

**SHIV BABU (09 YEARS)**

**UHID 108227809**



**Severe Aplastic Anemia (SAA)  
Blood Cancer**

[www.savioursfoundation.org](http://www.savioursfoundation.org)



LC1007251702 108227809

CPC-100725023 108227809



SHIVBABU

अस्पताल / A.I.I.M.S. HOSPITAL

ग / Out Patient Department

ना है / SMOKING IS PROHIBITED IN HOSPITAL PREMISES



OPD Monday / Wednesday / Friday 3rd Floor, OPD Block, AIIMS OPR-6

AA 5113 / 2025

कमरा / Room C-512

Queue / संख्या F14

Unit-I, Aplastic Anemia Clinic (AA),

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No.

पता / Address

आयु Age

शुक्र



Reporting: 10:57:19 04/07/2025

रुधिर विज्ञान

UHID:108227809



Dept No: 20250240137034 Clinic No: 2025/AA/5113

शिव बाबु / SHIV BABU

S/O VINOD KUMAR SAHU 8Y 3M 2D / M/(पुरुष) E32 287 SONIA VIHAR, DELHI, Pin:0, INDIA

General Rs. 0

Follow Up Patient

निदान / Diagnosis

उपचार / Treatment

दिनांक / Date

8/8

SAA



SAVIOUR FOUNDATION

CTG: 46XX Stress CTG: Normal HIV - Negative

6/6 match = sister T/c Class II

- ① C. CoA 75mg BD
- ② T. EPAG 75mg OD BRF
- ③ T. ME12 OD
- ④ T. Tranexa 500mg 1/2 tab TDS
- ⑤ Fu - 2m = Fresh CBC / SEKFI/PI

Mehera

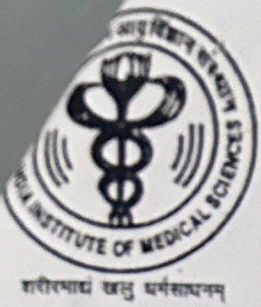
शरीरमाद्यं खलु धर्मसाधनम्



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प 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)



www.savioursfoundation.org



DEPARTMENT OF HEMATOLOGY

हिमेटोलोजी विभाग

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

अखिल भारतीय आयुर्विज्ञान संस्थान

ANSARI NAGAR, NEW DELHI - 110029

अंसारी नगर, नई दिल्ली-११००२९

TELEPHONE : 011-26594670

Date.....

दिनांक .....

**TO WHOM IT MAY CONCERN**

This is to certify that

Patient Name Shiv Babu

Age : 9 Gender : M

S/o/D/o/W/o Vinod Kumar

UHID No. 108227809

is suffering from Diagnosis Severe Aplastic Anemia

and is under treatment from Department of Hematology, AIIMS.

It is proposed to treat the patient with Chemotherapy/Immunomodulation/Bone marrow transplantation/Other therapy. This treatment is potentially life saving for a serious hematological illness. The family is poor and cannot afford the treatment.

The approximate cost of the total treatment amount to Rs. ₹ 15,00,000 (fifteen lakh only). An approximate breakdown is given under the subheadings listed below. The cost under one subheading may exceed the projected estimate and the excess would then be used from the other subheading. (Bone Marrow Transplant)

1. Chemotherapy	₹ 5,00,000
2. Antithymocyte globulin	
3. Antibiotics	₹ 2,00,000
4. Blood component kits and tests	₹ 2,00,000
5. Growth factors	₹ 1,00,000
6. Room charges for Isolation	₹ 2,00,000
7. Post Transplant Immunosuppression	₹ 2,00,000
8. Miscellaneous charges	₹ 1,00,000
9. Total	₹ 15,00,000 (fifteen lakh only)

This certificate is being issued to avail financial assistance only. Financial assistance may be given on humanitarian grounds. The cheque is to be issued in favour of Patient Treatment Account, AIIMS, New Delhi

Date : 28/4/15

mehae  
SR

वरिष्ठ रेजिडेंट : Senior Resident  
रुधिर विज्ञान विभाग / Deptt of Hematology  
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली - 110029

Dr. Pradeep Kumar  
Signature  
सह-आचार्य / Associate Professor  
रुधिर विज्ञान विभाग / Dept. of Hematology  
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली / A.I.I.M.S., New Delhi-29

**ESTIMATE CERTIFICATE**

(For Availing Financial Assistance through RAN/HMDG)

This is to certify that Mr/Mrs/Ms Shiv Babu Age 08 Sex (M/F) ✓ UHID 108227809  
is suffering from (complete diagnosis) Severe Aplastic Anemia  
Sanu

The patient is currently under treatment of Dr. \_\_\_\_\_ (designation),  
\_\_\_\_\_ (Department) Hematology The patient will be unable to afford  
the cost of the treatment of the aforementioned disease.

Assistance is being sought for the following through the existing RAN packages:

S.NO.	Procedure Code (As given in the Package Master)	Name of the Procedure

Details of medicines/consumables/procedure not available in the Package Master, i.e. in addition to the standard procedure as above but are required for treatment of patient and are as follows:

S.NO.	Detail of Medicine/Consumable/Procedure (Not mentioned/included in package master)	Approximate Cost (to be mentioned as approximate cost actually limited to one month, and approximate monthly cost thereafter)

Name and Signature  
(Head of the Department)

Name and Signature  
(Treating Faculty)

H.O.D Sign & Stamp

Medical Superintendent

Treating Doctor  
Sign & Stamp

M.s ma'am  
sign & stamp



All India Institute of Medical Sciences, New Delhi  
 Department of Transplant Immunology & Immunogenetics  
 Tel: 26594638, 26594446

HLA No: 24855

UHID: 108287809

CLINICAL IMMUNOGENETICS LABORATORY

**HISTOCOMPATIBILITY TESTING REPORT**

Patient: Shiv Babu Hospital : AIIMS/Hematology  
 Diagnosis: Aplastic Anemia Physician I/C : Dr. Tulika Seth

**HLA CLASS I**

Date : 05/05/2025

Time: 10:25 AM

Name Age/Sex	Technique#	HLA-A	HLA-C	HLA-B
Shiv Babu Sahu 9/M	PCR-SSO	*11	*03	*56
		*33	*04	*58
Vinita 10/F	PCR-SSO	*11	*03	*56
		*33	*04	*58
Sanju Devi 32/F	PCR-SSO	*02	*03	*55
		*33	*03	*58

**#PCR-SSO low resolution HLA typing**

**Remarks:**

1. The patient Shiv Babu Sahu shares six out of six HLA-alleles with Vinita and three out of six HLA-alleles with Sanju tested at HLA-class I (A, C & B) region.
2. DNA based HLA-class II (DRb1, DQA1 & DQB1) region testing for patient Shiv Babu Sahu and Vinita is to be performed.

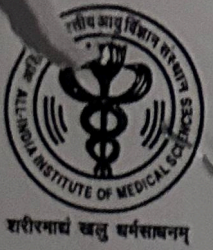
Date: 11/06/2025  
 Time: 03:55 PM

Scientist

Faculty  
 (Dr. Uma Kanga)

16/06/25  
 Head of the Department  
 (Prof. D. K. Mitra)

\*Please quote your HLA no. for any further enquiries



NABL Accredited Testing Laboratory  
**DEPARTMENT OF MICROBIOLOGY**  
 National HIV Reference Laboratory, Room No-2062/2103  
 2<sup>nd</sup> Floor, Teaching Block, Ph: 011-26594340/3198  
 AIIMS, New Delhi- 110029



Certificate No. MC-2472

**HIV TEST REPORT FORM**

Name and address of ICTC center: AIIMS (form to be filled in duplicate)

NAME: Surname BABY Middle Name - First Name SMIY

Gender:  M /  F /  TG Age: 09 years PID: GCSAICTCDLSOU0012 515367 Lab ID 25115367

Date and time blood drawn: 24/06/25 (DD/MM/YY) 03:44 (HH:MM)

**Test Details:**

Specimen type :  Serum /  Plasma /  Whole Blood Specimen Quality:  Good /  Compromised /  Outside Collection

Date and time specimen tested: 25/06/25 (DD/MM/YY) 02:44 (HH:MM)

**Note:**

- Column 2 and 3 to be filled only when HIV 1 & 2 antibody discriminatory test(s) used
- No cell has to be left blank; indicate as NA where not applicable.

Column 1	Column 2	Column 3	Column 4
Name of HIV test Kit	Reactive/Nonreactive (R/NR) for HIV-1 antibodies	Reactive/Nonreactive (R/NR) for HIV-2 antibodies	Reactive/Nonreactive (R/NR) for HIV antibodies
<b>COMB AIDS</b> Test I:	-	-	<b>NON REACTIVE</b>
Test II:	-	-	-
Test III:	-	-	-

**Interpretation of the result: Tick(✓) relevant**

- Specimen is Negative for HIV antibodies
- Specimen is Positive for HIV-1 antibodies
- \*Specimen is Positive for HIV antibodies (HIV 1 and HIV 2; or HIV 2 alone)
- Specimen is Indeterminate for HIV antibodies. Collect the fresh sample in two-four weeks.

\*Confirmation of HIV 2 sero-status at identified referral laboratory through ART centers.

Name & Signature  
 Laboratory Technician

*[Signature]*  
 20/07/25  
 -----End of report-----

*[Signature]*  
 Name & Signature  
 Laboratory In-charge  
 25/06/25

# RATION CARD

खाद्य एवं उपभोक्ता संरक्षण विभाग  
Food and Consumer Protection Department,  
Government of Bihar.

बिहार सरकार  
GOVERNMENT OF BIHAR

## Search Your Ration Card

● Rural Urban [ Note: शहरी क्षेत्र में कार्ड 21 अंक का है। सर्च करते समय 20 अंक ही डालें (9वां अंक छोड़ कर डालें)]

District

Madhubani(05)

Ration Card Number

102070109722065000000691

Search

Ration Card No. : 102070109722065000000691								
District : Madhubani(05)		Subdivision : JHANJIHARPUR	Block : Jhanjharpur	EPDS FPS CODE : 120700100031		Scheme : PHH		No. of Units : 4
Sl No.	MemberId	Member Name	Father / Husband Name	Gender	Age	Aadhar No.		Status
1	10207010972206500000069102	SHIV BABU SAHU	BINOD SAHU	M	8	XXXXXXXX9954		Active
2	10207010972206500000069104	VINITA KUMARI	VINOD SAH	F	9	XXXXXXXX3236		Active
3	10207010972206500000069101	SANJU DEVI	VINOD KUMAR SAHU	F	30	XXXXXXXX2340		Active
4	10207010972206500000069103	VINOD KUMAR SAHU	YADUBIR SAHU	M	33	XXXXXXXX2238		Active

\* Ration Card Found...!

बिहार सरकार साहू

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