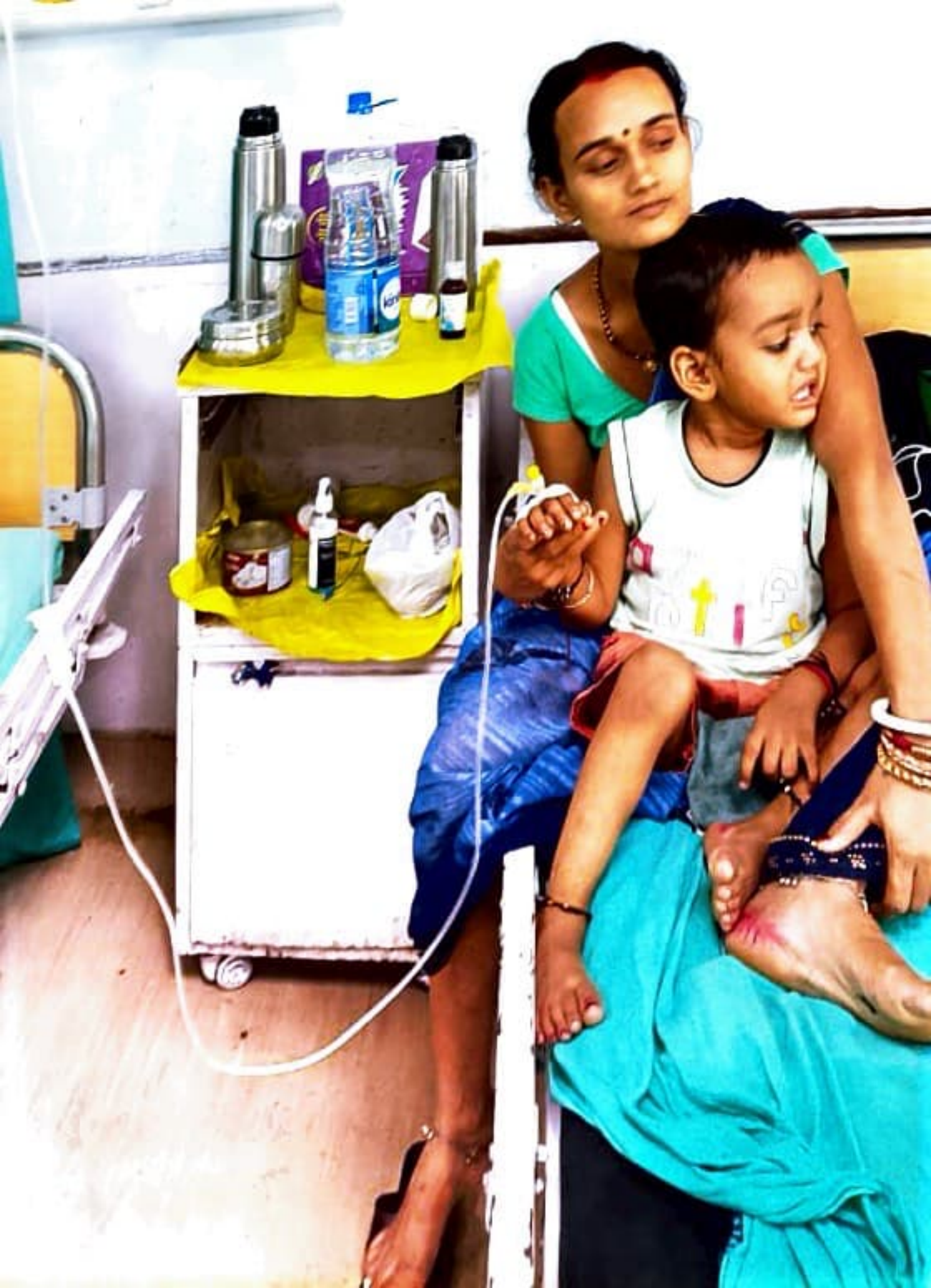

PH.: 011-23404040, 23365525

डॉ० राम मनोहर लोहिया अस्पताल, नई दिल्ली – 110001
DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI - 110001

बाह्य पंजीकरण कार्ड
OPD Registration Card

Prepared by:Mr. HEMANT KUMARSINGH RML
Mobile No.

पंजीकरण सं
No. 20240865293

दिनांक/Date 31-10-2024 12:32:59 PM

के० स० स्वा० यो० कार्ड सं.
CGHS Token No. :

Dept Reg No: 2024/026/0215807

Clinic : CASUALITY
Casualty

कमरा सं० /Room No. : Room Queue: Casualty Counter : 271

दिन /Days: MON,TUE,WED,THU,FRI,SAT

Name: NISHA Nishant

आयु /Age : 34Y वर्ष /Years

माह /Month

लिंग /Sex : Male

निदान
Diagnosis :

34/F

G Y R B
Presented c Similar C/o Y/N

k/c/o Wilms tumor

Admit ↓ P3B
↓ Dr. Alok Hemal Sir

GOVERNMENT OF INDIA
DR. RAM MANOHAR LOHIA HOSPITAL
NEW DELHI

REQUISITION PROFORMA FOR FREE SANCTION OF THE PAYABLE INVESTIGATIONS

Name of Patient: Nishant Age: 3y Sex: M CR/OPD No. 68714

Department: PAEDS Unit: B3R Indoor/Outpatient

Investigation/Procedure requested: CECT Abdomen

Clinical Details of the Patient: (L) Wilms tumor - received 4 weeks Adjuvant therapy

Justification for the Free Sanction

Dr. Bhanu Prakash
PG Resident
Deptt. of Paediatrics
ABVIMS & Dr. RML Hospital
New Delhi-110001

Signature of the treating HOD/HOU (With seal)

CERTIFICATE BY THE PATIENT OR ATTENDANT

I hereby declare that I belong to the below poverty line class and have no financial means to get the above prescribed investigation done by paying charges to the hospital. I request the authorities to sanction the same free of cost as a poor patient.

Signature/Thumb impression of patient/attendant

Full Name & Address: Nishant, Badarpur, Border, Jaitpur, Faridabad, U.P

CERTIFICATE BY THE HOD/HOU

On the basis of records shown to me, or the apparent financial condition of the patient I recommend that the above investigation may be done free of cost for this patient. This is also to certify that this investigation is absolutely essential for diagnosis/treatment of this patient.

Signature of HOD/HOU (with seal)

20/4/24

SANCTION OF THE COMPETENT AUTHORITY

On the recommendation of HOD/HOU, the Sanction for free investigation is accorded.

Addl. M.S. (With seal)

Sanction No. ....

Date ....

Preoperative Chemotherapy for localised Wilms tumor:

Week 1: Day 1: **Date:** 17/10/2024

Hb: 9.9 TLC: 10000 ANC: 4500 Plt: 2.6 L

Urea: 22 Creat: 0.30 Bil (T/D): 0.4/0.06 AST/ALT: 59/53

Inj. VINCRISTINE 0.8 mg mg iv slow push stat

Inj. ACTINOMYCIN D 500 mcg mcg iv slow push stat

Week 2, Day 1: **Date:** 24/10/2024

Inj. VINCRISTINE 0.8 mg mg iv slow push stat

Week 3, Day 1 **Date:** _____

Hb: ..... TLC: ..... ANC: ..... Plt: .....

Urea: ..... Creat: ..... Bil (T/D): ..... AST/ALT: .....

Inj. VINCRISTINE _____ mg iv slow push stat

Inj. ACTINOMYCIN D _____ mcg iv slow push stat

Week 4, Day 1: **Date:** _____

Inj. VINCRISTINE _____ mg iv slow push stat

M - D/ LHEH clear
others/E - WNL

Adv (…

D1 → Inj. Piptaz 12mg…

D1 → Inj. Amikacin 160mg

→ Orally allowed
→ Syp. PCM (125/5) 8…
→ Nasoclear drops 2 each nostril Q6hrly
→ V/M

Dr. Sunshine
PG 3

DR. SU… S

DE…
REMA…

Adv.

- HCT, cultures, CRP, PCT.
- chest xray, Enteric - IgM.
- urine R/M.

रा०म०लो०चि०-11
R M L H -11

लगातार चार्ट / CONTINUATION CHART

नाम/Name Nishant 34/ male   कमरा/शय्या सं/Room/Bed No 60-72296

तारीख/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
31/10 4pm	Arri → k/c/o left kidney malignant tumor stage II on Neoadjuvant chemo from 17/10/'.. ē Aft Leucotin	
31/10 c/o/w Dr. Shilpa many Plan — CBC — LFT/KFT/SE — GRP — Add Inj. Piptaz and Inj. Amikacin — w/H Vincristine — MCT	Issue at admission: 1. Fever since morning high grade / upto 100°C not a/w chills, rigors 2. c/o cold × 3-4 day no other complaints o/e GC - fair with HR-110/min BP- PR/RR +/N SpO₂ → % RA extremities CRT<3 sec P - 1-C-C-C-I-E P/A - Soft, NT, L-ND, S-NP, Left ... / move	

Biopsy/FNAC (if done):

.....
.....
.....
.....

ECHO: Ef - 65 % : Structurally normal heart

Viral Markers: NR Mantoux: Negative

Ped Surgery Consultation: T

Radiotherapy Consultation:.....

Localised/Metastatic: Localized.

Treatment Strategy:

Treatment plan for localised disease:

Weeks	1	2	3	4	Reassessment	5	6	7 onwards .....
Intervention	Pre op chemotherapy					Surgery		Post op Chemotherapy

Department of Pediatrics

ABVIMS & Dr RML Hospital

Wilms Tumor Protocol

Name: NISHANTH Age: 3 year Sex: Boy

CR No: 68764 Phone No:

Weight: 11.0 Kg Height: 93 cm BSA: 0.53 m²

Symptoms & duration:

Abdominal Mass palpable for 1 month.

Dysmorphic features: No dysmorphism, aniridia, hemihypertrophy

Hct: 32.1 PT/INR: INR-0.84 aPTT: 37.6

USG Abdomen:

Heterogenous hypoechoic - 7.3 x 4.5 x 4.6 cm lesion from lo
pole of Lt kidney i internal vascularity - No calcifi
Mild compression of renal pelvis. (N) Right kidney

CECT Abdomen:

Well Defined Left Renal mass arising from loco en po
Dilated intra lateral portion showing capsular invasion. N
vessel thrombosis

Renal Sinus Involvement: Not involved Pelvi-ureteric Involvement: Mild dilatation upstream dilatation in CL

Capsular penetration: (+) in inferior Lateral aspect Tumor rupture: No evidence

Lymph node: Not involved Opposite Kidney: Normal

Tumor volume: 119.2 c.c

Intravascular extension: Nil thrombus Extent:

CXR: Normal

CECT Chest:

No pulmonary nodules

Lung nodules: U/L – Right/Left or B/L Number of nodules: NIL

भारत सरकार/Government of India

ए.बी.वी.आई.एम.एस. एवं डा. राम मनोहर लोहिया अस्पताल, नई दिल्ली-110001
ABVIMS & Dr. Ram Manohar Lohia Hospital, New Delhi-110001

छुट्टी/मृत्यु की रिपोर्ट : Discharge/Death Summary

Ph: 011-23404040 23365525

केन्द्रीय पंजीकरण संख्या CR. No. 64445	विभाग/इकाई प्रभारी का नाम- Dr. A. Heral Deptt/Name of HOU - Dr. S. Khanna		वार्ड/सेवी कक्ष सं. Ward No. EC 3rd Floor
नाम Name Nishanth		आयु/लिंग Age/Sex 3y/Boy	एम.एल.सी. सं. MLC No.
सी.जी.एच.एस. सं. CGHS No.	भर्ती की तारीख Date of Admission 28/09/24.	छुट्टी/मृत्यु की तारीख एवं समय- Date & Time of Discharge/Death 07/10/2024.	

छुट्टी/मृत्यु का निदान-
Diagnosis on Discharge of Case History Abdominal lump ? evaluation
L.? Wilms Tumour.

मामले का संक्षिप्त सारांश-
Brief Summary of Case History

Nishanth was admitted with complaints of vague abdominal pain for 3 weeks - found incidentally to have Hypoechoic lesion - in lower pole of kidney with intern

जांचों का विवरण
Details of Investigation Vascularity.

O/E.

HR - 84/min
CRT < 3s.
PP/PV - +N
Ext - warm
RR - 28/min
PA - soft/Non distended
No hepatosplenomegaly
Left Lumbar mass palpable - ballotable measuring 5 × 5 cm in size.

CVS - (N) S1 & S2
No murmur.
RS - B/L AE (+)
NVBS.
BP - 87/61 mm Hg
MAP - 69 mm Hg

Urine R/M - WNL

10.1 | P600 | 2.42 L | 57/35

INR - 0.84
PT - 9.9 s.
Urea - 18 m
Creat - 0.1
DT/PT - 21
TB/DB -

Contin

विकिरण एवं प्रतिबिम्बन विभाग
DEPARTMENT OF RADIOLOGY & IMAGING

19/11/24
8:00

डॉ राम मनोहर लोहिया अस्पताल, नई दिल्ली
DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

Kindly get own USG before CT

Dr. Bondi (PC)
Dr. Pratima

सी.टी. मांग–पत्र
C.T. REQUISITION FORM

रोगी का नाम
Patient's Name: Nishanth.
आयु
Age: 8y
लिंग : स्त्री/पुरुष
Sex: (Male)/Female

डा.
Referred by: Dr. A. Hemal / Dr. Shilpa Khanna Arora. के द्वारा भेजा गया

बहि. रोगी विभाग/कें.स.स्वा.यो. संख्या
O.P.D. No./CGHS No.

पता
Address

कें. पंजीकरण सं.
C.R. No. 68764
वार्ड/शय्या
Ward/Bed: ECS 3rd floor.

टेलीफोन संख्या
Telephone No.
आय
Income

रोग वृत और स्वास्थ्य जाँच
Clinical History & Physical Examination: (L) Wilms Tumour – recieved 4 weeks of Neoadjuvant Chemo therapy.

अनन्तिम निदान
Provisional diagnosis

किस भाग की जाँच की जानी है
Area of particular Interest: Interim assessment CECT Abdomen To plan Surgical Excision (Nephro-ureterectomy vs. Radiation therapy)

अधिमस्तिकच्छदि
Supra Tentorial
दायां
Rt.
बायां
Lt.
मध्य
Midline

पश्चखात
Post Fossa
सी. पी. ए.
CPA
मस्तिष्क-स्तम्भ
Br. St.
ग्रीवा
CER

नेत्र गुहा
Orbit: CECT Abdomen.

क्या अंत: कपाल की पहले कोई शल्य चिकित्सा की गई है
Any previous intracranial Surgery
हां
Yes
नहीं
No.

अन्य परीक्षणों के परिणाम
Other Tests Results

कपाल का एक्सरे
Skull X-Ray
सी. एस. एफ.
C.S.F.

ई. ई. जी.
E. E. G.
कोई अन्य
Any Other

पिछला कैट स्कैन
Previous CAT SCAN

Kindly provide date between 18/11/24 to 23/11/24.

कृ.पृ.उ./P.T.O.