

CAUSELESS HAPPINESS ORGANISATION-REGISTRATION FORM

SPONERSHIP FORM FOR FINANCIAL ASSISTANCE FOR MEDICAL TREATMENT

PATIENT REG NO : CHO/585/

DATE : 25-07-2026

BENEFICIARY DEMOGRAPHY

PATIENT'S NAME :SHIVANSH

AGE: 02 yrs

RELIGION : HINDU

GENDER :MALE



PATIENT'S FAMILY DETAIL (IN MIN 30 WORDS)

Kindly support Master Shivansh, battling B-cell cancer. His father works as a delivery boy, struggling to meet treatment expenses. Shivansh also has two siblings depending on the family. Your generous contribution can provide hope, lifesaving care, and strength during recovery.

GUARDIAN 'S DETAIL :

FATHER'S NAME: MR. CHANDRA PRAKASH

MOTHER'S NAME: MRS. LAXMI

OCCUPATION:DELIVERY

SIBLING : 2 BROTHERS

FAMILY INCOME: 6K-8K (APPROX)

TREATMENT DETAILS:

PATIENT SUFFERING FROM : B-ALL Blood Cancer

TREATMENT PRESCRIBED : CHEMOTHERAPY AND BMT SURGERY.

APPROXIMATE EXPENSE FOR WHICH FINANCIAL ASSISTANCE REQUIRED: 2,50,000/- (APPROX)

TREATMENT IS DONE AT : Aiiims Hospital, New Delhi

DECLARATION:

I HEREBY DECLARE THAT THE INFORMATION GIVEN ABOVE IS TRUE AND TO THE BEST OF MY KNOWLEDGE.I AM NOT IN THE FINANCIAL POSTION TO ARRANGE FUNDS REQUIRED FOR THE TREATMENT OF MY CHILD.I AM FULLY AWARE OF THE FACT THE ORGANISATION WILL BE RAISING FUND FOR THE TREATMENT OF MY CHILD AND I HAVE NO OBJECTION WITH IT.

(SIGN OF THE FATHER/GUARDIAN)



सेवा में

निवेदन ५१८

श्रीमान दृष्टि महोदय जी
कैपलेश एप्रील २०१२ आगिनारजेशन

महोदय

सविनय निवेदन है कि मैं ~~कैपलेश~~ फर्स्ट प्रकाश
राध कपूर जी से रहने वाला हूँ। मेरे बच्चे का
बलड मैसर्स की शिकायत है। मेरे बच्चे की
उम्र १.११ महीने है। मैं बहुत परेशान
हूँ। इलाज करवा रहा हूँ। इलाज के
दौरान बच्चे को खिलाने में सावधान
हूँ २. से थोड़ा लार का रस
बताया है जो मैं आत्मन के असीन
हूँ। कपूर मेरे बच्चे के इलाज के
मेरी मदद करें
आपकी मर्यादा का ध्यान है। धनवाद

आपका निवेदन

फर्स्ट प्रकाश
सेनद वारा कपूर (उपस्थित)



२५३१२२

बुध, शनि, Wed, Sat



Reporting: 08:24:44
15/07/2026

हस्पताल/A.I.I.M.S. HOSPITAL

बाहरीग रागा विभाग / Out Patient Department

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



शरीरमाद्यं खलु धर्मसाधनम्

एकक/Unit

बाल चिकित्सा विभाग

UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 5M 23D / M/(पुरुष)

25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0

Follow Up Patient

कमरा / Room
C 216

Queue / संख्या
F16

Unit-III, Paediatric,

बुध, शनि, Wed, Sat



Reporting: 08:29:14
24/06/2026

ब०रो०वि० पंजीकृत सं०/O.P.D. Regn. No.

आयु
Age

OPR-6



दिनांक/Date

उपचार/Treatment

4
12.15

NW 4/7/26
E CBC/47/44

बाल चिकित्सा विभाग

UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 5M 26D / M/(पुरुष)

25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0

Follow Up Patient

कमरा / Room
C 216

Queue / संख्या
F50

Unit-III, Paediatric,

बुध, शनि, Wed, Sat



Reporting: 08:35:00
27/06/2026

डॉ० अमिताभ/Dr. AMITABH
एम सीनियर रेजिडेन्ट/DM Senior Resident
बाल चिकित्सा विभाग / Dept. of Pediatrics
पं० नई दिल्ली-29/A.I.I.M.S., New Delhi-29
IC Reg. No - 52671

LC13072600118 109082798



shivansh

LC1307260313 109082798



shivansh



PM-JAY
प्रधानमंत्री जन आरोग्य योजना
(pmjay.gov.in)

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)



मेरा अस्पताल
My Hospital
meraaspatal.nhp.gov.in

बाल चिकित्सा विभाग
UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 6M 3D / M/(पुरुष)
25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

कमरा / Room
C 216

Queue /
संख्या
F57
Unit-III, Paediatric,

बुध, शनि, Wed, Sat



Reporting: 09:11:09
04/07/2026

कमरा / Room
C 216
Queue /
संख्या
F41
Unit-III, Paediatric,

N/O 15/7/26

C CBC 15/7/26

बाल चिकित्सा विभाग
UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 6M 7D / M/(पुरुष)
25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

कमरा / Room
C 216

Queue /
संख्या
F32
Unit-III, Paediatric,

बुध, शनि, Wed, Sat



Reporting: 08:21:24
08/07/2026

Dr. Amitabh
DM Resident
Pediatric Oncology
DMC - 525
AIIMS - New Delhi

try to favour of post graduate
Institute of Medical Education
and Research, Chandigarh.
C10413583829 DO: 2000
Comies 500.



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



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

बाल चिकित्सा विभाग
UHID:1090827९8

कमरा / Room
C 216

Queue /
संख्या F17
Unit-III, Paediatric,

OPR-6

Dept No: 20260030009090

शिवांश शिवांश / shlvansh

S/O CHANDRA PRAKASH
2Y 4M 22D / M(पुरुष)
25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

बुध, शनि, Wed, Sat



Reporting: 08:40:11
23/05/2021

पंजीकृत सं० / O.P.D. Regn. No.

आयु
Age

पता / Address

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

42
11/12

बाल चिकित्सा विभाग
UHID:1090827९8

कमरा / Room
C 216

Queue /
संख्या F28
Unit-III, Paediatric,

Dept No: 20260030009090

शिवांश शिवांश / shlvansh

S/O CHANDRA PRAKASH
2Y 4M 29D / M(पुरुष)
25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

बुध, शनि, Wed, Sat



Reporting: 08:22:55
30/05/2021

8

12/12

BHA report
26/5

in
reposition

210 on 312

T B C

Signature



CLEAN AND GREEN AIIMS / एम्स का यहाँ 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)



meraapatal.nhp.gov.in

बाल चिकित्सा विभाग
UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 5M 2D / M/(पुरुष)

25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

कमरा / Room
C 216
Queue /
संख्या F8
Unit-III, Paediatric,

बुध, शनि, Wed, Sat



Reporting: 08:28:01
03/06/2021

(icicle-2
HR consolidation
protocol)

12
11-7-11

बाल चिकित्सा विभाग
UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 5M 9D / M/(पुरुष)

25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

कमरा / Room
C 216

Queue /
संख्या F53
Unit-III, Paediatric,

बुध, शनि, Wed, Sat



Reporting: 09:01:21
10/06/2026

Absent
11-6-11

बाल चिकित्सा विभाग
UHID:109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 5M 16D / M/(पुरुष)

25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH. Pin:0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

कमरा / Room
C 216

Queue /
संख्या F10
Unit-III, Paediatric,

बुध, शनि, Wed, Sat



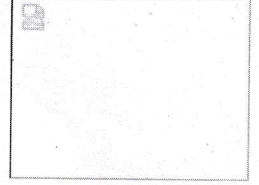
Reporting: 08:23:42
17/06/2026

12-11-11



प्रयोगशाला अबुर्द 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:	109082798	Reg Date :	18/04/2026 07:58 AM
Patient Name :	Mr shivansh		
Sex :	Male	Age :	2 years 4 months 24 days
Department :	Paediatrics	Unit Name :	Unit-III
Unit Incharge :		Sample Collection Date:	26/05/2026 12:00 AM
Lab Name:	Lab Oncology	Lab Sub Centre:	Lab Oncology (IRCH)
Sample Received Date:	27/05/2026 11:11 AM	Report Generated Date:	
Dept / IRCH No:	20260030009090	Recommended By:	Mrs. DR.SHIVEHA VERMA
Lab Reference No:	1598		
Ward Name:	DAY CARE PEDS MCH GF		

Sample Details : LOI-260526026-AP (Bone Marrow)

BMA PS ROMANOWSKY STAINING

<p> Report: Cellular and particulate bone marrow aspirate shows haematopoietic cells of all series with (M:E=2:1) and 3 -4% blasts.</p> <p> Peripheral smear is unremarkable with adequate platelets.</p> <p> Imp : Bone marrow appears to be in morphological remission</p> <p> Advice : Correlate with FCMI - MRD analysis</p> <p> Conclusion</p> <p> Senior Resident: Dr Ashish

 Consultant Dr G Smeeta</p>

Verification Comment: Report Verification is Pending

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.

Authorized Signatory



प्रयागशाला अबुद विज्ञान, डा भामराव अम्बडकर संस्थान राटरा
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:	109082798	Reg Date :	18/04/2026 07:58 AM
Patient Name :	Mr shivansh		
Sex :	Male	Age :	2 years 4 months 24 days
Department :	Paediatrics	Unit Name :	Unit-III
Unit Incharge :		Sample Collection Date:	26/05/2026 12:00 AM
Lab Name:	Lab Oncology	Sample Received Date:	26/05/2026 02:42 PM
Lab Sub Centre:	Lab Oncology (IRCH)		
Dept / IRCH No:	20260030009090	Recommended By:	Mrs. DR.SHIVEHA VERMA
Lab Reference No:	1123		
Ward Name:	DAY CARE PEDS MCH GF		

Sample Details : LOI-260526025-CS (CSF) / Report Date: 27/05/2026 04:51 PM

CSF For Morphology

C-1123/26.

CSF cytospin smear shows RBC.

Senior Resident Dr Ashish

Consultant Dr G Smeeta

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.

(WADEKAR ASHISH ARUN)

Verified By

Authorized Signatory

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



प्रयोगशाला कार्याचक्रा विभाग
DEPARTMENT OF LABORATORY MEDICINE
 रुधिर विज्ञान
Hematology
 अखिल भारतीय आयुर्विज्ञान संस्थान, अंसारी नगर, नई दिल्ली-110029
**All India Institute of Medical Sciences, Ansari Nagar, New
 Delhi-110029**



file

UHID: 109082798 **Reg Date :** 18/04/2026 07:58 AM
Patient Name : Mr SHIVANSH SHIVANSH
Sex : Male **Age :** 1 year 7 months
Department : DEPT. OF EMERGENCY MEDICINE **Unit Name :** Unit-I
Unit Incharge : Dr. Rakesh Yadav **Sample Collection Date:** 18/04/2026 12:41 PM
Lab Name: Hematology **Sample Received Date:** 18/04/2026 03:49 PM
Lab Sub Centre: Hematology (Ward)
Dept / IRCH No: 20260030009090 **Recommended By:** Mrs. DR.SHIVEHA VERMA
Lab Reference No: 6002

**Sample Details : HMW-1804260720-FC (Whole Blood (EDTA)) / Report Date: 21/04/2026
 12:38 PM**

Flow Cytometry Report

Sample Type: Peripheral blood EDTA

Clinical details: K/C/O B-ALL/Hyperleukocytosis to look for blast cells. C/O Fever, abdominal distension, petechiae since 2 days. H/O bleeding.

Peripheral blood morphology- Blasts - 96%. ?Acute Leukemia.

Instrument Name: Attune NxT Flow Cytometer

Gating Strategy: CD45 VS SSC plot shows approx. 55% events of all singlet events acquired which are dim CD45 and low SSC.

Positive Markers: cCD79a, CD19, CD10, CD58, cCD22(Dim), HLA-DR.

Negative Markers: cMPO, cCD3, CD34, CD117, CD7, cTdT, CD20, CD3, CD4, CD8, CD1a, CD56, CD2, CD64, CD14, CD13, CD33, CD36.

Impression: Together with morphology the immunophenotyping findings are suggestive of B-Cell Acute Lymphoblastic Leukemia.

Advice: Kindly correlate clinically with bone marrow and genetic investigations.

Processed by: Riyaz (JMLT)

Author Sign. Dr. Tushar Sehgal/Dr. Upinder Singh.

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.

(DEVENDRA KUMAR VERMA)

Verified By

(Dr.TusharSehgal)

Authorized Signatory

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

UHID:	109082798	Sex :	Male
Patient Name :	Mr shivansh	Sample Received Date :	13-Jul-2026 10:23 AM
Age :	2Y 6m	Department :	Paediatrics
Reg Date :	13-Jul-2026 10:23 AM	Sample Collection Date:	13-Jul-2026 08:29 AM
Recommended By :		Sample Details :	LH13072600118
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	2618157069

HEMATOLOGY

Test Name (Methodology)	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb (SLS-photometry)	10.60	g/dL	11.0 - 14.0
Hematocrit (Direct Measure)	35.20	%	34 - 40
RBC count (Impedance)	3.61	10 ⁶ /μL	4.0 - 5.2
WBC count (Fluo. flow cytometry)	4.20	10 ³ /μl	5.0 - 15.0
Platelet count (Impedance)	180.00	10 ³ /μL	200 - 490
MCV (Calculated)	97.50	fL	75 - 87
MCH (Calculated)	29.40	pg	24 - 30
MCHC (Calculated)	30.10	g/dL	
RDW-CV (Calculated)	17.10	%	11.6 - 14
Neutro (Fluo. flow cytometry)	25.70	%	30-60%
Lympho (Fluo. flow cytometry)	60.50	%	29-65%
Eosino (Fluo. flow cytometry)	0.00	%	1-4%
Mono (Fluo. flow cytometry)	13.30	%	2-10%
Baso (Fluo. flow cytometry)	0.50	%	0-1%
NRBC	0	%	
Neutro - Abs (Calculated)	1.08	10 ³ /μl	1.5-8.0
Lympho- Abs (Calculated)	2.54	10 ³ /μl	6.0-9.0
Eosino - Abs (Calculated)	0.00	10 ³ /μl	0.1 - 1.0
Mono - Abs (Calculated)	0.56	10 ³ /μl	0.2 - 1.0
Baso - Abs (Calculated)	0.02	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)
13-Jul-2026 11:29

UHID:	109082798	Sex :	Male
Patient Name :	Mr shivansh	Sample Received Date :	07-Jul-2026 09:38 AM
Age :	2Y 6m	Department :	Paediatrics
Reg Date :	07-Jul-2026 09:38 AM	Sample Collection Date:	07-Jul-2026 08:20 AM
Recommended By :		Sample Details :	LH07072600060
Lab Sub Centre:	SMART Lab, New RAK OPD	Lab Reference No:	2618121922

HEMATOLOGY

Test Name (Methodology)	Result	UOM	Bio. Ref. Interval
Sample Type : EDTA Whole Blood			
Hb (SLS-photometry)	10.10	g/dL	11.0 - 14.0
Hematocrit (Direct Measure)	31.70	%	34 - 40
RBC count (Impedance)	3.43	10 ⁶ /μL	4.0 - 5.2
WBC count (Fluo. flow cytometry)	2.71	10 ³ /μl	5.0 - 15.0
Platelet count (Impedance)	298.00	10 ³ /μL	200 - 490
MCV (Calculated)	92.40	fL	75 - 87
MCH (Calculated)	29.40	pg	24 - 30
MCHC (Calculated)	31.90	g/dL	
RDW-CV (Calculated)	17.50	%	11.6 - 14
Neutro (Fluo. flow cytometry)	11.40	%	30-60%
Lympho (Fluo. flow cytometry)	77.10	%	29-65%
Eosino (Fluo. flow cytometry)	0.00	%	1-4%
Mono (Fluo. flow cytometry)	11.10	%	2-10%
NRBC	1	%	
Baso (Fluo. flow cytometry)	0.40	%	0-1%
Neutro - Abs (Calculated)	0.31	10 ³ /μl	1.5-8.0
Lympho- Abs (Calculated)	2.09	10 ³ /μl	6.0-9.0
Eosino - Abs (Calculated)	0.00	10 ³ /μl	0.1 - 1.0
Mono - Abs (Calculated)	0.30	10 ³ /μl	0.2 - 1.0
Baso - Abs (Calculated)	0.01	10 ³ /μl	0.02 - 0.1

Remarks: Neutropenic leucopenia present. Kindly correlate clinically, drug history, Vit B12 def., Infections. Adv- FA, Vit B12, Iron profile, Reticulocyte count.

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

Dr. Sudip Kumar Datta
(MD Biochemistry)

Dr. Tushar Sehgal
(DM Hematopathology)

Dr. Suneeta Meena
(MD Microbiology)

Dr Subhamon Bhattacharjee
07-Jul-2026 10:43



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

बहिरंग रोगी विभाग / Out Patient Department



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

शरीर
एक
विभाग

बाल चिकित्सा विभाग
UHID: 109082798



Dept No: 20260030009090

शिवाश शिवाश / shivansh

S/O CHANDRA PRAKASH
2Y 6M 14D / M(पुरुष)
25 ASHOK VIHAR SANJAY NAGAR
BAREULLY, UTTAR PRADESH, Pin: 0.
Ph: 7417918248 General Rs. 0
Follow Up Patient

कमरा / Room
C 216
Queue /
संख्या
F41
Unit-III, Paediatric.

OPR-6

रो०वि० पंजीकृत सं० / O.P.D. Regn. No.

बुध, शनि, Wed, Sat



Reporting: 08:24:44
15/07/2026

आयु
Age

पता / Address

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

23
12.13

N/A in OPD on 29/7/2026
CBC RFT / UA.

Shivansh
SR



Pradhan Mantri Jan Arogya Yojana
PM-JAY
प्रधानमंत्री जन आरोग्य योजना
(pmjay.gov.in)

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)



Name - Shivan
 UMID - 10908274
 Ht - 81cm
 wt - 12kg
 BSA - 0.52m²

High risk

CNS3, Atypical clinical features (other extramedullary disease except testicular disease), incomplete information required for risk stratification, PPR, High risk cytogenetics (KMT2Ar, BCR-ABL-1, iAMP21, hypodiploidy, TCF3-HLF fusion, ph-like, MEF2D) MRD positive at end of induction, No CR after induction

ARM B

Week 1-5

Day	Prednisolone 60mg/sqm PO 3 DD	Tab Dexamethasone 6mg/sqm PO 2DD	VCR 1.5mg/sqm Slow IV push	Peg lurasome 1000 IU/m ²	DNR 25mg/sqm IV infusion (1hr)	ITM (age appr)
1.	18/4/26					
2.						
3.						
4.						
5.						
6.						
7.						
8.		21/4/26	21/4/26	21/4/26	21/4/26	21/4/26
9.		21/4/26	21/4/26	21/4/26	21/4/26	21/4/26
10.		21/4/26				21/4/26
11.		21/4/26				21/4/26
12.		21/4/26				21/4/26
13.		21/4/26				21/4/26
14.		21/4/26				21/4/26
15.						
16.			21/4/26		21/4/26	21/4/26
17.						
18.						
19.						
20.						
21.						
22.			21/4/26	21/4/26	21/4/26	
23.			21/4/26	21/4/26	21/4/26	
24.						
25.						
26.						
27.						
28.						
29.						
30.			21/4/26		21/4/26	
31.						
32.						
33.						
34.						
35.						26/5/26

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

Max dose of prednisolone is 120 mg/day. If CNS2/3 then 2 more doses of ITM*

IR → HR

PPR

(SF (296)): Occasional lymphomononuclear

**BILL****Adaya Hospital & Infertility Centre**

107/1, Stadium Road, Bareilly | M. 9411919880

No. 405

Date 10/4/2026

Patient Name Shivanish

D.O.A. 7/4/2026 D.O.D. 10/4/2026

Doctor's Name Dr. M.D. Chhabaria

S.No.	PARTICULARS	AMOUNT	
		Rs.	P.
1.	Registration Fee	1000X1	1000
2.	Bed Charges Pvt. A.C. Gen. / Pvt. Non A.C.	2500X2	5000
3.	NICU		
4.	Operation Theater Charges		
5.	Surgeon's Fee		
6.	Super Specialist Fee		
7.	Professional Visit		
8.	Lab Charges		
9.	Nursing Care	1000X3	3000
10.	Blood Transfusion	2000X2	4000
11.	Gas Charges		
12.	Radiological Charges		
13.	Labour Room Charges		
14.	Visiting Consultant Fee	1500X4	6000
15.	Emergency Management	3500X1	3500
16.	Picket Charges	1500X2	3000
17.			
18.			
19.			
20.			
	Total Bill	25500	25500
	Discount +		
	Discount Adv.	5500	5500
	Payable Amount	20000	20000

Auth. Signatory

27/6/26.

No mouth ulcer

2x. betadine gargle
Sitz bath.

Personal Hygiene

on septran sat/sun.

No fresh Complaint

$$\begin{array}{r} 10.00 > \frac{2.25}{0.84} < 32 \pm 15 (27/6/26) \\ \hline \end{array}$$

Take dls f. cytophosphorus for dypc.
✓ a 5/7/26 ✓
and ITM only.

4/7/26

No mouth ulcer

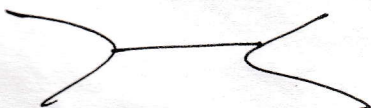
2x betadine gargle
Sitz bath

Personal Hygiene

on septran sat/sun

No fresh Complaint

No fresh blood investigation



No complaint

due for VCR on 28/6/26

T₁ VCR 0.84 slow to pul.
with fresh culture.

N/v 4/7/26 to CBC/LFT/ur.

Continue supportive care.

डॉ० अमिताभ/Dr. AMITABH
होम्य सीनियर रेजिडेन्ट/DM Senior Resident
बाल चिकित्सा विभाग / Dept. of Pediatrics
आ. भा. मा. सं., नई दिल्ली-29/A.I.I.M.S., New Delhi-29
DMC Reg. No - 52671

4/7/26

No complaints

Due for Cytophosphorus
& ITM tomorrow

4/7/26

$$\begin{array}{r} 10.0 > \frac{2450}{N/L76} < 378L \\ \hline \end{array}$$

HNC 380

for culture

→ LFT/RFT normal.

QDW BR POE - do ANC on 7/7/26 < 500,

(320)

cannot give chemo tomorrow.

Plan - Repeat CBL on Tuesday
RFT/LFT

% report on Wednesday
9 AM, 8/7/26. in
OPD.

↓
Decide on chemo.

Dr. QUASVINI BALI
Junior Resident
Department of Pediatrics
SMS New Delhi

8/7/26

No mouth ulcer

2% betadine gargle

Sitz bath

Personal Hygiene

on Septisan Sat/Sun

No fresh complaint

10.10 > 2.71 < 298K (7/7/26)
0.40

ANC < 500

Prolonged cytopenia after
1st GMP course in Carol

Subtotal GMP - 1.9/1

Antibio - VCR - 28/6

Act: w/f count recovery

- Send NODT15/TPMT mutal

- @ w/in Septicon

- Risk of FN explained

Flu 15/7/26

Dr. Amitabh
DM Resident
Pediatrics

15/7/26

- NO mouth ulcer
- 24 betadine gargles
- Sit's bath
- stop septan
- C/O Cold

10.6 $\frac{4200}{1080}$ (180 L. (19/7/26) $\frac{129}{1080}$

after this

B-AU/HR/condensation/D29

- Running nose x 4 days

Adv:

→ Cyp. Retirine (5/5)

2.5 ml Po OD HS → x 5d.

→ IVF DNS + 1.100Kcl @ 50 ml/hr x

→ Iij. cyclophosphamide 520 mg
in 100ml NS IV over 1hr

→ Iij. Mena 200mg/100ml NS
1hr @ 0, 2, 4 hr.

→ Iij. Mac 40 mg slow
to finish - 530 D32

B31 D33

D37

D39

D38

D40

→ T. GMP (50mg) $\frac{1}{2}$ tab-00-
1 tab-00- $\frac{2}{7}$

19/7/26

→ ITM - date from daycare

→ Septan/50/B4 -

→ N/V in OPD on 28/07/2026
2 CBC/RF+/UA.

Shirani
SR.