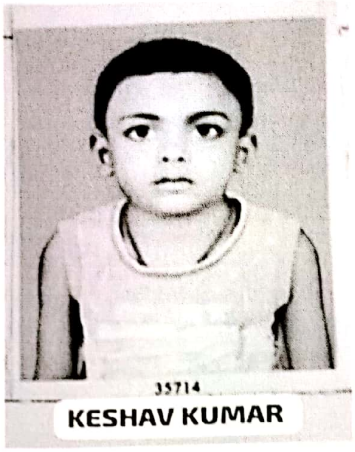
SUKH SAMRIDHI TRUST



PATIENT NAME	:	KESHAV KUMAR
FATHER'S NAME	:	GAUTAM KUMAR
AGE	:	11/08/2017 (7yrs)
TREATMENT	:	TOF - - ICR
DATE OF ADMISSION	:	14/09/2024
DATE OF SURGERY	:	17/09/2024
DATE OF DISCHARGE	:	28/09/2024

Sukh Samridhi Trust

We Serve Society The Best

Reg. No.10778

PAN NO. AALTS1051L

D-31/A, IInd Floor, Pandav Nagar, Delhi-110092

Mob. : 7428130602

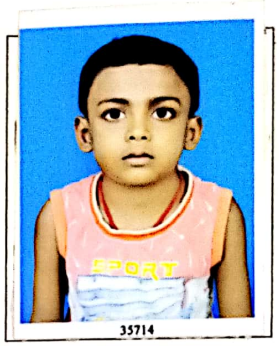
Web : www.sukhsamridhitrust.org

E-mail : Sukhsamridhitrust6@Gmail.com

Ref. No.....

Date. 24/6/2024

Sponsorship form for a Disabled Child Treatment/ Education



Name : KESHAV KUMAR

Date of Birth : 11/08/2017

Disease/ Disability : TOF

Treatment Prescribed : ICR

Add of rehab centre/School :

Father/mother/guardian Name: GAUTAM KUMAR

Occupation : FARMER **Income PM** ~~Rs~~ Rs 60,000 Yearly

No. of Earning Members : 1 (ONE)

Any financial assistance for the same purpose if yes received form.....

...../Requested Elsewhere..... Done

Expense on Treatment

- Purchase of Rehabilitation equipment
- Therapy equipment. Music equipment
- Specific therapies/play therapy
- Muscle relaxant drugs
- Botox phenol/nerve block
- Hyperbaric oxygen therapy
- Reflexology
- Special education/ speech/therapy
- Any other /surgeries

Operation - 17-9-2024

Total Amount : Sixty thousand (Rs 60,000)

I declare that the information given above is correct and complete in all respect and I am not in position to arrange funds for treatment/ special education of my child.

Signature parent

गौतम कुमार

physician/doctor's signature

डॉ. Senior Resident
सी.टी.वी.एस. विभाग/Deptt. of C.T.V.S.
हृदु तंत्रिका केन्द्र, अ.भा.आ.सं., नई दिल्ली
C.N. Centre, A.I.I.M.S., New Delhi

सेवा में,

श्रीमान अध्यक्ष महोदय
सुख समृद्धि ट्रस्ट
डी-31, पाण्डव नगर दिल्ली-110092

Recd
Refer to Board of Trustees
Manisha
20/6/24

विषय:- सहायता लेने हेतु प्रार्थना पत्र

महोदय,
निवेदन यह है कि मैं गौतम कुमार पुत्र श्री पंचलाल साहू निवासी गौरिया बथान, वार्ड न-23 जमालपुर खगड़िया, बिहार मैं किसानी मजदूरी करता हुँ मेरा बेटा केशव कुमार उम्र 7 वर्ष को दिल की बिमारी है इलाज दिल्ली में एम्स हॉस्पीटल में हो रहा है आपरेशन का खर्चा 60000 रु० है मैं गरीब मजदूर हूँ मेरे पास इतनी रकम नही है मैं आपसे प्रार्थना करता हुँ कि रु० 60000 की सहायता देकर मेरे बच्चे का आपरेशन कराने की कृपा करें।

दिनांक 20/6/24

प्रार्थी
गौतम कुमार
(गौतम कुमार)
पता- गौरिया बथान, वार्ड नं० 23
जमालपुर खगड़िया, बिहार

दिनांक 20/6/2024 को Board of Trustees की मिटिंग में सहायता राशि (लिखित) Rs 60000/- (साठ हज़ार) की ...
(RAMESH SAINI)
PRESIDENT
SUKH SAMRIDHI TRUST
20/6/24

CARDIO - THORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-110029

Date 6/3/24

ESTIMATE CERTIFICATE / अनुमानित व्यय प्रमाण पत्र

Name of Patient Mr./Ms./ रोगी का नाम श्रीमान/श्रीमती KESHAV kumar.

Age/ उम्र 64Yrs Sex / लिंग M CV No. / CTVS No. / सीवी संख्या/सीटीवीएस संख्या C2364/24

UHID No / यूएचआईडी संख्या 01274083

Nature of Disease / रोग का नाम TDI

Nature of Surgery / Procedure required / सर्जरी/प्रक्रिया की आवश्यकता ICR.

Units of Blood required for operation / ऑपरेशन के लिये आवश्यक रक्त की यूनिट 4O

Package charges for Surgery / Procedure / सर्जरी/प्रक्रिया के लिये पैकेज शुल्क Rs 40,810/-

The above mentioned amount must be deposited in advance by bank draft / Electronic transfer drawn in favour of "AIIMS PATIENT'S ACCOUNT" (A/c No. 10874584258, IFSC Code : SBIN0001536) (for CTVS Surgical Patients) / "AIIMS ANGIOGRAPHY PATIENT'S ACCOUNT (A/c No. 10874584269, IFSC Code : SBIN0001536) (for Cardiology Patients)

The said estimate will be valid for employees of CGHS/ESI/Govt. undertakings and their beneficiaries. This will also be applicable for seeking financial assistance from National Illness Fund, Prime Minister Relief Fund & from other sources.

उपयुक्त राशि को नीचे दिये गए सम्बंधित पक्ष में बैंक ड्राफ्ट / इलेक्ट्रोनिक हस्तांतरण द्वारा जमा करा दी जानी चाहिए ।

"एम्स सीटी पेशेंट अकाउंट" (A/c No. 10874584258, IFSC Code : SBIN0001536) (सी.टी.वी.एस. सर्जरी मरीजों के लिए) / "एम्स एन्जियोग्राफी पेशेंट अकाउंट" (A/c No. 10874584269, IFSC Code : SBIN0001536) (कार्डियोलॉजी मरीजों के लिए)

अनुमानित व्यय सीजीएचएस/ईएसआई/सरकार स्वायत संस्था और उनके लाभार्थियों तथा कर्मचारियों के लिए भी मान्य होगा । यह राष्ट्रीय आरोग्य निधि प्रधान मंत्री राहत कोष और अन्य स्त्रोतों से वित्तीय सहायता मांगने के लिये भी लागू होगा ।

For any query related to package charges / money deposition, please contact Accounts Section Room No. 105 (Basement, C. N. Centre)

पैकेज शुल्क / रूपये जमा करने से संबंधित किसी भी पूछताछ के लिए, कृपया लेखा अनुभाग कमरा नं. (बेसमेंट, सी.एन. सेंटर) में संपर्क करें ।

(Signature & Rubber Stamp of Consultant)

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
बा० रो० चि०
अ० भा० आ० सं०, नई दिल्ली-110029

Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi-110029

दिनांक Date

विभाग
Deptt.

CV 2024/02/0002013 Cardiology
UHID 16727408 CTVS (12314/2024)
Date 21/02/2024 MON,WED,FRI
Name KESHAV KUMAR

यू०एच०आई०डी०सं०
UHID No.

Gautam kumar
Phone No 9345[illegible]
Consultant Room 6
Dr. SACHIN TALWAR
Dr Amitabh Satsangi

R.6
21/2/24

File Rpt In Person
To come on 23/2/24

26/02/2024 For TOF repair.

~~Deposit~~
- Deposit 75 thousand in AIIMS CT
- Deposit 40 Blood in AIIMS CNC Blood bank/camp
- Long waiting explained.

Please share your feedback to improve our hospital on the Website link: meraaspataal.nhp.gov.in

- In early SX, refer to other govt hospital

Date

6 year old Wt: 20kg
class II DOE
No cyanosis. SpO2 - 90%

(40)
5/2/24

CSOM (R) Chd & No CM. LOY

Echo: Large PM VSD c VSD Shunt
Severe inf + valvular PS (Δ75)
Confluent PAS
(N) Ar Arteries

Hb: 17.5
PLT: 3.1
RFT: 28/0.4

(24)
R 18
5/2/24

Adv
(1) T. Ciplar 10mg 1-1-1
(2) Cap Amlin OD
Dental hygiene
Echo r/w.

Echo r/w: TOF
Single PMVSD
inf >> valvular PS (Δ100)
PV annulus: 17mm
Goodsized PAS
CTA: RPA: 10.8, LPA: 11, McGoon: 2
No APCs. (N) Coronary
Plan: ICR (Most likely w/o TAP)
Family counselled → Keen and willing
Referred to CTVS (37)

(43)
R 18
21/2/24

21/2/24

दिनांक
Date

Kindly provide estimate for coiling for this pt

(2) IA

R.G. (16)
1/3/24

R-6 (16)
6/3/24

To try for admission on 24/7/24

R 6 (25)
19/6/24

℞ T. Cipla 10mg TDS
Cap. Aulin OD

Sklens

वरिष्ठ रेजीडेंट / Senior Resident
सी.टी.वी.एस. विभाग / Dept. of C.T.V.S.
एवं संस्थान केंद्र / and C.N. Centre
C.N. Centre, A.I.I.M.S., New Delhi

हृदय वक्ष एवं तंत्रिका विज्ञा
_o रो० वि०
सं०, नई दिल्ली
:urosciences (KESHAVKUMAR -, O.P.D.
New Delhi-110029

LC0702241627 107274083
KESHAVKUMAR

LH2401241431 107274083
LC2401242051 107274083
KESHAVKUMAR

दिनांक / Dat	CV 2024/.../0002018	Cardiology / Paed.Cardiology
विभाग Deptt.	... 107274083 MON,FRI / Name KESHAV KUMAR	5Y 5M 13D / M
ब०रो०वि०र O.P.D. No.	Consultant Room 18	Dr.SOURABH KUMAR GUPTA
		Prv. Reg. No.

उम्र Age
लिंग
Sex

136???6
2/8/24

Diagnosis

(14)

SpO2 – 96%
H.R. – 100

(CHD / ↓Qp / TOF
(Not on Spell)

Advice

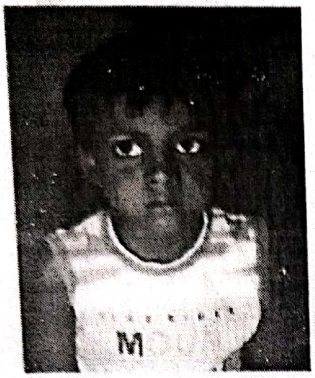
1) T. Ciplar 10mg
1 — 1½ — 1½
2) T. Autrin 1 tab OD
3) Danger Signs Explained
4) KIU SOS in Peds Emergency
5) KIU ē report in Peds cardio OPD Mon/Wed/Fri 2 pm.

वरिष्ठ रेज़ीडेंट / Senior Resident ... Cardiology
... विभाग / Deptt. ...
... C.N. Centre ...

Please share your feedback to improve our hospital on the Website link: meraaspataal.nhp.gov.in

भारत सरकार
Government of India

आधार



केशव कुमार
Keshav Kumar
जन्म तिथि / DOB : 11/08/2017
पुरुष / Male

Issue Date : 07/05/2023

8090 7121 5189

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

AADHAAR

पता: द्वारा: गौतम कुमार, ग्राम / पोस्ट - गोरैया बथान, वॉर्ड न - 23, जमालपुर, खगड़िया, बिहार, 851203

Address: C/O: Gautam Kumar, Vill / Post - Goraiya Bathan, Ward no - 23, Jamalpur, Khagaria, Bihar, 851203

Print Date : 12/05/2023

8090 7121 5189

1947 help@uidai.gov.in www.uidai.gov.in

भारत सरकार
Government of India

आधार

गौतम कुमार
Gautam Kumar
जन्म तिथि/DOB: 20/03/1988
पुरुष/ MALE

Download Date: 24/01/2020

Issue Date: 07/01/2020

8792 4857 8222

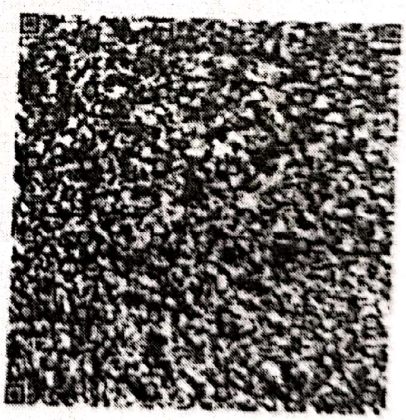
VID : 9168 1796 8049 8895

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

पता:
आत्मज: पंचलाल साह, वॉर्ड न 14, गोरैयाबथान पोस्ट
गोरैयाबथान थाना गोगरी, जमालपुर, खगड़िया,
बिहार - 851203

Address:
S/O: Panchlal Sah, ward no 14,
goraiyabathan post goraiyabathan thana
gogri, Jamalpur, Khagaria,
Bihar - 851203



8792 4857 8222

VID : 9168 1796 8049 8895

1947 | help@uidai.gov.in | www.uidai.gov.in

DEPARTMENT OF CARDIOTHORACIC AND VASCULAR SURGERY,

AIIMS ANSARI NAGAR, NEW DELHI, 110029

DISCHARGE SUMMARY

NAME: KESHAV	AGE: 7 YR	SEX: MALE
UHID: 107274083	CR NO: C-049277-24	CTVS NO: 123447/24
BLOOD GROUP: +VE	WEIGHT: 19 KG	
MOBILE NO: 9341604642	ADDRESS: GOBRI JAMAL PUR	
DATE OF ADMISSION: 14/09/24	DATE OF SURGERY: 17/09/24 & 19/09/24	DATE OF DISCHARGE: 28 /09/24

FACULTY: PROF SACHIN TALWAR, DR NAVNITA KISKU
RESIDENTS: DR KUNAL, DR DHAVNA, DR AMAN

DIAGNOSIS: ACHD, DEC Op, TOF, LARGE PM-VSD, SEV VAL AND INFUNDIBULAR PS, REST VL NL, NL BV FN, NSR, CONFLUENT PAs, NO SIGNIFICANT APCs

SURGERY: TRANS RA- VSD DACRON PATCH CLOSURE AND RVOT RESECTION.
SURGERY 2: REDO VSD DACRON PATCH CLOSURE + RVOT RESECTION+ TV ANTERO-SEPTAL COMMISSUROPLASTY

ECHO – (03/01/24) DR SAURABH GUPTA
SS, LC, AV-VA CONCORDANCE, LARGE PM VSD 12MM, BIDIRECTIONAL FLOW, AORTIC OVERRIDE+, SEV VALVULAR+ INFUNDIBULAR PS(GRADIENT 74) TRIVIAL PR EDG 8 MM HG, REST VL NL,CONFLUENT PAs, NL BV FN, NO COA, PDA, ASD, ADDN VSD.
LVes: 11, LAes:24, IVSed: 6, LVed:18, PW(LV)ED: 7 EF=60%

CTA FOR CHD (15/2/24)
SS, LC, AV-VA CONCORDANCE, NO LARGE ASD, SUB-AORTIC VSD, AORTIC OVERRIDE, DILATED RV, DORV AO IS RT OF PV, MILD INFUNDIBULAR NARROWING+, LEFT ARCH WITH COMMON ORIGIN OF IAR LCCA, CORONARIES ARISING FROM SEPARATE PA FACING SINUS. NO SIG APCs

OPERATIVE FINDINGS:
STERNUM NORMAL, BL PLEURA INTACT, THYMUS NORMAL RT LOBE EXCIED, INNOMINATE+, PERICARDIUM NORMAL, NO PR, NO CARDIOMEGALY. SS, LC, NRGA
TRANS RA- PFO PRESENT, CS NORMAL, 1.0+1.0 MM SA-VSD, NO TR

OPERATIVE STEPS:
MEDIAN REDO-STERNOTOMY - PERICARDIUM OPENED - PERICARDIAL STAYS TAKEN - SYSTEMIC HEPARINISATION - AORTIC PURSESTRING AND CANNULATION - SVC PURSESTRING AND CANNULATION - ACT CHECKED AND PARTIAL BYPASS ON - IVC PURSESTRING AND CANNULATION - FULL BYPASS ON - SVC AND IVC LOOPED - STARTED COOLING - CPG PURSESTRING & CANNULATION -AORTA-PA DISSECTED-NOPDA LGATED-CROSS CLAMP APPLIED-CARDIOPLEGIA GIVEN- ANATOMY ASSESSED- HEART ARRESTED IN DIASTOLE - TOPICAL COOLING - SA-VSD CLOSED USING DACRON PATCH INTERRUPTED 5-0 PROLENE 13MM AND CONTINUOUS IN THE POSTERO-INFERIOR MARGIN-RVOT RESECTED - AORCL OFF - ROOT VENT ON - MANUAL DRAINING DONE - SPONTANEOUS HEARTBEAT - GRADUAL CPB WEANING STARTED - SERIAL VENOUS DECANNULATION DONE - ROOT VENT OFF - DRAINS PLACED 01 PERICARDIAL AND 01 LT PLEURAL - PROTAMINE INFUSION - AORTIC DECANNULATION - HEMOSTASIS SECURED -PERICARDIUM CLOSED COMPLETELY OPENED OVER DRUNT- ROUTINE STERNAL & SKIN CLOSURE.

PRVLV: 0.6, STEP UP 5%
CPB TIME:110 MINS, AOCX TIME: 78 MINS

POST OP COURSE: POD 1: PATIENT HAD RESIDUAL VSD~6MM AND RVOT GRADIENT OF 30MM HG ALONG WITH SEVERE TR. HENCE WAS TAKEN FOR REDO-VSD CLOSURE. AOCX TIME: 138 MINS, CPB TIME: 167+8 MINS. PERICARDIUM LEFT OPEN. PRVLV: 0.6

DISCHARGE MEDICATIONS:

TO CONTINUE

1. T-ENVAS 1mg BD
2. Syp PIXINPED 90mg BD (6/7-days)
3. Tab LASILACTONE 1/2 tab OD

TO STOP AFTER 5 DAYS

1. TAB PAN 10 MG OD
2. TAB PCM 150 MG QID

INSTRUCTIONS:

- FLUID RESTRICTION <750ML IN 24 HOURS.
- FOLLOW DIET RESTRICTIONS
- REPORT IMMEDIATELY IF: FEVER MORE THAN 2 DAYS, BLEEDING/ DISCHARGE FROM WOUND, DECREASED URINE OUTPUT, WORSENING OF SYMPTOMS, SHORTNESS OF BREATH, GIDDINESS, INTENSE HEADACHE, BLACKOUTS
- VISIT OPD ROOM NO. 6 WITH INR, CBC REPORT.
- VISIT OPD CTVS OPD NO 6 AT ONE WEEK, ONE MONTH, THREE MONTHS, SIX MONTHS, ONE YEAR AND YEARLY
- FOLLOW UP IN CTVS OPD NO. 6 ON MON,WED,FRI AT 2PM AFTER 7 DAYS WITH CXR, ECG REPORTS
- IN CASE OF EMERGENCY PLEASE CONTACT THE NEAREST HOSPITAL OR AIIMS EMERGENCY DEPARTMENT

CONSULTANT: PROF SACHIN TALWAR/ DR NAVNITA

Navnita
Asst. Prof.