

## TO WHOM IT MAY CONCERN

This is to certify that Master **Aditya Mishra**, S/O Sh. Anjani Kumar has been diagnosed with Autism Spectrum Disorder at **AIIMS Hospital in 2013**. The child has speech delay, poor eye contact and hyperactivity and touches everything. The child has been suggested a series of intensive **Speech and Language Therapy, Occupational Therapy** and **Special Education** for frequency of sessions 5 days in a week. The objective of these sessions is to introduce speech formation mechanism, with emergence of basic vocalization of words used in everyday activities, to develop cognitive skills and to reduce hyperactivity. The child has been taking sessions at **Lakshaya wonder kids foundation from 2021**, sometimes he taking online sessions.

As per latest assessment, it is advised that Aditya Mishra should continue the above mentioned therapies for better result.



Director  
**PRABHAKAR KUMAR**

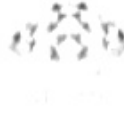
LAKSHAYA WONDER KIDS FOUNDATION

Speech & Language Pathologist

RCI Reg. No. - B66322

self-attested  
Ankur  
29/11/23

7303931176, 9023823783 ☎  
111/9, Mahadeep Apartment, ☺  
Basement, Opposite CNG Pump,  
JNU - Fortis Road, Kishangarh,  
Vasant Kunj, New Delhi- 110070  
lakshayawonderkids@gmail.com ✉



Department of Empowerment of Persons with Disabilities,  
Ministry of Social Justice and Empowerment, Government of India

## Disability Certificate

Issuing Medical Authority, Allahabad, Uttar Pradesh



Certificate No.: UP4410820110232158

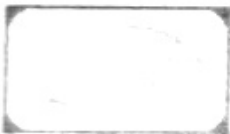
Date: 03/02/2023

This is to certify that I/we have carefully examined Shri **Aditya Mishra**, Son of Shri **Anjani Kumar**, Date of Birth **28/02/2011**, Age **11**, Male, Registration No. **0944/00000/2302/0215420**, resident of House No. **J-05 Juhli Colony, Myor Road - 211001**, Sub District **Allahabad**, District **Allahabad**, State / UT **Uttar Pradesh**, whose photograph is affixed above, and I am/we are satisfied that:

- (A) He is a case of **Mental illness**
  - (B) The diagnosis in his case is **Autism**
  - (C) He has **80%**(in figure) **Eighty** percent(in words) Temporary Disability in relation to his **Brain** as per the guidelines (Guidelines for the purpose of assessing the extent of specified disability in a person included under RPwD Act, 2016 notified by Government of India vide S.O. 76(E) dated 04/01/2018).
- This certificate recommended for **5 year(s)**, and therefore this certificate shall be valid till **03/02/2028**

The applicant has submitted the following document(s) as proof of residence:

Nature of Document(s): Aadhaar card



Signature / Thumb Impression of the Person with Disability

*Rakesh*

Signatory of notified Medical Authority Member(s)



*self-attested  
Ankur  
29/11/23*



Issuing Medical Authority, Allahabad, Uttar Pradesh

**UNIQUE DISABILITY ID**  
Government of India



आदिता मिश्रा  
Aditya Mishra

UP4410820110232158

Mental Illness

2011 80% (Eighty Percent)

03/02/2023 03/02/2028

Issuing Authority Sign



self-attested  
Ankur  
29/11/23



**CERTIFICATE OF DISABILITY OF PERSONS WITH AUTISM**

Government of India

All India Institute of Medical Sciences, New Delhi 29

Certificate No. 2017/12/AU-118



This is to certify that Master **Aditya Mishra** son of **Anjani Kumar** resident of Flat No. A1, H. N. -1031, Sampada Apartment, Near Mehta Chowk, Mehrauli, New Delhi, PIN- 110030, with particulars given below:-

- a) Date of birth : 28/02/2011
- b) Sex : Male
- c) Signature and thumb impression



Has been examined by the State authorized Autism Certification Medical Board and he is found to be categorized as persons with **Mild Autism**. His percentage of disability is **60%**.

Signature and seal of  
 Chairperson of authorized  
 Autism Certification Medical Board

Signature and seal of  
 authorized representative of  
 Medical superintendent

Medical Superintendent  
 A.I.I.M.S. Hospital  
 New Delhi-110029

Date:- 23/12/2017

Place:- New Delhi

This certificate is valid for 5 years and reassessment is recommended after 5 years.

self-attested  
 Anju  
 29/11/23

2/A



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

अस्पताल के अंदर धूम्रपान करना प्रोhibited है। SMOKING IS PROHIBITED IN HOSPITAL PREMISES

रोगी का विवरण  
रोग/Unit  
विभाग/Dept.  
नाम/Name

General	OPR-6
PO: UNID: 102031364 Clinic No: AUTISM- 2017/AUT201/302 Name: ADITYA MISHRA C/O ANJANI KUMAR, 67 7th 260, M Ph: 9805053557 Flat No. A-1, 1st, H. No. 1011, Swarnaj Apt. 1st, Sector 34, Wazirpur, New Delhi, India India	Dept: 452 Regd. No: _____ Room: 11 City: _____ State: _____ Pin Code: _____ Date: _____

रोग/Date: Aut/M/6.7/11/17/10/20

रोग/Date

उपचार/Treatment

Autism spectrum disorder

Forceps assisted delivery, H/O NNT  
not required PT, No other  
perinatal adverse events

- Predominantly social and language milestone delayed
- Pre-occupation with inanimate objects
- sensory issues ⊕
- motor stereotypies ⊕, idiosyncratic phrases ⊕
- H/O hyperactivity and inattention present - previously evaluated in 2014 → Therapist to follow up - outside receiving Amiprazole and Attentionol with positive response

MRI Brain - ⊕  
Fragile X  
Screening -  
negative  
Sleep EEG - ⊕

O/E: - vital stable No Ncm/dysmorphia

self-attested  
Ankr  
29/11/23

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प  
अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE  
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)  
No focal defect-

765 } 011-26594585-110  
Fx-2331 - 011-26594585-110

अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL  
वहिरंग रोगी विभाग /Out Patient Department

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



एक/Unit \_\_\_\_\_  
विभाग/Dept. \_\_\_\_\_  
नाम/Name \_\_\_\_\_

General Consultation Time: 11.00 AM-02.00 PM  
OPR-6  
Dept. Seq: 122  
No. \_\_\_\_\_  
Address \_\_\_\_\_  
NO: 102031144  
Dept: Paediatrics  
Unit: Unit-11  
Room: 14  
F/29  
Days: Tue, Fri  
App. Date: 25/08/2017

App. ID: 2017080207387

रिपोर्ट/Diagnosis

दिनांक/Date

63

उपचार/Treatment

ASD

- On behavioural interventions  
& planned therapy (Anxiety  
& attention).

Adv

- Regularisation in Autism clinic  
for reassessment & optimizing  
management. 01126594679

- DNA PCR for Fragile X - old OT  
Block building  
1st floor  
Genetic  
lab  
fht

Self-attested  
Anjiv  
29/11/23

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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