

प्रेषक,

मित्र पाल सिंह
प्रधान न्यायाधीश
परिवार न्यायालय
सीतापुर।

सेवा में,

सहायक निबन्धक (प्रशासन A-1)
माननीय उच्च न्यायालय
इलाहाबाद।

पत्रांक: 06 /2023

दिनांक: 07-01-2023

विषय- कालबाधित चिकित्सीय प्रतिपूर्ति दावे के सम्बन्ध में।

महोदय,

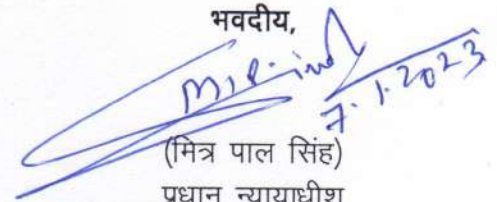
उपरोक्त विषयक माननीय न्यायालय के पत्रांक 16333/IV-2706/Admin-A-1 Sec. Dated 20-12-2022 के सन्दर्भ में माननीय न्यायालय से निवेदन करना है कि मैंने स्वयं का चिकित्सीय प्रतिपूर्ति दावा मु0 4,501/- माननीय न्यायालय को इस कार्यालय के पत्रांक 236/2022 दिनांकित 30.09.2022 के द्वारा प्रेषित किया था। उक्त दावा निर्धारित समय-सीमा समाप्त हो जाने के पश्चात अर्थात् विलम्ब से प्रस्तुत किया गया था। विलम्ब से प्रस्तुत किये जाने के सम्बन्ध में विलम्ब के कारणों का उल्लेख करते हुए पत्रांक 237/2022 दिनांकित 30.09.2022 भी उक्त दावे के साथ संलग्न कर माननीय न्यायालय को प्रेषित किया गया था जिसका अवलोकन सम्भवतः माननीय न्यायालय द्वारा नहीं किया जा सका है जिसको पुनः इस पत्र के साथ संलग्न कर संलग्नक-1A के रूप में प्रेषित किया जा रहा है।

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 में।

(कुल 28 वर्क)

भवदीय,


7.1.2023

(मित्र पाल सिंह)
प्रधान न्यायाधीश
परिवार न्यायालय
सीतापुर।

Registered Post

From,

Arvind Kr. Srivastava,
Asst. Registrar(Admin. A-1),
High Court of Judicature at,
Ailahabad.

To,

Sri Mittar Pal Singh,
Principal Judge, Family Court,
Sitapur.

No. 16333 /IV-2706/ Admin-A-1 Sec.

Dated: 20th Dec., 2022.

Subject: Regarding your medical reimbursement claim, amounting to Rs.4,501/- after its technical examination, incurred over your indoor treatment for DM/H-TN/Hemorrhoids from 04.04.2022 to 05.04.2022 at K.G.M.U., Lucknow.

Sir,

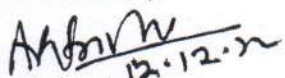
With reference to your letter no. 236/2022 Dated: 30.09.2022, on the aforesaid subject, I am directed to return your above-captioned medical reimbursement claim along-with all its original papers and to say that the said claim has been submitted to this Hon'ble High Court, after lapse of three months from the end date of treatment, i.e. 05.04.2022, vide your letter dated 30.09.2022, therefore it has become time-barred in non-compliance of Rule 16, which states that:-

"The beneficiary shall submit the reimbursement claim in prescribed proforma as given in Appendix "C" to the sanctioning authority as soon as possible but not later than three months after the completion of the treatment..."

I, therefore, request you to kindly submit an application for condonation of delay in submission of the said claim, mentioning therein the reasons and circumstances along-with the said medical reimbursement claim to this Hon'ble Court, so that further necessary action can be taken in the instant matter.

Enclosures: As above

Yours faithfully,


Asst. Registrar,
Admin. A-1
07/12/22

प्रेषक,

मित्र पाल सिंह
प्रधान न्यायाधीश
परिवार न्यायालय
सीतापुर।

सेवा में,

महानिबन्धक
माननीय उच्च न्यायालय
इलाहाबाद।

पत्रांक: 237 / 2022

दिनांक: 30.09.2022

विषय- कालबाधित चिकित्सीय प्रतिपूर्ति दावे के सम्बन्ध में।

महोदय,

उपरोक्त विषयक के सन्दर्भ में माननीय न्यायालय से निवेदन करना है कि मैंने स्वयं का इलाज किंग जार्ज मेडिकल कालेज, लखनऊ में दिनांक 04.04.2022 से 05.04.2022 तक कराया था जिससे सम्बन्धित चिकित्सीय प्रतिपूर्ति दावा मु० 4,501/- मेरे द्वारा मुख्य चिकित्सा अधीक्षक, राजकीय चिकित्सालय, सीतापुर से प्रतिहस्ताक्षरित कराकर माननीय न्यायालय को मूल रूप से प्रेषित किया जा रहा है।

उक्त के सम्बन्ध में माननीय न्यायालय को अवगत कराना है कि मेरा उक्त चिकित्सीय प्रतिपूर्ति दावा निर्धारित समयसीमा अर्थात् 03 माह के पश्चात् प्रस्तुत किया जा रहा है क्योंकि चिकित्सको के व्यस्त रहने व उपलब्ध न हो पाने के कारण दावे से सम्बन्धित प्रपत्रों को सत्यापित कराने में काफी समय लग गया जिस कारण चिकित्सीय प्रतिपूर्ति दावा माननीय न्यायालय को प्रेषित करने में विलम्ब हो गया है।

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,

M.P. Singh
30.9.2022
(मित्र पाल सिंह)
प्रधान न्यायाधीश
परिवार न्यायालय
सीतापुर।

HIGH COURT OF JUDICATURE AT ALLAHABAD

Registered

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. 236/2022

Dated: 30.09.2022

Subject: Reimbursement of expenditure done on medical treatment
Amounting to Rs. 4501/-

Sir,

1. Mitra Pal Singh took treatment of Self at K.G.M.U.Lucknow for
DM/HTN/Hemorrhoids from 04.04.2022 to 05.04.2022

I am resubmitting 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. (N/A)

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. 30.9.2022.

M.P. Singh
30.9.2022
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 (no. 9)
5. Original Slip of K.G.M.U. Lucknow

प्रेषक,

मुख्य चिकित्सा अधीक्षक,
जिला चिकित्सालय सीतापुर।

सेवा में,

मा० मित्र पाल सिंह
प्रधान न्यायाधीश
परिवार न्यायालय, सीतापुर।

पत्रांक:-जि०चि०/चिकित्सा प्रतिपूर्ति/2022-23/ 2586

दिनांक:- 30/9/22

विषय:-मा० मित्र पाल, प्रधान न्यायाधीश, परिवार न्यायालय, सीतापुर के स्वयं के उपचार पर व्यय हुयी धनराशि की चिकित्सा प्रतिपूर्ति के सम्बन्ध में।

महोदय,

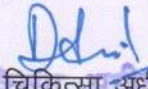
उपर्युक्त विषयक आपके पत्र सं०-230/2022 दिनांक 28.09.2022 के क्रम में शासनादेश संख्या-56/2019/578-पांच-6-2019-04 (जी०)/2019 दिनांक 07 मार्च 2019 के क्रम में चिकित्सा प्रतिपूर्ति दावे का परीक्षण किया गया।

- 1-लाभार्थी का नाम/पदनाम : मा० मित्र पाल सिंह, प्रधान न्यायाधीश, परिवार न्यायालय, सीतापुर
- 2-लाभार्थी के पिता /पति का नाम :
- 3-उपचार प्राप्तकर्ता का नाम/पिता/पति का नाम : मा० मित्र पाल सिंह, प्रधान न्यायाधीश, परिवार न्यायालय, सीतापुर
- 4-उपचार प्राप्तकर्ता का लाभार्थी से सम्बन्ध : स्वयं
- 5-निवास का पता : परिवार न्यायालय, सीतापुर।
- 6-चिकित्सा प्रतिष्ठान/संस्थान का नाम व पता (जिसमें उपचार प्राप्त किया गया हो) : डा० प्र० अरशद अहमद
(निजी हैं अथवा सरकारी) : के०जी०एम०यू० लखनऊ।
- 7-बीमारी का नाम : Dr. H.T.M. Haemorrhoids
- 8-उपचार की अवधि : 04.04.2022 से 05.04.2022 तक
- 9-चिकित्सा पर कुल व्यय धनराशि : मु०रू०-4501.00
- 10-परीक्षण के उपरान्त भुगतान हेतु संस्तुति धनराशि : मु०रू०-4501.00 (चार हजार पांच सौ एक 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-6-2016-19 जी/16 दिनांक 27 दिसम्बर 2016 में निहित प्राविधानों के अन्तर्गत प्रदेश के अन्दर अन्दर करायी गयी चिकित्सा व्यय प्रतिपूर्ति की संस्तुति के०जी०एम०यू०/एस०जी०पी०जी०आई, लखनऊ क दर पर की जाती है। सुसंगत अभिलेख मूल रूप में सलंगन की प्रेषित है।

संलग्नक:- (यथोक्त मूल रूप में)


मुख्य चिकित्सा अधीक्षक,
जिला चिकित्सालय सीतापुर।

Certificate 'B'

(To be completed in the case of patients who are admitted in hospital treatment)

Certificate granted to the Sri Mitra Pal Singh, Principal Judge, Family Court, Sitapur.

Part 'A'

(To be signed by the Medical Officer in charge of the case at the hospital)

1. Dr. Prof. Arshad Ahmad hereby certify

(a) That the patient was admitted to hospital on my advice of.....

(Name of Medical Officer)

(b) That the patient has been under treatment at and that the under mentioned medicines prescribed by me in this connection were essential for the recovery/prevention of serious deterioration in condition of the patient.

2. The medicines are not stocked in the for supply to private patients and do not include proprietary preparations for which cheaper substances of equal therapeutic value are available not preparations which are primarily foods, toilets.

| Sl. No. | Voucher No. | Date | Institute/ Chemist's Name | Amount | Payable Amount | Non Payable Amount |
|---------|-------------|----------|---------------------------|-------------|----------------|--------------------|
| 1 | 11682 | 04.04.22 | K.G.M.U. LUCKNOW | 250 | | |
| 2 | 11791 | 04.04.22 | K.G.M.U. LUCKNOW | 1200 | | |
| 3 | 601 | 04.04.22 | Old Lucknow Pharmacy | 140 | | |
| 4 | 7037 | 04.04.22 | LAL PATHLABS, SITAPUR | 400 | | |
| 5 | 584 | 04.04.22 | Old Lucknow Pharmacy | 885 | | |
| 6 | 14778 | 05.04.22 | K.G.M.U. LUCKNOW | 80 | | |
| 7 | 673 | 05.04.22 | Old Lucknow Pharmacy | 546 | | |
| 8 | 15306 | 05.04.22 | K.G.M.U. LUCKNOW | 1000 | | |
| 9 | | | Total | 4501 | | |

(Four thousand five hundred one)

निवेदन - शब्दों में धनराशि रु. 4501
परोक्षाणाप्रान्त अदेय धनराशि रु.
गुद्ध देय धनराशि रु. 4501
धनराशि शब्दों में रु.
चार हजार पांच सौ एका

मुख्य चिकित्सा अधिकारी
जिला चिकित्सा
सीतापुर

Professor
Department of Surgery (Gen.)
K.G.'s Medical University U.P. Lucknow

(c) That the injections administered were/were not for immunizing of prophylactic purpose.

(d) That the patient is/was suffering from and is/was under my treatment from **04.04.2022 to 05.04.2022**

(e) That the X-Ray, Laboratory etc. for which an expenditure of Rs..... was incurred were necessary and were undertaken on my advise at

(Name of Hospital or Laboratory)

(f) That referred the patient to Dr. for specialist consultation and that the necessary approval of the

(Name of the Chief Administrative Medical Officer of the State) as required under the rules was obtained.

Signature and Designation of the Medical Officer in charge of the case at the hospital

Professor
Department of Surgery (Gen.)
K.G.'s Medical University Lucknow

Part 'B'

I certify that the patient has been under treatment at the hospital and that the services of the special nurses, for which an expenditure of Rs. was incurred vide bills and receipts attached, were essential for the recovery/prevention of serious deterioration in the condition of the patient.

Signature and Designation of the Medical Officer in charge of the case at the hospital

Professor
Department of Surgery (Gen.)
K.G.'s Medical University U.P., Lucknow

DIN-22457
16-9-22

COUNTERSIGNED

I certify that the patient has been under treatment at the Hospital and that the facilities provided were the minimum which were essential for the patient's treatment.

Counter Signed for Rs. 4501/-
(Rupees Four thousand Five hundred one only)

..... Medical Superintendent
..... Hospital

Superintendent
GM & Associated Hospital
Lucknow

DETAIL OF VOUCHERS / EXAMINATION CHART

Name of Patient: Sri Mitra Pal Singh, Principal Judge, Family Court, Sitapur

Disease- ✓

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

Period of Treatment:- 04.04.2022 to 05.04.2022

| Sl. No. | Voucher No. | Date | Institute/ Chemist's Name | Amount | Payable Amount | Non Payable Amount |
|---------|-------------|----------|------------------------------|-------------|-------------------|-----------------------|
| 1 | 11682 | 04.04.22 | K.G.M.U. LUCKNOW | 250 | ✓ | |
| 2 | 11791 | 04.04.22 | K.G.M.U. LUCKNOW | 1200 | ✓ | |
| 3 | 601 | 04.04.22 | Old Lucknow Pharmacy | 140 | ✓ | |
| 4 | 7037 | 04.04.22 | LAL PATHLABS, SITAPUR | 400 | ✓ | |
| 5 | 584 | 04.04.22 | Old Lucknow Pharmacy | 885 | ✓ | |
| 6 | 14778 | 05.04.22 | K.G.M.U. LUCKNOW | 80 | ✓ | |
| 7 | 673 | 05.04.22 | Old Lucknow Pharmacy | 546 | ✓ | |
| 8 | 15306 | 05.04.22 | K.G.M.U. LUCKNOW | 1000 | ✓ | |
| 9 | | | Total | 4501 | ✓ | |

four Thousand five hundred one Rupees

चि0प्र0पू0 की सकल धनराशि रू0...4501...
 परीक्षाणोप्रान्त अदेय धनराशि रू0...
 शुद्ध देय धनराशि रू0...4501...
 धनराशि शब्दों में रू0...चार हजार पांच सौ एक रुपया

मुख्य चिकित्सा अधीक्षक
 जिला चिकित्सालय
 सीतापुर

DISCHARGE SUMMARY

UHID : 20220108350
Patient Name: Mr MITRA PAL SINGH Department: Surgery General
Age / Sex: 55 Years 0 Months / 14 Days 0 Hours / Male Unit: Unit -7
S/O : baburam Ward: SURGERY (GENERAL) SURGICAL WARD 8
Billing Type : Private MLC Patient: NO
IPD Admission ID 202228764 Discharge Type: Normal Discharge
Treating Doctor: Dr. Arshad Ahmad, Bed No: 11
Mobile No: *****268
Date of Admission: 04/04/2022 11:29:45 AM
Operation Date: 05/04/2022
Discharge Date: 11:15:00 AM
Address : SAHARAN PUR, UTTAR PRADESH, PIN:247342, INDIA
Surgeon : Asst.Surgebn
Procedure : Operative Findings :
Consulting Doctor : Dr. Arshad Ahmad

Drug Allergy :-
NONE

Diagnosis : GRADE II/III HEMORRHOIDS IN A KNOWN CASE OF DIABETES AND HYPERTENSION WITH BENIGN PROSTATIC HYPERPLASIA
ICD Code: BLEEDING PER RECTUM ON & OFF FOR 1 MONTH. MILD PAIN ON PASSING STOOLS FOR 1 MONTH. KNOWN CASE OF DIABETES & HYPERTENSION FOR 12 YEARS. PAST HISTORY OF BPH FOR 4 YEARS, ON MEDICATIONS.
Admitted For: General Exam :- GC - FAIR, BP - 112/76MMHG, PR-116/M, RR - 18/M, SPO2 - 97% @ RA.
Physical Findings: THE PATIENT IS DISCHARGED WITH FULLY STABLE VITALS WITH FULLY ORALLY ALLOWED.
Condition During Discharge : THE PATIENT IS DISCHARGED WITH FULLY STABLE VITALS WITH FULLY ORALLY ALLOWED.

Brief Summary of the Case: THE PATIENT IS A CASE OF GRADE II/III HEMORRHOIDS IN A KNOWN CASE OF DIABETES AND HYPERTENSION WITH BENIGN PROSTATIC HYPERPLASIA , FOR WHICH NON-OPERATIVE MANAGEMENT IS BEING DONE. HE WAS PLANNED FOR SURGERY ON OUR SIDE AND WAS POSTED FOR SURGERY ON 05/04/22. HOWEVER, IN VIEW OF DERRANGED HBA1C LEVEL OF 8.6%, HE WAS RENDERED UNFIT BY ANAESTHESIA TEAM. HE HAS BEEN ADVISED TO REVIEW WITH PHYSICIAN FOR OPTIMISATION OF BLOOD SUGAR LEVELS AND TO FOLLOW UP IN GENERAL SURGERY DEPARTMENT AFTER 2 WEEKS. NOW, PATIENT IS DISCHARGED WITH FULLY STABLE VITALS WITH FULLY ORALLY ALLOWED.

| Category | Test Name | Observation |
|----------|---|-------------|
| Note : | A/C - 13.3/8300/1.5 LACS PT/INR - 11.6/0.84 KFT - 14.06/0.72 LFT - 0.43/0.23/31.3/23.7/140 HBA1C - 8.6% BLOOD SUGAR - 82.65[FASTING] & 162.47[POST-PRANDIAL] S/E - 126.6/4.35/4.72 VM -NR | 0 |
| 0 | 0 | |

Treatment Given : NON-OPERATIVE MANAGEMENT

Note : RX.
TAB DAFLON 1000MG BD FOR 10 DAYS.
TAB DAFLON 1000MG OD FOR 20 DAYS.
TAB CHYMORAL FORTE 1 TAB QD. x 10 days
SYP. CREMAFFIN PLUS 30ML HS.
TAB TRENEXA 500MG BD FOR 5 DAYS, THEN SOS.
CONTINUE MEDICATION FOR HYPERTENSION AS ADVISED BY PHYSICIAN.
CONTINUE MEDICATION FOR DIABETES MELLITUS AS ADVISED BY PHYSICIAN.
Advice on Discharge: MAINTAIN PERSONAL HYGIENE.
QID SUGAR AND BP CHARTING.
MAINTAIN HEALTHY FOOD HABIT.
REVIEW WITH PHYSICIAN FOR OPTIMISATION OF BLOOD SUGAR LEVELS
REVIEW IN GENERAL SURGERY OPD AFTER 2 WEEKS OR IN EMERGENCY SOS.

To come For follow up in Routine OPD on & Time
In specialist Clinics on & Time
Senior Resident

Signature Treating Doctor
Dr. Arshad Ahmad
05/04/2022 11:15:00 AM
Date & Time

4470

7



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

Gandhi Memorial & Associated Hospitals



①

605550 PD

UHTD: 20220108350 (S.NO.: 37)
MITRA PAL SINGH / M / 55Y
Surgery General/UNIT -2/101,102,103,105,116

106144

मंगलवार प्रो० अवनीश कुमार
(यूनिट-VII)

मंगलवार प्रो० एच० एस० पाहवा
(यूनिट-III) डा० अजय कुमार पाल
डा० मनोष कुमार आशुतोष

in medicals (2 years) (T2DM) episodes - 2 months back
 K/C/O T2DM HTN → 2 months ago → Bleeding P/R → 15 days back
 HTN → Mild pain, fresh bleeding (+)
 Constipation (+) off from HTN
 Urinary complaints P/R → Internal hemorrhoids (Grade 2), No active bleed at present
 106. ←

In Medication from our side -
 (4 years) - Tab. afox 02 x Has x Bs
 - Tab. Difen syp. x 2 tsf x 4 ps
 - Continue Medication for Diabetes mellitus
 - Sitz Bath As Adminid.
 - Anal hygiene to be maintained
 - Refd. to Prof. Ashad Ahmad

PRO IT Cells
 Kindly admit
 the patient Mr
 AHMED UNIT
 General Surgery

for further management of
 Internal hemorrhoids
 Refd. to Medicine OPD for
 T2DM & Hypertension
 Dr. J. K. Misra MD for

38

20/3/22

O/E Grade II/III Hemorrhoid

Plan: Conservative Mx

Plan a MIPH/...

Sigmoidoscopy

R

Fluid, Fibre, Fitness

1) Tab Daplan 1000mg PO BD x ~~10 days~~ 2wk
↓
OD x 20 days

2) Tab. chymoral forte 1 tab PO BD x 10 days.
Lactulose 30ml HI PO x 4 wks.

Kindly get ABAC done (Asp Anesthesia)

4/4/2022

Motilid liquid → 2-3 tds → HTS

Co-maffin Plus → 2 & 4 (H) (SOS)

Follow-up

After 3 weeks

To discuss: Physiotherapist

Symptomatic Excision

Tab Tenexa 500mg PO x 3ds

DM HTN ADE DM HTN
Holds to CHD/CHF OFF/CLD. ASD.
FexAMET
Pneumonia

ECG
LARE

Kindly do R.E.S

PRC

Kindly do PRC

Ultrasound
Pneumonia only

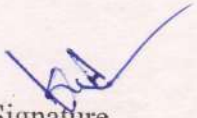
FexAMETS
PCP1-016
Low level mm
may help

S. 225 - ASD

8
SISTER I/C PVT. WARD No.39.... KG.H./Q.M.H./Med./T.B.H/P.S.Y.

Private Ward No.39.... K.G.H./Q.M.H. has been allotted w.e.f. 4-4-2022

Pt. Name Mitala Pal Singh Under Case of Dr. A. Sharma .


Signature



King Georges M
I Shamlna F



ChowEHR ID:22000885021132365



UHID : 20220108350

Inpatient Hospital Registration

| | | | |
|--|--|--|-------------------------------|
| Unit : Surgery General -Unit -7 | Ward/Bed: SURGERY (GENERAL) SURGICAL WARD 8/11 | IPD Fees : Rs. 0 | MLC Patient : NON-MLC Case |
| Treating Doctor : Dr. Arshad Ahmad - Professor | | IP NO : 202228764 | |
| Date Of Admission And Time: 04/04/2022 11:29:45 AM | | Date Of Discharge And Time: | |
| Patient Name :Mr MITRA PAL SINGH | | Age : 55 Years 13 Days | |
| Mother's Name/Mother CR No : / | | Sex : Male | |
| Father's Name : BABURAM | | | |
| Address :house no 41 chappur nakur saharan pur PIN:247342, UTTAR PRADESH Telephone6397371268 | | Emergency Contact Address : Mobile No : | |
| Mobile No : *****268 | | | |
| Religion : Unknown | | Caste : OBC | |
| Education : | | Occupation : UNKNOWN | |
| Billing Type : General | | Monthly income : 0 | |
| Ration card : null | | BPL Card No : | |
| Provisional Diagnosis: | | Final Diagnosis : | |
| Prepared By : Ms.Laxmi Singh | | Signature Of Treating Consultant : Dr. Arshad Ahmad - Professor | |

Medical Reel Pt. 39

Ty Tetvac 1ap - (1)

Ta ~~ant~~ (0.25mg) - (1)

tab. Kantac 150y - (1)

tab. Dulcoflex (2)

R Enema - (2)

zrxet - (1)

vppow. 20 - (1)

22 - (1)

east fiber - (1)

sygi. Qml - (2)

gml - (5)

DNS sooul - (1)

insulin (R) - (1)

insulin Syng - (2)

surjical glass 68 - (5)

Veet cream - (2)

Cotton Kelt - (1)

Plain vial - (2)

fluoride vial - (2)



116

Clinical Pathology Examination Report

Patient..... Abra Pal Singh

..... Age 57 Sex m

Ward..... Bed..... Unit.....

Doctor Incharge.....

Specimen..... Source.....

Time of collection..... Date 2/2/22

Specimen sent Deptt. Date.....

Clinical diagnosis : Diabetes

2380211779

Examination required.....

Signature of Physician/Surgeon/House Officer

~~PT/INR~~
A/C
S/E
LFT
KFT
~~PT/INR~~
PT/INR
~~PT/INR~~
~~PT/INR~~
~~PT/INR~~

~~Blood Sugar~~
Blood Sugar — Fasting
— PR

[Handwritten signature]

King George's Medical University, U.P., Lucknow
G.M & Associated Hospitals



Clinical Pathology Examination Report

Patient..... *Muhammad Per Singh*

Age..... *55* Sex..... *M*

Ward..... Bed..... Unit.....

Doctor Incharge.....

Specimen..... Source.....

Time of collection..... Date..... *2/4/12*

Specimen sent Deptt. Date.....

Clinical diagnosis :



X VM $\left\{ \begin{array}{l} \text{HIV} \\ \text{HCV} \\ \text{HTLV} \end{array} \right.$
tuberc Ag

B

Examination required.....

Signature of Physician/Surgeon/House Officer



Gandhi Memorial & Associated Hospitals

K.G. Medical University, Lucknow

Department *Gen. Surgery*

Nature of the patient *mitis Pal Singh*

Admitted of the *04/04/22* Pvt. ward *Dr. 39*

Name of operation *None*

Amount to be realised Rs.

Theatre in which operation performed

1. Chief operation *Prof. Arshad Ahmad (MS)*

2. Anaesthetist

3. Assistant

4. Sister/Staff Nurse

5. Other Staff working in O.T.

Receipt No. Dated *05/04/22*

Arshad Ahmad
for
Prof. Arshad Ahmad (MS)
Surgeon Incharge
G. M. & Associated Hospitals
Lucknow



King Georges Medical University
1 Shamina Road, Chowk, ,Chowk

14

RELIEVED REPORT (RECEIPT VALID FOR REIMBURSEMENT) :

Bill Receipt (Original)

Receipt No :GCASH - 16634/202223 **Receipt Date :**05-04-2022 11:52:54 AM
Mr MITRA PAL SINGH ,Age :55 Yrs 0 Male UHID IPD No:
Mons 14 Days :20220108350 202228764
Department :SURGERY GENERAL Ward Name :SURGERY (GENERAL) SURGICAL WARD 8 Bed No: 11

Admission date: 04/04/2022 11:29 AM **Advance Paid:**0
Discharge date:05/04/2022 11:52:45 AM **Category :**Private

Billing Sub Category Details:

Service Details:

| Sl.No | Service Name | Qty | Rate | Gross | Discount | Amount |
|-----------------------------------|--------------|-----|------|-------|----------|----------|
| Total | | | | | | 0 |
| Security Adjusted | | | | | | 0 |
| Concession | | | | | | 0 |
| Balance taken from Patient | | | | | | 0 |
| Amounts in words | | | | | | |
| ZERO RUPEES AND ZERO PAISA | | | | | | |

Remarks:
Payment Mode: **Cash**



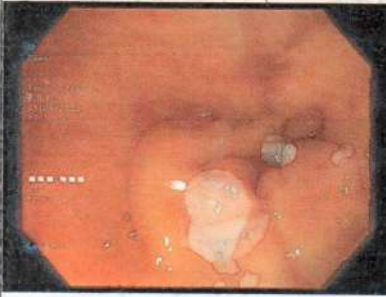
UTT_KI
Ms.Laxmi Singh



Department of Surgery (Gen)
K.G. Medical University, UP Lucknow

Patient ID: 2022040003
Name: Mr. MITRA PAL SINGH
Age: 55 Y
Sex: M
Date: 05-Apr-2022

Ref By: SELF
Study: LOWER GI ENDOSCOPY



SIGMOIDOSCOPY

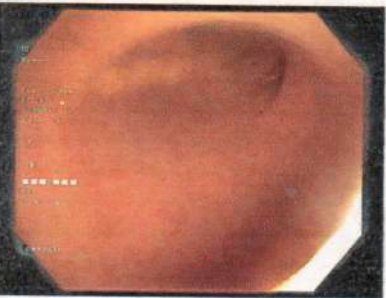
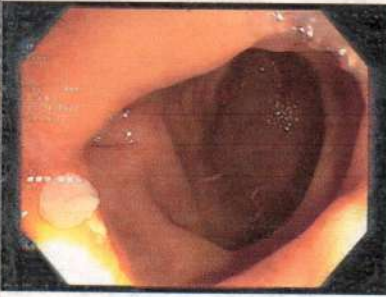
Hemorrhoids are present

RECTUM

NORMAL

SIGMOID COLON

NORMAL.




CONSULTANT

★ Mr. M. P. Singh

76

| Date | B.P. Reading | | Blood Sugar Level Reading. | | | | |
|----------|--------------|---------|----------------------------|--------------|---------------------|---------------|-----------------------|
| | Morning | Evening | Before Breakfast | Lunch | | Dinner. | |
| | | | | Before Lunch | After 2 H. of Lunch | Before Dinner | After 2 H. of Dinner. |
| 05.04.22 | 118/78 | 122/79 | — | — | — | 76 | 192 |
| 06.04. | 123/79 | 137/90 | 78 | 58 | 170 | 73 | 215 |
| 07.04. | 144/92 | 99/66 | 94 | 76 | 107 | 90 | 184 |
| 08.04. | 136/82 | 99/63 | 88 | 56 | 128 | 93 | 194 |
| 09.04 | 127/79 | 110/69 | 102 | 104 | 104 | 69 | 96 |
| 10.04 | 108/68 | 107/69 | 113 | 69 | 94 | 97 | 164 |
| 11.04 | 122/76 | 118/78 | 97 | 56 | 64 | 88 | 174 |
| 12.04 | 128/80 | 126/84 | 83 | 70 | 108 | 82 | 129 |
| 13.04 | 109/66 | | 116 | | | | |
| 28.08 | 101/137 | 98/130 | 90 | | | | |
| 29.08 | 90/135 | 82/125 | 93 | | | | |
| 30.08 | 82/137 | 91/125 | 90 | | | | |
| 31.08 | 79/127 | 72/129 | 114 | | | | |

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King George Medical University, U.P., Lucknow-226003
DEPARTMENT OF ANAESTHESIOLOGY
CONSENT FORM

Date 5.4.2022.....

Time.....

Name Mitroa Pal Singh.....

Address VILL. Chhapra Post Naker, Distt Saharanpur (U.P.).....

1. (a) I agree to get myself/my patient operated upon for
(b) The effect and nature of the operation and its possible complications has been explained to me.
2. I am full aware to and satisfied with the facilities available for the case of myself/my patient in this hospital. I have been thoroughly explained about the type severity of the disease and general complications of anaesthesia and surgery and the risk involved in medication to.
3. (a) My/my patient's condition is critical and there is risk of life during or after the operation and anaesthesia.
(b) I know that my/my patient's condition is such that surgeon is not willing to operate but as a last resort I request the Surgeon to do surgery under anaesthesia at my own risk.
4. I also consent to such further or alternative anaesthetic procedure as may be found necessary during the course of Surgery/Anaesthesia.
5. It has been explained to me that my patient will be operated upon under.....anaesthesia and I Consent to this.
6. I hereby declare that I have full faith in the staff of this centre and I am ready to undergo any type of Anaesthesia or medication, major or minor, as decided in emergency by the staff attending the centre at the time.
7. I also certify that no guarantee or assurance has been made as to the result that may be obtained.
8. I have read the above contents or this form and fully understood all its implications.

Mitroa Pal Singh
5.4.2022

Signature Mitroa Pal Singh
(Full Name)

Address

Name and signature of any
Friend or relative.....
LKO/Telephone No. 6397 371 268
Relationship to patient.....
Address.....

Only Patient
Relation to patient

Counter signed by
Staff Nurse / Resident on duty

Intraoral Stage B.P. Charting

| Date | 6:00 AM | 10:00 AM | 2:00 PM | 6:00 AM | 10:00 PM |
|----------|---|----------|---------|----------------|-------------------------------------|
| 04/04/22 | | | | 130/90 mmHg | 140/90 mmHg AT 1:20 PM 145/90 |
| 05/04/22 | AT 4:00 AM 130/90 AT 6:26 AM 130/80 | | | | |

Sugar Charting

| Date | BBF | Before Lunch | Before Dinner | After Dinner |
|----------|---------------------------|--------------|---------------|------------------------|
| 4/04/22 | | At-11:00 | 303 mg/dl | At-12:30pm - 219 mg/dl |
| 05/04/22 | At 4:00 am 160 mg/dl | | | |
| | At - 6:28 am 170 mg/dl | | | |

Staff Nurse / Resident on duty
 Counter signed by



King Georges Medical University

1 Shamina Road, Chowk,
Chowk



20220108350



GCASH-11682/202223

IPD Bill Receipt
Original

UHID : 20220108350
 Name : MR MITRA PAL SINGH ✓
 Address : S/O baburam house no 41 chappur nakur saharan pur
 Age & Sex : 55 Yrs 0 Mons 13 Days MALE
 Admission Date : 04/04/2022 ✓
 Payment Details : Payment Mode : Cash

Receipt No : GCASH-11682/202223
 Receipt Date : 04/04/2022 11:30 AM
 Billing Type : GENERAL
 IP No. : 202228764
 Ward Name : SURGERY_GENERAL_SURGICAL
 WARD 8
 Contact No : 63XXXXXX68

| Service Details: | | | | | | | |
|------------------|------------------|--------------|----------|------|-------|----------|--------|
| SLNo | Service Category | Service Name | Quantity | Rate | Gross | Discount | Amount |
| 1 | ADMISSION | ADMISSION | 1 | 250 | 250 | 0 | 250 |

Total Amount : Rs. 250

Discount : Rs. 0

Net Amount : Rs. 250

Amount in Words
Two Hundred Fifty Rupees And Zero Paise

[Authorized Signature]
Ms. Laxmi Singh

Professor
Department of Surgery (Gen.)
King Georges Medical University U.P., Lucknow



King Georges
Medical University

1 Shamina Road,
Chowk,
Chowk



20220108350



GCASH-11791/202223

IPD Bill Receipt
Original

| | | | |
|-------------------|---|----------------|----------------------------------|
| UHID : | 20220108350 | Receipt No : | GCASH-11791/202223 |
| Name : | MR MITRA PAL SINGH ✓ | Receipt Date : | 04/04/2022 11:40 AM |
| Address : | S/O baburam house no 41 chappur nakur saharan pur | Billing Type : | PRIVATE |
| Age & Sex : | 55 Yrs 0 Mons 13 Days MALE | IP No. : | 202228764 |
| Admission Date : | 04/04/2022 ✓ | Ward Name : | SURGERY_GENERAL_ SURGICAL WARD 8 |
| Payment Details : | Payment Mode :Cash | Contact No : | 63XXXXXX68 |

Service Details:

| SLNo | Service Category | Service Name | Quantity | Rate | Gross | Discount | Amount |
|------|----------------------|-------------------|----------|------|-------|----------|--------|
| 1 | PRIVATE ROOM CHARGES | NEW PRIVATE PPU/S | 2 | 600 | 1200 | 0 | 1200 |

Amount in Words

One Thousand Two Hundred Zero Rupees And Zero Paise

Total Rs.
Amount : 1200
Discount : Rs. 0
Net Amount Rs. ✓
: 1200

Professor
Department of Surgery (Gen.)
K G's Medical University U.P., Lucknow

[Authorized Signature]
Mr. Virendra Tripathi

OLD LUCKNOW PHARMACY

MEDICAL COLLEGE CROSSING

LUCKNOW

MOB-969721135

E-Mail: lucknowpharmacy24x7@gmail.com

Patient Name : MITHRAL PAL ✓

Patient Address :

Dr Name :K.G.MULKO

Dr Reg No.

GSTIN : 09AAGFO7599E1ZO

D.L.No. : UP32200001498,UP32210001495

GST TAX INVOICE

Invoice No. : 000601 Date: 04-04-2022 ✓

| SN. | PRODUCT NAME | PACK | HSN | BATCH | EXP. | QTY | MRP | RATE | AMOUNT |
|-----|--------------|------|------|----------|------|-----|-------|-------|--------|
| 1. | FIXER | 1*1 | 3004 | 564 | 5/24 | 2 | 30.00 | 30.00 | 60.00 |
| 2. | VIGGO NO.20 | 1X1 | 3004 | 21032472 | 2/26 | 2 | 40.00 | 40.00 | 80.00 |

SUB TOTAL 140.00

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.

Professor

Department of Surgery (Gen.)

K G 's Medical University U.P., Lucknow

For OLD LUCKNOW PHARMACY

DISCOUNT- 0.00

Remark :

Rs. One Hundred Forty Only

Authorised Signatory

GRAND TOTAL 140.00 ✓

Dr Lal PathLabs

011-3988-5050 (National Customer Care)

SHAMSUR RAZA

292/002,tulsidas marg,,charak chauraha,chowk,
LUCKNOW, LUCKNOW226003 UTP ,IND

9044751500

Authorised Collection Center

INVOICE CUM CASH RECEIPT

(PLEASE BRING THIS RECEIPT FOR REPORT COLLECTION)

Patient Name : Mr. MITRA PAL SINGH ✓
Age & Sex : 55 Year, M
Ref. Doctor : Dr. PROF ARSHAD AHMAD
Contact No : 6397371268

Invoice cum Receipt no : CC10425/0422/007037
Lab No : 326473533
LPL Client Code : CC10425
Date & Time : 04/04/2022 10:37:15 AM ✓
Reporting Location : FPSC CHOWK

| S.No. | Test Code | Test Name | Estimate of report by # | Amount (Rs.) |
|------------------------------|-----------|--------------------------------|-------------------------|---------------|
| 1 | B080 | HbA1c; GLYCOSYLATED HEMOGLOBIN | 04/04/2022 04:00 PM | 400.00 |
| Miscellaneous Charges | | | | 0:00 |
| Amount | | | | 400.00 |

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).

Professor
Department of Surgery (Gen.)
K G 's Medical University U.P., Lucknow

For SHAMSUR RAZA
Authorised Signatory

OLD LUCKNOW PHARMACY

MEDICAL COLLEGE CROSSING

LUCKNOW

MOB-9695721135

E-Mail : lucknowpharmacy24x7@gmail.com

Patient Name : MITRAL PAL ✓

Patient Address :

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

Dr Reg No.

GSTIN : 09AAGFO7599E1ZO
D.L.No. : UP32200001498,UP32210001495**GST-TAX INVOICE**

Invoice No. : 000584 Date: 04-04-2022 ✓

| SN. | PRODUCT NAME | PACK | HSN | BATCH | EXP. | QTY | MRP | RATE | AMOUNT |
|-----|--------------------------|-------|------|-----------|-------|-----|--------|--------|--------|
| 1. | BETT AMP | 1X1 | 3002 | A0140221 | 2/24 | 1 | 11.41 | 11.41 | 11.41 |
| 2. | RANTAC 150 | 1*30 | 3004 | KR321293 | 2/23 | 0.1 | 36.79 | 36.79 | 1.23 |
| 3. | DULCOFLEX | 1X10 | 3004 | DLA21046 | 6/23 | 0.2 | 11.25 | 11.25 | 2.25 |
| 4. | ENEMA | 1*1 | 3002 | EN176 | 5/23 | 2 | 40.00 | 40.00 | 80.00 |
| 5. | I.V.SET | 1X1 | 3004 | G50478 | 11/26 | 1 | 50.00 | 50.00 | 50.00 |
| 6. | VIGGO NO.20 | 1X1 | 3004 | 21032472 | 2/26 | 1 | 40.00 | 40.00 | 40.00 |
| 7. | VIGGO NO.22 | 1X1 | 3003 | 20112590 | 10/25 | 1 | 40.00 | 40.00 | 40.00 |
| 8. | SOFLENE EASY FIX | 1*1 | 3002 | 21052673 | 4/24 | 1 | 30.00 | 30.00 | 30.00 |
| 9. | DISPOVAN SYRINGE | 2ML | 3004 | 142024NH1 | 9/26 | 2 | 3.00 | 3.00 | 6.00 |
| 10. | DISPOVAN SYRINGE | 5ML | 3004 | 300321 | 2/26 | 5 | 5.00 | 5.00 | 25.00 |
| 11. | DNS IV FLUID PDPL | 500ML | 3004 | 5HZ141 | 4/23 | 1 | 34.00 | 34.00 | 34.00 |
| 12. | HUMINSULIN R 40IU | 10ML | 3002 | H1127 | 6/23 | 1 | 157.50 | 157.50 | 157.50 |
| 13. | DISPOVAN SINGLE 1ML 30G | 1X1 | 3004 | 137014G | 8/26 | 2 | 5.00 | 5.00 | 10.00 |
| 14. | SURGICAL GLOVES SIZE:6.5 | 1X1 | 3002 | 13210127 | 6/26 | 5 | 30.00 | 30.00 | 150.00 |
| 15. | VEET H.R.SENSITIVE | 60GM | 3306 | 24 | | 1 | 128.00 | 128.00 | 128.00 |

Terms & Conditions

Professor
Department of Surgery (Gen.)
K G's Medical University U.P., Lucknow

For OLD LUCKNOW PHARMACY

Remark :

Authorized Signatory

TOTAL C/F

687.61

OLD LUCKNOW PHARMACY

MEDICAL COLLEGE CROSSING

LUCKNOW

MOB-9895721105

E-Mail : lucknowpharmacy24x7@gmail.com

Patient Name : MITRAL PAL ✓

Patient Address :

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

Dr Reg No.

GSTIN : 09AAGFO7599E1ZO
D.L.No. : UP32200001498,UP32210001495**GST TAX INVOICE**

Invoice No. : 000584 Date: 04-04-2022 ✓

| SN. | PRODUCT NAME | PACK | HSN | BATCH | EXP. | QTY | MRP | RATE | AMOUNT |
|------------------|----------------|-------|------|------------|------|-----|--------|--------|---------------|
| | | | | | | | | | 687.62 |
| 16. | COTTON | 200GM | 3002 | 56012110 | 5/24 | 1 | 100.00 | 100.00 | 100.00 |
| 17. | CLOT ACTIVATOR | 1*1 | 3004 | CA4N05251D | 3/25 | 4 | 5.00 | 5.00 | 20.00 |
| TOTAL B/F | | | | | | | | | |
| | | | | | | | | | 885.39 |

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. Eight Hundred Eighty Five Only

Professor
Department of Surgery (Gen.)
K G's Medical University U.P., Lucknow

For OLD LUCKNOW PHARMACY

Authorised Signatory

SUB TOTAL 885.39

DISCOUNT- 0.00

GRAND TOTAL ✓ 885.00



King Georges Medical University

1 Shamina Road, Chowk,
Chowk



20220108350



GCASH-14778/202223

IPD Bill Receipt
Original

UHID : 20220108350
 Name : MR MITRA PAL SINGH ✓
 Address : S/O baburam house no 41 chappur nakur saharan pur
 Age & Sex : 55 Yrs 0 Mons 14 Days MALE
 Admission Date : 04/04/2022 ✓
 Payment Details : Payment Mode :Cash

Receipt No : GCASH-14778/202223
 Receipt Date : 05/04/2022 04:40 AM
 Billing Type : PRIVATE ✓
 IP No. : 202228764
 Ward Name : SURGERY_GENERAL_SURGICAL WARD 8
 Contact No : 63XXXXXX68

Service Details:

| Sl.No | Service Category | Service Name | Quantity | Rate | Gross | Discount | Amount |
|-------|------------------|----------------------|----------|------|-------|----------|--------|
| 1 | PATHOLOGY | POTASSIUMK | 1 | 50 | 50 | 0 | 50 |
| 2 | PATHOLOGY | BLOOD GLUCOSE RANDOM | 1 | 30 | 30 | 0 | 30 |

Total Amount : Rs. 80

Amount in Words

Eighty Rupees And Zero Paise

Discount : Rs. 0

Net Amount : Rs. 80 ✓

[Authorized Signature]
Mr.Sanjay Kumar Welfare Society

Professor
Department of Surgery (Gen.)
K.G's Medical University U.P., Lucknow



Plain - 4013796
20220108350 / 5042200155
55 Y/M : Mr Mitra Pal S / 05 Apr 04:40
K

OLD LUCKNOW PHARMACY

MEDICAL COLLEGE CROSSING

LUCKNOW

MOB-969572 35

E-Mail : lucknowpharmacy24x7@gmail.com

GSTIN : 09AAGFO7599E1Z0

D.L.No. : UP32200001498,UP32210001495

Patient Name : MR.MITRA PAL SINGH ✓

Patient Address :

Dr Name : K G M U

Dr Reg No.

Invoice No. : 000673 Date:05-04-2022 ✓

GST TAX INVOICE

| SN. | PRODUCT NAME | PACK | HSN | BATCH | EXP. | QTY | MRP | RATE | AMOUNT |
|-----|----------------|------|------|-----------|-------|-----|--------|--------|--------|
| 1. | CHYMORAL FORTE | 1X20 | 3004 | 2KU6H004 | 10/23 | 1:0 | 423.40 | 423.40 | 423.40 |
| 2. | TRENAXA 500MG | 1X6 | 3002 | TTA21028A | 7/24 | 1:4 | 109.68 | 109.68 | 182.80 |

Professor
Department of Surgery (Gen.)
K.G.'s Medical University U.P., Lucknow

SUB TOTAL 606.20

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.

For OLD LUCKNOW PHARMACY

DISCOUNT- 60.62

GRAND TOTAL 546.00 ✓

Remark :
Rs. Five Hundred Forty Six Only

[Signature]
Authorised Signatory



King Georges Medical University

1 Shamina Road, Chowk,
Chowk



20220108350



GCASH-15306/202223

IPD Bill Receipt
Original


| | | | |
|-------------------|---|----------------|---------------------------------|
| UHID : | 20220108350 | Receipt No | GCASH-15306/202223 |
| Name : | MR MITRA PAL SINGH ✓ | Receipt Date : | 05/04/2022 09:34 AM ✓ |
| Address : | S/O baburam house no 41 chappur nakur saharan pur | Billing Type : | PRIVATE |
| Age & Sex : | 55 Yrs 0 Mons 14 Days MALE | IP No. : | 202228764 |
| Admission Date : | 04/04/2022 | Ward - Name : | SURGERY_GENERAL_SURGICAL WARD 8 |
| Payment Details : | Payment Mode :Cash | Contact No | 63XXXXXX68 |

| Service Details: | | | | | | |
|------------------|------------------|------------------------|----------|------|-------|-----------------|
| SL.No | Service Category | Service Name | Quantity | Rate | Gross | Discount Amount |
| 1 | GENERAL SURGERY | COLONOSCOPY DIAGNOSTIC | 1 | 1000 | 1000 | 0 1000 |

Amount in Words: One Thousand Zero Rupces And Zero Paisa

Professor
 Department of Surgery (Gen.)
 King Georges Medical University U.P., Lucknow

Total Rs. Amount : 1000
 Discount : Rs. 0
 Net Amount : Rs. 1000 ✓


 [Authorized Signature]
 Ms. Laxmi Singh