



THE NEW INDIA ASSURANCE CO. LTD.

REFERRAL SLIP FOR EXAMINATION AND INVESTIGATION FOR PRE-INSURANCE HEALTH CHECKUP

Referred by BR/DO: _____ Code: _____ Agency Code _____

To,

Dr. _____ Agent Contact No. _____

Referring herewith Mr./Mrs.: _____ Aged: _____ Years.

Kindly examine him/her clinically as per the arrangements/agreement with you for the package of investigation given below

Age Group Exceeding 45 Years (Rs. 1200/-)	
1 Complete Blood Count	7 Routine Urine
2 Serum Cholesterol	8 X-Ray Chest PA View
3 HDL Cholesterol	9 ECG
4 Triglyceride	10 Eye Check up
5 SGOT	11 Physician Check up
6 SGPT	12 Blood Sugar FBS & PLBS

We request you to check the identification of proposer on the basis of verification of documents agreed upon earlier. We also request you to send the medical report directly to Adroit Consultancy Medicolegal Service Services. Information to be declared and filled by Proposer / Insured

(Authorised Signatory)

I Mr./Mrs. _____ THE NEW INDIA ASSURANCE CO. LTD.

Understand that the investigation package mentioned will be able to detect all the existing diseases or ailments and therefore agree that thus pre-insurance health will be affect terms and conditions and exclusions to the Mediclaim policy which I proposed to purchase with a specific reference for first year exclusion relating to pre-existing diseases. Further I also understand that this reference for medical examination does not bind the insurer about the acceptance non-acceptance of my proposal or deciding about the sum insured.

Date:

Signature:

N.B.

1. Proposer is required to go pre-acceptance Health Check-Up with minimum 12 hrs fasting. That means the proposer can have a plain water intake during this 12 hrs along with usual medicines. However, this usual medicines to be declared during examination the proposer should not consume any food material or beverage during this 12hrs after the last food.
2. The proposer should carry any one out above mentioned identification document along with them for identification.

a) Passport

b) Income-Tax Permanent Account Number

c) Driving License

d) Identity Card Issued by the employer

e) If the individual does not have any of the above documents, than they should carry a copy of ration card along with original card and 2 passport size photographs.

Office Use Only



ADROIT CONSULTANCY MEDICO LEGAL SERVICES

Prathamesh Horizon, New M.H.B. Colony, New Link Road, Borivali (West), Mumbai - 400 091

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To download this form log on to website : www.medicolegal.in