



TO
MISSION HOPP

Kindly arrange the following drugs for the pt. Tarun,
64-1M/10205/ B Cell ALL (IP). 130180/10205/KSCA

- ① sup lavera (100mg/1ml) x 1 month
② Furosemide (200) 1 tab PO BD x 1 month
③ Im Doxorubicin (10mg/vial) 2 vial

Thanks

D. Argha
Senior Resident
Department of Radiation
Lady Harding
Kalewadi Saran
No.

शनिवार
से 11:30 बजे
DAY / SATURDAY
10 to 11:30 AM

ओ. पी. डी. पर्ची / OUT PATIENT TICKET

क.स.बा.अ.-13 (संशोधित)
KSCH-13 (Improved)

कलावती सरन बाल अस्पताल, नई दिल्ली

KALAWATI SARAN CHILDREN'S HOSPITAL, NEW DELHI

दिनांक / Date 26 OCT 2018 यूनिट / Unit 107 दिन / Day

ओ. पी. डी. पंजी. सं. / O.P.D. Reg. No. 73626

नाम / Name Tarun आयु / Age 5y लिंग / Sex M

टीकाकरण विवरण/ Immunization Status

हेपेटाइटिस-बी, पोलियो Hep-B, OPV at Birth	
बी.सी.जी BCG	
डी.पी.टी, पोलियो, हेपेटाइटिस-बी DTP, Polio, Hep-B 1 st	
डी.पी.टी, पोलियो, हेपेटाइटिस-बी DTP, Polio, Hep-B 2 nd	
डी.पी.टी, पोलियो, हेपेटाइटिस-बी DTP, Polio, Hep-B 3 rd	
खसरा एवं विटामिन ए Measles Vitamin -A	
एमएमआर MMR	
डीपीटी, पोलियो (1 बूस्टर खुराक) DPT Polio (1 Booster)	
टाईफाइड का टीका Typhoid	
डी.पी.टी/ ओ.पी.बी-2 बूस्टर DPT Polio (2 Booster)	
अन्य Others	

वजन/ Weight

Hb - 13.5
TLC - 10390
ANC - 7410
Plt - 2.18 (U)
NW - 80.3

लम्बाई/ Height

B.P = 100/60 mmHg

B cell ALL (12) = progressive
encephalopathy = HTN (controlled) =
hypotensive (improved)
No fever x 1-2 days
leuko cytosis x 1-2 days
tachycardia x 1-2 days
No +ve x 1 day
passed urine when kept under observation
- oral acceptance fair -> tolerating feeds
-> being given by parents hand
डॉक्टर के हस्ताक्षर / Signature of Doctor

दिनांक / Date

ओ. पी. डी. पंजीकरण सं.
O.P.D. Reg. No.

प्रारम्भिक निदान पर्चा
Provisional Diagnosis Slip

केवल अस्पताल के प्रयोग के लिए
For Hospital Use Only

59

ओ. पी. डी. पर्ची / OUT PATIENT TICKET

क.स.बा.अ.-13 (संशोधित)
KSCH-13 (Improved)

कलावती सरन बाल अस्पताल, नई दिल्ली

KALAWATI SARAN CHILDREN'S HOSPITAL, NEW DELHI

दिनांक / Date 8/12/16

यूनिट / Unit

26

दिन / Day

ओ. पी. डी. पंजी. सं. / O.P.D. Reg. No.

117529

नाम / Name

Tarun

आयु / Age

5y

लिंग / Sex

M

टीकाकरण विवरण / Immunization Status

वजन / Weight

लम्बाई / Height

हेपेटाइटिस-बी, पोलियो Hep-B, OPV at Birth	
बी.सी.जी BCG	
डी.पी.टी, पोलियो, हेपेटाइटिस-बी DTP, Polio, Hep-B 1 st	
डी.पी.टी, पोलियो, हेपेटाइटिस-बी DTP, Polio, Hep-B 2 nd	
डी.पी.टी, पोलियो, हेपेटाइटिस-बी DTP, Polio, Hep-B 3 rd	
खसरा एवं विटामिन ए Measles Vitamin -A	
एमएमआर MMR	
डीपीटी, पोलियो (1 बूस्टर खुराक) DPT Polio (1 Booster)	
टाइफाइड का टीका Typhoid	
डी.पी.टी/ ओ.पी.वी-2 बूस्टर DPT Polio (2 Booster)	
अन्य Others	

B cell ALL (R) progressive
encephalopathy & HCN & hyponatremia
TBR

Adv

- Symplevia (100mg/1ml)
2ml TDS BID

- Tab Amoxycillin (200mg)
1/2 Tab TDS x 4 days.

Senior Resident
Department of Pediatrics
Lady Harding Medical College
Kala Wati Saran Children's Hospital
New Delhi - 110001

दिनांक / Date

डॉक्टर के हस्ताक्षर / Signature of Doctor

ओ. पी. डी. पंजीकरण सं.
O.P.D. Reg. No.प्रारम्भिक निदान पर्चा
Provisional Diagnosis Slipकेवल अस्पताल के प्रयोग के लिए
For Hospital Use Only

छुट्टी की पर्ची Discharge-Slip
कलावती सरन बाल अस्पताल
Kalawati Saran Children's Hospital

बंगला साहिब मार्ग, नई दिल्ली-110001
Bangla Sahib Marg, New Delhi-110001
दूरभाष / Tel. No. : 23344160, 23344162-65

यूनिट Unit U2C5 सी.आर. नं. C.R. No. 13712

नाम Name : Tarun

आयु Age : 21/5/78 लिंग Sex : M

पता Address : Shamshabad colony, Palwal, Haryana

भर्ती की तारीख :
Date of Admission 7/6/16

छुट्टी की तारीख :
Date of Discharge 27/8/16

निदान

Final Diagnosis : B cell ALL (IR), E Proximal Encephalopathy &
Hypertension (controlled) & Hyponatremia (resolved)

Anthropometry

Wt. at Admission 12.6 kg

Wt. at Discharge _____

Height/Length _____

Head Circumference _____

Nutritional Status _____

Immunisation

BCG

Penta/DPT/OPV 0 1 2 3 B1 B2

Hep. B 0 1 2 3

Measles/MMR/Typhoid

TARUN

Biochemistry Sheet

Date	Na/K	Urea/Creatinine	Bil (T) Direct/ Indirect	OT/PT	Uric acid	Ca ²⁺	IP
24/7	121/4	22/0.3	0.3/0.1	45/52	-	4.4	
28/7/16	112/3.2					4.2	
23/7/16	118/3.8					3.8	
29/7	117/3.9	10/0.2				3.9	
2/8/16	111/4.1	15/0.3				2.9	
3/8	112/3.8					4.3	
3/8	146/3.2	28/0.6	0.6/0.2/0.4	14/99		4.4	
4/8	126/4.6	25/0.6				4.3	4.5
5/8	118/4.6					4.3	
5/8	113/4.3	13/0.5				9	
8/8	113/3.6	13/0.2	0.2/0.1/0.1	37/42		8.5	3.8
	chloride → 76			Alb → 153			
9/8	117/4.4					8.5	
10/8	126/4.3	17/0.2	0.3/0.1	30/42/156		8.5	
11/8	125/4.4	14/0.3	0.5/0.2	34/39/132		8.1	
21/8							
22/8	158/4.6	19/0.2	0.4/0.2	23/34/131		4.1	
23/8	142/4.1	20/0.3	0.3/0.1	30/36/92			
25/8	140/4.2	24/0.3	0.3/0.2	27/20/106		4.3	
26/8	144/4.3	18/0.3	0.4/0.2	22/20/106		4.1	

ACP

129

215

T.Met
4.6

0-p-65

Cl⁻
80

Inw. sheet

- 1 - Sr. Osmolality - 241
- 2 - Ur. osmolality - 430
- 3 - S. Na - 119
- 4 - Ur Na - 135

5. Rickettsial Serology -ve

6. CSF analysis

- cyto - clear
- cyto malignant cells - clear
- 20/6 - S/P - 101/25
- 9/6 - CSF
- 20/6 - Cryptococcus - India ink (-ve)
- HSV
- Acanthamoeba (-ve)
- Naegleria (-ve)

Tarun

8/6/16

BDCS

- CONS

③ - Amikacin
Vancomycin
Linezolid

④ Tetracycline
Chloramphenicol
Ciprofloxacin
Penicillin
Erythromycin
Trimethoprim
Sulfamethoxazole

16/6 - BDCS Sterile

21/6

ANA - negative
RFA - negative

13/7

Sr Osmolality - 459
Osmolality - 1154

⑦ RBS → 82 mg/dl

⑧ Urine dipstick - Glucose ++ | Ketone +/-
Alb - | Blood - | Red sub -

⑨

दिनांक

Date

17/9/16

Hb - 14.0

TLC - 10480

ANC - 6770

Plt - 2.10 (L)

MCV - 85.7 fL

Hct - 122800

Adv

- Chest & limb physiotherapy to cont as adv

- No feeds 200ml q 2hly (i added on)
as adv

- Position change q 2hly

- Skin & eye care as adv and oral care

↓ - Sympetran (20mg/15ml) 6ml BD
(@ 5.0mg/15ml)

↑ - Sympetran 2.0mg TAB (@ 4.0mg/15ml)

- T. Envars (2.5mg) 1 tab BD (@ 0.35mg/15ml)

~~- T. Abetalol (100mg) 1 tab BD (@ 1mg/15ml)~~

- T. amlodipine (5mg) 1 tab BD (@ 0.7mg/15ml)

- entomozidene MWT candied MP

↓ Tab Abetalol (100mg) ! — 1/2 tab
for (@ 1.0mg/15ml)

- Ew after 2w

Mon 29/9/16

BP - 110/60mmHg

26/9/16

Severe neck dip

- GSR
can
spontaneous
BOLs
seen
UL

Bleed ALL (12) = progressive encephalopathy
 HCN (controlled) = hyponatremia (improved)

दिनांक

Date

14/10/16

w 16kg

- no fever complaints
 - 40 Redness / Bruises - on 2 of
 tolerating feeds well / given by parents via NG.
 spontaneous eye opening and limbs movement (4)

Hb - 12-1
 Tlc - 6520
 ANC - 4200
 Plt - 1.51 @
 MCV - 78.3 fl.

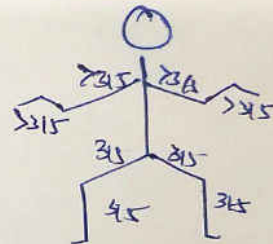
Na/K - 130/4.2
 Cr - 9.4
 urea/mu - 15/0.2
 Bil - 0.2
 AST/ALT - 32/48
 ALP - 154.

AE stable
 PR - 100/1M
 RR 25/M
 RR palpable grade 1/6
 RR in situ

CNS - E3 V1-2 M4
 tone @ / +
 DTR ext
 plantar ++

CVS / pulm - WNL
 P/A synom feeds
 L-2cm
 S-NP

Bp: 106/70mmHg (95-99th centile)
 (90-95th centile)



Medications checked

Tab enalapril (5mg) 1 tab AD
 @ 0.62mg/kg/d
 Tab amlodipine (2.5mg) 1 tab AD
 adv (5mg) @ 0.3mg/kg/d
 Tab labetalol (100mg) 1 - 1/2
 @ 10mg/kg/d

Adv

Adv
 - ~~adv~~ syp eptoin 4ml AD @ 3mg/kg/d
 - syp levamisole 2ml AD @ 37.5mg/kg/d
 - T. amoxicillin (250mg) 1 tab AD @ 0.6mg/kg/d
 - T. amlodipine (2.5mg) 1 tab AD @ 0.3mg/kg/d
 - T. labetalol (100mg) 1 - 1/2 tab
 @ 10mg/kg/d

R/w after 2wks 27/10/16

- NG feeds as adv.
 - chest & limb physiotherapy as adv
 - eye (1 skin) oral care as adv
 - chlorhexidine mouth/candida swab
 - Cxld toonz 1.02g/ml / baculact as adv

दिनांक

Date

post nebulizer - 12 PM

PR - 3 PM

check BP & RR

Posterior

nebulizer

Adv

- Temp chart
- Syp PCM 10ml SOS (Leva 100%) (12mg/5ml)
- Syp armain (2mg/5ml) 5ml TDS x 5 days
○ — ○ — ○
- Syp amoxycillin (200mg/5ml) 5ml TDS x 5 days
○ — ○ — ○
- Lt Syp opton 4ml BD
- Syp leuca 2ml TDS (@ 37.5mg/kg/d)
- T. envars (2mg) 1 tab BP (@ 0.6mg/kg/d)
- T. amloclipine (2.5mg) 1 tab BP (@ 0.3mg/kg/d)
- T. lobet (100mg) 1 — 1/2 tab (@ 1mg/kg/d)
- NG feeds as adv
- Chew 2 knob PT as adv
- eye / nose & oral care as adv.
- Chlorzidene MW / Cardiol MP
- eld tubex / RPT get / laungu as adv
- RW after lue.

1

दिनांक

Date

OE AC 4m

HR - 130/M

RR - 48/M

Mild ICR ent

PP palpable good volume

BP - 100/60 mmHg bel 50-90 mm
center

SpO₂ & RA 94-96

NG in situ

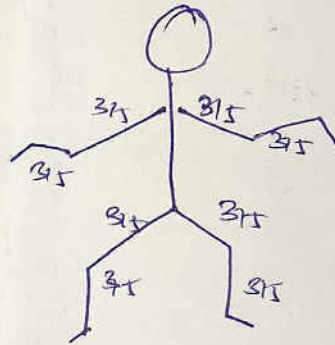
CNS - E3V1 MA

tone @ Lt

Power

DER ent

Plantar 4+



AK SIS ent

Uter - BULGE

Emchient

exempt ent

Plu on non tender

L2cm

SNP

Adv

Not i salt 2.5m in 3m at 0, 20, 40 min

↓

Reactive

per neb HR - 130/M

RR 49/M

Chel - BULGE

Emchient

Adv per neb i salt 2.5m in 3m at 0, 20, 40 min

रोग का संक्षिप्त विवरण / Brief Clinical History & Examination :

Detailed summary attached as a separate sheet.

जांच / Investigation :

Detailed investigation sheet attached as a separate sheet.

Investigations before Discharge :-

• Hb - 13.8
• Tlc - 10,390
• RBC - 4.6 Mm
• Hct - 39.4
• Plt - 2.75

• More Anemia
• Platelets adequate
• no Bleeds

• WBC - 14214.8

• Baso - 30/10.4

• S-X710 - 0.6/10.4

• S-X1107 - 34/196

• MR - 130.

• HIV - non-reactive

• BMA (14/6/16) - no 579/16
- in Remission

• Rickettsial Endox - negative

• ANA - negative

• Salm - 450

• U-GM - 1114

• RA - factor - negative

• CSF - no
• Staphylococcus
• neg } negative

किया गया उपचार / Treatment Given :

① Augmentin D10.

② Neb & Salsol.

18/11/24

No fever, ~~cough~~ cough ↓

BP-106/70
wtg

CVS-S, L

Chest B/L R/L

CS+

IP S, H, NT, ASD

L/NP

CNS E3 V4 M4
T ↑ in all
P > 37.5 °C
4 hr
BTL

Adv

- CST
- eye care
- eye care

छुट्टी के समय परामर्श / Advise on Discharge :

- ① Sup eptoin 4ml BD
- ② Sup. Laveria 2ml TDS
- ③ T-emvan (2.5) 1hr BD
- ④ T. Amlodipine (2.5mg) 1hr BD
- ⑤ T. lobet (100) 1-1/2 tabs
- ⑥ NG feed as advised
- ⑦ Chest PT / position change
- ⑧ ~~Candid~~ Candid MP
- ⑨ eld ART gel / lacrigel & eye care
- ⑩ NV after 1Wk
- ⑪ T-bact oint for local applic

छुट्टी के बाद ओ.पी.डी में / पर सुबह 9.00 बजे कमरा नं. में आएंगे।

छुट्टी के बाद स्पेशल क्लिनिक में 2.00 बजे कमरा नं. में आएंगे।

अगला टीकाकरण तारीख

वरिष्ठ रेजिडेंट चिकित्सक के हस्ताक्षर
Signature of Senior Resident

कनिष्ठ रेजिडेंट चिकित्सक के हस्ताक्षर
Signature of Junior Resident