



भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India



E-Aadhaar Letter

नामांकन क्रमांक/Enrolment No.: 1008/22778/01243

Padma Prabhudayal Mantri (पदमा प्रभुदयाल मंत्री)

सूचना

W/O: Prabhudayal Mantri, 1/964, mondha inside, Sallu,
Parbhani,
Maharashtra - 431503

- आधार पहचान का प्रमाण है, नागरिकता का नहीं।
- पहचान का प्रमाण ऑनलाइन ऑथेंटिकेशन द्वारा प्राप्त करें।
- यह एक इलेक्ट्रॉनिक प्रक्रिया द्वारा बना हुआ पत्र है।

Date: 15/01/2015

आपका आधार क्रमांक/ Your Aadhaar No.:

7982 4092 7693



INFORMATION

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

आधार-आम आदमी का अधिकार

1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

Digitally signed by Padmaprabhu Mantri
Date: 2015.01.15 10:30:36 IST

- आधार देश भर में मान्य है।
- आधार के लिए आपको एक ही बार नामांकन दर्ज करवाने की आवश्यकता है।
- कृपया अपना नवीनतम मोबाइल नंबर तथा ई-मेल पता दर्ज कराएं, इससे आपको विभिन्न सुविधाएं प्राप्त करने में महूलियत होगी।

- Aadhaar is valid throughout the country.
- You need to enroll only once for Aadhaar.
- Please update your mobile number and e-mail address. This will help you to avail various services in future.



भारत सरकार
GOVERNMENT OF INDIA



भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA



पदमा प्रभुदयाल मंत्री
Padma Prabhudayal Mantri
जन्म तिथि/ DOB: 07/09/1969
महिला / FEMALE



पता:

W/O: प्रभुदयाल मंत्री,
1/964, मोंढा आतील, सेलु,
परभनी,
महाराष्ट्र - 431503

Address:

W/O: Prabhudayal Mantri, 1/964,
mondha inside, Sallu, Parbhani,
Maharashtra - 431503

7982 4092 7693

7982 4092 7693

आधार-आम आदमी का अधिकार

Aadhaar-Aam Admi ka Adhikar

Padma Mantri



आयकर विभाग
INCOME TAX DEPARTMENT

भारत सरकार
GOVT OF INDIA

स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
AJOPM5623J

ITR Name
PRABHUDAYAL TEKCHAND MANTRI

पिता का ITR/Father's Name
TEKCHAND MOHANLAL MANTRI

जन्म की तिथि /
Date of Birth
05/06/1968

17700022

QR Code



भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
Unique Identification Authority of India
Government of India



E-Aadhaar Letter

नॉरपी इन्वॉलमेंट नंबर/Enrolment No.: 10082262944158

Prabhudayal Tekchand Mantri (प्रभुदयाळ टेकचंद मंत्री)
S/O: Tekchand Mantri, G/O Mantri Traders, Mondha,
Saku, Parbhani,
Maharashtra - 431503

तुमचा आधार क्रमांक/Your Aadhaar No.:

2121 4165 8344



- यो कार्ड प्रामाणिकपणे तयार केले आहे, यावर कोणत्याही प्रकारचे बदल करता येणारे नाहीत.
- यो कार्ड प्रामाणिकपणे तयार केले आहे, यावर कोणत्याही प्रकारचे बदल करता येणारे नाहीत.
- हे इलेक्ट्रॉनिकपणे तयार केलेले आहे आणि कोणत्याही प्रकारचे बदल करता येणारे नाहीत.

ENR CHHAA190796

- Aadhaar is a proof of identity, not of citizenship.
- To establish identity, authenticate online.
- This is electronically generated letter.

आधार-सामान्य माणसाचा अधिकार



- आधार देशभरात मान्य आहे.
- आधार माती अल्पतम एकदाच नोंदवून घ्यावी लागते.
- तुमचा आधार कार्डचा मोबाइल नंबर व ई-मेल पत्ता नोंदवा, यामुळे अनेक नवीन सुविधा प्राप्त करू शकता.
- Aadhaar is valid throughout the country.
- You need to enroll only once for Aadhaar.
- Please update your mobile number and email address. This will help you to avail various services in future.

भारत सरकार
GOVERNMENT OF INDIA

प्रभुदयाळ टेकचंद मंत्री
Prabhudayal Tekchand Mantri

जन्म तारीख/DOB: 05/06/1968
पुरुष / MALE

पत्ता:
S/O: टेकचंद मंत्री, सी/ओ मंत्री ट्रेडर्स, मोडहा, सकु, परभणी, महाराष्ट्र - 431503

Address:
S/O Tekchand Mantri, G/O Mantri Traders, Mondha, Saku, Parbhani, Maharashtra - 431503

2121 4165 8344

आधार-सामान्य माणसाचा अधिकार Aadhaar-Aam Admi ka Adhikar

Prabhudayal



साईबाबा नागरी सहकारी बँक मर्या., सेलू
Saibaba Nagari Sahakari Bank Mydt., Sailu
 SAILU : VASANTRAO KHARKAR COMPLEX,, STATION ROAD SAILU,,SAILU - 431503

VALID FOR THREE MONTHS ONLY

XXXXXXXXXX
 D D M M Y Y Y Y
 BEARER

CANCEL X

D. P. F. L. / CHIRAG - AHMEDABAD / CTS-2010
 28/02/2022 17:51 2407 ADMN

Pay

Rupees रुपये

अदा करें।

₹ XXXXXXXXXX

Savings A/c. No.: 0001101010349

IFS Code : UTIB05SNS01

MANTRI PRABHUDAYAL TEKCHANJI

Please sign above

⑆649392⑆ 431822501⑆ 010349⑆ 10

Receipt

Bhakkad Diagnostic Centre

Digital X-Ray & Sonography Clinic

"SMRUTI", Doctor's Colony, Near Bus-stand, Parbhani - 431401 Ph. (02452) 223858

Date : 31-03-2023

R.No. : 1884

Received with thanks from, M./Mrs./S./t. Padma Mantri

The Sum of Rupees ONE THOUSAND & EIGHT HUNDRED ONLY
Towards X-Ray & USG Right Knee Joint Investigation Charges by
Cash/Cheque/Online Transfer Ref. No. _____ Dated _____

₹ 1800/-

*Cheque Subject to Realisation


For Bhakkad Diagnostic Centre
Bhakkad Diagnostic Centre
Doctor's Colony, Near Bus-stand,
Parbhani

GST INVOICE

Inv. No.: A093073 DATE : 31-03-2023 CREDIT BILL

M/S PADMA PRABHUDAYAL MANTRI

ADD: SELU

DR. NAME: DR. ANKIT ASHOKJI MANTRI

ADD: SELU

DR. PADMA PRABHUDAYAL MANTRI
BUS STAND ROAD FARBHANI

E-Mail : vsshande2777@gmail.com
Phone : 9527042777

D.L.No. : 2011-PAK211614.21111-PAK211615.20

GSTIN : 27AASFD2590E1ZB

QTY	BATCH	EXP	M.R.P.	AMOUNT	GST	GST
1	22M2379	9/24	161.00	161.00	6.0	6.0
1	245173	8/25	85.00	85.00	6.0	6.0
1	238303	11/26	180.00	180.00	6.0	6.0
1	C68A002	6/24	320.00	320.00	6.0	6.0
1	1J24609	9/25	23.30	23.30	6.0	6.0
1	1J24522	10/25	28.10	28.10	6.0	6.0
1	114204M1H	3/26	21.00	21.00	6.0	6.0
1	501345	11/26	2.75	2.75	6.0	6.0
1	2K21350	10/25	24.64	24.64	6.0	6.0
1	1A30354	1/25	37.24	74.48	6.0	6.0
2	1J24609	9/25	23.30	46.60	6.0	6.0
2	KF1713604	6/24	30.45	30.45	6.0	6.0
1	2107028	6/26	360.00	360.00	6.0	6.0

Continue Page No.... 3

साइकल टायर्स
 मस्ती सोशालिटी हॉस्पिटल अँड ग्राम.सी.यू.
 गा. सूर्यदेवान रोड, पैथर्वा हटिल जवळ, पारसणी

GST INVOICE

DARYANANDA MEDICAL & PHARMACY

BUS STAND ROAD FARHANI

Inv.No.:A093073 DATE : 31-03-2023 CREDIT BILL
M/S PADMA FRAHIDAYAL MANTRI

E-Mail : vsshinde2777@gmail.com

Phone : 9527042777

D.L.No. : 20M+PAR211614,21M+PAR211615,20

GSTIN : 27AAGFD2590E1Z8

ADD:SELU
DR.NAME:DR.ANKIT ASHOKJI MANTRI
ADD:SELU

QTY	BATCH	EXP	M.R.P.	AMOUNT	SUBT	CGST
2	1234		4.50	9.00	6.0	6.0
2	252053JH11/27		8.50	17.00	6.0	6.0
2	251105JH11/27		10.00	20.00	6.0	6.0
1	310122	12/26	6.00	6.00	6.0	6.0
1	NO.23	4/24	5.20	5.20	6.0	6.0
5	062021	5/26	67.00	335.00	6.0	6.0
1	112021	10/26	66.97	66.97	6.0	6.0
2	109146	10/25	55.00	110.00	6.0	6.0
1	529006	11/25	70.00	70.00	6.0	6.0
1	105451	9/25	185.00	185.00	6.0	6.0
2	181		440.00	88.00	2.5	2.5
1	UNT006		105.00	105.00	9.0	9.0
4	CSV391	11/24	400.00	16.00	2.5	2.5

खाद्यक लाईन
मन्दी स्पेशालिटी हॉस्पिटल अँड ज्य.सी.यू.
रा. स्टॅण्ड-स्टेशन रोड, अंधा हॉटेल जवळ, फारहनी

DENTONADA MEDICAL & PHARMAS

105 STAND ROAD PARBHANI

Inv.No.:A093073 DATE : 31-03-2023 CREDIT BILL

M/S PADMA PRABHADAYAL PHANTRI

ADD:SELU

DR.NAME:DR.ANKIT ASHOKJI PHANTRI

ADD:SELU

GST INVOICE

E-Mail : vsshinde2777@gmail.com

Phone : 9527042777

D.L.No. : 20H-PAR211614,21H-PAR211615,20

GSTIN : 27AASFD2590E1Z8

MR	HSN	DESCRIPTION	QTY	ATCH	EXP	M.R.P.	AMOUNT	SGST	CGST
THE	3002	CAP DISPOSABLE	5	UNI203		6.00	30.00	2.5	2.5
SUN	3004	RANDET ING	1	12202022	1/24	23.39	23.39	6.0	6.0
SUR	3004	SPINAL WHITECAPS NE	1	2107028	6/26	360.00	360.00	6.0	6.0
MET	3004	URINEBAG UROLINE BAG	1	AL22103	8/25	355.00	355.00	6.0	6.0
OLC	3004	FOLYES CATHETER NO.	1	G22051068	4/27	167.00	167.00	6.0	6.0
NEO	3004	LOX Z% ADRENALINE I	1	SU147814412/23		33.65	33.65	6.0	6.0
TRA	3004	GLOVES EXAMIN	4	MED		990.00	39.60	6.0	6.0
KOM	3007	FACE MASK	1	CSV391	11/24	400.00	4.00	2.5	2.5
ZZZ	3004	DISFORMAN 10 M...	1	251105JH111/27		10.00	10.00	6.0	6.0
NEO	3004	LOX-JELY	1	L0620	9/24	39.30	39.30	6.0	6.0
ZZZ	3004	DEXONA INJ	1	NE01068	3/24	11.57	11.57	6.0	6.0
ALT	3004	ELEMENT-F 4.5 INJ	2	C65A402	6/24	320.00	640.00	6.0	6.0
MRB	3004	FLAGYL I.V	2	2K21350	10/25	24.64	49.28	6.0	6.0

Continue Page No..... 5

खासपत लाईन

महो स्पोसालिटी हॉस्पिटल अॅन्ड आय.सी.यू.
वा स्टेच-स्टेशन रोड, अंध्या हॉटेल जवळ, परभनी

DNYANADA MEDICAL & PHARMA

105 STAND ROAD FARBHANI

SGST INVOICE

Inv.No.: 6093073 DATE : 31-03-2023 CREDIT BILL

M/S PADMA PRABHUDAYAL MANTRI

ADD: SELU

DR. NAME: DR. ANKIT ASHOKJI MANTRI

ADD: SELU

E-Mail : vsshinde2777@gmail.com

Phone : 9527042777

D.L.No. : 20MH+FAK211614,21MH+FAK211615,20

GSTIN : 27AASF2590E1Z8

MFR	GEN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SGST	CGST
PHO	3004	NS 100 ML.	2	2K21383	10/25	19.66	39.32	6.0	6.0
ZZZ	3004	RL 250 ML.	2	IA30354	1/25	37.24	74.48	6.0	6.0
SUR	3004	DISOVAN 20ML.	2	114204NH	3/26	21.00	42.00	6.0	6.0
ZZZ	3004	NEEDLE 18 NO	2	501345	11/26	2.75	5.50	6.0	6.0
NEO	3004	NEOMOL IV	1	3851335	11/24	475.00	475.00	6.0	6.0
ICF	3004	CEMAX INJ	2	CRS4655	7/24	55.00	110.00	6.0	6.0
ARI	3004	PANTOF I.V.INJ	1	MF1224267	9/24	54.00	54.00	6.0	6.0

TOTAL	SGST	CGST	TOTAL	AMOUNT
131.42	0.00	0.00	4426.28	4426.28
4205.83	3.29	3.29	263.68	263.68
105.00	0.00	0.00	263.68	263.68
105.00	0.00	0.00	0.00	0.00
105.00	0.00	0.00	4953.96	4953.96



Rs. Four Thousand Nine Hundred Fifty Three and Fifteen Paise Only

*All disputes subject to FARBHANI Jurisdiction only
 *Medicines Ones sold will not be taken back
 *Please consult Dr. Before using the medicine

REC. PHYSICIAN SIGN.

DNYANANDA MEDICAL & PHARMA
BUS STAND ROAD FARHANI

GST INVOICE

Inv.No.:A000209 DATE : 01-04-2023 CREDIT BILL
M/S RADMA FRABHLDAYAL MANTRI
ADD:SELU
DR.NAME:DR RAMESHWAR D NAIK
ADD:SELU

E-Mail : vsshinde2777@gmail.com
Phone : 9527042777
D.L.No. : 20M+FAK211614.21M+FAK211615.20
GSTIN : 27AAAFD2590E1Z8

ITEM	HSN	DESCRIPTION	QTY	BATCH	EXP	M.F.P.	AMOUNT	SGST	CGST
ALE	3004	ENZICTRA DS TAB	10	EY2364010	9/24	474.00	474.00	6.0	6.0
ALI	3004	GULIPAN-D TAB	5	FN23AE01	2/24	126.00	63.00	6.0	6.0
IFC	3004	ZERONOL-P TAB	10	FRW712041	8/24	66.40	66.40	6.0	6.0
TRQ	3004	DYNAPAR AB INJ	1	DZ35463	9/24	33.46	33.46	6.0	6.0
HRD	3004	DISOVAN 2ML	2	1234		4.50	9.00	6.0	6.0

वाइफ लाईन

ITEMS	AMOUNT	DISCOUNT	TOTAL	SGST	CGST	TOTAL AMOUNT
GST 12.00%	645.86	0.00	645.86	0.00	0.00	576.67
GST 18.00%	0.00	0.00	0.00	0.00	0.00	34.60
Rs. Six Hundred Forty Five & Paise Eighty Six Only	0.00	0.00	0.00	0.00	0.00	34.60
*All disputes subject to FARHANI Jurisdiction only	0.00	0.00	0.00	0.00	0.00	0.00
*Medicines Ones sold will not be taken back	0.00	0.00	0.00	0.00	0.00	0.00
*Please consult Dr.Before using the medicines	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL			576.66			645.86



REG. PHARMACEUTIST SIGN.

GST INVOICE

Inv. No. : 99003203 DATE : 01-04-2023 CREDIT BILL

M/S PARIYA FARMUDAVAL MANTRI
ADD: SELU

E-Mail : vshinde2777@gmail.com

Phone : 9527042777

D.L.No. : 2011-FAR211614,2111-FAR211615,20

GSTIN : 27AASFD2590E1Z8

PR	HSN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SGST	CGST
LUF	3004	LUFIN KATADUL CAP	1	J200361	2/24	138.10	13.81	6.0	6.0
USV	3004	ELDSFRIN AV 75 CAP	1	IF23L335	5/24	60.65	4.04	6.0	6.0
RAV	3004	RECAINE 20 TAB	1	KNGR009	8/25	70.00	7.00	6.0	6.0
ALT	3004	ELEMENT-F 4,5 INJ	3	C694402	6/24	320.00	960.00	6.0	6.0
PHD	3004	NS 100 ML	3	2K21383	10/25	19.66	58.98	6.0	6.0
PRB	3004	FLAGYL I.V	3	2K21350	10/25	24.64	73.92	6.0	6.0
NEO	3004	NEOMOL IV	1	383T335	11/24	475.00	475.00	6.0	6.0
ICP	3004	CBTAX INJ	2	CR6A655	7/24	55.00	110.00	6.0	6.0
ARI	3004	PANTOP I.V, INJ	1	PHK224267	9/24	54.00	54.00	6.0	6.0
PHD	3004	NS 100 ML	5	2K21383	10/25	19.66	98.30	6.0	6.0

ITEMS	10	SUB TOTAL	SCHEME	DISCOUNT	TOTAL	SGST	CGST	TOTAL AMOUNT	
GST	0.00			0.00		0.00	0.00	1656.29	
CGST	0.00			0.00		0.00	0.00	99.39	
SGST	0.00			0.00		0.00	0.00	99.39	
								99.39	0.00
								0.00	1855.05



खाद्यफ लाईन्स

सुरक्षा संचालनी ही संस्थित अन्वय.सी.डी.

सुरक्षा संचालनी रोड, शिवाजी नगर, मुंबई, महाराष्ट्र

Rs. One Thousand Eight Hundred Fifty Five & Paise Only
*All disputes subject to PARIYAN Jurisdiction
*Medicines Ones sold will not be taken back
*Please consult Dr. Before using the medicines

REG. PHARMACIST SIGN.

DR. RAMESHWAR D. NAIK
BUS STAND ROAD PARBHANI

Inv. No. : 4000518

DATE : 02-04-2023 CREDIT BILL

M/S. PADMA FRESHDAYAL MANTRI

ADD: SELU

DR. NAME: DR. RAMESHWAR D NAIK

ADD: SELU

E-Mail : vssbinda2777@gmail.com

Phone : 9527042777

D.L.No. : 20M-FAR211614.21M-FAR211615.20

GSTIN : 27AASF02590E1Z8

PER	HSN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SST	CGST
ALT	3004	ELEMENT-F 4.5 INJ	3	C65A902	6/24	320.00	960.00	6.0	6.0
PHO	3004	NS 100 ML	3	2K21383	10/25	19.66	58.98	6.0	6.0
NEO	3004	NEOPOL IV	1	3851335	11/24	475.00	475.00	6.0	6.0
ICP	3004	CEPTAX INJ	2	CR5A655	7/24	55.00	110.00	6.0	6.0
ARI	3004	PANTOP I.V. INJ	1	MPK224267	9/24	54.00	54.00	6.0	6.0
PHO	3004	NS 100 ML	5	2K21383	10/25	19.66	98.30	6.0	6.0

LTRES	6	SUB TOTAL	SCHEME DISCOUNT	TOTAL	SST	CGST	TOTAL AMOUNT	1568.10
GST	5.00%	0.00	0.00	0.00	0.00	0.00	SST PAYABLE	94.09
GST	5.00%	0.00	0.00	0.00	0.00	0.00	CGST PAYABLE	94.09
GST	5.00%	0.00	0.00	1568.10	94.09	0.00	CR/DR NOTE	0.00
GST	5.00%	0.00	0.00	0.00	0.00	0.00	PARTY TOTAL	1756.28



REG. PHARMACEUTICAL SIGN.

परी सौमिली हॉस्पिटल वेंचर्स प्रायव्ही. लु.
 *All disputes subject to PARBHANI Jurisdiction only
 *Medicines Ones sold will not be taken back
 *Please consult Dr. Before using the medicines

DR. ANKIT ASHOKJI MANTRI
BUS STAND ROAD FARHANI

Inv. No.: 6000647 DATE: 03-04-2023 CREDIT BILL

E-Mail: vsshinde2777@gmail.com
Phone: 9527042777
D.L. No.: 20MH-FAR211614, 21MH-FAR211615, 20
GSTIN: 27AAGFD2590E1Z8

M/S PADMA FARHADAYAL MANTRI
ADD: SELU
DR. NAME: DR. ANKIT ASHOKJI MANTRI
ADD: SELU

MR	HSN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SGST	CESS
SAR	3004	ETUDY 90 TAB	5	MDH0123	9/24	215.94	107.97	6.0	6.0
SAR	3004	ETUDY 90 TAB	5	MDX0003	12/24	215.94	107.97	6.0	6.0
MUL	3004	SURGICAL GLOVES NO	1	062021	5/26	67.00	67.00	6.0	6.0
NOV	3004	RIPSON GAUZE	2	329006	11/25	70.00	140.00	6.0	6.0
GSK	3004	T-RACT OINT	1	KN7W	1/24	147.35	147.35	6.0	6.0
ALT	3004	ELEMENT-F 4.5 INJ	3	C6SAA02	6/24	320.00	960.00	6.0	6.0
FHD	3004	NS 100 ML	5	2K21383	10/25	19.66	98.30	6.0	6.0
ICF	3004	DBMAX INJ	2	CBSAG55	7/24	55.00	110.00	6.0	6.0
ARI	3004	FANTOP I.V. INJ	1	MFK224267	9/24	54.00	54.00	6.0	6.0

LTMS	SCHEME	DISCOUNT	TOTAL	SGST	CESS	TOTAL AMOUNT
0.00	0.00	0.00	0.00	0.00	0.00	1600.51
0.00	0.00	0.00	0.00	0.00	0.00	96.02
0.00	0.00	0.00	0.00	0.00	0.00	96.02
0.00	0.00	0.00	1600.55	0.00	0.00	0.00
18.00%	0.00	0.00	0.00	0.00	0.00	1792.59



Rs. One Thousand Seven Hundred Ninety Two & Paise Only
*All disputes subject to FARHANI Jurisdiction only
*Medicines Ones sold will not be taken back
*Please consult Dr. Before using the medicines

REG. PHARMACIST SIGN.

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 BUS STAND ROAD PAREHANI
 D.L.No. : 2014-FAR211614, 21PH-FAR211615, 20
 GSTIN : 27AA5FD2590E1Z8

DANYADA MEDICAL
 Bus Stand Road Parehani
 D.L.No. : 2014-FAR211614, 21PH-FAR211615, 20
 GSTIN : 27AA5FD2590E1Z8

Inv.No. : 99000830 DATE : 04-04-2023 CREDIT BILL
 M/S PADMA PRATHUDAYAL MANTRI
 ADD:SELU
 DR. NAME: DR RAMESHVAR D NAIK
 ADD:SELU

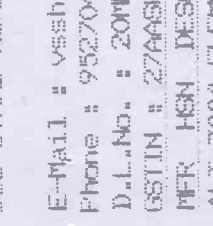
REF	HSN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SGST	CGST
AL1	3004	ELEMENT-P 4.5 INJ	3	C65AA02	6/24	320.00	960.00	6.0	6.0
PH0	3004	NS 100 ML	5	2K21383	10/25	19.66	98.30	6.0	6.0
ICP	3004	CHIFAX INJ	2	CB5AG55	7/24	55.00	110.00	6.0	6.0
ARI	3004	PANTOP I.V. INJ	1	MF1K224267	9/24	54.00	54.00	6.0	6.0

E-Mail : vsshinde2777@gmail.com
 Phone : 9527042777

Rs. One Thousand Two Hundred Twenty Two & Paise Thirty Only
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TIMES 4 SUR SCHEME DISCOUNT 0.00
 GST 0.00
 GST 0.00
 GST 0.00
 GST 0.00

CGST: TOTAL AMOUNT: 1091.33
 0.00; SGST PAYABLE: 65.48
 0.00; CGST PAYABLE: 65.48
 65.48; DR/DR NOTE : 0.00
 0.00; PARTY TOTAL : 1222.30



REG. PAREHANI DIST. HYDR.

DUYNADA MEDICALS
BUS STAND ROAD PARBHANI

GST INVOICE
Inv.No.: A001127 DATE: 04-04-2023 CREDIT BILL

E-Mail : vsshinde2777@gmail.com
Phone : 9527042777
D.L.No. : 20M-PAR211614.21M-PAR211615.20
GSTIN : 27AA65FD2590E1Z8

M/S PADMA PRABHUDAYAL NANTRI
ADD: SELU
DR. NAME: DR RAMESHVAR D NAIK
ADD: SELU

ITEMS	HSN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SGST	CGST
MAC 3004		ORATIL 500MG TAB	10	LOC22248	5/25	475.00	475.00	6.0	6.0
BAV 3004		RECAINE 20 TAB	5	KMBR009	8/25	70.00	35.00	6.0	6.0
IPC 3004		ZERODOL-SP TAB	5	FND033008	8/24	118.30	59.15	6.0	6.0
MAC 3004		BIO D3 MAX CAP	5	KBBZ2115A11	1/25	390.00	130.00	6.0	6.0

ITEMS	HSN	DESCRIPTION	QTY	BATCH	EXP	M.R.P.	AMOUNT	SGST	CGST
MAC 3004		ORATIL 500MG TAB	10	LOC22248	5/25	475.00	475.00	6.0	6.0
BAV 3004		RECAINE 20 TAB	5	KMBR009	8/25	70.00	35.00	6.0	6.0
IPC 3004		ZERODOL-SP TAB	5	FND033008	8/24	118.30	59.15	6.0	6.0
MAC 3004		BIO D3 MAX CAP	5	KBBZ2115A11	1/25	390.00	130.00	6.0	6.0

CGST: TOTAL AMOUNT: 624.24
0.00: SGST PAYABLE: 37.46
0.00: CGST PAYABLE: 37.46
0.00: DR/DR NOTE: 0.00
0.00: PARTY TOTAL: 699.15



Dr. *[Signature]*
REG. PHARMACIST SIGH.

Rs. Six Hundred Ninety Nine & Paise Fifteen Only
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डॉ. रामेश्वर नाईक

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Reg No.2021/02/0740

Nair Hospital, Mumbai

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पेशंटचे नाव :

Padma Montei

दिनांक : ०५ / ०५ / २०२३

Inj. Element P ५.५ gm — ३

Inj. CB Max — २

Inj. Pantop — १

Tab. Obeatil 500 mg — १०

Tab. Pexair २० — ५

Tab. Zeeodol-OP — ५

Cap. Bio Ps — ५

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पेशंटचे नाव :

Pachma Manoj

दिनांक : 03/03/2023

Inj. Element P 4.5 gm — 3

Inj. CB Maxo — 2

Inj. Pantop — 1

Tab. Etody 90 — 10

Surgical Gloves — 1

Bipson Gauze — 2

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पेशंटचे नाव :

Padma Manjari

दिनांक : 02/03/2023

Inj. Element P 4.5 gm — 3
Inj. CB Max — 2
Inj. parlop — 1
IV - 100 ml NO — 3 to 5
IV - Normal — 1

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पेशंटचे नाव : Padma Mantei.

दिनांक : 01/06/2023

Tab - Relenil 20 — 1
Cap - Edopeid AV-75 — 1
Cap - Lupin (cabadol) — 1
Tab - Enziclear DS — 10
Tab - Groidpar D — 5
Tab - Teedol - P. — 10
Inj. Dynabac 100 — 1
Inj. Element P 4.5 gm — 3
Inj. CB Max — 2
Inj. parlop — 1
IV - 100 ml — 8
IV - Hagey 1 — 3
IV - Nemo 1 — 1

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पेशंटचे नाव :

Padma Mantel

दिनांक : 31/03/2028

Inj - Ramcet — 1
Inj - Dexona — 1
Inj - Element P. 4.5 gm — 2
Inj - parlop — 1
Inj - CB Max — 2
Iv - 100 ml NO — 2
Iv - 250 ml RL — 2
20 cc dispo — 2
10 cc dispo — 1
Needle 18 NO — 2
Iv - Haggyl — 2
spinal — 1
Urin bag — 1
Folyc catheter — 1
Lax 2-1 — 1
Gloves — 4
Mask — 1
Lax jelly — 1
Iv Neomol — 1

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पेशंटचे नाव :

Padma Mantei.

दिनांक : 31/03/2028

- * 2ce dispo — 2
- 5ce dispo — 2
- 10ce dispo — 2
- Blade NO 23 — 1
- Blade NO 15 — 1
- Surgical Gloves NO — 6
- Bipod pad 10 cm — 2
- Bipod ABD pad 25x4 — 1
- Bandage 10 cm — 2
- poly plain — 1
- Face Mask — 4

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पेशंटचे नाव :

Padma Mantel

दिनांक : ०१/०३/२०२३

Medistam २२ NO — 1
Fixfast — 1
Iv-0.5 — 1
Iv-Element P 4.5gm — 1
Iv-250 ml NS — 3
Iv-250 ml DHO — 1
Iv-250 ml RL — 1
Needle 18 NO — 1
Iv-Flagyl — 1
Anakin 0.5% — 1
spinal Whitecell No- 1

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"SMRUTI", Doctor's Colony, Near Bus Stand, Parbhani -431 401 Ph.: (02452) 223858

X-RAY RIGHT KNEE JOINT A-P & LAT. VIEWS

Ref by -Dr. Mahesh Kade Sir
MS. DNB. (Ortho.) MNAMS.

Pt's Name—Mrs. Padma Mantri
Date --- 31-Mar-23

No e/o fracture of the bones around the Right Knee joint. No e/o erosion of the bones or any osteolytic lesion. The Knee joint space is normal. There are no obvious osteophytosis. The patella is intact. Soft tissue thickening is seen around knee joint.

OPINION ----- No bony pathology.

With Regards

Abhijeet

DR. ABHIJEET N. BHAKKAD

M.B.B.S., D.M.R.E.

MMC Reg No. 2010/10/3018

Consultant Radiologist

DR. N.K. BHAKKAD

M.D. (Radiology) D.M.R.D

Consultant Radiologist

MMC Reg No. 2012/06/1807



BHAKKAD

DIAGNOSTIC CENTRE
DIGITAL X-RAY & SONOGRAPHY CLINIC

"SMRUTI", Doctor's Colony, Near Bus Stand, Parbhani -431 401 Ph.: (02452) 223858

RIGHT KNEE JOINT SONOGRAPHY

Ref by :- Dr. Mahesh Kade Sir
MS. DNB. (Ortho.) MNAMS.

Pt's Name :- Mrs. Padma Mantri
Date :- 31-Mar-23

Significant fluid collection is seen around Right knee joint. Few septae & echos are seen it. It is seen to extend in medial as well as lateral recess. It appears to be abscess.

Surrounding subcutaneous thickening is seen.

Patella appears intact. There is no abnormal collection in pre-patellar bursa.

Popliteal fossa appears unremarkable.

OPINION :- Right knee joint collection appears to be abscess (around 140 cc) with surrounding inflammatory changes.

With Regards

Abhijeet

DR. ABHIJEET N. BHAKKAD

M.B.B.S., D.M.R.E.

MMC Reg No. 2010/10/3018

Consultant Radiologist

DR. N.K. BHAKKAD

M.D. (Radiology) D.M.R.D

Consultant Radiologist

MMC Reg No. 2012/06/1807

BHAKKAD DIAGNOSTIC CENTRE

Smurti, Doctors Colony, Near Bus Stand

,PARBHANI - 431401

Phone No: 223858

Name: Mrs. Padma Mantri 54 Y

Age: 54 Years

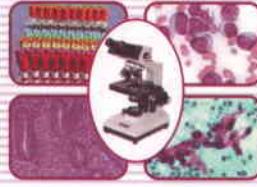
Sex: F

Ref By: Dr. ANKIT MANTRI MBBS.DA

Study: Musculoskeletal Sonography

Date : 31 Mar 23





PATIENT NAME : Mrs. PADMA MANTRI

AGE / SEX : 0 Year / Female

REFERRING DR. : Dr. Ankit Mantri Sir (MBBS D.A.)

REG.No./LAB No : 38133 / 98122

RESULT DATE : 03/04/2023

C. R. P. TEST

TEST	RESULT	UNIT	REFERENCE RANGE
C.R.P	28.19	mg/L	0 - 6
METHOD	Turbilatex Quantitative Estimation		

COMPLETE BLOOD COUNT (CBC)

TEST	RESULT	UNIT	NORMAL RANGE
Hemoglobin	9.4	g/dL	12 - 15
RBC Count	3.87	Millions/ μ L	3.8 - 5.3
WBC Count	8000	/cumm	4000 - 11000
Platelet Count	276000	/cumm	150000 - 400000
DEFFERANTIAL COUNT			
Granulocyte	60	%	40 - 75
Lymphocyte	36	%	20 - 45
Monocyte	3	%	0 - 9
Eosinophils	1	%	1 - 6
Basophils	0	%	0 - 1
RBC & Platelet Indices			
Hematocrit	30.7	%	35 - 42
MCV	79.3	fL	80 - 100
MCH	25.3	pg	27 - 32
MCHC	30.9	g/dL	32 - 36
RDW	14.0	%	11.5 - 14.5
PCT	0.12	%	0.08 - 1
MPV	4.4	fL	6 - 10
PDW	16.9	%	10 - 15

With Regards


Dr. Snehal Kade
MBBS, MD (Pathology)

Saarth

Pathology Diagnostic



Dr.Mrs. Snehal Mahesh Kade (Bhakkad)

MBBS, MD (Pathology)
Reg. No. 2006/09/3079

Dudhagaonkar Complex, Besides Marathwada Machineries
Dr. Hedgewar Marg, Parbhani - 431401
Mobile : +917745821444, Email : snehalnb@yahoo.com

Name Of Patient : Mrs. Padma Mantri

Date : 03/ 04/ 2023

Receipt No. : 38133

Bill Receipt

Date	Investigation	Charges
31/ 03/ 2023	Minor Surgical profile with CRP	1150/-
31/ 03/ 2023	Pus for Culture and sensitivity	1200/-
03/ 04/ 2023	CBC, CRP	450/-
	Final Total	2800/-
Rs. Two Thousand and Eight Hundred only.		

Saarth Pathology Dignostics
Dr. Hedgewar Marg, Parbhani-431401
Contact No: 77 45 82 14 44

Dr. Snehal Kade
MBBS, MD (Pathology)

GOVT. OF MAHARASHTRA



Public Health Department

या दि बाँध्ये नर्सिंग होम्स रजिस्ट्रेशन अक्टच्या कालम ५ अन्वये दिलेले
रजिस्ट्रेशन सर्टिफिकेट
Certificate of Registration under Section 5 of Bombay the Nursing Home
Registration Act, 1949

(नियम ५ अन्वये) (Under Rule 5)

क्रमांक No. : ०३

दि बाँध्ये नर्सिंग होम रजिस्ट्रेशन अक्ट, १९४९ अन्वये श्री/श्रीमती डा. रामेश्वर दयानोबा नाईक
एम.बी.बी.एस.एम.डी. (मेडिसिन) यांचे लाईफ लाईन मल्टी स्पेशलिटी हॉस्पिटल
येथील नर्सिंग होम / मॅटर्निटी होम रजिस्टर केले असून सदरचे नर्सिंग होम व मॅटर्निटी होम चालविण्यास
परवाना देण्यात येत आहे.

This is to Certify that Shri / Shrimati Dr. Rameshwar Dnyanoba Naik
M.B.B.S.M.D. (Medicine) Has been registered under the Bombay
Nursing Homes Registration Act, 1949 in respect of LIFE LINE Multi speciality
Hospital & ICU Situated at Bus stand Near Parbhani
and has been authorised to carry on the said Nursing Home.

रजिस्ट्रेशन क्र. ०३ प्रसूतीसाठी — कॉट्स
Registration No. Maternity Cots

रजिस्ट्रेशन दि. 26-02-2018 इतर रुग्णांसाठी 35 कॉट्स
Date Registration Other Nursing Patient Cots

ठिकाण Place : PARBHANI

सर्टिफिकेट दिल्याचा दिनांक Date of issue of Certificate :

सदरचे सर्टिफिकेट ३१ मार्च 2024 पर्यंत कार्यवाहीत राहिल.

this Certificate shall be valid up to 31st March 2024

Devt.

MOH

Parbhani City Municipal Corporation, Parbhani



लाइफ लाईन

मल्टी स्पेशालिटी हॉस्पिटल व आय.सी.यु.

बस स्टॅंड ते रेल्वे स्टेशन रोड, हॉटेल ऐश्वर्या जवळ, परभणी. ☎: (02452) 220530

डॉ. रामेश्वर नाईक

M.B.B.S., M.D. (Medicine)
B.J. Medical College, Pune
C.C.G.H.E. Baltimore (U.S.A.)
हृदयरोग, मधुमेह, किडनी व

डॉ. ज्ञानेश्वर हरबक

M.B.B.S., D.A.
Ruby Hall Clinic, Pune
अतिदक्षता तज्ञ व भुलतज्ञ
(Intensivist)

डॉ. अंकित मंत्री

M.B.B.S., D.A.
Nair Hospital, Mumbai
अतिदक्षता तज्ञ व भुलतज्ञ
(Intensivist)

DISCHARGE CARD

Name of Patient : Padma Azabhudayal Mantei

I.P.D.Reg.No. M.L.C.No.

Address :

Age : 53 Sex : M Weight : 60

Date of Admission : 31/3/23

Time : 12:30 AM/PM

Date of Discharge : 4/4/23

Time : 5:30 AM/PM

DIAGNOSIS

- Rt knee Abscess
- I + D Done.

Chief Complaints & Physical Examination :

40 Rt knee pain
H/O fall 8 days back
40 fever & chills
Difficultly to walk } 3-4 dr

M

Feb

24.114

27 96

100/74

ECG:

2-D DCHO:

reports a Hessel
file

X-ray

Investigation

Reports attached in
file

Treatment Given

I	Pipzohis	—
I	Hagyl	—
I	Neomeel	
IV	Fleecids	SOS
T	zeeodol sp	—
T	Enzidea DS	—
I	comup	—
I	pautep	—

Pt Required : CPR/DCS/Vasopressor/Ventilator/
Blood Transfusion/Thrombolysis/ Cardiac Pacing/
Central Line/ ICD

Treatment Advised on Discharge :

B

T. Cetuximab 500

1 —————

T. Zoledol sp 1 ————

T. Emzictra DS 1 ————

T. Pexidol 20 1 ————

T. Bio D₃ My 0 ————

Adv

- Flu Attentive
- Dressing
- Avoid wt bearing over pt foot
- Exercise (knee)

[Signature]



लाइफ लाईन

मल्टी स्पेशलिटी हॉस्पिटल व आर.बी.यु.

अनार्वट्ट ते वेल्हे अटेडन बोड, ऐश्वर्या हॉटेल जवळ, परभणी.

फोन : (02452) 295200

Hospital Copy

FINAL BILL

BILL NUMBER : 3135

UHID : LL-014694

DATE : 07/04/2023

PATIENT NAME : MR. PADMA PRABHUDAYAL MANTRI

MLC :- NO

AGE : 53 Year, **Mo.No.:-**9422175275

ADDRESS : A/P PUSHPTEK VILLA, TAHSIL ROAD, SELU DIST PARBHANI

SOURCE OF PAY : ROUTINE

CONSULTATION DOCTOR: Dr RAMESHWAR NAIK / DR. ANKIT MANTRI

DATE OF ADMISSION : 31/03/2023 12:30:00PM

DATE OF DISCHARGE : 07/04/2023 05:30 pm

SR.NO.	PARTICULARS	Rate	No.	AMOUNT
1	ANESTHICIA CHARGES Anesthesia Charges	4000	1	4000
2	O T CHARGES. O T Charges.	2000	1	2000
3	REGISTRATION CHARGES Registration Charges	200	1	200
4	SPECIAL ROOM BED CHARGES SPECIAL ROOM BED CHARGES	1800	4	7200
5	SPECIAL ROOM DOCTOR VISIT CHARGES SPECIAL ROOM DOCTOR VISIT CHARGES	300	4	1200
6	SPECIAL ROOM NURSING CHARGES SPECIAL ROOM NURSING CHARGES	300	4	1200
7	SURGEON CHARGES Surgeon Charges	16000	1	16000

Amount in words Rs :- THIRTY-ONE THOUSAND EIGHT HUNDRED ONLY

GROSS AMOUNT :	31800.00
	0.00
TOTAL AMOUNT :	31800.00
ADVANCE / PAID AMOUNT :	31800.00
BALANCE :	0.00

Remarks :- TOTAL PAYMENT PAID

For Life Line Multispeciality Hospital



Received with thanks !

Print by :- Piraji Zade

Print Date & Time :- 07/04/2023 @ 12:48:22PM

Rec. No.	Date	Payment Type	Amount
3409	07/04/2023	Cash	+ 31800
Total Amount -			31800.00

लाइफ लाईन

मल्टी स्पेशलिटी हॉस्पिटल व ग्राय.सी.यु.
ऐश्वर्या हॉटेल जयळ, स्टेशन रोड, पत्रभणी.
फोन : (02452) 220530

Receipts

Receipt No. : 3409

Date : 07/04/2023 12:44 PM

UHID / IPD Reg. No.: LL-014694 / 3135

Received with thank from : **MR. PADMA PRABHUDAYAL MANTRI**

Payment type : Cash

Remarks : TOTAL PAYMENT PAID

Amount In Words :- THIRTY-ONE THOUSAND EIGHT HUNDRED ONLY

Rs. : 31800.00 /-

Checked By

Signature

Print By : Piraji Zade

Print Date & Time :- 07/04/2023 12:48:10PM

For Life Line Hospital






LIFE LINE MULTI SPECIALITY HOSPITAL & I.C.U.

Near Bus Stand, Station Road, Parbhani

Name _____ I.P.D. No. _____
Dr.'s Name _____ Ward _____ Cot/Room No. _____

Date	Clinical Notes	Treatment
04/04/2020	SIB Dr. Herbelle Ⓟ Knee absent post. E and D Atuple No any complaint BP- 130/80 SpO ₂ - 97 PR - 80	 R 091
04/04/2020	SIB Dr. Mantri Ⓟ Knee Absent post. E and D Atuple No any complaint BP- 130/80 SpO ₂ - 97 PR - 77	 R 0911 h

Date	Clinical Notes	Treatment
<p style="text-align: center;">HOSPITAL & I.C.U.</p>	<p style="text-align: center;">Near Bus Stand, Station Road, Parkland</p>	
<p>31/4/23</p>	<p>MSB DE A Murtel MSB DE A Murtel</p>	<p>Name</p>
<p></p>	<p>MSB DE A Murtel</p>	<p>One</p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p><u>Octuo Opinion</u></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>
<p></p>	<p>MSB DE A Murtel</p>	<p></p>




LIFE LINE MULTI SPECIALITY HOSPITAL & I.C.U.

Near Bus Stand, Station Road, Parbhani

Name _____ I.P.D. No. _____

Dr.'s Name _____ Ward _____ Cot/Room No. _____

Date	Clinical Notes	Treatment
31/8/23 12:40 PM	SIB Dr. Ankit	
	H/O fall	
	RT knee cellulitis	Abscess (15cc)
	M	
	Feb	B
	AP-114	
	70, 96	I Piprohis
	8. 100/70	I Flagyl
Ortho opinion	SIB Dr. Mahesh	I
	Knee	Knee (Ortho)
	H/O Fall	8 days back
	Knee diffuse swelling	prolapsed
	Knee abscess	
	Adm	
	Arthrogram	K. Chhabra

Date	Clinical Notes	Treatment
11/12/23	<p style="text-align: center;">HOSPITAL & CLINIC</p> <p style="text-align: center;">Near Bus Stand, Station Road, Parbhani</p>	
	<p>Diagnosis: Cellulitis & Abscess</p>	
	<p>Ward: ...</p>	
	<p>Dr. D. D. Dore</p>	
	<p>M</p>	
	<p>Atch</p>	
	<p>PP90</p>	<p>I Pipzoh's</p>
	<p>797</p>	
	<p>B-110174</p>	<p>I Hageyl</p>
		<p>T Zeeodol P</p>
		<p>T emictrals</p>
		<p>T Pevn P</p>
		<p>IN fluids</p>
		<p>SOS</p>
		<p>IN mol SOS</p>



LIFE LINE MULTI SPECIALITY HOSPITAL & I.C.U.

Near Bus Stand, Station Road, Parbhani

Name _____ I.P.D. No. _____
 Dr.'s Name _____ Ward _____ Cot/Room No. _____

Date	Clinical Notes	Treatment
3/18/23 12:40 PM	SIB Dr. Ankit	
	H/O fall Rt knee cellulitis	Abscess (15cc)
	Ml Feb	B
	PP-114 70, 96	I Ripzohis
	P-100/70	I Flagyl
ortho opinion		I
3/20/2023	SIB Dr. Mahesh	Kade (ortho)
	H/O Fall Knee diffuse swelling	8 days back swelling / abscess
	Knee abscess Acw	Arthrogram (debridement)



LIFE LINE MULTI SPECIALITY HOSPITAL & I.C.U.

ADMISSION & HISTORY SHEET

IPO No. _____
MLC No. _____

Name: Mrs. Padma Prabhudyal Mantori

Address: Pushp Tek Villa, Tahsil Road, Selu

Contact No. 9422175275 Age 59 Yrs. Sex F

Date of Admission: 31/3/23 Time: 12:30 AM/PM (PM)

Date of Discharge: 4/3/23 Time 5:30 AM/PM (PM)

Occupation: _____ Days in Hospital: _____

Under Care of Dr. _____ Referred by: _____

Chief Complains: cto pt knee swelling ... 8 dys.

H/o ~~drop~~ ~~into~~ fall ... 8 dys back

cto fever & chills

Bochhe ∴ 3-4 dys.

Genuly.

Pasto H/o.DM- _____ TB- ✓ Allergy- _____

HT- _____ COPD-BA _____ Surgery- _____

Present Medicine- _____

O/E HR 118 BP 100/70 SPO₂ 96 % RR 24

Pallor ✓ Icterus ✓ Clubbing ✓

Cynosis ✓ Odema ✓ LN Pathry _____

JVP ✓ Temp. ++

RS:

A&B

DIAGNOSTIC SHEET

L/E → (R) knee

diffuse edema ⊕

CVS:

S/S ⊕

redness ⊕

ROM severely painful

PIA:

soft

Non tender

CNS:

com

oriented

ECG:

NSP

BSL:

138

Investigation Done :

low H/P

USG = s/o (R) knee diffuse inflammation & abscess ⊕

Investigation Advised :

Provisional Diagnosis :

(R) knee cellulitis & abscess

Remarks :

Clipping
Obv
Temp



PATIENT NAME : Mrs. PADMA MANTRI

AGE / SEX : 52 Year / Female

REFERRING DR. : Dr. Mahesh R. Kade (MS DNB Ortho MNAMS)

REG.No./LAB No. : 38099 / 97641

RESULT DATE : 31/03/2023

COMPLETE BLOOD COUNT (CBC)

TEST	RESULT		NORMAL RANGE
Hemoglobin	10.5	g/dL	12 - 15
RBC Count	4.21	Millions/ μ L	3.8 - 5.3
WBC Count	10500	/cumm	4000 - 11000
Platelet Count	261000	/cumm	150000 - 400000

DEFFERANTIAL COUNT

Granulocyte	80	%	40 - 75
Lymphocyte	14	%	20 - 45
Monocyte	4	%	0 - 9
Eosinophils	2	%	1 - 6
Basophils	0	%	0 - 1

RBC & Platelet Indices

Hematocrit	32.9	%	35 - 42
MCV	78.1	fL	80 - 100
MCH	24.9	pg	27 - 32
MCHC	31.9	g/dL	32 - 36
RDW	13.7	%	11.5 - 14.5
PCT	0.13	%	0.08 - 1
MPV	4.8	fL	6 - 10
PDW	17.8	%	10 - 15

With Regards


Dr. Snehal Kade
MBBS, MD (Pathology)



PATIENT NAME : Mrs. PADMA MANTRI

AGE / SEX : 52 Year / Female

REFERING DR. : Dr. Mahesh R. Kade (MS DNB Ortho MNAMS)

REG.No./LAB No .: 38099 / 98032

RESULT DATE : 31/03/2023

C. R. P. TEST

TEST	RESULT	UNIT	REFERENCE RANGE
C.R.P	78.45	mg/L	0 - 6
METHOD	Turbilatex Quantitative Estimation		

RANDOM BLOOD SUGAR

TEST	RESULT	UNIT	NORMAL RANGE
RANDOM BLOOD SUGAR	75.4	mg/dl	70 - 140
METHOD : GOD - POD Method End Point .			

SERUM CREATININE

TEST	RESULT	UNIT	REFERENCE RANGE
Serum Creatinine	1.03	Mg/dl	0.7 - 1.4
(Jaffe's Method, Initial Rate)	.	Females:	0.6 - 1.3


SERUM SGOT

TEST	RESULT	Unit	NORMAL RANGE
Serum G.O.T	43.8	U/L	5 - 55

SGPT

TEST	RESULT	Unit	NORMAL RANGE
SERUM G.P.T.	38.9	U/L	9 - 45

With Regards


Dr. Snehal Kade
MBBS, MD (Pathology)



PATIENT NAME : Mrs. PADMA MANTRI

AGE / SEX : 52 Year / Female

REFERRING DR. : Dr. Mahesh R. Kade (MS DNB Ortho MNAMS)

REG.No./LAB No. : 38099 / 98038

RESULT DATE : 31/03/2023

AUSTRALIA ANTIGEN (HBsAg)

TEST

Australia Antigen (HBsAg)

METHOD :

THIS IS ONLY A SCREENING TEST POSITIVE RESULTS MUST BE CONFIRMED BY FUTHER TESTING.

RESULT

Non-reactive

by Immunochromatographic assay

HIV I & II

TEST

HIV antibodies (I & II)

Method :-

DONE BY RAPID CHROMATOGRAPHIC QUALITATIVE IMMUNOASSAY

FOR DETECTION OF HIV I & II ANTIBODIES IN HUMAN SERUM / PLASMA.

NOTE :-

Positive results indicate presence of antibodies to hiv virus. False positive results are also seen

It is recommended to follow up a positive result with a specific test like western blot.

Negative result does not always eliminate risk of hiv infection. A Window period (where the test may come negative) is 3weeks to 3 months after infection.

The patient is advised to undergo pre-test and post-test counselling with the reffering physician.

RESULT

Non-reactive for HIV I & II

With Regards

Dr. Snehal Kade
MBBS, MD (Pathology)