



Nai Raah Foundation

Reg. No. : 278

80G Reg. No. : AACTN6292MF20231

PAN No. : AACTN6292M

Website : www.nairaah.org

Email : info@nairaah.org

Mobile : 8006402202

Patient Name : Master Tarun

Father's Name : Ratan Kumar

Age/Gender : 10 Years/Female

Address: Sikandra, Agra, Uttar Pradesh



Financial Details

Payee Name :	Nai Raah Foundation
Account Number :	60489273987
IFSC Code :	MAHB0001589
UPI :	nairaahfoundation@upi
Gpay/Phonepe/Paytm/BHIM :	8006402202
UPI :	nairaahfoundation@upi
Online Payment :	https://www.nairaah.org/donate/
QR Code	



एक परिवार एक बैंक

NAI RAAH FOUNDATION
nraahfou@mahb

ALL-IN-1 QR CODE



सेवा में

श्री माता आरुणिका सहोदय
आई राह काउन्सेलिंग, दिल्ली

विषय: इलाज हेतु सहायता

श्री माता जी,

मेरा नाम रतन कुमार है मैं सिकन्दरा, अजमेरा
का रहने वाला हूँ। मेरा बेटा लगभग मात्र 10 साल का
में खेलते-2 अन्धानक जिन दुःख के शिकार में आने से
बहुत बुरी तरह से जल गया है जिसका इलाज एसे. एने.
मेडिकल आदारा में चल रहा है। इलाज में बहुत खर्च करने
की वजह से मैं इलाज करवाने में असमर्थ हूँ जिसका
खर्चा 180000/- बताया है। मेरी संस्था से
कभी प्रार्थना है कि मेरे बेटे को सहायता प्रदान करें। आपकी
आशिषों से।

नाम - रतन

उम्र - 10 साल

खर्चा - 180000/-

स्वास्थ्य

रतन कुमार



INDOOR BED HEAD TICKET

S. No.

S.N. Medical College Hospital, Agra ⁶⁵⁰⁷

Department: ED/S

M.O. I/c : Dr.

O.P.D./ Registration No. 13290 M.R.D. No. :

Patient's Name : Parvati Age : 16 y Sex : '

S/D/W : Ratan Kumar Ward : Bed No. :

Address : R/O Runkuta PA Sikandry Date of Admission : 11/05/24

Agra UP Provisional Diagnosis : milk burn

Final Diagnosis : T.B. SP

D.O.A. : 15/05/24 at 2:45 PM Final Diagnosis :

Marital Status : Date of Transfer :

Educational Status : Date of Discharge :

Occupation : Aadhaar No.

Result : Discharge/LAMA/Abscond/Death Mobile No.

Ratan Kumar RB

Sign. of MOIC

NOTES

Name of Residents : 1st Year Dr. Arun

Dr. Vishal

2nd Year Dr. Arun

(1) Dr. Arun

3rd Year Dr. Manish



reference for paediatric drug dosing.

SO/MDIC on call

Department of paediatrics

NMC Agra

Pragna

34/1/2020

wt - 10 kg

Kindly consider the above patient for above diagnosis for drug dosing

Thanking you

- ~~Inj ceftriaxone~~ → 500 mg / v 80
- ~~Inj amikacin~~ → 0.4 mg / v 1000 mg
- ~~Inj metrogyl~~ → 13.3 mg / v 700
- ~~Inj meropenam~~ → 200 mg / v 700
- ~~Inj piperacillin + tazobactam~~ → 500 mg / v 700
- ~~Inj aciloc~~ → 0.4 mg / v 700
- ~~Inj sumol~~ → 40 mg / v 700
- ~~Inj diclofenac~~ → 2 mg / v 100 mg
- ~~Inj epsolin~~
- ~~Inj emeset~~ → 1 mg / v 30

IVF RL. 333 mg / v 8 mg

PRN 44

Admitted to ward

PAST HISTORY

No H/O DM, HTN

No H/O ATT, stroke

FAMILY HISTORY

Not Significant

PERSONAL HISTORY

Not Significant

TREATMENT HISTORY/

ANY OTHER RELEVANT HISTORY/

ALLERGY HISTORY

Not Significant



History of Present Illness (HOPI)

Altb. Mammal born due to physical assault on 12/09/24 at 10.00pm

at 10:00pm

M.O.I./C	→) <i>injured</i>
CMO	→	
RSO	→	
Adv.	→	

On Examination :

GC - poor
PRy 98m *Eng 98/RA*

RR - 20/r
BP 100/60

Chest *5/2 dead*

PA - *left*

Temp, AF

IP } *marked*
Op }

GCS *E4V6M6*

Pupil *b/l N5M*

Investigation

HB TLC DLC PC

Blood Urea, S. Creatinine

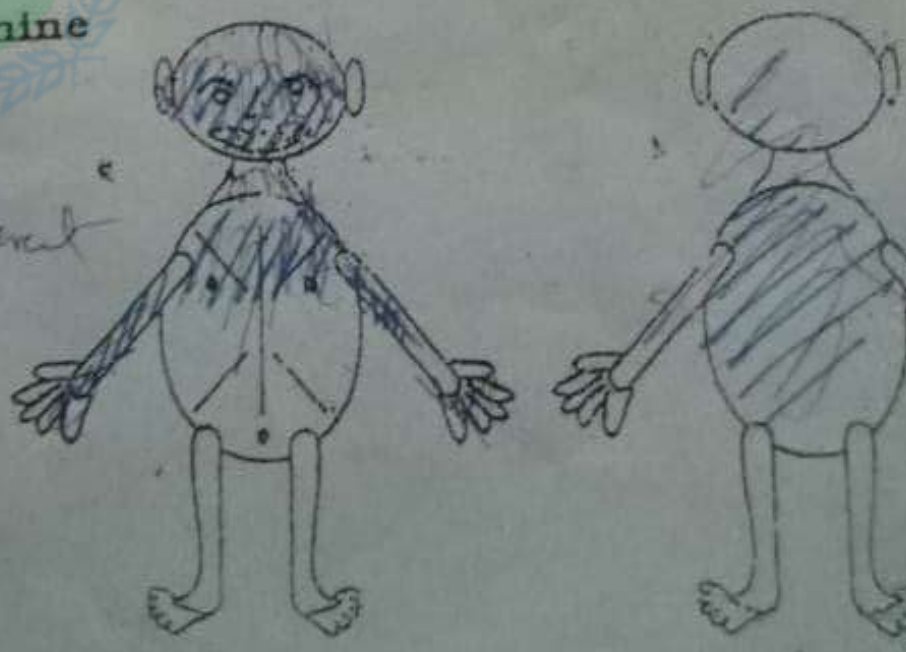
S - Na⁺
S - K⁺

X-Ray

USG

NCCT Head

TEST → *90-457*



→ CAR. I.A. vms
→ X-ray Abdo. chest
→ X-ray spine 1 AP
→ skull

PLAINTS :

Alleged history of accidental thermal burn
due to fall on hot tub on 06/03/24
at 6:00pm

HISTORY OF PRESENT ILLNESS :

The history was given by retired attendant
which seems to be reliable source. According
to them there is alleged history of accidental
thermal burn due to fall on hot tub on 06/03/24
at 6:00pm

Physical Examination

Examination :

Pallor

Icterus

Clubbing

Cyanosis

Lymphadenopathy

Edema

absent

Physical Examination :

CVS S₁ S₂ normal (M)

RIS BCL clear chest

PIA ~~firm~~ (distended) generalized tenderness

CHS - Well united to the place of fusion.

Physical Examination :

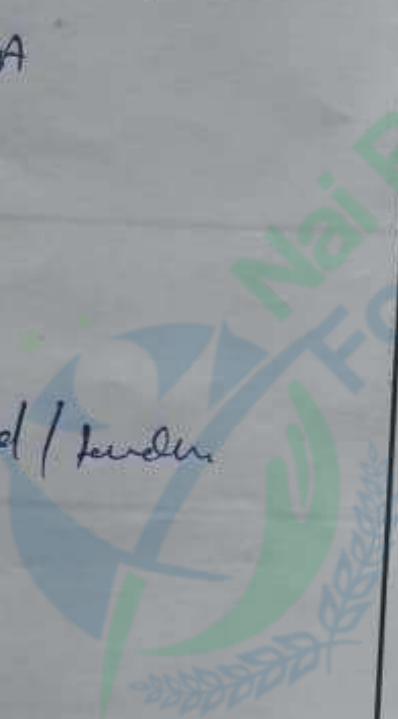
D/E

PIA - ~~firm~~ Tense | Distended | generalized tenderness (+).



Progress Report

Date	Progress / Vitals	Treatment
13/05/24		<u>CLSI B unit 1</u>
Gel foam		4y koles 1g IV SD
PK - 84m		4y muko 700 mg IV TRS
SP - 110/60 mmHg		
SPE - 98% RA		4y. pantop 40mg IV QD
T AA		4y. ampic 4mg IV
An Bil Clu		
I } started		4y ketol 2mg in 2
O }		mg NS 10 TRS
PAT Fun/diuretic / funder		4y Pan 100 IV TRS
		NF III @ M
		III @ DNS.



Clinical History

COMPLAINTS :

c/o pain in abdomen x 15 days

Not passing faeces or flatus x 1 day.

HISTORY OF PRESENT ILLNESS :

History was given by patient himself and seen to be reliable according to him. He was apparently asymptomatic 15 days back when he developed pain in abdomen which was associated with not passing faeces or flatus for 1 day. Pain was relieved by medication and associated with generalized tenderness. No other significant history was present.

(3)

हमें हमारी भाशा में भली भाँति समझा दिया गया है
हमारे मरीज की हालत बेहद खराब है।

यह सब जानते हुए भी हम अपने मरीज को भर्ती कर
है, इस उपरान्त अगर मरीज की जान जाती है तो
पूरी जिम्मेदारी हमारी होगी। इसमें डॉक्टर, अस्पताल
कर्मचारी की कोई जिम्मेदारी नहीं होगी।

नाम

- सुनील

रिश्ता

- भाई

फोन नं०

- 11-24-AM

समय

- 13-5-2024

दिनांक

Clinical History

COMPLAINTS :

clo pain in abdomen x 15 days

Not passing faeces or flatus x 1 day.

HISTORY OF PRESENT ILLNESS :

History was given by patient himself and seen to be reliable according to him he was apparently asymptomatic 15 days back when he developed pain in abdomen which was associated with not passing faeces or flatus in 1 day. pain was relieved by medication and associated with generalized tenderness. No other significant history was present.

Paracetamol

Ess Affected Respiration
Frozebad.

History of Present Illness (HOPI)

10 accidental thermal injury due to
fall on hot tub on 06/07/24
at 6:00 PM

Examination:

MC per SpO₂ 96% on
PR 96/60
RR 22/min
BP —

Chest Bil clear

PA soft / distended / non-tender

Temp 37.2

IP 2/steatosis

GCS - E4V5M6

Pupil - 4/6 R/R

Investigation

HB TLC DLC PC

Blood Urea, S. Creatinine

S - Na⁺
K⁺

X-Ray

Cost PA view
key children AP
erect

USG

CCT Head

D.O.A. 13/01/24

T.O.A.

Diagnosis

M.O.I./C →

CMO →

RSO →

Adv. →

Handwritten signature/initials

TBSM 20-25.1

