



## Beneficiary Form

Name: Fiza

Age: 7 Years

Sex : Female

### Brief details about the Beneficiary:

Fiza is a 7 years old Girl suffering from DYSPTNOEA ON EXERTION NYHA CLASS 2 AND EXTERNAL PALPITATION . .She needs early surgery of surgical PDA closure to save her life . . There are 6 family members in the family and her father is the only earning member . Fiza father is a Driver . His monthly income is approx. Rs-12000\ - The treatment is going to be in Sarvodaya Health Care Research Centre , Fbd ,under the super vision of Dr. Viresh Mahajan (Director Pediatric cardiac science ). The total estimate is Rs- 1,55,000\ - for the surgery . Her family is not in a position to bear the expenses of his treatment .

### About the Family:

Father's Name	Mr. Sabir Khan	Age	34	Edu		Occupation	Driver
Mother's Name	Mrs. Shehruna	Age	28	Edu	8 <sup>th</sup> Pass	Occupation	House wife
Family Member's	6 Members	No. of Children's	4	No. of school going			2
Earning Member's	1	Monthly Income	12000\ - Per month	Belongs to			Badkal Faridabad

### Medical Treatment

Hospital/Institution Name: Sarvodaya Health care Research Centre

Address: YMCA Road sector -8 Faridabad -121006

Diagnosis: CHD -PDA

Treatment Required: PDA DEVICE CLOSURE

Reg No: SR623770

Total (approx.) Treatment/Surgery Rs.1,55,000\ -

Reason for which sponsorship required:  
Poor financial stands

Surgery: Yes

Treatment:

### Declaration:

I hereby declare that the information given above is true and I am not in position to afford expenditure expenses.

Signature of Parents/ Guardian

Dr. Viresh Mahajan  
 Director - Pediatric Cardiac Science  
 MBBS, M.D. (Paediatrics)  
 Registration No.- HMC - 015181  
 Authorized Signatory

**Diya Medicare Foundation is Registered Trust**


Donation to Diya Medicare Foundation are eligible for deduction under Section 80 G of the Income Tax Act, 1961.

To,  
Diya Medicare Foundation  
New Delhi

Dear Sir \Madam ,

This Letter is regarding ,Fiza, 7 years old ,Girl (R\O Badkal Faridabad ) ,Daughter of Mr. Sabir Khan is case of DYSPONEA ON EXERTION NYHA CLASS 2 AND EXTERNAL PALPITATION (Heart Disease ) .Patient needs early surgery of PDA DEVICE CLOSURE . The estimate cost of this surgery is Rs-1,55,000\ - (one lac Fifty Five Thousand only ) .

The family requires financial assistance of above said amount (Rs-1,55,000\ - ) for same so kindly help them in all possible way.

  
Authorized Signatory  
8/06/2024

**Dr. Viresh Mahajan**  
Director - Pediatric Cardiac Science  
MBBS, M.D. (Paediatrics)  
Registration No.- HMC - 015181

**Pediatric Echocardiography**

Name : FIZA	Date : 7.6.21
Age : 7 YRS/F	UHID :
SPO2 : 98 %	Height (cm) :
Weight (Kg): 18	HR (beat/min): 108
BP (mmHg):	

**ECHO:**

SITUS SOLITUS, LEVOCARDIA

AV, VA CONCORDANCE

D-LOOPED VENTRICLES

NRGA

NORMAL PULMONARY AND SYSTEMIC VENOUS DRAINAGE

IAS INTACT

MODERATE SIZED TYPE A CONICAL PDA MEASURING 3.2 MM SHUNTING LEFT TO RIGHT WITH PG OF 94 MMHG AND END DIASTOLIC GDT OF 34 MMHG.

TV ANNULUS- 15MM, MILD TR

MILD MR NORMAL SEPTAL MOTION

DILATED LA, LV

LVIDd- 39 (Z SCORE= + 2.9 )

ADEQUATE LV/RV SYSTOLIC FUNCTION

LEFT ARCH, NO COA/APW/LSVC

NORMAL CORONARIES

NO IVC CONGESTION

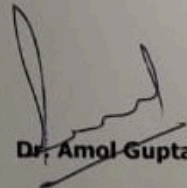
NO COLLECTION

**IMPRESSION: LARGE PDA/MODERTAE PAH**

**ADVICE: PDA DEVICE CLOSURE**

**Dr. Viresh Mahajan**

**Director Pediatric Cardiology**



**Dr. Amol Gupta**

**Consultant Paediatric Cardiology**



भारत सरकार

GOVERNMENT OF INDIA



साबिर खान

Sabir Khan

जन्म तिथि/ DOB: 01/01/1987

पुरुष / MALE



2827 0752 8141

मेरा आधार, मेरी पहचान



भारत सरकार  
GOVERNMENT OF INDIA



Fiza  
DOB: 23/10/2014  
FEMALE  
Mobile No: 9873571832



**7114 4862 4025**

This Aadhaar is valid till 5 years of age only

**MERA AADHAAR, MERI PEHCHAN**



भारत सरकार

GOVERNMENT OF INDIA

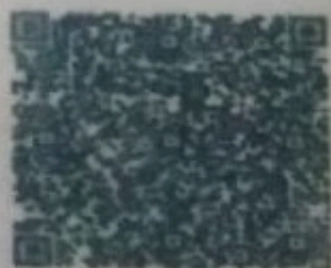


शेहरुना

Shehruna

जन्म तिथि/ DOB: 10/08/1993

महिला / FEMALE



2886 7406 5273

मेरा आधार, मेरी पहचान