





Billing Instructions

(Excluding-Medicine, Bed, Blood, ICU, investigation) For

1. Actual 2. Package: Rs.

3. Medicines: Own/Hospital

Provisional Diagnosis:

Scalder Rum

Investigations Advised:

CRP, CRP. S. cell.

Care Plan: RK

① ay

② ay

③ ay

④ ay

⑤ ay

⑥ ay

Diet / Nutrition Advice:

⑦

Safe Parenting:

Immunization:

Rehabilitation Advice:

R.C 200mg 1.0

Flz. ⑧ 30ml

T.T 1.0
- Advant 300 1.0

- mil. 75 g.

on set 1.0 1.0

of on set 0.5 ay

9 ay 91 sit 1 ay

CHILD CARE INDIA TRUST

Dressing i

monitor vis 1.0

MLOW SID.

⇒ mfw DNS + kel @ 20 ml/hr

sp. Azith. (200mg vml @)

sp. Biglax 5ml @

RMO Name:

Date & Time:

Signature:

Doctor Name: DP

Date & Time: 28/2/22

Signature:



ECHS / RGHS / ESIC / TPA / Cash / CSBY

Jindal Super Specialty Hospital



(A Unit of Raj Jindal Hospital and Research Centre Pvt. Ltd.)
SPM Nagar, Bharatpur-321001 (Rajasthan)

INDOOR TICKET

MLC NO.: 2

Reg No: 204507 LPD No: 23-22962 Ward/Bed: f.w room Consultant: Dr. K. J.

Patient Name: Kanoy G WSD/No: Specialist Age: 4y Sex: M F

Address: Sirsa and Rudrapur Bharatpur (Def.) Ph. No. /

D.O. Admission & Time: 28/03/25 D.O. Operation & Time: /

D.O. Discharge & Time: / D.O. Delivery & Time: /

Final Diagnosis: SCaldehy burn

Chief complaints with Duration:

do. Burn in hot milk
↓ urine output
Dehydration.

Burn lower limb.
approx. 10%.
20%.

Vitals

BP: /
HR: 110/min
RR: 20
SpO₂: 95%
Temp: 98.4 F

Examination

CNS: conscious
CVS: I-II/III/IV
Resp: N
Abd: soft B.S.D
Local: chance B.I.C
AK +

CHILD CARE INDIA TRUST

Past History:

DM: NAD HT: NAD
CAD: Asthma: /

any other (Medical/Surgical):

Allergies:

Medication History:

Pain Scale: Wong-Baker FACES

0 NO PAIN
1 MILD PAIN
2 MILD TO MODERATE PAIN
3 MODERATE PAIN
4 SEVERE PAIN
5 SEVERE PAIN

Page: 1 of 1 Date: 28/03/25 Duration: / Stage: I / II / III / IV / V / VI
Location: / Action: Resuscitated / No

DOC NO: JSSH/CNC/TT/001



Name : Baby KAVYA
Age-Sex : 4Y / F
Consultant : KAPIL JINDAL

Reg. No : 204507
Accession No. : 0250328038
Bill / IPD No. : OB23317261

IPD/OPD: OPD
Category : GENERAL

Registration No

Accession No

HAEMATOLOGY*

Sample Collected: 28-03-2025 10:03AM
Sample Type: EDTA BLOOD

Report Gen At: 28-03-2025 10:33AM

Test Name	Status	Results	Unit	Biological Reference Range
HAEMOGLOBIN	H	14.70	gm/dl	11-14
WBC	H	17.30	10 ³ /ul	5.0-15.0
NEUTROPHILS	H	73.70	%	45-70
LYMPHOCYTES		20.30	%	20-40
MONOCYTES		5.30	%	2-10
EOSINOPHIL	L	0.30	%	1-6
BASOPHIL		0.40	%	0-2%
HAEMATOCRIT(HCT)		44.40	%	36-46
Red Cell Count (TRBC)	H	5.42	million/cumm	4.0-5.2
MCV		82.00	fL	75-87
MCH		27.20	pg	24-30
MCHC		33.10	g/dl	31-37
PLATELET COUNT	H	499.00	10 ³ /ul	200-490

BIOCHEMISTRY

Sample Collected: 28-03-2025 10:03AM
Sample Type: SERUM / PLASMA

Report Gen At: 28-03-2025 10:33AM

Test Name	Status	Results	Unit	Biological Reference Range
DPF		1.5	mg/L	0.6-5.0

BIOCHEMISTRY**

Sample Collected: 28-03-2025 10:03AM
Sample Type: BLOOD

Report Gen At: 28-03-2025 10:33AM

Test Name	Status	Results	Unit	Biological Reference Range
SODIUM	L	133.17	mmol/L	136-150
POTASSIUM		4.73	mmol/L	3.50-5.0
CHLORIDE		104.54	mmol/L	98-106

Preeti

DR. Preeti Tyagi

MD PATHOLOGY, MCI/09-35445

TECHNICIAN

Proforma Invoice / Fund Requisition Report

Patient Details

Patient Name: Baby Kavya

Father's Name: Pradeep

Contact Number: 9971132733

Admission Date: 28-03-2025

Hospital Name: Jindal Super Specialty Hospital

Overall Analysis

Baby Kavya has suffered severe burns below her waist in a tragic accident. She requires immediate medical intervention, including surgeries, burn dressings, medications, and specialized care for a successful recovery. Her condition is critical, and timely treatment is essential to prevent complications. Her family is unable to bear the cost, and we are seeking generous contributions to support her treatment.

Fund Requirement - During Hospital Stay

Fund Description	Amount (INR)
Hospital Stay & Bed Charges	30,000
Surgery & Burn Dressing Procedures	25,000
Medications & Pain Management	15,000
Wound Care & Daily Dressing	12,000
IV Fluids & Nutrition Support	8,000
Skin Grafts & Specialized Treatment	18,000
Doctor Consultation & Follow-ups	7,000
Miscellaneous & Emergency Expenses	5,000
Total	1,20,000

Total (in words): One Lakh Twenty Thousand Only

We urge kind-hearted individuals to contribute towards Baby Kavya's treatment and support her journey to recovery. Every contribution will directly cover medical expenses. Thank you for your generosity.

Pradeep

Request for Financial Support for Kavya

To,
The Chairperson,
Child Care India Trust

Respected Sir/Madam,

I, Pradeep, Father of Kavya, currently admitted to Jindal Super Speciality Hospital, am writing to seek your kind support for the medical treatment of my child. Kavya was admitted on 28-Mar-2025 due to severe burn injuries and is undergoing critical care, including skin grafting surgeries.

The total estimated cost of the treatment amounts to INR 1,20,000. Due to my financial constraints, I am unable to bear the entire expense on my own. I humbly request your esteemed organization to provide financial assistance to support my child's recovery. Your generous contribution will make a significant difference in ensuring the timely and adequate treatment my child urgently needs.

Please find attached the proforma invoice and necessary documents for your kind perusal. I am hopeful for your positive consideration of my request. Kindly let me know if further details are required to process this request.

Thank you for your support and understanding.

Yours sincerely,

Pradeep

Contact Number: 9971132733

CHILD CARE INDIA TRUST

Pradeep