Request for a helping hand: Vivek Sreedharan, 20 year old boy from hailing from a village called Anthimalankaavu, near Chelakkara, Thrissur District, met with a fatal accident on March 15th, while on his way back home.

Vivek's father Sreedharan Nair is no more and his mother Radha runs the family with a meagre income she gets by being a domestic help to families close by. Radha and her mother used to work at my grandmother's house for several years. Vivek is the eldest child and has three school going siblings. The family is classified as BPL (Below Poverty Line) by the government.

The following are the medical details of his treatment so far: After the accident he was admitted in Mulangunnathukavu Medical College and had to be transferred to Sun Heart Hospital Thrissur due to internal bleeding He underwent two surgeries there, Left ICD and emergency Laparotomy and Texotomy He was then carried to Amritha Insitute of Medical Science, Cochin, where he underwent a couple more surgeries. At present he is under the care of Dr.Dinesh Balakrishnan (Assistant.Prof,.Amritha Institute of Medical Science).

The treatment costs so far came has already crossed 7 Lakhs and will require another 3 lakhs as per the doctors. The family had to pledge their house to meet the expenses so far.

Any contribution towards raising this amount will be appreciated.

Thanks, Radhika.

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വാദ്യകലാകാരൻ ചികിത്സാസഹായം തേടുന്നു

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Form KBF-4A

KARUNYA BENEVOLENT FUND
(Directorate of State Lotteries)
ESTIMATE OF EXPENDITURE
(For Private Accredited Hospitals only)

(To be issued by the Private accredited hospitals to the patients proposed to undergo treatment at the hospital for the procedures allowed to the hospital concerned as per MOU signed with KBF)

1. Hospital Code:
2. Name & Address of the Hospital: Amrita Institute of Medical Science Kochi
3. Name of Patient : Vivek. T Sex: (M)/F Age:
4. Address : (as per hospital records)
   i. House Name/No. : Kalathi Kokkari House ii. Place/Village: Vengasalloor
   iii. Grama Panchayat/Municipality/Corporation: Chelakkara
   iv. Post Office: Chelakkara PIN: 680586
   v. Taluk: Thalappilly vi. District: Thrisur
5. Name of Father/Mother/Husband: Sreedharan Nair
6. Registration No. / I P No. : 1548275 Date : 11/04/2015
7. Diagnosis: Blunt abdominal injury & liver trauma following RTA
8. Proposed date for Operation: Exploratory laparotomy on 05/04/15
9. Priority of treatment/Operation: Emergency / within 3 months/within 3 to 6 months
10. Approximate period of treatment required:
11. Approximate expenditure for treatment: (Give corresponding code mentioned in the Package)

Surgery and consultation	30000	Medicine iii.	50000	Others	25000
Investigation	30000	Medicines v.	75000/-	vi.	
Anesthesia vii.	15000	Nursing viii.	50000		

Total Estimated expenditure : Rs. 3,25,000/- (Capping).

12. If the patient is eligible for financial assistance for the proposed treatment from any State/Central Govt. scheme please give details:
    Name of scheme: Eligible Amount: Rs.
13. Remarks if any:

Dr. DINESH BALAKRISHNAN
Asst. Professor
Reg. No. 24262
Amrita Institute of Medical Sciences
& Research Center
Department of G.I. Surgery
Amrita Lane, Elamakkara P.O.
Kochi-682 026

Signature
Name & Designation
of the Consulting Doctor

Signature
Name & Designation
Head of the Hospital/Authorized signatory
(Seal)