

07.06.2022 Junior to counsel for the appellant present.

Lawyers are on general strike, therefore, case is adjourned to 28.07.2022 for preliminary hearing before S.B.

  
(Rozina Rehman)  
Member(J)

p


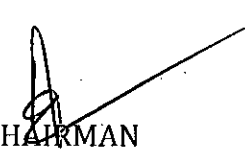
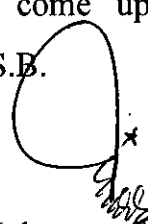

2-3-2022  
Due to retirement of the Member  
Chairman the case is adjourned to 28-7-2022  
up for the case as before on 2-3-2022

Form- A

FORM OF ORDER SHEET

Court of \_\_\_\_\_

Case No.- \_\_\_\_\_ 7819/2021 \_\_\_\_\_

S.No.	Date of order proceedings	Order or other proceedings with signature of judge
1	2	3
1-	01/12/2021	<p>The appeal of Mr. Tasleem Khan resubmitted today by Mr. Muhammad Ziaullah Khan Durrani Advocate may be entered in the Institution Register and put up to the Worthy Chairman for proper order please.</p> <p style="text-align: right;"> REGISTRAR</p> <p>2-</p> <p>This case is entrusted to S. Bench at Peshawar for preliminary hearing to be put there on <u>17/01/22</u></p> <p style="text-align: right;"> CHAIRMAN</p>
17.01.2022	7-3-2022	<p>Junior to counsel for the appellant present and requested for adjournment on the ground that senior counsel for the appellant is busy before Hon'ble Peshawar High Court, Peshawar. Adjourned. To come up for preliminary hearing on 07.03.2022 before S.B.</p> <p style="text-align: right;"> (Mian Muhammad) Member (E)</p> <p>Due to retirement of the Hon'ble Chairman the case is adjourned to come up for the same as before on 7-6-2022</p> <p style="text-align: right;"> Reader</p>

The appeal of Mr. Tasleem son of Fazal Reman r/o Gonda Tehsil Shabqadar District Charsadda received today i.e. on 25.11.2021 is incomplete on the following score which is returned to the counsel for the appellant for completion and resubmission within 15 days.

Copies of emergency OPD and payment receipts mentioned in para-7 of the memo of appeal (consist of 19 pages) are not attached with the appeal which may be placed on it.


No. 2346 /S.T,

Dt. 26/11 /2021

  
REGISTRAR  
SERVICE TRIBUNAL  
KHYBER PAKHTUNKHWA  
PESHAWAR.

Muhammad Ziaullah Khan Durrani  
Advocate Peshawar.

- Resubmitted after compliance.

  
11/12/21

BEFORE THE CHAIRMAN SERVICE TRIBUNAL  
KHYBER PUKHTOON KHAWA PESHAWAR.

Appeal No: 7819/2021  
TASLEEM

Appellant

Versus

GOVT OF KPK THROUGH SECRETARY GENERAL HEALTH  
SERVICES KP PESHAWAR AND OTHERS

Respondents


INDEX

S.No.	Description of Document	Annex	Pages
1	Grounds of appeal		2-5
2	Affidavit		6
3	Addresses of the parties		7
4	Copy of OPD slip	A	8-9
3	Copies of angiography report	B	10-12
4	Copies of OPD slips	C	13-15
5	Copies of cash receipts & Medical certificate	D	16-34
6	Copy of Medical Bill	E	35
7	Copy of letter of 4686/DHO	F	36
8	Letter No: 3205/M/MRC-645	G	37
9	Copy of departmental grievance petition	H	38
10	Copy of Letter No: 8196/M/MRC-645	I	39
11	Waqalatnama		40

Appellant

Dated: 15-11-21

Through

  
Muhammad Zia Ullah

Advocate High Court, Peshawar

**BEFORE THE CHAIRMAN SERVICE TRIBUNAL**  
**KHYBER PUKHTOON KHAWA PESHAWAR.**

TASLEEM S/O FAZAL REMAN R/O:GONDA TEHSIL  
SHABQADAR DISTRICT CHARSAKDA.

Appellant

Versus

1. GOVERNMENT OF KHYBER PAKHTUNKHAWA THROUGH SECRETARY GENERAL HEALTH SERVICES KP, PESHAWAR.
2. DIRECTOR GENERAL HEALTH SERVICES, KP PESHAWAR
3. DIRECTOR(ADMINISTRATION) HEALTH SERVICES , PESHAWAR.
4. ADDL:DIRECTOR GENERAL (ADMN) HEALTH SERVICES KP.PESHAWAR
5. DISTRICT HEALTH OFFICER CHARSAKDA.

Respondents

**APPEAL U/S: 4 OF THE NWFP SERVICE TRIBUNAL ACT, 1974 AGAINST THE ORDER DATED:4.11.21& 10.6.21,WHEREBY MEDICAL RE-IMBURSMENT CLAIM OF THE PETITIONER AMOUNTING TO RS:574881/- WAS REGRETTEED AND THE PETITIONER WAS DEPRIVED OF HIS LEGAL AND VAULABLE RIGHT UNDER THE CONSTITUTION OF ISLAMIC REPUBLIC OF PAKISTAN.**

**PRAYER IN APPEAL:**

*On acceptance of this appeal,the respondents may kindly be directed to re-imburse the medical claim of Rs: 574881/- of appellant and any other cost including litigation cost may also be ordered in favour of the appellant,by setting aside the impugned orders No:8196 /M/ MRC-645, Dated:4-11-21 & 3205/M/MRC-645, Dated:10-6-21, of respondent No:3 & 4 and declaring the same as illegal and unlawful.*

**Respectfully Sheweth:**

The appellant most humbly submits as under:

1. That the appellant is serving the department from the last 37 years as Chief PHC Technician in BPS-16 at BHUKangra District charsadda.
2. That on dated:22-03-2021, the appellant while on duty developed with signs & symptoms of MI(Heart Attack)while got 1<sup>st</sup> aid in BHU, and again on 23-03-2021, the appellant had developed the same signs of MI, due to which the appellant rushed toLRH Hospital emergency ICU where the appellant was diagnosed as a patient of NSTEMI and was provided full protocol of MI.
3. That on 23-03-2021, in LRH Hospital, angiography was advised but due to rush of patients the turn of the appellant was far/late hence after 1<sup>st</sup> aid the appellant was sent home.(Copy of OPD Emergency slip is attached as annexure A)
4. That on 24-03-2021,the appellant without waiting for his turn into LRH Hospital , rushed to MMC Hospital Peshawar for angiography& while going through the angiography, diagnosed as TVD (Multi vessel) in MMC Hospital.(Copies of angiography report are attached as annexure B (3 Pages)
5. That on 02-04-2021,the appellant went to Peshawar Institute of Cardiology for his treatment and was diagnosed as TVD and was advice (CABG) as well as PCI multi vessel (Angioplasty).(Copy of OPD slip of PIC is attached as annexure C)
6. That on 05-04-2021 the appellant again went to PIC(Peshawar Institute of Cardiology) for his treatment but was told that multi vessel PCI(Angioplasty) needs multi stunts which could not be availed by the appellant due to the non availability of policy nor could it be available on sehat card and nor from any other source and also time required for CABAG.(Copy of OPD slip attached as annexure D)
7. That as the appellant was in severe pain and his health was getting worse everyday and a big risk was attached to his life,hence left with no other option but to get admitted for his treatment in Rehman Medical Institute Peshawar on21-04-2021 as evident from the RMI emergency slip the appellant was on

emergency basis admitted and treated accordingly .(Copies of emergency OPD, medical treatment certificate and payment receipts are attached as annexure **D**(consist of 19 Pages)

8. That after recovery from the medical condition the appellant on 17-05-2021, submitted Medical Bill re-imbusement of Rs:574881/- in the office of Medical Officer BHUKangra,charsadda which was duly forwarded by the M/O for further necessary action with the remarks of appellant's developing signs & symptoms of MI in his office.(Copy of the Medical Bill is attached as annexure **E**)
9. That the medical bill of the appellant was sent to the office of respondent No:2 vide office letter No:4686/DHO, Dated:20-05-2021 for necessary action, which was regretted by respondent No:4, vide his office letter No:3205 /M / MRC-645, Dated:10-06-2021.(Copies of letters are attached as annexure **F & G**).
10. That aggrieved from the order of respondent No:4,the appellant submitted departmental grievance letter with reference to the regretted order/ of respondent No:4 ,which was duly forwarded to the office of respondent No:2 for consideration & necessary action.(Copy of departmental grievance petition is attached as annexure **H**).
11. That the duly submitted departmental grievance petition was regretted by respondent No:3 , vide his office letter/order No:8196 / M / MRC-645,Dated:4-11-2021.(Copy of impugned order is attached as annexure **I**)
12. That feeling aggrieved from the impugned orders/illegal action,inaction & omission of the respondents No:3& 4, the appellant is left with no other option but to knock the doors of this Hon'ble Tribunal on the following grounds amongst others;

#### GROUNDS:

- A. That no codal formalities as enumerated in the concerned laws have been adopted nor the procedure as prescribed in the relevant provision of law has been adopted by the issuing authority.

- B. That respondents have not acted according to law and have illegally regretted the re-imbusement of medical claim of the appellant, hence committed illegality and deprived the appellant from his valuable legal rights.
- C. That issuance of impugn orders of the respondents No:3& 4 of regretting the medical claim creates illegality and irregularity in the constitutional rights of appellant.
- D. That such illegal action, inaction /omission of the respondents is the result of misuse of powers conferred upon respondents and use of excess of powers.
- E. That such negligent and irresponsible attitude of respondents not only violates the legal and fundamental right of the appellant but also make disturbance in the administrative hierarchy.
- F. That other ground if any will be raised at the time of arguments with prior permission of this Hon'ble Court.

It is therefore, prayed that on acceptance of this appeal, the respondents may kindly be directed to reimburse the medical claim of Rs:574881/- of appellant and any other cost including litigation cost may also be ordered in favour of the appellant & by setting aside the impugned orders No:8196 /M/ MRC-645, Dated:4-11-21 & 3205/M/MRC-645, Dated:10-6-21, of respondent No:3 & 4 and declaring the same as illegal and unlawful.

&

Any other remedy if this Hon'ble tribunal deems fit may graciously be awarded.

Appellant

Dated: 15-11-2021 Through

M. 

Muhammad Zia Ullah  
Advocate, High Court, Peshawar.



BEFORE THE CHAIRMAN SERVICE TRIBUNAL  
KHYBER PUKHTOON KHAWA PESHAWAR.

TASLEEM KHAN

*Appellant*

Versus

GOVT OF KPK THROUGH SECRETARY GENERAL  
HEALTH SERVICES KP PESHAWAR AND OTHERS

*Respondents*

AFFIDAVIT

It is verified on oath and do hereby solemnly affirm and declare that the contents of the appeal are true and correct to the best of my knowledge and belief and nothing has been concealed from this Hon'ble Court.

  
DEPONENT

CNIC 17101-02065442-7  
Cell No: 03329355192

BEFORE THE CHAIRMAN SERVICE TRIBUNAL  
KHYBER PUKHTOON KHAWA PESHAWAR.

TASLEEM KHAN

*Appellant*

Versus

GOVT OF KPK THROUGH SECRETARY GENERAL  
HEALTH SERVICES KP PESHAWAR AND OTHERS

*Respondents*

**ADDRESSES OF THE PARTIES**

**(APPELLANT)**

TASLEEM S/O FAZAL REMAN R/O: GONDA TEHSIL  
SHABQADAR DISTRICT CHARSADDA

**RESPONDENTS**

1. GOVERNMENT OF KHYBER PAKHTUNKHAWA  
THROUGH SECRETARY GENERAL HEALTH SERVICES  
KP, PESHAWAR.  
(SECRETARIATE OFFICE PESHAWAR)
2. DIRECTOR GENERAL HEALTH SERVICES, KP  
PESHAWAR
3. DIRECTOR (ADMINISTRATION) HEALTH SERVICES ,  
PESHAWAR. (DG HEALTH OFFICE PESHAWAR)
4. ADDL: DIRECTOR GENERAL (ADMN) HEALTH  
SERVICES KP, PESHAWAR (D.G HEALTH OFFICE)
5. DISTRICT HEALTH OFFICER CHARSADDA.



Patient: Tasleem Khan (8) ANN-A (8-9) - BP = 154/107

Date: 23/3/21 Y DEPARTMENT

Result	pos:	<input type="checkbox"/>
	neg:	<input type="checkbox"/>

Start time: 7-30 PM Amount Paid: 20

G HOSPITAL  
IG INSTITUTION  
PAKHTUNKHWA  
Invoice #: K02210594871  
Invoice Date: 23-MAR-21 17:50:30

Pulse: 80  
SpO2 = 98%

MRNo: K02ACF21197085 Name: Tasleem Khan  
Gender: Male Age: 57 Year(s) District: \_\_\_\_\_  
Father / Husband Name: FAZL E REHMAN Serial No. 84312

Visit Type: Acute Emergency Department: EMERGENCY  
Operator: SADJAD

Rx

Counter: EMERGENCY

Complaints:  
① Side chest pain

Advice  
Cor-Angiography  
~~Aspirin~~  
~~Inf. Clexane 500mg~~  
~~Tab. Disprin 100mg~~  
~~Tab. Clopidogrel 75mg~~  
~~Tab. Aspirin 75~~

Findings:

BP - 154/107 mmHg  
Pulse - 116/ci

Trop-T Positive  
NSTEMI

14p. 150 Kil Equal / 6s

Investigations:

① ECG  
Report ECG  
after 30 minutes

Trop-T  
invoice to and by Ward Clerk  
Emergency Deptt.  
LOR and Poshawar.

- ① Tab. Ascard Plus 75/75  
sb - 1/1/1
- ② Tab. Rast. 200  
sb 5 = 1/1
- ③ Tab. Ramipace 1.25  
sb - 1/1/1
- ④ Tab. Cardinit 2.6f  
sb - 1/1

Diagnosis:

NSTEMI

Next Visit: \_\_\_\_\_ Consultant Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Phone: 9211430

website: www.lrh.edu.pk

Pt's Name: Tasleem Age: 87 Gender: M Date: 24/3/21 Add: \_\_\_\_\_

Rx

H/O NSTEMI - (1) day back

Trap. T = (1) five

BP = 140/100  
mmHg.

DM<sup>o</sup>  
HTNT  
HID

Aldo.

- Covid 19 Antibigen (bedside)

- HBS Antigen.

- HCV Antibody.

- HIV Antibody.

- S/RFTS.

- RBS.

- Echo.

Admit in CCU  
for Coro. Angio + PPCI  
by Dr. Shoaib Subhan Dawar

Interventional Cardiologist  
Dr. Shoaib Subhan Dawar  
MBBS, MCPS (Medicine)  
FCPS (Cardiology)  
MMC General Hospital

*[Signature]*

CCU NO MMC.


انٹرو نیشنل کارڈیالوجسٹ

ڈاکٹر شعیب سبحان داوڑ

ایم بی بی ایس، ایم سی بی ایس (میڈیسن)

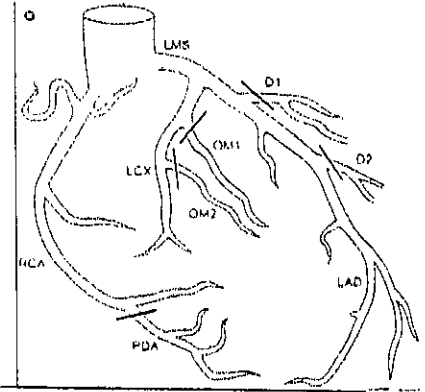
ایف سی بی ایس (کارڈیالوجی)

## CARDIAC CATHETRIZATION REPORT

Patient Name:	Tasleem khan	Age:	56 Years
Address:	Peshawar	Contact No:	0332-9265754
Hospital No:	M2103-2416	Cath No:	568/21
Procedure:	Coronary Angiography	Status:	Sehat card 
Date:	24-Mar-21	Consultant:	Dr Shoaib Subhan Dawar

### Procedure:

Right Radial Artery entered through seldinger technique, 6F sheath put in. Tig 5 diagnostic catheters used to Engage LCA and RCA, Views taken.



LMS	Normal
LAD	Diffuse disease showing TIMI I-II flow with Proximal 80% Mid 80-90% Distal 70-80%
Diag	Good size ostioproximal 90-95%
CIRC	Non dominant Proximal 60-70% Distal Normal
OM1	Small Normal
OM2	Good vessel ostioproximal 80%
RCA	Dominant Proximal Normal Mid 40-50% Distal 40-50%
PDA	Mid Mild disease
PLV	Mid Diffuse 80-90%

Result: TVD  
Recommendation: CABG

Consultant's Sign:

## ECHOCARDIOGRAM

Patient Name: Dr. Tasleem Khan.

Age: 57 Yrs.

Gender: Male.

Referred by: Dr. Shoaib Subhan Dawar.

Date: 24.03.2021.

### MEASUREMENTS:

Aortic Root Dimension:	30	(20-40mm)	IVS Thickness:	11	(08-12mm)
Left Atrial Dimension:	35	(19-39mm)	LVPW Thickness:	11	(07-11mm)
LV End Diastolic Dimension:	46	(36-56mm)	Rt.Vent.Dimension:	23	(07-25mm)
LV End systolic Dimension:	33	(25-41mm)	RVSP:	20 mmHg.	

### LV Function Indices:

Fractional Shortening: 28 %.

Ejection Fraction: 55 %

Table	Gradients Peak mmHg	Gradients mean mmHg	Peak Velocity	Valve area Doppler (cm <sup>2</sup> )	Valve area 2-D (cm <sup>2</sup> )	Regurgitation
Mitral Valve						
Tricuspid Valve						Trace
Aortic Valve						
Pulmonic Valve						

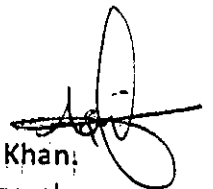
### Comments:

- Normal size cardiac chambers.
- Normal RV function.
- Preserved LV systolic function.
- Anteroapical segment is hypokinetic.
- E/A ratio across the mitral valve is reversed.
- Valves are normal in structure.
- No intra cavity clot.
- No pericardial effusion.

### Conclusion:

- Regional wall motion abnormality.
- Preserved LV systolic function.

Mr. Asif Khan;  
Echo sonographer.





OPD SLIP

CARDIAC SURGERY - OPD Token# 083

Appointment Time : 10:49

Serial # : 8243

M.R. No : K050000004222

Invoice # : K05210041836

Name : TASLEEM KHAN

Father/Husband : FAZAL UR RAHMAN

Gender : Male

Amount Paid : 50.00

Age : 56 Year(s)

Date : 02-APR-21 10:39:36

NYHA CCSF  
History  
FH  
CVA  
MI

EF 60%  
Good LV

Clinical Examination

Temp. 36.6 C

MI 88 kg  
BP 115/78 mmHg  
HR 72 bpm  
SpO2 98%

LAD (diffuse), CM  
needs time regarding  
decision for CABG

Provisional Diagnosis

Actu 1 ab lowplat plus 75mg  
1-0-0

Investigations

1 ab Bisoprolol 2.5mg  
1-0-0  
1 ab Carvedilol 2.5mg  
1-0-0  
1 ab Aspirin 81mg  
1-0-0  
1 ab Rosuvastatin 20mg  
0-0-0

c/o psqhs

1 cc

Omeprazole 40mg

OTOT

Muhammad Tariq Khan (MD, FCPS)  
Assistant Professor  
Cardiac and Aortic Surgeon  
Peshawar Institute of Cardiology-MTI





OPD SLIP

CARDIAC SURGERY - OPD Token# 040

Appointment Time : 10:31

Serial # : 8362

M.R. No : K0500000004222

Invoice # : K05210042614

Name : TASLEEM KHAN

Father/Husband : FAZAL UR RAHMAN

Gender : Male

Amount Paid : 50.00

Age : 56 Year(s)

Date : 05-APR-21 09:20:44

History

CAD

Angina

Clinical Examination

3VP

BP = 115/78

HR = 72

3VP

Provisional Diagnosis

AD

CABG/ Multivessel PCI

Investigations

Handwritten signature

(16)

ANN-D(16-34)



5-G/2, PHASE-V, HAYATABAD PESHAWAR, KPK, PAKISTAN  
PH: +92 91 5838 333 | FAX: +92 91 5838 333 | EMAIL:INFO@RMI.EDU.PK

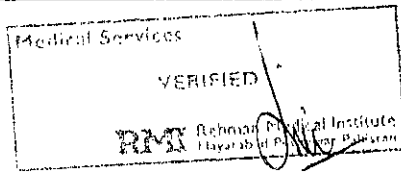
Patient Invoice

Invoice #  
46177

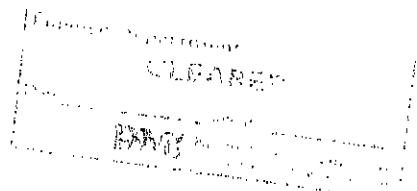
Patient Name	Dr Tasleem Khan,55y, M	Admission ID	21-04-140756
PRN	21-04-104813	Admitted	21 Apr,2021-11:38 AM
CNIC	17101-0265442-7	Discharged	23 Apr,2021-09:43 AM
Consultant	Miqdad Ali		
Address	Area: Gonda, shabqadar fort, Distt Charsadda kpk Pakistan, Charsadda, Pakistan		

CONSUMPTION	574,881
PANEL	0
PATIENT	574,881
PAID	(600,000)
DISCOUNTS	(0)
BALANCE	-25,119

Asim Ullah



Handwritten signature with number 72



III-REHMAN  
www.rmi.edu.pk



5 B/2, PHASE-V, HAYATABAD PESHAWAR, KPK, PAKISTAN  
 LIAN: 111 REHMAN (734 626) | FAX: +92 91 5838 333 | EMAIL:INFO@RMI.EDU.PK

Patient Invoice

Invoice #  
46177

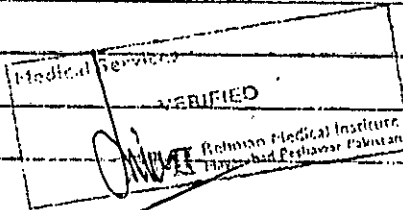
Patient Name	Dr Tasleem Khan,55y, M	Admission ID	21-04-140756
PRN	21-04-104813	Admitted	21 Apr,2021-11:38 AM
CNIC	17101-0265442-7	Discharged	23 Apr,2021-09:43 AM
Holder CNIC	---	Discharge Type	Normal
Phone	+923329355192	Ward	CCU-CCU-CCU Ground-1
Consultant	Miqdad Ali		
Address	Area: Gonda, shabqadar fort, Distt Charsadda kpk Pakistan, Charsadda, Pakistan		

**PROCEDURES**

22 Apr,2021	MSP-0007-01-Angioplasty Mult Vessel	115,000
23 Apr,2021	MSP-0967-07-Physiotherapy In-Patient	900

**BILL DETAIL**

Procedure Fee	60,900
Assistant Surgeon Fee	0
Anesthetist Fee	0
Assistant Anesthetist Fee	0
Procedure Room Time Charges	26,000
Stay Charges	9,148
Procedure Room Pharmacy	466,802
Ward Pharmacy	97
Laboratory	8,100
Radiology	0
Cardiology	0
Visits	0
Dietition	800
Physiotherapy	0
MO/Nursing charges	3,034
General Clinical Services	0



111-REHMAN  
www.rmi.edu.pk

1. The first part of the document is a list of names and addresses of the members of the committee.

2. The second part of the document is a list of names and addresses of the members of the committee.

3. The third part of the document is a list of names and addresses of the members of the committee.

4. The fourth part of the document is a list of names and addresses of the members of the committee.

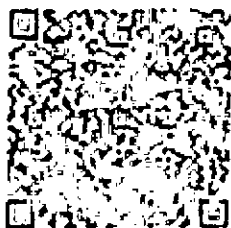
5. The fifth part of the document is a list of names and addresses of the members of the committee.

6. The sixth part of the document is a list of names and addresses of the members of the committee.

7. The seventh part of the document is a list of names and addresses of the members of the committee.

8. The eighth part of the document is a list of names and addresses of the members of the committee.

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of United States Medical Association

Vertical text on the bottom right, possibly a list of names or a contact list, oriented sideways.



# Rehman Medical Institute

Rehman Medical Institute (Pvt) Ltd, B-5/2, Hayatabad Town, info@rmi.edu.pk  
Contact: 111-REH-MAN(734), +92-91-3838 000, +92-91-5838 666 For Appointment  
+92-91-5838 000

PRN : 21-04-104813  
Lab ID : 422167045  
Patient Name: Mr. Dr Tasleem Khan  
Age | Gender: 55 Y | Male  
Referred by: Miqdad Ali  
Admission | Ref: 21-04-140756 | 21-04-104813  
Ward | Bed: - | -

### Final Reports

Visit Date: 21 Apr, 2021

Virology | **Anti-HIV Antibodies**

Reported : Apr 21, 21

Test	Result	Reference Values
Anti HIV I & II	0.11 (Non-Reactive)	Non Reactive: < 1.0 Reactive: > 1.0

### Interpretation

Reactive result requires confirmation by western blot test or by HIV PCR / NAT

**Note:** False positive test result may be obtained in pregnancy, recipient of HIV-1 vaccines, recent immunization (rabies, influenza) and other infections such as Hepatitis B and schistosomiasis

### Method:

Chemiluminescent Microparticle Immunoassay (CMIA) Ci820 SRSsystem (HIV Ag/Ab Combo). The ARCHITECT HIV Ag/Ab Comboassay is achemiluminescent microparticle immunoassay (CMIA) for the simultaneousqualitative detection of HIV p24 antigen and antibodies to HIV type 1 and2.

Reactive result: A positive Anti-HIV antibodies screeningtest requires confirmation by western bolt test or by HIV PCR / NAT.

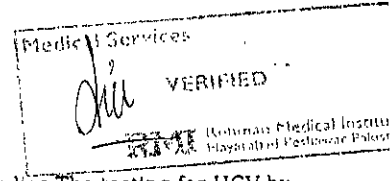
Report Initialized By: Jawad Ali | Digitally Verified By: Dr. Urooba Jahanzeb

Visit Date: 21 Apr, 2021

Virology | **Anti-Hepatitis C (HCV) Antibodies**

Reported : Apr 21, 21

Test	Result	Reference Values
Anti HCV	0.06 (Non-Reactive)	Non Reactive : < 1.0 Reactive : > 1.0



### Interpretation

- Postive Result: Anti-HCV antibodies test requires confirmation by immunoblot test or by PCR.
- Negative Result: A negative test does not exclude the possibility of exposure or infection with Anti-HCV antibodies. The testing for HCV by PCR is not indicated in cases with negative Anti-HCV sero-status.
- Indeterminate Result: Please repeat the test with a fresh blood sample after 08 weeks or confirm by PCR. In positive case the viral load may determined by quantitative PCR for further confirmation.

### Method:

Test is performed by Chemiluminescent MicroparticleImmunoassay (CMIA) Architect ci 8200 System.

Report Initialized By: Jawad Ali | Digitally Verified By: Dr. Urooba Jahanzeb

Visit Date: 21 Apr, 2021

Virology | **Hepatitis B Surface Antigen (HBsAg)**

Reported : Apr 21, 21

Test	Result	Reference Values
HBsAg	0.40 (Non-Reactive)	Non-Reactive : <1.0; Reactive : >1.0

Prof. Dr. Fazle Raziq  
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Dr. Valeed Khan  
BSc, M.Phil, PhD

Dr. Saqib Zahoor  
MBBS, DCP, FCPS (Haem)



# Rehman Medical Institute

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Contact: 111-REH-MAN(734), +92-91-5838 000, +92-91-5838 666 For Appointment  
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PRN : 21-04-104813  
Lab ID : 422167045  
Patient Name: Mr. Dr Tasleem Khan  
Age | Gender: 55 Y | Male  
Referred by: Miqdad Ali  
Admission | Ref: 21-04-140756 | 21-04-104813  
Ward | Bed: - | -

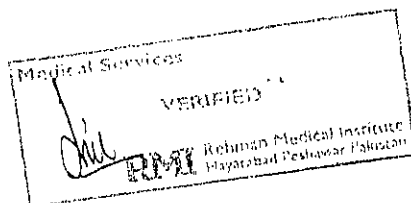
## Interpretation

- Absence of HBsAg rules out HBV infection with the exception of window-period.
- The detection of HBsAg must be correlated with patient symptoms and other hepatitis B viral serological markers.
- In reactive case the viral load may be determined by quantitative PCR for further confirmation.

## Method:

Test performed by CMIA Architect C18200 System.

Report Initialized By: Momin Khan | Digitally Verified By: Dr. Urooba Jahanzeb



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25

PRN : 21-04-104813  
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Referred by: Miqdad Ali  
Admission | Ref: 21-04-140756 | 21-04-104813  
Ward | Bed: - | -

### Final Reports

Visit Date: 21 Apr. 2021

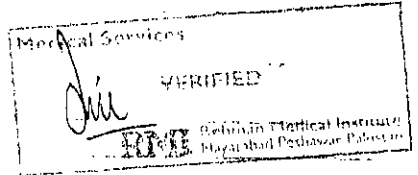
### Haematology | Complete Blood Count (CBC) with Retics Count

Reported : Apr 21, 21

Test	Result	Unit	Reference Values
Hemoglobin	15.7	g/dl	12.5 - 16.5
White Blood Cells	7.17	10 <sup>^</sup> 3/uL	4 - 11
Platelets	253	10 <sup>^</sup> 9/L	150 - 450
Red Blood Cells	5.60	10 <sup>^</sup> 12 / L	4.5 - 6.5
Hematocrit	46.4	%	35 - 50
MCV	82.9	fL	80 - 100
MCH	28.0	pg	27 - 33
MCHC	33.8	g/dl	30 - 35
%Neutrophils	64.1	%	40 - 75
%Lymphocytes	23.3	%	20 - 45
%Monocytes	11.6	%	2 - 10
%Eosinophils	0.7	%	1 - 6
%Basophils	0.3	%	0.1 - 1.0

### Differential Count

Test	Result	Unit	Reference Values
Neutrophils	4.60	10 <sup>^</sup> 9/L	2 - 7.5
Lymphocytes	1.67	10 <sup>^</sup> 9/L	1.5 - 4.0
Monocytes	0.83	10 <sup>^</sup> 9/L	0.2 - 0.8
Eosinophils	0.05	10 <sup>^</sup> 9/L	0.04 - 0.4
Basophils	0.02	10 <sup>^</sup> 9/L	0.02 - 0.1
RDW SD	39.6	%	
RDW-CV	13.2	%	12 - 16
%Retics Count	1.04	%	0.2 - 2.0
Retics Count	0.0582	10 <sup>^</sup> 6 /UL	



Report Initialized By: Baroz Khan | Digitally Verified By: Mr. Arshad Iqbal



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Final Reports

Visit Date: 21 Apr, 2021 Chemical Pathology | Plasma Urea Reported : Apr 21, 21

Test	Result	Unit	Reference Values
Plasma Urea	23	mg / dl	10 - 50

Report Initialized By: Jawad Ali

Visit Date: 21 Apr, 2021 Chemical Pathology | Plasma Creatinine Reported : Apr 21, 21

Test	Result	Unit	Reference Values
Plasma Creatinine	1.0	mg / dl	0.9 - 1.3
Estimated GFR	84	mL/min/1.73 m <sup>2</sup>	30 - 130

Interpretation

- e-GFR was calculated by well validated CKD-EPI formula which is based upon patients plasma creatinine level, age, sex and race. (Ann Intern Med. 2009 May 5; 150(9): 604-12)
- e-GFR is likely to be inaccurate in children, elderly, patients with limb amputations, severely malnourished and morbidly obese individuals.

Report Initialized By: Jawad Ali

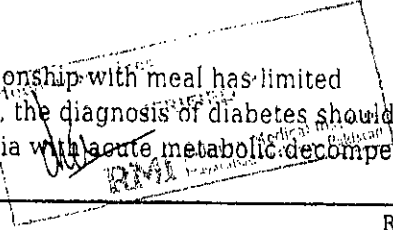
Visit Date: 21 Apr, 2021 Chemical Pathology | Plasma Glucose (R) Reported : Apr 21, 21

Test	Result	Unit	Reference Values
Plasma Glucose Random	81	mg / dl	65 - 199

Interpretation

Normal: <200; Diabetes Mellitus: =>200; (ADA 2020). All values mg/dl, venous plasma/serum. (Diabetes Care 2020;43(Suppl. 1): S1-S212.)

True Random plasma glucose value, the one having no relationship with meal has limited screening/diagnostic/prognostic value. For clinical purposes, the diagnosis of diabetes should be confirmed by repeating the test unless there is unequivocal hyperglycaemia with acute metabolic decompensation or obvious symptoms.



Report Initialized By: Jawad Ali

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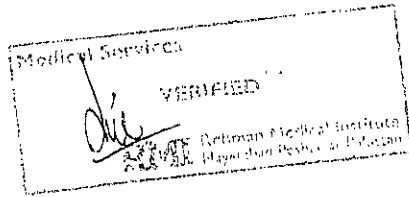
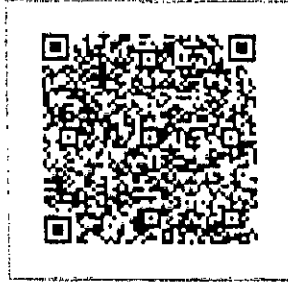




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Ward | Bed: - | -



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### Final Reports

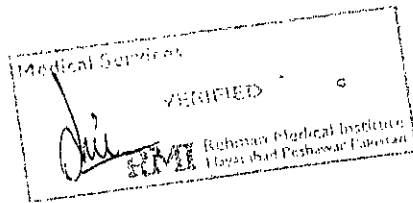
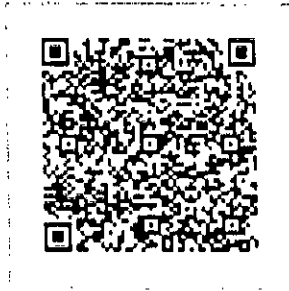
Visit Date: 21 Apr, 2021

Blood Bank | ABO Rh grouping

Reported : Apr 21, 21

Test	Result	Unit	Reference Values
ABO Blood Group	B		
Rh Factor	"POSITIVE"		Negative - Positive

Report Initialized By: Aziz Ur Rehman | Digitally Verified By: Mr. Ayub Khan



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Age | Gender: 55 Y | Male  
Referred by: Miqdad Ali  
Admission | Ref: 21-04-140756 | 21-04-104813  
Ward | Bed: - | -

### Final Reports

Visit Date: 21 Apr, 2021 Virology | Anti-HIV Antibodies Reported : Apr 21, 21

Test	Result	Reference Values
Anti HIV I & II	0.11 (Non-Reactive)	Non Reactive : < 1.0 Reactive : > 1.0

### Interpretation

Reactive result, requires confirmation by western blot test or by HIV PCR / NAT

**Note:** False positive test result may be obtained in pregnancy, recipient of HIV-1 vaccines, recent immunization (rabies, influenza) and other infections such as Hepatitis B and schistosomiasis

### Method:

Chemiluminescent Microparticle Immunoassay (CMIA) Ci820 SRSystem (HIV Ag/Ab Combo). The ARCHITECT HIV Ag/Ab Comboassay is a chemiluminescent microparticle immunoassay (CMIA) for the simultaneous qualitative detection of HIV p24 antigen and antibodies to HIV type 1 and 2.

Reactive result: A positive Anti-HIV antibodies screening test requires confirmation by western blot test or by HIV PCR / NAT.

Report Initialized By: Jawad Ali | Digitally Verified By: Dr. Urooba Jahanzeb

Visit Date: 21 Apr, 2021 Virology | Anti-Hepatitis C (HCV) Antibodies Reported : Apr 21, 21

Test	Result	Reference Values
Anti HCV	0.06 (Non-Reactive)	Non Reactive : < 1.0 Reactive : > 1.0

### Interpretation

- Positive Result: Anti-HCV antibodies test requires confirmation by immunoblot test or by PCR
- Negative Result: A negative test does not exclude the possibility of exposure or infection with Anti-HCV antibodies. The testing for HCV by PCR is not indicated in cases with negative Anti-HCV sero-status.
- Indeterminate Result: Please repeat the test with a fresh blood sample after 08 weeks or confirm by PCR. In positive case the viral load may be determined by quantitative PCR for further confirmation.

### Method:

Test is performed by Chemiluminescent Microparticle Immunoassay (CMIA) Architect ci 8200 System.

Report Initialized By: Jawad Ali | Digitally Verified By: Dr. Urooba Jahanzeb

Visit Date: 21 Apr, 2021 Virology | Hepatitis B Surface Antigen (HBsAg) Reported : Apr 21, 21

Test	Result	Reference Values
HBsAg	0.40 (Non-Reactive)	Non-Reactive : <1.0; Reactive : >1.0

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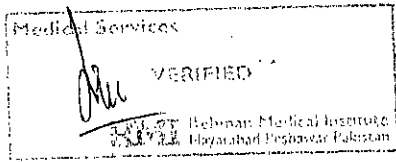
## Interpretation

- Absence of HBsAg rules out HBV infection with the exception of window-period.
- The detection of HBsAg must be correlated with patient symptoms and other hepatitis B viral serological markers.
- In reactive case the viral load may be determined by quantitative PCR for further confirmation.

## Method:

Test performed by CMIA Architect Ci8200 System.

Report Initialized By: Momin Khan | Digitally Verified By: Dr. Urooba Jahanzeb



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Patient Name	Dr Tasleem Khan , 55y, MALE	Admission No.	21-04-140756
PRN	21-04-104813	Discharged	23 Apr, 2021
Phone	+923329355192	Admitted	21 Apr, 2021 - 11:38 AM
Address	Area: Gonda, shabqadar fort, Distt Charsadda kpk Pakistan,	Discharged Type	Normal
Ward	CCU- CCU- CCU Ground-1	Discharged By	Rashid Khan

PROCEDURES

- Angioplasty Single Vessel

CONSULTANT

- Primary Dr. Miqdad Ali  
 Secondary Dr. Miqdad Ali

DEPARTMENT

Cardiology

Patient Clinical

REASON FOR ADMISSION

pci

DIAGNOSES

- IHD - Ischemic heart disease (Admitted)

HISTORY OF PRESENTING ILLNESS

PT PRESENTED WITH CHEST DISCOMFORT .  
 ANGIOGRAPHY SHOWS: MULTIVESSEL DISEASE.  
 PCI TO LAD. D1 and OM were revascularized achieving excellent results.  
 NOW PT IS MOBILIZED

INVESTIGATIONS

ATTACHED

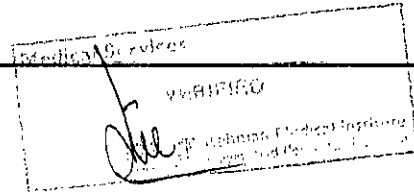
PHYSICAL EXAMINATION

BP: 113/73 MMHG.  
 PULSE: 67/MIN

Treatment at Hospital

MEDICATIONS

- Nitromint 2.6 mg Tab Rtd
- Vasteral-MR 35 mg Tab



Treatment at Home

MEDICATIONS

Lowplat Plus - Tablet - 75/75 mg

1 گولی صبح + 1 گولی شام - جاری رکھیں

Concor - Tablet - 5 mg

1 گولی صبح - جاری رکھیں

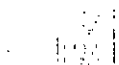
Sustac - Tablet - 6.4 mg

4pm + 8pm

1 گولی صبح + 1 گولی دوپہر - جاری رکھیں

Rast - Tablet - 20 mg

1 گولی شام - جاری رکھیں





32

5-B/2, PHASE-V, HAYATABAD PESHAWAR, KPK, PAKISTAN  
DAR: +92 91 5838 333 | FAX: +92 91 5838 333 | EMAIL: INFO@RMI.EDU.PK

Patient Name	Dr Tasleem Khan , 55y, MALE	Admission No.	21-04-140756
PRN	21-04-104813	Discharged	23 Apr, 2021

Vasteral-MR - Tablet - 35mg


1 گولی صبح + 1 گولی شام - جاری رکھیں

Care at Home

TAKE MEDICINE ON TIME

FOLLOW UP

Please visit for follow up appointment in 1 Months

Medical Institute  
  
 Rashid Khan  
 Rashid Medical Institute  
 Hayatabad Peshawar, Pakistan



Directorate of Medical Services

RMI / MS 0197  
21<sup>ST</sup> June 2021

To Whom It May Concern

It is certified that dr Tasleem Khan Age 55 years PR no. 21-04-104813, was admitted in Rehman Medical Institute, Peshawar in emergency on 21-04-2021 under care of Prof. Dr. Miqdad Ali Khan, Consultant Cardiologist. Angioplasty was performed and patient discharged on 23-04-2021.

Medical Services  
REHMAN MEDICAL INSTITUTE  
107, 108/1 Peshawar, Pakistan

Associate Director Clinical Services  
REHMAN MEDICAL INSTITUTE  
107, 108/1 Peshawar, Pakistan

The DHO ,  
Charsadda.

**Subject: Medical Bill**  
**Rs- 574881/- ( Five Lack Seventy Four Thousand Eight Hundred Eighty one).**

Sir ,

With due respect it is stated that I am serving as a Chief PHC tech BPS 16 at BHU kangra under your kind control. During duty on 22-03-2021 at the office of MO incharge I developed sign and symptoms of MI (Heart Attack). on 23-03-2021. I rushed to LRH emergency ICU where I was diagnosed as a case of NSTEMI and was provided full protocol of MI , and angiography was advised but the same angiography turn was very late. Therefor I did my angiography in MMC hospital free of cast on Sehat Card, I was diagnosed as TVD (Multi vessel). then I rushed to the Peshawar Institute of Cardiology (PIC) for the further treatment on 02-04-2021. Where i was diagnosed as TVD and was advised (CABG) as well as PCI multi vessel (Angioplasty). I again appear to the said cardiology department on 05-04-2021. I was told that multi vessel PCI (Angioplasty) need multi stents which is not our policy nor we could issue free in Sehat Card or from any other sources and need time for CABAG. on sehat card we could issue only three stants. Therefore I approached to RMI Hospital and my multi vessel PCI with a multi stants was performed with a cost of **Rs- 574881/- (four stents passed).**

Respected Sir, I become heart Patient during duty and need more financial support and help. I therefore request that the said bill may kindly be approved and passed without delay, that I may continue my duty without any tension, I shall be very thank full to you.

Original copies of all documents attached.  
Along with OPD chits.

*Accd sent for*  
*for*

Yours obediently  
Tasleem Khan 17/5/2021  
Chief PHC Technician BPS 16  
BHU kangra charsadda

*Forwarded to DHO for further Necessary Action, as he developed Sign & Symptom of MI my presence at my office BHU kangra*  
*Medical Officer*  
*17/5/2021*  
*BHU Kangra*





OFFICE OF THE  
DISTRICT HEALTH OFFICER  
CHARSADDA

7645

No. 4684 /DHO

Dated Charsadda the 22/5 2021

To

The Director General,  
Health Services, Khyber Pakhtunkhwa  
Peshawar

Subject: MEDICAL BILL  
R/Sir,

Enclosed please find herewith a self explanatory application on the subject noted above along with medical bill and relevant documents in respect of Mr. Tasleem Khan Chief PHC Technician (BS-16) attached to BHU Kangra for information and necessary action.

DISTRICT HEALTH OFFICER  
CHARSADDA

17967  
22/5

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**DIRECTORATE GENERAL HEALTH SERVICES  
KHYBER PAKHTUNKHWA PESHAWAR**

All communications should be addressed to the Director General Health Services  
Peshawar and not to any official by name E-Mail Address [K.P.Kelgis@yahoo.com](mailto:K.P.Kelgis@yahoo.com)  
Office # 091-9210269 Exchange # 091-9210187, 9210196 Fax # 091-9210230

NO. 3905 /M/MRC-645

Dated: 10/6/2021

Registered/confidential

To:

The District Health Officer,  
Charsadda.

Subject:-

VERIFICIATON MEDICAL RE-IMBURSEMENT CLAIM.

Reference your letter No. 4686 dated 20-05-2021 on the subject noted above.

The original Medical Re-imbusement Claim in respect of Mr. Taseem Khan, Chief PHC Technician, BHU Kangra Charsadda, is hereby returned with the remarks that the case is not covered under the Rules being overall treatment from different clinics without referral from any Govt. Tertiary Care Hospitals therefore cannot be acceded to and it is regretted.

*m. f. Khan*  
9/06

ADDL: DIRECTOR GENERAL (ADMIN)  
DIRECTORATE GENERAL HEALTH  
SERVICES KHYBER PAKHTUNKHWA  
PESHAWAR

*10/6/2021*

To The D. H. O. Charsadda  
16/6/21  
22/6/2021

Through DHO Charsadda.

Sir with due respect it is  
stated that reference your letter No 3905  
dated 10-6-2021. I was admitted in


W.M. Hospital as emergency. The  
emergency certificate of RMI is  
attached with my this application  
for further necessary action please

Date 22-6-2021

Yours obediently  
Yours  
Iqbal Khan

Chief PHS  
BPS H  
B/HU Kangra  
Charsadda

Reviewed & DHO Charsadda  
for N.A

  
22/6/21  
Medical Officer  
Incharge  
BHU Kangra.

Sir  
Account Section

F 114/18  
2/

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**DIRECTORATE GENERAL HEALTH SERVICES  
KHYBER PAKHTUNKHWA PESHAWAR**

All communications should be addressed to the Director General Health Services  
Peshawar and not to any official by name E-Mail Address [K.P.Krghs@yahoo.com](mailto:K.P.Krghs@yahoo.com)  
Office # 091-9210269 Exchange # 091-9210187, 9210196 Fax # 091-9210230

NO. 8196 /M/MRC-645

Dated: 4 / 11 / 2021

Registered/confidential

To,

The District Health Office  
Charsadda.

Subject:- VERIFICATION MEDICAL RE-IMBURSEMENT CLAIM.

Reference your letter No. 7552 dated 02-07-2021 on the subject noted above.

The original Medical Re-imbursment Claim in respect of Mr. Tasleem Khan, Chief PHC Technician attached to BHU Kangra, was re-examined and regretted being not covered under the Medical Attendance Rules 2016, after confirmation the availability of facility from Govt. Tertiary Care Hospitals, Peshawar.

*[Handwritten signature]*  
DIRECTOR (ADMINISTRATION)  
DIRECTORATE GENERAL HEALTH  
SERVICES KHYBER PAKHTUNKHWA  
PESHAWAR

*[Handwritten initials]*  
28/10/20

# MUHAMMAD ZIA ULLAH DURRANI

Advocate Peshawar High Court, Federal Shariat Court, Legal Consultant & Practitioner,  
Cell # 0314-9806895

## WAKALAT NAMA

(POWER OF ATTORNEY)

IN THE COURT OF Service Tribunal

Tasleem

(Appellant)

VERSUS

Govt of KP through (Respondents)  
Secretary General Health & others

I/We, Tasleem (Appellant) in the  
above noted Service Appeal do hereby appoint and constitute **MUHAMMAD  
ZIA ULLAH DURRANI, ADVOCATE HIGH COURT,  
PESHAWAR** to appear, plead, act, compromise, withdraw or refer to arbitration  
for me/us as my/our counsel in the above noted matter, without any liability for their  
default and with the authority to engage/appoint any other Advocate/Counsel at  
my/our matter.

Dated: 15.11.21

Attested & Accepted.



Client (Thorn)

**MUHAMMAD ZIA ULLAH DURRANI**

**BC# 10-8033**

Advocate High Court, Peshawar.

Chamber: J. Waqar Ahmad Seth Block,

2<sup>nd</sup> floor, District Courts, Peshawar.