

# Application for Help



PATIENT NAME : PRANEETH REDDY

| FATHER/GUARDIAN | : CHANDRASHEKAR REDDY     |
|-----------------|---------------------------|
| MOTHER          | ; ANITHA                  |
| ADDRESS         | : H.NO 32-311 PLOT NO.147 |
|                 | SHAPUR, HYD               |
| PHONE NUMBER    | : 8008439790,9160053990   |
|                 |                           |
| UMR No          | : UMR-22944               |
| AGE             | : 3Years                  |

GENDER : MALE

# **DISEASE INFORMATION**

(To be filled by Doctor)

Diagnosis: Date of Diagnosis: Investigations: ACUTE LYMPHOBLASTIC LEUKEMIA 15.4.17 Complete Blood Picture, CRP Electrolyte ,Creatinine Blood Cultures CT Scan & Ultra Sound

## Treatment Induction **Inj Vincristine** Inj Daunorubicin **Inj Methotrexate IT** Inj Doxorubicin **Consolidation:** Inj.Methotrexate Inj. Cytarabine Inj Cyclophosphamide Inj. Oncospor Tab 6mp Tab Pantodac 20 mg Syp Sucral Syp Septran 5ml BD m/th Mouthcare

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

Chemotherapy (remission induction, intensification/consolidation, and maintenance therapy)every 3<sup>rd</sup> month IT Methotrexate

- 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 500 dollars to help this child to continue his treatment.

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

Approved By:

KANTAMNENI RAJA

### Dr. RAMANA

