YOUR CHURCH

Save the Child
Smile foundation

SMILE FOUNDATION

Plot No 80, Kh, No 250, Gali No 28, Sushant Vihar Village Delhi 110036 Near Sunny Builder
Ph.: +91 9266897167, 8743917285 Email : support@stcsfoundation.org
Web : www.stcsfoundation.org

Ref. No.....

Date 3/01/2025

Sponsorship form for a Disabled Child Treatment/ Education

Name : Yash Kumar

UHID No. - 1015567?8 CVNo. -2481/16

Date of Birth : 20/6/2015

Disease/ Disability : Completeon Fontain

Treatment Prescribed : Izziumpaid Atresia/ VSD/PSP-BDGlem

Add of rehab centre/School : AIIMS

Father/mother/guardian Name: Krishna Kumar Sharma

Occupation : Farmer **Income PM** 60,000/- Annually

No. of Earning Members : Only one

Any financial assistance for the same purpose if yes received form.....

...../**Requested Elsewhere**..... No .....

Expense on Treatment

- **Purchase of Rehabilitation equipment**
- **Therapy equipment. Music equipment**
- **Specific therapies/play therapy**
- **Muscle relaxant drugs**
- **Botox phenol/nerve block**
- **Hyperbaric oxygen therapy**
- **Reflexology**
- **Special education/ speech/therapy**
- **Any other /surgeries**

Total Amount : 80,000/-

I declare that the information given above is correct and complete in all respect and I am not in position to arrange funds for treatment/ special education of my child.

कृष्णा

Signature parent

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

Physician/ doctor's signature

Save the Child Smile Foundation

To

Save the Child
Smile foundation
Sushant Vihar, Delhi - 110036

Subject - Application for help to a poor Person.

Respected Sir/Mam

This is my humble respect that I am Krishna Kumar Sharma, My Son Yash Kumar. He is undergoing treatment at AIIMS. He is suffering from Heart Disorder. My Son needs to be treated as soon as possible which will cost Rs 80000. I am very poor person.

Please help me financially with Rs 80,000/- So that I can get my son treated as soon as possible. I will be forever greatful to you.

Thank You

Applicant

कृष्णा

(Krishna Kumar Sharma)

Address
Ward-2
Thana- Ramgarh
post- Ramgarh
Kaimur (Bhabua)
Bihar - 821110

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

Date : 9/12/24

ESTIMATE CERTIFICATE / अनुमानित व्यय प्रमाण पत्र

Name of Patient Mr./Ms./ रोगी का नाम श्रीमान/श्रीमती Yash Kumar

Age/ उम्र 9yrs Sex / लिंग M CV No. / CTVS No. / सीवी संख्या/सीटीवीएस संख्या 2481/16

UHID No. / यूएचआईडी संख्या 10155678

Nature of Disease / रोग का नाम Tricuspid Atresia /VSD/ PS P-BD glen

Nature of Surgery / Procedure required / सर्जरी/प्रक्रिया की आवश्यकता Completion Fontain

Units of Blood required for operation / ऑपरेशन के लिये आवश्यक रक्त की यूनिट 4Unit Hood

Package charges for Surgery / Procedure / सर्जरी/प्रक्रिया के लिये पैकेज शुल्क Rs 80,000/-

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

उपयुक्त राशि को नीचे दिये 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)
(कार्डियोलॉजह मरीजों के लिए)

अनुमानित व्यय सीजीएचएस/ईएसआई/सरकार स्वायत संख्या और उनके लाभार्थियों तथा कर्मचारियों के लिए भी मान्य होगा । यह राष्ट्रीय आरोग्य निधि प्रधान मंत्री राहत कोष और अन्य स्त्रोतो से वित्तीय सहायता मांगने के लिये 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 सबंधित किसी भी पूछताछ के लिए, कृपया लेखा अनुभाग, कमरा संख्या 105 (बेसमेंट, सी.एन. सेंटर) में सपंर्क करे ।

Senior Resident
Deptt. of C.T.V.S
N Centre, A.I.I.M.S., New De
(Signature & Rubber Stamp of Consultant)

9990150355

1 188 10155677 9
KUMAR

य वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब. रो. वि.
भा. आ. सं., नई दिल्ली-११००२९

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

दिनांक
Date

CV 2016/014/0002481
UHID: 101556778
Date 25/01/2016 MON
Name YASH KUMAR
S/O KRISHAN KUMAR SHARMA
Phone No. 9097996668
Consultant Room 21
SR Room 21

Cardiology
Paed.Cardiology
8M /M
General
Dr.R JUNEJA
DR VIKAS

विभाग
Deptt.

ब.रो.वि.सं.
O.P.D. No.

उम्र
Age

लिंग
Sex

CCHD + Dp
TA ~ PA
VSD ~ Sev PS
LRTI
CHF ⊖

ECG → LAD, RAE

CTG / S_pO_2 → 65% RA

Refer to Paeds Cardy for LRTI / CxR / VBG / Urine

xy = Clin No evid of

℞

Syp Amoxclav 2 ml tds

2. Syp Tonoferon drop OD
1ml OD

3. T Cplax (10mg) ¼ - ¼ - ¼ x 7d

Viral Scr

Any writing not explained.

Can get operator Outside

In Case of Doubtful symptoms,

after) emergency.

Rem: at room 38 for

Cough Remv 2 extract

Respiration Irregular

SB CMS

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

दिनांक/Date CMS - 234072

विभाग Cardio
Deptt.

नाम Yash Kumar
Name

उम्र 9
Age

यू०एच०आई०डी०सं०
UHID No. 2484/16

पुत्र/पुत्री/पत्नी
S/D/W

लिंग M
Sex

निदान
Diagnosis UHID - 107556778

25/10/24 (23)

File kept for rlw. RLW on 30/10/2024.

30/10/24

Accepted for coily-Rec-CPB.

Fontan Redo

- To deposit ₹ 80,000 at AIIMS CF
- B donate 6 unit of blood at blood bank.

भारत सरकार
Government of India

आधार

बाल आधार

यश कुमार
Yash Kumar
जन्म तिथि / DOB : 20/06/2015
पुरुष / Male

11/02/2020

यह आधार 5 वर्ष की उम्र तक ही वैध है

7587 3999 2595

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

AADHAAR

पता: द्वारा: कृष्ण कुमार शर्मा, ग्राम रामगढ
पोस्ट रामगढ, रामगढ, कैमूर, बिहार, 821110

Address: C/O: Krishna Kumar Sharma,
gram ramgarh post ramgarh, Ramgarh,
Kaimur (Bhabua), Bihar, 821110

7587 3999 2595

1947 help@uidai.gov.in www.uidai.gov.in

8/3/24
दिनांक
Date

8 year old
TA/VSD/PS.
P/BDG - 2016. mild ↓ gradient

c/o pain NRS

No DOE
No orthopnea
chest clear

CVS: No abn. sounds

CBC
SpO2 — 76%

GEN: NSR, LAD

GEN: TA/VSD/PS
P/BDG
Fingers clubbing
No cyanosis
(+) BV fistula.

plan: Cath

cath selection
19/8/2024
Hall C, 4pm
Fixation Rs 6000/-

Adv
① T. Ecosprin 75mg OD
② Syp Vitcoptol. 5ml BD

8/10/24
pay Rs 6000/-
Actus planning done

Redated
07/10/2024

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

1378356
6/3/24

दिनांक/Date

CRS - 84072

विभाग Deptt.	Cardio	नाम Name	Yash Kumar	उम्र Age	8
यू०एच०आई०डी०सं० UHID No.	24814/16	पुत्र/पुत्री/पत्नी S/D/W		लिंग Sex	M
		निदान Diagnosis			

OHIS - 107556778

R04-21
4/3/24

P/ BPGlcm (2016)

Rp
1. T. Ecosprin OD
5mg

Review to
Paed Cardiology
with clinical
for TCPC

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

दिनांक/Date

CRN - 834072

विभाग Cardio
Deptt.

नाम Yash Kumar
Name

उम्र 9
Age

यू०एच०आई०डी०सं०
UHID No. 2481/16

पुत्र/पुत्री/पत्नी
S/D/W

लिंग M
Sex

निदान
Diagnosis OHID - 10155778

R04 (23) 28/10/24

File kept for clw. Rlw on 30/10/2024.

30/10/24

Accepted for early surgery.

Jantan

Advised

- To deposit ₹ 80,000 in AIIMS CF a/c.
- To donate 6 unit of blood in exc blood bank.

दिनांक
Date

Hb 13.5 gm%.

R-21 (20) 29/1/16

Blood transfusion / CT & wound

CT A → Alenn

- Cyclax 10 mg 1/2 BD
- Vitcofol syp 2.5 ml OD
- Syp. Cetirizine 0.5 ml BD x 3 days

P/2 Dharamshala

donate 1 U blood

Senior Resident
Deptt. of CTVS
AIIMS, New Delhi-29

Dharamshala
P/S 10 15 days
30/6/16

R-21 (46) 5/2/16

Reg for 45,000 for Alenn

(5)

Senior Resident
Deptt. of CTVS
AIIMS, New Delhi-29

MCSD (9) non BPL but poor.

Accepted & Dr. V. Devagouran for RDG

PS issue in file.

Deposit. 45000/- paid

AIIMS CT PATIENT ACCOUNT.

4 U Blood.

Blood Group.

PDOA = 17/7/16.

दिनांक
Date

- Lay with test explain.
- Can get operate Outside
- In case of worsing symptoms; attend emergency.
- Rev. at room 3A for Colby Lewis & estimate
- Pre-op lab

SR CNS

ECHOCARDIOGRAPHY REPORT

DEPARTMENT OF CARDIOLOGY, CARDIOTHORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

NAME Yash Kumar AGE 4 SEX M/F DATE 6/3/20

ECHO No. 65 13/20 CV No. ..... UHID No. 10155-6778 C.R. No.....

HEIGHT.....cm WEIGHT.....kg. BSA.....m² Ref. Physician. QTVS

Referring Diagnosis

Quality of Imaging Poor/Adequate/Good Done by Dr. Surender Checked by Dr.....

MITRAL VALVE

Morphology AML - Normal/Thickening/Calcification/Flutter/Vegetation/ Prolapse/ SAM/ Doming

PML Normal/ Thickening / Calcification/ Prolapse/Paradoxical motion/Fixed.

Subvalvular deformity Present/ Absent Score.....

Doppler Normal / Abnormal

Mitral stenosis Present / Absent RR interval.....msec

EDG.....mmHg MDG.....mmHg MVA.....cm2

Mitral regurgitation Absent/Trivial/Mild/Moderate/Severe

TRICUSPID VALVE

Morphology Normal/ Atresia/ Thickening/ Calcification/ Prolaps/ Vegetation/ Doming

Doppler Normal/ Abnormal

Tricuspid stenosis Presentt/Absent RR interval.....msec

EDG mmHg MDG.....mmHg

Tricuspid regurgitation Absent/Trivial/Mild/Moderate/Severe Fragmented Signals

Valocity.....m/sec Pred. RSVP-RAP+.....mmHg

PULMONARY VALVE

Morphology Normal/Atresia/Thickening/Domng/Vegetation

Doppler Normal/Abnormal

Pulmonary stenosis Present/Absent Level

PSG.....mmHg Pulmonary annulus.....mm

Pulmonary regulation Present/Absent

Early diastolic gradient.....mmHg End diastolic gradient.....mmHg

AORTIC VALVE

Morphology Normal / Thickening/Calcification/Restricted Opening/Flutter/Vegetation No. of cusps 1/2/3/4

Doppler Normal / Abnormal

Aortic stenosis Presnnt/Absent Level

PSG.....mm Hg Aortic annulus.....mm

Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe

Measurements		Normal Values		Normal Values
Aorta	17	(21-22mm/m²)	LA es 22	(21-22 mm/m²)
LV es	19	(16-19mm/m²)	LV ed 32	(19-32 mm/m²)
IVS ed		(06-10mm)	PW(LV)ed	(07-11mm)
RV ed'		(4-14mm/m²)	RV Anterior wall	(upto 5mm)
EF		(62-80%)		
IVS Motion		Normal/Flat/Paradoxical		
IAS				

CHAMBERS

LV	Normal/Enlarged/Clear/Thrombus/Hypertrophy
	Contraction Normal/Reduced
LA	Normal/Enlarged/Clear/Thrombus
RA	Normal/Enlarged/Clear/Thrombus
RV	Normal/Enlarged/Clear/Thrombus

PERICARDIUM Normal/Thickened/Calcification/Effussion.

REMARKS P/Bn glem, Tricuspid atria NRCA

PA — LPA 9 mm each
RPA

TEE

(N) glem flow velocity 38 cm/s
c (N) resp. variation
(No) AVVR (N) normal fun

DIAGNOSIS

P/Bn glem / No AVVR / (N) ventricle function / (N) glo
good Confluent PA

Final Impression

Resident Consultant

3/03/2021.

P/BD Glenn

Tricuspid atresia, NRGA.

No AVVR, PA Good sized

MPA - 13 MM

LPA - 9.5MM

RPA - 9.4MM

Glenn Flow patent

Laminar flow

respiratory Variation (+)

LVEs/ED : 20/31

Normal Biventricular function.

N

on

6/3/24

62 wed

2pM

SR

TA

P/BD Glenn

(n) Laminar Glenn flow, : respiraty mdn

No AVVR

(n) BTS

MPA - 13

RPA = 10

Wt. 8

PW - 7

Wt. 3J

S = 26

बिहार सरकार

Government of Bihar

फॉर्म / **Form - XVI**

जिला / **District :** कैमूर (भभुआ), अनुमंडल / **Sub-Division :** मोहनियॉ, अंचल / **Circle :** रामगढ़

आय प्रमाण-पत्र / **Income Certificate**

प्रमाण-पत्र संख्या **: BICCO/2024/10926761** दिनांक **: 05/11/2024**

प्रमाणित किया जाता है कि यश कुमार **(Yash Kumar)**, पिता **(Father)** कृष्णा कुमार शर्मा **(Krishna Kumar Sharma)**, माता **(Mother)** संध्या देवी **(Sandhya Devi)**, ग्राम / नगर **- Ramgarh**, डाकघर **- Ramgarh**, थाना **- रामगढ, प्रखंड - रामगढ़, अनुमंडल - मोहनियॉ, जिला - कैमूर (भभुआ)**, राज्य **-** बिहार एवं उनके परिवार की कुल वार्षिक आय निम्नांकित है **: -**

सरकारी सेवा से आय	**: ₹ 0 /-**	व्यवसाय से आय	**: ₹ 0 /-**
कृषि से आय	**: ₹ 0 /-**	अन्य स्रोतों से आय	**: ₹ 60000/-**
कुल आय (वार्षिक)	**: ₹ 60000/-**		

स्थान **:** रामगढ़
दिनांक **: 05/11/2024**

(हस्ताक्षर राजस्व अधिकारी / **Signature Revenue officer)**

QR Code की जाँच **https://serviceonline.bihar.gov.in** पोर्टल एवं **Play Store** पर उपलब्ध **ServicePlus Mobile App** से करें।
वैधता: निर्गत होने की तिथि से अगले एक वर्ष की अवधि तक।
नोट: यह दस्तावेज **DigiLocker** पर भी उपलब्ध है।

बिहार सरकार

भारत सरकार
GOVERNMENT OF INDIA

कृष्ण कुमार शर्मा
Krishna Kumar Sharma
जन्म तिथि/ DOB: 14/02/1991
पुरुष / MALE

7250 0994 4054

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:
आत्मज: खोभारी शर्मा, वॉर्ड-02, थाना-रामगढ, शिव मंदिर, ग्राम-रामगढ, पोस्ट-रामगढ, रामगढ, कैमूर, बिहार - 821110

Address:
S/O: Khobhari Sharma, ward-02, thana-ramgarh, shiv mandir, gram-ramgarh, post-ramgarh, Ramgarh, Kaimur (Bhabua), Bihar - 821110

7250 0994 4054

MERA AADHAAR, MERI PEHACHAN

भारत सरकार

Government of India

संध्या देवी

Sandhya Devi

जन्म तिथि / DOB : 09/12/1994

महिला / Female

5634 6279 0161

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता: अर्धांगिनी: कृष्ण कुमार शर्मा, थाना-रामगढ, ग्राम-रामगढ, पोस्ट-रामगढ, रामगढ, कैमूर, रामगढ़, बिहार, 821110

Address: W/O: Krishna Kumar Sharma, thana-ramgarh, gram-ramgarh, post-ramgarh, Ramgarh, Kaimur (Bhabua), Ramgarh, Bihar, 821110

5634 6279 0161

1947

help@uidai.gov.in

www.uidai.gov.in