









VINAYAK HOSPITAL™  
NH-1. Sector-27, Atta, Noida-201301

V.H. No. 33845 / 18-19  
Room No. 404 Category  
Date of Admission 03/08/18

Name BABY MANVI KUMARI  
S/o, D/o, W/o MR. LAXMAN JHA  
Occupation  
Age 2.5 yrs Sex F  
Religion  
Father's / Husband's Name  
Address DISTT MADHUANI  
BIHAR  
Phone : Office Res.  
Advance Receipt No. Date 7/8/18  
For Rs.  
Name & Address of accompanying relative  
FATHER  
Phone : Office Res.  
R.M.O. Dr. S.K. BEHERA Informed at 10:59 AM  
Admitting Dr. MUKESH KUMAR Informed at 10:59 AM  
Receptionist

Unit / Consultant DR. MUKESH KUMAR  
Date of Discharge  
Provisional Diagnosis  
Final Diagnosis  
Infectious nature of disease : Yes/No  
Outcome : LAMA / Stable / Improved / Cured / Died  
Death Record filled by Dr.

FOR DELIVERY CASE ONLY

Date and Time of Delivery  
New Born : Male / Female  
Birth record filled by Dr.  
Patient shifted from Room No. to  
On  
Shifted from Room No. to  
On  
Shifted from Room No. to  
On

I hereby declare that I am getting admitted in this Hospital on my own will. The expenses have been explained to me and I agree to make all payments before discharge.

I agree that I am keeping no valuable with me in the Hospital and no one will be responsible in the events of theft if any.

Signature of Patient / Relative

Discharge Date Time Bill No. / R.No. Dated  
For Rs. Received / Refundable after adjustment of advance Rs.

Authorised Signatory

# VINAYAK HOSPITAL™

(A Unit of Chaudhary Nursing Home Pvt. Ltd.)

NH-1, Sector-27, Atta, Noida-201301,

Tel. No. : 0120-4504400 (99 Lines), 2444222, 2444333

Website : www.vinayakhospitalnoida.com

31534

## CASUALTY RECORD

Reg. No. : ..... Age/Sex : F (2.6 Yrs)

Patient's Name : ROBY MANVI ..... Occupation : .....

D/o, S/o, W/o : Dis MR Laxman Jha ..... Occupation : .....

Address : Dist Madhuani Bihar ..... Phone No. : .....

Consultant Name : DR. MUKESH KUMAR ..... Dept. : .....

DATE

7.8.18  
10:50 AM

A O.C.O Burns  
Incident occurred when  
the child was near by  
where hot kharee fell on  
her. Brought by parents  
for skin grafting. Child  
can not lift left arm.

O/E G.C good  
P. 128/90      Ht 83cm  
SpO2 98%      Wt 8kg

Adult

1/2 of Burn @ Burn at L shoulder  
upto mid arm

② L Temple, around ear

Supt Exam PA - soft  
Non tend

RB 1 MAX  
evs 1 MAX

A BURN WITH CONTRA  
CTURE LY AXIL

Follow orders accordingly

DR. (G.S., K. BEHERA  
CCMO MBBS  
DMC Reg No 18048  
VINAYAK HOSPITAL, NOIDA

CASE SHEET



VINAYAK HOSPITAL™

(Unit of Chaudhary Nursing Home Pvt. Ltd.)  
 NH-1, Sector-27, Atta, Noida-201301,  
 0120-4504400 (99 Lines), 2444222, 2444333  
 Website : www.vinayakhospital.org.in

VH No. 33045 Ward/Bed 404.

Name Pooja MANVA Age/Sex 27/6months

Consultant/Unit DR. ~~KUMAR~~ MUKESH KUMAR

D.O.A. 7.8.18

PROGRESS NOTES

Dr. Mukesh. (Plastic Surgeon)

8-8

7-8-18

10 AM

A 90 Bruise contusion at  
 Lt orilla, ulcer at Lt  
 shoulder. Scars at  
 Lt side of face, Scalp.

Pinna loss (Lt)

Surg - on Thursday.

Adm - Release of PBC orilla.

- & skin graft. ↓ GA

- CBC, PT, APIT, INR.

- Chest X-ray - PA/lat

- Dring of wound.

- PAC

- NPO after 6 AM on

9-8-17

Pooja

सेवा में

श्रीमान अध्यक्ष

ए. गिगल्ल वेलफेयर आर्गनाइजेशन

सी-63 वेसमेंट साउथ स्विस मार्ट-2

नई दिल्ली - 49

विषय - आर्थिक सहायता हेतु प्रार्थना-पत्र

महोदय, सविनय निवेदन यह है, कि मेरा नाम लक्ष्मण सा है, मेरा निवास स्थान नवतोल कोठिया शरील मधुवन बिहार में स्थित है, मेरी एक बेटी है, जिसका नाम मानवी है, जिसकी आयु दो वर्ष की है, दिनांक 07-08-2018 को मेरी बेटी मानवी घर में खेल रही थी, और खेलते ही खेलते आग के पास जा पहुँची और वह आग से जल गयी, इसके इलाज के लिए मैं उसे नोरुडा के मिनायक हॉस्पिटल में लेकर गया, जहाँ उसके इलाज का खर्च एक लाख नब्बे हजार पाँच सौ रुपये बताया गया, जो कि मैं यह खर्च उठाने में असमर्थ हूँ! अतः आपसे निवेदन है, कि मेरी बेटी के इलाज के लिए सहायता प्रदान करें!

दिनांक  
07/08/2018

बेटी का नाम - मानवी

उम्र - दो वर्ष

पता - नवतोल कोठिया शरील  
मधुवन बिहार

आपकी प्रति कृपा होगी!

आपका प्रार्थी

लक्ष्मण सा

Ref. No.: FRR/Vinayak/1003/2018-19

Dated: 07.08.2018

### PROFORMA INVOICE / FUND REQUISITION REPORT:

'Raah'

(A Vinayak Hospital Noida Initiative)

**Patient Name:** Baby Manvi Kumari .

**Sex:** Female **Age:** 2 year .

**Father Name:** Mr.Laxman Jha.

**Address:**Navtol,Kotjia,Kathia Bharaul, Madhubani, Bihar - 847404.

**Diagnosis:** Approx 87% Thermal Burn.

**Date of Admission:** 07/08/2018

**Overall Analysis:** The patient - Baby Manvi Kumari was brought in to our Noida Unit by her mother - Mrs.Anu Jha at 012:00 PM on 07th Aug 2018.The child has sustained Thermal Burn Injury due to accidentally coming in contact with fire while she was at home. The child was playing at home and contacted with fire when her mother was making food so that she burnt . As a result of the incident, the child has sustained mostly 2nd & 3rd Degree Deep 27% TBSA Thermal Burn Injury. The Burns are on face,hands and back . The nature of injury is life threatening and requires considerable degree of specialist intervention and close monitoring. The patient is a child of 2 years, the injury is of a grave nature. We plan to manage the child conservatively applying wound dressing and debridement procedures to close the wound as early as possible.Surgical Skin Grafting if required, would be undertaken at a later stage. Chest Physiotherapy sessions and Pressure Garments would also be advised to achieve the best possible results against a possible pulmonary collapse and for a contracture and scar free recovery .

#### Visuals:



#### Fund Requirement - During Hospital Stay

Please find below the detailed fund requirement for the first 3 Weeks of treatment.

Funds - Hospital Stay	47,250.00
Funds - RMO, Nursing, Consultants & Specialists	47,250.00
Funds - Dressing & Procedures	20,000.00
Funds - Rehabilitation (Physiotherapy)	5,000.00
Funds - Medicines + Consumables + Transfusions	50,000.00
Funds - Pathology & Diagnostics	12,000.00
<b>Total (in numbers)</b>	<b>1,81,500.00</b>

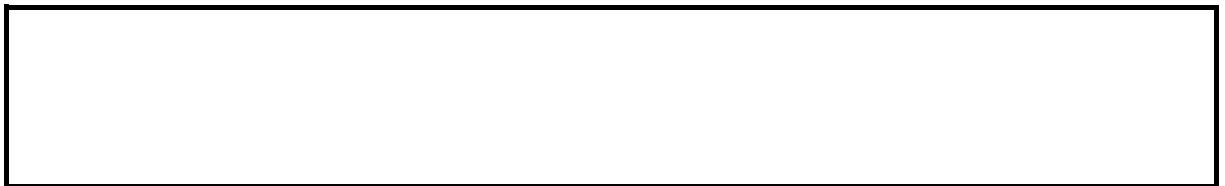
**Total (in words): One Lakh Eighty One Thousand Five Hundred Only**



**Fund Requirement - Follow Up**

Please find below the detailed fund requirement for Follow Up period of 1.0 Month Post Discharge.

<b>Funds - Follow Up Visits &amp; Dressings</b>	<b>9,000.00</b>
<b>Total (in numbers)</b>	<b>9,000.00</b>
<b>Total (in words):</b>	<b>Nine Thousand Only</b>
<b>Fund Requirement - TOTAL</b>	
<b>Stage 1</b>	<b>1,81,500.00</b>
<b>Stage 2</b>	<b>9,000.00</b>
<b>Total (in numbers)</b>	<b>1,90,500.00</b>
<b>Total (in words):</b>	<b>One Lakh Ninty Thousand Five Hundred Only</b>



Kindly release the funds at the earliest for us to go ahead and execute the treatment for Baby Manvi Kumari .



For Vinayak Hospital  
(A Division of Choudhary Nursing Home)  
5th Floor, Vinayak Hospital, Sector 27, Atta Market,  
NH - 1, Noida - 201301 (UP)

AO/AD