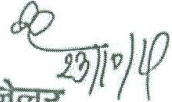


कार्यालय अधीक्षक, जिला कारागार, मुरादाबाद

प्रमाण-पत्र

दिनांक : 23 अक्टूबर, 2019

प्रमाणित किया जाता है कि डा0 नीरज कुमार पुत्र श्री ओमप्रकाश वर्तमान
जिला कारागार, मुरादाबाद पर परामर्शदाता (वरिष्ठ चिकित्साधिकारी) के पद पर कार्यरत हैं।


23/10/19
जेलर
जिला कारागार, मुरादाबाद

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HEERA LAL PUBLIC SR.SEC.SCHOOL

(RECOGNISED & AFFILIATED TO C.B.S.E. NO. 2730638)

BHAGYA VIHAR, JAIN COLONY, MADAN PUR DABAS, DELHI-81

Regn. No. HLPS-2019-20 -

000073

Name of Student

KESHAV BHARDWAJ

Class & Section

11

Admission Date

31/Jul/19

PARTICULARS

AMOUNT

PARTICULARS

AMOUNT

Registration & Admission Fee

Tuition Fee

Annual Charges

Science Fee

Development Charges

Computer/I.P.

Examination Fee

Activity Charges

Games & Sports

Transport Charges

Balance Surplus / Due Rs.

Cheque/Cash

Deposit Total Rs.

42000.00

(Authorised Signatory)

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METRO
HOSPITAL & HEART INSTITUTE

(A Unit of Metro Institute of Medical Sciences Pvt.Ltd.)
CIN No:- U00000 DL 1990 PTC 039293
(NABH, & ISO 9001: 2008 Certified)

CARDIOLOGY
ECHOCARDIOGRAM REPORT

NAME : Mrs. Alpna Sharma AGE/SEX : 50/F ECHO NO. : 121089

REFERRING DIAGNOSIS : To rule out structural heart disease DATE : 06/04/19

Echogenecity : Adequate

DIMENSIONS	NORMAL	NORMAL
AO (ed)	2.7 cm (2.1 - 3.7cm)	IVS (ed) 1.5 cm (0.6 - 1.2 cm)
LA (es)	3.4 cm (2.1 - 3.7 cm)	LVPW (ed) 1.5 cm (0.6 - 1.2 cm)
RVID(ed)	2.2 cm (1.1 - 2.5 cm)	EF 60% (62% - 85%)
LVID(ed)	4.4 cm (3.6 - 5.2 cm)	FS 30% (28% - 42%)
LVID(es)	3.0 cm (2.3 - 3.9 cm)	

MORPHOLOGICAL DATA

Mitral Valve : AML : Normal	Interatrial septum : Intact
PML : Normal	Interventricular Septum : Intact,
Aortic Valve : Normal	Pulmonary Artery : Normal
Tricuspid Valve : Normal	Aorta : Normal
Pulmonary Valve : Normal	Right Atrium : Normal
Right Ventricle : Normal	Left Atrium : Normal
Left Ventricle : Normal in size	

Dr. SANJEEV SAXENA, MD.,DM
Interventional Cardiologist &
Director Cardiology
Metro Hospital & Heart Institute, Meerut.

47/G-5, Boundary Road, Lal Kuthi, Meerut Cantt.-250001 Ph.: 0121-2665033 / 41/ 42 / 44, Fax: 0121-2645304
Registered office : 14, Ring Road, Lagpat Nagar-IV, New Delhi-110024

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2-D ECHOCARDIOGRAPHY FINDINGS :

LV normal in size with normal contractions. No LV regional wall motion abnormality in basal state. LV shows concentric hypertrophy. RV normal in size with adequate contractions. LA and RA normal. All cardiac valves are structurally normal. Pericardium normal. No intracardiac mass. Estimated LV ejection fraction is 60%.

COLOR FLOW MAPPING :

No valvular regurgitation.

DOPPLER STUDIES :


MVIS A > E

Peak systolic velocity across aortic valve = 0.8 m/sec.

No AS/AR/MS/MR/TS/TR/PS/PR

IMPRESSION :

1. LV normal in size with normal systolic function (LVEF = 60%).
2. No LV regional wall motion abnormality.
3. Concentric left ventricular hypertrophy.
4. Grade I LV diastolic dysfunction.
5. RV normal in size with adequate systolic function.

Done By :  **DR. SANJEEV SAXENA,**
MD, DM (Cardiology), FACC, FSCAI, FESC
CONSULTANT CARDIOLOGIST
Dr. SANJEEV SAXENA, MD.,DM
Interventional Cardiologist &
Director Cardiology
Metro Hospital & Heart Institute, Meerut.

NOTE : Echocardiography report given is that of the procedure done on that day and needs to be assessed in conjunction with the clinical findings. This is not for medicolegal purposes. No record of this report is kept in the hospital.

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METRO HOSPITALS & HEART INSTITUTE

(A Unit of Metro Institute of Medical Sciences Pvt. Ltd.)

CIN NO. U00000DL1990PTC039293

OPD INITIAL ASSESSMENT

QUALITY CERTIFICATIONS



06-04-19

DR. SANJEEV SAXENA
M.D.(Med), D.M.(Cardiology), FACC, FESC, FSCAI (USA)
Interventional & Consultant Cardiologist.
Director Cardiology.
OPD Timings:
Mon to Fri : 09:00 Am to 06:00 Pm
Regn. No. : MCI-8888

NAME OF PATIENT *Mrs Alpna Sharma*

AGE/SEX
50 years

ID.No.

Date/In Time

PRESENT COMPLAINT :

INVESTIGATION / TREATMENT

PAST HISTORY :

HT , SOB II

FAMILY HISTORY :

ECA - ST / T changes

NUTRITIONAL SCREENING DONE :

DRUG ALLERGY :

*Echo core LVH
DD F I*

*Sorbitrate (5)
Vpn 4-12*

EXAMINATION :

BP

PR

SPO2

WL

DIAGNOSIS

*Avoid
Physical & mental
stress*

*TAB. Telma - AM - 40
Shalcal XT
Ecosprin AV 75*

6wells

*Petrol MD (5)
0507*

DR. SANJEEV SAXENA, MD, DM
Interventional Cardiologist &
Director Cardiology
Metro Hospital & Heart Institute, Meerut

EXPECTED OUTCOME EXPLAINED ✓
POSSIBLE COMPLICATIONS EXPLAINED ✓
NUTRITIONAL CARE ADVISED ✓

(DOCTOR SIGNATURE)

OUT TIME

FOR OPD APPOINTMENT : +91 8126906607

Next Followup:

NUTRITIONAL SCREENING:- Wt. Loss Loss of Appetite Muscle Wasting Delay Wound Healing

Lethargy Decrease Mobility

Pain scale 0. NO PAIN 2. MILD PAIN 4. ANNOYING PAIN 6. MODERATE PAIN 8. SEVERE PAIN 10. WORST PAIN

47/G-5, Boundary Road, Lal Kurti, Meerut Cantt. Ph.: 0121-2665033/11-42-44, Fax : 0121-2645301. mhimeerut@metrohospitals.com
Regd. Office : 14, Ring Road, Lajpat Nagar IV, New Delhi - 110044. MHHI/CL/0001 (Rev. No. 01)

*Self at home
Alpna*



Sri Sai Hospital, Moradabad
 Department of Neurological Medicine
DISCHARGE SUMMARY

Blood Group : B Positive Allergies :

Date of Admission: 7-Jun-17	Discharge 9-Jun-17	UHID No.: 85338/ 2017 IPD No.1217 /2017
Date of Procedure 1)	2)	WARD - PW

PATIENT INFORMATION

Patient Name MR.OM PRAKASH SHARMA Age : 80 YRS Sex: M
 S/o D/o W/o MR.ANOKHE LAL SHARMA
 Address GJ 104 RAILWAY COLONY
 City : MORADABAD State: U.P. PIN : Contact Numbers :
 Phone No or Mobile No. : 9760534528

Consultant Incharge : Dr Anand Singh MBBS,MD,DM
 Department : Neurological Medicine
 Other Consultant involved : Dr None
 Department : None
 Other Consultant involved : Dr None
 Department : None

DIAGNOSIS: LEFT LOWER LIMB MONOPARESIS ACUTE ISCHAEMIC STROKE (THROMBOLYSIS DONE) FUC CAD (POST CABG) WITH OLD CVA WITH CERVICAL + LUMBER SPONDYLOSIS WITH PARKINSONISM.

Treatment/ Operation done: Conservative Treatment Given.

Presenting History: A 80 yrs male patient old FUC CAD Post CABG old CVA parkinsonism presented with C/O -Sudden onset left sided weakness since 2-3 hrs.

Examination : BP-160/90mmhg ,Pulse-86/ min,Temp- 98.6° F,SPO2- 96%, CNS- conscious, CVS-S1S2 -N.,Chest-B/L- Clear,P/A-Soft

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SRI SAI HOSPITAL
 SUPER SPECIALITY
 CARDIAC | TRAUMA | EMERGENCY
 A Unit of Medinova Health Care Pvt. Ltd.

Delhi Road, Moradabad-244001, Uttar Pradesh, India
 T +91 591 2479800 (30 lines) F +91-591-2481720
 E info@srisaihospital.com

CIN No. U83120UP1997PTC021543

Investigation:

DATE:-	07/06								
Haemoglobin (gwy dl)	14.7								
TLC (Per cu mm)	4,990								
OLC (N,L,E,B,M)	61.1/34.7/ 1.2/2.6								
GBP(mcv/mch/mchc)									
PCV									
Platelets (Lacs/ cu mm)									
ESR									
B. Sugar :Random :Fasting/ PP (mg/ dL)	161.7								
S.Sodium (meq/ L)	136.8								
S. Potassium (meq/ L)	4.24								
B. Urea (mg/ dL)									
S. Creatinine (mg/ dL)	1.06								
S.Calcium									
S. Uric Acid									
PO4									
ALP									
S. Bilirubin (mg/ dL)	0.57								
SGOT									
SGPT	17.3								
Prot.									
Alb.									
PT/INR	15.0 13.0 1.15 1.15 18.0 13.0 1.38 1.38								
BT									
CT									
HbsAg	Non-reactive								
HCV	Non-reactive								
HIV	Non-reactive								

X-Rays: NONE

USG : NONE

CT : 07-06-17 Head(Plain):-Mild bilateral periventricular ischaemic changes Diffuse senile bilateral cerebral atrophy as described.

09-06-17 Head (Plain):-Finding appear more or less same.No evidence of other significant fresh findings.

MRI : NONE

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Other Investigations: APTT:-33.0/30.0(07/06)

Course In Hospital: A 80 yrs male patient old MUC CAD Post CABG old CVA parkinsonism presented with C/O -Sudden onset left sided weakness since 2-3 hrs. Patient was admitted in CCU & was thrombolysed with Inj. Actiase 50mg I/V infusion. Patient improved gradually & now being discharged in a clinically stable state with follow up advice in OPD.

Patient status at Discharge: Patient conscious, afebrile, vitals normal stable, self voiding. Taking orally well.

Advice at Discharge:

CAP. PLEGERIN-A	150mg		HS.
TAB. AVAS	80mg		HS.
TAB. FOLIC ACID	5mg		OD.
TAB. SYNDOPA PLUS	125mg		TDS. (7AM, 11AM & 4PM)
CAP. REBEMAC-DSR			OD. (BBF)
TAB. GABAPIN-NT	400mg	Halftab.	HS.
CALCEROL SACHET			TWICE A WEEK
CAP. NEUROKIND FORTE			OD.

Physiotherapy as advised.

Review After 5 Days In OPD Of Dr. Anand Singh

In case emergency please contact hospital emergency service(24hours)@ 0591-2479800.

Consultant - in - Charge

Resident - in - charge

(Dr. Anand Singh MBBS, MD, DM
Department of Neurological Medicine)

(Dr. Nirbhay Dwivedi)
Department of Neurological Medicine

NOTE: THIS IS AN IMPORTANT DOCUMENT, PLEASE KEEP THIS FOR FURTHER REFERENCE AND BRING ON YOUR NEXT VISIT

SRI SAI HOSPITAL
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E - Mail : srisaihospital@rediffmail.com. Visit us at : www.srisaihospital.com
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Mimhans
NEUROSCIENCES HOSPITAL

281, 283 Sector-1, Mangal Pandey Nagar, Opp. C.C.S. University, Meerut. Phones : 2766833, 2767634, 9927005678, Helpline : 9837056769
E-mail: mimhans@gmail.com website : www.mimhans.com



JAS-ANZ



Discharge Summary Report

Reg. No : MIM-A-048372	Patient Category : Cash
Patient Name : Mr Om prakash Sharma	IPD No. : 1652
Att Name : Sh. Anuj Kumar / Son	Admission Date : 30/11/17 2:42PM
Age & Sex : 80 Years / Male	Next Appointment : 04/12/2018
Address : H.P-18/1 GANGA NAGAR MERUT	Room No. : P-325
Phone : 9411666736	Bed No. : 325
Dr. Incharge : Dr. ARUN SHARMA / NEUROLOGY	Reference Dr. :
Discharge Date & Time : 04/12/2017 12:47PM	
Reason For Discharge : Shifted to Another Hospital	

Admission Diagnosis : LEFT HEMIPARESIS / DYSARTHRIA / ACUTE ISCHEMIC STROKE / FUC PARKINSON'S DISEASE.

Discharge Diagnosis : I63 -Cerebral infarction

Reason of Admission
Acute Stroke.

At Admission details
Presented with C/o- Left hemiparesis + difficulty in speaking.
Risk factors: Parkinson's disease.
Examination revealed PR 80 per minute, RR 24 per minute, BP 130/80 mm Hg, Temp. 98.2 0 F, O2 Saturation 98%. Nervous System: Left hemiparesis. CVS, Respiratory System and Abdomen are within normal limits.

Course During Hospitalization
Patient clinically evaluated, investigated and final diagnosis made as LEFT HEMIPARESIS / DYSARTHRIA / ACUTE ISCHEMIC STROKE / FUC PARKINSON'S DISEASE. During hospital stay patient gradually improved and discharged in satisfactory condition.
Treatment given: Conservative.
Positive Findings On Investigation: NCCT Head-Non specific small vessels disease. Hb-13.2 gm/dl. INR-1.41, B.Urea-50 mg/dl, Na+ 130 mEq/L.
Condition At Discharge: Presenting symptoms- regressing, PR 84per minute, RR 22per minute, BP 120/80mm Hg, Temp. 98.40 F, O2 Saturation 97%, Nervous System: Stable.

Discharge Instructions
Follow up advise: To come after 7 days in outdoor with prior appointment. Phone: Call / SMS - 9870838438, Any other query phone (0121) 2768833, 2767634, 9927005678. Clinical Hepline: 9837056769
Preventive instruction: Avoid risk factors as discussed.
Promotive instructions: Life style modifications as advised, Daily walk and exercises as advised, Dietary instructions: Normal diet

Review On: 4/12/2018

Dr ARUN SHARMA
MD, DM (Neurology)
Consultant Neurophysician
REG NO UP35792
CMO REG NO - MRT828

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Investigations

DATE	DESCRIPTION	PARAMETER	VALUE OBSERVED
30/11/2017	URINE ROUTINE	Quantity	10 ml
01/12/2017	SERUM HOMOCYSTEINE	PARAMETER Method	VALUE OBSERVED Enzymatic method
30/11/2017	ALKALINE PHOSPHATASE	RESULT	144
30/11/2017	BLOOD UREA	Result	50
30/11/2017	GLUCOSE RANDOM BLOOD	Blood Sugar (R)	149
01/12/2017	LIPID PROFILE	S. Cholesterol	165
30/11/2017	SERUM POTASSIUM	RESULT	3.5
30/11/2017	SERUM BILIRUBIN TOTAL & DIRECT	Total Bilirubin	0.8
30/11/2017	SERUM CALCIUM-TOTAL	Result	9.0
30/11/2017	SERUM CREATININE	Creatinine	1.0
30/11/2017	SERUM SODIUM	RESULT	130
30/11/2017	SGPT	Result	48
30/11/2017	ACTIVATED PARTIAL THROMBOPLASTINTIME (APTT)	Patient Plasma	35
30/11/2017	PROTHROMBIN TIME (PT)	Patient	22
30/11/2017	CBC/COMPLETE HAEMOGRAM	PARAMETER Haemoglobin	VALUE OBSERVED 13.2
30/11/2017	ESR	ESR	40
30/11/2017	PERIPHERAL SMEAR EXAMINATION	RBC	NORMOCYTIC NORMOCHROMIC BLOOD PICTURE
30/11/2017	BLEEDING TIME & CLOTTING TIME	BLEEDING TIME	3 min 10 sec

DATE	TEST
30/11/2017	CT HEAD WITHOUT CONTRAST
Result :	<p>NCCT HEAD</p> <p>Serial contiguous 5mm sections were taken through posterior fossa.</p> <p>Study Reveals:-</p> <p>Ill defined hypodensities are seen at bilateral centrum semiovale & corona radiata</p> <p>Basal ganglia and thalami are normal.</p> <p>Sylvian fissures and sulci are normal.</p> <p>Ventricular system is normal.</p> <p>No midline shift is seen</p> <p>Cerebellum and brain stem are normal.</p> <p>IMPRESSION: CT FINDINGS ARE SUGGESTIVE OF:</p> <p>Non specific small vessel disease.</p>

Signature Of Doctor
DR ARUN SHARMA
 MD, DM (Neurology)
 Consultant Neurophysician
 REG NO UP36022
 CMO REG NO - MRT826

Signature Of Patient
 Mr Om prakash Sharma

Imp. Note:
 This is an important document of your treatment. Please Keep it properly as hospital keeps record only for One Years.
 Original investigation reports has been handed over to the patient./ sent to the TPA.

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