
67
BLOOMING LIVES FOUNDATION


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BLOOMING LIFE FOUNDATION

SYNERGY LAB
SPL SYNERGY PATH LAB (OPC) PRIVATE LIMITED
Compassion | Quality | Trust
An ISO 9001:2015 Certified Co.
Certification No. : 23MEQPO25

Address : 663, Guru Teg Bahadur N
Near Guru Ravidass Chowk, Jalandhar
Lab : 0181-2463300, Mobile : +91-769
Whatsapp No. : +91-62802-39
Website : www.synergypathlab

nt Name : MR. DIVANSH DOGRA
/ Gender : 5 Years / Male
ent ID : IPD - 79161
ganization : ANKUR HOSPITAL
mple Collected At : ANKUR HOSPITAL
port Status : Final

Referral : DR GURDEV CHOWDHARY
Collection Time : Jul 30, 2025, 04:16 p.m.
Receiving Time : Jul 30, 2025, 04:19 p.m.
Reporting Time : Jul 30, 2025, 05:12 p.m.
Sample Processed At :SPL SYNERGY PA
PRIVATE LIMITED
Sample ID : 2013721125

vestigations	Result(s)			
bsolute Calculated				
bsolute Neutrophil Count	55.9	H	* 10^9/L	1.5-8.0
bsolute Lymphocyte Count*	50.33	H	* 10^9/L	6.0-9.0
Absolute Monocyte Count*	16.7	H	* 10^9/L	0.2-1.0
Absolute Eosinophil Count*	0.00	L	* 10^9/L	0.1-1.0
Absolute Basophils Count*	0.00	L	* 10^9/L	0.02-0.1
Immature granulocytes percent	0.2		%	0.0-1.0
Absolute Immature granulocytes	1.13	H	* 10^9/L	0.0-0.10
Method : VCSn Technology				
Platelet Count	5	L	10^3/ul	200-490
Method : Electrical Impedence				
Mean Platelet Volume (MPV)	10.9		fL	6.5-12.4
Method : Electrical Impedence				
PCT	0.04	L	%	0.2 - 0.5
Method : Calculated				
PDW	9.9		%	9.0 - 17.0
Method : Calculated				
P-LCR Platelet to large cell ratio	32.2			15 - 35
Method : calculation				
Immature Platelet Fraction	10.6	H	%	1 - 9
Method : Fluorescence flowcytometer				
Absolute immature platelet fraction	4.1		10^3/ul	3.4-18.4
Method : Fluorescence flowcytometer				
Reticulocyte, absolute count	11	L	* 10^9/L	30-100
Method : VCSn Technology				
Reticulocyte percent	0.77		%	0.5-2.0
Method : VCSn Technology				
Immature Reticulocyte fraction	58.5	H	%	1.6 - 12.1
Method : Flourescence flowcytometry				
Reticulocyte Hemoglobin content	25.6	L	pg	30 - 37.6
NRBC	00		/100WBC	0.0 - 2.0
Method : VCSn Technology				
Note	**Blast 87 %**			

Checked By : Sunil
Sample Type : Edta Wb

PBF

RBC Morphology
RBCs are reduced in number and are normocytic, macrocytic showing normochromia along with microcytic hypochromic cells.

WBC Morphology
TLC: Marked leucocytosis.
DLC:
Neutrophils:01%
Lymphocytes:09%

ELOPMING LIVES FOUNDATION

Patient Name : MR. DIVANSH DOGRA
Age / Gender : 5 Years / Male
Patient ID : IPD - 79161
Organization : ANKUR HOSPITAL
Sample Collected At : ANKUR HOSPITAL
Report Status : Final

Referral : DR GURDEV CHOWDHARY
Collection Time : Jul 30, 2025, 04:16 p.m
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Sample Processed At : SPL SYNERGY P
PRIVATE LIMITED
Sample ID : 2013721125

Investigations	Result(s)			
Sample Type : Serum	**CREATININE SERUM**			
Creatinine Method : Jaffe kinetic	0.31	L	mg/dL	0.32-0.59
Reference	Kit insert cobas- creat for c311			
Checked By : Tania				
Sample Type : Serum	**BLOOD UREA**			
Urea (Blood) Method : Urease /GLDH	18.5		mg/dL	11-39
Reference	Kit insert cobas- urea for c311			
Comments:				
Checked By : Tania				
Sample Type : Edta Wb	**ADVANCED CBC.**			
Hemoglobin (Hb) **Method : Cynmeth Photometric Measurement**	3.5	L	gm/dL	11.0-14.0
Erythrocyte (RBC) Count Method : Electrical Impedence	1.4	L	mil/cu.mm	4.0-5.2
Packed Cell Volume (PCV) Method : Calculated	13.3	L	%	34-40
Mean Cell Volume (MCV) Method : Electrical Impedence	95	H	fL	75-84
Mean Cell Haemoglobin (MCH) Method : Calculated	25.0		pg	24-30
Mean Corpuscular Hb Concn. (MCHC) Method : Calculated	26.3	L	gm/dL	31-37
Red Cell Distribution Width (RDW) Method : Electrical Impedence	18.3	H	%	11.6 - 14.0
RDW-SD	63.0	H	fL	39 - 46
Total Leucocytes (WBC) Count **Method : Electrical Impedence**	559.35	H	*10^3cell/cu.mm	5.0-15.0
Differential Count **Method : VCSn Technology**				15-55
Neutrophils	01	L	%	20-60
Lymphocytes	09	L	%	0-12
Monocytes	03		%	0 - 8
Eosinophils	00		%	0 - 1
Basophils	00			

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Certification No. : 22MEQP023

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Lab : 0181-2463300, Mobile : +91-76961-65796
Whatsapp No. : +91-62802-39901
Website : www.synergypathlab.com

Patient Name : MR. DIVANSH DOGRA
Age / Gender : 5 Years / Male
Patient ID : IPD - 79161
Organization : ANKUR HOSPITAL
Sample Collected At : ANKUR HOSPITAL
Report Status : Final

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Receiving Time : Jul 30, 2025, 04:19 p.m.
Reporting Time : Jul 30, 2025, 05:12 p.m.
Sample Processed At : SPL SYNERGY PATH LAB PRIVATE LIMITED
Sample ID : 201372125

Investigations	Result(s)

Sample Type : Edta Wb

PBF

RBC Morphology
RBCs are reduced in number and are normocytic, macrocytic showing normochromia along with microcytic hypochromic cells.

WBC Morphology
TLC: Marked leucocytosis.
DLC:
Neutrophils:01%
Lymphocytes:09%
Monocytes:03%
Eosinophils:00%
Blasts:87%

These blasts are medium to large in size with round to convoluted nuclei, open chromatin ,variably prominent nucleoli and scant cytoplasm.

Platelet
Marked thrombocytopenia.

Haemoparasites
Not seen.

Impression
Suggestive of Acute Leuckemia, likely Acute lymphoblastic leukemia(ALL).

Advise
Flow cytometry for exact typing, prognostication and further management.

Sample Type : Serum

SGPT/ALT

SGPT/ALT	9.2	U/L	5-40

Method : IFCC without P5P
Reference
kit insert cobas-sgpt for c311
Comments:

Checked By : Tania

Sample Type : Serum

CRP QUANTITATIVE

CRP (C-REACTIVE PROTEIN)	4.25	mg/L	0.0 - 6.0

Method : Immuno-turbidimetric

Comment

Checked By : Tania

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE& HOSPITAL, LUDHIANA

Hematopathology section,
Department of Pathology,
Christian Medical College & Hospital,
Ludhiana- 141 008, Punjab - Phone no. 0161-2115000, Extn: 5025(O), 5047(Lab.)
E-mail: hematopathologycmc@gmail.com

BONE MARROW REPORT

BM341/25

Name: **DEVANSH DOGRA** Unit no: **8211938** Age: **5 y** Sex: **M** Reporting Date: **05-Aug-25**

Referring Dr: Clinical Hematology Team Ward/OPD: **25A** Processing Date **31-Jul-25**

Bone Marrow procedure performed by: Mr. Inderjeet Singh Receiving Date: **31-Jul-25**

Clinical Details: Patient presented with complaints of fever since 1 month . On examination: Lymphadenopathy and hepatosplenomegaly present.

Complete Blood count

HGB (g/dl)	4.9	PLT(/µl)	56000
RBC(x10^6/ul)	2.04	ESR (mm in 1st hr)	21
HCT(%)	20.4	Retics(%)	0.2
MCV (fl)	99.7	Corrected Retic(%)	0.06
MCH(pg)	23.9	WBC (/µl)	442000
MCHC(g/dl)	24		
RDW-CV (%)	16.7		

Peripheral Blood Film

RBC: Anisopoikilocytosis+, macrocytes+, few macroovalocytes and elliptical cells. Predominantly normochromia.

WBC: Hyperleucocytosis with increase in blasts upto 97 %. The blasts are 14-18 microns in size with high N/C ratio, irregular nuclear margins, nuclear indentation in some, immature chromatin, inconspicuous nucleoli and scant to moderate amount of basophilic cytoplasm. No granules or Auer rods seen.

Platelet: Thrombocytopenia. Manual platelet count is approximately same as automated.

DLC:

Blast 97 %; Promyelocyte 0 %; Myelocyte 0 %; Metamyelocyte 0 %; Neutrophils 0 %; Eosinophils 0 %; Basophils 0 %; Lymphocytes 3 %; Monocytes 0 %; NRBC 0 /100WBC; 0 %;

Bone Marrow aspirate smear, BM No. BM341/25

Fragments:	Adequate
Quality:	Optimal
Cellularity:	Normocellular for age
Erythropoiesis	Depressed
Granulopoiesis:	Depressed
Megakaryopoiesis:	Depressed
Additional Feature:	There is increase in blasts upto 96% (average 94%). The blasts are 14-16 microns in size having high N/C ratio, immature chromatin, inconspicuous nucleoli, irregular nuclear margins and scant to moderate amount of basophilic cytoplasm. No granules or Auer rods seen.

Differential Count [aspirate] (%)

Blasts:	94	Plasma Cells:	0	Iron Stores:	Reduced
Promyelocytes:	0	Monocytoid Cells:	0		
Myelocytes:	0	Histiocytes:	0		
Metamyelocytes:	0	Mast Cells:	0		
Neutrophils:	0	NRBCs:	3		
Eosinophils:	0		0		
Lymphocytes:	3				

Trephine biopsy no. **SN-1726A/25**

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Measurement	2.5cm
Quality	Fair, fragmented biopsy mainly shows fibrocollagenous tissue and is mixed with marrow blood.
Cellularity	90%, hypercellular
Erythropoiesis	Depressed
Granulopoiesis	Depressed
Megakaryopoiesis	Depressed
Fibrosis	Inadequate for comments.
Additional Feature	There are sheets of blasts having high N/C ratio, irregular nuclear margins, immature chromatin and scant cytoplasm.

Clot section no.	**SN-1726B/25**
Measurement:	3x1.5x0.5cm
Quality:	Optimal
Cellularity:	Normocellular for age
Erythropoiesis	Depressed
Granulopoiesis:	Depressed
Megakaryopoiesis:	Depressed
Additional Feature:	There are sheets of blasts having high N/C ratio, irregular nuclear margins, immature chromatin and scant cytoplasm.

Opinion

Bone marrow aspirate is normocellular for age and shows increase in blasts upto 96% with depressed trilineage hematopoiesis.

In correlation with flowcytometry report (FCM 261/25), bone marrow features are consistent with B-cell Acute Lymphoblastic Leukemia (B-ALL).

Kindly correlate clinically.

Dr. Vandana Bhatti, MD
Professor

Dr. Saurabh Donald, MD
Associate Professor

Dr. Prabhjot Kaur, MD
Assistant Professor

Dr. Anugrah Joshi
Resident

Dr. Palak Gupta
Resident

Dr. Navjot Kaur
Resident

***** End of Report **BM341/25** *****

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

My Work Is For A King

Bill Summary

Ptn. No / IP No.	: 8211938 / 3094230	**Name**	: MAST DEVANSH DOGRA .
Age / Gender	: 5 Y / Male	**Mobile No.**	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	**Company**	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	**Dsch DtTm**	:
Adm / Disch Sts.	: Admitted	**Dsch Sts.**	: INTERIM BILL
Ward.	: WARD - 25 A		
Letter Pref.	:	**Hsp GST No.**	: 03AAATC2820L1Z4

Charge Summary

Charge	Billed Amt	UnBilled Amt	Total Amt
ADMISSION CHARGES	800.00	0.00	800.00
BED CHARGES ICU	7400.00	0.00	7400.00
BED CHARGES WARD AC	12000.00	0.00	12000.00
BIOCHEMISTRY	27520.00	0.00	27520.00
CARDIOLOGY	1670.00	0.00	1670.00
CLIN HAEM INV/MAT`RL CHARGES	2300.00	0.00	2300.00
CLIN HAEM PROCEDURE	6900.00	0.00	6900.00
COMMON SERVICES CHARGES	246.00	0.00	246.00
CSSD CHARGES	1060.00	0.00	1060.00
CT SCAN (RADIOLOGY)	1500.00	0.00	1500.00
CYTOLOGY	500.00	0.00	500.00
DIETRY CHARGES	5150.00	0.00	5150.00
DOCTOR FEES CHARGES	4600.00	0.00	4600.00
HAEMATOLOGY	4050.00	0.00	4050.00
HISTOPATHOLOGY	1000.00	0.00	1000.00
MEDGENOME	17500.00	0.00	17500.00
MEDICINES	-1861.50	0.00	-1861.50
MEDICINES	51066.81	0.00	51066.81
MICROBIOLOGY	4130.00	0.00	4130.00
MRI SCAN	8800.00	0.00	8800.00
NURSING CHARGES	5700.00	0.00	5700.00
OPHTHALMOLOGY CHARGES	250.00	0.00	250.00
PEADIATRICS CHARGES	940.00	0.00	940.00
ROUNDING OFF	-0.31	0.00	-0.31
STL CL. HAEMATO-ONCO	12900.00	0.00	12900.00
SURG.RESEARCH LAB	750.00	0.00	750.00
TRANSFUSION MEDICINE	38070.00	0.00	38070.00
TRANSFUSION MEDICINE CHAR	550.00	0.00	550.00
X-RAY (RADIOLOGY)	1450.00	0.00	1450.00
Total	**216941.00**	**0.00**	**216941.00**

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Bills Wise Summary

Bill Type	Bill No	Bill Date	Amt	Ammnd.Amt	Conc Amt	Stlmt Amt	Outstanding
Interim	5132272	11/08/2025	52477.00	0.00	0.00	0.00	52477.00
		Bill SubTotal:-	**52477.00**	**0.00**	**0.00**	**0.00**	**52477.00**
	BILLS OVERDUE ABOVE 72 HOURS :						
Interim	5131249	1/08/2025	98229.00	0.00	0.00	0.00	98229.00
Interim	5131459	4/08/2025	30509.00	0.00	0.00	0.00	30509.00
Interim	5131937	7/08/2025	35726.00	0.00	0.00	0.00	35726.00
		Bill SubTotal:-	**164464.00**	**0.00**	**0.00**	**0.00**	**164464.00**

Conc. / Relief / Pack. Relief Details

Type	Authority	Amt
	Total:-	

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

Bill Summary

	18211938 / 3094230	Name	: MAST DEVANSH DOGRA .
	: 5 Y / Male	Mobile No.	:
	: VILL*-JAMETA	Company	: -
	TEH-FATEHPURKANGRA, HP, INDIA		
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	Dsch DtTm	:
Adm / Disch Sts.	: Admitted	Dsch Sts.	:
Ward.	: WARD - 25 A		
Letter Pref.	:	Hsp GST No.	: 03AAATC2820L1Z4

Deposit Details

Deposit type	Reciept No	Reciept Dt	Reciept Amt
ADMISSION DEPOSIT	1136145	30/07/2025	2000.00
		Total:-	2000.00

Refund Details

Deposit type	Refund No.	Refund Date	Refund Amt
		Total:-	

Deposit Applied Details

Voucher No	Bill No	Applied Amt
	Total:-	

Settlement Details

Bill No	Voucher No	Cash Amt	Card Amt	Cheque Amt	Other Amt

Total Billed Amt	:	216,941.00
Total Unbilled Amt	:	0.00
Total Concession Amt	:	0.00
Total Settlement Amt	:	0.00
Balance Deposit	:	2,000.00
Net Payable Amt	:	214,941.00

For CHRISTIAN MEDICAL COLLEGE AND HOSPITAL

Authorized Signatory

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

Bill Summary

Ptn. No / IP No.	: 8211938 / 3094230	Name	: MAST DEVANSH DOGRA .
Age / Gender	: 5 Y / Male	Mobile No.	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	Company	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	Dsch DtTm	: INTERIM BILL
Adm / Disch Sts.	: Admitted	Dsch Sts.	:
Ward.	: WARD - 25 A		
Letter Pref.	:	Hsp GST No.	: 03AAATC2820L1Z4

Charge Summary

Charge	Billed Amt	UnBilled Amt	Total Amt
ADMISSION CHARGES	800.00	0.00	800.00
BED CHARGES ICU	7400.00	0.00	7400.00
BED CHARGES WARD AC	3600.00	0.00	3600.00
BIOCHEMISTRY	17700.00	0.00	17700.00
CARDIOLOGY	240.00	0.00	240.00
CLIN HAEM INV/MAT`RL CHARGES	900.00	0.00	900.00
CLIN HAEM PROCEDURE	1000.00	0.00	1000.00
COMMON SERVICES CHARGES	246.00	0.00	246.00
CSSD CHARGES	810.00	0.00	810.00
DIETRY CHARGES	1800.00	0.00	1800.00
DOCTOR FEES CHARGES	1800.00	0.00	1800.00
HAEMATOLOGY	4050.00	0.00	4050.00
HISTOPATHOLOGY	1000.00	0.00	1000.00
MEDGENOME	17500.00	0.00	17500.00
MEDICINES	-73.50	0.00	-73.50
MEDICINES	34945.73	0.00	34945.73
MICROBIOLOGY	3980.00	0.00	3980.00
NURSING CHARGES	2550.00	0.00	2550.00
PEADIATRICS CHARGES	940.00	0.00	940.00
ROUNDING OFF	-0.23	0.00	-0.23
STL CL. HAEMATO-ONCO	11200.00	0.00	11200.00
SURG.RESEARCH LAB	750.00	0.00	750.00
TRANSFUSION MEDICINE	13850.00	0.00	13850.00
TRANSFUSION MEDICINE CHAR	550.00	0.00	550.00
X-RAY (RADIOLOGY)	1200.00	0.00	1200.00
Total	128738.00	0.00	128738.00

Bills Wise Summary

Bill Type	Bill No	Bill Date	Amt	Ammnd.Amt	Conc Amt	Stlmt Amt	Outstanding
Interim	5131249	1/08/2025	98229.00	0.00	0.00	0.00	98229.00
Interim	5131459	4/08/2025	30509.00	0.00	0.00	0.00	30509.00
		Bill SubTotal:-	128738.00	0.00	0.00	0.00	128738.00

Conc. / Relief / Pack. Relief Details

Type	Authority	Amt
	Total:-	

Deposit Details

Deposit type	Reciept No	Reciept Dt	Reciept Amt
ADMISSION DEPOSIT	1136145	30/07/2025	2000.00
		Total:-	2000.00

Refund Details

Deposit type	Refund No.	Refund Date	Refund Amt
		Total:-	

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL

BROWN ROAD, LUDHIANA, 141008

Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

Bill Summary

Ptn. No / IP No.	: 8211938 / 3094230	Name	: MAST DEVANSH DOGRA .
Age / Gender	: 5 Y / Male	Mobile No.	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	Company	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	Dsch DtTm	:
Adm / Disch Sts.	: Admitted	Dsch Sts.	:
Ward.	: WARD - 25 A		
Letter Pref.	:	Hsp GST No.	: 03AAATC2820L1Z4

Deposit Applied Details

Voucher No	Bill No	Applied Amt
	Total:-	

Settlement Details

Bill No	Voucher No	Cash Amt	Card Amt	Cheque Amt	Other Amt

Total Billed Amt	:	128,738.00
Total Unbilled Amt	:	0.00
Total Concession Amt	:	0.00
Total Settlement Amt	:	0.00
Balance Deposit	:	2,000.00
Net Payable Amt	:	126,738.00

For CHRISTIAN MEDICAL COLLEGE AND HOSPITAL

Authorized Signatory

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

Bill Summary (DUPLICATE)

Ptn. No / IP No.	: 8211938 / 3094230	**Name**	: MAST DEVANSH DOGRA .
Age / Gender	: 5 Y / Male	**Mobile No.**	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	**Company**	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	**Dsch DtTm**	: INTERIM BILL
Adm / Disch Sts.	: Admitted	**Dsch Sts.**	:
Ward.	: WARD - 25 A		
Letter Pref.	:	**Hsp GST No.**	: 03AAATC2820L1Z4

Charge Summary

Charge	Billed Amt	UnBilled Amt	Total Amt
ADMISSION CHARGES	800.00	0.00	800.00
BED CHARGES ICU	7400.00	0.00	7400.00
BIOCHEMISTRY	12410.00	2910.00	15320.00
CARDIOLOGY	240.00	0.00	240.00
COMMON SERVICES CHARGES	0.00	123.00	123.00
CSSD CHARGES	610.00	0.00	610.00
DIETRY CHARGES	450.00	450.00	900.00
DOCTOR FEES CHARGES	600.00	0.00	600.00
HAEMATOLOGY	3720.00	0.00	3720.00
HISTOPATHOLOGY	1000.00	0.00	1000.00
MEDGENOME	17500.00	0.00	17500.00
MEDICINES	22629.29	2973.95	25603.24
MICROBIOLOGY	3980.00	0.00	3980.00
NURSING CHARGES	1200.00	0.00	1200.00
PEADIATRICS CHARGES	940.00	0.00	940.00
ROUNDING OFF	-0.29	0.00	-0.29
STL CL. HAEMATO-ONCO	11000.00	200.00	11200.00
SURG.RESEARCH LAB	750.00	0.00	750.00
TRANSFUSION MEDICINE	12150.00	0.00	12150.00
TRANSFUSION MEDICINE CHAR	550.00	0.00	550.00
X-RAY (RADIOLOGY)	300.00	0.00	300.00
Total	**98229.00**	**6656.95**	**104885.95**

Bills Wise Summary

Bill Type	Bill No	Bill Date	Amt	Ammnd.Amt	Conc Amt	Stlmt Amt	Outstanding
Interim	5131249	1/08/2025	98229.00	0.00	0.00	0.00	98229.00
		Bill SubTotal:-	**98229.00**	**0.00**	**0.00**	**0.00**	**98229.00**

Conc. / Relief / Pack. Relief Details

Type	Authority	Amt
	Total:-	

Deposit Details

Deposit type	Reciept No	Reciept Dt	Reciept Amt
ADMISSION DEPOSIT	1136145	30/07/2025	2000.00
		Total:-	**2000.00**

Refund Details

Deposit type	Refund No.	Refund Date	Refund Amt
		Total:-	

Deposit Applied Details

Voucher No	Bill No	Applied Amt
	Total:-	

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

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Ptn. No / IP No.	: 8211938 / 3094230	Name	: MAST DEVANSH DOGRA .
Age / Gender	: 5 Y / Male	Mobile No.	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	Company	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	Dsch DtTm	:
Adm / Disch Sts.	: Admitted	Dsch Sts.	:
Ward.	: WARD - 25 A		
Letter Pref.	:	Hsp GST No.	: 03AAATC2820L1Z4

Settlement Details

Bill No	Voucher No	Cash Amt	Card Amt	Cheque Amt	Other Amt

Total Billed Amt	:	98,229.00
Total Unbilled Amt	:	6,656.95
Total Concession Amt	:	0.00
Total Settlement Amt	:	0.00
Balance Deposit	:	2,000.00
Net Payable Amt	:	102,885.95

For CHRISTIAN MEDICAL COLLEGE AND HOSPITAL

Authorized Signatory

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

Bill Summary

Ptn. No / IP No.	: 8211938 / 3094230	Name	: MAST DEVANSH DOGRA
Age / Gender	: 5 Y / Male	Mobile No.	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	Company	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	Dsch DtTm	: INTERIM BILL
Adm / Disch Sts.	: Admitted	Dsch Sts.	:
Ward.	: WARD - 25 A		
Letter Pref.	:	Hsp GST No.	: 03AAATC2820L1Z4

Charge Summary

Charge	Billed Amt	UnBilled Amt	Total Amt
ADMISSION CHARGES	800.00	0.00	800.00
BED CHARGES ICU	7400.00	0.00	7400.00
BED CHARGES WARD AC	7200.00	0.00	7200.00
BIOCHEMISTRY	24420.00	0.00	24420.00
CARDIOLOGY	1670.00	0.00	1670.00
CLIN HAEM INV/MAT`RL CHARGES	1500.00	0.00	1500.00
CLIN HAEM PROCEDURE	4150.00	0.00	4150.00
COMMON SERVICES CHARGES	246.00	0.00	246.00
CSSD CHARGES	910.00	0.00	910.00
CYTOLOGY	500.00	0.00	500.00
DIETRY CHARGES	3350.00	0.00	3350.00
DOCTOR FEES CHARGES	3000.00	0.00	3000.00
HAEMATOLOGY	4050.00	0.00	4050.00
HISTOPATHOLOGY	1000.00	0.00	1000.00
MEDGENOME	17500.00	0.00	17500.00
MEDICINES	-91.50	0.00	-91.50
MEDICINES	43899.56	0.00	43899.56
MICROBIOLOGY	3980.00	0.00	3980.00
NURSING CHARGES	3900.00	0.00	3900.00
OPHTHALMOLOGY CHARGES	250.00	0.00	250.00
PEADIATRICS CHARGES	940.00	0.00	940.00
ROUNDING OFF	-0.06	0.00	-0.06
STL CL. HAEMATO-ONCO	12240.00	0.00	12240.00
SURG.RESEARCH LAB	750.00	0.00	750.00
TRANSFUSION MEDICINE	18900.00	0.00	18900.00
TRANSFUSION MEDICINE CHAR	550.00	0.00	550.00
X-RAY (RADIOLOGY)	1450.00	0.00	1450.00
Total	**164464.00**	**0.00**	**164464.00**

Bills Wise Summary

Bill Type	Bill No	Bill Date	Amt	Ammnd.Amt	Conc Amt	Stlmt Amt	Outstanding
Interim	5131459	4/08/2025	30509.00	0.00	0.00	0.00	30509.00
Interim	5131937	7/08/2025	35726.00	0.00	0.00	0.00	35726.00
		Bill SubTotal:-	**66235.00**	**0.00**	**0.00**	**0.00**	**66235.00**
	BILLS OVERDUE ABOVE 72 HOURS :						
Interim	5131249	1/08/2025	98229.00	0.00	0.00	0.00	98229.00
		Bill SubTotal:-	**98229.00**	**0.00**	**0.00**	**0.00**	**98229.00**

Conc. / Relief / Pack. Relief Details

Type	Authority	Amt
	Total:-	

BLOOMING LIVES FOUNDATION

CHRISTIAN MEDICAL COLLEGE AND HOSPITAL
BROWN ROAD, LUDHIANA, 141008
Phone No. : 91-161-2115000. Email : care@cmcludhiana.in

Bill Summary

Ptn. No / IP No.	: 8211938 / 3094230	Name	: MAST DEVANSH DOGRA .
Age / Gender	: 5 Y / Male	Mobile No.	:
Address	: VILL*-JAMETA TEH-FATEHPURKANGRA, HP, INDIA	Company	: -
Doctor	: DR. TEAM CLINICAL HAEMATOLOGY		
Adm DtTm	: 30/07/2025 11:10 PM	Dsch DtTm	:
Adm / Disch Sts.	: Admitted	Dsch Sts.	:
Ward.	: WARD - 25 A		
Letter Pref.	:	Hsp GST No.	: 03AAATC2820L1Z4

Deposit Details

Deposit type	Reciept No	Reciept Dt	Reciept Amt
ADMISSION DEPOSIT	1136145	30/07/2025	2000.00
		Total:-	2000.00

Refund Details

Deposit type	Refund No.	Refund Date	Refund Amt
		Total:-	

Deposit Applied Details

Voucher No	Bill No	Applied Amt
	Total:-	

Settlement Details

Bill No	Voucher No	Cash Amt	Card Amt	Cheque Amt	Other Amt

Total Billed Amt	:	164,464.00
Total Unbilled Amt	:	0.00
Total Concession Amt	:	0.00
Total Settlement Amt	:	0.00
Balance Deposit	:	2,000.00
Net Payable Amt	:	162,464.00

For CHRISTIAN MEDICAL COLLEGE AND HOSPITAL

Authorized Signatory

BLOOMING LIVES FOUNDATION

Department of Clinical Haematology
Haemato-Oncology
& Bone Marrow (Stem Cell) Transplantation
Christian Medical College & Hospital
Ludhiana, 141008

05/08/2025

To Whomsoever It May Concern

This is to inform you that Master Devansh Dogra, a 6-year-old boy with CMC hospital number 8211938 was presented with fever for 1 month. On examination he has generalized lymphadenopathy and hepatosplenomegaly. Bone Marrow Aspiration biopsy and flow cytometry is suggestive of diagnosed with diagnosed with B-cell Acute Lymphoblastic Leukemia (ALL). He was started on ICiCLe from 31.07. 2025. The estimated expense for the same is approximately Rs. 8,00,000/- lakhs approx (Rupees Eight Lakhs approx.) in the absence of untoward complications. A detailed break-up is attached.

Thank you.

Dr. Shruti Kakkar
Professor, Department of Pediatrics
Consultant,
Department of Clinical Haematology,
Haemato-Oncology &
Bone Marrow (Stem Cell) Transplantation
Christian Medical College & Hospital,
Ludhiana-141008, Punjab India.
Punjab Medical Council Reg. No. 45857

Dr.Shruti Kakkar, MBBS, MD (Pediatrics)
Professor, Department of Pediatrics
Consultant
Department of Clinical Haematology, Haemato- Oncology
& Bone Marrow (Stem Cell) Transplantation
Christian Medical College, Ludhiana, Punjab, India 141008.

BLOOMING LIVES FOUNDATION

Department of Clinical Haematology,
Haemato-Oncology
& Bone Marrow (Stem Cell) Transplantation
Christian Medical College & Hospital
Ludhiana, 141 008

COST BREAK DOWN FOR B - Cell ACUTE LYMPHOBLASTIC LEUKEMIA(ALL)

Patient Name: Master Devansh Dogra; age 5 years ;CMC Hosp # 8211938

ITEM/SERVICE	ESTIMATED COST Rs .00
Hospitalization	1,00,000
Chemotherapeutic agents	1,50,000
Drugs antibiotics/growth factors	1,50,000
Blood and components (Packed cells, platelet concentrates, Fresh Frozen Plasma)	1,00,000
Investigations (Blood counts, Cultures, LFTs, Electrolytes, Cross Match)	1,50,000
Other Hospital Costs	1,50,000
Total	Rs. 8,00,000 /- (Rupees. 8 lakhs approx.)

BLOOMING LIVES FOUNDATION

Note: These figures are approximate and depending on the age, weight, and complications, the cost of therapy may increase.

Dr. Shruti Kakkar
Professor, Department of Pediatrics
Consultant,
Department of Clinical Haematology,
Haemato-Oncology &
Bone Marrow (Stem Cell) Transplantation
Christian Medical College & Hospital,
Ludhiana-141008, Punjab India.
Punjab Medical Council Reg. No. 45857

Dr. Shruti Kakkar, MBBS, MD (Pediatrics) 05/08/2025
Professor, Department of Pediatrics
Consultant
Department of Clinical Haematology, Haemato- Oncology
& Bone Marrow (Stem Cell) Transplantation
Christian Medical College, Ludhiana, Punjab, India 141008.

CMC Hosp Exchange 0161- 2115000 Ext :5095; Mobile# 9780005333
Email cmcbmt@gmail.com

सेवा में

Blooming Lives Foundation

New Delhi

विषय :- मेरे बच्चे के इलाज हेतु आर्थिक सहायता की प्रार्थना।

सविनय निवेदन है कि मेरा नाम उमेश डोगरा है। मैं धर्मेटा गांव जिला कांगड़ा हिमाचल प्रदेश का निवासी हूं। मैं एक दुकानदार हूं और मेरी मासिक आमदनी लगभग 15,000/ रुपये है। इतने कम साधनों में परिवार का पालन-पोषण करना ही कठिन होता है मेरे पुत्र का नाम देवांश डोगरा है उम्र 6 साल, पिछले 2 महीने समय से Blood Cancer बीमारी से पीड़ित है अब तक हमने 2 लाख में इलाज कराया है, लेकिन डाक्टर ने बताया है कि आगे के इलाज में बहुत अधिक खर्च आएगा। और डाक्टर के अनुसार इस इलाज का खर्च लगभग 8 00000/ रुपये है। मेरी आर्थिक स्थिति इतनी मजबूत नहीं है कि मैं यह खर्च खुद उठा सकूं। अतः आपसे विनम्र निवेदन है कि कृपया मेरे बच्चे के इलाज में आर्थिक सहायता प्रदान करें। आपकी मदद से मेरे बच्चे को नया जीवन मिल सकेगा।

आपकी कृपा के लिए सदैव आभारी रहूंगा

Umesh

नाम - उमेश डोगरा
पिता का नाम - नवजीवन डोगरा
पता :- गांव धर्मेटा, तहसील फतेहपुर, जिला कांगड़ा, (हिमाचल प्रदेश)

दिनांक - 30/8/25