

KINNERA MEMORIAL TRUST

కిన్నెర మెమోరియల్ ట్రస్ట్

Application for Help

PATIENT NAME : DARA PRERAN

FATHER/GUARDIAN : PRABHAKAR.D MOTHER ; PRIYANKA.D

ADDRESS : RAMANTHAPUR

PHONE NUMBER : 8008795628

UMR No : UMR- 27951, IP 8677

AGE : 4 Years

GENDER : MALE

DISEASE INFORMATION

(To be filled by Doctor)

Diagnosis: CALLA POSITIVE, B- LYMPHOBLASTIC LEUKEMI

24.11.18

<u>Investigations</u>: Complete Blood Picture

CRP

Electrolyte ,Creatinine

Blood Cultures

CT Scan & Ultra Sound

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

Inj Vincristine
Inj Daunorubicin
Inj Methotrexate IT
Inj Doxorubicin

Consolidation:
Inj.Methotrexate
Inj. Cytarabine
Inj Cyclophosphamide
Inj. Oncospor D4 d 18
Tab 6mp 50mg
Tab Pantodac 20 mg
Syp Sucral
Syp Septran 5ml BD m/th
Mouthcare

Inj h d Methotrexate

Type of treatment and Reviews:

Chemotherapy (remission induction, intensification/consolidation, and maintenance therapy)every 3rd 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 30,000 to help this child to continue his treatment.

Consultant Name: Dr. Ramana Dandamudi/

Consultant Signature:

Approved By:

KANTAMNENI RAJA

Dr.RAMANA