



## PATIENT APPLICATION FORM

### PATIENT'S DETAILS



|                                                            |                                                                                 |
|------------------------------------------------------------|---------------------------------------------------------------------------------|
| NAME:                                                      | DIPIKA                                                                          |
| FATHER NAME:                                               | NIKHIL                                                                          |
| DATE OF BIRTH / AGE:                                       | 2 Years                                                                         |
| SEX:                                                       | FEMALE                                                                          |
| ADDRESS:                                                   | New Friends Colony, Dist-South East<br>Delhi, Delhi-110025                      |
| DISEASE:                                                   | ACHD, BAV HEART DISEASE                                                         |
| HOSPITAL<br>DEPARTMENT<br>TREATMENT<br>EST. TREATMENT COST | AIIMS, Delhi<br>Cardiology<br>Balloon Aortic Valvuloplasty(BAV)<br>Rs. 50,000/- |

For CANCER CARE TRUST

  
Authorized Sign

  
Parent's Sign

# हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र

ब० मे

LH14082602278 109377904



Miss. DIPIKADIPI...

LC1408263217

109377904



Miss. DIPIKADIPI...

10029

Centre, O.P.D.

29

दिनांक/Date

विभाग

Deptt.

यू०एच०आई०डी०सं०

UHID No.

CV 2026/014/0026258

UHID: 109377904

Date 14/08/2026

Name DIPIKA

20

Cardiology  
Paed. Cardiology

MON

1Y 2M 22D /

F

D/O NIKHIL

General

Consultant Room 21

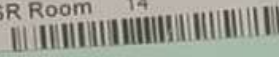
Dr. S

RAMAKRISHNAN

DR SURESH

Priv. Reg. No.

SR Room 14



BAN - SEVERE AS

NSR. 90° aaw

NYHA - I

Adv

ALA / I

Amly

Sp2-98%  
HR-120

P1 Blood  
Report

C- 40/42

दिनांक  
Date

ACHD | BAV | Sw AS

31/8/26

B/L lower limb  
pulse (+)  
CUS - SIS, (+) ESM (+)

Echo  $\Rightarrow$  Sw valv AS  
(PM - 47/63 mmHg)

NO AR, cone with  
(N) BV  $\phi$

ECU - NSR

CXR - CTR 65%  
(N) CP.

Plan: - AUBID - 9/10 balloon

Finances Hs 10000  
Eyebound  
12/10/26. , room  
28  
4pm.

Advice

- 1) Syp. vitrolol 2-5ml BID
- 2) sw T report

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