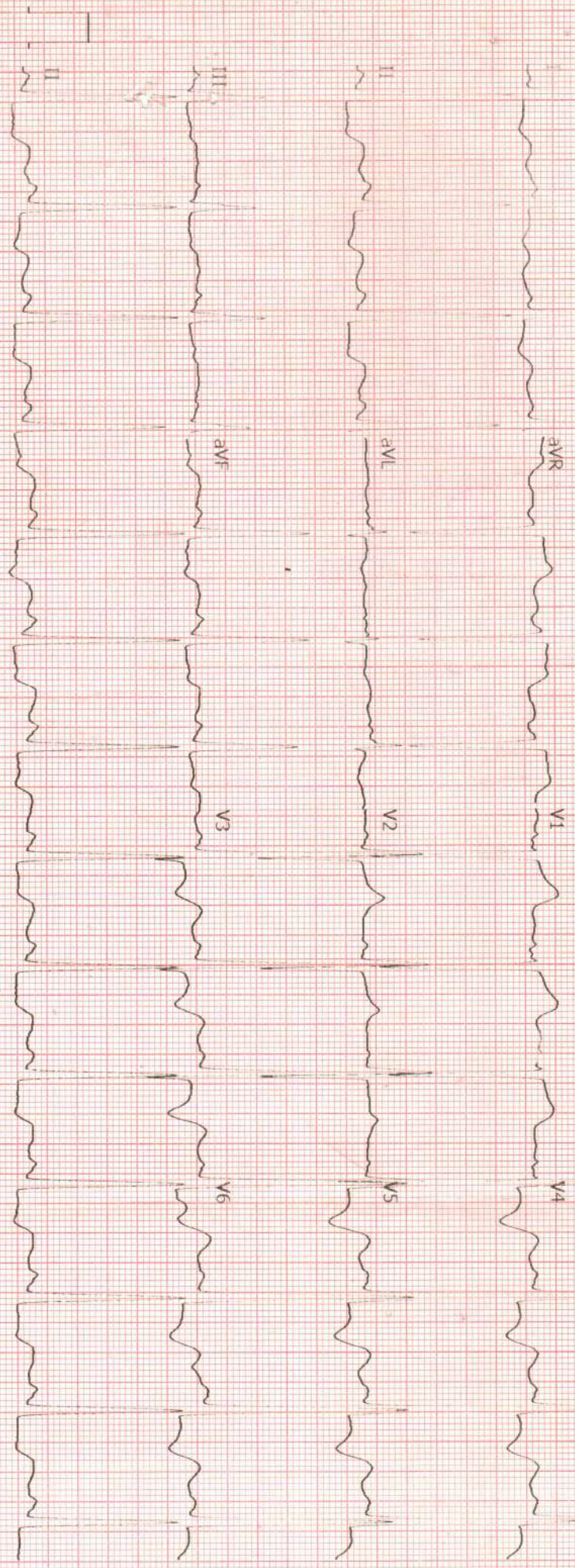
167 / 83

Savita Singh

82

PRORS/T 68 / 55 / 107 deg/deg
 PR 160 ms
 P 102 ms
 P-R-T 734 / 732 ms
 QRS 420 / 560 ms
 ST 1.24 ms
 T 1.02 ms

Normal sinus rhythm
 Left ventricular hypertrophy with repolarization abnormality
 Prolonged QT
 Abnormal ECG



GE MAC2000 1.1 12S1™ V241

25 mm/s 10 mm/mV

ADS 0.56-20 Hz 7.5 Hz

VIJAYAM DIAGNOSTIC CENTRE

310/A, Buttsganj, Near Kainchi Pul, G.T. Road - Sitapur

Mob.: 8009112938, 8738954410, Ph: 05862-270131

Date: 20/11/21

13825

Name Shri/Smt. Ku. Savita Singh

5371B

f. By Dr. self

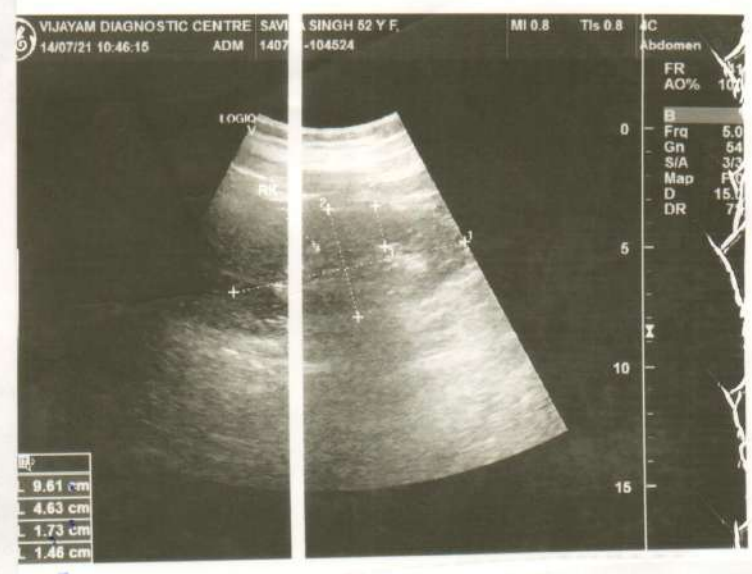
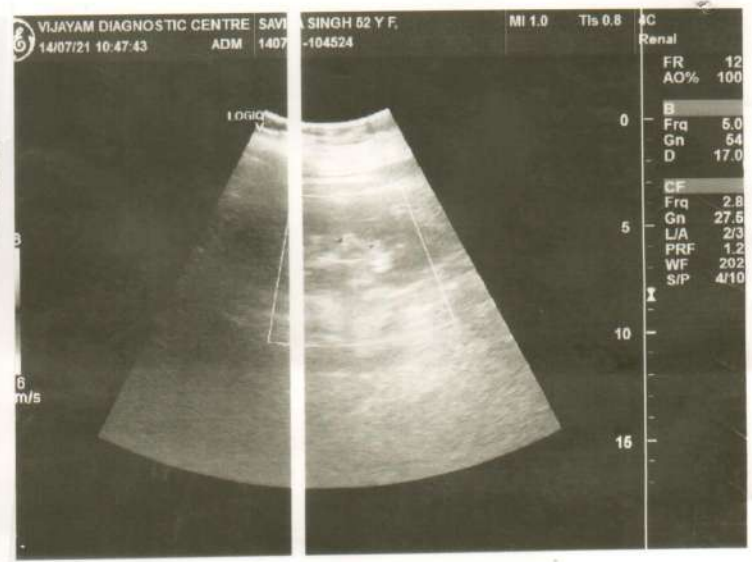
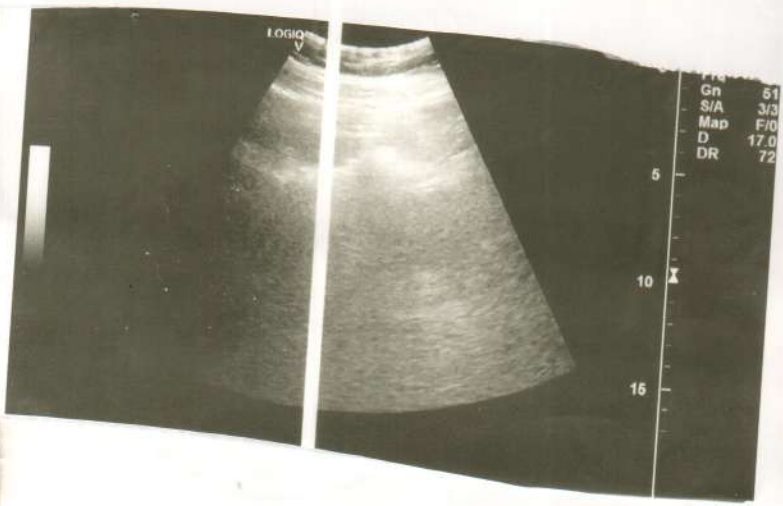
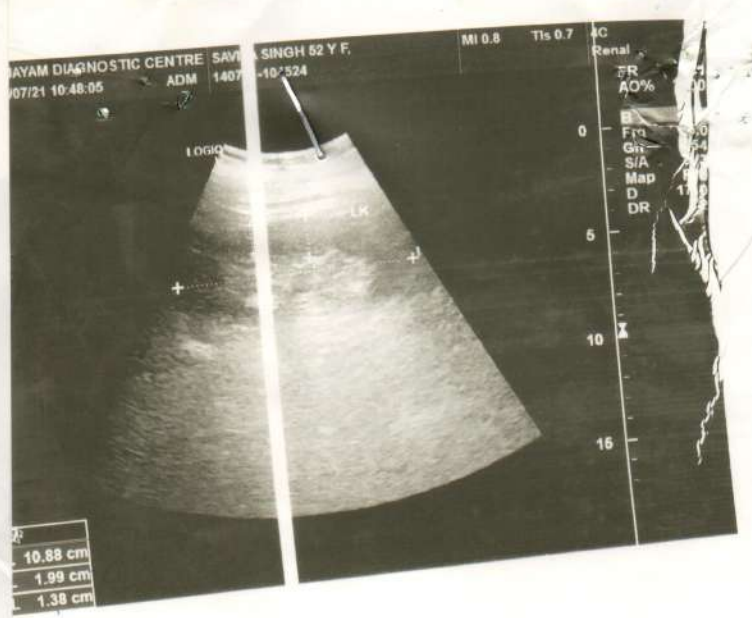
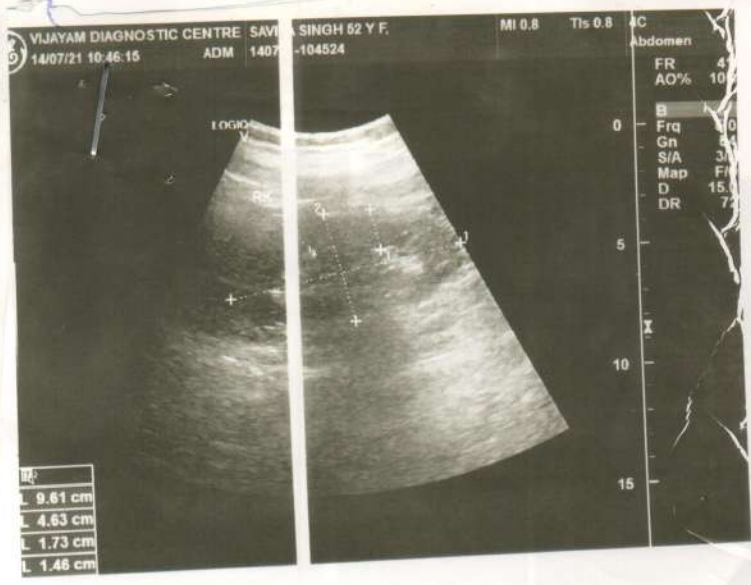
Investigation. U/S K.U.B. - 200

and Rs. 300

Verified that the following was/were prescribed in the hospital.

Physician Incharge
Deptt. of Cardiology, KEMU, Lko.

Signature



VIJAYAM DIAGNOSTIC CENTRE

485, Buttsganj, Near Kainchi Pul, G.T. Road- Sitapur

Mob.: 8009112938, 8738954410

Patient's Name : Mrs. SAVITA SINGH

Age : 53Yrs \ F

Referred By : Dr. SELF

Srl No. : 280140702021

Specimen : USG KUB ABDOMEN (TAS)

Date : 14/07/2021

USG KUB ABDOMEN (TAS)

Right Kidney : is normal in size (96 x 46 mm parenchyma thickness 20 mm and cortical thickness 14 mm), shape, position & echotexture. Pelvicalyceal systems are not dilated. Ureter could not be seen.

Left Kidney : is normal in size (approx 109 x 46 mm parenchyma thickness 17 mm and cortical thickness 15 mm), shape, position & echotexture. Pelvicalyceal systems are not dilated. Ureter could not be seen.

Urinary Bladder : is empty.

Uterus –and **Ovaries** – obscured.

No significant free fluid detected in peritoneal cavity.

Conclusion:-

- No significant abnormality detected.

Adv. 3D / 4D CT Renal angiography if strong suspicion

Please correlate clinically and with other investigations

Thanks for referral

Dr. VIJAY KUMAR SINGH
M.D. RADIODIAGNOSIS
CONSULTANT RADIOLOGIST