

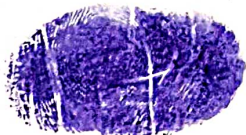
Inter District Transfer Of Judicial Officer

PROFORMA-1

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

I, DR. MANOJ ASARIYA, CMO/CMS, Lucknow, have perused the documents presented before me by Sri Shivam Jayaswal, Addl. Principal Judge and place of posting Family Court Lucknow OR on his behalf by Sri, Relation with the officer, Phone no.

- I. I have personally examined Sri/Smt./Sushri Sharda Jayaswal who is suffering from the disease/syndrome/disability Type II Diabetes mellitus, Hypertension, Coronary Artery disease, ADE Class II, Paroxysmal AF & Bronchial Asthma as diagnosed in SAGGIMS LICO and in my opinion he/she may require frequent hospitalization for treatment/management.
II. I also verify that Sri/Smt./Sushri As above is suffering from the disease/syndrome/disability/disorder As Above, find(s) mention at paragraph no. XII - e of the Annexure-I enclosed herewith.
III. 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 at the districts mentioned by the officer in his/her application submitted to Hon'ble High Court.
IV. The treatment/management of the above-mentioned disease/syndrome/ disability/ disorder in paragraph two above is also available at the districts namely Any district with Multispeciality hospital & tertiary level care.
V. I am aware that this document may be presented by the competent authority/applicant for further use by a competent Medical Board.
VI. This document shall be valid only for months only.



R.T-1

Sharda Jayaswal

Handwritten signature of the Chief Medical Officer.

Signature with seal, (C.M.O./C.M.S.) Name: Dr. Manoj Asariya, ID No., Designation: Chief Medical Officer, Telephone No., Mobile No.

- 1. Concerned District Judge/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.

Inter District Transfer Of Judicial Officer

PROFORMA-1

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

I, DR. MANOJ [Name] AGARWAL CMO/CMS,  
LUCKNOW have perused the documents presented  
before me by Sri Shivan Jayaswal [Name of the  
Officer] UP 5993 ID No. UP 5993 Designation  
Add. Principal Judge and place of posting Family Court Lucknow  
OR on his behalf by Sri — Relation with the officer  
— Phone no. —

I. I have personally examined Sri/Smt./Sushri C. B. Jayaswal

who is suffering from the disease/syndrome/disability Coronary Artery Disease,  
Post PTCA (15.4.2022), Post PPT (03.02.2014) as diagnosed by MAX  
[Name of the disease] Health Care and SGP61  
and in my opinion respectively 2 Pace  
he/she may require frequent hospitalization for treatment/management. make upgradation in

II. I also verify that Sri/Smt./Sushri As above 20.03.2023 at MAX

is suffering from the disease/syndrome/disability/disorder As above

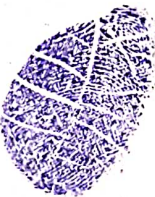
[Name of the disease] As above and the disease(s)  
find(s) mention at paragraph no. XI of the Annexure-I  
enclosed herewith.

III. 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 at the districts mentioned by the  
officer in his/her application submitted to Hon'ble High Court. Already under treatment

IV. The treatment/management of the above-mentioned disease/syndrome/  
disability/ disorder in paragraph two above is also available at the districts  
namely Any district with multispeciality Hospital of tertiary care  
in SGPIMS, KGMU  
Lucknow,

V. I am aware that this document may be presented by the competent  
authority/applicant for further use by a competent Medical Board.

VI. This document shall be valid only for Duration as per months  
annexure I.

L.T.I.  
  
C.B. Jayaswal

Signature with seal,  
(C.M.O./C.M.S.) MB

Name: डॉ० मनोज अग्रवाल  
मुख्य चिकित्सा अधिकारी  
ID No. —  
Designation: —  
Telephone No. —  
Mobile No. —

1. Concerned District Judge/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 document; and documents placed before them for issuance of this document for future reference.