Sukh Samridhi Trust

Reg. No.10778

We Serve Society The Best

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. 26-03-2025

Sponsorship form for a Disabled Child Treatment/ Education

Name : Nayra

Date of Birth : 16 years

Disease/ Disability : VSD

Treatment Prescribed :

Add of rehab centre/School :

Father/mother/guardian Name: Ravi Rathore

Occupation : Income PM. 20000/-

No. of Earning Members : One

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

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

Total Amount : 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.

रवि राठौर

Signature parent

physician/Medical Officer/Senior Resident

सी.टी.वी.एस. विभाग/Deptt. of C.T.V.S.

हृदय संस्थिका केन्द्र, अ.भा.आ.सं., नई दिल्ली

C.N. Centre, A.I.I.M.S., New Delhi

सेवा मे

श्रीमान अध्यक्ष महोदय
सुख समृद्धि ट्रस्ट
डी-31 2nd Floor पाण्डव नगर दिल्ली-110092

Pend
Refer to Board of trustees
27/3/25

विषय:- चिकित्सा सहायता के लिये आवेदन

महोदय
निवेदन: यह है कि मैं रवि राठौर पुत्र श्री बन्टू जो कि खसरा न० 1135/2 कुरक न०2 कादीपुर दिल्ली 110036 को निवासी हूं मेरी बेटी नायरा आयु लगभग 1 1/2 वर्ष की है। मेरी बेटी को दिल की बिमारी है। इसका इलाज दिल्ली के एम्स अस्पताल मे चल रहा है डा० रामाकृष्ण व डा० शरद ने ऑपरेशन को कहा है। तथा ऑपरेशन का खर्चा रु 60,000 बताया है। मैं एक गरीब व्यक्ति हूं तथा मजदूरी करता हूं इतनी ~~रकम~~ रकम को इन्तजाम नही कर सकता आपसे प्रार्थना है। कि मेरी बेटी के इलाज के लिये 60,000 की सहायता करने का कष्ट करे।

Patient Name: Nayra
Age - 1 1/2 year
CVMO - 2024/04/00 15575
UHID - 107069148

प्रार्थी
रवि राठौर

रवि राठौर पुत्र श्री बन्टू
पता- खसरा न० 1135/2 कुरक न० 2
कादी पुर दिल्ली 36

Vide 30/3/2025 on Board of trustees की मिटिंग मे चिकित्सा राशि Rs 60,000/- sanctioned की गई
24/4/2025

(RAMESH ...)
PRESIDENT
SUKH SAMRIDHI TRUST

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

ESTIMATE CERTIFICATE / अनुमानित व्यय प्रमाण पत्र

Date : .....

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

Age / उम्र 10 Yrs Sex / लिंग F CV No./CTVS No. / सीवी संख्या / सीटीवीएस संख्या

UHID No. / यूएचआईडी संख्या 10751948

Nature of Disease / रोग का नाम VSD

Nature of Surgery / Procedure required / सर्जरी / प्रक्रिया की आवश्यकता VSD Closure

Units of Blood required for operation / ऑपरेशन के लिये आवश्यक रक्त की यूनिट 1 Unit

Package charges for Surgery / Procedure / सर्जरी / प्रक्रिया के लिये पैकेज शुल्क Rs. 65000/-

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 अग्रिम रूप से जमा किया जाना चाहिए।

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

"एम्स एन्जियोग्राफी पेशेंट अकाउंट"
(A/c No. 10874584269, IFSC Code SBIN0001536)
(कार्डियोलोजस मरीजो के लिए)

अनुमानित व्यय सीजीएचएस / ईएसआई / सरकार स्वायत संस्था और उनके लाभार्थियो तथा कर्मचारियो के लिए भी मान्य होगा। यह राष्ट्रीय आरोग्य निधि प्रधान मंत्री राहत कोष और अन्य स्त्रोतो से वित्तीय सहायता मागने के लिऐ भी लागू होगा।

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

पैकेज शुल्क / रूपये जमा करने से संबधित किसी भी पूछताछ के लिए कृपया लेखा अनुभाग कमरा न. 105 (बेसमेंट, सीएन सेंटर) मे सपर्क करे।

Dr. Preetip Khandrahal
Associate Professor
Dept. of C.T.V.S.
AIIMS, New Delhi-110029

(Signature & Rubber Stamp of Consultant

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हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब० रो० वि०
अ० भा० आ० सं०, नई दिल्ली-110029
Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi-110029

दिनांक/Date

CTVS - 125420

विभाग
Deptt.

CV 2024/M/J0015525 को Cardiology CTVS (125420/2024) उम्र Age

UHID: 107669146

Date 05/07/2024 MON,WED,FRI

यू०एच०आई०डी
UHID No.

Name NAYRA 10M 16D /F

D/O Ravi

Phone No. 8799743722 General

Consultant Room 2 Dr. Pradeep R CTVS

SR Room

लिंग
Sex

Prv Reg No.

Diagnosis

8/7/24

Long Waiting list & Consequence explained. In Case of emergency to attend casualty. Advised to get treatment from other Govt. Hospital

patient accepted under Dr. Pradeep for VSD closure

patient to donate A+O Blood at CNL blood bank

patient to deposit 57,000/- in AIIMS CT 1st ACCOUNT

PDDA - 15/6/25

LC0306242803 107569148

LH0306242025 107569148

NAYRANAYRA

...का विज्ञान केन्द्र 1414357 /

विo U/A

ई दिल्ली-110029

Cardi ...iences Centre, O.P.D.

CV 2024/.../0015525 ₹0 Cardiology

UHID: 107569148 Paed.Cardiology

Date 03/06/2024 MON

Name NAYRA

D/O Ravi 9M/F

Phone No. 8799743722 General

Consultant Room 21 Dr. S RAMAKRISHNAN

SR Room 14 Dr. Suad

Prv. Reg. No.

दिनांक/Date

विभाग

Deptt.

यू०एच०आई०डी०

UHID No.

CHN/125420

CAHD

निदान

Diagnosis 107569148

12

SpO2-100%

ECG-NSR, ...

wt-6.5kg

ACHD c ↑Qp

mod P/m VSD (~5.5 mm)

Restricted by STL

Indirect ... Gerbode

LVVO (+)

NSR | (N) ...

...

PSM (+)

@ 3rd (L) ICS

(1) Syp Frusemide 0.6 ml B.D.

(2) Syp ... ... O.D

(3) Syp Tenofenom 0.6 ml O.D

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

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दिनांक
Date

R. 3 (6)
28/04/25

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दिनांक
Date

9 month old / 7-8y

feeding difficulty ⊕

wt gain sub-optimal

PSM ⊕ ↓↓ pulse ⊕

CXR: CM ⊕ ↑ BF.

ECG: ⓝ axis, BVH

Echo: Moderate PM VSD L→R

entracted by STL

mod - severe TR (Gerbode)

LA/LVO

ⓝ Biv function

Now: 0.45

Family counselled

Referred to CTVS (37).

Ref to CTVS (37)

3.7.24

2.1 (4)

3/7/24

(4B) newd reports

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
बा० रो० वि०
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/o/0015525 30
OPD 107509148

Cardiology
CTVS
(125420/2024)

उम्र
Age

Date 05/07/2024 MON,WED,FRI
Name NAYRA
D/O
Phone No 8799743722
Consultant Room 2
SR Room

Dr. Pradeep R CTVS

यू०एच०आई०डी
UHID No.

लिंग
Sex

Prv. Reg No

Diagnosis

B/Sheet

Long Waiting list & Consequence explained. In Case of emergency to attend casualty. Advised to get treatment from other Govt. Hospital

patient accepted for VSD closure

patient to donate 4 O Blood or CNI blood bank

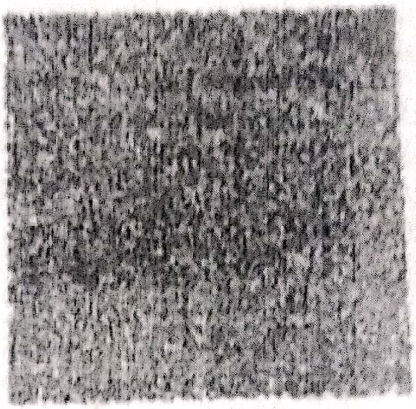
patient to deposit 57,000/- in AIIMS CT A/C ACCOUNT

PDDA - 1516/25

Unique Identification Authority of India

पता:
C/O बंटू, ख. न-1135/2, कुशक न-2, कादिपुर,
कादिपुर, उत्तर पश्चिमी,
दिल्ली - 110036

Address:
C/O Bantu, Kh. No-1135/2, Kushak No-2,
Kadipur, Kadipur, North West Delhi,
Delhi - 110036



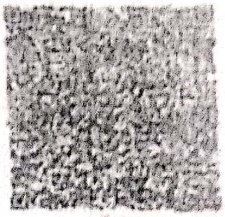
4743 3936 2938

VID : 9184 7425 9359 3795

भारत सरकार

Government of India

रवि राठौर
Ravi Rathor
जन्म तिथि/DOB: 20/07/1997
पुरुष/ MALE



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VID : 9184 7425 9359 3795

मेरा आधार, मेरी पहचान

DEPARTMENT OF CARDIOTHORACIC AND VASCULAR SURGERY,
AIIMS ANSARI NAGAR, NEW DELHI, 110029

DISCHARGE SUMMARY

NAME: NAYRA	AGE: 1 YEAR 11 MONTHS	SEX: FEMALE
UHID: 107569148	CR NO: C-059733-25	CTVS NO: 125420/2024
BLOOD GROUP: B POSITIVE	WEIGHT: 9.9 KG	CV NO.: 15525/14/24
MOBILE NO: 8799743722	ADDRESS: KUSHAK-2 SWAROOP NAGAR DELHI	
DATE OF ADMISSION 4/8/25	DATE OF SURGERY: 5/8/25	DATE OF DISCHARGE: 12/8/25

FACULTY: DR. PRADEEP R.

RESIDENTS: DR. HARSHANTH, DR. BALA BRINDHA, DR. HIMANSHU

DIAGNOSIS: ACHD/INC OP /MODERATE PM-VSD/ SEV-MOD TR(INDIRECT GERBODE)/ NO ADDL VSD/ RT VL NL/ NL BV FN/LVVO+/ NSR/ NL CORONARY ORIGIN

INVESTIGATIONS: 2-D ECHO 17/05/24 (DR RAMA KRISHNAN)

SS, LC, NL PV AND SVD, AV-VA CONCORDANCE, NRGA, NORMAL MITRAL VALVE, 5.5 MM MODERATE SIZED PM-VSD(LT->RT), RESTRICTED STL CAUSING INDIRECT GERBODE EFFECT, MOD-SEV TR, NO ADDL VSD, NORMAL AORTIC AND PULMONARY VALVE, CONFLUENT PAs, LT ARCH, NO CoA/PDA, NL BV FN, NO VEG/ CLOT/PE

SURGERY: (5/8/25)

TRANS RA DACRON PATCH VSD CLOSURE+ ANTEROSEPTAL TRICUSPID VALVE COMMISUROPLASTY

OPERATIVE FINDINGS:

SS, LC, NRGA, NL SV AND PV DRAINAGE, AORTA POST AND TO THE LEFT, PA ANT AND TO THE RIGHT, STERNUM- NORMAL, THYMUS- +, INNOMINATE VEIN+, NO LSVC, NO ADHESIONS, NO PE, CORONARIES NORMAL
TRANS RA: SINGLE PM VSD APPROX 1X1 CM IN SIZE, IAS SEPTUM INTACT
TRICUSPID VALVE: SEPTAL LEAFLET ADHERENT TO VSD MARGIN, ANNULUS NORMAL
B/L PLEURA INTACT, PERICARDIUM CLOSED UPTO MIDDLE 1/3RD OF RV,
DRAIN= 1 20 FR ANGLED PERICARDIAL, PW- 2V

CPB TIME - 56 MINS AOXCL TIME - 40 MINS

2025/08/12 10:24

Senior Resident/Department of CTVS
C.T. Centre
Ansari Nagar, AIIMS, New Delhi-110029

OPERATION NOTES:

MEDIAN STERNOTOMY, THYMUS MOBILISED, PERICARDIOTOMY, PERICARDIAL STAYS, CARDIAC ANATOMY WAS NOTED AS ABOVE, DOUBLE AORTIC PURSESTRING, HEPARINISATION, PURSESTRING APPLIED OVER SVC, AORTIC CANNULATION, SVC CANNULATION, AFTER CHECKING FOR ACT(>480S), PARTIAL BYPASS ON, IVC PURSESTRING AND CANNULATION, FULL BYPASS ON, SVC AND IVC LOOPED, SVC SNUGGED. AORTOPULMONARY DISSECTION DONE AND PDA CLIPPED, CARDIOPLEGIA PURSESTRING AND CANNULATION, AOXCL APPLIED, ANTEGRADE CARDIOPLEGIA ADMINISTERED, HEART ARRESTED IN DIASTOLE, IVC SNUGGED, RA OPENED, RA STAYS, INTRACARDIAC ANATOMY ASSESSED, LV VENTED THROUGH PFO, SEPTAL AND ANTERIOR LEAFLETS OF TRICUSPID VALVE RETRACTED, TRANS RA CLOSURE OF VSD USING DACRON PATCH BY INTURRUPTED SUTURES, ANTEROSEPTAL TRICUSPID VALVE COMMISUROPLASTY DONE, RA CLOSURE STARTED, SVC IVC SNUGS REMOVED, MANUAL DEAIRING DONE, AORTIC CROSS CLAMP OFF, ROOT VENT ON, IVC DECANNULATION AND REINFORCEMENT, SLOWLY CAME DOWN ON FLOWS AND OFF BYPASS, SVC DECANNULATION, PERICARDIAL DRAIN PLACED, PROTAMINE STARTED, AORTIC DECANNULATION DONE, HEMOSTASIS ACHIEVED, PERICARDIUM CLOSED, ROUTINE STERNUM AND SKIN CLOSURE, ASEPTIC DRESSING DONE.

POST OP COURSE: UNEVENTFUL

POST OP ECHO: TINY RESIDUAL VSD ; PG - 50 mmHg, VSD patch insitu (11/8/25) No MR/TR/AR ; Normal BVP ; No clot/veg/PE.

DISCHARGE MEDICATIONS:

TO CONTINUE

1. Syp. FUROPED 0.5ML BD
2. T. ENVAS 2.5mg BD.
3. Syp. DIGOXIN 50 µg BD (6/7)

TO STOP AFTER 5 DAYS

1. Syp PCM 150mg PO TDS
2. T. LANZOL JR 10mg OD BBF

INSTRUCTIONS:

- FLUIDS RESTRICTED TO 500 ML 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 AFTER ONE WEEK, ONE MONTH, THREE MONTHS, SIX MONTHS, ONE YEAR AND THEREAFTER YEARLY

FOLLOW UP IN CTVS OPD ROOM 03 MONDAY/WEDNESDAY/FRIDAY 2PM TO 5 PM AFTER 7 DAYS WITH CXR REPORT.

STITCH REMOVAL IN CN CENTER, ROOM NO.28 MONDAY/WEDNESDAY/FRIDAY, AT 12PM AFTER 7 DAYS

IN CASE OF EMERGENCY PLEASE CONTACT THE NEAREST HOSPITAL OR AIIMS EMERGENCY DEPARTMENT.

THIS DOCUMENT IS VERY IMPORTANT. PLEASE LAMINATE IT.

CONSULTANT: DR. PRADEEP R.

Bula Borha
SR CTVS
for Dr. Pradeep
Consultant CTVS

Senior Resident
डी.टी.सी.एस. विभाग/Department of CTVS
हृदय वक्ष केन्द्र/C.T. Centre
अ. भा. आ. सं., अंसारी नगर, नई दिल्ली - 110029
Ansari Nagar, AIIMS, New Delhi-110029

2025/08/12 10:24