







CPAP connect Patient Home 22/5/24 at 8:15 AM  
 CPAP cost rate of use - 27/05/24 - 3 AM

**SWASTIK**  
 MULTISPECIALITY HOSPITAL

Mohna Road, Opp. Dena Bank, Ballabgarh  
 0129-2303438  
 E-Mail : swastikhospitalfaridabad@gmail.com

**INDOOR FILE**

Bed No.	
Regd. No.	
OPD No.	
IPD No.	6237
D.O.A.	22/5/24 at 8:15 AM
D.O.D.	

Patient's Name B/2 Pagnl  
 S/W/D of Sumit Age NB Sex Male  
 Occupation \_\_\_\_\_ Marital Status \_\_\_\_\_  
 Address 22/1 Bhai Bahur B/B  
 Phone No. \_\_\_\_\_  
 Consultant Incharge Dr. Pawan Kumar Relation Grand Father

5000  
 3000  
 2000  
 1000  
 500  
 250  
 125  
 62.5



Patient Name	Baby of PAYAL	Age / Sex	2 days / M
Referred By	Dr. SWASTIK MULTISPECIALITY HOS.	Date	24/05/2024
Reg. no.	66523		
Collected on	24/05/2024	Reported on	24/05/2024 12:45 PM



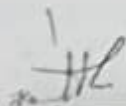
66523

## HAEMATOLOGY

### COMPLETE BLOOD COUNT (CBC)

TEST		VALUE	UNIT	REFERENCE
Hemoglobin	L	15.1	g/dl	17 - 23
Total Leukocyte Count	H	12,200	cumm	4,000 - 11,000
Differential Leucocyte Count				
Neutrophils		60	%	40 - 80
Lymphocyte		33	%	20 - 40
Eosinophils		04	%	1 - 5
Monocytes		03	%	2 - 10
Basophils			%	< 2
Platelet Count	L	1.38	lacks/cumm	1.5 - 4.5
Total RBC Count	L	4.2	million/cumm	4.5 - 5.5
Hematocrit Value, Hct		48.4	%	40 - 50
Mean Corpuscular Volume, MCV	H	115.2	fL	83 - 101
Mean Cell Haemoglobin, MCH	H	36.0	Pg	27 - 32
Mean Cell Haemoglobin CON, MGHC	L	31.2	%	31.5 - 34.5
Mean Platelet Volume, MPV		9.5	fL	8.5 - 12
R.D.W. - SO	H	69.1	fL	38 - 46
R.D.W. - CV	H	16.1	%	11.6 - 14

Anil Kumar  
M.Sc. Microbiology  
Lab Incharge

  
Dr. Kamal Sathiyarthi  
M.B.B.S., D.C.P. (Senior Pathologist)  
Reg. No. - MCI - 25147



Patient Name: Baby of PAYAL  
Referred By: Dr. SWASTIK MULTISPECIALITY HOS.  
Reg. no. 68578  
Collected on: 28/05/2024  
Age / Sex: 6 days / M  
Date: 28/05/2024  
Reported on: 28/05/2024 12:07 PM



## HAEMATOLOGY

### COMPLETE BLOOD COUNT (CBC)

TEST	VALUE	UNIT	REFERENCE
Hemoglobin	L 13.0	g/dl	17 - 23
Total Leukocyte Count	10,600	cumm	4,000 - 11,000
Differential Leucocyte Count			
Neutrophils	40	%	40 - 80
Lymphocyte	H 55	%	20 - 40
Eosinophils	03	%	1 - 6
Monocytes	02	%	2 - 10
Basophils		%	< 2
Platelet Count	L 1.07	lakhs/cumm	1.5 - 4.5
Total RBC Count	L 3.6	million/cumm	4.5 - 5.5
Hematocrit Value, Hct	L 39.8	%	40 - 50
Mean Corpuscular Volume, MCV	H 110.6	fL	83 - 101
Mean Cell Haemoglobin, MCH	H 36.1	Pg	27 - 32
Mean Cell Haemoglobin CON, MCHC	32.7	%	31.5 - 34.5
Mean Platelet Volume, MPV	9.4	fL	6.5 - 12
R.D.W. - SD	41.8	fL	39 - 46
R.D.W. - CV	H 19.0	%	11.6 - 14

--- End of report ---

Dr. Kamal Sathiyarathi  
M.B.B.S, D.C.P. (Senior Pathologist)  
Reg. No. - MCI - 25147

Anil Kumar  
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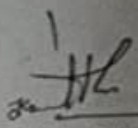


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Anil Kumar  
M.Sc. Microbiology  
Lab Incharge

  
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Reg. No. - MCI - 25147





Patient Name:	Baby of PAYAL	Age / Sex:	6 days / M
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Reg. no.	68578		
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--- End of report ---

Anil Kumar  
M.Sc. Microbiology  
Lab Incharge

  
Dr. Kamal Sathyarthi  
M.B.B.S, D.C.P. (Senior Pathologist)  
Reg. No. - MCI - 25147



ANAVTA  
H. PA  
**SWASTIK  
Lab**

Patient Name: Baby of PAYAL  
Referred By: Dr. SWASTIK MULTISPECIALITY HOS.  
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**BIOCHEMISTRY**  
**KIDNEY FUNCTION TEST (KFT)**

TEST	VALUE	UNIT	REFERENCE
BUN	18.77	mg/dl	7.9 - 20
Serum Urea	40.2	mg/dl	10-50
Serum Creatinine	0.9	mg/dl	0.6 - 1.4
Serum Uric Acid	4.5	mg/dl	3.5 - 7.2
Serum Sodium	156.7	mmol/L	130 - 160
Serum Potassium	4.2	mmol/L	3.2 - 5.7
Urea / Creatinine Ratio	44.67		
BUN / Creatinine Ratio	20.86		

--- End of report ---

Anil Kumar  
M.Sc. Microbiology  
Lab Incharge

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Reg. No. - MCI - 25147





## Hospital Recommendation letter

Date: 08-06-2024

Name of the child:- Baby Of Payal

Age:- 14 Days

Gender: Male

**Medical Diagnosis: Congenital Heart defect/Extremely Low Birth Weight /RDS /HMD/ sepsis/ ARDS /Shock/Neonatal sepsis/ Apnoea**

**Suggested treatment:Medical/surgical management with respiratory support**

**Proposed date of Surgery/Treatment: Upto 5 wks.**

**Estimated cost of treatment (with break ups): Rs 700000/-**

This is to certify that the above referred case is critically ill. The child requires support for medical treatment expense. We here by recommend you this case for financial assistance. The above mentioned estimate is approximation for surgery/treatment and in the event of any complications the expenses may exceed the estimated cost.

From;

Signature:

  
Dr. Pawan Kumar Sharma  
M.B.B.S., D.C.P. (L.M.)  
Reg. No. HN-7303

Name of Medical Practitioner: Dr. Pawan Kumar Sharma

Designation: Consultant Paediatrics

Department: Paediatrics

दिनांक - 8 May 2024

सेवा में,

संस्थापक महोदय,

स्माइल चाइल्ट केंचर ट्रस्ट

नई दिल्ली

सर,

मेरी बेटा बी तक बस 15 दिन की है वह स्वास्तिक अस्पताल में भरी है। उसका तबीयत बहुत खराब है। इसके इलाज में बहुत खर्चा आरणा। और इतना पैसा देने में मेरा पूरा परिवार असमर्थ है। कृपया कर्क आप मेरी मदद कर दे वरना मैं अपनी बेटी को नहीं बचा पाऊंगी।


कृपया मेरा बेटा को बचा लीजिए मैं और मेरा पूरा परिवार आपका सदैव आभारी रहेगा।

दान्यवादे

प्राची माँ

पायल

Ref to file case on the

  
Dr. PAWAN KUMAR SHARMA  
M.B.B.S., D.C.H. (I.M.J.J.)  
Reg. No. HN-7303