





स. 1
NO. 1

उत्तर प्रदेश सरकार
GOVERNMENT OF UTTAR PRADESH
चिकित्सा एवं स्वास्थ्य विभाग
DEPARTMENT OF MEDICAL AND HEALTH
सामुदायिक स्वास्थ्य केंद्र कसनाधड़ा
COMMUNITY HEALTH CENTRE KASNAHDHADA

फॉर्म-5
FORM-5



जन्म प्रमाण-पत्र
BIRTH CERTIFICATE

(जन्म मृत्यु रजिस्ट्रेशन अधिनियम, 1969 की धारा 12 / 17 तथा उत्तर प्रदेश जन्म मृत्यु रजिस्ट्रेशन नियम, 2002 के नियम 8/13 के अंतर्गत जारी किया गया)
(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE UTTAR PRADESH REGISTRATION OF BIRTHS & DEATHS RULES 2002)

यह प्रमाणित किया जाता है निम्नलिखित सूचना जन्म के मूल अभिलेख से ली गई है जो कि सामुदायिक स्वास्थ्य केंद्र कसनाधड़ा तहसील ददरी जिला गौतम बुद्ध नगर राज्य/राज्य प्रदेश उत्तर प्रदेश, भारत के रजिस्ट्रार में उल्लिखित है।
THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR COMMUNITY HEALTH CENTRE KASNAHDHADA OF TAHSIL/BLOCK DADRI OF DISTRICT GAUTAM BUDDHA NAGAR OF STATE/UNION TERRITORY UTTAR PRADESH, INDIA.

नाम / NAME: GAURAV ANURAG

लिंग / SEX: पुरुष / MALE

जन्म तिथि / DATE OF BIRTH:
27-01-2022
TWENTY-SEVENTH JANUARY TWO THOUSAND TWENTY TWO

जन्म स्थान / PLACE OF BIRTH:
CHC KASNAHDHADA

माता का नाम / NAME OF MOTHER:
RAJANI

पिता का नाम / NAME OF FATHER:
SHIDDH GOPAL

माता का नंबर / MOTHER'S AADHAAR NO:
XXXXXXX4060

पिता का नंबर / FATHER'S AADHAAR NO:
XXXXXXXX9869

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:
ETA-1ST,
GREATER NOIDA, GAUTAM BUDDHA NAGAR, GAUTAM BUDDHA NAGAR, UTTAR PRADESH

माता-पिता का स्थायी पता / PERMANENT ADDRESS OF PARENTS:
BILBAL MAHOBA, MAHOBA,
UTTAR PRADESH

पंजीकरण संख्या / REGISTRATION NUMBER:
B-2022-9-56043-000067

पंजीकरण तारीख / DATE OF REGISTRATION:
08-02-2022

टिप्पणी / REMARKS (IF ANY):
08/15 PM

जारी करने की तिथि / DATE OF ISSUE:
08-02-2022

जारी करने वाला अधिकारी / ISSUING AUTHORITY:
रजिस्ट्रार (जन्म एवं मृत्यु)
REGISTRAR (BIRTH & DEATH)
सामुदायिक स्वास्थ्य केंद्र कसनाधड़ा
COMMUNITY HEALTH CENTRE KASNAHDHADA

UPDATED ON:
08-02-2022 14:17:21



"THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FACSIMILE SIGNATURE OF THE ISSUING AUTHORITY"
"THE GOVT. OF INDIA VIDE CIRCULAR NO. 1/12/2014-VSCRS DATED 27-JULY-2015 HAS APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES"

* प्रत्येक जन्म एवं मृत्यु का पंजीकरण अनिवार्य है / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH *



ESTIMATE CERTIFICATE TO WHOM IT MAY CONCERN

This is to certify that Shri/Ms. GAURAV Age 24 Gender M
 E/o, O/n, W/o _____ is getting treatment under _____ Dept. _____

vide registration no. 107455256, UHID No. _____

is suffering from ① muscular gap B regaining ② GPE regaining

approximate cost of the total treatment is Rs. ₹ 1,01,438

(in words) Rupees: One lakh one thousand four hundred thirty eight.

Item-wise break-up of expenditure of the estimate (if applicable) is as below.

18-87
If this estimate certificate is being issued to avail financial assistance for treatment only

(Name & Signature of Consultant with Stamp)

(1147) APC
MSO
vial
help

I.D. No. 107455256
 Reg. No. 20240050050743
 Hinc. No. 2024/00/370
 CLAUAV ANURAG
 S. S. SHIDDI GOPAL

Address: BILBAL MAHOTA, TEN-MAHOTA, UTTAR PRADESH
 Pin: 201042, INDIA
 Mobile: 9810877942

R. P. Centre (Eye Centre)

Date: 22/09/2025

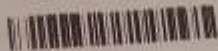
Ocular oncology-Dr. SR/

JR OC-VI-R.142 B

Unit-VI

Room No.: 142

General
FC



अनुभाग व दिन
 Section and Day VI
 बुधवार व शनिवार
 Wednesday & Saturday

कमरा नंबर
 Cabin No.

Cellar
 Onestore
 for school
 bank
 by 20%
 affore
 ? post
 on school

का टंडन का एकक
 Prof. Radhika Tandon's Unit

रोगी का नाम Name of the Patient	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex	आयु Age	पता Address
Gaurav				

दिनांक DATE	निदान DIAGNOSIS	उपचार Treatment
22/9/25	C/S/B (LE) inflammatory changes enhancement [? aseptic cellulitis] ? post lamination ON involvement apart from globe ON involvement 60-70% involving lens clear smooth enhancement of uvea suggestive of aseptic cellulitis	Consultant NRC Unit 6 (Prof. Sanjay)

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।
 Kindly keep this Card safely and bring it on your follow-up visits.

- धूम्रपान निषेध 2. कूड़ा कर्कट केवल कूड़ेदान में ही डालें 3. थूकिये नहीं
- No Smoking 2. Use Dustbin 3. No Spitting

दिनांक - Date

उपचार - Treatment

- 1) Coats enhanced, enlargement of globe
- 2) Tumor induced aseptic cellulitis
- 3) Inflammation needs to be reduced (by steroids) before going for any procedure

(RE) → very small irregular mass, temporal disc, no ON involvement

EVA dar
19/11/25
 NPO - 8hr 2hr
 4hr 2hr

Alerecc
 ① ED milfodex TB3000
 Date for EVA

Tuesday
7 Oct '25
 7:30 AM
 1st floor OT

NPO Explains
 12am - solid
 4am - ni
 6am - de
 8am - flu

नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में दान करना परमश्रेष्ठ है।

इनकी पूर्ण रक्षा कीजिए ताकि ये अपनी रक्षा कर सकें।

Eyes are God's most precious gift to man kind and eye donation is the most noble deed.

Take full care of them so that they can take care of you.

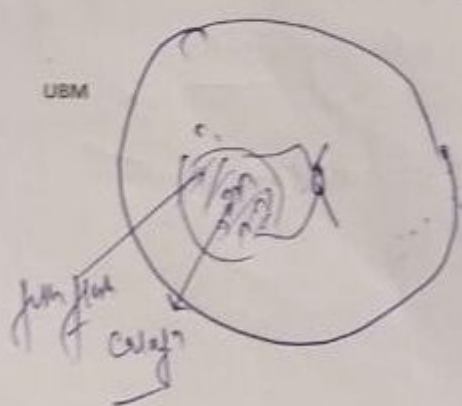
Date: 19/11/25
 GUSA & Unit 4 & Prof Sharma / Dr Bhatia
 F/U/d/o (R) multifocal gp 6 degeneration
 (L) GPE degeneration
 Last EOA 19/11/24
 ASOCT 7 (L) SD CEV = last 10/10/25

Last NRC 22/9/25 -
 (R) : small irregular mass temporal disk - NO ON involvement
 (L) : post lamellar ON involvement - superior from given ON involvement

Report 142B N/A

ICGA 19/11 on USG -
 RE mass filling globe, high amplitude spikes
 No calcification (gp E RB) = posterior hole
 RE mixed type degeneration

USG
 Apical Height Basal Diameter
 (43) - flap in 43 tomorrow for Prof Sharma
 9am Opinion's for excision



(L) atrophic over
 RPA
 papillary with
 mass visible
 (+)

cblw
 Ocular Prosthesis:
 11/12/25
 Low Vision Trial:

3/12/25

B/L RB

Ⓡ group B
Ⓛ EORB

Post 2# Augmented chemo. (22/11 - 24/11/25)

EUA
(19/11/25)
(Post 1# Aug)

→ Ⓛ ectopic mass
max visible ⊕

Ⓡ fishflesh calcification

planned for enucleation 11/12/25
(Had Aseptic cellulitis).

Last RC → Ⓛ intraorbital ON involvement ⊕.

NRC → PLONI apart from gross ON involvement
constant

constant RL

C/D/W prof Rselth

RB1 gene

NGS
3/11/25

2/12/25

2850 / 95K
9.8 / 700

No fever.

RFT/LFT - (N)

① CEMRI Brain + orbit to
see ON involvement
prior to enucleation

② RB1 gene testing.

③ Syp Cetirizine 3ml H/S
x 5 days.

④ N/V 06/12/25
CEMRI. orbit + Brain.

OLARANTO ANHOS 10
Dr. Rishika Fombarao
Senior Resident
Department of Radiology
AllMS, New Delhi-110029

Shruti
DR. G. SHRAVAN REDDY
Senior Resident
Paediatric Oncology
Department of Medicine
AllMS, New Delhi-110029

D
Div
ns

Week ① Augmented chemotherapy

Cycle no Date Wt 10.5kg BSA 0.52 m²

Hb TLC ANC Platelets 100

SGOT SGPT S Bil Urea Creatinine

Drugs	Dose given	Day
VCR	0.70 mg	10/10/15 <i>nikita</i>
Carboplatin	CYCLOPHOSPHAMIDE 600mg	10/10/15 <i>for JR</i>
Etoposide		
	DOXORUBICIN 16mg	11/10/15 <i>for JR</i>

Next visit.....

Wk 3
Cycle no Date 15/11/15 Wt BSA
Hb 11.7 TLC 9320 ANC 3820 Platelets 378

SGOT SGPT S Bil Urea Creatinine

Drugs	Dose given	Day
VCR	0.5 mg	D1
Carboplatin	200 mg	D1, D2
Etoposide	33 mg	D1, D2, D3 24/11/15 <i>for JR</i>
		22/11/15 23/11/15 <i>for JR</i>

Next visit.....

SCSR
D5 20/11/15
D1 25/11/15 *for JR*
D2 26/11/15 *for JR*
D3 27/11/15 *for JR*
D3 28/11/15 *for JR*

CD/w Prof Bhavna Vankar.

Ocular Prosthesis:

D/f evaluation to be given
- Dr. Zahir

[Signature]

11/12/25
wear 20
7130 TH

Low Vision Trial:

11/11/2015

Adm: (2) Group B / poor metho supplemented
(1) EORB

21/11/15 To 12/12, Advise week 3.

11-2 3940 / 2-498
1220

RH / LH: WNL.

- Luj. Levodopa 1.5 mg +
- Luj. Bexa 1.5 mg slow. titrated

- ~~Luj. Vincristine 0.5 mg slow IV~~
~~Lev. - DT~~

- Luj. Carboplatin 130 mg /
100 ml IV over 2hrs -
D1, D2

- Luj. Etoposide 33 mg /
100 ml NS IV over 2hrs
D1, D2, D3.

- Luj. G-CSF 50 mcg SC
q SC 24hrly. D4 till
ANC recovery.

- Date for chemo.

- Cont. Septan / SB / BG.

- N/V in OPD on 15/11/15

2 CB / NH / LH



अ० बा० आ०-सं० अस्पताल / A.I.I.M.S. HOSPITAL
बाहिर रोगी विभाग / Out Patient Department

स्मरण है अंतर्गत सुधार का \$11. SMOKING IS PROHIBITED IN HOSPITAL PREMISES



UID: 127403258
AAB: 2
Date No: 22300001201

NAME: Karam

CITY: GURU

OPR-6

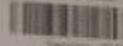
Patient:

Age:

Sex:

DOB:

Phone:



GAURAV ANURAG

BOHCHOH BOHCHOH

448 BLK. 5th FLOOR 1st WING, 1st FLOOR

Room: 207/208/209 Follow Up Patient, 1st Floor, 2

Ref. / Diagnosis

Date: 31

10-415

Treatment

ECG to monitor

31/10/2023

10 mm

ALV - 8/10/2023

i.e. 10/10/2023

Dr. SHARAN SHARMA
Senior Resident
Department of Medicine
AIIMS, New Delhi-110029

17/10/25 - GCSF 55 ug s/c -

Good



GAURAV

S/O SDHGO
27/5/22/M
VLL-BLAUR
MAHOLA, UT
Ph: 9876543
Follow Up Pa



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काम चलता है

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



meraspatal

15/11/25

do B/L RB (R) gpb / Post wk 0 augmented on 10/10-11/10

(L) EOR B

↓
due for wk 3 chemo
started on 1/11/25

↓
Not taken chemo.

14/11/25
9320
117 / 3.382

KF7/KF7 → (2)

Adv

— wk 3 chemo as charted.

— To take date 22/11/25, 23/11/25

— (N/V) in OPD 3/12/25 = wk KF7/KF7

Signature

Zelutol

To ICS,

Trj VCR (5ml/100mg) — ①

Trj Carboplatin (500mg/1500ml) — ②

Trj Etoposide (50mg/100mg) — ③

Trj GCF 300mg — ④

जाते जमा होते (एम्पल सेटी टाबल)
दिनांक 21/11/25

हस्ताक्षर के हस्ताक्षर

Dr. RESHKA POTHARAJU
Senior Resident
Department of Pediatrics
AllMS, New Delhi-110029



एनएसएस लैबोरेटरी विभाग
Department of Laboratory Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
All India Institute of Medical Sciences, New Delhi

Report No. 73

पациेंट
Patient Name: Mr. GAURAV ANURAG
TX ID: 00-DIG-2025-11-39 AM
Ref. Date: 02-Dec-2025 11:39 AM
Recommended By: SMART Lab, New RAK OPD
Lab Sub. Centre:

रजि.
Sample Received From: Department
Sample Collection Date:
Sample Quantity:
Lab Reference No.:

डॉक्टर
Ref. No.: 02-Dec-2025 11:39 AM
Ref. Date: 02-Dec-2025 11:39 AM
Ref. By: 02-Dec-2025 11:39 AM
Ref. For: 02-Dec-2025 11:39 AM

Report

BIOCHEMISTRY	Result	UOM	Bio. Ref. Interval
Test Name (Microbiology)			
Sample Type - Serum	19	mg/dL	17 - 49
Urea (Hexokinase-GDH)	0.2	mg/dL	0.3 - 0.5
Creatinine (Jaffe's creatinine)	4.4	mg/dL	3.4 - 7.0
Uric Acid (Uricase Colorimetric)	9.4	mg/dL	8.8 - 10.8
Calcium (T-Arbo-5-methyl-BAPTA)	3.4	mg/dL	2.5-4.5
Phosphate (Phosphomolybdate Reduction)	136	mmol/L	135 - 145
Sodium (ISE (indirect))	4.6	mmol/L	3.5-5.1
Potassium (ISE (indirect))	102	mmol/L	98-107
Chloride (ISE (indirect))	0.23	mg/dL	0 - 1
Bilirubin (T) (Calorimetric (Iaz))	0.10	mg/dL	0 - 0.2
Bilirubin (D) (Diazotization - Jendrassik-Grof)	0.13	mg/dL	0 - 0.9
Bilirubin (I) (Calculated)	25	U/L	0 - 26
ALT (IFCC without pyridoxal phosphate)	39	U/L	<=40
AST (IFCC without pyridoxal phosphate)	265	U/L	142 - 335
ALP (INPP-AMP Buffer - IFCC)	6.8	g/dL	6.0 - 8.0
Total protein (Biorad Statstat)	4.2	g/dL	3.8 - 5.4
Albumin (Bromocresol Green (BCG))	2.6	g/dL	3.0 - 3.7
Globulin (Calculated)	1.6		0.8-2.0
A/G ratio (Calculated)			

-----End of Report-----

Dr. Sudip Kumar Datta
 (MD Biochemistry)

Dr. Tushar Sehgal
 (DM Hematopathology)

Dr. Suneeta Meena
 (MD Microbiology)

Dr Sudip Kumar Datta MD
 (Biochemistry)
 02-Dec-2025 15:53

This is an electronically authenticated laboratory report

Attention: Please collect blood samples by puncturing the rubber cap of the vacutainers. Manual opening of caps and filling it must be avoided strictly. Lab reports are subjected to pre-analytical errors due to inappropriate patient preparation, phlebotomy practices, storage etc. Please inform SMART Lab in case of any discrepancies with the expected results on the same day on Ext.no. 7004/7

23/9/15

Bilateral RB

(R) Grp B - multifocal regressing
(M an)

(L) Group E Regressed

LIFU x9 months

No complaints

— c/o Redness of eye x 3 days

No swelling

RPC review:

22/9/15 MRS orbit → Inflammatory change (+) with
with ON enhancement

? Postnuclear ON involvement

? Tumor induced or aseptic cellulitis

Received topical antibiotic.

G/W — Prof. Rachna Sekhram

Adv — MRS orbit → discuss
+ Brain

— If progresses — to consider chemo (HDA)

— N/V —→ OPD —→ 26/9/25
9am



27/9/25

c/o
Bilateral RB $\left\{ \begin{array}{l} \textcircled{A} \text{ GIP B multifocal} \\ \textcircled{B} \text{ GIP E regressed} \end{array} \right.$

Post G # HDCEV. → $\textcircled{C}$ Orbital, preseptal cell

NRC (MRI - 7/1/25)

- Likely progression.

R/C discussion pending

Plan

- Discuss MRI films - Monday Dr V. S. Lakshmi
p12.

- To discuss in POC for chemo-
Argument vs HDCEV.

Sr Tunny p12 connect c Dr Anirudh to
Dr Mahan.

- FU on 29/9/25. POC 2pm

Ady
MD

25/9/25

MRI film checked - Toprenor - Progremer

Introrbital optic Nerve stem
enhancing

! EO done

Care d/w R. sek

- Augmented clens

- RB 1 gem die tuhi -

- CBC/UA/UT - not done - R/V = CBC/UA/UT
on 01/10/21

- Augmented clens proband 7 - Timmy sister
date

Age - 4 years

2 D 6400

wt - 10.5 kg

BSA: 0.47 m²

ht - 92 cm

Week 0

BSA - 0.52 m²

Ij Emset 2mg | stat

Ij Dexam 2mg |

Ij VCR 1.5 mg/m² - 0.78 mg
is slow
push

Take date from DC

08/10/25

~~Toprenor~~

~~Toprenor~~

IVF DNS + 1:100 KCl 65ml/hour p 6 hr

after 2 hour.

Ij Cyclophosphamide 680 mg / 200ml NS over 1 hour.

Ij Melre 200 mg 0, 3, 6 hour.

Ij Moxibac 16 mg / 100 ml NS over 1 hour

only after
echo
review

8/10/25

MEDICAL CARE
BAN

Gaurav

2D ECHO focus

• to be repeated

chemo not changed

4PM

meet w/ Saurav

5A today

Reslotted chemo. to 10/10/25

Next OPD Thu 23/10/25 Wed 9AM

A. Vikra

→ Sy. EMSET

(2mg/15ml)

5 ml 110

708

x48h

→ 708 dexamethasone

[4mg]

(112)

80

⊕ ⊕

SENIOR RESIDENT
Department of Pediatrics
All India Institute of Medical Sciences
Ansari Nagar, New Delhi 110029

13/10/25

⊕ DAY CARE

10 AM

AB 10st week "0" augmented chemo.

BSIS:

⊕ 04

CLO - reduced oral intake x 1 day

on exam

g2 ⊕ oral mucositis ⊕

hydratn - fair

VO - (N)

RIA - soft / BS ⊕

no fever
spikes /
vomiting / lab
pain

Advice

① Zytex - 2 gel 2A 90 / x 5d

② candid HP 110 qid

③ fiv on day care / VO basis - if needed
to start
no feeding

Dr. Rishika Pottharaju
Senior Registrar
Department of Paediatrics
St. John's Hospital
1st Floor

C.M.O. Reg. No.: FMEE2110585



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NABH ACCREDITED
NO. 2012-0073

Name: Master Gaurav
Referred By: DR. NARENDRA PATIDAR JANKIKUND
CHIKITSALAYA

Age/Gender: 4Y/ Male
Date/UHID: 07-Sep-2025/
P1636568



CONTRAST-ENHANCED MRI OF BRAIN AND ORBITS

REPORT:

High resolution MRI of brain & orbits was performed on a 3.0 Tesla MR Scanner, Siemens Magnetom Vida. Following imaging sequences were obtained:

Axial: T2 w TSE, T2 and T1 w FLAIR, DWI, SWI, STIR, Post-Gd T1 w fs

Coronal: T2 TSE, T1 TSE, STIR, Post-Gd T1 w fs

Sagittal: T2 TSE, oblique STIR, Post-Gd T1 w fs

ORBITS:

RIGHT: Globes: 2.8x8.7x7.1mm T2 hypointense plaque like nodular lesion seen in the posterolateral aspect of the globe not involving the optic nerve head. The choroid is normal and shows normal enhancement. The lesion shows mild heterogenous enhancement following contrast. Correlative Ct shows calcification. Lesion shows mild diffusion restriction.

- Intra-orbital muscles: Normal.
- Intraconal space: Normal.
- Extraconal space: Normal.
- Optic nerves: Normal.
- Superior orbitalic veins: Normal.
- Pre-septal space: Normal.
- Lacrimal glands: Normal.
- Orbital apex: Normal.

LEFT:

- Globes: mixed signal intensity polypoidal lesion seen in the posterior vitreous chamber measuring 14x19x20mm with chunky calcification on correlative CT. The lesion shows heterogeneous enhancement. The lesion is seen to involve the optic nerve head with abnormal signals and enhancement seen involving the intraconal segment for a length of 11mm. Mild diffuse increased enhancement of the uveoscleral coat with adjacent retroorbital fat stranding and enhancement.

