





Helping Hands Foundation

www.helpinghands.foundation

Ref. No. _____

Date: 08-Dec-18

श्रीमान्,

इस्ली गहोदय

हेल्पिंग हैंड्स फाउण्डेशन

(Helping hands foundation)

विषय,

मेरी माता रश्मिा खाकरन के इलाज हेतु महामयता प्राप्त

श्रीमान् मेरा शो धार्मिक हूँ और मेरी माता का नाम रश्मिा खाकरन है। जिनको बीमारी गुर्मी शरब है।

और हुन्का इलाज SGPGI में चल रहा है। जिसका मासिक खर्ची लगभग 20000/- लगभग है। और इलाज इत्यादि दिनों तक चलता है। जिसमें काफी पैसे का खर्ची है। और मेरी धार्मिक रिश्ते इतने नाबिक नहीं नि मैं अपनी माता जी का इलाज केन तरीके से कर सकूँ।

अतः श्रीमान् जी से निवेदन है कि धार्मिक सहायता प्रदान करी की कृपा करें, जिससे मैं अपनी माता जी का इलाज केन से कर सकूँ।

Helping Hands Foundation
Mansu Akmal
Authorised Signatory

प्राधी - श्री धार्मिक

शम्भुदेवर वगर (U.P.)

ई-डिस्ट्रिक्ट के अन्तर्गत जारी..



उत्तर प्रदेश शासन

कार्यालय तहसीलदार द्वारा प्रदत्त आय प्रमाण पत्र

जिला अम्बेडकर नगर
तहसील टान्डा
आवेदन क्र० 181780010069535
प्रमाणपत्र क्र० 483181014844

जारी दिनांक: 25/07/2018

यथा विभागीय (क्षेत्रीय भूलेख निरीक्षक तथा लेखपाल की) जांच/रिपोर्ट के आधार पर प्रमाणित किया जाता है कि:

पत्नी

माता का नाम

मकान नम्बर

मोहल्ला

ग्राम

तहसील

जनपद

श्रीमती रईसा खातून

श्री अबु सुफियान

श्रीमती खैरुन्निसा

189

सकरावल पश्चिम

टान्डा

अम्बेडकर नगर



उत्तर प्रदेश का/की निवासी है व उसका वर्तमान पता मकान नम्बर 189 ग्राम मोहल्ला सकरावल पश्चिम तहसील टान्डा, जनपद अम्बेडकर नगर उत्तर प्रदेश है। परिवार की समस्त स्रोतों से मासिक आय अंकों में रु 3000 व शब्दों में रु. Three Thousand है। जिसके अनुसार कुल वार्षिक आय रु. 36000 व शब्दों में रु. Thirty Six Thousand है। आय का स्रोत मजदूरी है। यह प्रमाण पत्र जारी होने की दिनांक से तीन वर्ष तक मान्य रहेगा।



जारी कर्ता केन्द्र: अयाज़ अहमद, वसुध जन सेवा केन्द्र

पद: अयाज़ अहमद, केन्द्र प्रभारी

स्थान: 8, वाई एम 08, टान्डा, अम्बेडकर नगर

दिनांक: 25/07/2018



MEWA Digitally Signed by MEWA
LAL O=REVENUE,
OU=REVENUE,S=Uttar
LAL pradesh

सक्षम अधिकारी/तहसीलदार

डिजिटल हस्ताक्षरित

टान्डा, अम्बेडकर नगर

दिनांक: 25/07/2018

यह प्रमाण पत्र ऑनलाइन डिजिटल सिस्टम द्वारा तैयार किया गया है तथा डिजिटल सिग्नेचर से सुरक्षित है। सम्बन्धित केन्द्र के अधिकृत कर्मी द्वारा प्रमाणित किया गया है। यह प्रमाण पत्र वेबसाइट <http://edistrict.up.nic.in> पर इसका पहले आवेदन क्र० फिर प्रमाणपत्र क्र० अंकित कर, सत्यापित किया जा सकता है।

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NATIONAL MEDICAL STORE

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D.L.No.:R-1210/98, D.L.No.:W-1489/98, D.L.No.:W-1490/98/SC
 D.L.No.:R-1209/98/SCPhone9415513371,8562960786 GST NO.09AAZPH1770R12N

Pt.Name **RAEESA KHATTON** | Bill No.: **NM043488**
HELPING HANDS FOUNDATION
 Dr.Name **SANT FANDEY** | Bill Dt.: **27/Nov/2018**

QTY	Description	Unit	Rate	SGST+CGST	Amount	Batch	Expiry
2	WEFOX 4000 INJ	IML	1576.	12 +	1000.00	DS1059	Aug/19
Taxable Amt		892.86	S/I-GS	53.57	CGST	53.57	

No Of Product1 | TOTAL AMT 1000.00
 80- | NET AMOUNT **1000.00**

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For NATIONAL MEDICAL STORE



CGL PATH LAB

Authorised Collection Centre for:

DNA EXPERT

Shop No. 5, NDMC Kashmiri Market
Yusuf Sarai, New Delhi-110029
Mob.: 9654260190, 8586095916, 8376946928
Ph. No. 9111-26589105
Email : nasimpath@gmail.com



NABH CERTIFIED MEDICAL LABORATORY
CERTIFICATE NO.-MLP-2016-0005

ITDOOSE INFOSYSTEMS PVT. LTD.

Lab Id.	011808030138	Reg No	589241
Patient Name	Mrs.RAHISA	Reg Date	03/Aug/2018 03:50AM
Age/Sex	. YRS/Female	Sample Coll. Date	03/Aug/2018
Referred By	Dr. HUMAN AID	Sample Rec.Date	03/Aug/2018 08:19 AM
Client Code/Name	AP090631 HUMAN AID DIAGNOSTICS SERVICES		
Ref. Source		Report Date	03/Aug/2018 09:41AM
Barcode No	10575664		

Test Name With Methodology	Result	Unit	Biological Ref.Interval
BIOCHEMISTRY-1			
PTH-Intact (Parathormone Intact)			
PARATHYROID HORMONE (PTH)	2.75	pg/ml	12-72

Serum, Electro Chemiluminescent Immuno Assay

Comment:

Parathyroid hormone (PTH) produced by the parathyroid gland is the major circulating factor regulating extra cellular calcium concentration. Quantification of circulating intact PTH assists in the difference diagnosis of hypercalcemia in conjunction with the measurement of Ionised calcium, intact PTH valuations can be used to distinguish between patients with hypoparathyroidism, hypoparathyroidism or hypercalcemia of malignancy. The diagnosis of primary hyperparathyroidism, a common cause of hypercalcemias confirmed by elevated ionized calcium concentrations and elevated parathyroid hormone concentrations. Intact PTH levels are also used to assess and manage other metabolic bone disorders including osteoporosis and renal osteodystrophy. Interpretation of intact PTH values should always take into account serum Calcium results and inter-relationship between these two elements in various disorders involving PTH & Calcium. It is recommended that the intact PTH results should always be interpreted with caution & with consideration of the overall manifestations even when used in conjunction with calcium values. Measurement of intact PTH is useful in differentiation between hypercalcemia due to hyperparathyroidism and hypercalcemia of malignancy. However the assay is not intended as and should not be relied upon as a diagnostic indicator of malignancy.

The tests marked with an * are not accredited by NABL.

*** End Of Report ***


Dr Mukta, MD
(Consultant Microbiologist)


Dr Anupama Jha
(Consultant Pathologist)


Dr Prashant Goyal
(Chief Pathologist)

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DNA EXPERT

Shop No. 5, NDMC Kashmiri Market
Yusuf Sarai, New Delhi-110029
Mob.: 9654260190, 8586095916, 8376946928
Ph. No. 9111-26589105
Email : nasimpath@gmail.com



NABH CERTIFIED MEDICAL LABORATORY
CERTIFICATE NO.-MLP-2016-0065

DNA EXPERTS PRIVATE LIMITED

REPORT



PATIENT NAME	:Mrs. RAHISA	COLLECTION DATE	:02/AUG/2018
AGE/GENDER	: Y/Female	SPECIMEN RECEIVED	:02/AUG/2018
TEST REQUEST ID	:011708260008	REPORT DATE	:02/AUG/2018
SAMPLE TYPE	:Blood		
REFERRED BY	:CGL		
CENTER NAME	:SELF		
COLLECTED BY	: Mr.		

IMMUNOLOGY

Test Name	Results	Normal Range
Vitamin D, 25 Hydroxy Chemiluminescence Immunoassay (CLIA)	20.42	30.0-100.0 ng/mL
Reference Range		
Deficiency	< 10 ng/mL	
Insufficiency	10-30 ng/mL	
Sufficiency	30-100 ng/mL	
Toxicity	> 100 ng/mL	

Comments

Cholecalciferol (Vitamin D3) is synthesized in the skin from 7 dehydrocholesterol in response to sunlight; some part also comes from diet and supplements. Ergocalciferol (vitamin D2) comes essentially from diet and supplements. Both cholecalciferol and ergocalciferol are converted in liver to 25 OH Vitamin D which is considered the best indicator of Vitamin D nutritional status. Vitamin D toxicity is recognized, but is a rare occurrence.

Kindly correlate all result clinically.

*****End OF Report*****

Dr. M.SHARMA
MBBS,MD(PATH.)



Capital Health & Diagnostic Clinic

Inspiring Good Health

NAME OF PATIENT	MRS RAISA KHATOON	AGE / SEX :	46 Y / f
REFERRED BY :		DATE :	03-aug-18
INVESTIGATION :	ULTRASOUND WHOLE ABDOMEN		

Liver is normal in size (measures 13.9 cms cranio-caudally), shape, outline and shows grade I fatty changes. No focal parenchymal lesion seen in the liver. Intrahepatic bile ducts and portal radicals are normal in calibre.

Gall bladder is distended and shows intraluminal calculi, largest measuring 3.8 mm - cholelithiasis. The GB wall thickness appears normal. The **CBD** is normal in calibre and not obstructed. **Portal vein** is normal in calibre.

Both kidneys are normal in position, outline. However, it appears small in size and show increased cortical echogenicity with loss of CM differentiation. There is an exophytic cortical cyst of size 16.4 mm across noted in mid pole of right kidney and 54 mm in lower pole of left kidney. There is a concretion of size 3.2 mm noted in mid pole of right kidney. The right kidney is 83x29 mm and the left kidney is 79x24 mms. There is no evidence of any mass lesion in either kidney.

Spleen is normal in size, contour and echotexture. **Pancreas** is normal in size, contour and echogenicity. The pancreatic duct is normal in calibre.

Retroperitoneum is normal. The great vessels appear unremarkable. No evidence of celiac, mesenteric or para-aortic lymphadenopathy is present. No evidence of ascites is seen.

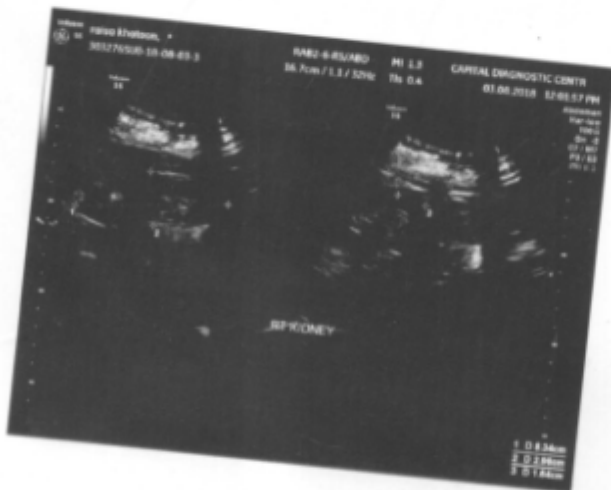
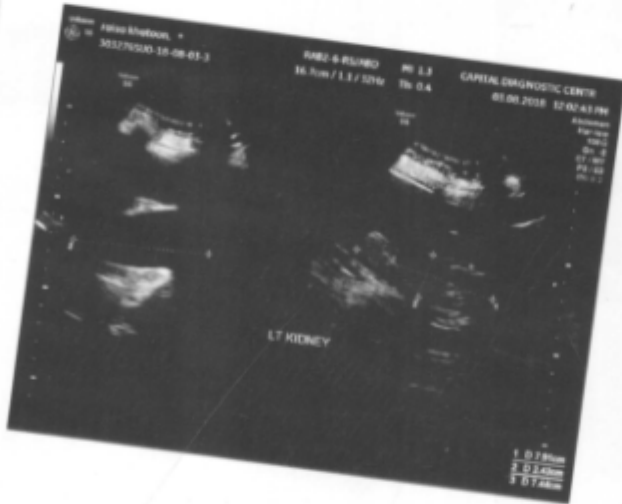
Urinary bladder is adequately distended and shows normal wall thickness with clear lumen. No evidence of any mass or calculus.

The uterus & Both ovaries are not seen (h/o operative removal)
Bilateral adnexae are clear.
No free fluid is seen in Cul-de-sac & pelvis

**OPINION – CHOLELITHIASIS
CHRONIC KIDNEY DISEASE WITH SIMPLE RENA CYST AS DESCRIBED ABOVE**
Please correlate clinically.


DR. BIMALPREET MOHAN, M.D
CONSULTANT RADIOLOGIST

This report is only a professional opinion and it is not valid for medico-legal purposes.



AN ISO CERTIFIED LAB



Suvridha Diagnostics
& Pathology Pvt. Ltd.

ISO 9001 : 2015

सुविधा डायग्नोस्टिक्स
एण्ड पैथोलॉजी प्रा० लि०

Cross Gate, Money Mounta adjacent to PGI Petrol Pump, Raibareilly Road, Lucknow

Ph. : 8960061008, 9936985622 • Registration No. PNDT/APP-AUTH/564/2017

Name: RAISA KHATOON

Lab.No. : 36

Age : 47 Years Sex: F

Ref By: Dr. SGPGI

Date : 2 May 2018

Collection Time : 11:49:04 am

TEST	RESULT	NORMAL RANGE
* HEMOGLOBIN :	10.3	12-16 gm/dl (F) 13-18 gm/dl (M) [Reference Range]
* Total Leucocytes Count :	6,980 /cumm	[4000 - 11000/cumm
Serum Creatinine :	3.53 mg /dl	0.66-1.25 mg/dl (M) 0.52-1.04 mg/dl (F)

CHECKED BY

Reporting Time: A5 : 1:36:37 pm

[DR. SHATU SINHA
MD. (PATH. BHU)]

BE
HEALTHY

ISO 9001 : 2015

Suvidha Diagnostics
& Pathology Pvt. Ltd.

सुविधा डायग्नोस्टिक्स
एण्ड पैथोलॉजी प्रा० लि०

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Name: RAISA KHATOON

Lab.No. :36

Age :47 Years Sex: F

Ref By: Dr. SGPGI

Date :2 May 2018

Collection Time :11:49:04 am

PATHOLOGICAL EXAMINATION REPORT

TEST	RESULT	NORMAL RANGE
* SERUM BUN	: 27.03	5-21mg/dl
<u>REFERENCE RANGE</u>		
* Serum Sodium	: 133.7 mmol/L	135-145mmol/L
* Serum Potassium	: 4.04 mmol/L	3.5 - 5.5 mmol/L
* Serum Calcium	: 6.23 mg/dl	8.5 - 10.5 mg/dl

CHECKED BY

Reporting Time: A5 : 1:36:37 pm

[DR. SHALU SINHA
MD. (PATH. BHU)]

BE
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Suvídhā Diagnostics
& Pathology Pvt. Ltd.

सुविधा डायग्नोस्टिक्स
एण्ड पैथोलॉजी प्रा० लि०

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Name: RAISA KHATOON

Lab.No. : 36

Age : 47 Years Sex: F

Ref By: Dr. SGPGI

Date : 2 May 2018

Collection Time : 11:49:04 am

PATHOLOGICAL EXAMINATION REPORT

* Serum Uric Acid : 5.18 mg/dl

REFERENCE RANGE

3.5-7.2mg/dl (M)
2.6-6.0mg/dl (F)

TEST RESULT
S. Phosphorus: 4.05

NORMAL RANGE
2.5-4.5 mg/dl

* Alkaline Phosphate: 123.0

50-120 U/L

CHECKED BY

Reporting Time: A5 : 1:36:37 pm

[DR. SHALU SINHA
MD. (PATH. BHU)]

BE
HEALTHY
FEEL
GOOD



601-RN109

53

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
Dr. Rajendra Prasad Centre for Ophthalmic Sciences
अ. भा. आ. सं./A.I.I.M.S.

X-RAY REQUISITION FORM

Clinical Dept./Unit Date of Requisition 31/5/18

OPD No. 10373706 CR No. Ward & Bed No.

(रोगी का नाम/Patient's Name) रासा खतून आयु/Age 46 लिंग/Sex F
(साफ अक्षरों में/In Block letters)

जन्म तिथि/Date of Birth : दिन/Day माह/Month वर्ष/Year वजन/Weight कि.ग्रा./Kg.

Examination Required X-ray lumbo sacral spine
lat AP

चिकित्सक की जांच रिपोर्ट/Clinical Information :

After bowel preparation ? TB spine

Your appointment is on

Time Slot :

X-Ray No. Date

REPORT/रिपोर्ट

3515
2/6/18

Video No.	601
Date	22/5/18
Cashier	A.I.I.M.S., New Delhi

चिकित्सक के हस्ताक्षर

SIGNATURE OF MEDICAL OFFICER
Size & No. of Films Radiographer's Signature

Degenerative changes in L5 vertebra
mild disc space reduction at D12-L1.
NO soft tissue swelling
Radiopaque round shadow seen on R1 side
A total of 52 ? Calcified fibrotic

एक्स-रे चिकित्सक

109-132/2
300
1638/18
53

डा. राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
Dr. Rajendra Prasad Centre for Ophthalmic Sciences

अ. भा. आ. सं., अंसारी नगर, नई दिल्ली-110029
A.I.I.M.S., Ansari Nagar, New Delhi-110029
X-RAY REQUISITION FORM

Clinical Dept./Unit I Date of Requisition 11/5/18
UHID No. 103237060 Ward & Bed No.
(रोगी का नाम/Patient's Name) RAISA KHATOON आयु/Age लिंग/Sex
(साफ अक्षरों में/In Block Letters)
जन्म तिथि/Date of Birth : वजन/Weight कि.ग्रा/Kg. 46.5

Examination Required CXR-PA

चिकित्सक की जांच रिपोर्ट / Clinical Information :
TO R/O metastasis of melanoma
k

चिकित्सक के हस्ताक्षर
SIGNATURE OF MEDICAL OFFICER

Your appointment is on

Time Slot :

9:00	9:30	10:00	10:30	11:15	11:45	12:15
------	------	-------	-------	-------	-------	-------

X-Ray No. 3034 Date 10/5/18 Size & No. of Films Radiographer's Signature

REPORT/ रिपोर्ट

CXR
Blunting of (R) C angle ? obscured by breast shadow
due to Rotation
All lungs are (N)
No obvious focal lesion is seen
Suggested uscr correlation to R/O any pleural
effusion/
Rt. x ray
L
एक्स-रे चिकित्सक
RADIOLOGIST

Chest PA
103737060

RAISA KHATOON 46Y/F

12 May 2018, 11:50:47 AM

3034
KV 115 mas 1.2 ms 1.5



3515

kv 77 mAs 25.4 ms 23 1 3515

kv 90 mAs 20.6 ms 20 3



Lumbar Spine AP

2 Jun 2018 10:15:32 AM

Lumbar Spine Lateral

2 Jun 2018 10:15:37 AM

raisa khatoon 46y/f



प्रयोगशाला कायचिकित्सा विभाग
DEPARTMENT OF LABORATORY MEDICINE

वैदिक रसायनिक
CLINICAL CHEMISTRY

अखिल भारतीय आयुर्विज्ञान संस्थान, अंसारी नगर, नई दिल्ली-110029
All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029
रक्त रसायन / BLOOD CHEMISTRY

UHID: 103737060
Name: Mrs RAISA KHATOON, Female
Ward Name:

Sample No: CH-1308180381
Lab Ref No: 1262
Verification Time: 13/08/2018 08:47 pm

Report

Test Name	Result	Comment	Normal Range
UREA	13.1 mg/dL		10.00-40.00
CREATININE	3.6 mg/dL		0.50-1.00
CALCIUM	8.5 mg/dL		8.50-10.50
PHOSPHATE	5.6 mg/dL		2.50-4.50
URIC ACID	6.3 mg%		• 2.5 - 6 mg/dL
BILIRUBIN TOTAL	0.5 mg/dL		0.20-1.20
BILIRUBIN (CONJUGATED)	0.3 mg/dL		0.10-0.30
BILIRUBIN (UNCONJUGATED)	0.2 mg/dL		0.20-0.90
TOTAL PROTEIN	7.7 g/dL		6.00-8.00
ALBUMIN	4.3 g/dL		3.50-5.00
GLOBULIN	3.4 g/dL		2.00-3.50
SGOT (AST)	18 U/L		5.00-40.00
SGPT (ALT)	6 U/L		5.00-45.00
ALK PHOS (ALP)	227 IU/L		• 80 - 240 IU/L

Over All Comment :

Authorised Signatory
Dr. Sudip Kumar Datta

Verified By
sudhanshu



प्रयोगशाला कायचिकित्सा विभाग
DEPARTMENT OF LABORATORY MEDICINE
नैदानिक सूक्ष्म जीव विज्ञान
Clinical microbiology
A.I.I.M.S., New Delhi-110029
अ. भा. आ. सं., नई दिल्ली-1

UHID: 103737060 Reg Date : 11/05/2018 08:53 AM
Patient Name : Mrs RAISA KHATOON
Sex : Female Age : 46 years 3 months
Department : Nephrology Unit Name : Nephrology Unit
Unit Incharge : Dr. S K Aggarwal Sample Collection Date : 11/08/2018 08:54 AM
Lab Name : Microbiology Lab Sub Centre : Clinical Microbiology (Urine Routine OPD)
Sample Received Time: Report Generated Date: 13/08/2018 01:38 PM
Dept / IRCH No: 20180120005996 Recommended By: Dr. SR Nephrology
Lab Reference No:

Sample Details : URM-110818019 (Urine)

Urine Routine

Result of Investigation:

Colour: STRAW
Reaction: 6.0
Sp.Gravity: 1.005
Protein: NIL
Sugar: NIL

MICROSCOPIC:

RBC: NIL /HPF
WBC: NIL /HPF
Epithelial Cells: NIL /HPF
Bacteria: NIL
Granular:Fine: NIL
Granular:Coarse: NIL
Ca.Oxalate: NIL
Tripple Phosphate: NIL
Phosphate: NIL
Amorphous: NIL
Urate: NIL
Uric Acid: NIL
Yeast: NIL
Mucus: NIL

SPECIAL:

Ketones:
Bile Salts:
Bile Pigments:



Central R.I.A Facility (C.R.I.A), Room No-5010
DEPARTMENT OF REPRODUCTIVE BIOLOGY
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (NEW DELHI)

UHID: 103737060
Name: Mrs RAISA KHATOON, Female
Ward Name:

Sample No: RPB-210718157
Lab Ref No : 56
Verification Time: 23/07/2018 03:52 pm

Report

Test Name	Result	Comment	Normal Range
25 oh Vitamin D	58.7 ng/mL		<ul style="list-style-type: none">< 10 ng/ml (Severe deficiency)10 - 25 ng/ml (Mild to moderate Deficiency)25 - 80 ng/ml (Normal)
Folate	> 20.0 ng/mL		<ul style="list-style-type: none">3.5 - 20.5 ng/mL< 3.5 ng/ml (Deficient)
Active B 12	> 128.0 pmol/L		<ul style="list-style-type: none">25.1 - 165 pmol/L
Intact PTH	14.6 pg/mL		15.00-68.30

Over All Comment :

Authorised Signatory
Dr.Surabhi Gupta

Verified By
savitalab

UHID: 105737060
Name: Mrs RAISA KHATOON, Female
Ward Name:

Sample No: PT-060718009
Lab Ref No : 0009
Verification Time: 06/07/2018 03:18 pm

Report

Test Name	Result	Comment	Normal Range
PROTHROMBIN TIME(PT)	12.800 sec		11.00-14.00
INR	1.149		

Over All Comment :

Authorised Signatory

Verified By
srlm

ly
ib



Central R.I.A Facility (C.R.I.A), Room No-5010
DEPARTMENT OF REPRODUCTIVE BIOLOGY
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (NEW DELHI)

UHID: 103737060
Name: Mrs RAISA KHATOON, Female
Ward Name:

Sample No: RPB-210718157
Lab Ref No: 56
Verification Time: 23/07/2018 03:52 pm

Report

Test Name	Result	Comment	Normal Range
25 oh Vitamin D	58.7 ng/mL		<ul style="list-style-type: none">< 10 ng/ml (Severe deficiency)10 - 25 ng/ml (Mild to moderate Deficiency)25 - 80 ng/ml (Normal)
Folate	> 20.0 ng/mL		<ul style="list-style-type: none">3.5 - 20.5 ng/mL< 3.5 ng/ml (Deficient)
Active B 12	> 128.0 pmol/L		<ul style="list-style-type: none">25.1 - 165 pmol/L
Intact PTH	14.6 pg/mL		15.00-68.30

Over All Comment :

Authorised Signatory
Dr.Surabhi Gupta

Verified By
savitalab



भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
 हिरंग रोगी विभाग / Out Patient Department
 अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

New Patient
 Dept Reg. 2018/015/0152002
 General/W O
 Nephrology/Nephrology Unit
 NAME: RAISA KHATOON
 W/O ABU SUFYAN
 UHID : 103737060
 Date: 20/07/2018

OPR-6
 No. _____
 पता/Address
 रीनल क्लिनिक / RENAL CLINIC
 पंचसवार व सुकवार
 Tue, Fri. 2nd Floor OPD
 8.30 to 10.30 सुबह
 8.30 to 10.20 Morning

निदान/Diagnosis

EPTB (EBUSive)
 July 2018

दिनांक/Date

उपचार/Treatment

~~20/7/18~~

Cr: 3.5
 March 2018
 No recent reports available

1129666
 14/8

Renal modified diet
 (NFW GF)

Abu
 Continue ATT

1) T. Pyrazinamide 1250mg
 A/D

2) T. Nodosis 500mg BD

3) T. Eido fe forte OD

4) Inj. Anfas 4000 IU sc
 2/week

~~5) T. Pan DSR~~

R/A x 1 week with reports

- > USG KUB + Films
- > RFT/LET
- > Vit D/PTH
- > Hmg
- > Urine R/M.

14/8/18

ai
 or

R. C. ISSUED
 MSW UNIT AIIMS
 DATE 21/8/18



Ed Ormolise TOS R4E
000

SCIENCE (AIIMS)
New Delhi,
APPOINTMENT SLIP

Done By-10462 Queue No-46 (Follow-up) General 7 0.0

Department Name: R. P. Centre (Eye Centre) Retina Clinic
Reporting Time: 12.30 PM Appointment Date: 09-08-2018

Doctor Name: Dr. SR-JR RETINA TRAUM
UNDER UNIT I R.32 Appointment Request date: 19-07-2018

Name of Patient: MRS RAISA KHATOON Appointment No: 20180-1912584

Sex: Female Age: 46 years 2 months 8 days

Dr. S. K. Khokhar's Unit

डा० राजेन्द्र
अ०भा०आर
Dr. Rajendra
A.I.I.M.S., N
यु एच आई
UHID No.

व दिन
and Day I
बुहस्पतिवार
Thursday

कमरा नंबर
Cabin No.

रोगी का नाम Name of the Patient	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex	आयु Age	पता Address
------------------------------------	-----------------------------	-------------	------------	----------------

दिनांक DATE	निदान DIAGNOSIS
----------------	--------------------

9/8/18

उपचार Treatment

Granuloma of iris and RE by SR-JR

Pulmonary Kochis on ATT x 1 week

Choroidal granuloma ex-RO

solitary vitreous snowball

Adx:

- Red Product ex (C)
- ex HA 24 BO (C) / ye

→ (151) - opt of CP 4E : to ROK regression

→ (152) - RAN 2w/5w

Retrony snowball

Kor
Dr. Karthikeyan

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।
Kindly keep this Card safely and bring it on your follow-up visits.

१. धूम्रपान निषेध २. कूड़ा कर्कट केवल कूड़ेदान में ही डालें ३. धूकिये नहीं

ब. रो. वि. कार्ड
O.P.D. Card



येत्र अनुभव उपचार हे
जो अर्थ ही दे पावते हे

RC-1520/18
अनुभाग व दिन
Section and Day III
मंगलवार व शुक्रवार
Tuesday & Friday
कमरा नंबर
Cabin No.

डा० राजेन्द्र
ओ भा० आः
Dr. Rajendr
A.I.I.M.S., N
यु एच आई
UHID No
रो
Name

DR. RAJENDRA PEASAD CENTRE FOR OPHTHALMIC SCIENCES
UHID: 18317060
Dept No: 20180050057200
RAISA KHATOON
W/O: ABU SUFIYAN
Date: 11.05.2018
RPC OPD-D: SR/JK
UNDER UNITH R.16A
Unit ID: TUE, FRI
Room No.: 16A
Address: SAKRAVAL WEST TANDA AMBEDKAR NAGAR, UTTAR PRADESH, INDIA
Mobile: 8874069829

याल का एकक
iyal's Unit
पता
Address

दिनांक DATE	निदान DIAGNOSIS
	(L) Retinal detachment

KICLO HTN
on medication
KICLO UKD
for 3 yrs
RBS - 145 mg/dl
Diabetic B/E
116
35/15
2/6

उपचार Treatment
C/O sudden dev in (L) for 1 month
Vn 6/19
eglasne HM CF
+ X
pupils () umms
NR
not on any
topical medication
R (R) (L)
WNL WNL
Fm (R) (L)
rodisc rodisc
CDR 0.4:1 CDR 0.4:1
NRR healthy Impaired temporal RD
FR sharp

~~8034~~
~~12/5/18~~
~~RC 8620~~
~~21/6/18~~

APH-140518062 103737060
RB-140518097 103737060
RAISAKHATOON

रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।
rd safely and bring it on your follow-up visits.
झा कर्कट केवल कूड़ेदान में ही डालें 3. थूकिये नहीं

दिनांक - Date

उपचार - Treatment

#7 Retina clinic opinion
(Early date please)

11/5/19
c/s/B Dr Vinod in New R.C. ^{Darshone}

Ⓡ WNL

Ⓛ large choroidal granuloma / melanoma

~~AC~~ D/E - AC & RL cells ⊕.

Adv - USG Ⓛ eye for PSE -

Ⓛ mass ⊕ in inferotemp. quadrant arising from choroid - RD ⊕ s/o ? Melanoma.

Ⓛ [E/d Medforti 6hd 000000
E/d HA 2% & ID 0000

~~Ⓛ CP + AF (opto)~~

Get done - Hmg, ESR
CT chest
Mantoux

Ⓛ CP + AF (opto) ⁽¹⁵⁾
done

~~#7~~ f/u reports after 1 week in ^(New R.C.)
नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में काल करना परमश्रेष्ठ है।
इनकी पूर्ण रक्षा कीजिए ताकि ये आपकी रक्षा कर सकें।
Eyes are God's most precious gift to man kind. Take full care of them
So that they can take care of you

ब० रो० वि० कार्ड
O.P.D. Card



ये अणुय उपकरण है
जो आप ही दे सकते हैं

अनुभाग व दिन
Section and Day **I**
सोमवार व बुहस्पतिवार
Monday & Thursday

कमरा नंबर
Cabin No.

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
ALL INDIA INSTITUTE OF
MEDICAL SCIENCES (AIIMS)
New Delhi.

APPOINTMENT SLIP



Date By-30 Queue No-33 (Follow up) General 7 8.9

Department Name: N. P. Centre (Eye Care) / Retina Clinic
Reporting Time: 12.30 PM A. Appointment Date: 31/05/2018

Doctor Name: Dr. SURJIT K. TRIVEDI
UNDER UNIT 1 R.32 B. post date: 11/05/2018

Name of Patient: SRS RAISA KHATKON A. postment No: 1018051113917

Sex: Female A. e: 46 years

Contact Details: Mobile: XXXXXXXX25 B. post Mode: counter

एस. के. खोखर का एकक
K. Khokhar's Unit

लिंग Sex	आयु Age	पता Address
-------------	------------	----------------

दिनांक DATE	निदान DIAGNOSIS
31/05/2018	उपचार Treatment q/s I OLN RC UNIT I
VA 6/18 REF	(C) choroidal mass
NSP 12 15	(De Vrioid tri pleas)
	Adv Kray lumbosacral spine NECT chest PFA optrs Pl adjust in Dhelen khela Vinay

Dr. Vinod Kumar / Dr. VINOD KUMAR
Assistant Professor of Ophthalmology
All India Institute of Medical Sciences
New Delhi-28

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय इस वक्त साथ लायें।
Kindly keep this Card safely and bring it on your follow-up visits.
१. धूम्रपान निषेध २. कूड़ा कर्कट केवल कूड़ेदान में ही डालें ३. धूकिये नहीं

दिनांक - Date

उपचार- Treatment

Date: 01/06/18
 Fluorescein Angiography / ICG No.
 UNPA - 2326
 Signature

UWF PFA

Please give report of CT scan early if possible

(L) likely choroidal granuloma (tubercular)

Also

T. Ciprofloxacin 500mg AD OD

See Monday

Vinod

CT - s/o Medial nasal lymph node

(R) pleural effusion +

(R) UC lobe small nodule

likely mycetoma

Also

Pulmonary medicine for strachy AT7

Vinod

Dr Karan Madan pl (urgent pl)

Vinod

Dr. Vinod Kumar
 Professor of Ophthalmology
 P. Chaudhary Institute of Postgraduate Medical Sciences
 M.S., 1988

नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में खोना परमश्रेष्ठ है।
 इनकी पूर्ण रक्षा कीजिए ताकि ये आपकी प्रशंसा कर सकें।
 Eyes are God's most precious gift to man kind. Take full care of them
 So that they can take care of you

Life Care

Do it right first time, every time



Life Care Blood Collection Centre

(A Unit of Life Care Diagnostic Centre)

Near Taj Talkies Qasba, Tanda, Distt. Ambedkar Nagar

Mobile : 8924965751

e-mail: lifecaretanda@gmail.com

Patient Name Mrs. RAEISA KHATOON

Sex/Age : F / 47 Years

Ref. By : Dr. NARAYAN PRASAD

Lab Location LIFE CARE BCC TANDA

Lab No LPN0918

Reg Date : 29-Sep-2018

Print Date : 29-Sep-2018



BIOCHEMISTRY

Test Report Status	Final	Results	Biological Reference Range	Units
SERUM CREATININE		3.49	0.6 - 1.2	
BLOOD SUGAR RANDOM		105.0	60 - 140	mg/dl
ASPARTATE AMINOTRANSFERASE (AST/SGOT)		42.43	15 - 37	U/L
ALANINE AMINOTRANSFERASE (ALT/SGPT)		23.34	5 - 35	U/L
BLOOD UREA		101.3	15 - 45	mg/dl
SERUM SODIUM		142.35	135 - 155	mEq/L
SERUM POTASSIUM		3.94	3.5 - 5.5	mEq/L
SERUM CALCIUM		7.95	8.4 - 10.8	mg/dl

HAEMATOLOGY

Test Report Status	Final	Results	Biological Reference Range	Units
HEMOGLOBIN		10.0	12 - 16	g/dL
TOTAL LEUCOCYTE COUNT		8,900	4,000 - 11,000	/cumm
WBC DIFFERENTIAL COUNT				
NEUTROPHILS		74	40 - 80	%
LYMPHOCYTES		21	20 - 40	%
EOSINOPHILS		03	1 - 6	%
MONOCYTES		02	2 - 10	%
BASOPHILS		0	0 - 2	%
DIFFERENTIAL COUNT PERFORMED ON:		EDTA SMEAR	-	
ESR(Western green Method)		65	0 - 20	mm at 1 hr.

Life Care

Do it right first time, every time



Life Care Blood Collection Centre

(A Unit of Life Care Diagnostic Centre)

Near Taj Talkies Qasba, Tanda, Distt. Ambedkar Nagar

Mobile : 8924965751

e-mail: lifecaretanda@gmail.com

Patient Name Mrs. RAEISA KHATOON
Sex/Age : F / 47 Years
Ref. By : Dr. NARAYAN PRASAD
Lab Location LIFE CARE BCC TANDA

Lab No LPN0918
Reg Date : 29-Sep-2018
Print Date : 29-Sep-2018



URINE EXAMINATION

Test Report Status	Final	Results	Biological Reference Range	Units
PHYSICAL EXAMINATION				
QUANTITY/VOLUME		25 ML	-	
COLOUR		P.YELLOW	-	
APPEARANCE		CLEAR	-	
SEDIMENTS		NIL	-	
SPEC. GRAVITY		1.030	-	
REACTION		7.4	-	
CHEMICAL EXAMINATION				
ALBUMIN		NIL	-	
SUGAR		NIL	-	
PHOSPHATE		NIL	-	
MICROSCOPIC EXAM.				
PUS Cells		2-3	H.P.F -	
RBC Cells :		NIL	H.P.F -	
EP CELLS :		1-2	H.P.F -	
CASTS :		NIL	-	
CRYSTALS :		NIL	-	
BACTERIA :		NIL	-	

-----End of Report-----

Checked By

Technologist

DR.S.CHAUDHARY
LAB HEAD



अ० 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

सहीरपासं खनु धर्मतामनम्

Pulmonary Medicine
 OPR-6
 Chest Disorders, O.P.D.
 Monday / Thursday

एकक / Unit _____
 विभाग / Dept. _____

संजीकृत सं० / O.P.D. Regn. No. _____

नाम / Name _____

पता / Address _____

UHID: 103/37060
 RAISAKHATOON
 F-146 Y. 20/08/2018
 Pulmonary Medicine
 Room-3A



निदान / Diagnosis

CKD, Mediastinal LN TB

दिनांक / Date

20/8/18

उपचार / Treatment

q. a l off isonicaps

Adv.

LFT - (N)

Contic ART
 as advised

Nephrology evaluation

20

54

Dr. Shweta 7



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

अस्पताल के अन्दर प्रवेश करना प्रोhibited / PROHIBITED IN HOSPITAL PREMISES

एक/Unit
विभाग/Dept

एक/Unit
विभाग/Dept

New Patient
Dept Reg. 2018/012/0005996

General/रोगी
कमरा/Room: 4A

Pulmonary Medicine
Sleep Disorders, O.P.D. OPR-6
Monday / Thursday

Pulmonary Medicine and
Sleep Disorder/Pulmonary
Medicine/Unit-I

Days :
Mon, Thurs
46Y 1M 22D
पल्लव/F
Ph. 8874869829

वॉशिंग्टन पंजीकृत सं/O.P.D. Regn. No.

Name: RAISA KHATOON



आयु
Age

पता/Address

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
46/F	
Mo UP.	
housewife	
Bmf lap @ x 10 years	
Kfyo PKD, no DM/H4N/AT	
Aju opes AIIMS (L Retinal detachment)	
Kfyo CKD - Creatinine 3.55 Urea = 82	
(R) lower chest pain x 3 yrs ↑ in severity	→ dull aching, intermittent
no SOB/fatigue/cough/loss of wt.	40 Back pain
↓ delay @ CPC study	
C1 chest (1-6-18) → mild @ pt. effn	→ med med LOS.
↓ USG chest → thickened 8mm	→ thick attempted monthly minimal for aspiration
(26-6-18)	



18-28938



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

सर्वस्वतः खतुं वर्नकायन्

एकक/Unit
विभाग/Dept.

नाम/Name

Raisa Khata

पंजीकृत सं०/O.P.D. Regn. No.

आयु
Age

46/F

पता/Address

SARRAWAL WEST TANDA AMBED-
KAR NAGAR (U.P.) PIN:- 224190
MO:- 8874869829

Respiratory Medicine -
Sleep Disorders, O.P.D.
OPR-6
Monday / Thursday
New Pat. Ward, Ground Floor

निदान/Diagnosis

दिनांक/Date

11/2/18

उपचार/Treatment

EBUS-TBNA done on 13.7.18.
Station 7 LN sampled
18Y15407 - necrosis.

GeneXpert - MTB detected
Rif Res. not detected

Adv.
cap. R. Cinex (600/300) 100 AAT
Tab mycobutol 800 mg OD
Tab Pyzina 1250 mg OD
Tab Benadone 40 mg 1/2 OD
Tab Pan-DSR 100 BSR

nephrology consultation

Refer to DOTS centre for Cat I A77

can be started on A77

1/Jan

RIA 15 days E-LFT
L-RFT

1/Jan
S. Khata

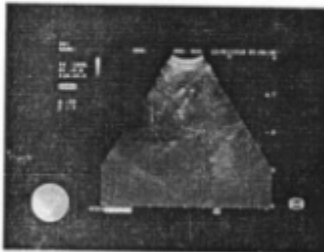


**INTERVENTIONAL PULMONOLOGY LABORATORY
DEPARTMENT OF PULMONARY MEDICINE AND SLEEP
DISORDERS, AIIMS
NEW DELHI**

Patient ID: 2018070062
Name: Mr. Raisa Khatoon
Age: 46 Years
Sex: M
Date: 13-Jul-2018

Ref By: Dr. Anant Mohan
Study: EBUS
Examined By: Dr. GC Khilnani
Indication: Uveitis - ? TB
Hospital ID: 103737060

Clinical Diagnosis: Uveitis - ? TB



CT Chest: Heterogenous mediastinal lymphadenopathy

EBUS-TBNA performed under local anesthesia and conscious sedation via oral route

Vocal cords, trachea, carina and both main bronchi normal

Enlarged Lymph nodes identified in the right para tracheal and sub carinal lymph node stations

EBUS-TBNA 6 passes performed from subcarinal lymph node

Samples sent for cytology, core HPE, GeneXpert and MGIT C/S

ROSE performed

R. No 1085

No immediate procedural complications

Post procedure vitals stable

Advise:

Oral fluids after 1 hour

Solids after 2 hours

To attend Pulmonary Medicine OPD after 1 week on MON/THU with the reports

GC Khilnani
for
Dr. GC Khilnani

RADIOLOGY SECTION
Dr. R P Centre, A.I.I.M.S., New Delhi 110029

Name: Raisha khatoon

Age/Sex: 46y/F

Date: 1 /6/2018

Investigation: HRCT CHEST

No.R- 8620

Ref. Dept /Unit: 1

OPD/Ward & Bed No. OPD

Clinical history: k/c/o choroidal mass(? Granuloma?melanoma) ,c/o mild rt chest pain K/c/o renal disease

Chest

A tiny(5mm) non calcified nodule is seen in posterobasal segment of RLL

Tracheobronchial tree is normal.

Mild pleural effusion is seen on right side with extension into fissures

Enlarged pretracheal & subcarinal lymph nodes seen largest Sad 25 mm with a tiny spec of calcification in subcarinal lymph node

No pericardial effusion seen.

Mediastinal structures are normal

Bones are normal.

Visualised abdominal structures are normal

Impression-

Tiny non calcified nodule in posterobasal segment of RLL

Mild pleural effusion on right side with mediastinal lymphadenopathy ~~no associated infection~~

?TB ?sarcoidosis

Radiologist

[Signature]

[Signature]



Sanjay Gandhi Post Graduate Institute of Medical Sciences

Raebareli Road, Lucknow - 226 014 ,India



2015628156

Raisa Khatoun 49 Y F

OP

Department: General Hospital

Req. Date: Oct 1, 2018 11:11 AM Req.No. ORDER20181431422 Req.Dept General Hospital Unit UNIT-1 Req. By Kumudini Sharma
KumudiniSharma

Provisional Diagnosis :

Laboratory: Ophthal Lab (Dept of Ophthalmology)

Test Name	Amount(Rs)	Test On	Order Rmks	Billing Status
Fundus Examination (Direct Ophthalmoscopy)	30.00	Patient		Not Paid
Tonometry	30.00	Patient		Not Paid
Total Amount (Rs)	60.00			

Mandatory Information

Parameters	Value
Intraocular implant	-
Type of implant	-
Sedated? (Y/N)	-

Remarks:

11/10/18
Wk 6/12/18
1/2/18
cg lens 6/12

(46) 7

Cytology Card Print

http://196.168.3.202/patho/cytology/cyto_report_print_result.php?crn...



Department Of Pathology
All India Institute Of Medical Sciences
Delhi

Tel: +91-11-26588500/26588700; Fax: +91-11-26588500/26588700

186

Patient Name:	Rajjo Khatoon	Acc. No:	18Y15407
F/H Name:	Abu S.	Hosp. Reg. No.:	103737060
Age/Sex:	46 Y/Female	UHID No.:	---
Clinic/Dept /Unit:	Pulmonary Medicine and Sleep Disorder/Unit 1	Consultant Incharge:	Dr. R.Guleria
Reg Date:	17-07-2018	Reporting Date:	17-07-2018

Cytopathology Report

Report Findings:

EBUS TBNA from subcarinal node shows necrosis. No granulomas seen.
Stain for acid fast bacilli is negative.

Cancer Category:

- UNS: Specimen Inadequate For Opinion
- NEG: No Evidence Of Cancer In This specimen**
- INC: Further Evidence As Indicated Is needed To rule Cancer In or Out
- POS: Diagnostic For Cancer Correlation with Clinical, Radiological and other Investigation is mandatory

Reporting Incharge: Dr. Prasenjit Das

Reporting SR: Dr. Mayurakshi Das
Verify By: Dr. Priyadarsani

103737060
Patient Name : Mrs RAISA KHATOON
Sex : Female
Department : Pulmonary Medicine and Sleep Disorder
Unit Incharge : Dr. Randeep Guleria
Lab Name : SRB LAB
Sample Received Time:
Dept / IRCH No: 20180120005996
Lab Reference No:
Ward Name: Pulmonary Medicine Ward
Reg Date : 11/05/2018 08:53 AM
Age : 46 years 2 months 2 days
Unit Name : Unit-I
Sample Collection Date: 13/07/2018 10:24 AM
Lab Sub Centre: SRB LAB
Report Generated Date: 16/07/2018 02:59 PM
Recommended By: Dr. CHANDER

Sample Details : SLB-130718042 (Lymph Node)

LYMPH NODE ASPIRATE/COLD ABSCESS/BIOPSY FOR GENE XPRT

Result of investigation:

Result: DETECTED SENSITIVE TO RIFAMPICIN

Authorized Signatory



Sanjay Gandhi Post Graduate Institute of Medical Sciences

Raebareli Road, Lucknow - 226 014, India

48 7

2015628156

Raisa Khatoon 47 Y F

OP

Department: General Hospital

Req. Date: May 3, 2018 9:57 AM Req.No. ORDER2018622881 Req.Dept General Hospital Unit UNIT-1 Req. By Kumudini Sharma

Provisional Diagnosis :

Laboratory: Ophthal Lab (Dept of Ophthalmology)

Test Name	Amount(Rs)	Test On	Order Rmks	Billing Status
Fundus Examination (Direct Ophthalmoscopy)	30.00	Patient		Not Paid
Total Amount (Rs)	30.00			

Mandatory Information

Parameters Value MDRP, HTN, Non diabetic

Intraocular implant

Type of implant

Sedated? (Y/N)

Remarks:

Handwritten notes: 3/5/18, H.M., B110, glum 6/9

USG report:-

focal echoreflective thick membrane focally with attachment Not involving optic disc

Collar stud appearance choroidal thickening No corresponding Ascospikes available noted (not mentioned in report)

No H/O Only Immunosuppressant steroid medication case seen by Dr. Blokhin Clinical H/O.

? Amelander relations choroidal Reticular detachment.

70% RD.

Adv

Case Seen by Dr. Vikas Sir

Refer to higher center RPC AIMS. for further Management Page 1/1

To release 2° in body.

Signature

Signature

OCT macula EDI (LB) - know photo done



Sanjay Gandhi Post Graduate Institute of Medical Sciences

Raebareli Road, Lucknow - 226 014, India

2015628156

Raisa Khatoon 45 Y F

Department: Nephrology

Req. Date: Aug 27, 2015 6:26 PM

Req.No. ORDER20151031821

Req.Dept Nephrology

Unit UNIT-1

Req. By DrRavi Shankar Kushwaha

Provisional Diagnosis: asymetric kidney/rt small kidney/ mod rf

Laboratory: Neuro-ophthalmology (Dept of Neurosurgery)

Test Name	Amount(Rs)	Test On	Order Rmks	Billing Status
Fundus Examination (Direct Ophthalmoscopy)	25.00			Not Paid
Total Amount (Rs)	25.00			

Mandatory Information

Parameters

Value

Intraocular implant

Type of implant

Sedated? (Y/N)

Remarks:

c/o:- gradual ↓ vision
Mild headache
BE

Disc -> 0.4:1
temp. yellow

BV_s - Anterior attached

Merid - PR dull
Background - tessellated

31/7/15 NP
6/36 optanc 6/9 Africa
VU 6/60
PH < 6/18
6/9
Perimetry (30-2)

Colours vision < 17/17
17/17
IOP < 16.3
15.3

Pupil -> NSNR
Ocular movement -> full BE
N N

Refract
(R) +1.0 / +0.5 axis 180° 6/9
(L) +1.5 DS 6/9
Add +2.0 (B) No

Refraction
↓
N. imetry to be repeated after 1 1/2 months
P.T.O

Single Field Analysis

Eye: Right

Name: RAISA KHATOON
ID: 2015628156

DOB: 01-09-1970

Central 30-2 Threshold Test

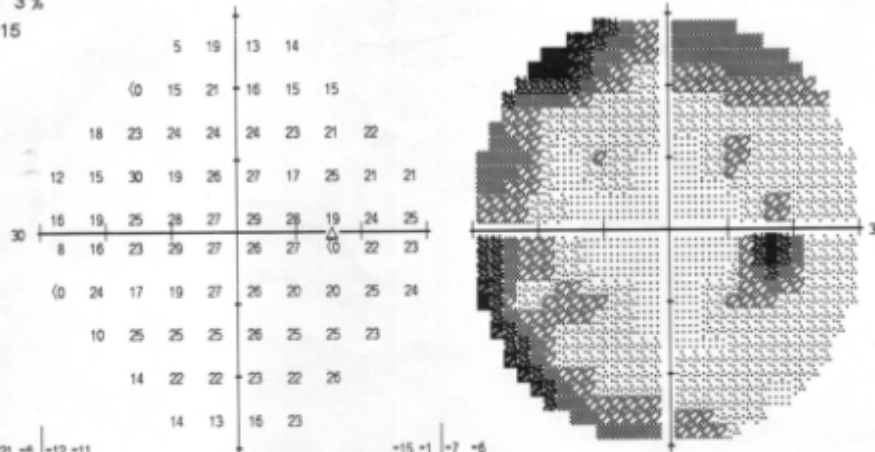
Fixation Monitor: Gaze/Blind Spot
Fixation Target: Central
Fixation Losses: 3/23
False POS Errors: 2 %
False NEG Errors: 3 %
Test Duration: 12:15

Stimulus: III, White
Background: 31.5 ASB
Strategy: SITA-Standard

Pupil Diameter: 4.3 mm
Visual Acuity:
RX: DS DC X

Date: 01-09-2015
Time: 10:25 PM
Age: 45

Fovea: OFF



-21	-6	-12	-11						
-30	-13	-7	-11	-12	-12				
-10	-6	-6	-6	-6	-6				
-15	-14	0	-13	-7	-5	-9	-8		
-11	-11	-7	-5	-6	-4	-4	-7	-5	
-20	-14	-9	-4	-6	-7	-5	-8	-7	
-29	-6	-14	-14	-6	-7	-12	-11	-5	-7
-18	-6	-6	-6	-6	-6	-6	-6	-6	
-14	-8	-8	-8	-8	-4				
-13	-15	-13	-6						

-15	-1	-7	-6						
-24	-8	-2	-6	-7	-7				
-5	-1	-1	-1	-1	-3	-1			
-10	-9	5	-8	-1	0	-9	-1	-4	-3
-6	-6	-2	0	-1	2	1	-1	0	
-15	-9	-4	1	-1	-2	0	-3	-1	
-24	-1	-9	-8	0	-2	-7	-6	0	-1
-13	0	-1	-1	-1	-1	-1	-2		
-9	-2	-3	-2	-3	1				
-8	-10	-6	-1						

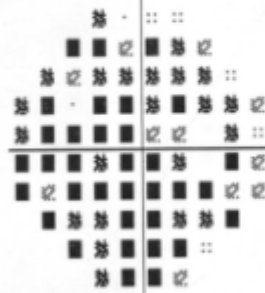
GHT
Outside Normal Limits

VFI 91%

MLU -8.25 dB P < 0.5%

PSD 5.11 dB P < 0.5%

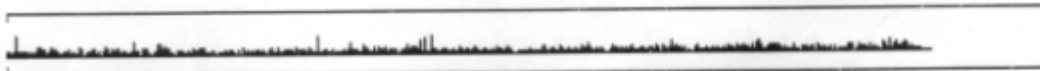
Total Deviation



Pattern Deviation



:: < 5%
< 2%
< 1%
< 0.5%





Sanjay Gandhi Post Graduate Institute of Medical Sciences

Raebareli Road, Lucknow - 226 014, India

Raisa Khatoon 45 Y F

66

OP

015628156

Department:

General Hospital

Req. Date:

Req.No.

Req.Dept

Unit

Req. By

Oct 15, 2015 10:27 AM

ORDER20151257358

General Hospital

UNIT-1

Kumudini Sharma

Provisional Diagnosis :

asymetric kidney/rt small kidney/ mod rf

Laboratory: Neuro-ophthalmology (Dept of Neurosurgery)

Test Name	Amount(Rs)	Test On	Order Rmks	Billing Status
Perimetry (Field Testing)	100.00			Not Paid
Total Amount (Rs)	100.00			

Remarks:

11/15

6/7
6/7

19/4/18

IOP < 20.7
17.0

Dilated fundus exam?

Ana (R) wnl

(L) Dmc - (R)

Single Field Analysis

Name: RAISA KHATOON
ID: 2015628156

Eye: Right
DOB: 08-02-1965

Central 30-2 Threshold Test

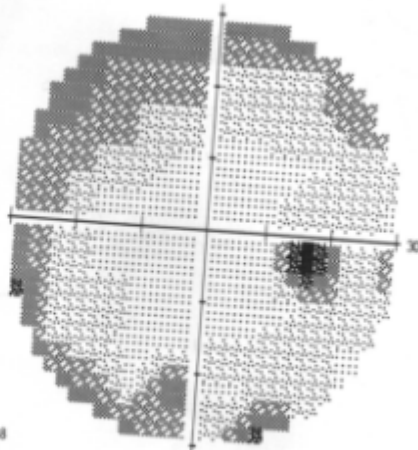
Fixation Monitor: Gaze/Blind Spot
Fixation Target: Central
Fixation Losses: 6/22 xx
False POS Errors: 15 % xx
False NEG Errors: 21 %
Test Duration: 12:37

Stimulus: III, White
Background: 31.5 ASB
Strategy: SITA-Standard

Pupil Diameter:
Visual Acuity:
RX: +2.25 DS DC X

Date: 15-10-2015
Time: 10:05 AM
Age: 50

Fovea: OFF



-12	-11	-10	-12						
-11	-10	-11	-5	-5	-5				
-15	-11	-9	-9	-6	-7	-6	-10		
-10	-9	-10	-8	-6	-5	-3	-4	-5	-6
-10	-10	-6	-5	-3	-5	-6	-7	-3	
-13	-8	-6	-5	-4	-4	-5	-7	-9	
-18	-9	-7	-6	-4	-4	-4	-7	-7	-8
-7	-6	-4	-3	-6	-8	-6	-4		
-11	-3	-18	-4	-6	-5				
-12	-9	-7	-19						

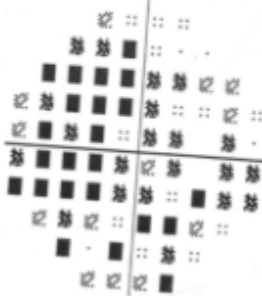
-8	-7	-6	-8						
-7	-6	-7	0	0	-1				
-11	-6	-4	-5	-1	-2	-2	-5		
-5	-5	-6	-4	-2	-1	1	0	-1	-2
-5	-6	-1	1	1	0	-1	-3	1	
-8	-4	-2	1	0	1	-1	-3	-5	
-14	-5	-3	-2	0	0	1	-3	-2	-4
-3	-2	0	1	-2	-1	1	1		
-7	1	-14	0	-2	0				
-8	-5	-3	-14						

*** Excessive High False Positives ***

GHT
General Reduction of Sensitivity

VFI 95%
MD -6.70 dB P < 0.5%
PSD 3.73 dB P < 2%

Total Deviation

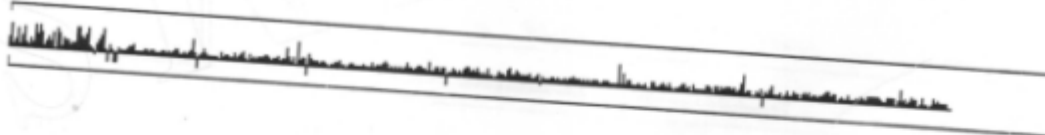


Pattern Deviation



○ < 5%
◐ < 2%
◑ < 1%
■ < 0.5%

NEURO OPHTHALMIC UNIT
DEPT OF NEURO SURGERY
S G P G I
LUCKNOW



Single Field Analysis

Eye: Left

Name: RAISA KHATOON
ID: 2015628156

DOB: 08-02-1965

Central 30-2 Threshold Test

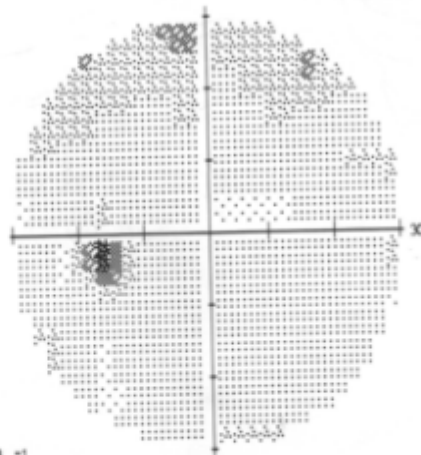
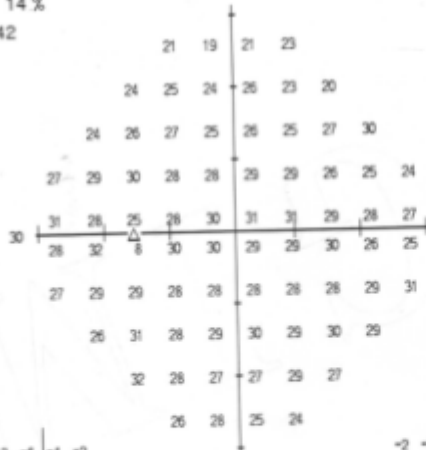
Fixation Monitor: Gaze/Blind Spot
Fixation Target: Central
Fixation Losses: 10/19 xx
False POS Errors: 31 % xx
False NEG Errors: 14 %
Test Duration: 10:42

Stimulus: Ill, White
Background: 31.5 ASB
Strategy: SITA-Standard

Pupil Diameter:
Visual Acuity:
RX: +2.25 DS DC X

Date: 15-10-2015
Time: 10:19 AM
Age: 50

Fovea: OFF



-3	-6	-4	-2						
-2	-2	-3	-2	-4	-8				
-3	-3	-3	-5	-4	-5	-2	2		
-1	0	0	-3	-3	-3	-2	-4	-4	-3
2	-2	-3	-3	-1	-1	-2	-2	-1	
-2	2	-3	-3	-4	-4	-1	-4	-3	
-3	-1	-2	-4	-4	-5	-1	-3	-1	4
-4	0	-3	-3	-1	-2	0	1		
2	-2	-3	-3	0	-1				
-3	-1	-3	-4						

-2	-5	-3	-1						
-2	-1	-3	-1	-4	-7				
-3	-2	-2	-4	-3	-4	-2	3		
0	1	1	-3	-3	-2	-2	-3	-3	-3
3	-1	-3	-2	-1	0	-1	-1	0	
-1	2	-2	-3	-3	-3	-1	-3	-2	
-2	0	-1	-3	-3	-4	-4	-3	0	4
-3	1	-2	-2	-1	-1	1	1		
2	-2	-3	-2	1	0				
-2	0	-3	-3						

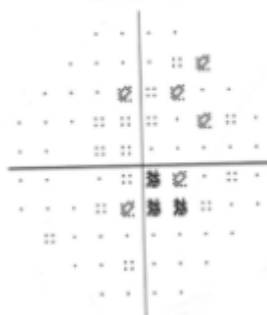
*** Excessive High False Positives ***

GHT
Within normal limits

VFI 98%

MD -2.44 dB P < 5%
PSD 2.03 dB

Total Deviation

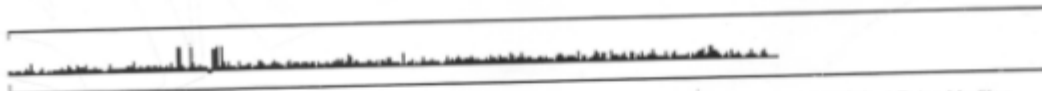


Pattern Deviation



:: < 5%
⊘ < 2%
⊘ < 1%
■ < 0.5%

NEURO OPHTHALMIC UNIT
DEPT OF NEURO SURGERY
S G P G I
LUCKNOW



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Invoice No. : 065019
Dated : 27-08-2018 (06:27 PM)
Issued By : DEO1

Patient's Name : Raisa Khatoon
CR Number : 2015628156

S.N.	Description	Batch No.	Mfg./Expiry	MRP	Qty.	Unit	Price	Amount(Rs.)
1.	Erythropoietin 4000 (Wepox) <i>Wepox 4000</i>	DT10027	Dec-2017 ; Nov 2019	1726.00	4	Pfs	359.63	1438.52
2.	Sevelmer Carbonate 400mg (Sevapik) <i>Sevapik 400mg Tab</i>	T1804133	Apr-2018 ; Mar 2020	14.50	60	Tab	9.62	577.20
3.	Febuxostat 40mg (Zurig) <i>Zurig 40mg</i>	1800568	Mar-2018 ; Feb 2020	10.33	30	Tab	4.06	121.80

Patient's CR Num. Add 15 : Rounded Off (+) Total 2137.52
0.48

Grand Total 94 Units 2138.00

Rupees Two Thousand One Hundred Thirty Eight Only

Terms & Conditions

- E. & O. E.
- Goods once sold can be returned within 30 days on presentation of Original Invoice except cold chain goods which is not returnable.

Receiver's Signature :

for HRF OPD Pharmacy
Authorised Signatory

Cash Receipt Memo

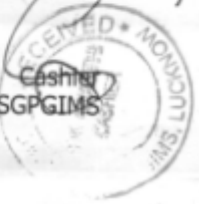
Received with thanks from Ms/Mr Raisa Khatoon CR No.2015628156 on account of purchase of medicine/surgical items Rs: **2138.00** (Two Thousand One Hundred Thirty Eight Only)

Terms to C
E. & O. E.
1. Goods
goods v

Received
Medicine

Terms & C
E. & O. E.

1. Goods
goods v



GSTIN-09FYXPS8900P1ZY
DL No. FDA-20-6164/14
FDA-21-5165/14

CASH MEMO / BILL

8896745224
9792881380
9026654439

SHARMA MEDICAL & SURGICAL

CHEMIST & DRUGGIST

Shop No. 12, Dhanwantri Dhaam Upper Ground Floor, Near S.G.P.G.I. Gate,
Raibareilly Road, Lucknow.

S. No. 403 Book No. _____ Date 1/09/18

Patient Name : Mohammed Akil

Doctor Name : Sggsi S.G.P.G.I, Lucknow

Qty.	PARTICULARS	Expiry Date	Batch No.	AMOUNT Rs.	P.
20	Combital 800	03/21	3344	46.40	
30	ferimon XT	04/20	0002	297.00	
45	Cipral 500	03/20	8324	237.00	
20	febucel 40	10/19	4004	250.00	
40	Rabise c-dsf	04/20	R032	399.00	
20	Salonex	05/22	865A	23.00	
40	p-zide 500	03/22	8002	166.00	
30	Sevapik 400	06/20	7061	435.00	
60	ganaton.	06/19	2008	624.00	
60	Domestal	06/20	006R	146.94	
20	B-cin 400	04/20	4317	103.00	
1pr	Rexley T-	10/19	0376	110.00	
Four thousand eight hundred				TOTAL	2836

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 Pt. Name **RAEESA KHATTON** Bill No.: **NM043488**
 Dr. Name **SANT PANDAY** Bill Dt.: **27/Nov/2018**

QTY	Description	Unit	Rate	SGST+CGST	Amount	Batch	Expiry
21	WEFOX 4000 INJ	1MML	1576.	12 +	1000.00	DS1059	Aug/19
	Taxable Amt	892.86	S/I-GS	53.57	CGST		
	No Of Product						

TOTAL AMT 1000.00
 NET AMOUNT **1000.00**

Rs. One Thousand Only

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