



OCEAN WELFARE FOUNDATION
LET'S MAKE A CHANGE TOGETHER



Date: 29.05.2026

Patient Registration Form For Medical Treatment

OCEAN WELFARE FOUNDATION

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Details

Sr.	Particulars	Details
1	Patient Name	Master Satyam
2	Age/Sex	13 Years
3	Father Name	Mr. Umesh Chand
4	Occupation	Labour
5	Address	Narora Bharipur, Giloli, Gonda, Uttar Pradesh
6	Hospital Name	AIIMS New Delhi UHID: 108838183
7	Nature Of Disease	Mucinous adenocarcinoma (colorectal cancer)
8	Required Treatment	Targeted Therapy + Immuno Therapy
9	Estimated Cost	700000/- Secen Lakh Only
10	Summary	Master Satyam (13Year old Boy) is a Cancer patient and needs Targeted Therapy + Immuno Therapy. He belongs to a poor family, his father is a Labour, earns very low income. Treatment is very tough to bear for his family, so his father requested OCEAN WELFARE FOUNDATION for financial support.
11	Signature Of Family	Authorised Signatory & Seal
		
		

OCEAN WELFARE FOUNDATION

Regn. No.: 70/357-394/3344/2023

Office No. 202, D-15, Sector-6, Noida, UP-201301

Phone : 01204091619, Email : support@owf.org.in, Website : www.owf.org.in



सेवा में,

श्रीमान संबोधक
OCEAN WELFARE FOUNDATION
LET'S MAKE A CHANGE TOGETHER

ओशियन वेलफेयर संस्था

नोयडा, गोलुमकुल नगर, 201008

विषय :- इलाज हेतु आर्थिक सहायता पत्र

महोदय,

स्वतंत्र निवेदन है कि मेरा नाम उमेश चन्द्र है। मेरा एक पुत्र है, जिसका नाम सलय है, जिसकी उम्र 13 साल है। मेरे बेटे केपेट में कैंसर है, उसका इलाज दिल्ली के रुग्ण में चल रहा है। उसके इलाज का खर्च 7 लाख बताया है। मैं एक मजदूर हूँ। मैं इतना पैसे देने के अक्षम हूँ। मेरी आपसे विनती है कि कृपया मेरे बेटे का इलाज के लिए मुझे यह धनराशि देने में सहायता करें। मैं और मेरा परिवार आपका अर्पण शर्णा रहेगा।

निवेदक

उमेश चन्द्र

दिनांक

29-05-2026



पुत्र :- सलय

उम्र :- 13 साल

खर्च :- 7 लाख

अस्पताल :- रुग्ण, नई दिल्ली

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DEPARTMENT OF PEDIATRICS
(DIVISION OF PEDIATRICS ONCOLOGY)
ALL INDIA INSTITUTE OF MEDICAL SCIENCES

Ansar, Noida, New Delhi - 110029

ESTIMATE CERTIFICATE

Ref. No. _____

TO WHOM IT MAY CONCERN

Date: 03/01/2026

This is Certify that Shri/Smt/Kum. Satyam Aged 13y M

Sex: M UHID: 108838183 787013475 Omish Chandra is getting

treatment in Division of Oncology of Department of Pediatrics AIIMS vide for diagnosis: MUCINOUS ADENOCARCINOMA (METASTASIS)

It is proposed to treat the patient with Chemotherapy/ Bone Marrow Transplantation/Other Therapy
The approximate cost of the total treatment amount of Rupees.....
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.

for
only fund
agency of
only

1. Chemotherapy	TARGETED THERAPY/ IMMUNE THERAPY
2. Antibiotics/ Antifungal	
3. Blood Component kits and tests	5,00,000.00
4. Investigations	+ 3,00,000.00
5. Room Charges for Isolation	
6. Post transplant immune suppression	
7. Miscellaneous charges	

Total Cost: Rs 8,00,000.00
(In Words) Eight Lacs only

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 [IFSC CODE: SBIN0001536]
- AIIMS P.M.O. PATIENTS A/c 37671405137
- AIIMS DELHI AROGYA KOSH A/c 33477690609

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

(Name & Signature of Consultant with stamp)
03/01/2026
Dr. Jagdish Prasad Meena
अपर आयुर्व / Additional Professor
काल चिकित्सा अंकावली / Pediatric Oncology
आरोग्य चिकित्सा विभाग / Dept. of Pediatric
सि. आर. नई दिल्ली-2011029, AIIMS, New Delhi

(Counter Signature of HOD with stamp)
[Signature]
[Stamp]



दिनांक
Date

28/05/2026

DR. B.R.A. IRCH AHMS, NEW DELHI
IRCH No. 361164
Clinic PAC & Palliative Care Clinic
Deptt. ONCO-ANAESTHESIA AND PALLIATIVE MEDICINE(OAPM)
General

Reg. Date-13/01/2026

Clinic No. 81993/2026



UHID-108838183

नाम सत्यम सत्यम

Name SATYAM

S/O- UMESH CHANDRA CHAURASIYA

Sex/Age M/13Y

Room 60 (Shift Morning)

Address NARAURA BHARRAPUR GILAULI DIST. GONDA, UTTAR
PRADESH Pin 271202, INDIA

Mets to omentum, mesentery, Subcapsular Liver
deposit)

PIEL + RA 25 I/V/O

Ongoing Chemo :- Submit 40K in hospital

Req. 16 SDP KITS during chemo.

+

8 Pegfilgrastim Inj. (Pegstim Brand)

+

Dry Conger x 2 DAYS

Adv :- Syf Ibuprofen Plus Sml TDS (1-1-1)

:- Tab. CABA 100mg HS (x-x-1)

DR. ARPANI GARG
Senior Lecturer (Palliative Care)
Dept. of Oncology, IRCH & PAC, AHMS, New Delhi



महोदय/महोदया श्री समान, मुख्यमंत्री

विवेकाधीन कोष से आर्थिक सहायता रू

100000 की स्वीकृति शासनादेश

सं.एफ-660 / मु.म.का-लेखा-2(वि.को.) /

2026 दिनांक 05/02/2026 द्वारा ई-पेमेंट

संख्या-/XUTR/RBISH00341773161

दिनांक 05/02/2026 के माध्यम से

अस्पताल एम्स सीटी पीटी एकाउन्ट को भेज

दी गयी है, जिसकी संदर्भ संख्या

14118326000069 तथा अस्पताल

पंजीकरण संख्या 108838/83 है। अधिक

जानकारी हेतु वेबसाइट

jansunwai.up.nic.in पर जायें।



27/5/26.

No mouth ulcers. Child was receiving treatment
2% betadine gargle. on our division,
sitz bath. received 2 cycles of CAPOX

Personal Hygiene then surgery was done -
No fresh Complaint colectomy + omentectomy +
12.10 $\frac{5.80}{2.66}$ (20512 (27/5/26)) Peritonectomy

↓
but attendants went to
Medical Oncology & ^{child} received
FOLFOX

Now the file is being closed
after discussion C Prof Dr
R Seth Maam

Anjali
26



25/1/26

CBC

RFT/CT

PTNR ATTT

OCEAN WELFARE FOUNDATION
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ct same

no complaint

vital stable

28/1/26

28/1/26

Stage IV IC Adeno carcinoma

on cycle I Capox

Onco path :- MMRD → (N); Retained PMS-2, MSH-6
MLH-1, MSH-2.

23/1/26

12.7 $\frac{10800}{6410}$ 5.84L

NO side-effects

D13 of Capox today.

RFT, LFT - (N)

INR = 0.93

plan

- ① N/A 04/02/26 = CBC, LFT, RFT
- ② T/L P-septium 80mg Alternate day.
- ③ Stop Capecitabine after tomorrow

Shani
Dr. Pr.



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