





GIVE SMILE TRUST

Dated: November 5th 2024

TO WHOM SO EVER IT MAY CONCERN

This is to certify that **Master Adwitya Jain**, 1 yr old male, is a case of **Thalassemia Major**. He is currently on supportive care for the same. The only curative treatment for Thalassemia Major is Bone Marrow Transplant. In the absence of matched sibling or matched related donor, **Adwitya** is planned for Haploidentical Bone Marrow Transplant. It is strongly recommended for **Adwitya** to go ahead with BMT to give him best quality of life & normal life expectancy.

BMT (Haploidentical) is an expensive treatment. The quotation for BMT is as mentioned below:

1.	Pre-transplant workup (donor & recipient)	approx. 1 Lac INR.
2.	Autologous Back up	approx. 2 Lacs INR.
3.	Pre transplant preparation	approx. 1 lac X 2 cycles = 2 Lacs INR
4.	Donor Harvest	approx. 1.5 Lacs INR.
5.	T cell depletion kit (from Miltenyi Biotec Germany)	approx. 11.5 Lacs INR
6.	Transplant phase for 4 weeks of uncomplicated stay in hospital (dose of chemotherapy medicines depends on weight).	approx. 15-16 Lacs INR
7.	Post BMT weekly OPD follow ups	approx. 50,000 INR/month x 2 months.
Grand Total		approx. 35 Lacs INR

Overall success rate of BMT is approx. 80-90%.

NOTE: The cost might rise in case of any unforeseen complications & extended stay in the hospital.


DR GAURAV KHARYA

CLINICAL LEAD | CENTER FOR BONE MARROW TRANSPLANT AND CELLULAR THERAPIES

SENIOR CONSULTANT | PEDIATRIC HEMATOLOGY ONCOLOGY AND IMMUNOLOGY

APOLLO HOSPITAL, SARITA VIHAR, DELHI 110076

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Dr. Gaurav Kharya

Clinical Lead | Center for Bone Marrow Transplant
& Cellular Therapy

Senior Consultant | Paediatric Hematology

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Indraprastha Apollo Hospitals,

Sarita Vihar, New Delhi 110076

DMC No. 25144

Ph. No. 9213132168

Email id - gaurav.kharya@gmail.com

4-11-24

Mr. ADNIYA
1.5 yr / m
KID TOI for HBD HSC

25x meg

10min power
mistake
error

Plan

workup

Anti backup

Receptant 4-11-24
on 4-11-24

GLS from 04-11-24

05-11-24

06-11-24

03-11-24

Admission

Harnest

Feb PMS # 1

Vaibhav

GIVE SMILE TRUST

Gan

(Dr. Gan)

Big Pencil Graded MOV
300 meg - ①

Spint stars ①

Neckle inline zyg + neckle ①



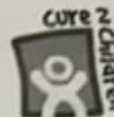
India's First Internationally Accredited Hospital
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Sarita Vihar, Delhi - Mathura Road, New Delhi - 110 076 (INDIA)
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www.sankalpindia.net | hla@sankalpindia.net

SUPPORTED BY
Cure2Children Foundation
info@cure2children.org
www.cure2children.org



POWERED BY : Jagriti Innovations

HLA TYPING SUMMARY

Sequence-based HLA typing done by DKMS Life Science Lab GmbH - Germany, a laboratory accredited by the European Federation of Immunogenetics. Confirmatory HLA typing is required.

Date : 07 August 2024

Patient : **ADWITYA JAIN** Code : **INA24007** Gender : **Male** Born : **19-May-2023**

Name	Relation	DOB	HLA Class I			HLA Class II		
			A	B	C	DRB1	DQB1	DPB1
ADWITYA JAIN	Patient	19-May-2023	11:01:01G	35:03:01G	15:02:01G	04:EMYEV	03:EDYCS	02:ETFNF
			11:01:01G	40:06:01G	15:02:01G	04:EMYZF	03:EDYCS	04:ERTTH
ANMOL	Father	19-May-1996	11:01:01G	40:06:01G	07:01:01G	04:EMYEV	02:EDYCV	02:ETFNF
			33:03:01G	44:03:02G	15:02:01G	07:ESDGB	03:EDYCS	26:01:02G
NIKITA	Mother	31-Oct-1995	11:01:01G	35:03:01G	12:03:01G	04:EMYZF	03:EDYCS	04:ERTTH
			24:02:01G	35:03:01G	15:02:01G	14:ESZU	05:ESPK	26:01:02G

Comment: ADWITYA JAIN has no fully match donors in the list.

Digitally signed by Dr

Lawrence Faulkner

Date: 2024.08.07

10:23:54.0530

Dr. Lawrence Faulkner

Pediatric Hematologist-Oncologist and Bone Marrow Transplant Specialist

Medical Coordinator

Cure2Children Foundation, Italy and Sankalp India Foundation, Bangalore-India



Scanned with OKEN Scanner

CENTER FOR BONE MARROW TRANSPLANT AND CELLULAR THERAPY
BONE MARROW TRANSPLANT FOLLOW UP

Date: 29/11/2024
Name: Mast Adwaitya Jain
Weight: 10.8 kgs

Height: 80.5 cms

UHID: APD1.0011816413
Age/Sex: 17 month/male
BSA: 0.49 m2

Diagnosis: TDT for HFD HSCT.

Summary: known case of TDT, diagnosed at 6 months of age, on regular transfusions since then, presently every 21-28 days Ferritin ~ 948 ng/ml, on Defrijet 500 mg A/W 250 PO daily. Now planned for HFD HSCT in the absence of HLA identical donor.

Investigations:

CBC: 12/2.4/403 P26%
Bilirubin (T/D): 0.43/0.20
DCT/ICT: Neg
G6PD: ND
2D echo: EF- 60%

Retic count: 0.38%

DSA: Negative, either of parent donor
HIV/HBsAg/HCV: HIV/HBsAg/HCV: NR
LDH: ND U/L
T2 MRI: NR

PT/APTT: N

Blood group: B Positive

CMV: IgG/IgM: R/NR

Ferritin: 948 ng/ml

Fibroscan: NR

DSA - Negative against both mother & father

Plan:

1. Autologous stem cell harvest and backup to be done on 07/11/24 (Target dose 56 million cells/kg, harvested ____ ml, to be preserved at apollo Stem care)

2 PTIS (cycle # 1 started from 07/11/24)

3 TAB. HYDROXYUREA 250 MG PO ONCE DAILY

4 TAB. AZATHIOPRINE 25 MG PO ONCE DAILY

5 TAB. VALACICLOVIR 250 MG PO ONCE DAILY (TO BE CHANGED TO VALGANCICLOVIR AFETR 2ND PTIS)

6 TAB. FLUCONAZOLE 75 MG PO ONCE DAILY (TO BE CHANGED TO VORICONAZOLE AFTER 2ND PTIS)

7 SYP. TRIMETHOPRIM-SULPHAMETHAXAZOLE (SEPTRAN) 3.5 ML PO TWICE DAILY (MON/THUR)

8 SYP. LEVATRIACETAM (1ML/100 MG) 1.0 ML PO TWICE DAILY

9 TAB. FOLIC ACID 5 MG X TAB PO ONCE DAILY

10 HYPER-TRANSFUSION AS ADVISED (MAINTAIN PRE-TX HB. 10 GM/DL)

11 CHELATION: TAB DEFRIJET 500 A/W 250 MG PO ONCE DAILY

12 ORAL & PERIANAL CARE AS ADVISED

13 Inj Nirukine 100 mcg s/c x 3 days

• Admit for 2ND PTIS

Gaurav

DR GAURAV KHAR
CLINICAL LEAD | CENTER FOR BONE MARROW TRANSPLANT AND CELLULAR THERAPIES
SENIOR CONSULTANT | HEMATOLOGY ONCOLOGY AND IMMUNOLOGY
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DR KANAKA NIRMAL | CONSULTANT (+917011027315)

DR ANSHU CHADHA | ASSOCIATE CONSULTANT (+919910000248)

DR NIKHIL GUPTA | JUNIOR CONSULTANT & FELLOW

DR ABY P BABY | JUNIOR CONSULTANT & FELLOW

DR SHRUTI VERMA | JUNIOR CONSULTANT & FELLOW

IN CASE OF EMERGENCY, PLEASE CALL ON BMT CT HELPLINE: 8826197259

APPOINTMENTS (MS HIMSHIKHA): 8826931012

ADMISSIONS (MS JOYSHREE): 7005432414

EXPORTS (MR ARUN): 8920860478



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For Online appointment: www.apollo.com



CENTRE FOR BONE MARROW TRANSPLANT AND CELLULAR THERAPY
GCSF MOBILIZATION SHEET

Patient Details:
Patient: ADWITYA
DOB: MALE
Sex: MALE
Height: 80.5cm

UHID No: APD10011816413
Age: 15.5 mo
Weight: 10.8 kg
SA: 0.49 m²

GCSF Mobilization

Day & Date	Drugs	Dosages
Day -5 (<u>-</u>)	Inj. GCSF	10 mcg/kg/day (<u>-</u> mcg OD) (10 AM)
Day -4 (<u>4/11/24</u>)	Inj. GCSF	10 mcg/kg/day (<u>100</u> mcg OD) (10 AM)
Day -3 (<u>5/11/24</u>)	Inj. GCSF	10 mcg/kg/day (<u>100</u> mcg OD) (10 AM)
Day -2 (<u>6/11/24</u>)	Inj. GCSF	10 mcg/kg/day (<u>150</u> mcg OD) (10 AM)
Day -1 (<u>7/11/24</u>)	Inj. Plerixafor <u>588 219 7 202</u>	0.24 mg/kg s/c (<u>3</u> mg OD) (1 AM)
	Inj. GCSF	10 mcg/kg/day (<u>100</u> mcg OD) (5 AM)
		Donor Admission
		Stem cell count (8 AM)
		Neck line insertion (8:30 AM)
		Stem Cell Harvest (9 AM)

Checklist Please tick & do the needful:

1. Informed the blood bank for harvest: Yes/No
2. Informed cryopreservation team for collection of harvest: Yes/No
3. Informed PICU team for the HD catheter insertion if required: Yes/No

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Vai

Consultant signature

Nursing signature



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Email: info@delhi@apolloahospitals.com, Website: https://delhi.apollohospitals.com/
For Online appointment: www.askapollo.com



Plas x 3 7 13

Step 1 Arc 3mi - (4H) < 9 50 1 las
 10-12 2 Arch back up (1.25) + (10-50) ✓
 3 Arc fix Arch 1 las + 1 las
 4 BMT 15-16 + 11.5-12.0 las ✓
 5 RL 50-75 / nuts * 2 nuts

Plas =
 (cos
 Lkt
 cmv
 smile)
 50-60

100 Day,

(Ch) 5-10 las

Plas 3 las

(DEFINER)

(1-2)

(10)

GIVE SMILE TRUST

Name : Master ADWITYA JAIN
Lab No. : 448589922
Ref By : DR TARUN SINGHAL
Collected : 10/12/2023 5:27:00PM
A/c Status : P
Collected at : MR. SATYENDRA RAY - (AGRA CC 7)
Kendriya Hindi Sansthan Road Near Bypass
Crossing Khandari Agra MobNo.9927777172,
05624044172

Age : 6 Months
Gender : Male
Reported : 18/12/2023 12:21:22PM
Report Status : Final
Processed at : LPL-NATIONAL REFERENCE LAB
National Reference laboratory, Block E,
Sector 18, Rohini, New Delhi -110085

Test Report

TEST CONDUCTED : THALASSEMIA BETA, MUTATION ANALYSIS
(PCR, Sequencing)

RESULTS

Homozygous Mutation Detected

Kindly Note: IVS-I-5 (G>C) [HGVS: HBB:c.92+5G>C] mutation detected. Genetic counselling and clinical correlation recommended.

Interpretation

RESULT	REMARKS
Homozygous mutation detected	Both copies of the gene carry mutation
Heterozygous mutation detected	One copy of the gene carries mutation
Mutation Not Detected	Both copies of the gene carry the wild type trait

Note

1. This assay detects more than 100 different mutations in the Promoter region, Exon 1, IVS-I & Exon 2 and part of IVS-II. It also detects the deletion of 619 bp in Exon 1 and Exon 2. This assay does not detect variants in other parts of this gene.
2. Presence of PCR inhibitors in the sample may prevent DNA amplification.
3. This is an in-house developed assay.
4. Test conducted on Whole blood for Postnatal Mutation analysis and Amniotic Fluid for Prenatal Mutation Analysis.
5. Genetic counselling available with prior appointment at National Reference Laboratory, New Delhi

Comments

Beta (β) thalassemia is an autosomal recessive disorder due to mutations in the HBB gene on chromosome 11. Severity of the disease depends on the nature of the mutation which is as follows:

- β^- - Alleles without a mutation that reduces formation of β chains
- β^0 - Mutations that prevent any formation of β chains
- β^+ - Mutations that allow some formation of β chains

In all these cases there is a relative excess of α chains, but these do not form tetramers: rather, they bind to the red blood cell membranes, producing membrane damage, and at high concentrations they form toxic aggregates.



Name :	Master ADWITYA JAIN	Age :	6 Months
Lab No. :	448589922	Gender :	Male
Ref By :	DR TARUN SINGHAL	Reported :	18/12/2023 12:21:22PM
Collected :	10/12/2023 5:27:00PM	Report Status :	Final
A/c Status :	P	Processed at :	LPL-NATIONAL REFERENCE LAB
Collected at :	MR. SATYENDRA RAY - (AGRA CC 7) Kendriya Hindi Sansthan Road Near Bypass Crossing Khandari Agra MobNo.9927777172, 05624044172		National Reference laboratory, Block E, Sector 18, Rohini, New Delhi -110085

Test Report

Depending on the Homozygous or Heterozygous state, Beta Thalassemia can be classified as:

CLASSIFICATION	REMARKS	ALLELES
Thalassemia minor	Only one Beta globin gene bears a mutation	Beta+/Beta or Beta0/Beta
Thalassemia intermedia	Condition intermediate between the major and minor forms.	Beta+/Beta+ or Beta0/Beta+
Thalassemia major	Both Beta globin genes bear a mutation	Beta 0/Beta 0

The distribution of beta thalassemia gene is not uniform in the Indian subcontinent. The highest frequency of beta thalassemia trait is reported in Gujarat, followed by Sindh, Punjab, Tamil Nadu, South India and Maharashtra. Beta Thalassemia is common among Sindhi, Gujarati, Parsee, Punjabi Hindus, Lohanas and Teli communities of Indian subcontinent.

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HLA TYPING REPORT

HIGH RESOLUTION-NEXT GENERATION SEQUENCING (NGS)

Patient Information

Name	: Mst. Adwitya Jain	Date of Birth	: 19.05.2023
Hospital	: Rashmi Medicare Centre	Gender	: Male
Physician	: Dr. Tarun Singhal	Collection Date	: 10.12.2023
Diagnosis	: Beta Thalassemia Major	Reporting Date	: 15.12.2023
Lab ID	: 448589922	Specimen type	: Blood
Report at	: MRS SADHNA RAI (AGRA CC 7)		

A	B	C	DRB1	DQB1	DPB1
11:01:01	35:03:01	15:02:01	04:03:01	03:02:01	02:01:02
11:01:01	40:06:01	15:02:01	04:04:01	03:02:01	04:01:01

Typing Status : COMPLETE

Note:

- Allele Data Base Version : IMGT/HLA release 3.52.0
- Sequencing technology : Illumina MiniSeq.
- Sequencing Coverage : Long Range PCR
 - Class I (-A, -B, -C) Whole Gene Coverage
 - Class II (-DPB1) Exon 2 to Exon 4
 - Class II (-DQB1) Whole Gene Coverage
 - Class II (-DRB1) Exon 1 + Exon 2 to Exon 6

Test Performed using MIA FORA kits Lot no: 23-087-6-U


 Prof. (Dr) Jasmeet Kaur
 MD (Path), PhD (Transplant-Immunology & Immunogenetics)
 Director (Tech.)
 Dept. of Histocompatibility & Transplant Immunology

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Name	: Master ADWITYA JAIN	Age	: 6 Months
Lab No.	: 448589922	Gender	: Male
Ref By	: DR TARUN SINGHAL	Reported	: 18/12/2023 12:21:22PM
Collected	: 10/12/2023 5:27:00PM	Report Status	: Final
A/c Status	: P	Processed at	: LPL-NATIONAL REFERENCE LAB
Collected at	: MR. SATYENDRA RAY - (AGRA CC 7) Kendriya Hindi Sansthan Road Near Bypass Crossing Khandari Agra MobNo.992777172, 05624044172		: National Reference laboratory, Block E, Sector 18, Rohini, New Delhi -110085



Test Report

Test Name	Results	Units	Bio. Ref. Interval
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**HLA DNA TYPING HIGH RESOLUTION BY NEXT
GENERATION SEQUENCING (NGS)**



Dr (Prof) Jasmeet Kaur
MD, Pathology; PhD Transplant
Immunology & Immunogenetics
Technical Director - Advanced
Histocompatibility &
Immunogenetics
NRL - Dr Lal PathLabs Ltd



Dr Ram Kumar
PhD, Biotechnology
Senior Research Scientist Molecular
Diagnostics
NRL - Dr Lal PathLabs Ltd



Dr Vamshi Krishna Thamtam
MCI - 17-25915
MBBS, MD Pathology
DipRCPath UK, Molecular Genetics
Fellowship, Tata Medical Center
Head - Genomics & Clinical
Cytogenomics
NRL - Dr Lal PathLabs Ltd

-----End of report -----



IMPORTANT INSTRUCTIONS

•Test results released pertain to the specimen submitted. •All test results are dependent on the quality of the sample received by the Laboratory. •Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician. •Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. •Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting test results may show intra laboratory variations. •The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the LPL(s) & or results of tests. Test results are not valid for medico legal purposes. •This is computer generated medical diagnosis report that has been validated by authorized Medical Practitioner /Doctor. •The report does not need physical signature.

(#) Sample drawn from outside source

If Test results are not as expected, client is advised to contact the Customer Care immediately for possible remedial action.

Tel: +91-11-48885050, Fax: +91-11-48882334, E-mail: lalpathlabs@lalpathlabs.com

National Reference laboratory, Delhi, India. (F171/11) Accredited, ISO 9001:2015 (FS60411) & ISO 27001:2013 (616691) Certified laboratory.



Name :	Master ADWITYA JAIN	Age :	1 Year
Lab No. :	449996219	Gender :	Male
Ref By :	DR TARUN SINGHAL	Reported :	18/7/2024 8:45:43PM
Collected :	18/7/2024 4:38:00PM	Report Status :	Final
A/c Status :	P	Processed at :	Dr. Lal Path Labs Ltd
Collected at :	FPSC KAMLA NAGAR D-510, MAIN MARKET, KAMLA NAGAR, AGRA 05624008106,9997069973		Dayal Bagh Road , Agra- 282005

Test Report

Test Name	Results	Units	Bio. Ref. Interval
COMPLETE BLOOD COUNT; CBC (Photometry, Electrical Impedance, Optical/Impedance & Calculated)			
Hemoglobin	8.75	g/dL	11.10 - 14.10
Packed Cell Volume (PCV)	25.30	%	30.00 - 38.00
RBC Count	3.02	mill/mm3	3.90 - 5.10
MCV	83.70	fL	72.00 - 84.00
Mentzer Index	27.7		
MCH	29.00	pg	25.00 - 29.00
MCHC	34.60	g/dL	32.00 - 36.00
Red Cell Distribution Width (RDW)	16.60	%	12.3 - 17.0
Total Leukocyte Count (TLC)	14.74	thou/mm3	6.00 - 16.00
Differential Leucocyte Count (DLC)			
Segmented Neutrophils	17.55	%	14.00 - 50.00
Lymphocytes	72.18	%	37.00 - 79.00
Monocytes	6.74	%	2.00 - 12.00
Eosinophils	1.89	%	0.00 - 6.00
Basophils	0.34	%	0.00 - 1.00
Absolute Leucocyte Count			
Neutrophils	2.59	thou/mm3	1.00 - 7.00
Lymphocytes	10.64	thou/mm3	3.50 - 11.00
Monocytes	0.89	thou/mm3	0.20 - 1.00
Eosinophils	0.57	thou/mm3	0.10 - 1.00



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A/c Status : P
Collected at : FPSC KAMLA NAGAR
D-510, MAIN MARKET, KAMLA NAGAR, AGRA
05624008106,9997069973
Age : 1 Year
Gender : Male
Reported : 18/7/2024 8:45:43PM
Report Status : Final
Processed at : Dr. Lal Path Labs Ltd
Delhi Gate ,Agra 282002

Test Report

Test Name	Results	Units	Bio. Ref. Interval
FERRITIN, SERUM (ECLIA)			
Ferritin	895.00	ng/mL	6.00 - 67.00

Note: Increase in serum ferritin due to inflammatory conditions (Acute phase response) can mask a diagnostically low result

Comments

Serum ferritin appears to be in equilibrium with tissue ferritin and is a good indicator of storage iron in normal subjects and in most disorders. In patients with some hepatocellular diseases, malignancies and inflammatory diseases, serum ferritin is a disproportionately high estimate of storage iron because serum ferritin is an acute phase reactant. In such disorders iron deficiency anemia may exist with a normal serum ferritin concentration. In the presence of inflammation, persons with low serum ferritin are likely to respond to iron therapy.

Increased Levels

- Iron overload - Hemochromatosis, Thalassemia & Sideroblastic anemia
- Malignant conditions - Acute myeloblastic & Lymphoblastic leukemia, Hodgkin's disease & Breast carcinoma
- Inflammatory diseases - Pulmonary infections, Osteomyelitis, Chronic UTI, Rheumatoid arthritis, SLE, burns
- Acute & Chronic hepatocellular disease

Decreased Levels

Iron deficiency anemia



Dr Shalini Gupta
MD, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd

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05624008106,9997069973

Age : 1 Year
Gender : Male
Reported : 18/7/2024 8:45:43PM
Report Status : Final
Processed at : Dr. Lal Path Labs Ltd
Dayal Bagh Road , Agra- 282005

Test Report

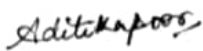
Test Name	Results	Units	Bio. Ref. Interval
Basophils	0.05	thou/mm3	0.02 - 0.10
Platelet Count	650	thou/mm3	200.00 - 550.00
Platelets are mildly increased Followup and clinical correlation Mean Platelet Volume	7.7	fL	6.5 - 12.0

Comment

In anaemic conditions Mentzer index is used to differentiate Iron Deficiency Anaemia from Beta- Thalassemia trait. If Mentzer Index value is >13, there is probability of Iron Deficiency Anaemia. A value <13 indicates likelihood of Beta- Thalassemia trait and Hb HPLC is advised to rule out the Thalassemia trait.

Note

- As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood
- Test conducted on EDTA whole blood



Dr Aditi Kapoor
DCP, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd

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Regd. Office: Dr Lal PathLabs Ltd, Block-E, Sector-18, Rohini, New Delhi-110085
Web: www.lalpathlabs.com, CIN: L74899DL1995PLC065388

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Test Report

Test Name	Results	Units	Bio. Ref. Interval
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-----End of report-----



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(#) Sample drawn from outside source.

¶ Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

Tel: +91-11-49885050, Fax: - +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com

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011-49885050 (National Customer Care)
Customer.Care@lalpathlabs.com

PSC SUKHDEV VIHAR

PLOT NO-9, MAIN ROAD, SUKHDEV VIHAR, DELHI-110025, NEW DELHI, SOUTH DELHI, DELHI, 110025
8130709018

AUTHORISED COLLECTION CENTER

INVOICE CUM CASH RECEIPT

(PLEASE BRING THIS RECEIPT FOR REPORT COLLECTION)



158966103

Patient Name Master. ADWITYA JAIN
Age & Sex 1 year(s) / Male
Ref. Doctor DR GAURAV KHARYA
Contact No 9971927179
Date & Time 10-03-2025 12:45:00

Invoice cum Receipt no OIDL250310071509614910
Lab No 158966103
LPL Client Code CCA029
Reporting Location PSC SUKHDEV VIHAR

S. No.	Test Code	Test Name	Estimate of report by #	Amount (Rs.)
1	N058	CHIMERISM, POST-ENGRAFTMENT	15-03-2025 11:00	6200
2	Z146	IMMUNE DEFICIENCY PANEL 1	11-03-2025 18:00	6700
3	Z178	IMMUNOGLOBULIN PROFILE, SERUM	10-03-2025 20:00	1100
4	E002	HEMOGLOBIN HPLC/ELECTROPHORESIS	11-03-2025 15:00	950
5	Z025	LIVER & KIDNEY PANEL	10-03-2025 17:00	1550
6	Z021	COMPLETE BLOOD COUNT; CBC	10-03-2025 20:00	350

Order Value: 16850
Home Collection Charges: 0
Total Order Value : 16850
Net Payable Amount : 16850
Paid Amount: 16850
Balance Amount: 0

Note:

- Please check your Name, Tests and contact details. These will be used to send Report related notifications.
- To download the Reports, please visit www.lalpathlabs.com or Download the App and click on 'VIEW ALL YOUR TEST REPORTS'
- Enter Lab No. (as given on receipt) as your Lab/Visit ID' and your surname (as given on receipt) as password e.g. if your name is RAM KUMAR, then KUMAR is your Password.
- Partially paid or unpaid reports cannot be accessed on the Website or App.
- You can now get the Cumulative Report (One Report for all your Values) by downloading the App and creating a profile with the mobile number given at the time of registration. All your previous reports will also be available on the same dashboard. Download the app from any Store (App Store or Google Play Store).
- Services provided hereunder are healthcare services which are exempt from GST under serial no. 98. Notification no. 12/2017 - Central Tax (Rate).
- # Reports may be delayed due to unforeseen circumstances; inconvenience regretted.
- * Report will be available as per the Schedule of test.
- By accepting this invoice / transacting with the Company, I agree/confirm having understood the Terms and Conditions mentioned in Dr. Lal PathLabs Privacy Policy and Terms of Use (also available on the website).

For PSC SUKHDEV VIHAR
Authorised Signatory

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