
OCEAN
WELFARE

OCEAN WELFARE FOUNDATION
LET'S MAKE A CHANGE TOGETHER

Date- 29-11-2025

Patient Registration Form For Medical Treatment

Sr.	Patrticulars		
1	Patient Name	BABY SOMYA	
2	Age/Sex	4 Year ++	
3	Father Name	Mr. SANDEEP	
4	Occupation	Labour	
5	Addrtess	Bharol, Firozabad. Uttar Pradesh	
6	Hospital Name	AIIMS New Delhi	UHID : 108634486
7	Nature Of Disease	Metastatic Neuroblastoma (Cancer)	
8	Required Treatment	Chemo + MEDICATION	
9	Estimated Cost	8,50,000/-(Eight Lakh Fifty Thousand Only)	
10	Summary	Baby Somya (4+Year old Baby Girl), is a Cancer patient needs Chemo+BMT, She belongs to a poor family, Her Father is a Labour, earns very low. Treatment cost is too High for her family, So her Father requested "OCEAN WELFARE FOUNDATION" for Financial Support.	
11	Signature Of Family	Authorised Signattory & Seal	Hospital Seal & Signature
	संदीप कुमार	OCEAN WELFARE FOUNDATION Reg.No. 70/2023	

OCEAN WELFARE FOUNDATION

सेवा में

प्रतीमान प्रबंधक

ओशियन वेलफेयर संस्था

नोएडा, गौतमबुद्ध नगर, उ0प्र0

विषय :- आर्थिक सहायता हेतु प्रार्थना पत्र

महोदय, सविनय निवेदन है कि मेरा नाम संदीप कुमार है, और मैं फरीदाबाद, फिरोजाबाद का रहने वाला हूँ। मेरी इकलौती बेटी सोम्या, 4 वर्ष की है, जिसको न्यूरोब्लास्टमा कैंसर है, उसका इलाज दिल्ली के एम्स अस्पताल में चल रहा है। उसके इलाज का खर्चा 8,50,000/- बताया है। मैं एक मजदूर हूँ। मैं यह राशि जुटाने में असमर्थ हूँ। मेरी आपकी संस्था से विनती है कि कृपया करके मुझे आर्थिक सहायता प्रदान करके मेरी बेटी को जीवनदान दें। मैं और मेरा परिवार हमेशा आपका ऋणी रहेगा।

निवेदक

नाम - संदीप कुमार

बेटी का नाम - सोम्या

उम्र - 4 वर्ष

खर्चा - 8,50,000/-

एम्स अस्पताल, नई दिल्ली

दिनांक

29-11-2025

संदीप कुमार

OCEAN WELFARE FOUNDATION Reg.No. 70/2023

DEPARTMENT OF PEDIATRICS
(DIVISION OF PEDIATRICS ONCOLOGY)
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi – 110029

ESTIMATE CERTIFICATE

Ref. No: _____

Date: 18/10/25

TO WHOM IT MAY CONCERN

This is Certify that Shri/Smt/Kum. SOMYA Sex. F UHID 10863488 S/o./D/o/W/o: SANDEEP KUMAR Aged 4 4 Yr treatment in Division of Oncology of Department of Pediatrics AIIMS vide for diagnosis HIGH RISK NEUROBLASTOMA is getting

It is proposed to treat the patient with Chemotherapy/ Bone Marrow Transplantation/Other Therapy
The approximate cost of the total treatment amount of Rupees 8 Lacs 50 thousand only
And approximate breakdown is given under the subheadings listed below. The cost under one subheading may exceed the projected estimate and excess would then be used from the other subheadings.

1.	Chemotherapy	2,00,000.00 for Govt agency only
2.	Antibiotics/ Antifungal	50,000.00
3.	Blood Component kits and tests	1,50,000.00
4.	Investigations	1,50,000.00
5.	Room Charges for isolation	1,50,000.00
6.	Post transplant immune suppression	50,000.00
7.	Miscellaneous charges	

Total Cost: Rs 8,50,000.00
(In Words) Eight lacs fifty thousand

Note:-
This Estimate Certificate is being issued to avail *Financial Assistance* for treatment only.
#The Cheque/Demand draft may be issued in favour of:

- ☐ AIIMS RAN & HMDG A/c 40207561985
- ☑ AIIMS PATIENTS TREATMENT A/c 10874588593
- ☐ AIIMS P.M.O. PATIENTS A/c 37671405137
- ☐ AIIMS DELHI AROGYA KOSH A/c 33477690609

[IFSC CODE: SBIN0001536]

For Account Transaction Please Contact. 011-26594746, 011-26546084.

18/10/25

(Name &Signature of Consultant with stamp)

डॉ. जगदीश प्रसाद मीना
Dr. Jagdish Prasad Meena
अपर आचार्य /Additional Professor
बाल चिकित्सा ऑन्कोलॉजी / Pediatric Oncology

(Counter Signature of HOD with stamp)

POC- 357/25

Department of Pediatrics
Division of Pediatric Oncology
All India Institute of Medical Sciences, New Delhi

शरीरमाद्यं खलु धर्मसाधनम्

Patient Note Book

Name : Sonya

UHID : 10863486

Diagnosis: ND

8/11/25

→ No mouth ulcer
→ 2% betadine gargles.
→ Sitz bath
→ On septran n/c
→ perineal hygiene
→ c/o – cough & cold 2days
→ on T Amlo 5mg 1/2 tab OD

BP-110/66 mmHg.
PR – 85 b/min

B.P. Records

SP -	84	48
SOP -	96	59
90P -	105	66
95P -	108	70
99P -	114	75
99P+5 -	119	80

HR-Neuroblastoma

on MICOTEC.

due for cycle. 2.

Child ok.
on waitlist for admission.

Ptechemo w/u : Mantoux + 10mm

~~Advice~~:

1. To do CXR —— B1
   GA- AFB
   GA- Gene Xpert
   } MCB Daycare. on Monday.

2. N/V : 12/11/25 & CBC/RFT/LFT.

Sanjana
Sr

1/11/25

- No Mouth ulcer
- 2% betadine gargels.
- Sitz bath
- Onsepton
- Personal hygiene
- No fresh complaints.

BP - 109/69 mmHg
Pulse - 112 b/m

B.P percentiles

5% →	84	48
50% →	96	59
90% →	105	66
95% →	108	70
99% →	114	75
99%+5 →	119	80

205 - monosomy

Reading on 3/11/25 10 Am → 10mm

Δ = Metastatic Neuroblastoma (HR)

1/11/25

Post cycle 2 (course A) 21/10 - 22/10/25

Currently, No complaints,

Due for cycle 2 (course B) →

CBC = 10.8 (9510, 2.42L)

LFT/RFT = (N)

Adv:- ① To review after on next Saturday 9:00AM (8/11/25)

Consultations

22/10/25

Profile discussion:

① urine status

② RT registration

C/o cough x3 days

NO fever

Adv - urine status (homeopath)

- T. amlo 5mg ½ tab OD
- Syp. cetrizine (5mg/5ml) 5ml HS x 3 days
- Inj. CEF 70mg cc OD
  BSL 29/10/25
- Syp septran (40mg/5ml) 3.5ml BD alternate day
- To do CBC/RCFT/LFT → (RW) on 29/10/25
- Inj. Hep B 1ml deltoid IM 2 doses 1 month apart (20s)
- montoux
- Respiratory Panel → 6th floor RAK OPD.
- BT registration
- Blood donation

Junior SR

- Prior to each **bevacizumab administration**, patients must be **assessed for treatment-emergent adverse effects** to ensure safety and guide continued therapy.

CYCLE.1 – *DAY 0*

Investigations

CBC	Date	HB	TLC	PLT	ANC

Urea	Creatinine	OT	PT	ALP	Na	K	Ca	P

Drugs	D-1	D-2	D-3	D-4	D-5	D-6	D-7	D-8	D-9
Bevacizumab 1st dose	21/10								
Vincristine	21/10								
Carboplatin	21/10								
Etoposide	21/10	22/10							
G-CSF (6S/kg)			23/10	24/10	25/10	26/10	27/10	28/10	29/10

Prednisone (-)

CYCLE.2 – *DAY 10*

Investigations

CBC	Date	HB	TLC	PLT	ANC

Urea	Creatinine	OT	PT	ALP	Na	K	Ca	P

Drugs	D-1	D-2	D-3	D-4	D-5	D-6	D-7	D-8	D-9

S2SS4221 7/10 S2SS3649 4/10 (3/10)

अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग /Out Patient Department

स्वच्छ भारत एक कदम स्वच्छता की ओर

शरीरमाद्यं खलु

D IN HOSPITAL PREMISES

OPR-6

बाल चिकित्सा विभाग
UHID:10863448E
Dept No: 20250030026442
कमरा / Room C 216
Queue / संख्या F43
Unit-III, Paediatric,

सोम्या सोम्या / SOMYA SOMYA

D/O SANDEEP
4Y 4M 16D / F/(महिला)
Firozabad, BHARAUL., UTTAR PRADESH.
Pin:283203. INDIA
General Rs. 0
Follow Up Patient

बुध,शनि, Wed,Sat
Reporting: 10:14 31
01/10/2025

एकक/Unit
विभाग/Dep

पंजीकृत सं०/O.P.D. Regn. No.

आयु/ge

पता/Address

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
7/10	Abdominal mass ? evaluation
14yr	O/E: Vitals Stable
	→ P/A: (Rt) Abd mass @ Rt 5x4 cm firm / non-tender -
MD-NR	→ Adv: 07/10/25
	. BMA/BMBx date to be changed.
	. USG guided Bx — 3/10/25.
	. RL discussion — To be done.
HIV — NR.	. PET — 9/10/2025
- HBSAG — NR	- Danger signs explained
- ANTI HCV — (N)	- N/V in OPD — 08/10/25
BMA (13/10/25)	Shivani
Biopsy - RP (Report awaited)	SR
PET — CT	

अ॰ भा॰ आ॰ सं॰ अस्पताल/A.I.I.M.S. HOSPITAL
विभाग /Out Patient Department
अस्पताल के अन्दर धूम्रपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES

स्वच्छ भारत
एक कदम स्वच्छता की ओर

बाल शल्यचिकित्सा
UHID:108634486
Dept No. 20250220006659
सौम्या सौम्या / SOMYA SOMYA
D/O SANDEEP
4Y 5M 11D / F(महिला)
Firozabad, BHARAUL,, UTTAR PRADESH,
Pin 283203, INDIA
General Rs. 0
New Patient

कमरा / Room
G-31
Queue / संख्या N19
Unit-I, Paediatric Surgery OPD
Reporting: 08 31 5?
27/10/2025

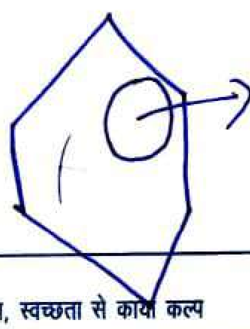
OPR-6

ब॰रो॰वि॰ पंजीकृत सं॰/O.P.D. Regn. No.

लिंग Sex	आयु Age	पता/Address

डॉ. ... गोयल, अपर आचार्य, बाल शल्य चिकित्सा

निदान/Diagnosis Metastatic NB.

दिनांक/Date	उपचार/Treatment
[redacted] 14.2 Kg	Pt ↓ Paeds Onco.
	6 month back parents Noticed swelling in Ⓛ
	shown to Paeds onco where child was evaluated & found to have Retroperitoneal mass c̄ IDRF ⊕.
	↓
	Started on cycle 1 Rapid COJEC chemo on 21/10/25.
	O/E  → 5x5cm mobile mass non tender.

Appointment on.......
for.......
Deptt./Clinic.......

Division of Pediatric Oncology, Department of Pediatrics

AIIMS, New Delhi

High Risk Neuroblastoma Protocol

Intervention Arm[Conventional chemotherapy (RAPID COJEC) + Bevacizumab]

Name Somya Age 4y 4m Sex F

Weight 14kg Height 10cm BSA 0.62 m² UHID-No. 10863486 POC-No.....

Imaging	Date/ imaging no if applicable	Findings
CT/MRI		→ Retroperitoneal lesion, enhancement IDRF, focal calcification.
CT Chest		
PET CT		→ multiple RP lymph node, paraaortic lymph node +ve, Thoracic lymph node +ve bone uptake +ve, multiple marrow lesions in vertebrae femur tibia clavicle (R) scapula
MIBG		
Bone scan		

Image-defined risk factors (IDRF)	Yes	No

BMA	Adequate / inadequate	Involved	Not involved	Not done	Remarks

BM Biopsy	Adequate / inadequate	Involved	Not involved	Not done	Remarks

Tissue biopsy report	Account no	PHOX 2B +ve, small round cell, poorly differentiated neoplasm, fibrillary cytoplasm, chromatin -ve, synaptophysin +ve.

BM Biopsy					

CKID - 110326

अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग /Out Patient Department

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

बाल चिकित्सा विभाग
UHID:108634486
ABHA:
somya_somya250920@abdm
Dept No: 20260030026442

सोम्या सोम्या / SOMYA SOMYA

D/O SANDEEP
4Y 4M 9D / F(महिला)
Firozabad, BHARAUL., UTTAR PRADESH.
Pin 283203, INDIA

General Rs 0

New Patient

कमरा / Room C-216
Queue / पंक्ति N3
Unit-I, Paediatric.

पंजीकृत सं/O.P.D. Regn. I

आयु Age

लिंग/सेक्स

Reporting: 07:39:18
25/09/2025

OPR-6

SP-041025002 108634486
SOMYASOMYA

SLB-041025003 108634486
SOMYASOMYA

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
29/9/25	Seen @ out - appointment abd distension since 5 mont. → no fever no vomitting no koch is comact. urine VMA → 25.9 urine VMA → 86.33. HR → 100. RR → 26 PP +++/++ RS: AB = BS clear CVS: S1S2 heard PA: liver @, lumbar mass. CNS. UCS 15/15. CBC 15020 11.6 330 4.94 RFT/LFT → @ LDH → 223 Sodium - 59.4 PT INR/APTT → @
BP → 118/76 mmHg	

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से कायाकल्प

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)

मेरा अस्पताल My Hospital
meraaspatal.nhp.gov.in

अ० भा० आ० सं० अस्पताल/A.I.M.S. HOSPITAL
वहिरंग रोगी विभाग /Out Patient Department
PROHIBITED IN HOSPITAL PREMISES

बाल चिकित्सा विभाग
UHID:108634486
Dept No: 20250030028371
कमरा / Room C-210
Queue / लेखा N2
Unit: POC.
OPR-6

सोम्या सोम्या / SOMYA SOMYA
D/O SANDEEP
4Y 4M 28D / F(अविवाहित)
Firozabad, BHARAUL, UTTAR PRADESH
Pin 283203 INDIA
General Rs 0
New Patient
Reporting: 02:18:25 13/10/2025
बाह्यरोगि पंजीकृत सं०/O.P.D. Regn. No.
आयु Age
LH13102502259 108634486
LC1310253186 108634486
SOMYASOMYA

निदान/Diagnosis

दिनांक/Date 14.4.25

उपचार/Treatment

Suspected Metastatic Neuroblastoma

- BMBx: Infiltration by tumour cells
- BMA: Infiltration by tumour cells

Advice:
→ Oncopath Discussion — Mass Biopsy / BMBx + BMA

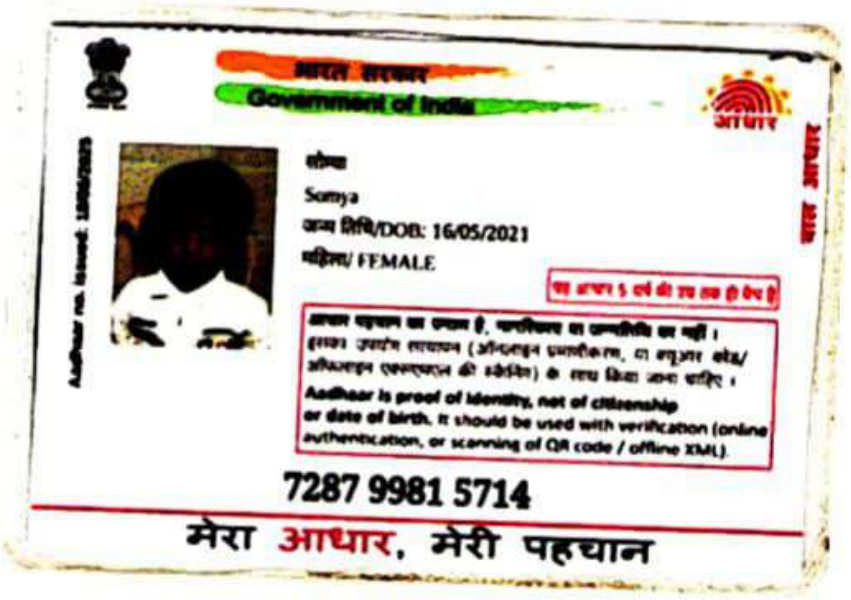
RC Discussion:
Retroperitoneal lesion enhancement (+)
IDRF
M/focal calcification
↓
NBE suspected

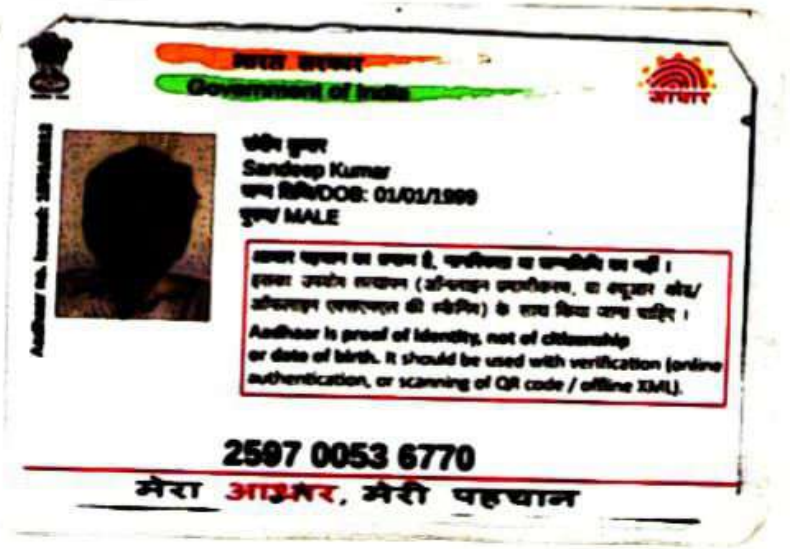
→ PET Discussion
→ No Stent + COJEC after discussion
→ N/V in OPD on 15/10/25 9:00am.
→ CBC/RFT/LFT


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India
आधार
पता:
द्वारा: संदीप, भारौल, भारौल, फिरोजाबाद,
उत्तर प्रदेश - 283203
Address:
C/O: Sandeep, Bharaul, PO: Bharaul, DIST:
Firozabad,
Uttar Pradesh - 283203
7287 9981 5714
VID : 9123 1009 6883 6099
1947 | help@uidai.gov.in | www.uidai.gov.in


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India
AADHAAR
पता:
C/O राजू, भारौल, भारौल, फिरोजाबाद,
उत्तर प्रदेश - 283203
Address:
C/O Raju, Bharaul, PO: Bharaul, DIST:
Firozabad,
Uttar Pradesh - 283203
2597 0053 6770
1947 | help@uidai.gov.in | www.uidai.gov.in


भारत निर्वाचन आयोग
ELECTION COMMISSION OF INDIA
NOD3177369
Name : SANDEEP KUMAR
Father's Name : RAJU
लिंग / Gender : पुरुष / Male
Date of Birth / Age : 01-01-1999


भारत सरकार
Government of India
आधार
Sonya
जन्म तिथि/DOB: 16/05/2021
महिला/ FEMALE
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).
7287 9981 5714
मेरा आधार, मेरी पहचान


भारत सरकार
Government of India
आधार
Sandeep Kumar
DOB: 01/01/1999
MALE
Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).
2597 0053 6770
मेरा आधार, मेरी पहचान