

RISK BOND

CONSENT TO ADMISSION AND MEDICAL, SURGICAL TREATMENT

Name of patient: Kumuduni Jena Name of Father/Husband Kabikara Jena
 Age 58 Address AT- Bharipada
PS - Raghunika Dist - Kendrapara Date of Admission 1.12.25
 I (Name of Patient) mob-9178833373 22-10-29AM

Suffering from requiring medical/surgical care. The treatment may include routine diagnostic procedures and such treatment as the attending Physicians, Surgeons, Medical Staff and others consider to be necessary in this Nursing Home.

I have been explained and I am fully aware of the following points mentioned below.

1. I understand that the practice of medicine and surgery requiring diagnosis and treatment may involve risk of injury or even death. I acknowledge that no guarantee has been made to me as to the result of examination or treatment in this medical center.
2. I understand that no procedures are performed upon a patient unless and until he or she has an opportunity to discuss with the physician, surgeon or other health professional to the patient's satisfaction.
3. I understand that the attending Surgeons, Physicians, Anaesthetists are not employees or agent of this clinic but rather are independent contractors, practitioners who have been granted the privilege of using its facilities for the care and treatment of the patients.
4. I am satisfied with the existing facilities available in the SNEHA NURSING HOME.
5. I understand that there is life risk at time threatening to life in medical treatment may it be Surgery (major or minor) under Anaesthesia (general or local) or medicinal treatment. Further I understand hypersensitivity reactions of different medicines on different individuals which may even lead to death of the patient. Further I understand that the Nursing Home does not supply any medicines for the patients during his/her period of stay.
6. I understand that none of the doctors and staffs of this Nursing Home, including attending doctors will be held responsible for any sort of mishap that may occur before, during or after any operative procedure and administration of anaesthesia. Further, I understand that there is life risk and at time leading to death or disability which may occur due to any sort of complications of the disease and its treatment and all the treatment papers are the property of the Nursing Home.

This form has been fully explained to me, and knowing its contents and significance. I/We my/our unreserved consent to be treated in the Medical Center.

Date of Execution.....

Signature of patient or Thumb impression Date:

Signature Witness
Guardian/Relation
accompanying person

Date:

(if patient is unable to consent or is a minor, complete the following)

- ▶ Patient (is a minor..... years of age) is unable to consent.
- ▶ Signature of legal guardian or closest available relative
- ▶ Signature of witness

RULES AND NORMS OF HOSPITAL

- ▶ No more than One attendant are allowed to stay with the patient, any extra attendant shall be liable to pay Rs. 75/- per night.
- ▶ No person is allowed to enter or exit the hospital premises after 10.00 PM
- ▶ Check out time is 10 A.M. Check outs after 10 A.M. shall be liable to pay the whole days room/bed charge.

**BED HEAD TICKET****SNEHA NURSING HOME**

Ring Road, Kathagola, Mangalabag, Cuttack - 753001 (Odisha)

Regd. No : CUT/00394/2022, Mob.: 9853323806

Name of Patient Kumuduni Jena Age 58 Sex FAddress 2/10 - Kalakara JenaRegd. No. 1185/25-26AT - Bhareipada

Disease

PS - RajkanikaDate of Admission : 01/12/25 atDist - Kendrapara

Date of Discharge :

NOB - 917883337310 AM

Date of Operation /

Operating Surgeon Dr. S. Ch. Das**OT NOTE**Ca breast (Rt side)MRM Done & by AUnder all specimen procedure, Spontaneous Hæmorrhagic incisionfrom medial to lateral side : upper flap& lower flap taken up to sub clavicular nerve &Lower flap up to 6th rib. medial to mid ofSternum & lateral flap up to lateral border ofSub Clavian muscle. This lower flap taken upfrom pectoralis major muscle. up to lateralborder. Per all around dissection. Per entrapaxilla to remove all the lymph & lymphDr. Subash Chandra Das
MS (Surgery)

Sabesunhi + axilla vein ..

Romex drain given . sum chest in
2-0 Pnyamide & sum approx 15 cm
stapler. Down time .

Rx

. NPD

. IV line $\left\{ \begin{array}{l} R13Q \\ NS 2Q \end{array} \right.$

. 2x mel 1g 1m & 2m

. 2x mmax 15m 1m 2m

. 2x Bonapen 1m & 2m

. 2x pndn 1m 4x

. 2x pndn 1m 4x


11/2/2020



SNEHA NURSING HOME

Ring Road, Mangalabag, Kathagola, Cuttack-1 (Odisha)

Mob.: 9853323806, 8280319536

CASE SHEET

Name of the Surgeon/Consultant.....Dr. S. Ch. Das.....Asst. Surgeon.....Anesthesia.....

Name of the Patients : Kumudini Panda Regd No.....D.O.A.....D.O.D.....Age/Sex.....Disease.....

Date	Time	B.P.	Pulse	Temp.	Resp.	Input	Output	Medication
01/12/25	2:30 PM	110/90 mmHg	72 bpm	98.6°		PL-0		inj - Xane - 1g m (iv) inj - Ranitine (iv)
<u>OT</u>	6:10 PM	110/70 mmHg	72 bpm	98.6°		NS-1		
	10:00 PM					PL-2		Inj - Xane 1g - (iv) inj - Ranitine - (iv) inj - Dynapen - (iv)
02/12/25	13:00 AM							Inj - Tramadol - (iv)
	2:00 AM					NS-3		
	6:00 AM	110/70 mmHg	72 bpm	98.6°		PL-4		Inj - Xane 1g - (iv) inj - Ranitine - (iv) inj - Dynapen - (iv)
	11:33 AM					NS-5		

Case Summary :



	Time	B.P.	Pulse	Temp.	Resp.	Input	Output	Medication
	6.00 am	110/70 mmHg	72 bpm	98.6°F				700 - Xone - 1g - (m) 700 - Ranitine - (m) 700 - Dynapare - (m)
03.12.25	6 AM	110/80 mmHg	72 bpm	98.6°F				700 - Xone - 1g - (m) 700 - Ranitine - (m) 700 - Dynapare - (m)
	12.00 pm						(Drain - 400 ml)	
	6 pm	120/80 mmHg	72 bpm	98.6°F				700 - Xone - 1g - (m) 700 - Ranitine - (m) 700 - Dynapare - (m)
04.12.25	6 AM	140/80 mmHg	72 bpm	98.6°F				700 - Xone - 1g - (m) 700 - Ranitine - (m) 700 - Dynapare - (m)
	6 pm	180/70 mmHg	72 bpm	98.6°F				700 - Xone - 1g - (m) 700 - Ranitine - (m) 700 - Dynapare - (m)
05.12.25	6 AM	130/80 mmHg	72 bpm	98.6°F				700 - Xone - 1g - (m) 700 - Ranitine - (m) 700 - Dynapare - (m)

Case Summary :



SNEHA NURSING HOME

Ring Road, Kathagola, Mangalabag, Cuttack - 753001 (Odisha)

Regd. No : CUT/00394/2022, Mob.: 9853323806

ANAESTHESIA CHART

PATIENT NAME Kumudini Jena ANESTHESIOLOGIST Dr M. G. Jena

SURGERY MRM. DATE 11.12.25

SURGEON Dr B.C. Das ANAESTHESIA ☒ GA / ☐ S.A. / ☐ E.A. / ☐ I.V SEDATION / ☐ MAC / ☐ RATIVA

REGIONAL ANAESTHESIS-Technique _____ Approach _____

Needle _____ Space _____ Drug _____

Onset of Action _____ Sensory Level _____ Motor Level _____

general anaesthesia-Preoxygenation For 3 min @ 6L/min

Induction Dr Glyco 0.2mg, Midaz 1.5mg, N2O 5mg, Propofol 100mg

Intubation-NSal (Oral) Size 7.0 Cuff CM Other Information Inj M/G - 2.5ml

Ventilation-Controlled/Spontaneous, Circuib' Ploymask VEN.

Ventilator - MV 6 RR 12 TDV 500 I : E Ration 1 : 2

Tourniquet - Applied at _____ Removal at _____

Intubation - 11 vitals monitoring 20min 10 NL → 10 PL

Postop - PT conc. started

BP - 120/80 100 125

PR - 84/min

SpO2 - 100% → 98%

ATV

- NPO

- DRF @ 2100/12

- In 600ml



G

अभिनंदन पत्र/ABHINANDAN PATRA

Dear: KUMUDINI JENA

Beneficiary ID: MNCZ4SO99

Package Code: [SG075B] 37300f

Hospital Name: SNEHA NURSING HOME-HOSP21P110274-CUTTACK(URBAN)

हमें खुशी है की आप स्वस्थ हो कर घर लौट रहे हैं। हम आशा करते हैं कि आप आयुष्मान भारत प्रधानमंत्री जन आरोग्य योजना के तहत प्रदान की जाने वाली मुफ्त स्वास्थ्य सेवाओं से संतुष्ट होंगे।

We are glad that you are returning home after recovering from illness. We hope that you are satisfied with the free health services provided under Ayushman Bharat Pradhan Mantri Jan Arogya Yojana.

हम आपसे अनुरोध करते हैं कि इस पत्र के साथ संलग्न प्रतिक्रिया फॉर्म में अपने अनुभव हमारे साथ साझा करें। आपकी प्रतिक्रिया से हमें योजना के तहत दी जाने वाली सेवा को और बेहतर बनाने में भी मदद मिलेगी।

We request you to share your experience in the form enclosed with this letter. Your feedback will help us to improve the services being offered under the scheme.

हम आपसे यह भी अनुरोध करते हैं कि आप अपना अनुभव दूसरों के साथ साझा करें और उन्हें जनसेवा केन्द्र (सीएससी) या सूचीबद्ध अस्पताल जाकर अपना आयुष्मान कार्ड बनाने के लिए प्रोत्साहित करें।

We also request you to share your experience with others and encourage them to get their Ayushman cards by visiting CSC or empanelled hospital.

हम आपके और आपके परिवार के स्वस्थ और खुशहाल जीवन की कामना करते हैं।

We wish you and your family a happy & healthy life ahead.

प्रतिक्रिया फॉर्म / FEEDBACK FORM

Dear: KUMUDINI JENA
Beneficiary ID: MNCZ4SO99
Package Code: [SG075B]
Hospital Name: SNEHA NURSING HOME-
HOSP21P110274-CUTTACK(URBAN)
Hospital ID: 35800

1. क्या आपने AB PM-JAY योजना के तहत चिकित्सा उपचार का लाभ उठाया?

Did you avail the medical treatment under AB PM-JAY scheme?

☒ हाँ / Yes

☐ नहीं / No

2. क्या आप अस्पताल में मिले इलाज से संतुष्ट हैं?

Are you satisfied with the treatment you received at the hospital?

☒ हाँ / Yes

☐ नहीं / No

3. क्या प्रधानमंत्री आरोग्य मित्र (पीएमएम) ने आपको अस्पताल में भर्ती होने के दौरान आवश्यक जानकारी और सहायता प्रदान की थी?

Did Pradhan Mantri Arogya Mitra (PMAM) provide you with necessary information and assistance during your hospitalization?

☒ हाँ / Yes

☐ नहीं / No

अन्य अतिरिक्त प्रतिक्रिया / Any other feedback:

4. क्या अस्पताल के डॉक्टर/स्टाफ/नर्स ने आपका सहयोग किया और अस्पताल में रहने के दौरान आपको उचित समय दिया?

Were hospital doctors/ staff/ nurses cooperative to you and gave you proper time during your stay in the hospital?

☒ हाँ / Yes

☐ नहीं / No

5. क्या आपने स्वास्थ्य सेवा का लाभ उठाने के लिए अस्पताल को अपनी जेब से कोई पैसा दिया?

Did you pay any money from your pocket to the hospital for the healthcare service you availed?

☐ हाँ / Yes

☒ नहीं / No

6. क्या अस्पताल ने आपको उपचार के लिए ज़रूरी दवाइयाँ उपलब्ध कराई थी?

Did hospital provide sufficient medicine for the treatment you availed?

☒ हाँ / Yes

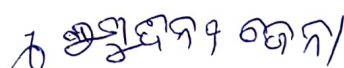
☐ नहीं / No

7. क्या अस्पताल में ठहरने के दौरान अस्पताल ने आपके लिए गुणवत्ता-युक्त भोजन की व्यवस्था की थी?

Did the hospital serve you with quality food during the stay at the hospital?

☒ हाँ / Yes

☐ नहीं / No



लाभार्थी का हस्ताक्षर / Beneficiary's Signature

मोबाइल नंबर / Mobile Number



Treatment Summary :

M/R m Done & G/A

Advice on Discharge :

- Rx
- Tab Oxytocin-100 BD PL
x 5d
 - Tab Uteracur 100 BD PL
x 5d
 - Tab Enzomae 500 Tab TDX x 5d
 - Cap Pantol-D 1 cap x 1 man
 - Tab Atiz 100 x 1 man

in B-Bat app in

Dr. Subash Chandra Das
MS (Surgery)


1/12/2022



SNEHA NURSING HOME

FULFILLING THE EXPECTATION

RING ROAD, KATHAGOLA, MANGALABAG, CUTTACK - 753001 (ODISHA)

Mob.: 8280319536, 9853323806, 9437268546



DISCHARGE TICKET



Regd. No. : 1185/25-26

Date : 5/12/25

Name : Kumuduni Jena

Age : 58 Y

Date of Admission : 01.12.25

Diagnosis : CA BREAST (RT)

Treatment : MRM done LRA (Both tumor in Nipple areola
Complex in Level I, II & III removed
↓ LRA

Date of Operation : 1/12/25

Date of Discharge : 5/12/25

Condition at the time of discharge : Satisfactory

Consultant : Dr. G. C. Dey



SAGAR PATHOLAB

KATHAGOLA ROAD, MANGALABAG, CUTTACK



Regd. No. CUT/00491/2023

9938028361, 7381162782  sagarpatholab@gmail.com

Dr. Smrutilata Sahoo
M.D. Microbiology

Name : KUMUDINI JENA

Age : 58Yrs

Sex : Female

PID : 402



Scan to Verify

Sample Collected At :

KATHAGOLA ROAD, MANGALABAG, CUTTACK.

MOBILE : 9938028361, 7381162782

MAILID : sagarpatholab@gmail.com



01122500402

Registered On : 01-12-2025 11:09:20 AM

Collected On : 01-12-2025 11:09:20 AM

Reported On : 01-12-2025 11:22:46 AM

Ref By : SNEHA NURSINGHOME

BIOCHEMISTRY REPORT

Investigation	Result	Reference Value	Unit
Sodium (Na ⁺) Method: ISE	139.1	135 - 155 MEg/L	MEg/L
Pottasium (K ⁺) Method: ISE	4.8	3.5 - 5.5 MEg/L	MEg/L

Test done by Automatic Electrolyte Analyser.

-----Stay Healthy-----




Authorised Signatory

SAMPLE SUPPLIED / COLLECTED IN THE LAB MODERNTESING COMPTERISED
ANALISER THIS REPORT IS NOT VALID FOR MEDICO LEGAL PURPOSE



PATHOLAB

(Unit of PATHOLAB Healthcare Pvt. Ltd.)



MAJESTIC TOWER, RING ROAD, MANGALABAG, CUTTACK-753001, Regd. No.-78/2000, ☎(0671)2301510

Patient's Name : Mr/Mrs KUMUDINI JENA

Age / Sex 58 Female

Ref. by Dr /Hosp: DR.S.C.DAS

Job Id:-23847

Sample No:- CY-8

CYTO-PATHOLOGY REPORT

Clinical Diagnosis :

SOL Breast, Right

Local Examination :

FNA done

Microscopic :

- The smears show duct carcinoma cells in clumps and singles scattered along with lymphocytes.

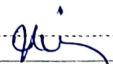
Impression :

DUCT CARCINOMA BREAST

Sample Received on :22/11/2025

Reported on :22/11/2025

Cytosmear appended.


Dr. Niranjana Rout
(Consultant Pathologist)

(Signature)

N.B : 1. Cytotology is a screening test.

2. Clinical correlation and biopsy confirmation may be required before radical treatment.



SDC
Sun Diagnostic Centre

Not the official stationery of Sun Diagnostic Centre (For Reporting Purpose only)

Patient Name : MRS. KUMUDINI JENA

Age / Gender : 58 years / Female

Mobile No. : 9178833373

Patient ID : 233464

Source : DIRECT

Treating Dr. : Dr. HAREKRUSHNA MAJHI

Collection Time : 21/11/2025 11:54

Receiving Time : 21/11/2025 11:54

Reporting Time : 21/11/2025 14:42

Sample ID :



294368

MAMMOGRAPHY OF RIGHT BREAST

FINDINGS:

- o Film screen mammography of right breast in cranio-caudal and Mediolateral oblique view reveal, mixed density breast parenchyma. (ACR- B).
- * Well defined lobulated radioopaque lesion in periareolar location of right braest without any internal calcific foci.
- o Skin thickness of right breast appears normal.
- o Nipple and areola of right breast appear normal.

SONOGRAPHY:

- o A lobulated 19.7 x 19 mm heterogeneous hypoechoic lesion seen in right breast at 6-7 O clock position in periareolar location with internal vascularity.
- o Few subcm right axillary node with maintained fatty hilum, targets of size 7.8 mm in SAD.

IMPRESSION:

ON MAMMOGRAPHY :

- * WELL DEFINED LOBULATED RADIOOPAQUE LESION IN PERIAREOLAR LOCATION OF RIGHT BRAEST WITHOUT ANY INTERNAL CALCIFIC FOCI.

ON USG CORRELATION :

- * A LOBULATED HETEROGENEOUS HYPOECHOIC LESION SEEN IN RIGHT BREAST AT 6-7 O CLOCK POSITION IN PERIAREOLAR LOCATION WITH INTERNAL VASCULARITY.

(BIRADS-IVA)

- * FEW SUBCM RIGHT AXILLARY NODE WITH MAINTAINED FATTY HILUM (? REACTIVE)

Needs clinical correlation.

Checked By : Suchitra Das

Consultant Radiologist

This is a Computer generated report and you are requested to check it while collecting from our counter.
If you or your Doctor detect any discrepancy please report to the management Page 1 of 1

IMA BUILDING RANIHAT, CUTTACK - 753 007

Mobile : 9937487530, 7205335860 E-mail : diagnostic.centre@sunhospitals.com

Website: www.sunhospitals.com



LAB

UPHC BRAJARAMBHA, JOBRA, CUTTACK



Name Kumuduni Jena

Date 22-11-25

Sex ♀

Age 58

Ref. By Dr. _____

REPORT ON BLOOD

BIO CHEMISTRY

SERUM/PLASMA GLUCOSE / ENZYMTIC METHOD :

Fasting 60.....110mg/dl.....
2Hrs PP/PG Upto.....140mg/dl.....
Random Upto.....130mg/dl..... 138

KIDNEY FUNCTION TEST

Serum Urea 15.....40mg/dl.....
Serum Creatinin 0.6.....1.2mg/dl.....
Serum Nitrogen(NPN) 10.....20mg/dl.....
Serum Protein Total 6.....8mg/dl.....
Albumin 3.7.....5.3mg/dl.....
Globulin 2.3.....3.5mg/dl.....
Serum Uric Acid 3.5.....7mg/dl.....
Serum Sodium 136.....155mmol/dl.....
Serum Potassium 3.5.....5.5mmol/dl.....
Serum Chloride 98.....106mmol/dl.....
Serum Calcium 8.7.....11mmol/dl.....
Microprotein in Urine Upto.....35mg/dl.....

LIVER FUNCTION TEST(L.F.T)

Australia Antigen(Hbs Ag) neg.
Serum Bilirubin
Direct 0.1.....0.3mg/dl.....
Total 0.1.....1.0mg/dl.....
Serum SGOT(AST) Upto.....37Units/L.....
Serum SGOT(AIT) Upto.....40Units/L.....
Serum Alkaline Phosphatase 80.....290Units/L.....

SERUM LIPID PROFILE

Total Cholesterol 140.....200mg/dl.....
Triglyceride Upto.....150mg/dl.....
LDL Cholesterol Upto.....130mg/dl.....
HDL Cholesterol Above.....35mg/dl.....
VLDL Cholesterol Upto.....30mg/dl.....
Sputun AFB Positive / Negative

SEROLOGY :

Blood GROUP A B O AB
Rh(DD Typing) Positive / Negative
VDRL Reactive / Non-reactive
ASO Positive / Negative
Diagnostic Titre
RAF Positive / Negative
Diagnostic Titre
CRP Positive / Negative
TOXO TEST Positive / Negative
HIV Reactive / Non-reactive
HCV Positive / Negative

WIDAL TEST

Positive / Negative

DIAGNOSTIC TITRE

	1/40	1/80	1/160	1/320	1/640
O					
A					
AH					
BH					

HAEMATOLOGICAL TEST

RBC

Total Count.....Millions / Cmm
E.S.R.....mm / 1st Hr
.....mm / 2nd Hr
Reticulocyte Count.....
Haemoglobin.....GM%(Sahali / Cyanometh)
Sickling Test.....Positive / Negative
(After 24 Hrs.)

WBC

Total Count.....Millions/ Cmm
Differential Count-(D.C).....
Neutrophils.....%
Eosinophils.....%
Basophils.....%
Lymphocytes.....%
Prematures Cell
Absolute Eosinophil Count.....per Cmm

PLATELET

Bleeding Time 01 Min 55 Sec.
Coagulation Time 05 Min 15 Sec.
Platelet Count.....Per Lakhs

PARASITIES

Microfilaria Positive / Negative
Malaria Positive / Negative
ICT Ag / Pan(PF/PV) Positive / Negative
T.B. Test Positive / Negative
Mantoux Test Given 10Tu / 5 Tu
Done on.....reading on.....

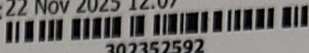
Signature h



ନିଦାନ - ନିଃଶୁଳ୍କ ରୋଗ ନିରୂପଣ ସେବା Nidaan : Free Diagnostics Services

Medical Laboratory Report

Patient Name : Mrs KUMUDUNI JENA
Age and Gender : 58 Years / Female
Category : OPD - UPHC BRAJARAMBHA
Referring Doctor : Self
Sample Processed at : OD BHUBNESHWAR LAB

Patient UID No : BHUBN251101434946
PRN No : 10492
Registered On : 22 Nov 2025 12:07
Sample UID No.  302352592

SPECIAL CHEMISTRY

Test Done	Observed Value	Units	Biological Reference Interval
THYROID FUNCTION TESTS			
Sample type: SERUM			
T3 (Tri-iodothyronine)	1.08	ng/mL	0.7 - 2.04 Neonate : 0.73 - 2.88 6 Days-3 Month : 0.80 - 2.75 4 - 12 Month : 0.86 - 2.65 1 - 6 Years : 0.92 - 2.48 7 - 11 Years : 0.93 - 2.31 12 - 20 Years : 0.91 - 2.38
CLIA			
Sample Type - S1-SERUM			
T4 (Thyroxine)	8.30	µg/dL	5.0 - 14.10 Neonate : 5.04 - 18.5 6 Days-3 Month : 5.41 - 17 4 - 12 Month : 5.67 - 16 1 - 6 Years : 5.95 - 14.7 7 - 11 Years : 5.99 - 13.8 12 - 20 Years : 5.91 - 13.2
CLIA			
Sample Type - SERUM			
TSH	1.36	µIU/mL	0.30 - 5.50 In Pregnant Women First Trimester 0.1 - 2.5 Second Trimester 0.2 - 3.0 Third Trimester 0.3 - 3.0 Neonate : 0.70 - 15.2 6 Days-3 Month : 0.72 - 11 4 - 12 Month : 0.73 - 8.35 1 - 6 Years : 0.70 - 5.97 7 - 11 Years : 0.60 - 4.84 12 - 20 Years : 0.51 - 4.30
CLIA			

Sample Type - SERUM



MC-6685



Sany

DR.SARTHAK RANJAN NAYAK
(CONSULTANT BIOCHEMIST)

Sample Collected On : 22.11.2025 12:09
Results Authenticated : 22.11.2025 22:56

Sample Accepted On : 22.11.2025 20:54
Results Reported : 22.11.2025 22:56

E20263
Printed On : 24.11.2025 09:25

--- END OF REPORT ---



A PPP Initiative by Govt. of Odisha and Krsnaa Diagnostics Ltd

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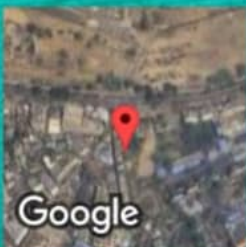
GPS Map Camera

Cuttack, Odisha, India 🇮🇳

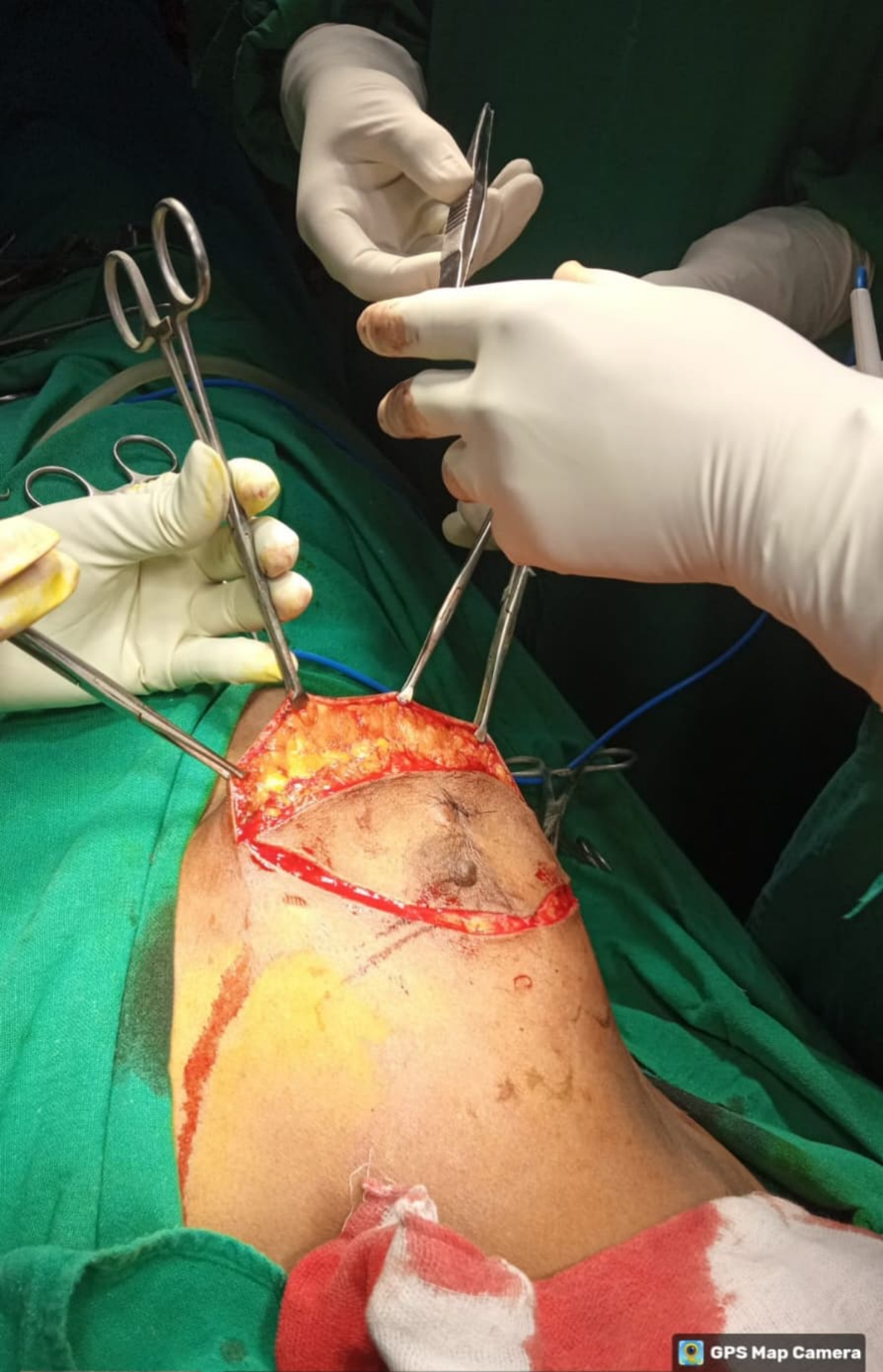
Kathagola, Fvgq+j56, Ring Rd, Mangalabag, Cuttack,
Odisha 753001, India

Lat 20.476483° Long 85.887985°

Mon, 01/12/2025 05:26 PM GMT +05:30



Google



GPS Map Camera

Cuttack, Odisha, India 

Fvgq+j49, Kathagola Rd, Professors Colony, Cuttack,
Odisha 753001, India

Lat 20.476484° Long 85.887916°

Mon, 01/12/2025 04:06 PM GMT +05:30



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GPS Map Camera

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Fvgq+j49, Kathagola Rd, Professors Colony, Cuttack,
Odisha 753001, India

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Cuttack, Odisha 753001, India

Lat 20.476484° Long 85.887911°

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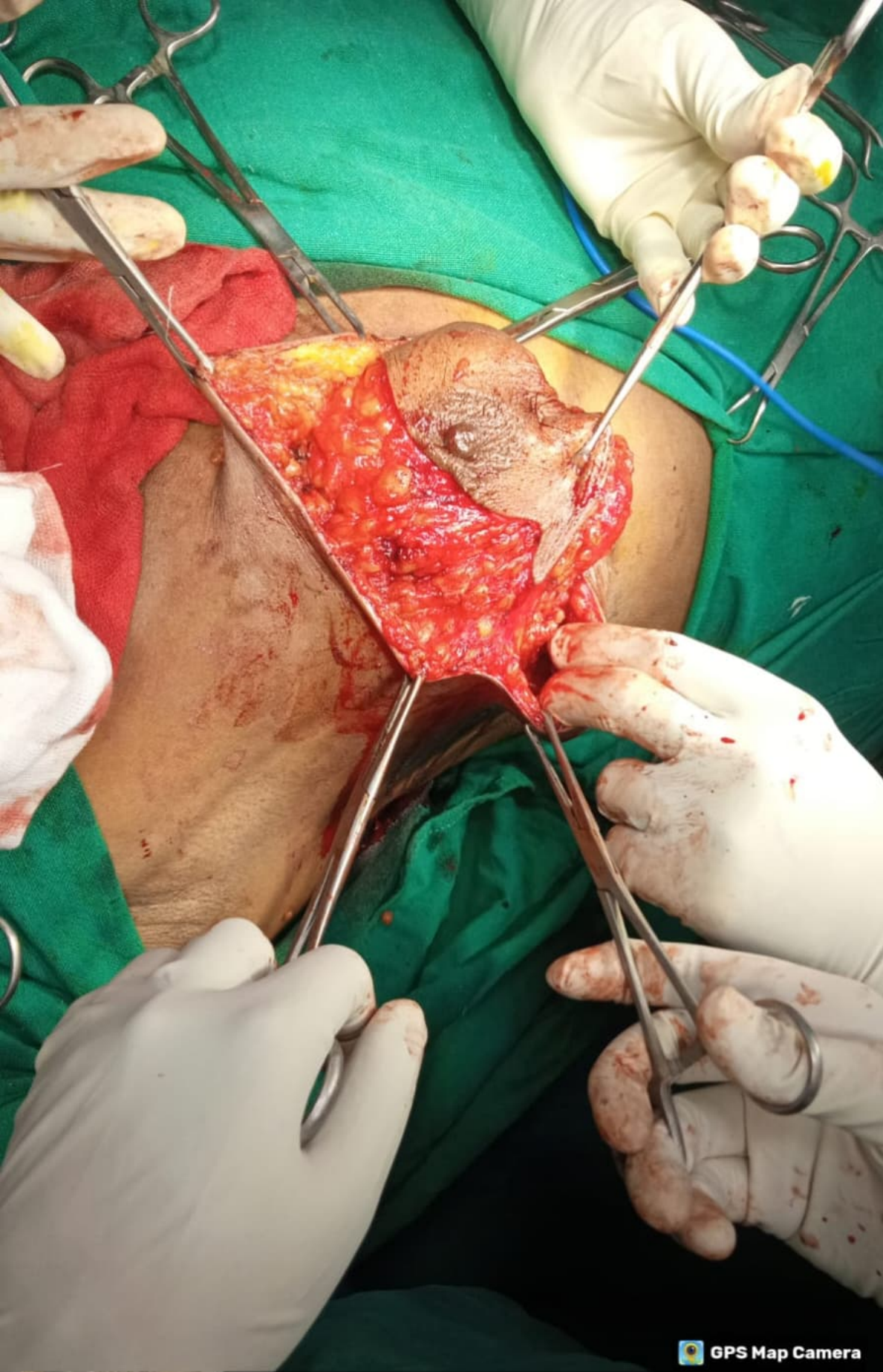
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Odisha 753001, India

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Odisha 753001, India

Lat 20.476485° Long 85.887912°

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Odisha 753001, India

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