

Department of Pediatrics CK1D
Division of Pediatric Oncology 97718
All India Institute of Medical Sciences, New Delhi

2nd copy.



वीरमातु खलु धर्मसाधनम्

Patient Note Book

Shraddha Gupta

10799 6190

B-ALL HR

917125

Shraddha

B AKH / HR / EOV MAD - neg / due for
DSIX 3rd MONTH

Post 1st course

HDMTx ~ g2 (3) hemat toxicity

Post and → ~ no delayed mtx clearance

clinically well

counts 9.5 / 1540 / 1.121ae
717 / 570
RFT Int - (N)

LH15072500295 107996190



LC1507250534

107996190



SHRADDHAGUPTA

Advise

- (1) keep septan on hold
- (2) chemotherapy to average

Cunkid's
Kinsy
25/11/21

4nj. metformin ~ 5 vials
[500mg/vial]

4nj. leucovorin ~ 1 vial
[50mg/vial]

4nj. Biotin (15mg/ml) ~ 1 vial
with 47VH 5MVA ~ 0.16

17/1/25 @ DAYCARE

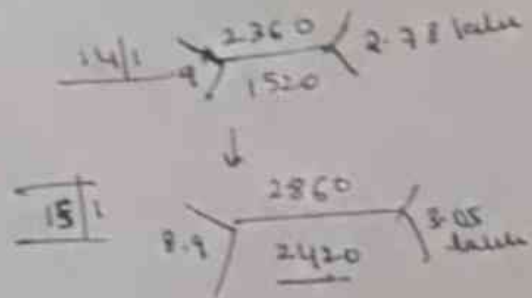
FN review

child was started on
w abs 1st line
±/∓ soon impending FN

FN → Day 2

on Pptaz/amikacin Day 2

No fever spikes; Non neutropenic
ANC rising



Adv

- Sypcetrine (mg/sml) sml ke.

- ~~stop~~ w antibiotics

↓
stop

[ANC → non neutropenic]
[child afebrile]

- (D/S) explained

- Betadine yangles 15% Ruth

- (L) Septran

20/1/25 = WALKER/FT.

Adv for chemo today

- Inj. vincristine 1mg 2w slow push

- Inj. docetaxel 17mg/100ml
over 1 hour

(N/V) in OPD on

↓
Review



10/3/25

oral antibiotic
& fluoride
110 oral ulcers
00 Septoria
24 becadna
942 bath

E-MU / HR Condid^m - D 80
Had 63 mg^m - now condid

8/3/25 83) 2590
600 (454L

1. Kipac = 114 (2 from Moro = 24%
3 Augloc = 93 (left)

No fever
No abd pain
or vomiting

dx Dietician review - diet plan given

from
14/3/25

Dij: Emect 3mg + Dera 3mg iv

↓
IVF Dns + 1:100 KCl iv @ 95 ml/hr x 6 hrs
(2 hrs Postop)

↓
Dij: Cyclophosphamide 750 mg / 100 ml NS iv over 1 hr - D,

Dij: Mezna 250 mg / 100 ml NS iv @ 0, 2, 4 hrs - D,

[Intrathecal Methotrexate 12mg]
D, TM (12mg M₂₀) - D,

T. BMP (50mg) 1 tab OD x 6 days ← flb → Total 140
flb 1/2 tab OD on D7

Dij: AraC 56 mg iv/s.c. OD
D2 ~~flb~~
D3 ~~flb~~
D4 ~~flb~~

Part C → T-Emect (4mg) 1 tab TDS x 3 days. ~~flb~~

Cont Septoria / Sitz bath

F/U 19/3/25 = CBC RFT/LFT
29

[Signature]

31/1/25
Seen in Daycase

ER visit yesterday.

fever. No focus.

ANC → 680.

Started on oral Abx.

Afebrile since evening

Plan:

1. w/h chemo today.
2. R/w in OPD tomorrow.

Dr. Satyarth S

Dr. Satyarth S
DM, Pediatric Oncology
AIIMS, New Delhi
DMC-109688

1/2/25

Due for consolidation
2) D3 of oral Augmentin
on Sept 20

API - CB

B-ALL / HR / Completed induction

EDIMRD - Nagaland

due for consolidation

o No fresh complaints.

Afebrile x 48hr.

Cough — ~~Not~~ Improved

22/1/25

- BP! - 112/72
- Pulse! - 140/min

T2 - 55
T4 - 4.2

• Dated for EOS → 23/1/25

2% Betadine goggles
5-12 Bath.

Stetho apic

B-ALL / Highnut / Induction

% Cough x a day

No % fever / fast breathing.

% - Afebrile.

Rallor (+)

Chest - clear, NVBS

P/A - soft, nontender

axverspleen - not palpable.

HR - 98/min

RR - 24/min

FF - 21.

Child was sent to
Pediatric casualty.

on 18/01/25

1/4% Pallor & tachycardia.

9.4 1390 2.53
ANC - 1130

ECG - sinus tachycardia.

ad Echo - Normal.

Electrolyte - Normal

Chest X-ray - No cardiomegaly

A&V

→ Continue tapering dose steroids & D/C tomorrow.

→ EOS assessment (BMA + MRD) from MCB Dayar. (with NPO status)

→ FF₃, FF₄ (~~Smart~~ Reproductive lab)

→ N/V → 27/01/25 Monday 10C @ 2pm with reports.

Final impression:

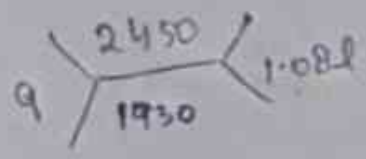
Sinus tachycardia



13/10/MS

Site B-ALL HR | DI | D35

NO NEW FOCUS



4av%

- TF GMP (50mg) 1 tab OD - 5/11
 1/2 tab OD - 2/11
 till 20/11

- Jy Arac 52 mg Slow IV fluids
 15/10 ~~fluid~~
 16/10 ~~fluid~~
 17/10 19/10/21 fluid Done shipped
 18/10 ~~fluid~~

- Const. in section | SB | BG
- N/V in OPD on 27/10/MS

CBC/Ht 47

Linear
SR

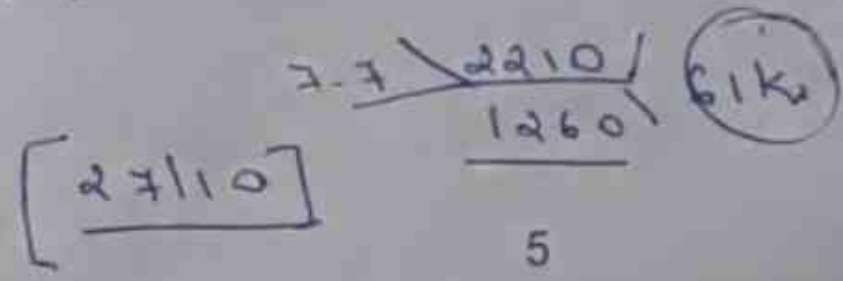
27/10/25

B A H W | H A R | O V phase completed

mp:



- PLT count recovery 2w after





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



नाम / Name
Unit / Dept.

बात बिरहिला विभाग
UHID: 107996190



Dept No: 20240030025118
Clinic No: 2024/POC/430

SHRADHA GUPTA

कमरा / Room
C-210

OPR-6

Queue / संख्या
F33

Unit: POC

/O.P.D. Regn. No.

पता / Address

D/O SHANKAR DAYAL GUPTA
7Y-48C / E/मिडि
309 GAL NO 2 JAPRAKASH
NAGAR BHATA MORE GZE UTTAR
Ph: 9601165474 General Rs. 0
Follow Up Patients



Reporting: 01:54:44
27/01/2025

POC 430/24

रिपोर्ट / Diagnosis

दिनांक / Date

उपचार / Treatment

16/04/25

29

N/V 29/1/25

CBC/UA/UT

EOI BMA, MRD refer

Signature

AND GREEN AIIMS / एन्ड का यही संकल्प, स्वच्छता से काया कल्प

जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



22/2/25

- 21 Betadine gargle
- Sit bath
- On Septan Sect 1/2
- C/o - low hb - 55 g/dl
- low platelet 29,000

HR - BALL / consolidation Day 18

No complaints of fever/cough
 Pain @ leg L-top site
 ↑ frequency of stool - usual consistency

Bp - 116/63 mmHg
 HR - 112 bpm

O/E Pelvic (P)

- CSF cytospin awaited

HR - 120/min

RR - 20/min

SS $\left\{ \begin{array}{l} 6030 \\ 5160 \end{array} \right\} < 20000$

RS - B (P)

CR - 5 L/d

U9 - Bil - 437 (not notably cloudy)

Adv → Refs to MCB-DC for PRBC infus.

average ad infus 250ml over 4 hours
 with Tx done 20mg oral

Refut U9

U9 → Continue Septan/Betadine gargle
 after Roshell U9.

- Next clno - 27/2/25

- Tx VCR 1.1 mg also IV fluid

- Risk of FN / bloody expand

Da

2/7/25 clo E-AU/HR | Post 2nd HD Ntr
on 01/6/25

new or the - 1 reviewed

30/6 KFT/FFT → (N)

(C.C.) 28/6/25

9.1 $\left. \begin{array}{l} 1790 \\ 1020 \end{array} \right\} 93k$

Adv

- add to waitlist for next

HD Ntr → 3rd HD Ntr

due on 5/7/25

- (N) in OPD 9/7/25 AS

to CBC/KFT/FFT



15/7/25

Adv

CBC, FFT, RFT (Smart lab)


Shikha/ix

Possibilities

- o Arrhythmia (~~dx~~ — anthracycline related)
- o Anemia \rightarrow CHF. (CW)
- o Sinus tachycardia
- o Compensated shock.

new dx
 \downarrow
decompensate
see to DNR
+ anemia

Plan

- Child being sent to pediatric casualty for monitoring & evaluation
- CBC, VBG, LFT, RFT, Blood (B), Troponin, BNP, ECG, chest X-ray
Arrange PRBC ..
- If features of CHF \rightarrow Predict TFR to 80%.
- If hemodynamic worsening / features of shock \rightarrow IV fluid bolus
- If significant / severe anemia / CHF — consider PRBC transfusion in aliquots
- ECG monitoring

~~DR. S. K. SINGH~~
SR

28/12/24

- 27 Betadine gargles.
- Sitz Bath.
- D8 - CF & PS (27/12/24) report awaited.
- TLCI - 6650.
- No. fresh complaint.

Day 8 w/o awaited

27/12 → 102 $\left\langle \begin{matrix} 6650 \\ 85000 \end{matrix} \right\rangle$
CF/PS

D9 of Induction

No fresh issues

④ Neurocognitive evaluation done on WISC-IV. Child came to mother, rapport could be established, child was able to understand instructions properly.

Findings as per WISC-IV :-

1. Verbal Comprehension: 104
2. Working Memory : 98
3. Perceptual Reasoning : 96
4. Processing Speed : 89

DDA: 28/12/24

| FSIQ: 96 |

"Average Intelligence"

Revised
28/12/24



F/O 1/1/25 = CBC
RF/CF

[Signature]

Department of Pediatrics
Division of Pediatric Oncology 97718
All India Institute of Medical Sciences, New Delhi

बाल चिकित्सा विभाग
UHID: 107996190
Dept No: 20240030035116

कमरा / Room
C 218
Queue / संख्या
F110
Unit/III: Pediatric

SHRADHA GUPTA
D/O SHANKAR DAYAL GUPTA
BY 10M 7D / F / (11/08/20)
UTTAR PRADESH, INDIA



Ph: 8929179447 General Rs. 0
Follow Up Patient

Reporting: 08/11/2025
08/11/2025

Name :- Shradha UHID No. _____
O.P.D./Ward _____

Rx. 107996190

① T-6MP 50mg 1 Tab OD
X 3 months

② T. Methotrexate
10mg — ①
5mg — ① } X 3 months
once a week

③ Betadine gargle

④ Icdiasure

⑤ Deltol

⑥ Betadine solution

⑦ Coconut oil

Shruti

19 April, 25

S/B Situation

Intake - 1002 / 1505 kcal

Pro - 31 / 37.5 gm

- cont. with same diet
- small sug meals adv.
- same fruits x times a day
- same menu atleast 1/2 of it

Protein

23/4/25

Consolidation Completed

2.2 $\left\{ \begin{array}{l} 1640 \\ 150 \end{array} \right\}$ 1.55 kcal

40% PRO @

LP/LP-13

no other complaints

23/4/25

S/B Situation

Intake - 91%

1376 / 1505 kcal

- 61 gm / 37 gm

- cont. with same diet
- Milk x times / day
- 500ml / day adv.
- Take whole fruits instead of juices

Protein

Adv

① - to start GMI once count recovers

② - to add to workout for HDMP

③ of 30/4/25

CCBE/PA/CH

18/11/16
E.P.L. 110/70
Culter 150
- 100 mg

B-ALL / High risk / Enduction / Day 30

No fresh complaints
G (except fatigue)
(Cough x 3 days)

Outpatient dose
steroid.

No % fever/vomiting / loose stool

16/11/16
89 9360 30SL
ANC
0420

Oral Protonix - good

last chemo -

9/12

Pallor (+)

17/11/16

Tachycardia - 138/min

RR - 24/min

(VCR, Daunorubicin)

CFI - 3s

Peripheries - warm

BP - 110/70 mmHg

CP/PP ++
++

Chest - clear, NVBS

CVS - S₁, S₂ heard, NO S₃/gallop

P/A - soft, non-tender, liver
Spleen | Not palpable

CKID-97718

अस्पताल में धूम्रपान मना है / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

बाल चिकित्सा विभाग
 UHID: 107996190
 Dept No: 20240030035118
SHRADDHA GUPTA

कमरा / Room
 C-207
 Queue / संख्या
N20
 Unit: Paediatric

OPR-6

Regn. No. _____
 Home / Address _____

D/O SHANKAR DAYAL GUPTA
 7Y 2M 23D / (फरवरी)
 309, GALI NO. 2, JAIPRAKASH
 NAGAR BHATA MORE, GZB, UTTAR
 Ph: 9806495474 General Rs. 0
 New Patient

SAT 11/12/2024

 Reporting: 09:28:11
 14/12/2024

उपचार / Treatment

Acute Leukemia

LC20122401438
 LC2012242144 107996190

 SHRADDHA GUPTA

Adv

- Referred to Paed Emergency
- Request review by Paed Onco please

[Signature]

107996190

107996190

N/V - 20/12/24 OPR 210

*CBC, IL-1, AFP
 22/12/24
 Scientist lab.*

16/7/25

Oral Intake - 960 kcal / 33g

- Add 4 scoops of supplement in milk
- Add ghee
- Add dry fruits

16/7/25 B-All/HR/HR/HR

no active complaints

$$100 \overline{) 1730} \leftarrow 1.70 \text{ days}$$

$$\underline{480}$$

due for ...

repeat CBC / RFT / Ua

- 1/2 2d/3d/5d at 2pm v 10c

21/7/25

C10

B-All/HR - steroid pretreatment

post #2 HD MTX :: 21/6/25

Due for #3

$$11.1 \overline{) 2660} \leftarrow 1.7 \text{ @}$$

$$\underline{1120}$$

Arranged drugs

In waiting list

1/2 @ 1/4 take

Adv. - Restart 700 GMP SO4

- Sr Tincy flz note in HD MTX list
- TO take on priority.
- Flu E 50 CAL, UFT/RF on 30/7/2025

6/10/25

C10, B-ALL / HR / D1 phase

→ no fever/cough

→ HR → 100

RR → 26

PPtTt / H

RS / CVS / PA / CNS M

dua for cy clophost + GMP + ARAC

dated 7/10/25

CBC → 10.1 $\left\{ \begin{array}{l} 2440 \\ 1060 \end{array} \right. \left\{ 1.760$

RFT / LFT → (N)

Adv

→ cyclophosphamide tomorrow
19m²

→ ARAC from daycare from 8/10


→ GMP from 7/10

→ fuon 13/10/25

POC Clinic

CBC / RFT / LFT

- chemo started on 20/2/25
- for 10/2/25 same to 20/2/25
- for 10/2/25 at 2pm 5:30/6:00/6:30


A. Rama

10/2/25
- Date for Discharge
on 6th Feb
Sept 2025
→ Date for
10/2/25

B- ALL/HR/consolidation Day 6

had one episode of vomiting yesterday
No complaints & present
CBC report awaited

O/E PTP @ CRT CSW

HR - 120/min

RA - 20/min

RS - 0/4 @
clear

CVI - Red vomit

Act

→ CBC/HPT/UA
- sweat lab

→ Continue

○ Tib 6 MP 126 OD

- Cont'd defter/betredine
angle
side bed

- U & CBC on 12/2/25

- Dayer sig - explained - R/V CA
II CA

- obj Enet 5L W1
(for vomity)

15.02.2025



Dr. Arjitabh
DM Paediatrics
Pediatric Oncology
DMC - 52671
AIIMS - New Delhi

29/11/25

- 400ml saline gargles
- Site visit
- Ancef 1g Sal Bm
- 400ml mild cough
- EOL - 600mg med. done
- Report submitted
- No ABC
- file incomplete.

B. All / HR / Induction
 EOL done + MED done on 28/11/25
 400ml of site of BM
 not been available for Tudygudic
 since Tudygudic

Tudygudic - primary
 next AMC - 1130

1 since Tudygudic
 (Ancef, Para C & M site)

o/c American
 Rth of Street from P
 HR 153/min
 BP 116/80 mm of Hg
 SpO2 98%

Previously admitted for Unruptured
 since Tudygudic Tudy
 TCT-C
 EKG-C
 apt. no cardiomy

RR - 22/min
 ECG - normal
 CXR - clear
 Tudygudic R

- Danger to observe -
 Ancef BM site dressing
 Sptm / Betadine gargle / Site visit

ABC / VMA
 CF / HPL
 Dry
 2.536 / 100 / 102 / 11203 - 25.8

na / u - 136 (2.7)

ital - 0.48

16

Culu - 137
 lac - 2.3

Key
 situation
 hypotensive
 situation



डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

Patient
Hospital Premises

OPR-6

DR. B.R.A. IRCHA, AIIMS, NEW DELHI
IRCH No. 334568 Reg. Date-17/12/2024
Deptt. ONCO-ANAESTHESIA AND PALLIATIVE
MEDICINE(OAPM)
General

P.D. Regn. No.

जन्म तिथि/Date of Birth

10/09/2019
IRCH



Clinic PAC & Palliative Care Clinic Clinic No. 2024/76296
नाम UHID-107996190
Name SHRADDHA GUPTA
D/O- SHANKAR DAYAL GUPTA Sex/Age F/7Y
Phone No. 0969105474 Room No. (Child Medicine)

नाम/Name
FEB 2025
68

Diagnosis B-ALL

Date

उपचार/Treatment

Case discussed to Prof Dr Brajesh Kumar Ratia.

40 Episodic fever (102°F) x 40d.
Sweating ⊕
Chills and rigor ⊖

40 pain in joints asso. swelling x 20d.
Sharp Aching pain.
Localized.
NRS - 8/10

60

Advice

Tab Morphine 10mg @ 1/4 tab q.i.d. 1/4 1/4 - 1/4 - 1/4

Syp Paracetamol (120mg/5ml) → 10ml TDS 1-1-1

Syp Kansol kid 15ml OD AC 1-X-X

Cap Gabap 100mg 1 tab OD HS X-X-1

Syp crumaffin 1 tsp HS X-X-1 tsp.

Review under pediatric oncology.

Riv after 2 weeks.

Date - 31/12/24
Time - 10:00 AM.
R. NO - 60.

17/12/24

maharini
17/12/24

Dr. Himanshu Varshney
Resident

अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE
B.O. AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)
मले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है/Dharamshala facility is available for outstation patients



OPR-6

रोगी/रोगी सं. / O.P.D. Regn. No.

नाम	पिता/पुत्र/पत्नी/पुत्री F / S / W / D of	लिंग Sex	वयु Age	पता/Address
बुध्वा	7y / f			107996190

Suspected acute leukemia

- Fever (on/off) — high grade up to 103° F (38.3°C) / day
- Joint pain & swellings.
- Rash / Blackish discoloration over Apr.

No % alternative medication

Hb
RBC transfusion (2 times)

No h/o yellowish discoloration / haemoglobinuria / abnormal movements.

Parental steroids x 7 days

% E → Pallor (+), Blackish brown (retro-orbital) Apr.

Chest — Normal chest x-ray
 WBC 10000
 5.6 N46/L5

% A — soft, non-tender liver — 2 cm BL

Mantoux test — NR

GIA → NR
 CBNA1

PS → 40% blast

LDH → 137 I

Possibilities

Acute leukemia
 (B-ALL > T-ALL > AML)





भारत सरकार
Government of India



Download Date: 24/02/2020



श्रद्धा गुप्ता
Shraddha Gupta
जन्म तिथि/DOB: 22/09/2017
महिला/ FEMALE

Issue Date: 04/02/2020

आधार नंबर

गए आधार 5 वर्ष की उमर तक ही वैध है

7652 4153 4451

VID : 9139 5867 4035 2260

मेरा **आधार**, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

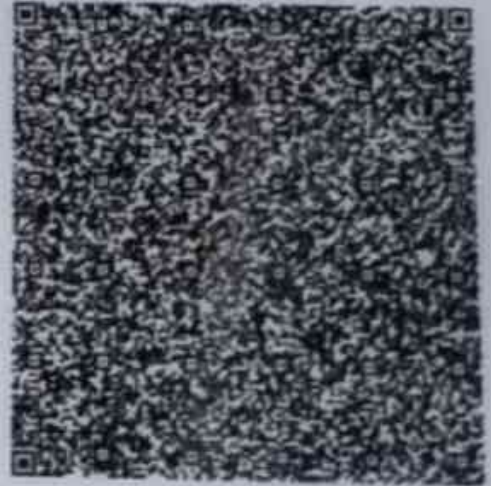


पता:

द्वारा: शंकर दयाल गुप्ता, 309, गली न 2 जयप्रकाश नगर,
भाटिया मोड, गाजियाबाद, गाजियाबाद,
उत्तर प्रदेश - 201001

Address:

C/O: Shankar Dayal Gupta, 309, Gali no 2
Jaiprakash nagar, Bhatia more, Ghaziabad,
Ghaziabad,
Uttar Pradesh - 201001



7652 4153 4451

VID : 9139 5867 4035 2260



1547



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www



भारत सरकार
Government of India



Aadhaar no. issued: 24/06/2014



शंकर दयाल गुप्ता
Shankar Dayal Gupta
जन्म तिथि/DOB: 01/01/1980
पुरुष/ MALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/
ऑफलाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।

**Aadhaar is proof of identity, not of citizenship
or date of birth. It should be used with verification (online
authentication, or scanning of QR code / offline XML).**

3396 5306 9294

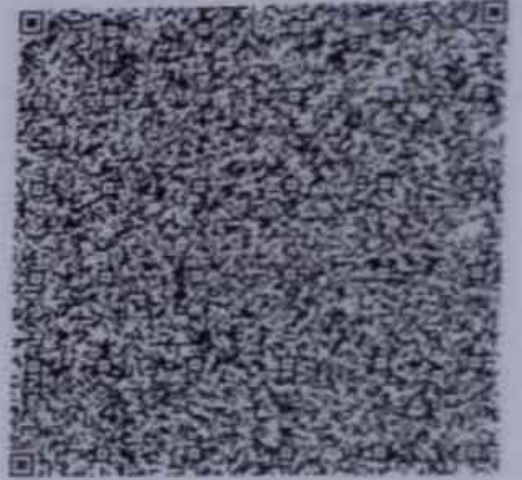
मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता:
संबोधित: रामसजीवन गुप्ता, 309, 2, जय प्रकाश नगर, भाटिया
मोड, गाजियाबाद, गाजियाबाद, गाजियाबाद,
उत्तर प्रदेश - 201001



Address:
S/O: Ramsajivan Gupata, 309, 2, jai prakash nagar,
bhatiya mod, Ghaziabad, PO: Ghaziabad, DIST:
Ghaziabad,
Uttar Pradesh - 201001

3396 5306 9294

VID : 9149 2734 6738 1570



1947



help@uidai.gov.in



www.uidai.gov.in



भारत सरकार

Government of India



Download Date: 01/07/2025



अर्चना गुप्ता

Archna Gupta

जन्म तिथि/DOB: 14/05/1986

पल्लव/ FEMALE

Issue Date: 25/06/2025

8012 2247 3475

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मेरा आधार, मेरी पहचान



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