



शरीरवाचं चतुर्वर्तमानम्

अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है।/SMOKING PROHIBITED IN HOSPITAL PREMISE



Wed, Sat

Poc -

एकक/Unit _____

विभाग/Dept. 2014/003/0005019

ब० र० वि० पंजीकृत सं० / O.P.D. Regn. No. _____

नाम Paediatrics (बाल चिकित्सा)	पिता/पति/पुत्री F/S/W/H/D of	लिंग Sex	आयु Age	UHD: 100101676
PRATIGYA KUMARI	D/O: DINESH YADAV	F महिला	2Y/वर्ष 1M /महिना 10D /दिन	VILL- GURHA PO. DEVIPUR KODERMA JHARKHAND

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
	24/4 inj. Kanare 5100 IV
Registration Time : 8:00 AM TO 10:30 AM Done By: Paediatrics Counter/706 Room No. 3, Ground Floor (तल मंजिल) 05/04/2014 09:54:36 AM	23/4 = inj. Kanare 5100 IV 26/4 inj. Kanare 5100 IV

अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)

बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है/Dharamshala facility is available for outstation patients

Mild B/l conjunctivitis (+)

Gum (N)

bruises (+) over cheek (R) elbow.

Chest /
LWS (N)

P/A - not cooperative

To ³²¹¹⁻⁴⁷²⁴ ~~Shompla~~ ^{incharge.}
kindly provide accommoda-
tion to this patient.

13/3/14

1/4/14

- Sp. Levan 5100
In qe

? Acute leukemia

? Malaria ? Enteric fever

14/2/14 Hb 3.9

Plt 220

WBC 34,600

DLC N5 L33 Blasts 61%.

Iron studies - Ferritin - 189.4.

(post transfusion) S.iron 218.

RBC 408

Transferrin saturation 53.43%.

23/2/14 Hb 5.4

Plt 34,000

TLC 42,900

Adv. CBC

LDH, RFT

PT

LDH

PS - TRCP

Widal

MPQBC

~~Syp Crocin~~ (6ml)

of CXR

Peds onco clinic Monday

9AM. Run No. 14

Dr Vasudev →

Ames

Syp Crocin (5ml / 120mg)
6ml SOS

P/R Peds casually SOS

Ames

Kindly make new
poc file

Dr. Vasudev (SAs)
Pres. III



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है। / SMOKING PROHIBITED IN HOSPITAL PREMISES

शरीरमार्गं चतुर्वर्णसामन्म्

Mon, Thurs

OPR-6

एकक/Unit 2014/003/0005019
विभाग/Dept.

ब०रो०वि० पंजीकृत सं० / O.P.D. Regn. No. OIHD: 100101676

नाम/Name	पिता/पुत्र/पत्नी/पति/पुत्री F/S/W/H/D of	लिंग Sex	आयु Age	घर/Address
PRATIGYA KUMARI	D/O: DINESH YADAV	F महिला	2Y /वर्ष	VILL- GURHA PO. DEVIPUR KODERMA JHARKHAND

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
<p>Registration Time : 8:00 AM TO 10:30 AM Done By: Paediatrics Counter/253 Room No. 3, Ground Floor(तल मंजिल) 24/02/2014 09:31:20 AM</p> <p><i>Combed</i></p> <p><i>16/2/14 BT</i></p> <p><i>10-8</i></p> <p><i>fever documented upto 102°F, max 100°F relieved w/ antipyretics. No fever for last 7 days Had cough and cold lasting 3 days. 15 days back Epistaxis first episode after trivial trauma. neurotic episodes, self-limited. H/o bruising after trivial trauma (+) Pales for 15 days. Requiring PRBC transfusion one on 15/2/14. No op any to abd. distention, lump, swelling in neck. no family H/o any blood transfusion.</i></p> <p><i>Informant Uncle and maternal grandmother - not reliable.</i></p> <p><i>Epistaxis first episode after trivial trauma.</i></p> <p><i>neurotic episodes, self-limited.</i></p> <p><i>H/o bruising after trivial trauma (+)</i></p> <p><i>Pales for 15 days. Requiring PRBC transfusion one on 15/2/14.</i></p> <p><i>No op any to abd. distention, lump, swelling in neck.</i></p> <p><i>no family H/o any blood transfusion.</i></p> <p><i>10-8</i></p> <p><i>fever documented upto 102°F, max 100°F relieved w/ antipyretics. No fever for last 7 days Had cough and cold lasting 3 days. 15 days back</i></p> <p><i>Epistaxis first episode after trivial trauma.</i></p> <p><i>neurotic episodes, self-limited.</i></p> <p><i>H/o bruising after trivial trauma (+)</i></p> <p><i>Pales for 15 days. Requiring PRBC transfusion one on 15/2/14.</i></p> <p><i>No op any to abd. distention, lump, swelling in neck.</i></p> <p><i>no family H/o any blood transfusion.</i></p>	<p>40 fever off and on x 2wks epistaxis x 2wks pales 15 days</p> <p>Informant Uncle and maternal grandmother - not reliable.</p> <p>Epistaxis first episode after trivial trauma.</p> <p>neurotic episodes, self-limited.</p> <p>H/o bruising after trivial trauma (+)</p> <p>Pales for 15 days. Requiring PRBC transfusion one on 15/2/14.</p> <p>No op any to abd. distention, lump, swelling in neck.</p> <p>no family H/o any blood transfusion.</p>

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)

बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

1/3/14 Contin Value

→ 34790
→ Hb: 7.7
Plt: 19,000
Ri-21 L-55 M12

40 E Dr. R. Sela

Plan: to review on Monday
Reports.

5/2/14 = 1 Syg. Allergic smd OD HS x 5 day.
2. 2.5g woin (smd/100g) 6 ml to 500

-3 FEB 2014

10-66g

(3)

- Cops
- Genosil (gelone)
for 8 bags, clean food
cleans food
- Donor card

- Blood Bank No
cytogenetics

→ 12-14
Cytogenetics
Mantle
COP
COP
who

Command
NPO
8:30 am
BIM ay =
Biopsy

Repeat pl.
take sample

B/D ON
4/3/14
NPO m.
8:30
COP Biopsy

Pro few complan
of w faulty
will have to
at 11:14

Immunophy
cytochem

40 cough
x 1 day
no fever

Syg cetizine
2.5ml
OD x 5 day

Syg crocin 5ml
2x
(4-5 day)

Next OPD
7 am



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान मना है। / SMOKING PROHIBITED IN HOSPITAL PREMISES

OPR-6

शरीरमार्गं स्वच्छमस्रापयन्म्

Wed, Sat

एकक/Unit

विभाग/Dept. 2014/003/0005019

ब० र० वि० पंजीकृत सं० / O.P.D. Regn. No.

UHD: 100101676
पता/Address

नाम / Paediatrics (बाल चिकित्सा)	Unit/II	लिंग / Sex	आयु / Age
F / S / W / H / D of			
PRATIGYA KUMARI	D/O : DINESH YADAV	F महिला	2Y / वर्ष 6D दिन

VILL- GURHA PO. DEVIPUR
KODERMA
JHARKHAND

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

Registration Time : 8:00 AM TO 10:30 AM
Done By: Paediatrics Counter/706
Room No. 3, Ground Floor (तल मंजिल)
01/03/2014 08:23:21 AM

Plan

P/S - 85% blank
MPO - ve

no acute complaint

ADH → 353cl k

Echo → (N)

EF - 65%

Ps sepost (27/1/14)

my HBV s (done)
Cerebral Doppler
MCT test
Revalin on 3/3/14
10mg - 10mg

Prognosis
Good

POC file made
- vgo amature to be
- anget on monday
- Bldg donation ✓

Cops
miscel marks

ES Ray Code
27/1/14
Donor label

Hor - me Bhogman satar

- Pl do ~~sample~~ Hgr from
Dr. conler and
inform SIR Day care

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)

बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

19/4/14 - J. Lucas 5100 W 104
ST

19 APR 2014

General



सर्वेभ्यो सर्वेषु

अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL

बहिरंग रोगी विभाग / Out Patient Department

अस्पताल के अन्दर धूम्रपान ~~Not Allowed~~ SMOKING PROHIBITED IN HOSPITAL PREMISES

OPR-6

POC-52/14

एकक/Unit 2014/003/0005019
 विभाग/Dept. Paediatrics (बाल चिकित्सा) Unit-I

४०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. UHID: 100101676

नाम/Name	पिता/पुत्र/पत्नी/पति/पुत्री F/S/W/H/D of	लिंग Sex	आयु Age	पता/Address
PRATIGYA KUMARI	D/O: DINESH YADAV	महिला	2Y /वर्ष 1M /महिना 8D /दिन	VILL- GURHA PO. DEVIPUR KODERMA JHARKHAND

निदान/Diagnosis

दिनांक/Date	उपहार/Treatment
Registration Time : 8:00 AM TO 10:00 AM Done By: Paediatrics Counter/706 Room No. 3, Ground Floor (तल मंजिल) 03/04/2014 09:19:09 AM	4/4/14 = 1. VCR 0.8mg (1) 2. DNR 15mg (1) 3. Lucean 5100 IU (1)
6/4/14	7/4/14 = 1. Lucean 5100 IU (1)
1. Sygg. Zinc (1)	
9/4/14 = 1. Lucean 5100 IU (1)	
11/4/14 = 1. Lucean 5100 IU (1)	
12/4/14 =	12/4/14
1. 1/2 VCR 0.8mg (1)	- 1/2 Lucean 5100 IU (1)
2. 1/2 DNR 15mg (1)	
3. 1/2 Methocarbamol 10mg (1)	13/4/14
4. 1/2 A.C. 28mg (1)	1. Lucean 5100 IU (1)
5. 1/2 Hydrocortisone 32mg (1)	

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)

बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

RE

ene,

Date: 17/02/2014

ID : 0887-02/2014

lif.

to 2 neucleoli

c leukaemia



DEPARTMENT OF LABORATORY ONCOLOGY
 Dr. B. R. A. Institute Rotary Cancer Hospital
 All India Institute of Medical Sciences, New Delhi -110029
Peripheral Smear Report



Lab No. P1616/14

Name PRATIGYA

Registration No. 52

Age / Sex 2 / F

Date of receiving : 21/3/2014

Department PEDS III

Date of birth

Date of reporting : 22/3/2014

WBC : N 3/50 L 47/50 E - Blast

Pro -

RBC : Normocyt normochrom +

Polk - Ellipto -

Crenat - Sphero -

Target - Polychr -

HJ Body - Baso stipl

Rouleaux -

M -

Aniso -

Dachro -

Blister -

Anisochrom -

Cabot ring -

Agglutination -

B -

Others TLC low

Micro -

Schisto -

Bite -

Nucleated RBC -

Parasite -

Others -

Rectic -

Meta -

Macro -

Acantho -

Hypo -

Myelo -

Platelets *Reduced*
Cytochemistry
Remarks

Date: 24/3/2014

Report Entered by

Dr. Pranay Tanwar

Consultant Incharge

Consultant Incharge

CONSULTANT PATHOLOGIST



DEPARTMENT OF LABORATORY ONCOLOGY


Dr. B.R.A. Institute Rotary Cancer Hospital

All.I.M.S., New Delhi-110029.

CYTOLOGY REPORT

Reg. No: 52/14
Date: 28/03/2014
Age/ Sex: 2 F
Department: PAED III
Name: PRITIGYA
Consultant: DR.R.SETH
Sample : CSF

Report: CSF is traumatic & shows occasional lymphocytic & neutrophils.


Dr. Pranay Tanwar
Consultant In Charge

Consultant Incharge



DEPARTMENT OF LABORATORY ONCOLOGY
Dr. B.R.A. Institute Rotary Cancer Hospital
AIIMS, New Delhi-110029.
CYTOLOGY REPORT

Date: 15/03/2014

Reg. No: 101676

Department:

Age/ Sex: 2 F

Consultant:

Name: Pralgya

Sample :

Port:

CSF shows occasional lymphocyte and neutrophil.

Dr. Pranay Tanwar

Consultant In Charge

Consultant Incharge

DEPARTMENT OF LABORATORY ONCOLOGY
Dr. B.R.A. Institute Rotary Cancer Hospital
A.I.I.M.S, New Delhi-110029.
MOLECULAR REPORT

Date: 21-03-2014

Pat lab no: 103/14

REG NO: 101676

Sex: F

PRAITGYA

Age: 2

Pat: DR. S. KABRA

Department:

Notes:

RT-PCR for BCR-ABL fusion transcript is negative.

Per Dr Anita
Dr Anita Chopra/Dr Rajive Kumar
Consultant in charge.

ft:

Consultant Incharge



DEPARTMENT OF LABORATORY ONCOLOGY

Dr. B. R. A. Institute Rotary Cancer Hospital

All India Institute of Medical Sciences, New Delhi - 110029

BONE MARROW

M641/14

PRATIYGA

Age 52

Sex M / F

Referring : 6/3/2014

PEDS 111

Department

Ward / Bed

Date of birth

Date of reporting : 10/3/2014

Flow Report

Bone marrow preparation shows near total replacement by blasts which are
myeloid in origin. Cytochemical stains are negative.
Acute leukemia, morphologically acute lymphoblastic leukemia.
Immunophenotyping for confirmation.

Date of Printing : 10/3/2014

Dr. Amar Ranjan
Consultant Incharge



DEPARTMENT OF LABORATORY ONCOLOGY

Dr. B. R. A. Institute Rotary Cancer Hospital

All.I.M.S. New Delhi-110029.

FLOW CYTOMETRY REPORT

PW no:

F-247/1A

Reg. No: 10676

Date:

11/03/2014

no:

PRATIGVA

Age/ Sex: 4 F

Department: PAED III

Site:

Peripheral blood

Consultant:

Flow cytometric analysis of peripheral blood shows approximately 75% blasts which are cCD79a+, CD45dim+, CD38+, CD19+, CD10+, CD34+, HLADR+, and CD3-, CD20-, CD22-, CD33-, CD13-.

Findings are of B-cell-ALL. Adv-: cytogenetic studies.

Dr. Pranay Tanwar
Consultant in Charge

उद्योगपालिका कार्याधिकारिता विभाग
DEPARTMENT OF LABORATORY MEDICINE

रोगाधिकार रसायनशास्त्र
CLINICAL CHEMISTRY

भारत मातृशिशु स्वास्थ्य संस्थान, भारतीय नगर, नई दिल्ली
All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029

रक्त रसायनशास्त्र
BLOOD CHEMISTRY

वयस (Age) २५

OPD / WARD

UNIT

Signature
Name of Medical Officer

[Signature]

LDH

LDH-353

UL

Time

FORM WILL NOT BE ACCEPTED



All India Institute of Medical Sciences

AIIMS NEW DELHI

DATE: 20/02/24
TIME: 10:00 AM
PATIENT NAME: [Name]
REF No: [Number]
CARD No: [Number]
PAYMENT

Admin Copy

Application Information
Appr. Ver. 01.0 & 4
Issued by: 5386

RAILASH DIAGNOSTICS & HEALTH CARE

(A modern day Pathological laboratory)
1C, Ground floor, Shree Sai Tower, Debuka Nursing Home Lane,
Circular Road, Lalpur, Ranchi-834001, INDIA
Ph-9234133248

Patient Name: **Baby Pratigya** Age/Sex : 02Yr/F Date: 17/02/2014
Ref. Doctor : M/O Astha Hospital ID : 0887-02/2014

C-46/14

Report on Bone Marrow Aspiration

Site: Tibia
Aspiration: Difficult.
Cellularity: Mildly hypercellular.
Erythropoiesis: Markedly suppressed.
Megakaryopoiesis: Suppressed.
Myelopoiesis: There is minimal maturation of myeloid series of cellf.
Lymphocytes: Within normal limits.
Plasma Cells: Within normal limits.
L:E Ratio: 100:1
Blasts: The blast cells are morphologically lymphoid with 1 to 2 nucleoli and scanty cytoplasm.
Parasites: Not seen.
Impression: Acute leukaemia, morphologically acute lymphoblastic leukaemia
Advice: Immunophenotyping for confirmation.

CONSULTANT PATHOLOGIST



Healthcare Diagnostics

EXCLUSIVE DIAGNOSTIC FACILITY

REPORT

Page 1 of 1

Name of Patient : Baby Pratiyga Kumari
Age/Gender : 02 Yrs/Female
Referred By : Dr. AIIMS
Sample Type : Serum
Collected At : Healthcare Diagnostics (11/12)

Lab. Code : 20121
Test Registered on : 27/02/2014
Specimen Drawn on : 27/02/2014
Test Reported on : 27/02/2014
Referring Customer : Self

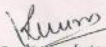
IMMUNOSEROLOGY REPORT

Tests/Investigations	Result	Cut off control
Australia Antigen (HbsAg) (Hepatitis B Surface Antigen)	: Non Reactive	Non Reactive
HIV -Antibodies (1)	: Non Reactive	Non Reactive
HIV - Antibodies (2)	: Non -Reactive	Non Reactive
HCV - IgG (Hepa C Virus antibody)	: Non Reactive	Non Reactive
HCV - IgG Antibodies to HCV Structural core Antigen	: Non Reactive	
HCV Non - structural antigen (NS 3 & NS 4) *	: Non Reactive	

* Recombinant protein NS 3 & Synthetic peptide NS 4.

Comments - These are only screening rapid visual tests for the qualitative detection of virus in human serum & plasma enables diagnosis of the early & acute stage of infection. This is a professional opinion, not the diagnosis. Please correlate clinically.

*** End of the report ***


Dr. Jansum Lata
M.D. (Path. & Bact.)
Consultant Pathologist

Note : This report is subject to the terms and conditions mentioned overleaf.
PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED

AUTHORISED SIGNATORY

Measurements

Normal Values

Aorta 73	(21-22mm/m ²)	LA es 18	(4
LV es 19	(16-19mm/m ²)	LV ed 30	(19-
IVS ed 5	(16-10mm)	PW(LV)ed 6	(17-11.
RV ed	(4-14mm/m ²)	RV Anterior wall	(upto 5m.
EF 68%	(62-80%)		
IVS Motion	Normal/Flat/Paradoxical		
IAS			

CHAMBERS

LV	Normal/Enlarged/Clear/Thrombus/Hypertrophy Contraction Normal/Reduced
LA	Normal/Enlarged/Clear/Thrombus
RA	Normal/Enlarged/Clear/Thrombus
RV	Normal/Enlarged/Clear/Thrombus

PERICARDIUM

Normal/Thickened/Calcification/Effusion.

REMARKS**TEE****DIAGNOSIS****Final Impression**

① Study

Fam
Resident

Consultant

ECHOCARDIOGRAPHY REPORT

DEPARTMENT OF CARDIOLOGY, CARDIOTHORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

NAME PARTISYA AGE 2 SEX M/F DATE 27/2/13
 ECHO No. 1002 CV No. CR No. VCR TAPE No.
 HEIGHT.....cm WEIGHT.....kg. BSA.....m² Ref. Physician...D. Sethi
 Referring Diagnosis
 Quality of Imaging Poor/Adequate/Good Done by Dr. e. van Checked by Dr.

MITRAL VALVE

Morphology AML - Normal / Thickening / Calcification / Flutter / Vegetation / Prolapse / SAM / Doming
 PML Normal / Thickening / Calcification / Prolapse / Paradoxical motion / Fixed.
 Subvalvular deformity Present / Absent Score.....
 Doppler Normal / Abnormal
 Mitral stenosis Present / Absent RR interval.....msec
 EDG.....mmHg MDG.....mmHg MVA.....cm²
 Mitral regurgitation Absent / Trivial / Mild / Moderate / Severe

TRICUSPID VALVE

Morphology Normal / Atresia / Thickening / Calcification / Prolaps / Vegetation / Doming
 Doppler Normal / Abnormal
 Tricuspid stenosis Present / Absent RR interval.....msec
 EDG mmHg MDG.....mmHg
 Tricuspid regurgitation Absent / Trivial / Mild / Moderate / Severe Fragmented Signals
 Velocity.....m/sec Pred. RSVP-RAP+.....mmHg

PULMONARY VALVE

Morphology Normal / Atresia / Thickening / Doming / Vegetation
 Doppler Normal / Abnormal
 Pulmonary stenosis Present / Absent Level
 PSG.....mmHg Pulmonary annulus.....mm
 Pulmonary regurgitation Present / Absent
 Early diastolic gradient.....mmHg End diastolic gradient.....mmHg

AORTIC VALVE

Morphology Normal / Thickening / Calcification / Restricted Opening / Flutter / Vegetation No. of cusps 1/2/3/4
 Doppler Normal / Abnormal
 Aortic stenosis Present / Absent Level
 PSG.....mmHg Aortic annulus.....mm
 Aortic regurgitation Absent / Trivial / Mild / Moderate / Severe

HEMOGRAM

DATE	HB	TLC	PLT (lakhs)	ANC
10/03/14	5.9	58,300	15,000	
11/03/14	6.3	36,700	25,000	4.5
12/03/14	5.6	37,000	32,000	9.0
13/03/14	4.8	49,000	57,000	9.4
14/03/14	8.0	28,600	28,000	1.6
15/03/14	6.5	7100	11,000 (PRP)	0.5

BIOCHEMISTRY:

Date	Urea/Cr	Ca/PO4	Uric acid	Tp/Alb.	OT/PT	ALP
11/03/14	22/0.4	9.4/5.3	6.0	7/4.4	28/15	283
13/03/14	14/0.4	9.8/4.3	2.0	7.1/4.7	22/10	253
14/03/14	22/0.5	9.7/4.3	4.2	7.0/4.4	21/25	329

Flow cytometry(11/03/14):-Flow cytometry analysis of peripheral blood showed 75% blasts which are cCD79a+, CD45dim+, CD38+, CD19+,CD10+, CD34+, HLADR+ and CD3-, CD20-, CD22-, CD33-, CD13-, s/o B-cell ALL.

CSF for blast (sent on 14/03/14) – awaited
RT-PCR for BCR-ABL (15/03/14)- Awaited

CONDITION AT DISCHARGE:

O/E: Alert, active, HR: 96/min, RR: 24/min, BP -98/68 mm Hg. CFT<3 sec. Periphery: warm, Pallor-present/No clubbing /cyanosis/no icterus, no lymphadenopathy, no petechiae. Chest: Air entry equal in all areas, no added sounds. CVS: S1S2 normal. No added sounds. Abdomen: distended ,non tender Liver palpable – 3.5cm RCM with span of 5cm below, spleen-2.5cm palpable below LCM. CNS: HMF-normal. No CN deficit, No meningeal signs. No focal deficits.

ADVICE AT DISCHARGE:

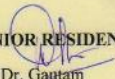
1. Syp. Prednisolone forte 2.5ml OD (60mg/m²/day) (5ml = 15mg) Give 5ml - BD
2. Syp Shelcal 5ml OD
3. Syp Zincovit 5 ml OD
4. Syp. Vitcofol 5ml OD
5. Syp. Septran 7.5 ml A/D
6. General measures as explained
7. Collect pending reports (CSF for Blast from IRCH R.No.8)
8. Collect RT-PCR for BCR-ABL from Prof. Dr Anita Choudhary lab (IRCH- Room no 416)
9. Plan is to continue chemotherapy from day care
10. Inj PRBC – 150 ml slow IV over 4 hours (Inj lasix midway)
11. Please laminate this important document

JUNIOR RESIDENT

Dr Jijendra


SENIOR RESIDENT

Dr. Gautam





24 x 7 काल सेन्टर नम्बर - 011-40401010
अखिल भारतीय आयुर्विज्ञान संस्थान (अ.भा.आ.सं.)



Department of Pediatrics/ Unit III

Name: Pratigya	AGE: 2 year	SEX: Female	BED.NO:D5/12
UHID: 100101676 CR No.460821	DATE OF ADMISSION: 10/03/14	DATE OF DISCHARGE: 15/03/14	
DIAGNOSIS: Acute lymphoblastic leukemia (B-cell) admitted for induction therapy(BFM protocol)			
Consultant: Prof. S.K. Kabra, Dr. R. Seth			

HISTORY AT PRESENTATION: 2year old female Child presented with c/o fever on &off, epistaxis for last 2month and progressive pallor since last 15 days. For above complaint child was evaluated On OPD basis, diagnosed to have ALL on basis of blasts in peripheral smear. Currently child presented with h/o fever since last 5 days moderate grade not A/W chills, intermittently responsive to antipyretics. Fever was associated with nasal discharge and cough. No h/o fast breathing/dyspnea/ ear discharge/oral ulcer/bleeding from any site/seizure/altered sensorium/loose motion/vomiting/abdominal pain.

EXAMINATION: O/E: Irritable, febrile, HR: 130/min, regular, all PP-palpable, normal volume, BP-103/68 mm Hg. CFT<3 sec. Peripheries: warm. RR- 26/min, no retractions, Spo2-98% at room air. GPE: Pallor-present /no clubbing /no cyanosis/no icterus. No lymphadenopathy, no edema no oral ulcers, petechiae spot present on B/L lower limb.

Chest: Air entry equal in all areas, no added sounds. CVS: S1S2 normal. No added sounds.

Abdomen: Normal shape, Liver- palpable, 7.5cm BRCM, splenic- palpable 2.5 cm below LCM

CNS: Alert, active, conscious, B/L pupil equal reacting to light No CN deficit. No focal neurological deficit, No meningeal signs.

Weight- 11kg (25th centile) Height -87cm (50th centile) BSA- 0.51 m²

Hospital Course: Child was admitted with above complaints, at time presentation found have high TLC counts (58,300) child was started on double hydration, allopurinol and monitored for ATLS. Child was also given PRP transfusion in view platelets counts -15,000. In view high TLC count (>50,000) child was started on BFM protocol on day 2 of admission, ITM was done on 14/03/14 CSF sample for blast was also sent. Child one PRBC transfusion (I/V/O Hb-5.3) on day 3 of hospital stay. Child kept on double hydration for 3 days, fluid was changed to single maintenance on day 4 of hospital stay as TLC counts decrease to 28,600/mm³. Child didn't show any evidence of ATLS throughout hospital stay. During hospital stay, child didn't have any fever spikes and she remained hemodynamically stable. Last platelet counts (11,000) on 15/03; PRP transfusion was given. Plan is to give chemotherapy as per BFM protocol and elective BT in daycare.

TREATMENT GIVEN: Symp. Septran, Tab Allopurinol, Symp Prednisolone Forte, Symp Allerid, Inj.Lasix.

सेवा में

श्री मान् अर्धीलक

रिजिस्ट्रार इंडिया ट्रस्ट

सेक्टर - 3-D-22

नौएडा (ऊ० प्र०)

विषय - अपने बेटी का इलाज के समन्वय में
श्री मान्

मेरा नाम दिनेश शर्मा है और मेरी बेटी का नाम
प्रिया कुमारी है और उसकी उम्र 2 साल 4 महीने है
और मेरी बेटी का इलाज दिल्ली के एम्स हॉस्पिटल में
करा रहा है। जिसका कुल खर्च ही लाख रुपये है।
मेरी बेटी का जल्द कैंसर है और मेरी बेटी के
इलाज के लिए पैसा इंतजाम नहीं हो सका है आप से
निवेदन है कि मेरी बेटी का इलाज के लिए पैसा इंतजाम
कर दें। मेरी बेटी का निहंजी आप लोगों के हाथ में है।
कृपया आप मुझे सहायता करे मैं आपका
सच्चा आभारी रहूँगा

प्राची

दिनेश शर्मा