





Department of Pediatrics
Division of Pediatric Oncology
All India Institute of Medical Sciences, New Delhi



शरीरमाद्यं खलु धर्मसाधनम्

Patient Note Book

Name : Riyansh Kumar

UHID : 107684610

Diagnosis: (RB) RB

LH21092401454 107684610

CK-93309

CTP-170924018 107684610

CPC-170924011 107684610

LC1709242634 107684610

RIYANSHKUMAR 107684610

LH17092402009 107684610

LH24092401931 107684610

RIYANSHKUMAR



DEPARTMENT OF PEDIATRICS
(DIVISION OF PEDIATRIC ONCOLOGY)
ALL INDIA INSTITUTE OF MEDICAL SCIENCE,
Ansari Nagar, New Delhi -110029

ESTIMATE CERTIFICATE

Ref. No.....

Date 25/feb/2025

TO WHOM SO EVER IT MAY CONCERN

This is Certify that Shri / Kum. Rijant Kumer Age 5 month year sex Male UHID 107684610

S/O./D/O Ranjan Kumar is getting treatment in Division of Oncology at Department of Pediatrics AIMS

for Diagnosis Acute Lymphoblastic Leukemia

1. It is proposed to treat the patient with Chemotherapy/Bone Marrow Transplantation/ Surgery/ Radiotherapy/ Others.

The approximate cost of the total treatment is

The approximate breakdown is given under the subheadings listed below. The cost under one subheading may exceed the projected estimate and excess would then be used from the other subheadings.

1. Chemotherapy..... 1.20 cr
2. Antibiotics / Antifungal..... 20000/-
3. Blood Component Kits and Tests..... 5000/-
4. Investigations
5. Room Charges
6. Post-Transplant Immune Suppression 25000/-
7. Miscellaneous Charges..... 30000/-
8. Total..... 206000/-

Note: - This certificate is issued to avail financial assistance only. The Cheque/ Demand Draft may be issued in favour of :

AIMS RAN & HMDG A/C 40207561985

AIIMS PATIENT TREATMENT A/C 10874588593

AIMS P.M. PATIENT A/C 3/6/1405137

AIMS DELHI AROGYA KOSH A/C 33477690609

(Name & Signature of Consultant)

Arvind Bhatt

(Counter Signature of Head)
Dr. Arvind Bhatt
जम्हाय एवं दिवायक/Professor & Head
पदवीय विभाग/Department of Pediatrics
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-20
All India Institute of Medical Sciences, New Delhi

अखिल भारतीय आयुर्विज्ञान संस्थान / ALL INDIA INSTITUTE OF MEDICAL SCIENCES

MADHIPURA CHRISTIAN HOSPITAL

Emmanuel Hospital Association

Ward no. 22, Bhirki, Mission Road, Madhepura - 852113

Thursday, August 29, 2024

Declaration of Birth

TO WHOMSOEVER IT MAY CONCERN

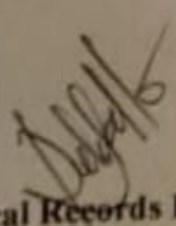
This is to declare that a living male child was delivered at 22:34 hrs on 28-Apr-2024 named RIYANSH KUMAR by Mrs. MANORAMA KUMARI wife of Mr. RANJAN KUMAR, resident of WN 14, ADHAR 41771608544808, SAHAWANI, BANMANKHI, Dist. PURNIA, BIHAR, INDIA.

The birth occurred at this hospital and the birth weight of the baby is 3.16 kg in our records.

Mother's Patient Number: PAT158003

Child's Patient Number: PAT160034

Note: Kindly register with the Bihar Govt within 21 days.


Medical Records Department




Medical Officer

15/9/18

Ⓐ Gp D Rb

• no active complaints.

• maintained G# HDCEV.

• was planned for IAC & VER, but due to

delay in IAC & VER

↓

• plan to start Augmented chemotherapy

• 20 Schs done - report pending.

Adv.

to start augmented ^{week} C#0 cycle.

↓

hechemo: inj. emend 2mg + dene 2mg instat

↓

chemo: ~~inj.~~ IVF (ONS + 1:100 Kcl) @ 50mg/hr
to bloodies

↓

after 2hew

inj. Cyclophos 520mg/100ml NS 1- one 1hour

26/2/25

① Gp D Rb.

• had reattachment in ① eye in March EVA.

1

started on augmented chemo
1/10 day in IAC.

• received C#1 (week 0) on 21/3/25.

• GCSF prophylaxis completed

Adv

- to repeat EVA after 2# augmented

- to report to casualty ~~if~~ in case of fever

- 1/10 early onset disease (Ref. Gp D)
(3 months)

1
can consider Rb1 gene testing.

- 1/10 5/11/25 2 cases 11/11

Adv
1/10

O/E

HR = 106/min.

RR = 30/min

PP/CP +/+

RO

CVS }
 R/S }
 HA } NAD.
 CNS }

Adm

- Ct. Inj. Piptaz / Amikacin

- ~~Exp.~~ Inj. GCSF 30µg SC OD.

- Dapsy by explained

- FN review on 3/4/25

- C/L Blood $\leq$

- Oint. Mupirocin

LA TDS

Satyendia
SR

05/04/25

(R) Group D RB / Post Cycle 1 Augmented

D_G Inj. PIPTAZ / A MIKA

Afebrile x 5 days.

LF7/KF7- (N)

NO fresh CBC available

Blood $\leq$ - Sterile

Clinically well.

31/03/25

Adv.

- C/L CBC.

- Ct. I.V a/b.s.

- N/V on 06/04/2025

- CBC report

↓
Can stop i.v a/b.s
if ANC - (N)

Patient Name: MASTER RIYANSH KUMARI	Center Name: A S HEALTH SQUARE
Age / Sex: 2 M / M	Referred By: AIIMS
Patient ID: 42972	Date: 25/07/2024

CEMRI BRAIN WITH ORBIT

MR IMAGING OF BILATERAL ORBITAL REGION WAS PERFORMED ON A 1.5 T MR SYSTEM USING STIR, T1W AND T2W SECTIONS IN AXIAL AND CORONAL PLANES AND CORRELATED WITH T2W SAGITTAL OBLIQUE IMAGES. ADDITIONAL, AXIAL T2 & FLAIR IMAGES OF BRAIN WERE OBTAINED. POST GAD T1 WEIGHTED FS IMAGES WERE OBTAINED IN MULTIPLE PLANES.

ORBIT:

The study reveals well defined lobulated right intraocular mass lesion in posterior segment arising from retina. The lesion is involving vitreous. No extraocular extension is seen. The lesion appears hyperintense on T1W images and hypointense on T2W images with respect to vitreous. Post gadolinium lesion shows intense homogeneous enhancement. The lesion measures 1.2 x 1.6 cm. There is thickening of sclera. There is associated subretinal hemorrhage.

Left eyeball is normal. Bilateral optic nerves show normal signal intensity and contours.

Bilateral extra-ocular muscles, intraconal and extraconal spaces show normal MR morphology with no evidence of any obvious focal signal alteration or collection apparent at present on the available MR images.

Retro-ocular space and fat planes are preserved.

Optic chiasma appears normal in contours and signal intensity. Bilateral cavernous sinuses appear normal.

BRAIN:

The study reveals no significant focal lesion in the brain. The cerebral parenchyma shows normal signal characteristics. Myelination pattern of the brain is normal.

No evidence of restricted diffusion noted. The basal ganglia, thalami and internal capsules appear normal.

The mid-brain, pons and medulla appear normal. The cerebellum appears normal.

The ventricular system appears normal. The septum is in mid line. The sulci, fissures & basal cisterns appear normal.

The pituitary gland, optic chiasm and bilateral parasellar regions appear normal.

The corpus callosum appears normal. Intracranial vascular structures in view are normal.



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CEMRI BRAIN WITH ORBIT

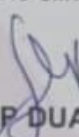
MR IMAGING OF BILATERAL ORBITAL REGION WAS PERFORMED ON A 1.5 T MR SYSTEM USING STIR, T1W AND T2W SECTIONS IN AXIAL AND CORONAL PLANES AND CORRELATED WITH T2W SAGITTAL OBLIQUE IMAGES. ADDITIONAL AXIAL T2 & FLAIR IMAGES OF BRAIN WERE OBTAINED. POST GAD T1 WEIGHTED FS IMAGES WERE OBTAINED IN MULTIPLE PLANES.

Paranasal sinuses and mastoid regions in view are unremarkable. No abnormal leptomeningeal or parenchymal enhancement is seen.

IMPRESSION: MR findings reveal :

- Well defined lobulated right intraocular homogeneously enhancing mass lesion in posterior segment arising from retina suggestive of retinoblastoma.
- Bilateral optic nerves are normal.

Please correlate clinically.


Dr. SANDEEP DUA

HOD Radiology
MBBS, MD

The above report is a professional opinion and needs to be correlated with clinical history and other relevant investigation for final diagnosis. If incase results are alarming or unexpected may be due to typographic errors, hence please contact within 7 days (K).



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

(REVISIT)



UHID No: 107684610

(DEPT. OF EMERGENCY MEDICINE)

आपातकालीन नं. (Emergency No): 20240300130156

दिनांक DATE: 20/11/2024

समय TIME: 03:50:29 PM

NON-MLC

नाम NAME: MR RIYANSH KUMAR

आयु AGE: 6 months 22 days

लिंग/SEX: M

S/O:

पता ADDRESS:

मकान संख्या H.NO

At sahawani park nagar harmarkhi
purma bihar

गली / मुहल्ला STREET

MOH

सिटी ब्लॉक CITY/BLOCK

पिन PIN

राज्य STATE

BIHAR

दूरभाष नं. PHONE NO.

मोबाइल MOBILE NO

स्थान Location

Pachamata Emergency

Criticality: Red / Yellow / Green

हस्तांतरित BY: Relative

ट्रिगेर: Responsive

Unresponsive

HR

/min

BP

mmHg RR

/min

SpO2

%

Shifted to Paeds/ Main/ New Emergency

Presenting Complaints

Primary Assessment (ABCDE): Assessment Pentagon

Airway Open & stable ☒ Yes ☐ No If No..... Breathing RR: 28/min Efforts: Normal/Poor/increased Auscultation: Air entry: ☒ Normal/poor/Differential Added sounds: ☒ None/Stridor/Wheeze/Crackles SpO2 on Room air: 97%	Circulation HR: 115/min CFT: 2.3 sec BP: 103/60 mmHg Peripheral pulse: Poor/Good Central pulse: Poor/Good Skin temp: Warm/cool Others: 1/4 - to 1/2, montandon No clinical r/o dehydration	Disability GCS: 15/15 Pupil size: 3mm Pupillary Reactions: Equal Motor activity: ☒ Normal & Symmetrical/ ☐ Asymmetrical/ Posturing/Flaccidity/Seizure Blood Sugar:mg/dl Exposure: Temp: Colour: ☒ Normal/pallor/cyanosis/ mottled Any other skin lesions:
---	--	---

Diagnosis F/c/o @ group D - Retinoblastoma E HTN (severe) = Acute gastroenteritis w/o dehydration

Adv

val
cac, LFT

Advice:

- 1) WHO - 60 ml after every loose stool / vomiting ORL
- 2) Supp: Zinc (2mg/5ml) 5ml PO OD x 14 days
- 3) Supp: Emeset (2mg/5ml) 5ml PO SOS for vomiting
→ PTD.



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



बाल चिकित्सा विभाग
UHID: 107684610



Dept No: 20240030023035

RIYANSH KUMAR

कमरा / Room
C-210

Queue / संख्या
F45

Unit-III, Paediatric

5 PROHIBITED IN HOSPI

RIYANSHKUMAR

UPK-0

रोगी वि० पंजीकृत सं० / O.P.D. Regn. No.

S/O

0Y 4M 23D / M(पुरुष)

At sahwani jankinagar banmanikhi purnea
bihar BHAR INDIA

General Rs 0

Follow Up Patient

SAT शुभ, रवि



Reporting: 08:40:59
21/09/2024

आयु
Age

पता / Address

LC0511242201 107684610

LH05112401607 107684610



RIYANSHKUMAR

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

35
G-20
csc

N/V in OPD on 25/9/2024.
csc.

1
Review
Dr. Shreshtha Kaushik
Senior Resident
DM, Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi-110029

बाल चिकित्सा विभाग
UHID: 107684610



Dept No: 20240030023035

RIYANSH KUMAR

कमरा / Room
C-210

Queue / संख्या
F41

Unit-III, Paediatric

SAT शुभ, रवि



Reporting: 08:40:05
18/10/2024

LC0511241237 107684610

LH05112400799 107684610



RIYANSHKUMAR

[Signature]

S/O

0Y 5M 18D / M(पुरुष)

At sahwani jankinagar banmanikhi purnea
bihar BHAR INDIA

General Rs. 0

Follow Up Patient

16 G. JCS

N/V — 06/11/24. wk repeated
CBC, LFT, RFT



आयुर्वेदिक चिकित्सा विभाग
(ayurveda@aiims.ac.in)

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प
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)



meraaspatil.nhp.gov.in



Wilkir

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

120

(REVISIT)



(DEPT. OF EMERGENCY MEDICINE)

UHID No:107684610

आपातकालीन नं. (Emergency No): 2024/030/0120048

दिनांक DATE: 27/10/2024

समय TIME: 07:57:00 AM

NON-MLC

नाम NAME: MR RIYANSH KUMAR

आयु AGE: 5 months 29 days

लिंग/SEX: M

S/O:

पता ADDRESS

मकान संख्या H.NO.

At sahawani jankinagar banmankhi
purnea bihar

गली / मुहल्ला STREET/

MOH

शहर/प्रखंड CITY/BLOCK

पिन PIN:

राज्य STATE:

BIHAR

दूरभाष सं. PHONE NO.

मोबाइल MOBILE NO.

स्थान Location:

Paediatrics Emergency

द्वारा BROUGHT BY: Relative

Criticality: Red / Yellow / Green

Triage: Responsive/
Unresponsive

HR

/min

BP

mmHg RR

/min

spO2

%

Shifted to Paeds/ Main/ New Emergency

h/c. Rt. RB. Post 3 cycles HD CEV.

Presenting Complaints

% fever - visited ER yesterday; last chemo → 19/10 to 20/10
w/ cough & fast breathing.
Accepting orally.

Primary Assessment (ABCDE): Assessment Pentagon

No h/c nursing note (+)

Last cbl 4,670 < 8,000
26/10/24 3.8 ANS = 1660

Airway Open & stable: Yes/No If No..... Breathing: RR 58/min Efforts: Normal/Poor/increased Auscultation: Air entry: Normal/poor/Differential Added sounds: <i>loud sounds (+)</i> None/Stridor/Wheeze/Crackles SpO2 on Room air: 98% Wt = 6.4 kg	Circulation HR 157/min CFT 2 secs. BP 110/80 BP mmHg Peripheral pulse: Poor/Good Central pulse: Poor/Good Skin temp: Warm/cool Others P/A = soft, NT	Disability GCS 3 V M Pupil size 4mm/min Pupillary Reactions: RT Motor activity: Normal & Symmetrical/ Asymmetrical/ Posturing/Flaccidity/Seizure Blood Sugar mg/dl Exposure: Temp Colour Normal/pallor/cyanosis/ mottled Any other skin lesions: No
---	--	---

Diagnosis

Susp. - Rt. RB. ? Viral URI

Lab.

CXR

- Symp PCM (105mg/5ml) 2.5ml PO BID.

- Symp. Cetirizine (2mg/5ml) 2.5ml PO OD x 5 days.

- R/w = CXR

- Nasoclear drops 2° q/w q2H

- R/w in Peds Daycare q/m.

Dr. L. K. R. Z
Senior Resident
Dept. of Pediatrics
AIIMS, New Delhi
10/27/2024, 7:55 AM



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

बहिरंग रोगी विभाग / Out Patient Department

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

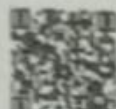


OPR-6

एकक / Unit
विभाग / Dept

बाल चिकित्सा विभाग

UHID: 107684810



Dept No: 20240030023035

RIYANSH KUMAR

S/O

07/06/130 / M (पुरुष)

At sahawani janikhar banmanikhi purnea
bihar, BHAR, NOIA

Follow Up Patient

General Rs 0

कमरा / Room

C 214

Queue /
संख्या

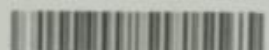
F38

Unit-I, Paediatric

I सं० / O.P.D. Regn. No.

पता / Address

THU रोज, पूरा



Reporting: 08:54:10
11/11/2024

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

9

6-6/11

ht 66cm

BP-100/62 mmHg

measurement

sb wgt.

95th centile 105/67

50th 91/55

95th 110/70

on amlodipine
2.5mg OD

Retinoblastoma. & hypertension
likely due to
use of + RI drug induced
(occa)

adv: US Doppler by Dr Manisha

Tab Amlodipine 2.5mg OD

✓ fundus for hypertensive retinopathy

Dr



आर्य समाज का धर्म है
अहिंसा और अहिंसा

CLEAN AND GREEN AIIMS / एम्स का यही सकारण, स्वच्छता से काया कल्प
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O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



marasapatal.nhp.gov.in

6/11/2024

6m 7d

- Right group D - Retinoblastoma
- Myristamine
- Post cycle 3 - HDCEV on 19/10/2024.

Current course:

① Small volume vomiting - limiting

Started on complementary feeds for 3 days
in oral water

no diarrhoea

② VO

no irritability

no fever.

- was in STN

27/10 - 29/10.

③ on

- Amiodipine 2.5mg OD.

- Renal doppler - 14/10/24 -

- Raised RI of B/L renal
arteries, its segmental
branches - S/O raised

renal renal vascular resistance

on 5/11/24

Bp - 113/45 mmHg

- Sleeping sounds was not to be high

one for 9/11/24

Pr. cherno

inj. DEXAMETHASONE 1mg Slow Push

long center long snow push



inj. vcr 0.1 mg slow IV push D,

14. CARBOPLATIN 180 mg / 100 ml NS amp (1 amp. D₁)

10/10 SIDE 75mg / 200ml NS am / hrs.

inj. GCSF D₁ D₂

30µs s/c 00.

D3 D4 D5 D6 D7.

Port Chemu

Supp. GmESG7 (2mg=5ml) 2.5ml ✓-✓-✓ x 3 days

She

70, *caninus*

Please help i chemotherapy

9/10/24

- No frab complaints

BP 100/47 mm Hg

- On Septrox (4)

- Parent consulting clau
regarding hygiene,
Mouth care, Stit bath

① chemo may be taken - 13/11/24

② EVA 15/10/24
deli for next EVA to be taken

③ Renal Doppler
raised renal vascular
resistance

④ Need discuss with
Ped nephrology.

In future his
plan follows.

Very W M Kew

Ure

↓

13/11/24

Ure

1 PM

To Ped nephrology (Monday)

→ C10. (R)10 group D Retinoblastoma
had hypertension during admission
on October 2024 for LRTI / influenza
Started on T. Amlodipine at 0.5mg
Renal Doppler s/o. Raised RI of BL renal artery
& segmental branches s/o raised renal
vascular resistance.

Kindly fine on same, Thank You

Dr. Renu
FR Paediatrics

Due for 9/11/24

Pre chemo

inj. DEXAMETHASONE 1mg slow Push
inj. CMESG 1mg slow Push



inj. VCR 0.1 mg slow IV Push D₁
inj. CARBOPLATIN 180 mg / 100ml NS am 1 hour D₁
inj. ETOPOSIDE 75mg / 200ml NS am 1 hour D₁ D₂
inj. GCSF
3005 s/c OD

D3 D4 D5 D6 D7

Post chemo

Supp CMESG (2mg = 5ml) 2.5ml ✓ - ✓ - ✓ x 3 days

Shen

70, cmwds

Please help: chemotherapy

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

नाम *Riyankumar* उम्र *6m* लिंग *M* वैवाहिक स्थिति *Single* यू.एच.आई.डी. नं. *107684610*
सेवा *Paed* वार्ड *Om* बेड *Om* व्यवसाय *Om* धर्म *Om*
Service Ward Bed Occupation Religion

ALL INJECTIONS TO BE INITIALED BY PERSON ADMINISTERING

Date & Time	Medication & Treatment	Diet	Observation by the Nurse
	<i>D+7 → Impending FN</i>		
	<i>Plans:</i>		
	• CBC • Blood U/s • VBSG - <i>LF7 / RF7</i> • USG abdomen → if neutropenic • <u>CXR</u> - <i>Anteroposterior</i> - <i>Chest X-ray</i> • Inj. Paracetamol 7mg IV OP • Inj. Emeset 2mg IV STAT. • WLF <u>dehydration</u> <i>output monitoring</i> • Paed amino SR will restart • ORS - 60 ml after each stool • <i>breast feeds</i>		

DR. SHARAD CHANDRASEKHAR
Paediatric Consultant
District of Pathology
All India Institute of Medical Sciences
New Delhi-110029

not to be long

At rounds

26/11/24

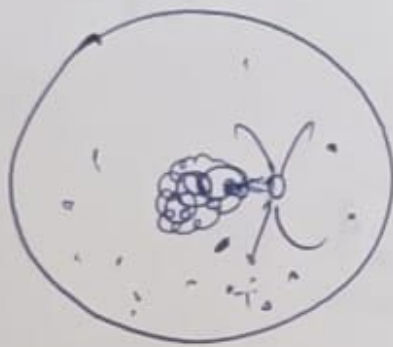
Dr. Loni / Dr. Sunit / Dr. Tapashee /
(EVA)
a Abhishek

h/p 4 cycles of chemorx

last 13/11/24

(RE) Regressing of RB

(RE) was



Reds Oncology consultat by Sachin Seth /
Dr. Aditya / Dr. Jaydesh # 208/209/210 9am
for 2 more cycles of CT. ✓

↓
D/E EVA in (BE) h/p mycin for 5 days
meeting chun
22/12/24 (M/Wed) (11/12)

on

27/11/2024.

Ⓡ group D RB

Post Cycle 4 HD-CEV on 14/11/24.

EUA post 4 cycles - ⓇE regressing
(26/11/24) group D
RB

BP - 95/55 < 95th centile

USG KUB & renal doppler
→ Normal

LE - WNL
Administered 2 more
cycles of chemo

LF1/KF1 - Ⓡ

8.00 > $\frac{3.63}{0.46}$ < 40,000

clinically well.

Adv.

- N/V on 04/12/24

- CBC

- CT Symp SEPTAN
A/D.

Mawade

- ④ s/v E reports - to look for FN.
- decide reg. AB.

20/11/24
Physical
SP-Redden

6m old boy

- ① group 1. Retinoblastoma.
Myxomatous on malodysplasia 2. Smg CD
last cycle 4 HPCOV - 13/11 - 17/11
D+7

- no vomiting x 4 episodes since morning
- non-bilious / non-blood
- immobility on eating
- no diarrhea x 8 times
- watery → now semi-solid / normal
- non-bloody
- normal (+)
- no longer / longer
- no fever
- urine output ~ ? not known = multiple
- diaper change
- lethargic (+)
- taking breast feeds (+)
- on Septilin prophylaxis
- received G-CSF
till 15/11/24

O/E:

- awake

- oral cavity moist
- tympanic warm
- lungs - well felt
- CP/PP +/+

drinking DRS ✓

→ Skin turgor - (N)
Eye - bilious (+) not Suckling

RS - Scattered crepitations (+)
nowhere

IA - irritability

CRS - S.S. (+) normal

CRS - alert
No instability



भारत सरकार
Government of India



रंजन कुमार
Ranjan Kumar
जन्म तिथि/DOB: 11/06/1997
पुरुष/ MALE

Download Date: 02/10/2021

Issue Date: 11/01/2016

3723 0403 2646

VID : 9168 5763 7548 4193

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



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VID : 9168 5763 7548 4193



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भारत सरकार

Government of India



मनोरमा कुमारी

Manorama Kumari

जन्म तिथि / DOB : 01/01/1999

महिला / Female



4177 1605 4808

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

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