



Patient Name: Mr. Saghir Ahmed Age / Sex:

59 year(s) 11 month(s) 16 day(s) /Male

Maxid:

LKOW.11014337 Doctor Name: Dr.ABHISHEK SRIVASTAVA

Department Neurology

Page 1 of 1 Location:

Max-Lucknow

Friday, April 18, 2025 10:20 AM SLCS328660

Invoice No: Referred By: SELF Speciality

Date:

Neurologist

Allergy. No Known Allergy

131-124/72 PR-662

H7-

Hypermsvie Gaylianic

bleed.

Dr.ABHISHEK SRIVASTAVA

Director

- 40 ---

MD, DM (Neurology)

State Registration No. :UPMC- 843521

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Max Super Speciality Hospital, 100 House sample collection and medicine delivery, call 8744 888 888

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Repd Office 7th Floor, Acc Studio, Plot No. 018

Sector 126, Gautam Budh Nager, Noide - 201 301, U.P. Viraj Knano, Gomb Negar, Lucknow Tel. +91-522-6780 001, 6780 002

OPD Appt. +91-522-5782 159

www.maxhealthcare.in

E: secretarial@maxhealthcare.com

(CIN: U86100UP2023PTC188097)







Patient Name: Mr. Saghir Ahmed

Age / Sex: MaxId:

59 year(s) 11 month(s) 16 day(s) /Male LKOW.11014337

Doctor Name: Dr.ABHISHEK SRIVASTAVA

Department Neurology Page 1 of 1

Location:

Max-Lucknow Date: Friday, May 30, 2025 10:20 AM

Invoice No: SLCS328660 Referred By: SELF

Speciality Neurologist

Allergy: No Known Allergy

138 - 124/72

Hyperbusie Gaylionic bleed.

Dr.ABHISHEK SRIVASTAVA

Director

MD, DM (Neurology)

State Registration No. :UPMC- 043521

500 1 00 SA

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Lonazep U.35

30511



Max Super Speciality Hospital, Lucknow (A Unit of Starlit Medical Centre Private Limited) Viraj Khand, Gomti Nagar, Lucknow -226010, U.P Tel.: +91-5226780001,6780002



5

Bill of Supply

5211014337

Patient	Name	± M	r. SAGHIR A	HMED		Bill Date		18/04/2025 10	1:20	
Age/Sex : 59 years 11 n			onths / Male						Pag	
Address Email ID Patient PAN/Form 60 Referred By		: 551 G/40 OLD SAFDARI KHERA ALAMBACH LucknowLucknow : INFO@MAXHEALTHCARE.COM :				MaxId LKOW.110143		23479	uck Ap 328	
SI.N	Services	SAC	Qty	Base Price(Rs.)	Tariff Price(Rs.)	Discou	Net Amount	Tax Amt (Tax %)	Bill Amount	
1	ABHISHEK SRIVASTAVA (Consultation - CPT 99202)(Neurologist) ()	99931 Z	1	900.00	900.00	0.00	900.00		900.00	
						_				T.

Paid by Patient

Amount in Words: Rupees nine hundred only collected from patient

900.00

gistra

Sum Of Rs, 900.00 received with thanks from Nr. SAGHIR AHMED

Payment Mode(s)

Cash for Rs.900.00

Signature of Patient/Next of Kin

SIGNATURE SUJEET KUMAR SINGH

: Uttar Pradesh-(09) Place of Supply

Company Name

: Max Super Speciality Hospital, Lucknow (A Unit of Starlit Medical Centre

PAN No.

: Revelsiteliked)

Max Super Speciality Hospital, Lucknow (A Unit of Stariit Medical Centre Private Limited) Viral (Khand, Gentil Negar, Lucknow - 226 010, U.P. Tai: +91-522-6782 159, 6780 001, 6780 002 For medical service queries or appointments, call +91-522-6782 159

Stariit Medical Centre Private Limited
Regd. Office: N-110, Panchsheel Park, Penchsheel Enclave,
New Delini - 110 017
Tel: +941-146097200
E: secretarial@maxhesithcare.com

(CIN: U86100DL2023PTC435154)





Max Super Speciality Hospital, Lucknow (A Unit of Starifi Medical Centre Private Limited) Viraj Khand, Gomti Nagar, Lucknow -225010, U.P Tel. +91-5226780001,6780002



5211014337 : 11/09/2024 12:51

Patient PAN/Form 60 Referred By

Mr. SAGHIR AHMED

Bill Date

Age/Sex

59 years 4 months / Mole 551 G/40 OLD SARDARI KHERA ALAMBAGH LucknowLucknow

ABHISHEK SRIVASTAVA

MaxId Bill No Receipt No GSTN Bill No GSTN No

SICS90355 SRRC82784

NABLCSS711R1ZG

Passport No

II HAMMANIMANA AMBANIMANA

X- Starit Medical Centre Private Limited 00355/ 24 12:56PM 124 02:14PM

Unit Bio Ref Interval

mmol/L 136 - 144

Unit

Bio Ref Interval

mmol/L 3.6 - 5.1

SLN Services o. SAC Qty Tariff Price(Rs.) Discou Tax Amt (Tax %) 200.0 200.00 0.00 200,00 /00.0 1 /00.00 99931 200,00 200,00 200.00 200.00 200.00 200.00 200.00 200.00 Serum () 99931 200.00 200.00 200.00 200.00 1500.00 150C.0I Total :

0.00

Paid by Patient



Test Performed at :5655 - MAX- Starlis Medica Center Private Limited, Viraj Khard, Gonti Nagar Booking Centre -5655 - MAX- Starlis Medical Centre Private Limited, Viraj Khard, Gonti Nagar, 79821(02(4) The authenticity of the report can be verified by scanning the Q R Code on top of the page

May Super Speciality Hospital, Lucknow (A. Unit of Steriit Medical Centre Private Limited) Viely Khand, Gontil Nagar, Lucknow - 226 Ofc, U.S. 1751 - 91-527-578 O.O.(, 578 D.O.) OPD Apptit - 91-522-5782 1590

(CIN: U861COLIP2023PTC188097)

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Page 1 of 2



Patient Name: Mr. Saghir Ahmed
Age / Sex: 59 year(s) 11 morth(s) 16 day(s) / Male
MaxId: LKOW.11014337

Doctor Name: Dr.ABHISHEK SRIVASTAVA

Department Neurology

Page 1 of 1

Max-Lucknow Location: Date:

Friday, April 18, 2025 10:20 AM

Invoice No: SLCS328660 Referred By: SELF Neurologist Speciality

Allergy: No Known Allergy

131 - 724/72 PR - 66L Slg-98/

Hyperbasie Gaylionic bleed.

Dr.ABHISHEK SRIVASTAVA Director MD, DM (Neurology) State Registration No. :UPMC- 043521

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30510

Max Super Speciality Hooping Sample collection and medicine delivery, call 8744-888-888

(A Unit of Starlit Medical Centre Private Limited)

Viral perians - somutitisgur, Lucknow - 226-010, U.P.

Tel: +01-522-6780-001, 678-0002

OPD Appl: +91-522-6782-159

Wayn market black at 1-22-6782-159

www.maxhealthcare.in

(CIN: U86100UP2023FTC188097)





UHID No

Specialty.

Sponsor

Patient Name

: SHLKO-11014337

1 Mr. SAGHER AHMED Mob. No.-9670872999

Gender/Age Visit Date Doctor Name 1 Mate/58 Y- 11 M- 17 D 17/04/2024

Dr. ABHISHEX SRIVASYAVA , M.S.S.S., M.D., D.M., Med.Reg.No.- UPMC-043521

1 MEUROLOGISY 1 SELF

Time-

44

Room No : S4 - SECOND FLOOR

BP 120/80 mindly PR. 100/min spo. 97% w7.

Hyperkasive Garylianic blad.

Zoryl M (1)

100 5R 500 Gluconorm

Terol LA 4 1 05

Alzil 5 45

Nicardia R 20 /

Bupron XL 150 105. X Iment.

Chonomil MD (0.5) 501

Max Super Speciality Hospital, Lucknow (A Unit of Stariit Medical Centre Private Limited) Vira) Khand, Gorni Nagar, Lucknow - 226 010, U.P. Tel.: +91-522-6780 001, 6780 002 OPD Appl. +91-522-6782 159 www.maxhealthcare.in

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[CIN: U86100UP2023PTC188097]





Patient Name: Mr. Saghir Ahmed

Age / Sex: Maxid:

59 year(s) 4 month(s) 9 day(s) /Male LKOW.11014337

Department

Doctor Name: Dr. ABHISHEK SRIVASTAVA

Neurology

Page 1 of 1

Max-Lucknow

Wednesday, September 11, 2024 9:20 AM.

Invoice No: Referred By: SELF
Speciality Neuro

Location:

Date:

Neurologist

Allergy: No Known Allergy

B.P-113773 p-79

Spoz - 99.1. Temp- 97.61

R.R - 18

Nalk.

HEALL

SG07 | SGP7

Hyperkmin bleed.

Dr. ABHISHEK SRIVASTAVA Director MD, DM (Neurology) State Registration No. :UPMC- 043521

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Max Super Speciality Hospital, Lucknow (A Unit of Starlit Medical Centre Private Limited) Virey Khand, Gomti Nagar, Lucknow - 226 01C, U.P. Tal. +91-522-6780 COI, 6780 002 OPD Appta +91-522-6782 159

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1 35

(CIN: U86100UP2023PTC188097)









Laboratory Investigation Report

Mr. Saghir Ahmed 59 Y 4 M 9 D /M LKOW.11014337/4939092407741 Dr.Abhishek Srivastava

11/Sep/2024 12:56PM

148.0

Centre : 5665 - Max Starlit Medical Centre Private Limited OPIRP No/UHID : OPIRI CE983559 Collection Date/Time : 11/Sep/2024 12:56PM Reporting Dete/Time : 11/Sep/2024 02:14PM

Clinical Biochemistry

THE PERSON NAMED IN THE PERSON NAMED IN THE

Potassium, Serum

11/Sep/2024 12:56PM 4,47 Potassium

Unit Bio Ref Interval

mmol/L 136-144

Bio Ref Interval

Tes Performed at 5555 - MAX-Sauth Medical Centre Private Limited, Very Khand, Gonsi Nagar Booking Centre 5555 - MAX-Sauth Medical Centre Private Limited, Very Khand, Gonsi Nagar, 7982100200 The authenticity of the report can be verified by scanning the Q K Code on top of the page

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E

Page 1 of 2



UHID No

Specialty.

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Patient Name

: SHLKO-11014337

1 Mr. SAGHER AHMED Mob. No.-9670872999

Gender/Age Visit Date Doctor Name 1 Mate/58 Y- 11 M- 17 D 17/04/2024

Dr. ABHISHEX SRIVASYAVA , M.S.S.S., M.D., D.M., Med.Reg.No.- UPMC-043521

1 MEUROLOGISY 1 SELF

Time-

44

Room No : S4 - SECOND FLOOR

BP 120/80 mindly PR. 100/min spo. 97% w7.

Hyperkasive Garylianic blad.

Zoryl M (1)

100 5R 500 Gluconorm

Terol LA 4 1 05

Alzil 5 45

Nicardia R 20 /

Bupron XL 150 105. X Iment.

Chonomil MD (0.5) 501

Max Super Speciality Hospital, Lucknow (A Unit of Stariit Medical Centre Private Limited) Vira) Khand, Gorni Nagar, Lucknow - 226 010, U.P. Tel.: +91-522-6780 001, 6780 002 OPD Appl. +91-522-6782 159 www.maxhealthcare.in

Regd Office: 7th Floor, Ace Studio, Plot No. 01B Sector-126, Gautam Budh Nagar, Noida - 201301, U.P. E secretarial@maxhealtricare.com

[CIN: U86100UP2023PTC188097]



SAHARA HOSPITAL

GOMTI NAGAR, LUCKNOW-226010 (A unit of Sahara India Medical Institute Limited)





www.saharahospitals.com

DISCHARGE SUMMARY

PATIENT NAME : Mr. SAGHIR AHMED AGE :57 Yrs. :22/4860 IP NO

Date of Admission :12/07/2022

Ward Name: NEUROLOGY ECNOMY WARD 6 Company: SELF

Address: 551 G/40 OLD SARDARI KHERA ALAMBAGH (M) 9839944524

UHID: 11014337 GENDER: MALE S/O,W/O,D/O:SAMIULLAR Date of Discharge:14/07/2022

Consultant: Dr. Abhishek Srivastava, MD, DM (Neurology)

M - 9648429854

Diagnosis: FUC of Hypertensive Ganglionic Bleed

Clinical data:

Admitted for hypotension

Normal PCT/CRP/Trop I/2D ECHO

Investigations: Reports are attached.

Discharge advice:

1 tab once daily - morning - O Folk 1. Tab Zoryl M1

2. Tab Gluconorm SR 500 mg 1 tab once daily - night - o + 72 3

1 tab HS (bed time) 大口中一〇 3. Tab Terol LA - 4

1 tab HS (bed time) スセネーロ 4. Tab Alzil M (5)

1 tab twice daily - 000 5. Tab Nicardia R (20)

1 tab twice daily x 5 days ____ O __ 6. Tab Taxim - O (200)

If BP > 150/90 -Tab Prazopress XL (5) 1 tab HS (bed time) वार्य - 0

Date and Time of next appointment: Review after 10 days in Neurology OPD

Stalopan 10 Checked by

Signed by

Note:

1. When to Obtain Urgent Care:

· High grade fever

Frequent Vomiting and Frequent loose motions

Persistent chest pain
 Severe difficulty in breathing

· Altered level of consciousness

AHARA HOSPITAL

MTI NAGAR, LUCKNOW-226010 Init of Sahara India Medical Institute Limited

DEPARTMENT OF RADIOBOGY





Age/Gender Referred By Receipt No

:57 Yr/Male

: ABRISHEK SRIVASTAVA :71640

---- www.sahasahospitals.com. Patient Name Radiology No Bill Date

:12/07/2022 Result Date

:12/07/2022 3:42PM

: SAGHIR ABMED

CT: HEAD (PLAIN)

Clinical profile : Follow up case of ICH.

Diffuse hypodensity is noted in the subcortical white matter of right high frontoparietal region extending into the right centrum semiovale, right external capsule and right periventricular region. Mild ex-vacuo dilatation of right lateral ventricle is seen. Note is made of chronic wallerian degeneration on the right side.

Old lacunar infarcts are noted in bilateral basal ganglia and thalami and in the mid

Cerebral parenchyma is atrophic. Septum pellucidum and falx cerebri are seen in midline.

Cerebellar foliae are prominent.

Rest of the brainstem is showing normal attenuation values.

Ventricular system is dilated with periventricular hypodensities.

Right lens is dislocated and seen to lie in the dependent part of the vitreous cavity.

DNS to left side.

Note is made of bilateral ethmoid sinusitis.

Partial empty sella is seen.

IMPRESSION

- Diffuse hypodensity in the right cerebral hemisphere as described---S/o encephalomalacia (ischemic sequelae).
- Old lacunar infarcts in bilateral basal ganglia and thalami and in the mid
- Diffuse cerebral and cerebellar atrophy.
- Partial empty sella.

DR. SHAMICK BISWAS; MD PDCC Neuro Radiology (SGPGI), DM Neuro Radiology (NIMHANS)

Consultant

Water 1897 | Water Contract of the Section of the S

nients | 2Ax7 Services: Ambulance, MRI, CT Scan, Ultrasound & Digital X-Ray action from home | Cost effective Health Check-up Packages









AHARA HOSPITAL

OMTI NAGAR, LUCKNOW-226010 unit of Sahara India Medical Institute Limited)





www.saharahospitals.com

CIHU

:11014337

Age/Gender :57 Yrs.7 M
Referred By :ABRISHEK SRIVASTAVA
Bill No :22-23/108795
Result Date :13/07/2022 2:31PM Patient Name :Mr. SAGRIR AHMED

Bill Date Bed No

:13/07/2022 :NEW605

ECHOCARDIOGRAPHY COLOR WITH ONE PRINT

MITRAL VALVE

Morphology Doppler

AML -Normal PML-Normal Abormal

Mitral Stenosis - Absent

MR - Absent

TRICUSPID VALVE

Morphology Doppler

Normal Normal

Tricuspid Stenosis - Absent

TR - Absent

AORTIC VALVE

Morphology Doppler

Sclerotic Abnormal

Aprilic Velocity -1.76 m/sec Aprilic Stenosis - Absent

AR - Trivial

PULMONARY VALVE

Morphology Dopplet

Normal

Pulmonary Velocity - 1.13 m/sec Pulmonary Stenosis - Absent

PR - Absent

MEASUREMENT	VALUES	MEASUREMENT	VALUES
AORTA	3.1 cm	LV(ed)	4.7 cm
LA	3.5 cm	LV(es)	3.1 cm
IVS (ed)	1.0 cm	PW(ed)	1.5 cm
IVS (cs)	1.5 cm	PW(es)	1.6 cm
EJECTION FRACTION	62 %		

Regional Wall Motion Abnormality

NO RWMA

PERICARDIUM

Normal: No pericardial effusion

FINAL IMPRESSION

- NO RWMA AT REST
- AORTIC VALVE SCLEROTIC, TRIVIAL AR
 CONCENTRIC LVH
- . LV DIASTOLIC DYSFUNCTION GRADE-1
- NORMAL LV SYSTOLIC FUNCTION, (LVEF-62 %)
 NO E/O CLOTIVEG/PE

Dr. VINOD KUMAR TIWARI

M.B.B.S., M.D., DM

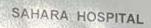
elp desk: 0522-6780001 | Auntiulance No. 0522-6780001/02/16 | MHC Packages 0522-6782511 | Email: hospital.simil@sahara.in | Website: www.saharahospitals.com

Facilities: Cashiess facility for insured patients. | 24x7 Services: Ambulanco, MRI, CT Scan, Ultrasound & Digital X-Ray harmacy. | Pathology Test-Sample collection from home. | Cost effective Health Check-up Packages







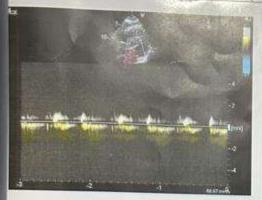


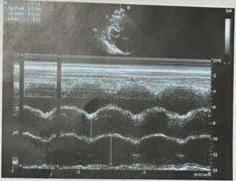
Name: SAGHIR AHMED 57 Y

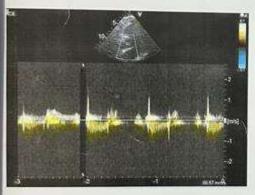
ld: 11014337

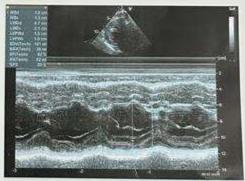
Date: 13/07/2022

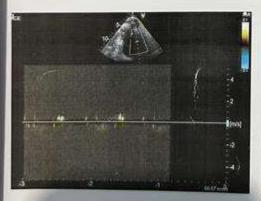
Gender Male

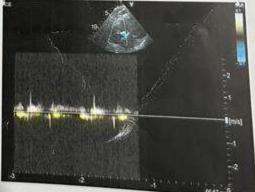












AHARA HOSPITAL

OMTI NAGAR, LUCKNOW-226010 unit of Sahara India Medical Institute Limited)







dicine-Sahara Hospital

11014337

MR. SAGHIR AHMED

Bed No. e Date

12/07/2022 04:13 PM

AVG02026

Receipt No

71703

Lab Ref No

2499858

Sex/Age

Male/57 Yrs.

Referred By

DR. ABHISHEK SRIVASTAVA

Report Date

12/07/2022 05:26 PM

Reporting Stage Final

REPORT STATUS PROVISIONAL			Ref.Range	
NAME	Result	UNIT	Rer.Range	
PLETE BLOOD COUNTS (OPD)includes ESR	SAMPLE : WB EDTA			
AEMOGLOBIN, BLOOD oct-SIS hemoslobin /Non graside method.)	12.3 L	gm/dl	13 - 17	
ac Count	4.69	millions/cu.mm	4.5 - 5.5	
od Hydro Dynamic Focusing Method): AEMATOCRIT (PCV)	40.5	96	40 - 50	
pat-RBC pulse height detection method) EAN CORPUSCULAR VOLUME	86.4	fl	76 - 96	
ecciculated) EAN CORPUSCULAR HEMOGLOBIN	26.19 L	pg	27 - 32	
GEOGRAPHICAL DESCRIPTION OF THE PROPERTY OF T	30.39 L	gm/dl	32 - 36	
oct.Calculated) LC-TOTAL LEUCOCYTE COUNT backflow (ytomotry/DC detection - Method)	6.36	10^9/L	4 - 11	
-DIFFERENTIAL LEUCOCYTE COUNT	78 H	%	40 - 70	
cutroptiil -	14 L	%	20 - 45	
ymphocyte	06	96	1 - 6	
osinophil -	02	%	2 - 10	
Nonocyte	00	%	0 - 2	
lasophil not-Automated by cell counter/ Manual method)	***			
ATELET COUNT LATELET COUNT	188,00	10^9/L	150 - 400	
whod-Hydrodynamic Focusing Method/DC detection/Slide method)				

Dr.SURBHI GUPTA M.B.B.S., M.D.

PATHOLOGIST SR. CONSULTANT UPMC-43550

Report is not valid for Medico-Legal purpose.

1 of 2 [061]

IIV. Laboratory Medicine by contacted for any dinico-pathological discussion. help desix 0522-6780005 | Ambulance No. 0572-6780001/02/14 | MHC Parkages 0522-6782111 | Email: hospital.simil@sahara.in | Website: www.saharahospitals.com

r Facilities: Cachiess facility for Insured patients | Z4x7 Services: Ambulance, MRI, CT Scan, Ultrasound & Digital X-Ray Pharmacy | Pathology Test-Sample collection from home | Cost effective Health Check-up Packages





HARA HOSPITAL

ITI NAGAR, LUCKNOW-226010 it of Sahara India Medical Institute Limited)





www.saharahospitals.com

ine-Sahara Hospital

11014337

MR. SAGHIR AHMED

No.

12/07/2022 04:13 PM ate

AVG02026

Receipt No 71703

Lab Ref No 2499858

Sex/Age Male/57 Yrs.

Referred By

DR. ABHISHEK SRIVASTAVA

Report Date 12/07/2022 05:26 PM

Reporting Stage Final

PORT STATUS

PROVISIONAL

ocyte Sedimentation Rate conviced modified Westergren)

16

mm/hr

0 - 20

-End of Report---

Dr. SURBHI GUPTA M.B.B.S., M.D.

PATHOLOGIST SR. CONSULTANT UPMC-43550

eport is not valid for Medico-Legal purpose.

2 of 2 [061]

lp desk: 0322-5780001 | Ambulance No. 0522-6780001/02/14 | MHC Packages 0522-6782111 | Email: hospital.simil@sahara.in | Website: www.saharahospitals.com

HARA HOSPITAL

ITI NAGAR, LUCKNOW-226010 it of Sahara India Medical Institute Limited)





www.saharahospitals.com

ine-Sahara Hospital

11014337

MR. SAGHIR AHMED

No.

12/07/2022 04:13 PM ate

AVG02026

Receipt No 71703

Lab Ref No 2499858

Sex/Age Male/57 Yrs.

Referred By

DR. ABHISHEK SRIVASTAVA

Report Date 12/07/2022 05:26 PM

Reporting Stage Final

PORT STATUS

PROVISIONAL

ocyte Sedimentation Rate conviced modified Westergren)

16

mm/hr

0 - 20

-End of Report---

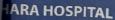
Dr. SURBHI GUPTA M.B.B.S., M.D.

PATHOLOGIST SR. CONSULTANT UPMC-43550

eport is not valid for Medico-Legal purpose.

2 of 2 [061]

lp desk: 0322-5780001 | Ambulance No. 0522-6780001/02/14 | MHC Packages 0522-6782111 | Email: hospital.simil@sahara.in | Website: www.saharahospitals.com



NAGAR, LUCKNOW-226010 of Sahara India Medical Institute Limited)





Sahara Hospital

11014337

MR. SAGHIR AHMED

12/07/2022 04:13 PM BVG02652

Receipt No 71703

Lab Ref No 2499858

Sex/Age Referred By

Report Date 12/07/2022 05:10 PM

Male/57 Yrs. DR. ABHISHEK SRIVASTAVA

Reporting Stage Final

RT STATUS PROVISIONAL

active Protein

ve Protein (CRP) no nephalometric assay) <3.30

SAMPLE : SERUM mg/L

UNIT

< 3.45

Ref.Range

RP is an acute phace recetent appeared in plasma during many infectious or inflammatory conditions revidus useful information for the diagnosis, therapy and monitoring of inflammatory processes and associated diseases. RP values are non specific and should not be interpreted without a complete clinical history.

-----End of Report----

Dr.FATEMA SHAREH NAQVI M.D.

PATHOLOGIST ASSOCIATE CONSULTANT

ort is not valid for Medico-Legal purpose.

1 of 1 [061]





71703

Report Date 12/07/2022 06:14 PM

2499858

Male/57 Yrs.



OCALCITONIN*

PROCALCITONIN

ORT STATUS PROVISIONAL

Result

< 0.05

Receipt No

Lab Ref No

Sex/Age

Referred By

Reporting Stage Final

UNIT

SAMPLE : SERUM

DR. ABHISHEK SRIVASTAVA

ng/ml < 0.5

Ref.Range

-----End of Report-----

D-AREENA HODA SIDDIQUI MBBS, MD

MICROBIOLOGIST CONSULTANT UPMC 51235

