



12512407052003067013

तहसीलदार कार्यालय अमरावती

क्रमांक : ४००९२५७७३४४
जिल्हा : अमरावती

१ वर्षासाठी उत्पन्नाचे प्रमाणपत्र

प्रमाणित करण्यात येते की, श्री. अब्दुल नईम अब्दुल हमीद राहणार . गाव अमरावती, तहसील अमरावती, जिल्हा अमरावती येथील अर्जदार आहेत. त्यांचे तलाठी अहवाल या आधारावर अर्जदार व त्यांच्या कुटुंबातील सर्व सदस्यांचे सर्व मार्गाने व साधनाने मिळालेले १ वर्षाचे उत्पन्न खालील प्रमाणे आहे.

वर्ष	वार्षिक उत्पन्न (₹)	अक्षरी (रुपये)
२०२३ - २०२४	१,१०,०००	एक लाख दहा हजार

सदरचा दाखला श्री. अब्दुल नईम अब्दुल हमीद यांना वैद्यकीय करीता मुख्यमंत्री-माझी लाडकी बहीणयोजना करीता , संजय गांधी योजना व श्रावणबाळ योजना करीता व राशन कार्ड करीत व मुला मुलीचा शिक्षण करीता व वैद्यक या कामासाठीच देण्यात येत आहे, तसेच त्यांनी कार्यालयास सादर केलेल्या कागदपत्रांच्या आधारे देण्यात येत आहे.

हे प्रमाणपत्र ३१ मार्च २०२५ पर्यंतच वैध राहील.

सादर केलेल्या दस्तऐवज / पुराव्याचे तपशील

१. तलाठ्याने जारी केलेला उत्पन्नाचा दाखला
२. आधार कार्ड
३. स्वघोषण पत्र

स्थळ : अमरावती
दिनांक : ०५/०७/२०२४

Signature valid

Digitally Signed by
Tina Vilas Chavhan
Date: 2024-07-08 5:32:34 PM
तहसीलदार
अमरावती

Printed By -OMTID :MH050200928 VLE Name :AZAR BASHIR SHAH, Date:05/07/2024 6:02PM

माहिती तंत्रज्ञान (मात) अधिनियम, २००० नुसार डिजिटल स्वाक्षरी असणारा हा दस्तऐवज कायदेशीररित्या वैध आहे.

पडताळणीसाठी - <https://www.mahaonline.gov.in/Verify> येथे भेट द्या किंवा बीएसएनएल, एमटीएनएल, टाटा मोबाईल क्र. वरून १६६/ अन्य क्र. वरून ५१९६९ या क्रमांकावर "MH<space>CSC<space>VRFY<space><२० अंकी बारकोड क्रमांक>" असा एसएमएस पाठवा.

To Whomsoever It May Concern

This is to state that Mr Abdul Naved Abdul Naim, 23 year old Male, KH1000949223 is a known case of B Cell Acute lymphoblastic Leukemia with persistent MRD positivity. He needs an allogenic bone marrow transplant in view of his persistent disease on chemotherapy.

The Approximate cost for a MATCHED RELATED DONOR (MRD) bone marrow transplant will be Rs 30 lakh rupees.

A break up of charges are as follows:

ROOM CHARGES (BMT UNIT)	Rs 4,00,000/-
CHEMOTHERAPY DRUGS (CONDITIONING)	Rs 3,00,000 /-
IV AND ORAL MEDICATIONS	Rs 11,50,000/-
BLOOD PRODUCTS	Rs 1,50,000/-
INVESTIGATIONS	Rs 5,00,000/-
CENTRAL LINE INSERTION	Rs 75,000 /-
PICC LINE INSERTION	Rs 75,000 /-
TRANSPLANT PROCEDURE CHARGES	Rs 2,00,000/-
MISCELLANEOUS	Rs 1,50,000/-

Total charges: Approx. Rs. 30 lakh rupees.

For, MATCHED UNRELATED DONOR (MUD) there will additional approx. 8 lakh rupees to be paid directly to the bone marrow registry.

Hence for a MUD transplant, The total estimate would be approx. Rs 38 lakhs rupees. Please note that this is just an estimate and the actual costs may vary depending on the clinical condition. In case the patient develops transplant related complications, requiring higher antibiotics for an infection necessitating ICU, the additional costs that will be incurred are not included in the above quote.

Please do not hesitate to reach out to me or my team if you require any further clarifications.

Regards

Dr. Sameer Tulpule

Consultant Hematologist


Dr. Sameer A Tulpule
 Consultant Haematologist
 MMC Reg. 72419
 Kokilaben Dhirubhai Ambani Hospital
 Mumbai



(Unit of Mandke Foundation), Four Bungalows, Andheri (W), Mumbai - 400 053, India
 Appointments: (91-22) 4269 6969 | Accident & Emergency: (91-22) 4269 9999 | EHC: (91-22) 4336 6666
 Toll-free: 1800 3000 3333 | Fax: (91-22) 4336 6777
 www.kokilabenhospital.com /KokilabenHospital /KDAH Mumbai /kokilabenhospital
 CIN: U99999MH1998NPL127767



Recipient Details

Name : Mr. ABDUL NAVED
 ABDUL NAIM
 Gender : Male
 Age : 23Y
 CRM : 223000371865
 Lab ID : 40500209587

Specimen

Sample Quality/Quantity : Adequate
 Collected on : 20/05/2024 05:00
 Received on : 21/05/2024 09:30
 Report Date : 28/05/2024 17:59

: Peripheral venous blood

Test : HLA Typing

Clinician : Dr. VISHVDEEP KHUSHOO

Hospital : AIIMS HOSPITAL

City : NAGPUR

Recipient Results

Blood group & Rh typing (as per TRF) : A positive

Typing Status : Complete

Null allele resolution status : Not Applicable

Novel alleles are represented with XX in second and Third field

Locus	HLA-A*	HLA-B*	HLA-C*	HLA-DRB1*	HLA-DQB1*
Allele 1	02:11:01:01	40:06:01	15:02:01:01	04:05:01:04	05:02:01:01
Allele 2	24:02:01:01	40:06:01	15:02:01:01	15:01:01:26	06:01:01:01



MC-2088

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 COLLEGE of AMERICAN PATHOLOGISTS

Sureka R, M.Sc.
 Deputy General Manager - Molecular Genetics

Dr. Chirayu Padhiar, MBBS, DCP
 Senior Medical Director

Processed At: LifeCell International Pvt Ltd, No: 26, Vandalur-Kelambakkam Main Road, Keelakottaivur, Chennai - 600127

Donor Details		Specimen	Test
Name	: Ms. SHIFA SADAF ABDUL NAIM	: Peripheral venous blood	: HLA Typing
Gender	: Female	Sample quality/quantity	: Adequate
Age	: 17Y	Collected on	: 20/05/2024 05:00
CRM	: 223000371867	Received on	: 21/05/2024 09:30
Lab ID	: 40500209590	Report Date	: 28/05/2024 17:59
			Clinician : Dr. VISHVDEEP KHUSHOO
			Hospital : AIIMS HOSPITAL
			City : NAGPUR

Donor Results

Relation as per TRF	: SISTER
Blood group & Rh typing (as per TRF)	: Not Available
Null allele resolution status	: Not Applicable
Mismatched Locus	: No Mismatches
Matching score with Patient (High resolution two field matching)	: 10 of 10

Locus	HLA-A*	HLA-B*	HLA-C*	HLA-DRB1*	HLA-DQB1*
Allele 1	02:11:01:01	40:06:01	15:02:01:01	04:05:01:04	05:02:01:01
Allele 2	24:02:01:01	40:06:01	15:02:01:01	15:01:01:26	06:01:01:01

Methodology

1. Allele database version : IMGT 3.54.0 (October 2023).
2. Gene coverage for sequencing :
Class I (A, B, C) - Whole gene
Class II (DQB1) - Whole gene
Class II (DRB1) - Whole gene (Except intron1)
3. Typing by NGS with Illumina using MIA FORA NGS kit from IMMUCOR.

Limitations

Lack of genomic reference sequences in IMGT for few alleles may result in ambiguity. Novel allele may get assigned typing over a period of time. Homozygous calls, rare allele and novel alleles require retyping. Presence of PCR inhibitors in the sample may prevent DNA amplification and alter the allele calls.

Disclaimer

This is not a diagnostic test and so not be considered as a purpose of diagnosis of any diseases. This test is meant for only understanding the HLA typing and detects the typing under its limit of resolution. The tests are carried out in the lab with the presumption that the specimen received belongs to the patient named or identified in the bill/test request form.



Sureka R, M.Sc.
Deputy General Manager - Molecular Genetics

Chiray
Dr. Chirayu Padhiar, MBBS, DCP
Senior Medical Director

Processed At: LifeCell International Pvt Ltd, No: 26, Vandalur-Kelambakkam Main Road, Keelakottaiyur, Chennai - 600127

Appendix

Donor/Recipient Matching:

Locus	Recipient (ABDUL NAVED ABDUL NAIM)	Donor 1 (SHIFA SADAF ABDUL NAIM)
HLA-A1*	02:11:01:01	02:11:01:01
HLA-A2*	24:02:01:01	24:02:01:01
HLA-B1*	40:06:01	40:06:01
HLA-B2*	40:06:01	40:06:01
HLA-C1*	15:02:01:01	15:02:01:01
HLA-C2*	15:02:01:01	15:02:01:01
HLA-DRB1*	04:05:01:04	04:05:01:04
HLA-DRB2*	15:01:01:26	15:01:01:26
HLA-DQB1*	05:02:01:01	05:02:01:01
HLA-DQB1*	06:01:01:01	06:01:01:01
Matching Score with Recipient		10 of 10



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possible alleles:

LAB ID	LOCUS	REMARKS
40500209587	HLA-A*	HLA-A*02:11:01:01+HLA-A*24:02:01:78 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:87 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:96 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:108 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:78 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:87 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:96 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:108 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:78 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:87 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:96 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:108 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:78 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:87 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:96 is equally possible HLA-A*02:11:01:01+HLA-A*24:02:01:108 is equally possible
	HLA-B*	Nil
	HLA-C*	Nil
	HLA-DRB1*	Nil
	HLA-DQB1*	HLA-DQB1*05:02:01:04+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:06+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:11+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:13+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:04+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:06+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:11+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:13+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:04+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:06+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:11+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:13+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:04+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:06+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:11+HLA-DQB1*06:01:01:01 is equally possible HLA-DQB1*05:02:01:13+HLA-DQB1*06:01:01:01 is equally possible



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Deputy General Manager - Molecular Genetics

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Senior Medical Director

Assessed At: LifeCell International Pvt Ltd, No: 26, Vandalur-Kelambakkam Main Road, Keelakottaiyur, Chennai - 600127

LABORATORY REPORT			
Name : Mr. ABDUL NAVED ABDUL NAIM	Sex/Age : Male/ 22 Years	H.ID :	Case ID : 31200136093
Ref By : Dr. Vishwadeep Khushoo	Dis. Loc. :		Pt. ID :
Bill. Loc. : Nexus Health Care Nagpur			Pt. Loc. :
Registration Date & Time : 31-Dec-2023 13:28	Sample Type : block		Ph # : 1236547895
Sample Date & Time : 31-Dec-2023 13:28	Sample Coll. By :		Ref Id :
Report Date & Time : 03-Jan-2024 11:54	Acc. Remarks :		Ref Id2 :

Ki-67 proliferative index is ~95%.

MPO & Glycophorin A, non-contributory (both).

Impression :

IHC Final diagnostic Panel study: Bone marrow trephine biopsy.

Overall immunoprofile confirms the diagnosis of high grade B cell lympho-proliferative disease, consistent with B cell acute lymphoblastic leukemia/lymphoblastic lymphoma (B-ALL/LBL).

Clinical, hematological & radiological correlation and/or molecular work-up are suggested.

Reported by Dr Prashant Parikh & Dr Palak Raiyani.

----- End Of Report -----

Grossing By : Dr. Prashant Parikh

For test performed on specimens received or collected from non-NSRL locations, It is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.



Dr. Prashant Parikh
M.D. (Path. & Bact.) G-4107
Consultant Pathologist

Dr. Bhavna Mehta
M.D. (P.D.C.C) G-56686
(Histo & Renal pathologist)

Printed On : 03-Jan-2024 11:59



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Neuberg Diagnostics Private Limited

Laboratory : "KEDAR" Opposito Krupa Petrol Pump, Near Parimal Garden,
Ahmedabad - 380006 ☎ 079-40408181 / 61618181
✉ contact@neubergsupratech.com

Regd. Office : Plot No. 7, Industrial Estate, Rajiv Gandhi Solai, Per,
Chennai - 600096, Tamil Nadu, India | CIN - U85300TN2017PTC
🌐 www.neubergsupratech.com

Scanned with CamScanner

LABORATORY REPORT			
Name : Mr. ABDUL NAVED ABDUL NAIM	Sex/Age : Male/ 22 Years	H.ID :	Case ID : 31200136093
Ref By : Dr. Vishwadeep Khushoo	Dis. Loc. :		Pt ID :
Bill. Loc. : Nexus Health Care Nagpur			Pl. Loc. :
Registration Date & Time : 31-Dec-2023 13:28	Sample Type : block		Ph # : 1236547895
Sample Date & Time : 31-Dec-2023 13:28	Sample Coll. By :		Ref Id :
Report Date & Time : 03-Jan-2024 11:54	Acc. Remarks :		Ref Id2 :

Histopathology Report

Specimen :

IHC Final diagnostic Panel study: Bone marrow trephine biopsy.

Clinical Data :

Isolated thrombocytopenia.

Macroscopic Examination :

Nature of material: Received one block labelled as BM23/3016

Fixation time: Unknown

Specimen immersion time (Cold ischaemia time): Unknown

Block number on which test performed: BM23/3016

Antigen retrieval by: Epitope antigen retrieval ER1

Detection system: Caliber 30 combo IHC detection kit

Morphological diagnosis: High grade hemato lymphoid malignancy (local report).

Microscopic Examination :

IHC marker result:

Atypical lymphoid cells express CD20, PAX-5, CD10, CD34, Bcl-2, & TdT.

Non-immunoreactive to CD3, CD5, CD30, Bcl-6, & c-myc.

Grossing By : Dr. Prashant Parikh

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Dr. Prashant Parikh
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Dr. Bhavna Mehta
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(Histo & Renal pathologist)

Printed On : 03-Jan-2024 11:59



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Page 1 of 2

UHID	: KH1000949223	Encounter ID	: 147040020001
Name	: Mr. Abdul Naved Abdul	Age	: 23Y
Gender	: Male		
Attending Practitioner	: DR.SAMEER TULPULE		
Location	: Clinical Heamatology		
Encounter Date	: 25/06/2024 16:18		

Chief Complaints

B-ALL

Case History

Diagnosed 2023 - from Amravati- has done XIIth - now treatment at Nagpur- All India Institute- ALL- PCR neg, CNS1, karyotype- no metaphase, - at presentation 10.9/ 6.6/ 178 started on ALL-BFM 2002 from 10.1.24 - MRD 0.12%- after consolidation 1- MRD 0.06 HyperCVAD - A and B - MRD - 0.01 - and 1 more B - completed 11.6.24 - had H1N1 - taken Tamiflu currently on Fluconazole and Septran DS

sister - HLA 10/10 matched - 17 yrs - 10th standard - counselled regarding BMT

Instructions

Plan : Plan for Sib allo Cy/TBI
continue HD MTX 1 more cycle - whilst funds are being arranged

Authorized By	: DR.SAMEER TULPULE	Date/Time	: 25/06/2024 17:08
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To Whomsoever it may concern

