

## Rakta Kranti Celebrated 1000th Blood Donation Drive



**Blood Donors who have kept the Spirit of Voluntary Blood Donation Alive for 1000+ Sankalp Drives**



"Sankalp"- A solemn vow of sheer hard work, determination, passion, vision and persistence to ensure that no individual ever dies due to lack of blood and to promote 100% Voluntary Blood Donation. A group of young students, who took this vow on 23rd May, 2003, have come a long way to celebrate the spirit of **1000 Voluntary Blood Donation Drives on 12th July, 2017.**

Time has flown by and we have entered the 15th year

of Operations. When we started off in 2003, little did we know what distance we would have walked. With the purpose of **"Giving Life a Better Chance"** we wanted to fight the limitations in the current healthcare delivery mechanisms in the field of Blood Donation and Thalassemia.

What does it take to achieve something as big as this milestone? What is the one quality that defines us in Sankalp? And what differentiates us from others?





The answer to all these is just one word: Persistence.

The persistence, to do the right thing the right way, day in and day out. "Persistence" to deliver quality at every single drive. Real change comes only with persistence. The biggest achievement for us is not that we did 1000+ events. It's not the number of organizations with whom we work (whether blood banks or companies). Nor is it the fact that we have collected more than 88000 units of blood in these events.

The real achievement over the years is the fact that we have never diverged from the basic principles which lay at the foundation of this organization. It's the small things that matters. It's the fact that we have

documented every single drive, followed up with every donor who reported complication in camp, evaluated the feedback, spent hours and sometimes days together to brainstorm and then bring in positive changes to the way that entire drive is conducted. The real change is the fact that our processes have ingrained into the teams we work with, that our donors are much more informed and this means that blood donation drives have fundamentally changed. This means quality drives can happen even without involvement of Sankalp. And that's the beauty of persistence!

Ensuring quality and sustainability, we celebrated our

"I think a hero is an ordinary individual who finds the strength to persevere and endure in spite of overwhelming obstacles."

Christopher Reeve

1000th Blood Donation Drive at ITPB, Bangalore. It was a proud moment for all the Volunteers, Donors, Blood Banks and Individuals who are associated with Sankalp. It was also the 40th Camp at ITPB. We had put up a "Wall of Fame", which had captured the various moments of the Voluntary Blood Donation Drives of Sankalp since 2007. It portrayed the different donors who have experienced the joy of helping others.

Our donors at ITPB who are already registered with us were sent emails and messages inviting them to donate blood at the 1000th Camp. Many of them came with a smiling face, and were delighted when they found the familiar volunteers of Sankalp India Foundation. They donated Blood, congratulated the team heartily and left behind messages, signing on the

Wall of Fame.

Rakta Kranti is an initiative of Sankalp India Foundation to bring in 100% Voluntary Blood Donation in Bangalore and thereby ensure continuous availability of safe blood. This is done by organizing efficient and well-managed blood donation drives with standards that are comparable to the best in the world. We bring to the donor all the information related to blood donation that makes him/her absolutely comfortable and confident about the process.

After working with nearly 40 blood banks across the state, conscious decision has been made to stick with the best Blood Bank Teams who displayed commitment to both the donors and the patients for

Thank you for creating an opportunity for us to be a part of this wonderful venture. God Bless! -Amrutha M

I would like to thank you for giving this opportunity for me. Feeling happy to be a part of it. -Banumathi

Thank you for giving this opportunity. I am feeling good now.

Thank You for organizing this camp in our community. Blood is not always readily available when required, so every drop helps.

Thanks for giving me 1st time experience for giving blood. It's good.

Appreciate your service. Keep going :)



our blood donation drives. We believe that with this significant step in our journey, we have been able to ensure quality and sustainability.

Some key changes we have brought into voluntary blood donation drives

- ✍ Ensure adherence to best practices in every phase of the blood donation drive
- ✍ Uniform Policy for handling deferrals
- ✍ Uniform policy for identifying, handling, monitoring and documenting complications in blood donation drives.
- ✍ Marking Non Compliance for Blood Banks
- ✍ Planning and Distributing the collection of Blood Stocks in the peak shortage period, and not clustering the drives on the days of national importance, or overloading the stocks in the city during blood availability has always been strategy of Sankalp.

Every day provides new opportunities to learn. Every drive is a new challenge. It's a new experience at each drive.

The best thing is to meet different people, understand their perspective. These people, our donors, are the real change makers. We are just there to facilitate them. Our donors are committed to the cause and believe in making the difference. And we are fortunate to have them. Highly committed individuals, coming in from all spheres of life, all age groups and all the genders.

*"Some changemakers: A volunteer who can't lift weights due to his medical condition, but still is the first one to show up*

*at every single drive in his organization. He can't donate blood but is actively involved in volunteering throughout the camps. Another volunteer from a different organization who preserves his leaves to be a part of the blood donation drive at his campus. He takes full day off and spends all his time volunteering in blood donation camp. A group of girls who do an excellent job motivating people and getting donors for public drives. A 63-year-old man who is so keen to donate he has a healthy discussion with us on policies and deferral criteria and so does a 17-year-old boy!"*

Every single donor in our camp, every volunteer, every blood bank staff deserves a special pat on the back for their enormous contribution to our success.

There are many challenges to come, many barriers to cross and many stones to upturn. So, we would continue to work with same zeal, dedication and enthusiasm until we achieve our goal. The goal of 100% voluntary blood donation. The promise that no one suffers from lack of blood.

A day might come when our services are no longer needed in the field of voluntary blood donation, when our dreams come true and we achieve what we strive for. But till then, keep walking!

# ThalMeet – 2017 - a meeting of the Thalassemia Management and Care Centres organised in Bangalore



14-15 July 2017, Bangalore

ThalMeet 2017 - The annual meeting of the Thalassemia Management and Care Centres was organised at Rashtrotthana Parishat, Bangalore. This year the meeting was the largest till date planned with the participation of a total of a total of 14 organisations namely Bai Jerbai Wadia Hospital For Children - Mumbai, Gujarat Adani Institute of Medical Science - Bhuj, Himalayan Thalassemia Society - Dehradun, IMS & SUM Hospital - Bhubaneswar, Indian Red Cross Society - Ahmedabad, Indira Gandhi Institute of Child Health - Bangalore, KLES Dr. Prabhakar Kore Hospital and Jawaharlal Nehru Medical College - Belgaum, Rural Development Trust Hospital - Anantapur, Samraksha Thalassemia Day Care Centre - Rashtrotthana Parishat - Bangalore, Sankalp-People Tree Centre for Pediatric Bone Marrow Transplantation, Seva Bharti Trust - Mangalore, Thalassemia Society - Bhatinda, Zwan Family Charities - Kabul, Sankalp India

Foundation and Jagriti InnoHealth Platforms - Bangalore

The main objectives of the meeting were

- ✍ To strengthen the delivery and improve quality of treatment.
- ✍ Exchange of best practices and strategies.
- ✍ Learn the use of data to formulate treatment strategies.
- ✍ Establish long term working strategy for the group.

The annual review started with the presentation of performance data from the centres which have been using ThalCare for management of thalassemia. The data available from previous years and from across 5 centres laid the foundation for the deliberations.

Like previous years, as we moved from one agenda to the other, there was rich participation from the all the centres. Challenges, strategies, experiences and

"Oo much rest is rust."

-Sir Walter Scott





opportunities were openly discussed and debated. While the centres which are already doing the reviews on a year on year basis were able to benchmark their own work with the peers and with the goals they had set for themselves previously, the meeting was particularly useful for the friends from centres which are yet to take steps to enable more systematic care. All three aspects, prevention, management and cure were deliberated in great detail. With participation from across the nation, the meeting brought together diverse experiences and ideas.

Synergy developed in the meeting and all the participating organisations felt the need for enhanced

cooperation. Clear action items were identified. The meeting came to a conclusion with a firm resolve to approach the problems that we see associated with thalassemia with renewed energy, better strategy and greater coordination.

We take this opportunity to thank all the participants and in specific Rashtrorathana Parishat for providing very comfortable venue for the event.

"Apathy can't be an excuse for inaction."

Bill Bradley

# Irrational blood donor deferral refuses to stop!

Hemoglobin test is a very important factor to determine whether the donors, whether male or female are fit to donate blood. Drugs & Cosmetic Act permit blood banks to collect blood only when the donor has a minimum hemoglobin level of 12.5 gm/dl. That means no blood bank should take blood from the donors who has hemoglobin less than 12.5 gm/dl. And, donor should undergo hemoglobin test every time he/she donates blood.

The basic concept is that we should not deprive or harm the donor and at the same time, should benefit the recipient. The donor is eligible to donate if he or she meets the criteria.

Recently in one of the Blood Donation Drive at a prominent organization, conducted by Sankalp India Foundation, there was an incident where a donor was being deferred by the Medical officer, on the grounds of low hb count just because she was looking very fair and pale. The Donor was very eager to donate blood. The Medical Officer mentioned to her that he suspected she is having low hb count and her weight was 53 kgs, so she should not take a chance.

The donor was insisting continuously, when a Sankalp Volunteer intervened and asked her to fill in the form and get her Hemoglobin tested as per the standard process followed in a blood donation camp. The donor readily did so and after her hb test through the copper sulphate method, it was found that she was eligible to donate blood. Later when she further went for checking her Blood Pressure, it was found that she had a low BP, based on which the doctor had deferred her. The donor then confronted the Medical Officer as to

why he said to her that she had low hb count without even checking? The Medical officer tried to justify saying that I did not check you clinically as well and then looked at her eyes and said her that she has a good hb count.

Scientifically speaking a donor having minimum hemoglobin of 12.5 gm/dl can tolerate removal of 1 gm of hemoglobin along with one unit of blood (350 or 450 ml). This loss is regained to the donor within a month's period. But, however, to give adequate time for recovery, a minimum of 3 months, is given to the donor before next donation.













Despite all the established protocols, these kinds of malpractices still happen in Voluntary Blood Donation Drives, which is a matter of grave concern. Sankalp Volunteers have thus made it a regular practice to ensure that they carry the Standard Deferral Guideline. This helps in making the Blood Banks aware of the existing protocols to be followed in terms of donor selection and not just defer them on their whims and fancies.

*"This kind of practices also propagates the chances of healthy donors not donating blood. Donors may also lose interest to donate blood if treated unfairly."*

Thus, adopting a uniform policy for selection/ deferral of donors is the need of the hour. We hope that it is being followed and adhered to in the Voluntary Blood Donation Drives.

# PERFORMANCE REPORT

## Sankalp Program For Thalassemia Management

Centers	Total Patient Visits (patients)	Number of units of blood transfused (units)	How many day old blood units were transfused (days)	Time taken to process blood components (hours)	Pre-transfusion Hemoglobin (g/dl)	Share of blood units from attached blood bank (%)
			<7: Good 7-10: Average >10: Bad	<2: Good 2-3: Average >3: Bad	>9: Good 8-9: Average <8: Bad	>95%: Good 90-95%: Average <90%: Bad
Indira Gandhi Institute of Child Health	329	426	 9	 2.0	 9.2	 99%
Project Samraksha	412	503	 4	 2.8	 9.2	 100%
KLE Belgaum	264	240	 2	 2.5	 9.0	 100%

## Sankalp Program For Thalassemia Cure

	Total HLA typings	Total number of children offered Bone Marrow Transplantation	Total number of children cured of Thalassemia by Bone Marrow Transplantation
This year	1203	24	24
Total	4003	75	64

## Bombay blood group network

	Total bombay blood group requests	Number of units organised off the shelf	Number of units donated
Last month	5	2	2
This year (cumulative)	48	19	13
Last year	71	18	21



# June 2017



## Rakta Kranti - The Blood Revolution

	Blood Donation Camps	Total Donors	Total Units Collected	Rate of Post Donation Complications	Rate of Donor Deferral
				<2%: Good 2-4%: Average >4%: Bad	<10%: Good 10-15%: Average >15%: Bad
This month	13	958	804	🚩 2.6%	🚩 16.5%
This year	77	7930	6685	🚩 3.9%	🚩 15.7%

Thanks to the following organisations for having supported us to ensure continued supply of safe blood to the needy

**Biocon**  
**CGI**  
**Emtec**

**ITPB**  
**Mantri Espana**  
**Mphasis**

**Tata Power**  
**Vanguard**  
**Wipro**

## Disha Statewide Blood Helpline - 9480044444

	Total Blood requests on the statewide help-line	% of blood requests satisfied by existing blood bank stocks	% of blood requests from outside Bangalore
Last month	657	80%	20%
This year (cumulative)	2454	82%	23%
Last year	6348	84%	27%

For any queries or suggestions, please write to [sankalp.admin@gmail.com](mailto:sankalp.admin@gmail.com)

# How To Know If You Have Dengue? What To Do Then?

As we head into the season where fever and common cold would be an everyday part and parcel in homes, we also need to keep a watch on a few aspects just to be sure we are not affected by Dengue Fever. Here is a look at the symptoms and other related aspects of dengue fever.

## Symptoms

The principal symptoms of dengue are high fever and at-least two of the following:

- ✎ Severe headache
- ✎ Severe eye pain (behind eyes)
- ✎ Joint pain
- ✎ Muscle and/or bone pain
- ✎ Rash
- ✎ Mild bleeding manifestation (e.g., nose or gum bleed, petechiae, or easy bruising)
- ✎ Low white cell count
- ✎ Lack of appetite.

NOTE: The fever lasts for 5-7 days. In some patients, fever comes down on 3rd or 4th day but comes back. All the above symptoms and signs may not be present in the patient.

## Emergency Medical Help

In case any of the following things are seen along with the symptoms, it is advisable to get immediate medical help

- ✎ Severe abdominal pain or persistent vomiting
- ✎ Red spots or patches on the skin
- ✎ Bleeding from nose or gums
- ✎ Vomiting blood
- ✎ Black, tarry stools (feces, excrement)
- ✎ Drowsiness or irritability



- ✎ Pale, cold, or clammy skin
- ✎ Difficulty in breathing

NOTE: Occasionally the patient suffering from dengue may develop bleeding. Common sites for bleeding are nose, gums or skin. Sometimes, the patient may have coffee ground vomiting or black stools. This indicates bleeding in gastro intestinal tracts and it is serious. The patient with dengue who has bleeding has dengue haemorrhagic fever(DHF). Rarely the patient suffering from dengue may develop shock, then it is called dengue shock syndrome (DSS).

## Steps To Prevent Dengue

Avoiding mosquito bites (by using mosquito repellents)

- ✎ Eliminating pockets of stagnant water that serve as mosquito breeding sites at home, workplaces and their vicinity.
- ✎ Not storing water in open containers. Covering all water containers with lids.
- ✎ Preventing mosquito entry by keeping doors closed and windows screened.
- ✎ Wearing protective clothing like long-sleeved shirts, long pants, socks and shoes when



outdoors.

✍ Using mosquito nets at home.

✍ Scrubbing and cleaning margins of containers used for water (to dislodge the eggs of *Aedes aegypti*)

✍ Covering overhead tank to prevent access to mosquitoes.

✍ *Aedes* mosquitoes usually bite during the day; therefore, special precautions should be taken during early morning hours before day break and in the late afternoon before dark.

## Some facts about Dengue Fever

### What are the types of dengue?

There are four types of dengue viruses that cause dengue fever worldwide. These types are Dengue 1, 2, 3 and 4. The two principal illnesses that dengue virus causes are: dengue fever (an acute illness with fever, headaches, joint pain, muscle pain and rash) and dengue haemorrhagic fever.

### How can someone get dengue fever?

Dengue fever occurs following the bite of an infected mosquito *Aedes aegypti*. This type of mosquito has a peculiar white spotted body and legs and is easy to recognize even by laymen. It breeds in clean water and has a flight range of only 100 – 200 metres. The mosquito gets the Dengue virus after biting a human being infected with dengue virus.

### Can dengue fever become dangerous?

The infection can become dangerous since it may cause damage to the blood vessels. The damage may range from increased permeability of the blood vessels, causing leakage of blood fluid/plasma into various organs to completely broken blood vessels

that causes bleeding. The symptoms and signs of dengue haemorrhagic fever and dengue shock syndrome are related to damage to the blood vessels and derangement in functioning in components of blood that help it to clot.

### Can people die from dengue fever?

People who suffer from dengue fever have no risk of death but some of them develop Dengue Haemorrhagic Fever or Dengue Shock Syndrome. In some of these cases death can occur. With proper treatment, the patients with Dengue haemorrhagic fever and dengue shock syndrome can recover fully. Good treatment provided in time can save most lives.

### Can you get dengue again after suffering from it once?

It is possible to get dengue more than once. Dengue can occur because of 4 different but related strains of dengue virus. If a person has suffered from one virus, there can be a repeat occurrence of dengue if a different strain is involved subsequently.

### What is dengue haemorrhagic fever?

Dengue haemorrhagic fever is a severe complication of the dengue virus. It is most commonly seen in children aged under 15 years but can occur in adults. It is more likely to occur if you have contracted dengue before. Symptoms for dengue haemorrhagic fever are dengue fever, but 2-5 days after the onset of fever, patients show a rapid deterioration in their condition. Cardiovascular disease, shock and sometimes death may follow.

### Can I get dengue fever from another person?

Dengue does not spread directly from person to



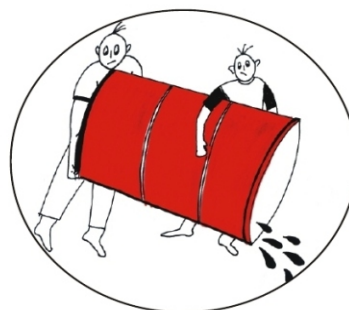
# Stop dengue now!

**You can get dengue through the bite of an infected mosquito. The dengue mosquito breeds in clean, stored, uncovered water.**



Remove stagnant water from your surroundings

Empty and clean water storage containers weekly



Wear long-sleeved, full length clothing and use mosquito repellent

Seek early treatment if you have high fever, nausea and bodyache.



Prevent Control

Vector-borne diseases

Chikungunya • **Dengue** • Japanese encephalitis • Kala-azar • Lymphatic filariasis • Malaria • Schistosomiasis



person. It is only spread through the bite of an infected mosquito.

### When does dengue develop after getting the infection?

After the entry of the virus in the person, it multiplies in the lymph glands in the body. The symptoms develop when the virus has multiplied in sufficient numbers to cause the symptoms. This happens generally about 4-6 days (average) after getting infected with the virus.

### Can people suffer from dengue and not appear ill?

Yes. There are many people who are infected with the virus and do not suffer from any signs or symptoms of the disease. For every patient with symptoms and signs there may be 4-5 persons with no symptoms or with very mild symptoms.

### Can dengue fever be treated at home?

Most patients with dengue fever can be treated at home. They should take rest, drink plenty of fluids that are available at home and eat nutritious diet. Whenever available, Oral Rehydration Salt/ORS (commonly used in treating diarrhoea) is preferable. Sufficient fluid intake is very important and becomes more important in case DF progresses into DHF or DSS where loss of body fluid / blood is the most salient feature. It is important to look for danger signs and contact the doctor as soon as any one or more of these are found.

### Blood Requirement during Dengue

If the doctor tells you that one of your acquaintances is suffering from Dengue then it is very important for you to understand some things related to the need and

availability of blood.

### Need for Platelets

When a person is suffering from dengue, his/her platelet count can come down drastically. A normal platelet count in a healthy individual is between 150,000 and 450,000 per  $\mu$ l (microlitre) of blood. If the patient's platelet count falls below 50,000 per  $\mu$ l then one must prepare to arrange for platelets. Normally the doctor advises platelet transfusion only when platelets count falls below 30,000 per  $\mu$ l. Not all patients suffering from dengue require platelets.

### Why is there a shortage of blood platelets

One must understand that platelets may not be available off the shelf from most blood banks even if they are collecting hundreds of units per week because of the sheer size of demand.

✍ The shelf life of platelets is only 5 days

✍ Several blood banks do not have the facility to separate platelets from whole blood.

✍ Fewer voluntary donors donate blood in summer months adding to the shortage?

### Random Donor Platelets

1 unit of platelets refers to the platelets separated from blood collected from a single donor. This is also referred to as Random Donor Platelets(RDP).

### Understanding Blood Grouping For Platelets

There is no blood group for platelets. A person can be given RDP of any group unless the person is a lady in the child bearing age or younger than that.

### Single Donor Platelets

If the doctor advises you to arrange for more than 4

units of platelets at once, then you could opt for a process of collecting only platelets from the donor. This is called Single Donor Platelet(SDP) or apheresis platelet. A healthy male weighing more than 60 kgs and who fulfils other criteria for blood donation is an eligible platelets donor. Platelets donation is absolutely safe for the donor and it ensures that the patient receives good quantity of platelets with minimum risk of transfusion transmitted infection.

## Searching For Platelets In Blood Banks

*There are several blood centres who organise SDP. If you wish to know the blood centres in your vicinity, please call 9480044444.*

## Emergency Help

If platelets are not available in the blood banks, a volunteer of Sankalp will try to help you find them. It is strongly suggested that you maintain clear communication and follow the suggestions that the volunteer makes in order to ensure that you get platelets in the fastest possible manner. The volunteer is trained to guide you to make the best use of all available resources to find the unit of platelets successfully.

## Financial Preparation

Coming to the financial aspect, each unit of platelet(RDP) costs between Rs.300 - Rs.800/- in most blood banks. One may require upto 8- 10 units of platelets for each patient. The cost of SDP is anywhere between Rs.8,000 - Rs.12,000/-. It is wise to adequately provision for this and in many cases this cost may not be covered by insurance.

## Summary

- ✍ Try to organise for blood donation as early as possible to ensure supply.
- ✍ Search for blood in blood banks if you can't arrange by yourself. Take help of blood helpline: 9480044444.
- ✍ In case you still do not find platelets, take help of Sankalp's Emergency Team.

## Donate Blood Save Lives

Ideally you would want blood platelets to be available off the shelf at the time of need. This can't happen if voluntary blood donors do not come by themselves and donate blood in the blood banks. Please help the blood banking services by encouraging people to donate blood voluntarily and thereby enable saving of precious human lives.

## Sources for further reading:

- ✍ [http://www.medicinenet.com/dengue\\_fever/article.htm](http://www.medicinenet.com/dengue_fever/article.htm)
- ✍ <http://www.who.int/topics/dengue/en/>
- ✍ [http://en.wikipedia.org/wiki/Dengue\\_fever](http://en.wikipedia.org/wiki/Dengue_fever)
- ✍ <http://www.dengue.gov.sg/subject.asp?id=10>
- ✍ <http://app.nea.gov.sg/cms/htdocs/article.asp?pid=675>
- ✍ <https://www.nhp.gov.in/disease/musculo-skeletal-bone-joints-/dengue-fever>
- ✍ <http://nvbdcp.gov.in/Doc/Dengue-Chik-advisory-2016.pdf>

*Please feel free to tear off the poster on page 12 and stick it up in public places. Let's fight dengue together.*



# Platelets donation – your option to save more lives!

The cheers for the regular blood donors is that now they can choose to donate selective components of blood too. Get to know more about the process of donating platelets selectively.

## Becoming a Platelets Donor

By donating your platelets through platelet apheresis (ay-fer-ee-sis), you give a very special gift of life. Most patients undergoing a treatment for dengue, bone marrow transplant, surgery, chemotherapy, radiation treatment or organ transplant need platelets in order to survive. In fact, doctors are finding that platelets play a vital role in more and more new therapies. With just a five-day storage life, platelet donations are delivered quickly to the patients who need them. Platelet donors have the satisfaction of knowing that their donation will be saving a life within just a few days.

## What is Platelet Apheresis?

Until recently, the only way to collect enough platelets for a single transfusion was to take blood donations from 5 to 10 donors, separate the platelets from the other blood cells, and combine the platelets to obtain a large enough quantity for transfusion. Today, sophisticated medical equipment – blood cell separators – can collect enough platelets for transfusion from a single donor. Using a technique called apheresis, blood is drawn from the donor's vein into an apheresis instrument, which separates the blood into separate portions by centrifugation. By appropriately adjusting the instrument, a selected portion of the blood, such as the platelets, can be recovered, while the rest of the blood is returned to the

donor either into the same vein or into a vein in the other arm. This process takes more time than whole blood donation, but the percentage of platelets is much greater. It is a simple, safe process – very much like regular blood donation. In fact, your body starts replenishing platelets immediately after your donation. Within 48 hours, your body's platelets should be completely replenished.

## What is involved in the process?

By using a special method called apheresis, whole blood is separated into components, and the platelets are removed. Specially trained staff conduct the procedure while you relax, watch TV or read. The entire process takes about two hours.

## Who can donate platelets?

Any person eligible to be a blood donor and more than 60 kg of weight can donate platelets.

## How often can I donate Platelets?

Because platelets are quickly replenished by your body, you can donate platelets as frequently as every 48 hours, but no more than 24 times a year. Additional restrictions vary, however, depending on the donation center, type of procedure used, and your donation history.

Know more: [www.sankalpindia.net/apheresis](http://www.sankalpindia.net/apheresis)

So why wait? If you wish to enroll as a voluntary platelet donor

Call/Mail us now! Mail: [sankalp.admin@gmail.com](mailto:sankalp.admin@gmail.com)  
Call 9880132850 | Visit: [www.sankalpindia.net](http://www.sankalpindia.net)

# Hi Sankalp!

Please get in touch for any of the following

## Sankalp Emergency Team

- Seek assistance for arranging blood in extremely difficult situations
- Donate platelets voluntarily and help ensure platelets on shelf all the time.
- Learn about strategies and technologies for conservative and rational management of blood.

## Bombay blood group network

- Register if you are a person with Bombay blood group
- Inform if you have Bombay blood group on your self
- Request if you need Bombay blood group

## Statewide Blood Helpline

- Call 9480044444 when in need of blood anywhere in Karnataka

## Rakta Kranti

- Organise blood donation camps
- Learn about organising safe and effective blood donation camps
- Form a Team Red - a team of volunteers who help propagate the message of blood donation
- Volunteer in our blood donation camps

## Thalassemia Prevention

- Opt to get tested for thalassemia and other related hemoglobin disorders
- Organise a drive to get people around you tested
- Assistance for antenatal testing for parents who are at risk of getting a child with thalassemia

## Thalassemia Management

- Support the treatment and management of a child suffering from thalassemia
- Refer a patient who is in need of help for thalassemia treatment at our centers
- Seek advice on management of thalassemia

## Thalassemia Cure

- Refer a child suffering from thalassemia for free HLA typing
- Refer a child for Bone Marrow Transplant
- Donate towards Bone Marrow Transplant of a child
- Seek advice on options for cure for families with thalassemia

## Contribute

- Make a donation - help us do more of what we do
- Volunteer - join us to make a difference!
- Share your experience and problems

### From:

**Call: 9480044444 | Visit: [www.sankalpindia.net](http://www.sankalpindia.net)**

**Mail: [contact@sankalpindia.net](mailto:contact@sankalpindia.net)**

**Address: #460, "GOKULA", 8th Main, 4th Block,  
Koramangala, Bangalore - 560034**

### To: