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अभिज्ञासी अभियन्ता

Alfred Apple



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 /

IP NO :23/5483

PATIENT NAME :MS. PRANAVI  
BHATT

Father:JAI PRAKASH

AGE :09 Yrs.

SEX :FEMALE

DOA :01/02/2023 14:58

DOD :02/02/23

Phone NO :

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 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 sent, 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. 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 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 emergency 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.

Name :-

Relation to Patient:-

Signature :-

Date :-

Phone no :-



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Division of HEMATOLOGY, PEDIATRIC ONCOLOGY & BMT  
Jolly Grant, Dehradun - 248016  
OPD:- Monday/ Wednesday  
OPD- Tuesday/ Friday  
Patient Discharge Summary

UHID : 2865022/  
PATIENT NAME : Ms. PRANAVI  
AGE : 09 Yrs.  
DOA : 08/02/2023 15:58  
Phone NO :

IP NO : 23/6838  
Father: JAI PRAKASH BHATT  
SEX : FEMALE  
DOD : 09/02/23  
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 sent, 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 chemotherapy was given, ITMTX was given as well. She is stable and is being discharged now.

**Treatment given-**

IIA week 2 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

**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 emergency 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.  
Name :-  
Relation to Patient:-  
Signature :-  
Date :-  
Phone no :-



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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

IP NO :23/8184

Father:JAI PRAKASH

AGE :09 Yrs.

SEX :FEMALE

DOA :15/02/2023 13:44

DOD :16/02/23

Phone NO :

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 sent, 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 chemotherapy was given, ITMTX was given as well. She is stable and is being discharged now. She is 12/12 HLA matched with her sister. She will be taken for BMT after this chemotherapy.

**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 Mucaïn 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

PLENTY OF FLUID

UHID :2865022 /  
PATIENT NAME :MS. PRANAVI

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 emergency 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.

Name :-

Relation to Patient:-

Signature :-

Date :-

Phone no :-





# हिमालयन हॉस्पिटल

(स्वामी राम हिमालयन विश्वविद्यालय को एक इकाई)  
स्वामी राम नगर, जौलीग्रान्ज, देहरादून-248009



## DISCHARGE SUMMARY

UHD	: 2865022	IP NO	: 23/10370
Patient Name	: Ms. PRANAVI	Bed No	: 2AP-02
Age/Gender	: 9 Yrs 5 Mths 20 Days/Female	DOA	: 27/02/2023 05:25 PM
Consultant	: Dr. KUNAL	DOD	: 29/03/2023
Discharge Status		Patient Address	: GURUKUL KANGARI, HARIDWAR, UTTARAKHAND, INDIA
Mobile No	:		

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

STATUS: ADMISSION FOR Allogeneic MSD HSCT

PATIENTS SUMMARY: She is a known case of Pre B ALL who received treatment as per BFM ALL and completed maintenance 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.

Pra 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<sup>6</sup>/kg

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

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

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

Vascular access- Neck line

no evidence of 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.

Test	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)
PHOSPHORUS	4.31	mg/dL	(2.5 - 4.5)