

# OFFICE OF C.M.O. MUZAFFARNAGAR (U.P.)

(Act. 1957) of 1996/Ins by G.S.R. 2 (E) Dated 30th December 2009 (w.e.f. 01.01.2010)  
 Certificate No. 29043 Date: 01-07-2019



## DISABILITY CERTIFICATE

**Not For Medicolegal**

This is to certify that we have carefully examined Shri/Smt./Kum. शिव्या जैन Son/Wife/  
 Daughter of सोहनलाल जैन Date of Birth 05-01-1987 Age 32 Years Male/ Female ✓  
 Permanent resident of House No. / Vill. 621, जाली नं. 13 गांधी कॉलोनी Post Office  
जहमपडी Teh. सदर Distt. Muzaffarnagar (U.P.) whose photograph is affixed above,  
 and are satisfied that :

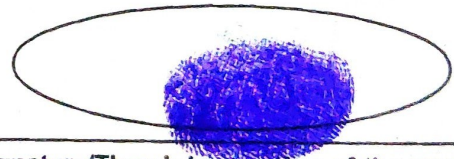
- (1) (A) He/She is a case of ..... Disability/Disabilities His/Her Extent of percentage physical impairment/disability has been evaluated as per guidelines to be Specified for the disabilities Mentioned below, and shown against the relevant disability in the table below :

Sr. No.	Disability	Affected Body	Diagnosis	Physical/mental disability (%)
1. ✓	Locomotor disability @	<del>#</del> FVC of osteogenesis		40%
2.	Low vision/ Blindness	imperfect with shortening of		
3.	Hearing/ Speech disability	(R) lower limb by 1.5" & L		
4.	Mental retardation / illness	monoparesis of R of L		

- (B) In the light of the above, his / her overall permanent physical / mental impairment as per guidelines is as follows :-  
 In figures 40% Percent. In words about forty only percent
- (2) This condition is progressive/non progressive/likely to improve/not likely improve
- (3) Reassessment of disability is :  
 i) Non necessary,  
 ii) Is recommended/after ..... years ..... months, and therefore this certificate shall be valid till ..... DD ..... MM ..... Years
- (4) The applicant has submitted the following documents as proof of residence :-

Nature of Document	Date of Issue	Details of authority issuing certificate
<u>आधार कार्ड</u> <u>689379724743 .</u>	—	—

M.I. ....



Signature/Thumb impression of the person in Whose favour disability certificate is issued

(5) Signature and seal of the Medical Authority

Dr. Anil Kumar Singh  
Orthopedic Surgeon

Name and Seal of Member  
 Muzaffarnagar (U.P.)

Dr. Karan Singh  
M.B. (E.N.T.)  
Senior Consultant  
Distt. Hospital MZN

Name and Seal of Member

Consultant Eye Surgeon  
Distt. Hospital M. Nagar

Name and Seal of Member

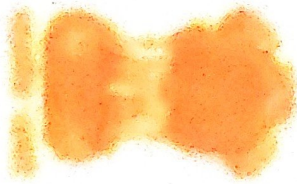
कृते मुख्य चिकित्साधिकारी  
मुजफ्फरनगर

Name and Seal of Chairman

नोट- इससे पूर्व मैंने अपना विकलांगता प्रमाण पत्र नहीं बनवाया है।

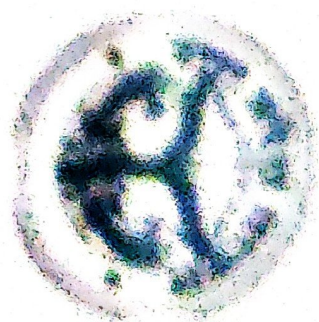
आवेदक के हस्ताक्षर





# UNIQUE DISABILITY ID

Government of India



आता / Name

शिल्पा जैन

Shilpa Jain

UD ID

UP0210619870050536

Disability Type

Locomotor Disability

Year of Birth

1987

% of Disability

40% (Forty Percent)

Date of Issue

02/07/2019

Valid upto

Permanent



Issuing Authority Sign



# UNIQUE DISABILITY ID

Government of India



STATE ID:

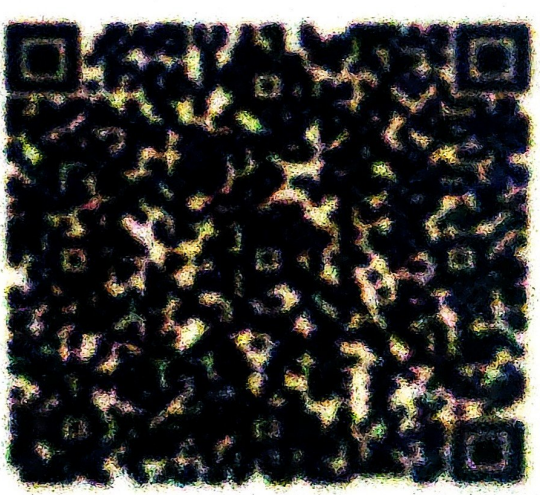
N/A

Aadhaar No.

\*\*\*\*\*4748

~~Address of the Card Issuing Authority State/District level~~

~~Cmo Office, Muzaffarnagar, Uttar Pradesh - 251001~~







वित्त-#1

701/2021

18107

Local Auth. Regst. No. : RMEE2108327

# VARDHMAN TRAUMA & LAPAROSCOPY CENTRE (P) LTD.

3rd Km., Jansath Road, Muzaffarnagar -251001 (U.P.)

Ph. : 0131-2623084, 2623085, 7830803084, 7830803085 Fax : 0131-2622737

## DISCHARGE CARD WITH DISCHARGE SUMMARY

Name of the Patient Shilpa Jain Age / Sex 34y/F

S/o, W/o, D/o Mr. Shri Sahandul Jain

Address H.No 13 Officer Colony  
Saharanpur

Date of Admission 08/06/2021 D.O.S. 11/06/2021 D.O.D. 13/06/21

Surgeon Incharge Dr. Anubhav Jain (M.S.Ortho)

Prognosis explained regarding infection mal union non  
Diagnosis Union in need of implant removal Letter on.

# SIT Femur

Complaints on reporting

Thigh Pain

History of Present illness

No Injury

History of Past illness

Treatment

ORIF & LCP done

Advise on Discharge

No walking.

Exercise as advised.

4-6 months bed Rest

Inj 200g TS, Inj 150, Inj 150

Adv

Tub - Lizolid 600 1BD 1

Tub - Parvkind 20 1BD 1

Tub - Combizlam 1BD 1

Foot - Sirtat Forta 1BD 1

Tub - Bacido 10D 1

✓ i. ccm

✓ i. local bal

Inj on 10/6.  
26/6.

Dr. Anubhav Jain  
M.S. (Ortho)  
Regd. No. 81597

समय :  
समय 7 बजे  
फोन नं. : 9219416543  
9219456235

**Chief Medical Officer**  
**Saharanpur**

Reg. Office : C-209, Defence Colony, New Delhi-110024 (Delhi)  
CIN : U85110DL1996PTC079982  
Website : www.vardhmanhospital.com



Saturday & Sunday Closed  
Appointment No. Cont. - 9219456235  
Open at 3PM to 6PM  
Saturday & Sunday OPD Closed



**VARDHMAN TRAUMA & LAPAROSCOPY CENTRE PVT. LTD.**

3rd Km., Jansath Road, Muzaffarnagar (U.P.)

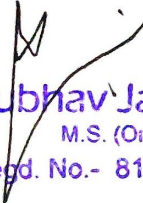
**DR. MUKESH JAIN MS**  
ORTHOPAEDIC SURGEON

**DR. ANUBHAV JAIN MS**  
ORTHOPAEDIC SURGEON

Date 14.06.2021

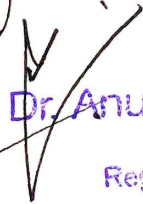
**To whom so ever it may concern**

This to certify that Miss. Shilpa Jain Age 34yrs/F D/O Sh. Sohanlal Jain R/O J-13 Officer colony Saharanpur (U.P.) known case of # S/T Femur. was admitted in our hospital on 08.06.2021 & D.O.S. 11/06/2021 and Discharged on 13/06/2021 and advice bed rest for 4 to 6 months.

  
**Dr. Anubhav Jain**  
M.S. (Ortho.)  
Regd. No.- 81597

*Shilpa Jain*

  
*Shilpa Jain*

  
**Dr. Anubhav Jain**  
M.S. (Ortho.)  
Regd. No.- 81597



**प्रतिहरताक्षरित**

  
**मुख्य चिकित्सा अधिकारी**  
सहारनपुर

**Dr. Mukesh Jain**

Regd. No. : 20828

E-mail : jainmukeshortho@hotmail.com

**(Saturday & Sunday Closed)**

Local Auth. Regst. No.

RMEE2108327

**Registration Time** : 7.00 P.M. (9219416543, 9219456235)

**Helpline** : 7830803084, 7830803085

**Dr. Anubhav Jain**

Regd. No. : 81597

E-mail : dranubhav86@gmail.com

**Reg. Office** : C-209, Defence Colony, New Delhi-110024

**Website** : www.vardhmanhospital.com

**CIN** : U85110DL1996PTC079982



आज दिनांक 24/12/24 को मुख्य सिकित्सा अधिकारी जनपद सहारनपुर की अध्यक्षता में पुर्वांक सख्त मरीजों बोर्ड/रख० बी० डी०/2024-22। - 6590 के अनुक्रम में मरीजों बोर्ड का गहन विचार किया गया जिसके निम्नांकित सदस्य शामिल हैं

- ① डा० सत्यप्रकाश (रेडियोलॉजिस्ट)
- ② डा० धर्मराज मान (हड्डी रोग विशेषज्ञ)

शिल्पा जैन (सिविल जज जू० डि०/रख० बी० डी० मस्तिष्क के विरुद्ध अपराध) सहारनपुर द्वारा सिकित्सीय अवकाश दिनांक 09/06/24 से 09/10/24 तक अपने इलाज हेतु पत्र प्रस्तुत किया अवकाश अवकाश पाया कि डा० अनुभव जैन (MS Ortho) वर्तमान अस्पताल मुजफ्फरनगर द्वारा "Subtrochanteric # femur left side (SIT#) का ऑपरेशन (ORIF & LCP fixation) से इलाज किया गया तथा पूर्ण इलाज के दौरान (दिनांक 08/06/24 से 14/12/24 तक (Dr. Anubhav Jain के देखरेख के अनुसार) इसके इलाज में रहे। तथा पिछले डा० अनुभव जैन द्वारा दिनांक 15/12/24 को FIT घोषित किया गया। जो कि सत्यप्रकाश है,

Shilpa Jain

24/12/24

डा० धर्मराज मान  
हड्डी रोग विशेषज्ञ  
रख० बी० डी० सहारनपुर

डा० सत्यप्रकाश  
रेडियोलॉजिस्ट  
एम्बी०पी० अस्पताल  
सहारनपुर

Chief Medical Officer  
Saharanpur



काज दिनांक 20.12.2022 को मुख्य चिकित्सा

कार्यकारी सहायक के अध्यक्षता में प्रां उच्च न्यायालय के पत्रांक एच 7614/IV-4980/Accounts (A-II) दिनांक 16.06.2022 तथा जेठपद न्यायालय सहायक के पत्रांक एच 1957/IV-2022 दिनांक 14.12.2022 के अनुक्रम में चिकित्सा कोर्स का गठन किया गया, जिसमें निम्नोक्त सदस्य रहे

1. डा० सत्य प्रकाश, रेडियोलोजिस्ट
2. डा० धर्मराज शर्मा, कार्योपदेशक सजीव

डॉ० शिल्पा जैन, सिविल जेना, जू. डि. एन. पी. सी. सहायक प्रां चिकित्साय कार्यकारी दिनांक 09.06.2021 से 09.10.2021 तक अपने इलाज हेतु चिकित्सा प्रकाश पत्र प्रस्तुत किया गया।

कारणों से पता चला कि उनका इलाज डा० अनुभव जैन, वर्धमान हीस्पिटल बुझवाला जिला डीएम Subrochen Text Remun Left Side (SIT) का ऑपरेशन (ORIF LCP fixation) से किया गया, दिनांक 08.06.2021 से 14.12.2021 तक चिकित्सा प्रकाश पत्रों के अनुसार उनके इलाज में रही के जन्म है (Osteogenesis Imperfecta) रोग से पीड़ित है तथा उन्हा विमारी के अन्तर्गत इलाज के चार से दू. माह का समय लगना सम्भावित है इलाज के पश्चात दिनांक 15.12.2021 को स्वास्थ्य प्रकाश पत्र जारी किया गया जो कि सत्य प्रकाश पत्रांक है

*Signature*

डा० धर्मराज शर्मा  
कार्योपदेशक सजीव  
जिला चिकित्सालय  
सहायक

*Signature*

डा० सत्य प्रकाश  
रेडियोलोजिस्ट  
जिला चिकित्सालय सहायक





Vardhman Trauma & Laparoscopy Centre Pvt. Ltd.

3rd km, Jansath Road, Muzaffarnagar

Discharge Summary

Type of Discharge: Normal Discharge

Patient Name: Sushri Shilpa Jain D/o Sohanlal Jain UHID No.:18107 Age/Sex:35Y/F

IP No.: 22/01645 DOA: 16/06/2022 DOD: 19/06/2022 Time on Discharge: 11:00 AM

Address: J-13 Officers Colony Delhi Raad Saharanpur

Diagnosis: (L) Stress # S/T femur with implant in situ Consultant: Dr Anubhav Jain Dr. Siddhant Jain (M.S ORTHO)

History of patient illness: Alleged H/O Patient slipped at home, Patient was not under any influence any drugs / alcohol at the time of admission.

Examination/ findings: Hip with thigh pain, Deformity and swelling in thigh.

Course in Hospital (Including treatment given): INJ ZOCEF 1.5 GM I/V TWICE A DAY, INJ ACILOC 55 MG TWICE A DAY, PERINORM 10 MG TWICE A DAY, TRAMADOL 100MG TWICE A DAY, TAB SISTAL FORTE DS TWICE A DAY, TAB BECOSULES ONCE IN A DAY, Surgery followed by physiotherapy

**Investigation Results:**

- Laboratory Investigation: Investigation report enclosed with this discharge Summary.
- Imaging Investigation: X-Ray

Procedure (if any): 17/06/2022 (L) I/R with ORIF with LCP with B.G done under SA

Patient Condition at discharge: stable

Advice on Discharge: Exercise as advised, No Walking, food chart enclosed with this discharge summary.

INJ ZOCEF 1.5 GM I/V	Twice a day	-----	
<del>Tab LINID 600.</del>	Twice a day	-----	T. Roalhel 1st
Tab RABEKIND 20	Twice a day	-----	
Tab COMBIFLAM (80)	Twice a day	-----	
Tab ALFACALSOL	Twice a day	-----	
Tab BACILO	Once a day	after lunch	
INJ TERIFRAC S/C Daily			Bed Rest x 6m
CALCISPRAY NASAL SPRAY ALT NOSE DAILY			

Followup Advice: on 25/6 08:00 AM

Prognosis Explained regarding infection, mal union, non union 'n' need of implant removal Later on.

When to obtain Urgent care: Progressive swelling, Active discharge from Incision site, Acute pain

Emergency Contact No.: (8445422152, 8267823830, 9568674166, 7078644474)

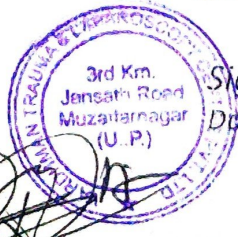
Insurance or Discharge Contact No: 9045766422, 7455880446

Sunday Closed

Name of Doctor: Dr. Anubhav Jain Dr. Siddhant Jain(M.S)

Shilpa Jain

2/7  
18/7



Signature of Doctor: Dr. Anubhav Jain  
Date: 19/6  
M.S. (Ortho.)  
Regd. No.- 81597



18/7 F or

No walking

- ✓ Almond 1-1-✓
- ✓ Roasted leg ✓
- ✓ B3 best way ✓
- ✓ Tij Tijpuc 5/c day X
- ✓ ~~Calories all those~~ → 12

18/8 F or

No walking

RA X 6 miles

4/10/22

F or

Ⓜ High needs  
Prophetic position

at sue  
walki walki flo3

X 6 miles

1st week Oct

22/11





# Vardhman

TRAUMA & LAPAROSCOPY CENTRE PVT. LTD.

**Dr. Mukesh Jain**

CONSULTANT ORTHOPAEDIC SURGEON

**Dr. Anubhav Jain**

CONSULTANT ORTHOPAEDIC &  
JOINT REPLACEMENT SURGEON

**Dr. Siddhant Jain**

TRAUMA & ARTHROSCOPY SURGEON

Date: 19.06.2022

**To whom so ever it may concern.**

This is to certify that Sushri Shilpa Jain age 35yrs/F, D/O Sh. Sohanlal Jain R/O J-13 Officer Colony Saharanpur (U.P.) Known case of (L) Stress # S/T Femur with Implant in situ was admitted in our hospital on 16/06/2022 and DOS-17/06/2022 and Discharged on 19/06/2022 and advice bed rest for 4 to 6 months.

**Dr. Anubhav Jain**

M.S. (Ortho.)

Regd. No.- 81597



**Dr. Anubhav Jain**

M.S. (Ortho)

Regd. No-81597

*Shilpa Jain*

3rd Km., Jansath Road, Muzaffarnagar-251001 (U.P.)

Reg. Office : C-209, Defence Colony, New Delhi-110024, India

[www.vardhmanhospital.com](http://www.vardhmanhospital.com)

7830803084 / 7830803085 / 9219416543

[dranubhav86@gmail.com](mailto:dranubhav86@gmail.com)

OPD Registration : 3 PM. to 6 PM. 9219456235

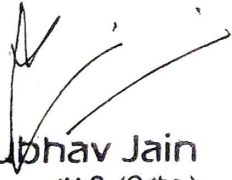
Saturday & Sunday Closed

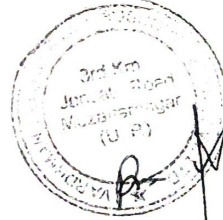


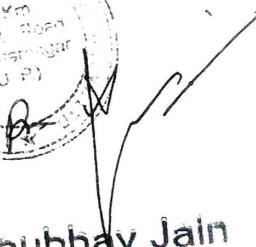
Date: 19.06.2022

To whom so ever it may concern.

This is to certify that Sushri Shilpa Jain age 35yrs/F, D/O Sh. Sohanlal Jain R/O J-13 Officer Colony Saharanpur (U.P.) Known case of (L) Stress # S/T Femur with Implant in situ was admitted in our hospital on 16/06/2022 and DOS-17/06/2022 and Discharged on 19/06/2022 and advice bed rest for 4 to 6 months.

  
**Dr. Anubhav Jain**  
M.S. (Ortho.)  
Regd. No.- 81597



  
**Dr. Anubhav Jain**  
M.S. (Ortho)  
Regd. No-81597



प्रतिहस्ताक्षरित

मुख्य निमित्तसा अधिकारी  
सहारापुर





**Vardhman**  
TRAUMA & LAPAROSCOPY CENTRE PVT. LTD.

**Dr. Mukesh Jain**  
CONSULTANT ORTHOPAEDIC SURGEON

**Dr. Anubhav Jain**  
CONSULTANT ORTHOPAEDIC &  
JOINT REPLACEMENT SURGEON

**Dr. Siddhant Jain**  
TRAUMA & ARTHROSCOPY SURGEON

Date: 04.10.2022

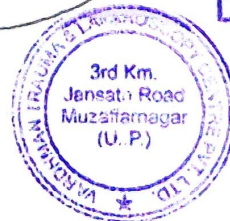
**To whom so ever it may concern.**

This is to certify that Sushri Shilpa Jain age 35yrs/F, D/O Sh. Sohanlal Jain R/O J-13 Officer Colony Saharanpur (U.P.) Known case of (L) Stress # S/T Femur with Implant in situ has undergone Surgery on 17/06/2022 and advised bed rest 4 to 6 months. She is a case of Osteogenesis Imperfecta (Brittle Bone Disease). She was seen in OPD on 04/10/2022 and advice walk with walker for few months. She needs to be under treatment for further 1-2 years for her complete recovery and regular follow-up monthly.

Moreover, She is restricted to travel long distance considering her Physical condition till aforesaid period.

**Dr. Anubhav Jain**  
M.S. (Ortho)  
Regd. No-81597

Shilpa Jain



**Dr. Anubhav Jain**  
M.S. (Ortho)  
Regd. No-81597

3rd Km., Jansath Road, Muzaffarnagar-251001 (U.P.)

Reg. Office : C-209, Defence Colony, New Delhi-110024, India

[www.vardhmanhospital.com](http://www.vardhmanhospital.com)

7830803084 / 7830803085 / 9219416543

[dranubhav86@gmail.com](mailto:dranubhav86@gmail.com)

OPD Registration : 3 PM. to 6 PM. 9219456235

Saturday & Sunday Closed





ओ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL  
बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES



एकक/Unit \_\_\_\_\_  
विभाग/Dept. Ortho.

OPR-6

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. 106405470

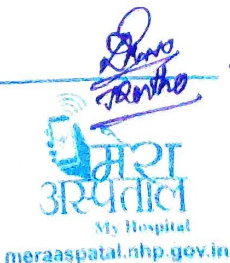
नाम/Name	पिता/पुत्र/पत्नी/पुत्री F/S/W/D of	लिंग Sex	आयु Age	पता/Address
SHILPA JAIN	D/O. MR. SOHAN LAL JAIN	F	35y.	

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
<u>17/12/22</u>	<p><u>W/O</u> astro genesis's imperfecta .</p> <p><u>H/O</u> multiple surgeries → <u>12-13</u></p> <p><u>H/O</u> (L) femur ORIF <del>2008</del> <u>June, 2022</u> .</p> <p><u>H/O</u> inj Teriprac <u>s/c</u> <u>11</u> <del>10</del> <u>years</u> <u>previous surgery 2021</u></p> <p><u>O/B</u> scan ⊕ of <u>previous surgeries</u></p> <p><u>Thigh corset</u></p> <p><u>Ca/PO4/ALP</u></p> <p><u>PTH/VAD3</u></p> <p><u>Shortening present</u></p> <p><u>Deformity</u> ⊕ ⊕ <u>distal thigh</u></p> <p><u>Adv</u> <u>c/p/w</u> <u>Prof. R. Mittal</u> <u>Ortho</u></p> <p>→ Follow up on <u>20/12/22</u> .</p> <p><del>for external opnd</del> (Tuesday)</p>



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प  
अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE  
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# MAHENDRA TARA HOSPITAL



A Complete Dental & Medicare Center

EMERGENCY 24 HOURS Mob.: (9319972220/ 9319972221)

Patient Name Mrs Shilpa Jain Age/Sec 24/P Date 5/10/22 Dept Medicine

Diabetes  Hypertension  Cardiac Diseases  Drug Allergies  Bleeding  Any Other \_\_\_\_\_

### OPD

चिकित्सा परामर्श

Dental  
दन्त रोग विशेषज्ञ

स्त्री रोग विशेषज्ञ  
Gynecology & Obstetrics

IVF (Test tube baby)  
कृत्रिम विधि से गर्भधारण

Surgery  
कल्प चिकित्सा

Medicine  
कल्प चिकित्सा

Orthopaedics  
हड्डी रोग विशेषज्ञ

Pediatrics  
बाल रोग विशेषज्ञ

E.N.T.  
नाक, कान, गला विशेषज्ञ

Pathology  
रक्त, पेशाब आदि की जाँच

Radiology  
एक्स-रे आदि की जाँच

Dermatology  
त्वचा रोग विशेषज्ञ

Ayurveda & Panchkarma  
Dot Center  
आयुर्वेदिक एवं पंचकर्म डॉट सेन्टर

Govt. Dot Center  
टी.बी. की छी दवा  
बच्चों एवं गर्भवति महिलाओं का  
टीका करण

all strained leg -

Acet x Ray for ankle joint

R -

- Motibond 685

- Zovodul SP 185

- A to 2 - 012

- Micon 0000

- Pseudo DSR -

Acet  
Calcium

M.T HOSPITAL  
ISO Certified 9001:2015  
Regd. No. E2222023  
Rajeev Nagar, Tara Colony, (Gat.)

सुविधाएँ - भर्ती दूरबीन द्वारा पिथ की थैली का अप्रेशन एवं अन्य सभी ऑपरेशन, डिलेवरी डेन्टल, जाँच, ई.सी.जी, नर्सरी (NICU), एक्स-रे, टीका करण

पता: मैन रोड बृहस्पतिवार बाजार, राजीव नगर, खोडा कालोनी, गाजियाबाद