

अखिल भारतीय आयुर्विज्ञान संस्थान
अंसारी नगर, नई दिल्ली-110029
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi-110029

बी० पी० एल० निधन/गरीब रोगी के लिए दवाइयों/शल्यक उपभोग्यों की मांग हेतु प्रपत्र ।
Proforma for requisition of Medicines/Surgical Consumables for BPL/Poor Indigent Patient.

30/9/24

दिनांक /Date: 30/9/24
नाम /Name: Runit Kumar आयु /Age: 22yr लिंग /Sex: M
यू.एच.आई.डी.सी. UHID No.: 10599815 एडमिशन /C.R. No.: दिनांक /Date of Admission:
विभाग एकक /Department/Unit: Hematology वार्ड /Ward: 402 बिस्तर सं /Bed No.:
निदान एवं उपचार योजना /Diagnosis & Treatment Plan: SAA

उपर्युक्त उल्लेखित निधन एवं गरीब रोगी हेतु निम्नलिखित दवाइयों/शल्यक उपभोग्यों की आवश्यकता है। यह संवर्द्धन की जाती है कि रोगी को इन दवाइयों/शल्यक उपभोग्यों को अस्पताल भंडार से एक विशेष केस के रूप में जारी किया जाए।

The following medicines/surgical consumables are required for the above mentioned poor & indigent patient. It is recommended that the patient may be issued these medicines/surgical consumables from hospital store as a special case.

क्र० सं० S.No.	दवाइयाँ/शल्यक वस्तुएँ Medicine/Surgical Items	खुराक एवं अवधि Dose & Duration	मात्रा Quantity
1.	Tab. Valganciclovir 900mg	900 mg BD 7day	14 tab
2.	Tab. Tenofovir Alafenamide 25mg	25mg x 7d OD	7 tab
3.	Tab. Ruxolitinib 5mg	5mg BOD x 7d	14
4.	Tab. Posaconazole 300mg	300mg x 7d OD	7 tab
5.	Syr Neoral 100mg/ml	1.2ml BD x 7day	(2)

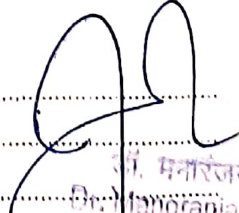
बी०पी०एल० कार्ड के विवरण (प्रतिलिपि संलग्न की जाए)/Details of BPL Card (Photocopy to be enclosed):
कार्ड सं०/Card No..... वैधता: दिनांक/Validity: से From तक/To.....

जारी करने वाला राज्य / Issued in the State of.....
जारी करने वाले प्राधिकारी के वैध हस्ताक्षर / Valid signature of issuing authority: उपस्थित/अनुपस्थित Present/Absent

किसी स्थिति में यदि निधन/गरीब रोगी के पास वैध बी०पी०एल० कार्ड नहीं है तो उपचार करने वाला संकाय विशेष केस के रूप में अस्पताल से अपेक्षित दवाइयों/शल्यक उपभोग्यों की संस्तुति करने के लिए औचित्य के साथ विशिष्ट टिप्पणियां अवश्य दे
In case the poor/indigent patient does not have a valid BPL card, the treating faculty member must give specific remarks with justification for recommending provision of required medicines/surgical consumables from the hospital as a special case.

संकाय सदस्य की ईलाज हेतु टिप्पणियां / Comments of treating Faculty Member:

Handwritten:
MSO to do needful


 (डॉ० /Dr.....) Dr. Manoranjan Mahapatra
 आचार्य /Professor
 मोहर सहित हस्ताक्षर/Signature with seal
 Dept. of Hematology
 अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
 All India Institute of Medical Sciences, New Delhi

कृपया अनुमोदन हेतु प्रभारी अधिकारी (बी०पी०एल०/निधन/कम स्वा० यो० रोगियों हेतु विशेष मांग) के पास प्रस्तुत है।
Submitted to Officer /C (Special Requisition for BPL/Poor Indigent Patients) for approval)

नोट-संस्तुति करने वाले चिकित्सक संबंधित रोगी उपचार क्षेत्र के नर्सिंग स्टाफ को निर्देश देंगे कि इस प्रकार से उपर्युक्त उल्लिखित ई.एच.एम. लाभार्थी रोगी को जारी कोई भी दवाई/शल्यक उपभोग्य संबंधित अस्पताल भण्डार को वापस किए जायें।
Note: Recommending physician will instruct the nursing staff of respective patient care area that any medicines/surgical consumables left unused after treatment / discharge of aforementioned EHS beneficiary are returned to respective hospital stores.

Handwritten:
AB-DWAM Remark -
Though the patient is Agyashman beneficiary but SAA Diag' not covered under AB-DWAM, forwarded to the MSW (Soc. Contn) 30/9/24

29.08.2022 TUE FSDAY 10401



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL बहिरंग रोगी विभाग / Out Patient Department



अस्पताल के अन्दर धूमपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

हरीरमास/सं
एकक/Un
विभाग/De

रुधिर विज्ञान
UMID: 105998128
Dept No: 20220240111630
Clinic No: 2022/HT/639
पुनील पुनील / Puniil Kumar

कमरा / Room
C-512
Queue / संख्या
F5
Unit-I, HT CLINIC.

OPR-6

पंजीकृत सं०/O.P.D. Regn. No. 639/2022

S/O NARAYAN RAJAK
22Y 2M 19D / M (पुरुष)
V BARAULI POST- BARAULI JAMHOR,
BIHAR Pin-0, INDIA
Follow Up Patient

TUE मंगल
Reporting: 11 02 12
13/08/2024

आयु
Age
पता/Address
Hand 0
1059 98128

निदान/Diagnosis

AA (PCA स्टे.)

दिनांक/Date	उपचार/Treatment
38	+ 94 J से
<div style="border: 1px solid black; border-radius: 50%; width: 50px; height: 50px; display: flex; align-items: center; justify-content: center; margin: 5px;"> <div style="border-bottom: 1px solid black; padding: 2px;">CBL</div> <div style="padding: 2px;">UATIM</div> </div> <div style="border: 1px solid black; padding: 5px; margin: 5px;">Ca 100</div>	<p>Rx</p> <p>1 Syr Neoral (1.2)</p> <p>2 T Volganyleon (90mg)</p> <p>3 T mylaro (40mg) x 1wc 30mg x 1wc</p> <p>4 T Cef amez (200) 1d</p> <p>5 T Piceconazole (300) 1d</p> <p>6 T Septor Ds 1 x 1wc M/W R</p> <p>7 T Tempridin (25) 1d</p>
JAKAVI (200)	



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प
अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)
Department of Hematology
A.I.I.M.S. New Delhi 110029
www.aiims.gov.in

रुधिर विज्ञान UHID: 105998128



Dept No: 20220240111630
Clinic No: 2022HT/639

पुनील पुनील / Punil Kumar

S/O NARAYAN RAJAK
22Y 2M 26D / M(पुरुष)
V. BARAULI POST- BARAULI JAMHOR,
BIHAR. Pin 0. INDIA

General Rs. 0

Follow Up Patient

कमरा / Room C-512

Queue / संख्या F5

Unit-I, HT CLINIC,

TUE मंगल



Reporting: 10 03 01
20/08/2024

CPC-190824003 105998128

RPB-190824309-Y 105998128

LC1908241147 105998128

LH1908240722 105998128

PunilKumar

14

SAA

D 1101 post MSD
All 307,

No acute or chronic
at present

R. G. ISSUED
MSW UNIT AMMS
DATE: 20/8/24

AMMS UNIT RECEIVED
NAME: [Signature]
DATE: 20/8/24
SIGN: [Signature]

- CR
- LF7
- RF7

x 7 days

- Cmr PCR
- Co level

- Syp Neoral 1.2 ml B
- ~~1. Wysolone 30 mg OD~~
- ~~1. Pam 40 mg OD~~
- 1. Valgan 900 mg OD
- 1. Septtran 25 OD (M/W/F)
- 1. Zylasa 300 mg OD
- ~~1. Me 12 OD~~
- 1. Tenforte Af 25 mg OD
- ~~1. Calum 500 mg OD~~

LH0209240280 105998128
LC0209240581 105998128
RPB-020924115-Y 105998128
CPC-020924001 105998128
Pl
PunilKumar

डॉ. मुकुल अग्रवाल
Dr. MUKUL AGGARWAL
सहा आचार्य/Associate Professor
रुधिर विज्ञान विभाग/Dept of Hematology
अ.भा.आ.सं., नई दिल्ली/A.I.I.M.S., New Delhi-29

524 26608 TUESDAY 10491



श्री श्री श्री अरुणाल / A.I.I.M.S. HOSPITAL



बहिरंग रोगी विभाग / Out Patient Department

अरुणाल के अन्दर धूम्रपान गना है / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

रोगी का नाम / Patient Name: **श्रीराम बिशान**

कक्षा / Room: **C-512**

OPR-6: **524 33031**

रिपोर्ट / Dept.: **उत्तर पुनर्विभाग / PUNIL PUNIL**

Queue / संख्या: **F10**
Unit-I, HT CLINIC.

फोन नं./O.P.D. Regn. No.: **FT 639/2022**

रोगी का पता / Address: **श्री श्री श्री अरुणाल / PUNIL PUNIL**

पता / Address: **11111111**

रोगी का नाम / Patient Name: **S/O NARAYAN RAJAK**
26Y DM 24D / M (दुख)
V- BARAULI POST- BARAULI JAMHOR,
BHAR. Pin: 0, INDIA

रिपोर्ट / Dept.: **General**
Reporting: 10:28:50
18/06/2024

फोन नं./O.P.D. Regn. No.: **105998128**

निदान / Diagnosis: **SAA s/r Rmt Day + 40**

दिनांक / Date: **24**

उपचार / Treatment: **Anti skin graft**

↓ UT w/o line 4mg 6x/wk

② T Pen 40 mg PRB F

③ T Amlexol 500 mg

④ PFT Pentid 400 mg

⑤ T Septrin 600 ml/wk

⑥ T Aravin 400 mg 2x/10days

⑦ T Folic 400 mg

⑧ 8mg cyclosporine o.6ml/day

⑨ 8mg l-w-2 15mg s/s

⑩ T Amlo 5mg b.s.

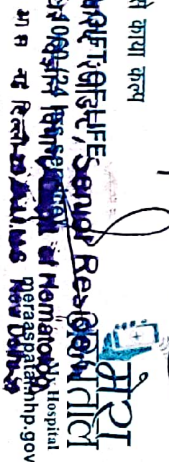
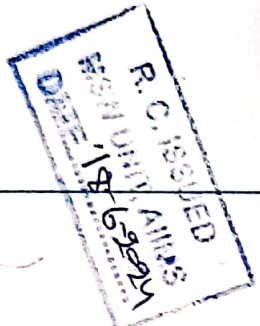
CLEAN AND GREEN AIMS / रक्त को यही वातावरण, खराबता से कपा करो

अंगदान जीवन को बहुमूल्य उपहार / ORGAN DONATION - **ARTI SHARMA, Senior Res.**

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpindia@gmail.com

RPP-240624253-Y 105998128
 LC2406241092 105998128
 LH2406240741 105998128
 PUNILPUNIL

CPC-240624007 105998128
 PUNILPUNIL



रुधिर विज्ञान

UHID:105998128



Dept No: 20220240111630

Clinic No: 2022/HT/639

पुनील पुनील / PUNIL PUNIL

S/O NARAYAN RAJAK
26Y 1M 0D / M (पुरुष)

V- BARAULI POST- BARAULI JAMHOR,
BIHAR. Pin: 0. INDIA

Follow Up Patient

General Rs. 0

कमरा / Room

C-512

Queue /
संख्या

F10

Unit-I, HT CLINIC,

TUE मंगल



Reporting: 10:15:28
25/06/2024

Day + 47

31

Adr

① T Wycolone 30mg qd x 1wk

② + Pan 40 mg

③ + Snelcal 500mg bid

④ + Pentid 400mg qd

⑤ + Septren DS m/wk

⑥ T Folic 400mg qd

⑦ T Auriv 400mg qd

⑧ Syp Cyclo Spinel (Neoral) (0.8ml)

⑨ T Amlo 5mg qd

- Primapone

- Cotton

W/A 1wk = CB c/LFT (RFT) Cyclosporine

वातेर रंजाडर, Senior Resident
रुधिर विज्ञान विभाग, Dept of Hematology
आर्य समाज हॉस्पिटल-29/A I.I.M.S. New Delhi



शरीरमाध्यम खतु केन्द्र

एकक/Unit
विभाग/Dept.

अ० भा० आ० स
बहिरंग रोगी वि

भयानक के अन्दर धूमपान मना है / SMOKING IS PROHIBITED IN HOSPITAL

रुधिर विज्ञान



UHID: 105998128

Dept No: 20220240111630
Clinic No: 2022/HT/639

पुनील पुनील / Puni Kumar

S/O NARAYAN RAJAK
22Y 1M 22D / M (पुरुष)
V- BARAULI POST- BARAULI JAMHOR,
BHAR. Pin-0 INDIA

कमरा / Room
C-512

Queue /
संख्या
F8
Unit-I, HT CLINIC,

TUE मंगल

Reporting: 09:51:02
16/07/2024

5-2V-34490

RPB-030824261-Y 105998128



Puni Kumar

I.S. HOSPITAL
Department

LH0308240780



105998128

Puni Kumar

LC0308241232



105998128

Puni Kumar

539/22

पता/Address

Homeat

CPC-160724004



105998128

CPC-030824001



105998128

Puni Kumar

निदान/Diagnosis

105998128

दिनांक/Date

15

उपचार/Treatment

P/B Hemat SR

SAA

+ D+67 of allergic MSD

No complaint

Acute skin GVHD

Adv:

CSA 1CG

10/7/24

HB 12.1

TC 13.5

PLT 1.36L

ANC: 8910

creat 1.4

AST 29

ALT 68

ALP: 366

U. AB

ANAS PRE-GLAUCOMA PHARMACY
6/ MEDICINE RECEIVED

NAME: 16/22X944

DATE: 16/07/2024

IGN:

(R) c/r emu DNT

(T) Vicgan (900) 1 BD

(T) pantop (40) 1 dose

(T) sheldul (100) 1 BD

(T) pentax (400) 1 BD

(T) septon 500 u M/WK

(T) cyclosporin 0.5 mg

(T) Anlo (5) 1 dose if

BP 140/90 mmHg



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प
अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



Infom
 CMV DNA PCR
 on BMT molecule
 99977 56814

Hickman line case
 f' up after 1 week -
 CBC, UPT, PFT, CCA
 level, CMV DNA PCR

508
 Div Hematol

Dr. Rajesh, Senior Resident
 Hematology/Dept of Hematology
 AllMS New Delhi

CMV PCR as per report by

19/07/2014
 SAA - MSD-ALLOGENEIC HSCT
 S. Hb 10.5 - NGF
 PNH - NGF
 Day + 70

11/7/14
 CMV PCR - 25/6 - 20100
 ↓
 11/7/14 - 2740

17-5-14

⇒ m Tbs Valgen 900mg BD
 Since 2/7/14
 Ach - 18hr - 1hr x 3 days
 2-3 hrs/day
 not blind stained
 - no Vomiting
 - no fever
 - no skin rash

o Tab. Cipro 750 1 tab BD
 o oral fluid as advised | 5 days
 o Inf. Methylprednisolone
 50mg IV BD

Last CBE - 12.1 / 10540 / 1.36 Lac
 13/7/14

o Ref to Emergency for
 Admission & Hemodialysis
 No Bed in G2 - cmc please
 do needful
 cmc Dr. Tiletina → Duty officer, No bed available.
 Rest CBT
 Day - ~~10540~~
 - Colonoscopy & biopsy

Dr. Rajesh, Senior Resident
 Hematology/Dept of Hematology
 AllMS New Delhi



ओ भा० आ० सं० अस्पताल/A.I.I.M.S. HOS
बहिरंग रोगी विभाग /Out Patient Depart

अस्पताल के अन्दर धूमपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREM.



रिपोर्ट विभाग



UHID: 105998128
ABHA ID
Dept No: 2022024011630
Clinic No: 2022/HT/639

कमरा / Room

C-512
Unit-I

HT CLINIC

मंगल

OPR:6

HT 639 / 2022

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No.

पुनील पुनील
PUNIL PUNIL

SIONARAYAN RAJAK

26V DM 100 1A पुनक
Add 1- BARAULI POST- BARAULI JAMHAR, BIHAR,
PIN-9 INDIA

04/06/2024

Queue: F12



आयु
Age

पता/Address

निदान/Diagnosis

STH s/p BMT Day +26

दिनांक/Date

23

उपचार/Treatment

Atr

+ ① T Pentid 400mg qd

+ ② T Septren DS m/w/F

③ T Amic 400mg bid

④ T Tucanazole 400mg qd

⑤ Syz Cyclo Spome 0.8ml
0.8ml

+ ⑥ T Pan 40 qd

⑦ T Amla 5mg sos

+ ⑧ T TAF 2Kns qd

RFA 1wk CBC/Urinalysis & A/CML
per



R. C. ISSUED
M. N. UNIL, AIIMS
DATE: 07.06.2024

वरिष्ठ रजिस्ट्रार, Senior Registrar,
विर विज्ञान विभाग, All India Institute of Medical Sciences,
आर.बी.ओ., एम्स, नई दिल्ली-20।A.I.I.M.S., New Delhi, India



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प
अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



7/6/24

7/6/24

SAA S/P Day 30.

To, MSO,

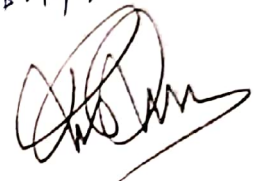
Kindly admit in
old private ward -
~~305/305~~

? Skin Grtn.

urgently, ? GVHD
post BMT.

To meet Dr. Rajat.

In Rm 305



वरिष्ठ रेजिडेंट / Senior Resident
द्वितीय विभाग / Dept of Hematology,
आर्य समाज हॉस्पिटल / MS New Delhi.

07/06/24

Skin OPD

- multiple erythematous papules over
forehead, ~~on~~ cheeks, arms
x 3-4 days

No GI complain ADN
small nodule (N)

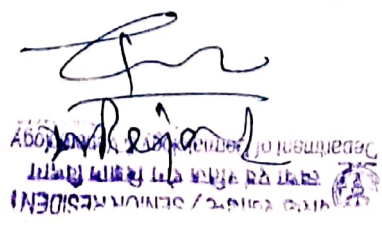
Imp ? Eosinophilic folliculitis

① Tab Indocap SR 1 tab BE

② Tab Amo 400mg BRF

Photoprotection

X R / A 7 days



TUESDAY



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department



PITAL PREMISES

शरीरमाद्यं चक्षुः धर्मसाधनम्

रुधिर विज्ञान

UHID: 105998128

कमरा / Room
C-512

Queue /
संख्या
F6

OPR-6

एकक / Unit

विभाग / Dept.

नाम / Na

पुनील पुनील / Punit Kumar

Unit-I, HT CLINIC,

>/O.P.D. Regn. No.

पता / Address

S/O NARAYAN RAJAK
22Y 1M 15D / M(पुरुष)
V- BARAULI POST- BARAULI JAMHOR,
BHAR. Pin 0. INDIA

TUE मंगल



Reporting: 10:27:18
09/07/2024

निदान / Diagnosis

SAA (for ser)

दिनांक / Date

उपचार / Treatment

32

+60 of ser

leucos CMV tap tap

201W

27MU

Am

called CMV tap

~~CBE~~
~~LAST 10/7/24~~

o T Valgen (9m)
" " " "

~~Co. leucos~~

~~CMV tap~~

o T - myelome 10ml of x 3am
" " " " 10ml of x 2am

o T PAN (4m 1m)

o T checked (1m 1m)

CPC-130724001 105998128

RPB-130724357-Y 105998128

LC1307241606 105998128

LH1307241123 105998128

Pun: Punit Kumar

Pun: Punit Kumar

। का यही संकल्प, स्वच्छता से काया कल्प
ORGAN DONATION - A GIFT OF LIFE
w.orbo.org Helpline - 1060 (24 hrs service)

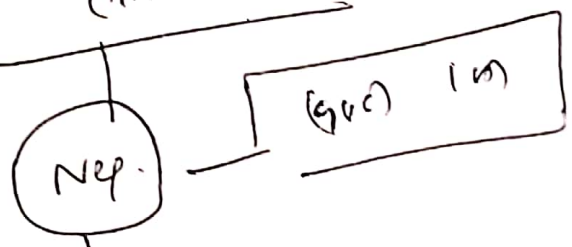


0. T Control (400) 19
0. T Septm 1 - 1 m hr

Syr Cyclosporin { 0.8
0.7

0. T Amiodipine (1)
Ger.

Collared CMV to 0. T Vid.W



[Handwritten signature]
sh/m
m

Dr. Manoranjan Mahapatra
Professor & Head
Department of Hematology
A.I.I.M.S., New Delhi

[Handwritten signature]
Dinesh J
Prasanna
Hem. Ins
①

Dr. Manoranjan Mahapatra
Professor & Head
Department of Hematology
A.I.I.M.S., New Delhi



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department



अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

रुधिर विज्ञान
एकक / Unit
विभाग / Dept

UHID: 105998128
Dept No: 20220240111630
Clinic No: 2022/HT/639
पुनील पुनील / Punil Kumar

कमरा / Room C-512
Quque / संख्या F9
Unit-I, HT CLINIC,

OPR-6

पंजीकृत सं० / O.P.D. Regn. No. HT 639 / 2022

S/O NARAYAN RAJAK
22Y 2M 12D / M (पुरुष)
V- BARAULI POST- BARAULI JAMHOR,
BHAR Pin 0 INDIA

TUE मंगल

Reporting: 10 08 31
08/08/2024

आयु / Age

पता / Address

Hemato
105998128

निदान / Diagnosis

SAA

दिनांक / Date

20

उपचार / Treatment

Deeg + 87

- o No discharge / Rash / icterus
- o on Tapering dose of Steroid
- o Admitted ↓ Cr - 20/7/2024 - 1/8/24
1/1/0 Suspected Gut Aent
G.V.D.
- o Bx - (N)
- o Repeat Bx - needed

REC'D ISSUED
DATE 15-8-24
PUNIL KUMAR

Adv

- o Syr Neoral 1.3ml BD
- o Tab valganciclovir 900mg OD
- o Tab Pentel 400mg OD
- o Tab Wysolex 50mg OD x 3deg
↓
25mg OD x 5deg.

LC1208241594 105998128
LH1208241073 105998128
PunilKumar

RPB-120824370-Y 105998128
CPC-120824004 105998128
PunilKumar



Cap Ome3 20mg OD

CLEAN AND GREEN AIIMS / मेरा अस्पताल, स्वच्छता से काया कल्प
अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



- ① Tab. Posaconazole 300mg OD
- ② Tab. Septra OD 1td M/W/F
- ③ Tab. Tenofamv AF 25mg OD
- ④ Tab. Sildenafil 50mg OD
- ⑤ R/a 1week e CBE/LFT/RFT
CIA
CMV PCR

MEDICINE RECEIVED
 6/8/24
 (W/K)

LC1709240400 105998128
 LH17092400214 105998128
 RPB-170924128-Y 105998128
 Punit Kumar

वरिष्ठ रजिडेंट, Senior Resident
 धीर विज्ञान विभाग/Deptt of Hematology,
 आर. ए. स्ट. डिपार्ट-29/AIIMS, New Delhi



अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग /Out Patient Department

अस्पताल के अन्दर धूमपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES



शरीरपात्रं स्वतु धर्मसाधनम्

19-3-24 OPR-6

HT 689/22

एक/Unit

विभाग/Dept. Hematology OPD

न०रो०वि० पंजीकृत सं०/O.P.D. Regn. No.

नाम/Name	पिता/पुत्र/पत्नी/पुत्री F/S/W/D of	लिंग Sex	आयु Age	पता/Address
Punil	S/O Narayan Rajak		25	UHFID 105998128
With appointment late P.		Time	12.27	

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
	<p>S/B Hemct SR</p> <p>SAA chronic HBV infection No fresh complaint</p> <p>(R) T. Danazol (200) 1 tds</p> <p>- ct - Gastroenterology of ip for continuation of T. TAF (25, 15)</p> <p>- BT support for HDcc to keep HB = P</p> <p>- f' up - HDcc for status of fund</p>
No report	
To, BBO Kindly accept Whole blood donation, for this / planned for BMT.	

Adv



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प
अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



- 1/4 of the (2) weeks -
report (R)

रुधिर विज्ञान
UHID: 105998128
Dept No: 20220240111630
Clinic No: 2022/HT/639

कमरा / Room C-512
Queue / संख्या F5
Unit-I, HT CLINIC,

वरिष्ठ रेजिडेंट / Senior Resident
रुधिर विज्ञान विभाग / Deptt of Hematology,
आर. आर. सी., नई दिल्ली-29/A IIMS New Delhi

पुनील पुनील / PUNIL PUNIL

S/O NARAYAN RAJAK
25Y 10M 15D / M(पुरुष)
V. BARAULI POST- BARAULI JAMHCR,
BHAR Pin 0 INDIA

TUE मंगल



Reporting: 08 50 41
09/04/2024

(3)

To MS office
Kindly Appt
in OPD for
BMT to fly tomorrow

RECEIVED
DATE 9-4-24

वरिष्ठ रेजिडेंट / Senior Resident
रुधिर विज्ञान विभाग / Deptt of Hematology,
आर. आर. सी., नई दिल्ली-29/A IIMS New Delhi

Request for
early date
(R)

डा. प्रदीप कुमार
Dr. Pradeep Kumar
सह आचार्य / Associate Professor
रुधिर विज्ञान विभाग / Deptt of Hematology
आर. आर. सी., नई दिल्ली / AIMS New Delhi 11002

आर. आर. सी., नई दिल्ली-29/A IIMS New Delhi
रुधिर विज्ञान विभाग / Deptt of Hematology
आर. आर. सी., नई दिल्ली / AIMS New Delhi 11002



DEPARTMENT OF HEMATOLOGY
हिमेटोलोजी विभाग
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
अखिल भारतीय आयुर्विज्ञान संस्थान
ANSARI NAGAR, NEW DELHI - 110029
अंसारी नगर, नई दिल्ली-११००२९
TELEPHONE : 011-26594670

Date.....
दिनांक 28/2/23

TO WHOM IT MAY CONCERN

This is to certify that

Patient Name PUNIL KUMAR

Age : 24y Gender : MALE

S/o/D/o/W/o NARAYAN RAJAK

UHID No. 105998128

is suffering from Diagnosis SEVERE APLASTIC ANEMIA

and is under treatment from Department of Hematology, AIIMS.

It is proposed to treat the patient with Chemotherapy/Immunomodulation/Bone marrow transplantation/Other therapy. This treatment is potentially life saving for a serious hematological illness. The family is poor and cannot afford the treatment.

The approximate cost of the total treatment amount to Rs. 15 Lakh (Fifteen Lakh). An approximate breakdown is given under the subheadings listed below. The cost under one subheading may exceed the projected estimate and the excess would then be used from the other subheading.

1. Chemotherapy	₹ 300000/-
2. Antithymocyte globulin	₹ 500000/-
3. Antibiotics	₹ 200000/-
4. Blood component kits and tests	₹ 200000/-
5. Growth factors	-
6. Room charges for Isolation	₹ 100000/-
7. Post Transplant Immunosuppression	₹ 150000/-
8. Miscellaneous charges	₹ 50000/-
9. Total	₹ 1500000/-

This certificate is being issued to avail financial assistance only. Financial assistance may be given on humanitarian grounds. The cheque is to be issued in favour of Patient Treatment Account, AIIMS, New Delhi

Date : _____

Deepika

Dr. Deepika, Senior Resident
विशेष निदेश, Senior Resident
विज्ञान विभाग/Dept of Hematology
अ. वि. 25/A.I.I.M.S. New Delhi-2

Dr. Mukul Aggarwal
विशेष निदेश/Assistant Professor
विज्ञान विभाग/Dept. of Hematology
अ. वि. 25/A.I.I.M.S., New Delhi
Signature



DEPARTMENT OF HEMATOLOGY

हिमेटोलोजी विभाग

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

अखिल भारतीय आयुर्विज्ञान संस्थान

ANSARI NAGAR, NEW DELHI - 110029

अंसारी नगर, नई दिल्ली-११००२९

TELEPHONE : 011-26594670

Date.....
दिनांक 28/2/23

TO WHOM IT MAY CONCERN

is is to certify that

Patient Name

PUNIL KUMAR

Age : 24 y

Gender :

MALE

S/o/D/o/W/o

NARAYAN RAJAK

UHID No.

105998128

is suffering from Diagnosis

SEVERE APLASTIC ANEMIA

and is under treatment from Department of Hematology, AIIMS.

It is proposed to treat the patient with Chemotherapy/Immunomodulation/Bone marrow transplantation/Other therapy. This treatment is potentially life saving for a serious hematological illness. The family is poor and cannot afford the treatment.

The approximate cost of the total treatment amount to Rs. 15 Lakh (Fifteen Lakh). An approximate breakdown is given under the subheadings listed below. The cost under one subheading may exceed the projected estimate and the excess would then be used from the other subheading.

1. Chemotherapy
2. Antithymocyte globulin
3. Antibiotics
4. Blood component kits and tests

Rs 300000/-
Rs 500000/-
Rs 200000/-
Rs 200000/-
-
Rs 1,00,000/-
Rs 1,50,000/-

GST INVOICE

AMRIT PHARMACY- SAFDARJUNG ENCLAVE
 (A DIVISION OF HLL LIFECARE LTD)
 PROPERTY NO-B-6/9, 1ST FLOOR,,COMMERCIAL COMPLEX,
 SAFDARJUNG ENCLAVENEW DELHI-110017
 Ph : 9667080402,9810846760
 E-mail : amrith1141@gmail.com

DL No.: : WLF20B2023DL000547 ,WLF21B2023DL000544
 GSTIN : 07AAACH5598K1Z3 State : DELHI(07)



Cust. Name : PUNIL 22Y/MAPT
 UHID NO- 105998128,30/24-25
 Mobile:

Inv No : 2425583005161
 Date : 17-09-2024 (04:05 PM)
 Pay Type : Credit Invoice

PO No :
 DL.NO.:
 GSTIN:07DELS71442A1DD

S.Man : LP2
 User : LP2

State : DELHI(07)

S.NO	PACK QTY	PACKING	PARTICULARS	HSN CODE	BATCH / LOT EXPIRY	MRP	DIS %	DIS AMT	GST %	Net Amount
1	1	150ML	BENADRYL COUGH FORMULA SYRUP 150 ML	30045039	KA24003@ 12-25	155.00	26.00	40.30	12.00	114.69
2	1	1X10	CANDIPOZ GR 300 MG TAB 10S	30049099	CNB04E24@ 04-26	8250.00	26.00	2145.00	12.00	6104.99
3	1	1X30	TENVIR AF 25 MG TAB 30S	30049099	AFT240304@ 02-26	1464.62	26.00	380.80	12.00	1083.80
4	4	1X4	VALGAN TAB	30042019	VLA240304! 02-26	1501.03	26.00	1561.07	5.00	4443.02

(Handwritten mark)

Amis

TAX%	TAXABLE AMT	SGST%	SGST AMT	CGST%	CGST AMT
0%	0.00	0%	0.00	0%	0.00
5%	4231.46	2.5%	105.78	2.5%	105.78
12.0%	6520.98	6.0%	391.25	6.0%	391.25
18.0%	0.00	9.0%	0.00	9.0%	0.00
28.0%	0.00	14.0%	0.00	14.0%	0.00

TOTAL MRP	:	15873.71
DISCOUNT AMT.	:	4127.17
TOTAL TAX AMT	:	994.06
TAXABLE AMT	:	10752.44
ROUND OFF	:	0.50
TCS AMT.	:	
INV TOTAL	:	11747.00

NO OF ITEMS : 4

Amt In Words : Eleven Thousand Seven Hundred Forty Seven Rupees only

MULTI PAY

Terms & Conditions:

- Subject to Delhi Jurisdiction only.
- Goods can be returned back within 15 days from the date of billing.
- Temperature sensitive products used or tampered products can't be returned back.

Receiver's Signature :

For AMRIT PHARMACY- SAFDARJUNG ENCLAVE

* E & O E

(Common Seal)