

GOVERNMENT OF ARUNACHAL PRADESH  
OFFICE OF THE DISTRICT MEDICAL OFFICER  
EAST KAMENG DISTRICT: SEPPA.



Medical Officer.  
Hospital, Seppa

East Kameng District  
Certified that the Physical/Mentally status of Shri/Smti Kache Lujak in the category of disability for hearing impaired cerebral palsy/Mentally retarded/Low Vision/Blind/Night Blindness/Color Blindness/Orthopedically/Dumb/Disabled/Leprosy and is 25% 40% 50% 75% 100% etc. disabled and can gain 25% 40% 50% 75% 100% recovery after undergoing treatment/cannot be recovered in any manner.

The Board of Doctors hereby certified that Shri/Smti Kache Lujak is disabled in the above category of disability and recommends for issuance of permanently/periodical disability certificate by the competent authority.

( Dr. D. Piji )  
Member  
District Hospital Seppa  
East Kameng District  
Medical Officer.  
Dist. Hospital, Seppa  
East Kameng Dist. (A.P.)

( Dr. K. Gyadi )  
Member  
District Hospital Seppa  
East Kameng District  
Medical Officer.  
Dist. Hospital, Seppa  
East Kameng Dist. (A.P.)

( Dr. K. Wally )  
Chairman  
District Hospital Seppa  
East Kameng District  
Medical Officer.  
Dist. Hospital, Seppa  
East Kameng Dist. (A.P.)

NAME & ADDRESS OF THE INSTITUTE/HOSPITAL

Certificate No. 72/2040



Date 28/10/2010

ANNEXURE-I

DISABILITY CERTIFICATE



This is certified that Shri / Smt / Kum KACHE LIYAK  
Son/wife/daughter of Shri PASUNG LIYAK Age 20 Sex M Identification mark (s)

is suffering from permanent disability of following category

*Ull - lower diyak.  
Pd - lada  
Dist - e/kamuy  
Ps - Seppa. (AP)*

A. Locomotor or cerebral palsy.

- (i) BL-Both legs affected but not arms.
- (ii) BA-Both arms affected (a) Impaired reach. (b) Weakness of grip.
- (iii) BLA-Both legs and both arms affected
- (iv) OL-One leg affected (right or left) (a) Impaired reach. (b) Weakness of grip (c) Ataxic.
- (v) OA-One leg affected (a) Impaired reach. (b) Weakness of grip (c) Ataxic.
- (vi) BH-Still back and hips (Cannot sit or stoop)
- (vii) MW-Muscular weakness and limited physical endurance.

*BE Impairment @ f*

B. Blindness or Low Vision.

- (i) B-Blind
- (ii) PB-Partially Blind.

C. Hearing Impairment.

- (i) D-Deaf.
- (ii) PD-Partially Deaf.

(Delete the category whichever is not applicable)

2. This condition is progressive/non-progressive/likely to improve/not likely to improve. Re-assessment of this case is not recommended/ is recommended after a period of \_\_\_\_\_ years \_\_\_\_\_ months.

3. Percentage of disability in his/her case is 65% percent.

4. Shri/Smt/Kum Kache Liyak Meets the following physical requirements for discharge of his/her duties:-

- |  |        |
|--|--------|
| (i) F-can perform work by manipulating with fingers. | Yes/No |
| (ii) PP-can perform work by pulling and pushing      | Yes/No |
| (iii) L-can perform work by lifting.                 | Yes/No |
| (iv) CK-can perform work by kneeling and crouching   | Yes/No |
| (v) B-can perform work by bending                    | Yes/No |
| (vi) S-can perform work by sitting.                  | Yes/No |
| (vii) ST-can perform work by standing                | Yes/No |
| (viii) W-can perform work by walking                 | Yes/No |
| (ix) SE-can perform work by seeing.                  | Yes/No |
| (x) H-can perform work by hearing/speaking.          | Yes/No |
| (xi) RW-can perform work by reading/writing          | Yes/No |

*[Signature]*  
Member  
Medical Board

*[Signature]*  
Member  
Medical Board

*[Signature]*  
Member  
Medical Board

ORTHOPAEDIC