LIFE CARE REGENERATION ASSOCIATION

Registered Under Societies Registration Act. XXI of 1860 Regn. No. S-57088
An Institution & Rehabilitation Center for Child Development

Sponsorship form for financial Assistance for Heart Surgery & Treatment

Patient's Details

Mst. SAARIM

Patient Name:- Mst. SAARIM KHAN **Reg. ID:- 104505703 / CTVS ID No. 107234/19**

Concern Doctor:- Dr. SOURABH K. GUPTA / Dr. SHYAMJIT / Dr. MILIND PADMAKAR HOTE

Disease: - TOF (Tetralogy of Fallot)
Treatment Advised: - ICR (Intensive Cardiac Rehabilitation)

DOB: - 12-10-2018 / Age: 4 Years / Height:- 98 cm / Weight: 14 Kgm / Sex:- Male

Saarim is 4 years old heart patient. He has got a heart disease TOF (Tetralogy of Fallot) by birth. He has been evaluated by AIIMS Doctors and found to have TOF heart disease. They advised him for ICR open heart surgery for TOF repair, He needs this surgery as soon as possible for saving his Life because its delay due to covid, it was to happen in 2019. His surgery will take place at All India Institute of Medical Science New Delhi.

But surgery and treatment is expensive. He belongs to a poor family. His father works as a delivery boy. Due to very poor condition of family. They are unable to afford the expenses (Rs. 67,000/-) of the surgery & treatment.

So their request to Life Care Regeneration Association 'LCRA' to sponsor the surgery and treatment expanses of the child.

Family Details

Father Name:	IRFAN KHAN	Age: 34 Yrs	Education: 10th Passed	Occupation: Delivery boy job
Mother Name:	SAMEENA	Age: 33 Yrs	Education: 8th Passed	Occupation: Housewife
Family members:	4 (Four)	No. of Children:-	2 (1Boy 1Girl)	
Number of Earning Person:	1 (One)	Annual Income Approx: Rs. 100,000/- (One Lakh Only)		
Permanente Address:	HN 156, Haji Bhul Pada Mohalla, Chandan Hola, New Delhi - 110074.			

Medical Treatment Details

Registration No: 104505703 CTVS: 107234/19 Date of Admission/Surgery:- _____

Diagnosis Disease: TOF (Tetralogy of Fallot)

Treatment Prescribed: ICR (Intensive Cardiac Rehabilitation)

Concerned Doctor and Surgeon Name: Dr. SOURABH K. GUPTA / Dr. SHYAMJIT / Dr. MILIND PADMAKAR HOTE (AIIMS)

Expenditure for which financial assistance required:-

Total Cost of Surgery: Rs. 67,000/-

Total Fund Required for Surgery: **Rs. 67,000/-**
(Sixty Seven Thousand Only)

डॉ. मिलिंद पदमाकर होते
Dr. MILIND PADMAKAR HOTE
आचार्य/Professor
सी.टी.वी.एस. विभाग/Department of C.T.V.S.
अ.भा.आ.सं., नई दिल्ली/A.I.I.M.S., New Delhi-29

Hospital Name & Address
All India Institute of Medical Science
Ansari Nagar, New Delhi-110029

Doctor's Name with Department & Seal
Dr. SOURABH K. GUPTA / Dr. SHYAMJIT / Dr. MILIND PADMAKAR
(Department of Pediatric Cardiac Sciences, AIIMS)

Declaration:-
I declare that the information given above is true and I am not able and not in position to afford the treatment expanses of the child.

Signature of the Parents/Guardian

Life Care Regeneration Association®
Head Office:- A-223, LGF, Shivalik,
Malviya Nagar, New Delhi-110017
for LCRA seal
Authorised Signatory

Date:- 20-02-2023
Place:- New Delhi

All Contribution to 'LCRA' are exempted from Income Tax Under Section 80G of I.T.Act,1961 DIT(E)2008-09/L-669/1186

-: Your Support Can Be Save Someone Life :-

शरीरमाद्यं खलुधर्मसाधनम्

CARDIO-THORACIC CENTRE
ALL INIDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI – 110029

Date : 30/11/22

ESTIMATE CERTIFICATE / अनुमानित व्यय प्रमाण पत्र

Name of Patient Mr./Ms./ रोगी का नाम श्रीमान/श्रीमती Saarim Khan

Age/उम्र 4.4 yrs Sex/लिंग M CV No. / CTVS No./सीवी संख्या/सीटीवीएस संख्या 107234-CTVS

UHID No./यूएचआईडी संख्या. 10450 5703

Nature of Disease / रोग का नाम TOF

Nature of Surgery/Procedure required / सर्जरी/प्रक्रिया की आवश्यकता ICR

Units of Blood required for operation / ऑपरेशन के लिए आवश्यक रक्त की यूनिट 40

Package charges for Surgery/Procedure / सर्जरी/प्रक्रिया के लिए पैकेज शुल्क 67,000

The above mentioned amount must be deposited in advance by bank draft/Electronic transfer drawn in favour of **"AIIMS CT PATIENT'S ACCOUNT"** / **"AIIMS ANGIOGRAPHY PATINET'S ACCOUNT".**

(A/c No.10874584258, IFSC Code : SBIN0001536) **(for CTVS Surgical Patients)**

(A/c No.10874584269, IFSC Code : SBIN0001536) **(for Cardiology Patients)**

The said estimate will be valid for employees of CGHS/ESI/Govt. undertakings and their beneficiaries. This will also be applicable for seeking financial assistance from National Illness Fund, Prime Minister Relief Fund & from other sources.

उपर्युक्त राशि को नीचे दिए गए सम्बंधित पक्ष में बैंक ड्राफ्ट / इलेक्ट्रोनिक हस्तांतरण द्वारा अग्रिम रूप से जमा किया जाना चाहिए।

"एम्स सीटी पेशेंट अकाउंट" / **"एम्स एन्जिओग्राफी पेशेंट अकाउंट"**

(A/c No.10874584258, IFSC Code : SBIN0001536) **(सी.टी.वी.एस. सर्जरी मरीजों के लिए)**

(A/c No.10874584269, IFSC Code : SBIN0001536) **(कार्डियोलॉजी मरीजों के लिए)**

अनुमानित व्यय सीजीएचएस / ईएसआई / सरकार स्वायत संस्था और उनके लाभार्थियों तथा कर्मचारियों के लिए भी मान्य होगा। यह राष्ट्रीय आरोग्य निधि, प्रधान मंत्री राहत कोष और अन्य स्रोतों से वित्तीय सहायता मांगने के लिए भी लागू होगा।

For any query related to package charges/money deposition, please contact Accounts Section Room No. 105 (Basement, C.N. Centre)

पैकेज शुल्क / रूपये जमा करने से संबंधित किसी भी पूछताछ के लिए, कृपया लेखा अनुभाग कमरा न. 105 (बेसमेंट, सी.एन. सेंटर) में संपर्क करें.

Dr NS Manjunatha
SR CTS

वरिष्ठ रेजीडेंट / Senior Resident
सी.टी.वी.एस. विभाग / Deptt. of C.T.V.S.
हृदय केन्द्र, अ.भा.आ.सं., नई दिल्ली
C.N. Centre, A.I.I.M.S., New Delhi

(Signature & rubber Stamp of Consultant)

DEPARTMENT OF CARDIOVASCULAR RADIOLOGY AND ENDOVASCULAR INTERVENTIONS
Cardio -Thoracic Centre
A.I.I.M.S., Ansari Nagar, New Delhi-110029

Patient Name: Saarim Khan	Age/Gender: 0 Years and 8 Months / M
Patient UH ID : 104505703	Location : CARDIAC
Accession No: 799073	Ref. By : Dr.Saurabh Kumar Gupta
Date of Examination : 18/06/2019	CV Number : 15217/19
CR Number : 0	

Investigation Report

CT FOR SUSPECTED TETRALOGY OF FALLOT

FINDINGS

Abdominal situs: Normal, Bronchial situs: Normal, Atrial situs: Normal, Cardiac situs: Normal
Systemic Veins: Normal, Pulmonary Veins: Normal
Atria: Normal. Veno-atrial connections: Normal
Atrioventricular connections: Normal
Subaortic VSD with aortic over-ride.
Aorta: Left aortic arch with normal branching
Pulmonary artery: Confluent. Infundibular PS.
RPA: 7 mm. LPA: 6 mm. DTA: 7mm
PDA: Absent
Coronaries: Normal
No significant aorto-pulmonary collaterals.
Lung parenchyma and mediastinum: Normal

IMPRESSION

TOF. Confluent, good-sized pulmonary arteries
No significant aorto-pulmonary collaterals

Cardiac Radiologist: Dr.Vineeta Ojha / Dr Arun Sharma

Please share your feedback to improve our hospital on the Website link: meraaspataal.nhp.gov.in

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब० रो० वि०
अ० भा० आ० सं०, नई दिल्ली – 110029

Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi-110029

हृदय रोग विज्ञान/सी.टी.वी.एस. ओ.पी.डी.
CARDIOLOGY/CTVS OPD
सोमवार/बुधवार/शुक्रवार
Monday/Wednesday/Fri.
(दोपहर के बाद)
Afternoon

दिनांक / Date

CTVS- 107234

CV 2019/014/0015217 ₹0
UHID: 104505703
Date 13/12/2019 Fri
Name SAARIM KHAN
S/O IRFAN KHAN
Phone No. 9999565641
Consultant Room 5
SR Room

Cardiology
CTVS (107234/2019)
1Y 1M 27D
/M
JSSK
Dr. MILIND PADMAKAR HOTE

विभाग / Dept

आयु / Age: 1 Y

ब० रो० / O.P.D.

लिंग / Sex: M

CV 15217/19

Diagnosis

Date 13/12/19

1 year 2 months

wt 7.64

o TOF

o No yells

o CTA - Good sized PAs
(18/6/19) No significant APC.

(41)
R.18
13/12/19

Plan for
TOF correction

Rx
1) Tab Ceptar 10
1 — 1 — 1

2) Tonoferon drops
7 days BD.

exam
c/o
cough
+
sedated
(1/3/23)

Refd to CTVS (37)

13/12/19

दिनांक
Date

Date	
Reviewed R-5 (3) 13/12/19	Accepts for ICR & proof. M.P. Hote
PDOA 14/9/20	- Deposit - Rs 67,000/- at AIIMS CT PATIENTS ACCOUNT
	- Deposit 6/10 blood at CNC blood bank.
	- Viral markers.
	m x xx
	bt x. xx
R-5 (33) 30/3/22	9/12/22
	please come 7/12/22

भारत सरकार
GOVERNMENT OF INDIA

इरफ़ान खान
Irfan Khan
जन्म तिथि / DOB: 05/07/1989
पुरुष / MALE
Mobile No.: 9999565641

4607
VID : 9144 1255 5677 9520

मेरा आधार, मेरी पहचान

भारत सरकार
GOVERNMENT OF INDIA

Saarim Khan
DOB: 21/10/2018
MALE
Mobile No: 9999565641

0475

This Aadhaar is valid till 5 years of age only

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

आधार

Address:
S/O Amin Khan, H.NO. 156,
HAJI BHUL PADA MOHALLA,
NEAR BEACH WALI MASJID,
Chandan Hola, South Delhi,
Delhi - 110074

पता:
S/O अमिन खान, मकान न०. १५६, हाजी भूल पाडा मोहल्ला,
निकट बीच वाली मस्जिद, चन्दन होला, दक्षिणी दिल्ली,
दिल्ली - 110074

Download Date: 10/07/2018

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आधार

Download Date: 19/09/2019

पता:
द्वारा: इरफान खान, हाउस न-156,, हाजी भूल पद मोहल्ला,,
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