



<https://www.childhelpinghand.org/>

CONSULTATION SUMMARY

Unit of Narayana Hrudayalaya Limited

Patient MRN : 17510001209660
Patient Name : Baby of Shaika Khanam
Gender/Age/Dob : Male , 2 Month 15 Days , 15/08 /23
Patient Phone No : 8804240754
Patient Address : HOUSE NO-306,NASRIGANJ,
PAITHAN TOLI,NEAR MASJID,
DINAPUR-CUM-KHAGAUL,
Patna,Bihar,India,-800018

Consultation Date : 30/10/2023 12:24 PM
Consultant : Dr. Debabrata Nandi
(CARDIOLOGY - PAEDIATRIC)

Consultation Type : OP , REVISIT



CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS

- post operative follow up :

CLINICAL DATA

- S/P PDA DUCTAL STENTING - 21/8/23
DOING WELL

PAST MEDICAL HISTORY

- No significant past medical history

PROCEDURE HISTORY

- No known surgical history

FAMILY HISTORY

- No significant family history

ALLERGY

- No known allergies

BIRTH HISTORY

- LUCS/ CIAB

IMMUNIZATION STATUS

- Continue regular vaccination as per schedule

VITALS

Heart Rate : 130 bpm
SPO2 : 86 % , Room air
Weight: 3.8 kg

SYSTEMIC EXAMINATION

- Cardiovascular : CM



INVESTIGATION RESULTS

- Echo: ✓
S/P: Ductal stent on 21/08/2023.
Membranous pulmonary atresia.
Intact IVS.
Ductal stent in situ with good flow across stent.
No thrombus/obstruction.
Good flow in branch pulmonary arteries via stent. RPA measures : 5mm(z score : -0.12) & LPA measures : 3.8mm(z score : -1.27).
Hypoplastic tricuspid valve. TV Annulus : 4mm(z score : -6.50).
No mitral regurgitation. MV Annulus : 15mm(z score : +1.18).
TV/MV ratio : 0.26.
Bipartite RV.
Good LV function.
Left sided aortic arch. No Co-arcation.
No pericardial effusion.

INVESTIGATION ORDER

OTHERS : ECHO SCREENING - PEDIATRIC

MEDICATION ORDER

DRUG NAME

PATIENT INSTRUCTION

- | | |
|---|--|
| 1) AMBROXOL-DROPS-15ML- <u>MUCOLITE</u> | Thrice Daily (5 - 3 - 0 - 3) Drops For 3 Days Qty: 1 Start Date: Oct 30, 2023 End Date: Nov 01, 2023 |
| 2) PARACETAMOL-DROPS-100MG/1ML (15ML)- <u>CALPOL PEAD</u> | 10 DROPS SOS As needed , FOR FEVER /PAIN Start Date: Oct 30, 2023 |

ADVICE

- TAB ECOSPRIN (75MG) - 1/5 TH TABLET ONCE DAILY TO CONTINUE (1 TABLET DISSOLVE IN 5 ML OF WATER / MILK, GIVE 1 ML ONCE DAILY, DISCARD REST)
TAB CLOPIDOGREL 75 - 1/2 TAB IN 15 ML OF MILK, GIVE 1 ML ODPC
- VITANOVA D3 DROPS - 10 DROPS ONCE DAILY TO CONTINUE
A TO Z DROPS - 10 DROPS ONCE DAILY TO CONTINUE

BREAST FEEDING UPTO 6 MONTHS OF AGE. THEN WEANING FOODS AFTER 6 MONTHS AS ADVISED
ROUTINE IMMUNIZATION AS PER SCHEDULE - CONSIDER INFLUENZA AND PNEUMOCOCCAL VACCINE
FOLLOW UP WITH PEDIATRICIAN



SYSTEMIC EXAMINATION

- Cardiovascular : Cont murmur at LUSB

INVESTIGATION RESULTS

- Echo:
S/P: Ductal stenting (21/08/2023).

Pulmonary atresia / IVS / Bipartite RV.
Ductal stent in situ. Good flow across stent, gradient: 63mmHg / 14mmHg
Good flow in branch pulmonary arteries. RPA measures: 6.5mm (z score: +0.87), LPA measures: 5mm (z score: -0.15).
Mild tricuspid regurgitation.
No mitral regurgitation
No LVOT obstruction. No aortic regurgitation.
Aneurysmal IAS. PFO with bidirectional flow.
Good LV function.
Left sided aortic arch. No coarctation.
No pericardial effusion.

DIAGNOSIS

- 13213009 | Congenital heart disease , Primary , Final , 10/01/2024

MEDICATION ORDER <https://www.childhelpinghand.org/>

DRUG NAME	PATIENT INSTRUCTION
1) ASPIRIN-TABLET-75MG-ECOSPRIN	Once Daily (0 - 1 / 4 - 0 - 0) Tablet Orally After Food Till Review Start Date: Jan 10, 2024
2) CHOLECALCIFEROL-DROPS-15ML-KIDRICH D3	Once Daily (10 - 0 - 0 - 0) Drops Orally Till Review Start Date: Jan 10, 2024
3) MULTIVITAMINS-DROPS-15ML-ZINCOVIT	Once Daily (0 - 10 - 0 - 0) Drops Orally Till Review Start Date: Jan 10, 2024
4) COLLOIDAL IRON HYDROX+FOLIC ACID+VIT B12-DROPS-15ML-TONOFERON	Once Daily (0 - 10 - 0 - 0) Drops Orally For 3 Months Start Date: Jan 10, 2024 End Date: Apr 08, 2024

ADVICE

- BREAST FEEDING UPTO 6 MONTHS OF AGE. THEN WEANING FOODS AFTER 6 MONTHS AS ADVISED
ROUTINE IMMUNIZATION AS PER SCHEDULE
FOLLOW UP WITH PEDIATRICIAN
- TO BE DISCUSSED IN CATH CONFERENCE - BD GLEN + AS

Refer to Dr SK. Behara



Rabindranath Tagore International Institute of Cardiac Sciences

(A unit of Narayana Hrudayalaya Limited)

Hospital: Premises No 1489, 124 Mukundapur, EM Bypass, Kolkata - 700099
OP: JB110KA200PLC02197, D3179LUP, 1MAARON155M125



Appointment
1800 309 0309



Email:
email.rtiics@narayanahealth.org

Our Accreditations



Emergency
99033 35544

Download Narayana Health App



Smart Health Care Solution



ADVICE

CARDIAC FOLLOW UP AFTER 2 MONTHS WITH ECHO, ECG (MONDAY / WEDNESDAY / THURSDAY)

For APPOINTMENT (MONDAY / WEDNESDAY / THURSDAY)

Online booking - Download NH Care App & search Doctors name (Android iOS)

080675 06860

180 0309 0309 (Toll free)

+91- 84202 11933 (10 am - 5 pm)

+91- 33 7122 2224 (8.30 am - 5 pm)

(Whatsapp)

(Within standard official timings)

SOCIAL HISTORY

- No significant social history

CONSULTANT DETAILS

<https://www.childhelpinghand.org/>

Dr. Debabrata Nandi , Consultant, Paediatric and Fetal Cardiologist MBBS, MD(Paediatrics), FNB(Paediatric Cardiology), Fellow National Board, Fellowship in Paediatric Cardiology (Australia) , CARDIOLOGY - PAEDIATRIC

One free consultation with the same doctor within next 6 days.

Printed By: Dr. Debabrata Nandi | Printed On: 10.01.2024 13:50



Rabindranath Tagore International Institute of Cardiac Sciences

(A unit of Narayana Hrudayalaya Limited)

Hospital: Premises No 1489, 124 Mukundapur, EM Bypass, Kolkata - 700099

PH: 033 12942339, 033 1197 1221, FAX: 12942338-39



Appointment
1800 309 0309



Email
email.rtiics@narayanahealth.org



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99033 35544



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CONSULTATION SUMMARY

Patient MRN : 17510001209660
Patient Name : Baby of Shaika Khanam
Gender/Age/Dob : Male , 4 Month 26 Days , 15/08 /23
Patient Phone No : 8804240754
Patient Address : HOUSE NO-306,NASRIGANJ,
PAITHAN TOLI,NEAR MASJID,
DINAPUR-CUM-KHAGAUL,
Patna,Bihar,India,-800018

Consultation Date : 10/01/2024 11:31 AM
Consultant : Dr. Debabrata Nandi
(CARDIOLOGY - PAEDIATRIC)
Consultation Type : OP , REVISIT



CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS

- S/P DUCTAL STENT

CLINICAL DATA

- S/P PDA DUCTAL STENTING - 21/8/23
Occasional breathing difficulty
Gaining weight since last visit

PAST MEDICAL HISTORY

- No significant past medical history

PROCEDURE HISTORY

- Microsurgery
Remarks: S/P ductal stent

FAMILY HISTORY

- No significant family history

ALLERGY

- No known allergies

BIRTH HISTORY

- LUCS/ BIRTH WEIGHT 2.8 KG/ CIAB

IMMUNIZATION STATUS

- Continue regular vaccination as per schedule

VITALS

Heart Rate : 116 bpm
SPO2 : 81 % , Room air
Weight: 4.9 kg

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(A unit of Narayana Healthways Limited)

Hospital: Premises No 1489, 124 Mukundapur, EM Bypass, Kolkata - 700099

City: 18B1180A2000PL027167 | 2278144 | 13AB00V1801123



Appointment
1800 309 0309



Email:
email.rtiics@narayanahealth.org

Our Accreditations



Emergency
99033 35544

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Care Solution

CONSULTATION SUMMARY

Patient MRN : 17510001209660
Patient Name : Baby of Shaika Khanam
Gender/Age/Dob : Male , 5 Month 1 Day , 15/08/23
Patient Phone No : 8804240754
Patient Address : HOUSE NO-306,NASRIGANJ,
PAITHAN TOLI NEAR MASJID,
DINAPUR-CUM-KHAGAUL,
Patna,Bihar,India,-800018

Consultation Date : 16/01/2024 04:40 PM
Consultant : Dr. Sukanta Kumar Behera
(CARDIAC SURGERY -
PAEDIATRIC)
Consultation Type : OP , NEW VISIT



CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS

- cyanosis
- mild breathing difficulty

CLINICAL DATA

- post ductal stenting-aug-23 for pa,ivs

PAST MEDICAL HISTORY

- No significant past medical history

PROCEDURE HISTORY

- Microsurgery

Remarks: S/P ductal stent

<https://www.childhelpinghand.org/>

DIAGNOSIS

- 13213009 | Congenital heart disease , Primary , Final , 10/01/2024
- 253623006 | Pulmonary trunk atresia , Primary , Final , 16/01/2024

Remarks: ivs,mild tr,post ductal stenting

ADVICE

- bd glenn,atrial septectomy-early-Gr A
GUEST SUPPORT CELL
HIGH RISK-10%
FUTURE REOPERATION
4 UNITS OF BLOOD

- Admission on ~~20/2/24~~
(As requested by Pt. Relatives)
- Pt. BSE/admission disk for approval
- Presurgical B.C.H.E.

ALLERGY

- No known allergies

FAMILY HISTORY

- No significant family history



Rabindranath Tagore International Institute of Cardiac Sciences
(A unit of Narayana Hrudayalaya Limited)

Hospital: Premises No 1489, 124 Mukundapur, EM Bypass, Kolkata - 700099
CIN: L85110KA2000PLC027497, GSTIN: UIN 19AAACH1988/1Z



Appointment
1800 309 0309



Email:
email.rtiics@narayanahealth.org

Our Accreditations



Emergency
99033 35544

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Care Solution

ESTIMATE FORM



Patient MRN: 17510001209660
Patient Name: Baby of Shaika Khanam
Gender/Age: MALE, 4 Years - 5 months
Advice Type: Surgery
Opted Class: General
Risk Category: A
Admission Type: INPATIENT

Estimate No: EST-1751-2401000723
Estimated On: 16-01-2024 17:10
Estimated LOS: 10
Consultant: Dr. Sukanta Kumar Behera (CARDIAC SURGERY - PAEDIATRIC)
Payor Profile: Cash
Mobile No: 8804240754

Table with 2 columns: Package/Service and Amount. Includes items like 'BD GLENN ON CPB - A PKG (PKG003400)', 'BALOON ATRIAL SEPTOSTOMY (ONLY PROCEDURE CHARGES) PKG.', 'Laboratory Services', and 'PSP'.

FINAL ESTIMATE

Blood charges + 364,500.00
Three Lakh Sixty Four Thousand Five Hundred

ADDITIONAL INFORMATION

ALL INVESTIGATION AND TEST TO BE CHARGED ON ACTUAL # NEED AADHAAR CARD & PHOTOCOPY FOR ALL MEDICAL DOCUMENT DURING ADMISSION PKG UPTO 10 NIGHTS(ITU+7G/W)# ALL INVESTIGATION AND TEST TO BE CHARGED ON ACTUAL # NEED AADHAAR CARD & PHOTOCOPY FOR ALL MEDICAL DOCUMENT DURING ADMISSION #EXTRA ITU CCU STAY WILL BE CHARGED @ RS 16500/- PER DAY IN PACKAGE PERIOD EXTRA HDU STAY WILL BE CHARGED @ RS 11350/- PER DAY IN PACKAGE PERIOD #DISCHARGE DATE WILL BE DECIDED AS PER TREATING CONSULTANT

APPROX PRE-SURGICAL PROFILE COST. MAY INCREASED AS PER REQUIREMENT FOR PATIENT # NEED "BLOOD DONATION" FOR THE SURGERY(CROSS MATCHING COMPONENT & NAT TESTED COMPONENT. WILL BE CHARGED EXTRA)

NOTE

International Patients: A maximum cash of \$5000 can be deposited (with patient passport endorsement ONLY) and rest to be paid in foreign currency through online transfer / international card(debit/credit)
Domestic Patients: A maximum cash of INR 50000 can be deposited and rest to be paid by online transfer / card (debit/credit)

https://www.childhelpinghand.org/

Disclaimer: The estimate is valid for a period of two months from the date of issue and may be subject to change. The package does not include treatment of any unrelated illness or procedures other than for which this estimate has been prepared. Also, expenses for any extended stay at the hospital beyond the estimated stay period, owing to any unforeseen circumstances or emergencies, shall be payable over and above the estimate. The estimate is based on our best understanding of the patients condition at the time of contact and is not the final amount payable and can vary at the time of actual billing or discharge.

We agree to the above package and the same has been explained to me / us in our own language.

ESTIMATED BY: Madhuparna Dasgupta (333433)
DATE AND TIME: 16-01-2024 17:10

PATIENT/RELATIVE NAME
CONTACT NO

SIGNATURE: [Handwritten Signature]

SIGNATURE: [Handwritten Signature]

Rabindranath Tagore International Institute of Cardiac Sciences
Unit of Narayana Hrudayalaya Limited

Address: Premises No 1489, 124 Mukundapur, EM Bypass, Kolkata - 700099
Email: email.rtiics@narayanahealth.org Web: www.narayanahealth.org
TEL/FAX: 19AABCN1685J1Z5

Appointments: 180 0309 0309 (Toll Free)
Emergencies: 99033 35544

SPO2: 81%
Weight: 4.9 kg



Rabindranath Tagore International Institute of Cardiac Sciences
Unit of Narayana Hrudayalaya Limited
Hospital: Premises No 1489, 124 Mukundapur, EM Bypass, Kolkata - 700099
ON 19AABCN1685J1Z5 | GSTIN: 19AABCN1685J1Z5



Appointment: 1800 309 0309



Email: email.rtiics@narayanahealth.org



Emergency: 99033 35544

- > Full amount of package/procedure/indicative to be paid at the time of admission.
- > Any observation patient entering into package /procedure/indicative needs to clear all previous dues & package/procedure/indicative charges before surgery/procedure.
- > This is an estimated cost, may vary on actual basis, Kindly note that the above rates are subject to change without prior notice.
- > If any patient will discharge within the package period, the package amount will not be refunded.

❖ **For Cardiac Surgery :-** 1) Only Medicines, Antibiotics, consumables will be charged after the package period. 2) Surgicel, Picocath, Custodial, IABP, IG, TISSEL, Alburel, are not included in package will be charge on actual. 3) Any extra test beyond pre-surgery profile will charge on actual. 4) Collect the draft bill on daily basis between 5pm to 7pm from hospital to update the billing status (except on Sunday/holiday). 5) Blood to be donated before surgery as per surgeon advise (if extra blood is required for the patient that can be donated later & processing charges will be extra). 6) Implants (Valve, Graft, Ring) are not included package will be charge actual.

❖ **For Non-Cardiac Surgery :-** 1) High value & non formulary Medicines, Antibiotics, consumables, implants, IABP, Blood are not included in package. 2) Beyond Package period every thing will be on actuals. 3) Collect the draft bill on daily basis between 5pm to 7pm from hospital to update the billing status (except on Sunday/holiday).

❖ **For Indicative Surgery :-** 1) Indicative cost is an approximate cost for the procedure, it may vary on actual. 2) Collect the draft bill on daily basis between 5pm to 7pm from hospital to update the billing status. (except on Sunday/holiday)

❖ **For Cardiology Procedure :-** 1) Beyond Package period every thing will be charge on actuals. 2) Costly Medicine, Antibiotics, consumables, extra dye, TPI, IABP, Peelaway Sheath, Blood, any implants is not included in the package. 3) Collect the draft bill on daily basis between 5pm to 7pm from hospital to update the billing status. (except on Sunday/holiday)

Payment :- CASH/DD/CARD (DEBIT or CREDIT) RTGS or NEFT.
(Personal Cheques are not accepted.)

Demand Draft may be drawn in favour of
"NARAYANA HRUDAYALAYA LTD.",
Payable at **KOLKATA**.

REMARKS : FUND TRANSFER THROUGH (NEFT/RTGS/IMPS) ONLY # KINDLY PROVIDE THE UTR NUMBER TO CASH COUNTER

RTGS/NEFT: NARAYANA HRUDAYALAYA LTD.
Account No: 37997688623, State Bank of India
IFSC Code :- SBIN0011529
1413 MUKUNDAPUR, KOLKATA



भारत सरकार

Government of India



Issue Date: 16/01/2015

शहजाद इमाम

Shahzad Imam

जन्म तिथि / DOB: 07/07/1995

पुरुष / Male

<https://www.childhelpinghand.org/>

2695 4635 2984

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण

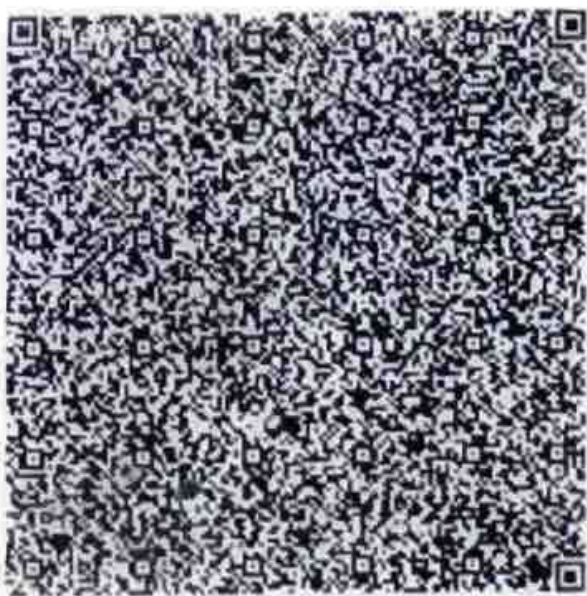
Unique Identification Authority of India



पता: आत्मज: हसन इमाम, आलमगंज पठान टोली, सम्पत्तचक, पट्टा
बिहार, 800007

Address: S/O: Hasan Imam, Alamganj
Paithan toli, Sampatchak, Patna, Bihar,
800007

<https://www.childhelpinghand.org/>



Print Date: 01/03/2021

2695 4635 2984



1947



help@uidai.gov.in



www.uidai.gov.in



भारत सरकार

Government of India



Aadhaar no. issued: 17/11/2014



शैका खानम

Shaika Khanam

जन्म तिथि/DOB: 13/10/1993

महिला/ FEMALE

आधार पहचान क प्रमाण है, नागरिकता या जन्मतिथि का नहीं ।

इसका उपयोग स्थापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/ ऑफलाइन एक्सएल की स्कैनिंग) के साथ किया जाना चाहिए ।

Aadhaar is proof of identity, not of citizenship

or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

5492 0486 1808

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



पता:

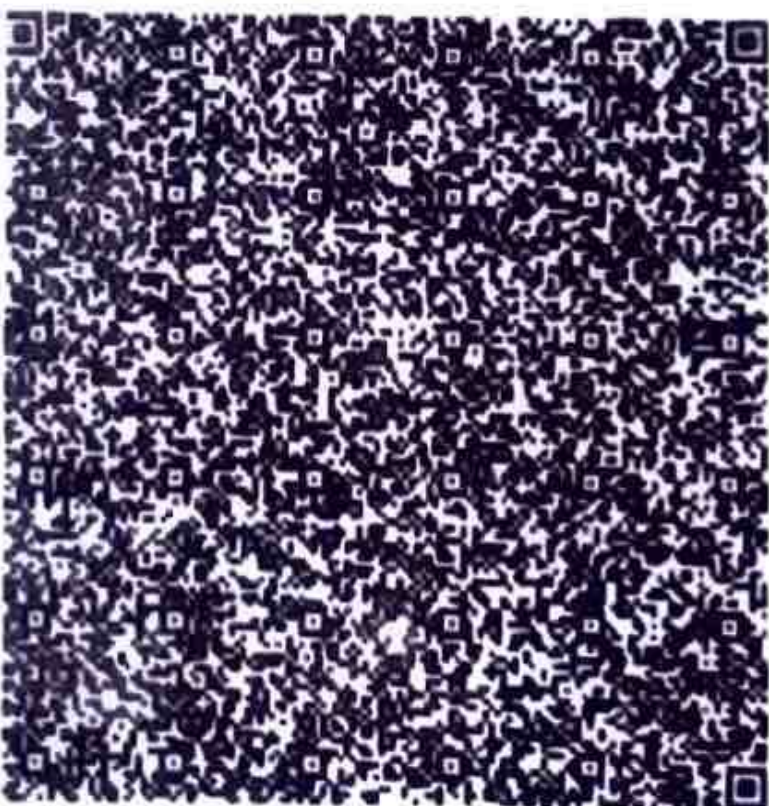
द्वारा: शहजाद इमाम, आलमगंज, पैठान टोली, पटना सिटी,
बिहार - 800008

Address:

C/O: Shahzad Imam, Alamganj, Parthana Toli,
Patna City, PO: Patna City, DIST: Patna,
Bihar - 800008

Details as on: 09/01/2024

<https://www.childhelplineindia.org/>



5492 0486 1808

VID : 9124 8075 5014 7680



1947



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बिहार सरकार
Government of Bihar
फॉर्म / Form - XIII

निवास प्रमाण-पत्र / Residence Certificate

जिला / District : पटना, अनुमंडल / Sub-Division : पटना सिटी, अंचल / Circle : पटना सदर

प्रमाण-पत्र संख्या : BRCCO/2023/9623293

दिनांक : 05/10/2023



प्रमाणित किया जाता है कि शहजाद इमाम (Shahzad Imam), पिता (Father) हसन इमाम (Hasan Imam), माता (Mother) तारा खातून (Tara Khatoon), ग्राम / मोहल्ला - महाजन बिल्डिंग पठान टोली आलमगंज, वार्ड संख्या -52, डाकघर - गुलजारबाग, पिनकोड - 800007, थाना - आलमगंज थाना, प्रखंड - पटना सदर, अनुमंडल - पटना सिटी, जिला - पटना, राज्य - बिहार के स्थायी निवासी हैं।

स्थान : पटना सदर

दिनांक : 05/10/2023



<https://www.childhelpinghand.org/>

Digitally signed by Kumari Nishu Singh
Date:2023.10.05 02:00:50 +05:30

(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।
नोट: यह दस्तावेज DigiLocker पर भी उपलब्ध है।



बिहार सरकार
Government of Bihar
फॉर्म / Form - XVI

जिला / District : पटना, अनुमंडल / Sub-Division : पटना सिटी, अंचल / Circle : पटना सदर
आय प्रमाण-पत्र / Income Certificate

प्रमाण-पत्र संख्या : BICCO/2023/6879954

दिनांक : 28/09/2023

प्रमाणित किया जाता है कि शहजाद इमाम (Shahzad Imam), पिता (Father) हसन इमाम (Hasan Imam), माता (Mother) तारा खातून (Tara Khatoon), ग्राम / नगर - महाजन बिल्डिंग पठान टोली आलमगंज, डाकघर - गुलजारबाग, थाना - आलमगंज थाना, प्रखंड - पटना सदर, अनुमंडल - पटना सिटी, जिला - पटना, राज्य - बिहार एवं उनके परिवार की कुल वार्षिक आय निम्नांकित है :-

सरकारी सेवा से आय	: ₹ 0 /-	व्यवसाय से आय	: ₹ 90000/-
कृषि से आय	: ₹ 0 /-	अन्य स्रोतों से आय	: ₹ 0 /-
कुल आय (वार्षिक)	: ₹ 90000/-		

स्थान : पटना सदर

दिनांक : 28/09/2023

<https://www.childhelpinghand.org/>

Digitally signed by Kumari Nishu Singh
Date:2023.09.28 08:33:53 +05:30



(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

महजबीं

पार्षद, वार्ड नं.-52
पटना नगर निगम



आवास:
आलमगंज, नरकट घाट,
पटना - 800007
मो० : 9835455293

पत्रांक.....7619.

दिनांक.....27-9-2023

प्रमाणित किया जाता है कि -

इब्राहिम इमाम, पिता - साहजाद इमाम, पता - आलमगंज
पैठान रोली, थाना - आलमगंज, पोस्ट - गुलजार बाग़ ज़िला
पटना - 800007 के इन्साई निवासी है। इनका जन्म
दिनांक 15-08-2023 को मालन्दा मेडरिनी होम, पता -
दिवान मौदल्ला, पटना-800008 में हुई। मैं इन्हे जानती एवं
पहचानती हूँ।

<https://www.childhelpinghand.org/>

Mahjabeen
MAHJABEEN
Ward Counsellor No-52
Patna Nagar Nigam

NALANDA MATERNITY HOME



Old Registry Office Bhawan, Nauzar Katra
Diwan Mohalla, Patna City-800008

S.N.-318/2023

M.N. 8809808040

Birth Certificate

<https://www.childhelpinghand.org/>

This is to certify that a male/ female child was born to
SHAIKA KHANAM

Smt.

w/o SHAHZAD IMAM

of AT – ALAMGANJ, PAITHAN TOLI, PATNA, BIHAR - 800007

On dt. 15.08.2023 A/M/C At 07.20 AM

Under my care.

Manager

Nalanda Maternity Home

Patna city

Signature



सर्वोच्च न्यायालय

सं. 1

NO. 1



बिहार सरकार

GOVERNMENT OF BIHAR

योजना और विकास विभाग

DEPARTMENT OF PLANNING AND DEVELOPMENT

नूतन राजधानी अंचल, पटना नगर निगम

NEW CAPITAL CIRCLE, PATNA MUNICIPAL CORPORATION

प्रपत्र-5

FORM-5



जन्म प्रमाण-पत्र BIRTH CERTIFICATE

(जन्म मृत्यु रजिस्ट्रीकरण अधिनियम, 1969 की धारा 12 / 17 तथा बिहार जन्म मृत्यु रजिस्ट्रीकरण नियम, 1999 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 BIHAR REGISTRATION OF BIRTHS & DEATHS RULES 1999.)

यह प्रमाणित किया जाता है निम्नलिखित सूचना जन्म के मूल अभिलेख से ली गई है जो कि नूतन राजधानी अंचल, पटना नगर निगम तहसील पटना सदर जिला पटना राज्य/संघ प्रदेश बिहार, भारत के रजिस्टर 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 NEW CAPITAL CIRCLE, PATNA MUNICIPAL CORPORATION OF TAHSIL/BLOCK PATNA SADAR OF DISTRICT PATNA OF STATE/UNION TERRITORY BIHAR, INDIA.

नाम / NAME: IBRAHIM IMAM

लिंग / SEX: पुरुष / MALE

जन्म तिथि / DATE OF BIRTH:

15-08-2023

FIFTEENTH-AUGUST-TWO THOUSAND TWENTY THREE

जन्म स्थान / PLACE OF BIRTH:

AT+PS.-JAKKANPUR PO.-G.P.O.,

PATNA,PATNA SADAR, PATNA,

BIHAR, 800001

माता का नाम / NAME OF MOTHER:

SHAIKA KHANAM

पिता का नाम / NAME OF FATHER:

SHAHZAD IMAM

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS

AT THE TIME OF BIRTH OF THE CHILD:

ALAMGANJ PAITHAN TOLI PS.-ALAMGANJ ,

PATNA, PATNA SADAR, PATNA,

BIHAR- 800007

माता-पिता के स्थायी पता/ PERMANENT ADDRESS OF PARENTS:

ALAMGANJ PAITHAN TOLI PS.-ALAMGANJ,

PATNA, PATNA SADAR, PATNA,

BIHAR- 800007

पंजीकरण संख्या / REGISTRATION NUMBER:

B-2024: 10-98658-002835

पंजीकरण तारीख / DATE OF REGISTRATION:

20-01-2024

टिप्पणी / REMARKS (IF ANY):

ON THE BASIS OF PATNA SADAR B.D.O. LT. NO.- 2632

DT.-06.01.2024. IF FOUND ERRONEOUS OR

FRAUDULENTLY MADE WILL BE CANCELLED AND LIABLE

TO PROCEEDING U/S 465 IPC.

जारी करने की तिथि / DATE OF ISSUE:

20-01-2024

जारी करने वाला प्राधिकारी / ISSUING AUTHORITY:

उप-रजिस्ट्रार (जन्म एवं मृत्यु)

SUB-REGISTRAR (BIRTH & DEATH)

नूतन राजधानी अंचल, पटना नगर निगम

NEW CAPITAL CIRCLE, PATNA MUNICIPAL CORPORATION

UPDATED ON:

20-01-2024 09:07:40



"THIS IS A COMPUTER GENERATED CERTIFICATE."

"THE GOVT. OF INDIA VIDE CIRCULAR NO. 1/12/2014-VS(CRS) DATED 27-JULY-2015 HAS APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES".

"प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें" / "ENSURE REGISTRATION OF EVERY BIRTH AND DEATH"





सं. 1
NO. 1



बिहार सरकार
GOVERNMENT OF BIHAR
योजना और विकास विभाग
DEPARTMENT OF PLANNING AND DEVELOPMENT
नूतन राजधानी अंचल, पटना नगर निगम
NEW CAPITAL CIRCLE, PATNA MUNICIPAL CORPORATION

फॉर्म-5
FORM-5



जन्म प्रमाण-पत्र
BIRTH CERTIFICATE

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नाम / NAME: IBRAHIM IMAM

लिंग / SEX: पुरुष / MALE

जन्म तिथि / DATE OF BIRTH:

15-08-2023
FIFTEENTH-AUGUST-TWO THOUSAND TWENTY THREE

जन्म स्थान/ PLACE OF BIRTH:

AT+PS-JAKKANPUR PO.-G.P.O.,
PATNA,PATNA SADAR, PATNA,
BIHAR, 800001

माता का नाम / NAME OF MOTHER:

SHAIKA KHANAM

पिता का नाम / NAME OF FATHER:

SHAHZAD IMAM

आधार नंबर / MOTHER'S AADHAAR NO:

आधार नंबर / FATHER'S AADHAAR NO:

XXXXXXXX2984

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

ALAMGANJ PAITHAN TOLI PS.-ALAMGANJ,
PATNA, PATNA SADAR, PATNA, BIHAR- 800007

माता-पिता के स्थायी पता/ PERMANENT ADDRESS OF PARENTS:

ALAMGANJ PAITHAN TOLI PS.-ALAMGANJ,
PATNA, PATNA SADAR, PATNA,
BIHAR- 800007

पंजीकरण संख्या / REGISTRATION NUMBER:

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जारी करने की तिथि / DATE OF ISSUE:

20-01-2024

जारी करने वाला प्राधिकारी / ISSUING AUTHORITY:

उप-रजिस्ट्रार (जन्म एवं मृत्यु)
SUB-REGISTRAR (BIRTH & DEATH)
नूतन राजधानी अंचल, पटना नगर निगम
NEW CAPITAL CIRCLE, PATNA MUNICIPAL
CORPORATION

SUB-REGISTRAR
Birth and Death
New Capital Circle
Patna Municipal Corporation
PATNA



UPDATED ON :

20-01-2024 09:07:40



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* प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH *

