

# **KINNERA MEMORIAL TRUST**

కిన్నెర మెమోరియల్ ట్రస్ట్

## **Application for Help**

Patient Name : SRINIDHI



 Father/Guardian : MANIKYAM

Contact Address : BANJARA HILLS

Phone Number : 9550889416.

UMR No : 9236

Age/ Sex : 3 Y / F

### **DISEASE INFORMATION**

(To be filled by Doctor)

**Diagnosis**: NEUROBLASTOMA

**Date of Diagnosis**: 30/09/.2013

**Investigations**: Complete Blood Picture

Bone marrow aspiration and biopsy

Serum Creatinine Blood Grouping Blood Cultures

<u>Treatment</u> <u>Induction:</u>

**Inj Vincristine 1mg once per month** 

Inj Etopaside 100mg 2 days

Inj Cyclophosphamide 600mg 2 days

Inj Doxorubicin

Inj Carobaplatine 30 mg 3 days

Inj. Cispltine

**Consolidation:** 

Inj Cyclophosphamide

Inj Cytarabine Inj Methotrexate 3

#### **Type of treatment and Reviews:**

Chemotherapy (remission induction, intensification/consolidation, and maintenance therapy)

1. Phase 1 - Remission induction: Vincristine and Chemotherapy along with CBP ,S.Electrolytes S.Creatinie every  $2^{nd}$  week for one month.

- 2. Phase 2 Before 3 Chemotherapy given & After Surgery again 3 Chemotherapy Consolidation
- 3. Supportive care- Blood product support, treatment of infections during intense phases

**Family Circumstances:** Father out of job soon after diagnosis due to repeated absences. No other source of income for the family.

**Estimation Amount**: 4.5 lakhs

Any amount was sanctioned than any organization: None

#### **Recommendations:**

Kindly sanction 20,000 rupees to help this child to continue his treatment.

Consultant Name: Dr. Ramana Dandamudi/ Dr. Parinitha Gutha

**Consultant Signature:** 

**Approved By:**