





Notears
FOUNDATION

**Help For Underprivileged Children
For Their Medication And Education,
Women Empowerment,
Promoting Transgenders And Animal Aid.**



Email : info@notears

90

notearsfoundation.com



CW-92683

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



सन्तीरमाद्यं खलु धर्मसाधनम्

Patient Note Book

Name : Ansh Raj

UHID : 107675514

Diagnosis: Paraneoplastic RMS

in Pediatric Casuality

→ Case / ~~case~~ discussed with ENTJR on call, to send child to Pediatric Casuality for ENT evaluation.

→ CBC
→ LFT / KFT.] in Ped Casuality

→ Ped Onco sk will review.

Manasee



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

→ n/v

- 23/10/24

- 2x Betadine gargle
- sitz bath
- Not taking sepham.
- On IV antibiotics.
- Pharyngopexy.

* ENT evaluation done on 21/10/24 in casuality

↓
advised for CECT head +
CEMRS brain + face

flb followup in ENT OPD

• local dressing in ENT minor OT on Friday

→ no fresh issues

Adv

1. G. 4m PIPTA 2 | TELLOPLANIN

D₈

D₈

imv

(2/10) CBC: 10.0
4030
2360
4376
17

• P.T.O

16/10/24

Counselled on
gargle/sitz bath/
personal hygiene -
No fresh complain
Not taking septran
(plectol photography)

Parosmeringol RUS/9C extension post RT

→ Neurosurgery opinion to be taken

RT given 50.26/1244
29/8 to 01/10

* 1° site wound + fungating mass
↓
pus discharge ⊕

→ no fever / other fresh issues

C/d/w Avg R. Setu
Adv

ctoma

received week 3 ctoma
on 12/10/24 (VAc)

1. Inf. Vch 0.85mg slow iv push
on 19/10/24

TC-4980

ANC = 3980 N-80%
ANC

2. continue iv antibiotics

- 4mj PIPITAZ 1.1gm iv q 8hrly

low
→ buy c/s from daycare

• canazole
• CBC

Hb: 6.8

plt: 463k

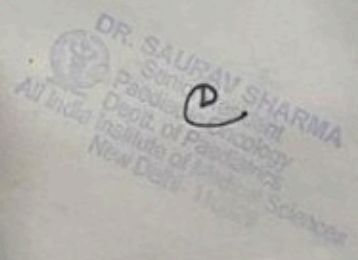
- 4mj TEICoplanin 110mg iv q 8hrly
24hr

PRBC - 19/10

3. Paediatric surgery opinion for wound care

u. Neurosurgery opinion for surgical intervention

S- MV on 21/10/24 15
P- 2hr POC clinic



cont medication for oral care

7/10/24

Parenchymal RMS (embryonal creplekhi) /
IC extension / Stage 3 Cr III / IR

CT - Till week 4. - 2 ^{small} ~~cycles~~ ^{renewed} (VAC + IV)

50.2 Gy [RT → 25 Gy / 10 # + 14 # ? - 28/8 - 1/10]
↓
29/08 to 01/10 | 24#
weekly VCR - 14/9, 21/9, 28/9, 5/10 - 4 doses

Neurotic myent man & foul smell @

No bleeding, dysphagia for mastic man @

Hemodynamically stable

Adv:

→ Perf Sp reex

- Syb denoflap 2.5ml O D

- Syb Mchogyl (5ml = 200mg) 4ml 8hly

- clearing of tee covered reex ^{degree del}

- Rx & CBC / UFT / KFT - shrt w/ VAC fwa.

12/10/24

- septer prophylaxis

- F/U & CBC / UFT / KFT on 9/10/24.

Dr. Amitabh

DM Resident
Pediatric Oncology
AIIMS - New Delhi

Plan

→ do PET next week

- send oral swab for ~~ms~~ KOH stain + Tzanck smear.

- To start oral Acyclovir

→ start ~~A~~ deoxiflox
Metronidazole
Acyclovir
↓
|| do oral mucositis

→ iv vincristine 0.85mg stat

11ug → syp Acyclovir 400mg/5ml
2.5ml QID (4 times a day) x 7 day

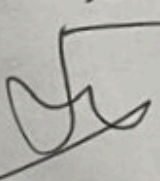
→ put NG tube for feeding

→ ~~S~~ T. deoxiflox 250mg
1/2

→ syp Metronidazole 400mg/5ml
1.3ml | 1.3ml | 1.3ml } x 7 day

→ fu on 5/10/24 for review

- to take date for PET scan


Dr. Rema
for Pedonco

28/9/24

C10 parameningeal RMS
E Intracranial extension

stage 3 | group 3 | IR

Ⓛ INPP.

- on RT since 29/8/24

~~varied RT~~
196#
22 cycles

no fever currently
no cough / cold
- no vomiting

→ poor oral intake

CBC on 25/9/24

Hb : 7.6
WBC : 7200
ANC : 5970
PC : 4.61

HR : 100

RR : 26

Sp O2 100

→ RS: OE = BS clear

CVS: S1 S2 heard

PA: soft

CNS: ACS 15/LS

on fluconazole
for 7 days.

→ throat: ~~or~~ oval ulcers (+)
white patch (+).

Ⓡ preauricular +
postauricular mass } foul smelling
discharge.

21/9/24

PM - RMS \bar{c} Intracranial extension

Stage 3 | group 3 | IR

↓ RT \therefore (29/08/24)

c/o (R) cheek swelling

o/e mild swelling (+)
no tenderness

2 white plaques (+)

? Radiation induced / fungal mucositis.

No fever.

19/9

7.6 / 6120 / 3.92L
4930
(PMN = 80%)

plan

① Zylet gel 4A TDS

② candid mouth paint 4A TDS

③ T. FLUCONAZOLE
(IT = 150mg) 1/2 Tab
OD x 7 days.

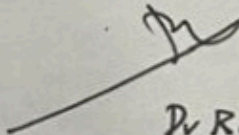
④ Inj VCR 0.85mg IV
slow push weekly.

⑤ N/V 28/09/2024 \bar{c}
CBC/LFT/RFT

Shravan
SR POC.

Adv

- To do CBC & fu on 24/8/24 to OPD at 9am
- to stop IV Antibiotics
 - BB Blood culture sterile
 - NO fever for 48 hours
- IV vincristine 0.7mg (75% dose) to be given on 24/8/24
- to come to POC clinic today at 2pm
- to expedite RT date


Dr. Rema

DR. Ped onco



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

24/8/24

Non-metastatic Parameningeal RMS with Extensive extension.

Group III

~~second~~ week of VCR done today.

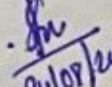
Stage 3

RT planned from 28/8/24 at Betra hospice

KFT/LFT - @

CBC

Adv Collect CBC inpt.

→ Iq VCR 0.7 mg IV Push. 

- Continue dexamethasone prophylaxis

- Young eye - Anaplastic
TPS3 mutation study. } → day care
27/8/24



Dr. Amitabh
DM Resident
Pediatric Oncology
DMC - 52071
AIIMS - New Delhi

To

SR (Cousin)


Radiotherapy

IRCH

1/10 parameningeal Rhabdomyosarcoma
Intracranial extension, kindly consider for urgent

Radiotherapy


Dr. Rema

 **Dr. Rema Kurade**
Senior Resident
DM, Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi-110029

Dr. Anshu Sethi

of non metastatic

-1 Urgent RT required → Tried at Redeshan oncology -
detected

 **Dr. Anshu**
DM Resident
Pediatric Oncology
DMC - 52671
AIIMS - New Delhi

Consultations

Ht: 108cm
 wt: 12kg
 BSA: 0.52

Plan

wt at 3rd centile

- 1) IV Emetet 2mg + Dexamethasone 2mg stat
- 1) IVF DNS + 1:100KCl at 70ml/hour (prechemo (total 600ml) 2hour prehydration)
- 2) IV VINCRISTINE ~~0.85~~ 0.7mg (75% dose) 4 hours post
- 3) IV ACTINOMYCIN-D. 0.4mg " } slow iv push
- 4) IV cyclophosphamide 440mg in 200ml NS over 1 hour

5) IV MESMA ~~150mg~~ 150mg in 50ml NS at 0 hour
 2 hours
 4 hours

from 12/8 13/8 14/8 15/8 16/8 } 4 CSF 60mcg
 12/8/8
 Emetet 2mg/5ml 5ml TDS
 Dexamethasone 4mg 1/2 TDS BD } x 3 days
 CPW = prof. R. sem mam

- to deduct previous cyclophosphamid dose
- start chemotherapy
- give 75% dose
- put NG tube for nutritional rehabilitation
- give RT consult for week ORT

→ fu m OPD (Poc) POC clinic at 2pm
 12/8/24

Diagnostic Work UP & Risk Stratification

3yr 6month old

3/17/24 Biopsy done slo. anaplastic embryonal rhabdomyosarcoma

6/8/24 CSF → few mononuclear cells.

CECT head : ~~para~~ IC extension of mass around
5cm
- cavernous sinus involved
front bone erosion

CECT chest - report awaited → Normal
bNA + BMA : done on 10/21/24 → report awaited
MR Bone marrow biopsy → Normal
BMA → Normal

Name of treatment protocol

C10 parameningeal RMS c IC extension c(⊗)INFP.
(middle cranial fossa and Rt temporal lobe)
Group III
Stage 3

Patient Details

Name: Ansh Raj

Age / Gender: 37 / m

Father's Name: Sagar

Address: Bihar

Contact No: 9334901329

POC / PCSC No.: 283/24

Diagnosis: Dms

Remarks:

- Accommodation
- Hygiene explained
- Thermometer (100 to 21. before going 30% bath)

HIV status: Neg

HBV 0: Neg

MT: 2

Anti-HCV: Neg.

Patient Details

Name : Ansh Raj

Age / Gender : 37 / m

Father's Name : Suresh

Address : Bihar

Contact No : 9334901329

POC / PCSC No.: 283/24

- Accommodation
- Hygiene explained
- Thermometer (by 10)
- 2- before going
- sitz bath

Diagnosis: Dms

Remarks :

HIV Status Neg

HBV 0 Neg

MT 2

DAT HIV - Neg.



संघीय गणराज्य

सं. 1
NO. 1

बिहार सरकार
GOVERNMENT OF BIHAR
योजना और विकास विभाग
DEPARTMENT OF PLANNING AND DEVELOPMENT
प्राथमिक स्वास्थ्य केंद्र मेजरगंज
PRIMARY HEALTH CENTRE MAZORGANJ

प्रपत्र-5
FORM-5

जन्म प्रमाण-पत्र
BIRTH CERTIFICATE

(जन्म मृत्यु रजिस्ट्रीकरण अधिनियम, 1969 की धारा 12 / 17 तथा बिहार जन्म मृत्यु रजिस्ट्रीकरण नियम, 1999 के नियम 8/13 के अंतर्गत जारी किया गया)
(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS & DEATHS ACT, 1969 AND RULE 8/13 OF THE BIHAR REGISTRATION OF BIRTHS & DEATHS RULES 1999)

यह प्रमाणित किया जाता है निम्नलिखित सूचना जन्म के मूल अभिलेख से ली गई है जो कि प्राथमिक स्वास्थ्य केंद्र मेजरगंज तहसील मेजरगंज जिला सीतामढ़ी राज्य/संघ प्रदेश बिहार, भारत के रजिस्टर में उल्लिखित है।
THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR PRIMARY HEALTH CENTRE MAZORGANJ OF TAHSIL/BLOCK MAJORGANJ OF DISTRICT SITAMARHI OF STATE/UNION TERRITORY BIHAR, INDIA.

नाम / NAME: अंश कुमार

लिंग / SEX: पुरुष / MALE

जन्म तिथि / DATE OF BIRTH:

05-01-2021
FIFTH-JANUARY-TWO THOUSAND TWENTY ONE

जन्म स्थान / PLACE OF BIRTH:

रेफरल अस्पताल मेजरगंज

माता का नाम / NAME OF MOTHER:

अनीता देवी

पिता का नाम / NAME OF FATHER:

सुजीत दास

आधार नंबर / MOTHER'S AADHAAR NO:

आधार नंबर / FATHER'S AADHAAR NO:

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

माता-पिता के स्थायी पता / PERMANENT ADDRESS OF PARENTS:

खाप,
खैरवा, मेजरगंज, सीतामढ़ी,
बिहारखाप
खैरवा/मेजरगंज, सीतामढ़ी,
बिहार

पंजीकरण संख्या / REGISTRATION NUMBER:

B-2021: 10-08407-000082

पंजीकरण तारीख / DATE OF REGISTRATION:

08-02-2021

टिप्पणी / REMARKS (IF ANY):

जारी करने की तिथि / DATE OF ISSUE:

08-02-2021

जारी करने वाला प्राधिकारी / ISSUING AUTHORITY:

रजिस्ट्रार (जन्म एवं मृत्यु)
REGISTRAR (BIRTH & DEATH)
प्राथमिक स्वास्थ्य केंद्र मेजरगंज
PRIMARY HEALTH CENTRE MAZORGANJ

प्रभारी चिकित्सा पदाधिकारी

उप रजिस्ट्रार (जन्म-मृत्यु)

प्रा० स्वा० केंद्र

रेफरल अस्पताल, मेजरगंज, सीतामढ़ी

UPDATED ON :
08-02-2021 13:40:25

"THIS IS A COMPUTER GENERATED CERTIFICATE WHICH CONTAINS FACSIMILE SIGNATURE OF THE ISSUING AUTHORITY"
"THE GOVT. OF INDIA VIDE CIRCULAR NO. 1/12/2014-VS(CRS) DATED 27-JULY-2015 HAS
APPROVED THIS CERTIFICATE AS A VALID LEGAL DOCUMENT FOR ALL OFFICIAL PURPOSES".

* प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH *





भारत सरकार

Government of India



अनीता देवी

Anita Devi

जन्म तिथि / DOB : 01/01/1990

महिला / Female



8737 2427 9287

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

अर्धागिनी: सुजीत दास, वॉर्ड 17,
विलेज खैरवा टोले खाप, मजोरगंज,
सितामढी, मजोरगंज, बिहार, 843332

Address:

W/O: Sujit Das, ward 17, village
khairwa tole khap, Majorganj,
Sitamarhi, Majorganj, Bihar,
843332

8737 2427 9287



1947
1800 300 1947



help@uidai.gov.in

WWW

www.uidai.gov.in