





 **SWASTIK**
MULTISPECIALITY HOSPITAL

Mahna Road, Opp. Dana Bank, Ballabgarh

0129-2303438

E-Mail : swastikhospitalfaridabad@gmail.com

INDOOR FILE

Bed No.	
Regd. No.	
OPD No.	
IPD No.	7126
D.O.A.	11/05/2014
D.O.D.	

Patient's Name B.D. Reena
S/W of Gopal Singh Age 2.D Sex F
Occupation Marital Status
Address V.Po Asanti, Teh. Distt. Palwal, HR
Phone No.
Consultant Incharge Dr. Pawan Sharma Relation father

Patient Name: **Ms. S. SETHI** Age / Sex: **2 days / F**
 Ref: **Dr. SWASTIK MULTISPECIALITY HOS.** Date: **01/11/2023**
 Reg. No: **20788**
 Reported on: **01/11/2023 06:25 PM**

HAEMATOLOGY
COMPLETE BLOOD COUNT (CBC)

TEST	VALUE	UNIT	REFERENCE
Haemoglobin	L 14.2	g/dl	17 - 23
Total Leukocyte Count	H 19,100	cumm	4,000 - 11,000
Differential Leukocyte Count			
Neutrophils	70	%	40 - 80
Lymphocyte	23	%	20 - 40
Eosinophils	04	%	1 - 6
Monocytes	03	%	2 - 10
Basophils		%	< 2
Platelet Count	2.29	lakhs/cumm	1.5 - 4.5
Total RBC Count	H 5.0	million/cumm	3.9 - 4.8
Hematocrit Value, Hct	H 48.7	%	36 - 46
Mean Corpuscular Volume, MCV	97.4	fL	83 - 101
Mean Cell Haemoglobin, MCH	28.4	Pg	27 - 32
Mean Cell Haemoglobin CON, MCHC	L 29.2	%	31.5 - 34.5
Mean Platelet Volume, MPV	9.3	fL	6.5 - 12
W.D.W. - SD	H 57.5	fL	39 - 46
W.D.W. - CV	H 16.7	%	11.6 - 14

TEST	VALUE	UNIT	REFERENCE
Blood Group & Rh.			
ABO	O		
Rh (ANT) - D)	POSITIVE		

SWASTIK
 Multispecialty
 Lab Services


 Dr. Kamal Kishore
 M.B.B.S. D.C.P. General Pathologist
 Reg. No. 2021-2047



Name of REENA

Age / Sex:

2 days / F

Dr. SWASTIK MULTISPECIALITY HOS.

Date:

01/11/2023

82706

01/11/2023

Reported on:

01/11/2023 06:25 PM



BIOCHEMISTRY

LIVER FUNCTION TEST (LFT)


NAME	VALUE	UNIT	REFERENCE
Serum Bilirubin (Total)	0.89	mg/dl	up to 12
Serum Bilirubin (Direct)	0.23	mg/dl	0 - 0.3
Serum Bilirubin (Indirect)	0.66	mg/dl	0.2 - 1
ASOT (AST)	25.6	U/l	0 - 40
ALOT (ALT)	29.0	U/l	10 - 40
Serum Alkaline Phosphatase	145.6	U/l	100-250
Serum Protein	6.2	g/dl	
Serum Albumin	4.0	g/dl	3.2 - 5.4
Globulin	2.20	g/dl	1.8 - 3.6
A/G Ratio	1.82		1.1 - 2.1

KIDNEY FUNCTION TEST (KFT)

NAME	VALUE	UNIT	REFERENCE
BUN	14.10	mg/dl	7.9 - 20
Serum Urea	30.2	mg/dl	10-50
Serum Creatinine	0.9	mg/dl	0.5 - 1.4
Serum Uric Acid	4.4	mg/dl	2.6 - 7
Serum Sodium	145.6	mmol/L	130 - 180
Serum Potassium	4.2	mmol/L	3.2 - 5.7
Urea - Creatinine Ratio	33.56		
BUN - Creatinine Ratio	15.67		

SEROLOGY & IMMUNOLOGY

NAME	VALUE	UNIT	REFERENCE
C-Reactive Protein (CRP) (Quantitative)	H 14.5	mg/dl	< 6.0 mg/l

Patient Name: Mrs. N. REDNA Hospital No: 01708 Date: 01/11/2023	Age / Sex: 2 days / F Date: 01/11/2023 Reported on: 01/11/2023 06:25 PM	
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HAEMATOLOGY
COMPLETE BLOOD COUNT (CBC)

	VALUE	UNIT	REFERENCE
Hb	L 14.2	g/dl	17 - 23
Hematocrit	H 19.100	cumm	4,000 - 11,000
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RDW - SD	H 57.5	fL	39 - 46
RDW - CV	H 16.7	%	11.6 - 14

	VALUE	UNIT	REFERENCE
Blood Group & Rh			
RBC	O		
Rh (DFT) (D)	POSITIVE		

SWASTIK
 Multi-Specialty
 Lab Network


 Dr. Kamal Kishore
 M.B.B.S., D.C.P. (Gen. Pathology)
 Reg. No. 957-2017

Name of REENA
 Dr. SWASTIK MULTISPECIALITY HOS.
 65706
 01/11/2023

Age / Sex: 2 days / F
 Date: 01/11/2023
 Reported on: 01/11/2023 06:25 PM


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Urea : Creatinine Ratio	33.56		
BUN : Creatinine Ratio	15.67		

SEROLOGY & IMMUNOLOGY

TEST	VALUE	UNIT	REFERENCE
C-Reactive Protein (CRP) (Quantitative)	H 14.5	mg/dl	< 0.5 mg/dl

Order No:	1501110003	Age / Sex:	2 days / F
Order Date:	01/11/2023	Date:	01/11/2023
Order Time:	01/11/2023	Reported on:	01/11/2023 06:25 PM

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 SWASTIK
 Lab


 Dr. Kamal Kishore
 M.D., D.C.P. (Gen. Pathology)
 Reg. No. 9821-2017



Hospital Recommendation letter

Date: 03/11/2023

Name of the child: Baby of Reena

Age: 2 Days

Gender: Female

Medical Diagnosis: Preterm AGA/M/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 4 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;


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

Signature:

Name of Medical Practitioner: Dr. Pawan Kumar Sharma

Designation: Consultant Paediatrics

Department: Paediatrics

सेवा में

संस्थापक महोदय

मैत्रेय फाउण्डेशन

पुल पटना 800 001

दिनांक: 3-11-23

महोदय,

मेरी बच्ची का कि 13 दिन का है। और
 NICU में भर्ती है। अस्थिनाम आर्यभट्ट मे
 इसका इलाज चल रहा है। इलाज का खर्चा
 बहुत ज्यादा है। हमारे बच्चा बहुत गंभीर स्थिति
 में है। आप सभी लोगों से दया जोड़ कर निवेदन
 है कि मेरे बच्चे को जथा जीवन दान प्रदान करें।
 आपकी आज्ञा कृपा धर्म है।

आशा

गोपाल

Ref no to Shastri Pandu

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