



# RASTRIYA BEEMA SANSTHAN

## Life Division

Post Box No. 527  
KATHMANDU, NEPAL

Phone No. 4262520

Date : .....

M/S. ....

.....

.....

### Sub : Lab. / Medical Tests

Dear Sir,

You are requested for the following tests of Mr./Mrs./Miss. ....  
..... in order to assess his/her life insurance risks. Please send the  
report to this office confidentially.

Please collect your fees from the above client.

Thanking you.

#### Required Tests

- 1) HIV
- 2) Urine Routine Exam.
- 3) ESR
- 4) Fasting Blood Sugar
- 5) Creatinine
- 6) SGPT
- 7) Cholesterol (Total HDL)
- 8) Blood Studies Comprising  
Complete Blood Count
- 9) Alkaline Phosphatase
- 10) ECG
- 11) Chest X - ray PA view
- 12) Echocardiogram
- 13) PFT (Pulmonary Function test)
- 14) Mantoux Test.
- 15) Others -

*Yours Sincerely*

Life Division