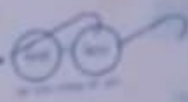








अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department



अस्पताल को अन्दर प्रवेश करना मना है / Entry is PROHIBITED IN HOSPITAL PREMISES

OPR-6

रोगी विवरण / Patient Info
UHD: 107554220
ABHA
prince17.20201@aiims
Dept No: 20240040022995

कमरा / Room
A.338

Queue / संख्या
N189

Unit, SKIN

रोगी पंजीकृत नं. / O.P.D. Regn. No.

पता / Address

उम्र / Age

~~SKIN OPD, AIIMS~~
~~SENIOR RESIDENT~~
ROOM NO. 506

S/O NRAJ JHA
4Y 1M 28D / IN (PUNJ)
H.NO- 239 SARAI PIPLE THALLA, PUNJABI
GALI ADARSH NAGAR NEW DELHI DELHI
General Rs. 0



New Patient

रिपोर्ट / Diagnosis

Multisystemic LCH

Dr. NEHA TAMBHA
Assistant Professor (Dermatology)
Faculty of AIIMS
Teaching & Consultancy

दिनांक / Date

23/7/24

उपचार / Treatment

Adults yellowish brown crusty over epidermal base.
Over the trunk, sub-follicular. x 3 years.

skin biopsy

IC shows marked
loosening, spongiosis &
intraepithelial
inflammation.

b - dense band like
front of @, @, @
few polymorphous c/w
dense.

IFC - CD1a (+)
= LCH.

- Lytic - sclerotic lesion in pelvic bone & femur.

- skin biopsy -> LCH (confirmed on IHC).

PET CT - Inv of skin, bone, w, lungs, t. ↑ uptake of.
spleen, liver, pancreas & bowel loops, ↑ patchy uptake in
- Absence of pituitary bright spot - Central OI
Hypothyroidism - TSH ↑ T3/T4 ↓ - ? Thyroid infln

Adv

Review on Thursday

330 - Suture removed

25/7/24

Adv

- Monocle cream LA HS

① ② Triclocinol 0.02% LA BS

- Vesiline lotion 2-3x

- Syst Lec 2x daily

[for Dr. Neha]

R/A 1 month

CLEAN AND GREEN AIIMS / एम का यही संकल्प, स्वच्छता से कार्य करते
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)



marasapatal.nhp.gov.in

Row whole replace
need healthy
no gap

③ N/V 16/10/24 at Jam. DPO

Shruti
in rec.

16/10/24
 MS - LCH - RO ⊕ & organ dystn. | III
asis / CNS risk lesions ⊕
 post
 (2) course of Ara-C ⊕ cladribine

Clinically ~ splenically palpable
skin lesions resolved

Hepatomegaly ⊕ lab. 4.1
 cytopenias (w) 10.0 > 10,500 < 2.291
 [14/10] 4630

VE + CT ~ as discussed
 [18/10/24] in conference ~ AO Bett

as per
 LCH 1U
 RHO DCOB

proceed to part ⊕
 cDA @ 5mg/m²
 39 x 2 courses
 int.

14/10/24

- 21. Betaclim gargle
- Skin tests
- On Septan AD
- No fresh complaints.
- Last chemo on 7/9/24
- Photocopy pending (PET-CT / Protocol)

clinically no active virus

• Skin - healed lesions

• ^{3cm} tip distended

• No polyuria

4/10 Cr = 0.2

PO4³⁻ = 6.2

AST/ALT = 35/33.

Alb = 4.1

ΓB/CB = 0.48/0.17.

② T₁C CBC 38; T₁C septan/eltroxin

MS LCH / RO⁺ / CNS risk lesion (+)

Post Statum I 12 weeks

AD intermediate

RO worsened → liver/Bro

Statum III

① 2 courses of ARA-cladribin completed 29/9/24.

PET CT done - 8/10/24.

Official report → PMK discussion awaited.

Tabs

① Septan.

② Eltroxin 50ug in ~~2~~ 2 divided doses.

③

CBC → awaited.

plan

① PET-CT discussion

If NO active ds → maintenance

If AD Better/Intermediate → 3rd course ARA-C cladribin

• Hepatomegaly ⊕
 [L 3 cm B M]
 albumin - 4.1 g/dL
 [16/11]

splenomegaly
 skin lesions (see)
 ↓
 (only depigmentation ⊕)

• Thyroid profile TSH 5.01
 FT4 1.0
 [16/11]
 [post oral supplementation]

→ repeat test on
 18/11 after
 2 hr gap from
 medication

counts
 (16/11) 11.1 $\left\{ \begin{array}{l} 2340 \\ 920 \end{array} \right\}$ 1.63/20

Advise:

① TIC oral septanil thyroxine
 50 mg daily

② FU on next opp visit on 21/12/11
 Wed 9 AM
 T CBC I SE KFT LY

and to start continuous
 therapy ②

Nikita

wt ~ 12.5 kg
BSA ~ 0.56 m² Adviso

① TIC protocol from daycare

② Inj. CHADRUBINE 7 mg in 100ml NS over 2 hrs

[5mg/m²]

ankids kindly assist

Once daily x 3 days
[17/10/24 - 19/10/24]
Inj. G-CSF @ 65 µg SC once daily x 5 days
[20/10 - 24/10/24]

③ Plan to follow up after completion of 2nd CDA course ~ 2 continuous therapy part 2 for 24 weeks

Response evaluation to be done after completion of 2nd CDA course.

Plan on 30/10/24 ~ CBC/SEKPTPT
Nivita

up Point
9/12/24
9/12/24

spoken today via Augment

ADU

1. NY Autism (2021/22)

unw
= 5 days

2. Sydney (2021/22)

unw
x 5 days

3. Paris (2021/22)

4. NY

NY on 2/2/24

2 pm

Por white

NY for MOI

recovery

End

4/12/24
class one (Com 2)
Completed

on Sept 20
2-16 Oct / Sitz bar 16
PET - CF / RC -

cough runs
no danger signs/symptoms
↓ sed in intensity

CXR
P-A view
[abnormal] → @ lower zone

- Advise
- ① To give oral antibiotics for total 10 days
 - ② TIC oral septan
 - ③ Report @ ER if any danger signs.

Nixits

referred in day care

30/11

→ cough ⊕ persistent wet cough

* no fever / rash / vomiting / loose stools

left occasional 48
to cough by

1. 9. April
2. 10. April
3. 11. April

10. April 10. April 10. April

ADU

1. ADU (200/100) (200/100)
u.w. 100
x 5 days

2. ADU (200/100) (200/100)
u.w. 100
x 5 days

3. ADU (200/100) (200/100)

u. 100/50

MIN ON 2/12/24

100/50/100
ADU

2 pm
ADU

ADU

4/12/24
classical (Com 2)
Completed
on Sept 20
2-16 last / Sitzbein
PET - CT / RC -

4/12/24

MS-LCH

RO +ve.
end organ dysfunction +
Hypothyroidism +

STRATUM III

Initial therapy
COWEP.1 and COWEP.2

↓
AD-Better.

↓
Part 1 continuation therapy

↓
PET done 3/12:

Impression → to be discussed.

Plan:

- 1. if NAD → Part 2,3 continuation therapy
- if AD/Better → Repeat Part.1.
- if anything less → to discuss.

2. R/w on 11/12/24 CBC/RF1/UF9

Adv

- To take date for chemo from Mrs. Sujanya

Chemotherapy

- Iy. emeset 2mg IV push
Iy. Dexa 2mg IV push

Iy. Uadribine 2.8mg in 100 ml NS
IV over 2 hours

To
CANKIDS,
Kindly
help.

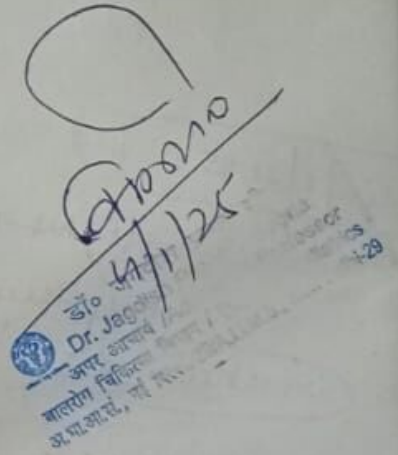
(D1)

(D2)

(D3)

(D4)

(D5)



Wt = 14kg
BSA = 0.56

Post chemo - Syp. emeset (2mg / 5ml)

3ml PO tds x 5 days

- Tab. Dexa 4mg 1/2 tab BD
x 3 days

- Iy. USF 70mg SC OD x 5 days

(D6)

(D7)

(D8)

(D9)

(D10)

- PET re-assessment -> 56 Post this cladribine course

- (N/A) in OPD on -> 13/1/25 - CBC

Sumitra



भारत सरकार

Government of India



नीरज कुमार झा
Niraj Kumar Jha

जन्म तारीख / DOB : 10/03/1994

पुरुष / Male



4174 1747 7804

आधार - सामान्य माणसाचा अधिकार



भारतीय विशिष्ट ओळख प्राधिकरण

Unique Identification Authority of India

पत्ता वडिलाचे/आईचे नांव: शिवशंकर
झा, रूम नो.10 मूर्गन चाळ, एस.वी.
रोड, नेहरू नगर विलेपार्ले वेस्ट, मुंबई,
विलेपार्ले (वेस्ट), महाराष्ट्र, 400056

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1947

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