

Rawal Road, Badgo Chouraha, Khalilabad
Kabirnagar, Uttar Pradesh, 272175

Bill Cum Receipt

Patient Name: VIKAS VARMA
Patient ID: PAT0207
Age/Gender: 25y, MALE
Contact No: 9695008260
Admission ID: ADM-Q60IJWKIU7
Admission Date: 17/04/2026
Admitting Consultant: S.Kumar
Discharge Date: 22/04/2026
Discharge Summary No: DISQ60IJWKIU7

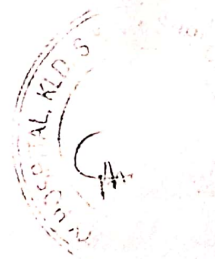
Bill Number: INV_0017
Receipt No: IPD_0017
Bill Date & Time: 04/06/2026 17:27
Bill Status: Paid Fully

| # | DATE | ITEMS/SERVICES | QTY | AMOUNT | DISCOUNT | GST(%) | TOTAL AMOUNT |
|---|------------|--------------------------|-----|--------|----------|--------|--------------|
| 1 | 17-04-2026 | Room Charges/Bed Charges | 6 | ₹1000 | | | ₹6000 |
| 2 | 17-04-2026 | O.T. Charges | 1 | ₹5000 | | | ₹5000 |
| 3 | 17-04-2026 | Anesthesia Charge | 1 | ₹3000 | | | ₹3000 |
| 4 | 17-04-2026 | Surgeon charge | 1 | ₹5000 | | | ₹5000 |
| 5 | 17-04-2026 | Nursing Charges | 6 | ₹500 | | | ₹3000 |
| 6 | 17-04-2026 | Consultant Visit Charges | 6 | ₹1000 | | | ₹6000 |
| 7 | 17-04-2026 | Implant charge | 1 | ₹7000 | | | ₹7000 |
| 8 | 17-04-2026 | Medicine charge | 6 | ₹1120 | | | ₹6720 |

Subtotal: ₹41720
 Line Item Discount: ₹0
 Applicable GST: ₹0
 Extra Discount: ₹0.00
Total Payable Amount: ₹41720.00
 Paid Via Cash: ₹41720.00
Total Amount Paid: ₹41720.00



Scan QR code to book an appointment with your doctor or download your old digital prescription



Kalpith HOSPITALS

Bardahiya Bazar, Khalilabad - Sant Kabir Nagar, Pin- 272175 (U.P.)

DISCHARGE SUMMARY
(PATIENT COPY)

Date/Time of Admission: 16/4/26
11:40 PM

Date/Time of Discharge: 17/4/26
1 PM

IPD No. 27687

Dept/Ward: ICU

MLC: Yes No

Type: Discharge/LAMA (Please tick appropriate option)

Patient Name: Vikash Verma.

S/DAW/o: Surrender Verma.

Age/Sex: 27 Y / male.

ICD Code (by MRD Staff):

Address: Ghaghara Bazar G.K.P

Treating Doctor: Dr. A. Kumar (M.B.B.S MD)

Brief history and Clinical notes: Patient presented to us 2 hrs - RTA by two wheelar - clo - Pain & swelling in (R) thigh. o/e - Abrextion (L) (R) wrist, Bleeding (L) upper lip & lower lip. ALLERGIC TO: (L) Ankle Swelling. (F) BCS - E.U.S.M.G

Investigation done during Hospitalization:

Attached to file.

Final Diagnosis: RTA --

Treatment/Surgery/Procedure (S) done during Hospitalization: Sutureing done on lower lips. Conservatively.. (R) femur Epicondyl #

Follow-up-Medication:

| Name of Medicine | Dose | Frequency | Route | Duration |
|---|------|-----------|-------|----------|
| Refer to Ortho Surgeon for further Evaluation | | | | |

Follow-up Advice:

To be reviewed on/after Name of the Doctor: _____ at OPD No.




Report # PATB36122
Patient: VIKASH VERMA (27697)
Age / Gender: 28 Male
Ref By: DR A. Kumar (M.B.B.S., M.D.)

Collection DateTime: 17/04/2026 03:33
Collection By: In-House Pathology Lab
Printing DateTime: 17/04/2026 03:36

COMPLETE BLOOD COUNT (CBC)

| Test Parameter Name | Value | Reference Range |
|--|-------|----------------------------------|
| HEMOGLOBIN | 13.9 | 11.5 - 15.0 g/dl |
| RBC COUNT | 4.34 | 4.50 - 5.50 mill/mm ³ |
| HEMATOCRIT TESTING (HCT) | 40.3 | 35.0 - 45.0 % |
| MEAN CORPUSCULAR VOLUME (MCV) | 93.0 | 82.0 - 100.0 fL |
| MEAN CORPUSCULAR HEMOGLOBIN (MCH) | 32.0 | 27.0 - 34.0 pg |
| MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION (MCHC) | 34.4 | 31.6 - 35.4 g/dl |
| RDW-CV | 12.1 | 11.0 - 16.0 % |
| RDW-SD | 46.5 | 35.0 - 56.0 fL |
| WHITE BLOOD CELLS (WBC) | 16.59 | 3.50 - 9.50 10 ³ /ul |
| DLC - SEGMENTED NEUTROPHILLS | 86.7 | 40 - 80 % |
| DLC - LYMPHOCYTES | 6.6 | 20 - 40 % |
| DLC - MONOCYTES | 5.9 | 2 - 10 % |
| DLC - EOSINOPHILS | 0.2 | 1 - 6 % |
| DLC - BASOPHILS | 0.6 | < 2 % |
| NEUTROPHILS | 14.39 | 2 - 7 thou/mm ³ |
| LYMPHOCYTES | 1.09 | 1.00 - 3.00 thou/mm ³ |
| MONOCYTES | 0.98 | 0.20 - 1.00 thou/mm ³ |
| EOSINOPHILS | 0.04 | 0.02 - 0.50 thou/mm ³ |
| BASOPHILS | 0.09 | 0.02 - 0.10 thou/mm ³ |
| PLATELETES COUNT | 1.53 | 1.50 - 4.50 thou/mm ³ |
| PDW-SD | 19.0 | 9.0 - 17.0 fL |
| PDW-CV | 17.8 | 10.0 - 17.9 % |
| PCT | 0.179 | 0.108 - 0.282 % |
| P-LCR | 49.6 | 11.0 - 45.0 % |
| P-LCC | 76 | 30 - 90 10 ³ /ul |


Dr Santosh Chaurasia

Report #: PATB35122
Patient: VIRASH VERMA (27697)
Age / Gender: 28 Year / Male
Ref By: DR. A. Kumar (M.B.B.S., M.D.)

Collection Date/Time: 17/04/2026 03:33
Collection By: In-House Pathology Lab
Reporting Date/Time: 17/04/2026 03:36

TEST: LIVER FUNCTION TEST (LFT)

Test Parameter Name

| Test Parameter Name | Value | Reference Range |
|----------------------|-------|------------------|
| BILIRUBIN TOTAL | 0.63 | 0 - 1.50 mg/dl |
| BILIRUBIN DIRECT | 0.20 | 0 - 0.20 mg/dl |
| BILIRUBIN INDIRECT | 0.43 | 0.1 - 0.7 mg/dl |
| SGOT | 19.20 | 0 - 35.0 U/L |
| SGPT | 30.90 | 0 - 45.0 U/L |
| ALKALINE PHOSPHATASE | 74.0 | 53 - 128.0 U/L |
| TOTAL PROTEIN | 5.73 | 6.40 - 8.30 g/dl |
| ALBUMIN | 4.08 | 3.8 - 5 g/dl |
| GLOBULIN | 1.65 | 2.0 - 3.5 g/dl |
| A/G RATIO | 2.47 | 5.5 - 9.0 g/dl |

Notes:

- In an asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT levels. NAFLD is considered as hepatic manifestation of metabolic syndrome.
- In most type of liver disease, ALT activity is higher than that of AST; exception may be seen in Alcoholic Hepatitis, Hepatic Cirrhosis, and Liver neoplasia. In a patient with Chronic liver disease, AST:ALT ratio > 1 is highly suggestive of advanced liver fibrosis.
- In known cases of Chronic Liver disease due to Viral Hepatitis B & C, Alcoholic liver disease or NAFLD, Enhanced liver fibrosis (ELF) test may be used to evaluate liver fibrosis.
- In a patient with Chronic Liver disease, AFP and Des-gamma carboxyprothrombin (DCP)/PIVKA II can be used to assess risk for development of Hepatocellular Carcinoma.

SHREE ORTHO & MULTISPECIALITY HOSPITAL

Dr. Neha Singh

M.B.B.S., M.S. Gyne & Obs
Fellowship in Laparoscopy
Infertility Specialist



Dr. A. Singh

M.B.B.S., M.S. Ortho (K.G.M.U. - Lucknow)
Ex. Senior Resident AIIMS, New Delhi
Fellowship in Arthroplasty, Ahmedabad
Fellowship in Spine Surgery & Neurology, Mumbai

Patient Name & Patient Id: Mr. Vikas Varma, PAT0207

Age/Gender: 27y, Male

Address _____

Date & Time: 04/05/2026 17:49

Mobile-No:-9695008260 Date _____

Diagnosis: FRACTURE INTERCONDYLAR WITH SUPRACONDYLAR EXTENSION OF FEMUR TREATED BY DF LCP RIGHT SIDE, FRACTURE LATERAL MALLOLI TREATED BY K WIRE LEFT SIDE

Medication (Rx):

| संख्या | दवाइयाँ | खुराक | आवृत्ति | अवधि | टिप्पणियाँ |
|--------|---|--------------|------------------------------|-------|------------|
| 1 | LARIFEN PLUS | 1 Tablet(s) | (Twice a day) भोजन के बाद | 5 दिन | - |
| 2 | JEROCEF 500 | 1 Tablet(s) | (Twice a day) भोजन के बाद | 5 दिन | - |
| 3 | Dolo 650 Tablet Paracetamol (650mg)Acetaminophen | 1 Tablet(s) | (Twice a day) भोजन के बाद | 5 दिन | - |
| 4 | Cocid DSR Capsule Domperidone (30mg) + Pantoprazole (40mg) | 1 Capsule(s) | (Once a day) भोजन से पहले | 5 दिन | - |
| 5 | ALCARZA MR | 1 Tablet(s) | (Twice a day) भोजन के बाद | 5 दिन | - |

Advices:

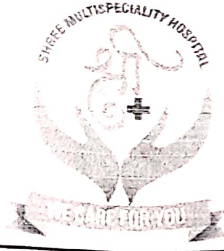
1. REMOVE STITCH

Follow-up: 09/05/2026

THREE ORTHO & MULTISPECIALITY HOSPITAL

Dr. Neha Singh

M.B.B.S., M.S. Gyne & Obs
Fellowship in Laparoscopy
Infertility Specialist



Dr. A. Singh

M.B.B.S., M.S. Ortho (K.G.M.U. - Lucknow)
Ex. Senior Resident AIIMS, New Delhi
Fellowship in Arthroplasty, Ahmedabad
Fellowship in Spine Surgery & Neurology, Mumbai

Patient Name & Patient Id: Mr Vikas Varma, PAT0207

Date & Time: 12/05/2026 17:57

Age/Gender: 27y, Male

Mobile No: 969008260 Date

Address

Diagnosis: FRACTURE INTERCONDYLAR WITH SUPRACONDYLAR EXTENSION OF FEMUR TREATED BY DF LCP RIGHT SIDE, FRACTURE LATERAL MALLOLI TREATED BY K WIRE LEFT SIDE

Medication (Rx):

| संख्या | दवाइयाँ | खुराक | आवृत्ति | अवधि | टिप्पणियाँ |
|--------|---|--------------|------------------------------|--------|------------|
| 1 | LARIFEN PLUS | 1 Tablet(s) | (Twice a day) भोजन के बाद | 10 दिन | - |
| 2 | Cocid DSR Capsule Domperidone (30mg) + Pantoprazole (40mg) | 1 Capsule(s) | (Once a day) भोजन से पहले | 10 दिन | - |
| 3 | ALCARZA MR | 1 Tablet(s) | (Twice a day) भोजन के बाद | 10 दिन | - |
| 4 | CALMIN FORTE | 1 Capsule(s) | (Once a day) भोजन के बाद | 10 दिन | - |

Advices:

1. PHYSIOTHERAPY AS ADVISED

Follow-up: 22/05/2026



ORTHOPEDIC ORTHO & MULTISPECIALITY HOSPITAL

Dr. Neha Singh
M.B.B.S., M.S. Gyne & Obs
Fellowship in Laparoscopy
Infertility Specialist



Dr. A. Singh
M.B.B.S., M.S. Ortho (K.G.M.U. - Lucknow)
Ex. Senior Resident AIIMS, New Delhi
Fellowship in Arthroplasty, Ahmedabad
Fellowship in Spine Surgery & Neurology, Mumbai

Name: **S Patient Id: Mr Vikas Varma, PAT0207**

Date & Time: **04/06/2026 16:59**
Age: _____ Sex: _____ Date: _____
Mobile No: **9695008260**

Age/Gender: **27y Male**
Address: _____

Diagnosis: **FRACTURE INTERCONDYLAR WITH SUPRACONDYLAR EXTENSION OF FEMUR TREATED BY DF LCP RIGHT SIDE, FRACTURE LATERAL MALLEOLI TREATED BY K WIRE LEFT SIDE**

Medication (Rx):

| संख्या | दवाइयों | खुराक | आवृत्ति | अवधि | टिप्पणियाँ |
|--------|--|--------------|------------------------------|-------|------------|
| 1 | LARIFEN PLUS | 1 Tablet(s) | (Twice a day) भोजन के बाद | 5 दिन | |
| 2 | Copid DSR Capsule Esomepridone (30mg) + Pantoprazole (40mg) | 1 Capsule(s) | (Once a day) भोजन से पहले | 5 दिन | |
| 3 | ALCARZA MR | 1 Tablet(s) | (Twice a day) भोजन के बाद | 5 दिन | |
| 4 | CALMIN FORTE | 1 Capsule(s) | (Once a day) भोजन के बाद | 5 दिन | |

Advices:

1. PHYSIOTHERAPY AS ADVISED

Follow-up: **09/06/2026**

