

आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
R. Ambedkar Institute of Cancer Hospital
nt
PREMISES

OPR-6

DR. B.R.A. IRCH, AIIMS, NEW DELHI

UHID: 101232297

IRCH No. 179966

नाम

Name KAVYA MALHOTRA

S/O- PANKAJ MALHOTRA

Phone No. 9811224344

Address 3A/3, NIT, FBD, HARYANA, INDIA



General

1. No.

ज



B- ALL / 2nd relapse (medullary + CNS)

उपचार / Treatment

currently in CR [BMA PS → morphological remission
BMA MKD → negative

CSF - acellular

<https://www.childhelpinghand.org/>

Plan : HSC

- Allo HSC → HLA matching

- Haplo match E brother
L mother

- Plan: to complete pretransplant workup

• arrange funds

• to start pretransplant @ 60% doses

• Hup on 24/7/24 E CRP 11/10
CMV 184

जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
AIIMS, 26588360, 26593444, www.orbo.org Helpline-1060 (24 hrs. service)
के लिए धर्मशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

60% done

- Tab. GMF 50 mg

Inj. Cyclophosphamide

D₁ - 450 mg

- 17/9

D₂ - 450 mg

- 20/9

- Inj. Ara C

60 mg

22/9

21/9

22/9

23/9

22/9

22/9

22/9

30/9

- 1st Mho 12mg 11 Mar

on 28/9

Dosed on 22/9/24 at 830a

- Sup on 22/9/24

2 LK/RH/LK

<https://www.childhelpinghand.org>

Senior Resident
Perfor
Signature

अंगदान-जीवन का बहुमूल्य उपहार \ ORGAN DONATION - A GIFT OF LIFE

O.R.B.O.AIMS, 25588360, 25593444, www.orgo.org Helpline-1060 (24 hrs. service)

आपकी मदद करने के लिए हमारे पास की सुविधा उपलब्ध है \ Organ donation facility is available for outstation patients



डा. बी. आर
Dr. B.R. Am
अ.भा.उ
बहि
अस्पताल के अ

DR. B.R. AMBEDKAR, NEW DELHI
Clinic: Paediatric Medical Oncology Clinic
Dept: MEDICAL ONCOLOGY
General



स्पताल
spital

OPR-6

ES

एकक/Unit D-5B
विभाग/Dept. MO

नाम/Name

KAVYA

Name: KAVYA
S/O: PANKAJ MALHOTRA
Phone No: 9811224344
Address: 1A, NIT ERI, HARYANA, INDIA
Reg. Date: 01/09/18
Clinic No: 3886/18/5
Sex: Age: M: 11y
Room: Board: Patient (Shift: Afternoon)

तिथि/Date of Birth

M 11y

निदान/Diagnosis

B-ALL - BM relapse - for 1st dose HD-MTX 2500 mg/m^2 - 7/12/21 + IT MTX

दिनांक/Date

08/12/21

Advice

उपचार/Treatment

- 1) Tab. Lenvatinib 15mg po - 8/12/21 - 7:15 PM
2) Tab. Nodexis (Po) 500mg TDS x 3 days - 9/12/21 - 1:15 AM
3) Tab. Emeset 8mg BD x 3 days - 7:15 AM
4) Tab. Pantoprazole 40mg OD x 3 days - 08:05 AM
5) Plenty of oral fluids ज्यादा पानी पिये
6) Continue GMP / Acivir / Septren
7) Symp. Mucaine gel 2 tsp 40s बारूत पड़ने पर
8) Symp. Cremaffin 2 tsp 4/5 (if constipation) कंठ
9) F/O on 20/12/21 C, CBC / LFT / RFT

V. Nandini
S.M.O.

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)

बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है/Dharamshala facility is available for outstation patients



डा. बी. आर
Dr. B.R. Ar
अ.भा.
वा
अस्पताल के 3

एक/Unit _____
विभाग/Dept. _____
नाम/Name _____

Clinic: Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General
Name: KAVYA
D/O: PANKAJ MALHOTRA
Phone No. 9811224344
Address: 3A/3, NIT, FBD, HARYANA, INDIA
Room: Board Room (Shift: Afternoon)
Sex/Age: F/5Y
UOID: 101232297
SES
OPR-6

DR. B.R.A. IRCH, AIIMS, NEW DELHI
UOID: 101232297
IRCH No. 179966

No. _____
स तिथि/Date of Birth _____

25 फरवरी (12) क
10am

निदान/Diagnosis

दिनांक/Date

उपचार/Treatment

21/9/15

1

Inj Magnex 1.5 gm IV bid x 5 days

<https://www.childhelpinghand.org/>

2

Inj Amikacin. F. Levoflox 250mg 1/2 tab qd

3

BMA → flow cytometry — Done on 01/9/15

cyto.

HL panel

take sample but send of flow cytometry

4

Blood transfusion 10

F/U on 3/9/15

He

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)
सर्विधा की सविधा उपलब्ध है/Dharamshala facility is available for outstation patients



डॉ. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Sansthan Roteri Kanser Aspratal

अस्पताल के अन्तर्गत

DR. B.R.A. IRCHAHMS, NEW DELHI
IRCH No. 179966
Clinic: Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General

Reg. Date-01/09/2015

Clinic No. 3906/2015

OPR-6



SES

UHID-101232297

एकक / Unit

विभाग / Dept.

नाम / Name

KANYA

नाम

Name KANYA

S/O- PANKAJ MALHOTRA

Phone No. 9811224344

Address 3A/3, NIT, FBD, HARYANA, INDIA

Sex/Age M/11Y

Room Board Room (Shift Afternoon)

तिथि / Date of Birth

निदान / Diagnosis

ALL - Post 1st Relapse

दिनांक / Date

24/7/24

dated on
25/7/24
@ 8.30 am

उपचार / Treatment

9/2 X 11mo

CSF - Cell Count

Spinal Protein

<https://www.childhelpinghand.org/>

Cytospin

[form not
Available]
Pls wait

+ Flow

+
IT - MTX 12mg

(24/7/24 - 15)

Fr on 31/7/24 with
CBC

[Signature]

31/7/24

1. Blood Donation - 6D
2. BMA -
3. Testes

Enact

BMA-AD
↓
Allo BM7

CSF
+
TIT
CBC KFT LFT
- Weekly
x4 doses
on 19/8

27/08 B-ALL = CNS relapse on Induction ref 3/7

T. emet 8 mg B.D

ORS ad lib

Sporolac Sachet TDS

T. ciplox T2 1 tab B.D x 3 days

F/u in MOOPD with fresh CBC/LFT/RFT
on 28/08.

Palmer
Dr. SHABHATI NAIK
Resident
Medical Oncology
AIIMS, New Delhi



DR. BRA INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-110029

Ref. No.F.1/IRCH/MR/2024-2025

Dated

ESTIMATE CERTIFICATE

TO WHOM IT MAY CONCERN

This is to certify that Kavya Malhotra, Age 14 years, Male, S/o Mr. Pankaj Malhotra, (UHID-101232297 & IRCH No. 179966/15) is a known case of **Relapsed B-Cell Acute Lymphoblastic Leukemia** and is under treatment with Medical Oncology at DR. BRA IRCH, AIIMS since 01.09.2015.

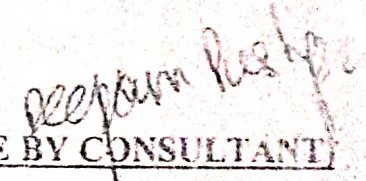
The approximate cost for his treatment would be Rs. 10,00,000/- (Rupees Ten Lakh Only).

The item-wise breakup of the expenditure is as under:

S.No.	Name of Medicines/Procedure Required for treatment/operation	Treatment	Approx. Cost	Name of Procedure
1.	Harvest	01 Month	Rs. 1,00,000/-	
2.	Conditioning	01 Month	Rs. 3,00,000/-	
3.	ALLO SCT	01 Month	Rs. 3,00,000/-	
4.	Post SCT Care	01 Year	Rs. 3,00,000/-	
	Total approximate cost of the treatment		Rs. 10,00,000/-	

The cheque/draft may be sent in favour of "DR. BRA IRCH, AIIMS, Ansari Nagar, New Delhi-29 (IRCH Patient Treatment Account)"

(NB: This estimate certificate is valid for six months from the date of issue)


(SIGNATURE BY CONSULTANT)


(COUNTER SIGNED BY HOD)

(COUNTER SIGNED BY HOD)



IMPEX HEALTHCARE PVT LTD
IMPEX HEALTHCARE PVT. LTD. B-6/9, BASEMENT
COMMERCIAL COMPLEX SAFDARJUNG ENCLAVE,
NEW DELHI, DELHI
Email: contact@impexgoc.com
Website: https://ihpl.net.in
Ph No.: 9910486267

GSTIN: 07AAFCI8134F1ZM
D.L. No.: 20: RLF20DL2023000351, 21:
RLF21DL2023000348, 20B:
WLF20B2023DL000256, 21B:
WLF21B2023DL000253

FSSAI:

DOCTOR DETAILS
Dr.DR.SAMEER BAKSHI
AIIMS HOSPITAL

SALES REFERENCE

SHIPPING ADDRESS
KAVYA MALHOTRA/CHILS
HELPING HAND
IRCH NO-179966,AIIMS
HOSPITAL, , NEW DELHI -
110029
PH.NO.: +919811224344.,
Alternate ph: --

Invoice Date: **27/01/25**
Invoice No.:
SJ/R/25/010767
Payment Mode: **UPI**
Payment Due Date:
26/02/25
Prescription Date: **27/01/25**
Patient Code:
Alternate ph:

Sr No	Product Name	Manufacturer Name	HSN Code	Qty	Free Qty	UOM	Rate	MRP	Batch No	Batch Expiry	Mfg. Date	Disc %	Taxable Value	SGST %	SGST Amt	CGST %	CGST Amt	Total Tax	Total Amount
1	P1YA WHITE BLOOD CELL SET 500 ML 9400437	FRESENIUS	90189032	1	0	UNIT	Rs.9,821.43	Rs.11,110.00	NMT081	08 Nov 2026	N/A	0.0%	Rs.9,821.43	6.0%	Rs.589.29	6.0%	Rs.589.29	Rs.1,178.57	Rs.11,000.00
2	ACD SOLUTION 500 ML	FRESENIUS	90189032	2	0	UNIT	Rs.267.86	Rs.553.00	82TD183601	31 Jul 2026	N/A	0.0%	Rs.535.72	6.0%	Rs.32.14	6.0%	Rs.32.14	Rs.64.29	Rs.600.01
3	CRYOCYTE BAG 500 ML	MILTENYI BIOTEC	90189032	6	0	UNIT	Rs.4,008.93	Rs.4,500.00	CSFB220914	30 Sep 2025	N/A	0.0%	Rs.24,053.58	6.0%	Rs.1,443.21	6.0%	Rs.1,443.21	Rs.2,886.43	Rs.26,940.01
Totals				9									Rs.34,410.73					Rs.4,129.29	Rs.38,540.02

Terms & Conditions
Goods once sold will not be taken back or exchanged.
Bills not paid due date will attract 24% interest.
All disputes subject to Jurisdiction only.
Prescribed Sales Tax declaration will be given.

Printed By
Baby Vishwas on Jan 27,
2025 at 06:17 PM

Total Taxable Value:
Total Tax:
TCS(0.1%):
Round Off Amount:
Grand Total

Rs.34,410.73
Rs.4,129.29
N.A.
-0.02
Rs.38,540

Certified that the particulars given above are true and correct and the amount indicated represents the price actually charged.

Checked By _____

For IMPEX HEALTHCARE PVT LTD

E.&O.E. Pharmacist

BALAJI MEDICOS

ORIGINAL

SHOP NO.-1,G.F.P.NO.130M/1 SUDERSHAN
CINEMA ROAD,GAUTAM NAGAR,NEW DELHI-49
Phone : 8252095380
D.L.No. : DL-PLN-144106/07
GSTIN : 07AAXFB7662A1Z8

Invoice No. : A015922
Invoice Date : 27-01-2025
Patient Name : CHAILD HELPING HAND
Patient Address : KAVYA MALHOTRA
Dr. Name : AIIMS
PRINTED BY. : CASH

QUANTITY	ITEM DESCRIPTION	Batch	EXP	HSN	M.R.P.	NET RATE	DIS%	GST	NET AMOUNT
6	BUCELON 60M 1*1	BUI2404A	4/26	3004	7800.00	3000.00	0.00	5.00	18000.00
1	ZYBEND TAB 1*1TA	GS10383	6/25	30049021	9.52	7.89	15.00	12.00	7.89
2:0	ZYLORIC 100 1*10	EE2409	2/27	590699	21.17	16.94	20.00	12.00	33.87
1	MOZIFOR 24 1*1			4901890142900.00	12810.0	70.00	12.00	12810.00	
2:0	PHENERGAN I 1*2 M	AHI0260	11/26	3016000	14.74	12.54	15.00	12.00	25.07
10	SANDIMMUN 5 VIAL	P1404	10/27	30849099	350.94	350.00	0.00	5.00	3500.00
1:0	CANDIPOZ GR 1*10	CNB07124	8/26	90211000	8250.00	4950.00	40.00	12.00	4950.00
1:0	OLEANZ 5MG 1*10	SIF1171A	4/27	30049099	59.00	50.15	15.00	12.00	50.15
1	DIGITAL THE 1*1	*****		90251110	187.00	149.60	20.00	18.00	149.60
1	SIZTH BATH 1*1	...		56012190	959.00	764.80	20.00	12.00	764.80
1	URINE POT T PCS	**		90189099	210.00	105.00	50.00	12.00	105.00
3:0	MUCINAC 600 1*10T	4SB0815	7/26	30049099	355.10	301.75	15.00	12.00	905.25
4	EMHDARA 50M 1*1	24HFD01	7/26	6115	12500.00	2600.00	0.00	5.00	10400.00

Continue Page No.... 2

GST INVOICE

ORIGINAL

BALAJI MEDICOS

SHOP NO.-1,G.F.P.NO.130M/1 SUDERSHAN
CINEMA ROAD,GAUTAM NAGAR,NEW DELHI-49
Phone : 8252095380
D.L.No. : DL-PLN-144106/07
GSTIN : 07AAXFB7662A1Z8

Invoice No. : A015922
Invoice Date : 27-01-2025
Patient Name : CHAILD HELPING HAND
Patient Address : KAVYA MALHOTRA
Dr. Name : AIIMS
PRINTED BY. : CASH

QUANTITY	ITEM DESCRIPTION	Batch	EXP	HSN	M.R.P.	NET RATE	DIS%	GST	NET AMOUNT
4	TEPAPRO 10 1*1	CSD09016	8/25	9025131089000.00	21900.0	0.00	12.00	87600.00	
1	TRIPLE LUME 1*1	G2304109	3/28	30049099	4210.00	0.00	60.00	12.00	1684.00
1	HEXIDINE MD 1*160	L24374	10/27	30049087	145.42	116.00	20.00	12.00	116.00
1:0	FOLIST TAB 1*45	*/*/*/	12/25	30042093	70.00	56.00	20.00	12.00	56.00
1	STEM INHILA 1*1	*/*/**		590699	399.00	159.60	60.00	12.00	159.60
1	MUCAINE GEL 1*200	2420209E	7/27	30049039	243.07	206.55	15.00	12.00	206.55

ALL ITEM AFTER 15 DAYS NOT RETURN.

ITEMS	19	SUB TOTAL	DISCOUNT	TOTAL	SST	BALAJI	CGST	TOTAL AMOUNT:	141524.00
GST 5.00%		31900.00	0.00	30380.96	759.52	759.52		GST PAYABLE:	
GST 12.00%		145988.12	36513.94	97744.80	5864.69	5864.69		GST PAYABLE:	
GST 18.00%		187.00	37.40	126.78	11.41	11.41		CR/DR NOTE :	0.00
GST 28.00%		0.00	0.00	0.00	0.00	0.00		PARTY TOTAL :	141524.00

Rs. One Lakh Forty One Thousand Five Hundred Twenty Four Only

Tpt.Mode: Cycle/

All disputes subject to Jurisdiction only for BALAJI MEDICOS

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