

संस्था को चिकित्सक सहायता हेतु आवेदन पत्र

सेवा में,

संस्थापक
चाइल्ड सेवा ट्रस्ट
टी-53/4, सब्जी मंडी,
रेलवे कॉलोनी
नई दिल्ली 110007



विषय : संगठन के संस्थापक को चिकित्सक सहायता संबंधित अनुरोध पत्र।

महोदय जी,

“सविनय निवेदन यह है कि प्रार्थी प्रभात पराशर, उत्तर प्रदेश (बाधरस), का निवासी हूँ। मेरे बच्चे का नाम विधान पराशर जिसका आयु 5 वर्ष है। जिसका इलाज सर गंगा राम हॉस्पिटल में चल रहा है, मेरा बच्चा ल्यूकेमिया ब्लड कैंसर से पीड़ित है, बच्चे की चिकित्सक स्थिति संबंधित विवरण” बच्चे के लम्बे समय से लुखार, क्यासी टेस्ट किमोथेरेपी, बोन मेरो ट्रांसप्लांट के बाद सर्जरी की शीघ्र आवश्यकता है।

हमारा परिवार बच्चे का इलाज करवाने हेतु आर्थिक रूप से सक्षम नहीं है एवं बच्चे की वर्तमान स्थिति के अनुसार बच्चे को सुचारु इलाज की शीघ्र आवश्यकता है।

प्रार्थी चाइल्ड सेवा ट्रस्ट से अनुरोध करता / करती हूँ कि आप मेरे बच्चे के इलाज में हमें आर्थिक सहायता प्रदान करें।

मैं अपनी सहमति से बच्चे के इलाज से संबंधित सभी चिकित्सक आलेख आपसे साझा कर रहा / रही हूँ जिससे आपको मेरे बच्चे की वर्तमान चिकित्सक स्थिति से अवगत करवाया जा सके।

मैं और मेरा परिवार चाइल्ड सेवा ट्रस्ट एवं आप से जुड़े सभी दाताओं का दिल से आभारी रहेगा / रहूंगी।

धन्यवाद!

अभिभावक

हस्ताक्षर

Prabhat

अंगूठे का निशान



संस्थापक

आपका अनुरोध चाइल्ड सेवा
ट्रस्ट द्वारा स्वीकार्य है

यह प्रारूप परिवार की से शैक्षिक स्थिति एवं कोविड-19 को ध्यान में रखते हुए तैयार किया गया है, किसी प्रकार की त्रुटि के लिए संस्था क्षमा व्यापक है।





PAN No : AACTC8249B

CHILD SEWA TRUST

"YOU CAN RELY ON US"

Khasra No. 337-F, Gali No. 8 Ram Park Extn., Loni Dehat,
.P.-201102

Ref. No. 60

Dated 30/10/2023

चाइल्ड सेवा ट्रस्ट द्वारा आर्थिक चिकित्सक सहायता प्रदान करने पश्चात प्राप्त स्वीकृत सर्वनाम लेखन पत्र

चाइल्ड सेवा ट्रस्ट संस्था के माध्यम से आपके बच्चे विधान परासर जिसकी आयु 5 वर्ष है प्रभात परासर के निवेदन के आधार पर आपके बच्चे की चिकित्सक स्थिति एवं आपके द्वारा प्राप्त चिकित्सक साक्ष्यों के आधार पर बच्चे की वर्तमान चिकित्सक स्थिति एवं परिवार की आर्थिक स्थिति को देखते हुए संस्था चाइल्ड सेवा ट्रस्ट द्वारा आपके बच्चे के सुचारु इलाज के लिए आर्थिक सहायता प्रदान की जा रही है।

आशा करते हैं संस्था कि इस छोटी से पहल के द्वारा आपके बच्चे का इलाज सुव्यवस्थित ढंग से हो पाएगा

अतः संस्था अपने सभी दाताओं के सहयोग से सदैव आपको इसी प्रकार आर्थिक अनुदान सहायता प्रदान करती रहेगी एवं सदैव आपके साथ है

अभिभावक

हस्ताक्षर Prabhat

अंगूठे का निशान



संस्थापक
चाइल्ड सेवा ट्रस्ट



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Institute of Clinical Microbiology and Immunology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.	: 3157214	Ward No.	:
Lab Request No.	: 5523098332	Room No.	:
Episode No.	: OP13060760	Location Type	: Out Patient
Location	: CENTRAL INVESTIGATION CENTRE	Collected On	: 21 OCT 2023 07:56PM
Referred By	: Dr. Manas Kalra	Received On	: 21 OCT 2023 08:57PM
Ext. Doctor	:	Reported On	: 27 OCT 2023 04:42PM
Specimen	: Dialysis catheter/ Trylase sample	Released by	: Dr. Pragya Goyal

Bact/Alert Culture (Dialysis catheter/ Trylase sample)
Negative after 5 days incubation, Final Report.

Preliminary Report

Bact/Alert Culture (Dialysis catheter/ Trylase sample)
Negative to date. Preliminary report. Final report to follow at 5 days.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.

<<< Page: 1 of 1 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Institute of Clinical Microbiology and Immunology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.	: 3157214	Ward No.	: WARD 9
Lab Request No.	: 5523099619	Room No.	: RM-1277/1277-C CAT3
Episode No.	: IP01331879	Location Type:	In Patient
Location	: PAEDIATRIC HEMATO-ONCOLOGY-Dr. Anupam Saxena	Collected On	: 26 OCT 2023 10:48AM
Referred By	: Dr. Manas Kalra	Received On	: 26 OCT 2023 10:51AM
Ext. Doctor	:	Reported On	: 27 OCT 2023 10:00AM
Specimen	: BLOOD - L, BLOOD - R	Released by	: DR. JASWINDER KAUR OBER

Preliminary Report

BacT/Alert aerobic culture (Blood) - LEFT PERIPHERAL
Negative to date. Preliminary report. Final report to follow at 5 days.
RIGHT PERIPHERAL SAMPLE Negative

Preliminary Report

BacT/Alert aerobic culture (Blood) - RIGHT PERIPHERAL
Negative to date. Preliminary report. Final report to follow at 5 days.
LEFT PERIPHERAL SAMPLE Negative

1. This is a Computer generated report, No Signature required.
 2. Content of this report is only an opinion, not the diagnosis.
 3. The report shall not be reproduced, except in full, without permission.
- <<< Page: 1 of 1 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC-2194

Department of Biochemistry

Name : MASTER VIDHAN PARASHAR
 Registration No. : 3157214
 Lab Request No. : 9923237552
 Episode No. : IP01331879
 Location : PAEDIATRIC HEMATO-ONCOLOGY-Dr. Anupam Khandelwal
 Referred By : Dr. Manas Kalra
 Ext. Doctor :
 Specimen : Blood

Age/Sex : 5 Yrs/M
 Ward No. : WARD 9
 Room No. : RM-1277/1277-C CAT3
 Location Type: In Patient
 Received On : 26 OCT 2023 06:22AM
 Reported On : 26 OCT 2023 08:39AM
 Released by : DR. SEEMA BHARGAVA

Investigation	Results	Units	Bio.Ref.Interval	Test Method
FOLIC ACID, SERUM	3.35	ng/mL	(3.10-20.50)	CMIA
VITAMIN B12, SERUM	584.00	pg/mL	(187.00-883.00)	CMIA

1. This is a Computer generated report, No Signature required.
 2. Content of this report is only an opinion, not the diagnosis.
 3. The report shall not be reproduced, except in full, without permission.
- <<< Page: 1 of 1 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name : MASTER VIDHAN PARASHAR
 Registration No. : 3157214
 Lab Request No. : 1123201077
 Episode No. : IP01331879
 Location : PAEDIATRIC HEMATO-ONCOLOGY-Dr. Anupama Sankhwar
 Referred By : Dr. Manas Kalra
 Ext. Doctor :
 Specimen : Blood

Age/Sex : 5 Yrs/M
 Ward No. : WARD 9
 Room No. : RM-1277/1277-C CAT3
 Location Type: In Patient
 Received On : 26 OCT 2023 06:22AM
 Reported On : 26 OCT 2023 07:36AM
 Released by : Dr. Arpita Joshi

Investigation	Results	Units	Bio.Ref.Interval	Test Method
---------------	---------	-------	------------------	-------------

Complete Blood Count-EDTA BLOOD

Cell Counter	Sysmex XN			Automated/Microscopy
Haemoglobin	9.1	g/dl	(11.0-14.0)	
TLC	0.12	thous/ul	(5.00-15.00)	
Platelet Count	25	thous/ul	(200-450)	
PCV	26.6	%	(34.0-40.0)	
RBC	3.37	mill/ul	(4.00-5.20)	
MCV	78.9	fl	(75.0-87.0)	
MCH	27.0	pg	(24.0-30.0)	
MCHC	34.2	g/dl	(31.0-37.0)	
RDW	15.0	%	(11.6-14.0)	
Micro R	8.80	%		
Macro R	2.90	%		

Differential Leukocyte Count (DLC)

Neutrophils	17	%	
Lymphocytes	67	%	
Eosinophils	16	%	
Monocytes	0	%	
Basophils	0	%	
ANC	20	/ul	(1500-8000)
ALC	80	/ul	(6000-9000)
AEC	19	/ul	(100-1000)
AMC	0	/ul	(200-1000)
Basophils	0	/ul	(20-100)

Pancytopenia.
 Leucopenia with absolute neutropenia and lymphopenia seen.
 Platelets are reduced, counted on smear.
 Please correlate with the clinical and therapeutic profile of the patient.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name : MASTER VIDHAN PARASHAR
 Registration No. : 3157214
 Lab Request No. : 1123200022
 Episode No. : IP01331879
 Location : PAEDIATRIC HEMATO-ONCOLOGY-Dr. Anupam Khandelwal
 Referred By : Dr. Manas Kalra
 Ext. Doctor :
 Specimen : Blood

Age/Sex : 5 Yrs/M
 Ward No. : WARD 9
 Room No. : RM-1277/1277-C CAT3
 Location Type: In Patient
 Received On : 25 OCT 2023 12:39AM
 Reported On : 25 OCT 2023 02:39AM
 Released by : Dr. Sabina Langer Kumar

Investigation	Results	Units	Bio.Ref.Interval	Test Method
Complete Blood Count-EDTA BLOOD				
Automated/Microscopy				
Cell Counter	Sysmex XN			
Haemoglobin	10.4	g/dl	(11.0-14.0)	
TLC	0.23	thous/ul	(5.00-15.00)	
Platelet Count	13	thous/ul	(200-450)	
PCV	31.0	%	(34.0-40.0)	
RBC	3.87	mill/ul	(4.00-5.20)	
MCV	80.1	fl	(75.0-87.0)	
MCH	26.9	pg	(24.0-30.0)	
MCHC	33.5	g/dl	(31.0-37.0)	
RDW	15.1	%	(11.6-14.0)	
Micro R	8.00	%		
Macro R	3.40	%		
Differential Leukocyte Count (DLC)				
Neutrophils	9	%		
Lymphocytes	78	%		
Eosinophils	13	%		
Monocytes	0	%		
Basophils	0	%		
ANC	21	/ul	(1500-8000)	
ALC	179	/ul	(6000-9000)	
AEC	30	/ul	(100-1000)	
AMC	0	/ul	(200-1000)	
Basophils	0	/ul	(20-100)	

Platelet Report informed.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.



Sir Ganga Ram Hospital



H-2005-0017
Since June 15, 2008



MC - 2194

Department of Haematology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.	: 3157214	Ward No.	: WARD 9
Lab Request No.	: 1123200022	Room No.	: RM-1277/1277-C CAT3
Episode No.	: IP01331879	Location Type	: In Patient
Location	: PAEDIATRIC HEMATO-ONCOLOGY-Dr. Anupam Kishore	Received On	: 25 OCT 2023 12:39AM
Referred By	: Dr. Manas Kalra	Reported On	: 25 OCT 2023 02:39AM
Ext. Doctor	:	Released by	: 25 OCT 2023 11:01AM
Specimen	: Blood		: Dr. Sabina Langer Kumar

Investigation	Results	Units	Bio.Ref.Interval	Test Method
---------------	---------	-------	------------------	-------------

WBC show leucopenia with neutropenia. Platelets are reduced counted on smear. Please correlate clinically.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.

<<< Page: 2 of 2 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.	: 3157214	Ward No.	:
Lab Request No.	: 1123198349	Room No.	:
Episode No.	: OP13060760	Location Type	: Out Patient
Location	: CENTRAL INVESTIGATION CENTRE	Collected On	: 21 OCT 2023 07:56PM
Referred By	: Dr. Manas Kalra	Received On	: 21 OCT 2023 08:26PM
Ext. Doctor	:	Reported On	: 23 OCT 2023 09:51AM
Specimen	: Blood	Released by	: Dr. Arpita Joshi

Investigation	Results	Units	Bio.Ref.Interval	Test Method
Pancytopenia.	Leucopenia with absolute neutropenia and lymphopenia seen. Platelets are reduced, counted on smear. Please correlate with the clinical and therapeutic profile of the patient.			

1. This is a Computer generated report, No Signature required.
 2. Content of this report is only an opinion, not the diagnosis.
 3. The report shall not be reproduced, except in full, without permission.
- <<< Page: 2 of 2 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name : MASTER VIDHAN PARASHAR Age/Sex : 5 Yrs/M
 Registration No. : 3157214 Ward No. : WARD 9
 Lab Request No. : 1123199038 Room No. : RM-1277/1277-C CAT3
 Episode No. : IP01331879 Location Type: In Patient
 Location : PAEDIATRIC HEMATO-ONCOLOGY-Dr. Anupam Saxena On : 23 OCT 2023 05:53AM
 Referred By : Dr. Manas Kalra Received On : 23 OCT 2023 07:29AM
 Ext. Doctor : Reported On : 23 OCT 2023 01:30PM
 Specimen : Blood Released by : Dr. Sagarika Sharma

Investigation	Results	Units	Bio.Ref.Interval	Test Method
---------------	---------	-------	------------------	-------------

Complete Blood Count-EDTA BLOOD

Automated/Microscopy

Cell Counter	Sysmex XN		
Haemoglobin	7.7	g/dl	(11.0-14.0)
TLC	0.32	thous/ul	(5.00-15.00)
Platelet Count	29	thous/ul	(200-450)
PCV	23.8	%	(34.0-40.0)
RBC	3.03	mill/ul	(4.00-5.20)
MCV	78.5	fl	(75.0-87.0)
MCH	25.4	pg	(24.0-30.0)
MCHC	32.4	g/dl	(31.0-37.0)
RDW	13.3	%	(11.6-14.0)
Micro R	7.90	%	
Macro R	2.60	%	

Differential Leukocyte Count (DLC)

Neutrophils	60	%	
Lymphocytes	34	%	
Eosinophils	3	%	
Monocytes	3	%	
Basophils	0	%	
ANC	192	/ul	(1500-8000)
ALC	109	/ul	(6000-9000)
AEC	10	/ul	(100-1000)
AMC	10	/ul	(200-1000)
Basophils	0	/ul	(20-100)

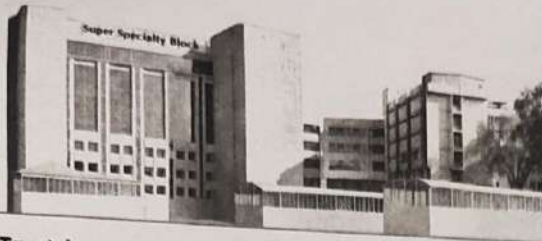
Pancytopenic smear.

Platelets are reduced; verified on the smear.

Kindly correlate the findings with the clinical & therapeutic profile of the patient.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.

<<< Page: 1 of 1 >>>



Institute of Clinical Microbiology and Immunology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.	: 3157214	Ward No.	:
Lab Request No.	: 5523098332	Room No.	:
Episode No.	: OP13060760	Location Type	: Out Patient
Location	: CENTRAL INVESTIGATION CENTRE	Collected On	: 21 OCT 2023 07:56PM
Referred By	: Dr. Manas Kalra	Received On	: 21 OCT 2023 08:57PM
Ext. Doctor	:	Reported On	: 22 OCT 2023 05:04PM
Specimen	: Dialysis catheter/ Trylase sample	Released by	: Dr. Pragya Goyal

Preliminary Report

Bact/Alert Culture (Dialysis catheter/ Trylase sample)

Negative to date. Preliminary report. Final report to follow at 5 days.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.

<<< Page: 1 of 1 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name : MASTER VIDHAN PARASHAR
 Registration No. : 3157214
 Lab Request No. : 1123198349
 Episode No. : OP13060760
 Location : CENTRAL INVESTIGATION CENTRE
 Referred By : Dr. Manas Kalra
 Ext. Doctor :
 Specimen : Blood

Age/Sex : 5 Yrs/M
 Ward No. :
 Room No. :
 Location Type: Out Patient
 Collected On : 21 OCT 2023 07:56PM
 Received On : 21 OCT 2023 08:26PM
 Reported On : 23 OCT 2023 09:51AM
 Released by : Dr. Arpita Joshi

Investigation	Results	Units	Bio.Ref.Interval	Test Method
---------------	---------	-------	------------------	-------------

Complete Blood Count-EDTA BLOOD

<u>Cell Counter</u>	Sysmex XN			Automated/Microscopy
Haemoglobin	8.8	g/dl	(11.0-14.0)	
TLC	0.43	thous/ul	(5.00-15.00)	
Platelet Count	19	thous/ul	(200-450)	
PCV	26.8	%	(34.0-40.0)	
RBC	3.40	mill/ul	(4.00-5.20)	
MCV	78.8	fl	(75.0-87.0)	
MCH	25.9	pg	(24.0-30.0)	
MCHC	32.8	g/dl	(31.0-37.0)	
RDW	13.6	%	(11.6-14.0)	
Micro R	8.20	%		
Macro R	3.10	%		

Differential Leukocyte Count (DLC)

Neutrophils	68	%	
Lymphocytes	30	%	
Eosinophils	0	%	
Monocytes	2	%	
Basophils	0	%	
ANC	292	/ul	(1500-8000)
ALC	129	/ul	(6000-9000)
AEC	0	/ul	(100-1000)
AMC	9	/ul	(200-1000)
Basophils	0	/ul	(20-100)

Comments: Report of plt and tlc informed.

1. This is a Computer generated report, No Signature required.
2. Content of this report is only an opinion, not the diagnosis.
3. The report shall not be reproduced, except in full, without permission.

<<< Page: 1 of 2 >>>



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.:	3157214	Ward No.	:
Lab Request No.:	1123194273	Room No.	:
Episode No.	: OP13039996	Location Type:	Out Patient
Location	: CENTRAL INVESTIGATION CENTRE	Collected On	: 16 OCT 2023 11:17AM
Referred By	: Dr. Manas Kalra	Received On	: 16 OCT 2023 11:48AM
Ext. Doctor	:	Reported On	: 16 OCT 2023 04:29PM
Specimen	: Blood	Released by	: Dr. Deepak Goel

Investigation	Results	Units	Bio.Ref.Interval	Test Method
---------------	---------	-------	------------------	-------------

Complete Blood Count-EDTA BLOOD

Automated/Microscopy

Cell Counter

Sysmex XN

Haemoglobin	7.9	g/dl	(11.0-14.0)
TLC	1.26	thous/ul	(5.00-15.00)
Platelet Count	200	thous/ul	(200-450)
PCV	25.9	%	(34.0-40.0)
RBC	3.19	mill/ul	(4.00-5.20)
MCV	81.2	fl	(75.0-87.0)
MCH	24.8	pg	(24.0-30.0)
MCHC	30.5	g/dl	(31.0-37.0)
RDW	16.7	%	(11.6-14.0)
Micro R	9.70	%	
Macro R	2.60	%	

Differential Leukocyte Count (DLC)

Neutrophils	75	%	
Lymphocytes	21	%	
Eosinophils	1	%	
Monocytes	2	%	
Basophils	1	%	
ANC	945	/ul	(1500-8000)
ALC	265	/ul	(6000-9000)
AEC	13	/ul	(100-1000)
AMC	25	/ul	(200-1000)
Basophils	13	/ul	(20-100)

Leucopenia with absolute neutropenia and lymphopenia is noted
Platelets are adequate on smer
Kindly correlate clinically

1. This is a Computer generated report, No Signature required.
 2. Content of this report is only an opinion, not the diagnosis.
 3. The report shall not be reproduced, except in full, without permission.
- <<< Page: 1 of 1 >>>



H-2008-0017
Since June 16, 2008



Sir Ganga Ram Hospital

**DISCHARGE SUMMARY
INSTITUTE OF CHILD HEALTH
DEPARTMENT OF PAEDIATRICS
SIR GANGA RAM HOSPITAL**

PAEDIATRIC HEMATO-ONCOLOGY AND BMT UNIT (PHO)

NAME: Vidhaan Parashar	AGE: 5 years	SEX: MALE
DOA: 16/10/23	DOD: 16/10/23	MRD NO: 3157214
Wt: 19.9 kg	Ht: 114 cm	BSA: 0.79 m ²

DIAGNOSIS:

Precursor B cell Acute Lymphoblastic Leukemia, TLC at admission- 22700/cumm, CSF -Negative, PGR, Molecular - Negative, NGS - KRAS & NRAS Positive Karyotype 55~58,XY,+X,,+4,+6,+8,+9,+10,+12,+14,+15,+16,+17,+18,+20,+21,+22/46, XY[9] , Day 1 of Induction- 15/03/23
TP1 MRD- 0.0297%, TP2 MRD- <0.01%
Admitted for week 2 reconsolidation

DISCHARGE ADVICE:

- Injection Cytarabine 60 mg IV push once daily on 17/10, 18/10, 19/10
- (After premedication with Syrup Allegra (5mg/5ml) 5 ml, Syrup Crocin DS (240mg/5ml) 5 ml, Tab Ondem (4mg) 1 tab 30 minutes prior to Injection Cytarabine.)
- Tab 6MP (50mg) ½ tablets once daily - 7 days/week
(Avoid milk and milk products 1 hour before and 1 hour after Tab 6MP)
- Tab Septran DS (960 mg) ½ -0- ¼ (Mon, Wed, Fri)
- Tab Ondem MD (4mg) 1-1-1 X 2 days and then SOS if vomiting
- Muout powder 2 scoops twice daily or Laxopeg satchet ½ satchet twice daily for constipation
- Candid mouth paint 4 drops thrice a day to continue
- Listerine mouth wash thrice daily to continue
- Avoid raw fruits, salads
- Plenty of oral fluids, No visitors, Strict hygiene
- Don't administer any vaccination to the child/ Avoid OPV to the family member
- Follow up on 23/10/23 at 11 am in F55 with CBC/DLC and or SOS before if fever occurs
- To follow with Dr. Anupam Sachdeva/Dr. Manas Kalra/Dr. Divij Sachdeva
Mobile no.: 9811043476/9958255228/885168176.

Helpline for emergencies: 9717145987

Dr Srijib/ Dr Ayush **Dr. Swati Bhayana**
Dr Ankita/ Dr Shivani **Clinical Assistant**
PHO Fellows

Dr. Anupam Sachdeva
Dr. Manas Kalra
Dr. Divij Sachdeva
Consultants



H-2008-0017
Since June 16, 2008



Sir Ganga Ram Hospital

Pediatric and Adolescent Hematology, Oncology & Stem Cell Transplant Services
Sir Ganga Ram Hospital, Rajinder Nagar, New Delhi - 110060

Dr. Anupam Sachdeva

DCH, MD, (DMC No.: 11823)
Adjunct Professor, National Board of Examination
President Indian Academy of Pediatrics 2017

Director

Pediatric Hematology, Oncology & BMT Unit

Chairman

Department of Pediatrics

11043476, +91 11 42251755

anupamace@yahoo.co.in

Pvt. OPD, Room No. F-55, SGRH

12 Noon - 2PM, Mon - Sat

Dr. Manas Kalra

MD (Gold Medalist) DNB

FNB (Pediatric Hematology Oncology),

FIAP (DMC No.: 35631)

Fellowship Pediatric Oncology &

BMT (Sydney)

Senior Consultant

Pediatric Hematology,

Oncology & BMT Unit

Pvt. OPD: Room No. F-55, SGRH

2PM - 4PM, Mon - Sat

16/10/23

VIDHAN PARASHAR

manaskalra27@gmail.com

Dr. Divij Sachdeva

Associate Consultant

Pediatric Hematology

Oncology & BMT Unit

Dr. Swati Bhayana

Clinical Assistant

Pediatric Hematology

Oncology & BMT Unit

Δ - Pre-BALL for Utk
2 Recursidulum

Adm

Admit in Ped + DC

- Inj Cytarabine no X6 Day I.V.
(Prevent C Bacin, Abunil x4 days
Emeset)

- 1 Tablet 6-MP ✓

- L-P C 1.7. MT x

- 1 Soften, Candid, Listerin

- F/U after 1 week CBC & DLC

[Handwritten signature]

Sir Ganga Ram Hospital Marg, Rajinder Nagar, New Delhi-110060, INDIA

Phone: +91-11-35123600(30 lines), 42254000(30 lines) Fax: +91-11-25861002 E-mail: gangaram@sgrh.com Website: www.sgrh.com



H-2008-0017
Since June 16, 2008



Sir Ganga Ram Hospital

**DISCHARGE SUMMARY
INSTITUTE OF CHILD HEALTH
DEPARTMENT OF PAEDIATRICS
SIR GANGA RAM HOSPITAL**

PAEDIATRIC HEMATO-ONCOLOGY AND BMT UNIT (PHO)

NAME: Vidhaan Parashar	AGE: 5 years	SEX: MALE
DOA: 09/10/23	DOD: 09/10/23	MRD NO: 3157214
Wt: 19.9 kg	Ht: 114 cm	BSA: 0.79 m ²

DIAGNOSIS:

Precursor B cell Acute Lymphoblastic Leukemia, TLC at admission- 22700/cumm, CSF -Negative, PGR, Molecular - Negative, NGS - KRAS & NRAS Positive Karyotype 55~58,XY,+X,+4,+6,+8,+9,+10,+12,+14,+15,+16,+17,+18,+20,+21,+22/46,XY[9], Day 1 of Induction- 15/03/23 TP1 MRD- 0.0297%, TP2 MRD- <0.01%
Admitted for week 1 reconsolidation

DISCHARGE ADVICE:

- Injection Cytarabine 60 mg IV push once daily on 10/10, 11/10, 12/10
- (After premedication with Syrup Allegra (5mg/5ml) 3 ml, Syrup Crocin DS (240mg/5ml) 5 ml, Tab Ondem (4mg) 1 tab 30 minutes prior to Injection Cytarabine.)
- Tab 6MP (50mg) 1 Tablets once daily - 4 days/week
½ tablets once daily - 3 days/week
(Avoid milk and milk products 1 hour before and 1 hour after Tab 6MP)
- Tab Septran DS (960 mg) ½ -0- ¼ (Mon, Wed, Fri)
- Tab Ondem MD (4mg) 1-1-1 X 2 days and then SOS if vomiting
- Muout powder 2 scoops twice daily or Laxopeg satchet ½ satchet twice daily for constipation
- Candid mouth paint 4 drops thrice a day to continue
- Listerine mouth wash thrice daily to continue
- Avoid raw fruits, salads
- Plenty of oral fluids, No visitors, Strict hygiene
- Don't administer any vaccination to the child/ Avoid OPV to the family member
- Follow up on 16/10/23 at 11 am in F55 with CBC/DLC and or SOS before if fever occurs
- To follow with Dr. Anupam Sachdeva/Dr. Manas Kalra/Dr. Divij Sachdeva
Mobile no.: 9811043476/9958255228/885168176.

Helpline for emergencies: 9717145987

Dr Srijib/ Dr Ayush

Dr. Swati Bhayana

Dr. Anupam Sachdeva

Dr Ankita/ Dr Shivani

Clinical Assistant

Dr. Manas Kalra

PHO Fellows

Shivani

Dr. Divij Sachdeva

Consultants



Sir Ganga Ram Hospital



H-2008-0017
Since June 16, 2008



MC - 2194

Department of Haematology

Name	: MASTER VIDHAN PARASHAR	Age/Sex	: 5 Yrs/M
Registration No.	: 3157214	Ward No.	:
Lab Request No.	: 1123189159	Room No.	:
Episode No.	: OP13014857	Location Type	: Out Patient
Location	: CENTRAL INVESTIGATION CENTRE	Collected On	: 09 OCT 2023 11:30AM
Referred By	: Dr. Manas Kalra	Received On	: 09 OCT 2023 12:27PM
Ext. Doctor	:	Reported On	: 09 OCT 2023 04:05PM
Specimen	: Blood	Released by	: Dr. Arpita Joshi

Investigation	Results	Units	Bio.Ref.Interval	Test Method
Complete Blood Count-EDTA BLOOD				
				Automated/Microscopy
Cell Counter	Sysmex XN			

Haemoglobin	9.9	g/dl	(11.0-14.0)
TLC	4.70	thous/ul	(5.00-15.00)
Platelet Count	455	thous/ul	(200-450)
PCV	31.1	%	(34.0-40.0)
RBC	3.91	mill/ul	(4.00-5.20)
MCV	79.5	fl	(75.0-87.0)
MCH	25.3	pg	(24.0-30.0)
MCHC	31.8	g/dl	(31.0-37.0)
RDW	18.9	%	(11.6-14.0)
Micro R	13.20	%	
Macro R	3.50	%	

Differential Leukocyte Count (DLC)

Neutrophils	66	%	
Lymphocytes	25	%	
Eosinophils	0	%	
Monocytes	9	%	
Basophils	0	%	
ANC	3102	/ul	(1500-8000)
ALC	1175	/ul	(6000-9000)
AEC	0	/ul	(100-1000)
AMC	423	/ul	(200-1000)
Basophils	0	/ul	(20-100)

Occasional reactive lymphocytes seen.
Platelets are increased, counted on smear.
Please correlate with the clinical and therapeutic profile of the patient.

1. This is a Computer generated report, No Signature required.
 2. Content of this report is only an opinion, not the diagnosis.
 3. The report shall not be reproduced, except in full, without permission.
- <<< Page: 1 of 1 >>>



H-2008-0017
Since June 16, 2008



Sir Ganga Ram Hospital

Name/MRD: Vidhaan MRD No.-3157214

Height: 114cm Weight: 19.9kg Surface Area: 0.79 m²

Reconsolidation started on 09/10/23-

To proceed with this phase, patient must have:

- Normal creatinine and good clinical condition
- Neutrophils >0.5 x 10⁹/l and platelet count >50 x 10⁹/l

Dates	Day	Chemotherapeutic drug	Patient dose
09/10/23 to 12/10/23	Day 36	Cyclophosphamide, 1g/m ² IV over 1 hour (with DMF and Mesna)	790mg
		LP and IT MTX	12mg
		Tab 6MP (50 mg) should be 50 mg/m ² /day Days 36-50 (for 14 days)	1 Tablets once daily – 4 days/week ½ tablets once daily – 3 days/week (total 14 days)
	Day 36-39	Cytarabine, 75 mg/m ² IV/SC daily for 4 days	60 mg for 4 days
16/10/23 to 19/10/23	Days 44-47	Cytarabine, 75 mg/m ² IV/SC daily for 4 days	60 mg for 4 days
	Day 44	LP and IT MTX	12 mg

NOTES:

1. For each block of cytarabine, the white count should be > 0.5 x 10⁹/l and platelets > 30 x 10⁹/l. If the count is too low for the cytarabine, also hold 6TG for that week. All the doses of cytarabine and 6TG should be given in order to complete the phase of treatment.
2. Fever of 38°C or higher may indicate severe infection and requires prompt evaluation and blood count. If neutrophil count less than 0.5x10⁹/L, immediate admission and IV antibiotics are usually required.
3. Co-trimoxazole, mouthwash and Candid to be administered daily continuously during induction to prevent infection.
4. Notify IMMEDIATELY if any contact with measles, chicken pox, or shingles.

CASE SUMMARY

Vidhaan, a 5-year old boy known case of Pre B-ALL , was admitted for Reconsolidation week 1 chemotherapy . He had no history of fever, vomiting or pain abdomen.

EXAMINATION:

On admission, afebrile, HR-98/min, BP – 90/60 mm Hg, RR-24/min, pallor -, Abdomen-soft, Testis – bilateral normal, RS- b/l equal air entry; CVS-S1 S2+, No murmur, CNS – conscious, no focal deficit.

HOSPITAL COURSE

Vidhaan was admitted. CBC/DLC at admission showed Hb- 9.9 gm/dl, TLC- 4700/cmm, Platelets- 4.55 lacs/cumm, ANC- 3102/cumm, AMC-423/cumm. After taking informed consent, lumbar puncture was done and intrathecal methotrexate was given. Week 1 reconsolidation chemotherapy was given with Inj Cyclophosphamide, Inj cytarabine and tab 6MP. He tolerated the chemotherapy well.

At present he is afebrile, with good oral intake, hemodynamically stable and is being discharged with advice to follow up on 16/10/23 with CBC/DLC in F55 OPD or SOS in Ward 9.

PROCEDURES: Lumbar puncture with IT Methotrexate

REPORTS AWAITED: none

Dr Srijib/ Dr Ayush

Dr Ankita/ Dr Shivani

PHO Fellows

Dr. Swati Bhayana

Clinical Assistant

Dr. Anupam Sachdeva

Dr. Manas Kalra

Dr. Divij Sachdeva

Consultants