

**Life Insurance corporation of India**  
**Division.**

**Full Name of the Proposer.**

**SMA – 27 DATED**

1. FBS	-	mg/dl
2. PGBS	-	mg/dl
3. S.Cholesterol	-	mg/dl
4. HDL Cholesterol	-	mg/dl
5. S.Triglycerides	-	mg/dl
6. SGOT	-	iu/dl
7. SGPT	-	iu/dl
8. LDH	-	iu/dl
9. serum CPK	-	iu/dl
10.HBDH	-	iu/dl
11.Total Bilirubin	-	mg/dl
12. Conj. Direct Bilirubin	-	mg/dl
13. Unconj Bilirubin	-	mg/dl
14. Alkaline Phosphatase	-	iu/dl
15. GGTP	-	iu/dl
16. Total Proteins	-	mg/dl
17. Albumin	-	mg/dl
18. Globulin	-	mg/dl
19. A/G Ratio	-	mg/dl
20. Blood Urea Nitrogen	-	mg/dl
21. Serum Creatinine	-	mg/dl
22. Serum Uric Acid	-	mg/dl
23. Calcium	-	mg/dl
24. Phosphorus	-	mg/dl
25. Sodium	-	mg/dl
26. Potassium	-	mg/dl
27 Chlorides	-	mg/dl

Dated at \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ 200 .

I certify that the proposer/La has put his/her signature alongside in my presence.

Signature of Proposer

Signature of Pathologist.

Introduced by:

Qualification :

(Agent/ DEV. Officer  
Name

Name :

Address:

Code No:

Address: