

**ALL INDIA INSTITUTE OF MEDICAL SCIENCES
DR. RAJENDRA PRASAD CENTRE FOR OPHTHALMIC SCIENCES
ANSARI NAGAR, NEW DELHI-110029
Medical Social Service Unit, Phone:- 011-26593092,26593027**



UHID	105141073		
Patient's Name	MISS. MAHI		
S/D/W/of	MR. NEERAJ SHARMA		
Age	54 20	Sex	F
Address	A5/8 Himgiri Enclave Saw Nagar Baran		
State	Dell/INDIA		
Contact No:-	9997662085		
Card Status/BPL/APL/AAY		Card No :	
Family Income	2,000		
Source of Income	FARMER		
Diagnosis	RETINOBLASTOMA (RE-Grp E 1LE-Grp D)		
Treating Doctor	DR. LOMI		
Treatment Required	NEED ARTIFICIAL EYE		
Expenditure Estimated	17,000/-		
Assistance required for Surgical tem/Medicines/Spect./Lense.	Artificial Eye		
Remarks	family is very poor, they need support for artificial eye		

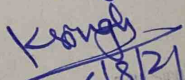
<https://www.childhelpinghand.org/>

Enclosures:-

- | | | |
|------------------------------|-------------|-------------------|
| 1. OPD Card(Treatment Card) | 2. Estimate | 3. Identity Proof |
|------------------------------|-------------|-------------------|

Applicant's Name Moh
Relation With Patient Father

Funding Agency /Donor Name Child helping hand


 26/8/21
 किरण शर्मा रिजिस्ट्रार
 मुख्य चिकित्सा सहायक एवं अधिकारी
 Chief M. S. S. Officer
 डॉ. राजेंद्र प्रसाद केंद्र चिकित्सा विभाग
 Dr. R. P. Centre for Ophthalmic Sciences
 एन आर सी. ४३ बिल्डिंग, A.I.I.M.S., New Delhi-110029

मेरा नाम नौरज शर्मा है।

मेरा लम्बे का नाम माही है। मेरे लम्बे को

दोनों आंखों से कैंसर है। और उसके एक आंख का

ऑपरेशन के द्वारा निवृत्त हो गयी है।

और दूसरी आंख का इलाज

चल रहा है। रेमस में

के लिए आर्थिक सहायता की आवश्यकता है।

मुझे उसके लिए नवनी आंख लगवाने

की आवश्यकता है।

जिसके लिए मैं आपका सहाय

आग्रही रहूंगा।

नाम नौरज शर्मा

फोन नं० 9997662085

वाँस पोस्ट मन्हीपुर

बागपल (U.P)

Pt is 5yr old child
 dependent on her father
 whose working as
 farmer. Pt needs an
 artificial eye as she's
 retinoblastoma case.
 Financial help thru
 Rs 17000/- (seventeen thousand
 only).
 Kings

26/08/21

केंद्र का नाम: डॉ. एच. एम. डी. एस. ऑफिस
 मुख्य अधिकारी: डॉ. एच. एम. डी. एस.
 डॉ. एच. एम. डी. एस. ऑफिस
 Dr. R. P. Centre for Ophthalmic Services
 अ. भा. सं. सं. राय रोड/अ. भा. सं. नया दिल्ली-29

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

ब० रो० वि० कार्ड
O.P.D. Card



अनुभाग व दिन
Section and Day
व शनिवार
& Saturday

कमरा नंबर
Cabin No.

डा० रा०

अ० म.
Dr. Raj
A.I.I.M.

General Consultation Time: 9.00 AM - 1.00 PM



Dept. Seq: 689

RD 105141073

Dept: R. P. Centre
(Eye Centre)

Dept. Regn. 2020/005/0030642

Unit: Unit-VI

Name: Miss MAHI

Room: 32

D/O NEERAJ SHARMA, 3Y 5M 9D, F

F/34

Ph: 9897740331

Days: Saturday

A5/8 HINGIRI ENCLAE SANT NAGAR
BURARI, DELHI, INDIA

App. Date:
20/02/2021

I एकक
i's Unit

यु एच ३
UHID

Na

Appt. ID:



2021022001134

पता
Address

दिनांक DATE	निदान DIAGNOSIS	उपचार Treatment
	(R) Regressed Group B RB (L) Chew Resistant Group D RB	
	<div data-bbox="621 710 935 933" data-label="Text" style="border: 1px solid black; padding: 5px; margin: 0 auto;"> <p>D/O/A 20/2/2021 7:30 AM ward 1A</p> </div>	
	<p>covered in Heel MMJ front & orbit & contrast checked & felt improved in hand/contrast/sagittal section.</p>	

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

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.

१. धूम्रपान निषेध २. कूड़ा कर्कट केवल कूड़ेदान में ही डालें ३. थूकिये नहीं

ब० रो० वि० कार्ड
O.P.D. Card

दृष्टि

नव अक्षय उपहार है
वे जग ही वे सकार है

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

कमरा नंबर
Cabin No.

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
अ० भा० आयु० सं०, नई दिल्ली 110029

Dr. Rajendra Prasad Centre for Ophthalmic Sciences
A.I.I.M.S., New Delhi-110029

यू०एच०आई०डी० संख्या

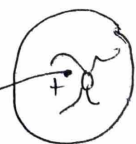
UHID No.

105141073

आचार्य राधिका 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
Mahi	Jyoti / F.			

दिनांक DATE	निदान DIAGNOSIS	उपचार Treatment
30/7/21	(R) Referred go B RS (L) Enucleated.	
		EVA done by Dr. Bhawna Chawla ↓ unit 6 No. of chemo cycle - 8 last chemo date - 9/1/2021 EBRT ⊖ IAM ⊖ Periocular/ Intraorbital inj last EVA 20/1/2021 -  Referred go B RS

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.

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

Teleconsultation Ph - 09999764205

Dr. Rajendra Prasad Centre For Ophthalmic Sciences
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS), New
Delhi, 110029

Discharge Report
PROVISIONAL DISCHARGE CERTIFICATE

*Covid test done on 26/1/21
No virus*

UID: 101241029
Name: MISS MAHI MAHI
Age/Sex: 45 years / 26-29 days / Female
Ward Name: 7A
Address: 45/3-1, PULI, ENCLAVE, PANE NAGAR, BURARI, DELHI, INDIA
Mobile No: 9891740331
Date of Admission: 14/04/2021 11:39:30 AM
Date of Discharge: 21/04/2021 08:07:00 AM

Ct No: 0000000001
Department: 4 - OP Centre (Eye) (out) / Unit: 401 / Bed No: 110

Drug Allergy, if any :- []

21-312

ICD Code: C69.2
ICD Description: Malignant neoplasia Retina

Diagnosis
R: GROUP B RETINOBLASTOMA
L: RECALCITRANT GROUP D RETINOBLASTOMA

Investigation
Systemic: NO SYSTEMIC ILLNESS

Ocular
VA: RF- FOLLOWS OBJECT
LE- DOES NOT FOLLOW OBJECTS

*VER 23/3/21
10-6μv/97-7ms
66μv/10ms*

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

Treatment/Operative Procedure
Surgeon: DR AMIT
Date: 20/04/2021

Surgery
RETT
LE ENUCLEATION (MYOCONJUNCTIVAL FLAP TECHNIQUE) PRIMARY IMPLANT PARAMEDIAN TARSORAPHY UNDER GA/NP
INTRA OP
5MM OPTIC NERVE STUMP CUT
20 MM SILICON IMPLANT INSERTED

Condition at Discharge
Vision: RF- FOLLOWS OBJECTS
LE- ENUCLEATED EYE
Anterior Seg: LE
LE: 19 D IOL
CONFORMER AND IMPLANT PRESENT IN SOCKET

IOP
Posterior Seg.

Advice During Discharge
Oral: SYP AUGMENTIN (2280/5ML) 5 ML BD FOR 7 DAYS
SYP IBUGLISIC PLUS 5ML BD
SYP OMNACORTIL (1MG/1ML) 5ML TDS AFTER MEALS FOR 7 DAYS
SYP DIGEIN 5 ML TDS
Follow Up: AFTER 1 WEEK ON WING WITH DR AMIT IN

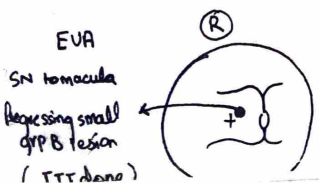
Topical
RE
A E/D MOXI-KT 41/D
LE
C E/D MLI ODX 41/D
3E
BC E/D TEARDROPS 41/D

Ward IA 9AM 1/5/21 Saturday

USG for PSE
① Grossly anechoic
② VH/VE+, calcification
③ RD
④ mass s/o RB

*AL ~ 22mm
~ 23mm*

Prepared By: Dr. Anish Prasad
Signature Of Senior Resident



①
Recalcitrant Group D

7th floor
20-04-2021 13:00
Collect histopathology report
on follow up from pathology



Suvidha Eye Services

A Custom Made Artificial Eye Center

Ravikant Sharma

B.Opt., P.G.Dip. Orth. (A.M.U.)
Ocularist

Dated 28-08-2021,

Services Offered:

- Ocular Prosthesis

All type of ocular
prosthesis like
cosmetic eye,
thin shell and hollow
prosthesis.

- Orbital Prosthesis

Silicone, Spectacle
retained orbital
prosthesis.

- Prosthetic Contact
Lenses

- Crutch Glasses

To whom it may concern


This is to inform you that Miss Mahi, female age 5 year is suffering from retinoblastoma and got her eye enucleated for the same post surgery patient needs a customised ocular prosthesis for her rehabilitation and orbital growth to prevent facial asymmetry. The cost of the customised 3d ocular prosthesis making procedure is INR 17,000/- (seventeen thousand) only and the complete procedure takes two days time.

Looking forward to get the positive response from your side.
Thank you.

Kind Regards,

Ravikant Sharma
(Ocularist)

For Suvidha Eye Services

For SUVIDHA EYE SERVICES

Proprietor

SUVIDHA EYE SERVICES
528, Site-1, Vikas Puri
New Delhi-110018 (9999345010)

528, Site-1 Vikas Puri, New Delhi-110018

Near Metro Pillar No.-623, M : +919999345010

www.artificialeyecentreindeli.com, E-mail : sravikant1976