

अखिल भारतीय आयुर्विज्ञान संस्थान
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
अंसारी नगर, नई दिल्ली-११००२६
ANSARI NAGAR, NEW DELHI-110029

TRANSFUSION CHART

नाम : आयु लिंग M यू.एच.आई.डी.सं.
NAME : HIBZAIN AGE : 57 SEX : ♂ UHID No. : 106863743
WARD : _____ BED NO. : _____ DIAGNOSIS : _____
PATIENT'S BLOOD GROUP : B pos UNIT CHIEF : _____

Date	Starting time	Bag No.	C O M P O N E N T S							Bag Group	Rh	Checked by	Started by	Given by	Stop time	REACTION
			WB	RBC	PLT	FFP	PLSM	CRYO								
<u>16/12/23</u>	<u>4.5 pm</u>	<u>B 36165</u>			<u>✓</u>				<u>B pos</u>		<u>Dr. Akh</u>	<u>No</u>	<u>230 ml</u>			

<https://www.childhelpinghand.org/>

W.B. = WHOLE BLOOD PLAM = PLASMA
R.B.C. = RED BLOOD CELL CRYO = CRYOPRECIPRATE
P.L.T. = PLATELET QTY. = QUANTITY
FFP = FRESH FROZEN PLASMA

DATE

DETAILS OF BLOOD REACTION, IF ANY	
ACTION TAKEN	
CAUSE OF BLOOD REACTION	
OUTCOME	

आपातकालीन विभाग



(DEPT. OF EMERGENCY MEDICINE)

UHID No:106863743

एम.सी.ए. नं. (Emergency No): 2023/030/0098968

दिनांक DATE: 16/10/2023

समय TIME: 11:05:59 AM

NON-MLC

93

पता नाम: MASTER. HIBZAIN ..

आयु AGE : 5 years 3 months

लिंग /SEX : M

S/O : MOHD FAISAL

पता ADDRESS: मकान संख्या H.NO: SARAY MIYAN
 शहर/प्रखंड CITY/BLOCK: ALIGARH
 राज्य STATE: UTTAR PRADESH
 मोबाइल MOBILE NO: 9259015250

गली / मुहल्ला STREET/MOH: DELHI GATE
 पिन PIN:
 दूरभाष सं. PHONE NO:
 स्थान Location: Paediatrics Emergency
 Criticality: Red / Yellow / Green

द्वारा BROUGHT BY: Relative : FATHER

Triage: Responsive/ Unresponsive HR /min BP mmHg RR /min SpO2 %

Shifted to Paeds/ Main/ New Emergency

M Arac + BMP

flu/clo JMML (↓ Med onco). (delayed return)

Presenting Complaints

14/10/23 6.8 → 5000

sent from OPD for RDPO

No h/o bleeding

Petechie ⊕

Primary Assessment (ABCDE) : Assessment Pentagon

<p>Airway</p> <p>Open & stable: <u>Yes</u>/No If No.....</p> <p>Breathing: RR <u>24</u>/min Efforts: <u>Normal</u>/Poor/increased</p> <p>Auscultation: Air entry: <u>Normal</u>/poor/Differential</p> <p>Added sounds: <u>None</u>/Stridor/Wheeze/Crackles</p> <p>SpO2 on Room air.....<u>98</u>%</p>	<p>https://www.childhelpinghand.org/</p> <p>HR <u>106</u>/min CFT: <u>3</u> secs. BP <u>98/56</u> mmHg</p> <p>Peripheral pulse: Poor/<u>Good</u> Central pulse: Poor/<u>Good</u></p> <p>Skin temp: <u>Warm</u>/cool</p> <p>Others</p>	<p>Disability</p> <p>GCS <u>15/15</u></p> <p>Pupil size...../min <u>6/2 RT</u></p> <p>Pupillary Reactions.....</p> <p>Motor activity: <u>Normal</u> & (Symmetrical/Asymmetrical/ Posturing/Flacidity/Seizure</p> <p>Blood Sugar.....mg/dl</p> <p>Exposure: Temp..... Colour: <u>Normal</u>/pallor/cyanosis /mottled Any other skin lesions.....</p>
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Diagnosis

Plan

Imp: JMML & Thrombocytopenia

✓ Cannula

✓ ~~ATC~~

✓ Arany 40RDP

USIB SPAIN

16/10/23

Case of SMM

sent from OPD for Platelet transfusion

no of fever / cough / SOB / Bleeding

PE - vitally stable

Plan

6 O RDP transfusion

<https://www.childhelpinghand.org/>

- make SIB (IRIN aphanesis lab)

- blood donaⁿ

~~By~~
SPAIN

MONITORING AND INVESTIGATIONS CHART

NAME OF THE PATIENT: *Nilsan*

AGE/SEX:

UHID:

VITALS (DATE/TIME)	<i>16/10</i>						
HR	<i>3/4</i>						
RR	<i>94</i>						
SPO2	<i>26</i>						
BP	<i>98</i>						
PERIPHERIES	<i>-</i>						
PP/CP	<i>(w)</i>						
CRT	<i>+ 1/2</i>						
GCS AND PUPILS	<i>3</i>						
IONOTROPES	<i>1.5/1.5</i>						
U.O (ml/kg/hr)	<i>-</i>						
INVESTIGATIONS(D/T)							
HB							
PLATELETS							
T.L.C(N/L/E/M/B)							
PH							
PCO2							
PO2							
HCO3							
LACTATE							
NA/K/Ca/PO4							
UREA/R							
AST/ALT							
RBS							
INTERVENTIONS IF ANY							

<https://www.childhelpinghand.org/>



डा. बी. अ
Dr. B.R.A
अ.भा

शरीरमाद्यं जलु धर्मशासनम्

अस्पताल के

DR. B.R.A. IRCH, AIIMS, NEW DELHI

IRCH No. 300472

Reg. Date-20/07/2023

Clinic Paediatric Medical Oncology Clinic

Clinic No. 2023//6839

Deptt. MEDICAL ONCOLOGY

General



UHID-106863743

एकक/Unit

SB/DP
mo

विभाग/Dept.

नाम/Name

नाम

Name HIBZAIN ..

S/O- MOHD FAISAL

Phone No. 9259015250

Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH,

Sex/Age M/5Y

Room 5 (Shift Morning)

स्पताल
ospital
L

OPR-6

ISES

Jo.

म तिथि/Date of Birth

निदान/Diagnosis:

Jmml.

दिनांक/Date

11/9/23

उपचार/Treatment

P/Li. ara. c + 6mp delayed recovery.

Adv.:

10 PRBC.

10 SDP

Ref. ME-12100 Pch BR

→ ~~PRBC~~

flw on. 14/9/23 T. CRF

Phorath.

→ 40 RDP Transfusion

+ 10 PRBC

↳ pediatric casualty

Sdpd malis

14/9/2023

U6 S, platelets 12,000 → peds casualty

40 RDP

i 10ml/kg PRBC

→ pediatric casualty

flw 20/09/23
CUBA WATERS

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

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

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

16/10/23

Adv

- 10 PRBC - 150 ml to be transfused - ^{New for Day care}
- 1st floor lab is in iv. midway

1st floor
Apheresis
lab.

1/2 bag

SOP transfusion

- C. Apheresis
lab
appointment
please)

• refer to emergency

→ 40 RDP transfusion
urgently.

• cap me 12 (OD, O)

- HLA matching class 1/II ↙ of sister patient
- FU 19/10/23 ZCBYUPHRRP
(pt.'s request)

↓
Joe

Called twice
no response

Pls call -



9958703810

adv

Pls send 16/10/2023
Blood requisition
form.
ph: 3726

<https://www.childhelpinghand.org/>



डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

अ.भा.आ. Ticket

बहिरंग
अस्पताल के अन्दर

OPR-6

Thrombocytopenia

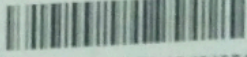
एकक/Unit Dr. S.B. Dw. DP
विभाग/Dept. MD

DR. B.R.A. IRCHA, IAHMS, NEW DELHI

IRCH No. 300472
Clinic Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General

Reg. Date-20/07/2023

Clinic No. 2023/6839



UHID-106863743

Date of Birth

नाम/Name

नाम

Name HIBZAIN ..

S/O- MOHD FAISAL

Phone No. 9259015250

Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH, INDIA

Sex/Age M/5Y

Room 5 (Shift Morning)

4 FEB

IPRBC

निदान/Diagnosis

JMML

दिनांक/Date	उपचार/Treatment
<u>20/9/23</u>	<u>C2</u> 10PRBC + 1/2 SDP on 21/9/23 (Day Care) (or) 20RBC 25/9/23
(निदान 15)	- Inj. Ara-c song SC D ₁ to D ₅
(गैर-सह्य अणु-कारक)	- Tab. <u>Emul</u> <u>4mg</u> <u>1/2 hr</u> <u>post Ara-c</u>
wt = 16.9kg	- Syb per D ₆ (<u>250mg/5ml</u>) <u>4ml</u> <u>son</u> <u>जाब गुवाट</u>
<u>21/9/23</u>	- Hb <u>2</u> <u>UBC</u> on <u>27/9/23</u>
<u>21/9/23</u> Kendly <u>line</u> <u>1/2 SDP</u>	↓ <u>WITH HOLD</u>

1st floor Alkhanak 6b
2nd floor

1 Sample
2 Sample

HLA lab
near director
office

HLA lab
Old OT block 3rd floor

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

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27/09/23

Plan: w/te next chemo
(Thursday per is party)



Platlet are 8000



- Presumably please length
at least 2 @ FDP
(probably 4 @ FDP.)

<https://www.childhelpinghand.org/>

Please
average
2 [1/2 units of
SDP]



2nd floor day care

- R/w: 4/10/23

30/09/23 → UBC

[Handwritten signature]

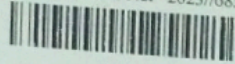
स्थान रोटरी कैंसर अस्पताल
 Rotary Cancer Hospital
 /A.I.I.M.S. HOSPITAL

OPR-6

Out Patient Department
 KING PROHIBITED IN HOSPITAL PREMISES

DR. B.R.A. IRCILAHIMS, NEW DELHI
 IRCH No. 300472
 Clinic Paediatric Medical Oncology Clinic
 Deptt. MEDICAL ONCOLOGY
 General

Reg. Date-20/07/2023
 Clinic No. 2023/6839



UHID-106863743

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. _____

नाम
 Name HIBZAIN ..
 S/O- MOHD FAISAL
 Phone No. 9259015250
 Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH,
 INDIA

Sex/Age M/5Y
 Room 5 (Shift Morning)

पुत्री of	लिंग Sex	आयु Age	जन्म तिथि/Date of Birth
--------------	-------------	------------	-------------------------

10/28/2023

निदान/Diagnosis

JMMML

दिनांक/Date

उपचार/Treatment

16/8/23

Quantum fever
 not responded to oral antibiotics.
 CBC n/A.
 fever - 104° F

Adv

<https://www.childhelpinghand.org/>
 CBC LFT RFT
 W/H 6m/d

~~D/E~~
~~16/8/23~~
 Dharamshala
 10/1
~~D3 -E~~
~~18/8~~
 DH
 19/8/23

2nd magnex 1.5 gm IV BD
 2nd Amikacin 225 mg IV OD
 R/v on 18/8 c labr

(15)
 x 5 d
 Syp 1cm 125mg
 SML -
 SML 801

Adv

वरिष्ठ रेजीडेंट/SENIOR RESIDENT
 चिकित्सा अर्बुदविज्ञान/MEDICAL ONCOLOGY
 डॉ. बी.आर.अ. रो. कैं. अ/DR. B.R.A. IRCILAHIMS

अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE
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21/8/2023

wt - 15 kg

Hb - 4.4

JMML ↓ Evaluation

Refer to Paeds Casualty

Adv Stop IV antibiotics

Paeds casualty stat

Transfuse 150 ml PRBC IV over 4hr
+ 150ml PRBC IV over 4hr
by lasix 15 mg IV midway each transfuse + monitoring

22/8/23 Day care

150 ml PRBC transfuse over 4hr
15 mg IV midway
by lasix

<https://www.childhelpinghand.org/>

> Stop GMP, / AsaC

> Syrup septran ($\frac{40 \text{mg trimethoprim}}{5 \text{ml}}$) 5ml PO Mon/Tues

> Syrup Acivir ($\frac{200 \text{mg}}{5 \text{ml}}$) 2.5ml PO BD

> Syrup Augmentin ($\frac{200 \text{mg Amoxicillin}}{5 \text{ml}}$) 5ml PO tds x 3 days

> flu on 24/8/2023
2 CBC / RFT / UFT

~~flu~~

304
PRBC
22/8/23
L

HT = 105cm
WT = 16kg



Client

Gurugram

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Processed By

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Name	: Mst. HIBZAIN IRCH-300472	Billing Date	: 21/07/2023 19:59:14
Age	: 5 Yrs	Sample Collected on	: 21/07/2023 13:30:37
Sex	: Male	Sample Received on	: 21/07/2023 20:13:48
P. ID No.	: P1000100014509	Report Released on	: 01/08/2023 13:03:11
Accession No	: 10002306606	Barcode No.	: 997210176
Referring Doctor	: DR SAMEER BAKSHI	Ref no.	:
Referred By	:		

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
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MOLECULAR DIAGNOSTICS

Philadelphia Chromosome (BCR/abl Transcript Quantification)

Sample: Bone Marrow EDTA

BCR-ABL Gene rearrangement, RT PCR Quantitative (Real Time PCR)

P210 (b3a2, b2a2) major transcript	Not detected
P190 (e1a2) minor transcript	Not detected
P230 (c3a2) micro transcript	Not detected
Observed copies of ABL1	348199
Observed copies of BCR-ABL1	0
BCR-ABL1/ABL1 ratio [%]	0
Conversion Factor for IS	0.703
BCR-ABL1 IS [%]	0

<https://www.childhelpinghand.org/>

Interpretation

SIGNIFICANCE OF INTERNATIONAL SCALE	
IS	REMARKS
>0.1%	No Major Molecular Response
<0.1%	Major Molecular Response
<0.01%	Deep Molecular Response

Note

- Sensitivity of the assay is 0.01% when ABL copy number detected is 10,000.
- Limit of detection is 1.76 copies of BCR-ABL fusion gene transcripts per PCR
- This test detects major gene rearrangements (e13a2 & e14a2), minor gene arrangement (e1a2) and micro gene rearrangement (e19a2)



Client
Gurugram
Pathkind Diagnostics Pvt. Ltd.
Plot No. 55-56, Udyog Vihar Ph-IV, Gurugram - 122015

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Referred By :	

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
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5. Test conducted on Whole blood / Bone Marrow
6. This test gives percentage of BCR-ABL fusion gene detected with respect to the ABL transcript present as well as the International scale value.

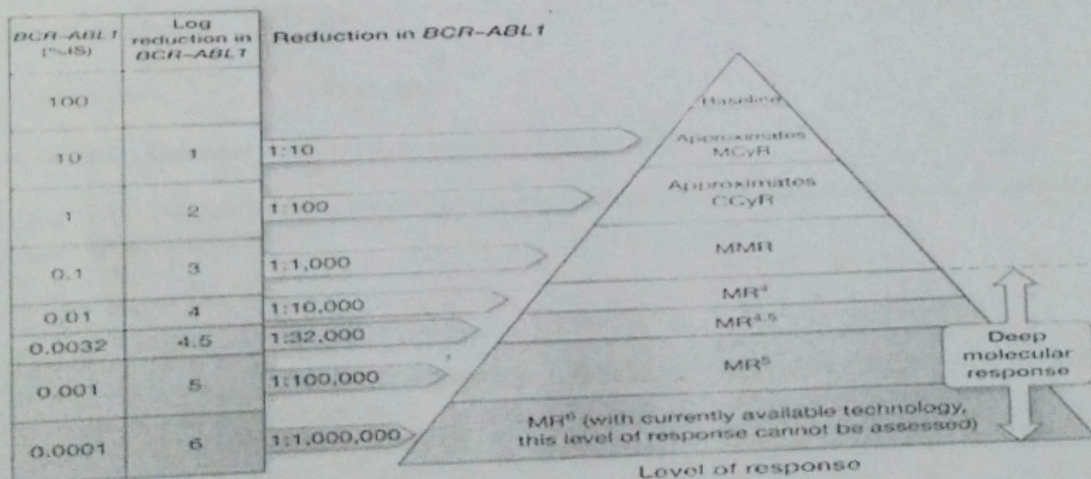
Comments

Chronic Myeloid Leukemia (CML) is the commonest myeloproliferative neoplasm and possibly the commonest adult leukemia in India. This clonal stem cell disorder is characterized by a proliferation of myeloid cells at all stages of differentiation and the t (9:22) (q34;q11) leading to formation of BCR-ABL fusion gene. Cytogenetic and molecular studies are vital for the diagnosis of CML by using detection procedures for Philadelphia chromosome. The abnormality is present in over 95% patients of CML while remainder 5% have complex or variant translocations involving additional chromosomes. Major, minor and micro gene rearrangements are detected in CML while minor and micro gene arrangement may be detected in ALL.

<https://www.childhelpinghand.org/>

Uses

- To monitor therapy in CML patients. A three log reduction in BCR-ABL shows MMR, a 5 log reduction shows DMR.
- Monitoring of Minimal Residual Disease (MRD).
- As a prognostic marker in ALL patients. Presence of BCR-ABL gene rearrangement is associated with poor prognosis.



Client
Gurugram
 Pathkind Diagnostics Pvt. Ltd.
 Plot No. 55-56, Udhog Vihar Ph-IV, Gurugram - 122015

Processed By
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Accession No : 10002306606	Barcode No. : 997210176, 997210177
Referring Doctor : DR SAMEER BAKSHI	Ref no. :
Referred By :	

Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
-----------	--------	--------------------------	------

CYTOGENETICS

Hemat Disorder Karyotyping

Case Information :

Sample Type : Bone Marrow

Case ID : CG23-HM-220

Banding Method : GTG Banding

Banding Resolution : 450-550

<https://www.childhelpinghand.org/>

Referral Reason : ? BCR/ABL

No. of Cells Scored : 10

No. of Cells Karyotyped : 05

Result Karyotype : 45,XY,-8[5]

Interpretation : Abnormal male karyotype consistent with loss of chromosome 8.

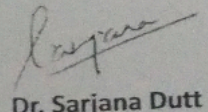
Comment : Within the limits of standard cytogenetic methodologies for unstimulated cell culture, the karyotype shows loss of chromosome 8 in the all metaphase studied..

Recommendations : Nil

Limitations:

- * The clinical interpretation of any test result should be evaluated within the context of the patient's medical history and other diagnostic laboratory test results.
- * Low grade mosaicism cannot be ruled out.

** End of Report**



Dr. Sarjana Dutt

PhD



Case: Mst. Hibzain

Patient ID: CG23-HM-220
Patient Name: Mst. Hibzain
Clinical Indication: ? BCR/ABL
Cell Results: 45,XY,-8[5]

Specimen: Bone Marrow Aspirate
Gender: Male

KARYOTYPE:



<https://www.childhelpinghand.org/>

INTERPRETATION: Male karyotype show loss of chromosome 8 in all the metaphase studied.

NOTE: Chromosomal rearrangement <5Mb cannot be detected at this resolution. Anomalies other than cytogenetics cannot be ruled out

DR. B.R.A. IRCHA, AIIMS, NEW DELHI
 IRCH No. 300472 Reg. Date-20/07/202
 Clinic Paediatric Medical Oncology Clinic Clinic No. 2023/683
 Deptt. MEDICAL ONCOLOGY
 General



UHID-106863743

न रोटरी कैंसर अस्पताल
 Rotary Cancer Hospital
 J.I.M.S. HOSPITAL

OPR-6

Patient Department
 ROHIBITED IN HOSPITAL PREMISES

04+2

106863743

नाम Name HIBZAIN
 ए S/O- MOHD FAISAL Sex/Age M/5
 फ़ि Phone No. 9259015250 Room 5 (Shift Morning)
 - Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH, INDIA

रोगी पंजीकृत सं./O.P.D. Regn. No.

लिंग Sex	वय Age	जन्म तिथि/Date of Birth
M	5y	

Hibzain

निदान/Diagnosis Jmmz - P/C1 Arac/6mp

दिनांक/Date

उपचार/Treatment

4/10/23

peritant anemia + TCP.

Advice

- W/H cycle 2
- Iron + vit B12 + folic level + PS for morphology
- afetrile TCP > 10000
- Hb (6.8) → Day Care 10 PRBC 20 RBP.

Temp PRBC + RBP
 5/10/23
 BIC 1
 OK

F/U on 11/10/23 → CBC

date 12

9/10/23

To Blood Bank kindly accept upto 50

[Signature]

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21/7/23 → Adv:

→ Syp. Augmentin (200mg Amox/5ml)
5ml - 5ml - 5ml
X 10 days

→ Syp. PCM DS (250mg/5ml)
4ml SOS.

→ F/U - on 27/7/23

dr

7/8/23
Please issue
file
Board Room
Shunday

27/7/23

<https://www.childhelpinghand.org/>

BMARepart

JT. Folvite 500mg (M) x 1 week
Cap. ME-12 100

Fv with CBC on
9/8

~~3/8/23~~ ~~16/8/23~~

Summer holiday

3/8/23 → c/o - fever ~ high grade
- cough - skin rash
Severe pallor (+) (+)

6/8 (M)

Blood Culture

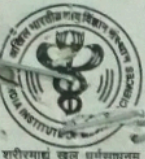
Hb = 5.6
outside

DS 7/8/23 (M)

4 days back

Adv: → ① Ref to Ped Casualty
- CBC f/b PRBC 10ml/kg x 3 tomorrow

② F/U on 7/8/23
Inj. Magnex 1.5g i.v. q12h x 5d (R.No.15)



डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

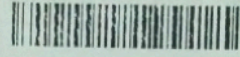
अ.भा.आ
बहिरं
अस्पताल के अन्दर

SDD + BT

OPR-6

एकक/Unit SB/DP
विभाग/Dept. Med Onc
नाम/Name

DR. B.R.A. IRCHA, AIIMS, NEW DELHI
IRCH No. 300472 Reg. Date-20/07/2023
Clinic Paediatric Medical Oncology Clinic Clinic No. 2023/6839
Deptt. MEDICAL ONCOLOGY General
नाम
Name HIBZAIN.. UHID-106863743
S/O- MOHD FAISAL
Sex/Age M/5Y
Phone No. 9259015250 / 9717021914 Room 5 (Shift Morning)
Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH,



थि/Date of Birth

cyto
07/8/2023
P-M-413

निदान/Diagnosis:

JMML

दिनांक/Date

उपचार/Treatment

07/8/23

Adv: → Next generation sequencing (JMML-Study)

WT = 15.9 kg

→ Peripheral Blood-Karyotyping (AIIMS) ✓ (4th Floor) (412)

8/8/23

→ Syp. Augmentin (200mg Amox/5ml) 6ml - 6ml - 6ml X 7 days

Please visit SD

Am issued
8/8/23
8/8/23

→ Tab Levoflox (500mg tab) 1/2 tab OD X 7 days

PRBC
8/8/23
9/8/23

→ PRBC 150ml X 2 (Day Care)

→ SDP 1/2 O + 1/2 O (Day Care) 2nd floor

1st floor
Apharmacy

Hb = 36
Rt count = 8000

Refer to Peds casualty
Am

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

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

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

12/8/23
Kindly issue 1/2 SDP

CHART
of 15

17/8 - Inj. Ara-c 50mg s.c. DI-D

(7/8) (8/8) (9/8)
(10/8) (11/8)

(R.No. 15)

- ~~Syp Emeset (2mg/5)~~
Tab Emeset 4mg 1/2 hr pre Ara-c

- Document fever
(Digital Thermometer)

- F/U - on 14/08/23 = CBC/LFT/KFT

- Syp PCT (250mg/5ml) 4ml SOS
<https://www.childhelpinghand.org/> sh
16/8/23 kindly issue 1/2 SDP

9/8/23
Kindly issue SDP
1/2 SDP
1 issued
17/8/23

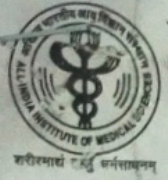
14/8/23 → Syp. Maxtra 5ml TDS x 5 days
→ Steam inhalation TDS
→ Document fever.

HE = 105cm
WT = 15.6kg
11/8/23 → NG S Study - JMML (Wednesday)
Dr. Aditya Sir

11/8/23 → Tab 6MP (50mg) 1 tab OD x 7 days - STOP
→ Tab Emeset 4mg 1/2 hr pre
→ SDP 1/2 @ + 1/2 @ (Day care)
→ F/U - on 21/8/23 = CBC/LFT/KFT

10.05

SPP



डा. बी. आर. अम्बेडकर संगठन
Dr. B.R. Ambedkar

अ.भा.आ.सं.
बहिरंग रोड

अस्पताल के अन्दर घुमपान

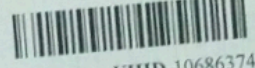
DR. B.R.A. IRCH, AIIMS, NEW DELHI

Reg. Date-20/07/2023

Clinic No. 2023/6839

OPR-6

IRCH No. 300472
Clinic Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General



UHID-106863743

एकक/Unit 100 SB / 100 DP
विभाग/Dept. MD

नाम/Name

नाम
Name HIBZAIN ..
S/O- MOHD FAISAL
Phone No. 9259015250
Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH,
INDIA

Sex/Age M/5Y

Room 5 (Shift Morning)

of Birth

निदान/Diagnosis

= JMML currently on bmt/ARA c protocol.

दिनांक/Date

24/8/23

उपचार/Treatment
= FN, 10-15 TCP + 4

Plan:

- 1) ROP - 30 in pediatric emergency -
flb SDP 10 - make 1/2 SDP (2 bags) - in bank lab
- in SDP in DIC (25) @
<https://www.childhelpinghand.org/>
- 2) Symp. Augmentin 200mg 1sml = 5ml pots x 2 days
- 3) continue Symp Acini / Septran
- 4) Flu on 28/8/23 [CBC / RFT / LFT

PH: 9000

ANC: 900

Sam

25/8/23

kindly issue
SDP

As

1/2 SDP issue on
25/8/23
lab

26/8/23

kindly issue
SDP

As

1/2 SDP issue
on 26/8/23
lab

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

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

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

28/8/23.

MMT CH1 GMP/ARA - C
CBC — NOT DONE

Adv:

Last pill — 9K

Received 10
Sof.

WT = 16 kg

• HLA MATCHING c sibling / Mother / Father

• CBC/ur/uric — visit on 31/8/23.

• collect NGS when available.

• Septran / Acivic to com.

Adv

31/8/23

Adv:

- C/t Septran / Acivic.

- Cap MELO 1 cap OD

- HLA class I & class II Matching

- F/U 6/9/23 c CBC + PS

sibling
Parents
Patient

Sh. Shrivastava

31/8/23

Please accommodate
in dharamshala

→ Severe anemia is thrombocytopenia

Please transfuse
PRBC 5ml/kg x 2 aliquots
over 4 hours with hair
midway

06/09/23

Opd: 11/09/23
(CBC)

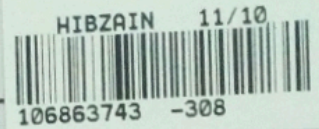
RSP 40

Sk Med onw rule f/w.

for f/w

वरिष्ठ रेजिडेंट/SENIOR RESIDENT
चिकित्सा अर्बुदविज्ञान/MEDICAL ONCOLOGY
डॉ. बी.आर.अ. से.के.अ./Dr. B.R.A., I.R.C.F.
अ.भा.आ.सं., नई दिल्ली/AIIMS, New Delhi-29

10:05



रोटरी कैंसर
Rotary Cancer
I.M.S. HOSPITAL

DR. B.R.A. IRCH, AIIMS, NEW DELHI
IRCH No. 300472
Clinic Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General

Reg. Date-20/07/2023
Clinic No. 2023/6839

OPR-6



Outpatient Department
HIBITED IN HOSPITAL PREMISES

नाम
Name HIBZAIN ..
S/O- MOHD FAISAL
Phone No. 9259015250
Address SARAY MIYAN, DELHI GATE, ALIGARH, UTTAR PRADESH,
INDIA

UHID-106863743

0472

Sex/Age M/5Y

Room 5 (Shift Morning) पंजीकृत सं/ O.P.D. Regn. No.

लिंग Sex आयु Age जन्म तिथि/Date of Birth

Hibzain

M 5y

निदान/Diagnosis

JMML - P/CD~~10~~8 Cytopenia.

दिनांक/Date

उपचार/Treatment

Splenomegaly (+)

11/10/23

Adv:

Wt = 16 kg

- Inj. Magnex 1.5g i.v. q/12h. } x5d.
- Inj. Amikacin 200mg i.v. q/24h } x5d.
- Document fever: + + +
- Peripheral Smear.

<https://www.childhelpinghand.org/>

R.No. 15

- F/U on 16/10/23. CBC
- SDP 1/2 ⊕ + 1/2 ⊕ (Day Care)
- PRBC 10ml/kg (Day Care)

New Pvt Ward Ground floor DOTS Centre

Sy. Chandra

D1 11/10/23 (M) (E)

SBP+PRBC 12/10/23

D2 12/10/23 (M) (E)

SBP not made come late Redate 13/10/23

D4 14/10/23 (M) (E)

D5 15/10 (M) (E)

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

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



**DR. B.R.A INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi 110029**

Printed on 13 Oct 2023 18:00:52 PM

Dept No: 20230300096491

Receipt No: ACCOUNTS-9/28527/202324 [Original]IRCH Receipts

IRCH No : 300472 UHID : 106863743

Received From: MASTER. HIBZAIN .. Age : 5 Yrs 2 Mons 28 Days

DATED: 13/10/2023

Payment By: Cash

Billing Type : General

On ACCOUNT OF

SI No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE - IRCH DAY CARE	1	60.00	60.00

Payment Mode : Cash

RS.: 60.0

Rupees Sixty Only

MR.PINTOO BARUA

Printed on 13 Oct 2023 18:00:52 PM

<https://www.childhelpinghand.org/>



भारत सरकार

Government of India



मो फ़ैसल

Mohd Faisal

जन्म तिथि / DOB 01/06/1986

पुरुष / Male



3136 9081 6004

भाधार - आम आदमी का अधिकार

<https://www.childhelpinghand.org/>



भारत सरकार Ministry of India

मो फ़ैसल को सहायता हेतु
निम्न संख्या पर कॉल करें
कॉल के लिए कोई भी शुल्क
नहीं है। कॉल करने पर
सहायता मिलेगी।

मो फ़ैसल को सहायता हेतु
निम्न संख्या पर कॉल करें
कॉल करने पर कोई भी शुल्क
नहीं है। कॉल करने पर
सहायता मिलेगी।

3136 9081 6004



1801 200 1801

help@india.gov.in

www.india.gov.in

स 1
No 1



उत्तर प्रदेश सरकार
GOVERNMENT OF UTTAR PRADESH
चिकित्सा एवं स्वास्थ्य विभाग
DEPARTMENT OF MEDICAL AND HEALTH
SUB CENTRE MAHARAJGANJ

FORM 5



जन्म प्रमाण-पत्र
BIRTH CERTIFICATE

(जन्म मृत्यु रजिस्ट्रीकरण अधिनियम, 1969 की धारा 12/17 तथा उत्तर प्रदेश जन्म मृत्यु रजिस्ट्रीकरण नियम, 2002 के नियम 8/13 के अंतर्गत जारी किया गया।)
(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE UTTAR PRADESH REGISTRATION OF BIRTHS & DEATHS RULES 2002)

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR SUB CENTRE MAHARAJGANJ OF TAHSIL/BLOCK MAHARAJGANJ OF DISTRICT MAHARAJGANJ OF STATE/UNION TERRITORY UTTAR PRADESH, INDIA.

नाम / NAME: MOHD HIBZAIN

लिंग / SEX: पुरुष / MALE

जन्म तिथि / DATE OF BIRTH:

03-06-2018

THIRD-JUNE-TWO THOUSAND EIGHTEEN

जन्म स्थान / PLACE OF BIRTH:

AT HOME

माता का नाम / NAME OF MOTHER:

FARHA

पिता का नाम / NAME OF FATHER:

MOHD FAISAL

आधार नंबर / MOTHER'S AADHAAR NO:

XXXXXXXX9297

आधार नंबर / FATHER'S AADHAAR NO:

XXXXXXXX6004

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

111, SARAI MIYAN BAKRI KA KAMELA, NEAR MANSOOR HADDI WALE DELHI GATE, KOIL, ALIGARH, UTTAR PRADESH - 202001

माता-पिता के स्थायी पता / PERMANENT ADDRESS OF PARENTS:

111, SARAI MIYAN BAKRI KA KAMELA, NEAR MANSOOR HADDI WALE, DELHI GATE, KOIL, ALIGARH, UTTAR PRADESH - 202001

पंजीकरण संख्या / REGISTRATION NUMBER:

B-2023: 9-90593-002593

पंजीकरण तारीख / DATE OF REGISTRATION:

15-08-2023

टिप्पणी / REMARKS (IF ANY):

जारी करने की तिथि / DATE OF ISSUE:

15-08-2023

जारी करने वाला प्राधिकारी / ISSUING AUTHORITY :

रजिस्ट्रार (जन्म एवं मृत्यु)
REGISTRAR (BIRTH & DEATH)

SUB CENTRE MAHARAJGANJ

UPDATED ON :

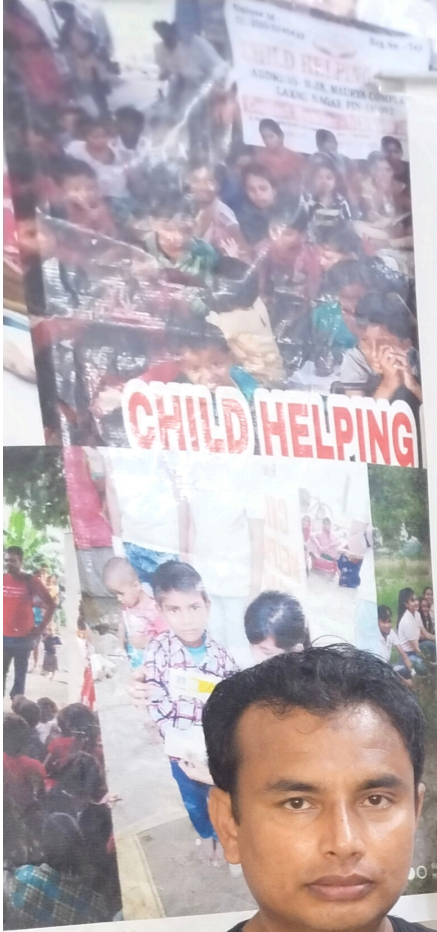
15-08-2023 18:35:54



"THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FACSIMILE SIGNATURE OF THE ISSUING AUTHORITY"
" THE GOVT. OF INDIA VIDE CIRCULAR NO. 1/12/2014-VS(CRS) DATED 27-JULY-2015 HAS APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES".

* प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH "





UNIQUE ID- DL/2019/0240433
REG NO - 543

**Child
Helping
Hand**



<https://www.childhelpinghand.org/>

...urya complex
...ar, Delhi - 110092
...ber- 011-4045280
...ldhelpinghand.or
...elpinghand.org
...elpinghand.or
...022



UNIQUE ID- DL/2019/0240433
REG NO - 543

Child Helping Hand

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B-2 ... aurya complex
... ar, Delhi - 11009
... mber- 011-40452
... childhelpinghand
... childhelpinghand.c
... w.childhelpinghand
... ear : 2022