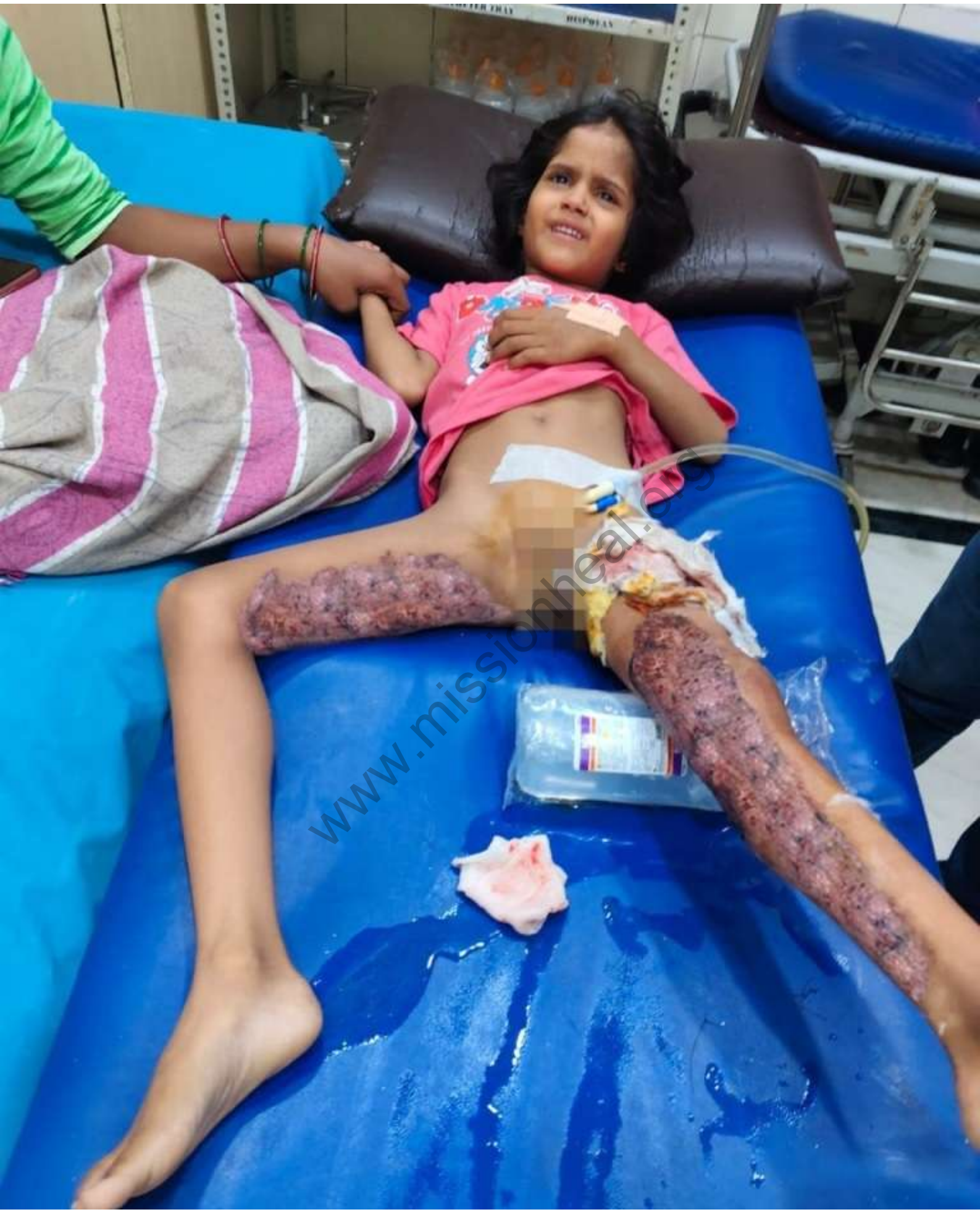
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Ref. No.: FRR/Vinayak/10012/2026-27

Dated: 31.08.2026

PROFORMA INVOICE / FUND REQUISITION REPORT:

(A Vinayak Burn Centre Noida Initiative)

Patient Name: Baby Anushka.
Sex: Female **Age:** 6 Years .
Father Name: Pankaj Kumar.
Address: Budhvihar Vijay Nagar Ghaziabad (U.P.).
Diagnosis: Approx 35% Thermal Burn.
Date of Admission: 31/08/2026

Overall Analysis: The patient - Baby Anushka was brought in to our hospital by her father - Mr.Pankaj Kumar on 31 st Aug 2026. The child has sustained thermal Burn Injury due to accidentally coming in contact with hot milk while she was at home. Her mother was boiling milk for her family, suddenly Baby Anushka contact with hot milk and got burnt . As a result of the incident, the child has sustained mostly 2nd & 3rd Degree Deep 35% TBSA Thermal Burn Injury. The Burns is on legs area. The nature of injury is life threatening and requires considerable degree of specialist intervention and close monitoring. The patient is a child of 6 years, the injury is of a grave nature. We plan to manage the child conservatively applying wound dressing and debridement procedures to close the wound as early as possible.Surgical Skin Grafting if required, would be undertaken at a later stage.

Visuals:

Fund Requirement - During Hospital Stay

Please find below the detailed fund requirement for the first 2 Weeks of treatment.

Funds - Hospital Stay	**41,000.00**
Funds - RMO, Nursing, Consultants & Specialists	**42,000.00**
Funds - Dressing & Procedures	**58,000.00**
Funds - Rehabilitation (Physiotheraphy)	**4,000.00**
Funds - Medicines + Consummables + Transfusions	**57,000.00**
Funds - Pathology & Diagnostics	**15,000.00**
Total (in numbers)	**217,000.00**
Total (in words):	**Two Lakh Seventeen Thousand Only**

Fund Requirement - Follow Up

Please find below the detailed fund requirement for Follow Up period of 1.5 Month Post Discharge.

Funds - Follow Up Visits & Dressings	**3,000.00**
Total (in numbers)	**3,000.00**
Total (in words):	**Three Thousand Only**
Fund Requirement - TOTAL	
Stage 1	**217,000.00**
Stage 2	**3,000.00**
Total (in numbers)	**220,000.00**
Total (in words)	**Two Lakh Twenty Thousand Only**

Kindly release the funds at the earliest for us to go ahead and execute the treatment for Baby Anushka.

VINAYAK HOSPITAL

For Vinayak Hospital
(A Division of Vinayak Hospital)
5th Floor, Vinayak Hospital, Sector 27, Atta Market,
NH - 1, Noida - 201301 (UP)

AO/AD

सेवा मे,

श्री मान अहपद
मिशन हील
सी-63 बेसमेन्ट साउथ एक्सटेंशन पार्ट-2
नई दिल्ली - 49

विषय :- आर्थिक सहायता हेतु प्रार्थना पत्र।

महोदय, सविनय निवेदन यह है कि मेरा नाम पंकज कुमार है मेरा निवास बोधा विहार विजय नगर गाजियाबाद उत्तर प्रदेश मे स्थित है मेरी एक बेटी है उसका नाम अनुष्का है उसकी आयु 6 वर्ष की है मेरी बेटी घर मे खेले हुए गर्म दूध उसके ऊपर गिर गया जिसके कारण मेरी बेटी जल गई उसे मे चिकित्सक डॉक्टर्स के पास लेकर गया वहाँ पर उसके इलाज के लिए दो लाख बीस हजार रुपये का खर्चा बताया गया जो कि यह खर्च उठाने में असमर्थ हूँ अत: आपसे निवेदन यह है कि मेरी बेटी का सहायता प्रदान करें।

दिनांक = 31/8/2026
बेटी का नाम = अनुष्का
उम्र = 6 वर्ष
पता = विजय नगर गाजियाबाद
उत्तर प्रदेश

आपकी अति कृपा होगी
आपका आज्ञाकारी
पंकज कुमार

VINAYAK HOSPITAL

41368

OPD INITIAL ASSESSMENT

NAME BABY ANUSHKA AGE / SEX 6 yrs / F DATE 31 - 08 2026 UHID

Personal History
Alcohol / Smoking / Tobacco Chewing / other
Allergy
Past History
Diabetes / HT / IHD / TB
Other
Menstrual History
Current Medication

Vaccination Status

Chief Complaints

Baby Anushka brought to Casualty A/H/o Hot Milk Burn at Home on 26/8/2026 at 8 pm. Initial treatment taken at locally, then brought to Vinayak Hospital for further management. TBSA — 25% TO 30%

Pain Score

Inital Assessment & Examination
Pulse Rate - 141
B P - 116/96
Resp Rate -
Temp - 98.2 F
Ht / Wt -
SpO2 - 100%
Investigations
RB [illegible]

CBC
LFT
KFT

Treatment

Rx Inj. T.T. [illegible]
Inj. [illegible] 6 Hours x 8 day
Inj. [illegible] 7.5 ml. 8 Hours
Inj. [illegible] 24 Hrs
Dressing done. and Patient admitted under Dr. Ashok K. Verma

Dietary Advice & Preventive Care

Follow up

www.missionheal.org

VINAYAK HOSPITAL

A Unit of Chaudhary Nursing Home Pvt. Ltd.

V.H. No. VH2600825

Room No. 206 Catagory

Date of Admission 31-8-2026

Name BABY ANUSHKA

S/o, D/o, W/o PANKAJ KUMAR

Occupation

Age 6 Mon Sex F

Religion HINDU

Father's / Husband's Name PANKAJ KUMAR

Address BUDH VIHAR VIJAY NAGAR GHAZIABAD UP

Phone : Office Res

Advance Receipt No. Date 31-8-2026

For Rs.

Name & Address of accopanying relative

Phone : Office Res.

R.M.O. Dr. SK BEHRA Informed at

Admitting Dr. Ashok Kumar Verma Informed at 8:10

Receptionist

I hereby declare that I am getting admitted in this Hospital on my own will. The expenses have been explained to me and I agree to make all payments before discharge.

I agree that I am keeping no valuable with me in the Hospital and no one will be responsible in the events of theft if any.

Signature of Patient / Relative

Unit / Consultant

Date of Discharge

Provisional Diagnosis

Final Diagnosis

Infectious nature of disease : Yes/No

Outcome : LAMA / Stable / Improved / Cured / Died

Death Record filled by Dr.

FOR DELIVERY CASE ONLY

Date and Time of Delivery

New Born : Male / Female

Birth record filled by Dr.

Patient shifted from Room No. to

On

Shifted from Room No. to

On

Shifted from Room No. to

On

Discharge Date Time Bill No. / R.No. Dated

For Rs. Received / Refundable after adjustment of advance Rs.

Authorised Signatory


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