Proforma-I

FINA Kay NEODORAMONMONDATION

Inter district transfer of Judicial Officer

Remarks/assessment of Chief Medical Offer/Chief Medical Superintendent along with verified/countersigned papers

I. P.R. R. KINDJXIT. CMO/CMS LBR N.CH. LUCKA/chibve perused the documents presented before me by SriPRADEEP KUMAR JAYANT (ID No UP6478 Designation Spl. Judge (U.R. Dacoity.A.A.), Hamirpur OR on his behalf by Sri. Relation with the officer

Phone No.

- I have personally examined SH/Smt/Sushri, VIDYAWATI JAWHO is suffering from the disease/syndrome/disability Deptessive option with Band in my opinion he/she may require frequent hospitalization for treatment/management.
- I also verify that Sri/Smt/Sushri. Vid ya wati Jayant is suffering from the disease/syndrome/disability/disorder Dep. Deffering offer Sode with and this disease is mentioned at paragraph not those the Annexure-I enclosed herewith.
- In my professional opinion and assessment, I am convinced that the treatment/management of the above-mentioned disease/syndrome/ disability/disorder in paragraph two above is possible ONLY at the districts mentioned by the officer in his/her application submitted to Hon'ble High Court.
- The treatment/management of the above-mentioned disease/syndrome/disability/disorder in paragraph two above is also available at the districts namely Kaupur/Lucknow/Agra/

Aligarh NOIDA

- I am aware that this document may be presented by the competent authority/applicant for further use by a competent Medical Board.
- This document shall be valid only for . _____ months only.

OPD Regn (UHID): 20240063351

Roji Drit Signature pringeral 27/2/2024

L.B.RIGMO, 10000 PITAL NameA Colopy, Konger Road, Lugknow

10 No: 35476

Designation: CMS.

Mobile No. 94.59.6.3.9955

1. Concerned District Judges/Officers in equivalent rank to get these matter expedited from the office of CMO/CMS

2. The CMO/CMS are requested to retain the copy of this documents and documents placed before them for issuance of this document for future reference

This document is printed on 23/02/2024 09:28:44By IP Address: 117.199.95.61





LOK BANDHU RAINARAYAN COMBINED HOSPITAL LDA COLONY ASHIYANA KANPUR ROAD LUCKNOW

CONSULTING ROOM NO :04,05,112, TOKEN NO : 351 Clink MEDICINE OPD Days: MON, TUE, WED, THU, FRI, SAT

OUT PATIENT RECORD

Name : MS. VIDYAWATI JAYANT Department : Medicine

Dept No. : 2024/051/0013403 Date: of Registration : 27-02-2024 11:53:46 AM Unit: | MEDICINE UNIT Age 45Y Billing Type : General

Mobile No . *******

Address : ps 5/102/ a 2 panchsheel apartment gomti nagar, Lucknow, UTTAR PRADESH, INDIA Patient Type.NON MLC

Date and Time of initial assessment: :

Clinical History :

Examination Findings:

Investigation :

Diagnosis :

Treatment :

Follow-up advice :

CO- Aurichy · loss of sleop / irritability martin araigu presently under treatment? A Dr. Uhuan Mushin i du kart at u an mis kart at MBBS. MDPSychiatry citar orize at au uni uca ut MBBS. MDPSychiatry citar orize at au uni uca ut sun contact No - 6306574373

Psychiatrist.

Fee: 1.00 Sex Female W/O p k jayant

Occupation : OTHER Prepared by:Mr. Anurag Kumar

आधार कार्ड से पंजीकरण करें और आगे प्ले स्टोर से (Driafcase) नाम का एप्प डाउनलोड करें आधार संख्या दर्ज करें मोबाइल नंबर दर्ज करें

परिवार के सदस्य का पंजीकरण करना भी हे आसान अपना अकाउंट बनाने के बाद आधार के साथ सदस्य जोडे Add family member with adhaar

アタイルシェート 1. ADD NEW FAMILY MEMBER पर アタイルシェート 2. 「क्लक करे」 आधार OPTION चुने」 ション のいいて 秋夜町 なく」 アアスドロイデン 4. OTP सत्यापित करे」 CM ちょっく 5. मोबाइल नंबर दर्ज करे」 मोबाइल नंबर दर्ज करें। OTP सत्यापित करें। LDA Colony Dialiour Rola 31318764 मरीज़ से रिश्ता चुने। आभा ऐडरेस बनाएँ। ऐप स्केनर के साथ QR कोड स्केन करें

टोकन नंबर प्राप्त करें। 10.

я.

Doctor's Name Signature / Date

OPD के पर्चे की वैधता 15 दिन तथा Casuality की मात्र इमरजेंसी में 1 दिन है।

Mind's Eye Neuro Psychiatry Clinic

18/247, Ring Road, Opposite ICICI Bank, Indira Nagar, Lucknow - 226016

		NEURO-PSYCHIATRIST, SEXUAL DI Consultant : Apo	SA), M.E.S.S.M. SORDERS AND billo Hospitals,	(ITALY), MILHS. (DR), MILHS.				
Name :	206	and the second s						
	BP 143/92 mmHg Pulse 107 bpm Weight 76 kg Temperature 97.1 F							
	Diagnosis : F32							
	R							
	1.2	Medicine	Dosage	Timing - Freq Duration				
	1)	PREGOL NT TAB		Atter Dinner - Daily - 3 Months				
	2) CARNOGINK TAB		1 - 0 - 0	Atter Breakfast - Daity - 3 Months				
	3)	RECITA FORTE TABLET Composition Cloriazeparn 0.5 MG + Est	0 - 0 - 1 citalopram 10 MG	After Dinner - Daily - 3 Months				
	4)	ZOLPINITE 10MG TABLET Composition : Zolpidem 10 MG		SOS -				
		Notes IF SLEEP IS DISTUR	BED					

Next Visit : 3 months (10-Mar-2024 - Sunday)



Timing : Monday to Friday : 6:00 pm to 8:00 pm Sunday : 10:00 am to 12:00 Noon

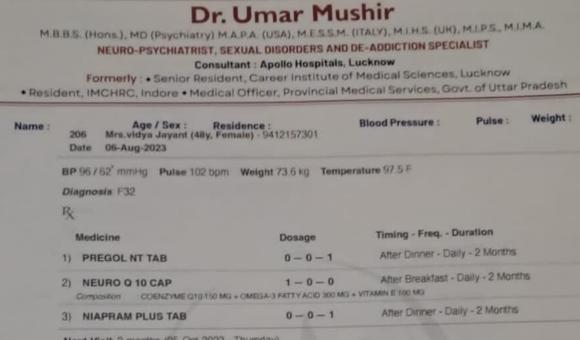
Saturday Closed

Not For Medicolegal Purpose

Contact 6306574323 Email umar.mushir@gr Website www.drumorp

Mind's Eye Neuro Psychiatry Clinic

18/247, Ring Road, Opposite ICICI Bank, Indira Nagar, Lucknow - 226016



Next Visit 2 months (05-Oct-2023 - Thursday)



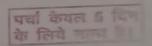
DR. UMAR MUSHIR

हिदायत
मानसिक शोगी को दी जाने वाली दवा उसकी
ग्यांग के प्राय गाले में बन्द रखे।
क्राविस्ताव हारा लिखित मात्रा म हा दया था
जसमें अधिक मात्रा में एक साथ दवाई खाना हानिकारक या जानलेवा हो सकता है।

Timing :

Monday to Friday 6.00 pm to 8:00 pm Sunday 10:00 am to 12:00 Noon Saturday Closed

Not For Medicolegal Purpose



Contact: 6306574323 Email umar mushir es Website : www.drumo Regn. No. 54185

Mind's Eye NeuroPsychiatry Clinic

18/247, Ring Road, Opposite ICICI Bank, Indira Nagar, Lucknow - 226016

	M B B S (Hons), M D (Psychiatry), M A P.	Apollo Hospitals, Career Institute of	DE-ADDICTION SPECI Lucknow Medical Sciences, Luck	now	
Name	Age /Sex Residence	e :	Blood Pressure :	Pulse :	Weight
	206 Mrs.vidya Jayant (48y, Female) - 94) Date = 26-Mar-2023	2157301			
	BP 108 / 75" mmHg Pulse 97 bpm Weight 7	2 kg Temperature	97.7 F		
	Complaints REPORTS IMPROVEMENT IN S				
	Diagnosis 132				
	R				
	X		n Da	ention	
	Medicine	Dosage	Timing - Freq Du		
	1) FELIZ S 10MG TABLET	0 = 0 = 1	रात - खाने के बाद - रोज	- २ महीना	
	Composition = ESCITALOPRAM 10 MG				
	2) FELIZ-S 5MG TABLET	1 - 0 - 0	नाश्ते के बाद - रोज - 2	महीना	
	Composition : ESCITALOPRAM 5 MG				
	3) CLONARANGE 0.5 MG TAB	0 - 0 - 1	रात - खाने के बाद - रोब	त - 2 महीना	
	Composition CLONAZEPAM				
	4) NEURO Q 10 CAP	1 - 0 - 0	नाश्ते के बाद - रोज - 2	महीना	
		A-3 FATTY ACID 300 MG +	VITAMIN E 100 MG		
	5) ZOLPINITE 5 MG TABLET	0 - 0 - 1	रात - खाने के बाद - रो	ज - 2 महीना	
					_
	Composition ZOLPIDEM 5 MG 6) REJUBION CD3 CAP	1 - 0 - 0	नाश्ते के बाद - रोज -	2 महीना	
	6) REJUBION CD3 CAP		नाश्ते से पहले - रोज -	्र प्रामीता	
	7) ENZOL DSR CAP	1 = 0 = 0	नास्त स पहल - राज -	2 10131	

अगली तारीख. 2 months (25-May-2023 - Thursday)

DR. UMAR MOSHIR

Dr. Umar Mushir M.B.B.S., M.D. (Psychiatr Regd. No. 54185 Consultant Psychiatris Mind's Eye Neuro Psychiatry

d by HealthPics EMR www.healthpics.com

Not For Medicolegal Purpose

Contact : 7985855235 Email : umar.mushir@ Website : www.druma

Timing : Monday to Friday : 6:00 pm to 8:00 pm Sunday : 10:00 am to 12:00 noon Saturday Closed

11-12-22 Regn. No. 54185 Mind's Eye Neuro Psychiatry Clinic 18/247, Ring Road, Opposite ICICI Bank, Indira Nagar, Lucknow - 226016 Dr. Umar Mushir M.B.B.S. (Hons.), M.D. (Psychiatry) M.A.P.A (USA), M.E.S.S.M. (ITALV), M.I.H.S. (UK), M.I.P.S., M.I.M.A. NEURO-PJYCHIATRIST, SEXUAL DISORDERS AND DE- ADDICTION SPECIALIST 7-97-54 Consultant : Apollo Hospitals, Lucknow Formerly: • Senior Resident, Career Institute of Medical Sciences, Lucknow * Resident, IMCHRC, Indore * Medical Officer, Provincial Medical Services, Govt. of Uttar Pradesh Weight Diam. Residence Blood Pressure 98/65 mmhq. 71kg. 105Hm Coromati nggar. *ylf MA Vidya Ryna "iupru - oyu Jaryant F32 ae 7. Feliz-s - 5(Mom) T. Feliz-s - 10[Night) (.) × 2 MONTHY 7. Clonerauge 0.5 2) x-2-1 COP PANTORANGE DSN_ 37 CAST ANTA de Dr. Umar Mushir W 7. Zolfwite Say M.B.B.S., M.D. (Paychiatry) Regd. No. 54185 Consultant Psychiatrist Mind's Eye Neuro Psychiatry Clinic 5) Cop. Meno Q 10 6) C.P. NUCK MAX Contact: 7985855235

Timing: Monday To Friday:6:00 pm To 8:00 pm Sunday:10:00 am To 12:00 Noon Saturday Closed

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Email: umar.mushir@gmail.c Website: www.drumarpsych.

Mind's Eye Neuro Psychiatry Clinic

18/247, Ring Road, Opposite ICICI Bank, Indira Nagar, Lucknow - 226016

Dr. Umar Mushir

M.B.B.S. (News.) M.D. (Psychiatry) M.A.D.A (USA). M.E.S.S.M. (ITALV). MIHS. (UR). MID.S., MIMA.

NEURO-PSYCHIATRIST, JENUAL DISOBDERS AND DE- ADDICTION SPECIALIST

Consultant : Apollo Hospitals, Lucknow

Formerly: • Senior Resident, Career Institute of Medical Sciences, Lucknosu

*Resident, IMCHIRC, Indore • Medical Officer, Provincial Medical Services, Govt. of Uttar Pradesh

MAR Victure 42417 121/03 mmhy. 98 blm GSITH Giomati Oyont · Doaybel (-) 7. FELIZ-S-10 1-x-1 J Weakener 7 CLONARANSE D.5 × 1 moult 2) x - x - 13) 7. ZOLAINITE 5 x - x-1 ENHANCE GOLD SACHET Dr. Umar Mushir M.B.B.S., M.D. (Psychiatry) 1 sachet int cup of water after Breakgert Regd. No. 54185 Consultant Psychiatrist E-MU Good's Eye Neuro Psychiatry Cl - DToke vil

Monitor To Friday 6:00 pm To 8:00 pm Sunday 10:00 am To 12:00 Noon Saturday Closed

Not For Medicolegal Purpose

Contact 7985855235 Email: umar.mushin@g Website: www.druman

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3) 7. Clarenarge 0.5 x - 2-1

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b) Cyp. Newro g-10 1− α− α

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N Dr. Umor Mushir M.B.S.S. U.D. (Perphasian) Regel. No. 54185 Consultant Psychiatral Mind's Cire House Psychiatry Clinic

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

Gandhi Memorial & Associated Hospitals

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o Shelect - AT 12



C

King George's Medical University U.P.

KGMU CENTENARY GRADUATION YEAR 1916-2016 FOUNDED 1905 Formerly CSM Medical University U.P., Lucknow Department of Rheumatology Lai Bahadur Shastn Bhawan, RALC Campus, Lucknow-226 018 Phone +91-522-2614026, e-mail rheumatology@kgmcindia.edu

Ref.No. Rh/

ENA profile

1) Escite unt ong 145 - Cloze 0.25 1 Hz

Evin Le 2) (An)

Ferium X+ 3) 1 Pm)

4, creal D Bas 1

Exobia gong ABF 5)

Espap 4 one BBR 6)

Date: 37 24 Mrs Vidya Devi 4slf HT° DM° Non begiterian occasionel melle 3 2800 18/25/2 + Sheep 6/7 year RF (ve) anticel nice to 2 true ANA + 4+NFS



KBC-31 Sector B. CLA Prototore e dram w lucknow ap 12/6/21 Mrs. Vidya Jayart 4215 DX . OUL + LL Prin. · New, NXOA, NA, Milk t o point all ber work · @ cycles, NO BT (Vavous dars) O NO NIAD., NO ballache · No other illner. Records: Sucat - 0.64, She7-14, CHP-10-16, HB-12.4, MW-95.6, 146-5-2, PSOLY, M17-140, chim-@, VA-4-5, 144 Aic-@, @-83, VI-B12-SGHIVITD-@, Thyroid-@, dotestro)-@, Antrup-ve Problem & Jaaz 0/E W/= 67.7 kg, Apprecie, PR-114, BP= 130 /PO, SP02-9913, NO BL (H) Mild puller, No LNE systems good, joints good IMP @ Capvit D @ strumpers @ NO arthiti / HA. INV @ ER (WS), CRP (Quantitative) @ RF Quantitutives @ Anti cup antibodies (ANA (Hep 2 method) Stray RWis AP VIN E HIM (Agital) Awallehr

From The Desk of Prof Anupam Wakhlu

M.D. (Medicine), D.M. (Clinical Immunology & Rheumatology)

Chief Consultant - Immunology & Rheumatology Former Professor & HOD Rheumatology, KGMU, Lucknow Fellow Rheumatology, South Australia ल्मारे यहाँ समस्त बांड व दवाये सभी ऑक्टने द्वास स्वीकृत एवं विश्वसनीय कपनी की है। कोई दवा/बांड उपलब्ध न होने की स्विति में (कसी) जन्म कपनी की दवा ली ज्या सकली है Fellow SLE & Psoriatic Anthritis Toronto Canada

Rx

- Tab Sarvcal D 500 mg 1 BD after BF and dinner (नाश्ते और रात के खाने के बाद) 😪 . Cap Sarvbone D3 60K 2 times a week x 4 weeks (with milk/tea) (हफते में दो बार) 8 1
- •Tab Acepra 100 mg BD after BF & dinner (नाश्ते और रात के खाने के बाद) 🗲 . 2
- 4 Cap Praza DSR 40 mg OD empty stomach morning (सुबह खली पेट) —
- 5 Cap Dulane 20 mg HS after dinner (रात को खाने के बाद) 6. Tab Clonotril MD 0.25 mg HS before dinner (रात को खाने से एक घंटे पहले) —
- 7 Tab Polybion CZS 1 OD after BF (सुबह नाश्ते के बाद) •

Review: After 2-3 weeks with reports as advised

Awauch

Par.	Apollo
Apollo	1 12 14
HOSPITALS	

Designate Manual	VIDYA JAYANT	Age	42	Gender	FEMALE	
Patient Name	MILL_0000154239	LRN/Lab No	982491	0		
W/BNo/RefNo		Specimen	Blood	Blood		
Collected On		Received On	12/06/2	21 04:25 PM		
Reported On	12/06/21 05:57 PM	PatSerNo		PP497985		
Ref Doctor	Anupam	UHID		LL 0000154	239	

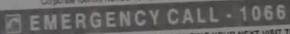
C-REACTIVE PROTEIN (CRP)

Investigation	Result	Unit	Range
			Normal: <5.0
C-REACTIVE PROTEIN (CRP)	0.9	mg/L	

Printed on : 17/06/21 11:58 PM

****End Of Result****

Regd. Office : Apolio Hospitals Enterprise Limited. No. 19. Bishop Garden, Raya Annemalaspuram. Chemiai - 600 028. Tel: +91-44-28293333, Fax: +91-4 Corporate Identity Number (C/N) : L85110TN1975PLC008035



Page 3

*KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL

VIDYA JAVANT	Age	Gender FEMALE
Atient Name VIDYA JAYANI MILL 0000154239	LRN/Lab No	9824910
PUID	Specimen	Serum
//BNo/RefNo	Received On	12/06/21 04:25 PM
ollected On	PatSerNo	MILLOPP497985
eported On 14/06/21 06:39 PM		MUL 0000154239
ef Doctor Anupam	UHID	

ANTI CCP (CYCLIC CITRULLINATED PEPTIDE) ANTIBODY

ANTI CCP (CYCLIC CITRULLINATED PEPTIDE)

Apollo

ollo

39.5

NEGATIVE ×12.0 AU/mi EQUIVOCAL: 12.0 18.0 AU/mi POSITIVE 18.0 AU/mi

Test has been performed by EIA method using CHORUS Kit

Printed on : 17/06/21 11:58 PM

****End Of Result****

Regd. Office : Apolio Hospitalis Enterprise Limited. No. 19, Bishop Garden, Raja Annamatalapuram, Chennal - 600 028, Tel +91-44-28293333, Fax: +91-44-2829333 Corporate Identity Number (CIN) L85110TN1975PLC006035

EMERGENCY CALL - 1066

Page 4

KEEP THE REPORTS CAREFULLY AND BRING THEM ALONG DURING YOUR NEXT VISIT TO OUR HOSPITAL

Kavita

DR KAVITA SOMAN

		Age	Gender TEMALT
atient Name	VIDVA JAVANT	LRN/Lab No	9824930
DIHID	MBLL0000154239	Specimen	Blood
N/BNO/RefNo		Received On	12/06/21 04:25 PM
collected On	and the second second second	PatSerNo	MILLOPP497985
Reported On	12/06/21 06:41 PM		MILL.0000354239
Ref Doctor	Anupam	UHID	

ERYTHROCYTE SEDIMENTATION RATE (ESR)

	Result	Unit	Range
ERYTHROCYTE SEDIMENTATION RATE (ESR)	33	mm/1st hr	0 - 20

Dr Kavita Soma MD Patholog Head Of Department Patholog

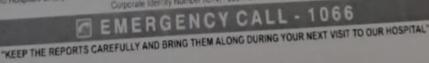
Dr Pretty Sing MD Patholog Associate Consultant Dept. Of Patholog

Printed on : 17/06/21 11:58 PM

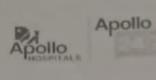
Apollo

****End Of Result****

Regd. Office: Apolio Hospitals Enterprise Limited: No. 19. Bisnop Garden, Raya Annamalapuram, Chernae - 503 026. Te: +51-44-25293033. Fax: +91-44-25293 Corporate Identity Number (CIN): L8511017.1979PLC098035



Page 1



	TINAYALAYANT	Age	12	Gender	FEMALE
Patient Name		LRN/Lab No	9824910		
UHID	MILL 0000154239	1 Carterio Contra	Blood		
W/BNo/RefNo		Specimen		1 04:25 PM	
Collected On		Received On			
Reported On	12/06/21 05:57 PM	PatSerNo		P497985	
Reported on			Mil	1.0000154	239
Ref Doctor	Anupam	UHID			

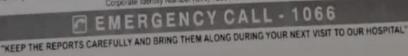
Rheumatoid Factor

Investigation	Result	Unit	Range
RA FACTOR	2.9	IU/mL	Negative: < 30,Positive:

Printed on : 17/06/21 11:58 PM

****End Of Result****

Regd. Office : Apollo Hospitais Enterprise Limited. No. 19, Bishop Garden, Raja Annamalaipuram. Chennai - 600 028; Tel. +91-44-26293333; Fax. +91-44-26290955 Corporate Identity Number (CIN): L85110TN1979PLC008035



Page 2

Kavita

> 30

DR KAVITA SOMANI

Apollo							
		Age		12	Gender	FEMALE	
Patient Name	VIDYAJAYANT	LRN/Lab No 9824 Specimen Seru		98249	10		
UHID	MILL 0000154239			Serum	Serum 12/05/21 04:25 PM		
W/BNo/RefNo				12/06			
Collected On		PatSerNo		MILLO	yPA97985		
Reported On	15/06/21 09 19 AM	Patserino					
Ref Doctor	Anupam	UHID					

ANTI-NUCLEAR ANTIBODY (ANA) - BY IMMUNOFLUORESCENCE

Intensity.

PB z

ANTI-NUCLEAR ANTIBODY (ANA) - BY IMMUNOFLUORESCENCE

Apollo

POSITIVE

4+

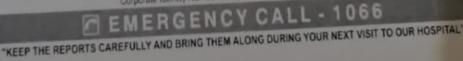
****End Of Result****

Pattern Nuclear Fine Speckled

Advice: ENA by Immunoblot.

Printed on: 17/06/21 11:58 PM

Regd. Office : Apolic Hospitals Enterprise Limited: No. 19. Bishop Garden, Raja Annamalaipuram, Chennai - 500 028, Tel +91-44-28293033, Pax +91-Corporate Identity Number (CIN) : L85110TN1979P_C008035



Page 5



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Address:- KBC 31, Sector B, LDA Colony Kanpur Road, Lucknow-226012 Phone No.> 0522-6788688

Website -- lucknow apollohospitals.com

Inthent Name GeoGender JL No. ISTIN IN No. Ivating Doctor	Mrs Vidya 45 Y/Female UP32-200004254/210004249 09AAGCM9435L1ZU U85191UP2011PLC043154 Dr Umar Mushir	Bill Number Bill Date Time Phone No. Payer Name Refer Type PRN NO	PCS-117503 05-03-2023 04:18 PM 7289808974 CASH PRN-57369
	Tax	Invoice	

o.,	Item Desc	HSN	Batch	Expliry	Unit Price	Qty	CGST%	SGST%	Amount	Location
	NEXITO - SMG TAB	30049079	SID2674A	30.09.	5.66	30	6	6	169.8	R4,S5,B
	NEXITO - 10MG TAB	30049079	SID3284A	31-08-2025	10.06	30	6	6	301.8	R4,85,B
	CLONOTRIL 0.5MG TAB	30049088	21C6J019	31-08- 2024	3.44	30	6	6	103.2	R2,S6,E
	NEURO Q-10 CAP 15'S	3004	PHNBA22	31-03-2023	59.8	30	6	6	1,794	R4,85,6
	ZOLFRESH 5MG TAB	30049082	ZLT22014	30-11- 2025	6.09	30	6	6	182.7	R7,59,1
	ELECTRAL 21.80GRM SACHET	3002	062K036	31-10- 2024	21.95	3	2.5	2.5	65.85	R8,S3,

vment Details:

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No.	Mode Debit Card	Receipt Date Time	Transaction No	Amount	Transaction Type	
		05-03-2023 04:18 PM	5000	2,617	Paid Settlement	

T Details:

No.	Tax Percentage	Taxable Amount	Tax Amount
_	3	62.71	3.14
	12	2,278.1	273.4
			Total Amount 26 Total SGST 1 Total CGST 1 Net Amount 26 Round O Recieved Amount 20
ted By		Print Date & Time	C

ul Verma

05-03-2023 04:18 PM

Creat Rahul V

The OP Pharmacy shall ensure that No cut Strips is dispensed to OPD patient except "Scheduled X drug".

Medicine shall be returned in proper condition and in full Strips within the 15 Days from the date of Original bill.

Original bill copy must be produced at the time of medicine return.

Controlled temperature items will not be returned in any condition.

Surgical and Consumables items will not be taken back or exchanged after 7 Days from the date of purchase.

Items should be in Original seal Package.

Please Collect your Bill and Medicine before leaving the counter.