Remarks/assessmen of Chief medical Officer/cheif Medical Superintendent along with verified/countersigned papers

- I, **Chief medical Officer** (CMO) Reabareli have persued the document presented before me by Sri Chandra mani Mishra, ID No. UP 6250 Additional Principal judge family court, Reabareli.
- **I.** I have personally examined Sri Chandramani mishra who was suffering from (CLD) and went living liver-transplant and in my opinion he requires frequent visit for treatment/mangement regular follow up to Dr. Subhash gupta M.S at Max Hospital saket delhi.
- **II.** I also verify that Sri Chandra mani mishra was suffering from (CLD) and he was advised by the liver traspart surgion to be on regular medication whole life and he should be under regular follow up of Dr. Subhash gupta M.S. at Max Hospital saket delhi to prevent liver rejection.
- **III.** In my professional opinon and assessment, I am covinced that the treatment/management of the above-mentioned disease/syndrome disability /disorder in paragraph two above is possible at the districts mentioned by the officer in his application submitted to Hon'ble High Court.
- **VI.** The treatment/management of liver trasplant patient post regular follow up is only available with the transplant surgion, Dr. Subhash gupta M.S. at Max Hospital saket delhi.
- **V**. I am aware that this document may be presented by the competent authority/applicant for further use by a competent Medical Board.

VI. This document shall be valid only for months only.

कृते मुख्य चिकित्सा अधिकारी Singnature स्वीति seal

(C.M.O/C.MS)

Name 3/09/13/01 Id No 4/78

Designation pero Hodal.
Telephone No 9369687828

Mobile no.



# Centre for Liver and Biliary Sciences

indraprastha Apollo Hospital

Consultants Transplant and HPB Surgery

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Dr. Neerav Goyal DNB (Surg), DNB (G I Surg & LiverTransplant ) MNAMS +91 98100 31760 / neeravgoyal@rediffmail.com

Dr. Ramdip Ray Ms, MRCS (Eng), Fellowship in Liver Transplant (Apollo, Delhi) +91 88604 83325 / drramdipray@hotmail.com

Dr. Subash Gupta MS (AllMS), FRCSEd, FRCS (Glas) +919811075683, livertransplant@gmail.com

Dr. Shaleen Agarwal Ms, DNB, Mch (GI Surg) ASTS Fellowship in Organ Transplant (USA) +91 98991 19236 / agarwalshaleen@yahoo.com

Dr. Shishir Pareek, MS (PGIMER), Fellowship in Liver Transplant (Apollo, Delhi) +91 98712 66982 / pareek004@yahoo.co.in

Dr. Selva Kumar MS DNB (GI Surg) +91-9871756756/ssnsk@ymail.com

Dr. Rajesh Dey MBBS,MS, MRCS +91-9830317661/dr\_rdey@yahoo.com

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Dr. Hitendra Garg MD,DM (GB Pant) +91-989961120/ drhitendragarg@yahoo.com

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### Transplant Radiology

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Dr. Ruchi Rastogi MBBS, MD (Radiodiagnosis) +91 9810176306 / drruchirastogi@yahoo.com

### **CLBS Office**

Mr. Nitesh Kumar

+91 98910 52970 / +91 11 2987 1246 livertransplant@hotmail.com



Date: 03.08.2016

# TO WHOMEVER IT MAY CONCERN

This is to certify that, Mr. Chandra Mani Mishra was suffering from chronic liver disease. His liver transplant was done on 12.05.2016 and was discharged in a stable condition. After discharge he advice to take complete rest from 09/05/2016 to 03/08/2016. According to his current reports he needs to take rest for next 6 month. Also he is advised to take extra precaution on his mobility, which should be limited to slow pace with only light accompanying weights and avoiding any jerks. He has not allowing outside food. He has to be on medicines lifelong to prevent liver rejection.

Thanking you.

Dr. Shishir Pareek M\$ (PGIMER) Sen or Consultant
Liver Transplant & Gastro Surgery Dr. Shishir Paree belhi

Senior Consultant-Liver Transplant & HPB Surgery

Indraprastha Apollo Hospital

Chief Medical Superint Distt, Hospital, AC

Chief Medical Superintendent



# CLBS CENTRE FOR LIVER AND BILIARY SCIENCES Indraprastha Apollo Hospital, New Delhi, India



# epatologists / Gastroenterologist

Hitendry Garg

# Transplant Surgeons

Dr Mohammed A. Nayeem

Dr. Neeray Goval

Dr. Shaleen Agarwal

Dr. Shishir Pareek

# Prof. Subash Gupta

Name	Chandra Mani mishra	Date of Liver Transplant	12/May/2016 ·
Age/Sex	49 year(s) Male	Date of Admission	08/Jul/2016
UHID No	10610721	Date of Discharge	13/Jul/2016
Ir No.	DELIP118287	Blood Group	O positive
CLBS No.	2016/R/00363		

Diagnosis:

Post op case of LRLT

Cryptogenic CLD with decompensation

TISTORY:

Mr Chandra Mani Mishra Patient underwent LRLT on 12.05.16. Modified right lobe graft. Single bile duct anastomosis. He developed respiratory discomfort same evening with transient loss of consciousness for which he was re-intubated. Following this he had an episode of seizures for which Plain CT head was done which was inconclusive; MRI brain was done, s/o gyral hyperintensity in right parietal region ? infarct/ ? encephalitis/ ? hypoxic. Neurologist opinion was taken and antiepileptics started as advised. Patient also developed AKI on POD-1 with low urine output and creatinine level of 4,1. Nephrologist opinion was taken and followed. Postoperative USG liver Doppler was satisfactory. Patient had low Hb levels for which 3 PRBC transfusion was done on POD-2 and 3. Patient was re-extubated on POD-3. Serum bilirubin had a very slow fall with a peak S. Bilirubin of 9 on POD 8. Patient developed B/L UL paresis (grade 4) which was managed by active and passive physiotherapy. Blood C/S showed budding yeast cells. CSF examination showed budding yeast cells with Cryptococcal Ag +ve at 1:256. CSF C/S also positive for Cryptococcus neoformans. Neurologist opinion was taken and patient was started on Inj Ambisome which was continued for 2 weeks followed by oral fluconazole 400mg twice daily. Patient gradually recovered with no recurrence of seizures, improved kidney function and improving UL power and function. Cellcept was started on POD-1 and Prograf on POD-3. Liver graft function was good. Immunosuppression was kept on hold from POD-8 to POD-12 in view of high blood TAC levels and features of sepsis. Immunosuppression restarted and dose modified according to LFT, KFT and TAC levels. He was discharged in stable condition and had been on f/u since then. He now presented to IAH with c/o nausea, vomiting, loss of appetite with raised creatinine level. He was admitted for further evaluation and management.

Past History:

Underwent LRLT on 12/05/2016

Medication:

Post Transplant immunosuppression

Addiction /

Habituation

No

ते मुख्य जिल्ला





india's First Internationally Accredited Hospital Indraprastha Apollo Hospitals

Sarita Vihar, Delhi - Mathura Road, New Delhi - 110 076 (INDIA)

Tel.: 91-11- 26925858, 26925801, Fax: 91-11-26823629, Emergency Telephona No.: 1066

Website: www.apollohospdelhi.com





# nysical examination at admission

Vitals:

Blood pressure -130/100, Pulse -66, RR -20, Temperature  $-98.4^{\circ}$ , Pain score -0/10

CMS:

Normal

CVS:

Normal

Chest:

Normal

Abdomen:

Previous surgery scar present

Gentio Urinary:

Normal

## Lab Investigations

	and the same of th	Line of the second
	At Admission	At Discharge
	08/Jul/2016	13/Jul/2016
' ^-( gm/dl )	9.80	10.90
HCT (%)	29.10	32.90
TLC ( /cumm )	6,730.00	6,530.00
PLT ( /cumm )	65,000.00	71,000.00
Urea (mg/dl)	51.00	50.0
Creatinine ( mg/dl )	2.80	1.70
Na ( meq/dl )	120.00	129.0
K ( meq/di )	5.50	5.9
Posphate ( mg/dl ) Ca ( mg/dl )		
Mg ( mg/dl )		
T. Bil ( mg/dl )	1.70	1.60
S. GOT ( mg/dl )	42.00	1.5
GPT ( mg/dl )	64.00	28
.10	392.00	49
GGT ( mg/dl )	,	358
T. Protein ( mg/dl )		
ALB ( mg/dl )	3.60	5 1 1
PT ( seconds )		
INR		
APTT ( seconds )		
Fibrinogen		

Website: www.apoliohospdelhi.com



ospital Cuurse



He was admitted with the above history and started on IV fluids and on anti emetics. Nephrology opinion taken for raised creatinine (2.8mg/dl) and followed. In blood investigation there was low serum sodium for which physician reff done which advice spot sodium, serum osmolality and urine osmolality which was 61 mmol/L,0.246 osmol/kg and 0.291osmol/kg respectively. For past neurological event neurology opinion was taken. Advice for CT brain plain and Lumber Puncture for CSF study. CT S/O hypodense gliotic area in right superior frontal region. Rest other area normal. His CSF study revealed WBC 10, CSF was positive for Cryptococcus antigen test, india ink positive and titre was 1/64. He was further managed conservatively till his condition improved. He is now being discharged in a heamodynamically stable condition with creatinine of (.........) the following advice.

## ^\dvice at Discharge

High protein normal diet, Normal activity at home

Tab Wysolone 10 mg per orally in morning and 5 mg in evening Tab Cellcept 1 gm per orally twice a day

Tab Prograf 0.5 mg per orally twice a day

Tab Rantac 150mg per orally twice a day
Tab Septran 1 Tab per orally once a day
Tab Syscan 400 mg per orally twice a day
Cap Zevit 1 cap per orally once a day
Tab Magnical 1 tab per orally twice a day

Syp Cremaffin 20 ml per orally twice a day X Cap Salt capsules 1 cap per orally twice a day Salsol Nebulisation thrice a day Laxopeg sachet 1 sachet per orally sos X K Bind sachet 2 sachet per orally thrice a day Tab Sodamint 1 tab per orally thrice a day Tab Levipil 500 mg per orally twice a day Tab Folvite 10 mg per orally once a day Tab Methylcobalamin 500 mg per orally QID

Inj Lantus 14 IU sub cutaneous at bed time(10 pm)

Blood sugar and BP monitoring.

Blood sugar monitoring Before breakfast, Before lunch, Before dinner.

For patients who are not on fixed dose of insulin, then inj.novorapid with novopen according to this sliding scale:

141-180 4 units 181-240 8 units 241-280 12 units 281-320 20 units <140 no insulin

Repeat CBC, Guota india's First Internationally Accredited Hospital

Indireprestha Apollo Hospitals of le after 3 days and review results with Dr Subash Sarita Vihar, Delhi - Mathura Road, New Delhi - 110 076 (INDIA)

Tel.:91-11- 26925858, 26925801, Fax: 91-11-26823629, Emergency Telephone No.: 1066

Website: www.apollohospdelhi.com





Prof.Subash Gupta Senior Consultant / Transplant Surgeon CLBS, Indraprastha Apollo Hospital New Delhi, India.

Transplant Fellow

Dr Raj

Contacts: Email

Emergency contact number - Duty doctor contact Numbers -9717792027

For appointment with liver unit please contact Mr. Tabrej - 7838660172

Mr Nitesh - 9891052970, Ms Jaya Jeena - 8527166415, Mr Evan Ranjan - 9958261307

guptasubash@hotmail.com, livertransplant@hotmail.com, livertransplant@gmail.com,

neeravgoyal@rediffmail.com,agarwalshaleen@yahoo.com, pareek004@yahoo.co.in, mdnayeem2065@gamil.com.

Website: www.transplantliverindia.com





# TO WHOMSOEVER IT MAY CONCERN

04/12/2023

This is to certify that Mr. Chandramani Mishra R/o Rai Bareilly, Uttar Pradesh (holding Max id no: SKMS.441243 was suffering from CLD and his Liver Transplant surgery was done on 12/05/2016 and discharge in stable condition on 29/07/2016. At present he is in a stable condition and advised to follow up in every 2 months for evaluation of transplanted liver and medications under Dr. Subhah Gupta, Max Hospital, Saket, New Delhi.

Prof. Dr. Subhash Gupta

Ipta Max Surje Deciality Hospital-Vest Block 100 Hospi

Subhash Gupta

), FROSED, FROS (Glas)

Chairman- Max Center for Liver & Biliary Sciences



Max Super Speciality Hospital, Saket (West Block)

1, Press Enclave Road, Saket, New Delhi - 110 017 For medical service queries or appointments, call: +91-11 6611 5050

www.maxhealthcare.in

Max Healthcare Institute Limited

Regd. Office: 401, 4th Floor, Man Excellenza, S. V. Road, Vile Parle (West), Mumbai, Maharashtra - 400 056 T: +91-22 2610 0461/62 E: secretarial@maxhealthcare.com
(CIN: L72200MH2001PLC322854)



# FOST-OPER TIVE INVESTIGATION LOW CHART

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Type of Biliary Ananstomosis:

Histopathology:

interventions:

Contract: Nor

Enter further assestigation reports in above table and send to livertransplant a batmail.com and 3.50 MS 200 C rahoo.com in excel sheet former

Kush Kumar: +91 9891052970. Mord Tabrej : +91 7838660172 Wis Lainunmaw -91 7577051604

# POSTOPERATIVE INVESTIGATION FOW CHART

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Enter further investigation reports in above table and send to livertransplant@hotmail.com & livertransplant a gmail.com in excel sheet format.

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Contact: - Mr Nitesh Kumar: - +91 9891052970; Mohd Tabrej :- +91 7838660172; Ms Sukhvinder Lal: - +91 9717721446