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Prof. R. Seth
 Professor IC

उम्र Age 3y 3mo
 लिंग Service Female

दिनांक Date

यू.एच.आई.सी. नं.
 UHID No.
 107070877

c/c/B pds onco CR Notes written by Shivani Deep

CLINICAL NOTES

Diagnosis: Neuroblastoma (HR) | Post cycle 4 OJEC on 21/11/24

Part Chemotherapy: OJEC : 20/11
 21/11

c/o: fever
 cough & running nose } X 5 days
 loose stools: X 2 days

28/1/24

c/o vomiting | being irritable

28/1/24: 9.4 } 1120 } 1200
 300 }
 Status: B/L infiltrates
 USG Abd: ~~normal~~
 Notts/OJEC
 (P/CP: WP)

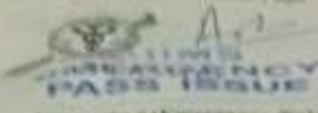
O/E: vitals: stable
 HR: 100/m
 Temp: 38.5/min

Exam: B/L wheezes (+) (Bipharic)
 mild ICR (+) (+) (+)

Plan: - cont sup. GCR -
 Cyp. Oseltamivir
 2 tabs ml PO BDK x 7d

(NS), S2 heard
 No murmur
 Sgal, NT
 No OM

Noted: - cont. Zosyn / Seiko
 - cont. neb c Acetylcysteine
 - cont. Neb c Budesonid
 200ug 1/12h
 - cont. neb c Ipratropium
 200ug q 8h
 - Peds Onco SR sheet review



MR NAME: MISS. ARUSHI
D/O: PURAN SINGH
MR ADDRESS: VILLAGE MEIKYA MARAURI
STREET/ROAD: BADAUN
CITY/BLOCK: 243601
STATE: UTTAR PRADESH
MOBILE NO:
BROUGHT BY: Relative
Location: Paediatrics Emergency
Criticality: Red / Yellow / Green

Triage: Responsive/ Unresponsive
HR /min BP mmHg RR /min SpO2 %
Shifted to Paeds/ Main/ New Emergency
Neuroblastoma (HE) ↓ pedi onc follow up.
o/c fever x 4d, intermittent, partially relieved on medication
Presenting Complaints
o/c cough x 4d, non productive / running nose
o/c pain abdomen x periumbilical region, vomiting x 1 episode & no loose stools

Primary Assessment (ABCDE): Assessment Pentagon
on Reptan prophylaxis
Amoxicillin started.

Airway
Open & stable Yes/No
Breathing RR 26/min
Efforts: Normal/Poor/increased
Auscultation:
Air entry: Normal/poor/Differential
Added sounds: None/Stridor/Wheezes/Crackles
Room air: 98%
Wt: 12 kg

Circulation
HR 130/min
CFT: 3secs.
BP: mmHg
Peripheral pulses: Poor/Good
Central pulse: Poor/Good
Skin temp: Warm/cool
Others
o oral cavity (D)
o nasal cavity
mucoid discharge

Disability
GCS: 15/15
Pupillary Reactions:
Motor activity:
Normal & Symmetrical/Asymmetrical/
Posturing/Flacidity/Seizure
Blood Sugar: mg/dl
Exposure:
Temp: 102.50 F
Colour: Normal/pallor/
/mottled
Any other skin lesion

Diagnosis

CBC
Blood c/s
JBG
CXR.

o orally allowed
o R/w reports



110029

INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029
 आर्य समाज अस्पताल, नई दिल्ली-110029
 Date: 28/11/24
 Age: 4yr Sex: F
 Marital Status: Single
 UHID No: 102028822

Ward: 87-4 Bed: 10
 Occupation: Student
 Religion: Hindu

ALL INJECTIONS TO BE INITIALED BY PERSON ADMINISTERING

Date & Time	Medication & Treatment	Diet	Observation by the Nurse
<u>28/11/24</u>			
3am	Inj. Teicoplanin 400mg IV OD		4.3pm Pt is conscious & oriented on oxygen. Orally allowed. Inj. G-CSF 65mcg s/c given.
8:30am	Neb. Salbutamol 2.5mg		
11am	Inj. Pantop 15mg IV OD		
12pm	Neb. Salbutamol 2.5mg		
<u>29/11/2024</u>			
8am	Inj. Teicoplanin 400mg IV OD		Temp - 104.3 6am - child is conscious & oriented. On room air. Taking orally. All due medications given. Voiding self. Monthly
11am	Inj. Pantop 15mg IV OD		
12pm	Neb. Ipratropium PDS		
4pm	Neb. Salbutamol X 2 nd time Hb 4 th time.		18m On O ₂ by PNC 11hr vital checked HR: 134b/min SpO ₂ : 90% RR: 31
3pm	Inj. G-CSF 65mcg s/c OD		
	<u>P.T.O</u>		

AIIMS - DEPTT OF EMERGENCY MEDICINE

ALU/NTD
Female

Age: 29 years

patient ID: 107078477
Date of Analysis: 28-01-2024 10:28

Para	Result		Unit
1 WBC	1.12	L	10 ⁹ /L
2 Neut#	0.30	RL	10 ⁹ /L
3 Lym#	0.66	RL	10 ⁹ /L
4 Mon#	0.14	R	10 ⁹ /L
5 Eos#	0.02		10 ⁹ /L
6 Bas#	0.00		10 ⁹ /L
7 IMG#	0.00	R	10 ⁹ /L
8 Neu%	26.5	RL	%
9 Lym%	58.8	R	%
10 Mon%	12.5	RH	%
11 Eos%	1.9		%
12 Bas%	0.3		%
13 IMG%	0.2	R	%
14 RBC	3.49	L	10 ¹² /L
15 HGB	9.4	L	g/dl
16 HCT	29.4	L	%
17 MCV	85.6		fL
18 MCH	27.0		pg
19 MCHC	31.4		g/dL
20 RDW-CV	0.191		%
21 RDW-SD	61.6		fL
22 PLT	144	RL	10 ⁹ /L
23 MPV	10.2	(%)	fL
24 PDW	15.7	R	%
25 PCT	0.049	RL	%
26 P-LCR	20	RL	10 ⁹ /L
27 LCR	55.9	RH	%
28 NRBC#	0.000		10 ⁹ /L
29 NRBC%	0.00		%

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AIIMS - DEPTT OF EMERGENCY MEDICINE

ARUSHI
Female

Last Name:
Age: 3 Year(s)

Patient ID: 107078877
Date of Analysis: 28-01-2024 10:28

Para.	Result		Unit
1 WBC	1.12	L	$10^9/L$
2 Neu#	0.30	RL	$10^9/L$
3 Lym#	0.66	RL	$10^9/L$
4 Mon#	0.14	R	$10^9/L$
5 Eos#	0.02		$10^9/L$
6 Bas#	0.00		$10^9/L$
7 IMG#	0.00		$10^9/L$
8 Neu%	26.5	R	$10^9/L$
9 Lym%	58.8	RL	%
10 Mon%	12.5	R	%
11 Eos%	1.9	RH	%
12 Bas%	0.3		%
13 IMG%	0.2	R	%
14 RBC	3.40	L	$10^{12}/L$
15 HGB	9.4	L	g/dL
16 HCT	25.4	L	%
17 MCV	85.8		fL
18 MCH	27.0		pg
19 MCHC	31.4		g/dL
20 RDW-CV	0.19	H	
21 RDW-SD	61.1	H	fL
22 PLT	34	RL	$10^9/L$
23 MPV	14.2	RL	fL
24 PDW	15.7	R	%
25 PCT	0.049	RL	%
26 P-LCC	20	RL	$10^{12}/L$
27 P-LCR	55.9	RH	%
28 NRBC#	0.000		$10^9/L$
29 NRBC%	0.00		%

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DOCTORS ORDER

Orders Cancelled by crossing through and initialing Rewrite all orders when turning over and after major changes. Sister should sign in the column provided when the order is transferred to the treatment books.

Date Cancellation	Doctor's orders with signature	The sister's signature with date
<p>4 1.12 0.30 34,000</p>	<p>HR - 90 /min RR - 42 /min; nos/o resp. distress SpO₂ - 95% in Room Air</p>	
<p>USG R -</p>	<p>W/A - No r/o NEC. Chest - B/L infiltrates.</p>	<p>(Rt) lung fields wheeze (+) crackles (+)</p>
	<p>h/o viral prodrome (+)</p>	<p>CVS - S₁S₂ (+) P/A - soft; non tender, no organomegaly</p>
		<p>CVS - WNL</p>
	<p><u>Adv.</u></p>	<p>START</p>
	<p>O₂ by mask @ 5L/min</p>	<p>Inj. TEICoplanin</p>
	<p>lt Inj. PIPRAZ.</p>	<p>120mg iv q 12H</p>
	<p>STOP Inj. AMIKA.</p>	<p>x 3 doses f 16 q 24H</p>
	<p>START NEB ^{Inj} SALBUTAMOL 2.5mg/3ml 2 NS 2 0, 20, 40 2 2mlty</p>	

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PHYSICAL EXAMINATION

Temp.	Pulse	Resp.	B.P.	Weight
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29/1/24
@ 8:30 am

Adm. NB/HR/ Post 4 cycle OSEC |
FN/ CRTI

- High grade fever persisting

Chest x ray

all infiltrates @ ant

- Chest: B/L wheeze (F) ant

Adm ^{ADU} / ~~ADU~~ Pantop (20mg) 1 VOD -

- cont. Zosyn / Seico

- cont. ocellatum - eyes

- CBC / RFT / LFT

- RD / VM

- Feed once of that
admission

9.4 $\frac{180}{300}$ $\frac{34.5}{}$

Clinical - Fed once su

11:10 am

No signs of respiratory distress
were found - improved in consistency

ADU

- RA - 36/min

- Chest - B/L NVTR

- $\frac{1}{2}$ (F)

- resp. cycle - work

ADU

- keep & observe till
even

- Fed once for 2 am

ADU



अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029
 ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

Initial all orders Cancel by crossing through and initialing Rewrite all orders when turning over and when operations. Sister should sign in the column provided when the order is transferred to the treatment house.

नाम Name	उम्र Age	लिंग Sex	वैवाहिक स्थिति Marital Status	पु.पं. सं. सं. UHID No.
सर्विस / Service	वार्ड / Ward	बेड / Bed	व्यवसाय / Occupation	धर्म / Religion

Date Order	Date Cancellation	Doctor's orders with signature	The sister's signature with date
		<p>- Red ones SK will receive</p> <p><i>NA</i> * Syp OSELTA MIVIR <i>med</i> 5ml/30mg 5ml po q 12H x 5 days</p> <p><i>o-----o</i></p> <p>Inj G-CSF 5mcg s/c q 24H</p> <p>Inj Pantop 15mg iv OD</p>	

Manasee
 Dr. MANASEE DEKA
 Senior Resident (DM)
 Pediatric Oncology
 Department of Pediatrics
 All India Institute of Medical Sciences
 New Delhi-110029

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Report: USG FOR NEC

Small bowel loops are showing faecal matter & intraluminal gas shadow.

No wall oedema or free fluid.

No E/O NEC seen on USG.

↓

Free.

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Sign. of Radiologist / Date :