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3	. Ambedkar Institut	Reg. Date -09/88/2017 Clinic No. 19709/2017	ITAL t	OPR-6
एक्क/Unit	Tepti, MEDICAL ONCOLOGÝ Cateril			
विभाग/Dept	time RUSTAMKUMAR	UHID-19306-070		
नान/Name	2, O- GREESH KUMAR 1 wine No. 8958623734 , Micess 29 RASULAPI R PO- GHAG L VHORL FIROZABAD , UTTAR PRA	Room 13 (Shift Afternoom) (HAV, MOHAME JADPUR, MDESH, Pin:205141, INDIA	দশ নিথি∕Date of Bir	th
		1 -1		
नेदान/Diagnosis	8- ALL MR			
दिगांक/ Date	1) consolidation	्र स्प्यार/ Treatment		
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11/12/17 -	Adw -			
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13.12.17	11-8 1450 2.0LA	w 23	2 5-15	
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अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE O.R.B.O., AllMS, 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

DN. FOLKTE SMY

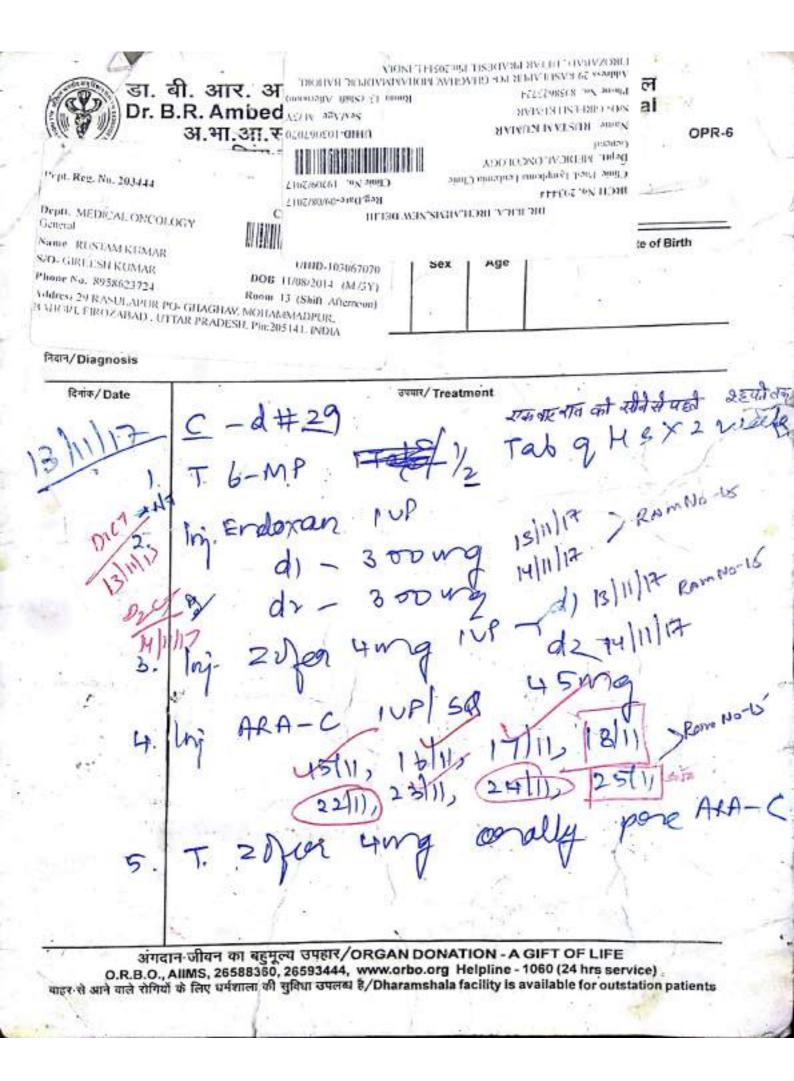
fever precautions + for on 18/12 with

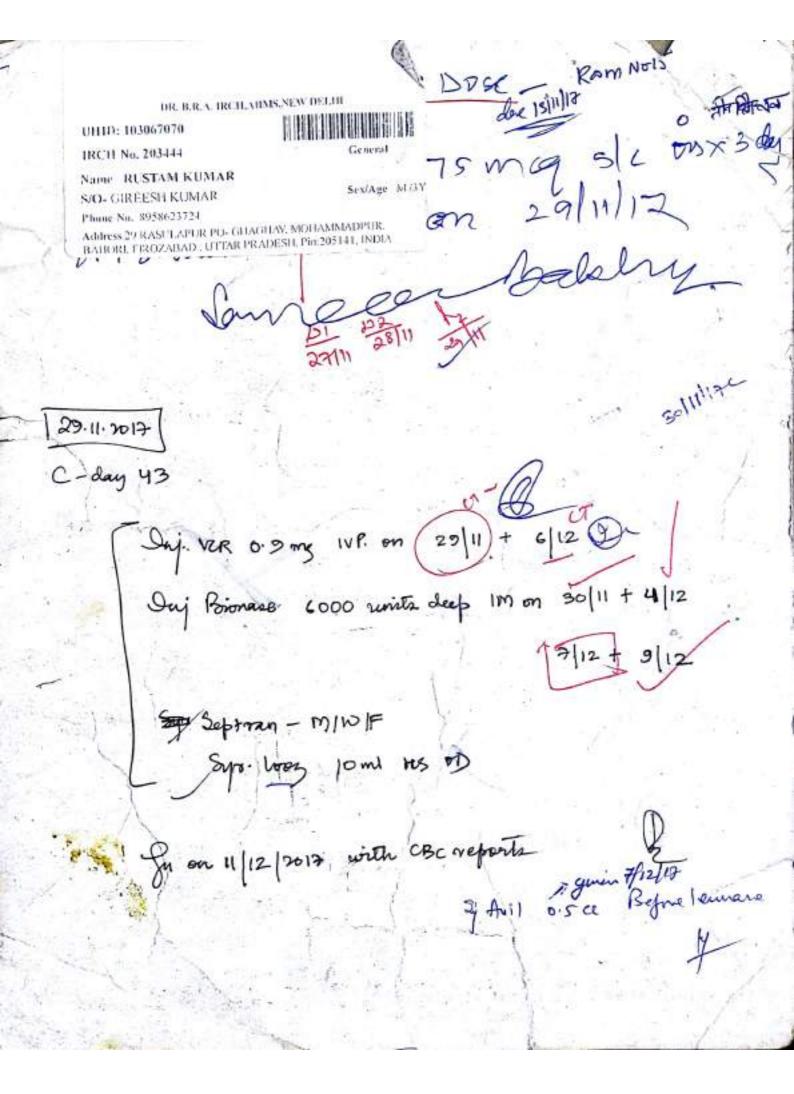
18/12/17

Admit for 1st HDMTX

ONLY CONTROL

Spron 01-01-2018 with OBC+LFT+KFT



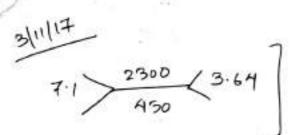




डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल Dr. B.R. Ambedkar Institute Rotary Cancer Hospital अ.भा.आ.सं. अस्पताल / A.I.I.M.S. HOSPITAL बहिरंग रोगी विभाग/Out Patient Department

		न्दर धूम्रपान मना है।/SMOI	KING	20344	14 14	LPREMISES
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Clinic Paed, Lympherm F 1 ptt. MEDICAL ONCO C negal 7 sinc RUSTAM KUM	HDGY tar	Reg Date-06/02/27/27/27/27/27/27/27/27/27/27/27/27/27	त्री if	शिंग Sex	अवु Age	जन्म तिथि/Date of Birth
2 D. GIREESH KUMAAR H une No. 8958623724 Mress 29 RASULAPUR H ROZABAD, UTTAR P	POLISUACIONAL	Sey/Age At Room 13 (Shift Attento)	-	(n)	3	D. D. Live
	7110-211g	91. ISOIA		ALL	on con	mlidation
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				3		GIET OF LIFE

अंगदान-जीवन का बहुमूल्य उपहार/ORGAN D 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





डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल Dr. B.R. Ambedkar Institute Rotary Cancer Hospital अ.भा.आ.सं. अस्पताल/ A.I.I.M.S. HOSPITAL

OPR-6

वहिरंग रोगी विभाग/Out Patient Department

Dept. Reg. No. 203444	Reg.Date-09/08/2017 Clinic No. 19709/2017	*	व०रो०वि० पंच	- त्रीकृत सं०/O.P.(). Regn. No
Depti. MEDICAL ONCOLOGY General Name RUSTAM KUMAR S/O- GIREESH KUMAR Phone No. 5958623724 Address 29 RASULAPUR PO- GHAGI BAHORL FIROZABAD . UTTAR PRAI	UIHD-103067070 DOB 11/08/2014 (M/3Y) Room 13 (Shift Afternoon) IAV. MOHAMMADPUR		ਜਿੱਧ Sex	अवदु Age	जन्म तिथि/Date of Birth

उपवार/Treatment दिनांक/Date

अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE O.R.B.O., AllMS, 26588360, 26593444, www.orbo.org Holpline - 1060 (24 hrs service) बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है/Dharamshala facility is available for outstation patients Romando 15 1 T-MTX 12mg 7 milesty x 2 7. Syn. Septonan 1top The dancan g. Fr with Chc on 25/10/17 - Dry. VCR 0.9 mg IVP on 26/10 C-day 15 Dry: Brionase 6000 runits deep 1M Quon 8/11/2019 2 CB(continue Septem m/w/F



YUSUF SARAI











Name

: Rustam

: 131469894

Gender: Male

Collected: Received:

14-08-2017 16-08-2017

Lab No.

: 4 Years

Reported:

22-08-2017

A/C Status

: Dr. Sameer Bakshi

Report status: Final

Fluorescence in-situ Hybridization (FISH)

ALL FISH Panel

Specimen

: Peripheral blood

Clinical Indication

: ? ALL

Result

: nuc ish(BCR×3)(ABL×2)[46/200]

: nuc ish(5'MLL,3'MLL)×2(5'MLLcon 3'MLL×2)[200]

: nuc ish(TCF3×2)(PBX1×2)[200]

: nuc ish(ETV6×2),(RUNX1×4)[72/200]

Interpretation

: Specimen is negative for t(9;22)(q34;q11.2)(BCR/ABL),11q23(MLL gene rearrangement), t(1;19)(q23;p13.3)(PBX1/TCF3) & t(12;21)(p13;q22) (ETV6)(TEL)/RUNX1(AML1)). However one extra green signal for BCR gene in 23% cells & two extra orange signal for RUNX1(21q22) in 36% cells

were observed

Probe: ZytoLight SPEC BCR/ABL1 Dual Color Dual Fusion Probe.

Anger angeres in House Lawrence and	Normal nuclei	Abnormal nuclei	
Interphase nuclei analyzed	2 Orange 2 Green signals	2 Orange 3 Green signals	
200	154	46	

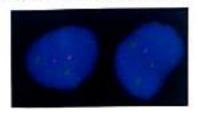
Cut off for the normal individual is 4%

Probe: LSI MLL Dual color, Break Apart Rearrangement probe.

De. EST MEE DUST COIDS, DICAN Apart	Normal nuclei	Abnormal nuclei
Interphase nuclei analyzed	2 Yellow	1 Orange 1 Green 1 yellow signals
200	200	00

Cut off for the normal individual is 3%

BCR/ABL1 Dual Color Dual Fusion



LSI MLL Dual color, Break Apart Rearrangement



eal FathLabs

YUSUF SARAI

(Hony) Beig Dr. Arvind Lat Delava Ch.





Tel: 011 - 3040-3210, Fax: 011 - 3040-3204





Name

Lab No.

: Rustam

: 131469894

: 4 Years

Gender: Male

Collected:

Mational Reference Lab: Sector-18, Block E. Rohint, New Dehi - 110 085

E-mail: talpatritibs@lalpatriabs.com Web: www.talpatrilabs.com

14-08-2017

Received: Reported:

16-08-2017 22-08-2017

A/C Status

Ref by : Dr. Sameer Bakshi

Report status: Final

Probe: LSI PBX1 (1q23) S. Orange/LSI TCF3 (19p13.3) S. Green, Vysis, Abbott Molecular Inc.

Interphase nuclei analyzed	Normal nuclei 2 Orange 2 Green signals	Abnormal nuclei 1 Orange 1 Green 2 Yellow signals	
200	200	00	

Cut off for the normal individual is 3%

Probe: Vysis LSI TEL(ETV6)(12p13) S. Green / LSI RUNX1(21q22) S. Orange Vysis, Abbott Molecular Inc.

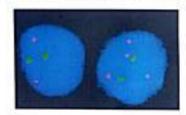
Interphase nuclei analyzed	Normal nuclei	Abnormal nuclei	
- Indiana analyzou	2 Orange 2 Green signals	4 Orange 2 Green signals	
200	128	72	

Cut off for the normal individual is 3%

LSI PBX1 (1q23)/ TCF3 (19p13.3)



LSI TEL ETV6)(12p13)/ LSI RUNX1(21q22)



Comment: t(9;22)(q34;q11.2) is the hallmark of almost all cases of Chronic Myeloid Leukemia (CML). In 5 to 10% of CML patients, the BCR/ABL gene fusion occurs in the absence of a cytogenetically detectable Ph chromosome as a result of more complex rearrangements. It is also seen in 25-30% cases of adult ALL and 2-5% of childhood ALL and is associated with an adverse outcome. Translocations involving the mixed-lineage. leukemia (MLL) gene located at chromosomal band 11q23 occur in acute lymphocytic leukemia (ALL). t(1;19), found in 25% of childhood B-ALL with cytoplasmic µ expression, fuses the transcription factor produced by TCF3 at 19p13.3 with PBX1 at 1q23. The t(12;21)(p13;q22) chromosomal translocation is the most common chromosomal rearrangement in childhood acute lymphoblastic leukaemia resulting in the fusion of the 5' section of the ETV8(TEL) gene on chromosome 12p13 to almost the entire RUNX1 (AML1) gene on chromosome 21q22. This translocation is present in approximately 30% of childhood pre-B-ALL and 3-4% of adult ALL. t(12;21) cannot be detected by standard cytogenetics unless a more complex rearrangement is present.

Dr. Saurabh Kumar Bhattacharva Ph. D Cytogenetics HOD

Dr. Leena Rawal Ph. D. Molecular Genetics Scientist, Cytogenetics

Lal PathLales

National Reference Lab: Sector-18, Block-E, Robint, New Debt - 110 085 Main Lab: "Eskay House", 54, Hanuman Road, New Dehr - 110 001 Tel: 011 - 3040-3210, Fac: 011 - 3040-3204 E-mail: laipathlabs@laipathlabs.com Web: www.laipathlabs.com



Dr. Vandana Lal M.D.(MDO, IPCAP Chef of Shitheling

Name:

Rustam

Lab No:

131469894

Yusuf Sarai

Reg. Date:

Rec.Date:

Age/Sex 15.08.2017

4 Years

Rep Cen: Coll.Date:

14.08.2017

Ref.By: Dr. Sameer Bakshi

Rep.Date: 22.08.2017

REPORT OF CHROMOSOME ANALYSIS FOR HEMATOLOGICAL MALIGNANCY

SPECIMEN

Peripheral blood

INDICATION

MEDIUM USED

? ALL

RPMI – 1640, Hi-Karyol RPMI

16.08.2017

METHOD

24-hr unstimulated cultures with appropriate serum and

antibiotics.

BANDING RESOLUTION

450-550

BANDING TECHNIQUE

GTG (G bands by Trypsin and Giemsa)

CYTOGENETIC PROFILE:

Metaphases counted

20

Metaphases analysed

20

Metaphases karyotyped

02

Metaphases photographed

02

KARYOTYPE

55,XY,+Y,+3,+4,+8,+17,+18,+21,+21,+22[4]/46,XY[16]

INTERPRETATION

Four of the 20 metaphases analysed are abnormal and show high hyperdiploidy (chromosome number 55) with gains of several chromosomes as listed above including trisomy 4 and tetrasomy 21. High hyperdiploidy is considered as a good prognosis in ALL. Kindly correlate these results with clinical and hematological findings.

KARYOGRAM ATTACHED

Lal PathLabs

National Reference Lab; Sector-18, Block-E, Rohint, New Deht - 110 085
Main Lab; "Eskay House", 54, Haruman Road, New Deht - 110 001
Tel: 011 - 3040-3210, Fac 011 - 3040-3204
E-mail: laborhabs@labarhabs.com Web; www.laborhlabs.com



Dr. Vandana Lal account, (PCA) Chief of Challegy

Name:

Rustam

Lab No: Rep Cen: 131469894

Yusuf Sarai Coll.Date: 14.08.2017

Reg.Date:

15.08.2017

16.08.2017

Rec.Date:

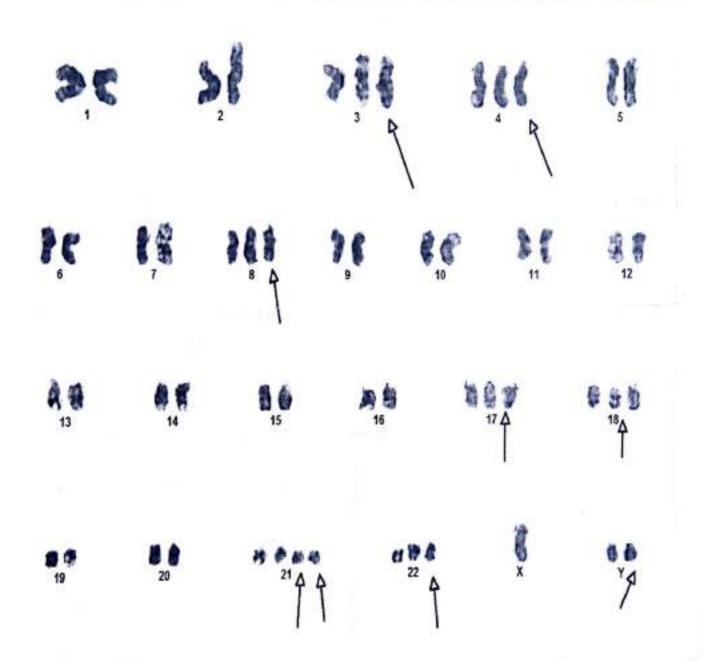
Age/Sex

4 Years

M

Ref.By: Dr. Sameer Bakshi

Rep.Date: 22.08.2017





अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI -110029

आपातकातीन विभाग

(DEPT. OF EMERGENCY MEDICINE)

UHID No:103067070

(REVISIT)

आपातकालीन में.(Emergency No): 2017/030/0107694

दिनांक DATE: 13/09/2017

समय TIME: 01:02:19 AM

NON-MLC

FITH NAME: MR. RUSTAM KUMAR

आयु AGE: 3 years 1 months 2 days

PATI/SEX: M

S/O: GIREESH KUMAR

पता ADDRESS:

Triage:

Unresponsive

मकान संख्या H.NO:

29 RASULAPUR PO-

गती / मुहल्ला STREET/MOH MOHAMMADPUR, BAHORI

शहर/प्रखंड CITY/BLOCK:FIROZABAD

चिन PIN:

205141

राज्य STATE:

UTTAR PRADESH

द्रभाष सं. PHONE NO:

Paediatries Emergency

मोबाइल MOBILE NO:

8958623724

GHAGHAV

स्थान Location:

Criticality: Red / Yellow / Green

द्वारा BROUGHT BY: Relative : FATHER

Responsive/

BP /min

mmHg RR

/min

spO2

Shifted to Paeds/ Main/ New Emergency

40 Kgo B-cell are (anadenta)

asserved Aspour

at medical concilory

Presenting Complaints

do vain absorm x feet

we go for | vomiltin

Primary Assessment (ABCDE): Assessment Pentagon

Airway

Open & stable (Yes)No

If No.....

Breathing: RR

Efforts: Normal Poor/increased

Auscultation:

Air entry: Normal)poor/Differential

Added sounds:

None Stridor/Wheeze/Crackles

SpO2 on Room air. 9.67.

Circulation

106 HR..../min

. 434 CFT....secs.

BP.....mmHg

Peripheral pulse: Poor/Good

Central pulse:Poor/Good

Skin temp: Warm cool

Others

Aledo - soft BS @

Disability

GCS....15

Pupil size.. 5 min

Pupillary Reactions...

Motor-activity:

Normal &

Symmetrical/Asymetrical/

Posturing/Flacidity/Seizure

Blood Sugar....mg/dl

Exposure:

Temp. aperile

Colour:Normal/pallor/cyanosis

/mottled

Any other skin lesions.....

Diagnosis

12/9/17

18 40

Scanned by CamScanner

ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)

New Delhi, REQUISITION SLIP



Requested By : Dr.ARUN GARG IRCH

Patient Status: Indoor (IRCH MRO WARD) Payment Category : General 0) Requisition No: OBR/2017/1741258

Requisition Date: 19/09/2017 01:12 PM

Department Name: Medical Oncology/Unit-I

Unit In-charge : Dr. Lalit Kumar (HOD)

Mr. RUSTAM KUMAR

Sex Male

UHID:

Age: 3 years 1 month 8 days

Address:

Street: 29 RASULAPUR PD- GHAGHAY, MOHAMMADPUR, BAHORI, City: FIROZABAD , State: UTTAR PRADESH, Country

INDIA Pin: 205141

Recommended by : Dr. Lalit Kumar (HOD)

Investigation to be done:-

Investigation Namo

CHEST

X-RAY (IRCH)

Investigation Category

MRO-12

MEDICAL RECORD Progress Notes

NOTE DATED: 09/19/2017 15:45

LOCAL TITLE: MED ONCO IRCH DISCHARGE SUMMARY

STANDARD TITLE: DISCHARGE SUMMARY VISIT: 09/19/2017 15:45 DR OFFICE

Dr BR AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL, AIIMS, NEW DELHI-110029
DEPARTMENT OF MEDICAL ONCOLOGY

DISCHARGE SUMMARY

"UNLESS OTHERWISE SPECIFIED ALL DATES MENTIONED IN THIS NOTE ARE IN THE FORMAT MM/DD/YYYY"

REGISTRATION DETAILS

UHID No:103-06-7070 IRCH No: CR No: NAME:RUSTAM, RUSTAM AGE:3 GENDER:MALE

DOA:Sep 14, 2017 DOD:Sep 19, 2017 DURATION OF STAY:6 days

WARD: MRO Ward BED No:12

CONSULTANT INCHARGE: Dr Sameer Bakshi

ADDRESS:

DIAGNOSIS & REASON FOR CURRENT ADMISSION

CASE SUMMARY: B-ALL

TLC-38180

ON ICICLE PROTOCOL WEF 16/8/17

ON D26 WITH ACUTE ABDOMEN ? VCR INDUCED

ADMITTED FOR :SUPPORTIVE CARE

CASE SUMMARY: RUSTAM 3 YEAR OLD BOY PRESENTED WITH COMPLAINTS OF ON-OFF FEVER OF 1 MONTH DURATION ALONG WITH MULTIPLE NECK AND GROIN SWELLINGS. HE WAS EVALUATED IN OUTSIDE HOSPITAL FOR THE SAME AND WAS FOUND TO HAVE ACUTE LEUKEMIA AND WAS REFERRED TO AIIMS FOR FURTHUR EVALUATION AND MANAGEMENT. FLOW CYTOMETRY WAS S/O B-ALL. PATIENT WAS STARTED ON ICICLE PROTOCOL WEF 16/8/17. PATIENT PRESENTED WITH C/O PAIN ABDOMEN, VOMITING, CONSTIPATION. USG ADDOMEN & Pelvis S/O INTUSSEPTION JEJUNOEJUNAL-LEFT QUADRANT. AXR S/O DILATED LOOPS NO E/O OBSTRUCTION. PATIENT WAS TAKEN FOR INTRAOP LAPOROSCOPIC REDUCTION ON 16/9/17 BUT COULD NOT FOUND INTUSUSSEPTION. PATIENT WAS MANAGED CONSERVATIVELY IV FLUIDS/NPO/IV ANTIBIOTICS. PATIENTV IMPROVEED SYMPTOMATICALLY AND IS NOW BEING DISCHARGED IN A MEDICALLY STABLE CONDITION WITH ADVISE TO FOLLOW UP IN OPD

PRESENTATION AT CURRENT ADMISSION

VITAL SIGNS:

TEMP:98F RESP:18/min PULSE:86/min

BP:106/74mm of Hg SP02:%

GENERAL PHYSICAL EXAMINATION: PERFORMANCE STATUS:

PALLOR: - ICTERUS: - OEDEMA: - CYANOSIS: -

STERNAL TENDERNESS:- CLUBBING:- GUM HYPERTROPHY: -

LYMPHNODES: Normal

SPECIFIC FINDINGS: P/A -MILD TENDERNESS, BS+

** THIS NOTE CONTINUED ON NEXT PAGE **

RUSTAM, RUSTAM AIIMS NEW DELHI Printed:09/19/2017 16:03

103-06-7070 DOB:08/11/2014 Pt Loc: OUTPATIENT Vice SF 509

MEDICAL RECORD

Progress Notes

09/19/2017 15:45 ** CONTINUED FROM PREVIOUS PAGE **

INVESTIGATIONS AT CURRENT ADMISSSION

HEMOGRAM:

------Hb----7.5g/dl PLATELETS--2.14/microL TLC-----1800/microL ANC-----/microL MCV----/fL

PT---- secs ESR---- mm/Hr

RADIOLOGY:

USG Abdomen & Pelvis INTUSSEPTION JEJUNOEJUNAL-LEFT QUADRANT

STATUS ON DISCHARGE

GC at discharge : Fair

VITAL SIGNS:

TEMP: 98F RR:18/min PR:86/min BP:102/64mm of Hg INVESTIGATIONS:

Hb:g/dl PLATELETS:/microL TLC:/microL ANC:/microL

ADVICE ON DISCHARGE ***************

MEET DIETITIAN IN ROOM NO -153 (FIRST FLOOR IRCH) BEFORE GOING HOME Tab Ondansetrone 4mg sos before food Tab Pantaprazole 40 mg once a day before food Tab Crocin 250MG tab sos for pain/fever Hexidine Mouthwash / Steam Inhalation / Sitz Bath thrice a day Rest as written in OPD card In case of fever/diarrhoea/emergency contact 9868398310

FOLLOW UP

Come for follow up in in Board Room on Sep 25,2017 009:00 with Biochemistry Report, Hemogram Report .

> Signed by: /es/ gundu DRNARESH 09/19/2017 16:03

RUSTAM, RUSTAM 103-06-7070 DOB:08/11/2014 Pt Loc: OUTPATIENT

AIIMS NEW DELHI Printed:09/19/2017 16:03 Vice SF 509

MR-2 Discharge Summary

डा. बी.आर.ए. संस्थान रोटरी कैन्सर अस्पताल
Dr. B.R.A. INSTITUTE ROTARY CANCER HOSPITAL
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-११००२९
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, New Delhi-110029
छुट्टी का सारांश संक्षेप में
DISCHARGE SUMMARY

सी,आर.सं. / C.R. No.	O.P.D.O.	Date of Admission/Discharge
TIT/Name RNStern	067070 34/Age	9 11 11 — 9 1
History and condition on admission	4	
Hospital Course, Treatment given and Condition discharge	PPROC	_31120
15	0+1	re.
Relevant Investigation with Dates		9
		and the second
DIAGNOSIS :		10.400
4		
ADVICE :		dryst.
		()~

To attend......Follow up Clinic/O.P.D. on...

MEDICAL RECORD

- -

NOTE DATED: 08/17/2017 14:04

LOCAL TITLE: MED ONCO IRCH DISCHARGE SUMMARY

STANDARD TITLE: DISCHARGE SUMMARY VISIT: 08/17/2017 14:04 DR OFFICE

Dr BR AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL, AIIMS, NEW DELHI-110029 DEPARTMENT OF MEDICAL ONCOLOGY

DISCHARGE SUMMARY

"UNLESS OTHERWISE SPECIFIED ALL DATES MENTIONED IN THIS NOTE ARE IN THE FORMAT

REGISTRATION DETAILS **************

UHID No:103-06-7070 IRCH No: CR No:

NAME:RUSTAM, RUSTAM AGE:3 GENDER:MALE DOA:Aug 16, 2017 DOD:Aug 17, 2017 DURATION OF STAY:1 days WARD: MRO Ward BED No:13 CONSULTANT INCHARGE: Dr Sameer Bakshi

ADDRESS:

DIAGNOSIS & REASON FOR CURRENT ADMISSION

DIAGNOSIS: B-ALL

TLC-38180

STEROID PREPHASE W.E.F 16.8.2017

ADMITTED FOR :Evaluation and management

CASE SUMMARY: RUSTAM 3 YEAR OLD BOY PRESENTED WITH COMPLAINTS OF ON-OFF FEVER OF 1 MONTH DURATION ALONG WITH MULTIPLE NECK AND GROIN SWELLINGS. HE WAS EVALUATED IN OUTSIDE HOSPITAL FOR THE SAME AND WAS FOUND TO HAVE ACUTE LEUKEMIA AND WAS REFERRED TO AIIMS FOR FURTHUR EVALUATION AND MANAGEMENT.

FLOW CYTOMETRY WAS S/O B-ALL.AFTER SENDING SAMPLES FOR CYTOGENETICS AND ALL PANEL HE WAS STARTED ON STEROID (PREDNISOLONE AT 60 MG/MZ) W.E.F 16.8.2017, ALONG WITH STEROIDS HE WAS ALSO GIVEN 1.5 MG OF RASBURICASE AND HYDRATION.HE WAS ALSO TRANSFUSED 1 UNIT PRBC AND 2 UNITS OF PLATELETS . HE IS AFEBILE AND IS NOW BEING DISCHARGED IN A MEDICALLY STABLE CONDITION WITH ADVISE TO FOLLOW UP IN OPD PRESENTATION AT CURRENT ADMISSION ******************

VITAL SIGNS:

RESP:22/min PULSE:110/min TEMP: 98.6F BP:106/72mm of Hg SP02:99%

GENERAL PHYSICAL EXAMINATION: PERFORMANCE STATUS: ECOG 1

PALLOR:+ ICTERUS: - OEDEMA:- CYANOSIS:-STERNAL TENDERNESS:- CLUBBING:- GUM HYPERTROPHY: -

LYMPHNODES: Enlarged Cervical, Axillary, Inguinal

SPECIFIC FINDINGS:LIVER PALPABLE 7 CMS AND SPLLEN IS PALPABLE 6 CMS BELOW RESPECTIVE COSTAL MARGINS

BIOMETRIC DETAILS: WEIGHT:13kgS HEIGHT:93cms BSA:0.6 m2 CHEMOTHERAPY

** THIS NOTE CONTINUED ON NEXT PAGE **

RUSTAM, RUSTAM

AIIMS NEW DELHI

Printed:08/17/2017 14:27 Vice SF 509

103-06-7070 DOB:08/11/2014

Pt Loc: OUTPATIENT

MEDICAL RECORD

Progress Notes

08/17/2017 14:04 ** CONTINUED FROM PREVIOUS PAGE **

AMPUTATION CORRECTION : Not regired,

PROTOCOL: PREDNISOLONE 35 MG W.E.F 16.8.2017

PROPHYLAXIS: Voriconazole

TRANSFUSIONS

PRBCs(no of units): 1 PRPs(no of units) : 2 FFP(no of units) : 2

STATUS ON DISCHARGE

GC at discharge : Improved

VITAL SIGNS:

TEMP: 98.6F RR:22/min PR:98/min BP:108/77mm of Hg INVESTIGATIONS:

Hb:8.0g/dl PLATELETS:22000/microL TLC:24900/microL ANC:/microL

ADVICE ON DISCHARGE ***********

> MEET DIETITIAN IN ROOM NO -153 (FIRST FLOOR IRCH) BEFORE GOING HOME Hexidine Mouthwash / Steam Inhalation / Sitz Bath thrice a day

Rest as written in OPD card

In case of fever/diarrhoea/emergency contact 9868398310

FOLLOW UP ********

Come for follow up in PAED LL CLINIC in Board Room on Aug 21, 2017 with

Signed by: /es/ SUKESH NAIR SENIOR RESIDENT 08/17/2017 14:27

RUSTAM, RUSTAM 103-06-7070 DOB:08/11/2014

AIIMS NEW DELHI Pt Loc: OUTPATIENT Printed:08/17/2017 14:27 Vice SF 509 MEDICAL RECORD ---------

Progress Notes

NOTE DATED: 08/17/2017 14:04

LOCAL TITLE: MED ONCO IRCH DISCHARGE SUMMARY

STANDARD TITLE: DISCHARGE SUMMARY VISIT: 08/17/2017 14:04 DR OFFICE

Dr BR AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL, AIIMS, NEW DELHI-110029 DEPARTMENT OF MEDICAL ONCOLOGY

DISCHARGE SUMMARY

"UNLESS OTHERWISE SPECIFIED ALL DATES MENTIONED IN THIS NOTE ARE IN THE FORMAT

REGISTRATION DETAILS ************

UHID No:103-06-7070 IRCH No: CR No: NAME: RUSTAM, RUSTAM AGE: 3 GENDER: MALE

DOA: Aug 16, 2017 DOD: Aug 17, 2017 DURATION OF STAY: 1 days WARD: MRO Ward BED No: 13

CONSULTANT INCHARGE: Dr Sameer Bakshi ADDRESS:

DIAGNOSIS & REASON FOR CURRENT ADMISSION *************************

DIAGNOSIS: B-ALL TLC-38180

STEROID PREPHASE W.E.F 16.8.2017

ADMITTED FOR : Evaluation and management

CASE SUMMARY: RUSTAM 3 YEAR OLD BOY PRESENTED WITH COMPLAINTS OF ON-OFF FEVER OF 1 MONTH DURATION ALONG WITH MULTIPLE NECK AND GROIN SWELLINGS. HE WAS EVALUATED IN OUTSIDE HOSPITAL FOR THE SAME AND WAS FOUND TO HAVE ACUTE LEUKEMIA AND WAS REFERRED TO ALIMS FOR FURTHUR EVALUATION AND MANAGEMENT.

FLOW CYTOMETRY WAS S/O B-ALL.AFTER SENDING SAMPLES FOR CYTOGENETICS AND ALL PANEL HE WAS STARTED ON STEROID (PREDNISOLONE AT 60 MG/M2) W.E.F 16.8.2017. ALONG WITH STEROIDS HE WAS ALSO GIVEN 1.5 MG OF RASBURICASE AND HYDRATION. HE WAS ALSO TRANSFUSED 1 UNIT PREC AND 2 UNITS OF PLATELETS . HE IS AFEBILE AND IS NOW BEING DISCHARGED IN A MEDICALLY STABLE CONDITION WITH ADVISE TO FOLLOW UP IN OPD PRESENTATION AT CURRENT ADMISSION ***********

VITAL SIGNS:

TEMP: 98.6F RESP:22/min PULSE:110/min BP:106/72mm of Hq SP02:99%

GENERAL PHYSICAL EXAMINATION: PERFORMANCE STATUS: ECOG 1 PALLOR:+ ICTERUS: - OEDEMA:- CYANOSIS:-STERNAL TENDERNESS:- CLUBBING:- GUM HYPERTROPHY: -

LYMPHNODES: Enlarged Cervical, Axillary, Inquinal

SPECIFIC FINDINGS: LIVER PALPABLE 7 CMS AND SPLLEN IS PALPABLE 6 CMS BELOW RESPECTIVE COSTAL MARGINS

BIOMETRIC DETAILS: WEIGHT: 13kgS HEIGHT: 93cms CHEMOTHERAPY

** THIS NOTE CONTINUED ON NEXT PAGE **

RUSTAM, RUSTAM 103-06-7070 DOB:08/11/2014

AIIMS NEW DELHI Pt Loc: OUTPATIENT

Printed: 08/17/2017 14:27 Vice SF 509 MEDICAL RECORD

Progress Notes

08/17/2017 14:04 ** CONTINUED FROM PREVIOUS PAGE **

AMPUTATION CORRECTION : Not regired, PROTOCOL: PREDNISOLONE 35 MG W.E.F 16.8.2017

PROPHYLAXIS: Voriconazole

TRANSFUSIONS **********

PRECs(no of units): 1 PRPs(no of units) : 2

FFP(no of units) : 2

STATUS ON DISCHARGE *************

GC at discharge : Improved

VITAL SIGNS:

TEMP: 98.6F

INVESTIGATIONS:

RR:22/min PR:98/min BP:108/77mm of Hg

Hb:8.0g/dl PLATELETS:22000/microL TLC:24900/microL ANC:/microL

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RUSTAM, RUSTAM 103-06-7070 DOB:08/11/2014

AIIMS NEW DELHI Pt Loc: OUTPATIENT

Printed: 08/17/2017 14:27 Vice SF 509

एम, आर. - ३ जनरल हिस्टरी M.R.-3 General History

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029 ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

यू.एच.आई.डी. नं. Kustan Kumar Age दिनांक UHID No. Date Service 10306 7070 प्रोफेसर इंचार्ज Notes written by..... Professor I/C CLINICAL NOTES 821 ma B. Cell ALL On Freduction Weef 16/19/14 Patient was a symptometic 3 day. ... LAshigu clo - · Raduce bassing of stool] 2day. Pain abdoman & distension] 2day Passed fears i stool in maining 5.10 Am dince then not has shoot 4 floories. Pain & Abdoman & distensión 9.00 Am fever, knowsitis, bleeding, and ulcors. > 1800 C 214 X103 Usa Abdoman - Small bowel intussusption 1 bh Repeat USG Punishout Inturuse) him

Temp.	Pulse	Resp	B.P.	Weight
0) =	A	e General Can	adition - fai	
	B	4/2 - 102 /m	ne ha	
	Sp	2 - 96 y.	Room	an
P) A →		., 🕣.		
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	Alon	at Board.	sound.	
Resp -	BIL cl	nood clear.	11	*2
				5.7
- Imp -	B Precu	on All o	· Johnstian	T Small
- 4	bard Int	u sucettion.		
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-	ME DNS E	(Illo Kel)	350 ml	
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7	No bed in the	ch) cmo 7	a help.	
	1 8 2	11-7	100	
1 ×			10	



अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI -110029

आपातकातीन विभाग

(DEPT. OF EMERGENCY MEDICINE)

दिनांक DATE: 13/09/2017

UHID No:103067070

(REVISIT)

समय TIME: 01:02:19 AM

NON-MLC

HTH NAME: MR. RUSTAM KUMAR

आय् AGE: 3 years 1 months 2 days

शिंग /SEX : M

5/0: GIREESH KUMAR

पता ADDRESS: मकान संख्या H.NO:

आपातकालीन नं.(Emergency No): 2017/030/0107694

29 RASULAPUR PO-

BP

गर्ती / मुहल्ला STREET/MOH; MOHAMMADPUR, BAHOR)

205141

शहर/प्रखंड CITY/BLOCK: FIROZABAD

पिल PIN: द्रशाव सं. PHONE NO:

राज्य STATE:

मोबाइस MOBILE NO:

स्थान Location:

Paedintries Emergency

दवारा BROUGHT BY: Relative : FATHER

Criticality: Red / Yellow / Green

Triage: Responsive/

Unresponsive

mmHg RR

spO2

Shifted to Paeds/ Main/ New Emergency

HOKO B-cell Are (anandenton)

at hearce concelory

Presenting Complaints

do vain abdomn x few ho so yo fear I vomiltin

Proport

Primary Assessment (ABCDE): Assessment Pentagon

Airway

Open & stable (Yes/No

If No.....

Breathing: RR

Efforts: Normal/Poor/increased Auscultation:

Air entry:

Normal/poor/Differential

Added sounds:

None Stridor/Wheeze/Crackles

SpO2 on Room air. 9 6 7

Circulation

601

HR...../min

. 434 CFT.....secs.

BP.....Hg

Peripheral pulse: Poor/Good

Central pulse:Poor/Good

Skin temp: Warm/cool

Others

Alexan - sofe BSE

GCS.... 15...

Disability

Pupil size... 62/min

Pupillary Reactions...

Motor-activity:

Normal &

Symmetrical/Asymetrical/

Posturing/Flacidity/Seizure

Blood Sugar.....mg/dl

Exposure:

Temp aperile

Colour:Normal/pallor/cyanosis

/mottled

Any other skin lesions.....

Diagnosis

12/9/17

18 40

eran.

Scanned by CamScanner

GHAGHAV

UTTAR PRADESH

8958623724

greened

/min

Land IR (15 mg) 1 tob 10



