

From:

**Alok Dwivedi,
Addl. Principal Judge Family Court-2
Firozabad,**

To:

**The Registrar General,
High Court Of Judicature at
Allahabad**

Through,

**The District Judge
Firozabad**

Sub:- Representation regarding consideration of Premature transfer

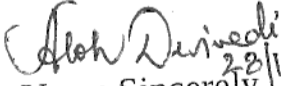
Respected Sir,

With due respect I would like to submit that presently I am posted at Firozabad from April 2018. I have completed only two years tenure in the district. But, due to some unavoidable circumstances, I am applying for premature transfer. Infact, my daughter Stuti Dwivedi studying in class X is suffering from Nuerological and Optical neuritis problem and her treatment is going on in SGPGI Lucknow and Agra. It is very difficult for me to visit Lucknow and Delhi for her treatment on regular intervals from Firozabad.

It is, therefore, very humbly requested that Hon'ble Court may kindly be pleased to consider my application for premature transfer. Hence I request your kindness to place my representation before the Hon'ble Court for its kind consideration. Relevant medical papers are being attached with the application for the kind perusal of the Court.

'With Regards'

Date: 28.11.2019


Yours Sincerely
(Alok Dwivedi)
Addl. Principal Judge
Family Court-2, Firozabad,

Encl: Attached as mentioned above

1094

Neurology



2019979845

Regn. I

Priority

Stuti Dwivedi / 15 Years, FEMALE

Printed on 18-10-2019 7:33:11 Surendra Kumar Shukla @ 172.25.250.163

Dr. S. PRADHAN
MON/FRI

SANJAY GANDHI POST GRADUATE INSTITUTE OF MEDICAL SCIENCES LKO



O. P. D. CASE FILE

20

Patient's Name

Address

Self Attested
hr
28/11/13

BANSAL ADVANCED NEUROLOGY AND MATERNITY CENTRE

Excellence is our speciality.....

Dr. Robin Bansal

MD (Medicine)
DM (Neurology)
SGPGI, Lucknow
Consultant Neurophysician
Reg. No. 60995 (UPMC)

See for



Dr. Parul Bansal

MBBS Hons)
MS (Obs & Gynae)
Consultant OBS & Gynae.
Infertility Expert
Reg. No. 56605 (UPMC)

Name Swati Age/Sex 16y/f Date 08/10/19

Facilities:

EEG

VIDEO EEG

NCV

EMG

VEP

BAEP

RNST

ccc Rapid deterioration in vision - 2 months -

on refractive error.

vn = glan $\left\{ \begin{array}{l} 6/24 \\ 6/24 \end{array} \right.$

work of memory preclusion
as per ophthalmologist
opm.

↓
Significant improvement
in vision see the

? Optic Neuritis

↓
form

Adv
- urgent referral to
SGPGI LKO

↓ Prof S. Pradhan Sr

Self Attested
NS
28/10/19

6393479796

We do not consider consultation on phone
✉ svasticlinic@gmail.com

8318327414

Clinic : Kanhaiya Enclave, Plot : 7, Bye-Pass Khandari Crossing, Kendriya Hindi Sansthan Marg, Agra
Next Appointment.....

Valid for 5 days

Not valid for medico-legal purpose

ARIHANT CLINIC & EYE HOSPITAL

SUPERSPECIALTY EYE CARE CENTRE
A-12, KAMLANAGAR, AGRA-5, PH: 0562-2580119, 7599163505

World's best to every eye

Dr. Manoj Gautam
Retina, LASIK & Phaco Surgeon
M.S., F.V.R.
Regn No.: UPMC51030
Up/AG/AL/2403

- Previous affiliations-
- ❖ Aravind Eye Hospital, Pondicherry.
 - ❖ Retina Institute of Karnataka, Bangalore.
 - ❖ Netramandir Eye Hospital, Mumbai.
 - ❖ M M Joshi Eye Institute, Hubli.
 - ❖ VEH & Research Centre, New Delhi.

Pt's Name :- *Stuti Desai*

Age:- 16 Sex:-(M)F Date:-01/10/2019

DOV 2 months
- Pain while moving
B.P. - eye
- P.O.V. 2 years

(B)E - *Disc lesion?*

02 OCT 2019
- DOV 2 months

(B)E - *Hyperopic disc*
- R.B.N.

NCT $\left\{ \begin{array}{l} 12 \\ 15 \end{array} \right.$

Advice - MRI - Brain

Vnc $\left\{ \begin{array}{l} 6/24 \\ \text{glass} \\ 6/24 \end{array} \right.$

- I.V. methyl
Prednisolone 1gm
OD 73 days

diabed AR-wall
(minimal myopic)

start physician guided

Self Attended
22/11/19

7/10/19

3 more 1yr. Prednisolone 1gm 1/10. med.

RETINA.UVEA.REFRACTIVE SURGERY.LASIK.ICL.CATARACT.GLAUCOMA.ORBIT

TIMINGS - 9A.M. TO 6 P.M., SUNDAY - CLOSED

NOT VALID FOR MEDICOLEGAL PURPOSE



सेवार्थ संस्थान सेठ विमलकुमार जैन ट्रॉमा एवं फिजियोथैरेपी धर्मार्थ समिति

| | | | |
|----------------|-------|---------|------------|
| PATIENT'S NAME | STUTI | AGE/SEX | 16Y/F |
| REFERRED BY | | DATE | 03/10/2019 |

MRI : BRAIN

IMAGING SEQUENCES (NCMR)
AXIAL : DIFF, T1, TIRM & TSE T2 Wis. ; SAGITTAL : TSE T2 Wis. ; CORONAL : TIRM Wis.

A small lesion displaying altered signal intensity appearing hyperintense on T2 W images and hypointense on T1 W / FLAIR Images is visualized in left thalamus – old lacunar infarct.

No fresh infarct is seen on DWI.

Rest of cerebral hemispheres show normal MR morphology, signal intensity and gray - white matter differentiation. The basal nuclei and corpus callosum are showing normal signal intensity pattern. Both lateral ventricles and third ventricle are normal in size shape and outline. Septum pellucidum and falx cerebri are in midline. No mass effect or midline shift is seen. Supratentorial sulcal and cisternal spaces are normally visualized.

Brain stem and cerebellar hemispheres are showing normal morphology, signal intensity and outline. Fourth ventricle is normal in size and midline in position.

Major intracranial dural venous sinuses are showing normal outline and flow void.

Sella, supra-sellar and para-sellar structures are normally visualized.

IMPRESSION

- Old lacunar infarct in left thalamus.

Please correlate clinically.


DR. ISHA GARG
MD (RADIOLOGIST)

परामर्श शुल्क केवल 7 दिन के लिए ही मान्य।

ट्रॉमा सेन्टर

एन.एच. - 2, आगरा रोड, फिरोजाबाद - 283 203 (उ.प्र.) फोन नं. : 05612 - 240022, 240033, मोबा. 9917772233
Website : www.sevarth-trauma.com || e-mail : sevarth.trauma@gmail.com

NOT VALID FOR MEDICO LEGAL PURPOSE

ब्लड बैंक सेवा 24 घण्टे उपलब्ध है।



सेवार्थ संस्थान सेठ विमलकुमार जैन ट्रॉमा एवं फिजियोथैरेपी धर्मार्थ समिति

PATIENT'S NAME: STUTI

AGE/SEX 16 Y/F

REFERRED BY :DR.SANJAY GADHI INSTITUTE

DATE 12/11/2019

MRI: BRAIN WITH ORBITS

IMAGING SEQUENCES (NCMR)

AXIAL: DIFF, T1, TIRM & TSE T2 Wis.; SAGITTAL T2: CORONAL: TIRM & T2 FAT SAT Wis.

Brain

A small area of altered signal intensity is seen involving the left thalamus displaying hyperintense signal on T2WI & hypointense on T1 WI & FLAIR images.

Rest of the cerebral hemispheres show normal MR morphology, signal intensity and gray - white matter differentiation. The basal nuclei, right thalamus and corpus callosum are showing normal signal intensity pattern. Both lateral ventricles and third ventricle are normal in size shape and outline. Septum pellucidum and falx cerebri are in midline. No mass effect or midline shift is seen. Supratentorial sulcal and cisternal spaces are normally visualized.

Brain stem and cerebellar hemispheres are showing normal morphology, signal intensity and outline. Fourth ventricle is normal in size and midline in position.

Major intracranial dural venous sinuses are showing normal outline and flow void.

Orbits

Both orbits with eyeballs and retrobulbar fat planes are normal in MR morphology and signal intensity. Bilateral extraocular muscles are normal in thickness and configuration. Both optic nerves are normal in course and thickness with normal optic canals. Optic chiasma is normal.

Sellar, parasellar and suprasellar structures are showing normal MR morphology and signal intensity.

IMPRESSION

- Small Area Of Altered Signal Intensity Involving The Left Thalamus - Old Lacunar Infarct.

Please correlate clinically

DR. ISHA GARG

DR. ISHA GARG
MD (RADIOLOGIST)

Self Attested
h
28/11/19

परामर्श शुल्क केवल 7 दिन के लिए ही मान्य।

ट्रॉमा सेन्टर

एन.एच. - 2, आगरा रोड, फिरोजाबाद - 283 203 (उ.प्र.) फोन नं. : 05612 - 240022, 240033, मोबा. 9917772233
Website : www.sevarth-trauma.com || e-mail : sevarth.trauma@gmail.com

NOT VALID FOR MEDICO LEGAL PURPOSE

ब्लड बैंक सेवा 24 घण्टे उपलब्ध है।

SANJAY GANDHI POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES, LUCKNOW

| Department | Unit/Consultant |
|------------|-----------------|
| | |
| | |
| | |
| | |
| | |

Referring Doctor/Hospital:
 Name:
 Address:

Date 18/10/19 History

SIBSR.

H/O gradual onset B/L visual blurring
 - 2 months

yo pain on eye movement (+)

yo Headache (+)

↓
 Pt gives 1gm MPS x 3 days of oral
 steroids

↓
 Significant improvement (+)

Treatment History

History

no yo N.V, Motor, weak, sensory

no yo vomiting, hiccup.

Personal/Social/Family History

Mixed diet

(-)

Self Attested
 28/11/19

Plan

MRI ~~Brain~~ Orbital for optic nerve cuts (plain + Contrast)

Follow up Notes

CNS:

Conscious
antim
HMF -
C.N] (w)

Ophthalmology

Motor
sensory | (w)

visual
Acuity

Cerebella ← (w)

Perimetry - (w)

Blind spot - (w)

funct

CIDIW Dr. S. Pradhan Sir

Adv

Rx

NMO/MOG

T. Mepesone as advised by tapering every 10gr x 5 days

CBC

KFT

TSH

vit B12

EST X

ANA, anti- dsDNA

ANCA, APLA

ENA

Review c report

Si. NMO/MOG Antibodies

Dr. R

Self attested
28/11/25

Kg
Cm
mmh
/min