



गोविन्द बल्लभ पन्त स्नातकोत्तर आयुर्विज्ञान शिक्षा एवं अनुसंधान संस्थान
GB PANT INSTITUTE OF POST GRADUATE MEDICAL
EDUCATION & RESEARCH (GIPMER)
नई दिल्ली / NEW DELHI



DEPARTMENT OF CARDIOLOGY
ECHOCARDIOGRAPHY & DOPPLER REPORT

Name: Sumanlal Age & Sex: 7 M. F 67345 OPD/CR: No. 67345 Echo No. 67345

Doctor A. S. Umool Date 11/10/22

Clinical Diagnosis

Measurements

LA/Ao	LVIDd/LVIDs	FS	EF (m-mode)
RVID	IVSd/IVSs	PWTd/PWTs	RA
SVC	IVCi/IVCx	MPA	LPA
RPA	As Ao	Des Ao	MVA
ASD/VSD/PDA		LV Mass	2D-LV Volumes
EF			11/10/22

2D Echo Description

Valves
Chambers
Septa
Segmental Wall Motion
CO
Mass/Veg/thrombus/other
Others:

SS/LC
A V-V A L V W 2 d a u
3 P U → L A 1 S V C
L V C - R A
N R L A

Doppler Data

MV
AV
TV
PV
HR

Unco pure
Mod PMH
CA (100)
PMH
△ 40

Small Restrictive PDA PA pressure
(L-R) (39/10)

(100 see)

Final impression

LA W ↑ 1.2 cm
NO VSD / PMH / L A

PA V F
A W n m a n s o n i (P A V F)

Signature



UHID: 20220067345

GB PANT INSTITUTE OF POST GRADUATE
MEDICAL EDUCATION AND RESEARCH
GNCT of Delhi 1 J L N Marg New Delhi

CONSULTING ROOM NO :431, TOKEN NO : 263
Clinic Paediatrics Dr Sumod Kurian
Days:FRI

EHR ID : 22000280053790932

OUT PATIENT RECORD

Name : MISS. SANAULLAH

Department : Cardiology

Dept No. : 2022/038/0037099

Date of Registration : 16-09-2022 01:16:31 PM

Unit : Unit 1 Dr Saibal Mukhopadhyay

Age : 7M

Billing Type : General

Mobile No : *****136

Address : MATIHANI , Purnia, BIHAR, INDIA

Patient Type:NON MLC

Fee : 0.00

Sex : Female

D/O MOHD RANJEB ALAM

Email :

Occupation : OTHER

Prepared by:Mr. Nitin Kumar

Wt = 6 kg.Age = 6 monthOutade diagnosisSmall PDA.GE - Continuous murmur @Sh.

1. 2D-Echo

(20/9/2022)

Ref. Sumod Kurianpath no (5)✓ Tab. Entas - 0.6mg✓ Syr - Furosemide - 0.6ml BDAdmTo, CST by nadhara yashX 3month

Department of Cardiology
GIPMER, New Delhi-110002
Senior Resident (DIP)
Dr. Mohan Kumar

22/10/2022
(30)

GOVIND BALLABH PANT INSTITUTE OF
POST GRADUATE MEDICAL EDUCATION &
RESEARCH
GOVT. OF N.C.T. OF DELHI
1, JLN MARG, New Delhi



Patient Aadhar Card No. 317753136951
317753136951

(ESTIMATES FORM FOR ALL SURGERIES AND PROCEDURES OF GIPMER HOSPITAL)

(TO BE FILLED BY THE TREATING CONSULTANT / SURGEON):

Columns 1, 2, 3 & 4 as per documents / OPD form, Ration Card and Voter I. Card.

1. Name of the patient MISS SANAVIAH s/o. s/o. w/o M.D. RANJIB ALAM
2. Address MATHANI PAKHIA BIHAR
3. Age: 7 Month Sex MALE Department Cardiology Dept
4. OPD/CR No. 22000800531 Treating consultant / surgeon Dr. Sumit Kumar
5. Diagnosis of the diseases PDA
6. Details of consumables, treatment/operation required: for PDA closing — 23,625/-

7. Whether the patient pertains to:
(a) Self paid (b) DAN/RAN (c) any other source of funding.

Note: The patient will be tentatively admitted / operation date as early as possible

Signature & Stamp of treating consultant / surgeon

(To be filled by the Purchase Department) Amount + vat

(Rupees in words) Twenty Three Thousand Six Hundred Twenty Five Only

Note: The demand draft / pay order must be issued in the name of MEDICAL SUPERINTENDENT, G.B. PANT HOSPITAL, NEW DELHI ALONGWITH FORWARDING LETTER FROM THE DEPARTMENT CONCERNED. This certificate is issued only one time.
DECLARATION BY PATIENT

I have not applied for another estimate from any other department: DAN/RAN/PMO etc.

SIGNATURE OF PATIENT/RELATIVE

SIGNATURE OF MEDICAL SUPERINTENDENT
G.B. PANT HOSPITAL

Copy to: 1. Treating surgeon / consultant.
2. Purchase office (with photocopy of receipt / payment)

सं. 1
NO. 1



बिहार सरकार
GOVERNMENT OF BIHAR
योजना और विकास विभाग
DEPARTMENT OF PLANNING AND DEVELOPMENT
प्राथमिक स्वास्थ्य केन्द्र बरहरा कोठी
PRIMARY HEALTH CENTRE BARHARA KOTHI

फॉर्म-5
FORM-5



जन्म प्रमाण-पत्र
BIRTH CERTIFICATE

(जन्म मृत्यु रजिस्ट्रेशन अधिनियम, 1969 की धारा 12 / 17 तथा बिहार जन्म मृत्यु रजिस्ट्रेशन नियम, 1999 के नियम 8/13 के अंतर्गत जारी किया गया।)
(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE BIHAR REGISTRATION OF BIRTHS & DEATHS RULES 1999)

यह प्रमाणित किया जाता है निम्नलिखित सूचना जन्म के मूल अभिलेख से ली गई है जो कि प्राथमिक स्वास्थ्य केन्द्र बरहरा कोठी तहसील बरहरा जिला पूर्णिया राज्य/संघ प्रदेश बिहार, भारत के रजिस्टर में उल्लिखित है।

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR PRIMARY HEALTH CENTRE BARHARA KOTHI OF TAHSIL/BLOCK BARHARA OF DISTRICT PURNIA OF STATE/UNION TERRITORY BIHAR, INDIA.

नाम / NAME: MD SAMI ALLAH / मो समी अल्लाह

लिंग / SEX: पुरुष / MALE

जन्म तिथि / DATE OF BIRTH:

15-02-2022

FIFTEENTH-FEBRUARY-TWO THOUSAND TWENTY TWO

जन्म स्थान / PLACE OF BIRTH:

PRIMARY HEALTH CENTRE BARHARA KOTHI/...

माता का नाम / NAME OF MOTHER:

RAHANA KHATUN / रहना खानून

पिता का नाम / NAME OF FATHER:

MD. RANJEB ALAM / मो रजब आलम

आधार नंबर / MOTHER'S AADHAAR NO:

XXXXXXXX4810

आधार नंबर / FATHER'S AADHAAR NO:

XXXXXXXX6951

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

RAGHUVANSHNAGAR,
MAUZAMPATTI, MATIHANI, BARHARA, PURNIA,
BIHAR- 854203

माता-पिता के स्थायी पता / PERMANENT ADDRESS OF PARENTS:

RAGHUVANSHNAGAR,
MAUZAMPATTI, MATIHANI, BARHARA, PURNIA,
BIHAR- 854203
रघुवंशनगर,
मौजमपट्टी, मटिहानी, बरहरा, पूर्णिया,
बिहार- 854203

पंजीकरण संख्या / REGISTRATION NUMBER:

B-2022: 10-08463-000467

पंजीकरण तारीख / DATE OF REGISTRATION:

19-02-2022

टिप्पणी / REMARKS (IF ANY):

जारी करने की तिथि / DATE OF ISSUE:

26-08-2022

जारी करने वाला प्राधिकारी / ISSUING AUTHORITY:

रजिस्ट्रार (जन्म-मृत्यु)
REGISTRAR (BIRTH & DEATH)

प्राथमिक स्वास्थ्य केन्द्र बरहरा कोठी
PRIMARY HEALTH CENTRE BARHARA KOTHI

प्रभारी अधिकारी
प्रभारी अधिकारी
प्राथमिक स्वास्थ्य केन्द्र बरहरा कोठी
पूर्णिया

UPDATED ON ;
26-08-2022 14:39:57



"THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FACSIMILE SIGNATURE OF THE ISSUING AUTHORITY"
"THE GOVT. OF INDIA VIDE CIRCULAR NO. 1/12/2014-VS(CRS) DATED 27-JULY-2015 HAS
APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES"

* प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH



G. B. PANT HOSPITAL
NEW DELHI-110002

OTHERS

PATIENT WELFARE FUND

S. No. 22889

Date 07/07/23

Received with thanks from Smt. / Miss. / Shri Step for child care trust

Address 19, Laxman Place Veer Sarai Kar Shakarpur Delhi

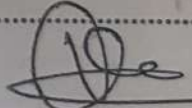
for the treatment of MD: Sami Allah

a sum of Rs. twenty three thousand six hundred & twenty five

on account of patient Welfare by Cash/Cheque No. 699727

Dt. 05/07/23 Drawn PNB

₹ 23625/-



Accountant

This receipt is Valid subject to realisation of Cheque / D.D. and with in Three / Six Months
from the date of issue of this receipt



पंजाब नैशनल बैंक
punjab national bank

कोशाम्बी, गाज़ियाबाद (उ.प्र.) (300000)
Kaushambi, GHAZIABAD (UP) - 201010

केवल तीन माह के लिए वैध
VALID FOR THREE MONTHS ONLY

0 5 0 7 2 0 2 3
D D M M Y Y Y Y

MEDICAL SUPERINTENDENT, G.B.PANT HOSPITAL, NEW DELHI

मांगे जाने पर ON DEMAND PAY

या उनके आदेश पर OR ORDER

** Twenty Three Thousand Six Hundred Twenty Five only**

रुपये RUPEES

प्राप्त मूल्य के बदले अदा करें
FOR VALUE RECEIVED

₹

23,625.00

XAF 699727

शाखा क्रमांक Branch Serial No.
0170/2023

पंजाब नैशनल बैंक
punjab national bank

अदाकर्ता शाखा एवं वि०स० Drawee Branch with D.No.

D.No. 2107 - FINACLE -
CDPC DELHI FINACLE

Purchaser: STEP FOR CHILD CARE TRUST
Draft is signed singly as it is for amount upto Rs. 50,000/- .
(NOT OVER Rs.23625/-)

W. S. Chak
प्राधिकृत हस्ताक्षरकर्ता जी.बी.पी.ए.सं.
AUTHORISED SIGNATORY WITH GBPA No.

प्राधिकृत हस्ताक्षरकर्ता जी.बी.पी.ए.सं.
AUTHORISED SIGNATORY WITH GBPA No.