

YOUTH HELPING TRUST HELPING TRUST HELPING TRUST



HELP THIS BABY TO SEE THIS WORLD AGAIN

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YOUTH HELPING OUTRUSELPPINGOUTRUSELPPING TRUST



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Department of Pediatrics  
Division of Pediatric Oncology  
All India Institute of Medical Sciences, New Delhi

2nd copy  
GK-54150  
P&D



शरीरमाद्यं खलु धर्मसाधनम्

Patient Note Book

Name : RIDHI KUMARI

UHID : 105481995

Diagnosis: B/L RB  $\left\{ \begin{array}{l} \text{L} \rightarrow \text{EORB group E} \rightarrow \text{Enucleated (10/12/21)} \\ \text{R} \rightarrow \text{EORB} \rightarrow \text{Enucleated (5/11/24)} \end{array} \right.$



- 20/11/24
- No fresh complaints
  - Parent counselling done regarding mouth care, Nail care, Skin bath.
  - On Septoran (all)

B/L RB - (E) group E → enucleated (10/12/21)

(D) group D → EORB enucleated (5/11/24)

URGENT ←

4 Cycles

↓

EORB 4057

plan

c/D/w DR

Rachana maam

RB gene 1

to proceed

~~2nd~~ cycle of ARET

3rd post 4 cycles

↓

EBRT

11-7 > 2880 < 2-32L

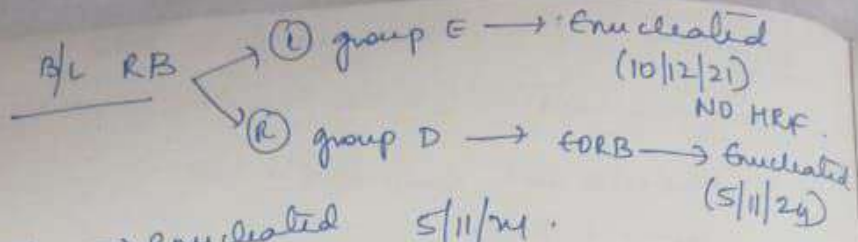
ANC-1660

RET/LET → (N)

To proceed with cycle 3 ARET

- DO
- Inj Emecet 3mg IV
  - Inj Dexa 3mg IV
  - Inj Pantop 15mg IV
  - Cap Aprecap 80mg
  - 1 cap D1
  - 1/2 cap D2 D3

18/11/21



② eye → enucleated 5/11/24

HRF (+) ⇒ poorly differentiated RB, large areas of necrosis along  $\bar{i}$  calcification.

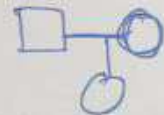
\* Maximal chorioidal invasion.

\* ON retrolaminar region is involved by tumor cells but cut end is free.

- sclera, iris, ciliary body are free.

Chemo so far → 6 # HDCEV  
6 # Augmented

③ # ARET  
↓ cycles [Augment Septin]



To discuss to malan

① Further cycles of chemotherapy

② RB gene testing

③ Role of EBRT ? familial RB but eORB.

④ last chemo → Sept '24' (20/1/24).

⑤ CBI/LFT/RFT ; Daycare ARET protocol

⑥ r/v 20/11/24 → at Goro (Shramani).

Shramani  
at Goro

(Father's brother had blood cancer @ 34yrs expired)

25/9/24

S-B/L RB  $\left\{ \begin{array}{l} \text{RPGD} \rightarrow \text{EORB} \\ \text{E-ape} - \text{Cancelled P} \\ \text{on } 10/12/21 \\ \text{R}^+ \text{ P/S\#(EV(10));} \\ \text{NOT RF} \end{array} \right.$

~~ARBP~~ lost 1<sup>st</sup> ARBP  
- 2<sup>nd</sup> # - ongoing w.e. + 18/9/24  
Due for week 7 VCR

24/9  
7.7  $\left\{ \begin{array}{l} 7980 \\ 7580 \end{array} \right. \left\{ 1.38 \right.$

Adv

2<sup>nd</sup> VCR 0.7mg slow sup  $\rightarrow 26/9$  #110  
Epic septum as advised  
- N/V POC 7/10/24 @ 2pm with  
CBC/LFT

Dr. Anjali Bhasin  
Senior Resident  
Pediatric Oncology  
Department of Pediatrics  
All India Institute of Medical Sciences  
New Delhi - 110029

24/10/2024

PSCC clinic → to (45) re films

RC discussion:

(MRI done on 23/10/2024)

↓  
globe size used, mass led in size

ON → atrophy

enhancement in ON head region → can enucleate.

Adv

- (RPC) → to committee for urgent date for enucleation

- To (45) in POC clinic at 2pm on Monday. 28/10/2024.

28/10/24

Enucleation planned on 2/11/24 Sumera



f/u 6/11/24 or 9/11/24

*[Handwritten signature]*

Advise

① To RW on Wed 9/10/24  
9AM

z CBC/SEKFT LFT

and decide for  
administration of cycle ③

AREY (prior to MRI)  
or post

② TIC oral septan as advised.

Nikita

9/10/24

Date on Septan

MRI d/t 23/10/24

No recent counts

Coordinate z Daycare team if MRI done on 23/10/24

↓  
to keep for re disc<sup>n</sup> on 24/10/24

AU PASC - 24/10/24 z CBL

2pm ↓ RFT/LFT

to plan for subsequent therapy  
Sx/chemo as per MRI report

CADP provisionally  
d/t 25/10

Cyclophos d/t 26/10 - 27/10/24



→ Post CT → 1nj GCSF 70ug sc od (D3 till ANC  
recovers)

→ Review in daycare for date of chemotherapy  
[3<sup>rd</sup> cycle of ABST]

30/11/24  
9AM  
c

Japan virus

\* - VCR → 29/11  
6/12



30/11/24  
Counselling done  
2 gargle with betadine  
gargle 2x  
- Sitz bath  
- personal hygiene  
No fresh complain  
due for next cycle.

ANC - 130  
Platelet - 60K.  
On Septan A/D.  
(protocol photocopy)



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL

बहिरंग रोगी विभाग / Out Patient Department

अस्पताल को अन्दर प्रवेशन मना है / entrance is PROHIBITED IN HOSPITAL PREMISES



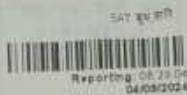
राज्य चिकित्सा विभाग  
LHID-105481995  
ABHA  
Dept No: 20210030006808  
RIDHI

कक्ष / Room  
C-210  
Queue / संख्या  
F50  
Unit-III, Paediatric

OPR-6

डॉ० वि० पंजीकृत सं० / O.P.D. Regn. No.

डॉ० ANAND KUMAR TIWARI  
BYOM 230 / F50 (R10)  
W/O: PURAS, BALLIA, UTTAR PRADESH,  
INDIA  
Ph: 2658843243 General: Rs. 0  
Follow Up Patient



आयु Age	पता / Address

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

7  
13 July

F/U 9/9/24 POC 2pm

CBC  
RF1 / LFT

LC0909243101  
LH09092402245 105481995



RIDHI



www.ori.org.in

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प  
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O.R.B.O., AIIMS, 26588360, 26593444, www.ori.org Helpline - 1060 (24 hrs service)



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



भारत चिकित्सा विभाग  
UHID: 105481995  
ABHA: 92018@abdm  
Dept No: 20210030006508  
Clinic No: 331/2021

कक्ष / Room C-210  
Queue / संख्या F24  
Unit-III, Paediatric

ADMITTED IN HOSPITAL PREMISES

OPR-6

रिडि / RIDHI

डिपेंडेंस नं० / D.P.D. Regn. No.

D/O ANAND KUMAR TWAR  
SY 11M 1D / F (महिला)  
VPO- PURAS, BALLIA, UTTAR PRADESH  
INDIA  
Ph: 8896643243 General Rs. 0  
Follow Up Patient

SAT सुषमणि



Reporting: 08:58:40  
13/07/2024

उम्र / Age

पता / Address

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

20/07

N/V 20/07/24

14.8kg

CBC/LFT/KFT.

UHID: 105481995  
ABHA: 92018@abdm  
Dept No: 20210030006508  
RIDHI

Queue / संख्या C-210  
F55  
Unit-III, Paediatric



Dr. Anilash  
DM Resident  
Paediatric Oncology  
DMC-2021  
AllMS - New Delhi

D/O ANAND KUMAR TWAR  
SY 11M 8D / F (महिला)  
VPO- PURAS, BALLIA, UTTAR PRADESH,  
INDIA  
Ph: 8896643243 General Rs. 0  
Follow Up Patient

SAT सुषमणि



Reporting: 08:25:45  
20/07/2024

9/5

14kg

delay in note has  
plz



CLEAN AND GREEN AIIMS / दूध का घड़ी सफाया, स्वच्छता से काया बरसे  
अंगदान जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE  
O.R.B.O., AIIMS, 26588350, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



2.10.24 - GCSF - well  
 (75mg)  
 3.10.24 - GCSF - well  
 (75mg)  
 4.10.24 - GCSF - well  
 (75mg)  
 5.10.24 - GCSF - well

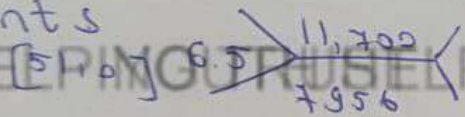
[11/12/24] day care

② EORB | post cycle ② ARET  
 (non metastatic)  
 ssis:

[18/9 - 20/9] [26/9 - 30/9]  
 [00 - 02] [07/10]

• clinically well

counts



~ RUCD PRBC  
 today

• RTx registration  
 done today ✓

May dated for ~ 23/10/24  
 response  
 assessment

due for cycle ③ ARET<sub>7</sub> ~ in and week  
 of October

1/10/24

DANCER

C10 - BL RB

(X) EORB

(W) group EB  
(E nucleated)

Hb: 4.3

TC: 1100

N-32

PC: 65000

L → 63

E-2

→ no fever -  
→ had poor oral intake

HR: 140

RR: 28

PP 77/14

→ RS: PE = B3 clear

CVS: S1S2 heard

PA: soft w

CNS: ACS 15/15

SPO2: 99%

Adv

pallor (+)

IV dasix 7.5mg stat

- To transfuse PRBC 150ml over 4 hours

- to transfer to Emergency

6

to request PRBC transfusion  
OR pediatrics

