



The accession number is the Reference Number for communication with BAVYA

BHSPL-UHS-KPM



BHSPL312380

4

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5/11/25

LABORATORY REQUISITION FORM

Patient Demographics:

Name	DOB	Age	Gender	NCD Listed Patient
Krishnaappa	10-02-1977	48	M	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>

VITALS

Height Inches	Weight Kgs	Blood Pressure		HR	Temp	SpO2	Waist Inches	Social Behaviour	
		Systole	Diastole					Smoking	Drinking
160	80	110	70	86	92.0F 98.1	35	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	Y <input type="checkbox"/> N <input checked="" type="checkbox"/>	

Collection Details

Day	Month	Year	Collection Time		Collection Location	
05	11	2025	7:47	AM <input type="checkbox"/> PM <input checked="" type="checkbox"/>	Village	Chinnaganthipalli
(Eg: 01 10 2025)			(Eg: 07:15 AM)		Mandal	Shanthipuram

Patient fasted at least 10 hrs? Y N

This section to be completed by SITE PERSONNEL ONLY

Requisition Completed by M. Dayana # Team 47

Phone Number 9014793082

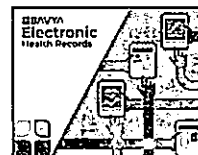
For Sample Submission HUB use only

Verifier Name & Emp ID	Tube Count	Validation (sample accepted)	Validator Comments
J. Poornima	1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/>	Y <input checked="" type="checkbox"/> N <input type="checkbox"/>	Good

Chinnagadapalli - 47-3



PATIENT DETAILS



First Name : Krishnaappa
Last Name : -
Your Email : -
Phone Number : 9663650343
Aadhaar Number : 680459003018
ABHA Health ID Number : 75-5381-0488-6882
Gender : Male Female Other
Marital Status : Married
Date of Birth : 10/02/1977
No of Children : 2
Address : Chinnagadapalli

CONSENT FOR AUTHENTICATION :

I hereby state that I have no objection to authenticating myself with the Aadhaar-based authentication/ ABHA Health ID systems and I consent to providing my Aadhaar number and/or One Time Pin (OTP) for Aadhaar-based authentication to access my personal Electronic Health Records with Bavya Health Services. I understand that the OTP I provide for authentication will be used solely to verify my identity through the Aadhaar-based authentication / ABHA Health ID systems for that specific transaction and for no other purposes. I also understand that Bavya Health Services will ensure the security and confidentiality of the personal identity data I provide for Aadhaar-based authentication.

Signature/Thumb Impression : Krishnaappa

Name : Krishnaappa