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NARAYAN SOCIAL WELFARE FOUNDATION (Regd.)

Head Office: 301, 3rd Floor, South Plaza-1, South Ext. Part-2, New Delhi 110049 Phone. No.: 011- 455 42 018 | Mobile No.:9999613753, 7827664266 Email:- info@narayanfoundation.org | www.narayanfoundation.org

Beneficiary Registration Form

Personal Details	1	, 3		
First name:	01/21/5	Last	name: 31	ENS
Date of birth /age	2051968	Sex:	M F	Others
Qualification:	Occupat	ion	Income	per annum
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	Mother	NA		М
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Declaration:				4.
foundation authority in m	y own and understandable la	anguage about the	e above mentioned will not hold the fo	ng explained in details by the facility /procedure/treatments. cundation responsible for any
Palce & Date: 2	Mrs 27 9 For Narayan Socia	al Welfare Foundati	ion Parents/	Guardians Namer & Signature
APPROVED BY:	ALITHOPISED SIGI			26/00/2

d Signatory / President

सेवा में,

मारायण सीराल वेलफीयर फाउण्डेरान (महीद्य)

विषय - अनुदान के संवेदा में आर्थना पत्र)

स्विनम निवेदन यह हैं मैरा नाम नीसाद अहमद निवास स्थान - 210, भगतियांह कवो नी-2, देहरादून, उत्तराखाद - 248008 हैं। मुझे ऑरत क्षें सर की बीमारी पिहले डेंट वर्ष से असित हूँ। क्यों कि में तम्वाव अरेंर सिगरेट का उपयोग कर रहा था। मेरा इलाज वर्तमान में राजीवर्जांकी, कैंसर इन्टीह्म्ट रेंहिनी, सेवटर - 5, दिल्ली - 110085 से -वल रहा है। मान्यबर, में एक नाभी बनाने वाला वर्कर हूं। मेरी भारीक आध 6000 से 2000/- स्रवे माह हैं। मेरे पीखार में आठकोग हैं जिसमें तीन वेटी और तीन वेटी हैं। मेरी बोक्स सब लोग मुझ पर आव्यनिर्मर हैं। मेरे इलाज के लिए राजीव ऑप्यी केंसर हास्पीटल में अभी तक स्फला 109000/- स्पर्ण खर्च हो चुका हैं। यह राज्यी उज्जे में में असमर्थ हैं।

अता आप के बिनेदन हैं कि मेरे इंताज के लिए सहायता सदान

कर।

अषका प्राधी भेसाद अहमद 26/06/19

For Narayan Social Welfare Foundation

Authorised Signatory / President

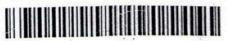


JASWANT RAI SPECIALITY HOSPITAL

Pathology & Blood Bank

Opp. Sports Stadium, | Civil Lines, Meerut

Path. Lab. - 0121-2644577 Blood Bank -0121-2644677 Hospital - 0121-2663887, 2663888 E-mail: jrsh.path.bb@gmail.com



Name:

Mr. NAUSHAD

Age/Gender:

42 Y/Male 011906030143

Patient ID: BarcodeNo:

10029104

Referred By:

Dr. ROHIT SINGH

Collection Place: OPD

Registration No.:

Registered:

Sample Collection:

Reported:

Report Status:

UHID:

28133

03/Jun/2019 04:01PM

03/Jun/2019 04:09PM

08/Jun/2019 11:58AM

Final

HISTOPATHOLOGY

BIOPSY SMALL

Lab No: JRSH H 732/19.

Specimen: Left Cheek growth Biopsy.

Gross: Received multiple soft tissue bits measuring 0.5x0.5x0.5 cm in aggregate. All tissue processed.

Microscopic Examination: Biopsy shows bit of tumor tissue composed of sheets and nests of large polygonal cells with pleomorphic nuclei having vesicular chromatin and large prominent nucleoli and moderate eosinophilic cytoplasm. Many keratin pearls also seen. Another bit shows tumor cells in invading cords and sheets with foci of necrosis.

IMPRESSION: Left Cheek growth biopsy- Invasive Squamogus Cell Carcinoma. Grade-2.

Kindly correlate clinically.

*** End Of Report ***

Dr. Jaskirat Singh M.D.(Path)

Dr. Ruchi Kotpal M.D.(Micro)

Dr. Sonal Dhingra M.D. (Path)

For Narayan Social Welfare Foundation

Dr. Rashi Khemka M.D.(Path)

Test Values may vary with different lab standards, methods, kits used and other physiological & biological factors.

The clinico pathological lab tests involve Man-Machine-Computer interface with slight chances of inadvertent discrepency and should be immediately discussed & alleviated.

Report purports for patients care and not for medicalegal documents.



Health Care Imaging Centre

43, Shivaji Road, Near N.A.S. College, (Opp. Shankar Ashram) Meerut. (U.P.) Ph.: 0121-2652434, 2650506 Helpline: 9760011538

• 3 Tesla Platform MRI (H

· Multi-Slice Cardiac C.T.

• 3D & 4D Ultrasound

· Digital O.P.G.

· Digital X-Rays

DEXA Scan (BMD)

· Digital Mammography

HCIC No. : Patient Name: 011906000414 Mr. NAUSHAD

Reg. Date: Report Date: 03 Jun 2019 03 Jun 2019

Age/Sex:

42 YRS/MALE

Referred By:

SELF

CECT FACE & NECK

Protocol: Thin axial sections were taken in the neck region on a multi slice CT scanner from the base of skull to thoracic inlet with and without IV contrast administration. Thereafter sagittal and coronal reformation was done for further references.

Difficulty in opening in mouth with ulcer on left side of buccal mucosa.

Findings:

Inhomogeneously enhancing infiltrative, soft tissue mass attenuating mass like thickening (size ~19x8x23 mm, APXTRXCC) is seen involving left buccal mucosa, extending till the superior gingiva-buccal sulcus and involving the retro molar trigone region with loss of fat planes with medial pterygoid muscle. Superiorly it is extending till the retro antral fat. (No intrasinus extension or focal bone erosion is seen). Left gingiva appears unremarkable. It is infiltrating into left buccomasseteric space with ill defined fat planes with the masseter muscle and terminal part of left parotid duct.

Multiple, enhancing, lymph nodes are seen in level-1B and level II on both sides, sized upto 13x9 mm on left side and 12x8.6 on right side.

Rest of the visualized supra-and imaged infra-hyoid neck spaces appear unremarkable.

Nasa! cavity, nasopharynx, oropharynx and laryngopharynx appears unremarkable.

Oral tongue, floor of mouth, vallecula and epiglottis appear unremarkable.

Larynx, trachea and cervical esophagus appears normal.

Mild mucosal thickening is noted in both maxillary and right ethmoid sinuses---sinusitis. Nasal For Narayan Social Welfare Foundation septum is deviated towards left with bony spur. Major neck vessels appear unremarkable.

Thyroid gland appears unremarkable.

Impression:

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Inhomogeneously enhancing infiltrative soft tissue mass attenuating mass like thickening (size ~19x8x23 mm) involving left buccal mucosa, extending till the superior gingiva-buccal sulcus, involving the retro molar trigone region with loss of fat planes with medial pterygoid muscle. Superiorly it is extending till the left retro antral fat (infratemporal fossa). It is infiltrating into left bucco-masseteric space with ill defined fat planes with the masseter muscle and terminal part of left parotid duct.

Multiple, enhancing bilateral cervical lymph nodes at level-1B and level II, sized upto 13x9 mm on left side and 12x8.6 on right side.

-----In view of above findings Neoplastic Etiology of Buccal Mucosa needs consideration. Adv: Biopsy Correlation.

Dr. Sanjay Gupta, MD (Radio-diagnosis)

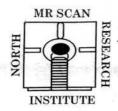
Dr. Mukta Mital, Dr. Ankur Aggarwal, Dr. Vishal Agrawal, Dr. Shalabh Bánsal, MD MD

DMRD, DNB, FVIR

DMRD, FRCR (U.K.)

Please correlate clinically

Note: Impression is a Professional opinion & not a Diagnosis. All Modern Machines/Procedures have their limitations. If there is variance clinically this examination may be repeated or reevaluated by other investigations. Typing errors sometimes are inevitable. Not for medico-legal purposes. Patient's identity cannot be verified.



MRI CENTRE, SIR GANGA RAM HOSPITAL

Rajinder Nagar, New Delhi - 110 060 Ph.: 4311 5700 - 30, 4225 1909

RADIOLOGISTS:

DR. T.B.S. BUXI

Head of dept.

DR. ADITI SUD D.N.B. DR. SEEMA SUD D.N.B.

Patient Name : AHMAD NAUSHAD Age/Sex : 52 Yrs/M (Last, First) Reg. No. : 2560248 Ward No. : MRI Episode No. : OP08988324 Room No. :/ Imaging No. : 10518800-19 Executed On : 14-Jun-19 01:26:04PM Location : MRI Location Type : OPD Referred By

-2-

External Doctor

The pharyngeal mucosal wall appears normal.

Enlarged nodes are visualized in the submental and in the submandibular group on the left side. The largest of the nodes on the left side measures 6.5mm x 2.1cm.

Enlarged nodes are also seen in level II, the largest of which measures 7.4mm in its short axis. Subcentimeteric nodes are seen in the posterior triangle of the neck bilaterally.

The parotid glands display normal MR morphology.

The flow void of the major vascular structures is maintained.

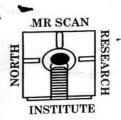
The submandibular glands appear normal.

The cervical vertebral bodies are normal in height, alignment and marrow signal intensity. The floor of the maxillary sinus appears intact. The skin appears intact.

IMPRESSION

MR findings are suggestive of a buccal mucosal mass on the left side involving the superior and inferior gingivobuccal sulci with supranotch disease and involvement of the insertional site of the left temporalis muscle along with cervical lymphadenopathy (level I to level II) -Stage T4b N2 Mx.

> For Narayan Social Welfare Foundation Authorised Signatory | President RADIOLOGIST



MRI CENTRE, SIR GANGA RAM HOSPITAL

Rajinder Nagar, New Delhi - 110 060 Ph.: 4311 5700 - 30, 4225 1909

RADIOLOGISTS:

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DR. ADITI SUD D.N.B. DR. SEEMA SUD

D.N.B.

Head of dept.

Patient Name

: AHMAD NAUSHAD

Age/Sex

: 52 Yrs/M

(Last, First) Reg. No.

: 2560248

Ward No.

: MRI

Episode No.

: OP08988324

Room No.

:/ : 14-Jun-19 01:26:04PM

Imaging No. Location

: 10518800-19

Executed On Location Type

Referred By

: MRI

External Doctor

: OPD

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PRE AND POST CONTRAST MRI OF THE FACE AND NECK WAS PERFORMED USING T1W, T2W SAGITTAL, T2W AND TIRM AXIAL AND CORONAL TIRM PROTOCOLS.

Biopsy proven case of invasive squamous cell carcinoma of the buccal mucosa

There is evidence of a soft tissue mass lesion visualized in the buccal mucosa on the left side extending craniocaudally for 3.4cm extent. The lesion measures 2.8 x 2.3 x 3.37cm. It is seen to involve the superior and inferior gingivo-buccal sulci. Superiorly the lesion is seen extending upto the insertion site of the temporalis muscle at the coronoid process of the mandible. Extension into the retro molar trigone and pterygo-mandibular raphe is seen. The fat plane between the lateral pterygoid plates and the tumor is effaced, however no direct infiltration of the muscle is seen.

The masseter muscle also appears normal.

The pterygoid plates appear intact.

The tongue musculature appears normal.

The floor of the mouth, the hard and soft palate appear normal. The base of the tongue appears normal.

The pterygomaxillary fissure appears normal.

The pterygopalatine fossa is involved.

The palatine tonsils display normal MR signals.

The maxilla and mandible display normal MR morphology. No evidence of any perineural spread of the disease is noted. For Narayan Social Welfare Foundation

Authorised Signatory / Presiden

Contd...p/2..

विकृतिविज्ञान विभाग, अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली - ११०७८० DEPARTMENT OF PATHOLOGY, ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-1100८०

ऊतक विकृति विज्ञान परामर्श प्रपत्र - शैक्षणिक खण्ड, प्रथम तल, दूरभाष सं.- 4282, कक्ष - 1079 HISTOPATHOLOGY CONSULTATION FORM-TEACHING BLOCK, FIRST FLOOR, Phone No.- 4282, Room- 1079

रोगी का नाम PATIENT'S NAME	आयु ति Age S2 S कक्ष/वार्ड/ओ.पी.डी Room/Ward/OPD/Cli प्रभारी परामर्शदाता Consultant-in-charg प्रभारी रेजीडेंट Resident-in-charge नाम/Name (Capital हस्ताक्षर/Signature	./नैदानिक बिस्तर सं. inicalBed No eProy Robul Cor . letter)
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Radiological data		
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Clinical diagnosis	DURATION OF	LESS THAN ONE YEAR
Operative diagnosis	STAY IN DELHI	MORE THAN ONE YEAR
Previous Bionsy Yes	No	Date Ref. No.









Department of Pathology (Division of Histopathology)

Name Registration No. : NAUSHAD AHMAD

Lab Request No.

: 2560248 : 4419011384 : OP08992619

Episode No. Specimen

Location

: Slide

Referred By External Doctor : Dr. Sangeet Kr. Agarwal

: CENTRAL INVESTIGATION CENTRE

Age/Sex Ward No. : 52 Yrs/Male

Room No.

: Out Patient

Location Type Collected On

: 15/06/2019 05:48PM : 17/06/2019 09:42AM

Received On Reported On

: 18/06/2019 03:40PM

Lab No. S10396/19

Gross description

Received one block for review JRSH H732/19.

Microscopic examination

Section, from block submitted for review shows features of well differentiated keratinising squamous cell carcinoma.

Diagnosis:

One block for review, left cheek growth biopsy: Infiltrating keratinising squamous cell carcinoma.

Consultant Pathologist

dm

For Narayan Social Welfare Foundation

Authorised Signatory / President

2) Extra charges will be levied, if special tests are required.

¹⁾ Duplicate tissue sections will be given on payment after a minimum of 48 hours of request.



Rajiv Gandhi Cancer Institute and Research Centre

A Unit of Indraprastha Cancer Society Registered under "Societies Registration Act 1860" Accredited by:







D-18, Sector - 5, Rohini, Delhi - 110085, Tel.:+91-11- 4702 2222, GSTIN: 07AAATI0440C1ZD, Email ID: info@rgcirc.org. Website: www.rgcirc.org

Name

: MR.NAUSHAD AHAMAD

CR No

: 256360 Age/Sex

: 51/Male

Refered Doctor Corporate

: DC Doval/Dr.Kumardeep/Dr.Pankaj Goyal/Dr.Chaturbhuj . : RGCI PRIVATE

OPD/IPD

DEPARTMENT OF LABORATORY SERVICES HAEMATOLOGY

Order:18-06-2019 04:47 pm Planned: 18-06-2019 04:47 pm Collected: 18-06-2019 05:23 pm Recieved:18-06-2019 05:53 pm Approval Level 2:18-06-2019 09:20 pm



Name	Result	Ref.Range	Unit
CBC (HEMOGRAM COMPLETE)-C/71 (Whole blood ED	TA)		
HB (HAEMOGLOBIN) (SLS)	14.2	13-17	g/dL
T.L.C. (TOTAL LEUCOCYTE COUNT) (Impedence)	8600	4000-10000	/cumm
PLATELET COUNT (Impedence)	234000	150000-450000	/cumm
POLYMORPHS (FCM/Slide)	69.1	40-80	%
LYMPHOCYTES (FCM/Slide)	22.0	20-40	%
MONOCYTES (FCM/Slide)	7.1	2-10	%
EOSINOPHILS (FCM/Slide)	1.6	1-6	%
BASOPHILS (FCM/Slide)	0.2	0-1	%
PCV (PACKED CELL VOLUME) (Impedence)	41.8	40-50	%
M.C.V. (Calculated)	91.7	83-101	ก
M.C.H. (Calculated)	31.1	27-32	pg
M.C.H.C. (Calculated)	34.0	31.5-34.5	g/dl
R.B.C COUNT (Impedence)	4.56	4.5-5.5	mill/cumm
RDW-CV (Calculated)	12.9	11.6-14.0	%

Clinical Interpretation if any:

DLC machine generated result.

Signature:

Dr. NARENDER TEJWANI

18-06-2019 09:20 pm

* Marked Service are not covered Under NABL Accreditation

This is an electronically generated report and needs no signature, Any alterations will make the report void. Time of collection of the same would be between 3pm and 5pm only.

Entered by: CHIRAG 2954

-- End of Report --

For Narayan Social Welfare Foundation

Authorised Signatory / Preside



Rajiv Gandhi Cancer Institute and Research Centre

A Unit of Indraprastha Cancer Society Registered under "Societies Registration Act 1860" Accredited by:







D-18, Sector - 5, Rohini, Delhi - 110085, Tel.:+91-11- 4702 2222, GSTIN: 07AAATI0440C1ZD, Email ID: info@rgcirc.org, Website: www.rgcirc.org

Name

: MR.NAUSHAD AHAMAD

CR No

Age/Sex

: 51/Male

Refered Doctor

: DC Doval/Dr.Kumardeep/Dr.Pankaj Goyal/Dr.Chaturbhuj .

OPD/IPD

: 256360 : OPD

5000

Corporate

: RGCI PRIVATE

DEPARTMENT OF LABORATORY SERVICES BIOCHEMISTRY

Order :18-06-2019 04:47 pm Planned :18-06-2019 04:47 pm Collected :18-06-2019 05:23 pm Recieved :18-06-2019 05:57 pm Approval Level 2 :19-06-2019 10:24 am



Name	Result	Ref.Range	<u>Unit</u>
KIDNEY FUNCTION TEST (INCLD. SOD.POTASSIU	JM)-C/174		
BLOOD UREA (UREASE/ GLDH)	33	17-43	mg/di
SERUM CREATININE (ENZYMATIC)	0.8	0.6-1.1	mg/dl
SERUM URIC ACID (URICASE)	<u>3.2</u>	3.5-7.2	mg/dl
SERUM SODIUM (INDIRECT ISE)	<u>132</u>	136-146	mEq/l
SERUM POTASSIUM (INDIRECT ISE)	4.3	3.5-5.1	mEq/l
LIVER FUNCTION TEST C/175		2	300,300 T 300,000
SERUM DIRECT BILIRUBIN (DPD)	0.1	0.0-0.2	mg/dl
SERUM TOTAL BILRUBIN (DIAZO)	0.7	0.3-1.2	mg/dl
SERUM SGPT (IFCC WITH PP) AT 37 C	46	<-50	U/L
SERUM SGOT (IFCC WITH PP) AT 37 C	20	<-50	U/L
SERUM ALK.PHOSPHATASE (IFCC)	<u>127</u>	30-120	U/L
SERUM TOTAL PROTEIN (BIURET)	6.6	6.6-8.3	gm/dl
SERUM ALBUMIN (BCG)	4.1	3.5-5.2	gm/dl
SERUM GLOBULIN (Calculated)	2.5	1.5-3.6	gm/dl
SERUM GAMMA GT (IFCC)	<u>74</u>	<-55	U/L

Clinical Interpretation if any:

Signature:

Dr. ANUJ PARKASH

19-06-2019 10:24 am

* Marked Service are not covered Under NABL Accreditation

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Entered by: ROHAN_6340

-- End of Report --

For Narayan Social Welfare Foundation

Authorised Signatory | President



अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL बहिरंग रोगी विभाग /Out Patient Department

शरीरमाद्यं खलु धर्मसाघनम् एकक/Unit विभाग/Dept.	New Patient Dept Reg. 2019/009/0022773 General/₹ 10 ENT/Unit-III ###XT/Room: 4111 ENT	OPR-6 Jn. No
नाम/Name	Name: Mr NAUSHAD Days : Mon, Thu (কলৈ, হুঅ) নাল: গাঁখার সভ্তম S/O KAMALUDDIN 52Y বুডব/ম বিবা : জনালুবাইন Ph. 9927154387 UHID : 104560726 Date.13/06/2019	पता/Address
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		For Narayan Social Welfare Founda

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)