





# SWASTIK

MULTISPECIALITY HOSPITAL

Mohna Road, Opp. SBI Bank, Ballabgarh



0129-2303438

E-Mail : swastikhospitalfaridabad@gmail.com

**INDOOR FILE**

Bed No.	
Regd. No.	
OPD No.	
IPD No.	7916
D.O.A.	20/5/25 at 7
D.O.D.	

Patient's Name ..... Yogita

S/W/D of ..... Teeta ..... Age ..... 1m ..... Sex ..... Female

Occupation ..... Marital Status .....

Address ..... Hari Vihar, Adarsh Nagar B/B

..... Phone No. ....

Consultant Incharge Dr. Pawan Sh. Relation ..... Father



# SWASTIK Lab

Patient Name: Baby YOGITA  
Referred By: Dr. SWASTIK MULTISPECIALITY HOS.  
Reg. No. 73350  
Collected on: 21/05/2025

Age / Sex: 1 months / F  
Date: 21/05/2025  
Reported on: 21/05/2025 01:45 PM



## HAEMATOLOGY COMPLETE BLOOD COUNT (CBC)

TEST	VALUE	UNIT	REFERENCE
Hemoglobin	11.3	g/dl	11.2 - 16.5
Total Leukocyte Count	9,400	cumm	4,000 - 11,000
Differential Leukocyte Count			
Neutrophils	64	%	40 - 80
Lymphocyte	31	%	20 - 40
Eosinophils	02	%	1 - 6
Monocytes	03	%	2 - 10
Basophils		%	< 2
Platelet Count	4.29	lakhs/cumm	1.5 - 4.5
Total RBC Count	L 3.6	million/cumm	3.9 - 4.8
Hematocrit Value, Hct	L 35.9	%	36 - 46
Mean Corpuscular Volume, MCV	99.7	fL	83 - 101
Mean Cell Haemoglobin, MCH	31.4	Pg	27 - 32
Mean Cell Haemoglobin CON, MCHC	31.5	%	31.5 - 34.5
Mean Platelet Volume, MPV	9.9	fL	6.5 - 12
R.D.W. - SD	44.8	fL	39 - 46
R.D.W. - CV	13.2	%	11.6 - 14




Anil Kumar  
M.Sc. Microbiology  
Lab Incharge

*Bushra*

Dr Bushra Abid  
M.B.B.S, M.D  
Consultant pathologist

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Patient Name:	Baby YOGITA	Age / Sex:	1 months / F	 73350
Referred By:	Dr. SWASTIK MULTISPECIALITY HOS.	Date:	21/05/2025	
Reg. no.	73350			
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### BIOCHEMISTRY

#### KIDNEY FUNCTION TEST (KFT)

TEST	VALUE	UNIT	REFERENCE
<b>BUN</b>	<b>H 42.08</b>	<b>mg/dl</b>	<b>7.9 - 20</b>
Serum Urea	90.1	mg/dl	10-50
Serum Creatinine	0.9	mg/dl	0.5 - 1.4
Serum Uric Acid	4.5	mg/dl	2.6 - 7
Serum Sodium	143.3	mmol/L	130 - 160
Serum Potassium	3.8	mmol/L	3.2 - 5.7
Urea / Creatinine Ratio	100.11		
BUN / Creatinine Ratio	46.76		

~~~ End of report ~~~



*Bushra*

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**SWASTIK**  
MULTISPECIALITY HOSPITAL

### **Hospital Recommendation letter**

**Date: 21/05/2025**

**Name of the child:- Baby Yogita**

**Age:-1 Months Gender: Female**

**Medical Diagnosis: Congenital Heart defect/Extremely Low Birth Weight /RDS /HMD/ sepsis/ ARDS /Shock/Neonatal sepsis/ Apnoea**

**Suggested treatment:Medical/surgical management with respiratory support**

**Proposed date of Surgery/Treatment: Upto 3 wks**

**Estimated cost of treatment (with break ups): Rs 300000/-**

This is to certify that the above referred case is critically ill. The child requires support for medical treatment expense. We here by recommend you this case for financial assistance. The above mentioned estimate is approximation for surgery/treatment and in the event of any complications the expenses may exceed the estimated cost.

**From;**

**Signature:**

  
**Dr. Pawan Kumar Sharma**  
M.B.B.S., D.C.M. (S.M.H.)  
REG. NO. HN-7303

**Name of Medical Practitioner: Dr. Pawan Kumar Sharma**

**Designation: Consultant Paediatrics**

**Department: Paediatrics**

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**Mohna Road, Opp. Dena Bank, Ballabgarh-121004, Faridabad (Haryana)**

**Mob. :9958243438**

21/05/2025

सेवा में  
रोटेशनल महीन  
एक कदम फाउंडेशन

सविनय निवेदन यह है कि मेरा लक्ष्मी निमार  
है। मेरा लक्ष्मी की नाजुक हालत है  
वह स्वारितक अस्पताल में भर्ती है,  
और M.T.C.U. कार्ड में भर्ती है। मैं  
अपनी लक्ष्मी की आर्थिक रूप से मदद  
नहीं कर पा रहा हूँ। कृपया मेरे  
लक्ष्मी की मदद करें हम जीवन भर  
आभारी रहेंगे। कृपया - करने मदद करें

प्रति

दि

Refer to Eke Kalam foundation

PK  
Dr. PAWAN KUMAR SHARMA  
M.B.B.S., D.C.H. (A.M.U.)  
Reg. No. HN-7303