## PROFORMA – I

Remarks/assessment of Chief Medical Officer/Chief Medical along with verified/countersigned page 1	Suporine
along with verified/countersigned papers	ouperintendent

I, Dr. Ramerhinehandra. Gulfa. CMO/CMS, Maintun
have perused the documents presented before me by Sri Ray, Kingan
of the Officer   Sogar, ID No. U.P. 237-6. Designation Add . Civil Judge GCD VA. City
and place of posting Mainpury OR on his behalfly
Sri Relation with the officer
Phone No
I. I have personally examined Sri/Smt./Sushri Sury and who is suffering from the disease/syndrome/disability Delyel Mixed Lovelfuct David botales Caline and in my opinion he/she may require
frequent hospitalization for treatment/management.
II. I also verify that Sri/Smt./Sushri Suryanth is suffering from the disease/syndrome/disability/disorder older cleared speech duly from the disease from the disease(s) find(s) mention at paragraph no 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
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.
tolk.

Name: D. Lamen. Change Gulfa 

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.



## Meenakshi Speech& Hearing Clinics Pvt.Ltd.

## SPEECH & LANGUAGE ASSESSMENT

Date of Assessment

29-07-2023

Name

Master Suryansh

Age/Sex

3.5 Years / Male

Consultant

Self

**Test Done** 

Speech Assessment

**Provisional Diagnosis** 

: Delayed Speech development with mild autistic features

Recommendations

: Speech Therapy

: Follow Up.

Consultant's Comments

Some Singuage The

Audiologists & Speech Language Therapist's Sign.

Consultant's Sign

## **Facilities Available**

PTA, Impedances, Bera, OAE, ECochG, Speech Therapy, Cochlear Implant, Hearing

<u>Aids</u>

Vedanta Bhawan, Opp. Big Bazaar, Delhi Gate, Agra

E-mail: mshcagra@gmail.com

Tel: 0562-4058401, 9557507777

Website:

www.speechhearingaid.com

Meenakshi Speech & Hearing Clinics Pvt. Ltd.

Registered Office: 3, Jagriti Enclave, Main Road, Vikas Marg, Delhi-110092. Tel.: 011-45641234. www.speechhearingaid.com

Hearing Tests - Hearing Aids - Cochlear Implant - Speech Therapy

