



# **EK PARIVARTAN** **F O U N D A T I O N**

**Working for a Better Tomorrow**

**EK PARIVARTAN FOUNDATION REGISTRATION NO: 130**

**EK PARIVARTAN FOUNDATION PAN NO: AAATE9879M**

**EK PARIVARTAN FOUNDATION 80G NO: AAATE9879MF20221**

**EK PARIVARTAN FOUNDATION NGO DARPAN : DL/2019/0230573**

**EK PARIVARTAN FOUNDATION GUIDESTAR INDIA : 11308**

**EK PARIVARTAN FOUNDATION CSR REG NO : CSR00040314**

**EK PARIVARTAN FOUNDATION TM APP NO : 5822870**

**EK PARIVARTAN FOUNDATION MSME NO : DL-02-0040746**

**EK PARIVARTAN FOUNDATION WEBSITE : [WWW.EPFNGO.ORG](http://WWW.EPFNGO.ORG)**

**EK PARIVARTAN FOUNDATION E-MAIL : [INFO@EPFNGO.ORG](mailto:INFO@EPFNGO.ORG)**

<b>PATIENT NAME</b>	<b>MASTER TARUN KUMAR</b>
<b>PATIENT FATHER NAME</b>	<b>MR. RAJA KUMAR</b>
<b>DOB AND GENDER</b>	<b>8 YR / MALE</b>
<b>DISEASE NAME</b>	<b>(TBSA) BURN WITH FIRE</b>
<b>TREATMENT HOSPITAL</b>	<b>S.N MEDICAL HOSPITAL AGRA</b>
<b>REGISTRATION NO</b>	<b>11037</b>
<b>DEPARTMENT NAME</b>	<b>ED/S DEPT.</b>
<b>TREATMENT COST</b>	<b>APPROX 2 TO 3 LAKH</b>
<b>PATIENT FATHER OCCUPATION</b>	<b>LABOR</b>
<b>PATIENT ADDRESS</b>	<b>AGRA</b>



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Reg No.- 130  
PAN No.- AAATE9879M  
Unique ID : DL/2019/0230573  
80G No. : AAATE9879MF20221  
CSR No. : CSR0000314  
MSME (UDYAM) : DL-02-0040746

सेवा में,

एक परिवर्तन फाउंडेशन  
संस्था  
नई दिल्ली

निवेदन इस प्रकार है कि मेरा नाम राजा है  
मे आगरा का रहने वाला हूँ। मेरे बेटे का नाम  
तरुण कुमार है जो सिर्फ आठ साल का है।  
जो आगरा में गिरने की वजह से बुरी तरह  
जल गया है, जिसका इलाज आगरा के  
एस.एन. मेडिकल में चल रहा है।  
काफी इलाज में खर्च करने की वजह से मेरी  
संस्था से प्रार्थना है वो मेरे बच्चे के लिए  
आर्थिक प्रयत्न प्रदान करे

धन्यवाद

प्राणी

राजा











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INDOOR BED HEAD TICKET

S. No. \_\_\_\_\_

S.N. Medical College Hospital, AGRA

Department: ER/S

M.O. /c : Dr. - Sanjay Lal Yadav, Sr

O.P.D./ Registration No. 11037 M.R.D. No. : \_\_\_\_\_

Patient's Name : Tarun Kumar Age : 8 y M Sex : \_\_\_\_\_

S/D/W : Boys Ward : Burn Bed No. : \_\_\_\_\_

Address : 47/7 Noida Surajpura Date of Admission : \_\_\_\_\_

P/S mm gata Agra Provisional Diagnosis : TBSA Burn

D.O.A. : 22/01/21 at 8:33 Final Diagnosis : \_\_\_\_\_

Marital Status : \_\_\_\_\_ Date of Transfer : \_\_\_\_\_

Educational Status : \_\_\_\_\_ Date of Discharge : \_\_\_\_\_

Occupation : \_\_\_\_\_ Aadhaar No. : \_\_\_\_\_

Result : Discharge/LAMA/Abscond/Death Mobile No. : \_\_\_\_\_

Sign. of \_\_\_\_\_

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NOTES

2<sup>nd</sup> Year..... 3<sup>rd</sup> Year.....

# SHRI MEDICAL COLLEGE AGRA

## POOR PROGNOSIS CONSENT / HIGH RISK CONSENT

हमें हमारी भाषा में गली गांठि रागडा दिया गया है कि हमारे मरीज की हालत बेहद खराब है।

यह सब जानते हुए भी हम अपने मरीज को भर्ती कर रहे हैं, इस उपरान्त अगर मरीज की जान जाती है तो इसकी पूरी जिम्मेदारी हमारी होगी। इसमें डॉक्टर, अस्पताल या कर्मचारी की कोई जिम्मेदारी नहीं होगी।

नाम - तंजु

रिश्ता - पुत्र

फोन नं० -

समय - 8:23

दिनांक - 22/01/24

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PAST HISTORY No history of DM/HTN/IE

FAMILY HISTORY not significant

PERSONAL HISTORY not significant

TREATMENT HISTORY/  
ANY OTHER RELEVANT HISTORY/  
ALLERGY HISTORY ] not significant

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# Physical Examination

General Examination :

lateral  
Icterus  
cyanosis  
Clubbing  
Lymphadenoma  
oedema

absent.

System Examination :

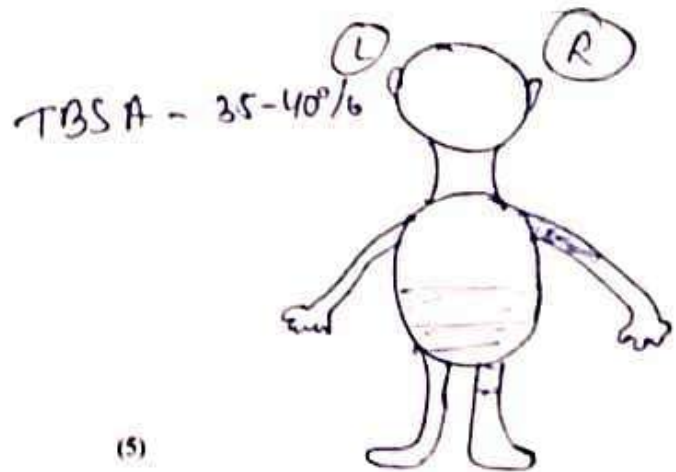
CVS - S<sub>1</sub> and S<sub>2</sub> normally heard

Resp - B/L clear

PIA - soft.

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Local Examination :



Registration Validity 15 Days

## Clinical History

### CHIEF COMPLAINTS:

- ① c/o - B/L lower limb pain (knee joint) x 4 years
- ② Back pain x 2 years.
- ③ fever (on and off) x 20 days.
- ④ cough & sputum x 1 1/2 months
- ⑤ Anarthrosis x 15 days.
- ↓ urine stream, x 10-15 days
- ↑ urine frequency
- B/L lower limb swelling x 15 days

DRY OF PRESENCE OF ILLNESS:

c/o vomiting, headache, ~~diarrhea~~ loose stool, trauma, etc

# Physical Examination

## Examination :

BP - 110/70 mmHg

Pulse - 66/min

SpO<sub>2</sub> - 90% RA

RIS - 242 mg/dL

V - 12 @  
S - @

P  
S  
C  
C  
L  
E - present

## n Examination : ~~Present~~

• LVS - S1C2 (N) No murmurs.

• CVS - E<sub>2</sub> V<sub>2</sub> M<sub>2</sub>

• RIS - B/L crepts +

• present - RA  
L

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## mination :

History of Present Illness (HPI)

Tarun Kumar S/o Rajee  
R/o Nuri darwaja P/S mm gata  
Agral

M.O.I./C →

CMO →

RSO →

Adv. →

after 22.00

Investigation:

- ~~ECG~~
- ~~ECG~~
- ~~ECG~~
- ECG
- Chest X-ray
- PA
- Temp. 100
- ~~BP~~
- ~~HR~~
- ~~RR~~
- ~~Pupils~~

Investigation

HB 10.0 DLC FC

Blood Urea, S Creatinine

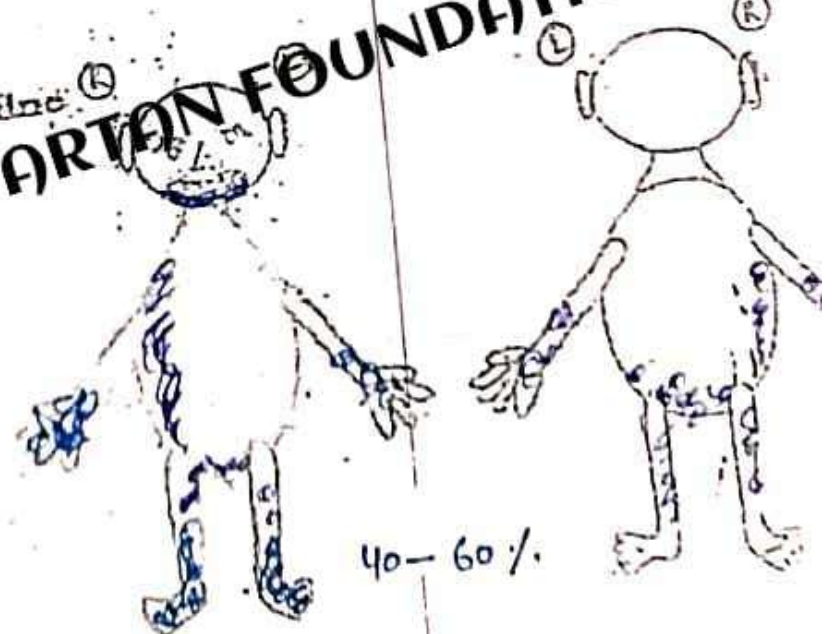
~~ECG~~

~~ECG~~

~~ECG~~

~~ECG~~

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40-60%

# Progress Report

Date	Progress / Vitals	Treatment	Progress /
<p><u>Adm</u></p> <ul style="list-style-type: none"> <li>• CBC LFT / KFT / Electrolyte</li> <li>• HbA1c / HCV / HIV</li> <li>• Noct Head</li> <li>• E. Lipid profile</li> <li>• Urine R/m.</li> </ul>	<p>Diabetic Retinopathy Obstructive megaly with C2 &amp; CVA Pneumonia</p>	<p>Metoprolol Aspirin Pneumonia</p>	
<p>Target RBS - 140 to 160 mg/dl</p>	<p>Ins. Meropenem Ins. Metrogyl Ins. Pantop Ins. Emeral Ins. HRE</p>	<p>100 ml 100 cc IV stat 100 IV QD 4 mg T-DS 10 unit in 30 min @ 30 min</p>	
		<p>Net ← ↑ parent Budecort   3mg</p> <p>14 f NS/RL 100</p>	

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*[Signature]*