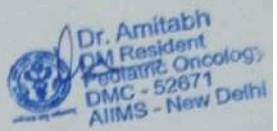
17/7 Inj Etoposide 110 mg/300 ml NS iv over 1 hour.

Qed 18/7

N/v 20/07/24
CBC LFT/KFT



20/7/24: 1° HLH: TNFRSF9 mutation.

EBV predisposition & risk of HLH

c/d/w Dr. AKG Sir

- Ferritin: 30
- EBV: Negative.
- To send Ig levels next samples.
- To do DSA and HR typing & method.
- Donor pre transplant w/u. (X)
- ~~IAE~~ Check BG of Both.

Plan:

1. To Do: HIGH RESOLUTION TYPING OF MOTHER AND CHILD DONOR SPECIFIC ANTIBODIES (DSA).
2. To do: Blood Group of mother and child.

3. for Mother : CBC
UPT
- HIV / HbsAg / HCV
- Blood group
- TORCH profile

4. Continue continuation therapy.
5. R/w on 27/7/24.

Dr. Sanjana. S
DM, Pediatric Oncology
AIIMS, New Delhi
DMC-109686

Monday
2 pm
210

23/07/24

Continuation Phase wk S2 - w.e.f 24/7/24.

Table data from daycare

- Tab Dexa 4 mg 1-0-1 × (3) day -
- Tab CSA 1 tab BD
- Inj Etoposide 110 mg in 150 ml NS iv over 1 hour.
- IVIg 4 units as per protocol. → to be given on 3/8/24

⇒ Septra prophylaxis

Dr. Amitabh
DM Resident
Pediatric Oncology
DMC - 5[illegible]71
AIIMS - New Delhi

1/8/24

N/v on 31/7/24,
C CBC/RFT/LFT
ferritin,
Triglycerides
fibrinogen

sent on 5/8/24

31/7/24.

Major ABO mismatch (+).

Recipient: O+ve.

Donor: B+ve

Plan:

1. To check Anti B antibody titres in child
2. C/L TORCH profile mother.
3. Planned for admission in the next week.
4. To continue HLH continuation therapy.

Donor.

Dr Jain SR-PGI.

Toxo: IgG: Neg
IgM: Neg

Rubella: IgG: +ve.
IgM: -ve.

CMV: IgG: +ve.
IgM: -ve.

Hsv: IgG: +ve
IgM:

Dx/c: 1° HLH post Haplo HSCT / D+28

17/09/2024.

Wt: 18.7Kg.

- Apetite Used.
- Vomiting Tendency 1 episode/day.

Oral mucosa: Grade I mucositis

Skin: No Erythema / rash.

- P+ Ic (-)
- P/A: Soft, NT
  No OM.

Adv:

- Cont. Syp cyclosporine 7 mg PO BD
- Cont. T. Pantop / T. UDCA / Acyclovir / T. Posaconazole /
- Cont. Cap. MMF.
- T. Emset (4mg) 1 tab PO TDS
- Cont. Betadine gargle / sitz bath.
- N/v in OPD on 21/9/2024 w/ reports.

Shivani.

19/09/2024

Dx/s: 1° HLH Post haplo HSCT / D+30

Vomiting - No further episode since morning.

- Appetite fair -

Oral cavity: Grade II mucositis

No diarrhoea / pain / itching / scaling -

P+Ic -

P/A: Soft, NT
No CVA

Serum cyclosporine: 197.1
(17/09/2024)

Adv:

- Cont. Syp. cyclosporine 70 mg PO BD
- Cont. T. Pantop / OPCA / Acyclovir / T. Pioracorazole.
- Syp. Septran (40/5) 5.5 ml PO BD on alt. day.
- Cont. Cap MMF.
- Candid MP / Zytee gel for LA TDS
- Sitz bath / Betadine gargle
- Sr. cyclosporine & CMV PCR on friday from daycare. (11:00 am)
- N/V in OPD on 25/09/2024 with CBC / RFT / LFT

Shivani.

P HLH / Post HSCT / D+31

20/7/2024 -

- Vomiting - ↓ appetite

Wt: 19 Kg

- Erythema over trunk, desquamation & Scaling over scalp.

O/E: - B/L periorbital fluffiness

P/A: - Soft. NT
NO OM

Chest: B/L AE equal
No added sounds

CVS: (N) S1, S2 heard
No murmur

CNS: WNL

Adv: -

- ↓. Emset to cont.
- cont. T. UDCA / Pantop / Zeylorie / T. Posaconazole
- Syp. Septran (40/5) 5.5 ml PO BD (on alt. day.
- cont. Cap MMF / cyclosporine / Candid / Zyrtec / Sitz bath / betadine gargle.
- Sr. Cyclosporine, CMV DNA PCR. } Room no. 46 Daycare
- N/V in OPD on 25/09/2024 c CBC / RFT / LFT

Sincerely.

21/7/24:

Adm: 1° HLH / Post HSCT / D+32

- Appetite - Used.
- Vomiting - No further episode since yesterday.

- Acute Skin & Gut GVHD. [Grade II a]

PROXY VISIT

Adv:-

- Tab. Budesonide (3mg) 1 tab PO BD

~~XX~~

To not give (M) dose of Cyclosporine on Tues / Fri before sampling.

- Oint. Mometasone for LA BD
- Sr. Cyclosporine / DNA PCR / Daycare / Room 46
- Cont. T. VDCA / Pantop / Acyclovir / Posaconazole / Septran
- Cont. Cap. MMF / Cyclosporine.
- C/R CMV DNA PCR
- N/V in OPD on 25/09/2024 with reports

OB/GYN/HT. Shivani.

Dx: 1° HLH [Post HSCT] | D+35

24/09/2024.

- Skin desquamation over scalp & neck (+)nt

D+30 chimerism: 100% donor cells.

- Papular lesion over upper chest. (+)nt

Oral cavity: healing.

BSA 25% - 50%.

- Apetite improved

- on Oral Budesonide (D4)

P+ Ic- Cl- Cy- L- E-

Nutrition - Ind

Chest: B/L A/E (+)nt
No added sound.

Adv:.

CVS: S1, S2 heard
No murmur

- Cont. Oral Budesonide

- Cont. oint. [crossed out] - Oint Deronide

P/A: Soft. NT.

- Cont. T. UDCA | Pantop | Acyclovir | Septran | Posaconazole

- Cont. MMF | cyclosporine

- D/C MMF → To discuss c̄ Sir. in c/o ac. GVHD

- Sunscreen - SPF50 → for UA & limit Sun exposure.

- N/V in OPD on 25/09/2024 c̄ CBC/RFT/LFT

[signature]

25/09/2024.

W/: 18 Kg

D+30 chimerism:
100 % Donor cells

- Oral cavity: healthy

10.70 / 6490 / 5450 / 70K

Cyclosporin levels: ↑↑
535

- B/L axillary areas desquamation & erythema

Ur/Cr : 23/0.5
Ca/PO4 : 7.3/2.5
TB/DB : 0.61/0.38
ALT/AST : 24/34.

- Skin - Stage 0 - 36 %.
- GIT : UGI - 1.
- Liver - 0.

Grade : II a

Daycare - CBC/RFT/LFT

Adv : 1° HLH / Post HSCT / D+36

- Skin desquamation over scalp, neck & upper chest (+)nt.
- Appetite improved.
- W/H Evening dose.

Adv :
- Syp. Cyclosporine (100mg/ml) 0.5 ml PO BD
- Oral Budesonide (3mg) 1 tab PO BD.
- Oint. Desonide for LA to cont.
- Limit Sun Exposure
- Use Sun Screen - SPF 50
- Skin biopsy - Room 331.

⇒ Syp. Prednisolone (15mg/5ml) 6 ml PO BD x 7 days.

- Cont. MMF/Cyclosporine/UDCA/Ptychotrin/septra Rosuvastatin.
- T. Pantop (20 mg) 1 tab PO OD ES — x 7 days.
- Sr. Cyclosporine levels - 27/9/24
- N/v in OPD on 28/09/2024 c CBC/RFT/LFT

Shivani.

28/09/2024 -

Dsis: 1°HLH | Post HSCT | Acute GVHD Grade IIa.

on - Systemic steroids (D3)
- Oral Non-absorbable steroids.

D+39

Wt: 19.4 kg.

Skin: lesions over neck
Es upper chest - no new lesions. D3 → Improving lesions
- scaling - resolved.
- Erythema - resolved
- desquamation (+)ve

Scalp lesion: mild scaling
no Erythema
desquamation (+)ve

BSA: 36%.

GI: No nausea | Vomiting

Adv:.

- Fluticasone Propionate for LA BD.
- Tab. Cyclosporine (100mg/ml) 0.5 ml PO BD
- Syp. Prednisolone (15mg/5ml) 6 ml PO BD
- Cont. T. MMF | UDCA | Acyclovir | Posaconazole | Septran
- Sunscreen for LA
- Sun avoidance.

Icterus (-)ve
TB|DB: 0.56|0.32.
ALP: 161
RFT|LFT: WNL.
OT|PT: 68|77

Lytes:
(27/9/24)
11.8 | 6690 | 80K
4960

RFT|LFT: WNL.
Sr. Cyclosporin: 185.6

- T. Pantop (20mg) 1 tab PO BBF OD —o.
- T. Budesonide (3mg) 1 tab PO BD ⟨ to Cont.
- Serum Cyclosporine levels } Thursday. Friday.
- CMV DNA PCR
- N/V in OPD on 12/10/2024 ≥ CBC/RFT/LFT.

Shivani.

03/10/24.

D + 44

Wt: 19.1kg.

BSA: 36.1.

Adis: 1° HLH / Post HSCT / Acute GVHD Grade II a

On systemic steroids (1 8) —

- Respiratory - resolving
- Scaling resolved.
- no new lesion.

CMV DNA PCR:
3.1 x 10^5 copies/mL

Adv:

- Tab. ValGanciclovir 100 mg +50 PO 12 hrly.
- CMV DNA PCR after 3 days.
- Emolient Beconide LA BD ⟨
- Syp. Cyclosporine (100mg/ml) 0.5 ml BD ⟨.
- Syp. Prednisolone (15mg/ml) 6ml PO BD ⟨ to cont.

- Lost. T. MMF | UDCA | Acyclovir | Rosalonazole | Septran
- Limit sun Exposure
- Sunscreen for LA
- T. Budesonide (3mg) 1 tab Ro BD ×
- (ITOP) T. Acyclovir.
- T. Pantop (20mg) 1 tab Ro BBF
- S. cyclosporine } Tuesday.
- CMV DNA PCR }

- N/v in OPD on 14/10/2024 at 2PM ✓ reports.
- Syp. Septran (40/5) 5ml BD × 4weeks.
- T. MMF (250mg) 1tab TDS × 4weeks.
- T. PANTOP (20mg) × 28 days
- T. VALGANCICLOVIR (450mg) × 28 days. Shivani.

जारी जमा पर्ची (OPD)
दिनांक 31/10/24
डीलिंग सहायक के हस्ताक्षर

SENIOR RESIDENT
Dept. of Pediatric Oncology
All India Institute of Medical Sciences
Ansari Nagar, New Delhi - 110029

Shivani

Dx: 1° HLH | Post HSCT | Acute GVHD Grade IIa.

D+46 CMV DNA PCR: 1×10^6 (4/10/2024)

S. Cyclosporine (83.2) LL.

10.2 / 12,790 / 10,620 (68K) LL ALT/AST: 529/288 (↑↑).

Ur/Cr: 25/0.3

Ca/Pq: 9.2/3.2

TB/DB: 0.72/0.18

TP/Alb: 7.0/4.3.

Adv:
- Syp. Cyclosporine (100mg/ml) 0.7 ml PO BD ×
- T. VALGANCYCLOVIR (450mg) — 1 tab (M) ½rd tab (E)

- Cont. T. MMF / UDCA / Mycostatin / Posaconazole / Septran.
- Inj. Prednisolone (15mg/5ml) 6ml Po BD <
- T. Budesonide (3mg) 1 tab Po BD <
- Sunscreen spf 50 | Avoid sun exposure.
- Cont. T. Pantop.
- Emolient Dermoride for LA
- N/V in OPD on 17/10/2024 at PCSC at 2PM
  - CBC/RFT/LFT

Discharge.

08/10/2024

Dx: 1° HLH / Post HSCT / Acute Grade II a GVHD

D +49

D+30 chimerism: 100%.

- Skin lesions
  - Scalp complete desquamation
  - neck, upper chest & axilla - mild discoloration (hypo pigmentation), no erythema & scaling.

Wt: 19.4kg.

Skin Bx: No sign of GVHD.

No other concerns.

accepting orally well.

Samples left:
- S. Cyclosporine
- CMV DNA PCR.
- CBC/RFT/LFT

Adv:
- T. Valganciclovir (450 mg) - 1 - (M), 1/3 - (E)
- Syp Cyclosporine (100mg/ml) 0.7 ml PO BD <
  (1.8 mg/kg/d)
- Syp. Prednisolone (15/5) 5ml (M) 6ml (E) to cont.

T. Budesonide (3mg) 1 tab

- Cont. T. MMF/ UDCA/ Dosa/ Septran / Pantop.
- Emolient Dermide Eg lactocalamine lotion to continue
- Sunscreen spf 50 & limit Sunexposure.
- N/v in OPD on 17/10/2024 at PCSC at 2PM to reports.

08/10/2024.

- Cap Budesonide-CR (3mg) - 30 days. Shivani
- T. Posaconazole (100mg) - 30 days.
- Betadine gargle - (1)
- Mark Packet - (7)
- Dettol - (2)

जारी जमा पर्ची (OPD/IPD)
दिनांक 8/10/24
चिकित्सा सहायक के हस्ताक्षर

SENIOR RESIDENT
Dept. of Pediatrics
All India Institute of Medical Sciences
Ansari Nagar, New Delhi - 110029

Shivani

Friday

- S. Cyclosporine levels } Daycare - Dr. Nikita Thakkar.
- CMV DNA PCR }

Shivani

17/10/24
day + 58

3.1x10^5 (27/9)
1x10^6 (3/10).
2.45x10^5 (11/10).
CMV PCR
1.83 x 10^5 → (15/10)

CSA → 105.
(10/5) 11/10

On Valganciclovir (∵ 3/10)
On Prednisolone (∵ 25/09)
↳ (18 kg wt)

11/10: LFT/RFT = ✓
ALT = 174
AST 70

8/10 10.3 | 11.08 | 87

wt = 19.8

- CBC
- CSA
- LFT/RFT
- CMV PCR
} on 22/10

Child well
No complains.

Abd distention - gaseous No HSM
↓
steroid induced

Appetite ✓.
Oral cavity - ✓.

Chest } -
CVS }

- Syr Prednisolone (15mg/5ml).
- 5ml - 4ml ≈ (1.75 mg/kg/d)
- Syr Cyclosporine 0.7ml - 0.7ml
- ✗ Cap MMF (250) | cap TDS
- C Budesonide (3mg) 1 BD

https://www.childhelpinghand.org/

- Mometasone.
oint Desonide to continue
0|0|0|0

- UDCA / Septran / Posaconazole.
to contin.
- T Valganciclovir (450) < 1/3

- Lactocalamine to contin

- Rev c reports.

Aditya Gupta

Dr. Aditya Kumar Gupta
Additional Professor
Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi

दवाई जमा पर्ची (रा0आ0नि0)
दिनांक 18/10/24
डीलिंग सहायक के हस्ताक्षर 2vue

for issue.
{ T. Valganciclovir - for 15 days
T. Pan - 20
T. Udiliv
C Budecort (3mg)
Ommacortil (15mg/5ml)
Dettol - 2 } for 1 month

Aditya Gupta

Dr. Aditya Kumar Gupta
Additional Professor

19

19/10/2024

D+60

Wt: 19.7 kg (17/10/24)

Dx:s: 1° HLH (Post Haplo-HSCT | acute Grade II a (skin) GVHD | CMV re-activation.

No new concerns

Prony visit

- CSA level: 105 (15/10) (1.75 mg/kg/d)
- CMV DNA PCR: 1.83×10^5 (15/10)

Advs.

- Cont. Syp. Prednisolone (15/5) 5ml — 4ml
- Syp. Cyclosporine (100mg/ml) 0.7 ml — 0.7 ml.
- T. MMF (250 mg) 1 tab PO TDS ⟨
- T. Budesonide CR (3mg) 1 tab PO BD ⟨
- lotion Desonide Eg Lactocalamine for LA TDS ⟨
- T Valganciclovir (450 mg) 1 tab / ½ tab
- Cont. MDI Budecort/Udilin | Septran/Pan-40 | Sit bath | Betadine gargle.

- CMV DNA PCR
- CSA level
- CBC/RFT/LFT

} 22/10

Shivani.

22/10/2024

D+ 63

Dx: Primary HLH / post haplo - HSCT / acute Grade II a (Skin + Gut) GVHD / CMV re-activation.

Af: 21.4 Kg (22/10/24)

- Skin lesions resolved - Scalp no lesion
- Trunk - Chest & Abdomen - hypopigmented macules (+) no scaling / Erythema.

- Apetite - (N)
- No icterus / edema / vomiting

Tdx:-

(1.1 mg/kg/d) Syp. Prednisolone (15/5) 4 ml — 4 ml

- CMV DNA PCR } sent
- CSA level
- CBC/RFT/LFT

6.25 × 10^3 declining 2 days

- Syp. Cyclosporine (100 mg/ml) 0.7 ml — 0.7 ml.

203

ALT = 79.

11.6 / 7.37 / 99%

ANC = 6.23

- T. MMF (250 mg) 1 tab PO TDS ↑
- T. Budesonide CR (3 mg) 1 tab Po BD ↑
- Oint. Deroxide & Lotion lactocalamine for LA TDS ↑
- T. Valganciclovir (450 mg) 1 tab — (M) ½ tab — (E)
- Cond. MDL Budecort / Udiliv / Cyptron / Pan Concorde / Pan-20 / Fitz bath / Betadine gargle

N/V in OPD on 6/11/2024 ± CBC/RFT/LFT.

Shivam.

for purchase

- Tab Budesonide CR (3) 1 tab BD } For 1 month
- Tab Posaconazole (100) 1 tab OD
- Syp Prednisolone 4 ml - 3 ml. (2 g → 5/x).

Aditya Gupta

Dx: 1° HLH / Post haplo HSCT / CMV re-activation / Acute Grade II-a GVHD (Skin + Gut)

25/10/2024

D+77

Wt: 21.7 kg.

Skin lesions resolved on scalp, neck and trunk, axilla

(P) hypopigmented lesions over upper back.

No other concerns

Adv:-

- Syp. Cetirizine (5/5) 5 ml PO OD HS
- Syp Prednisolone (15/5) 4 ml — 3 ml (1 mg/kg/d)
- Syp. Cyclosporine (100 mg/ml) 0.7 ml 0.7 ml
- T. MMF (250 mg) 1 tab PO TDS
- T. Budesonide CR (3 mg) 1 tab BD

Serum CSA
CMV DNA PCR
- CBC/RFT/LFT sent

22

- T. Valganciclovir (450 mg) 1 tab (M) × 4 weeks.
½ tab (E)
- T. MMF (250 mg) 1 tab Po TDS × 1 mo.
- T. Posaconazole (100mg) 1 tab OD × 2mo.
- Tab Budesonide | T. Odilio | T. Septran | Pan. 20 |
Sitz bath | Betadine gargle.

- N/v in OPD on 6/11/2024 c reports.

Shivani.

जारी जमा पर्ची (रा0 आ0नि0)
दिनांक 2 5/11/24
डीलिंग सहायक के हस्ताक्षर

6/11/24

No fresh Usg

11.90) 2340 (79.00
1730

KCr/Ucr (N)

Adv

- Next visit × 2 weeks
- CBC, LFT, KFT

18/1/25 - No acute complaints.
D+151 - No features of acute or chronic GVHD.
Wt: 20kg. - BP readings: 50-90p predominantly.

CBC: 10.9/3430/90,000.

RFT/LFT: ✓.

Cyclosporine levels: 203 ⟶ 307.

Hypertrichosis (+).

CMV - awaited

Chimerism D+90: 100% donor cells

Advice:

1. Reduce Cyclosporine: Syp. Cyclosporine (1mL/100mg) 0.4 mL BD (4mg/kg/d).
2. T. MMF 250mg. TDS.
3. T. Amlodipine. 2.5mg BD.
4. T. Posaconazole 150mg 1½OD.
5. T. Acyclovir 200mg TDS.
6. Syp. Septran 5mL BD alt day
7. T. Budesonide CR 3mg OD.
8. T. Pan20 1 tab OD.
9. Syp. Emeset 5mL SOS.
10. N/V 25/1/25 OPD.
11. To do CBC, RFT, Cyclosporine levels on 22/1.

जमा पर्ची (रा0आ0एम्स)
दिनांक 18.1.25
बिलिंग सहायक के हस्ताक्षर

x 1 month

Dr. Sanjana. S
DM, Pediatric Oncology
AIIMS, New Delhi
DMC-109686

12 tab UDILIV (150mg) 1 tab - ½ tab BD

06/02/25

Day + 166

BC/S → sterile

LFT/RFT = ✓

K+ = 5.5

9.5 | 0.86 | 50%

0.39

CSA = 112

- Child better
- No fever
- No rash
- No ↑ in anorexia

✓ Stop Pot klox /
✓ Stop Levofloxacin
✓ Stop MMF
✓ Stop Udihiv

continue Amlodipine
Posaconazole
Acyclovir
CSA

} To continue

after 1 week

CBC
LFT
RFT
CMV
CSA

Aditya Gupta

डा. आदित्य कुमार गुप्ता
Dr. Aditya Kumar Gupta
अपर आचार्य/Additional Professor
बालरोग विभाग/Department of Pediatrics
अ.भा.आ.सं., नई दिल्ली-29/AIIMS, New Delhi-29

08/02/25

D+168

→ no fever / rash / vomiting / loose stools

(6/2)

CBC: 9.1 | 1020 | 29,000 | N 66 L A

ANC: 680

MCV: 104 ↑

RDW: 14.8 ↑

⇒ Mild cough (+)

thrombocytopenia (+)

CMV: +ve

7107 copies

(7/2)

? d/t 2° to CMV

other viral illness

↳ previous CMV: 265 (03/01)

- tab Posaconazole (150mg) 1 tab OD
- ~~Syp~~ tab Acyclovir (200mg) 1 tab TDS
- Syp CYCLOSPORINE (100mg/ml) 0.4 ml BD
- Syp Septran (40mg/5) 5ml BD alternate day

}
x 1 month

C

जारी जमा पर्ची (रा०आ०नि०)
दिनांक 17/2/25
2/4/25
रोगी सहायक के हस्ताक्षर..........

18/02/25
day +178.

Child well
O/E. ✓

CBC
LFT
RFT
Chimerism
CMV
CSA

100%
(18/2/25)

Aditya Gupta.

Tab Posaconazole
T. Acyclovir
S. cyclosporine
S. Septran
S. Vit D sachet
/
To continue

22/02/25 +182.
8.9 | 2.6 / 1.76 | 50.
MCV=104
CMV-Negative
LFT/RFT= ✓
CSA= 211

Child well.
continue same
Rev c̄ chimerism report
Rev in 1m. / SOS.

Aditya Gupta

Dr. Aditya Kumar Gupta
Additional Professor
Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi

24/02/25

cough × 2d.

? throat pain × 1d

pain in rt knee × 1d

no trauma.

PSH.

? infective arthritis

? reactive.

? GVHD.

wt = 19.8.

- Tab Naproxyn (100). 1 tab BD. × 5d
- syr. Lineyolid (100mg/5ml) 10ml f/b SOS
- syr. Cefpodoxime (100mg/5ml) 10ml BD. × 10d
- Tab Invaior Pan 20 1 tab OD.
- continue Posaconayole, Acyclovir, Cyclosporin, Sephain, Vit D

CBC, LFT, RFT, CRP, ESR.

LFT/RFT = wc.

CRP = 37.

ESR = 18.

8.6 | 3.7 | 55.

Continue × 14d

& review

If doesn't improve to admit

Aditya Gupta

06/03/25 post HSCT

day +194

wt 19.3.

Child well.
swelling has ↓
↓ off Naproxyn x 5d
pain better
movement better.

BP ↑.

Syr Lineyoid
Cefpodoxim } 4 d more.

Syr Posa ✓
Acyclovir ✓
Cyclosporin ✓ → 0.4 ml BD
Septran ✓ to continue
Vit D

- Tab Amlodipine 2.5mg BD

CBC
LFT
RFT
(CBA-)
(CMV-)
CRP
ESR

Aditya Gupta
Dr. Aditya Kumar Gupta
Additional Professor
Pediatric Oncology
Department of Pediatric

19
30

06/03/25 By proxy.

As per father child is better.

Child well.

CBC = 6.8 / 2.3 / 16 → ? drug induced
N = 1.35.

Plt LFT/RFT = WNL.
CRP = 7.9.

- Syr Augmentin (228/5) 7.5 ml BD x 5 days
- stop Lineyoid / Cefpodoxime
- Rest to continue

Dr Rewa Repeat CBC (asap) { if Plt < 20,000 → to transfuse IRRADIATED PRBC day care / emergency
If Hb < 7 → transfuse day care

Aditya Gupta

Rev c reports.

Adithya Gupta

CBC ✓
LFT ✓
RFT ✓
CSA ✓
CMV ✓
CRP ✓
ESR ✓

→ Sent from OPD 5th

H/o (L) knee swelling and pain 2 weeks ago
→ resolved

now (R) knee swelling and pain

(R) - duration of fast - Sudden onset swelling

Radiculae (+)

- no bleeding manifestations - elsewhere
- no fever
- Intercostal limitation (+).

GCTO vs bleed vs. infection

DLW Dr. Nag Sir

To r/v above results w/s OPD c child

Thank you reports
of CBC / LFT / RFT / ESR / CRP
Cyclosporine

Thanks
Sharan
SR Ped

12/03/25

day + 200

CRP- 1.82

6.9 | 7.44 | 46.

MCV= 96
MCH= 29.
N= 61.

CSA= 161

ESR= 65.

LFT | RFT
↳ N

Swelling of rt knee
↳ Normal

~~Transient~~ swelling of lt knee } ⊕
lt ankle

? Migratory arthritis / ? Reactive

Child well.

? GVH ē joint involvement

- Syr Cyclosporine 0.5ml BD.
- ~~Syr~~ Tab Naprosyn (100) 1 tab BD x 3d
- Rest CST
- Tab Amlodipine 2.5mg OD
- Rest CST.

- plan if no improvement
- new joint

. can start steroids. ⊕.

D+207 Since Tx.

15/3/2025

- Swelling at Ⓛ ankle → completely resolved
new onset mild ⓐ swelling on the Ⓛ knee.
fever ⊕ 2 low grade ~ 100.1°
Last - @ 4PM on 14/3/25.

- Cough (+)
Coryza (+)
NO FB

appetite - (↓)

- no GI symptoms
- NO Skin Symptoms

O/E:
- mild effusion (L) knee
warmth (+)
mild tenderness

RS - NVBS O/L
no added sounds

CVS - NO murmurs.

PA - Spleen - 2cm

wt = 18.350 kg.

ESR - 65
cmv below level of quantitation
Cyclosporine - 161.3

HR - 126/m
RR - 28/m

(R) knee }
B/c ankle } WNL

UL - Joints - no swelling
lesions

Eyes ✓
Skin ✓
oral cavity ✓
mouth opening adequate

✓ Plan for DC -
FOT - IRR - PRBC

Plan:

Cont.
1. Syp CYCLOSPORINE 0.5ml BD } to cont.
2. Tab AMLODIPINE 2.5mg HS OD.
3. Syp. MAXTRA 5ml - 5ml - 5ml × 3 day
Septran / acyclovir / Posaconazole to continue.

- CBC / LFT / RFT / CRP
- r/v - POC clinic - 2PM - 17/3/25.

DR. SAURABH SHARMA
Senior Resident
Paediatric Oncology
Deptt. of Paediatric ...
Institute of Medical Sciences

17/03/25 Child in day care for PRBC

CMV= Below level of quantification

6.5 | 2.94 | 44.

LFT / RFT = WNL

Bil < 1.01 / 0.77

CRP = 155

- CBC.
- PS for schistocytes
- Reti - count
- LDH., Ferritin

→ Nasopharyngeal swab viral PCR

cough × 2d
runny nose } × 4d.
fever

Joint smelling have subsided

- PRBC trf in day care.
- syr Oseltamivir (12mg/ml) 3.5ml BD × 5d.
- syr Maxtra / Cyclosporine / Amlodipine
- syp Posa / Acyclovir 200mg / Sepnew T/C
  × 150mg 1 tab OD-0
- Betadine gargles
- Inj Pantop 20mg × 5days OD

please issue for 1m.

Rev. Wed / Thu c child

Aditya Gupta

Dr. Aditya Kumar Gupta
Additional Professor
Oncology
Pediatrics
New Delhi-29

ISSUE / COMPATIBILITY LABEL

Sample ID : **2025-S03599**
Patient : **BHAVYA BHARTI**
Patient's Blood Group : **O Pos**
UHID: **106821226**
Hosp Dr : AIIMS Hospital - BSC
Pt. Hosp. Reg. No.: 2024207138
Wd-Bed No.: **OPW V FLOOR**

Product : **LD-PRBC**	Issue No.: 4874
Blood Group : O Pos	Issue Dt :17/Mar/2025 03:19 PM
Bag ID : **2025-B08155**	Coln. Dt : 01/Mar/2025
XMatching Report : Compatible	Exp. Dt : **12/Apr/2025**
X-matched By : Gaurav	Issued By : Chetan

Blood storage centre, Surgical block, Masjid Moth, AIIMS, New Delhi Pin-110029, Approval no - S(0051)/BSC/22
Lic.No. S(0051)/BSC/22

जारी जमा पर्ची (रक्तअभि०)
दिनांक 18/3/25
डीलिंग सहायक के हस्ताक्षर

Shyam

DR. SHARAN SHANUBHOGUE
Senior Resident
Dept. of Paediatrics
All India Institute of Medical Sciences
New Delhi-110029

20/3/2025

- Resolution of joint swelling / symptoms
  low grade fever ~ 100°F till y'day

on oseltamivir Day 3

CBC 9) 2470 / N-51 L-31% (76,000. ↑

U/creat = 12/0.4
UA - 3.3
LFT - N
Ferritin - 534

No schistocytes.

LDH - 335

Covid - NR
Influenza - Neg

https://www.childhelpinghand.org/

O/E:

No HTN. Hirsutism ↑. BP - 82/56 mmHg

- L ankle swelling · mild

RS / CVS NAD.

- Chronic GVHD
  vs
  viral arthritis
  (similar history in mother)

Plan:

22/3/25

✓ Urine R/M. → Please give report

✓ wait r/v - retic counts
  viral Panel

✓ cont. same

DR. SHARAN SHANUBHOGUE
Senior Resident
Paediatric Oncology
Dept. of Paediatrics
All India Institute of Medical Sciences
New Delhi- 110029

27/03/2025 day + 212 Child well.

No pallor,

wt = 17 kg.

↓ in weight.

All swellings have ↓

No mucositis

Skin

P/A

oral cavity

PS = ✓

Schisto < 1%

Influenza, SARS COV2 } N-eg.

9.0 | 247 | 76

Ferritin - 534

LDH = 335

LFT/RFT = ✓

- Syr Cyclosporine 0.5ml BD
- T. Acyclovir (200) 1 tab TDS
- T. Pan 20 1 tab OD
- T. Amlodipine (2.5) mg OD
- T. Picasa SR (100) 1½ OD
- Syr T. Septran to continue.
- T. Budesonide (3mg) 1 tab BD. ~~TDS~~ x 2m
- R/A. 2-3 wks.

not loss

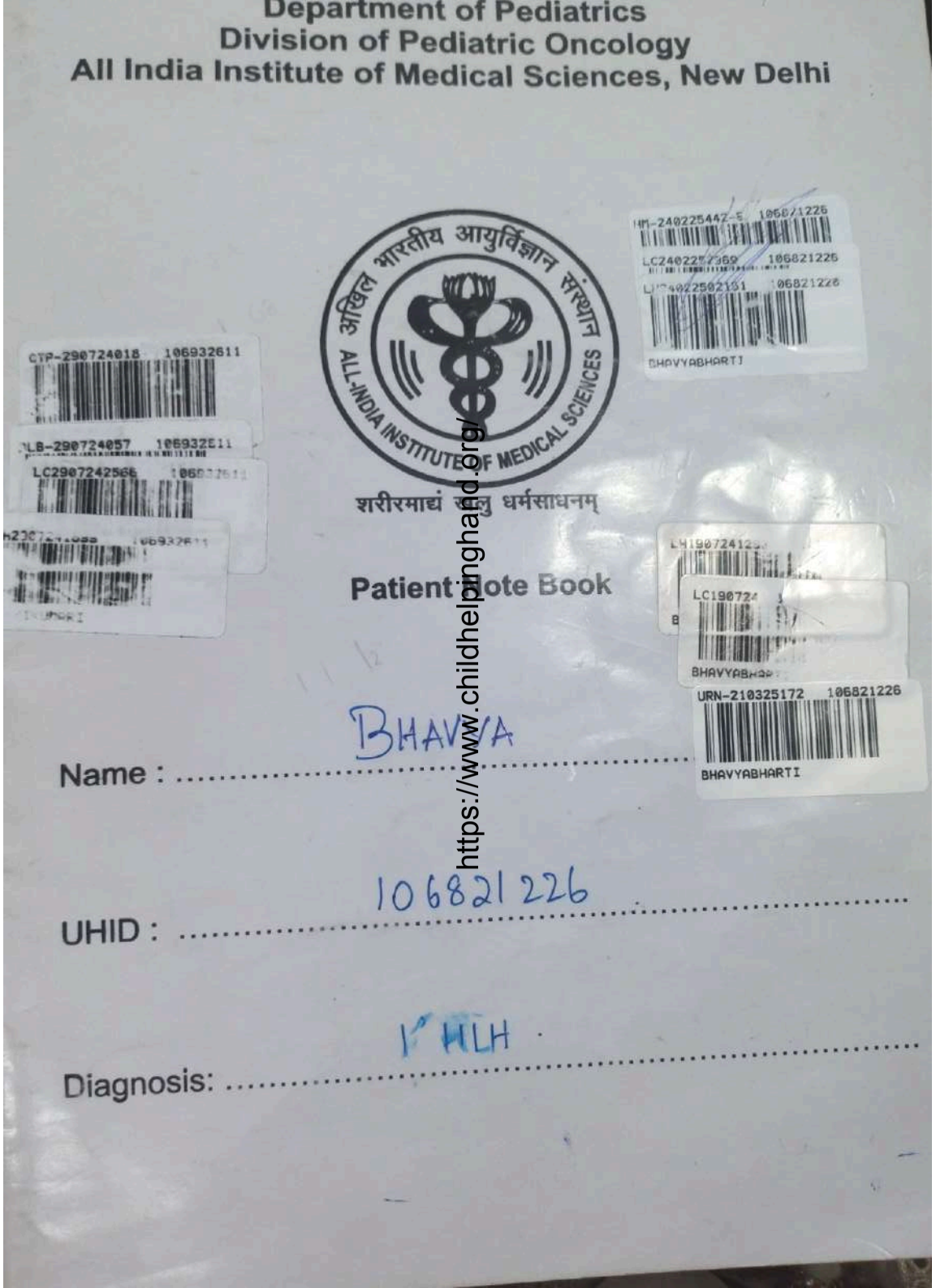
CBC ✓ - mid

CBC
LFT
RPT
CMV
CSA

family needs to stay in Delhi

Aditya Gupta

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



भारत सरकार
Government of India

आधार

भव्या भारती
Bhavya Bharti
जन्म तिथि/DOB: 10/09/2016
महिला/ FEMALE

Download Date: 21/10/2021

Issue Date: 07/10/2021

3163 8269 2274
VID : 9155 3245 7922 5452

मेरा आधार, मेरी पहचान

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

AADHAAR

पता:
द्वारा: रामधारी, वॉर्ड न-04, बनद्वार, बेगूसराय,
बिहार - 851131

Address:
C/O: Ramdhari, Ward no-04, Bandwar,
Begusarai,
Bihar - 851131

3163 8269 2274
VID : 9155 3245 7922 5452

1947 | help@uidai.gov.in | www.uidai.gov.in

बाल चिकित्सा विभाग ,
UHID:106821226
Dept No: 20230030018812

C-210
Queue / संख्या F24
Unit-III, Paediatric,

BHAVYA BHARTI

D/O RAMDHARI
7Y 10M 10D / F/(महिला)
BANDWAR , DIST BEGUSARAI, BIHAR, INDIA
Ph: 7667414439 General Rs. 0
Follow Up Patient

SAT बुध,शनि,
Reporting: 10:31:05
20/07/2024

T 02 S 19.6 Kg

बाल चिकित्सा विभाग ,
UHID:106821226
Dept No: 20230030018812

कमरा / Room
C-210
Queue / संख्या F36
Unit-III, Paediatric,

BHAVYA BHARTI

D/O RAMDHARI
7Y 10M 17D / F/(महिला)
BANDWAR , DIST BEGUSARAI BIHAR, INDIA
Ph: 7667414439 General Rs. 0
Follow Up Patient

SAT बुध,शनि,
Reporting: 09:49:07
27/07/2024

T3 - 20 Kg

Blood grap - o/s

ICT- negative

भारत सरकार

Government of India

आधार

रामधारी

Ramdhari

जन्म तिथि/DOB: 15/02/1983

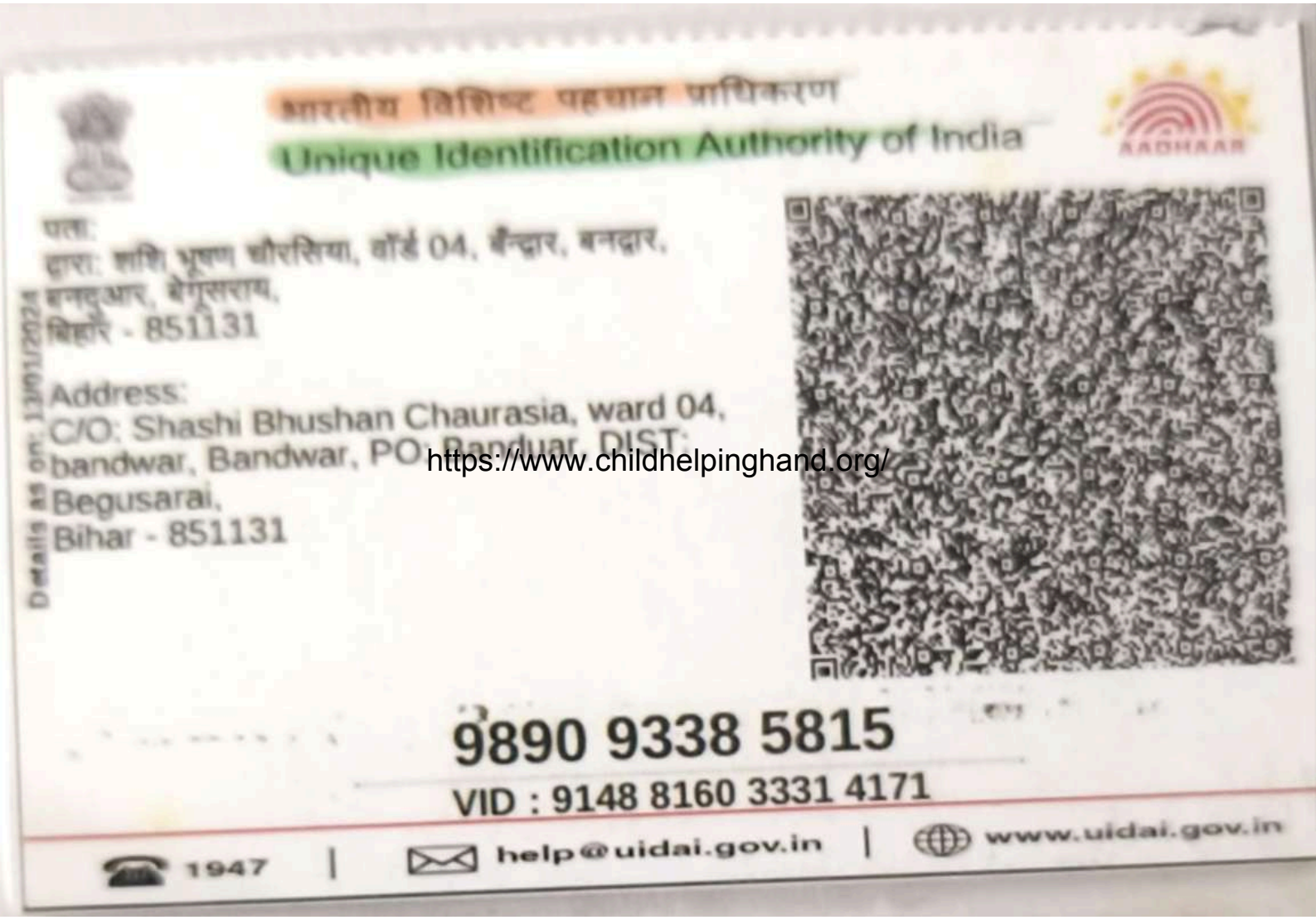
पुरुष/ MALE

https://www.childhelpinghand.org/

Aadhaar no. issued: 31/07/2014

9890 9338 5815

मेरा आधार, मेरी पहचान


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India
AADHAAR
पता:
द्वारा: शशि भूषण चौरसिया, वॉर्ड 04, बैन्दार, बनद्वार,
बनद्वआर, बेगूसराय,
बिहार - 851131
Address:
C/O: Shashi Bhushan Chaurasia, ward 04,
bandwar, Bandwar, PO: Banduar, DIST:
Begusarai,
Bihar - 851131
Details as on: 13/01/2024
https://www.childhelpinghand.org/
9890 9338 5815
VID : 9148 8160 3331 4171
1947 | help@uidai.gov.in | www.uidai.gov.in

O/E

- Afebrile
- Pallor(+)
- P/A → soft, nontender
  Liver, Spleen — Not palpable

Hirsutism (+)

Gum hypertrophy (+)

Nutrition

S/B Dietitian

Intake ~73(1127/1643)

Prot — (47/46 gm)

Right now high prot diet

Cal dense foods

Milk 500 ml/day

Prescription

Adv/

1. Syp. Cyclosporine 0.6ml PO BD.
2. Continue Acyclovir, Posaconazole & Septran.
3. Tab. Amlodipine 2.5mg 1tab — ½tab.

×2weeks

4. BP monitoring.
5. N/V → 16/06/25 Monday OPD (@2pm).

Test — CBC, LFT, RFT, Cyclosporine level

O/E

- Afebrile
- Pallor (+)
- P/A ⟶ soft, nontender
  Liver, Spleen — Not palpable

Hirsutism (+)
Gum hypertrophy (+)

2nd June
S/B Dietitian
Intake 73 (1127/1543)
kcal
Pro — (47/46 gm)
High cal high pro diet
Cal dense foods
milk 500 ml/day

Prescription

Adv/
1. Syp. Cyclosporine 0.6ml PO BD.
2. Continue Acyclovir, Posaconazole & Septran.
3. Tab. Amlodipine 2.5mg 1tab — ½tab.

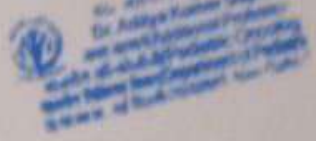
× 2 weeks

4. BP monitoring.
5. N/V ⟶ 16/06/25 Monday OPD (@ 2pm).

Test — CBC, LFT, RFT, Cyclosporine level

- Syp Cyclosporine 0.5ml BD
- continue Acyclovir / Poca / Septran } for 1 month
- Tab Amlodipine 1 tab OD
- RIA 2 weeks

Advised Complete



Wt - 19 kg
Oral Intake - 30%
(845 kcal/239)

- Advised small frequent meals
- Add ghee
- one pot meals

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

Patient Note Book

Name : BHAVYA

UHID : 106821226

Diagnosis: 1° HLH

Cause: ?gastritis Wt = 19.7kg.

Plan: ?GVHD - on Budesonide

1. Tab Pcm 500mg ½ Stat
2. Syp MUCAINE GEL 10ml TID
3. Redant PANTOP 20mg 1-0-0

UR-1705250154 106821226

DIVYABHARTI

· Urine R/m
· CXR

19/5/25
day + 269.

Had come yesterday c̄ pain in left hypochondrium & infra-axillary region

Child well presently

O/E ✓.

PA had constipation → now passing stools

VBG
7.419 | 126 | 4.55 | 2.2 lac | HCO3 - 16.6.
9.5 | 6.9 | 105
USG abd - NAD
LFT | RFT - ✓ U - 51, Cr - 0.62
OT | PT - 154 | 128
Lipase / Amylase - 55 / 23
CXR = WNL

. Syr Oflox - Metrogyl (100/5) 5ml BD x 5d.
- Mucaine gel 5ml SOS
. Syr Cyclosporine 0.7ml BD
- Pantop / Acyclovir / Posaconazole Septran T/C.

Next visit
CBC LFT RFT
CMV CSA

Aditya Gupta

Dr. Aditya Kumar Gupta
Additional Professor
Pediatric Oncology

53 -
19/5/25

13/06/25
Day +294

C/o ~~Rt~~ swelling over (Rt) knee
Reduced appetite(+).
No swelling/redness / reduced ROM.

O/E → No swelling/ tenderness /redness / reduced ROM.

No other complaints.

- Oral cavity — Normal
- Nail — Normal
- Skin — No lesion.

- No c/o swelling/joint pain/ rash/ ~~reduced appetite~~ nausea.

https://www.childhelpinghand.org/

Samples taken → CBC, LFT, RFT, CMV PCR, Cyclosporine level

Dr. [signature] / CR

- Child well today.
- Had knee pain x 2d (5d ago). | given Naprosyn
  ↳ now well

LFT | RFT = WNL 38/31 OT/PT.
9.7 | 2.66 | 113
CSA = 67.4

- syp Cyclosporine 0.5ml BD.
- continue Acyclovir / Posa / Septran } for 1 month.
- Tab Amlodipine 1 tab OD
- R/A 2 weeks
-

Aditya Gupta


https://www.childhelpinghand.org/

ORIGINAL

BALAJI MEDICOS

GST INVOICE

SHOP NO.-1,G.F,P.NO.130M/1 SUDERSHAN
CINEMA ROAD,GAUTAM NAGAR,NEW DELHI-49
Phone : 8252095380
D.L.No. : DL-MLN-144106/07
GSTIN : 07AAXFB7662A1Z8

Invoice No. : **A003153**
Invoice Date : 04-06-2025
Patient Name : CHILD HEPLING HAND
Patient Address : BHAVYA
Dr. Name : AIIMS
PRINTED BY. : UHID-106821226

QUANTITY	ITEM DESCRIPTION	Batch	EXP	HSN	M.R.P.	NET RATE	DIS%	GST	NET AMOUNT
2:0	BDFOSA TAB 1*1	PLZ14AC0	2/26	49018901	7252.00	1595.44	78.00	12.00	3190.88
2	*SEPTRAN SYP 1*50M*	*SH386241*	*6/26*	*30042020*	*23.52*	*20.08*	*15.00*	*12.00*	*40.15*
2	ZOVIRAX SYP 1*100	NA157	11/26	3004909	151.20	128.35	15.00	12.00	256.70
1	NEORAL 100 1*1	ADP61534	7/26	49021100	4230.00	4230.00	0.00	5.00	4230.00
1:0	PAN 20 TAB 1*15S	[illegible]	[illegible]	[illegible]	[illegible]	107.10	15.00	12.00	107.10
1	MORPEN B P 1*1	BP15KB04		3016000	1570.00	1177.50	25.00	12.00	1177.50
2:0	AMLONG 2.5M 1*15	AMAS0243	4/27	3016000	30.07	26.10	15.00	12.00	52.19

ALL ITEM AFTER 15 DAYS NOT RETURN .

ITMES 7	SUB TOTAL	DISCOUNT	TOTAL	SGST	CGST	TOTAL AMOUNT:	9055.00
GST 5.00%	4230.00	0.00	4028.58	100.71	100.71	SGST PAYABLE:	
GST 12.00%	16610.64	11786.12	4307.60	258.46	258.46	CGST PAYABLE:	
GST 18.00%	0.00	0.00	0.00	0.00	0.00	CR/DR NOTE :	0.00
GST 28.00%	0.00	0.00	0.00	0.00	0.00	PARTY TOTAL :	9055.00

Rs. Nine Thousand Fifty Five Only

Our Software MARG Ph: 01146558400,7042696260,7042698263

BALAJI MEDICOS

GST INVOICE

ORIGINAL

SHOP NO.-1,G.F.P.NO.130M/1 SUDERSHAN
CINEMA ROAD,GAUTAM NAGAR,NEW DELHI-49
Phone : 8252095380
D.L.No. : DL-MLN-144106/07
GSTIN : 07AAXFB7662A1ZB

Invoice No. : A003822
Invoice Date : 21-06-2025
Patient Name : CHILD HEPLING HAND
Patient Address : BHAVYA
Dr. Name : AIIMS
PRINTED BY. : 106821226

QUANTITY	ITEM DESCRIPTION	Batch	EXP	HSN	M.R.P.	NET RATE	DIS%	GST	NET AMOUNT
5:0	BDPOSA TAB 1*1	PLZ19ACO	2/26	49018901	7252.00	1595.44	78.00	12.00	7977.20
3:0	AMLIP 2.5MG 1*10	C130956	6/26	30049074	20.04	17.00	15.00	12.00	51.00
3	SEPTRAN SYP 1*50M	SH386241	6/26	30042020	23.52	19.97	15.00	12.00	59.92
9:0	ACIVIR DT 2 1*10	5SN0048	12/27	3016000	85.23	72.45	15.00	12.00	652.01

ALL ITEM AFTER 15 DAYS NOT RETURN ..

ITMES 4	SUB TOTAL	DISCOUNT	TOTAL	SGST	CGST	TOTAL AMOUNT: 8740.00
GST 5.00%	0.00	0.00	0.00	0.00	0.00	SGST PAYABLE:
GST 12.00%	37157.57	28417.44	7800.00	468.22	468.22	CGST PAYABLE:
GST 18.00%	0.00	0.00	0.00	0.00	0.00	CR/DR NOTE : 0.00
GST 28.00%	0.00	0.00	0.00	0.00	0.00	PARTY TOTAL : 8740.00

Rs. Eight Thousand Seven Hundred Forty Only

All disputes subject to Jurisdication only

BALAJI MEDICOS DELHI

For BALAJI MEDICOS

13/06/25
Day 1 of ATT

C/o Rt swelling over (Rt) knee
Reduced appetite (+).
No swelling/redness/reduced ROM.

O/E → No swelling/tenderness/redness/reduced ROM.

No other complaints.

- No c/o swelling/joint pain/rash/~~reduced appetite~~ nausea.
- Oral cavity — Normal
- NAPL — Normal
- Skin — No lesion.

Samples taken → CBC, LFT, RFT, CMV PCR, Cyclosporine level

Dr Lukeamy/CR

- Child well today.
- Had knee pain x 2d (5d ago). | given Napro
  ↳ now well

LFT | RFT - wc 38 | 31 PT.
0.7
9.7 | 2.66 | 113
CSA - 67.4