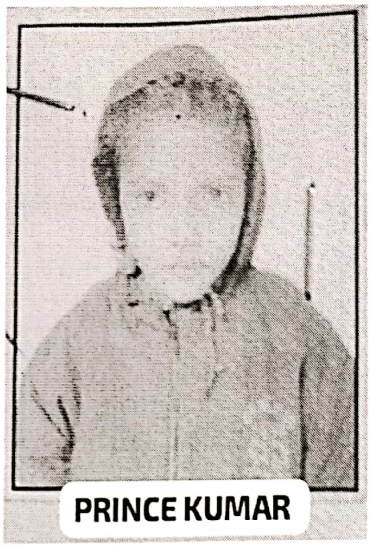
SUKH SAMRIDHI TRUST


PRINCE KUMAR

PATIENT NAME : PRINCE KUMAR

FATHER'S NAME : LAXMAN KUMAR YADAV

AGE : 06/06/2014 (10 yrs)

TREATMENT : TOF - - APCS+

DATE OF ADMISSION : 18/01/2025

DATE OF SURGERY : 20/01/2025

DATE OF DISCHARGE : 29/01/2025

सेवा में

श्रीमान अध्यक्ष जी
सुख समृद्धि ट्रस्ट
D-31 II floor पांडवनगर
दिल्ली-92

Recd
Refer to Board of trustee
30/12/2024

विषय: बच्चे के इलाज की सहायता के लिए प्रार्थना पत्र-

महोदय:
निवेदन है कि मैं लक्ष्मण कुमार यादव पुत्र भवानी यादव जो कि ग्राम सिन्दुआरी कला, पोस्ट बारिसाखी थाना सिमरिया सिन्दुआरी कला चतरा झारखंड का रहने वाला हूँ। मेरा पुत्र प्रिंस कुमार आयु पाँच वर्ष जो कि दिल में छेद है दिल्ली के एम्स अस्पताल में इलाज चल रहा है। डॉक्टर ने बताया के बच्चे के दिल का आपरेशन होगा जिसका खर्च रुपये 60000/- है। मैं गरीब आदमी हूँ मजदूरी करता हूँ मेरे पास इतनी रकम नहीं है। मैं आपसे प्रार्थना करता हूँ कि मेरे बेटे के इलाज के लिए सहायता देने की कृपा करें।

Patient - Prince Kumar
UHID - 104565636
CTVS No - 104733/2019

प्रार्थी
लक्ष्मण कुमार
(लक्ष्मण कुमार)
पुत्र भवानी यादव
पता:- ग्राम सिन्दुआरी कला
पोस्ट बारिसाखी थाना सिमरिया
सिन्दुआरी कला चतरा
झारखण्ड

दिनांक 30/12/2024 को Board of trustee की मिटिंग में Rs. 60,000/- की सहायता राशि स्वीकृत की गई

(RAMESH JAIN)
PRESIDENT
SUKH SAMRIDHI TRUST

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 10/12/2024

Sponsorship form for a Disabled Child Treatment/ Education

Name : PRINCE KUMAR

Date of Birth : 6 JUNE 2014

Disease/ Disability : TOF APLS ⊕

Treatment Prescribed : Total Correction of the Coil

Add of rehab centre/School :

Father/mother/guardian Name: LAXMAN YADAV

Occupation : Govt Income PM Eight thousand only one

No. of Earning Members :

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.

Signature parent

physician/ [illegible]

वरिष्ठ रेजीडेंट/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

CARDIO-THORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
V DELHI – 110029

CV 2019/.../0017586 Cardiology
UHID 104565C36 CTVS (104733/2019) Date : 18/12/24
Date 22/07/2019 MON,WED,FRI
Name PRINCE KUMAR 5Y 1M 5D /M अनुमानित व्यय प्रमाण पत्र
S/O LAXMAN YADAV
Consultant 1 SR Room
Address: SINDWARI DIST- CHATRA , CHHATISGARH INDIA

lo./सीसी संख्या/सीटीवीएस संख्या

UHID No./यूएचआईडी संख्या.

Nature of Disease / रोग का नाम TOF APCs (+).

Nature of Surgery/Procedure required / सर्जरी/प्रक्रिया की आवश्यकता TOTAL CORRECTION after ...

Units of Blood required for operation / ऑपरेशन के लिए आवश्यक रक्त की यूनिट 4 units

Package charges for Surgery/Procedure / सर्जरी/प्रक्रिया के लिए पैकेज शुल्क Rs 60,000/-

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

उपर्युक्त राशि को नीचे दिए गए सम्बंधित पक्ष में बैंक ड्राफ्ट / इलेक्ट्रोनिक हस्तातरण द्वारा अग्रिम रूप से जमा किया जाना चाहिए।

"एम्स सीटी पेशेंट अकाउंट" (A/c No.10874584258, IFSC Code : SBIN0001536) (सी.टी.वी.एस. सर्जरी मरीजों के लिए) / ~~"एम्स एन्जिओग्राफी पेशेंट अकाउंट" (A/c No.10874584269, IFSC Code : SBIN0001536) (कार्डियोलाजी 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 स्रोतों से वित्तीय सहायता मांगने के लिए 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 / रुपये जमा करने से संबंधित किसी भी पूछताछ के लिए, कृपया लेखा अनुभाग कमरा नं 105 (बेसमेंट, सी.एन. सेंटर) में संपर्क करें.

Advised to get Separate Estimate for Coil Embolisation from Cardiac Radiology Deptt. R. No.: 10A

डॉ. पी. ... Dr. ... KUMAR
... CTVS
सी.टी.वी.एस. विभाग ... Cardiothoracic Centre
... हृदय विज्ञान केन्द्र/Cardiothoracic ... 110029
अ.भा.आ.सं., अंसारी नगर, नई दिल्ली 110029
AIIMS, Ansari Nagar, New Delhi - 110029

Rajashekhar 18/12/24

(Signature & rubber Stamp of Consultant)

CV 2019/014/0017586 ₹0 Cardiology
UHID: 104565636 CTVS (104733/2019)
Date 22/07/2019 MON,WED,FRI
Name PRINCE KUMAR 5Y 1M 5D /M
S/O LAXMAN YADAV
Phone No. 7484928007
Consultant Room 1 Dr. P Rajshekhar
SR Room ....

O.P.D.

दिनांक
Date

विभाग
Deptt.

CV 2019/014/0017586 Cardiology
UHID: 104565636 Paed.Cardiology
Date 17/06/2019 MON
Name PRINCE KUMAR 5Y /M
S/O LAXMAN YADAV
Phone No. 7484928007 General
Consultant Room 21 Dr. S RAMAKRISHNAN
SR Room 14 DR SAMIR

बo रोo विo
O.P.D. No

299074
17/6/19

CT-6
SpO2 →
1375

CCHD ↓ Qp, TOF

Adv:
1) CBC, RFT, LFT
2) ECHO.

Rx:
1) Tab Ciplar 10mg PO TDS.
2) Syp Tonoferon 2.5ml PO OD

S

P C/s
17/6/19

P/C/s
MV to CTVS (33)
22/7/19

R-1 (31)
11/9/19

R-1 (31)
16/12/24

R-1 (31)
18/12/24

दिनांक
Date

R-21 (36)
24/6/19

26/7/19 For ICR after Coil.
Adv. to come on 16/8/2024.

R-21 (35)
1/7/19

Advised to get Separate Estimate
for Coil Embolisation from
Cardiac Radiology Deptt. R. No.: 10A

दाखिले की अनुमानित तारिख
मरीजों की भीड़ के कारण शीघ्र
भर्ती संभव नहीं है। जल्द उपचार
के लिए अन्य सरकारी अस्पताल
में संपर्क कर सकते हैं।

Rajasekhar
26/7/19

R-21 (37)
22/7/19

Patient has not come
To check - 15/1/25
for PDOA

R-1
New Case
22/7/19

वरिष्ठ रेजीडेंट / Senior Resident
डी.एम. विभाग / Deptt. of ...
हृद तंत्रिका केन्द्र, अ.भा.आ.सं., नई दिल्ली
C.N. Centre, A.I.I.M.S., New Delhi

R-1 (26)
24/7/19

R-1 (27)
26/7/19

Government of India

లక్ష్మణ కుమార్ యాదవ్
Laxman Kumar Yadav
పుట్టిన తేదీ/DOB: 01/01/1992
పురుషుడు/ MALE

Download Date: 13/01/2021

Issue Date: 01/01/2021

6594 4726 7348

VID : 9164 9204 1004 1553

నా ఆధార్, నా గుర్తింపు

భారత విశిష్ట గుర్తింపు ప్రాధికార సంస్థ
Unique Identification Authority of India

చిరునామా:
S/O: భవాని యాదవ్, గ్రామ-సిన్దుఆరీ కలా, పోస్ట్-బారిసాఖీ, థానా-గిద్ధౌర్, సిన్దుఆరీ కలా, చతరా, ఝారఖండ్ - 825408

Address:
S/O: Bhawani Yadav, vill-sinduwari kala, po-barisakhi, ps-gidhaur, Sinduari Kalan, Chatra, Jharkhand - 825408

6594 4726 7348

VID : 9164 9204 1004 1553

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

भारत सरकार
Government of India

आधार

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

नामांकन क्रमांक/ Enrollment No.: 0815/53149/04023

To

prinsh kumar
C/O Rinku Devi,
vill-sinduwari kala, po-barisakhi, ps-gidhaur,
VTC: Sinduari Kalan, PO: Barisakhi,
Sub District: Gidhaur, District: Chatra,
State: Jharkhand,
PIN Code: 825408,
Mobile: 8928583375

29398281

KD293982817FL

आपका आधार क्रमांक / Your Aadhaar No. :

6494 3925 9526

मेरा आधार, मेरी पहचान

भारत सरकार
Government of India

आधार

Aadhaar no. issued: 23/06/2016

prinsh kumar
जन्म तिथि / DOB: 06/06/2014
पुरुष / Male

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/ ऑफलाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

6494 3925 9526

मेरा आधार, मेरी पहचान

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

UHID:104565636	CTVS NO.: 104733/2019	CV NO.- 17586/14
NAME: PRINSH KUMAR	AGE: 10 YEARS 7 MONTHS	SEX: MALE
S/O: LAXMAN YADAV	BLOOD GROUP: O+	WEIGHT: 19 kg
CR NO: C-053140-25	ADDRESS:SINDWARI CHATRA	MOBILE NO: 7484928007
DATE OF ADMISSION: 18/1/25	DATE OF SURGERY: 20/1/25	DATE OF DISCHARGE: 29/1/25

FACULTY: Dr. P RAJASHEKAR
RESIDENTS: DR. TANVI, DR. RAJASHEKHAR RAO M

DIAGNOSIS: CCHD, DEC Qp, TOF, SA VSD, Sev valvular and infundibular PS, rest valves normal, NL BV, FN, NSR, APCs+

INVESTIGATIONS

Consultant Cardiologist: Dr. Ramakrishnan

ECHO(19/06/19)
Large SA VSD, Sev infundibular < valvular PS, confluent good sized PAs
MV, TV, AV- Normal, PV- PS+, EF=60%
Confluent good sized PAs (~10mm MPA,8 mm RPA/LPA) Normal BV function;
IMP: CCHD, Dec Qp, TOF with sev infundibular and valvular PS, confluent good sized PAs

CTA FOR CHD (09/07/19)
Situs solitus, levocardia, Normal systemic and pulmonary veins, + Atrio-Ventricular connections- concordant, Ventriculo-arterial connections- concordant, Atria- Dilated RA, ventricles-SA VSD with aortic over ride+, RVH
PA: infundibular and valvular PS. Confluent Pas, RPA-8 mm, LPA-12.3 mm, DTA-12 mm
Coronaries: arising from separate PA facing sinuses, Few significant APCs from DTA
IMP: TOF, Confuent good sized PAs, Few Significant APCs

SURGERY (20/1/25):COILING FOLLOWED BY ICR + TAP + PFO +
TRANS RA VSD CLOSURE (DACRON PATCH) + TRANS RVOT INFUNDIBULAR MUSCLE BUNDLE RESECTION + RVOT & MPA PRIMARY PATCH AUGMENTATION (HOMOLOGOUS UNFIXED PERICARDIUM) + PFO LEFT OPEN

OPERATIVE FINDINGS:
Sternum- normal, Pleura – B/L intact, Thymus-normal, Innominate vein +, Pericardium- normal, No Cardiomegaly. Chambers: RA -enlarged, RV –RVH+++, LA, LV normal.
Situs solitus, Levocardia, NSPVD, Aorta (~2cm), PA small(~1cm),Confluent adequate sized branch PAs
Coronaries: Normal
Trans RA:
IAS intact, Large Single malaligned SA VSD measuring 3cm x 4 cm, Normal coronary sinus draining into RA, Normal TV
Trans RVOT: multiple hypertrophied infundibular muscles
Trans MPA: Pulmonary valve: Annulus- small(8mm), Leaflets- bicuspid, stenotic

CPB DETAILS : Perfusionist – Mr. Santosh/Mrs Shagufta

BSA: 0.81 m^2 , Flows : 1.63l/min at hypothermia, 2.13 l/ min at normothermia, Aortic Cross Clamp Time: 93min, CPB time :2hr 30min, Lowest Temperature: 28°C Cardioplegia Used: del Nido Cardioplegia

Cannulae : Aortic :16 Fr, Venous : SVC- 18 Fr Angled, IVC – 20 Fr Angled

OPERATIVE PROCEDURE :

Median sternotomy, thymus split, right lateral pericardiotomy, pericardial stays taken, double aortic purse string(5-0 prolene), systemic heparinization, SVC looped, SVC purse string taken (5-0 17mm prolene), aortic cannulation, SVC cannulation, after ACT > 480s partial bypass on , IVC pursestring (5-0 17mm prolene) and cannulation, on full bypass, IVC Looped, systemic cooling upto 28°C, SVC snugged, cardioplegia pursestring and cannulation (5-0 17mm prolene), Aorta and PA dissected, Aorta cross clamped, adenosine in, antegrade cold blood root cardioplegia administered, heart arrested in diastole, RVOT opened between stays, hypertrophied muscle bundles incised, Incision extended to across the pulmonary annulus, Pulmonary valve bicuspid and annulus small, leaflets spared, IVC snugged, RA opened, RA stays, PFO created and used for venting, Dacron patch closure of VSD with 5-0 13mm TF prolene sutures in partially continuous and partially interrupted fashion, PFO vent removed, TV tested with saline, no TR, PFO left open and RA closed in single layer with 6-0 10mm prolene, IVC desnugged, Primary RVOT and MPA patch augmentation done with homologous unfixed pericardium, Gentle ventilation and slow rewarming, head down, flows down, Aortic clamp removed, root vent on, flows back up, Heart resumed beating, 2A 2V pacing wires placed, IVC decannulation and reinforcement, slowly came down on flows and off bypass, SVC decannulation and reinforcement, root vent removed and site reinforced, protamine started, aortic decannulation done, reinforcement of aortic cannulation site, 1 mediastinal and 1 retrosternal drain placed, haemostasis achieved, pericardium closed till over RAA, sternum closed with 2-O ethibond subcutaneous and skin closure in layers.

POST OP COURSE: UNEVENTFUL

POST OP ECHO: (24/1/25): VSD PATCH IN SITU, NO RESDIUAL FLOW, NL BV FN, NO TR/ MR/ TRIVIAL AR, FREE PR, RVOTO G–34 MM HG, NO PE/CLOT/VEG

DISCHARGE MEDICATIONS:

TO BE CONTINUED:

S.NO	MEDICATIONS	DOSE	DOSAGE
1.	T. ECOSPRIN	75 MG	OD / Pc
2.	T. LASIX	10 MG	BD
3	T. ALDACTONE	12.5 MG	OD
4.	T. ENVAS	2MG	BD
5	T. FLUCONAZOLE	60 MG	OD

TO BE STOPPED AFTER 5 DAYS:

S.NO	MEDICATIONS	DOSE	DOSAGE
1	T. PANTOP	20 MG	OD
2	T PCM	300MG	SOS

INSTRUCTIONS:

- Fluids restricted to 900 ml in 24 hours.
- Follow diet restrictions
- Report immediately if :
  - Fever more than 2 days,
  - Bleeding/ discharge from wound,
  - Decreased urine output,
  - Shortness of breath,
  - Giddiness, intense headache, blackout
- Follow up in **CTVS OPD ROOM 01** on Monday/Wednesday/Friday 2pm to 5 pm after 7 days with CXR report.
- Visit OPD after one week, one month, three months, six months, one year and thereafter yearly with CXR and ECHO 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. P RAJASHEKAR Rajashekar 24/1/25