

Narayana Hrudayalaya Charitable Trust



Socio Economic Assessment Form:

1.	MRN No.	15060009/24/76				
2.	Patient Name	Mahender Basal				
3.	Gender (Male/Female)	Male				
4.	Date of Birth	01-09-1976				
5.	Nationality	Indian				
6.	Religion	Hindu				
7.	Marital Status	Married				
8.	Qualification	10th				
9.	Parent/Guardian name (relationship with patient)	Mr. Rajkumar Mahato. (father)				
10.	Address & Contact No.	Vill - Oiyadi pur to Sorrauli Dist - Aurangabad Bihar (824124) Mob. No. 9717036263 7761982844				
11.	<u>Family details:</u>					
	Name	Relation with Patient	Age	Qualification	Occupation	Monthly Income
	Mahender Basal	Self	46	10th	farmer	5000/-
	Sandeep Kumar	Son	20	12th.		—
	Sanjeet Kumar	Son	18	12th.	Student	—
	Sushila Devi	wife	42	8th	Housewife	—

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12.	Personal Information about patient and family background:	
		<p>Patient is belongs to Bihar, and his occupation is farming. And he is the only earning member of family. an</p>
13.	Medical History if any:	EVM
14.	Referred by and contact person (Camp, Other Hospital, NGO, staff or others)	follow-up patient
15.	Admitting Consultant	Dr. Anurag Gupta
16.	Diagnosis:	<p>Rt frontal AVM post embolization + Craniotomy & resection</p>
17.	Treatment details:	<p>Required Conservative management for 14-3-4 days and ward 3 days.</p>
18.	Intent of treatment	Curative/ palliative
19.	Expected 5 yrs. survival rate %	
20.	Admission Date	12/01/2023
21.	Surgery Date	-
22.	Discharge Date	18/01/2023
23.	Total estimated cost of treatment	3,20,000/-

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24.	Patient contribution		
25.	Source of Patient Contribution	Savings- Borrowings- Sale of an asset- Any other -	
25.	Support from other Scheme/Foundation/Crowd funding	NO	
26.	Nature of accommodation (Owned/rented house, quarters)	own house in village,	
27.	Other Asset detail	NA	
MODIFIED KUPPUSWAMY SCALE			
28	Occupation of Head	Legislators, Senior Officials and Managers	10
		Professionals	9
		Technicians and Associate Professionals	8
		Clerks	7
		Skilled workers and Shop and Market sales workers	6
		Skilled agricultural and fishery workers	5
		Craft and Related trade works	4
		Plant and Machine operators and assemblers	3
		Elementary occupation	2
		Unemployed	1
29	Education of Head	Profession or Honours	7
		Graduate	6
		Intermediate or diploma	5
		High School Certificate	4
		Middle School Certificate	3
		Primary School Certificate	2
		Illiterate	1
30	Monthly Family Income	>78,062	12
		39,033-78062	10
		29200-39032	6
		19516-29199	4

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		11708-19515	3
		3908-11707	2
		<3908	1
31.	Score as per Modified Kuppuswamy scale	Upper	26 to 29
		Upper middle	16 to 25
		Lower middle	11 to 15
		Upper lower	5 to 10
		Lower	<5
32.	Copy of any of following ID Proof of the patient: <ul style="list-style-type: none"> - Aadhar Card - BPL Card - Driving License - PAN Card - Ration Card - Voter ID 	Aadhar Card	
33.	Copy of documents stating monthly/annual income or economic background like certificate from gram panchayat, BPL Card, Ration Card etc.	Income Certificate	
34.	<u>Recommendation by assessor :</u>		
	Name of Assessor	Sandip Kumar	
	Contact No.	7761982844	
	Email ID	N/A	
	Date and Signature	Sandip Kumar	
35.	Patient Declaration: <i>The information given above is true and complete;</i> <i>I am not in a position to afford the expense for the treatment described above;</i> <i>I have no objection to the use of the name, photo and information of my child in the brochures, website and for fund raising activities;</i> Patient/Family member Signature: Sandip Kumar		

(son)
7761982844