MISSION HOPP
An Effort Towards Changing

H.No.-203 , Gali No. -11
Geeta Colony , East Delhi
New Delhi - 110031

Date -

Reg. No -

Registration Form

* **Patient Full Name** ...MASTER BHAVIK.....
* **Patient's Date of Birth** ...20 / 12 / 2015..... **Age** ...10..... **Yrs.**
* **Patient's Gender** .....MALE.....
* **Patient's Guardian Name** .....MR. SANJIV.....
* **Relation With Child** .....FATHER.....
* **Parmanent Address** H.NO-69 A, KHANJAHAPUR, MUZAFFAR NAGAR.....

Dist. MUZAFFAR NAGAR **Pin Code** 251001 **State** UTTAR PRADESH

* **Contact Number +91-** 8535064875 ; **+91 -** .....
* **Patient's Family Background** ..EAST FOOD VENDOR.....
* **Parent / Guardian Proof** AADHAAR..... **Id No.** 202334332628
* **Hospital Name (where patient admitted)** ...AIIMS, DELHI.....
* **Name of Department** ..ONCOLOGY DEPARTMENT - AIIMS.....
* **Disease (patient suffering from)** .....B-ALL.....
* **Doctor's Name (who treated the patient) Dr.** ..JAGDISH.....
* **OPD Reg. No.** ..108254738..... **Date** 03 / 09 / 2025.....
* **Approximate Treatment Cost** .....3,00,000/-.....

संजीव
(Parent / Guardian signature OR LTI)

* **Registration No. (records in NGO)** ..MH0135/2025.....**(Only Office Use)**

Deciding Officer's Signature

Trustee signature with seal

Patient Details

Name : Bhavik

Age / Gender : 4y/m

Father's Name : Sanjeev

Address : Muzaffarnagar, UP

Contact No : 8979123163

POC / PCSC No. : 1621/25

Diagnosis: B-ALL

Remarks :

HIV Status NR

HBV 0 1 2

PICC Line Care

[illegible] को PICC Line Care लगी हुई है तो [illegible] पर के डाक्टर [illegible] संपर्क करें।

Diagnostic Work UP & Risk Stratification

Giya mom – 9953325488
Usha ji – 9810366982
Asha ji – 7678109492

EOI MRD → Negative

H/O
Re-consolidation completion
~ "Hyperferritinemic sepsis"
|
post that prolonged neutropenia c̄ CMV ~ 3020 IU/mL

Name of treatment protocol

ICICLE (1918) ⇓ [no s/o related ds organ dysfn]

(3) Collect S. galactomman.

(4) Inj Emset 4 mg iv push

- Inj VCR 1.5 mg iv slow push

due on 9/9/25 - Inj Peg/uricase 98010 deep im

09/9/25 Inj methotrexate 150mg iv in 100ml NS over 1 hr

to check CBC/LFT/RFT Daily & chem

to do on 8/9/25

Dr. VISHAKHA HARSHNEY
SR, Paediatric Oncology
Deptt. of Paediatrics
AIIMS, New Delhi

(5) Next OPD on 13/9/25

c CBC/LFT/RFT,

↓

To do on 12/9/25

Dr. VISHAKHA HARSHNEY
SR, Paediatric Oncology
Deptt. of Paediatrics
AIIMS, New Delhi

during last FN episode. child had
developed Neutropenia
↓
Started on Tab Voriconazole
On 18/8/25

But mother was taking Cefpodoxime & levofloxacin

Voriconazole started on 26/8/25

CECT chest done on

11/7/25 → Single Nodule c surrounding GGO
when child was admitted
c hypoattenuating lesion
↓
? could be fungal
No consolidation

Repeat CECT chest during next FN episode.
↳ 23/8/25 → No consolidation
– No Nodules
– Normal CT chest

Plan
① give 2nd dose of Cefizzi
② stop Voriconazole

3/9/25 c/o BA L2/ 1R/ IM/ Capizzi (1st dose 30/8/25)

NO fever
NO Pain abdomen
NO loose stool
NO oral mucositis
c/o skin lesion on Palms & Soles
Not pain full
Palms lesion resolving from 2 (28/9/25)

active alert
HR = 90/min
RR = 24/min
Pulses = WP
Peripheries = warm
chest = clear.
P/A - Soft
No oral ulcers.

CBC 2/9/25 — 9.6 | 2910 / 1480 | 2.9

LFT/RFT — (N)

next protocol

Tag flow

IM protocol

CMV 3020

CBC RFT/LFT } sent

3/9/25

ITM ~~CCSF~~ Only dated on ~~06/09/2025~~

1 Inj. Methotrexate on ~~06/09/2025~~

- Inj V CR 1.5 mg.
- Inj IV methotrexate 100 mg.
- Inj IFM 12 mg.

SA done.

3/9/25

- BP: 110/70 mm Hg
- on septran
- NO seizures

E01. MA

30/8/25

BP : 111/72 mmHg

No oscelceles

Consolidation Completed

- no major complaints
- usually seen
- some rash (+) rashes / ? fort.
- lateral report ? fort. likely

- not like diaries
dorsal spine c
antiinflammatories

SPLEENLE

50th	97	59
90th	108	72
95th	112	76
95th+12	124	88

Consolidation orgy
complete 29/7/24

Hb 9.5
TC 4-13
Pl 218
Alb 0.98

2 7/8/24

not clearly recent cycle

galactoma 0.307

CT 23/8/24
galactoma - ve

BP needs monitoring

D/C careful

Name: Bhavik

19/8/25

BP: 107/74 mmHg

CXR

USG

CMV

Parvo

PS / Flow

Bldcls

PCT ?

20/8/25

@ Daycare.

FN review

mild afebrile

on 2 syp/antikacin (D3)

voriconazole (D3)

CBC

18/6/25

4.8 | 153 ↓ 150 | 51,000 → received PRBC Tx from → rpt Blood Tx not done.

Cumally

LT dlf → 23/8/25.

PS
Flow
CMV
Parvo
Blood Tx.
PCT
→ sent.

Adv

- To (ct) Ivabs + voriconazole
- T. cetirizine 5mg 1 tab HS x 5 days
- To do CBC Daily
- (N/V) in OPD on 23/8/25. @ CBC/KFT/LFT
- Daily FN rho @ daycare

Jaswar

Plan

① ER → Ambulance (205) → PRBC transfusion @ SMH reg. –
② alliquots

→ Inj VORICONAZOLE 200mg IV BD → 200 mg IV BD

→ USG Abdomen → R/o disseminated Candidiasis.

→ Urine for fungal hyphae.

→ BMA + f/up date in next week.

(19/8/25)
Daycare
- CMV/EBV/parvo
- PS/ f/up IRCH
- galactomannan.
- CT date
-

19/8/25

Kindly help arrange
Tab. voriconazole 200mg 1tab BD × 2 weeks

Thank You,

19/8/25
BP 107/
CXR
USG
CMV
parvo
PS f/lo
PCT

20/8/25
@ Da

4.8

Dr. Shreshtha Kaushik
Senior Resident
DM, Pediatric Oncology
Department of ...
AIIMS, New Delhi-110029

Name : Bhavik

18/8/25

B-ALL / IR consolidation phase

consolidation completed → 29/7/25

Sepsis / FN → 6/8 – 10/8/25.

16/8/25

5.1 \ 1430 / 35K — 60

N 4.2 L 76.2.

mono = 11.2%

PS Chemat → No atypical. not in CSF

IR

prolonged [illegible] neutropenia

GO

→ fungal – [illegible]

– USG abd.

– [illegible]

– CT [illegible]

CMV PCR

[illegible] before next cycle.

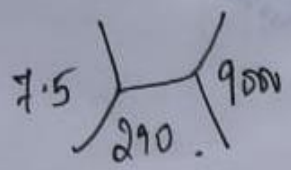
date for BM – next week

Name : Bhavik

9/8/25 :- FN review.

Afebrile x48hours.
No focus of infection

Procal : Negative
Blood c/s : Awaited.



No evidence of marrow recovery.

Advice :-

1. Continue iv Abx.
2. To go to ER for RDP transfusions
3. FN review in Daycare on 11/8 [CBC and Blood c/s.

Dr Jaya
SR.

8/8/25 FN review

Vitals on (D3) zosyn/amikacin

child afebrile

q - N

PR - 136/mt

RR - 22/mt

BP - 99/67 mmHg

SpO2 - 98%.

6/8/25: 5.6 / 750 / 290 / 16,000 → RDP Tx, PRBC Tx give

- B/C
- PCT
- CBC

] to be send.

No fresh complaint.

Adv

- To send CBC / PCT / Blood c/s.
- To (c) IV abs.
- NVC on 9/8/25
- DAS on
- CBC

Name : Bhavik

23/7/25 :
Inj GCSF 300 μg

29/7/25 Inj ARA-C (1ml/100mg) - ②

Shravani
SR PO

4/8/25 IR-BALL / Consolidation (file N/A)

Admitted 11/7 - 29/7/25.
Prolonged / profound FN / septic shock / hyperferritinemic sepsis / purpura fulminans → oral candidiasis / perianal cellulitis / ?GN sepsis / viral exanthem → Bring d/s copy for file.

Consolidation completed 1/8/24.

currently no issues

2/8/25
7.7 / 1170 / 40K / 680

LFT/RFT - Ⓝ

MONO = 5%

Wt loss ?4kg ⊕ → but baseline was 25 kg. ?Dexa induced wt gain in induction.
NG insitu.

plan
① Dietician Advice.
② N/V 11/8/25 ĉ CBC/LFT/RFT -

TO, ICS.
① 4Fr Groshong PICC line — ①
② Heplock — ①

Shravani
SR PO

DR. G. SHRAVANI REDDY
Resident
Div. Oncology
Dept. of Paediatrics
All India Institute of Medical Sciences
New Delhi- 110029

23/7/25

18/7/25 → To, ICS,
Please help - Bhavish ē

1) SDP Kit - ① - 10400
ē anticoagulant

2) Granulocyte kit - 10310
①

Sham

29/7/25

4/8/25

20/07/2025 Inj GCSF 300 ug - 1 vial

℞
Dr Alapan

Dr ALAPAN DAS
Junior Resident
Pediatrics
AIIMS New Delhi

21/7/2025 To, ICS.

1) SDP kit ē anticoagulant - 10400

Sham
Suman Kr

13/7/25

To ICS

(1) Zytee gel – (1)

(2) Syp. atarax – (1)

(3) Mucaine gel – (1)

1 caladyl lotion

→ Kindly rearrange

- INT Aztreonam 1g/vial → 30 vials

- INT ceftazidibactum 2gm/vial → 20 vials

→ IVIG (10%) 44gm – 5 vials

Dr. Rema
JR Pedonc.

Dr. REMA KURADE
Senior Resident
DM Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi-110029

17/7/2025 To ICS:

Please help:

- Inj. Aztreonam - 1g – (18) vials
- Inj. Ceftazidime - Avibactam 2g – (12) vials
- IVIG - 10g - (4)
- Inj. – (1)

17

10/7/25

Vitals

T - N
PR - 126/mt
RR - 24/mt
BP - 106/76 mmHg
SpO_2 - 97%

CBC, PCT } to be sent.

HR - 126/min
RR - 24/min
CRT < 3s PP - 9V
BP - 106/76 mm Hg
SpO_2 - 97.

Chest - clear
CVS - $S_1 S_2$ (+)
P/A - soft; non tender
CNS - WNL

Adv -
- Refer to Pediatric Casualty
- Review for transfusion
- CBC, Blood C/S, PCT, PT/aPTT/INR
- Upgrade i.v a/bs to TEICOPLANIN [grade II ⊙M]
- ct Inj. PIPTAZ/TEICOPLANIN

Dr. MANASEE DEKA
Senior Resident
D.M Pediatric Oncology
AIIMS, New Delhi

Name : Bhasik

9/7/25

D BALL/R/ candidelas

D FN

on PIPTAZ + AMIKA

since 8/7/25

α-1. Betadine gargle
- SR bath
- On Septran SAT/SUN.
- C/o Not eating well.
- On/V antibiotics.
-

AdV

o To cont W antibiotics
. PCT, Blood CS
. IW 12/8/25
. CBC

10/07/25.

FN Review at MCH-DC.

on D_3 PIPTAZ/AMIKA.

c/o 1 e/o blood in vomitus yesterday.

No fever.

Oral grade II Mucositis
Poor oral Acceptance.

O/E:-

Δ B-ALL | KI consolidation

D-15 →

28/6/25

On Exp

cyclo | ITM

2|7|2

no fresh issue

(27/06/25) → 7.70 } 5730 / 3880 (160×10³

CSF-cytopaths. C(085)

PS-(23/06/25) → (N)

Reading on 30/6/25 10:00 AM

CSF (23/6/25) → Acellula

Mantoux test (205) [0mm]

S. BIL, 0.8, OT/PT - 115/205

Due for D15

Adv:

- Inj cyclophosphamide 920 mg iv 100 ml NS over 30 min (D15)
- Inj ARA-C 68 mg iv x 4 days (D16 to D19)
- IT METHOTREXATE 12 mg (D15)
- To cont 6-MP
- Tab SEPTRAN (SAT/SUN) / Sitz bath
- Next visit → 9/7/2025
- CBC, LFT, KFT

Name : Bhasik

21/6/25

△ B ALL | IR | 1c1d G | consolidation

- 2% Betadine gargles
- Sitz Bath.
- Dated for 9+m+csf 23/6/25
- Septran sat/sun.
- 6MP.
- No fresh complaint

No fresh issue

CBC - 20/6/25

9.58) 4670 / 207 x 10^3 / 2440

LFT | KFT - (N)

Adv:

0 IV ARA-C 88 mg (D1) slow push x 4 days (D9 - D12)

0 IT METHOTREXATE 12 mg (D8) 28/06/25

0 TAB 6-MP 50 mg 1 tab OD to cont

- to cont SGPTRBM / Betadine gargles / Sitz bath
- Next visit → 28/6/25

Afebrile

– CSF + ITM 12mg on 23/06/2025.

– N/V on 21/06/2025 ⇒ CBC/LFT/KFT.

– ↓ T. SEPTRAN (SAT/SUN)

Dr. MANASEE DEKA
Senior Resident
D.M Pediatric Oncology
AIIMS, New Delhi- 110029

Post chemo for Vomiting

– T. EMSET 4mg 1 TAB po q 8Hrly x 3 days

– T. DEXA 4mg ½ TAB po q 12Hrly x 3 days

Name : Bhavik

– N/V on 14/06/2025 ō
CBC/LFT/KFT.

Member

B-ALL (IR) post Induction on 10/06/25

EOI MRD – Negative

LFT/KFT- (N).

No HSM
No LAP.

9.1 | 4.51 | 1.64 | 2.76 (N)

& MESNA

Adv.

– Inj. CYCLOPHOSPHAMIDE 900mg/200ml NS i.v over 30 minutes. on 16/06/25

– IVF DNS ī 1:100 KCl @ 115ml/hr x 2 hours on 16/06/25

– Inj. CYTARABINE 68mg i.v SLOW PUSH on 17/06/25, 18/06/25, 19/06/25, 20/06/25

– T. 6 MERCAPTOPURINE 50mg 1 TAB po q 24 Hrly x 4 weeks from 16/06/25 Till 14/07/25

Evening
Empty stomach
not ī milk or milk products.

14/06/25

B-ALL/IR/EOI
BP = 114/71 mm Hg
Pulse = 94 B/min
No oral Ulcer
Pedal edema Absent

CBC = 13/06
Hb = 9.1 g/dl
TLC = 4,510 /cumm
PLT = 2,71,000/cumm
ANC = 1,64,000 /cumm

LFT/KFT - No significant Abnormality.

EOI = BM Flow → No Blast
MRD = -VE

CSF = occasional LMN cells

BMAPS = Awaited

Post Hydration

- Shashak

30.

HSM.

LAP.

Adv.

T METHOTREXATE 12mg

N/S A T/SUN

4/6/25

T INFLUENZA

m STAT.

30/5/25

Wt - 24kg.

Oral Intake - 60%.

Planned - 1800 kcal/60g.

- Small frequent meal.
- Add milk & milk products.

Kirti

4/6/25

- 0% Betadine gargles
- SF-12 Bath.
- on septran sat/sun.
- No fresh complaints

B-ALL (IR) Induction D30.

9.1 → 5.54 → 2.81 → 7.01 (L5)

LFT/KFT - (N)

No HSM.

No LAP.

Adv.

To be dated after 09/06/25 → 10/6/25

- D35 CSF + IT METHOTREXATE 12mg
- D35 + BMA + MRD.

- Tab. T. SEPTRAN/SAT/SUN 4/6/25

CANKIDS please help.

- QUADRIVALENT INFLUENZA VACCINE 0.5ml i.m STAT.

205

Name : Bhavik

31/5/25

- 2% Betadine gargle
- Sitz bath
- on Septran sat/Sun/
- c/o- Anc - N.

k/c/o B-ALL IR on Induction D26.

on Prednisolone.

- on induction
- BMA - Hemodiluted

DIS MRD - Neg.

- file incomplete

BP = 98/57 mmHg

Pulse = 90 B/min

8.9 | 2000 | 4.02 (L)

Atypical cells - 06%.

30/05/25.

26/05/25. 7.75 | 2.03 | 1.77 (L)

Blast 4%.

Severe Neutropenia — Emergency Lab PS.

LFT/KFT (N) except Urea - 54.

No HSM

No LAP.

Adv.

- PS (IRCH)
- PB Flowcytometry (IRCH).
- Inj. VINCRISTINE 1.4mg i.v SLOW PUSH on 03/06/25
- T. PREDNISOLONE till 02/06/25
- T. SEPTRAN (SAT/SUN)

- N/V on 04/06/2025
- CBC/LFT/KFT.

- Fever Neutropenia Caution given.

9

Dr. JANASEE DEKA
Senior Resident
D.M Pediatric Oncology
AIIMS, New Delhi- 110029

(*) Neurocognitive evaluation findings on WISC - IV -:

1. Verbal comprehension - 100
2. Perceptual Reasoning - 82
3. Working Memory - 98
4. Processing speed - 91

| FSIQ - 89 | "AVERAGE IQ"

-24/5/25

- 2% Betadine gargle
- Sitz bath
- on Septran Sat/Sun
- No fresh complains
- Due for VCR, Peg, DNR

chemo - schedule ds organized

27/5/25

→ Inj VCR 1-3 mg.

→ Inj Peg Lunase 9.00 units

" DNR 22 mg

- 24/5/25
- Due for D22 chemo
- (VCR / peg Lenase)

One DNR pending.

On Septran, Prednisolone

T. Prednisolone
20 - 10 - 20 D1
20 - 20 - 20 D2

Syp Started. Ext may take what is convenient.

T. Pantocid 20 mg OD BBF × 7 days.

21/5/25

c/o . B-ALL/IR

→ . No fever
No cough/cold / vomitting / NOLH .

→ . vitals stable

Dig Induction

RS : AE = BS clear
CVS : S1S2 heard
PA : soft NT
CNS : GCS 15/15 .

CBC → 8.5 / 18.70 / 170 \ 1.26 (

Daunorubicin
given on 20/5/25

Plan

→ f/u on 24/5/25 ē CBC / RFT / LFT
to peds clinic
at 9am .

→ Syp . omnacortil forte 15mg/5ml .
6ml — 7ml — 6ml
(24/5 to 30/5) .

→ c/o ~~sepbaon~~

→ IV vincristine 1.3mg slow push .
on 24/5/25
Tab Lanzol JR (15 mg) 1 0 0 x7d
1/2 hr before meals
→ IM . Peg Asparaginase 910 IU IM
on 24/5 .

Dr. Rema
JR Pedonco .

7

②
24/5/25
Inj. VCR 1.35 mg iv slow push

Inj. PEG L asparaginase 910 units deep IM stat

20/5

③ PNR @ Daycare after ECHO ~ⓝ review → [Inj. DAUNORUBICIN 23mg/100ml NS iv over 1hr]

④ F/u @ OPD on 28/5/25 c̄ CBC report Wed 9AM

Nikita

Dr. NIKITA [illegible]
Senior Resident
Pediatric Oncology
Dept. of Pediatrics
All India Institute of Medical Sciences
New Delhi-110029

21/5/25
- 2% Betadine gargle
- Sitz bath
- On Septran Sat/Sun
- ~~[illegible]~~
- Low ANC.
- BP - 108/80 mmHg
HR - 118 bpm
SpO2 - 96%
- C/o - not eating well
- lethargic

Name : Bhavik

19 May, 25
S/B Nutrition

Intake - 58%
(1064/1822) kcal
Pro - 50%
(27.8/57) gm
wt - 22.8 kg

Take fruits daily
milk twice a day
milkshakes - mango, banana)
high cal. high pro diet

Peadiatrician

B ALL / HR / Induction [D17]

Dsis:

Clinically well / no HSM
testicular enlargement

Day (8) CSF - (N)
PIS - GRR

2D ECHO
10 CUS

counts - 9.4 \ 2710 / 1.97 / 20
1020
[16/5/25]

Advise

(+) [24/5 - 30/5/25] Syr Ron (15mg/5ml)
6 ml - 7 ml - 6 ml

continue till 16/5/25

repeat

8 am

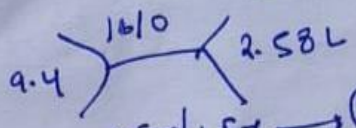
...ha Kaushik
...dent
...tric Oncology
...nt of Pediatrics
New Delhi-110029

Consultations

14/5/25
c/o BALL/IR/ induction day 12

12/05/25 ~~DAY care~~
B-ALL/IR/Induction-D10
BP = 104/87 mmHg
SpO_2 = 100%
Pulse = 96 B/min
NO-oral ulcer
Perineal Area Normal
CBC/LFT/KFT sent Today
- shashank

12/5



KFT/LFT → (N)

Day 8 PS → repeat awaited

Day 8 CSF → repeat awaited

Day 8 Daunorubicin → Pending (2D ECHO awaited)

Adv

from MCH Daycare ← (-) Inj. Daunorubicin 23 mg in 100 ml NS over 1 hour → To be given after ECHO report (N)

- (CL) Day 8 PS and Day 8 CSF
- Stop. Pedersintone (15mg/5ml) → To continue till 16/5/25
  6 — 7 — 6 ml
- T. Pantocid 20 mg 1 tab BBF OD
- To (ct) septran as advised on Sat/Sun

To bring Inj. Bioherate (15mg/5ml)

- CBF + ITM dly → 17/5/2025, MCH Daycare at 8 am formy
- Inj. VINCRISTINE 1.3 mg IV slow push on 17/5/2025
- (NN) in OPD on 19/5/2025 with CBC/KFT/LFT at 2 pm, 400 c ward

Dr. Shreshtha Kaushik
Senior Resident
DM. Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi-110029

old card not show

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

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

शरीरमाद्यं खलु धर्मसाधनम्

LH0209250193 7 108254738
BHAWIK .....

LC0209252697 108254738
BHAWIK .....

बाल चिकित्सा विभाग
UHID:108254738
ABHA:
bhawik_20202015@abdm
Dept No: 20250030010123

कमरा / Room C-211
Queue / संख्या F21
Unit-III Paediatric

एकक/Unit _____
विभाग/Dept. _____
नाम/Na BHAWIK .....

S/O SANJEEV
9Y 4M 15D / M(पुरुष)
VILL KHANJAPUR , DIST
MUZAFFARNAGAR UTTAR PRADESH
Ph: 8979123163 General Rs. 0
Follow Up Patient

बुध,शनि, Wed,Sat(बुध,शनि)
Reporting: 08:43:50
30/09/2025

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
27.12	N — OPD — 03/09/25 Wednesday

CBC
LFT. RFT

Dr. Ruksana Shafique P.R
DM Resident
Pediatric Oncology
AIIMS, New Delhi

Old OPD Card lost

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

OPR-6

बाल चिकित्सा विभाग
UHID:108254738
Dept No: 20250030010123
Clinic No: 2025/POC/152
BHAWIK .....
S/O SANJEEV
9Y 3M 26D / M/(पुरुष)
VILL KHANJAPUR , DIST
MUZAFFARNAGAR UTTAR PRADESH
Ph: 8979123163 General Rs 0
Follow Up Patient

कमरा / Room C-211
Queue / संख्या F5
Unit-I, POC,
सोम
Reporting: 01:52:47
11/08/2025

पंजीकृत सं०/O.P.D. Regn. No.

आयु Age | पता/Address

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
9	N/V 18/8/25 10: 2pm C (BC

LH16082500508 108254738
BHAWIK.....

शरीरमाद्यं खलु धर्मसाधनम्

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)

Pradhan Mantri Jan Arogya Yojana PM-JAY (pmjay.gov.in)

मेरा अस्पताल My Hospital meraaspatal.nhp.gov.in

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

बाल चिकित्सा विभाग
UHID:108254738
ABHA:
bhawik_20202015@abdm
Dept No: 20250030010123
BHAWIK .....
S/O SANJEEV
9Y 4M 12D / M(पुरुष)
VILL KHANJAPUR , DIST
MUZAFFARNAGAR , UTTAR PRADESH
Ph: 8979123163 General Rs. 0
Follow Up Patient

कमरा / Room C-211
Queue / संख्या F26
Unit-III, Paediatric
बुध,शनि, Wed,Sat(बुध,शनि)
Reporting: 08:31:53
27/08/2025

OPR-6

बo रोo लि० पंजीकृत सं०/O.P.D. Regn. No.

आयु Age | पता/Address

LC2908252126 108254738
LH2908250155 108254738
Mr. BHAWIK...

निदान/Diagnosis

Δ B-ALL/IR

दिनांक/Date | उपचार/Treatment

26.4.25

11

Adv

- CBC, LFT, KFT, CMV PCR
- To collect Sagittal mannan report
- EBV / PARVO

Next Visit → 30/08/2025

@ 9 AM

29/08/25

To

The Dermatology SR sir

OPD

Dear Colleague

Kindly note this c/o B-ALL in Consolidation with prolonged neutropenia now c pruritic

प्रयोगशाला चिकित्सा विभाग
Department of Laboratory Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
All India Institute of Medical Sciences, New Delhi

UHID:	108254738	Sex :	Male
Patient Name :	Mr. BHAWIK	Sample Received Date :	20-Aug-2025 19:04 PM
Age :	9Y 4m	Department :	DEPT. OF EMERGENCY MEDICINE
Reg Date :	20-Aug-2025 19:04 PM	Sample Collection Date:	20-Aug-2025 17:31 PM
Recommended By :	Dr. Rakesh Yadav	Sample Details :	LH20082502301
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	2516301588

Report

HEMATOLOGY

Test Name (Methodology)	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb (Spectrophotometry)	7.90	g/dL	11.5 - 15.5
Hematocrit (Direct Measure)	23.60	%	35 - 45
RBC count (Impedance)	2.75	10^6/µL	4.0 - 5.2
WBC count (Fluo. flow cytometry)	2.08	10³/µl	5.0 - 13.0
Platelet count (Impedance)	62.00	10^3/µL	170 - 450
MCV (Calculated)	85.80	fL	77 - 95
MCH (Calculated)	28.70	pg	25 - 33
MCHC (Calculated)	33.50	g/dL	31 - 37
RDW-CV (Calculated)	15.50	%	11.6 - 14
Neutro (Fluo. flow cytometry)	11.10	%	23-53%
Lympho (Fluo. flow cytometry)	59.60	%	23-53%
Eosino (Fluo. flow cytometry)	1.90	%	1-4%
Mono (Fluo. flow cytometry)	27.40	%	2-10%
Baso (Fluo. flow cytometry)	0.00	%	0-1%
NRBC	2	%	
Neutro - Abs (Calculated)	0.23	10³/µl	2.0-8.0
Lympho- Abs (Calculated)	1.24	10³/µl	1.0-5.0
Eosino - Abs (Calculated)	0.04	10³/µl	0.1 - 1.0
Mono - Abs (Calculated)	0.57	10³/µl	0.2 - 1.0
Baso - Abs (Calculated)	0.00	10³/µl	0.02 - 0.1

Remarks: Pancytopenia present. Kindly correlate clinically, with drug history, and further investigation and follow up is suggested.

CBC, PCT

-----End of Report-----

Dr. Sudip Kumar Datta (MD Biochemistry)
Dr. Tushar Sehgal (DM Hematopathology)
Dr. Suneeta Meena (MD Microbiology)
Dr Subhamon Bhattacherjee 20-Aug-2025 22:56

Attention: Please collect blood samples by puncturing the rubber cap of the vacutainers. Manual opening of caps and filling it must be avoided strictly. Lab reports are subjected to pre-analytical errors due to inappropriate patient preparation, phlebotomy practices, storage and transport. Please inform SMART Lab in case of any discrepancies with the expected results on the same day on Ext.no. 7004/7005

प्रयोगशाला चिकित्सा विभाग
Department of Laboratory Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
All India Institute of Medical Sciences, New Delhi

UHID:	108254738	Sex :	Male
Patient Name :	Mr. BHAWIK	Sample Received Date :	23-Aug-2025 14:06 PM
Age :	9Y 4m	Department :	Paediatrics
Reg Date :	23-Aug-2025 14:06 PM	Sample Collection Date:	23-Aug-2025 12:37 PM
Recommended By :		Sample Details :	LH230825081580
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	251632033

Report

HEMATOLOGY

Test Name (Methodology)	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb (SLS-photometry)	9.10	g/dL	11.5 - 15.5
Hematocrit (Direct Measure)	29.00	%	35 - 45
RBC count (Impedance)	3.10	10^6/µL	4.0 - 5.2
WBC count (Fluo. flow cytometry)	3.63	10^3/µl	5.0 - 13.0
Platelet count (Impedance)	125.00	10^3/µL	170 - 450
MCV (Calculated)	93.50	fL	77 - 95
MCH (Calculated)	29.40	pg	25 - 33
MCHC (Calculated)	31.40	g/dL	31 - 37
RDW-CV (Calculated)	18.80	%	11.6 - 14
Neutro (Fluo. flow cytometry)	11.90	%	23-53%
Lympho (Fluo. flow cytometry)	54.50	%	23-53%
Eosino (Fluo. flow cytometry)	0.60	%	1-4%
Mono (Fluo. flow cytometry)	32.20	%	2-10%
Baso (Fluo. flow cytometry)	0.80	%	0-1%
NRBC	3	%	
Neutro - Abs (Calculated)	0.43	10^3/µl	2.0-8.0
Lympho- Abs (Calculated)	1.98	10^3/µl	1.0-5.0
Eosino - Abs (Calculated)	0.02	10^3/µl	0.1 - 1.0
Mono - Abs (Calculated)	1.17	10^3/µl	0.2 - 1.0
Baso - Abs (Calculated)	0.03	10^3/µl	0.02 - 0.1

Remarks: Pancytopenia with severe neutropenia. Advice: 1. Iron, vit b12, folate studies. 2. Reticulocyte count. 3. Viral workup. Kindly correlate clinically with drug/therapeutic history and request for peripheral smear, if clinically indicates.

-----End of Report-----

Dr. Sudip Kumar Datta Dr. Tushar Sehgal Dr. Suneeta Meena Dr Vidhi Patel

Attention: Please collect blood samples by puncturing the rubber cap of the vacutainers. Manual opening of caps and filling it must be avoided strictly. Lab reports are subjected to pre-analytical errors due to inappropriate patient preparation, phlebotomy practices, storage and transport. Please inform SMART Lab in case of any discrepancies with the expected results on the same day on **Ext.no. 7004/7005**

प्रयोगशाला चिकित्सा विभाग
Department of Laboratory Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
All India Institute of Medical Sciences, New Delhi

UHID:	108254738	Sex :	Male
Patient Name :	Mr. BHAWIK	Sample Received Date :	29-Aug-2025 14:03 PM
Age :	9Y 4m	Department :	Skin
Reg Date :	29-Aug-2025 14:03 PM	Sample Collection Date:	29-Aug-2025 13:03 PM
Recommended By :		Sample Details :	LH290825O1552
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	2516356066

Report

HEMATOLOGY

Test Name *(Methodology)*	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb *(SLS-photometry)*	**9.50**	g/dL	11.5 - 15.5
Hematocrit *(Direct Measure)*	**30.40**	%	35 - 45
RBC count *(Impedance)*	**3.07**	10^6/µL	4.0 - 5.2
WBC count *(Fluo. flow cytometry)*	**4.13**	10^3/µl	5.0 - 13.0
Platelet count *(Impedance)*	218.00	10^3/µL	170 - 450
MCV *(Calculated)*	**99.00**	fL	77 - 95
MCH *(Calculated)*	30.90	pg	25 - 33
MCHC *(Calculated)*	31.30	g/dL	31 - 37
RDW-CV *(Calculated)*	**26.40**	%	11.6 - 14
Neutro *(Fluo. flow cytometry)*	23.80	%	23-53%
Lympho *(Fluo. flow cytometry)*	50.80	%	23-53%
Eosino *(Fluo. flow cytometry)*	1.00	%	1-4%
Mono *(Fluo. flow cytometry)*	**23.70**	%	2-10%
Baso *(Fluo. flow cytometry)*	0.70	%	0-1%
NRBC	1	%	
Neutro - Abs *(Calculated)*	**0.98**	10^3/µl	2.0-8.0
Lympho- Abs *(Calculated)*	2.10	10^3/µl	1.0-5.0
Eosino - Abs *(Calculated)*	0.04	10^3/µl	0.1 - 1.0
Mono - Abs *(Calculated)*	0.98	10^3/µl	0.2 - 1.0
Baso - Abs *(Calculated)*	0.03	10^3/µl	0.02 - 0.1

-----End of Report-----

Dr. Sudip Kumar Datta (MD Biochemistry)	Dr. Tushar Sehgal (DM Hematopathology)	Dr. Suneeta Meena (MD Microbiology)	Dr Tushar Sehgal DM (Hematopathology) 29-Aug-2025 17:31

Attention: Please collect blood samples by puncturing the rubber cap of the vacutainers. Manual opening of caps and filling it must be avoided strictly. Lab reports are subjected to pre-analytical errors due to inappropriate patient preparation, phlebotomy practices, storage and transport. Please inform SMART Lab in case of any discrepancies with the expected results on the same day on **Ext.no. 7004/7005**

प्रयोगशाला चिकित्सा विभाग
Department of Laboratory Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
All India Institute of Medical Sciences, New Delhi

UHID:	108254738	Sex :	Male
Patient Name :	Mr. BHAWIK	Sample Received Date :	26-Aug-2025 12:18 PM
Age :	9Y 4m	Department :	Paediatrics
Reg Date :	26-Aug-2025 12:18 PM	Sample Collection Date:	26-Aug-2025 11:09 AM
Recommended By :		Sample Details :	LH260825010001
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	2516333891

Report

HEMATOLOGY

Test Name (Methodology)	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb (SLS-photometry)	8.90	g/dL	11.5 - 15.5
Hematocrit (Direct Measure)	27.70	%	35 - 45
RBC count (Impedance)	2.97	10^6/µL	4.0 - 5.2
WBC count (Fluo. flow cytometry)	3.15	10^3/µl	5.0 - 13.0
Platelet count (Impedance)	182.00	10^3/µL	170 - 450
MCV (Calculated)	93.30	fL	77 - 95
MCH (Calculated)	30.00	pg	25 - 33
MCHC (Calculated)	32.10	g/dL	31 - 37
RDW-CV (Calculated)	22.30	%	11.6 - 14
Neutro (Fluo. flow cytometry)	17.20	%	23-53%
Lympho (Fluo. flow cytometry)	56.80	%	23-53%
Eosino (Fluo. flow cytometry)	0.00	%	1-4%
Mono (Fluo. flow cytometry)	25.70	%	2-10%
Baso (Fluo. flow cytometry)	0.30	%	0-1%
NRBC	1	%	
Neutro - Abs (Calculated)	0.54	10^3/µl	2.0-8.0
Lympho- Abs (Calculated)	1.79	10^3/µl	1.0-5.0
Eosino - Abs (Calculated)	0.00	10^3/µl	0.1 - 1.0
Mono - Abs (Calculated)	0.81	10^3/µl	0.2 - 1.0
Baso - Abs (Calculated)	0.01	10^3/µl	0.02 - 0.1

Remarks: Bicytopenia present. Kindly correlate clinically, with drug history, and further investigation and follow up is suggested. Kindly request for peripheral smear, if clinically indicates.

-----End of Report-----

Dr. Sudip Kumar Datta Dr. Tushar Sehgal Dr. Suneeta Meena Dr Vidhi Patel

Attention: Please collect blood samples by puncturing the rubber cap of the vacutainers. Manual opening of caps and filling it must be avoided strictly. Lab reports are subjected to pre-analytical errors due to inappropriate patient preparation, phlebotomy practices, storage and transport. Please inform SMART Lab in case of any discrepancies with the expected results on the same day on **Ext.no. 7004/7005**

Virology Laboratory
Department Of Microbiology
A.I.I.M.S., New Delhi-110029
अ. भा. आ. सं., नई दिल्ली-110029A.I.I.M.S., New Delhi-110029
अ. भा. आ. सं., नई दिल्ली-110029

MC-3267

UHID:	108254738	**Reg Date :**	15/04/2025 02:18 PM
Patient Name :	**Mr. BHAWIK .....**		
Sex :	Male	**Age :**	9 years 4 months 4 days
Department :	DEPT. OF EMERGENCY MEDICINE	**Unit Name :**	Unit-I
Unit Incharge :	Dr. Rakesh Yadav	**Sample Collection Date:**	19/08/2025 10:22 AM
Lab Name:	Microbiology	**Sample Received Date:**	19/08/2025 04:43 PM
Lab Sub Centre:	Virology Laboratory-CMV		
Dept / IRCH No:	20250030010123	**Recommended By:**	Dr. NISHITA PUROHIT
Lab Reference No:	17839		
Ward Name:	DAY CARE PEDS MCH GF /40		

Sample Details : CMP-190825006-P (Plasma) / Report Date: 22/08/2025 06:11 PM

CMV (CYTOMEGALOVIRUS) PCR (QUANTITATIVE)-PLASMA

Result of investigation by Real time PCR

Result:	**Positive**
Comments:	**A positive for Cytomegalovirus result indicates the detection of DNA of this virus in the sample submitted by real time PCR.**
Viral load:	3020
V L unit:	IU/ml

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(draashish)
Verified By

(Dr Aashish Choudhary)
Authorized Signatory

**********END OF THE REPORT**********

प्रयोगशाला चिकित्सा विभाग
Department of Laboratory Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
All India Institute of Medical Sciences, New Delhi

UHID:	108254738	Sex :	Male
Patient Name :	Mr. BHAWIK	Sample Received Date :	29-Aug-2025 14:03 PM
Age :	9Y 4m	Department :	Skin
Reg Date :	29-Aug-2025 14:03 PM	Sample Collection Date:	29-Aug-2025 13:03 PM
Recommended By :		Sample Details :	LH290825015S1
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	2516356066

Report

HEMATOLOGY

Test Name *(Methodology)*	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb *(SLS-photometry)*	**9.50**	g/dL	11.5 - 15.5
Hematocrit *(Direct Measure)*	**30.40**	%	35 - 45
RBC count *(Impedance)*	**3.07**	10^6/µL	4.0 - 5.2
WBC count *(Fluo. flow cytometry)*	**4.13**	10^3/µl	5.0 - 13.0
Platelet count *(Impedance)*	218.00	10^3/µL	170 - 450
MCV *(Calculated)*	**99.00**	fL	77 - 95
MCH *(Calculated)*	30.90	pg	25 - 33
MCHC *(Calculated)*	31.30	g/dL	31 - 37
RDW-CV *(Calculated)*	**26.40**	%	11.6 - 14
Neutro *(Fluo. flow cytometry)*	23.80	%	23-53%
Lympho *(Fluo. flow cytometry)*	50.80	%	23-53%
Eosino *(Fluo. flow cytometry)*	1.00	%	1-4%
Mono *(Fluo. flow cytometry)*	**23.70**	%	2-10%
Baso *(Fluo. flow cytometry)*	0.70	%	0-1%
NRBC	1	%	
Neutro - Abs *(Calculated)*	**0.98**	10^3/µl	2.0-8.0
Lympho- Abs *(Calculated)*	2.10	10^3/µl	1.0-5.0
Eosino - Abs *(Calculated)*	0.04	10^3/µl	0.1 - 1.0
Mono - Abs *(Calculated)*	0.98	10^3/µl	0.2 - 1.0
Baso - Abs *(Calculated)*	0.03	10^3/µl	0.02 - 0.1

-----End of Report-----

Dr. Sudip Kumar Datta
(MD Biochemistry)

Dr. Tushar Sehgal
(DM Hematopathology)

Dr. Suneeta Meena
(MD Microbiology)

Dr Tushar Sehgal DM
(Hematopathology)
29-Aug-2025 17:31

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अखिल भारतीय आयुर्विज्ञान संस्थान,नई दिल्ली
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI
Department of Microbiology

UHID:	108254738		
Patient Name :	**Mr. BHAWIK .....**	**Reg Date :**	
Sex :	Male		
Department :	DEPT. OF EMERGENCY MEDICINE	**Age :**	
Unit Incharge :	Dr. Rakesh Yadav	**Unit Name :**	
Lab Name:	Microbiology	**Sample Collection Date:**	
Lab Sub Centre:	Mycology (Fungal) Lab GL	**Sample Received Date:**	
Dept / IRCH No:	20250030010123		
Lab Reference No:		**Recommended By:**	
Ward Name:	DAY CARE PEDS MCH GF /40		

Sample Details : MY-GL-190825018 (Serum) / Report Date: 22/08/2025 04:46 PM

Galactomannan antigen test (ELISA)

Result of Investigation:

Index:	**0.307**

Sample Remarks :
GALACTOMANNAN ASSAY CUT-OFFS FOR SINGLE SERUM SAMPLE:
As per new update of Consensus Definitions of Invasive Fungal Disease in 2019 and 2021 (from the Infectious Disease Society of America) the updated criteria for POSITIVE Serum GMI >= 1.0 (immunocompromised patients) OR >= 0.5 (immunocompetent critically ill patients)
GMI below the respective cut-
off is considered a negative galactomannan assay. Negative results do not rule out the diagnosis of invasive Aspergillosis. Twice weekly repeat testing is recommended if the

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(deepakmyc)
Verified By

**********END OF THE REPORT**********

Department Of Microbiology
A.I.I.M.S., New Delhi-110029

Wt - 23 kg
ht - 132 cm
BSA - 0.91 m²

Shewik
UHID : 10825 4738

INTERMEDIATE RISK

Induction IR -RI Arm A

Week 1-week 5 (Day 1-35 inclusive)

Day	Prednisolone 60 mg/sqm 3dd PO	Vincristine 1.5mg/sqm IV	ITM (age appr)	Peg lunase 1000 IU/m2	DNR 25mg/ IV sqm
1.	03/05/25				
2.					
3.					
4.					
5.					
6.					
7.					
8. 10/5/25		10/5 1.4mg	9/5 Nilota	Peg lunase 1000 IU/m2 1750 IU	(Not given
9.					
10.					
11.					
12.					
13.					
14.	16/5				
15.		17/5 1.4mg	17/5 Nilota		
16.					
17.					
18.					
19.					
20.					
21.					
22.	27/5	27/5		Peg lunase 1000 27/5 IU/m2 1750 IU	27/5 1dy DNR
23.					
24.					
25.					
26.					
27.					
28.		3/6/25 8			
29.					
30.					
31.					
32.					
33.					
34.			10/6/25		
35.					

In case using conventional L-asparginase 10,000units/IM sqm,to administer on days 8,10, 12,14,16,18,20,22,24

LMN

DB CSF :- Occasional Reg cells
LMN cells.
PS → No Blast
TLC → 2160.
Cytopath :-

ECHO :- N
FISH :- Negative.
Karyo :- 46XY[09].

EOI BMA MRD - Negative

E01. MA, Negative

UHID : 108254738

Ht = 132 cm

Wt = 23 kg

BSA = 0.92 m^2

Intermediate risk Consolidation

Eligibility ANC>750/cumm, platelet >75,000/cumm

Day	Cyclophosphamide 1000mg/sqmIV 30mts (900mg)	Cytarabine 75mg/sqm IV (68 mg)	6-MP 60mg/sqmPO	ITM (Age appr)
1. 16/06/25	1 day	17/6/25 (due)	~~18/6/25~~	
2.		~~18/6/25~~ Amrf	~~19/6/25~~	
3.		~~19/6/25~~ Amrf	~~19/6/25~~	
4.		~~20/06/25~~ Amrf	~~20/6/25~~	
5.			~~21/6/25~~	
6.			~~22/6/25~~	23/6/25 Amrf 23/6/
7.			~~23/6/25~~	
8.		~~24/6/25~~ (due)	~~24/6/25~~	
9.		~~25/6/25~~ Amrf	~~25/6/25~~	
10.		~~26/6/25~~ (due)	~~26/6/25~~	
11.		~~27/06/25~~ Amrf	~~27/6/25~~	
12.			~~28/6/25~~	
13.			~~29/6/25~~	
14.			~~30/6/25~~	02/07/25 Amrf
15.	~~02/07/25~~ Amrf	~~04/07/25~~ Amrf	~~1/7/25~~	
16.		~~05/07/25~~ Amrf	~~2/7/25~~	
17.		~~6/7/25~~ Amrf	~~3/7/25~~	
18.		~~7/7/25~~ Amrf	~~4/7/25~~	
19.			~~5/7/25~~	
20.			~~6/7/25~~	
21.			~~7/7/25~~	
22.		27/7/25 Amrf	~~8/7/25~~	
23.		~~28/7/25~~ Amrf	~~9/7/25~~	
24.		~~29/7/25~~ Amrf	~~10/7/25~~	
25.		~~30/7/25~~ Amrf	~~27/7/25~~	
26.			~~28/7/25~~ 2	
27.			~~29/7/25~~ 2	
28.				

CSF → Acellular

25 → (x) cytopath (MDNCC 18)

प्रयोगशाला अर्बुद विज्ञान, डॉ भीमराव अम्बेडकर संस्थान रोटरी कैंसर अस्पताल अखिल भारतीय आयुर्विज्ञान संस्थान नयी दिल्ली -110029

LABORATORY ONCOLOGY , Dr B.R.A. Institute Rotary Cancer Hospital All India Institute of Medical Sciences , New Delhi-110029

UHID:	108254738	**Reg Date :**	15/04/2025 02:18 PM
Patient Name :	**Mr. BHAWIK .....**		
Sex :	Male	**Age :**	9 years 4 months 4 days
Department :	DEPT. OF EMERGENCY MEDICINE	**Unit Name :**	Unit-I
Unit Incharge :	Dr. Rakesh Yadav	**Sample Collection Date:**	19/08/2025 10:19 AM
Lab Name:	Lab Oncology	**Sample Received Date:**	19/08/2025 03:03 PM
Lab Sub Centre:	Lab Oncology (IRCH)		
Dept / IRCH No:	20250300094561	**Recommended By:**	Dr. NISHITA PUROHIT
Lab Reference No:	2525		
Ward Name:	DAY CARE PEDS MCH GF /40		

Sample Details : LOI-190825077-PS (Blood) / Report Date: 20/08/2025 11:51 AM

PS

WBC :

N 3/25 L 15/25 E M 7/25 B Meta Myelo Pro

Blast Others

Cell Morphology

RBC: Ncyt + Nchrom + Aniso + Micro + Macro Polk + Elipto Dachro + Schisto Acantho

Crenat Sphero Blister Bite Hypo + Target Polychr

Anisochrom Nucleated RBC 1/25WBCs

HJ Body Baso Stipl Cabot ring Parasite Rouleaux Agglutination

Others

PLATELETS: reduced.

Notes: Pancytopenia.

Senior Resident: Dr Komal

Consultant: Dr Ritu Gupta

This is an electronically generated report, authorized signature is not required. The test reports have been authenticated. Partial reproduction of the report is not permitted.

(Dr.RituGupta)

Authorized Signatory

(drkomalirch)

Verified By

**********END OF THE REPORT**********