





ओ भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department

अस्पताल में अन्दर धूम्रपान करना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

एन.ए.ए. का संकेत

एकक / Unit

विभाग / Dept.

नाम / Name

Dept: Paediatrics

DEPT. No: 20180030023426

Clinic Name:

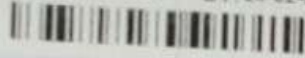
CL. No:

Room: 7

Name: JATIN

Male 12 Y

UHID 103957791 DT: 20-02-2019



OPR-6

रजिस्टर सं./O.P.D. Regn. No.

पता / Address

निदान / Diagnosis

दिनांक / Date

8

T. All / IM dnc.

उपचार / Treatment

no new complaints
o/e e.

- 1) Due for BM
- 2) on sept 20
- 3) BM perching

ASC @
LFT @
12/19

due for IM
HD MB

need BM
- after consultation
↓
to do administration
HD MB

throughout
eye

T GMP - 27.5mg
1 tab → 5ml to
give 2-8ml in
evening
by Methohexale
5.5g IV
infusion

ITM - 12mg

stop nephos
of sure Sunday
x 4 day

- start Lemovene
- cause after admission
10.5mg x 3 doses.
- methohexale
monthly hard
give

CLEAN AND GREEN AIIMS / एका का यही संकल्प, स्वच्छता से काका कल्प

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

O.R.B.O., AIIMS, 26588380, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



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

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

शरीरवाचक चतुः कर्मसामग्यम्

OPR-6

एक/Unit _____

विभाग/Dept. _____

नाम/Name _____

Dept: Paediatrics

DEPT. No: 20180030023426

Clinic Name: _____

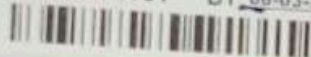
CL No: _____

Room: 7

Name: JATIN

Male 12 Y

UHID 103957791 DT_06-03-2019



पंजीकृत नं०/O.P.D. Regn. No. _____

आयु
Age

पता/Address

निदान/Diagnosis

दिनांक/Date

उपचार/Treatment

29

Deletions
 C₉/3/100
 BSA - 1.08 m²
 followed by

D₁ D₂ D₃
 - Continue 6-MP 50mg - $\frac{1}{2} \rightarrow \frac{1}{2} \rightarrow \frac{3}{4}$
 and repeat the cycle.
 - Stop Septin 1wk - before HDMT₂
 - CXR - PA views
 - High dose methotrexate - 5g/50m,
 540mg / 100 ml NS over 30 min
 followed by 4860 mg in 500 ml NS over 23 1/2 hrs
 F/b in Leucovorin - 15mg/m² (17mg) as per schedule.
 - CBC, LFT, LFT.
 - ITM - 12mg.
 Alkaline phosphatase with urine PH monitoring before starting HDMT₂
 Methotrexate monitoring chart for

CLEAN AND GREEN AIIMS / एन्ड का वही सकार्य, स्वच्छता से काया कल्प

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

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

Resistant response

2. Rebasculin pd

Next

child not willing to take after drinking 6 ml

TGMP may be given on $\frac{1}{2}$ D₁

Start 2mg
pb give probenecid
monitored
D₁ or D₂ for further admin
Next

25/2/19

Inj Leucovorin 17mg q 6th hly 15mg vials — (6)

Next

26/2/19

Inj Leucovorin 17mg 6th hly X 1 day

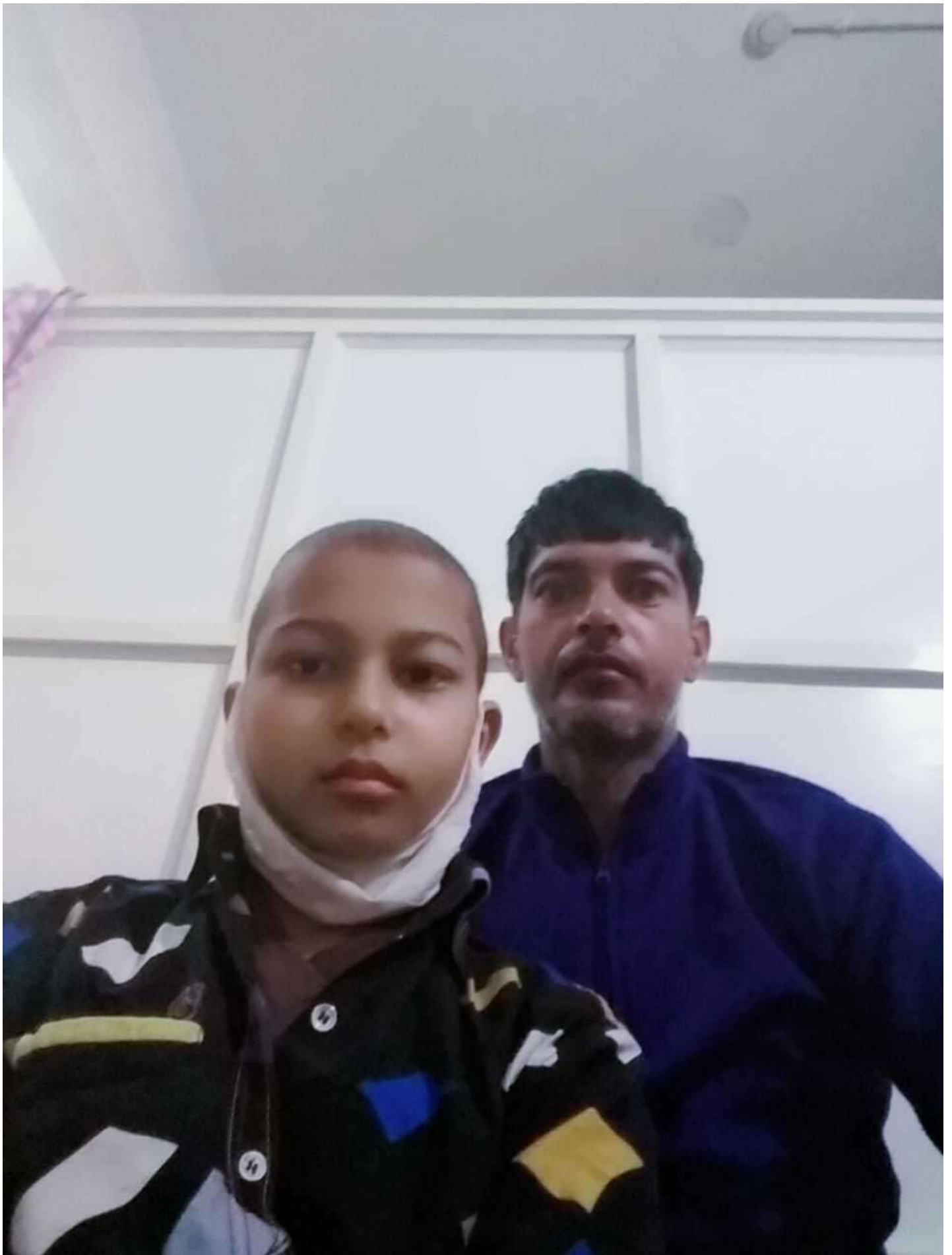
———— (6) vials

Next

27/2/19

Inj Leucovorin 17mg q 6th hly X 1 day

Next



Dept. Paediatrics
 JEPT No: 20180030023426
 Clinic Name:
 CL No:
 Room: 7
 Name: JATIN
 Age: 12 Y
 MID 103957791 DT: 09-03-2019

$10.6 \times 3940 = 180 \text{ K}$
 $\frac{1500}{17\%}$
 $\text{urea} - 15$
 $\text{creat} - 0.51$
 $\text{Na}^+ 139$
 $\text{K}^+ 4.22$
 $\text{Sb} - 0.61$

12
 @ due for next
 @ stop mtab
 @ CBC
 @ NFT / RFT

1. @ withhold leflunomide till next HDMTx.
2. Tab 6-MP, $\frac{1}{2}$ tab $\times 2$ day
 $\frac{376}{376}$ on D_2
 Rpt the pattern.
3. bij methotrexate 5g/5gms as per protocol (prescribed overlap)
4. ITM as per protocol
5. CXR to be repeated for 71

Chest Xray PA view (6/3/2019)

- Bil large fields (N)
- bones (N)
- Mediastinum (N)
- ~~Dr. The list~~
- 824 161 8283 Imp: (N) stable

19/4/19
 bij leucovorin 15mg IV stat - 2

Dept. Paediatrics
 JEPT No: 20180030023426
 Clinic Name:
 CL No:
 Room: 7
 Name: JATIN
 Age: 12 Y
 MID 103957791 DT: 09-03-2019

3940
 10.6 } 180 K.
 Eosinophil 17%
 - urea - 15
 creat 0.51
 Na+ 139
 K+ 4.22
 Shti - 0.61

12
 @ due for next
 @ stop mtab
 @ CBC
 @ NFT / RFT

1. @ withhold leflunomide till next HDMTx.
2. Tab G.M.P. 1/2 tab = 2 day 3/4 on D2
 Rpt the pattern.
3. bij methotrexate 5g/5gms as per protocol (prescribed overlap)
4. ITM as per protocol
5. CXR to be repeated for 71

⚡
 Chest Xray PA view (6/3/2019)

- Bil large fields (N)
- bones (N)
- Mediastinum (N)
- ~~Dr. At. the list~~
- 824 161 8283 Imp: (N) stable

19/4/19
 bij leucovorin 15mg IV stat - 2
 Mee



Sir Ganga Ram Hospital

RAJINDER NAGAR, NEW DELHI-110060

PHONE : 25750000 Fax : 25861002

GSTIN No.: 07AABTS4366E1ZH, HOSPITAL PAN No.: AABTS 4366E

SIR GANGA RAM HOSPITAL
CENTRAL INVESTIGATION CENTRE
BILL CUM RECEIPT

(To download your Lab. Reports online, please visit www.sgrh.com
and click on 'Patient Portal')

Reg. No.	:2490198	Bill No.	:2019-2020/Ca/0/005535
OPD No.	:OP08796726	Bill Date.	:19/04/2019 09:05AM
Name	:MASTER JATIN	Sex	:Male
Age	:12 Y	Internal Ref:	DR. ANIL SACHDEV
Address	:GARHI MUJAFFAR NGR. BUDHANA U.P	Hospital Ref:	
Phone	:9520511765	External Ref:	
Location	:CENTRAL INVESTIGATION CENTRE	GSTIN	: 07AABTS4366E1ZH
		SAC Code	: 999316

No.	Particulars	Unit	Price	Amount
1	SERUM METHOTREXATE LEVEL	1	1800.00	1800.00

Total : 1800.00
Amount Paid : 1800.00

(Received a sum of Rupees One Thousand Eight
Hundred only)

Payment Details

Sr No	Mode	Particulars	Amount
1	Cash	-	1800.00
Total			1800.00

Signature
(SHALINI AMARPURI)

For Cancellation / Refund of the Bill, any identity Proof in the form of
Photo ID, Aadhar Card, Pan Card, Driving License, Passport is mandatory

Dept. Paediatrics
 DEPT No: 20180030023426
 Clinic Name:
 CL No:
 Room: 7
 Name: JATIN
 Male 12 Y
 UHID 103957791 DT: 12-06-2019

Tell ALL ~~to~~
 to start DI

→ No fresh complaints

CBC
 Hb | TLC | ANC | PT
 12.8 | 2930 | 1000 | 6.2 | 0c
 FT → AST | ALT | ALP
 18 | 114 | 241
 FT: Ur/Gu
 16 | 0.58

CIE
 HR: 92 | -
 RR: 18 | -

Chest: Clear

ADV

→ 1 TM 12mg MTX D₁ 13/06/19

→ Inj VCR 1.8mg 1/8 push D₁

→ Inj DOXO 29.5mg ml/100ml NS over 2hr D₁

→ Inj dexamase 11,800 1/1m deep D_u

→ OPD on Monday
 CBC | UET | PFT

15/6/19
 Dexamase 11800
 IU 1m on 16/6/19

Lamab

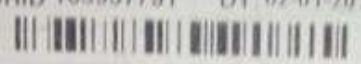
13/6/19
 → tab Dexam (4mg) ~~1/2 tab po qd~~
 1/2 Tab po qd
 x sid
 → T. Lanzol (30mg) 1 tab qd BB F x sid

Lamab

OPR-6

Dept: Paediatrics
 DEPT. No. 20180030023426
 Clinic Name:
 CL. No:
 Room: 7
 Name: JATIN
 Male 12 Y
 UHID 103957791 DT 02-01-2019

पंजीकृत सं./O.P.D. Regn. No. _____
 आयु/Address



Acc / HR.

उपचार/Treatment

no complaints / consolidation ongoing

done for drug leave to day

11,000 units today
 IM
 21/1/19

1.5
 9.5 gm
 0.8
 0.3
 VFT @

Drug vcr 1.6 mg on 4/1/19

Repeat drug leave on 5/1/19
 11,000 units IM

CBC
 7.5-7.8 long
 band 9.46 to
 for electrolyte
 need count repeat

Asst



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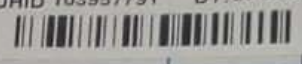
अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6

एकांक / Unit
विभाग / Dept.
नाम / Name

Dept: Paediatrics
DEPT. No: 20180030023426
Clinic Name:
CL. No:
Room: 7
Name: JATIN
Male 12 Y
UHID 103957791 DT: 26-02-2019

रजिस्ट्रेशन नं० / O.P.D. Regn. No.
पता / Address



निदान / Diagnosis

T. Au. / IM JMC

दिनांक / Date

8

उपचार / Treatment

no new complaints
o/e e

- ① Due for BM
- ② oo septae
- ③ BM pencil log

CBC ②
UFT ②
12.2.19

due for IM
HD MB

needs BM
- after consolidation
↓
to do admission to
HD MB

throughout cycle
T GMP - 27.5mg
1 tab → 5ml to
give 2.8ml in
evening
by Methotrexate
5.5g IV
infusa

stop nephro
off site Sunday
+ 4 days

ITM - 12mg

- start leucovorin
- rescue - after schedule
16.5mg x 3 doses
- methotrexate
montoye hand
give

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)

DIS
BC

Resident symptoms

2. Rebasist pl.

12/10

child not willing to take after drinking 6 MP)

TGMP may begin on 1/2 D₁

Little ting
pl give probably
monitored that)

1/2 D₂

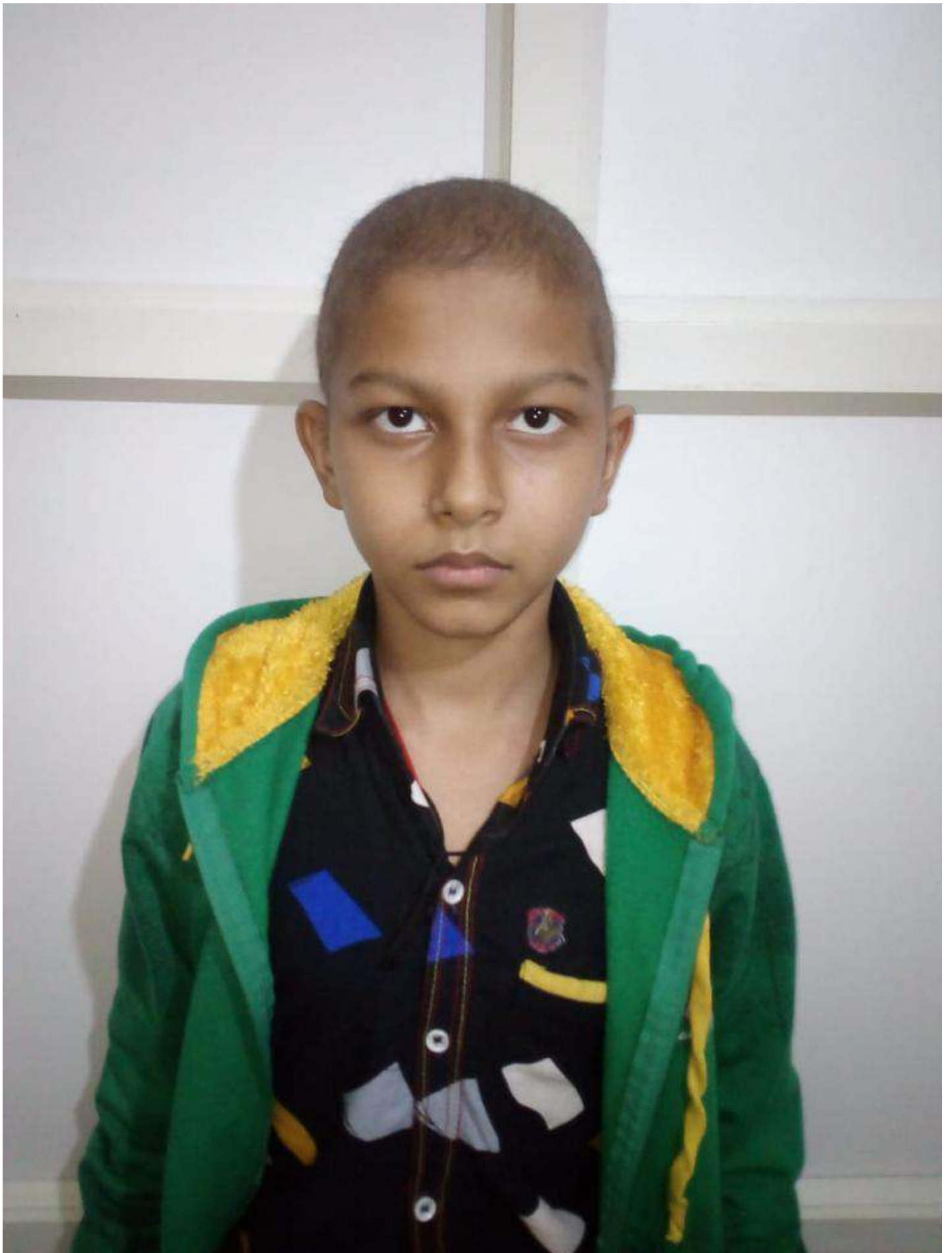
3/4 D₃

2/1 or 2 for possible adverse
Nell

25/2/19

Inj Leucovorin 17mg q 6th hly 15mg vials — (6)

Meerth.





ALL INDIA INSTITUTE OF MEDICAL SCIENCES

DEPARTMENT OF PEDIATRICS

C5 DAYCARE SHORT ADMISSION

DISCHARGE SUMMARY

Name	JATIN	Sex	Male
Age	12 Y	Unit	III
UHID	103957791	DOA	13-06-19
Diagnosis	T-ALL	DOD	13-06-19
Consultant	Dr Rachna Seth / Dr Aditya Gupta / Dr Jagdish		

Procedure and monitoring note: Child was admitted for ITM and CSF. Lumbar puncture was done with strict aseptic precaution and CSF sample was sent. Child remained hemodynamically stable throughout the hospital stay.

Advice on discharge:

1. To collect CSF report from room no 8, IRCH/OPD Room no 50 after 3days
2. To collect CSF cytology from room no 1069 after 3days
3. To remove dressing after 2 days.
4. Tab PCM (500mg) 1 tab PO SOS
5. F/U in Pediatric Unit-III OPD on Wednesday / Saturday / Monday or oncology OPD on Monday at 9:00 AM

Senior Resident *Pamali*
Dr. Pamali/ Dr Jyoti

Junior Resident
Dr. Chinthana/ Dr Praneeth