





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



अस्पताल में अंधार मुक्त बनाने के लिए / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

बास विज्ञान विभाग
UMID: 102564918

कमरा / Room
C 216

OPR-6



Dept No: 20250030023385

Queue / संख्या
F11
Unit-III, Paediatric.

रोगी का पंजीकृत नं./O.P.D. Regn. No

किशोर किशोर / KISHOR KIS 40R

S/O MANO
ZY SM 40 / M (पुरुष)
VILL BARARI DIST MATHURA, UTTAR
PRADESH Pin 0 INDIA
Ph: 8105387812 General Rs 0
Follow Up Patient

बुध, वर, Wed Sat



Reporting: 09 02 27
21/01/2028

उम्र
Age

पता / Address

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

51

12-4-26

बास विज्ञान विभाग
UMID: 102564918

कमरा / Room
C 216

Queue / संख्या
F31
Unit-III, Paediatric.

Dept No: 20250030023385

किशोर किशोर / KISHOR KIS 40R

S/O MANO
ZY SM 25D / M (पुरुष)
VILL BARARI DIST MATHURA, UTTAR
PRADESH Pin 0 INDIA
Ph: 8105387812 General Rs 0
Follow Up Patient

बुध, वर, Wed Sat



Reporting: 10 10 4
21/02/2021

Details in notebook

FN in Peds OPD on 14/03/26 E
CBC, LFT, RFT reports

13-5

66



CLEAN AND GREEN AIIMS / एम का यही सत्य, स्वच्छता से काय 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)



marasapital

3/26 :

② EORB:

8 H HdCEV ✓
Sx ✓
RT due .

ue for cycle. 9 chemo.
No complaints .
Labs: checked,
Advice:

20 March 26
8600
10.7 / 2630 / 419K

1. Date for chemo 24/3/26 - 25/3/26
2. Inj. Emeset 2mg iv push.
Inj. Dexa 2mg iv push.

↓

Inj. VCR 0.3mg iv slow push. - D1
 Inj. CARBOPLATIN 335mg / 100ML NS iv over 1h - D1
~~Inj. ETOPOSIDE 145mg / 300ML NS iv over 1h - D1~~

[Handwritten signature]

↓

Inj. G-CSF 60mcg s.c OD x 5 days.
 Symp. Emeset 5ml TDS x 3 days.

3. N/W: 13/4/2026 E CBC / RFT / UFT

Sanjano
sa.

14/3/26

No mouth ulcers
2% betadine gargle
sitz bath
Personal Hygiene.
on septison ALT/Day
No fresh complaint

8-50 | 4260 | 1.4L.
270.

RA/UA : WNL.
(13/3/2026)

Dis : (L) EORB | Post S# 6000 |
pending RT. HdREV.

- tdv :
 Jul. 4L/F 60 mg
 SC q24hly x 3da
- CBC/RA/UA.
 - Covid. Septison SB/BG.
 - N/V in SPD
 reports.

23/03/2026
Shin
SR

3/1/26

$$8.1 \left\{ \begin{array}{l} 6240 \\ 3340 \end{array} \right. \left. \begin{array}{l} 3.941 \\ . \end{array} \right.$$

Dis: (L) EORB / Post 5# HDCEU
(20/12 - 29/12/25)

Adv:

- f/u in RT OPD
- cont. septem / SB / Bq
- Danger signs explained
- NIV in OPD on 14/01/26
C CBC RFE / UA

14/1/26

- No mouth ulcer
- 2x betadine gargles
- sitz bath on septem
- Personal hygiene
- No fresh complaints.

Dis: (L) EORB / Post 5# HDCEU

Dis:
SR

Due for cycle 6 HDCEU

Re follow-up

17/4/26

Adv:

$$8 \left\{ \begin{array}{l} 4610 \\ 940 \end{array} \right. \left. \begin{array}{l} 2.302 \\ . \end{array} \right.$$

?hemo date

17/1/26 - 18/1/26

→ f/u in RT OPD
→ Inj. Emet 2mg + Inj. Dexam 2mg slow IV push.

→ Inj. Vincristine 0.3mg slow IV push - D1

- Inj. Carboplatin 335mg in 10 NS IV over 1 hr. → D1

- Aug: elaprosicla . 145 mg ⁱⁿ 350 mg MSIV
over 2hrs . D1, D2
- Aug - ACSF 60 mg SC 9 24 hrs
D3 till ANIC
recovery
- cont . captran / US / BQ .
- Date for census - Dayton
- N/V in OPD = CBD 25 / 5H . on 31 / 1 / 2016

Shivani
SR

21/1/2022

$$8.1 \left/ \begin{array}{r} 6240 \\ 2390 \end{array} \right. \left. \begin{array}{r} 2.61 \\ 2.61 \end{array} \right.$$

ADU: (L) EORH / most 5 # HD CEW (20/12 - 29/12/21)

Adv:.

- f/u in RT OPD
- cont septum / SR / BG
- danger signs unrepaired
- N/V in OPD on CBC RFT / UA

14/1/2022
Quinac
SR

14/1/20

ADU: (L) EORB / most 5 # HD CEW

- No mouth ulcer
- 2x betadine gargles
- sitz bath
- on septum
- personal hygiene
- No fresh complaints.

Refollow-up 17/1/2026

due for cycle 6 HD

Adv:.

- f/u in RT OPD

$$8 \left/ \begin{array}{r} 4610 \\ 840 \end{array} \right. \left. \begin{array}{r} 2.302 \\ 2.302 \end{array} \right.$$

chemo date
17/1/26 - 18/1/26

- Inj. Emet 2mg + Inj. Dexa 2mg slow IV push.
- Inj. Vincristine 0.3mg slow IV push - D1
- Inj. Carboplatin 335mg in 100ml NS IV over 1hr. → D1

Adv →

- ① Inj Emetet 2mg + Inj DEXA 2mg slow iv flush
- ② Inj VCR 0.3mg slow iv flush - D1
- ③ Inj Carboplatin 335mg in 100ml NS iv over 3 hrs - ~~7/2/26~~
- ④ Inj Etoposide 145mg in ~~100~~⁴⁰⁰ ml NS iv over 3 hrs - D1 of ~~7/2/26~~ ^{7/2/26}
- ⑤ syp Emetet (2mg/5ml) 5ml TDS X 3 days }
- ⑥ T. Dexa 4mg 1/2 Tab BD X 3 days }
- ⑦ Inj G-CSF 60ug s/c OD ~~5 days~~ till ANC recovery. start for Day D₁ | D₂ | D₃
- ⑧ Continue septran as advised.
- ⑨ ~~topt~~ chemo date → Monika Sister
Chemo date - 7/2/26
6/2/26
- ⑩ N/Y on 2/2/26 with CBC, LFT, RFT

Kimber
Jae

बाल चिकित्सा विभाग
UHID: 109564918



Dept No: 20250030023385

कमरा / Room C 218
Queue / संख्या F4
Unit-III, Paediatric.

किशोर किशोर / KISHOR KISHOR

S/O MANO
2Y 3M 28D / M(पुरुष)
VILL BAFARI DIST MATHURA, UTTAR
PRADESH, Pin 0 INDIA
Ph: 9105367912 General Rs 0
Follow Up Patient

दु.कॉमि. MMS Set



Reporting: 09:23:01
14/12/2025

- CBC/LFT/RFT new

53

12.15

N/V on 03/01/26 : CBC

Handwritten
SR-Ped onco

DATE: 22/04/26
OTHER: 8:00am
RF: JRD
WITH: PATIENT

Referred to 6/4/26
JRD

एम. आर. आई प्रपत्र 1 / MRI Form 1
दूरभाष सं. / Tel. No. : 26593614
26546455

अखिल भारतीय आयुर्विज्ञान संस्थान / ALL INDIA INSTITUTE OF MEDICAL SCIENCES
एन.एम.आर. विभाग / DEPARTMENT OF N.M.R.

नैदानिक एम. आर. आई. माँग प्रपत्र / CLINICAL MRI REQUISITION FORM

1. Clinical Dept. or Unit: III Date of Requisition: 28/2/26
OPD No. UHID No. Ward / Bed No.

2. Screening Dept. : Radio-Diagnosis (Tick as appropriate) Neuro-Radiology Cardiac Radiology

3. रोगी का नाम / Patient's Name: VARSHA आयु / Age: 25/23 2.5yl लिंग / Sex: F

जन्म तिथि / Date of Birth : दिन / Day माह / Month वर्ष / Year वजन / Weight कि. ग्रा. / Kg.

4. General Patient Condition (Tick as appropriate)
(i) Critical and with life support (ii) Ill but without life support (iii) Ambulatory

5. Clinical Details : History :
3500 MRI CHANGES
* 1000 FOR EVERY ADDITIONAL STUDY
Examinations
3000 FOR FILMS
1000 FOR CONTRAST IF REQUIRED

Relevant Investigations :
Previous CT / MR / Other Reports / Studies
(with numbers, if any)

6. Blood Urea / S Creatinine
3500 + 1500 + 1000 - 6000

7. Clinical Diagnosis :
8. Exact Anatomical site for MRI :
9. Special Instructions (Sedation, Allergy or other details which may facilitate a safe and informative study).
10. (a) Contrast Enhancement Required : Yes No
(b) Allergic to any drugs :
(c) Implant in Body (Tick as appropriate)

Cardiac Pacemaker Aneurysmal clips Cardiac Valve/Prosthesis
Metallic Implants. Sharpnel/Pellet Others. None.

Dr. REMA KURADE
Senior Resident
Pediatric Oncology
New Delhi-110029

हस्ताक्षर / Signature
नाम / Name
(साफ अक्षरों में / In Block letters)
पदनाम / Designation

(Requisition may be signed by a Faculty Member)

no (L) EORB
Age III
post 3# HDCEV
post 2#
documented
MRI brain +
orbit
C contrast