



OCEAN WELFARE FOUNDATION

LET'S MAKE A CHANGE TOGETHER



OCEAN WELFARE FOUNDATION
LET'S MAKE A CHANGE TOGETHER

Reff : OWF/2023/005

Date : 26.10.2023

Patient Registration Form for Medical Treatment

26.10.2023

Sr.	Particulars		
1	Patient Name :	Rajeev Singh	
2	Age/Sex	7Y/Male	
3	Father Name	Sanjeev Kumar Singh	
4	Occupation	Farmer	
5	Address	Tarkulwa, Deoria, Uttar Pradesh	
6	Hospital Name	AIIMS New Delhi	UHID : 101102245
7	Nature Of Disease	DSO + AVV Repairing	
8	Required Treatment	CCHD (TQP) TGA - (Heart Surgery)	
9	Estimated Cost	4Unit Blood + 165000/- (One Lac Sixty Five Thousand Only.)	
10	Summary	Rajeev Singh is 7 Years old male child. He is suffering from Critical Heart Disease and need Heart Surgery (Cost Mentioned above). His Father is a small farmer and earns very low, Treatment cost is very hard to afford to his family, so his father requested " OCEAN WELFARE FOUNDATION " for Financial Support.	
11	Signature Of Family	Authorised Signatory & Seal	Hospital Seal & Signature
12	Sanjiv shingh	 OCEAN WELFARE FOUNDATION Managing Trustee	 वरिष्ठ रेजिडेंट / Senior Resident सी.टी.एच. विभाग / Dept. of C.T./MS. इस संप्रिका के ब. अ. मा. आ. सं., नई दिल्ली C.N. Senra, A.I.I.M.S., New De.

OCEAN WELFARE FOUNDATION

Regn. No.: 70/357-394/3344/2023

Office No. 202, D-15, Sector-6, Noida, UP-201301

Phone : 01204091619, Email : support@owf.org.in, Website : www.owf.org.in



सर्वोपर्युक्तं कर्म सर्वोपर्युक्तम्

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



Date : 25/9/23

ESTIMATE CERTIFICATE / अनुमानित व्यय प्रमाण पत्र

Name of Patient Mr./Ms./ रोगी का नाम श्रीमान/श्रीमती Rajeev Singh
 Age/ उम्र 7 yrs Sex/ लिंग M CV No. / CTVS No. / सीवी संख्या/सीटीवीएस संख्या 17668/15
 UHID No. / यूएचआईडी संख्या 101102245
 Nature of Disease / रोग का नाम DSA + AVV repairing
 Nature of Surgery / Procedure required / सर्जरी/प्रक्रिया की आवश्यकता CHD (T.C.A.P) T.C.A
 Units of Blood required for operation / ऑपरेशन के लिये आवश्यक रक्त की यूनिट 40 unit blood
 Package charges for Surgery / Procedure / सर्जरी/प्रक्रिया के लिये पैकेज शुल्क 1,65,000/-

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) / (A/c No. 10874584269, IFSC Code : SBIN0001536)
 (for CTVS Surgical Patients) (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 / इलेक्ट्रॉनिक हस्तांतरण द्वारा अग्रिम रूप से जमा किया जाना चाहिए ।

"एम्स सीटी पेशेंट अकाउंट"
 (A/c No. 10874584258, IFSC Code : SBIN0001536)
 (सी.टी.वी.एस. सर्जरी मरीजों के लिए)

"एम्स एन्जिओग्राफी पेशेंट अकाउंट"
 (A/c No. 10874584269, IFSC Code : SBIN0001536)
 (कार्डियोलॉजह मरीजों के लिए)

अनुमानित व्यय सीजीएचएस/ईएसआई/सरकार स्वायत्त संख्या और उनके लामार्थियों तथा कर्मचारियों के लिए भी मान्य होगा । यह राष्ट्रीय आरोग्य निधि प्रधान मंत्री राहत कोष और अन्य स्रोतों 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 / रुपये जमा करने से संबंधित किसी भी पूछताछ के लिए, कृपया लेखा अनुभाग कमरा नं. 105 (बेसमेंट, सी.एन. सेंटर) में संपर्क करें ।

वरिष्ठ रेसिडेंट / Senior Resident
 सी.टी.वी.एस. विभाग / Dept of C.T.V.S.
 हृदय रोगों के लिए, अ.भा.आ.सं., नई दिल्ली
 (Signature Centre) / (Signature Centre)

सेवा में

OCEAN WELFARE FOUNDATION

Office No. 202 D-15, Sector-6, Noida

UP-201301

विषय - एक गरीब व्यक्ति की सहायता हेतु प्रार्थना पत्र



महोदय,

सौजन्य निवेदन यह है कि मैं संजीव सिंह

मेरा बेटा Raveev Singh उत्तर प्रदेश के रहने वाले है मेरे पुत्र का इलाज AIMS में चल रहा है। मेरे बेटे का दृष्ट रोग है, डॉक्टरों के सल्ले अनुसार इसका इलाज जल्द होना है। जिसमें Rs 1,65,000/- का खर्चा है। कृपया आप मेरी अर्थिक सहायता कर यदिजिए मैं अपने पुत्र का इलाज करवाने में असमर्थ हूँ कृपया आप मेरी Rs 1,65,000/- की सहायता कर दिजिए। जिससे मैं अपने पुत्र का इलाज जल्द से जल्द करवा सकूँगा मे सहायता सख भचारी रहूँगा।

धन्यवाद

निवेदन

Sanjiv

[संजीव सिंह]

Address

तरलुलवा
धबरिया
उत्तर प्रदेश
Pin - 274408

Application Accepted.

OCEAN WELFARE FOUNDATION

Managing Trustee

हृदय रोग विज्ञान / सीटीवीएस ओपीडी

CARDIOLOGY/CTVS OPD

सोमवार / शुक्रवार

Monday/Wednesday/Saturday

दोपहर के बाद

Afternoon

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र

ब० रो० वि०

आ० आ० सं०, नई दिल्ली-110029

Cardiothoracic & Neurosciences Centre, O.P.D.

A.I.I.M.S., New Delhi-110029

टेली कार्डियोलॉजी अपॉइंटमेंट

मोबाइल नंबर 8929936750

समय सुबह 9:30 बजे से शाम

5:00 बजे (सोमवार से शुक्रवार) तक !

दिनांक/Date 10/11/2025

विभाग
Deptt.

17668/15

नाम
Name

Rajesh Singh

उम्र
Age

6

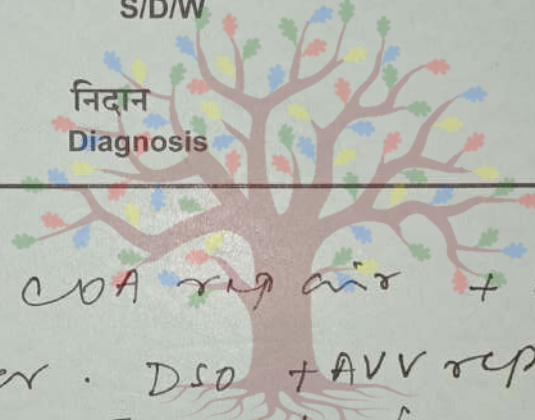
यू०एच०आई०डी०सं०
UHID No.

पुत्र/पुत्री/पत्नी
S/D/W

लिंग
Sex

M

निदान
Diagnosis



R-417
24/10/23

- P/ COA repair + PA Band.
- for DSO + AVV repair (2017)
- P white dot well.
- PDDA - 27.3.2025.

डॉ. अफ़ो़ा फ़िरोज़
Pos. MC+SR
विभाग/Dept. of C.TVS
हृदय वक्ष एवं तंत्रिका केन्द्र, नई दिल्ली-110029
C.N. Centre, A.I.I.M.S., New Delhi-110029

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

cath study
AC-518/22/LI
Dr Gohare

दिनांक
Date

10/10/22/45

विभाग
Deptt.

९

नाम
Name

Rajeev

उम
Age

6

ब०रो०वि०सं०
O.P.D. No.

पुत्र/पुत्री/पत्नी
S/D/W

Singh

लिंग
Sex

M

निदान
Diagnosis

17668/15

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CTGA

P/cor repair + PA Band. (2017)

Band Δ = 45 mmHg.

mild dysfunction of LV.
mod systemic AVR.
no cor Δ.

Plan

Cath for further
plan.

Singh

To come to Rm. 24A @ 4pm

on 16/03/2022.

Finances Rs 6000/- explained.

Singh

7. vitcofol 1/2 tab OD

Syp. Cal-D 5ml BD

Singh

दिनांक
Date

17 Mar 22

kindly deposit

₹ 6000/- in

AIMS ANGIO PATIENT
ACCOUNT

9/22

CTUP, P (CoA repair), P/PABAND (2017)

both report and a/d data
reviewed by Dr. S. S. Kotha Sr. Plan

ECG sinus rhythm

Refd to CMS

(4) H.

30/3/22

R-18 (18)
30/3/22

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Care to be discussed

To come for

review on 4/4/2023

Spencer
Sr. an.

Accepted fee DSO + AVV repair
+ prof v development

- long waiting list explained, dates not set
given or started beyond 2026
- Can try in other govt hospital SJH/RM/
SB part.
- In case of emergency visit AIMS Cusnetty

Shubh...

R-4 (25)
4/4/22

दिनांक
Date

RIA x CXR, 2018 Record
6 months Weight
 To follow up in Paed Cardiology
 ↓ Prof S.S. Kohari for
 further plan & management
Do bacter
screen

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R.18 (35)

CXR ? / COP report + PA hand
poor at gain (+)

Pfmp

Adv

20 sets

1) P. Swam. 2.5mg 1/4 BD.

2) P. Lasiloctam 1/4 OD. SL-3

3) Sp. Sheled 5ml OD.

Gyp vitcolol 1/2 t/d

Renal Bma

27.2.15

20/2/19

CXCR

CXCR

78 - UL
- LL

हृदय चक्षु एवं तंत्रिका विज्ञान केन्द्र
ब० रो० वि०
अ० मा० आ० सं०, नई दिल्ली - 110029
Cardiothoracic & Neurosciences Centre, O.P.D.
A.I.I.M.S., New Delhi-110029

दिनांक
Date 10/11/22/45
CTV 86541

विभाग Deptt. <u>CU</u>	नाम Name <u>Rajeev</u>	उम Age <u>1</u>
ब० रो० वि० सं० O.P.D. No. <u>17668</u>	पुत्र/पुत्री/पत्नी S/D/W <u>15</u>	लिंग Sex <u>M</u>
निदान Diagnosis		

P/COA repair + PA Banding (28/2/2017)

- Kheld active
- Chest expansion normal ⊕ 2nd I/C ⊕ ⊕ ⊕ mid.
- Poor weight gain ⊕ (~~loss~~ 1.5 kg in last 1 year)
- Was referred to Dr Ramesh Menon for Immunisation (~~he~~ did not attend Dr Ramesh = OPD)

Advise

- Syzyllinches 2 tsf ~~OD~~ OD
- Syr furosed 0.2 ml BD
- ✓ → T. Eucorin 30mg OD PIC
- T. Envas D. 5mg BD
- Syr Neogardith 5mg BD ✓
- Syr Orkocalcium 5ml OD ✓
- PB meet Dr Ramesh Menon for Immunisation & Poor weight gain.

2547
23/3/18

10

दिनांक
Date

R.S (43)
29/5/17

No complaints.

- Advs
1. Syp. Furosed 0.2ml ~~7~~ BD
 2. 7. Eucyprin 3mg OD PL
 3. 7. Emvat 0.5mg BD
 4. Syp. Megeadine 5ml BD
 5. Syp. Osteocalcium 5ml OD x 1m
- 1/2m BE x 3m.

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R.S (35)
4/9/17

R/A 3 months c CRP PA-
R/ CoA repair + PA banding NE
(28/2/2017) NIWA

O/R - child active and playful.
- Chest clear.

O/R - Chest clear, Sibs (+)

plan continue same treatment -

R/A 6 months.

Dr. Srinivas

Turned to Ramesh Menon for
advice regarding catchup immunisation

दिनांक
Date

RS-18
15/3/17

P/CoA Repair + Fixed PABanding

no cardiac output R_L

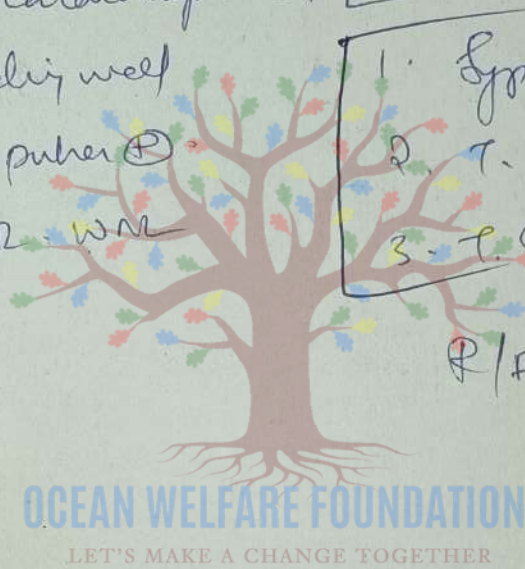
feeding well

all pulses @

CXR - WNL

- 1. Syp. Furapred 0.3ml TDS
- 2. T. Ecasprin 30mg OD PL
- 3. T. Envas 0.5mg BD

P/A 1 month c/cxr



[Handwritten signature]

RS-13
17/4/17

GO 90%
CTV covered

↓
9 pus collection

Dr. Abhinav
SR, CTVS

P/CoA Repair + PABanding (22/2/17)

Pt. doing well
feeding well.

On Ex :- 1x1 cm collection
over stitch line.
- drained ↓ LA.
(Pus.)

- Adv.
- Syp. furapred 0.3ml TDS
 - T. Ecasprin 30mg OD PL
 - T. Envas 0.5mg BD

5x days
Syp. Augmentin 90mg TDS.
Syp. Crocin 90mg TDS.
Daily dressing c/ Betadine
ointment. flip after 2 days
in CT-Sward

S-27910
A/9/112

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब. रो. वि.

रामाजीवन/साट बंगला जोषी
CARDIOLOGY/CTVS OPD
- सोमवार/बु- 4.2/गुरुवार
Monday/Wednesday/Friday
(दोपहर के बाद)
Afternoon

अ. भा. आ. सं., नई दिल्ली-110029

Cardiothoracic & Neurosciences Centre, O.P.D. (दोपहर के बाद)
A.I.I.M.S., New Delhi- 110029

दिनांक
Date 10/11/2025 CTVS 86541

विभाग Deptt.	नाम Name	Rajeev Singh	उम्र Age	1
ब.रो.वि.सं. O.P.D. No.	पुत्र/पुत्री/पत्नी S/D/W		लिंग Sex	~
17668/15	निदान Diagnosis			

COA Repair + PA banding (2012M)

Wound in pleura done during the
status of wound

- Adv
- ① Sp banding 83ml TB.
 - ② 5 Ecospin 3mg OD
 - ③ 1 Curvar 0.5mg BD
 - ④ PA 1 month

[Signature]

R-5 (46)
19/04/17

वजन 7.600 गुन
7.700 गुन
7.900 गुन
8.400 गुन

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

10/10/2015

विभाग

Deptt.

नाम

Name

Rajeev Singh

उम

Age

DOB -

B. wt -

ब०रो०वि०सं०

O.P.D. No.

पुत्र/पुत्री/पत्नी

S/D/W

लिंग

Sex

निदान

Diagnosis

P/Co A repair + PA banding (28/2/17)

4/09/17

6:30 pm

Seen in R2

Catch up immunisation - 8/04/2015 (DOB)

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C. wt - 8kg

Plan

IMMUNISATION
Room

Pediatric OPD

- ① Inj Pentavac - 1st dose / OPV → given
↓ 4 week
as part of
- ② 2nd dose - SNID
- ③ Syn Gocin (5ml = 125mg) 5ml tds
× 1 days

Ramesh Menon

हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
ब. रो. वि.

अ. भा. आ. सं., नई दिल्ली-११००२९

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

12 219252
9.7.15

CNS NO. - 86541

दिनांक
Date

CV 2015/014/0017668

Cardiology

UHID: 101102245

Paed. Cardiology

Date 08/07/2015 WED

विभाग
Deptt.

Name RAJEEV SINGH

3M /M

S/O SANJEEV SINGH

Phone No. 9453265235

General

ब.रो.वि.सं.
O.P.D. No.

Consultant Room 18

Dr. S S KOTHARI

SR Room 14

DR. ANAND



ECHD (998) TUA

CNC Lab, AIMS			
H	C	L	PTD
10	10		
Date 9/7/15			

OCEAN WELFARE FOUNDATION
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Adv

1) Symp. Dixin 0.4ml BD

2) Symp. furosemid 0.4ml OD

3) Echo

11

R18-2
13/7/15

Adm. CT-6
cust. inf. with

h



DEPARTMENT OF CARDIOTHORACIC AND VASCULAR SURGERY
 ANSARI NAGAR, NEW DELHI, 110029
DISCHARGE SUMMARY

PHI: 101102245	CVS: 86541	CV: 0017660/14/2015
NAME: RAJEEV SINGH	AGE: 9 YEARS	SEX: MALE
S/D: SANJEEV SINGH	BLOOD GROUP: A POSITIVE	WEIGHT: 20 KG
CR NO: C-046731-23	MOBILE NO: 7905764643	ADDRESS: AT PO - BANJARIA RAJAH PA TARKULWA DIST
DATE OF ADMISSION: 19/06/2024	DATE OF SURGERY: 04/07/2024	DATE OF DISCHARGE: 20/07/2024

FACULTY: Dr. V. DEVAGOUROU
 RESIDENTS: Dr. SHEIKH MD MURTAZA, Dr. CHAVA HARSHANT SAIRAM, Dr. SANDEEP CHAKRABORTY, Dr. BALA BRINDHA

FINAL DIAGNOSIS: p-PA Banding + CoA repair (28/02/2017), CCHD, Balanced Qp, CCTGA, Normal function of m LV, Moderate m RV dysfunction, Confluent good sized PA's, NSR

INVESTIGATIONS:

2D ECHO: (24/06/2024)

CONSULTANT CARDIOLOGIST: Dr. Saurabh Kumar Gupta

P- PA Band + Coarctation repair. PA band gradient : 50 mm Hg. Low moderate Left AVVR. Confluent PA's 10 mm each. No Right AVVR. No PR/ AR. Normal biventricular function. CoA segment gradient - 10 mm Hg. No spill.

CATH REPORT: (17/03/2022) Dr. Saurabh Kumar Gupta

	Sat %	a	v/ed p	mean		Indexed
SVC	49				Qp1	2.6
RA	49			5	Qs1	2.6
RV	50	77	10		Qp/ Qs	1.0
PA	50	66	21	41	TPR	
PAW				22	PVRI	7.3
LA				22	SVRI	28.0
LV	97	102	22		PVRI/ SVRI	0.3
AO		99	60	78	L > R	0.1
FA	98	103	57	72	R > L	0.1
PV					Qep1	2.6

PV saturation assumed to be 99% for calculation. LA & PAW mean assumed to be equal to LVedp. RV is morphological LV, LV is morphological RV.

Angio:

Left innominate vein angio - no LSVC.

RV Angio - dilated and distorted MPA.

PA band displaced distally towards branch PA's. Confluent good sized PA's, RPA-12.5 mm, LPA- 9 mm. Mild AVVR. LV (mRV) angio - significant dysfunction, mild AVVR. Left aortic arch, No CoA, coronaries - normal.

SURGERY: 04/07/2024: PA Debanding + Double Switch Operation + PA plasty (RPA + MPA plasty using Homologous unfixed pericardium)

Operative findings:

Sternum normal, Right pleura opened. Left pleura intact. Thymus present. Innominate vein +, dilated. Pericardial adhesions noted. Pericardial Adhesiolysis. SS, LC, CCTGA, Aorta anterior and to the right, PA posterior and to the left of PA. PA band noted- migrated to the confluence causing RPA stenosis, Confluent Branch PA's with RPA stenosis. LPA adequate sized. PDA absent. Coronaries- 1R, 1L. SVC, IVC to RA. All 4 PV's to LA.
 Intracardiac anatomy: IAS- intact. Coronary sinus ostium- normal in size. Right AVV - normal. No regurgitation. Left AVV - normal. Trivial Regurgitation.

CPE DETAILS: PERFUSIONIST - Mr. Yogender Chauhani, Mr. Yash, Mr. Arun Kumar
 BSA : 0.81 m². Flows : 1780 ml/min at hypothermia, 2100 ml / min at normothermia. Lowest Temperature : 28°C
 Aortic Cross Clamp Time : 141 min. CPB Time : 353 min
 Cardioplegia: Del Nido Cardioplegia (450 ml at 74 min, 240 ml at 60 min)
 Cannulae : Aortic : 16 Fr arterial cannula, Veinous: SVC- 20 Fr angled, IVC - 22 Fr angled, V ent : 14 Fr

OPERATION NOTES:

Median sternotomy - Thymus split and everted. Dense pericardial adhesions noted. Pericardial Adhesiolysis. Pericardial sinus. Cardiac anatomy assessed. SVC dissection, opening for 5th SW done. L and L looped. Aorta PA dissection done. PA Band identified.

done till overlapping made permanent. Right pleura opened. High Double Lumen placed across from 5-0 17 mm SA prolene suture. Hepatic and IVC ligatures done. Left pleura opened. High Double Lumen placed across from 5-0 17 mm SA prolene suture. Hepatic and IVC ligatures done. SVC purse-string using 5-0 17 mm non-vented DA prolene sutures. SVC looped using 3-0 silk. Extrapericardial IVC cannulation using 20 Fr angled venous cannula. AC checked (1-480 sec). Partial bypass on. SVC snugged. IVC purse-string using 5-0 17 mm DA prolene sutures. Cannulation using 22 Fr angled venous cannula and full bypass on. Aortic cannula connected to 28°C. IVC looped. Aorta PA 20000 cc. PDA stump identified. RPA dissected just before prebranching level and looped. LPA found to be densely adherent to surrounding structures. LPA dissection done and LPA looped using vessel loop. Aortic stays using 5-0 17 mm SA prolene sutures. Cardioplegia Pump primed. Cannulation. AoXCI applied. Adenosine in. RSPV snugged and LV vented. Antegrade cold blood root cardioplegia given. PA looped just beneath the confluence and vented. Topical cooling. Heart arrested in diastole. Aorta transection done between stays just above STJ supraconstrictor stays using 6-0 13 mm DA Prolene sutures. PA transected between stays just beneath the confluence and 3 PA stays placed using 6-0 13 mm DA Prolene sutures. Coronary anatomy visualized and coronary buttons harvested. Left coronary button anastomosed to Neo Aorta using 7-0 8 mm DA prolene sutures. Right coronary artery anastomosed to Neo aorta using 7-0 8 mm DA prolene sutures. Cardiac pump repeated to both buttons. LeCompte manoeuvre done. Aortic anastomosis completed using 5-0 17 mm DA prolene sutures. IVC snugged. PA opened from base of appendage. Fossa Ovalis intact. ASD created. Dacron patch fashioned and dacron patch used for rerouting the pulmonary venous flow. IVC rerouting done. SVC rerouting done. 3rd and 4th layer of Modified Senning completed with careful exclusion of right Phrenic nerve. Cavae desnugged. LV vent off and I.V vent site snugged. MPA reconstruction done using homologous pericardial patch fashioned to form a pericardial cylinder as conduit. Rewarming and gentle ventilation started. AoXCI off. Root vent on. Heart resumed electromechanical activity. Distal PA reconstruction and RPA plasty done using homologous unfixated pericardium. Hemostasis ensured. 2A, 2V wires placed. Gradually weaned off bypass. Not sustaining weaning. CPB resumed. Gradual weaning done again and sustained hemodynamics. LV vent snugged and reinforced. Root vent off and site reinforced using 5-0 17 mm DA Prolene sutures. Protamine in. 20 Fr angled pericardial drain and 20 Fr straight right pleural drains placed. Hemostasis ensured. Aortic decannulation done. Sternum left open. Skin closed. Sternal closure and skin closure done on POD 2.

POST OP COURSE : Sternal closure and skin closure done on POD 2. Patient remained stable during the rest post operative period. Patient developed pressure sores over occiput and sacrum which were managed with regular dressing. Patient is being discharged in a hemodynamically stable state.

DISCHARGE MEDICATIONS : TO CONTINUE

S.NO	TABLETS	DOSE	DOSAGE
1.	T. ENVAS	2 mg	BD
2.	T. LASIX	5 mg	TDS
3.	T. DIGOXIN	125 mcg	OD (5/7)
4.	T. FLUCONAZOLE	120 mg	OD (5 days)
5.	SYP. ZINCovit	5 ml	OD

TO STOP AFTER 5 DAYS

S.NO	TABLETS	DOSE	DOSAGE
1.	T. PCM	300 mg	SOS
2.	T. PANTOP	20 mg	OD

INSTRUCTIONS:

Fluids restricted to 800ml in 24 hours.

Follow dietary restrictions

Report immediately if:

- o fever more than 2 days,
- o bleeding/ discharge from wound,
- o decreased urine output,
- o worsening of symptoms,
- o shortness of breath,
- o giddiness,
- o intense headache,
- o blackouts

Visit OPD after one week, one month, three months, six months, one year and thereafter yearly with CXR.
Follow up in CTVS OPD ROOM 04 Monday/Wednesday/Friday 2pm to 5 pm after 7 days with CXR report.

IN CASE OF EMERGENCY PLEASE CONTACT THE NEAREST HOSPITAL OR AIIMS EMERGENCY DEPARTMENT

THIS DOCUMENT IS VERY IMPORTANT. PLEASE LAMINATE IT.

CONSULTANT: Dr. V. DEVAGOUROU

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