



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

CPAA



शरीरमाद्यं खलु धर्मसाधनम्

Patient Note Book

Name : Arush Verma

UHID : 105976123

agnosis : HL

Food
Amount (g) / energy (kJ) 10 700 x 30
Fat 20g 4mg 10 120

Apr on 6/12/23

for

Diet Notes

Wt - 26.5

Advice - Pentasone BN 1 scoop in 100 ml water TD
Kalbite 4/day
Ghee 3 tsp/day

Cement intake is < 40% of recommended
Recommended intake = 1780 kcal / 46 g P

To return for NY next week
12/12/23

Handwritten signature/initials

- ORS 200ml / each loose stool
- sy. T. ORNOF 1 TAB po q 12H x 1 week
[CORNIDAZOLE - OFLOXACIN]
200mg
Handwritten signature/initials

Diet Notes

Wt - 28.5 kg
H - 140 cm
old acute
Mal.)

Cement intake - 1350 kcal & 49 g P
Recommended intake - 1850 kcal & 68 g P

Compliance to diet supplement 5

Diet Plan - Advice - Essential BN
1 scoop in 200 ml water
through 3/day

Med notes

Wt: 145 cm
170 kg
170 kg
(Current weight)

Current intake - 1400 kcal and 32g P.
Recommended Intake - 1700 kcal and 40g P.
Advice - Kabifex 10mg in 200ml
milk 20.

Therapy 3/day

13/10/23

26/10/23

dx Hodgkin's lymphoma /
Stage IIA / P respiratory disease

90, cough } x 1 week
long 2a

D/E: P-I-C-d-cy-L-E-
Chest: B/L A/E equal
no added sounds.

Rest 4E: WNL

ADG:

- Tab. cetirizine (10mg) 1/2 tab po
OD HS - x 5 days.
- Cont. Septon.
- PET-CT dated on 4/11/23.
- N/V on 08/11/23 ~ CBC/RFT/LFT

Sivani

10/8/22

PDPD

Prong visit

11.3 $\left\{ \begin{array}{l} 3790 \\ 1360 \end{array} \right\} 2.87 L$

No complaints

RFT } WNL
LFT }

- To give C# 2+

PET dated

on 26/8/22

- inj Emeset 4 mg } - IVP
- inj dexam 4 mg }

↓

~~Medet~~
10/8

- inj Vinorelbine 5.5 mg IVP
- inj Bleomycin 9.5 mg IVP
- inj Docetaxel 350 mg /
100 ml NS IV over 1hr
- inj Doxorubicin 24 mg /
100 ml NS IV over 1hr

- T. Septeran DS A/D

- N/V on 27/8/22

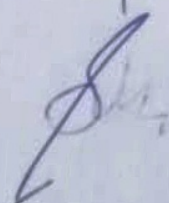
≡

A Choro → T. Emeset 4mg 1 tab TDS

T. Dexa 4mg 1 tab BD

T. Pantop 2mg 1 tab BAF 00

} x 3d



24/1/24

• Post cycle 1 Be4V

• no active complaints

• can proceed E C# Be4V after 3 weeks of 1st cycle.

• To expedite funds for NSCT.

• To re-assess after 2nd Be4V E PET CT.

Adj.

12 } $\frac{4480}{2370}$ ← 3.87 tab
KFT | LFT - (N)

(★) - To check Pr chemo lab prior to initiation of chemo

Pr chemo: Inj. Deco amp + enoxet. 4mg in stat

CPAK

Carbids please

Chemo: Tab. PDN 10mg 4-3-3 tab on Day 1-4

Inj. Gemcitabine 820mg in 500ml NS IV over 45min on D₁ & D₂

(PTO)

To Start chemo

Wt: 24kg
Ht: 132cm

Chemo: 25/6/22
2PM → CS Daycare.

Cycle 1a

BSA: 0.94

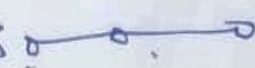

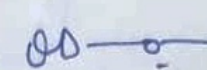
Pre Chemo

- Inj Emset 4mg iv stat
- inj Dexa 4mg iv stat

Chemo

- Inj DOXORUBICIN 25 mg / 100ml NS iv over 1hr. (D1)
↳ 25/1
- Inj BLEOMYCIN 9.4 mg / 10ml NS
↳ 25/6 iv slow push (D1)
- Inj VINBLASTINE 5.6 mg iv slow push
↳ 25/1
- Inj DACARBAZINE 350mg / 200ml NS
↳ 25/6 iv over 1hr.

Post chemo

- Tab Emset 4mg 1tab TDS 
 - Tab Dexa 4mg 1tab BD 
 - Tab Pantop 40mg 1/2 tab QD 
- } x3 days

P/u on 9/7/2022, Sat, 14a, CBC
RET/UT.
Midacip spray 1 puff in each nostril

4/7/2022
 12.3 | 3910 | 2.11 @
 1890

Due for cycle 1B
 ~ 9/7/2022

LAT/KFF (N)

no flc.

Not taking
 Septoran

inj Dera 4 mg }
 inj Emeset 4 mg } iv stat

inj Doxorubicin 25 mg / 100 ml NS iv over 1 hour
 9.40
 inj Bleomycin ~~10 mg~~ iv slow push

inj Vinblastine 5 mg iv slow push

inj Dacarbazine 350 mg / 100 ml NS iv over 1 hr

Post-chemo

T. Emeset 4 mg 1 tab }
 T. Pantop 20 mg 1 OD }
 T. Dera 4 mg 1 OD } 3 days

19

Met on 23/7/2022

T. Septoran DS 2/3 2 OD every alternate day.

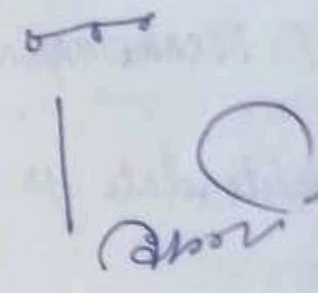
23/7/22
- on septon
- 24-betadine
- sita bath

180ml received on 9/7/2022

Hb - 12.10
Plt - 286 x 10³
TLC - 2590
ANC - 570

KOR/LET (N)

- Adv
- RPT CBC
 - TLC screen
 - Betadine gargles (2x)



7/22
septon
betadine gargle
2 bath
fresh complain

due for Π_1 , awaiting ANC recovery.

- no active issues

R. axilla - biopsy scars ⊕
1.5cm x 1.5cm lymph node mass palpable.

25/7/22

11.8 } 4230
1010 } 2,74,000

15/7/22

LFT/RFT (N)

Adv

- 1) ANC recovered. Can proceed with Π_1 today from 9 to 5 daycare.

- Inj. vinorelbine 20mg slow iv push followed by
NS flush after ensuring cannula patency

on Day 1

- Inj. Bendamustine 70mg in 200ml NS iv over 1 hour
or Day 2, 3

- Inj. G-CSF 130µg & OD as onwards

D1 Aug 15/10/23
D2 Aug 16/10
D3 Aug 17/10
D4 Aug 18/10
D5 Aug 19/11

- To take Day off from MCB Day Care
(2nd week off) → 11/10/23 onwards

- R/v 4/10/23

Satyam

10/11

0/23

✓ Beh v dated for 11/10/23 onwards.

✓ no fresh complaints
L already marked

✓ to take date for reassessment PET

- to meet Ankit's m'aam

208

Satyam

① PET CT scan
② any/ let us know final status
- final agreement

15/11/23

18/11/23

① on Sept 20
PET-CT ✓

check not being visit

Aug 23
① any/ ✓ ⊕

Nov 23
not + but update
got partial response
↓
repeat in com
but PET CT done
got partial response

approval for 1 more cycle

Be y v

next

how to meet
check
wants to go home to
my friend

carried please

CBC (22/11)

116 / 7030 / 239
4390

c/o/w prof. R. Serr

to give next cycle of Bequr as charted

② Day care for date 1/12/2023

4 days chemo.

~~by procedure~~

by furosemide 4mg + by dexamethasone 4mg IV stat

Chemo

1st prednisolone 10mg 4-3-3 tabs Day 1-4

by gemcitabine 820mg / 500 ml NS over 90min
D1 ~~to D4~~
altiv N.V.

by vincristine 20mg IV push D1

by Bendamustine 90mg / 200 ml NS over 1 hour
D2 ~~(D3)~~
altiv N.V.

by GCSF 130 meg SC QD ~~to D5~~ onwards for 5 days

Diet notes

Ht: 145cm
Wt: 26.5kg
BMI: 19.5
(Severe thinness)

Current Intake - 1400 kcal and 32g P.
Recommended Intake - 1750 kcal and 66g P

Advice - Kalifer lenofin 350ml
with DD.

Therapy 3/day.

Ah
13/10/23

26/10/23

dx: Hodgkin's lymphoma /
Stage IIA / P refractory disease.

Go, cough } x 1 week
laryza }

o/e: P-I c- d- cy- l- e-
Chest: B/L A/e equal
No added sounds.

Rest of e: WNL

Adv:

- Tab. cefixime (10mg) 1/2 tab Po
OD HS → x 5 days.
- Cont. Septan.
- PET-CT dated on 4/11/23
- N/V on 08/11/23 → CBC/RFT

Shi



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

अस्पताल के अन्दर धूम्रपान करना है। / SMOKING IS PROHIBITED

Dept Reg. 2022/001/0009013

General/# 10

Paediatrics/Paediatric
Units-111

कक्षा/Room: 14

नाम: शशील कुमारी

DAYS: WED

Name: Mr. GANESH VERMA

Queue No: N10

पिता: सुशील कुमार

अवस्था: 3Y पुरुष/M

S/O: SUSHIL KUMAR

Ph. 7390846067



UHID: 105976123

Date: 14/05/2022

LC1805220805 105976123

CVT-1805220835 105976123

GANESHVERMA

निदान/Diagnosis

3 Hodgkin Lymphoma

दिनांक/Date

35

44.1 kg

उपचार/Treatment

Ⓡ axillary LN ~ 3 month - by
No B symptoms ?HL

Acw -

- case
- CD30/CD45 / mixed markers
- PFS done
- to bring HPC slide → seen in oncopath/pathology

Handwritten signature

Next visit

~~Wednesday~~ Saturday
21/5/22

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)



meraaspatal.nhp.gov.in

31/1/24 -

42 (PTS)

- 2D Echo
 - GFR
 - viral markers
 - CMV / TORCH profile
 - ENT / Ophthal / Dental
service
- Clearance

to get admitted on 6/2/2024

Ashya son



भारत सरकार

Government of India



गणेश

Ganesh

जन्म तिथि/DOB: 06/01/2013

पुरुष/ MALE

8486 7260 4984

VID : 9103 5892 9494 1126



जेरा आधार, जेरी पहचान