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# Girraj Ji Children Hospital

## बच्चो का विशेष अस्पताल

MG Road, Near Girls College Gurugram - 122001 (Hr)

Tel.: 9871869863, 9910979863 | Email : girrajchildrenhospital@gmail.com



### CASE SUMMARY

Patient's Name	Babyof PAYAL	IPD No.	5434
S/O	AMIT BOKEN	UHID	20/00 14778
Address	W 119, GF, UPPAL SOUTHEND, NEAR OMAX PLAZA MALL SOHNA ROAD, SEC 49, SOUTH CITY 2, GGN HR	DOA	27-May-2026 04:37 AM
Age/Sex	102014 Male	Type	CASE SUMMARY
Consultant Name	Dr. Mohit		
Contact No.			
Department/Speciality	PEDIATRICIAN & NEONATOLOGIST		

#### DIAGNOSIS

Preterm (32 weeks)/2.09 kg/male/Respiratory Distress ( Post Surfactant)/Shock/Suspected Sepsis/ ESCS Delivered at Girraj ji Children Hospital on 27/05/2026 4:17 am

#### PRESENTING COMPLAINTS

Preterm (32 weeks)/2.09 kg/male/Respiratory Distress ( Post Surfactant)/Shock/Suspected Sepsis. Baby cried immediately after birth, but as baby had respiratory distress, Hence baby was shifted to NICU for further management.

#### EXAMINATION FINDING

O/E:

Moderate Respiratory Distress

CVS: no murmur, normotensive.

Respi: RR: 72/min, SpO2: 92% on HHHFNC.

P/A: soft.

CNS: Af at level. Tone/cry/reflex: good.

#### COURSE IN THE HOSPITAL

Resp: baby was started on high flow in v/o respiratory distress, Inj Neosurf ( Via Ensure) given in v/o increase demand of oxygen and prematurity. At present baby is on HHHFNC Support , maintaining sauration > 95%.

CVS: Multiple inotrops ( Inj Dopa/Inj Dobuta) started in v/o poor perfusion and low urine out put. Plan for 2DECHO.

GIT: baby kept NPO in v/o unsettled distress and poor perfusion. Baby was euglycemic during hospital stay.

CNS: tone/cry/ activity: good. AF at level.

Sepsis: Septic screen done and IV Antibiotic ( Inj Piptaz/Inj Amikacin) started.

At present:

Resp- on HHHFNC Support ( 35% Fio2)

CVS- Inf Dopa and Dobuta

CNS- Activity/tone/reflex- normal

P/A- NPO, on IV Fluid

Sepsis- Inj Piptaz/Inj Amikacin

#### TREATMENT GIVEN

HHHFNC Support

Inj Piptaz/Inj Amikacin

Inj Dopa/Inj Dobuta

IV Fluid

Other supportive treatment

#### INVESTIGATION RESULT

All reports are attached with case summary.



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<b>S/O</b>	AMIT BOKEN	<b>UHID</b>	20/00 14778
<b>Address</b>	W 119, GF, UPPAL SOUTHEND, NEAR OMAX PLAZA MALL SOHNA ROAD, SEC 49, SOUTH CITY 2, GGN HR	<b>DOA</b>	27-May-2026 04:37 AM
<b>Age/Sex</b>	18/20 Male	<b>Type</b>	CASE SUMMARY
<b>Consultant Name</b>	Dr. Mohit		
<b>Contact No.</b>			
<b>Department/Speciality</b>	PEDIATRICIAN & NEONATOLOGIST		

### TREATMENT ADVICE ON DISCHARGE

Rx	Name	Frequency	Duration	Route
1				

<b>Treating Consultant / Authorized Team Doctor</b>	<b>Name / Signature</b>	
<b>Patient / Attendant</b>	<b>Name / Signature</b>	
	<b>Mobile No.</b>	



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# Girrajji Children Hospital

Near Govt Girls collage ,MG Road, Sector 14, Gurugram, Haryana, 122001  
 , 9871869863/01242979863  
 hospitalgirrajji@gmail.com

## Admission & Discharge Record

Patient Name Babyof PAYAL	UHID 20/00147 78	IPD No. .5434	Age NB	Sex Male	Ward /Room NICU-NICU 1
S/O AMIT BOKEN				Patient Type General	
Full Address	W 119, GF, UPPAL SOUTHEND, NEAR OMAX PLAZA MALL SOHNA ROAD, SEC 49, SOUTH CITY 2, GGN HR 122018				
Date & Time of Admission	27/05/2026 04:37 AM				
Date & Time of Discharge					
Hospital Stay ( No. of Days )					
Provisional Diagnosis					
Final Diagnosis					
Secondary Diagnosis or Complication					
Operation / Special Procedure					
RESULTS	Improved	Referred	Left Against Medical Advise	on Request	Absconded
Dr. Mohit- Doctor Name & Signature				Patient Name & Signature 	



# Girraj ji children hospital

Sec 14, Gurugram



## Admission request

Name B/o Payal Age NB Sex MALE  
 ID 14778 Date of Admission 27-5-20 Time 4:37 AM  
 Routine ( ) Emergency (  ) Planned ( )

Brief History.....  
 .....  
 .....

Diagnosis .....

Plan of treatment.....

Any Known allergy (2000 100 500 ABC RBS XRAY) 3K Extra (High flow) 5K Extra (Vent)

Aprox Estimate 8K To 10K Per day Lab/Med extra  
Any other Procedure extra:

Expected length of stay.....

Consultant Name ..... Signature.....

Patient /Attendent Name ..... [Signature]

Patient /Attendent signature ..... [Signature]

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UHID No : 20/003588

Lab No : 6767

Patient Name Babyof PAYAL

Age/Sex : 0 Days / Male

Address :

Coll. Date 27-May-2026 04:40 AM

Rep. By : DR MOHIT

Rep. Date 27-May-2026 05:25 AM

### HAEMATOTOLOGY

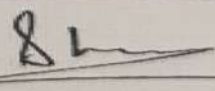
Description	Result	Unit	Ref.Range
<b>COMPLETE BLOOD COUNT ( CBC )</b>			
HAEMOGLOBIN ( H b )	18.6	gm/dl	14 - 22
TOTAL LEUCOCYTES COUNT	12570	/cumm	5000 - 17500
<b>DIFFERENTIAL LEUCOCYTES COUNT ( DLC )</b>			
Segmented Neutrophils	30	%	50 - 70
Lymphocytes	58	%	20 - 40
Eosinophils	02	%	1 - 6
Monocytes	10	%	1 - 10
Basophils	00	%	0 - 0
TOTAL R.B.C. COUNT	5.07	million/cumm	3.8 - 5.2
P.C.V./ Haematocrit value	53.6	%	42 - 68
PLATELET COUNT	3.18	lacs/mm <sup>3</sup>	1.5 - 4.5
RED CELL DISTRIBUTION WIDTH-RDW	16.1	%	11.7 - 14.5

Test done on Erba H-360 Automated Hematology Analyzer and Correlation with smear Examination.

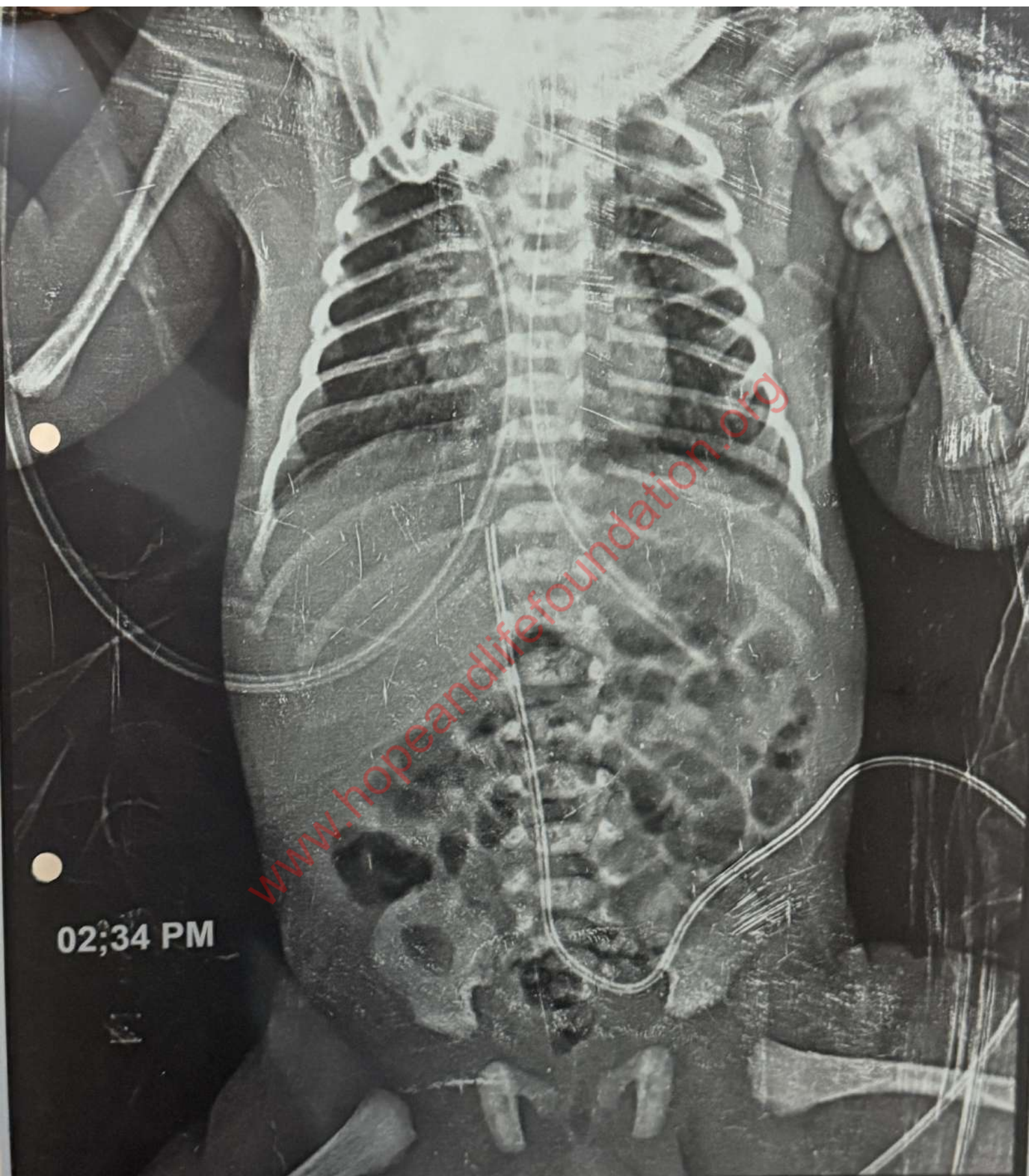
Test conducted on EDTA whole blood

\*\*\*\* End of The Report \*\*\*\*



  
Dr. Shweta Yadav  
MD Pathology  
Reg No. = 88023





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02:34 PM

B O PAYAL GIRRAJ 200014778 CHEST,FRN A->P 05/27/26  
GIRRAJ JI CHILDREN HOSPITAL, SEC-14 GURUGRAM

भारत सरकार  
Government of India

पायल  
Payal  
जन्म तिथि / DOB : 14/12/2002  
महिला / Female

2122 0332 1826

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

पता:  
D/O: कालीराम, 86, साकड़ा मोहल्ला,  
फतेह पुर बेरी, फतेहपुर बेरी, दक्षिण  
दिल्ली, दिल्ली, 110074

Address:  
D/O: Kaliram, 86, saukda mohalla,  
Fateh Pur Beri, Fatehpur Beri,  
South Delhi, Delhi, 110074

2122 0332 1826

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www.uidai.gov.in

भारत सरकार  
Government of India

Amit Boken  
Date of Birth/DOB: 05/01/2001  
Male/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मदिनांक का नहीं।  
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/  
ऑफलाइन एक्सएमएल 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).

7939 2610 6849

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India

Address:  
S/O: Rajbir, W-119, GF, Uppal Southend, Near Omax  
Plaza Mall Sohna Road, Sector-49, South city -II, PO:  
Gurgaon South City II, DIST: Gurgaon,  
Haryana - 122018

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VID : 9159 4975 1725 0874

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To,

HOPE AND LIFE FOUNDATION

Date: 30-May-2026

Subject: Estimated Cost for Medical Treatment – Financial Assistance Appeal

This is to inform that **Baby of Payal, S/o Amit Boken**, is currently undergoing critical medical treatment at a pediatric hospital in Gurugram. The newborn baby is **preterm (32 weeks)** and is suffering from serious medical conditions including:

- Respiratory Distress
- Suspected Sepsis
- Prematurity-related complications

The baby has been admitted to the **Neonatal Intensive Care Unit (NICU)** and is under continuous observation with advanced life support systems including oxygen support, medications, and monitoring.

### Estimated Treatment Cost

Based on the current medical condition and hospital treatment plan, the approximate total cost for complete treatment is estimated as follows:

- **NICU Charges (10–15 days):** ₹1,50,000 – ₹2,00,000
- **Medicines & Injections:** ₹60,000 – ₹80,000
- **Doctor Consultation & Procedures:** ₹40,000 – ₹60,000
- **Investigations & Tests:** ₹30,000 – ₹50,000
- **Emergency & Supportive Care:** ₹30,000 – ₹50,000

**Total Estimated Cost: ₹4,00,000 to ₹5,00,000**

The family belongs to a financially weak background and is unable to bear such a high cost of treatment.

### Appeal for Support

Your support can make a life-saving difference.

We assure that all funds will be used transparently for the treatment purpose only.

Thank you for your kindness and support.

Dr. Mohit Kumar Aggarwal  
MBBS, DNB (Pediatrics)  
HN-13926  
Pediatrician & Neonatologist

