

**CAUSELESS HAPPINESS ORGANISATION-REGISTRATION FORM**

**SPONERSHIP FORM FOR FINANCIAL ASSISTANCE FOR MEDICAL TREATMENT**

**PATIENT REG NO : CHO/585/**

**DATE : 30/10/24**

**BENEFICIARY DEMOGRAPHY**

PATIENT'S NAME :RISHA KUMARI

AGE: 7 YEAR

RELIGION : HINDU

GENDER :FEMALE



**PATIENT'S FAMILY DETAIL ( IN MIN 30 WORDS)**

Risha is suffering with High risk Neuroblastoma the most common solid tumor occurring outside of the central nervous system. Her treatment is going on AIIMS Hospital. Risha's father is unemployed after road accident and he can't afford single meal for his family. They are in very miserable situation currently, kindly help child for her chemotherapy and surgery treatment.

**GUARDIAN 'S DETAIL :**

FATHER'S NAME: Mr. RAJU SHAH

MOTHER'S NAME:MS.NITU DEVI

OCCUPATION:NA

OCCUPATION:HOME MAKER

SIBLING : 1

FAMILY INCOME: NA

**TREATMENT DETAILS:**

PATIENT SUFFERING FROM : High risk Neuroblastoma

TREATMENT PRESCRIBED : CHEMOTHERAPY AND SURGERY

APPROXIMATE EXPENSE FOR WHICH FINANCIAL ASSISTANCE REQUIRED: 3,00,000/-

TREATMENT IS DONE AT : Aiiims Hospital, New Delhi

**DECLARATION:**

I HEREBY DECLARE THAT THE INFORMATION GIVEN ABOVE IS TRUE AND TO THE BEST OF MY KNOWLEDGE.I AM NOT IN THE FINANCIAL POSTION TO ARRANGE FUNDS REQUIRED FOR THE TREATMENT OF MY CHILD.I AM FULLY AWARE OF THE FACT THE ORGANISATION WILL BE RAISING FUND FOR THE TREATMENT OF MY CHILD AND I HAVE NO OBJECTION WITH IT.

**(SIGN OF THE FATHER/GUARDIAN)**



सेवा में

श्री आब तूपरी महोदय  
ज्वाबलेरन टो ज्वाबलेरन उनागनाइनिशज

महोदय

सीवीनथ मि वीयेव इस प्रकार है मेरी नाम नील देवी  
है और मैं अभी कोई काम नहीं करती हूँ।  
मेरी बेटी का नाम दिशाकुमारी है। उम्र 7 साल है।  
जिसकी गले का कैंसर है। मेरी बेटी का  
इलाज एम्स एर-पॉल में चल रहा है।  
डाक्टर ने इलाज के लिए 3,00,000 तक का व्यय बताया  
जिसके लिए मैं असमर्थ हूँ। मेरी बेटी कि लकी भाग  
बहुत ~~बुरा~~ से श्री ~~है~~ शंकराव

इसलिए मेरी मि वीयेव है कि मेरी बेटी के इलाज  
के लिए आर्थिक सहायता प्रदान करें।  
मैं इस सहायता का सर्वेव आभारी रहूँगी।

धन्यवाद

नील देवी

जिला-तूपरा विहार

विहार



अ. भा. आ. सं. अस्पताल / A.I.I.M.S. HOSPITAL  
 बहिरंग रोगी विभाग / Out Patient Department



बाल चिकित्सा विभाग.  
 UHID: 106792980

कमरा / Room PREMISES  
 C-211

Queue / संख्या N13  
 Unit-III, Paediatric,

OPR-6



Dept No: 20240030029157

रिशा कुमारी / RISHA KUMARI

Regn. No.

एकक / Unit  
 विभाग / Dept

नाम / Na

D/O RAJU SAH  
 8Y 0M 15D / F (महिला)  
 SARARI, BIHAR, Pin 0 INDIA

SAT बुध, रानि,

पता / Address

Ph: 7780018955 General Rs 0  
 New Patient



Reporting: 09:04:58  
 16/10/2024

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

20

Diagnosis: metastatic NB (MR)

20-11-24  
 Med oncology  
 [ARCH]

[Primary ~ Cervical Ch-myc  
 mets ~ duab and skeletal]

post chemo ~ PA @ primary  
 CR @ mets

- planned for ASCT  
 on OMT @ elulay  
 as bridging bill  
 funds are wanted

sent the OMT  
 RPC for  
 evaluation of  
 (L) ptosis

~ clo - drooping of (L) eyelid  
 progressively @ sing over  
 last 3m



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प

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

OPD, AIIMS, 26588360, 26583444, www.aiims.org, Helpline - 1060 (24 hrs service)



on exam

① cervical dAP ⊕ - level L III 1x1 cm  
post triangle - multiple dissects  
0.5 cm nodes

② eye - enophthalmos ⊕  
miosis ⊕

→ pupils ③ ④  
3mm an  
constr  

---

reactive to  
light

no other cranial n. / motor deficits

Advise and plan:

① [asper literature review] Horner syndrome in NB may present at diagnosis during the course of therapy and does not disappear during or even after treatment completion

② follow @ RPC for correction of prosis affecting vision

③ follow @ JRCH for the primary ds. therap.

visit

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली  
 ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI  
 NATIONAL CANCER INSTITUTE

Patient Name :	106792980 <b>Miss. RISHA KUMARI</b>	Sex :	Female
Age :	8 years 25 days	Sample Received Date :	26/10/2024 05:49 PM
Unit Name :	Unit-III	Department :	Paediatrics
Lab Name :	NCI CORE LAB	Unit Incharge :	
Reg Date :	14/06/2023 08:38 AM	Lab Sub Centre :	
Report Generated Date:	26/10/2024 08:27 pm	Sample Collection Date:	26/10/2024 08:28 AM
Recommended By:	Dr. S. KABRA	Dept / IRCH No:	20240030029157
		Lab Reference No:	2518

Sample Details : E261024042 (Blood)

Report

Test Name(Methodology)	Result	UOM	Comment	Biological Reference
<b><u>CBC</u></b>				
Hemoglobin (Cyanide Free Colorimetric)	<b>11.900</b>	g/dL		• 12 - 15 g/dL
Hematocrit (Calculated)	37.904	%		36.000 - 46.000
RBC Count (Isovolumetric Sphering)	4.600	10 <sup>6</sup> /μL		3.800 - 4.800
WBC Count (Flowcytometric)	7.050	10 <sup>3</sup> /μL		4.000 - 10.000
Platelet Count (Optical Analysis)	274	10 <sup>3</sup> /uL		150.000 - 400.000
MCV (Optical Analysis)	<b>82.400</b>	fL		• 83 - 101 fL
MCH ( Calculated)	<b>25.8696</b>	pg		• 27 - 32 pg
MCHC ( Calculated)	<b>31.3951</b>	g/dL		• 31.5 - 34.5 g/dL
RDW ( Calculated)	<b>15.400</b>	%		• 11.6 - 15 %
<b><u>DLC</u></b>				
Neutrophils (Flocytometry)	43.900	%		40.000 - 80.000
Lymphocytes (Flocytometry)	32.600	%		20.000 - 40.000
Eosinophils (Flocytometry)	<b>13.300</b>	%		• 0 - 7 %
Monocytes (Flocytometry)	6.000	%		3.000 - 11.000
Basophils (Flocytometry)	0.700	%		0.000 - 2.000
Neutrophils - Abs (Flocytometry)	3.09495			2.000 - 7.000
Lymphocytes - Abs (Flocytometry)	2.2983			1.000 - 3.000
Eosinophils - Abs (Flocytometry)	<b>0.93765</b>			• 0.02 - 0.5 10 <sup>3</sup> /μL
Monocytes - Abs (Flocytometry)	0.423			0.200 - 1.000
Basophils-Abs (Flocytometry)	0.04935			0.000 - 0.100

Over All Comment :

Verified/Reviewed



# डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

अ.भा

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

L

OPR-6

Reg. No. 300656

Reg. Date- 06/06/2024

अस्पताल के Paediatric Medical Oncology Clinic

Clinic No. 2023/6845

DEPT. MEDICAL ONCOLOGY



IISES

Ref: Dr. SB/Dr. DP

UHD-106792980

Dept. NCD

रिषा कुमारी

No.

नाम/Name

RISHA KUMARI

Sex/Age F/7Y

जन्म तिथि/Date of Birth

- RAJU SAH

Room 5 (Shift Afternoon)

Phone No. 7780016955

Address SARARI, BIHAR, Pin:0, INDIA

निदान/Diagnosis

HR- NB (NMYC  $\ominus$  ; INRGS - M)

दिनांक/Date

उपचार/Treatment

10/11/24

Currently on OMT

25/10/24

2200 arranged for auto

10/11/24

to continue OMT

20/11/24

Tab. Thalidomide 50mg 50mg (रात) (एक गोली)

Cap. Celecoxib 100mg BID (दिन में 2 बार)

Cap. Etoposide 50mg 50 (दिन में एक बार) M सोम 3 weeks (इस वक़्त तक)  
W बुध F शुक

Tab. Endoxan 50mg 50 (दिन में एक बार) M सोम 3 weeks (इस वक़्त तक)  
W बुध F शुक

Ophthal review (OOC)

Flup on 22/11/24

2/11/24

20

Handwritten signature

Senior Resident  
Paediatric Oncology  
Dept. of Pediatrics  
All India Institute of Medical Sciences  
New Delhi-110029

Senior Resident  
Paediatric Oncology  
Dept. of Pediatrics  
All India Institute of Medical Sciences  
New Delhi-110029

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)

धरमशला से अपने अपने सेविंगों के लिए धरमशला की सुविधा उपलब्ध है/Dharamshala facility is available for outstation patients

5/10/24

HR-NB (NMMC @ IMPGSS-M)

currently on OMT

PET done on 23/10/24 - done 11/10 ? clinical progression

2 lacs funds arranged for ASCT

40 140 nasal bleed  
pain in (L) thigh.

wt-20.91g

Adv,

① Continue OMT as advised overleaf  
(दोपहर)

② 4L PET report

③ Botoclot LA BID (20tz)  
Nasoclear drops 10 BID (40tz)

④ Tab. PCM 500mg 1/2 tab BID for pain  
(311211 ओर)

⑤ Fup on 28/10/24 & CBC/RFI/LFT.

8/11/24

Fu on 22/11/2024

Senior Resident  
Pediatric Oncology  
Department of Pediatrics  
All India Institute of Medical Sciences  
New Delhi-110029

6+

(REVISIT)

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI -110029

आपातकालीन विभाग



UHID No:106792980

(DEPT. OF EMERGENCY MEDICINE)

कालीन नं.(Emergency No): 2024/030/0033395

दिनांक DATE: 11/04/2024

समय TIME: 10:39:24 AM

NON-MLC

NAME: MISS. RISHA KUMARI

आयु AGE: 7 years 6 months 10 days

लिंग SEX: F

ADDRESS:

मकान संख्या H.NO: SARARI  
शहर प्रखंड CITY BLOCK:  
राज्य STATE: BIHAR  
मोबाइल नं. MOBILE NO: 7780016955

गली / मुहल्ला STREET/MOH:  
पिन PIN: 0

दूरभाष नं. PHONE NO: 7780016955

स्थान Location: Paediatrics Emergency

Criticality: Red / Yellow / Green

ब्रॉट ब्रॉट BY: Relative

Triage:	Responsive/Unresponsive	HR	/min	BP	mmHg	RR	/min	spO2	%
Shifted to Paeds/ Main/ New Emergency									

Presenting Complaints

HR Neuroblastoma LMO  
 On OMT (Endonau, Etoposide, Thalidomide)  
 do fever since 2 days (max upto 102°C)  
 no do ~~diarrhoea~~ loose stools, vomiting  
 do cough since yesterday  
 do dizziness

Primary Assessment (ABCDE): Assessment Pentagon

Airway	Circulation	Disability
Open & stable : Yes <del>No</del> If No.....	HR...143 min CFT...2 secs. BP...103/66 mmHg	GCS...15/15 Pupil size...2 mm Pupillary Reactions...NSNR
Breathing: RR...19 min Efforts: Normal/Poor/increased Auscultation: Air entry: Normal/poor/Differential	Peripheral pulse: Poor/Good Central pulse: Poor/Good	Motor activity: Normal & Symmetrical/Asymmetrical Posturing/Flacidity/Seizure
Added sounds: None/Stridor/ Wheeze/ Crackles	Skin temp: Warm/cool	Blood Sugar.....mg/dl
SpO2 on Room air...100	Others	Exposure: Temp..... Colour: Normal/pallor/cyanosis/mottled Any other skin lesions.....

Diagnosis ? AN

Ucannula  
CBC, VB4  
Microculture

- R/w reports  
U fluids (DNS:100ml) @ 54 ml/hr

Sharma





डॉ. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल  
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

अ.भा.अ  
बहिः

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

12

OPR-6

3 ताल के अन्दर

IRCH No. 300656

Reg. Date-09/02/2024

S

Clinic Bone Marrow Transplant Clinic  
Deptt. MEDICAL ONCOLOGY  
General

Clinic No. 2024/1525



UHID-106792980

रकम/Unit

विभाग/Dept.

नाम/Name

नाम रिशा कुमारी

Name RISHA KUMARI

D/O- RAJU SAH

Phone No. 7780016955

Address: VARARI, BHAR, Pin 0, INDIA

Sex/Age F/7Y

Room 7 (Shift Afternoon)

थे/Date of Birth

106792980

*Chhabra*

निदान/Diagnosis

Neuroblastoma - HR

दिनांक/Date

उपचार/Treatment

23/2/24

Completed chemotherapy

Adv:

→ F/U - 22/3/24

*26/2/24*

GFR-DTPA scan

- 2DEcho

CDER clearance

- CECT chest/Abd (Helvi's)

MIBG scan.

CBC/UR/CRF

→ Arrange funds

(Can kids to kindly help)

*Shrivastava*

*60*

*Kindly provide railway reservation FO on 24/2/2024*

डॉ. सुमदीप गंगुली DR. SHIVADEEP GANGULY  
वरिष्ठ रेजिडेंट/Senior Resident  
अनुद्विजान विभाग/Deptt. of Medical Oncology  
डॉ. बी. आर. अम्बेडकर संस्थान/Dr. B.R.A., IRCH  
DR. BRAIRCH, (AIIMS) New Delhi-110029  
राज्य मार्दीय अस्पताल/State Cancer Institute, AIIMS  
New Delhi-110029

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

# ब. रो. वि. कार्ड O.P.D. Card



अनुभाग व दिन  
Section and Day II  
बुधवार व शनिवार  
Saturday

कमरा नंबर  
Cabin No.

डा. राजेश  
अ. भा. ३  
Dr. Rajen  
A.I.I.M.S  
यू.एच.आ  
UHID N  
र  
Name



UHID: 106792980  
ABHA:  
Dept No: 20240050001226

संख्या / Queue 12  
कमरा / Room: 6B  
Unit-II  
RPC OPD

रिशा कुमारी / RISHA KUMARI

Dr SR/JR -II R 6B

D/D RAJU SAH  
8Y 8D / F  
CAFARI BHAR PhD INDIA

WED, SAT  
बुध, शनि

Mob: 7780016956      General Rs 0  
Follow Up Patient

Registration time:  
09/10/2024 09:22:12 AM

पता  
Address

दिनांक DATE	निदान DIAGNOSIS
10 OCT 2024	<p>उपचार Treatment</p> <p>Monobkrome (OMF) HR +ve</p> <p>Small compmt b<sup>+</sup></p> <p>AS 2/w<sup>+</sup></p> <p>AS 2/w<sup>+</sup> / m<sup>+</sup></p> <p>AS 2/w<sup>+</sup> / m<sup>+</sup></p>

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।

Kindly keep this Card safely and bring it on your follow-up visits.

- धूम्रपान निषेध
  - कूड़ा कर्कट केवल कूड़ेदान में ही डालें
  - थूकिये नहीं
1. No Smoking      2. Use Dustbin      3. No Spitting

ब. रो. वि. कार्ड  
O.P.D. Card



नेत्र अमृत्य उपहार है

अनुभाग व दिन  
Section and Day V  
मंगलवार व शुक्रवार  
Tuesday & Friday

कमरा नंबर  
Cabin No.

डा. राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र  
अ. भा. आय. सं. नई दिल्ली



UHID: 106792980  
ABHA:  
Dept No: 20240050001226

संख्या / Queue 13  
कमरा / Room: 38A  
Unit-V  
RPC OPD

रिषा कुमारी / RISHA KUMARI

Dr. SR/JR -V- R.38A

D/O RAJU SAH  
8Y 10D / F  
SARARI, BIHAR, Pin:0, INDIA

TUE, FRI  
मंगल, शुक्र

Mob: 7780016955  
Follow Up Patient

General Rs. 0

Registration time:  
11/10/2024 10:20:34 AM

बजाज का एकक  
Bajaj's Unit

यु  
je

पता  
Address

दिनांक  
DATE

निदान  
DIAGNOSIS

11 OCT

VAD  
S

उपचार Treatment

Hot Cervical  
HR-NB (MYCONE / INR GSS-M)  
Chemo → Thalidomide, Metastatic (received)  
Oestrplatin  
currently after chemo → dropping (Feb 24)  
(on Maintenance) (progressive)

Currents on  
T. Thalidomide  
E. Celecoxib  
E. Etoposide  
Endoxan

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।

Kindly keep this Card safely and bring it on your follow-up visits.

1. धूम्रपान निषेध
  2. कूड़ा कर्कट केवल कूड़ेदान में ही डालें
  3. थूकिये नहीं
1. No Smoking                      2. Use Dustbin                      3. No Spitting



डॉ. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल  
**Dr. B.R. Ambedkar Institute Rotary Cancer Hospital**  
 अ.भा.आ.सं अस्पताल/A.I.I.M.S. Hospital

OPR-6

Out Patient Department  
 NG PROHIBITED IN HOSPITAL PREMISES

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

Reg. Date-09/02/2024

Clinic No. 2024/1525

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. \_\_\_\_\_

DR. B.R.A. IRCH, AIIMS, NEW DELHI  
 Reg. No. 300656  
 Bone Marrow Transplant Clinic  
 MEDICAL ONCOLOGY  
 रिशा कुमारी  
 RISHA KUMARI  
 RAJU SAH  
 7780016955  
 SARARI, BIHAR, Pin 0, INDIA



UHID-106792980

Sex/Age 1/7Y  
 Room 7 (Shift Afternoon)

पुत्री of	लिंग Sex	आयु Age	जन्म तिथि / Date of Birth
			106792980 IRCH

HR - NB. (myc-ve / INRGSS-M)

दिनांक / Date

उपचार / Treatment

15/11/24

post chemotherapy OMI/plumed ASCI

- Rx
- cap. Thalidomide 50 mg OD HS.
  - cap. Celecoxib 100 mg BD } x 6 wk
  - cap. Etoposide 50 mg OD  $\begin{matrix} M \\ W \\ F \end{matrix}$  } 3 wk
  - Tab. Endoxan 50 mg OD  $\begin{matrix} M \\ W \\ F \end{matrix}$  } Next 3 wk
  - syp BA-2 5 ml OD.
  - HU on 9/5/24. CBL, LFT/RA



वरिष्ठ रेजिडेंट / SENIOR RESIDENT  
 चिकित्सा अंगुदविज्ञान / MEDICAL ONCOLOGY  
 डॉ. बी.आर.अ. सं. अस्पताल / Dr. B.R.A., I.R.C.H.  
 अ.भा.आ.सं. अस्पताल / A.I.I.M.S. New Delhi-29  
 Dr. DEBARAJA  
 MD, DM, Pediatric Oncology  
 BMT Fellow, Medical Oncology  
 AIIMS, New Delhi

09/11/2024

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

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5/24

On OMT : 8/4/24

file NA

5780 / 296L  
3144

funds not arranged

No fresh issue.

LFT/LFT (2)

Adv

Cont OMT as advised

F/U 6/6/24 = CBC  
RFT/LFT

11/5/24

Dr. SHIVAM BANSAL  
Senior Resident  
Pediatric Oncology  
AIIMS, New Delhi

6/24

Cont OMT as charted overleaf

Expedite funds for ASCT

F/U 22/7/2024 = CBC  
RFT/LFT

Derma OPD appointment  
for ? Tinea infection

FU on 2/9/2024

6/9/2024

रजिस्ट्रार का कार्यालय  
Ry. Concussion Issue Dr.  
ए. पी. ए. रोड नई दिल्ली-29  
Dr. RPA ICH AIIMS, New Delhi

Dr. SHIVAM BANSAL  
Senior Resident  
Pediatric Oncology  
AIIMS, New Delhi

9.24

- Continue OMT as on overleaf (det st)
- Arrange funds for ASCT (ISI)

11/5/24

No 151

F/U on 7. Oct. 24  
CBC - LFT - KFT

112.4cm  
20.4kg

ज्येष्ठ रजिस्ट्रार/SENIOR RESIDENT  
पिंडिका अस्पताल/MEDICAL ONCOLOGY  
ए. पी. ए. रोड नई दिल्ली-29  
Dr. B.R.A. I.R.C.H.  
New Delhi-29