	गेटः-	<u> </u>	The same of the sa
एक्ट व हस्ताह नाम- पदनाम			- 1
स्ताक्षर स्ताक्षर नाम-	र्गतम् ।		
एक्ट की धारा के अन्त हस्ताक्षर (कार्मिक) नाम- अय अकार पदनाम- भूगप (रा	मंख्या-	4	नाम अट्ट अट्ट
和 朝 朝	07 म		
एवट की धारा के अन्तर्गत लाम दिया जा सव हस्ताक्षर (कार्मिक) नाम- ज्याय प्रकाश्य रहरू पदनाम- राप (प्रधापा) भागित्र प्रता	दर्शीय		पदनाम अप्य सहम्रक
2 m 2 m			3
ये व			वर्गान कार्यालय का
सकेंग			
एवट की धारा के अन्तर्गत लाभ दिया जा सकेगा। हस्ताक्षर (कार्मिक) हस्ताक्षर (कार्मिका) हस्ताक्षर (कार्मिका) वनाम- श्रीप्राप्ती अभियन्ता वनाम- श्रीप्राप्ती अभियन्ता			अनुरोध के आधार पर आवेदन करने का प्रारूप-2 वाहसील का रिक्षक स्थान नाम वरियता कम मं 5 6 7
सक्षम ।		24	म स्राची से स
तर स		ST COM DI	आधार पर आवेदन स्थानान्तरण हेतु १० एडिकक स्थान वरियता कम मं हिक द्विरिश्वी
मेर्गत		10	भार पर आवेद भानान्तरण हेतु ऐक्छिक स्थान वरियता कम में ह विक स्थिति
प्रमाण			मि में नि व
पत्र स्व	धारा 17 सरा 17(धारा १	करने का प्रा एक्ट की धारा के नाम व
प्रमाणित	□ धारा 17(1) (ख) (पांच) □ धारा 17(1) (ख) (छ:) □ धारा 17(1) (ख) (सात)	अ धारा 17(1) (ख) (दो) □ धारा 17(1) (ख) (तीन) अ धारा 17(1) (ख) (वार)	ग प्रास्त की धा गाम के श
त छायाप्र	(पांच) (छ:)	(चार)	करने का प्रारूप-2 एक्ट की धारा जिसके अन्तर 7 धारा के नाम के आगे ✓ लगावे धारा 17(1) (ख) (एक)
ाति संलग हस्ता नाम पदना			1 1
मिया	Co X	Thatmen and Sh. cen	िअनुरोह प्रस्तुत र
ना अनि हार्यात	Centificate	Centi	्र म किया सास्यों र
हस्ताक्षर (कार्यालयाध्यक्ष) नाम- चाम- अधिकासी अभियन्ता पदनमिर्धाः	िह	Thatment Records and Sh. centificate Comaficio	े का प्रारम्प-2 एक्ट की बारा जिसके अन्तर्गत अनुरोध किया गया है ७ के नाम के आगे ४ लगाये प्रस्तुत साह्यों का विवरण गरा 17(1) (ख) (एक)
मयाना तम	황취회회학자		<u>a</u>
मिर्मी विक्रुनगर	事部部当 1	क्षेत्र । स्टिमाध्यम् क्षित्र । स्टिमाध्यम्	िट्याकी अस्त्री अस्त्री
•	THE STATE OF THE S	क्षामारी कार असर से ग्रायन हिमालम- अस्पता हिमालम- अस्पता	3 9
	कार्या प्रमान कार्या के निर्माण कार्या कार्	क्षेत्राम् स्ट्रिस्ट से अन्यतान	4
	मिन निर्मा	7	

Sushila Tiwari Memorial.

CANCER RESEARCH INSTITUTE

(An Associated Hospital Of Himalayan Institute Of Medical Sciences)

SWAMI RAMA HIMALAYAN UNIVERSITY

Jolly Grant, Dehradun - 248016

Division of HEMATOLOGY, PEDIATRIC ONCOLOGY & BMT

Dr. Kunal Das - Consultant OPD:- Monday/ Wednesday Dr. Avriti Baveja - Consultant, OPD- Tuesday/ Friday

Patient Discharge Summary

UHID

:2865022 /

PATIENT NAME :Ms. PRANAVI

BHATT

AGE

:09 Yrs.

DOA

:01/02/2023 14:58

Phone No

IP NO :23/5483

Father: JAI PRAKASH

SEX

: FEMALE

DOD

:02/02/23

Addr. : GURUKUL KANGARI

DIAGNOSIS: Pre B ALL, Late isolated CNS relapse

STATUS: ADMISSION FOR reinduction week 1

PATIENTS SUMMARY: She is a known case of Pre B ALL, completed her treatment as per BFM ALL 95 in April 2022. BAseline disease was CNS negative and MRD was as per BFM ALL 95 in April 2022. Baseline disease was CNS negative and MRD was 0.01 after IA, negative after IB. No PCI was given. She presented with headache and emesis x 1 week. MRI showed leptomeningeal enhancement and nodular lesions. She was admitted and CSF was send, which confirmed disease relapse. BM is not involved. She was given RI block chemotherapy in previous admission. She is better and no headache noted. She has completed 4th block while BMT is awaited. TIT was given as well. She is stable and is being discharged now

Treatment given-

IIA week 1 as per BFM protocol

Advice on discharge: -

Tab Biodexona 6mg BD after meals

Tab Pantop 40mg 1/2 tab BD

Syp Mucain gel 5ml TDS

Tab Septran DS 1/2 tab On Monday/wednesday and Friday Tab Acivir 100mg BD

Tab Flutas 150mg 1/2 tab OD

TAB EMESET 1 tab TDS x 3 days then SOS FOR VOMITING PLENTY OF FLUID

UHID :2865022 / PATIENT NAME :MS. PRANAVI IP NO :23/5483

Follow up: - REVIEW IN MEDICINE ONCOLOGY OPD on 08/02/23 with CBC

Warning signs/symptoms-In case of FEVER/BLEEDING/SEVERE HEADACHE: please inform on 01352471409 [8-30AM to 4-30PM; 1352471342 [4-30PM to 8-30AM] or report to emergency

In case of any health issue, it is advisable to take a consult from nearby health care facility if coming to emegency is not feasible. Please inform us about advices or request the attending doctor to talk to us for any

Consultant Name : DR KUNAL DAS / DR AVRITI BAVEJA Cincer Research

I State that I have received original copy of discharge summary and advice at discharge explained to Name:-

Relation to Patient:-

Signature :-

Date :-

Phone no :-

Sushila Tiwari Memorial CANCER RESEARCH INSTITUTE

(An Associated Hospital Of Himalayan Institute Of Medical Sciences)

SWAMI RAMA HIMALAYAN UNIVERSITY

Jolly Grant, Dehradun - 248016

Dr. Kunal Das - Consultant

Division of HEMATOLOGY, PEDIATRIC ONCOLOGY & BMT

Dr. Avriti Baveja - Consultant

OPD:- Monday/ Wednesday OPD- Tuesday/ Friday Patient Discharge Summary

UHID :2865022/

IP NO:23/6838

PATIENT NAME : Ms. PRANAVI

Father:JAI PRAKASH BHATT

AGE :09 Yrs.

DOA

SEX : FEMALE

:08/02/2023 15:58

DOD :09/02/23

Phone No :

Addr. : GURUKUL KANGARI

DIAGNOSIS: Pre B ALL, Late isolated CNS relapse

STATUS:ADMISSION FOR reinduction week 2

PATIENTS SUMMARY: She is a known case of Pre B ALL, completed her treatment as per BFM ALL 95 in April 2022. BAseline disease was CNS negative and MRD was 0.01 after IA, negative after IB. No PCI was given. She presented with headache and emesis x 1 week.

MRI showed leptomeningeal enhancement and nodular lesions. She was admitted and CSF was send, which confirmed disease relapse. BM is not involved. She was given R1 block chemotherapy in previous admission. She is better and no headache noted. She has completed 4th block and planned for BMT now. She has been started on Reinduction like protocol while BMT is awaited. Week 2 chemotehrapy was given, ITMTX was given as well. She is stable and is being discharged now. IIA week 2 as per BPM protocol Advice on discharge:

Tab Biodexona 6mg BD after meals

Tab Pantop 40mg 1/2 tab BD

Syp Mucain gel 5ml TDS

Tab Septran DS 1/2 tab On Monday/wednesday and Friday Tab Flutas 150mg 1/2 tab OD

TAB EMESET 1 tab TDS x 3 days then SOS FOR VOMITING PLENTY OF FLUID

Follow up: - REVIEW IN MEDICINE ONCOLOGY OPD on 15/02/23 with CBC Warning signs/symptoms-

In case of FEVER/BLEEDING/SEVERE HEADACHE; please inform on 01352471409 [8-30AM to 4-30PM; 1352471342 [4-30PM to 8-30AM] or report to emergency services [24 hours open] In case of any health issue, it is advisable to take a consult from nearby health care facility if coming to emegency is not feasible. Please inform us about advices or request the attending doctor to talk to us for any clarification. Consultant Name: DR KUNAL DAS / DR AVRITI BAVEJA

I State that I have received original copy of discharge summary and advice at discharge explained to me .

Relation to Patient:

Date :-

Phone no :-

Sushila Tiwari Memorial

CANCER RESEARCH INSTITUTE

(An Associated Hospital Of Himalayan Institute Of Medical Sciences)

SWAMI RAMA HIMALAYAN UNIVERSITY

Jolly Grant, Dehradun - 248016

Dr. Kunal Das - Consultant OPD:- Monday/ Wednesday
Dr. Avriti Baveja - Consultant OPD- Tuesday/ Friday

Division of HEMATOLOGY, PEDIATRIC ONCOLOGY & BMT

Patient Discharge Summary

UHID

:2865022 /

PATIENT NAME :Ms. PRANAVI

IP NO :23/8184

BHATT

Father: JAI PRAKASH

:09 Yrs.

AGE

DOA

:15/02/2023 13:44

SEX : FEMALE

Phone No

DOD :16/02/23

Addr. : GURUKUL KANGARI

DIAGNOSIS: Pre B ALL, Late isolated CNS relapse

STATUS:ADMISSION FOR reinduction week 3

PATIENTS SUMMARY: She is a known case of Pre B ALL, completed her treatment as per BFM ALL 95 in April 2022. BAseline disease was CNS negative and MRD was 0.01 after IA, negative after IB. No PCI was given. She presented with headache and emesis x 1 week. MRI showed leptomeningeal enhancement and nodular lesions. She was admitted and CSF was send, which confirmed disease relapse. BM is not involved. She was given R1 block chemotherapy in previous admission. She is better and no headache noted. She has completed 4th block and planned for BMT now. She has been started on Reinduction like protocol while BMT is awaited. week 3 chemotehrapy was given, ITMTX was given as well. She is 12/12 HLA matched with her sister. She will be taken for BMT after this Treatment given-

IIA week 3 as per BFM protocol

Advice on discharge:

Tab Pantop 40mg 1/2 tab Twice a day x 4 days

Syp Mucain gel 5ml Twice a day x 4 days

Tab Septran DS 1/2 tab On Monday/wednesday and Friday Tab Acivir 100mg Twice a day

Tab Flutas 150mg 1/2 tab Once a day
TAB EMESET 1 tab Thrice a day x 3 days then SOS FOR VOMITING

UHID :2865022 / IP NO :23/8184

Follow up:- REVIEW IN MEDICINE ONCOLOGY OPD on 22/02/23 with CBC, for BMT discussion

Warning signs/symptoms-

In case of FEVER/BLEEDING/SEVERE HEADACHE; please inform on 01352471409 [8-30AM to 4-30PM; 1352471342 [4-30PM to 8-30AM] or report to emergency services [24 hours open]

In case of any health issue, it is advisable to take a consult from nearby health care facility if coming to emegency is not feasible. Please inform us about advices or request the attending doctor to talk to us for any clarification.

Consultant Name: DR KUNAL DAS / DR AVRITI BAVEJA

I State that I have received original copy of discharge summary and advice at discharge explained to

Name :-

Relation to Patient:-

Signature :-

Date :-

Phone no :-



हिमालयन हॉस्पिटल

(स्वामी राम हिमालयन विश्वविद्यालय की एक इकाई) स्वामी राम नगर, जोलीग्रान्ट, डेहरादून-२%co9६



DISCHARGE SUMMARY

UHID

: 2865022

IP NO

: 23/10370

Patient Name

: Ms. PRANAVI

Bed No

: 2AP-02

Age Gender

: 9 Yrs 5 Mths 20 Days/Fentale

DOA

: 27/02/2023 05:25 PM

Consultant

: Dr. KUNAL

: 29/03/2023

Discharge Status:

DOD

Patient Address : GURUKUL KANGARI,

HARIDWAR, UTTARAKHAND,

INDIA

Mobile No.

DIAGNOSIS: Relpased ALL [isolated CNS relapsed, early, at 6 months]

STATUS: ADMISSION FOR Allegeneic MSD HSCT

PATIENTS SUMMARY: She is a known case of Pre B ALL who recieved treatment as per BFM ALL and completed maintainenece in 2022. At 6 month post completion of treatment, she was diagnosed to have relapsed isolated CNS ALL. She was started on REZ protocol. She completed her 3rd R2 block, CSF cleared after 1st IT. She was admitted now for allogeneic MSD HSCT with her sister, who is 12/12 match with her.

Pre transplant fitness- detected to have no morbidity

Conditioning- Flu-Bu (2)-Mel

GVHD prophylaxis- 1 day pTCY, MTX, Cyclosporin

Stem cell infusion was done on 07/03/23, stem cell dose- 10/10*6/ kg

Morbidity- FN on day 3, managed with antibiotics. Blood culture- sterile,

Mucositis grade III-day 5-day 11, given TPN

Engraftement-Neutrophil on day +13, platelets on day 16

Vascular access- Neck line

no evidence at GVHD

CMV- awaited,

She is stable, accepting orally and no fresh complaints noted. Counselling has been done regarding home care, hygiene and visit indications. She is being discharged in stable condition.

Plan- to collect CMV report

Will do Therapeutic Cranial RT on day 45-60.

l'est	Value	Unit	Reference Range
Date - 27/02/2023			
CALCIUM	9.51	mg/dL	(8.8 - 10.6)
CREATININE			
CREATININE	0.47	mg/dL	(0.51 - 0.95)
THOSPHORUS	4.31	mg/dL	(2.5 - 4.5)

Print Date & Time: 29/03/2023 10:52