### BEFORE THE KHYBER PAKHTUNKHWA SERVICE TRIBUNAL PESHAWAR

Service Appeal No. 11824/2020

Date of Institution ...

29.09.2020

Date of Decision

26.01.2022

Dr. Sadaf Jamil d/o Muhammad Jamil Khan, WMO (BPS-17) H# 322, St#49, Sector-F, Safari House Phase-8, Behria Town, Rawalpindi.

(Appellant)

#### **VERSUS**

Govt. of Khyber Pakhtunkhwa, through Chief Secretary, Khyber Pakhtunkhwa Civil Secretariat, Peshawar and others. ... (Respondents)

Muhammad Maaz Madni,

Advocate

For Appellant

Asif Masood Ali Shah, Deputy District Attorney

...

For respondents

AHMAD SULTAN TAREEN ATIQ-UR-REHMAN WAZIR

•••

CHAIRMAN

**MEMBER (EXECUTIVE)** 

#### **JUDGMENT**

that upon recommendations of public service commission, the appellant was appointed as women medical officer BPS-17 vide order dated 05-10-2007 and placed her services at the disposal of Director Health ex-FATA. The appellant reported her arrival on 18-10-2007 and she was further posted in Agency Head Quarter Hospital ex-Bajawar Agency vide order dated 23-10-2007. Thereafter, the appellant was allowed vide order 04-04-2009 to work as Assistant Director (Technical) in Population Welfare Department Ex-FATA with further direction that she will draw her salary from her original place of posting. The appellant was awarded scholarship from Australian Development Scholarship Programme for master in Public Health (Epidemiology) in Australia; when the appellant was working as Assistant Director in Extended Programme for Immunization (EPI)

cell. The course was for a period of one year from January to December 2012 and the appellant was allowed to attend such scholarship vide order dated 27-01-2011. After completion of the course, the appellant returned and was posted as Assistant Director EPI Ex-FATA with immediate effect vide order dated 13-05-2013. The appellant filed an appeal for regularization of gap period with effect from 01-03-2013 to 13-05-2013, which was allowed and the gap was regularized vide order dated 25-06-2013. In order to attend graduation ceremony in Australia, the appellant was allowed Ex-Pakistan leave with effect from 15-06-2014 to 31-08-2014 vide order dated 11-07-2014. After expiry of the Ex-Pakistan leave, the appellant returned to resume her duty but monthly salary of the appellant was stopped with effect from august 2014 vide order dated 29-07-2015 without showing any reason. On query, it was known that the respondents had conducted a fact finding inquiry vide order dated 27-03-2015 against the appellant on the charges of absence from duty, copy of which was delivered to the appellant at a belated stage under the pleas that her home address was not available with the respondents, against which the appellant filed reply vide letter dated 03-11-2016, thereafter the appellant visited numerous offices of the respondents for release of her salary up till march 2017, but with no fruitful results, which deteriorated the physical and mental health of the appellant, which lasted recently when the appellant recovered from Fibroid and Uterine Artery Embolization Surgery. After recovery from serious illness, the appellant filed departmental appeal dated 02-06-2020 against not issuing proper posting/adjustment order and stoppage of her salary since August, 2015, which was not responded within the statutory period, hence the instant service appeal with prayers that inaction of the respondents by not adjusting/issuing proper posting order in respect of the appellant and stopping her salary may be declared as illegal and proper posting order be issued with release of monthly salaries stopped since August, 2015 with all consequential benefits.

02. Learned counsel for the appellant has contended that act and omission of the respondents by not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since August, 2015 is against law, fact and norms of natural justice, hence not tenable and are liable to be set aside; that the appellant has not been treated in accordance with law, as such, the respondents violated Article-4, 9, 10-A and 25 of the Constitution; that only a fact finding inquiry has been conducted against the appellant upon which objection/observations had been raised, but that too was not responded; that monthly salary of the appellant has been stopped since August,2015 vide impugned order dated 29-07-2015, which is highly been deprecated by the apex court vide judgment dated 29-07-2015.

Learned Deputy District Attorney for the respondents has contended that the appellant was granted 76 days Ex-Pakistan leave with effect from 15-06-2014 vide order dated 11-07-2014; that the appellant was bound to resume her official duty after expiry of her leave on 30-08-2014 but the appellant did not turn up; that the appellant was adjusted against the vacant post of assistant director EPI Population Welfare Department for the purpose of pay vide order dated 04-08-2014 and surprisingly the appellant came on the same date to the office of assistant director EPI, who was on leave and handed over the charge; that the appellant unlawfully retained official vehicle in her possession for five months and returned the vehicle on 17-01-2015; that absence of the appellant was reported to health department vide order dated 05-03-2015; that the appellant did not submit arrival after expiry of Ex-Pakistan leave on 30-08-2014 and received salaries without performing duty up-to June 2015, hence her salary was stopped vide order dated 29-07-2015 and inquiry was also initiated against the appellant vide order dated 27-03-2015 and proper notices were served at her home address, but the appellant failed to report; that in light of the above factual position, the appellant has no right to file the instant appeal.

04. We have heard learned counsel for the parties and have perused the record.

05. Record reveals that upon recommendations of public service commission, the appellant was appointed as women medical officer BPS-17 on regular basis vide order dated 05-10-2007 and was posted in Agency Head Quarter Hospital Ex-Bajawar Agency vide order dated 23-10-2007. The appellant was re-posted in AHQ Hospital Ex-Mohmand Agency on her own request and the gap period from 18-10-2007 till 20-03-2009 was regularized as leave without pay. Thereafter, the appellant was allowed vide order 04-04-2009 to work as assistant director (technical) in population welfare department ex-FATA with further direction that she will draw her salary from her original place of posting in ex-Mohmand Agency. The appellant was adjusted for the purpose of pay against the post of WMO reproductive health ex-Mohmand Agency vide order dated 25-05-2010. Vide order 20-06-2011, the appellant was transferred from population welfare department ex-FATA to EPI Ex-FATA and was allowed to draw pay from population welfare department. The appellant availed foreign scholarship from January to December 2012, which was allowed vide order dated 27-01-2011. After completion of the course, the appellant returned and was adjusted for the purpose of pay in AHQ Hospital ex-Mohmand Agency vide order dated 14-02-2012, subsequently posted as Assistant Director EPI Ex-FATA with immediate effect vide order dated 13-05-2013. The appellant filed an appeal for regularization her gap period with effect from 01-03-2013 to 13-05-2013, which was allowed and the gap was regularized vide order dated 25-06-2013. In order to attend graduation ceremony in Australia, the appellant was allowed Ex-Pakistan leave vide order dated 11-07-2014 with effect from 15-06-2014 to 31-08-2014. For the purpose of pay for the period of Ex-Pakistan leave mentioned above, the appellant was adjusted against the post of Assistant Director (Technical) Population Welfare Department vide order dated 04-08-2014.

06. Placed on record is a fact finding inquiry, which would suggest that the appellant due to her dual posting, one for actual duty and the other for the purpose of salary was found absent from both the places since August, 2014, whereas stance of the appellant is that she performed her duty in her original place, whereas they were tracing me against the post meant for salary purpose and due to the reason, she was granted salary up to June, 2015. The fact finding inquiry recommended that salary drawn from august, 2014 to July, 2015 be recovered from her and disciplinary action be initiated against her under E&D Rules, 2011, hence salary of the appellant was stopped vide order dated 29-07-2015 but no further action was taken against her.

It is pertinent to mention that the fact finding inquiry was conducted without associating the appellant with proceedings of the inquiry, nor she was afforded any opportunity to her version of defense. The said inquiry was onesided and was conducted at the back of the appellant under the plea that notice was issued to her on her home address, but due to change of her residence, she could not receive such notice. In pursuance of recommendations of the inquiry report, only salary of the appellant was stopped but no further action was taken against her. In response to the fact finding inquiry, the appellant filed reply vide letter dated 03-11-2016, which reveals that the inquiry so conducted against her was as a result of grudge of the Director Health with the appellant and which smacks malafide on part of the respondents. Thereafter the appellant visited numerous offices of the respondents for release of her salary up till March 2017, but with no fruitful results. Finally, the appellant visited the office of chief secretary and secretary health but nobody listened to her clamor. Record would suggest that the appellant in the meanwhile suffered from a serious disease, which fact is also enumerated in her departmental appeal and documents to this effect are placed on record, which would suggest that the appellant was unable even to submit her departmental appeal. After her surgery and full recovery, the appellant filed departmental appeal dated 02-06-2020

narrating the whole story of her miseries and against not issuing proper posting/adjustment order and stoppage of her salary since August 2015.

The issue under consideration was that the appellant after availing Ex-08. Pakistan leave, reported her arrival for her posting, instead fact finding inquiry was conducted against her and further posting was refused by the respondents inspite of the fact that no adverse order was issued except stoppage of her salary, but the appellant was/is still on the roll of Health department. The allegations so leveled were absence from duty, but neither the appellant was permitted to join her duty nor any disciplinary proceedings were conducted against her and the issue lingered for longer. Second irregularity, which was noticed, was the fact finding inquiry, where the appellant was not associated and was based on malafide due to the reason that the appellant was kept ignorant of such proceedings and her salary was stopped illegally. As per recommendations of the fact-finding inquiry, no regular inquiry was conducted against the appellant, thus the appellant was kept deprived of the opportunity to defend her cause. Departmental appeal of the appellant was not considered nor her serious illness was taken into consideration. It however is a well-settled legal proposition that absence on medical ground even without permission does not constitute gross misconduct.

09. We are also mindful of the question of limitation, as the appellant filed departmental appeal after considerable delay, but with strong justification of her illness, which is evident from the record. Moreover, the circumstances in the instant appeal are eccentric, which requires dealing in a distinguishable manner, as service of the appellant is still intact and no adverse order was issued by the respondents. Secondly no regular inquiry was conducted against her and the appellant was deprived of the opportunity to explain her position. Thirdly, the appellant seriously fell ill, which is evident from record and was unable to file appeal well in time. on the other hand, the appellant has got a sound case on merit and the Supreme Court of Pakistan in its judgment have held that decision

N/m

of cases on merit is always encouraged instead of non-suiting litigants on technical reason including ground of limitation. Reliance is placed on 2004 PLC (CS) 1014 and 1999 SCMR 880. We have also noted that the respondents have no case on merit except limitation and the supreme court of Pakistan in its judgment reported as PLD 2002 Supreme Court 84 have held that where on merits the respondents has no case, then limitation would not be hurdle in the way of appellant for getting justice. Supreme Court has observed that the court should not be reluctant in condoning the delay depending upon facts of the case under consideration. We are of the considered opinion that delay on part of the appellant was not intentional, rather due to the reason beyond control of the appellant, hence she deserve to be treated on humanitarian grounds.

- 10. We are of the considered opinion that the appellant has not been treated in accordance with law and was illegally kept away from performance of her duty. Departmental appeal of the appellant was not considered, respondents however were required to dispose of her appeal with speaking order. Service of the appellant is still intact and she deserves to be given proper posting.
- 11. In view of the foregoing discussion, the instant appeal is accepted by setting aside the impugned order dated 29-07-2015 with direction to the respondents to give her proper posting and release her salary stopped since August 2015. Parties are left to bear their own costs. File be consigned to record room.

ANNOUNCED 26.01.2022

> (AHMAD SULTAN TARÈEN) CHAIRMAN

(ATIQ-UR-REHMAN WAZIR) MEMBER (E)

## BEFORE THE HONORABLE KHYBER PAKHTUNKHWA

## SERVICE TRIBUNAL PESHAWAR

#### SERVICE APPEAL NO. 11824 OF 2020

Dr. Sadaf Jamil		Appellant
	Versus	
	,	• •
Govt: of Khyber Pakhtunkh	wa and others	Respondents

## Respectfully Sheweth:

## PARAWISE COMMENTS ON BEHALF OF RESPONDENTS

### Preliminary Objections:-

- 1. That the appellant has got neither cause of action nor did locus standi to file the instant appeal.
- 2. That the appellant has filed the instant Appeal just to pressurize the respondents.
- 3. That the instant appeal is against the prevailing Law and Rules.
- 4. That the appeal is not maintainable in its present form and also in the present circumstances of the issue.
- 5. That the appellant has filed the instant appeal with mala-fide intention hence liable to be dismissed.
- 6. That the appellant has not come to the Tribunal with clean hands.
- 7. That the appeal is time barred.
- 8. That the Honorable Tribunal has no Jurisdiction to adjudicate upon the matter.
- 9. That the instant appeal is bad for mis-joinder of unnecessary and non-joinder of the necessary parties.

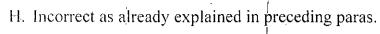
#### ON FACTS:

- 1. Pertains to record, hence no comments.
- 2-7 Correct.
- 8. Correct. However, it is pertinent to mention here that:
  - i. The appellant was granted 76 days Ex-Pakistan Leave w.e.f. 15/06/2014 vide Notification dated 11/07/2014 (*Annex-A*).
  - ii. The appellant was bound to resume her official duties after expiry of her leaves on 30/08/2014 but the appellant did not submit her arrival report.
  - iii. The appellant was adjusted against the vacant post of Assistant Director (Technical) Population Welfare Department FATA for the purpose of pay vide order No. 14451-55/DHS/FATA/Admn dated 04/08/2014 (*Annex-B*) and surprisingly the appellant

- came on the same date to the office of Assistant Director (EPI) who was on leave and handed over the charge.
- iv. The appellant unlawfully retained the official vehicle in her possession for five months and returned the vehicle on 17/01/2015 but without log book.
- v. Willful absence of the appellant from official duty was reported to Health Department Khyber Pakhtunkhwa vide letter dated 05/03/2015 (*Annex-C*).
- 9. Correct. The appellant did not submit her arrival after expiry of Ex-Pakistan Leave on 30/08/2014 and received salary without performing duty upto 2015. When the matter was pointed out, her willful absence was reported to Secretary Health Khyber Pakhtunkhwa and her salary was stopped vide letter dated 29/07/2015 already attached with the Appeal as annexure-I and enquiry was also initiated against the Appellant vide order dated 27/03/2015 already attached with the appeal as annexure-H. The then DHS FATA and enquiry office issued proper notices at her home address vide letters (Annex-D) but the appellant failed to report.
- 10. Pertains to record, hence no comments.
- 11. Pertains to record, hence no comments.
- 12. Pertains to record, hence no comments.
  - 13. Incorrect. In light of the above factual position, the appellant has no right to file the instant appeal.

#### ON GROUNDS:

- A. Incorrect. The act of the Respondents is not against the law and rules because during her Ex-Pakistan Leave, the appellant was posted against the post of Assistant Director (Technical) Population Welfare Department FATA for the purpose of pay vide order dated 04/04/2009 but the appellant did not submit her arrival report after expiry of Ex-Pakistan Leave and absented herself from official duty without further prior leave. Therefore, her salary was stopped.
- B. Incorrect. The Respondents did not violate the Article of the Constitution of Islamic Republic of Pakistan, 1973 as already explained in preceding para.
- C. Incorrect. Detailed reply has already been given in preceding para.
- D. Incorrect. The notices were issued at her home address but the appellant failed to report.
- E. Incorrect. Reply has already been furnished in Para-A.
- F. Correct to the extent of stoppage of her salary due to her willful absence from duty.
- G. Incorrect as already explained in Para-A.



- 1. Incorrect as already explained in preceding paras.
- J. Incorrect as already explained in preceding paras.
- K. The replying respondents also seek prior permission of this Honorable Court to adduce additional grounds at the time of arguments.

## PRAYER:

It is therefore humbly prayed that on acceptance of the comments, the instant Appeal of the Appellant may very graciously be dismissed with costs.

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Secretary to Govt. of

Khyber Pakhtunkhwa Health Department

Respondent No. 02 - 1

Director General Health Services, Khyber Rakhtunkhwa.

Respondent No. 03

(the)



# GOVERNMENT OF KHYBER PAKHTUNKHWA HEALTH DEPARTMENT

Dated Peshawar the 11th July, 2014

## NOTIFICATION

No.SO(H)E-II/1-5/2013: The Competent Authority is pleased to grant 76-days, Ex-Pakistan Leave, w.e.f. 15.06.2014 or from the date of availing, in respect of - Dr. Sadaf Jamil, Assistant Director (BS-17), EPI FATA, Peshawar.

Furthermore, this department has no objection over proceeding abroad of the doctor concerned.

SECRETARY HEALTH. KHYBER PÅKHTUNKHWA

## Endst. No. & date even.

## Copy to the:

1. Accountant General, Khyber Pakhtunkhwa.

2. Director General Health Services, Khyber Pakhtunkhwa.

🗦 3. DHS FATA Peshawar.

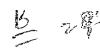
4. PS to Secretary Health.

5. PA to Special Secretary Health.

6. Deputy Director (IT), Health Department.

7. Officer concerned.

Misbah Riaz). Section Officer(E-II)



# DIRECTORATE OF HELATH SERVICES FATA FATA SECRETARIAT WARSAK ROAD PESHAWAR.

## OFFIGE ORDER

As approved by the competent authority, the following posting/adjustment of doctors is hereby ordered in the best interest of public service with immediate effect.

S#	Name	From	To	Remarks
3	Dr. Sahibzada	Waiting for	Assistant Director	Vice No. 2 below
	Khalid, M.O	posting	EPI FATA	
12.	Dr. Sadaf	Assistant.	Assistant Director	Against the vacant
	Jamil. WMO	Director EPI	Technical	post for the
		FATA	Population	purpose of pay
			Welfare FATA	100

Director Health Services FATA, Peshawar

No. 14451-55 /DHS/FATA/Admn Dated: 4 / 08 / 2014

Copy forwarded to the:-

- 1- AGPR Sub Office Peshawar.
- 2- Assistant Director EPI FATA.
  - 3- Deputy Director Population Welfare FATA.
  - 4- PA to Secretary AI&C, FATA.
  - 5- Officers concerned.

Director Health Services





## DIRECTORATE OF FEALTH SERVICES

## FATA SECRETARIAT, WARSAK ROAD. PESHAWAR

PH 091-9210212. Pax 6 091-9212110.

No 6076 /DHS/FATA/Admo	
------------------------	--

The Secretary Health, Khyber Pukhtunkhwa, Peshawar.

Subject:

WILLFUL ABSENCE FROM DUTY.

Dear Sir,

It is to inform your good office that Dr. Sadaf Jamil was appointed as Woman Medical Officer (WMO) through Public Service Commission vide Notification No. SOH (E-II)/3-18/2007 dated 95-10-2007 and her services were placed at the disposal of Disectorate of Health Services CATA for further posting. She was initially posted against the vacant post of WMO at Agency Scadquarter Hespital, Bajaur on 23-10-2007. She was, later on, postpd as Assistant Director EP: ricle Office Order No. 7770-75/DHS/FATA/Admn, dated 13-05-2013.

She forwarded an application for 76 days Ex-Pakistan leave w.e.f 15-06-2014 which was subsequently granted vide Govt: of Khyber Pakhtunkhwa Health Department Notification No. SO(H)E-II/1-5/2013, dated 11-07-2014. She was bound to resume her official duties after expire Then have on August 30, 2014 but she old not submit her arrival report till date.

this pertinent to point out here that she was adjusted against the vacant post of Assistant Director (Technical), Population Welfare Department FATA for the purpose of pay vide Office Order No. 14451-55/DHS/FATA/Admn, dated 04-08-2014, and surprisingly, she came on the same date to the office of Assistant Director EPI though was on leave and handed over the charge and, thereafter did not visit the EPI section of this Directorate as stated by the newly posted Assistant Director EPI in his Note for Record addressed to the Director Health Services PATA. Furthermore, she unlawfully retained the official vehicle in her possession for five months and returned it on 17-01-2015 without Log Book.

The aforementioned factual status clearly advocates that she has deliberately made herself absent from her legitimate official duties till date and, hence the case is forwarded to your good office for further necessary action in the matter, please.

JDHS/FATA/Admn. dated

Copy forwarded: for information to:

Secretary Social Sectors, FATA Secretariat, Peshawar.

2. Director General Health Services, Khyber Pakhtunkhwa, Peshawar.

3. Deputy Director (Admn), DHS FATA, Peshawar.

4. Deputy Director, Population Welface Department, FATA, Pesifawar.

Director Health Services. FATA, Peshayvar.

14 Director Health Service EATA, Peshawar.



# DIRECTORATE OF HEALTH SERVICES FATA

## FATA SECRETARIAT WARSAK ROAD PESHAWAR

ported a supply of the tra-

Dr. Sadaf Jamil WMO. H. No. 90, Street #9, Sector L-1, Phase-3 Hayat Abad Peshawar.

APPEAL FOR JUSTIFICATION PROVIDED IF JUSTIFICATION STILL EXISTS IN THIS SYSTEM.

Enclosed please find herewith a letter of Director General Health Services. Khyber Pakhtunkhwa along with its enclosure on the subject noted above.

You are directed to appear before the inquiry committee on 06.10.2015 at 10:00AM in the office of Director Administration, Director General Health Services, Khyber Pakhtunkhwa Peshawar.

Director Health Services; FATA: Peshawar

Copy to the:-

Secretary to Govit of Khyber Pakhtunkhwa Health Department 定位的 Peshawar.

Director General Health Services, Khyber Rakhtunkhwa w/r.to his letter No. 15748-50/E-I dated 17.09.2015.

Director Health Services FATA, Peshawar

Learned counsel for the appellant present. Mr. Asif Masood Ali Shah, Deputy District Attorney for respondent present. Arguments heard and record perused.

Vide our detailed judgment of today, separately placed on file, the instant appeal is accepted by setting aside the impugned order dated 29-07-2015 with direction to the respondents to give her proper posting and release her salary stopped since August 2015. Parties are left to bear their own costs. File be consigned to record room.

<u>ANNOUNCED</u> 26.01.2022

(AHMAD

**CHAIRMAN** 

JR-REHMAN WAZIR) MEMBER (E)

26/1/2000 AB-POSh(T) Sadaf jamil appartnent. 5/10/2007 Aerrical - P/10 postis. 23/10/2007 tronsfer u/4/2009. P/13 - as/c fr noe 2/8/11 P/14 Noc grantal. P/15 on seture she uss postal .13/5713 Again Ex Pak lane-granted. 11/7/2014. SalveyStopped Inquiry-27/3/2015 Aug 2015 anjugud order - 29/7/2015 2/6/2020 D. A / suproped 29/7/15 beally times D. A 2/6/2020 beally bared P128 D.D A/.

15.11.2021

Learned counsel for the appellant present. Mr. Safiullah, Section Officer alongwith Mr. Kabirullah Khattak, Additional Advocate General for the respondents present and sought time for submission of reply/comments. Last opportunity given. To come up for submission of reply/comments before the S.B on 12.01.2022.

(Salah-Ud-Din) Member (J)

14.01.2022

Appellant in person present. Mr. Kabirullah Khattak, Additional Advocate General alongwith Mr. Saifullah Focal Person for the respondents present.

Representative of respondents submitted reply/comments which are placed on file. To come up for rejoinder if any, and arguments before the D.B on 26.01.2022 before the D.B.

(Atiq-Ur-Rehman Wazir) Member (E) 10.02.2021

Counsel for appellant present.

Kabir Ullah Khattak learned Additional Advocate General alongwith Nisar Ahmad Monitoring Assistant for respondents present.

Written reply submitted on behalf of respondents is still awaited. Representative of respondents made a request for time to furnish reply/comments; granted by way of last chance. To come up for written reply/comments on 08.04.2021 before S.B.

(Rozina Rehman) Member (J)

08.04.2021

Due to demise of the Worthy Chairman the Tribunal is defunct, therefore, case is adjourned to 01.07.2021 for the same as before.

01.07.2021

Junior to counsel for the appellant and Mr. Kabirullah Khattak, Addl. AG alongwith Jaffar Ali, Assistant for the respondents present.

Stipulated period has passed and reply has not been sub-theol.

Representative of the respondents seeks time to submit reply. Respondents are required to submit written reply/comments within 10 days in office, positively. In case written reply/comments are not submitted within the stipulated time, office shall submit the file with a report of non-compliance. To come up for arguments on 15.11.2021 before the D.B.

Chairman

P.S

14.07.2021

Learned Addl. A.G be reminded about the omission and for submission of Reply/comments within extended time of 10 days.

Charman

Junior counsel for appellant present.

Kabir Ullah Khattak learned Additional Advocate General alongwith Nisar Ahmad Assistant for respondents present.

Written reply was not submitted on behalf of respondents. Representative of respondents made a request for adjournment to furnish reply/comments. Opportunity is granted. To come up for submission of reply/comments on 14.01.2021 before S.B.

(Rozina Rehman) Member (J)

14.01.2021

Counsel for appellant is present. Mr. Kabirullah Khattak, Additional Advocate General for the respondents is also present.

Neither written reply on behalf of respondent submitted nor representative of the department is present, therefore, learned Additional Advocate General is directed to contact the respondents and furnish written reply/comments on the next date of hearing. Adjourned to 10.02.2021 on which date file to come up for written reply/comments before S.B.

(MUHAMMAD JAM<del>AL KHAN)</del> MEMBER (JUDICIAL) 15.10.2020

Appellant Deposited

Security & Process Fee

Learned counsel for appellant present. Preliminary arguments heard.

Points raised need consideration. Appeal is admitted to

regular hearing. Subject to all just exceptions. The appellant is directed to deposit security and process fee within ten (10) days, thereafter notice be issued to the respondents for submission of written reply/comments on 07.12.2020 before S.B.

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Member (E)

07.12.2020

Junior counsel for appellant present.

Kabir Ullah Khattak learned Additional Advocate General for respondents present.

Representative of respondents is not in attendance, therefore, case is adjourned on the request of learned A.A.G. with direction to submit written reply/comments on 21.12.2020 before S.B.

(Rozina Rehman) Member (J) Form- A

# FORM OF ORDER SHEET

Court of			
o No	11024	/2020	

.No.	Date of order	Order or other proceedings with signature of judge	
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1	2	3	
	2	3	
	·	The appeal of 🎶 Sadaf Jamil resubmitted today by Mr. Mul	
1-	07/10/2020		
		Maaz Madni Advocate may be entered in the Institution Register and	d <sub>.</sub> put
		to the Worthy Chairman for proper order please.	
		REGISTRAR	•
<u>.</u>	14-10-2020	This case is entrusted to S. Bench for preliminary hearing to	o be p
		up there on 15-10-2021	
			<u> </u>
		CHAIRMAN	
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The appeal of Dr. Sadaf Jamil d/o Muhammad Jamil Khan WMO BPS-17 received today i.e. on 29.09.2020 is incomplete on the following score which is returned to the counsel for the appellant for completion and resubmission within 15 days.

- 1- Annexure-A of the appeal is illegible which may be replaced by legible/better one.
- 2- Annexures are not in sequence which may be annexed serial wise as mentioned in the memo of appeal.
- 3- Annexures of the appeal may be attested.
- 4- Annexures of the appeal may be flagged.
- 5- Five more copies/sets of the appeal along with annexures i.e. complete in all respect may also be submitted with the appeal.

No. <u>2806</u> /S.T, Dt. <u>30/09</u> /2020.

REGISTRAR SERVICE TRIBUNAL
KHYBER PAKHTUNKHWA
PESHAWAR.

Muhammad Maaz Madni Adv. Pesh.

Resubmitted after doing needful.

07/10/2020

# BEFORE THE KHYBER PAKHTUNKHWA SERVICE TRIBUNAL, PESHAWAR

SERVICE APPEAL NO.	/202	<u>'0</u>

DR. SADAF JAMIL

V/S

HEALTH DEPARTMENT & OTHERS

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15.	Departmental Appeal dated 02.06.2020	N	85
16.	Application dated 31.08.2020	0	86
17.	Wakalatnama		87

Dated: 29-09-2020

Through:

MUHAMMAD MAAZ MADNI ADVOCATE

APPELLANT

FLATE NO. 04, 2<sup>ND</sup> FLOOR, JUMA KHAN PLAZA, NEAR FATA SECRETARIAT, WARSAK ROAD, PESHAWAR

0345-9090737, 0314-9965666

# BEFORE THE KHYBER PAKHTUNKHWA SERVICE TRIBUNAL, PESHAWAR PESHAWAR Service Tribunal

SERVICE APPEAL NO. 11824 /2020

Diary No. 10808

Dr. SADAF JAMIL d/o Muhammad Jamil Khan, WMO (BPS-17)
H# 322, St# 49, Sector-F, Safari House, Phase-8, Behria Town, Rawalpindi.

APPELLANT

#### **V**ERSU**S**

- 1. GOVT. OF KHYBER PAKHTUNKHWA, through Chief Secretary, Khyber Pakhtunkhwa, Civil Secretariat, Peshawar.
- 2. THE SECRETARY, GOVT. OF KHYBER PAKHTUNKHWA, Health Department, Civil Secretariat, Peshawar.
- 3. THE DIRECTOR GENERAL HEALTH SERVICES,
  Khyber Pakhtunkhwa, FATA Secretariat, Warsak Road, Peshawar.
  RESPONDENTS

SERVICE APPEAL UNDER SECTION-4 OF THE KHYBER PAKHTUNKHWA SERVICE TRIBUNAL ACT, 1974 AGAINST THE INACTION OF THE RESPONDENTS BY ADJUSTING/ISSUING PROPER POSTING ORDER IN RESPECT OF THE APPELLANT& BY NOT RELEASING MONTHLY SALARY OF THE APPELLANT STOPPED SINCE AUGUST 2015 AND <u>AGAINST</u> NOT TAKING ANY ACTION ONTHE DEPARTMENTAL APPEAL DATED 02-06-2020 APPELLANT WITHIN THE STATUTORY PERIOD OF 90 DAYS

## PRAYER:

29) 202 Re-submitted
29) and filed.
Registra

That on acceptance of the instantservice appeal the inaction of the respondent by not adjusting/issuing proper posting order in respect of appellant& stopping the monthly salary of the appellant may very kindly be declared as illegal and proper posting order be issued with release of monthly salaries stopped since August 2015 with all consequential back benefits. Any other remedy which this august Tribunal deems fit that may also be awarded in favour of the appellant.

Respectfully Sheweth:

FACTS:



## Brief facts which give rise to the instant appealare as under:-

- 1. That, the appellant is the Law abiding, peaceful & bonafide citizen of Pakistan having domicile of District Mohmand (erstwhile FATA) and is the employee of the respondent Department.
- 2. That appellant is appointed as Women Medical Officer (BPS-17) on the proper recommendation of the Khyber Pakhtunkhwa Public Service Commission at Serial No. 70 of appointed order dated 05/10/2007 and placed the services of the appellant at the disposal of Ex-Director Health Services FATA.

3. Thatappellantsubmitted her arrival report before Director Health Services FATA on 18/10/2007 and accordingly the appellant was further posted and placed her services in Agency Headquarter Hospital Khar Bajaur Agency now District Bajaur vide order dated 23/10/2007.

4. That the appellant after working for sufficient time was allowed to work as Assistant Director (Technical) in Population Welfare Department of FATA with further direction that the appellant will draw her salary from her original place of posting vide order dated 04.04.2009.

5. That appellant was awarded scholarship from Australian Development Scholarship program for Master in Public Health (Epidemiology) in Australia 2012 when the appellant was working as Assistant Director in EPI Cell which was for a period of One Year from January 2012 to December 2012, hence, the appellant submitted application for NOC on 02/08/2011 which was allowed/approved vide notification dated 27/11/2011.

6. That after successful completion of the training course the appellant came back and submitted her arrival report in Ex-DHS FATA for further posting and as such the appellant was posted as Assistant Director (EPI) FATA with immediate effect vide order dated 13/05/2013 and in response thereof the appellant

submitted her arrival report on the post of Assistant Director EPI FATA.

7. That the appellant submitted a request for regularization of her gap period w.e.f 01/03/2013 to 13/05/2013 which was approved and the gap period between 01/03/2013 to 13/05/2013 was regularized vide notification dated 25/06/2013.

8. That the appellant has to attend Graduation Ceremony in Australia therefore, the appellant moved an application for Ex-Pakistan Leave from 15<sup>th</sup> June 2014 to 31<sup>st</sup> August 2014, which was forwarded vide letter dated 16/06/2014 and was finally approved vide respondent no. 2 notification dated 11/07/2014.

9 That astonishingly monthly salary of the appellant was stopped from August 2015 by the then Director Health Services FATA vide letter dated 29/07/2015 without showing any cogent/plausible reason or any intimation letter of stopping monthly salary and inquiring the appellant was informed that inquiry has been started against the appellant in a frivolous and ambiguous charge from the office of respondent no. 3 and one Dr. Muhammad Asif (BS-19) Coordinator of (PH) DHO Office Peshawar is nominated as inquiry officer for fact finding inquiry vide order dated 27/03/2015 when the appellant approached the office DHS FATA the appellant was informed that your home address is incorrect that's why not contacted well in time hence the appellant submitted her complete home address along with contact no. to the concerned official in the office of Director Health Services FATA and also informed the official that I have neither changed my contact no. nor closed my email address through which I can easily be contacted.

10. That the appellant was made a pendulum between the office of respondent no. 2 & the then DHS FATA office and finally

received a copy of the fact finding inquiry from the office of respondent no. 2 when the appellant submitted a request for meeting with respondent no. 2 vide application dated 05/08/2016.

11. That the appellant after receiving the fact finding inquiry report also submitted an objection/observation report vide dated 03/11/2016 which was allotted with proper dairy no. 19336 from the office of respondent No. 2 and perused the same by visiting different office including the office respondent no. 1 till March 2017 but no fruitful or any reasonable result has been received to the appellant that deteriorated the mental and physical health of the appellant which lasted recently when the appellant recovered for Fibroid and Uterine Artery Embolization surgery.

12. That when the appellant get a little bit health the appellant filed Departmental Appeal dated 02/06/2020 before respondent no. 2 against not issuing proper posting/adjustment order and stoppage of monthly salaries stopped since August 2015 which was allotted a proper dairy no. 5888, and after laps of 90 when the appellant did not received any response also filed a request for providing a copy of order (if any) passed in response to the departmental Appeal dated 02/06/2020 vide request dated 31/08/2020 but till date no response has been received so far.

13. That the appellant having no other efficacious, adequate and alternate remedy but to approach this Honourable Tribunal on the following grounds amongst others:

## GROUNDS:

- A. That act and omission of the respondents by not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since Aug 2015 is against the Law, Rules, Fact & material available on record hence not tenable in the eye of Law and needs interference of this Honourable Tribunal.
- B. That the appellant has not been treated by the respondents in accordance with Law and Rules on the subject noted above and

- as such the respondents are clearly violating Article 4, 9, 10-A and 25 of the constitution of Islamic Republic of Pakistan 1973.
- C. That the respondents have not acted in accordance with Law and the rules governing on the subject matter by not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since Aug 2015which is illegally stopped since August 2015.
- D. That only a fact finding ex-parte inquiry has been initiated against the appellant upon which objection/observation has been raised over the inquiry conducted but that too was not responded with any fruitful result.
- E. That acts and omission of the respondents while not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since Aug 2015 is nothing but just to harass the appellant by one way or the other.
- F. That monthly salaries of the appellant has been stopped since August 2015 vide the impugned order dated 29.07.2015 which is highly been deprecated by the Apex Supreme Court of Pakistan in its various judgment that salary could not be stopped in anyway and even then the salary of the appellant has not been released.
- G. That, acts and omission on the part of the respondents while not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since Aug 2015 is neither in the public interest nor in the exigencies of service.
- H. That acts and omission of the respondent while not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since Aug 2015 is nothing but performed a misconception of law and under a wrong law hence it had vitiated entire proceedings, which could not be sustained under the law and is liable to be struck down.
- I. That the act and omission on the part of the respondents by not adjusting/issuing proper posting order to the appellant and also not releasing monthly salary stopped since Aug 2015 is clear violation of Article- 38 (e) of the Constitution of Islamic republic of Pakistan which states that:

"to reduce disparity in the income and earning of the individual including the persons in Service of Pakistan".

J. That act and omission on the part of the respondents while not adjusting/issuing proper posting order to the appellant and also

not releasing monthly salary stopped since Aug 2015 is also against the Natural Justice and hence liable to be struck down.

K. That any other grounds will be raised at the time of arguments with prior permission of this Honourable Tribunal.

It is, therefore most humbly prayed thatthe appeal of the appellant may very kindly be accepted as prayed for.

Dated: 29-09-2020

Appellant 09 2020

DR. SADAF JAMIL

Through

MUHAMMAD MAAZ

Advocate,

High Court, Peshawar.

#### TITTIOAPTER

CO. SOME RANGE 10/1007. On the represendation of WPP PSO the Outliefort Authority is elected to specify the following deposits as NO (B-12) we regular basis.

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worth: Page Lei 2:

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GOVERNMENT OF NWFP HEALTH DEPARTMENT Dated Oct: 5, 2007

## **NOTIFICATION:**

No. SOH(E-II/3-18/2007. On the recommendation of the NWFP PSC the competent authority is pleased to appoint the following doctors as MO (B -17) on regular basis

5 NO.	Name with Father	Domicile	Present place	Proposed
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64*.	·Visal Muhammad Ehan.	Swebi	do	At the disposal of MDO(P), Swabi.
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S NO.	Name with Father name	Domicile	Present place of Posting	Proposed place of posting
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Their services will be governed under the provisions of NWFP Civil Servant Act 1973 read with Civil Servant (Amended) Act 2005 APT Rules 1989 and other relevant Law and rules.

The serial c order of this notification will not carries any right of seniority which will be determined by the public service commission later on.

The officers are required to report for duty within 30 days of the issuance of this notification failing which the appointment will stand automatically cancelled.

#### Sd/xxxxx :

SECRETARY HEALTH

OFFICE OF THE DG HEALTH SERVICES NWFP PESHAWAR No. 28111-200 dated 09.10.2007

- 1. DHS FATA NWFP Peshawar
- 2. Dean PGMI Peshawar
- 3. EDOs all Districts
- 4. Ms
- 5. MS mufti mehmood
- 6. EAOs Mardan an
- 7. Doctors concerned
- 8. PA to DGHS NWFP
- 9. AE-IV, DGHS Office, Peshawar

For Director General Health Services, NWFP, Peshawar C.T.C



(13) Discotor health FATA Subject: Asoqual deposit as medical offices ANNEXURE muiro due respect I have been phointed on conon moder of ficed heough public service committees the unde N.W.F.P gout houlte depretment Buson notification number SOH (EII 13-18) 2007) as 70 secial nomber Soctober 2007. accept my asonice Kindly peppet lody (FM). Though yours. Do Sadab James Ylan COPYON · Dolad -18/10/07 mobile no-0 333 0125 2668 Donnierte - Mohimand Anjewed local no Car 5x 68613

## DIRECTORATE OF HEALTH & POPULATION WELFARE, FATA

Civil Secretariat FATA, Peshawar Date: 23/10/2007 . Jose - 3/ Admin/DHS FATA <del>\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*</del>

The Agency Surgeon, Bajaur Agency.

The Medical Superintendent, AHQ Hosp: Khar, Bajaur.

Subject: 1

### POSTING OF MO's & WMO's

Reference to the Secretary Health notification No. (E-II)/3-18/2007 dated 07-19-2007 & 05-10-2007, the following MO's & WMO's have submitted their arrival reports to this Directorate whose services are placed at your disposal for further posting in the Agency.

MEDICAL OFFICERS

-DICAL OFFICERS						
	S#	Name with Father Name	Arrival date	Posted at		
	1	Dr. Dilaran Khan sto Saliman Khan	12/9/2007	AS Bajaur		
ļ	. 2	Dr. Fazali Rehman s/o Haji Jalat Khan	14-09-2007	AS Bajaur .		
-	3 .	Dr. Imran Uddin Yousaf slo Buzarg Yousaf	3/10/2007	AS Bajaur		
ļ	4	Dr. Muhammad Ali Khan s/o Haji Badshah Gul	7/9/2007	AS Bajaur		
į	5	Dr. Muhammad Zia ul Hag s/o Mir Azam Khan	3/10/2007	AS Bajaur		
ļ	6	Dr. Nadir Khan s/o Abdul Mateen	14-09-2007	AS Bajaur		
	. 7	Dr. Nizamud Din s/o Sahibzada	18-09-2007	AS Bajaur		
	.8	Dr. Zabihullah s/o Fazal Rehmani	13-09-2007	AS Bajaur		
ļ	9	Dr. Zaffaruliah s/o Abdur Rahim	12/9/2007	AS Bajaur		

WOMEN MEDICAL OFFICERS

	S#	Name with Father Name	Arrival date	
	· 1	Dr. Sadaf Jamil d/o M Jamil Khan	√18-10-2007	AHQ Hosp: Khar ✓
,	2	Dr. Shamsul Qamar d/o Muhammad Hanif	7/9/2007	AHQ Hosp: Khar
	3	Dr. Sobia Azeem d/o Muhammad Azeem Siddiqui	11/9/2007	AHQ Hosp: Khar
	4.	Dr. Ghazala Wahid d/o Abdul Wahid	1/10/2007	AS Bajaur

Their charge reports may be accepted wie from the date of actual arrivals shown against their names, which should be submitted to this Directorate in triplicate.

> Director Health & Population, Welfare FATA, Peshawar...

Copy to:

Secretary Health NWFP. 1.

Director General Health Services, NWFP Peshawar

Agency Account's Officer, Bajaur Agency.

Officer concern.

Director Health & Population, Welfare FATA, Peshawar.



## DIRECTORATE OF HEALTH SERVICES FATA FATA SECRETARIAT WARSAK-ROAD PESHAWAR OFFICE ORDER - Dr:Sadaf Jamil WMO AHQ:Hospital Ghallanai is hereby ... fallowed to work as Assistant Director Technical Copulation Welfare FATA. She will draw her pay from her original place of posting in the interest of public service with immediate effect till further orders. Director Health Services. FATA, Peshawar... No 9236 - 39 FATA/Admin Dated 4 ... /4/2009 Copy forwarded to the:-. L Secretary ( A & C ) FATA Secretariat Peshawar. -2. Deputy Director Population Welfare FATA, Peshawar. 3. Medical Superintendent AHQ: Hospital Challanai. 4. Doctor concerned.

Director Health Services.

100 E

FATA:Peshawar

Solveted for master in Public Health dopment Scholarship, Presently Lain recourse is of one year from January this course within due period I need induess.

The Director Health Services FATA FATA Secretirate Warsak Road Peshawar

Subject:

APPLICATION FOR PROVISION OF N.O.C.

Dear Sir.

With due respect its stated that I have been selected for master in Public Health / Epidemiology in Australia 2012 by Australian Development Scholarship. Presently Lain working as Assistant Director in EPI Cell. My master course is of one year from January 2012 to December 2012. To make my availability for this course within due period I need NOC from Competent Authority to give me this favor:

I shall be very thankful to you for this act of kindness...

My approval letter of selection is attached with the application.

Yours Sincerely

Elisaber

Dr. Sadaf Jamil A.D. EPI DHS.FATA

02/08/20M

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### GOVERNMENT OF KHYBER PAKHTUNK EALTH DEPARTMENT.

Deted Pesh, the 27/112011

### NO OBJECT: ON CERTIFICATE

The Government of Khyber Pakhtunkhwa. Health Department has no objection on proceeding abroad of Dr. Sadaf Jamil (BS-17) Assistant frector FATA: Secretarial Khyber Pakhtunkhwa; Peshawar, for p. ficipation in (Australian Development Scholarship (ADS) 2011 Intake of Master Degree Level Awards, from January 2012 to December, 20:2 (One Year), subject to the condition that no expenses will be borne either by the Khyber Pakhtunkhwa or by Govt. of Pakistan.

SECRETARY HEALTH, KHYER PAKHTUNKHWA.

Endst: of even No & date.

Copy of the above is forwarded for information and further necessary action to:

- 1. The Director General, realth Services, Khyber Pakhtunkhwa, Peshawar.
- The Section Officer (Esto-I) FATA Sectt. Khyber Pakhtunkhwa, Peshawar.
  - 3. The Section Office (F/Training) Govt of Khyber Pakhtunkhwa, Planning & Development Department, Poshawar
- 4: The Assistant Director (Immigration and Passport), Govt of Pakistan, Islamabad/Krisber Pakhtunkhwa Peshawar.
- 5. The P.S to the Secreta , to Govi: of Khyber Pakhtunkhwa, Health Department, P. nawar.
- 6. The Section Offices II, Health Department, Knyber Pakhtunkhwa, Peshawar
- 7. The Officer concerned

ATTO BO

12.12.11

SECTION OFFICER-IV

### DIRECTORATE OF HEALTH SERVICES FATA

FATA SECRETARIAT WARSAK ROAD PESHAWAR.



#### OFFICE ORDER:

TYNEXUR-As approved by the competent authority the services of Dr. Sadaf Jamil Women Medical Officer under transfer to Agency Headquarter

Hospital Khar is hereby posted as Assistant Director EPI FATA vice Dr. Muhammad Shafiq, Assistant Director EPI FATA in the interest of public

service with immediate effect.

Consequent upon above, Dr. Munammad Shafiq Assistant Director TEPI FATA is hereby transferred and posted in Agency Headquarter. Hospital Landi Kotal against the vacant post of Gynecologist for the purpose of drawl of pay etc. He will however perform his duty as Manager Thalassemia Control Program FATA Health Directorate in the public interest.

> ....sd:ˌ:;.... Director Health Services, . FATA, Peshawar.

/DHS/FATA/Admin

Dated  $\frac{1^{-3}}{1}$  /05/2013

Copy to the:

1. Secretary Social Sectors Department FATA.

2. Medical Superintendent Agency Headquarter Hospital Landi Kotal.

3. Deputy Director EPI FATA Health Directorate.

4. AGPR:Sub Office Peshawar.

5. Agency Accounts Officer Khyber at Jamrud.

6. Officer Concerned.

For information and necessary action.

Director Health Services, FATA Peshawar.

ACOVERED

### Arrival Report

In pursuance of the Directorate of Health Services FATA Office Order No. 7770-75/DHS/FATA/Admn, dated 13-05-2013, I hereby submit my arrival report for the Post of Assistant Director EPI today dated 13-05-2013 (AN).

Dr. Sadaf Jamil.

Copy to:.

- Director Health Services FATA, Peshawar.
- Deputy Director (Admn), DHS FATA, Peshawar.
- P.S to Secretary Social Sectors, FATA Secretariat, Peshawar.

Dr. Sadaf Jamil.

13/5/2013

(17)

MYNEXURE-F

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The Director Health Services PATA. Peshawar.

Subject: <u>Regularization of service</u>

It is humbly submitted to your good office that the undersigned was transferred to Mohmand Agency during her deputation period in abroad fleave for crudy), and on unrival, was posted to Agency Beadquarter Hospital (AHQ). Bajance agency on 1° t4302013 in Ear period imposed by ECP, due to which the undersigned could not culumb her period to AHQ, and refued a legal notice to Competent Authority and in the light of legal notice and so her rules and regulations of GoP, the Competent Authority reposted the undersigned to EPI Cell FATC on 13May 2014 and the undersigned has a break of service from 1March 2013 till date. To 13 tray 2013

You are, therefore, requested to kindly regularize the break period offundersigned. I will be thankful to your good office for this favor.

Yours sincerely,

Dr. Sadie lamit

Dr Sadaf Jamil

Assistant Director, EPI

DHS,FATA,Peshawar.

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FATA SECRETARIAT

(SOCIAL SECTORS DEPARTMENT)
WARSAK ROAD, PESHAWAR

No. FS/SO/(H)/SSD/2013/ 926-30 Dated: 25/06/2013

#### OFFICE ORDER:-

On the recommendation of Director Health Services FATA, the competent authority has been pleased to regularize the break period served in FATA in respect of Doctor Sadal Jamil Assistant Director, EPI (BPS-17) from 01/03/2013 to 13/05/2013.

-Sd/-Secretary Social Sectors Deptt: FATA

#### Copy forwarded to:-

- 1. Director Health Services, (FATA). Peshawaj:
- · 2-. Medical Superintendent, AHQ: Hospital Mohimand Agency.
- 3- Agency Accounts Officer, Ghallanai at Mohmand Agency.
- 4 Doctor, Concerned.
- -5- PS to Secretary Social Sectors Deptt: FATA

Javed Hassan Section Officer (Health)

Enclored

AT DED

.....The Secretary Administration and Coordination. FATA Secretariat , Peshawar :

ANNEXURE-G

Application for leave from June 15, 2014 to August 31, 2014

Dear Sir,

. It is to stated that the undersigned needs leave from June 15, 2014 to August 31, 2014 to attend her graduation ceremony in Australia. Kindly grant me Ex-Pakistan leave.

Warm regards.

Dr. Sadaf Jamil
Assistant Assistant Director, EPI DHS, FATA

Advocate





## FATA SECRETARIAT (MAINSTRUTION INFRASTRUCTURE & COORDINATION DEFINITION DEPARTMENT) WARSAK ROAD PESHAWAR

No.FS/E/100-93/86/5-76 Dated 16/6/2014

Secretary, Health Department, Khyber Pakhtunkhwa, Peshawar,

Subject: <u>LEAV</u>

LEAVE EX-PAKISTAN

Dear Sir,

I am directed to enclose herewith a copy of application in respect of Dr. Sadaf Jamil Assistant Director EPI (FATA) requesting for the grant of 78 days Leave Ex-Pakistan for the period from 15-06-2014 to 31-08-2014 to attend her Graduation Ceremony in Australia as per attached copy of invitation letter for favour of sanction.

Yours faithfully,

(JIBREEL RAZA)
Section Officer (Estab).

Copý to :

Director Health Services (FATA) for information.

Section Officer (Estab)

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### GOVERNMENT OF KHYBER PAKHTUNKHWA HEALTH DEPARTMENT

Dated Peshawar the 11th July, 2014.

### NOTIFICATION

No.SO(H)E-II/1-5/2013: The Competent Authority is pleased to grant 76-days, Ex-Pakistan Leave, w.e.f. 15.06.2014 or from the date of availing, in respect of Dr. Sadaf Jamil, Assistant Director (BS-17), EPI FATA, Reshawar.

Furthermore, this department has no objection over proceeding abroad of the doctor concerned.

SECRETARY HEALTH KHYBER PAKHTUNKHWA

### Endst. No. & date even.

Copy to the:

1. Accountant General, Khyber Pakhtunkhwa,

2. Director General Health Services, Khyber Pakhtunkhwa.

⇒ 3. DHS FATA Peshawar.

4. PS to Secretary Health.

5. PA to Special Secretary Health.

6. Deputy Director (IT), Health Department.

7. Officer concerned.

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(Misball Riaz) Section Officer(E-II)

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Copy also available on the website www.healthkp.gov.pk

HRD Building, Health Department Govt. of Khyber Pakhtunkhwa,





All communications Should be Addressed to The Director General Health Services Peshawar and not to any official by name.

Office Ft. (091 - 9210259 | Exchange 2011 - 9210187, 091 - 9210196 | Fax (1001 - 9210250)

### OFFICE ORDER

Dr. Muhammad Asif (BS-19) Coordinator (PH) DHO Office Peshawar is hereby appointed as an inquiry officer to conduct enquiry into the report of DHS FATA, Peshawar against Dr. Sadaf Jamil Khan WMO (BS-17) Ex-Assistant Director (EPI) attached to DHS FATA, Peshawar regarding her absence and keeping Govt: Vehicle in her possession for five months un-lawfully.

The enquiry officer should probe and investigate into the matter and submit a fact finding report along with his recommendations within 10-days positively.

Sd/xxxxxx Director General Health, Services Khyber Pakhtankhwa.

No. 6/02-04/E-1 (De Soute Jamil Khon Kantagardin Director 15 PH number of the Bated: 22/3/2015

Copy forwarded to the: -

1. Secretary to Govt: of Khyber Pakhtunkinva Health Department for information.

2. Dr. Mulianimad And (19549) Coordinator (PH) DRO Office Peshawar for information & necessary action. A copy of DHS FATA letter dated 05.03.2015 is enclosed for perusal please.

3. AE-II DOHS KPK Peshawar for information

Assistant Difector (F-1)

Directorate General Health

SERVICES KHYBER PAKHTUNKHYWA PENHANGAR

SERVICES KHYBER PAKHTUNK

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Mane-Joseph Jamil.

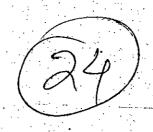
Prone - 0336-9178904

Postal Address - House No 128,

shout 10, Section of Sural frances,

Prone 8, Bahriar fram Roundfield.

10 BD



# 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.

Office Ph. (991.–9210269Exchange # 091.–9210187, 091.–9210196Fax & 091.–9210230

No. 1/104-05/EI

Dated 2 /2 /2015

To.

Subject: -

Dr. Muhammad Asif Member of Service (BS-19) Coordinator (PH) DHO Office Peshawar.

INQUIRY

Please refer to this Directorate General Health office order No. 6102-04/E.I dated 27.03.2015 on the above cited subject with the request to expedite the submission of requisite inquiry report in the subject case without any further loss of time, so as to proceed further.

Assistant Director (#-I) / DRECTORATE GENERAL HEALTH SERVICES KHYBER PAKHTUNKHWA PESHAWAR

DHS FATA, Peshawar for information w/r to this Directorate office order No. 6102-04/E.I.dated 27.03.2015 with the request to intimate present status of the case for record purpose.

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### GOVERNMENT OF KHYBER PAKHTUNKHW HEALTH DEPARTMENT

munediate

No. SO (E) H-II/1-5/2013/ Dr. Sadaf Jam : Dated Peshawar, the 13<sup>th</sup> July 2015

To.;

The Director General Health Services, Khyber Pakhtunkhwa

Subject:

APPEAL FOR JUSTIFICATION PROVI

PROVIDED

I am directed to refer to the subject noted above and to state that enquiry may kindly be conducted against Dr. 'Sadaf Jamil WMO/Assistant Director (BPS-17) (EPI) FATA under intimation to this Department to process the case further:

(Daulat Khan) Section Officer (E-II)

Copy forwarded to:-

1. PS to Secretary Health, Khyber Pakhtunkhwa, Peshawar.

2. PA to Special Secretary Health.

Section Officer (E-II)

ANNEXURE-



## DIRECTORATE OF HEALTH SERVICES FATA FATA SECRETARIAT WARSAK ROAD PESHAWAR 7.01 / OHIS/FATA/Adimn Dated: 7.07 /2015

Τo

The Deputy Director, Population Welfare Department FATA.

Subject: STOPAGE OF SALARY.

It has come to the notice of this Directorate that Dr. Sadaf Jamil, Assistant Director (Technical) is drawing salary from your office till date, whereas she has been declared absconder and reported to the Secretary Health KPK vide letter No. 6596/DHS/FATA/Admin dated 05-03-2015. (Copy attached)

Therefore you are directed to stop her salary immediately and inquire that how she has been drawing salary in spite of the above quoted fact.

> Director Health Services FATA, Peshawar

/DHS/FATA/Admn

Copy to the:-

1. Secretary Health Khyber Pakhtunkhwa Peshawar.

2. Director General Kliyber Pakhtunkhwa Peshawar.

3. PS to Secretary Social Sectors Department FATA.

Director Health Service

FATA Peshawar:

The secretary Health, KPK ,Peshawar INEXURE-J

Subject:

Application for appointment of meeting in person

Dear Sir,

It's stated humbly that an allegation is made against the undersigned that she kept vehicle for 6 months during her absence and when she was asked to hand over the vehicle she handed without log book. A fake inquiry is served by the then Director Health Services, FATA in 2015 and marked to the then Secretary KPK in 2015. An inquiry was marked against the undersigned to an inquiry officer Mr. Asif and It was conducted by a biased inquiry officer as he did not bother to hear the undersigned and submitted it with an excuse that he could not contact the undersigned neither on phone nor in person.

To conduct a proper, fair and unbiased inquiry against the undersigned, the undersigned wants to meet your good self in person.

The undersigned appeared for hearing to Special Secretary Health KPK but could not get an effective feedback about her status whether she found guilty or innocent against the mentioned allegation?

Yours sincerely,

Salof /5/8/2016 Dr. Sadaf Jamil.

Woman Medical Officer, FATA/KPK.

CONFIDENTIAL Enquiry report

To

Director General, Health Services, Khyber Pakhtunkhwa, Peshawar,

Subject; Enquiry

Reference; DGHS office letter No. 11104-05/E-1 dated 07/07/2015.

Respected Sir,

I was appointed as enquiry officer in the above reference case.... (Annexure-A) to probe into the case of willful absence and keeping Govt. vehicle unlawfully in possession by Dr. Sadaf Jamil WMO BPS-17 Ex- Assistant Director EPI attached to DHS FATA.

#### Proceedings:

To get the information the undersign wrote a letter...... (Annexure-B to DHS FATA.

In reply a brief service history and the home address of the doctor concerned was submitted by the DHS FATA, on their given address, a formal letter was sent through a messaginger on 13/08/2015, which was returned back undelivered. (Annexure-C because it was learnt that the address was of a rented house and she has left the house without disclosing her new address.

A visit was made to the Directorate of FATA on 17/08/2015, where I examine her personal file, the relevant record was photocopied by Deputy Director (dev.) Healt FATA Dr. Fazal-i-Maula.

I also paid a visit to Dr. Khalid Sahibzada Deputy Director EPI FATA, he brief me regarding the transfer of Dr. Sadaf Jamil from EPI FATA to Population Welfa Department FATA, but her latest residential address and contact no. was not know to him.

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From the Establishment Section of Director Health FATA, she was contacted From the Establishment Section of Director Health FATA, she was contacted through her available cell No. repeatedly but she did not attend the phone, because through her available cell No. repeatedly but she did not attend the phone, because the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 therefore her lefter to the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with the office since Ana 2014 the bad no contact with through her available cell No. repeatedly but she did not attend the phone, because she had no contact with the office since Aug. 2014, therefore her latest residential she had no contact with the office since Aug. 2014, therefore her latest residential she had no contact with the office since Aug. 2014, therefore her latest residential she had no contact with the office since Aug. 2014, therefore her latest residential she had no contact with the office since Aug. 2014, therefore her latest residential she had no contact with the office since Aug. 2014, therefore her latest residential she had no contact with the office since Aug. address was not available with the office.

The undersign also attempted to contact her on the given cell no. (0336-9178904) bu address was not available with the office.

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In the absence of her latest residential address and contact no it is observe in the absence of her latest residential address allu contact no it is observe that she is not performing any duty since August 2014 either under the offices that she is not performing any duty since August 2014 either under the offices. that she is not performing any duty since August 2014 either under the omces. (
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Population Welfare Department FATA as mentioned in the observation...

She was appointed on regular basis through Public service Commission vic one was appointed on regular basis intough rubic service Commission vic Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 and posted in AH Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 and posted in AH Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 and posted in AH Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 and posted in AH Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 and posted in AH Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 and posted in AH Notification No. SOH (E-ii)/3-18/2007 dated 05/10/2007 dated 05 Nouncation No. 50th [E-11]/5-10/2007 dated U5/10/2007 and Posted in AH
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regularized as leave without pay.

3. She was allowed to work as Assistant Director technical Population Welfa FATA and to draw salary against her original post in AHO Hospital Ghallan wides the Directorate Figure 1979 affice order No. 4020-20 / FATA and to draw salary against her original post in AHO Hospital Ghallan WATA and to draw salary against ner original post in Arry Hospital Granan dalay vides the Directorate Figure 17ATA office order No. 4230-29/17ATA Admir dalay 10000

4. She was adjusted for the purpose of pay against the post of WMO reproducting the Walth RA Health services center Mohmand Agency vides this Directorate Health FA

oince order NO. (405-1/DHS/FALA dated 25/05/2010.

5. She was transferred from Population Welfare Department FATA to EPI FA and allowed to draw pay from Population Welfare Department FATA vides off and allowed to draw pay from Path dated On Inc. 1901

and anowed to draw pay from ropulation wetrare Department FATA vides officed another than the second order No. 10215-18/DHS/FATA dated 20/06/2011. Development Scholarst order No. 10215-18/DHS/FATA dated 20/06/2011. Proceeded aproad for Participation in Australian Development Scholarsk 2012 [ADS] 2011 intake of Master degree Level Award from January No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health Khigher Dakhtringham No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secretary Health No. 10 (ADS) 2012 [and Tearl vide secreta December 2012 (one year) vide secretary Health Khyber Pakhtunkhwa No

bearing No. SUH-IV/2-95/09/Australia dated 21/11/2011.

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FATA order No. FS/E/100-81(vol-10)/1570-78 dated 147-02/2012.

FATA order No. FS/E/100-81(vol-10)/1570-78 dated 147-02/2012.

FATA order No. FS/E/100-81(vol-10)/1570-78 dated 147-02/2013.

Posted as Assistant Director EPI FATA vides Directorate Health FATA off Posted as Assistant Director Palastan dated 13/05/2013.

Order No. 7770-75/DHS/FATA/Admin dated 13/05/2014 granted of 76 days w.c.f. 15/06/2014 granted order No. 7770-75/DHS/FATA/Admin dated 13/05/2013. order No. 1770-15 DHS/FAPA/Admn dated 13/05/2013.

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Procedded on Ex-Paldstan leave of 76 days w.c.f. 15/06/2014 granted v
Procedded on Ex-Paldstan leave of 76 days w.c.f. Notification No. 90 Health Department No. 90 Health Proceeded on Ex-Paidstan leave of 76 days w.c.f. 15/06/2014 granted v. Govt. of Khyber Pakhtunkhwa Health Department Notification No. SO (F





II/1-5/2013 dated 11/04/2014 and she was due to report back in Septem?

10. She was adjusted for the purpose of pay against the post of Assistant Direc (Technical) Population Welfare Department FATA during leave mentioned para-9 above vide Directorate Health FATA office order No. 1441-55/DHS?FATA/Admn dated 04/08/2014.

From the available record and information it is observed that Dr. Sadaf Jamil has a performed duty since Aug. 2014 till date under the control of Director Health FA and Population Welfare Department at any post. There was no application of less applied/sanctioned for the period of absence from duty on record,

The vehicle under her possession bearing registration No. A-4778 Toyota Hilux doul cabin model 2007 was retrieved by the Director Health FATA on 17/01/2015 with registration and log book, but she kept the vehicle from 30th Aug. 2014 to 17/01/20 unlawfully for 05 months.

#### Recommendations;

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- The vehicle concerned may be examined by the transport office of the for 05 months i.e from Aug. 2014 to mid January 2015 may be assessed an Discovered from her.
- Disciplinary action may be initiated as per E&D rules against the Doctor concerned for her willful absence from Aug. 2014 till date and keeping if official vehicle illegally for 05 months.
- Instructions may be issued to the Directorate Health FATA to keep a vigilant ey on the staff regarding their absence from duty without legitimate cause future.

Report is submitted for further necessary action.

Dr. Mohammad Asif,

(Enquiry Officer), Coordinator, Public Health,

DHO Office Peshawar.

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To

The Secretary,
Health Department,
Khyber Pakhtunkhwe

Khyber Pakhtunkhwa, Peshawar.

ANNEXURE-L

## Subject: <u>OBSERVATIONS/OBJECITONS ON THE FACT FINDING</u> <u>INQUIRY CONDUCTED AGAINST THE UNDERSIGNED.</u>

Respected Sir.

The undersigned submits her objections/observations on the fact finding inquiry conducted against her on account of certain baseless and fabricated allegations.

I was appointed as Women Medical Officer on regular basis through Public Commission vide notification No.SOH (E-11)/3/-18/2007 dated 05.10.2007. Ever since my appointment I remained posted on different posts and stations in FATA. I throughout performed my duties as assigned with zeal, devotion and dedication and always remained loyal towards my duties. I have never given any chance of complaint whatsoever regarding my performance of duties.

I remained posted as Assistant Director EPI, I always remained upright in performance of duties. Due to my uprightness, some of the senior officers of DHS FATA when found the undersigned an obstacle in way of their corruption practices, they started personal grudges with me and victimized me on one pretext or the other. The instant inquiry is also the result of the same.

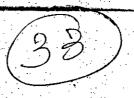
#### OBJECTIONS ON THE INQUIRY REPORT:

Before the initiation of the fact finding inquiry, the undersigned has never been served with any notice of inquiry nor contacted through any means by the inquiry officer for appearance before her. No endeavor whatsoever has been made to associate the undersigned with the inquiry proceedings. What to say about recording statements in her presence. The inquiry officer has based his findings/recommendations on mere surmises and conjunctures. It is a well-established principle of law that no one should be condemned unheard. Unfortunately the undersigned has deliberately been kept away from the so called inquiry and has thus has been condemned unheard.

The undersigned contact details in form of email and phone number i.e. 03369178904, which she was using before her leave of 76 days and till date were available with Directorate of Health services, FATA. It can be double checked from urone services, Pakistan. This number was on entire time and record can be checked from above said same services.

The undersigned submitted her appeal at the good office of Chief Secretary ,Kpk on April 6.2015 and visited DHS.FATA office on same date which indicates that she was neither kidnapped nor died but it's poor competency of inquiry officer and biased behavior of Director Health services ,FATA Mr.Safeer as he neither informed the undersigned about any inquiry nor inquiry officer to get her hearings or written statement.

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As per version of inquiry report, he visited Mr.khalid and he miscommunicated him that he has no contact details of undersigned, it's per record of DHS, FATA that just after few days of leave sanctioned of undersigned, the competent authority transferred from EPI, FATA to Population Welfare Department as inquiry officer mentioned too on August 4,2014(Annexure A).

Here the statement of Mr.Khalid and DHS.FATA negates each other as the official letter with subject" will full absence from duty" to Secretary health kpk by DHS,FATA on May 3,2015 mentioned that the undersigned visited EPI cell surprisingly and handed over her charge to newly posted Assistant Director EPI then how he can state to inquiry officer that he was unaware of her any contact?

The undersigned did not visit EPI Cell since from her leave till date. The EPI cell has four watchman on duties, this shall be inquired from them if anyone would have ever seen her after her leave in office.

Mr.Khalid visited the undersigned house at Rawalpindi along with proforma of charge languishing and charge resumption and got it signed on and if Mr.Khalid denied that it's not fact then in other case that means he did fake signature of the undersigned to take charge of EPI as Assistant Director.

As per rules and regulations of government, the charge taking and giving proforma is carried out when the leaving officer hand over all assets of government to the charge taking officer. This shows that the inquiry officer did not carry out a good and vigilant inquiry report and he did not investigate the facts and figures and submitted this to the higher ups.

One of the allegations as leveled upon the undersigned is that she kept official vehicle for 5 months and when she returned it was without registration and log book.

If inquiry officer would have checked all documents related to the undersigned in unbiased and with competency, he would have asked from Mr.Khalid when he took charge from the undersigned, why did not he collect the vehicle from her as it was his duty too and if Mr.Khalid does not understand the rules and regulations or his duties why DHS,FATA is so kind towards him that it assigned him duties of administration as Deputy Director.

Mr.Khalid on multiple occasions informed DHS,FATA in official drafts in various ways:

- 1. Once he draft that the undersigned surprisingly visit EPI cell and carry out taking and handing over the charge(Annexure B)
- On other occasion he mentioned that he contacted the undersigned on telephone and ask her to hand over charge and then he again mentioned to inquiry officer that he has no contact details of her(Annexure-C)

The undersigned submitted her reply to DHS,FATA on April 6,2015 about the allegation of illegal keeping government vehicle but neither he informed inquiry officer nor Secretary Health, KPK office this may be inquired why he hide facts from both of them.





The undersigned explained her status both in verbal and written that no registration was handed over to the undersigned. The log book and vehicle was handed over to Mr.Khalid prior to giving charge as when she was leaving for Islamabad to avail her leave, she left the vehicle in EPI Cell FATA office.

There is no question of keeping log book as the POL which the undersigned was utilized, she already reimbursed all the bills so why she would have stolen or keeping log book for no reason. Her leave started from July 1, 2014 and she handed over prior to it as she used her own personal vehicle for few days.

It is pertinent to mention here that it's not the first time that Mr.khalid was using two government vehicle at the same time. When he was posted as Assistant Director EPI he was using one government vehicle on the record and another jeep of government he was keeping illegally for almost 5 years and when Mr.Perveez kamal asked him to return and deposit in the store of government transport, he deposited it without functional tyers (for witness ask Mr.Nasir, store keeper of EPI ceil, FATA).

It's historical fact that whenever a new officer took charge in EPI cell,Mr.Khalid always played foul games with him or her. This was same department in which an officer named Dr.Qasim was posted as AD PEI and on the same day when he was suppose to give presentation to his higher ups, the CPU of computer was stolen from the so called open window of office.

It's on the record that when the undersigned was leaving for study to Australia on deputation for an year in 2011, she handed over the government vehicle i.e. vxr to Secretary Administration. Infrastructure and Coordination, FATA without asking anyone so why she would have kept this vehicle when she owns her own personal car.

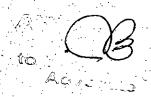
The eye witness will be presented if asked for as to prove the actual position and possession of vehicle.

The undersigned stated her stance about vehicle allegation on multiple occasions but her explanations were treated unheard (Annexure-D)

The inquiry officer might be disguised by DHS. FATA but his level of investigations is quite poor too. We are living in 2016 and in this era there are hundreds of tools of communication like email address which was available with DHS. FATA, EPI cell, FATA and population welfare, FATA.

The undersigned bears smart phone which has multiple applications like viber whats app etc ,it's strange that he could not contact her on any mode of communication.

Before conducting any inquiry the undersigned explained her position in an appeal to Chief Secretary, KPK why and how she was harassed in her services tenure for illegal matters to follow and approve. She handed over all the evidences along with her detailed dossiers of appeal to Chief Secretary, KPK and DHS,FATA





The inquiry officer mentioned in report that three explanations were served on her but no reply was received. However as per record she did not receive a single explanation.

### OBJECTIONS ON RECOMMENDATIONS OF THE INQUIRY OFFICER

As per record the undersigned applied for transfer, repatriation to parent department health, KPK ,deputation to Federal Health, Islamabad, leave with pay ( as 292 days were available on her credit to avail as per AGPR office, KPK ) and leave without pay which were regretted one after another.

The inquiry officer would have recommend that DHS,FATA has such a competent administration and establishment that if any civil servant is not coming on duty, it's duty of administration not the doctor who has been harassed in her services, compelled to leave service, who was taking care of her own finances and in this so called welfare state, neither she was granted justice, nor facilitated for her basic fundamental right or so called privilege or leave with pay or without pay, she has been asked to recover the salary which she received not mentioned that any disciplinary action shall be taken against DHS.FATA or may be inquiry öfficer has been bribed or influenced by DG,Kp office to make such report and submit.

The undersigned has the privilege to avail her credit leave during her life not after her death.

292 days = 9.7333 months which should be adjusted against this period and deducted. The remaining amount she will recover when her bills of POL and repair of 2011 and Health Professional allowance of 8 months of same tenure will be reimbursed to her.

Till date the house rent which is equal to 3 lacs and 60 thousands is not reimbursed till date due to government rule that subsidy is applicable to reimburse while requisition of a rented place being civil servant is not permissible.

The capability level of Government civil servants can be guessed from a draft letter of DHS,FATA on August 7,2015 in which he mentioned the undersigned has been declared" absconder". The meaning of this word in oxford dictionary and legal books can be checked by any literate intellectual being.

Absconder is not the one who is on leave and did not submit arrival report or against who no FIR is lodged in any law enforcing agency or she is searched or wanted by them.

The DHS, FATA also directed to Deputy director Population, FATA to inquire how she has been drawing salary in spite of above quoted fact?

The inquiry officer did not give attention to this letter, why?

Here the understand would like to share in small received by her from Makhalid.

Here the undersigned would like to share an email received by her from Mr.khalid (Annexure E)

He admitted that he was the one who released her salary as he was deputy director Administration, DHS, FATA so he shall be inquired why on way he was

A.A.C.

3/~)



miscommunication to his higher ups about the undersigned and on the other side illegal favoring her or harassing her in salary matter?

In July ,2015, the undersigned asked section officer Mr. Dolat Khan of Section E-II of Health KPK about any contact number or address of inquiry officer as he did not contact her till date in other instance—she should contact him but he just misbehaved with her and did not hand over his details.

A telephonic call was received from Special Secretary health ,kpk on January 12,2016 and she visited his office and per his directions she visited additional secretary health ,kpk office Mr.Mutasim Billah Shah and explained her position to him and she left her postal address and contact number to this office for any correspondence in future (Annexure -F).

The undersigned visited multiple times the offices of health, kpk and DHS:FATA. This inquiry was submitted to DG, KPK office on August 24,2015 and after more than an year the section E-II shared this inquiry report in September 21.2016 (it's purposely mentioned to ensure for late submission of reply of inquiry report as per verbal directions of Section Office E-II).

Under the law and rules any statement of witness or piece of evidence if used or made base for recommendations against an any person, that person must be confronted with such evidence of witness so as to allow him/her an opportunity to cross examine, since admittedly the undersigned has not been given any such opportunity, therefore, the recommendations made against her are said to based on no evidence and are legally not tenable. The allegations are probed in a biased and incompetent manner by the inquiry office:

The undersigned has never committed any act or omission which could be termed as misconduct, the allegations leveled against me are false baseless and are the result of personal grudges of the above named officials with the aim to stigmatize the bright and unblemished service career of the undersigned.

Keeping in view the above legal and factual objections it is humbly requested that since the undersigned has not been associated with the inquiry proceedings and that the inquiry has not been conducted in accordance with law and rules, therefore further proceedings may kindly be dropped and the inquiry may be filed.

Thanking you in anticipation.

Sincerely Yours,

Judy 03/11/2016

Dr. SADAF

(38)

Dr. Sher Mohammad Khan M.B.B.S., M.Sc. (London) F.R.C.P. (London) F.R.C.R. (U.K) Consultation by Appointment 2- Jamal-ud-Din Afghani Road, University Town, Peshawar. نز دموس مان مسجد، بور نبورشی ناون پیتا © 091-5842242 Age Sex Referred by **ULTRASOUND PELVIS** Length: gisa. **Uterus:** Anterio Posterior: Transverse: Dipord Cavity central, uniform echo pattern Endometrial thickness: Left: **Ovaries** Right: emall Seen: Pelvic Mass: Not seen:

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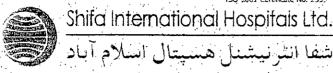
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P. T.O.

to be Doy







PATHOLOGY

Chemistry

OUT-PATIENT

MR No.... B9-00-L7

Patient ...... Miss. Dr Sadaf.

Age/Gender...... 38 Yrs 06 Months 12 Days /Female

Ordered By..... Dr. Dr Taha

Ordered On...... 13/05/2017 -17 18:40

Specimen No..... 05-13CC01038

Received in Lab. : 13/05/2017 -17 23:15

Verified On.....: 14/05/2017 -17 01:18

TEST	RESULTS
.Н.,,,,,,	10.22 mlU/mL

•	
Aduit Male	1.14 - 8.75
mIU/mL	
Adult Female:	
Folicular Phase	2.39 - 6.60
miU/mL	
Mid Cycle Peak	9.06 - 74.24
mIU/mL ·	
Luteal Phase	0.90 - 9.33
mIU/mL . 1	
Postmenopausal	10.39 - 64.57
mIU/mL	
without HRT	
Adult Malo	.0.05 11.06
Adult Male	0.95 - 11.95
mIU/mL	0.95 - 11.95
mlU/mL Adult Female:	
mlU/mL Adull Female: Folicular Phase	0.95 - 11.95 3:03 - 3.08
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mIU/mL Adult Female: Folicular Phase mIU/mL Mid Cycle Peak mIU/mL Luteal Phase	3:03 - 3.08
mIU/mL Adult Female: Folicular Phase mIU/mL Mid Cycle Peak mIU/mL Luteal Phase mIU/mL	3:03 - 3.08 2.55 - 16.69 1.38 - 5.47
mIU/mL Adult Female: Folicular Phase mIU/mL Mid Cycle Peak mIU/mL Luteal Phase	3:03 - 3.08 2.55 - 16.69

REFERENCE RANGE



Or Faz	ai	llahı	MD

Senior Advisor Pathology D.Path Eng. D.C.P Lond Diplomate Anatomical Pathology.
Clinical Pathology U.S.A.
FCAP FASCP U.S.A.

Or, Tahir Aziz Ahmed

Consultant Immunologist Professor of Pathology MCPS.FCPS(Micropiology)

Printed On :-:

Or Imran Ahmad MD FCAP Dr. Nadira Mamoon

Chief Pathologist / Director Lab Associate Chief Pathologist Assistant Professor of Consultant Pathologist Pathology Professor of Pathology Diplomate Analomic Pathology MBBS. FCPS (Histopathology MBBS, FCPS (Histopathol Assistant Professor of Pathology Diplomate Analomic Pathology and Rematology(USA) Fellow Hemalopathology(USA)

Dr.Asna Haroon Khan

Consultant Histopathologist MBBS.FCPS (Histopathologist

ano Cytopatho Ext. 4203

Cytopathology), FRC Path(UK) Ext. 3873

Dr.Muhammad Usman

Associate Consultani Micropiologist MBBS.FCPS(Microbiology)

Or Humaira Nasir

Ör.Zafar Ali

Consultant Pathologist Assistant Professor of Pathology MBBS, FRC Path(U.K) MCPS (Clinical Pathology) FCPS (Histopathology, Cylor

Consultant Haematologist Professor of Pathology Program Director Hamatology MBBS.M.C.P.S (Clinical

Associate Cons Associate Consultant Histopathologist Assistant Professor of Pathology MBBS, FCPS (Histopathology,

Pathology) nFCPS (Haematology) Or.Zujajah Hameed

Or.Ayesha Junaid

Histopathologist, MBBS, FCPS (His Cytopatho

Dr.Ghàzanfar Abbas

Associate Consultant Chemical Pathologist, Assistant Professor of Pathology, MBBS, FCPS (Chemical Pathology) Ext: 3640

Dr,Shawana Kamran

Hematologist , MBBS, FCPS(Hematology) Incharge Cytogenetic . Caborator Exit 4326

25/11/2018 -18 16:25' .

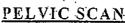
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Department of Radiology nstitute of Kidney Diseases, Peshawar.

Patient Name: Dr. Sadaf Jamil .

·Dated:

Jan-2018

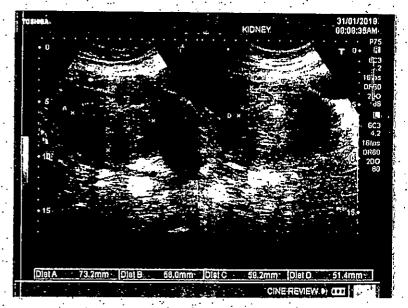


Urinary bladder is adequately filled and shows normal wall thickness with out any focal lesion. No calculus seen.

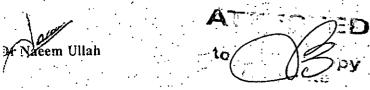
Uterus is enlarged elongated 18x8.4cm having large heterogeneous hypo echogenic two fibroids one inferior in the posterior wall is measuring 57x65x62mm, superior fundal one is measuring 73x56x59mm with collapsed cavity and 4mm endometrial. thicknes. No adnexal pathology. No free fluid

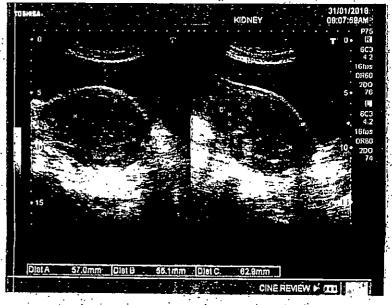
### [mpression:

Enlarged uterus with fibroids.









## COMBINED MILITARY HOSPITAL, RWP DEPARTMENT OF RADIOLOGY



Dr Sadaf Name

## ULTRASOUND ABDOMEN & PELVIS

LIVER: It shows smooth margins and normal echotexture. No focal lesion or dilated channels seen. Rt. dome of diaphragm moves freely. Portal vein caliber is normal.

GALLBLADDER: Gallbladder is normal in size and shape. No mass, calculus or thickening of its wall is seen. No fluid collection is seen around it. CBD is of normal caliber.

PANCREAS: It shows normal echotexture. No mass/ focal lesion is seen. Pancreatic duct is normal in caliber.

SPLEEN: Spleen is normal in size and echotexture. No focal lesion is seen.

Rt. KIDNEY: It is normal in size, shape and echotexture. No mass, cyst, calculus or hydronephrosis is seen.

Lt. KIDNEY: It is normal in size, shape and echotexture. No mass, cyst, calculus or hydronephrosis is seen.

URINARY BLADDER: empty. No calculus or mass is noted.

No ascites detected. No lymphadenopathy is seen.

### Impression:

Normal Study.

· Multiple large fibroids uterus (incidental finding)

Amoreen Mumtaz MCPC, ECPS, FRCR Classified Radiologist

(4)

مروق التي ينات

## ZAHOOR ULTRASOUND & DIAGNOSTIC

B-973, Dania's Arcade, Haidery Chowk, Saidpur Road, Rawalpindi: Ph. 051-4414061, Cell: 0323-4414061 Timing: 10:00 am to 10:00 pm



Name: Dr. Sadaf.

Code No 1321072018

Contact: 0336-9178904

Saturday, July 21, 2018

### PELVIC ULTRASOUND EXAMINATION

Anteverted (with full bladder). Enlarged with a large hetrogenous focal area/mass along posterior wall uterine fundus & body measuring (11.0x6.2cm) distorting & displacing the endometrial echoes\_ \_Fibroid. No intrauterine pregnancy/fluid or POCs. Cervix appears normal with cervical canal echoes.

#### ADNEXA:

RT.OVARY

Normal in size and stromal echotexture. No mass.

<u>T.OVARY:</u>

Normal in size and stromal echotexture. No mass.

FALLOPIAN TUBES: Not dilated.

OTHERS: No cyst/mass or ab scess in adnexa.

CUL-DE-SAC: No fluid visualized.

LOWER END OF URETERS: Not dilated.

**URINARY BLADDER:** 

Smooth outline. Normal contour. No wall/hypertrophy/irregularity/diverticulum/mass /stone or debris.

#### CONCLUSION:

- Fibroid uterus (Intramural).

Dr. Zahoor A. Khan MBBS, MCPS, DMRD (Pb) Consultant Radiologist Col (R) Dr. Riffat Masus d Si (M),

Consultant Radiologist

Dr. M. Siddique Darr. MBBS, (Pb): ARDMS (USA), MAIUM (USA) CARDUP (Canada), CSDMS (Canada) Ultrasound Specialist.

### NOTE:

If result is doubtful, test can be repeated free of charge within 48 hours

• The impression is based on the ultrasound findings at the time of examination, and hence alone, are by no means the final verdict or hold legal value. The actual / final diagnosis may pro ve to be otherwise, when laboratory or other investigations are carried out; which are strongly recommended before the initiation of the treatment.



QUAID-E-AZAM
INTERNATIONAL HOSPITAL

Prof. Umber Jalil Bakhtiar

MBBS, MCPS, FCPS, PGD-PETM
ABRAR SURGERY &
ABRAR DIAGNOSTIC CENTER
Consultant Obstetrician & Gynaecologist QIH

Cell No: 0321-5177344

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ACT PAGE OF THE PA

Near Golra Mor, Adjacent Froebels School, Peshawar Raod, Islamabad.

Tel: 5467170, 5467169, Fax: 051-5466610 (A Project of Global Health Services)

### PATIENT'S HISTORY

## ABRAR DIAGNOSTIC CENTRE

312-E, Charing Cross, Peshawar Road, Rawalpindi.
Tel: 5470205, 5473543, 5167015
Fax: 051-8317450, Mob: 0331-5261588



E-mail: mri\_ct@hotmail.com, abrarmri@hotmail.com Web: www.abrardiagnostics.com.pk

Conscious plans Conscious plan
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CAZERAL UN
Section Committee
Patient Name DR Mis Sadaf Famel 584
Date of Birth Sex Weight
Short History Mononhagie - Life
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Date 21.3.19 Referring Dr. Umber CT/MRI of Pelvis Facil Bakhlian
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## Fauji Foundation Hospital Rawalpindi 5788150-65

# "ISO 9001:2008 Certified" DISCHARGE CERTIFICATE

A&DNo. C74036

CONSULTANT Prof Dr Ozra Saled

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Regt No. C37764 Rank CNE Name of Patient	Dr. sadaf
S/O, D/O, W/O M Jamil Regt/Corps	Ward
-10/10	
DATE OF ADMISSION: $\frac{25/3/19}{}$ DATE OF I	DISCHARGE: $\frac{29/3/19}{2}$
DIAGNOSIS: Multiple Fibriods & HMB + Anemia	(Hb 49g/ou)
OPERATION (IF ANY): Conservative management	
OUT COME: Sanspactory building Hb do	no Name de funyamento
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PERFORMED BY: DATE OF	OPERATION:
INVESTIGATIONS:	
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### ARMED FORCES INSTITUTE OF RADIOLOGY & IMAGING

ISO 9001:2008 CERTIFIED

Mall Road, Rawalpindi Phone: 051-5582980/561-31864/Mob 0345-5122696

Name | Dr Sadaf

Age

Years

Date | 16-May-18

### **ULTRASOUND PELVIS**

- UTERUS: It is enlarged in size with a large heterogenous well defined lesion measuring 8.5 x 7 x 6 cm (T x AP x CC) noted in the posterior wall of uterus involving its body as well as fundus with internal vascularity having RI of 0.67. Endometrial echoes are midline, with endometrial thickness measuring 6mm and are displaced anteriorly by the lesion.
- No fluid is seen in the cul de sac.
- OVARIES & ADNEXA: Right ovary is in upper limit of normal in size (11ml) with few developing follicles. Left ovary is bulky and measures 18 ml. No mass or cyst is seen in the ovary / adnexa.
- URINARY BLADDER: Normal wall thickness. No mass or calculus is noted.

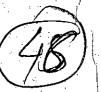
### Opinion:

- Known case of uterine fibroids with largest measuring 8.5cm in maximum dimension
- Bulky left ovary

SULTANISALEEM RESIDENT RADIOLOGY AFIRI-RWP

## Dr. Shamaila Tanveer

MBBS, FCPS



Assecrate Professor Gynaecology Obstetrics
Consultant Obstetrician Gynaecologist

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TEST

### Chemistry

OUT-PATIENT

MR No...... B9-00-L7

Patient..... Miss. Dr Sadaf

Age/Gender...... 38 Yrs 06 Months 12 Days /Female

Ordered By...... Dr. Self - 01P

Ordered On...... 20/10/2018 -18 18:03 Specimen No....: 1020CC01101

Received in Lab.: 20/10/2018 -18 22:59

Verified On..... <del>21/10</del>/2018 -18 01:35



**RESULTS** 

Iron Serum..... µg/dL REFERENCE RANGE

Femate 50 - 170 ug/dL Male ͺ65 - 175 μg/dL



<u>Dr.Fazal Ilani MD</u>

Senior Advisor Pathology O Path Engrio C.P. London Diptomate Anatomical Pathology, Clinical Pathology U.S.A FCAP FASCP U.S.A

Dr. Tahir Aziz Ahmed

Consultant Immunologist
Professor of Pathelogy
MBBS.
MCPS.FCPS(Microbiology)
FRC Path (Immunology)
Extt4348

Or Imren Ahmad MD.FCAP Dr.Nadira Maimoon

Chief Pathologist / Director Lab Associate Chief Pathologist Assistant Professor of Consultant Pathologist Pathology Professor of Pothology Diplomate Anatomic Pathology MBBS, FCPS (Histopati

Dr. Asna Haroon Khan

and Cylopathology) Ext: 4203

and Hematology(USA) Cytopathology), FRC Path(UK) Fellow Hematopathology(USA) Ext: 3873

Dr.Munammad Usman

Associate Consultant Microbiologist MBBS.FCPS(Microbiology)

Dr.Humaira Nasir

Consultant Pathologisi Pathology MBBS, FRC Path(U.K) MCPS (Clinical Pathology) FCPS (Histopathology, Cy

Dr.Zajar Ali,

Histopathologist Assistant Professor of Pathology M88S, FCPS (Histopati Cytopathology)

Dr.Ayesha Junaid

Consultant Haematologist Professor of Pathology Program Offector Hematology M8BS.M.C.P.S (Clinical

Or Zujajah Hameed

Histopathologist, MBBS, FCPS (Histopat Cytopathology) . . . Ext: 4115

: Or Ghazanfar Abbas

Associate Consultant Assis)ant Professor of Pathology, MBBS: FCPS (Chemical Pathology) Ext. 3640

Dr.Shawana Kamran

Associate Consultant Incharge Cytogenetic Laboratory Ext. 4326

Printed On

25/11/2018 -18 16:25

Printed By IMRAN\_SL269

MR No..... 69-00-L7

Patient...... Miss. Dr Sadaf

Age/Gender...... 38 Yrs 06 Months 12 Days (Female

Ordered By..... Dr. Self - 01P

Ordered On...... 20/10/2018 -18:18:03

Specimen No....: 1020CC01101 Received in Lab.: 20/10/2018 -18 22:59

Verified On...... 21/10/2018 -18 01:10

TEST **RESULTS** HISTORY REFERENCE RANGE

Calcium 9.2 mg/dL Adult: 8,4 - 10.2 mg/dL

> 0 - 10 Days; 76-104

mg/dL

10 Days-24 Months: 9 - 11

Children: 12 years: 8.8

10.8mg/dl



Dr.Fazal Ilahi MD

Senior Advisor Pathology O.Path Eng. D.C.P. London Diplomate Anatomical Pathology. Clinical Pathology U.S.A FCAP FASCP.U.S.A.

Dr. Tahir Aziz Ahmed

Professor of Pathology MBBS. AtCPS.FCPS(Microbiology) FRC Path (Immunology) Ext;4348

Chief Pathologist / Director Lab Associate Chief Pathologist Assistant Professor of Consultant Pathologist Diplomate Anatomic Pathology and Hematology(USA) Fallow Hematopathology(USA)

Dr.Asna Haroon Khan

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Dr.Imran Ahmad MD FCAP Dr.Nadira Mamoon

Professor of Pathology MBBS, FCPS (Histopath Cytopathology), FRC Path(UK) Ext: 3873

Or, Muhammad Usman

Or.Humaira Nasir

Consultant Pathologist Pathology
MBBS, FRC Path(U.K)
MCPS (Clinical Pathology)
FCPS (Histopathology, Cyr

Or.Zafar Ali Associate Consultant Histopathologist Assistant Professor of

Pathology M8BS, FCPS (Histopathology,

Or.Ayesha Junaid

Consultant Haematologist Professor of Pathology Program Director Hemai MBBS,M.C.P.S (Clinical Pathology) FCPS (Haematology)

Dr.Zujajah Hameed.,

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Dr. Ghazaniar Abbas

Associate Consultant Chemical Pathologist, Assistant Professor of Pathology, MBBS, FCPS (Chemical Pathology) Ext: J640

Dr. Shawana Kamran

Associate Consultant Hemarologist MBBS, FCPS(Hematology) Incharge Cyloge Ext. 4326

Printed On : 25/11/2018 - 18 16:25

Printed By IMRAN\_SL269

PATHOLOGY

## Hematology

HM03-Hemoglobin

**OUT-PATIENT** MR No..... B9-00-L7

Patient...... Miss. Dr Sadaf

Age/Gender...... 38 Yrs:06 Months 12 Days /Female

Ordered By...... Dr. Self - 01P

Ordered On..... 20/10/2018 - 18 18:03 Specimen No..... 1020HM00496.

Received in Lab.: 20/10/2018 -18 22:59 Verified On...... 21/10/2018 -18 01:03



TEST

RESULTS

REFERENCE RANGE

Hemoglobin....

6.30

g/dL:

M(13.0-18.0)g/dL F(11.6-16.5)g/dL

#### Comments:

Verified from analyzer after ID check without smear review. Peripheral film is recommended. Please correlate with clinical condition and repeat with fresh sample if not compliant.

Informed to asad ex 3416



ASSISTANT TECHNICAL OFFICER: Muhammad Nawaz (8975)

\* The report contains panic value(s) Informed to asad ex 3416 has been informed by 8975 at 21/10/2018 01:03

Or Fazal	llahi	MD

Senior Advisor Pathology D.Path Eng. D.C.P. Lond Diplomate Anatomical

Dr.Asna Haroon Khan Consultant Histopathologisi

## Or Imran Ahmad MO FCAP Dr Nadira Mamoon

Chief Pathologist / Director Lab - Associate Chief Pathologist Assistant Professor of Consultant Pathologist Pathology Professor of Pathology Professor of Pathology Diolomate Anatomic Pathology MABS, FCPS (Histopathology and Hematology(USA) Cytopathology), FRC Path(UK) Fellow Hematopathology(USA) Ext: 3873

Associate Consultani Microbiologist

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Associate Consultant Assistant Professor of

## "Dr.Ayesha Junaid

Consultant Haematolog Professor of Pathology Program Director Hema MBBS.M.C.P.S (Clinical

Associate Consultant Histopathologist, MBBS\_FCPS (Histopatho

#### Dr.Ghazaniar Abbas

Associate Consultan Chemical Pathologis Assistant Professor Pathology, MBBS, FCPS (Chem Pathology) Ext: 3640

#### Dr. Tanir Aziz Ahmed

Consultant Immunologis Professor of Pathology MBBS. MCPS.FCPS(Microbiology) FRC Path (Immunology) Ext.4348

and Cylonathology) Ext: 4203

#### Dr.Muhammad Usman

#### Dr.Zafar Ali

Pathology MBBS\_FCPS (Histopathology, Cytopathology)

#### Or Zujajah Hameed

Cytobathology)

#### Dr.Shawana Kamran

Associaté Consultant, Hematologist MBBS-FCPS(Hematology) Finding Cylogenetic Laboratory Ext. 4326

Printed On 3

25/11/2018 -18 16:25

Printed By IMRAN\_SL269

## ZAHOOR ULTRASOUND & DIAGNOSTICS

B-973, Dania's Arcade, Haldery Chowk, Saidpur Road, Rawalpindi. Ph. 051-4414061, Cell: 0323-441406

Timing: 10:00 am to 10:00 pm



Name: Dr. Sadaf. ...

Code.No 0825102018

Thursday, October 25, 2018

Contact: 03369178904

ULTRASOUND EXAMINATION OF UROGENITAL TRACT

#### RIGHT KIDNEY:

Normal in size and position. Smooth outline. No sonological evidence of parenchymal pathology. Normal cortical thickness. No stone or mass. Fullness of pelvicalyceal system noted.

Normal in size and position. Smooth outline: No sonological evidence of parenchymal pathology. Normal cortical thickness. No stone or mass: Fullness of pelvicalyceal system noted.

#### **URETERS:**

Not dilated.

#### UTERUS:

Anteverted (with full bladder). Enlarged with large fibroids along posterior wall of anterior body & fundus measuring 11.2x7.2cm & 8.9x5.5cm. The doppler showed scanty flow with RI 0.79. Endometrial thickness = 5mm. No intrauterine pregnancy/fluid or POCs. Cervix appears normal with cervical canal echoes.

#### ADNEXA:

RT.OVARY:

Normal in size and stromal echotexture. No mass.

LT.OVARY:

Normal in size and stromal echotexture. No mass.

FALLOPIAN TUBES. Not dilated.

OTHERS: No cyst/mass or abscess in adnexa.

CUL-DE-SAC: No fluid visualized.

LOWER END OF URETERS: Not dilated.

URINARY BLADDER:

Smooth outline. Normal contour. No wall/hypertrophy/irregularity/diverticulum/mass /stone or debris.

CONCLUSION:

Uterine fibroids (Intramural).

Fullness of renal pelvicalyceal system bilaterally.

Эr. Zahoor A. Khan IBBS, MCPS, DMRD (Pb) onsultant Radiologist

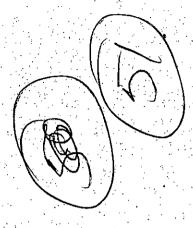
Col. Dr. Riffat Masud SI (M),

MBBS, FCPS, Consultant Radiologist Dr. Nadeem Shehzad MBBS, FCPS , DMRD (Gold Medalist) Consultant Radiologist

Dr. M Siddique Parr. MBBS (Pb), ARDMS (USA), MAIUM (USA) CARDUP (Canada), CSDMS (Canada), Sonologist

\* If result is doubtful, test can be repeated free of charge within 48 hours

\* The impression is based on the ultrasound findings at the time of examination, and hence alone, are by no means the final verdict or hold legal value. The actual / final diagnosis may prove t be otherwise, when laboratory or other investigations are carried out; which are strongly recommended before the initiation of the treatment.



## ZAHOOR ULTRASOUND & DIAGNOSTICS

B-973, Dania's Arcade, Haidery Chowk, Saidpur Road, Rawalpindi. Ph. 051-4414061, Cell: 0323-4414061 Timing: 10:00 am to 10:00 pm

Name: Dr. Sadaf.

Code No 0825102018

Thursday, October 25, 2018

Contact: 03369178904

#### HEPATOBILLIARY ULTRASOUND EXAMINATION



Normal in size and parenchymal echotexture. Smooth outline. No focal defect. Intrahepatic billiary channels and Hepatic veins are not dilated.

#### PORTAL VASCULATURE:

Portal, splenic and SMV are of normal caliber.

#### GALL BLADDER:

Wall is not thickened. No stone/mass or sludge seen. No pericholecystic fluid visualized, CBD:

#### Not dilated

#### PANCREAS:

Head, Neck & body are normal in size and parenchymal echotexture. Smooth outline. No focal mass. Tail is obscured by gastric gaseous reverberations. Pancreatic duct is not dilated.

#### SPLEEN:

Not enlarged. No focal defect

#### OTHERS:

Normal caliber of proximal abdominal aorta and IVC. No enlarged lymph nodes detected No ascites. No pleural effusion. No pericardial effusion.

#### CONCLUSION:

-Normal study, sonographically...







Col. (R)

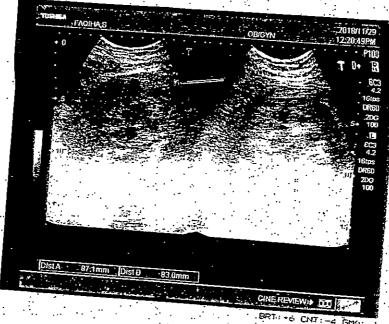
Dr. Muhamm: M.B.B.S., FCPS (Surg Consultant Surgeon 0321-6348846

Ref. No.

Patient's Name

Ref. By

**UTERUS** 





aqiha Aslam , RMP 10959

Date: 29-11-18

V Sex

Position

Size \_\_

winance

Shape

Outline

Exhoetexture \_\_\_

Endometrial Caviry

Now Inglite



MTI, Khyber Teaching Hospital
University Road, Peshawar. Phone: 091-9217110-46, Fax:—
Email: info@stin.gov pk. Website: http://www.kth.gov.pk





Chemical Pathology Report. YIEW: 05-96" 2019 15:51:30

Page 1 of J

-Dept Ref # - : Ke3/9FIW 19938589

HRNO : K03 00002240818

DR SADAF JAMIL Name

Age/Sex Phone

Address

: 39 Year(s)/Female -: ,92 0333 5995506

House # , Street # , Sector/Area, PESHAWAR - PAKISTAN

Chemistry - III

SPECIMEN

fretritin".

TEST(s)

-- RESULT(s): UNTIS

0.5-ng/mL

Ordered By-

Requested

Reported

In-house Consultant

Specimen Received

REFERENCE RANGE

05-APR-2019 12:30:56

06-AFR-2019-12:32:51

06-APR-2019.15:48:14

MTI, Khyber Teaching Hospital
University Road, Peshawar. Phone: 091-9217140-46, Fax:-Email: info@kth.gov.pk, Website: http://www.kth.gov.pk



. VIEW: 06-Apr-2019 12:40:14

#### Haematology Report

Page 1 of 1

Name . DR SADAFJAMIL Age/Sex 39 Year(s)/Female Phone .92 0333-5995506 Address

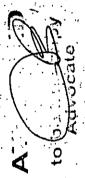
Ordered By : Walieed Ullah In-house Consultant :: : Report Destination

Requested 05-APR-2019 22:29:22

Specimen Received : 05-APR-2019 22:32:44 : 06-APR-2019.03:26:42 Reported

COC	
TEST(s) NORMAL LINET(s)	K03HEM190703
	06-APR-2019 03:26:42
WBC x10.e 3/µl	8.4
RBC 4-6 x10.e 6/µl	3.56
HGB : 11.5 - 17:5 : g/dL	(8.3)
HCT 36 - 54 %	2 <del>5</del> .8
MCV 76 - 96	72.6
MCH - 1 27, 33, 1 - pg	23.4
MCHC 33-35 g/dL	32.2
PET 150 - 450 ×10.e 3/pt.	
MPV 7.2 - 11 (L	. (-8.7
%NEUT 40 -75 %	73.7
N. C. S. C.	. , , , , , ,

House # , Street # , Sector/Area, PESHAWAR : PAKISTAN



Hote: Lab values should always be correlated with clinical picture.

Formal Range(s) and Unit(s) shown are for most recent results.





MTI, Khyber Teaching Hospital
University Road, Peshawar.. Phone: 091-9217140-46, Fax: -Email: info@kth.gov.pk, Website: http://www.kth.gov.pk



:	VIEW: 06-Apr-2019 12:40:17. Chemical Pathology Report	Page 1 of 1
٠,	MRNO 403-00002240818	and the second s
:	Name Ordered By In-house Consultant	Waheed Ullah
· .	VQC/SCX 1339 Year(s)/Female	
	Phone ,92 0333 5995506 Report Destination Requested	05-APR-2019 22:29:22
	71001 (23)	05-APR-2019 22:32:44
٠,	14. The factor of proposition of the Children	: 05-APR-2019-23:14:12
•	Chemistry - I	
	With the second	

TEST(s)	, and the second se	RVET(5)	-
ترورا فالمسران والخاه ويواجد الهراب والماد	الميان المسيدة المعالمة المعا 	23:14:27	
SODIUM	135 - 150	nmol/L 138	•
POTASSIUM	3.5 - 5.1	minol/L 4.53	•
CHLORIDE .	96 - 112	mno/L 111.9	
BLOOD UREA	10 - 50 1	mg/dL	
GLUCOSE (RANDOM)	70 : 140	.mg/dL 89.5	•
TOTAL BILLRUBIN	·: v · · · · · · · · · · · · · · · · · ·	ing/dt 0.14	
ALT/GPT	10 - 50	U/L 23.7	
ALKALINE PHOSPHATASE	35 - 104	U/L 99	
CREATININE	0.42 - 1.06	mg/dL 0.71	
		•	



twite: Lab values should always be correlated with clinical picture.

(brinal Bange(s) and Unit(s) shown are for most recent results.

WITI, Khyber Teaching Hospital
University Road, Peshawari. Phone: 091-9217140-16, Fax: -Email: info@kth.gov.pk, Website: http://www.kth.gov.pk



VIEW: 06-Apr-2019 12:40:18 .   laematology	/ Report Page 1 of 1
MRNO : K03-00002240818	
Name OR SADAFJAMIL	Ordered By Waheed Ullah
Age/Sex: :39 Yéar(s)/Female	In-house Consultant :
Phone , 5,92 0333 5995506	Report Destination :
Address	Requested 05-APR-2019 22:29:22
House # , Street # ; Sector/Area, PESHAWAR - PAKISTAM	
	Reported 05-APR-2019 22:47:06
Coagulation Profile	
	03HEM190703
	05-APR-2019
	22:47:06
Prothrombin Time:	
PT Patient: Seconds	
: PT Control:	16
INR(Calculated Value)	13
APTF:	
APTT Patient: Seconds	34
APTI Control:	30



### MTI, Khyber Teaching Hospital

University Road, Poshawar .. Phone: 091-9217140-46, Fax: --Email: into@kth.gov.pk, Website: http://www.kth.gov.pk



VIEW: 06-Apr-2019 12:40:16

## Chemical Pathology Report

Page 1 of 1

Ordered By : Waheed Ullah In-house Consultant

Report Destination

Requested : 05-API

Specimen Received : 05-API

Reported -

: 05-APR-2019 22:29:22 : 05-APR-2019 22:32:44 : 05-APR-2019 23:14:27

Chemistry - I

K03CH1190879 05 05-APR-2019 NORMAL UNIT(s) TEST(s) 23:14:27 SODIUM " **POTASSIUM** 3.5 - 5.1 miyəl/L 111.9 introl/L 96 ÷ i12 CHLORIDE BLOOD UREA 10 - 50 70 - 140 89.5 GLUCOSE (RANDOM) 0.1 - 1.00.14 , ing/dL TOTAL BILIRUBIN : 10 - 50 ALT/GPT ALKALINE PHOSPHATASE 35 - 104 CREATININE 0.42 - 1.06

to lo dans

· lote: Lab values should always be correlated with clinical picture.

· Formal Range(s) and Unit(s) shown are for most recent results.



## MTI, Khyber Teaching Hospital

University Road, Feshawar.. Phone: 091-9217140-46, Fax: -Enoil: info@kth.gov.pk, Website: http://www.kth.gov.pk



VIEW	:	06	Ą	pr-	2019	12:4	0:15
•		٠.	•	•	::		

## Serology Report

Page 1 of 1

MRNO

: K03-00002240818

OR SADAF JAINE

Phone

Age/Sex : 39 Year(s)/Female .92 0333 5995506

Address

House # . Street # . Sector/Area, PESHAWAR - PAKISTAN

Ordered By

Waheed Ullah

In-house Consultant:

Reported

Report Destination

Requested -Specimen Received 05-APR-2019.22:29:22 05-APR-2019 22:32:44

05-APR-2019 23:38:00

Serology ICT Panel

:TEST(s)

NORMAL

|KO35ER190224 89. 05-APR-2019

Hepatitis B Profile

HBsAg (By ICT)

Anti HCV (By ICT) Anti İ.IJV (By ICT)

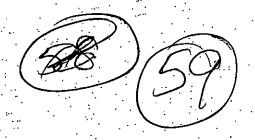
NEGATIVE

NEGATIVE

litte: Lab values should always be correlated with clinical picture. fibrinol Range(s) and Unit(s) shown are for most recent results.







PM3330

# FAULI FOUNDATION HOSPITAL RAWALPINDI

Printing Date & Time 25-War-2019 08:09 PM

all and a second of the second	45.550.00	MR.No.C.C	377784	Adm. No:	C74036 .	• :
Name: Patient Type:	Or Sagal Jamir Civilian Non Entitled Pal			Payment Me	od: Cash	•
Type:	Advance from Parient		eceived			
Receipt No. 468657	<u>AmountiRs.</u> ) 25.000	Received By Muhainmad Sajiad	Comments 1st Adv			•

Fauji Foundation Hospita "ISO 9001:2015 CERTIFI	FFH/FRM-156 I Rawalpindi
1204455 C377769	ED"
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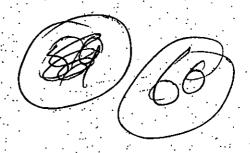
No Refund Wilbintertained after Labs of 3 Months. Note: This Election Receipt does not require Signature(s).

CHEMINE CHOWN JAHLUM HOAD HAWALPINDI HAWALPINDI PAKTISTAN PR. DOT STUDIO FAX: 1151-5788169 Email: FFH.RAWALPINDI@FAUJI.ORG.PK

roweled by: Install Ambient Ambiect of Fault-roundation, resisten.

Page 1 of 1





#### FAUL FOUNDATION HOSPITAL RAWALPINDI ISO 9001-2015 CERTIFIED.

Printing Date 8 Time 29-Mar-2019 07;06 PM

Dr Sadai, Jamii

MR. No: C377764

Adm. No: .

Patient Type: Civilian Non Entitled Patients ...

Date: 29-Ne/-2019

Payment Mod: Cash

Typé: 🗡

Ativance from Patient

Status: Received

Receipt No...

· AmountiRs.):

Received By

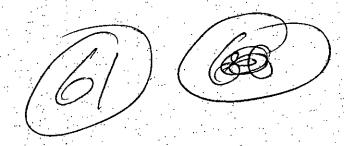
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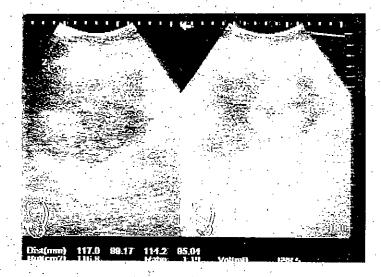




# Lady Dr. Shireen Ali Khan Ultrasonologist

M.B.B.S (Pak)
Diploma in Ultrasound (JUREI) USA
ICEAF (USA)
Member of Afro Asian Association (Pak)

Name: Jada | Peli



Uterus:

A huge fibroid seen traced ciplo. Luberstal cerea (et side) measuring

Adnexa:

*C.d.s*:

117 x 9.8 au along e another

fethord at feundal area 10.2 x 12-50

Bothe hour arean of calcufications

Cadameteri Peris Mared undistructed

and carrely collapsed

Urinary Bladder:

dear adurae

e Ovarier could not be cissoauzed

due so huge nass

Comments:

ato fee fluid Partially filled UB

Februal viteres

solver of four must

XIII

Lady Dr. Shireen Ali Khan





#### Quaid-E-Azam International Hospital (Project of Global Health Services) http://www.gih.com.pk

Printing Date 4, Tim 01-Apr-2019\_02:23 PM

MR, No.:

Patient Name: Dr. Sadaf Daughter of: Mohammad Jamil,

Femále / 38 Yrs Gender / Ago:

Patient Type I · Private Patient ?

Amount

01-Apr-2019

Invoice To:

Sr. No. Service Code

Date: Receipt No:

\$6754960

"House # 322, Stroot # 49; Sector F Safar Home Phase 8, Rawalpindi. Áddress:

Reference:

Appointment For Dr Shamaita Tanveer

Service Description Consultation Opd

Advised By:

Payable(Rs.)

Dr Shamaila .

Tanv eer

Grand Total:

(Rs.)

Prepared By. Ali Akbar

Note: Panel discount refunds and reimbursement patient will be entertained with in the same day

Advocate



#### WILL, Knyper Leaching Hospital

University Road, Peshawar. Phone: 091-9217140-46, Fax: Email: info@kth.gov.pk, Website: http://www.kth.gov.pk



VIEW: 08-Apr-2019 18:46:15

#### Chemical Pathology Report

Page 1 of 1

Dept Ref# : K03CHM19090109

: K03-00002240818

DR SADAFJAMIL

Name : 39 Year(s)/Female Age/Sex

Phone

MRNO

,92 0333 5995506

Address

House # , Street # , Sector/Area, PESHAWAR - PAKISTAN

Ordered By

In-house Consultant

Requested

Specimen Received

Reported'

'08-APR-2019 12:12:44

08-APR-2019 12:18:25

08-APR-2019 17:56:03

Serology - Hepatitis

SPECIMEN : SERUM

TEST(s)

HBsAg

RESULT(s)

CUT- OFF VALUE

NON REACTIVE

Cutoff rate:

1.00

Patient Rate:

0:44

NOTE:

Test to be considered "Reactive" if patient rate is equal to or greater than cutoff rate.

HBsAg is a chemiluminescent mictroparticle enzyme immunoassay for the qualitative detection of hepatitis B surface antigen (HBsAg) in human





#### MTI, Khyber Teaching Hospital

University Road, Peshawar.. Phone: 091-9217140-46, Fax: Email: info@kth.gov.pk,-Website: http://www.kth.gov.pk



VIEW: 08-Apr-2019 18:46:14 Chemical Pathology Report Page 1 of 1

Dept Ref# : K03CHM19090109

MRNO : K03-00002240818

: DR SADAFJAMIL

: 39 Year(s)/Female. Age/Sex

Phone . Address. ,92 0333 5995506.

House # , Street # , Sector/Area; PESHAWAR - PAKISTAN

Ordered By:

In-house Consultant

Requested:

Specimen Received

Reported

08-APR-2019 12:12:44

08-APR-2019-12:18:25

08-APR-2019 17:56:10

Serology - Hepatitis

SPECIMEN : SERUM

TEST(s) RESULT(s) CUT- OFF VALUE

NON REACTIVE Anti HCV

Cutoff rate:

1.00

Patient Rate:

0.04

NOTE:

Test to be considered "Positive" if patient rate is equal to or greater than cutoff rate.

**COMMENTS:** 

Anti HCV is a chemiluminescent mictroparticle enzyme immunoassay for the qualitative detection of antibody to hepatitis C virus in human serum.

Test is performed on Architect i2000 instrument employing chemiluminescent microparticle immunoassay (CMIA).



MTI, Khyber Teaching Hospital

University Road; Peshawar. Phone: 091-9217140-46, Fax Email: info@kth.gov.pk, Website: http://www.kth.gov.pk





"VIEW: 08-Apr-2019 18:46:13"

#### Chemical Pathology Report

. Page 1 of 1

Dept Ref# .: K03CHM19090109

: K03-00002240818 MRNO.

... DR SADAFJAMIL Name

Age/Sex : 39 Year(s)/Female

Phone

,92 0333 5995506

Address

House # , Street # , Sector/Area, PESHAWAR - PAKISTAN

Ordered By

In-house Consultant

Requested .....

: '08-APR-2019 12:12:44' : .08-APR-2019 12:18:25

Specimen Received Reported

08-APR-2019 17:56:15

Serology - Infections

SPECIMEN : SERUM

TEST(s) RESULT(s) Anti HIV

CUT- OFF VALUE

Cutoff rate:

1.00

Patient Rate:

0.27

NOTE:

Test to be considered "Positive" if patient rate is equal to or greater than cutoff rate.

Anti HIV is a chemiluminescent mictroparticle enzyme immunoassay for the simultaneous qualitative detection of HIV p24 antigen and antibodies to human immunodeficiency virus type 1 and/or type 2 in human serum.

Method:

Test is performed on Architect i2000 instrument employing chemiluminescent microparticle immunoassay (CMIA).

NON REACTIVE

G.75, 76, 77, Augaf Plaza, Dabgart Garden Peshawar:
Phone: 091-2219651 Fax: 091-256-8690

E-mail: info@citylab.com.pk URL: www.citylab.com.pk



ADMINISTRATOR -A. Letif Malik MIASCPI CLS INCAL MTISFHI USA

CONSULTANTS: Dr. Nizam ud Din Khan MBBS, FCPS, Ph. D. (Histopati Prof. Dr. Lingat Ali MBBS, DCR M. Phil (Microbia

Dr. Fazal ur Rehman

PATIENT ID 1904028427

PATIENT NAME Dr. SADAF

SEX Female REFFERED BY KIH TEST REQUIRED LH/FSH

DATE TIME

09/04/19

\ 21:49:45

AGE SPECIMEN.

Blood:

39.Y / 0 Month

RESULT

Normal Values

Results

L.H.

TEST

FOLLICULAR ... 2.0-18.0 LUTEAL 0.6-19.0

MALE . 2.0-15.0

MIDCYCLE"

22.0-105.0 MENOPAUS ( 16.0-64:0...

F.S.H.

FOLLICUIAR 4.0-13.0

LUTEAL : :1.0-13.0 MALE- 1.0-10.0

mIU/mi MIDCYCLE 5.0-22.0 POST MENOPAUSAL

· mlU/ml · mlU/ml j

1.08

PMDC Registration: 2776-N

Heamatologist Dr.FAZAL-UR-REHMAN 9 M.B.B.S., D.C.P.

M.Phil (Haematology)

Advircato:

All queries/Discrepancies if any may be referred to our lab: within 24 Hrs. of reporting for re-evaluation / confirmation.

# MEDICAL TEACHING INSTITUTION

KHYBER TEACHING HOSPITAL

## Laboratory Request Form

NAME: Dr Sodal DATE: 11/4/19

GBW. Ward: O.P.D: Bed No: Hospital No:

2 240818 SPECIMEN:

Examination Required

Petris for exact location de filonoid







## MEDICAL SERVICES

REQUEST FOR DIAGNOSTIC PROCEDURES (RDP)

PR No. \\\	J-[0]W-	10,45	183,,	NUN 39	Years Date_	2-04-	2019
Patient Name	1185-5	adal c	Janni (	Age Age	Gende	r: Mi F	
Consultant							
Diagnosis		· · · · · · · · · · · · · · · · · · ·		_ Department		•	
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Consultant Nan	me	twan 1	Jawas	Wh	Signature	- Hman	Mawac
		(w	nice, for Department) (				_

A Bpy
Advocate



Tel: +92-91-5838000 | Fax: +92-91-5838333 Appointments: ±92-91-5838666



THIS FORM CAN ONLY BE USED FOR PATIENT REPORTS

## MRI Pelvis (With Contrast)

'atient: Drsadaf Jamil Khan, 39v. Female teferred by: 113 Amua Mayzas Khan

PRN: 19-04-104583

Reference No: RAD-19-04-109774

Test Date: 13-04-2019 10:14 AM

Report Printed on: 13-04-2019 10:59 AM

#### **Clinical Information:**

<sup>5</sup> Menorrhagia, fibroids.

#### Technique:

MRI performed on 1.5 tesla GE machine. Appropriate planning of sagittal, axial and coronal slices done, Both hip joints included. IV contrast given. Multiplanar T2WI, T1W1, STIR, T2 FATSAT, CE T1WI and CE T1 FATSAT images acquired. 3-5mm images were reviewed on workstation.

#### Findings:

There are large uterine intramyometrial fibroids with resultant distorted uterine shape. Large left intramural myometrial ...proid is 13.3x13.0x8.8cm. It is severely compressing on the endometrial cavity with a 6.9x7.3cm submucosal component in the endometrial cavity at fundal level. Lower down in the uterocervical canal there is a bulging polypoidal. lesion reaching the external os, also likely a submucosal fibroid or could be small prolapsed component of the fibroid. Another larger right fundal intramyometrial fibroid seen with predominant subserosal component and measures 9.1×8,3×8.3cm. It is hypointense on T2WI.

Post contrast images reveal non-enhancing areas in the large fibroid.

Enlarged uterus is causing mass effect on the anterior abdominal wall, is compressing on the right common iliac vessels and is causing mild mass effect on adjacent bowel.

Right ovary seen in cui de sac with multiple tiny follicles. No gross lesion seen in compressed left ovary.

There is mild thickening of right uterosacral ligament with prominent vessel.

No large pelvic lymph nodes are seen.

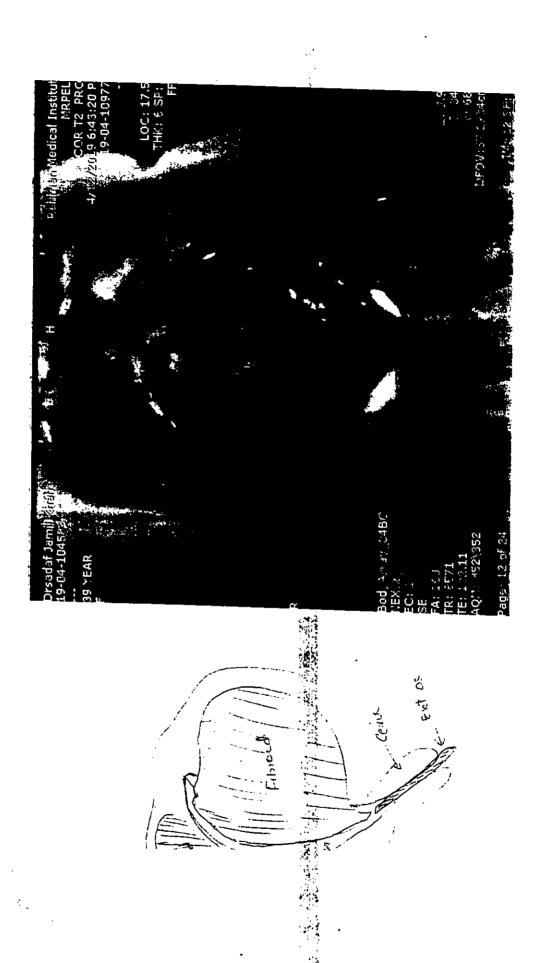
#### mpression:

- arged distorted uterus due to two large uterine fibroids.
- i. Large left intramyometrial fibroid with submucosal component bulging into the uterine cavity and associated smaller polypoidal fibroid / prolapsed component in the external os.
- ii. Large right fundal intramyometrial and subserosal fibroid.

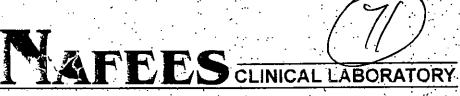
Dr. Ummara Siddique Umer.

MBBS. FCPS, EDIR: Assistant Professor aciultant Dadialaaiat





\ ...



Dr. Zahoorullah (Ph.D)

Professor & Head Deptt. of Biochemistry, PMC & Former Principal Research Officer Khyber Medical College, Peshawar.

10-Aamir Building Opp. Khyber Hospital,

University Town, Peshawar. Phone: 091-5851709, Mob: 0333-8395562

Date 15-Apr-10 Dr Sadaf Patient Name 1:58:507231 Time Female<sup>-</sup> Sex Lab. No. 3 nl. · Age Specimen Blood Referred by FULL BLOOD COUNT.

TEST REPORT:

Test required

NORMAL VALUE **TEST** Female: 12 - 16 gm/dl Hemoglobin 12.8 gm/dl Male : 14 - 18 gm/dl 4000 - 11000 /cmin · Total White Cells 8200/ cmm

Differential Count

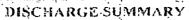
40-75 % Polymorphs. 20 - 45 %Lymphocytes: 02 % 01 - 06 % Eosinophils . 06 - 10%Monocytes 02 %

150,000-450,000 Platelet Count '315,000/cmm

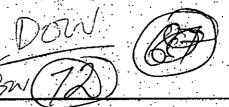
## MTL Khyber Teaching Hospital:

Conversity Ruad, Pessiawar, Phone, 691-92174-40-46, Faxt-

Himail: mromokith gov.pk. Website; impai/www.lath.gov.pk







Medical Record Number : K0300002240818 DR SADAFJAMIL

Sex Age Address

Ciţv Person Phone Home Phone

: K0319000025101 Admission No Admission Date : 05-APR-2019 21:15:31

Admission Status Emergency, 19000027919 Discharge No

Discharge Date Discharge Status 15-APR-2019-16:54:43 **Improved** 

Primary Consultant JAMILA MEHNAZ NAIB Admitting Consultant: MAHJABINA S GHAYUR

Diagnosis During This Admission :

Background Medical Problem () (List any chronic medical conditions that the patient may have, such as diabetes meilitus, asthma,

#### hypertension etc.):

immirried with fibroic uterus measuring (1.2 in to 7.2cm and 8.9 in to 5.5cm for anemia correction ...

#### Significant Physical Findings on Admission:

FH 30 task

2 lumps tandat and amenor wall mobile, non tender

Female

39 Year(s)

anid bleedag

#### Management Suring Admission :

Tabutonesse 500srg BD Cap , rrahsamirie 500mg/801. 3 Pints RCC , ranstúsed

#### Condition at Discharge:

:mproved

#### Instructions:

Tab: Iberel four

to a opy i waate

Electronically verified report, no signature(s) required.

DR. USHNA ZOOFEEN House Officer

Shankar Khamao Seemoral Trust (2000-203 to All rights reserved.)

OR USHNA POOLEEN - KTH-00-E

Page 1 of I

SECTE PROBET

LABS

Hb > 12.4

Hbs A3

Anti HIV. Non- reactive

Anti HOV)

LH > 0.68 PSH -> 1.08

APTT - 34/30 RANK - 3 1.3





#### Discharge Sheet

**RMI** Patients

#### Patient Information

PR No: 19-04-104583

Name: Miss Drsadaf Jamil Khan .

Gender: Female

Phone: +923369178904

Address: house no 322 street 49 sector safari

Age: 39 Years

- LUIDER OCH FRANKEN OCH SIS OCH STRUKTUREN OCH SIS OC Blood Group:

> Weight: Height:

kg. ft

Primary: Dr.Aman Nawaz Khan

Secondary: Dr.Roeeda Shams

**Package** 

o Observation (Gyn)

o Embolization Utirine Artery

Admission Information

Admission No: 19-04-001059

Admission Date: 15/4/2019 8:11PM

Ward: Ward E Room / Bed: 336 / A

Discharge Date: 15-7

Discharge Type:

Clinical Status

Risk Factors

EXPLAINED.

STABLE.

Department

(Gynaecology)

(Interventional Radiology)

Presenting Complaints

REGULAR PV BLEEDING.

KNOWN CASE OF UTERINE FIBROID.

investigations

Consultant

HE...11,3 VIF..N.R

Diagnosis

**B.G...B POSITIVE** 

Treatment At-Hospital

Medicinces

INJ TIENEM

TAB PARACETAMOL

TAB BRUFEN

Operation Notes

OBSERVATION.

EMBOLIZATION OF UTERINE ARTERY DONE.

NIL.

Precautions

Care At.Home

TAKE MEDICATION ON TIME.

Post Operative Complication

TAKE HEALTHY DIET:

'icines

C... CEFIM 400MG

CAP SANGOBION

TAB FLAGYL 400 MG

TAB OSNATE D

TAB PANADOL

ایک گزلی صبح شام (۵ دن)

ایک کیپسول شام (۲ بفته)

ایک گولی صبح شام (۵ دن) کھانے کے بعد

ایک گرلی صبح (۲ بفته)

دو گولی صبح دویهر شام (۵ دن)

Follow Up

Visit your Consultant ( Dr.Aman Nawaz Khan ) on 24/04/2019.

Please ensure that you have booked an appointment prior to your visit by calling on the following telephone number: (92-91) 5825501-07 lines

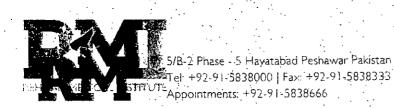
Discharge d By: Sare Cult

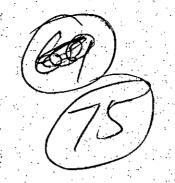
Medical Officer

WD\_Out\_065

Print Date: Apr 17, 19:10:24 a.m.

Coovidant Trees Software (Pvt.) Ltd www.treesvallev.com





#### RADIOLOGY MODUL

REPORT

THIS FORM CAN ONLY BE USED FOR PATIENT REPORTS

Radiology No: 19-04-00000 Referring Consultant:

Test Date: 16/04/2019

PR No: 19-04-104583

Name: Miss. Dr Sadaf Jamil Khan

Age: 39 Years

Gender: Female

#### Uterine artery embolization for fibroid

Indication: Menorrhagia and two large uterine Fibroids:

Analgesia: 10 mls of 1% lignocaine, 6 mg IV Nalbin, 5 mg IV Midazolam, 1 gm IV Augmentin, Inj Ondansetron, 160 mg IV Gentamicin, 100 mg tramal infusion, provas infusion.

#### Procedure:

Right sided retrograde 5 Fr access.

Uterine artery on left side followed by right side cannulated. On right side microcatheter used as high bifurcation of CIA making it difficult to advance the ordinary catheter into the tortuous Rt uterine artery. 500 microns PVA particles(2 ampoules) used to embolize both uterine arteries till cessation of forward flow. Both uterine artery was also embolized with gelfoam.

Manual compression to groin at the end of procedure for haemostasis.

Good angiographic outcome.

#### Post procedure:

6 hrs bed rest. Can have fluids after 2 hrs. Regular meal after 6 hrs.

Regular IV tienem x 500 mg x QID. On discharge convert to oral.

IV N saline x 1 litre x 6 hrly.

Regular Paracetamol x 1 gm x PO x QDS.

Regular Brufen x 400 mg x PO x BD. 50 mg tramal x PO/IV/ x QDS (max)/PRN.

Remove Foleys catheter early morning (6 am).

Aim for discharge tomorrow.

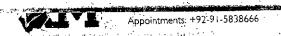
No sexual intercourse/bathing/swimming for 6 weeks. Can have shower.

If any fever with offensive discharge to report to RMI A&E department.

OP Clinical follow up in IR after 6 weeks:

MRI Uterus after 9 months.

Dr. Aman Nawaz Khan Ustrana MBBS, MRCS, FRCR, CCT-IR Consultant Diagnostic and Interventional Radiologist





Department of Radiolog

THIS FORM CAN ONLY BE USED FOR PATIENT REPORTS

#### MRI Pelvis (With Contrast)

Patient: Drsadaf Jamil Khan, 39y Female Referred by: 🐓 Aman Navinz Knar

PRN: 19-04-104583 Test Date: 13-04-2019 10:14 AM

Reference No: RAD-19-04-109774

Report Printed on: 13-04-2019 10:55 Ant

#### Clinical Information:

Menorrhagia, fibroids.

#### Technique:

MRI performed on 1.5 tesla GE machine. Appropriate planning of sagittal, axial and coronal slices done. Both hip joints included. IV contrast given. Multiplanar T2WI, T1W1, STIR, T2 FATSAT, CÉ T1WI and CE T1 FATSAT images acquired. 3-5mm images were reviewed on workstation.

#### Findings;

There are large uterine intramyometrial fibroids with resultant distorted uterine shape. Large left intramural myometrial ...roid is 13.3x13.0x8.8cm. It is severely compressing on the endometrial cavity with a 6.9x7.3cm submucosal component in the endometrial cavity at fundal level. Lower down in the uterocervical canal there is a bulging polypoidal lesion reaching the external os, also likely a submucosal fibroid or could be small prolapsed component of the fibroid. Another larger right fundal intramyometrial fibroid seen with predominant subserosal component and measures 9.1x8:3x8.3cm. It is hypointense on T2WI.

Post contrast images reveal non-enhancing areas in the large fibroid.

Enlarged uterus is causing mass effect on the anterior abdominal wall, is compressing on the right common iliac vessels and is causing mild mass effect on adjacent bowel.

Right ovary seen in cul de sac with multiple tiny follicles. No gross lesion seen in compressed left ovary.

There is mild thickening of right uterosacral ligament with prominent vessel.

No large pelvic lymph nodes are seen.

#### Impression:

arged distorted uterus due to two large uterine fibroids.

i. Large left intramyometrial fibroid with submucosal component bulging into the uterine cavity and associated  $smaller\ polypoidal\ fibroid\ /\ prolapsed\ component\ in\ the\ external\ os.$ 

ii. Large right fundal intramyometrial and subserosal fibroid.

Dr. Ummara Siddique Umer

MBBS, FCPS, EDIR Assistant Professor Consultant Radiologist



#### PATHOLOGY DEPARTMENT

Reception ID:

19-001-0047330

19-04-104583 --PR No:

Entered: (15, Apr 19,120:59)

Ms. Drsadaf Jamil Khan (Female: 39 Year(s)) Patient Name:

Printed: 16, Apr. 19, 08:29

Referred By:

Dr.Roeeda Shams

Ward: Ward E

#### Glucose group

Plasma Glucose (R)

84 mg/dl

(<200)

Interpretation

(ADA 2006)

Normal: <100 (F), <200 (2hr); Diabetes Mellitus: >126 (F) or >200 (2hr); Pre-diabetes: Impaired Glucose Tolerance (IGT): 140-200 (2hr); Impaired Fasting Glycaemia (IFG): 100-126 (F). All values mg/dl, venous plasma/serum. 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 hyperolycaemia with acute metabolic decompensation or obvious symptoms.

#### Complete Blood Counts

<< Provisional Report >

. }

#### Hepatitis B Profile

<< Provisional Report

Hepatitis B Surface Antigen

0.16(Non-Reactive)

Test performed by CMIA Arichitect ci8200 System

#### Viral Profile

<< Provisional Report >

Anti-HCV (Antipódies)

0:05(Non-Reactive)

Value more than cut-off is REACTIVE

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

REACTIVE Result: A postive 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.

Gray Zone Result:

Please repeat the test with a tresh blood sample for confirmation or preferably it should be repeated after 08 weeks. 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

#### Anti-HIV Antibodies :-

<< Provisional Report >

Anti-HIV I & II (Antibodies)

0.18(Non-Reactive) &ribsp;

Interpretation

The cut-off value of Anti-HIV antibodies is 1.00 value more than cut-off is REACTIVE:

Chemiluminescent Microparticle immunoassay (CMIA) Architect i 1000 SR System (HIV Ag/Ab Combo). The ARCHITECT HIV Ag/Ab Combo assay is a chemiluminescent microparticle immunoassay (CMIA) for the simultaneous qualitative detection of HIV p24 antigen and antibodies to HIV type 1 and 2



Notes Electronically verified report, signatures not required, identity of the patient not verified. Any query about this report may be addressed within twenty four hours of reporting, the duration for which the samples are

MBBS, FCPS (MI

Dr. Fazle Razio MBBS, M.Phil. FCP(Haematology), FCPP (Hofi) Professor & Consultant Haematologist Head of Pathology Department & B Dr. Maria Tasneem Khattak MBBS, FCPS (Histnopath) Asst Professor & Consultant Histopathologist

Col (R) Dr M Asnraf Qamar SI (M); TI (M) MBBS, M.Phil, FCPS (Histogath) Consultant Histopathologist/Cytopathol Dr. Sáina Zangoi

Asst.Protessor & Consultant haer

Dr. Jehan Zeb BSc, MD, M. Phil Professor & Consultant Chemica Dr. Amno Atzal

Dip Med. Micropiology (Majaysia) MSc, M. Phil, Ph.D Micro (England) Professor & Consultant Microbiologist M885, Ph. D (Haematology)

Dr. Shantal Knan MBBS, DCP, FCPS (Haemato Consultant Haen



### PATHOLOGY DEPARTMENT

Reception ID: Patient Name:

Referred By:

19-001-0047330

PR No: 19-04-104583

Ms. Drsadaf Jamil Khan (Female: 39 Year(s))

Dr.Roeeda Shams.

Entered: (15, Apr 19, 20:59)

Printed: 16, Apr. 19, 08:29 \*\*\* Ward: Ward E

Blood Grouping

ABO grouping

BEE.

Rh factor

POSITIVE:

A Bo

Notes: Electronically verified report, signatures not required, licentity of the patient not verified. Any query about this report may be addressed within twenty four nours of reporting, the duration for which the samples are preserved.

Dr. Fazle Razio,
MBBS. M. Phill, FCP(Haemarology), FCPP (Hon)
Professor & Consultant Haemarologist
Itead of Patinology Department & Blood Bank
Dr. Maria Tasneem Khattak
MBBS, FCPS (Histinopath)
Asst. Professor & Consultant Histogethologist

Col (R) Or M Ashraf Qamar SI (M): TI (M) Dr. Jehan Zeb MBBS, M.Phill, FCPS (Histopath) BSc, MD, M. Phill Consultant Histopathologist/Cytopathologist Professor & Consultant Histopathologist Dr. Sañqa Zehoor Dr. Sañqa Zehoor Dr. Ashraf MBBS, FCP, FCPS (Haematology) MBBS, FCP, Si Michael MBBS, FCP, Si MBBS, FCP, Si Michael MBBS, FCP, Si MBS, FCP, Si MBS

Dr. Jehan Zeb
BSc, MD, M., Phil
Professor & Consultant Chemical
Pethotogist
Dr. Amna Afzal
MBBS, FCPS (Microbiology)
Asst Professor & Consultant Microbiology

Or. Salar Zai

Díp. Med. Microbiology (Malavaia)

MSc. M. Phil, Ph.D Micro (England)

Professor & Consultant Microbiologist

Dr. Yasar Mehmood Youşafıal

MBBS, Ph. D (Haematology)

Consultant haematologist

Dr. Shahtaj Knan MBBS, DCP, FCPS (Haematology) Consultant Haematologist





#### RADIOLOGY MODU

**REPORT** 

5/B-2 Phase - 5 Havatabao Peshawar Pakistan Tel: +92-91-5838000 | Fax: +92-91-5838333

THIS FORM CAN ONLY BE USED FOR PATIENT REPORTS

Radiology No: 19-04-00000 Referring Consultant: Test Date: 16/04/2019

PR No: 19-04-104583 Name: Miss. Dr Sadaf Jamil Khan Age: 39 Years Gender: Female

## Uterine artery embolization for fibroid

Indication: Menorrhagia and two large uterine Fibroids.

Analgesia: 10 mls of 1% lignocaine, 6 mg IV Nalbin, 5 mg IV Midazolam, 1 gm IV Augmentin, Inj Ondansetron, 160 mg IV Gentamicin, 100mg tramal infusion, provas infusion.

#### Procedure:

Right sided retrograde 5 Fr access.

Uterine artery on left side followed by right side cannulated. On right side microcatheter used as high bifurcation of CIA making it difficult to advance the ordinary catheter into the tortuous Rt uterine artery. 500 microns PVA particles(2 ampoules) used to embolize both uterine arteries till cessation of forward flow. Both uterine artery was also embolized with gelfoam.

Manual compression to groin at the end of procedure for haemostasis.

Good angiographic outcome:

#### Post procedure:

6 hrs bed rest. Can have fluids after 2 hrs. Regular meal after 6 hrs. Regular IV tienem x 500 mg x QID. On discharge convert to oral.

IV N saline x 1 litre x 6 hrly.

Regular Paracetamol x 1 gm x PO x QDS.

Regular Brufen x 400 mg x PO x BD. 50 mg tramal x PO/IV/ x QDS (max)/PRN.

Remove Foleys catheter early morning (6 am).

Aim for discharge tomorrow.

No sexual intercourse/bathing/swimming for 6 weeks. Can have shower

If any fever with offensive discharge to report to RMI A&E department.

OP Clinical follow up in IR after 6 weeks.

MRI Uterus after 9 months.

Dr. Aman Nawaz Khan Ustrana
MBBS, MRCS, FRCR, CCT-IR

Consultant Diagnostic and Interventional Radiologist



Department of Radiology

## MRI Pelvis (With Contrast)

Patient: Drsadaf Jamil Khan, 39y, Female

Referred by: Dr. Aman Nawaz Khan

PRN: 19-04-104583

Test Date: 13-04-2019 10:14 AM

Reference No: RAD-19-04-109774

Report Printed on: 16-04-2019 9:29 AM

#### Clinical Information:

Menorrhagia, fibroids

#### Technique:

MRI performed on 1.5 tesla GE machine. Appropriate planning of sagittal, axial and coronal slices done. Both hip joints included, IV contrast given. Multiplanar T2WI, T1W1, STIR, T2 FATSAT, CE T1WI and CE T1 FATSAT images acquired. 3-5mm images were reviewed on workstation.

#### Findings:

There are large uterine intramyometrial fibroids with resultant distorted uterine shape. Large left intramural myometrial fibroid is, 13.3x13.0x8.8cm. It is severely compressing on the endometrial cavity with a 6.9x7.3cm submucosal component in the endometrial cavity at fundal level. Lower down in the uterocervical canal there is a bulging polypoidal lesion reaching the external oscalso likely a submucosal fibroid or could be small prolapsed component of the fibroid. Another larger right fundal intramyometrial fibroid seen with predominant subserosal component and measures 9.1x8.3x8.3cm. It is hypointense on T2WI.

Post contrast images reveal non-enhancing areas in the large fibroid.

Enlarged uterus is causing mass effect on the anterior abdominal wall, is compressing on the right common iliac vessels and is causing mild mass effect on adjacent bowel.

Right overy seen in cul de sac with multiple tiny follicles. No gross lesion seen in compressed left overy

There is mild thickening of right uterosacral ligament with prominent vessel.

No large pelvic lymph nodes are seen:

#### apression:

Enlarged distorted uterus due to two large uterine fibroids.

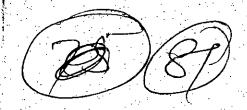
i. Large left intramyometrial fibroid with submuçosal component bulging into the uterine cavity and associated smaller polypoidal fibroid/prolapsed component in the external os.

ii. Large right fundal intramyometrial and subserosal fibroid.



Dr. Ummara Siddique Umer







Invoice #: 19-04-001059

Patient Invoice

RMI Patients

## PatientInformation

PR No: 19-04-104583

Name: Miss Drsadaí Jamil Khan Gender: Female Age: 39 Years

Rhone.

Address: house no 322 street 49 sector safari

Admission Date: 15/04/2019 8:11PM Ward Ward E

Admission information.

Room//Eed/336 / A Discharge Date: 17/04/2019 10:59AM Discharge Lyne: Normal Discharge

Admission No. 19-04-001059

Consultant: Dr Aman Nawaz Khan

Package	i menti		The last of the la
o Embolization Utirine Artery		Procedure Done	
o Observation (Gvn)		No Procedure Done	

#### Consumption Detail

S#	Head	٠.,		Amount
1	Laboratory			0.
. 2	Cardiology			0
5	Radiology			0
·4	Visits			0
5	Stay Charges			. 0
6	Cath Lab Pharmacy		· · · · · · · · · · · · · · · · · · ·	0
7	Ward Pharmacy			0.
8	Hospital Charges			76,000
. 9	Procedure Fee			54,000

Cash Deposit:		119.580	
Consumption:	Rs:	130,000	
Adjustment Amount:	. Rs.	36,340 Reason:	Total Consumption=166340 . IR Pharmacy
Final Bill:		166;340	Rs82593 (apart from services charges).
A STATE OF THE STA	1.0		Deducted services charges on WP
			Rs-774.MO&Nur charges Rs1925 & 2% credit
			card charges Rs580.

Amount Receivable:

46.760: Forty-Six Thousand Seven Hundred Sixty ONLY.

Mr. Shoaib Zaman

Lê mance Unnarim CLEARED

Returns Predicted Institute Hayatthad Forbayor Pulgation

Print Date: Apr 17, 19 11:28:35 am

BILLING





#### Rehman Medical Institute

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

PRN: 19-04-104583 Lab ID: 42202894

Mrs. Drsadaf Jamil Khan Patient Name: Age | Gender:

40 Y | Female

Provisional Report

·	Visit Date: 03 Jan, 2020 .			Serum Cr	eatinine			
-	Test		land for the second The land of the second	Result	Tinit (	Reference	Values	
	Serum Creatinine		·	0.8	mg/dl	0.5 - 0.9		
	Estimated GFR			92	mL/min/1.7	3 30 - 130		
		•			m2			

#### Interpretation

CKD-EPI formula correlates better with measured GFR, a major use of this is as a tool for screening CKD, however values may be misleading in many circumstances including AKI, CHF, nephrotic syndrome, Pregnancy, Malnutrition, Obesity, toxic drug does calculation and assessment of potential living kidney donors. In all of the above conditions a formal measurement of GFR is recommended.

Report Initialized By: Muhammad Ahmad



Prof. Dr. Eazle Razm

Prof. Dr. Shantai Khan MBB5 DCF FGPS (Haem) Consument Haemawlogisi

Ur. Saiga Zanoor MERS DCC, FCPS (Haem) Printed On:03 Jan. 2020 | 12:01 pm Brig(R) Prof. Igbal Muhammad Khan Siim)

MBBS , DCP , MCPS , FCPS (Hist.) , FCPP (Hon) , MIAC (Germany) , FRCP (Edinbrigh) , IFACAP (USA) Professor & Consultant Histopathologist

Col.(R) Dr. Muhammad Ashraf Qamar Si(m) Ti(m) Prof. Dr. Jehan Zeb

MBBS , M.Phill , FCPS (Hist.) Histopathologist/Cytopatholo Professor & Consultant Histo

Dr. Maria Tasneem MBBS . FCPS (Hist.)

BS C. MD., M.Phil Professor Consultant Chemical Pathologist

Dr - Yasar Mehmood Yousafzai MBBS . PGDIP , PhD (Haem) Commisultant Haematologist

DIP Med. Microbiology . MSc. M.Phil , Ph.D Microbiology

Professor Consultant Microbiologist

Dr. Jonar Ali

MS., PhD(USA) Molecular Biology Consultant Center of genomic science

Dr. Maria Khan

MBBS , M.Phil (Microbiology) . PCPS (Microbiology)



Visit Date: 03 Jan., 2020

Test.

Blood Urea

Rehman Medical Institute

Rehman Medical Institute (Pvt) Ltd. B-5/2, Hayatabad Town , info@rmi.edu.pk

Contact.111-REH-MAN(734); +92-91-5838 090, +92-91-5838 666 For Appointment

+92-91-5838 000

Age | Gender:

PRN Lab ID

mg / dl

10 - 50

Mrs. Drsadaf Jamil Khan.

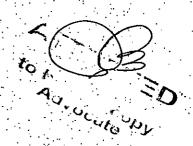
Age | Gender: 40 Y | Female

Final Report
Blood Urea

Reported 03 Jan, 2020 | 05:01 pm

Result Unit Reference Values

Report Initialized By: Muhammad Anmac



Prof. Dr. Fazle Razin

MBBS M Phil FCPS (Haem) FCPP (Hon) Professor Consultant Heamatologist Hean of Pathology Trepasament and Brood Bank

Prof. Dr. Shahtaj Knan

MBBS DCP FCPS (Haem)

Dr. Saiga Zahoor

MRRs . DCr. 1 CPs (Laum) Consultant Harmatologist Printed On:03 Jan. 2020 I 12:01 om Brig(R) Prof. Igbal Muhammad Khan Si(m)

MBBS DCP MCPS FCPS (Hist.) FCPP (Hon) MIAC (Germany) FRCP (Edinbrught IFACAP (USA) Protessor & Consultant Histopathologist

Col.(R) Dr. Muhammad Ashraf Gamer Sitm) Titm) Pr-of. Dr. Jehan Zeb

MBBS M.Phil FCPS (Hist.)
Histobathologist/Cytopathology
Frofessor & Consultable Histopathologist

Dr. Maria Tasneem

MBBS FCPS (Hist): Consultant Histonathologis: Dri. Mirza M Dawood

MBBS MCPS M Phil FCPS
Communication of Pathology

BS-c . MD . M. Phil Pr-Otessor Consultant Chemical Patnolomes

Dm. Yasar Mehmood Yousafzai

M TBBS , PGDIP , PhD (Heam) Consultant Heamstotogist Prof. Dr. Salar Zai

DIP Med. Microbiology , MSc., M.Phil , Ph.D Microbiology

Professor Consultant Microbiologist

Dr. Johar Ali

MS . PhD(USA) Molecular Biology Consultant Center of genomic sciences

Dr. Maria Khan

MBBS . M.Phil (Microbiology) , FCPS (Microbiology) Consultant Microbiologist

Page 1/1

(89) 15/11/11

Dr. Roeda Shams - Assistant Professor

. MBBS, FCPS

Consultant Gynaecologist | PMDC No. 8703-N

roeda.shams@rmi.edu.pk | Direct Tel +92:91-5838325

Clinic Timing: 10:00 am - 01:00 pm & 03:00 pm - 04:00 pm (Monday - Thursday)

RM Deserving

Adm Admit and 6

CONTE

5/6-2 Phase - 5 Hayatabad Peshawar Pakistari

Tel: +92-91-5836000 (Ext. 3625) | Fax: +92-91-5838333 | Appointments: +92-91-5838666

То

THE HONOURABLE SECRETARY

Government of Khyber Pakhtunkhawa,

Health Department, Peshawar.

Subject:

APPEAL FOR RELEASE OF SALARY & PROPER POSTI ORDER

Respected Sir,

Most respectfully it is stated that, after acquiring my MBBS Degree some post were advertised by the Khyber Pakhtunkhwa Public Service Commission including the posts of Women Medical Officers I applied for the post of Women Medical Officer and after successfully going through the whole process of selection & recruitment I was selected as Women Medical Officer on a scatallocated in Zone-I in the year 2007. I submitted my arrival report for further posting in FATA and accordingly I was posted in AHQ Hospital Khar Bajaur Agency. I took over the charge there at Khar Bajaur Agency but due Law & Order situation in FATA I could performed my duty at Bajaur efficiently. Later on, I was posted in office of Director Health Service FATA at Assistant Director (EPI).

In the year 2015, an inquiry was initiated against me on the baseless and frivolous allegation of illegally keeping Government vehicle in my possession and absenteeism. For conducting the inquiry my salary was stopped from August 2015. Lalways contacted my immediate reporting Department i.e. DHS FATA for receiving information regarding the inquiry and stoppage of salary but no one informed me about the inquiry report and finally someone told me that you were contacted but the address available on your file is incorrect hence I submitted my correct address in my handwriting which will be available on my personal file, but till date the result or outcome of the inquiry is unknown to me.

I was continuously perusing my case till March 2017 by regularly. submitting replies to explanation, forwarding application to various forums including the office of Chief Secretary, Khyber Pakhtunkhwa for justice, but noone was in the position of resolving my issues and continuously tortured me by one way or the other as being a single female struggling for her due rights in a male dominated society, hence became helpless and hopeless from ongoing office. routine business which ultimately deteriorated my health condition including mental and other bodily problems. And most recently I have been operated for fibroids and Uterine artery embolization, and now mental condition is also been stable. I have also come to know that my services has been placed at your kind disposal but till date nothing in black & white has been received to me.

It is, therefore, most kindly requested to issue proper posting order at settled side and also release my salary which has illegally stopped since August 2015. I shall be very thankful to you for this kindness.

Dared: 2nd Just, 2020.

lof /0 /66/2020 DR. SADAF JAMIL Women Medical Officer, Mob. No. 0336-9178904 Postal Add: Sudra P/O, Tarlai Sangjani, C-6, Islamabad/ H. 322, ST 49, Sec F, Safari Homes, Ph 8,

Bahria Town Rawalpindi.

Sincerely,

NNEXURE-THE HONOURABLE SECRETARY, Government of Khyber Pakhtunkhawa; Health Department, Peshawar. Subject: APPLICATION FOR PROVIDING COPY OF ORDER (IF ANY) ON DEPARTMENTAL APPEAL FILED: ON 02-06-2020 Respected Sir. Most respectfully it is stated that I have filed a Departmental Appeal for the release of my monthly salary stopped Since August 2015 and for proper posting before your Honour which given a proper diary number was issued vide dated 02-06-2020, but till date I have not received any response from your good self, I have also mentioned my postal address as well as my mobile phone number corrected.... It is, therefore, most kindly requested that if any order is passed on my departmental appeal filed on 02-06-2020 may be provided to me. I shall be very thankful to you for this kindness. Sincerely: Schol 31/8/2020 DR. SADAF JAMIL Women Medical Officer. Mob: No. 0336-9178904 Postal Add: Move 322 Street 49, sector 17, so find hours, phase 8, But in tom Ramalpinh

# (POWER OF ATTORNEY)



# EFORE THE KHYBER PAKHTUNKHWA SERVICE TRIBUNAL, PESHAWAR

•		Service A	ppeal No		/2020
DR. SADAF JAMIL	VS		HEALTH	DEPT	Γ: & Others
l,Dr. Sadaf Jamil			nominated		
MUHAMMAD MAAZ MADNI, And the above matter for me/us and on me answer in the above court or any approximate transferred in the above matter as a statements, accounts, exhibits, compound connection with the said matter arising documents or copies of documents, do and other writs or subpoena and to an other execution, warrants or order and out; and to apply for and receive payr to arbitration, and to employ an other power and authorities hereby conferred to so	ny/our be bellate cound is ag promises g there from the positions apply for d to concent of an er legal pred on the	half as ag urt or any reed to so or othe om and a etc and t and get is luct any pay or all so actitioner e advocate	reed to apper court to whigh and file redocuments lso to apply for a sued any arroceedings that authorizing he whenever he	ar, ple nich the petitic s wha for and issu est, ati hat ma t the a him to he may	ead, act and be business is on, appeals, atsoever, in directive all ue summons tachment or y arise there bove matter exercise the think fit to
AND to do all acts legally necespects whether herein specified or not AND I/WE hereby agree to ratify and under or by virtue of these present of always that I/WE undertake at the authorized agent shall inform the advocated agents and if awarded against shall nominee, and if awarded against shall NWITNESS WHERE OF I/We contests of which have been explaine of \$2020.	ot, as may deconfirm of the time of ocate and oceeded in hall be parted to and	be proper all lawfu usual prace calling of make him ex-parte the favour share yable by reset MY/0	r and expediculation acts done in such the case by appear in the said counseall be the rightne/us.  DUR hand to	ent. on my matter. by the ne cour el shall nt of th	//our behalf; PROVIDED court I/MY t, if the case, not be held ne counsel or presents, the
EXECUTANT Sales 28/09/	2020	·			
(Dr. Sadaf Jamil)	. ·		:		

Accepted subject to the terms regarding fees:

MUHAMMAD MAAZ MADNI, 28/9/2020

ADVOCATE HIGH COURT,

Peshawar

BC No. (BC-11-1460)

CNIC No. 17101-9263898-1

OFFICE: KHATTAK LAW ASSOCIATES, Juma Khan Plaza, Warsak Road, Peshawar. Contact#: 0333-9313113, 0345-9090737