

PART B (TO BE FILLED BY THE ATTENDING DOCTOR)

Medical Information required for health insurance claim under COVID SECURE policy

Name of the Patient:

Age:

	Complaints	Yes/No	Duration in Years and Months
1	Has patient suffered from or has been suffering from fever, common cold, cough, shortness of breath, headache, fatigue or any other flu like symptoms etc. within last 1 month?		
2	Has the patient been suffering from diabetes and on continuous treatment for same in the last 1 year? If so, what is the latest HbA1c Level?		
3	Has the patient undergone any major surgery in the last 2 years like Heart Surgery, Kidney transplant, Liver transplant, joint replacement etc.?		
4	Has the patient ever suffered from / is currently suffering from and on continuous treatment for any of the following- Ischemic Heart disease Stroke Paralysis Kidney failure Cancer Tuberculosis HIV Lung diseases like COPD, Asthma?		

Date

Place

Signature and Seal
of the Attending Physician