



डा. 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

बहिर्गम रोगी विभाग / Out Patient Department

DR. BRA IRCH, AIIMS, NEW DELHI

संस्थान का नाम / Hospital Name

अस्पताल का अ

IPCH No. 157776

Reg. Date 22/8/2013

उम्र / Age

एकक / Unit

Field/Spec. MEDICAL ONCOLOGY CLINIC

Clinic No. 2659

विभाग / Dept.

नाम / Name

Dept. MEDICAL ONCOLOGY

पता / Address

Name ANCHAL YADAV

F/14 Yrs

DOB 5/8/2000

Room 5

Address ILNO-B-449 BREA-8, KANPUR Uttar Pradesh INDIA

रिपोर्ट / Diagnosis

दिनांक / Date

उपचार / Treatment



Med on

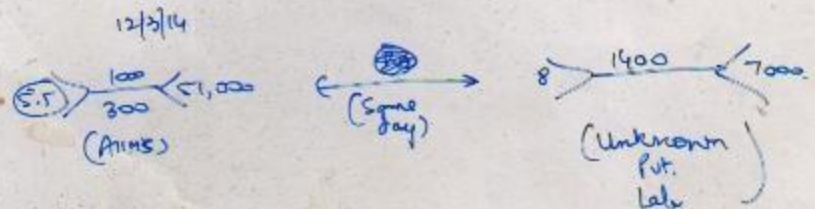
Anchal yadav

Diagnosis

0/3/14

R. No 15

1. 1g Mepex 3gm \times \times BD \times 3 days
2. 1g Amikacin 450mg \times \times OD \times 3 days
3. 1g GWF \rightarrow 150mg i.c \times \times \times 3 days
4. 13/3/14



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

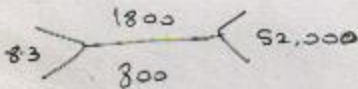
Adv.

Clinically -

No of any Bleeding

- Repeat CBC and show tomorrow (12/3)
 - In case of any bleeding come immediately to emergency for PR transfusion
 - inj. G-CSF 150 µg s/c to be given on 13/3 also
- Qureshi

13/3/14



KFT
LFT] ⊙

Na/K - 136/2.4

Adv.

OD
read -
Qureshi

- Syp. Petchlor 3tbl TDS x 3d
- inj. G-CSF 150 µg s/c OD x 6d
- F/U on 24/3/14 with SE/CBC

3-3-3

14/3
9/2 15/3

Qureshi

STICKERS

Qureshi

General Follow-Up....



अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL

बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर घुसपान बना है। (SMOCH) NOT PERMITTED IN HOSPITAL PREMISES

बहरे-अप-क्लिनिक / FOLLOW-UP-CLINIC

सुनिश्चित / Unit-III

प्रत्येक सोमवार EVERY MONDAY

एकक/Unit 2013/008/0031073

UHD:

विभाग/Dept.

Orthopedics (अस्थिरोग विभाग)

रोगीक संजीक सं०/O.P.D. Regn. No 20130450458

नाम/Name	पिता/पुत्र/पत्नी/पति/पुत्री F/S/W/H/D of	लिंग Sex	आयु Age	पता/Address
ACHAL YADAV	D/O : VINOD YADAV	F महिला	13Y / वर्ष 6M महिला 9D	B 449 BARRA 8, KANPUR, UTTAR PRADESH

निदान/Diagnosis

1105

दिनांक/Date	उपचार/Treatment
<p>7/2/14</p> <p>150</p> <p>Registration Time : 8:00 AM TO 10:30 AM Done By: Orthopedics Revist/1330 Room No. 10 (कक्ष सं.10), First Floor(पहली मंजिल) Floor 17/02/2014 08:43:36 AM Token No.14</p>	<p>(D/w Dr. Shah Atam Sir.</p> <p>Adv:-</p> <ul style="list-style-type: none"> → Continue Physiotherapy → Waiting Protheses. → Review after 2 weeks

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3 FEB 2014

Awaiting Prostheses

Adv:

~~Mr. Gupta~~
Mr. Gupta
Pr. help

- ① To be mobilised on crutches
- ② Stump exercises
- ③ Review

Dr. J. S. Jangra
03.02.14

D.C. A.P.O.
Jangra
11/2/14

3/2/14 - Stump exercise explained.

- ① LL splinting.

~~Mr. Gupta~~

* Personal
Ref. ni.
10/2/14

4/2/14 - Exercise booked.
Walking with crutches.

~~Mr. Gupta~~

10 FEB 2014

Adv: ① Mobilisation on crutches to continue

② X-ray ③ amputation stump cast

④ Pr. Issue Railway concern form.

⑤ Disability Certificate

Dr. J. S. Jangra
10/2/14

Done MSSO
Pr. help
R

Up... 26/08/2013 / 3-41386 Date 22/11/14

जो भा० आ० सो अस्पताल / A.I.I.M.S. HOSPITAL

बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है / SMOKING PROHIBITED IN HOSPITAL PREMISES

कॉलेज-आर विद्यालयिक WED, FRI (बुध, शुक्र)

सुनिश्चित / Visit

प्रत्येक सोमवार / EVERY MONDAY

13 OPR-6

FB-801/13



एक/Unit 2013/008/0031073
विभाग/Dept.

रोगी/पंजीकृत सं./O.P.D. Regn. No.

Orthopedics (अस्थिरोग विभाग)

UID: 20130450458

रोगी/नाम / Name	पति/पुत्र/पत्नी/पति/पुत्री / F/S/W/I/H/D of	लिंग / Sex	आयु / Age	UID: 20130450458
Anehal ACHAL YADAV	D/O: VINOD YADAV	F महिला	3Y / वर्ष 5M महिना 5D	B 449 BARRA & KANPUR, UTTAR PRADESH

रिपोर्ट / Diagnosis

1105

दिन

दिनांक / Date

उपचार / Treatment

3/2/14
64p

Registration Time: 8:00 AM TO 10:30 AM
Done By: Orthopedics Revist/1330

Room No. 10 (कक्षा सं. 10), First Floor (पहली मंजिल) Floor
13/01/2014 09:02:06 AM
Token No.66

Adv:-

- ✓ T. Cefix 500mg - 1 tab BD x cont.
- Rom cream - 152
- Dressing - Rom-5
- ✓ T. CCD - 1 tab CD x 1 wk

Chd Dr. S.A. Khan

4/2/14

(41)

~~73- 2495~~
10/2/14
20 JAN 2014

Remove dress
to show.

- Measurement for A/K prosthesis.
(Bhagwan Mohan)
- H/w

Asmita



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HOSPITAL

OPR-6

अस्पताल/Unit	IRCH No. 157776	Reg. Date	22/8/2013	अस्पताल/Unit	nt
विभाग/Dept.	First Visit PUMEDICAL ONCOLOGY CLINIC	Clinic No.	2659	अस्पताल/Unit	L PREMISES
रोग/Name	Deptt. MEDICAL ONCOLOGY	F/14	Yes	अस्पताल/Unit	gn. No.
	Name ANCHAL YADAV	DOB	5/8/2000	अस्पताल/Unit	रोग/Name
	D/O SH. VINOD YADAV	Room	5	अस्पताल/Unit	रोग/Name
		Uttar Pradesh		अस्पताल/Unit	रोग/Name

रिपोर्ट/ Diagnosis

दिनांक/ Date

उपचार/ Treatment

28/5/2014
 T. Emmit 4mg TDS
 0 0 0
 T. Pan D 1 tab
 2 बार से पहले

क्रिस्टल मिश्रक जनरल फार्मासी
 (N) इन्स्टीट्यूट ऑफ फार्मासी
 नाम :
 लिंक :
 इलाहाबाद :

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

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26/02

Please give chemo as written overleaf w/ 26/02

Mon 27/02 8:30 AM

Def 10 units chemo

26/2
0/4

Review on 28/03 - CBC / Biochem

28/3
0/4

24/03 C7 - CDDP - Doc

Kindly repeat as written overleaf
24/03
CDDP
meds
w/ids
24/03
320mg
Review on 27/04 - CBC
w/ids
24/03
200mg
CBC
w/ids

7/3/14

Fever / Non rubropom

Do of chemo

As above

- Tax ~~500~~ Paclitaxel 375mg BD $\frac{1}{2}$ 3 days
- SYP Gemtuzumab 5mg TID 0-0-0
- Stearn inhibition TID 0-0-0

↓

8/3/14 ANC - 0

2x magmax 2gm IV BID / 5 days

2x Amika 400mg IV BID / 5 days

2x GCSF 200mg SC OD x 5 days

27/4

2x magmax 2gm IV BID
def Amikacin 300mg IV BID

0/1
8/3-14

PRBC

2x
20/3
200mg



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 अ.भा.आ.सं. अस्पताल / बहिरंग रोड
 DR. BRA IRCH, AIIMS, NEW DELHI

OPR-6

एकक/Unit
विभाग/Dept.

IRCH No. 157776
First Visit PD MEDICAL ONCOLOGY CLINIC

Reg. Date 22/8/2013
Clinic No. 2659

Department
HOLD IN HOSPITAL PREMISES

सं/ O.P.D. Regn. No.

Deptt. Name MEDICAL ONCOLOGY
ANCHAL YADAV
SH. VINOD YADAV

F/13 Yrs
DOB 5/8/2000
Room 5

नाम/Address	आयु/ Age

निदान/ Diagnosis

H.NO- B-449, BREA-8, KANPUR Uttar Pradesh INDIA

दिनांक/ Date

दिनांक/ Date	उपचार/ Treatment
P2-26/9	29/9 - m E
INI	magnex 3gm IV B3
INI	fungin 450mg IV B3
INI	GILF 1504g S/C B3
FU m.	3/10/13

Handwritten notes: 25/9 - E, 29/9 - E, 30/9 only magnex, 22/5 own, 28/5 own, 30/9.

Other notes: 5/12, 3/10, 24/10, Bear Madam Patty (44), Kindly make an estimate of Rs 1,00,000 for treatment of metastatic osteosarcoma.

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24/12/14 → Lft. Report issued by Pt. Application 537
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 DR. B.R. Ambedkar Institute Rotary Cancer Hospital
 DR. BRA IRCH, AIIMS, NEW DELHI

IRCH No. 157776
 First Visit PD MEDICAL ONCOLOGY CLINIC
 Reg. Date: 25/10/2013
 Clinic No. 2659

M.S. HOSPITAL
 Int Department
 SITED IN HOSPITAL PREMISES
 OPR-6

एकक/Unit Deptt. MEDICAL ONCOLOGY
 विभाग/Dept Name ANCHAL YADAV
 D/O SH. VINOD YADAV
 Address ILNO- B-449, BREA-R, KANPUR
 F/13 Yrs
 DOB 5/8/2000
 Room 5
 Uttar Pradesh INDIA

पंजीकृत सं/ O.P.D. Regn. No.
 आयु/ Age
 पता/Address
 5/14
 20/2

रिपोर्ट/ Diagnosis 02

दिनांक/ Date	उपचार/ Treatment
30/11/14	<u>CHFS JE</u>
5/2 02	IN1 eyeset 8mg / 10W
	IN1 dexa 8mg
	IN1 fofopamide in 10 W D1-D3 - 3gm
	IN1 mesna 1VP ⁰ , 4. 8 W D1-D3 - 600mg
	IN1 HTOloside in 10 W D1 - 02 - 200mg D3 - 100mg
	IN1 Gref 200 mg qd on 1 x 6 day. D1 - 11/20 - D2 - 12/20 - D3 - 13/20 D4 - 14/20 - D5 - 15/20

JAN 2015

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
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contact 8770 00733 } 5 days
 Patient Home 020

Pu on 27/01/14 CBE/Baker.

Ram

~~6th cycle~~

Bojin

C#7

+PT AS ABOVE.

→ GIVE NEF 24. of mg. For 6 days

Pu + DR. same. Ram on 21/4/14

6L
6L
Ram

CBE/Baker
& NEF CASE

Ram

5/02

Osteosarcoma.

Post 4 cycles IE.

20/2/14
Ple please
ndc

Developed GTCS during Ifosfamide infusion (5th cycle day 1)

→ Chemotherapy withheld.
Recovered after 2mg midazolam.

Complete 5th cycle without Ifosfamide (Please check electrolytes)
Review on 27/02/14
ndc

Ram



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Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

DR. BRA IRCH, AIIMS, NEW DELHI

HOSPITAL

OPR-6

एक/Unit

ICCH No. 157776

Reg. Date 22/8/2013

Department

IN HOSPITAL PREMISES

विभाग/Dept.

Floor VI-B POSTMEDICAL ONCOLOGY CLINIC

Clinic No. 2659

O.P.D. Regn. No.

नाम/Name ANCHAL YADAV

F/14 Yrs

पता/Address

DOB SH. VINOD YADAV

DOB 5/8/2000

Room 5

अन्वेष

Address EL-54-B-49 BREA-8, KANPUR

Uttar Pradesh

विवरण/ Diagnosis

OS

(D+11)

Post CSOP/DONO.

दिनांक/ Date

उपचार/ Treatment

o To CMO main canopy

pt is c/o OS to ANCO in high grade
fever + oral mucositis (2) stiffness @ hand

o to do urgent S. Calcium

o 2mg morphine 3gm IV BD

o 2mg midazolam 5mg IV BD

o 2mg GDF 200 ug S/C BD

o 10 BF date OCCR

o IV fluids

o SR med over to review

Done

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

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9/4/14

by G-CSF 2000 S.C. 09

- 9/4 ✓
- 11/4 ✓
- 12/4 ✓
- 13/4 (only)

by Megestrol 3gm IV 80
 by Anastrozole 40mg IV.

started from 01-9/4/14 on
 x 5 days D2 - 10/4
 D3 - 11/4
 D4 - 12/4 - 14/4
 D5 - whole + Gant

- Zytex LA 0000
- Plenty of fluids

AIIMS निःशुल्क जैविक परीक्षा (V) देवाईयां प्राप्त की

09/04/14

24/4
 For KOMTX - Addition
 ↓
 from / stay

- Feb skeletal survey on 05
- Feb ultrasound 1 tab 30

Highcare room 4A:

16/4/14

by G-CSF 2000

- 16/4 ✓
- 17/4 ✓
- 18/4 ✓
- 19/4 ✓

Behavine mouth wash
 Esp. ~~Amoxicillin~~ Amoxicil 3140

22/4/14

22/4/14

BIRC

fu on 24/4/14

AIIMS निःशुल्क जैविक परीक्षा (V) देवाईयां प्राप्त की

22/4/14

Kit: P. falciparum ⊕

22/4/14

Adv. Lumevo 20 Kit is advised
 1000 mg SOS
 Querc

APPENDIX 1/36
(Rule 101, Serial No. 25)

Appendix - 1/36
Concession to orthopaedically
Handicapped/Paraplegic persons/
Patients

CONCESSION CERTIFICATE



From for the purpose of grant of rail concession to Orthopaedically
Handicapped/Paraplegic persons/Patients to be used by the Government

Doctor

(MS-801/13)

at Km./Shri/Smt. Anchal Yadav whose particulars
are furnished below, is a bonafide *Orthopaedically Handicapped/Paraplegic person/patient and CAN NOT
TRAVEL WITHOUT THE ASSISTANCE OF AN ESCORTS.

Particulars of the Orthopaedically Handicapped/Paraplegic person/patient:

- (a) Address: B-449, Baran, Kanpur, U.P.
- (b) Father's/Husband's Name: Sh. Vinod Yadav
- (c) Age: 13 yrs (d) Sex: Female
- (e) Nature of Handicap: (To be written by Doctor) PERMANENT (85%)
Whether the disability is Temporary or Permanent
- (f) Causes of loss of functional capacity: Alone knee & hip joint
- (g) Signature or Thumb impression of Orthopaedically
handicapped/Paraplegic person/patient: (not
necessary for those whose both hands are missing
or non-functional)

Place: N. Dells

Date: 4/4/14

(Signature of Government Doctor)

Clear seal of Government
Hospital/Clinic

Seal Containing Full Name and Regd
No. of The Doctor

Stamp seal where not applicable

Note: (1) Certificate Should be issued only to those Orthopaedically Handicapped/Paraplegic persons/patients WHO CAN NOT TRAVEL WITHOUT THE ASSISTANCE OF AN ESCORT. The photo must be signed and stamped in such a way that Doctor's signature and stamp appears partly on the photo and partly on the certificate.

(2) In the case of temporary disability, the certificate will be valid for five year from the date of issue. In the case of permanent disability the certificate will remain valid for (1) five years, in case of persons upto the age of 25 years, (2) ten years, in case of persons in the age group of 26 to 35 years, and (3) in the case of Persons above the age of 35 years, the certificate will remain valid for whole life of the concerned person. After expiry of the period of validity of the certificate, the person is required to obtain a fresh certificate. A Photostat copy of this certificate is accepted for the purpose of grant of concession. The original certificates will have to be produced for inspection at the time of purchase of concession ticket and during the journey, if demanded.

(3) No alteration in the form is permitted.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

DEPARTMENT OF ORTHOPAEDICS

DISCHARGE SUMMARY FOR MUSCULOSKELETAL ONCOLOGY

Patient's name: Achal Yadav

Age: 13 y

Gender: F

Date of Admission: 13/12/13

Date of Discharge: 25/12/13

Folder No: B/801/13

Ward/Bed: A3, 26

CR No.: 438678

Address: Campus, UP India

Contact Number: 9540431367

FINAL DIAGNOSIS: Osteosarcoma d/c femur (R)

Histopathology Report Number: 1326121

Procedure Done: High Above Knee Amputation

Date Of the Procedure: 19/12/13

Done By (names): Prof. S. Rastogi, Dr. Chaturanga, Dr. Vinod Tiwari

Implant Used: (Sticker if Available)

Follow-Up on: 01/01/14 With Discharge Summary in D/HOT

This Discharge Summary Is Prepared by: OPB

Name and Signature:

Date: 25/12/13

(Signature)
Name
Dr. Vinod Tiwari



All India Institute of Medical Sciences
Department of Pathology

Tel: +91-11-26588500/26588700; Fax: +91-11-26588663/26588900

Histopathology Report

Name: Anchal Yadav

Acc No 1341376

C/O

Received on 2013-12-19

Age 13 years

Hosp Reg no 438678

Sex F

Reporting Date 2014-01-13

AB 106

Consultant Incharge Prof. S. Rastogi

Material: Biopsy, sample excision

Report:

Received specimen of "right above knee amputation" measuring 2.5cm thigh, 41cm leg, 22 cm foot with preserved end of femur measuring 2cm in diameter.

Grossly, lower part of thigh appears enlarged measuring 17cm in diameter, overlying skin appears tensed.

On cut section, a solid tumor measuring 15cm in length and 10cm in maximum diameter is identified which arises from metaphysis of the lower end of femur. Areas of hemorrhage and cartilage are also identified in the tumor. Tumor lies 2cm from articular cartilage and 6.5cm from distal end of femur. Tumor doesn't appear to involve the articular cartilage.

-Multiple sections examined from tumor shows histomorphological features of osteogenic sarcoma.
(Note: status about chemotherapy has not been provided in the clinical history).

The articular surface of femur is free of tumor.

-Neurovascular bundles are free of tumor.

-Skin and soft tissue cut margin is free of tumor.

Dispatch Date: 2014-01-15

Typed By: Nishika

Verified By: Kavneet Kaur

Senior Resident:

Dr. Mukund N. Sable

Consultant Histopathologist: Dr. Deepali Jain

Supplementary Report



**All India Institute of Medical Sciences
Department of Pathology**

tel.: +91-11-26588500/26588700; Fax: +91-11-26588663/26588900

Histopathology Report

Name: Anchal Yadav

Acc No 1341336

C/O

Received on: 2013-12-19

Age 13 years

Hosp. Reg no 438678

Sex: F

Reporting Date: 2014-01-13

AB 126

Consultant Incharge: Dr. C. Dasgupta

Material: Biopsy, sample excision

Report:

Received specimen of "right above knee amputation" measuring 2.5cm thigh, 41cm leg, 22 cm foot with resected end of femur measuring 2cm in diameter.

Grossly, lower part of thigh appears enlarged measuring 17cm in diameter, overlying skin appears tensed.

On cut section, a solid tumor measuring 15cm in length and 10cm in maximum diameter is identified which arises from metaphysis of the lower end of femur. Areas of hemorrhage and cartilage are also identified in the tumor. Tumor lies 3cm from articular cartilage and 6.5cm from distal end of femur. Tumor doesn't appear to involve the articular cartilage.

-Multiple sections examined from tumor shows histomorphological features of osteogenic sarcoma.

(Note: status about chemotherapy has not been provided in the clinical history).

-The articular surface of femur is free of tumor.

-Neurovascular bundles are free of tumor.

-Skin and soft tissue cut margin is free of tumor.

Dispatch Date: 2014-01-15

Typed By: Nishika

Verified By: Kavneet Kaur

Senior Resident:

Dr. Mukund N. Sable

Consultant Histopathologist: Dr. Deepali Jain

Supplementary Report

Systemic Risk Factor. NIL

Local Risk Factors.

Discharge Information

Condition At Discharge. IMPROVED.

Follow Up. FOLLOW UP IN ORTHO OPD ON 1/1/14
WITH DISCHARGE SUMMARY
FOLLOW UP IN PMR OPD AS ADVISED

Advice During Discharge.

T CETIL 500MG 1 BD
T PCM 1GM TDS FOR 10 DAYS THEN
SOS
T VOVERAN 1 SOS
T SHELICAL 1 BD FOR 4 WEEKS
*CAP ZEVIT 1 OD FOR 4 WEEKSS
T RANTAC 1 BD FOR 10 DAYS
REGULAR SIDE TURNING AS ADVISE
REGULAR PRONE POSITIONING AS
ADVISED
PHYSIOTHERAPY AS ADVISED

Dr. Nitish K
Prepared By: Dr. NITISH KUM

Signature Of Senior Resid.

Date & Ti

DR. BRA INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-110029



Ref. No.F.1/IRCH/MR/2013-2014

ESTIMATE CERTIFICATE

TO WHOM IT MAY CONCERN

This is to certify that Anchal Yadav, Age 13 years, Female, D/o. Sh. Vinod Yadav, (IRCH No. 157776/13) is a known case of **Osteosarcoma** and is under treatment with Medical Oncology at Dr. BRA IRCH since 22.08.2013.

The approximate cost for her treatment would be Rs. 1,00,000/- (In words Rupees One Lakh only).

Sanjeev Bakhshi

(CONSULTANT/ SENIOR RESIDENT)

(COUNTER SIGNED BY M.S.)

डि. ब्रा. इन्स्टीट्यूट ऑफ़ रोटरी कैंसर हॉस्पिटल
ए. आर. आर. इन्स्टीट्यूट ऑफ़ मेडिकल साइंसेस
ए. आर. आर. इन्स्टीट्यूट ऑफ़ मेडिकल साइंसेस
नई दिल्ली-110029/New Delhi-110029

सेवा में

श्री भगत अर्थाशक्त
रिजिस्ट्रार इंडिया इस्ट
कैम्ब्रिज 3D-22
नोयडा (उ० प्र०)

विषय में श्री बेटी के इलाज के सम्बन्ध में

श्रीमान् मेरा नाम विनाय पादय है और मेरी बेटी का नाम आंचल पादय जिसकी उम्र 13 साल है मेरी बेटी को बसती वाला कैंसर है जिसका इलाज दिल्ली के एम्स हॉस्पिटल में चल रहा है जिसका खर्च एक लाख के बराबर है। मैं एक गरीब आदमी हूँ और मेरी बेटी के इलाज के लिए पैसों का इंतजाम नहीं हो पा रहा है अब हमारी बेटी की शिक्षण और लोगों के हाथों से रुपया आप मुझे सहजता करें।

मैं आपका सदा अमारी रहूँगा
व्य-प ११६ प्राची
विनाय पादय

भारत निर्वाचन आयोग
ELECTION COMMISSION OF INDIA
पहचान पत्र
IDENTITY CARD

MQJ6831044



निर्वाचक का नाम : विनोद कुमार
Elector's Name : Vinod Kumar
पिता का नाम : विश्वनाथ यादव
Father's Name : Vishwanath Yadav
लिंग / Sex : पुरुष Male
1.1.2007 को आयु : 35
Age as on 1.1.2007

पहचान पत्र संख्या :- MQJ6831044

पता : बी/4/9
महल्ले/मोहल्ला : बर्रा भग-8 सेक्टर डी
ग्राम/नगर : कम्पुर
जिला : कम्पुर नगर

Address
H.No. : B / 4 / 9
Str/Mohalla: Barra Bhag - 8 Sektor D
Vill/Town : Kumpur
PoliceStn. : Kumpur Nagar
Dist. : Kumpur Nagar
Pin

निर्वाचक रजिस्ट्रेशन ऑफिसरी के
हस्ताक्षर की अनुमति
निर्वाचक संख्या 275-गोविन्दनगर
Facsimile Signature
Electoral Registration Officer
for 275- Govind Nagar

स्थान : कम्पुर नगर
Place : Kumpur Nagar
दिनांक : 25/02/2007
Date

इस कार्ड को विभिन्न सरकारी योजनाओं के अन्तर्गत पहचान
पत्र के रूप में प्रयोग किया जा सकता है।

This card can be used as an Identity Card
under different Government Programmes. 37B/1322

कार्ड धारक हेतु विशेष निर्देश

- इस कार्ड को समुचित रूप से सुरक्षित रखना और इसके खो जाने पर ज्वलन्त ही आपूर्ति कार्यालय तथा सम्बन्धित विज्ञेता को सूचित करना आवश्यक है।
- इस कार्ड का उपयोग कार्ड धारक और उसके परिवार के सदस्यों के अधिकृत किसी अन्य द्वारा किया जाना नियम विरुद्ध है।
- नया एवं मरु का प्रमाण ले कराया जाये और तदनुसार एक कार्ड के अन्तर्गत आपूर्ति कार्यालय में आवेदन कर इस कार्ड को वाटित संशोधन कराना आवश्यक है।
- निवास के बदले जाने की स्थिति में भी एक माह के अन्दर आपूर्ति कार्यालय से सम्पर्क कर इस कार्ड पर पता-विवरण संशोधित कराया जाना आवश्यक है।
- परिवार के किसी सदस्य अथवा पूरे परिवार द्वारा स्थायी रूप से श्रेष्ठ/नगर छोड़ने की स्थिति में आपूर्ति कार्यालय में आवेदन कर उस सदस्य को यूनिट अथवा सम्पूर्ण कार्ड को निरस्त करवाकर सम्पूर्ण प्रमाणपत्र प्राप्त करना आवश्यक है।
- इस कार्ड का दुरुपयोग किया जाना कठिनाई उपराध है।

.....

600/1000

980452
कार्ड नं०

परिवार के मुखिया का नाम : विनाय कृष्ण साहू
 लिंग (पुरुष/महिला) : पुरुष
 पिता/पति का नाम : विश्वनाथ साहू
 पता : B-44 9^{करी} 8

परिवार के मुखिया का व्यवसाय तथा उसका पता : कामगार-116
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एल.पी.जी. कनेक्शन सं० : 15000/-
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 दुकान रजिस्टर क्रमांक : ...
 अभिकर्ता का नाम : पदाप बापम मरा
 नवीनीकरण की दशा में पूर्व राशन कार्ड का क्रमांक : ...

यूनिटों का विवरण	अंकों में	शब्दों में
नासिंग	05	पंच
नाश्चालिय		
योग	05	पंच

दिनांक 22/08/09
 80 पदाधिकारी की कक्षा
 कोष एवं प्रदर्शन विभाग