



सेवा में

मिसन होप

1/203 गीता कालोनी

दिल्ली

दिनांक

6-9-2017

6 SEP 2017

विषय  $\Rightarrow$  मेरे के इलाज हेतु प्राथमिक पत्र

श्रीमान अरुणोन्क सिंह हैं मेरे बड़े भाता. अमर सिंह जिसकी उम्र 09 वर्ष है। मेरे बच्चे का कैंसर (B-ALL) का रोग है जिसका इलाज राजीव गांधी हॉस्पिटल में चल रहा है। उपर काश बंधा गया है कि 6 माह का खर्च 08 लाख रुपमे है इसके बाद फिर 03 साल और खर्च चलेगी जो मेरे परिस्थिति के हिसाब से जासकती है। असु में इतना खर्च नहीं कर सकता इसलिए विवेक है कि आय मेरे बच्चे के इलाज में मेरी मदद कर दीजिए। जिसका मैं अचारी हूँगा

असु

For MISSION HOPE  
Trustee

6 SEP 2017

प्राथमिक  
अरुणोन्क सिंह





# कार्यालय ग्राम पंचायत क्षेत्र कमर्जी

जनपद पंचायत सीधी, जिला-सीधी (म.प्र.)

पुष्पा नायरवाल

Mob.-9752040699

क्र. १३७१७

शरदपंच

प्रति,

प्रमाण पत्र

प्रमाणित किया जाता है कि अरुणेंद्र सिंह पिता राज बहादुर सिंह ग्राम - कुमर्जी जिला सीधी के पुरजैमी वार्डिया है, इनका मुख्य व्यवसाय खेती है इनकी चार्जिक शायदी अनुमानित एक लाख से कम है। इसके अलावा इनके जीविकी पार्जन का कीर्द साहारा नहीं है।

पुष्पा नायरवाल  
ग्राम पंचायत क्षेत्र कमर्जी  
सीधी, जिला-सीधी (म.प्र.)

कार्यालय नायब तहसीलदार/तहसीलदार  
टप्पा/तहसील चुरहट जिला सीधी

दिनांक 23/08/2017

प्र.क्र. RS/462/0111/4385/2017 /बी-121/2017

आय प्रमाण-पत्र

(जारी होने की तिथि से तीन वर्ष तक मान्य)



प्रमाणित किया जाता है कि श्री/श्रीमती/कु. अरुणेन्द्र सिंह पिता/पति राजबहादुर सिंह निवासी कमर्जी, Kamarji, Churhat, सीधी तहसील चुरहट जिला सीधी (मध्यप्रदेश) की/के परिवार की समस्त स्रोतों की वार्षिक आय रुपये 90000 (शब्दों में नब्बे हजार रुपये मात्र ) है ।

(आवेदक द्वारा प्रस्तुत घोषणा पत्र के आधार पर जारी)

हस्ताक्षर  
तहसीलदार/नायब तहसीलदार,  
तहसील चुरहट  
जिला सीधी



नोट - पंजीयन क्रमांक : RS/462/0111/4385/2017 जारी सर्टिफिकेट का सत्यापन वेबसाईट lokseva.gov.in अथवा mpedistrict.gov.in पर यह पंजीयन क्रमांक देकर किया जा सकता है ।  
प्रमाणित किया जाता है कि इस पत्र का प्रिंटआउट वेबसाईट www.mpedistrict.gov.in से मेरे द्वारा निकाला गया है ।

हस्ताक्षर



**Rajiv Gandhi Cancer Institute  
and Research Centre**

A Unit of Instruments - Cancer Society  
Registered under Societies Registration Act 1860

Sector-5, Rohini, Delhi-110 085

Tel: +91-11-4702 2255

Fax: +91-11-4705 1033

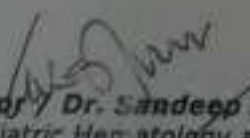
Web: www.rgci.org

Date: 23.08.17

**FOR PM RELIEF FUND  
TO WHOM SO EVER IT MAY CONCERN**

This is to certify that **Master Abhay Singh**, 9 year male, **CR No. 221220**, has been diagnosed as a case of **Acute Lymphoblastic Leukemia** and is under treatment at this institute since 23.08.17. He is advised chemotherapy. His treatment is likely to continue for 2 years. The approximate cost of treatment is likely to be **Rs. 8 Lakh (Rs. Eight Lakhs only)**.

Since medical treatment involves changes depending up on the progress of case, the estimate is liable to revision & estimate does not include emergency treatment expenses.

  
**Gauri Kapoor / Dr. Sandeep Jain**  
Consultant - Pediatric Hematology and Oncology  
Rajiv Gandhi Cancer Institute and Research Centre,  
Sector-5, Rohini, Delhi  
Tel: 91-11-47022255

DR. GAURI KAPOOR, MD. (P.H.D.)  
Consultant  
Pediatric Hematology  
R.G.C.I. & R.C., Sector-5,  
Rohini, Delhi-110085  
Regd. OMC No. 8999





# RAJIV GANDHI CANCER INSTITUTE AND RESEARCH CENTRE

(Unit of Indraprastha Cancer Society & Research Centre)

Sector-V, Rohini, Delhi - 110 085 GSTIN : 07AAAT0440C1ZD  
Tel. : 47022222 (30 LINES), 27051011-1016 Fax : 91-11-27951037

ISO No. : F/MISC/09-04-01

## CASH MEMO (Original Copy)

Receipt No : R/17-18/157318 Date : 06-09-2017 Patient : MASTABHAY SINGH  
CR No : 221220 Age/Sex : 9 Years/Male  
Category : PRIVATE Ref By :  
Location : RGC

Sl.No	Particulars	Unit	Amount(Rs)
	<b>DAY CARE ROOM CHARGES</b>		
1	DAY CARE GEN.BED LESS THAN 2 HRS.	1	1000.00
	<b>BED SIDE PROCEDURES</b>		
2	LUMBER PUNCTURE THERAUPETIC	1	2000.00
	<b>C.S.S.D.</b>		
3	L.P. SET	1	300.00
	<b>CHEMOTHERAPY</b>		
4	DAY CARE CHEMOTHERAPY (By/MULTIPLE DRUG THER. [Dr. Gauri Kapoor/Sandeep Jain.]	1	1500.00
	<b>O.T. CONSUMABLE CHARGES</b>		
5	KETAMINE 10 ML(NAPROD)(MED-K-005) [Dr. Gauri Kapoor/Sandeep Jain.]	1	5.00
	<b>HISTO PATHOL.&amp; CYTOLOGY</b>		
6	BODY FLUIDS CYTOLOGY [Dr. Anurag Mehta]	1	1300.00
	Gross Amount		6108.00
	Amount Paid		6108.00

Received with thanks from / on-behalf of MASTABHAY SINGH an amount of Six Thousand One Hundred And Eight Rupees  
only  
(By Cash :6108.00)

Signature

06-09-2017 10:01 am

Printed By : RJA

Created By : RJA



## RAJIV GANDHI CANCER INSTITUTE AND RESEARCH CENTRE

Sector - V, Rohini, Delhi - 110 085  
Tel. : 47022222(30Lines) 27051011-1050 Fax : 91-11-27051037

CLINICAL PATHOLOGY

DEPARTMENT OF PATHOLOGY

C. R. No. 22122A  
Name Abhoy Suf  
Address .....  
Phone .....  
Age 9 Sex : M  F   
Unit / Doctor D. G. Kumar Phone .....

For Inpatients Only

PAYMENT DETAILS

IP. No .....	Cash Memo No. Date Amount
Bed No .....	Charge Slip No. Date
Ward .....	Free Slip No. Date
DOA .....	

DIAGNOSIS :

CLINICAL PATHOLOGY

- URIN R/E  
 URINE BILE - SALT / BILE PIGMENT  
 URINE KETONE BODIES  
 URINE 24 HR. PROTEIN  
 URINE OTHERS  
 STOOL R/E  
 OCCULT BLOOD  
 STOOL FOR REDUCING SUBSTANCES  
 STOOL OTHERS  
 SEMEN ANALYSIS  
 ANY OTHER

BODY FLUIDS

- C.S.F. For cytology.  
 PLEURAL FLUID  
 ASCETIC FLUID  
 CARDIAL FLUID  
 GASTRIC ASPIRATE  
 ANY OTHER

DATE :

6/9/12

SIGNATURE OF REQUISTIONER

*[Signature]*





ISO 9001



ISO 14001



# RAJIV GANDHI CANCER INSTITUTE AND RESEARCH CENTRE

(Unit of Indraprastha Cancer Society &amp; Research Centre)

Sector-V, Rohini, Delhi - 110 085 GSTIN : 07AAAT10440C12D  
Tel. : 47022222 (30 LINES), 27051011-1015 Fax : 91-11-27051037

Name	MAST, ABHAY SINGH	CR No	221220	Age/Sex	9/Male
Referred Doctor	Gauri Kapoor Sandeep Jain	OPD/IPD	OPD		

Order: 06-09-2017 08:22 am  
Planned: 06-09-2017 08:22 am  
Collected: 06-09-2017 08:52 am  
Received: 06-09-2017 09:49 am  
Reported: 06-09-2017 09:57 am



Test Report

2 0 1 7 2 4 9 - 7 3 0

Name	Result	Ref.Range	Unit
<b>CBC (HEMOGRAM COMPLETE)-C/71 (Whole blood EDTA)</b>			
HB (HAEMOGLOBIN) (SLS)	<u>16</u>	13-17	g/dL
TL.C (TOTAL LEUCOCYTE COUNT) (Impedance)	<u>2169</u>	4000-10000	/cumm
PLATELET COUNT (Impedance)	<u>102000</u>	150000-450000	/cumm
POLYMORPHS (FCM Slide)	<u>41.2</u>	40-60	%
LYMPHOCYTES (FCM Slide)	<u>58.1</u>	20-40	%
MONOCYTES (FCM Slide)	<u>0.5</u>	2-10	%
EOSINOPHILS (FCM Slide)	<u>0.0</u>	1-6	%
BASOPHILS (FCM Slide)	<u>0.0</u>	0-1	%
PCV (PACKED CELL VOLUME) (Impedance)	<u>23.1</u>	40-50	%
M.C.V (Calculated)	<u>95.9</u>	83-101	f
M.C.H (Calculated)	<u>31.5</u>	27-32	pg
M.C.H.C (Calculated)	<u>32.9</u>	31.5-34.5	g/dl
R.B.C COUNT (Impedance)	<u>2.41</u>	4.5-5.5	mill/cumm
RDW-CV (Calculated)	<u>18.1</u>	11.6-14.0	%

Clinical  
Interpretation if  
any:

DLC MACHINE GENERATED RESULT.

Verified by:

Signature:  
DR NARENDER TEJWANI  
06-09-2017 10:19 am

\* Medical Services are not covered Under NABL Accreditation

This is an electronically generated report and needs no signature. Any alterations will make the report void. Time of collection of the same would be between 3pm and 5pm only.

Technician Name : SOPHY

-- End of Report --



FS 526454



ISO 9001  
EMS 526455



ISO 14001



# RAJIV GANDHI CANCER INSTITUTE AND RESEARCH CENTRE

Sector-V, Rohini, Delhi - 110 085  
Tel : 47022222 (30 LINES), 27051011 - 1015 Fax : 91-11-27051037

## HAEMATOLOGY

## DEPARTMENT OF PATHOLOGY

C. F	CR.No	221220	patients Only	Payment Details	
	CR Name	MAST.ABHAY SINGH		Cash Memo No.	
Nar	Cons	Dr. Gauri Kapoor/Sandeep		Date	
Adc	Doctor	Jain.		Amount	
.....				Charge Slip No.	
Age				Date	
Unit				Free Slip No.	
				Date	

DIAGNOSIS: All

### ROUTINE

### CYTOCHEMISTRY

- COMPLETE HAEMOGRAM (CBC)
- HAEMOGLOBIN
- TLC
- DLC
- PLATELET COUNT
- PCV
- MCHC
- MCH
- MCV
- ESR
- RBC COUNT
- RETICULOCYTE COUNT
- BLEEDING TIME
- CLOTTING TIME
- LE CELL PHENOMENON
- ABSOLUTE EOSINOPHIL COUNT
- MALARIAL PARASITE
- PERIPHERAL SMEAR
- BONE MARROW EXAMINATION
- FOETAL HAEMOGLOBIN LEVEL
- G-6 PD
- OSMOTIC FRAGILITY TEST
- Electrophoresis for M Band
- Electrophoresis for Foetal Haemoglobin
- FDP
- PROTHROMBIN TIME AND INR
- PTTK
- Blood Group ABO & Rh

- 
- 
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- 
- 
- 
- 
- 
- 

DATE: 13/09/12

[Signature]  
SIGNATURE OF REQUISITIONER

Inside = 31cm

F-360



**RAJIV GANDHI CANCER INSTITUTE  
AND RESEARCH CENTRE**

Sector - V, Rohini, Delhi - 110 085  
Tel : 47022222 (30 LINES) 27051011 - 1015  
Fax : 91 - 11 - 27051037, E-mail : rgcirc@eth.net

**RECORD OF CATHETER CARE**

Pt's Name Mahesh Abhey Singh Date of Insertion 23/8/17  
C.R.No. 221220 Inserted by Sn. Nele  
Type Groshoy NPT  
Doctor-in-Charge Dr. Gauri Kapoor Company Bael

S.No.	Date	Flushing	Dressing	Cap Change	Comments	Sign.
1	24/8/17	✓	✓	✓	BFA   KFA	Nesta
2	28/8/17	✓	✓	✓	BFA ⊕ ⊕ ⊕	Oshw
3	2/9/17	✓	✓	X	BFA ⊕ ⊕ ⊕	Sandhya
4	6/9/17	✓	✓	✓	BFA ⊕ ⊕ ⊕	Sandhya
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						



F-10A

F/RECP/01-05-06



# RAJIV GANDHI CANCER INSTITUTE AND RESEARCH CENTRE

Sector-V, Rohini, Delhi - 110 085  
Tel. : 47022222 (30 Lines), 27051011 - 1015  
Fax : 91-11-27051037

C. R. NO. 221220Date 6/9/12Patient's Name Abhey SinghAge/Sex m Doctor's Name Dr. G. Kapur

## PRESCRIPTION SLIP

Rx  
 Inj - Oxidone Gmg - 1  
 Inj - Vincristine 1.5mg - 1  
 Inj - Daunorubicin 30mg - 1  
 L.P. Needle 22 (Vygon) - 1  
 Prilox oilhead - 1  
 Inj - Rometax 12.5mg - 1  
 Inj glon elbow - 1  
 Sake set - 1  
 Rossi km - 4

~~5215~~  
5215

PLEASE TAKE PRIOR APPOINTMENT FOR NEXT VISIT

**GST No:** 07AAACF9834C1ZB  
**Bill No:** SH28151914  
**Staff:** Naveen

**TAX INVOICE**
**D/L No:** NW(1872)-140, 20,21  
**Bill Date & Time:** 06-09-2017 10:40:20  
**Till No:** 2

**To:** ABHAY  
**Tel:** 9826923132,

**Add:**  
**CH NO:** 221220 **IPD NO.:** **Bed No:** **Ward No:**
**Dr:** Gauri Kapoor

**Add:** IIGD-RC, Sector 5, Rohini

S.No	Product	HSN Code	Mfg	Batch	Exp	Qty	MRP	MRP Gross Amount	Discount	Net Value
1	ECCOFLAC NS 0.9% (N) 100ML	30049099	B.BRAUN MEDIC	017F029E	05-20	3	33.72	101.16	10.11	91.05
						3		101.16	10.11	91.05
<b>Total</b>										100.00 8.95

**Cash**  
**Amount Refunded**

HSN Code	Tax Rate	Taxable Amt	SGST	CGST	Total
30049099	12.00	81.29	4.88	4.88	91.05
		81.29	4.88	4.88	91.05

**Corporate Name:**

- All Disputes are subject to Delhi Jurisdiction
  - All Weighing or Measuring Instruments or Devices are for domestic use only as per The Legal Metrology Act, 2009
  - All Credit card/Debit card payments are subject to realization
  - Visit us at [www.fortishealthworld.com](http://www.fortishealthworld.com) or for feedback and suggestions, please email us at: [customer-care@fortishealthworld.com](mailto:customer-care@fortishealthworld.com) or [smalltoourhome-care@fortishealthworld.com](mailto:smalltoourhome-care@fortishealthworld.com)
- Thank you for shopping@RWL, TEL No:-27057155,27057156, E & D.E

CIN No: U85121DL2006PLC148330 Registered Name: RWL Healthworld LTD Formerly known as Relligare Wellness LTD  
 Registered office add: D-1/5 Okhla Ph-II, 2nd Flr, New Delhi-110020 Okhla Ph-II(2nd Flr, New Delhi-110020 Website: [www.rwlhealthworld.com](http://www.rwlhealthworld.com) Corporate  
 Ph: 01130148200



**GST No:** 07AAACF9834C12R  
**Bill No:** SHZ8151905  
**Staff:** MANISH

**TAX INVOICE**
**D/L No:** NW[1872]-14R, 20,21  
**Bill Date & Time:** 06-09-2017 10:21:43  
**Till No:** 9

**To:** ABHAY  
**Tel:** 9826923132,

**Add:**  
**CR NO:** 221220 **IPD NO.:** **Bed No:** **Ward No:**
**Dr:** GORI KAPDOR

**Add:**

S.No	Product	HSN Code	Mfg	Batch	Exp	Qty	MRP	MRP Gross Amount	Discount	Net Value
1	NULIFE ELBOW LENGTH EXAMINATION GLOVES2S	39262011	MRK PHARMA	501860	04-20	1	85.00	85.00	17.85	67.15
2	DAUNDOMYCIN 20MG (N)	30049049	PFIZER LIMITED	6365062	04-19	1	398.92	398.92	39.89	359.03
						<b>2</b>		<b>483.92</b>	<b>57.74</b>	<b>426.18</b>
<b>Total</b>										<b>500.00</b>
<b>Cash</b>										<b>73.82</b>
<b>Amount Refunded</b>										

HSN Code	Tax Rate	Taxable Amt	SGST	CGST	Total
30049049	5.00	341.93	8.55	8.55	359.03
39262011	12.00	59.96	3.60	3.60	67.16
		<b>401.89</b>	<b>12.15</b>	<b>12.15</b>	<b>426.19</b>

**Corporate Name:**

- All Disputes are subject to Delhi Jurisdiction
  - All Weighing or Measuring Instruments or Devices are for domestic use only as per The Legal Metrology Act, 2009
  - All Credit card/Debit card payments are subject to realization
  - Visit us at [www.fortishealthworld.com](http://www.fortishealthworld.com) <<http://www.fortishealthworld.com>> or for feedback and suggestions, please email us at : [customercare@fortishealthworld.com](mailto:customercare@fortishealthworld.com) <<mailto:customercare@fortishealthworld.com>>
- Thank you for shopping@RWL ,TEL No:-27057155,27057156, F & O.E

CIN No: U85121DL2006PLC148330 Registered Name: RWL Healthworld LTD Formerly known as Religare Wellness LTD  
 Registered office add: D-1/5 Okhla Ph-II,2nd Flr, New Delhi-110020 Okhla Ph-II,2nd Flr, New Delhi-110020 Website: [www.rwlhealthworld.com](http://www.rwlhealthworld.com) Corporate Ph: 01130148200



# Rajiv Gandhi Cancer Institute and Research Centre

A Unit of Indraprastha Cancer Society  
Registered under "Societies Registration Act 1860"

NAME: Abhay

CR: 22/220

D.O.D: 25/8/17

Note what the medication does. For example: lowers blood pressure / pain relief

Include any special instructions for the medication, such as take with food or stop taking on 1/14

Use the grid below to write down the amount you take in each time slot (for example, 1 in the morning and 1.5 at bedtime).

## My daily medications list:

Name of the medication	What it does	How to take	Morning	Noon	Evening	Bedtime
Tab Zytosic Thrice a day 1000mg		P/O	9am	3pm	9pm	till 30/8/17
Tab. Mysolane 200mg Thrice a day	chemo	P/O	9am	3pm	9pm	till 30/8/17
Tab Mysolane 20mg-10-10mg		P/O	9am	3pm	9pm	(31/8/17 to 20/9/17)
Tab Facid 20mg Once a day	stomach	P/O	7am			
Syr. Mucainyl 5ml		P/O	9am	3pm	9pm	till 20/9/17
Thrice a day						
MICONAZOLE cream						

## As-needed medications:

Name	What it does	How to take	How much	How often