



**MY SON IS FIGHTING FOR HIM LIFE
AND WE NEED YOUR SUPPORT TO SAVE HIM
PLEASE [CLICK HERE TO DONATE](#)**

YOUTH HELPING TRUST

WARNING
Crazy Camera use is Disruption
in this premises.
PLEASE
DO NOT USE Camera In Hospital etc.

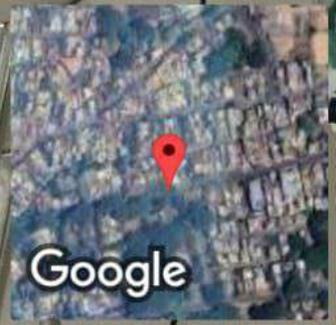
B/O Payal
Vasjodekar Mak

36.5
36.6
B/O Payal Vasjodekar
Mak
1. Spk
2. Spk
3. Spk



GPS Map Camera

Kolhapur, Maharashtra, India 🇮🇳
Bhavani Mandap, Nr. Laxmi Temple, Mangalwar Peth,
Manganwar Peth, Kolhapur, Maharashtra 416012, India
Lat 16.690872° Long 74.228984°
Monday, 24/11/2025 02:36 PM GMT +05:30



B/O Payas Vasgadekar male



Handwritten medical notes on a chart, including the name 'Payas Vasgadekar' and the date '1-11-15'.





Sai Sparsh Children's Hospital

Advanced Neonatal & Pediatric Critical Care Center

2807 / 8A, B Ward, Mangalwar Peth, Belbag, Kolhapur. Cell.: 902-802-33-66

8788764141

Rx

Date: 12/11/25

This is to certify that,

Patients Name: Bl0 Payal Ritesh vagagadekar

Age: 5 Days

Sex: Male

Address: AP - Vasagade, Tal - Karvir,
Dist - Kolhapur

Suffering from (NICU) PICU

(Full diagnosis with international classification of disease code)

Is under my treatment and is admitted in the hospital: _____

Registration number of the hospital under Bombay Nursing Home Act: 512

And under Bombay Charitable Trust Act: No

I have proposed the following plan on management for the patient: _____

Proposed Investigations (As per the list website of CMRF):

1) CBC/CRP/CXR

2) ABG INSG

3) 2D Echo

4) Blood Group/Blood culture

5) _____

6) _____

7) _____

Proposed treatment / procedures (As per the list website of CMRF):

1) IVF

2) IV Antibiotics

3) SMV

4) _____

Date of Surgery / Treatment / Procedures: _____

Estimated Expenditure of Surgery / Treatment: 4.5 Lakhs - 5 Lakhs

If financial assistance taken from MGPJAY State the Amt.: _____

I consider that the prognosis of the patient is Good / Moderate / Unfavourable



Sai Sparsh Children's Hospital

Advanced Neonatal & Pediatric Critical Care Center

Unit 1 - 2807/8 A - B Ward, Belbag Chowk, Mangalwar Peth, Kolhapur. Mob. 8788764141

Unit 2 - 2813/9 B - Old Bhosale Hospital, Belbag, Mangalwar Peth, Kolhapur. Mob. 9028023366

Rx

Date :

COST CERTIFICATE FORM

Date : 12/11/25

Sr. No.	Details	
1.	Patient's Name	Blo Payal Ritesh vasagadekar
2.	Age / Sex	5 Days / Male.
3.	Address in Details	AP - Vasagadekar Tal - Karvir Dist - Kolhapur
4.	Contact No.	9130205571.
5.	Hospital Name / Address / Email ID	Sai Sparsh childrens Hospital Mangalwar peth, Belbag
6.	Diagnosis / Organ System Involved / Details	Preterm (29 weeks) VLBW (1.1 kg) RDS.
7.	Treating Doctor / Unit Details	Dr. Vijay Gravade
8.	Cost of Treatment (Surgical / Medical)	4.5 Lakhs - 5 Lakhs with Medicines
9.	Current Clinical Status	NP, SIMV / SSPT / CBC / CRP / Inj. Saffinoride Inj. Forcan / Inj. Tazact.

If Patient Admitted - Date of Admission with Details	To be Admitted - Date of Surgery / Treatment	If Possible Likely Stay in Terms of Days
07/11/25	-	45 Days - 60 Days
		AY

Sai Sparsh Children's Hospital

(Advanced Neonatal & Pediatric Critical Care Center)

Add - 2807/8 A, B Ward, Rohini Building,

Mangalwar Peth, Belbag, Kolhapur.

Mob. : 9028023366, Ph. 0231-2548866.

Hospital Stamp & Signature

(Treating Doctor / Concern Authority)

Date - 01/12/2025

To,

Youth Helping Trust,
A-70, KH.No. 20/8 and 20/9, Block-A,
Pandav Nagar, Near D-Park Delhi - 110092

Applicants: - Payal Ritesh vasagadekar
Ritesh Rajendra vasagadekar

Subject :- Application for Emergency Medical Assistance

Respected sir,

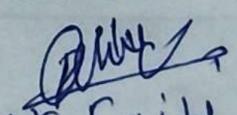
I, Ritesh vasagadekar, resident of Kolhapur, humbly request your kind support during a very difficult time for our family. My son was born prematurely on 7th November 2025, in the seventh month of pregnancy. Since birth, he has been admitted to the NICU at Sai Sparsh children's Hospital for critical care.

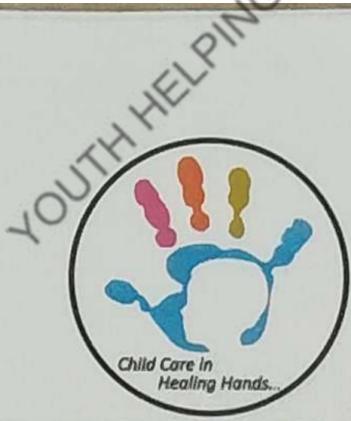
The doctors have informed us that the total estimated hospital expense will be around ₹ 4,50,000, excluding additional medical, lab report charges. As of 30th November, the hospital bill has already reached ₹ 3,10,000, out of which we have managed to pay ₹ 1,50,000. The doctors have further advised that our baby will need at least one more month of treatment to recover fully.

We belong to a small village, and our livelihood depends entirely on agriculture. At this stage, we are unable to bear the remaining medical expenses, despite our best efforts. Therefore, I sincerely request the Youth Helping Trust to kindly provide financial assistance for our baby's treatment.

Your support will be a great blessing for our family in this difficult time.

Mob No. - 9130205571


Your Faith Fully,
Ritesh vasagadekar



Sai Sparsh Children's Hospital

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Unit 2 - 2813/9 B - Old Bhosale Hospital, Belbag, Mangalwar Peth, Kolhapur. Mob. 9028023366

Rx

Date :

25/11/25

To ,

Youth Helping Trust

Block -A ,Pandav Nagar ,Near D-Park ,Delhi 110092 .

Patient ID : 17863 .

Name : B/O Payal Ritesh Vasagadekar .

Age : 18 Days / Male .

Admission Date : 07 /11 /2025 .

Address : Ap - Vasagade , Tal - Karvir , Dist-Kolhapur .

Name Of Disease (NICU/PICU) : (NICU)PRETERM/VLBW/RDS/CLINICAL SEPSIS/NECROTISING ENTEROCOLITIS.

Gestational Age : 29 Weeks . Birth Weight : 1.100 kg .

Suggested Treatment : VENTILATION / IV FLUIDS /IV ANTIBIOTICS /NICU CARE .

Date of surgery : NO SURGERY . Estimate Expenditure : 4.5 Lakhs.

Number Of Days Of Admission (Tentative) : 2 Months .

If Financial Assistance Taken from RGJAY PI. State The Amt . : No .

Sai Sparsh Children's Hospital

(Advanced Neonatal & Pediatric Critical Care Center)

Add - 2807 / 8 A, B Ward, Rohini Building,
Mangalwar Peth, Belbag, Kolhapur.

Mob. :- 9028023366, Ph. 0231-2546866.

Hospital Stamp

Dr. Vijay K. Gavade

MBBS, DNB (Pediatrics)

Neonatal Fellowship (Rainbow Hospital, H)

Consultant Neonatologist & Pediatrician

Reg. No. 2005-02725

Sign. & Stamp of Treating Doctor



Sai Sparsh Children's Hospital

Advanced Neonatal & Pediatric Critical Care Center

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Unit 2 - 2813/9 B - Old Bhosale Hospital, Belbag, Mangalwar Peth, Kolhapur. Mob. 9028023366

Rx

Date : 25/11/2025

To,

The director,

Youth helping trust

A-70 (Back side), KH.No 20/8 & 20/9, Block-A, Pandav Nagar D-Park,
Delhi 110092.

Respected sir/madam,

B/o Payal Ritesh Vasagadekar DOL 19th male neonate admitted to
our hospital NICU on 07/11/2025 at 3:00 PM.

Birth history - Preterm (29 wks), very low birth weight (1.1 Kg), Grunting
& Tachypnea at birth. Baby cried immediately after birth.
M/H/O - 1yr married life, non consanguineous marriage, MBH - ORH +ve
- Baby born by LSCS into oligohydramnios.

Neonate admitted to NICU started \bar{O}_2 \downarrow NP, IVF, IV AB's were started
CAR done s/o Respiratory distress syndrome so neonate electively intubated
& ventilated \bar{P} 5ml Neosurf administered through ETT \downarrow AAP. Sedation started
ventilation continued. Neonate was in shock on DOL 2nd, IV Inotropic
support were started. CRP sent on 2nd DOL s/o Negative. IV Inotropic support &
ventilation continued. Neonate responded to given treatment well. sedation
stopped on 3rd DOL, ventilator settings decreased gradually & neonate extubated
on 5th DOL, taken to NP SIMV. Neonate had hyponatremia on 5th DOL which
was corrected by 3% NaCl. Repeat Sr. Ele on 6th DOL s/o Normal.
RTF were started on DOL 4th gradually increased but on 7th DOL neonate
had Abdominal distension & Greenish RTA so feeds were hold IV AB's Inf. metro-
nidazole were added, CBC, Sr. Ele on DOL 8th s/o Normal & on DOL 8th again feeds
were started & continued, gradually ventilator NP SIMV mode changed to CPAP
& then neonate taken to HFNC on DOL 10th, UVC removed & PICC line done on 11th DOL
neonate had regurgitation & choking episode on DOL 12th & had abdominal fullness
so feed kept hold & again restarted on DOL 13th, gradually feed \bar{P} sed reached
up to 5g till DOL 15th, on DOL 16th neonate had greenish RTA s/o so feed
kept hold & again restarted on 17th DOL. on DOL 17th CBC, Sr. Ele done s/o -

dropping WBC & platelet count was normal IV ABs were stepped up to 4th.
meropenam. Neonate had hyponatremia on 18th DOB 3% NaCl correction were given
on 18th DOB Neonate had multiple apnoeic episodes so taken to Bubble CPAP
apnoeic episodes were decreased but present. Procalcitonin & Sr. Ele. were normal so
done on DOB 19th 310 Procalcitonin ↑ (more than 100), Sr. Ele. were normal so
3% NaCl correction stopped. Repeat Blood ck was sent.

Now Today on 19th DOB (25/11/25) Neonate is on bubble CPAP s13/25%.

on IV Antibiotics Inj. meropenam drip

Dr Antifungal Inj. Fluconazole

Inj. Caffeine

Inj. Aminocaproic drip

Inj. Smoff lipid drip

Prf Kidral 5.8ml/hr.

RTF EBM - 3ml x 2hrly.

Currently neonate is hemodynamically stable with supports.

neonate will require total hospital stay of (60-90 days) 2-3 months.

approximate expenses of treatment - hospital stay, Blood investigation &
Medicines will be Rs 6,00,000/- to Rs 7,00,000/- (Rs 6 lakh to 7 lakh)
approximately.

Sai Sparsh Children's Hospital
(Advanced Neonatal & Pediatric Critical Care Center)
Add - 2807 / 8 A, B Ward, Rohini Building
Mangalwar Peth, Belbag, Kolhapur
Mob - 9028023366 Ph 0231-2546866

Amol

Dr. Amol Girwalkar.

Dr. AMOL GIRWALKAR

MBBS, DCH,

Fellowship in Neonatology

Reg. No. 2004 / 01 / 294

Sai Sparsh Children's Hospital, Kolhapur

Sai Sparsh Children's Hospital

Advanced Neonatal & Pediatric Critical Care Center

Unit 1 - 2807/8 A - B Ward, Belbag Chowk, Mangalwar Peth, Kolhapur. Mob. 8788764141

Unit 2 - 2813/9 B - Old Bhosale Hospital, Belbag, Mangalwar Peth, Kolhapur. Mob. 9028023366



Rx

Date :

20/11/25

CERTIFICATE

TO WHOM SO EVER IT MAY CONCERN

This is to certify that B/O Payal Ritesh Vasagadekar [Male] is admitted in our hospital from 07/11/25 to till date.

The case of Preterm[29 Weeks]/Vlbw[1.100Kg]/RDS/Clinical Sepsis/Necrotising Enterocolitis.

Please take note of the same .

Dr. Vijay K. Gavade

MBBS, DNB (Pediatrics)

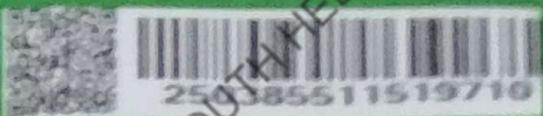
Neonatal Fellowship (Rainbow Hospital, Hyd ,

Consultant Neonatologist & Pediatrician

Reg. No. 2005 02 725

Saisparsh Childrens Hospital

Kolhapur



Name : Baby of. PAYAL VASAGADEKAR
 Age / Gender : 1 Day(s) / Male
 Contact No. : +919028894640
 Address : KOP Karveer,
 Pin code : 416005

VID No. : 250385511519710
 PID No. : P4Z3Z5558A06117
 Referred by : DR. SA SPANISH HOSPITAL
 Registered On : 27/11/2025 5:01 PM
 Collected On : 27/11/2025 5:00 PM
 Reported On : 27/11/2025 6:32 PM

Investigation	Observed Value	Unit	Biological Reference Interval
Creatinine, Serum (Serum, Jaffes method (DMS Tracable))	0.546	mg/dL	Premature: 0.29-1.04 Full term: 0.24-0.85

Interpretation

- Creatinine is a waste product formed in muscles from the high energy storage compound, creatine phosphate. The amount of creatinine produced is constant (unlike Urea) and is primarily a function of muscle mass. Physiological factors affecting serum creatinine concentration includes age, gender, race, muscularity, exercise, pregnancy, certain drugs, diet, dehydration and nutritional status. Low serum Creatinine levels is seen in cases of low muscle mass like muscular atrophy, or aging. High serum creatinine levels is seen in Acute and Chronic kidney disease, obstruction. Since a rise in blood creatinine is observed only with marked damage of the nephrons, it is not suited to detect early stage kidney disease.

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Dr. VIGNESH RAVIT
 MB, Pathology
 Consultant Pathologist

MEDICAL LABORATORY REPORT

Sample Collected At:
 Shrikrishna Nandgonda Patel Congress Bhavan Arhant Towers
 Station Road Kolhapur

Reporting Location:
 Pathology, Congress Bhavan Arhant Towers, Station Road, Kolhapur
 Address: TEL: 0202-2503855 FAX: 0202-2503856

Age / Gender : Baby of. PAYAL VASGADEKAR
Contact No. : 2 Week(s) / Male
Address : +919545004683
Pin code : KOP Karvir.
: 416002

250385511413710

VID No. : 250385511413710
PID No. : P42325558416117
Referred by : DR.SAI SPARSH HOSPITAL
Registered On : 27/11/2025 12:51 PM

Investigation
Electro

Metropolis



250385511507243



Name : Baby of. PAYAL VASGADEKAR
Age / Gender : 21 Day(s) / Male
Contact No. : +919028894640
Address : KOP Karveer.
Pin code : 416005

VID No. : 250385511507243
PID No. : P42325558416117
Referred by : DR.SAI SPARSH HOSPITAL
Registered On : 27/11/2025 12:51 PM
Collected On : 27/11/2025 12:49PM
Reported On : 27/11/2025 4:10 PM

Investigation	Observed Value	Unit	Biological Reference Interval
Procalcitonin (Serum, Chemiluminescent Microparticle Immunoassay (CMIA))	13.97	ng/mL	Low Risk for Sepsis: < 0.5 High Risk for Sepsis: > 2 Clinical Correlation: 0.5-2

INTERPRETATION :

1. PCT is the prohormone of calcitonin secreted by different types of cells from numerous organs in response to proinflammatory stimulation, particularly bacterial stimulation.
2. Depending upon clinical background, PCT > 0.1 can indicate clinically relevant bacterial infection, requiring antibiotic treatment.
3. PCT is an important marker enabling specific differentiation between bacterial infection and other causes of inflammatory reactions
4. Resorption of septic infection is accompanied by decreases in PCT concentration which returns to normal with half life of 24 hours
5. In certain situations (newborns, polytrauma, burns, major surgery, prolonged or severe cardiogenic shock etc) PCT elevation may be independent of any infectious aggression.
The return to normal values is usually rapid
6. Viral infections, allergies, autoimmune diseases and graft rejection do not lead to significant increase in PCT. Localized bacterial infections can lead to moderate increase in PCT levels.

NOTE:

Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

Ref: Arch Pathol Lab Med—Vol 141, November 2017

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Vedya
Dr. VIDYA CHAVAN
DCP
Consultant Pathologist
Reg No.2001/07/2513

MEDICAL LABORATORY REPORT

Sample Collected At:
Shobha Nandgonda Patil, Congress Bhavan Arihant Towers
Station Road Kolhapur

Processing Location :
Metropolis Healthcare Limited, 511 E
ARIHANT TOWERS, KOLHAPUR 416001

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 07/11/2025

PT.NO. : 115 071125

NAME : B/O PAYAL RITESH VASGADEKAR

AGE : 1 Days / M

REF. BY : DR. SAI SPARSH CHILDREN HOSP

Sample Collected Outside the Laboratory

COMPLETE BLOOD COUNT

			Normal Range
Haemoglobin	: 14.9	g/dl	14.5 - 16.5 g/dl
R.B.C Count	: 4.50	millions / cu-mm	4.5 - 6.5 millions / cu-mm
PCV	: 46.7	%	40 - 54 %
MCV	: 103.8	fL	80 - 96 fL
MCH	: 33.1	Pg	27 - 33 Pg
MCHC	: 31.9	gm/dl	33 - 36 gm/dl
RDW	: 18.1	%	11.0 - 14.5 %
W.B.C Count	: 4800	/cumm	13000 - 38000 /cumm

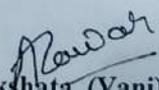
DIFFERENTIAL COUNT

Neutrophils	: 29	%	42 - 80 %
Lymphocytes	: 64	%	26 - 36 %
Eosinophils	: 02	%	0 - 4 %
Monocytes	: 05	%	2 - 10 %
Basophils	: 00	%	0 - 1 %
Platelet Count	: 261000	/ul	150000 - 450000 /ul
PCT	: 0.22	%	0.08 - 1.00 %
MPV	: 8.3	fL	6.0 - 10.0 fL
PDW	: 17.1	%	10.0 - 15.0 %

SMEAR EXAMINATION

RBC Morphology	: 3n RBC/100WBC. Macrocytic +, Anisocytosis+
W.B.C Morphology	: Leucopenia With Lymphocytosis
Platelets on Smear	: Adequate
Malarial Parasites	: No Parasite Seen

---- END OF REPORT ----


Dr. Akshata (Vani) Pawar
MD (Path)



Name : Baby of. PAYAL VASAGADEKAR
 Age / Gender : 2 Week(s) / Male
 Contact No. : +919545004683
 Address : KOP Karveer..
 Pin code : 416001

VID No. : 250385511441973
 PID No. : P42325558304023
 Referred by : DR.SAI SPARSH HOSPITAL
 Registered On : 25/11/2025 5:33 PM
 Collected On : 25/11/2025 5:28PM
 Reported On : 26/11/2025 10:48 AM

CULTURE & SENSITIVITY - AEROBIC BACTERIA, BLOOD SINGLE BOTTLE

Interim report

Culture Result

No growth of microorganisms after 24 hours of incubation.

Method : Culture - Aerobic by BacT/ALERT 3D Automated Method. Identification and antimicrobial sensitivity by automated Vitek2 Compact and conventional methods.

Principle :

- Automated BacT/alert 3D system. The BacT/alert 3D instrument is continuous monitoring system with rapid detection of bacteria &
- fungi in clinical specimens, with non-radiometric detection (fluorescence detection) technology. Specialized media with antibiotic
- neutralizing component permits early recovery of microbes.
- If microorganisms are present in the test sample inoculated into the BACTEC vial, carbon dioxide will be produced when the organisms metabolize the substrates present in the vial. Increases in the fluorescence of the vial sensor caused by the higher
- amount of CO2 are monitored by the instrument & determine the growth of microorganisms."

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Dr. SEEMA GAIKWAD
 MD DNB (Microbiology) Fellow Infectious Disease

MEDICAL LABORATORY REPORT



Name : Baby of. PAYAL VASGADEKAR
 Age / Gender : 2 Week(s) / Male
 Contact No. : +919545004683
 Address : KOP Karvir.
 Pin code : 416002

VID No. : 250385511413710
 PID No. : P42325558256540
 Referred by : DR.SAI SPARSH HOSPITAL
 Registered On : 25/11/2025 9:09 AM
 Collected On : 25/11/2025 9:07 AM
 Reported On : 25/11/2025 11:40 AM

Investigation	Observed Value	Unit	Biological Reference Interval
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Electrolytes, Serum

(Serum, ISE Indirect)

Sodium, Serum	137.1	mmol/L	132-142
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Interpretation:

- Low levels are noted in prolonged vomiting or diarrhea, diminished reabsorption in the kidney and excessive fluid retention. High levels are seen in case of excessive fluid loss, high salt intake and increased kidney reabsorption

Potassium, Serum	5.21	mmol/L	3.4-6.0
-------------------------	------	--------	---------

Interpretation:

- Low levels are noted in reduced intake of dietary potassium or excessive loss of potassium from the body due to diarrhea, prolonged vomiting or increased renal excretion. High levels may be caused by dehydration or shock, severe burns, hemolysis, diabetic ketoacidosis, and retention of potassium by the kidney

Chloride, Serum	104.9	mmol/L	97-108
------------------------	-------	--------	--------

Interpretation:

- Low levels are noted in reduced dietary intake, prolonged vomiting and reduced renal reabsorption as well as some forms of acidosis and alkalosis. High levels are found in dehydration, kidney failure, some forms of acidosis, high dietary or parenteral chloride intake, and salicylate poisoning.

Dr. Rajendra Patil
Dr. RAJENDRA PATIL
 MD (Pathology)
 Consultant Pathologist
 Reg No.60811

MEDICAL LABORATORY REPORT

Collected At:
 Shobha Nandgonda Patil, Congress Bhavan Arhant, Road,
 Solapur Road, Kolhapur

Processing Location:
 Processing Location: Metropolis Healthcare Limited, 511 E
 ARHANT TOWERS, SOLAPUR 416001

लॅबोरेटरी

Akshata (Vani) R. Pawar
M.D.(Pathology)

Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 23/11/2025

NAME : B/O PAYAL RITESH VASGADEKAR

REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 103 231125

AGE : 17 Days / M

Sample Collected Outside the Laboratory

BIOCHEMICAL TEST REPORT

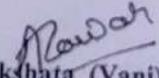
S. Sodium
S. Potassium
S. Chlorides

: 129.9 mmol/L
: 5.67 mmol/L
: 111.9 mEq/L

Normal Range

135 - 155 mmol/L
3.5 - 5.5 mmol/L
98 - 110 mEq/L

--- END OF REPORT ---


Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 23/11/2025

NAME : B/O PAYAL RITESH VASGADEKAR

REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 103 231125

AGE : 17 Days / M

Sample Collected Outside the Laboratory

COMPLETE BLOOD COUNT

			Normal Range
Haemoglobin	: 10.2	g/dl	14.5 - 16.5 g/dl
R.B.C Count	: 3.54	millions / cu-mm	4.5 - 6.5 millions / cu-mm
PCV	: 34.0	%	40 - 54 %
MCV	: 96	fL	80 - 96 fL
MCH	: 28.8	Pg	27 - 33 Pg
MCHC	: 30	gm/dl	33 - 36 gm/dl
RDW	: 18.5	%	11.0 - 14.5 %
W.B.C Count	: 5000	/cumm	5000 - 19500 /cumm

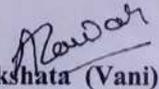
DIFFERENTIAL COUNT

Neutrophils	: 38	%	22 - 48 %
Lymphocytes	: 55	%	41 - 71 %
Eosinophils	: 02	%	0 - 4 %
Monocytes	: 05	%	2-10 %
Basophils	: 00	%	0 - 1 %
Platelet Count	: 337000	/ul	150000 - 450000 /ul
PCT	: 0.31	%	0.08 - 1.00 %
MPV	: 9.0	fL	6.0 - 10.0 fL
PDW	: 18.0	%	10.0 - 15.0 %

SMEAR EXAMINATION

RBC Morphology	: Few Microcytosis,,Mild Anisocytosis
W.B.C Morphology	: Within Normal Limits
Platelets on Smear	: Adequate
Malarial Parasites	: No Parasite Seen

--- END OF REPORT ---


Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 14/11/2025
NAME : B/O PAYAL RITESH VASGADEKAR
REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 107 141125
AGE : 8 Days / M
Sample Collected Outside the Laboratory

COMPLETE BLOOD COUNT

			Normal Range
Haemoglobin	: 13.5	g/dl	14.5 - 16.5 g/dl
R.B.C Count	: 4.43	millions / cu-mm	4.5 - 6.5 millions / cu-mm
PCV	: 43.3	%	40 - 54 %
MCV	: 97.7	fL	80 - 96 fL
MCH	: 30.5	Pg	27 - 33 Pg
MCHC	: 31.2	gm/dl	33 - 36 gm/dl
RDW	: 18.0	%	11.0 - 14.5 %
W.B.C Count	: 11700	/cumm	5000 - 20000 /cumm

DIFFERENTIAL COUNT

Neutrophils	: 42	%	22 - 48 %
Lymphocytes	: 49	%	43 - 53 %
Eosinophils	: 03	%	0 - 4 %
Monocytes	: 06	%	2 - 10 %
Basophils	: 00	%	0 - 1 %
Platelet Count	: 300000	/ul	150000 - 450000 /ul
PCT	: 0.25	%	0.08 - 1.00 %
MPV	: 8.2	fL	6.0 - 10.0 fL
PDW	: 18.2	%	10.0 - 15.0 %

SMEAR EXAMINATION

RBC Morphology	: Macrocytic Few ,Mild Anisocytosis
W.B.C Morphology	: Within Normal Limits
Platelets on Smear	: Adequate
Malarial Parasites	: No Parasite Seen

---- END OF REPORT ----

Akshata
Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

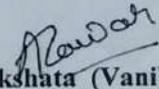
DATE : 14/11/2025
NAME : B/O PAYAL RITESH VASGADEKAR
REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 107 141125
AGE : 8 Days / M
Sample Collected Outside the Laboratory

BIOCHEMICAL TEST REPORT

			<u>Normal Range</u>
S. Sodium	: 135.3	mmol/L	135 - 155 mmol/L
S. Potassium	: 5.85	mmol/L	3.5 - 5.5 mmol/L
S. Chlorides	: 108.4	mEq/L	98 - 110 mEq/L

---- END OF REPORT ----


Dr. Akshata (Vani) Pawar
MD (Path)

लॅबोरेटरी

Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 11/11/2025

PT.NO. : 106 111125

NAME : B/O PAYAL RITESH VASGADEKAR

AGE : 5 Days / M

REF. BY : DR. SAI SPARSH CHILDREN HOSP

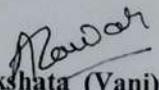
Sample Collected Outside the Laboratory

BIOCHEMICAL TEST REPORT

S. Sodium : 129.9 mmol/L
S. Potassium : 4.55 mmol/L
S. Chlorides : 119.9 mEq/L

Normal Range
135 - 155 mmol/L
3.5 - 5.5 mmol/L
98 - 110 mEq/L

--- END OF REPORT ---


Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 11/11/2025
NAME : B/O PAYAL RITESH VASGADEKAR
REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 106 111125
AGE : 5 Days / M
Sample Collected Outside the Laboratory

COMPLETE BLOOD COUNT

			Normal Range
Haemoglobin	: 12.2	g/dl	14.5 - 16.5 g/dl
R.B.C Count	: 3.97	millions / cu-mm	4.5 - 6.5 millions / cu-mm
PCV	: 39.9	%	40 - 54 %
MCV	: 100.5	fL	80 - 96 fL
MCH	: 30.7	Pg	27 - 33 Pg
MCHC	: 30.6	gm/dl	33 - 36 gm/dl
RDW	: 18.5	%	11.0 - 14.5 %
W.B.C Count	: 5700	/cumm	5000 - 21000 /cumm

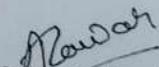
DIFFERENTIAL COUNT

Neutrophils	: 48	%	28 - 65 %
Lymphocytes	: 43	%	36 - 46 %
Eosinophils	: 02	%	0 - 4 %
Monocytes	: 06	%	2 - 10 %
Basophils	: 00	%	0 - 1 %
Platelet Count	: 192000	/ul	150000 - 450000 /ul
PCT	: 0.11	%	0.08 - 1.00 %
MPV	: 5.9	fL	6.0 - 10.0 fL
PDW	: 18.6	%	10.0 - 15.0 %

SMEAR EXAMINATION

RBC Morphology	: Normochromic, Normocytic.
W.B.C Morphology	: Within Normal Limits
Platelets on Smear	: Adequate
Malarial Parasites	: No Parasite Seen

---- END OF REPORT ----


Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Riddhi
LABORATORY

Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 10/11/2025

PT.NO. : 103 101125

NAME : B/O PAYAL RITESH VASGADEKAR

AGE : 4 Days / M

REF. BY : DR. SAI SPARSH CHILDREN HOSP

Sample Collected Outside the Laboratory

CRP TEST (QUANTITATIVE)

Normal Range

C. Reactive Proteins : Negative
CRP Level : 2.76 mg/L

Upto 6 mg/L

- * C - Reactive Proteins is an Acute Phase Reactant which rises in response to stressful and inflammatory states that occur with infection, injury, surgery, trauma.
- * Bacterial infections stimulate higher levels of CRP than viral ones.
- * CRP levels return to normal quickly, following successful therapies.

Normal Range

S. Bilirubin (Total) : 9.7 mg/dl
S. Bilirubin (Direct) : 0.9 mg/dl
S. Bilirubin (Indirect) : 8.8 mg/dl

0.4 - 1.1 mg/dl

0.1 - 0.4 mg/dl

0.3 - 0.7 mg/dl

---- END OF REPORT ----

Pawar
Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 10/11/2025
NAME : B/O PAYAL RITESH VASGADEKAR
REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 103 101125
AGE : 4 Days / M
Sample Collected Outside the Laboratory

CRP TEST (QUANTITATIVE)

Normal Range

C. Reactive Proteins : Negative
CRP Level : 2.76 mg/L Upto 6 mg/L

- * C - Reactive Proteins is an Acute Phase Reactant which rises in response to stressful and inflammatory states that occur with infection, injury, surgery, trauma.
- * Bacterial infections stimulate higher levels of CRP than viral ones.
- * CRP levels return to normal quickly, following successful therapies.

			<u>Normal Range</u>
S. Bilirubin (Total)	: 9.7	mg/dl	0.4 - 1.1 mg/dl
S. Bilirubin (Direct)	: 0.9	mg/dl	0.1 - 0.4 mg/dl
S. Bilirubin (Indirect)	: 8.8	mg/dl	0.3 - 0.7 mg/dl

---END OF REPORT---

Akshata
Dr. Akshata (Vani) Pawar
MD (Path)

रिद्धि लॅबोरेटरी

Dr. Akshata (Vani) R. Pawar
M.D.(Pathology)

Dr. Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 08/11/2025

NAME : B/O PAYAL RITESH VASGADEKAR

REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 120 081125

AGE : 2 Days / M

Sample Collected Outside the Laboratory

CRP TEST (QUANTITATIVE)

C. Reactive Proteins

: Negative

Normal Range

CRP Level

: 2.13 mg/L

Upto 6 mg/L

- * C - Reactive Proteins is an Acute Phase Reactant which rises in response to stressful and inflammatory states that occur with infection, injury, surgery, trauma.
- * Bacterial infections stimulate higher levels of CRP than viral ones.
- * CRP levels return to normal quickly, following successful therapies.

---- END OF REPORT ----

Akshata
Dr. Akshata (Vani) Pawar
MD (Path)



Name : Baby of. PAYAL VASAGDEKAR
 Age / Gender : 0 Day(s) / Male
 Contact No. : +919545004683
 Address : KOP Karveer..
 Pin code : 416001

VID No. : 250385510811687
 PID No. : P42325557232592
 Referred by : DR.SAI SPARSH HOSPITAL
 Registered On : 08/11/2025 7:21 PM
 Collected On : 08/11/2025 5:19 PM
 Reported On : 09/11/2025 1:25 PM

CULTURE & SENSITIVITY - AEROBIC BACTERIA, BLOOD SINGLE BOTTLE

Interim report

Culture Result

No growth of microorganisms after 24 hours of incubation.

Method : Culture - Aerobic by BacT/ALERT 3D Automated Method. Identification and antimicrobial sensitivity by automated Vitek2 Compact and conventional methods.

Principle :

- Automated BacT/Alert 3D system. The BacT/Alert 3D instrument is continuous monitoring system with rapid detection of bacteria &
- fungi in clinical specimens, with non-radiometric detection (fluorescence detection) technology. Specialized media with antibiotic
- neutralizing component permits early recovery of microbes.
- If microorganisms are present in the test sample inoculated into the BACTEC vial, carbon dioxide will be produced when the organisms metabolize the substrates present in the vial. Increases in the fluorescence of the vial sensor caused by the higher
- amount of CO₂ are monitored by the instrument & determine the growth of microorganisms."

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Dr. SEEMA GAIKWAD
 MD DNB (Microbiology) Fellow Infectious Disease

MEDICAL LABORATORY REPORT

Page 1 of 1

Sample Collected At:
 Shobha Nandgonda Patil, Congress Bhavan Arihant Towers
 Station Road Kolhapur

Processing Location :
 Processing Location Metropolis Healthcare Limited, 511 E
 ARIHANT TOWERS, KOLHAPUR 416001

लॅबोरेटरी

Akshata (Vani) R. Pawar
M.D.(Pathology)

Vijaya S. Jeure(Rajmane)
M.D.(Microbiology)



Above Baroda Bank, Opp. Irwin Christian Highschool, Parvati Multiplex chowk, Kolhapur. Mob. 8956931881 Ph. 0231 - 2641231

DATE : 07/11/2025

NAME : B/O PAYAL RITESH VASGADEKAR

REF. BY : DR. SAI SPARSH CHILDREN HOSP

PT.NO. : 115 071125

AGE : 1 Days / M

Sample Collected Outside the Laboratory

BLOOD GROUP

Blood Group

: 'B' Rh POSITIVE

Normal Range

Slide Agglutination Test

--- END OF REPORT ---

Akshata
Dr. Akshata (Vani) Pawar
MD (Path)

YOUTH HELPING TRUST

PAYAL VASAGDEKAR
2 Week(s) / Male
+919545004683
KOP Karvir.
416002

Investigation
Electrolytes, Serum
(Serum, ISE Indirect)
Sodium, Serum
Interpretation:
• Low

250385511413710

VID No. : 250385511413710
PID No. : P4232555825654
Referred by : DR.SAI SPARSH HOSPITAL
Registered On : 25/11/2025 5:33 PM
Collected On : 25/11/2025 5:28PM
Reported On : 27/11/2025 12:29 PM

250385511441973



Age / Gender : Baby of PAYAL VASAGDEKAR
Contact No. : 2 Week(s) / Male
Address : +919545004683
Pin code : KOP Karvir., 416001

VID No. : 250385511441973
PID No. : P42325558304023
Referred by : DR.SAI SPARSH HOSPITAL
Registered On : 25/11/2025 5:33 PM
Collected On : 25/11/2025 5:28PM
Reported On : 27/11/2025 12:29 PM

CULTURE & SENSITIVITY - AEROBIC BACTERIA, BLOOD SINGLE BOTTLE
Interim report

Culture Result

No growth of microorganisms after 24 hours of incubation. No growth of microorganisms after 48 hours of incubation.

Method : Culture - Aerobic by BacT/ALERT 3D Automated Method. Identification and antimicrobial sensitivity by automated Vitek2 Compact and conventional methods.

Principle :

- Automated BacT/Alert 3D system. The BacT/Alert 3D instrument is continuous monitoring system with rapid detection of bacteria &
- fungi in clinical specimens, with non-radiometric detection (fluorescence detection) technology. Specialized media with antibiotic
- neutralizing component permits early recovery of microbes.
- If microorganisms are present in the test sample inoculated into the BACTEC vial, carbon dioxide will be produced when the organisms metabolize the substrates present in the vial. Increases in the fluorescence of the vial sensor caused by the higher amount of CO2 are monitored by the instrument & determine the growth of microorganisms."

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Seema

Dr. SEEMA GAIKWAD
MD DNB (Microbiology) Fellow Infectious Disease

MEDICAL LABORATORY REPORT

Sample Collected At:
Shobha Nandgonda Patil, Congress Bhavan Arihant Towers
Station Road Kolhapur

Processing Location :
Processing Location Metropolis Healthcare Limited, 511 E
ARIHANT TOWERS, KOLHAPUR 416001

YOUTH HELPING TRUST

YOUTH HELPING TRUST

YOUTH HELPING TRUST

HELPING TRUST

HELPING TRUST

HELPING TRUST



250385511413710



Name : Baby of. PAYAL VASGADEKAR
 Age / Gender : 2 Week(s) / Male
 Contact No. : +919545004683
 Address : KOP Karvir.
 Pin code : 416002

VID No. : 250385511413710
 PID No. : P42325558256540
 Referred by : DR.SAI SPARSH HOSPITAL
 Registered On : 25/11/2025 9:09 AM
 Collected On : 25/11/2025 9:07 AM
 Reported On : 25/11/2025 11:40 AM

Investigation

Electrolytes, Serum

(Serum, ISE Indirect)

Sodium, Serum

Observed Value: 137.1 Unit: mmol/L Biological Reference Interval: 132-142

Interpretation:

- Low levels are noted in prolonged vomiting or diarrhea, diminished reabsorption in the kidney and excessive fluid retention. High levels are seen in case of excessive fluid loss, high salt intake and increased kidney reabsorption

Potassium, Serum

Observed Value: 5.21 Unit: mmol/L Biological Reference Interval: 3.4-6.0

Interpretation:

- Low levels are noted in reduced intake of dietary potassium or excessive loss of potassium from the body due to diarrhea, prolonged vomiting or increased renal excretion. High levels may be caused by dehydration or shock, severe burns, hemolysis, diabetic ketoacidosis, and retention of potassium by the kidney

Chloride, Serum

Observed Value: 104.9 Unit: mmol/L Biological Reference Interval: 97-108

Interpretation:

- Low levels are noted in reduced dietary intake, prolonged vomiting and reduced renal reabsorption as well as some forms of acidosis and alkalosis. High levels are found in dehydration, kidney failure, some forms of acidosis, high dietary or parenteral chloride intake, and salicylate poisoning.

Ram

Dr. RAJENDRA PATIL
 MD (Pathology)
 Consultant Pathologist
 Reg No.60811

MEDICAL LABORATORY REPORT

Collected At:
 Shobha Nandgonda Patil, Congress Bhavan Arihant Towers
 Station Road Kolhapur

Processing Location :
 Processing Location Metropolis Healthcare Limited, 511 E
 ARIHANT TOWERS, KOLHAPUR 416001

Metropolis
AMBILITA
PATHOLOGY LABORATORY
AMBILITA
PATHOLOGY LABORATORY

Name _____
 Age _____
 250385511413710

VID No. : 250385511413710
 PID No. : P42325558256540
 Referred by : DR.SAI SPARSH HOSPITAL
 Registered On : 25/11/2025 9:09 AM
 Collected On : 25/11/2025 9:07 AM
 Reported On : 25/11/2025 11:40 AM

Baby of. PAYAL VASGADEKAR
 Gender : 2 Week(s) / Male
 Contact No. : +919545004683
 Address : KOP Karvir.
 Pin code : 416002

Observed Value **Unit**
Above 100 **C** **ng/mL**

Biological Reference Interval
 Low Risk for Sepsis: < 0.5
 High Risk for Sepsis: > 2
 Clinical Correlation: 0.5-2

Investigation

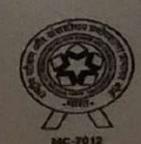
Procalcitonin
 (Serum, Chemiluminescent Microparticle Immunoassay (CMIA))

Medical Remarks: Kindly correlate clinically
INTERPRETATION :

1. PCT is the prohormone of calcitonin secreted by different types of cells from numerous organs in response to proinflammatory stimulation, particularly bacterial infection.
2. Depending upon clinical background, PCT > 0.1 can indicate clinically relevant bacterial infection, requiring antibiotic treatment.
3. PCT is an important marker enabling specific differentiation between bacterial infection and other causes of inflammatory reactions
4. Resorption of septic infection is accompanied by decreases in PCT concentration which returns to normal with half life of 24 hours
5. In certain situations (newborns, polytrauma, burns, major surgery, prolonged or severe cardiogenic shock etc) PCT elevation may be independent of any infectious aggression.
The return to normal values is usually rapid
6. Viral infections, allergies, autoimmune diseases and graft rejection do not lead to significant increase in PCT. Localized bacterial infections can lead to moderate increase in PCT levels.

NOTE:
 Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.
 Ref: Arch Pathol Lab Med—Vol 141, November 2017

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Dr. RAJENDRA PATIL
 MD (Pathology)
 Consultant Pathologist
 Reg No.60811

MEDICAL LABORATORY REPORT
 * represents critical results

Sample Collected At:
 Shobha Nandgonda Patil, Congress Bhavan Arihant Towers
 Station Road Kolhapur

Processing Location :
 Processing Location Metropolis Healthcare Limited, 511 E
 ARIHANT TOWERS, KOLHAPUR 416001



Name : Baby of. PAYAL VASAGADEKAR
 Age / Gender : 2 Week(s) / Male
 Contact No. : +919545004683
 Address : KOP Karveer.
 Pin code : 416001

VID No. : 250385511441973
 PID No. : P42325558304023
 Referred by : DR.SAI SPARSH HOSPITAL
 Registered On : 25/11/2025 5:33 PM
 Collected On : 25/11/2025 5:28PM
 Reported On : 28/11/2025 6:44 PM

CULTURE & SENSITIVITY - AEROBIC BACTERIA, BLOOD SINGLE BOTTLE

Interim report

Culture Result

No growth of microorganisms after 24 hours of incubation. No growth of microorganisms after 48 hours of incubation.

Final Report

Organism(s) Isolated

Budding yeast grown on aerobic culture.

Comments

Kindly take entry for Fungal culture within 48 hours.

Method : Culture - Aerobic by BacT/ALERT 3D Automated Method. Identification and antimicrobial sensitivity by automated Vitek2 Compact and conventional methods.

Principle :

- Automated BacT/Alert 3D system. The BacT/Alert 3D instrument is continuous monitoring system with rapid detection of bacteria &
- fungi in clinical specimens, with non-radiometric detection (fluorescence detection) technology. Specialized media with antibiotic
- neutralizing component permits early recovery of microbes.
- If microorganisms are present in the test sample inoculated into the BACTEC vial, carbon dioxide will be produced when the organisms metabolize the substrates present in the vial. Increases in the fluorescence of the vial sensor caused by the higher amount of CO₂ are monitored by the instrument & determine the growth of microorganisms."

-- End of Report --



Test Marked with NABL symbol are in the scope of accreditation

Dr. SEEMA GAIKWAD
 MD DNB (Microbiology) Fellow Infectious Disease

MEDICAL LABORATORY REPORT

Page 1 of 1

Sample Collected At:
 Shobha Nandgonda Patil, Congress Bhavan Arihant Towers
 Station Road Kolhapur

Processing Location :
 Processing Location Metropolis Healthcare Limited, 511 E
 ARHANT TOWERS, KOLHAPUR 416001



भारत सरकार
Government of India

भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India

नोंदणी क्रमांक:/ Enrolment No.: 2722/16070/00647

To
पायल रितेश वसगडेकर
Payal Ritesh Vasagadekar
C/O: Shital Appaso Chaugule,
GAVARDEVI WADI,
BEDAG,
VTC: Bedag,
PO: Bedag,
Sub District: Miraj,
District: Sangli,
State: Maharashtra,
PIN Code: 416410,
Mobile: 9112874788



आपला **आधार** क्रमांक / Your **Aadhaar** No. :

5011

VID : 9166 6282 4831 3135

माझे **आधार**, माझी ओळख



भारत सरकार
Government of India



पायल रितेश वसगडेकर
Payal Ritesh Vasagadekar
जन्म तारीख/DOB: 16/02/2006
महिला/ FEMALE

आधार हा ओळखीचा पुरावा आहे, नागरिकत्व किंवा जन्मतारखेचा नाही. हे फक्त पडताळणीसाठी वापरले जावे (ऑनलाइन प्रमाणीकरण किंवा QR कोडचे स्कॅनिंग/ ऑफलाइन XML).
Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication, or scanning of QR code / offline XML).

5011

माझे **आधार**, माझी ओळख



Government of India



माहिती / INFORMATION

- **आधार** हा ओळखीचा पुरावा आहे, नागरिकत्वाचा किंवा जन्मतारखेचा नाही. जन्मतारीख आधार क्रमांक धारकाने प्रस्तुत केलेल्या नियमांमध्ये निर्दिष्ट केलेल्या जन्मतारीख दस्तऐवजाच्या पुराव्याद्वारे समर्थित असलेल्या माहितीवर आधारित आहे.
- ह्या **आधार** पत्राची पडताळणी UIDAI-नियुक्त प्रमाणीकरण एजन्सीद्वारे ऑनलाइन प्रमाणीकरणाद्वारे किंवा ॲप स्टोअरमध्ये उपलब्ध mAadhaar किंवा Aadhaar QR स्कॅनर ॲप वापरून किंवा www.uidai.gov.in वर उपलब्ध सुरक्षित QR कोड रीडर ॲप वापरून QR कोड स्कॅनिंगद्वारे सत्यापित केले जावे.
- **आधार** अद्वितीय आणि सुरक्षित आहे.
- ओळख आणि पत्त्याला आधार देणारी कागदपत्रे **आधार** नोंदणीच्या तारखेपासून दर 10 वर्षांनी आधारमध्ये अद्यतनित केली जावीत.
- **आधार** तुम्हाला विविध सरकारी आणि गैर-सरकारी लाभ/सेवांचा लाभ घेण्यास मदत करते.
- **आधार**मध्ये तुमचा मोबाईल नंबर आणि ईमेल आयडी अपडेट ठेवा.
- **आधार** सेवांचा लाभ घेण्यासाठी mAadhaar ॲप डाउनलोड करा.
- **आधार**/बायोमेट्रिक्स वापरत नसताना सुरक्षितता सुनिश्चित करण्यासाठी लॉक/अनलॉक **आधार**/बायोमेट्रिक्सचे वैशिष्ट्य वापरा.
- **आधार**ची मागणी करणाऱ्या संस्थांनी संमती घेणे बंधनकारक आहे.
- **Aadhaar** is proof of identity, not of citizenship or date of birth (DOB). DOB is based on information supported by proof of DOB document specified in regulations, submitted by Aadhaar number holder.
- This **Aadhaar** letter should be verified through either online authentication by UIDAI-appointed authentication agency or QR code scanning using mAadhaar or Aadhaar QR Scanner app available in app stores or using secure QR code reader app available on www.uidai.gov.in.
- **Aadhaar** is unique and secure.
- Documents to support identity and address should be updated in **Aadhaar** after every 10 years from date of enrolment for **Aadhaar**.
- **Aadhaar** helps you avail of various Government and Non-Government benefits/services.
- Keep your mobile number and email id updated in **Aadhaar**.
- Download mAadhaar app to avail of **Aadhaar** services.
- Use the feature of Lock/Unlock **Aadhaar**/biometrics to ensure security when not using **Aadhaar**/biometrics.
- Entities seeking **Aadhaar** are obligated to seek consent.

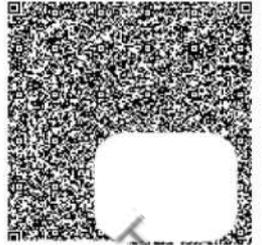


भारतीय विशिष्ट ओळख प्राधिकरण
Unique Identification Authority of India



पत्ता:
C/O: शीतल आप्पासो चौगुले, गवरदेवी वाडी, बेडग, बेडग,
बेडग, सांगली,
महाराष्ट्र - 416410

Address:
C/O: Shital Appaso Chaugule, GAVARDEVI WADI,
BEDAG, Bedag, PO: Bedag, DIST: Sangli,
Maharashtra - 416410



5011 :

VID : 9166 6282 4831 3135

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भारत सरकार

Government of India



आधार



रितेश राजेंद्र वसगडेकर

Ritesh Rajendra Vasagadekar



3900 0948 0263

जन्म तारीख / DOB: 01/08/1998

पुरुष / Male



3900 [REDACTED]

मेरा आधार, मेरी पहचान



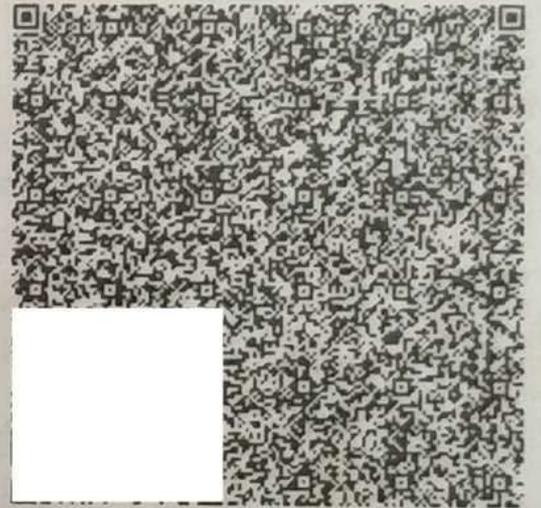
भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



AADHAAR

पत्ता: 672, येडवाणे गल्ली, वसगडे, सांगवडे, कोल्हापूर,
महाराष्ट्रमहाराष्ट्र, 416202



Address: 672, Yedwane Galli, Vasagade,
Sangwade, Kolhapur, Maharashtra,
416202

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आयकर विभाग
INCOME TAX DEPARTMENT



भारत सरकार
GOVT. OF INDIA



स्थायी लेखा संख्या कार्ड
Permanent Account Number Card
BCFPV6352N



नाम / Name
RITESH RAJENDRA VASAGADEKAR

पिता का नाम / Father's Name
RAJENDRA JINAPAL VASAGADEKAR

जन्म की तारीख / Date of Birth
01/08/1998


हस्ताक्षर / Signature

