

CAUSELESS HAPPINESS ORGANISATION-REGISTRATION FORM

SPONERSHIP FORM FOR FINANCIAL ASSISTANCE FOR MEDICAL TREATMENT

PATIENT REG NO : CHO/585/

DATE : 27/11/2024

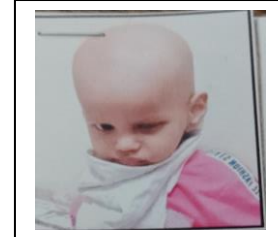
BENEFICIARY DEMOGRAPHY

PATIENT'S NAME :AKARSH KUMAR

AGE: 2 YRS

RELIGION : HINDU

GENDER : MALE



PATIENT'S FAMILY DETAIL (IN MIN 30 WORDS)

Baby Akarsh is suffering with Eye Cancer (Retinoblastoma)and his treatment is going on AIIMS Hospital. Akarsh's father is currently unemployed and not able to buy a single meal for his family. They are in very miserable situation currently, kindly help child for his chemotherapy and surgery treatment.

GUARDIAN 'S DETAIL :

FATHER'S NAME: Mr. NITISH KUMAR

OCCUPATION: NA

SIBLING : NA

FAMILY INCOME: NA

TREATMENT DETAILS:

PATIENT SUFFERING FROM : Eye Cancer (Retinoblastoma)

TREATMENT PRESCRIBED : CHEMOTHERAPY AND SURGERY

APPROXIMATE EXPENSE FOR WHICH FINANCIAL ASSISTANCE REQUIRED: 1,20,000/-

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 मे

प्रमाण तृती महोदय
काजवेश कंपनी नेस आगनाइपेइम

महोदय

सवीक्ष्य निवेदन इस प्रकार है
कि मेरा नाम निरिश कुमार
और मेरा बच्चा का आई
सेंसर और वय 2 साल
का पिशकी इलाज हमस
इंसपिटल मे चला रहा है।
डॉक्टर ने इलाज के लिए
1.20,000 तक का खर्चा बताया
है। पिशके लिए हम असमर्थ
हैं। मेरा बच्चा का तबियत खराब
है।

इसलिए मेरा निवेदन है कि मेरा
बच्चा के इलाज के लिए आवेक
सहायता वधान कर में इस रकम
का संशय अथवा शून्य 1

धन्यवाद
निरिश कुमार
जिला मुख्यालय 202
विहार



GOYAL MRI & DIAGNOSTIC CENTRE

B-1/12, SAFDARJUNG ENCLAVE, NEW DELHI - 110029

Phone : 011-40771234, 26107559 E-mail : goyalmri@yahoo.com

Dr. Ankur Gadodia
MD (AIIMS), DNB, FRCR

Dr. Pranay R Kapur
MBBS, DNB

19.10.2024

MAST. AKARSH KUMAR, 2 YRS / M

UID: 10.24.919

M.R. OF THE BRAIN AND ORBITS WITH CONTRAST

Axial T1, DWI and FSE T2 weighted scans of the brain were studied and these were correlated with coronal T2, fat sat T1 & T2 weighted scans including both orbits. Additional T1 weighted axial, coronal & sagittal scans were obtained following administration of contrast (10mL Omniscan). No immediate adverse contrast reaction was noted.

Follow up case of bilateral retinoblastoma, on chemotherapy. Previous scans are not made available for comparative evaluation.

Right phthisis bulbi is seen. 11 x 11 mm mass lesion is seen in the posterior chamber of the right globe. Lesion displays hypointense signal on both T1 and T2 weighted images. There is heterogeneous enhancement following administration of contrast. Right optic nerve is unremarkable. Left globe is normal in size and signal intensity. 8 x 6 mm focal lesion is seen in the posterior chamber of the left globe along the lateral aspect with retinal detachment and subretinal hemorrhage. Lesion displays hypointense signal on both T1 and T2 weighted images. Left optic nerve is unremarkable. Findings are suggestive of residual disease.

The optic chiasm, infundibulum and pituitary gland do not show abnormality.

Cerebral and cerebellar parenchyma is unremarkable. No acute infarct is seen on diffusion weighted images.

Bilateral basal ganglia and thalamus are normal in signal intensity.

The corpus callosum and skull base are normal. No midline shift is seen. No acute intracerebral hemorrhage.

Posterior fossa and brainstem are unremarkable. Skull base arteries demonstrate normal flow void.

Paranasal sinuses are unremarkable.

IMPRESSION:

- Right phthisis bulbi with 11 x 11 mm homogeneously enhancing mass lesion in the posterior chamber of the right globe. Right optic nerve is unremarkable. 8 x 6 mm homogeneously enhancing focal lesion in the posterior chamber of the left globe along the lateral aspect with retinal detachment and subretinal hemorrhage. Left optic nerve is unremarkable. Findings are suggestive of residual disease.

Clinical correlation is necessary


DR. ANKUR GADODIA
MD (AIIMS), DNB, FRCR (UK)

This is a professional opinion and not the diagnosis. Findings should be clinically correlated

दिनांक - Date

उपचार - Treatment → 80 to 85 cm

11/10/24

Parents noticed bilateral proptosis 4 months back. (R >> L)

→ No family history
→ Used octade as Group E
① Group D
18/6/24

CE MRI Brain and Orbit (20.6.24)

✓ Received 6 cycles of chemotherapy (VEC regimen) last 10/10/24.

16/11/24

① small disorganised globe

② Multiple lesions in the retina

Advice

#34A
Dr. Abhishek

← #27 USG BE for DSE
Date for EUA

(Contrast) CE MRI head and orbit 2mm cuts passing through optic nerve and pineal gland (fat suppressed scan)

Stamp
EUA (D/F EUA) ✓
Dr. Deep (35A) ✓
22/10/24
8-10 am
to see
F/U MRI on Monday at 10 am (Ward IA)

Deep

नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में दान करना परमश्रेष्ठ है। इनकी पूर्ण रक्षा कीजिए ताकि ये अपनी रक्षा कर सकें।

Eyes are God's most precious gift to man kind and eye donation is the most noble deed.

Take full care of them so that they can take care of you.

53

53

ब० रो० वि० कार्ड O.P.D. Card

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
अ० भा० आयु० सं०, नई दिल्ली - 110029

दृष्टि



नेत्र अमृत्य उपहार है
जो आप ही दे सकते हैं

अनुभाग व दिन
Section and Day **VI**
बुधवार व शनिवार
Wednesday & Saturday

कमरा नंबर
Cabin No.



UHID: 107880764

ABHA

Dept No: 20240050133392

संख्या / Queue 25

कमरा / Room: **6B**

Unit-II
RPC OPD

AKARSH KUMAR

SR/JR-II-R 6B

S/O NITISH KUMAR
2Y 18D / M पुरुष

MUKSUDPUR MUZAFFARPUR BIHAR
INDIA

Mob: 8210428933

General R.S.

Follow Up Patient

WED, SAT
बुध शनि



Registration time.

06/11/2024 10:35:53 AM

न का एकक

andon's Unit

ग	आयु	पता
EX	Age	Address

DATE

DIAGNOSIS

24/10/24

06 NOV 2024

उपचार Treatment

h/o. 6 cycles of
CT

NRC discussion
review

Monday. (18/11/24) (10am)
ward 1A

compare previous scans
and comment on parotid gland

Dr. Sumit Grover

डा० सुमित ग्रोवर / Dr. Sumit Grover
सहायक आचार्य / Assistant Professor
नेत्र विभाग / Dept. of Ophthalmology

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल

Kindly keep this Card safely and bring it on your follow up visits.

- धूम्रपान निषेध 1. No Smoking
- कूड़ा कर्कट केवल कूड़ेदान में ही डालें 2. Use Dustbin
- थूकिये नहीं 3. No Spitting

R B/Rcc i'mmed
6/11/24

119

ब० रो० वि० कार्ड O.P.D. Card



अनुभाग व दिन
Section and Day **VI**
बुधवार व शनिवार
Wednesday & Saturday

कमरा नंबर
Cabin No.

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
अ० भा० आयु० सं०, नई दिल्ली - 110029

Dr. Rajendra Prasad Centre for Ophthalmic Sciences
A.I.I.M.S., New Delhi-110029

यू०एच०आई०डी० संख्या
UHID No.

आचार्य राधिका टंडन का एकक
Prof. Radhika Tandon's Unit

रोगी का नाम Name of the Patient	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex	आयु Age	पता Address
AKAPBN	2/M			

दिनांक DATE	निदान DIAGNOSIS
24/10/2024	<p>BE proptosis. C/O/W Dr. Piyush 4 wks ago x 2 उपचार Treatment DR Radw. BERTS (R) GPE. (L) YPD. GCF VEC. USG: (R) small disorganised globe 10/10/24- (L) multiple lesion in retina NRC. T₁ hypo. T₂ hypoint heterogeneous (R) enh areas (P) darker globe (L) enh areas (P) post areas 1 at least, subtle RD changes exudative. R&L → ON → normal. No eff & EO in V. Intral gl → enh in seen small ch? nas</p>

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।

Kindly keep this Card safely and bring it on your follow-up visits.

- धूम्रपान निषेध 1. No Smoking
- कूड़ा कर्कट केवल कूड़ेदान में ही डालें 2. Use Dustbin
- थूकिये नहीं 3. No Spitting

Admission - Old films to be compared
(pt. didn't bring films)
- to compare pineal lesion.

D.O.A
26/10/24
8:30 am
ward 1A

↓
If N.A
↓
repeat MRI c 2mm sections
through pineal gland.

- 142 B Old surco clinic 2pm

outside dx ⊕ GPE ⊕ GPD RB
cf ⊕ leucocoria age 8 mo age
+ swelling ⊕ lid - x 1 1/2 grape
fever
⊕ leucocoria x 1 1/2 yr age
no lid edema, aferrite
o/e photophobia ⊕ B/L
white reflex ⊕ ⊕
⊕ corneal opacity

Dr Nishtha

F/U: ⊖
USG: ⊕ small disorganised globe
⊕ multiple ch in retina.

Alert for 600 ± ⊕
admission. Emulation

don't follow object
follows objects

red Miltodox 500 ⊕

[Signature]

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इनकी पूर्ण रक्षा कीजिए ताकि ये आपकी रक्षा कर सकें।

Eyes are God's most precious gift to man kind and eye donation is the most noble deed.
Take full care of them so that they can take care of you.

ब० रो० वि० कार्ड
O.P.D. Card

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
अ० भा० आयु० सं०, नई दिल्ली - 110029

Dr. Rajendra Prasad Centre for Ophthalmic Sciences
A.I.I.M.S., New Delhi-110029

यू०एच०आई०डी० संख्या
UHID No.



अनुभाग व दिन
Section and Day VI
बुधवार व शनिवार
Wednesday & Saturday

कमरा नंबर
Cabin No.

आचार्य राधिका टंडन का एकक
Prof. Radhika Tandon's Unit

रोगी का नाम Name of the Patient	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex	आयु Age	पता Address
Akash Kumar,				

दिनांक DATE	निदान DIAGNOSIS
----------------	--------------------

उपचार Treatment

18/11/24

Op/w. Dr. Piyush [SR Radio] ↓ NRC

- (RB) enucleated
- (LE) tumor size decreased
- (LE) No optic nerve involvement
- No paranasal gland involvement

(142 B) in enco clinic @ 2pm.
today.

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।

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1. धूम्रपान निषेध
2. कूड़ा कर्कट केवल कूड़ेदान में ही डालें
3. थूकिये नहीं

1. No Smoking

2. Use Dustbin

3. No Spitting

UBC
CF7
RRT7
Images
all send.
Saturday OPD.
New

कोल्लुरी बाबु / KOLLURI BABU
Supervising Medical Officer
Dr. राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
आयु० सं०, नई दिल्ली / A.I.I.M.S., New Delhi-110029

18/11/24

C/D/w Dr Deep Shukla in old ocular oncology clinic [Unit VI]

latest NRC → ⊙ mass size decreased with no pineal gland involvement.

Patient can followed up on routine EUAs for evaluation of ⊙ mass.

EUA (for ⊙ mass progression) → 2nd week of Dec.

21/11/24

NPO →
Shr - solid.
Shr - semisolid
Shr - liquids.

17/12/2024
7th floor
7:30AM

HRF ⊕ on UPE
to go for 6 cycles of chemo
4 EVA after 2 cycles of chemo

वरिष्ठ रेजिडेंट / Senior Resident
डॉ. राजेश प्रसाद नेत्र विज्ञान केंद्र
Dr. R.P. Centre for Ophthalmic Sciences
भ.भा.आ.स. नई दिल्ली, A.I.I.M.S., New Delhi-29

Dr. Rachna Sethi / Dr. Aditya / Dr. Jagdish

208/209/210.

नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में दान करना परमश्रेष्ठ है। इनकी पूर्ण रक्षा कीजिए ताकि ये आपकी रक्षा कर सकें।

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Histopathology Report

Ocular Pathology

Dr. Rajendra Prasad Centre for Ophthalmic Sciences
All India Institute of Medical Sciences

Ansari Nagar, New Delhi - 110029, India

Name of the Patient: Akarsh

Lab Reference No. : 24-1592

Age : 2 Years Sex : Male

Received on : 25/10/2024

UHID No. : 107880764

Date of Report : 8/11/2024

Ward IA

Bed No. : 119

Unit Incharge : Prof. Tandon

Nature of the Material Submitted : Enucleation.

Report :

- Enucleated right eye ball.
- Calcified retinoblastoma (LTD 10mm).
- No viable tumor is seen.
- All ocular structures including iris, ciliary body and choroid are free of tumor.
- Optic nerve shows few atypical cells suggestive of tumor cells (post laminar).
- Rest of the optic nerve including its resected margin are free of tumor.

AJCC - pT2 NoMo

Reported By

Consultant : Dr. Seema Sen



Dr. Rajendra Prasad Centre For Ophthalmic Sciences
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS), New
Delhi, 110029

Discharge Report
PROVISIONAL DISCHARGE CERTIFICATE

24-1592
25/11/24

UHID : 107880764
Name: Mr AKARSH KUMAR
Age/Sex: 2 years 7 days / Male
Ward Name: 1A
Address: DIST MUZAFFAR NAGAR, BIHAR, INDIA
Mobile No: 8210426973
Date of Admission: 23/10/2024 10:18:57 AM
Date of Discharge: 26/10/2024 08:08:00 AM

Cr No: R-042860-24
Department: R. P. Centre (Eye Centre)
Unit: Unit-VI
Bed No.: 119

Drug Allergy, if any :- []

ICD Code: C69.2
ICD Description: Malignant neoplasm Retina

Diagnosis
RE S/P 6 CYCLES OF CHEMOTHERAPY RE GROUP E
RB WITH NVs
LE MULTIPLE LESIONS S/O RB GROUP D RB

Investigation
Systemic: NO KNOWN SYSTEMIC ILLNESS
Ocular: VA RE DOES NOT FOLLOW LIGHT
LE FOLLOWS LIGHT

Treatment/Operative Procedure
Surgeon: DR. ABRISHEK / Dr N lom
Date: 26/10/2024
Surgery: EUA WITH RE ENUCLEATION WITH PRIMARY IMPLANT UNDER GA

Condition at Discharge
Vision: ENUCLEATED
Anterior Seg.: LID EDEMA PRESENT
DISCHARGE PRESENT
IMPLANT IN SITU
IOP: ENUCLEATED
Posterior Seg.: ENUCLEATED

Implant size = 18mm
ONV slump = 12mm

Advice During Discharge: Syrup Augmentin 225mg/5ml 2ml TDS

Oral: SYRUP OGNACORTIL 9 ML OD ABF 2ml TDS
Topical: RE

Follow Up: IN RB CLINIC ON 4/11/24 AFTER 1 WEEK

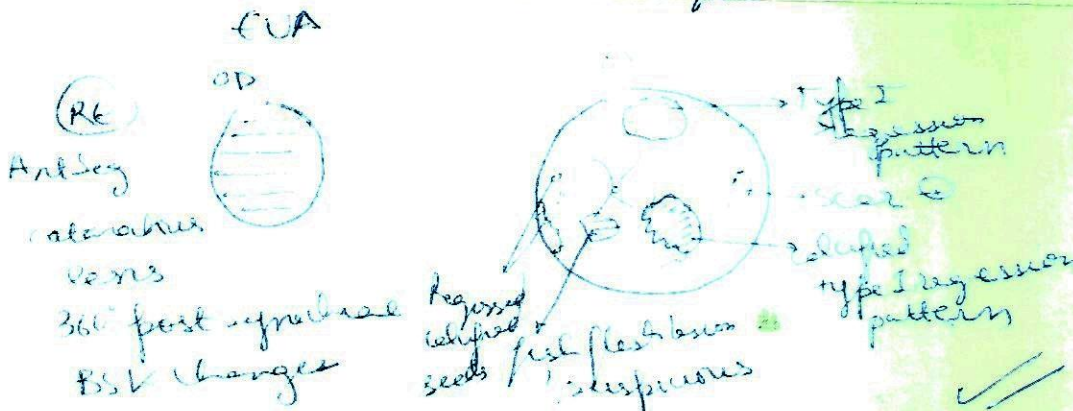
Position: RE

E/D OCUPOL TDS
E/D REFRESH TEARS 6TD
E/D MILFLODEX 6TD

1ml (5)

H7

142/24



Prepared By: Ms. DIVYA SOJAN

Signature Of Senior Resident

Date & Time

CVA date for after 3wks = 19/11/24
NRC Review of old films explained solids 6hrs
liquids - 4hrs



ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)
New Delhi

UHID: 107880764 **Reg Date :** 19/10/2024 09:37 AM
Patient Name : Mr AKARSH Kumar **Age :** 2 years
Sex : Male **Unit Name :** Unit-VI
Department : R. P. Centre (Eye Centre) **Sample Collection Date:** 24/10/2024 07:54 AM
Unit Incharge : Dr. Radhika Tandon **Lab Sub Centre:** RPC PATHOLOGY/HAEMATOLOGY
Lab Name: Pathology **Report Generated Date:** 24/10/2024 11:00 AM
Sample Received Time: **Recommended By:** Dr. ADWITIYA BISWAS
Dept / IRCH No: 20240050133392
Lab Reference No:
Ward Name: 1A

Sample Details: RPH-241024003 (Blood)

Collection Date :24/10/2024 07:54 AM

Report Generated on: 21/11/2024 10:42 AM

Test Name	Observation Result	Biological Reference Interval	Verification Comment(s)
BLEEDING TIME	2.5 mins.	2 - 5 mins.	
CLOTING TIME	6 minutes;min	5 - 11 minutes;min	
Hb(SLS-photometry)	9.0 g/dL	9.0 g/dL	11.1 - 14.1 g/dL 3M - 2Y (A) 11 - 14 g/dL 2Y - 6Y (A)

Verified By
(Dr.Seema Kashyap)

Laboratory In-charge

1. This Report is only an Aid to Clinical Decision.
2. Contact Lab In-charge for any Clarifications.



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DS 24/B, Digamber Place, Behind Lohia Nagar Petrol Pump, Kankarbagh, Patna - 800 020

Phones : 07544008111, 07544008112

E-mail : devnuclear_inst@rediffmail.com

Name: Akarsh Kumar

Age/Sex: 1 Yr/ M

Date: 20.06.2024

Region Scanned: - CEMRI scan of Brain & Orbits

Ref. By: Dr. CAN KIDS

THANKS FOR THE REFERRAL

Orbits:

Large heterogeneous intermediate to hyperintense lesions on T2WI seen involving the bilateral globes in the vitreous. The lesions are measuring ~1.6cm (TD) x 1.2 cm(CC) x 1.7cm(AP) and 1.7cm (TD) x 1.0cm (CC) x 1.0cm (AP) sized seen on right and left side respectively. The lesion is extending upto the inferior aspect of the lens on the right side. The lesion is extending upto the right optic nerve head with retinal detachment with subtle protrusion of the globe posteriorly near the optic nerve head with mildly hyperintense signal seen in the adjacent retrobulbar optic nerve. Post contrast the lesion shows moderate heterogeneous enhancement. Few foci of SWI hypointensity seen within the lesion consistent with calcification. Findings are suggestive of retinoblastoma. No contour bulge or extension outside the bilateral orbit seen.

The optic chiasm and optic tract are normal.

The cavernous sinuses appear normal.

Brain

Bilateral cerebral parenchyma are normal in MR morphology and signal intensity.

No focal lesion seen. No restricted diffusion seen.

The ventricular system, cortical sulci & CSF cistern are normal.

Bilateral basal ganglia and thalami appear normal.

No midline shift seen.

The brainstem and cerebellum are normal. The 7th 8th nerve complexes are normal.

The pituitary gland including neuro-hypophysis is normal.

Impression : Large heterogeneous intermediate to hyperintense lesions on T2WI seen involving the bilateral globes in the vitreous. The lesions are measuring ~1.6cm (TD) x 1.2 cm(CC) x 1.7cm(AP) and 1.7cm (TD) x 1.0cm (CC) x 1.0cm (AP) sized seen on right and left side respectively. The lesion is extending upto the right inferior aspect of the lens on the right side. The lesion is extending upto the optic nerve head with retinal detachment with subtle protrusion of the globe posteriorly near the optic nerve head with mildly hyperintense signal seen in the adjacent retrobulbar optic nerve. Post contrast the lesion shows moderate heterogeneous enhancement. Few foci of SWI hypointensity seen within the lesion consistent with calcification. Findings are suggestive of retinoblastoma bilateral orbits. No contour bulge or extension outside the bilateral orbit seen.

Brain parenchyma appear normal.

Dr. Manoj Kumar

Consultant Radiologist

MD. (Radio-diagnosis, PGI, Chandigarh)