



KINNERA MEMORIAL TRUST

కిన్నెర మెమోరియల్ ట్రస్ట్

Application for Help



PATIENT NAME : E. UDAY
FATHER/GUARDIAN : VIJAY KUMAR
ADDRESS : GUDIVADA, KRISHNA DIST
ANDHRA PRADESH.
PHONE NUMBER : 9908381748, 9399977902
UMR No : UMR-19790
AGE : 12 Years
GENDER : MALE

DISEASE INFORMATION

(To be filled by Doctor)

Diagnosis: NON HODGKINS LYMPHOMA

Date of Diagnosis: 11-04-2016

Investigations: Complete Blood Picture
RP1, CRP

Blood Cultures
Pet Scan & Ultra Sound

Treatment

Induction

Inj Vincristine
Inj Cylophosphamide
Inj Methotrexate
Inj Doxorubicin

Consolidation:

Inj.Methotrexate
Inj. Cytarabine
Inj Leucovarine
Triple IT
Tab Omnicortil 40mg (m) 30 mg (E) 5 days
Tab Pantodac 40 mg od 10 days
Syp Sucral 10 days
Tab Septran (A) BD m/th
Mouthcare

Type of treatment and Reviews:

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

1. Phase 1 – Remission induction: Vincristine and along with CBP every month.
2. 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 rupees to help this child to continue his treatment.

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

Consultant Signature :

Approved By: