









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

आपातकालीन विभाग

(DEPT. OF EMERGENCY MEDICINE)

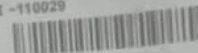
Emergency No: 2026/030/0071313

Date: 22/06/2026

Time: 10:11:43 AM

NON-MLC

(-REVISIT-)



UHID No:108564918

MR NAME: MR KISHOR KISHOR

AGE: 2 years 9 months 26 days

Sex: M

S/O / MAND

ADDRESS: HNO
CITY/BLOCK
STATE:

VILL BARARI DIST MATHURA

STREET/MOH
PIN: 0

UTTAR PRADESH

Location:

Paediatrics Emergency

Criticality: Red / Yellow / Green

BROUGHT BY: Relative: MOTHER

Triage: Responsive/ IIR 106 /min
Unresponsive

BP

mmHg RR 34 /min

spO2 91 %

Shifted to Paeds/ Main/ New Emergency

Presenting Complaints

Primary Assessment (ABCDE): Assessment Pentagon

Airway Open & stable: Yes/No If No..... Breathing: RR 34 /min Efforts: Normal/Poor/increased Auscultation: Air entry: B/L equal Normal/poor/Differential Added sounds: None/Stridor/Wheeze/Crackles SpO2 on Room air..... 13 kg No sign of voluntary Vomit	Circulation HR 106 /min CFT 3 sec BP 82 / 52 mmHg Peripheral pulse: Poor/Good Central pulse: Poor/Good Skin temp: Warm/cold Others P/A:	Neurological GCS 15/15 Pupil size: /min Pupillary Reactions: (+) Motor activity: Normal & Symmetrical/ Asymmetrical/ Posturing/Flaccidity/Seizure Blood Sugar: mg/dl Exposure: Temp: /min Colour: Normal/pallor/cyanosis mottled Any other skin lesions:
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Diagnosis

VBS

For 10:45 AM

4 MMSAT 4mg IV bolus

5ml PO 10S

2mg 1 tab

POOD X 3ds

15mg 1 tab

POOD



अ० मा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department



अस्पताल में अन्दर धूम्रपान नहीं है / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6

बाल चिकित्सा विभाग
UHD-108564918



Dept No: 20250030023385

किशोर किशोर / KISHOR KIS 4OR

S/O MANO
27.9M 70 / M (GWN)
VILL SARANI DIST MATHURA, UTT
PRADESH Pin-0 INDIA
General 16.0
Follow Up Patient

कमरा / Room
C 218
Queue /
संख्या F26
Una-III Paediatric

डू. एच. Wed Sat



Reporting: 08:14:5
03/08/2021

LC1806262385 108564918

LH18062601628 108564918



KISHORKISHOR

Address

निदान/Diagnosis

उपचार/Treatment

दिनांक/Date

26

N/V 20/6/76 2 CBC, LFT, RFT

Dr. G. S. Sharma
Paediatric Surgeon
AIIMS, New Delhi 110029

CLEAN AND GREEN AIIMS / एम्स का गरी सफाई, संरक्षण से साथ साथ

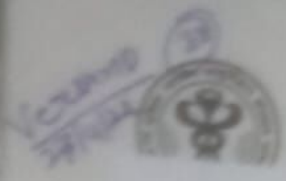
अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1080 (24 hrs service)

ओरिअल
अस्पताल

प्राथमिक चिकित्सा केंद्र





डॉ. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
ए.ए.एम.एस. हॉस्पिटल / A.I.I.M.S. HOSPITAL

Patient Department
IS PROHIBITED IN HOSPITAL PREMISES

OPR-6

Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
Reg. No. 10122015
Clinic No. 20201015
Barcode
Phone No. 9800070000
Fax No. 9800070000
Email: info@bri.ac.in

रजि. नं. / U.P.O. Regn. No. 171 / 195 418

पेश / Sex
उम्र / Age
जन्म तिथि / Date of Birth
Prof. A. B. Das

दिनांक / Date	वैद्य / Diagnosis	उपचार / Treatment
27/4/26	① eye EORL after Surgery (enucleation) (C8/10s)	
28/4/26	① eye EORL after Surgery (enucleation) (C8/10s)	

27/4/26
Pr Date Opina (2GA)
28/4/26 - 9A
29/4/26 - 9A
30/4/26 - 9A
01/05/26 - 9A

Radiation Planning Note

Patient has been planned for post-op RT to a dose of 40Gy/20#/5 weeks to ① orbit using VMAT technique using 6MV X-ray energy on Elekta Versa HD 1 GA

Adv - 1) RT payment - Rs 950/- (15)

2) Skin care explained - do not apply soap, cream, oil, lotion in irradiated area

3) Refract eye drops B/L eye - 2 drops each eye TDS

4) Rx weekly with CAC, LFT, KFT (Patient admitted in MRD ward)

5) Syrup. Leptin 5ml Po OD (alternate days)

6) Syrup A to Z Po OD Sml. 7) Syrup Vituful 5ml Po OD

ऑर्गन-दान का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26583444, www.orbo.org Helpline 1060 (24 hrs service)
जहाँ से जहाँ कहीं भी हेलपलाइन की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients



डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.सं. अस्पताल/A.I.I.M.S. HOSPITAL

OPR-6

बहिरंग रोगी विभाग / Out Patient Department
अस्पताल के अंदर धूम्रपान मना है / SMOKING PROHIBITED IN HOSPITAL PREMISES

एकक/Unit Dr. A. B. S. S. S.

IRCH No. 359360

ब.रो.वि. पंजीकृत सं./O.P.D. Regn. No. ET-135960

विभाग/Dept. Rad Onc

नाम/ Name	पिता/पुत्र/पत्नी/पति/पुत्री F/S/W/H/D of	लिंग Sex	आयु Age	जन्म तिथि / Date of Birth
KASHOR	MANO	2/M		

निदान/ Diagnosis	उपचार/ Treatment
दिनांक/ Date <u>09/06/2016</u>	① Eye EORR → pTano → qp 70 HD VEC <u>Radiation Completion summary</u> Patient completed port 2004/2011/1404 → part to ② orbit E PM-VMAT (4 GA), using 6MV X-ray photon energy, in Electro-Vision HD, seq 27/4/26 - 09/06/2016 <u>Adv</u> - Plw in Ro-OPD ↓ Prof. A. B. S. S. S. on 10/06/2016. - Plw in pediatric oncology, for further chemo cycles.

Gap during Tx: 14 days

① 1# gap correction added

Proble for

Plan - Good 1 day after

~~Gap during Tx: 14 days~~
(advice)

[Signature]

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)
बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

25/6/2026

④ Eye FORB / Post Emulation

Post EBRT / Post 10# HDCEV
(10/5/26 - 3/6/26) | Post EBRT → Watery discharge
on EID morning

40 Vomiting x 5 days - (4-5 times / day)
no 40 Headache

CID in irritability x 2-3 days

early morning vomiting & vomiting after feeds

O/E - child's sleepy

HR = 111 / min

awake

RR = 24 / min

↳ Sensation

BP = 131/89 mmHg. Tach.

CF 743 sec,

pulses = up.

? CIN V

? post R.T.

? ENS disease

? Infection

② eye discharge & swelling

Plan

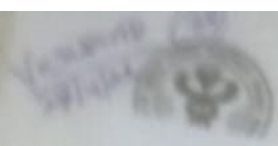
- ① funderas to do
- ② Vital monitor (R.T.)
- ③ Inf Enset 2mg iv TDS.
- ④ Inf Pantop 15mg iv OD.
- ⑤ Inf Deser 1.5mg iv BD
- ⑥ @. Once SR will review

~~Dr. Anurag Kumar~~
175mg iv TDS

Dr. VISHAKHA KARSNEY
SR, Paediatric Oncology
Dept. of Pediatrics
AllMS, New Delhi

Dr. Anurag Kumar
Senior Resident

HR DNS @ 43 ml/hr to continue



डॉ. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
एन सी आर जे अस्पताल / A.I.I.M.S. HOSPITAL

Patient Department
NO PROHIBITED IN HOSPITAL PREMISES

OPR-6

REGD. NO. 1000000
Name: Dr. B.R. Ambedkar
Address: A-1, Kirti Nagar, New Delhi
Phone No. 26593444

Reg. Date: 15/12/2023
Clinic No. 2020/137008
EMD: 1000000000

डॉ. सी. वि. इन्दिरा रे. / O.P.D. Regn. No. RT-195468
लिंग Sex
आयु Age
जन्म तिथि / Date of Birth
Prof. A. B. Suresh

विषय / Diagnosis	उपचार / Treatment
विषय / Date	

① Eye EORR s/r Surgery (enucleation) (c/s/05)
s/r IO OHOTRY
(14/4/26)

Radiation Planning Note

Patient has been planned for post-op RT to a dose of 40Gy/20#/4 weeks to ① orbit using VMAT technique using 6MV X-ray energy in Elekta Versa HD JGA

Adv - i) RT payment - Rs. 750/- (13)

ii) Skin care explained - do not apply soap, cream, oil, lotion in irradiated area

iii) Refresh eye drops B/l eye - 2 drops each eye TDS

iv) Rx weekly with CBC, LFT, KFT (Patient admitted in MRO ward)

v) Syrup. Septon Sml Po OD (alternate days)

vi) Syrup A to Z Po OD Sml. vii) Syrup Vitafol Sml Po OD

[Signature]

27/4/26
Pr Date Rx (JGA)
28/4/26 - 98mv
29/4/26 - 9A
30/4/26 - 9A
01/05/26 - 9AL

अंगदान - जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26598360, 26593444, www.orbo.org Helpline 1060 (24 hrs service)
आगर से आने वाले रोगियों के लिए धरमशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients



4225 (62)
 अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली- 110029
 All India Institute of Medical Sciences, New Delhi-110029
 परामर्श अभिलेख / CONSULTATION RECORD

नाम Name	आयु Age	लिंग Sex	वैवाहिक स्थिति Marital Status	यु.एच.आई.डी.सी. UHD No.
सेवा Service	वार्ड Ward	विस्तार Bed	व्यवसाय Occupation	धर्म Religion
Referred by Dr. <i>Dr. Parag Mehta</i>			to Dr. <i>Dr. Parag Mehta</i>	
Requesting Doctor			Consultant & Specialty	

Findings : *GORB & repeated choroid of varying* Date :

Diagnosis or Impression :

*funder examination
 c/s/b/sr/rr*

24/6/26

(R) funder- Disc & Macula Healthy

Recommendations:

(1) Enucleated

(2) E/D Vigamox (3) 42WH

[Signature]

[Signature]
 Consultant's Signature

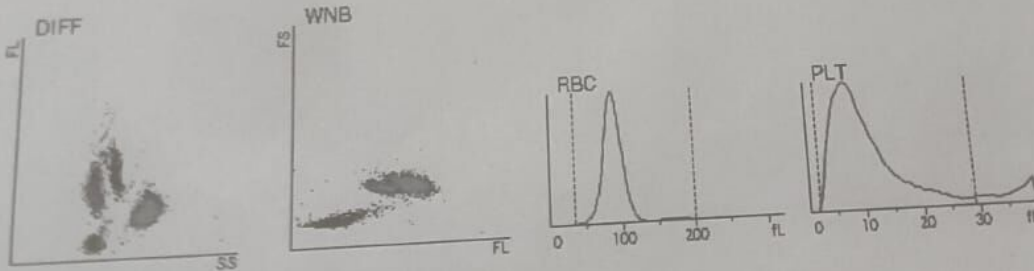
Hematology Analysis Report

Patient Name: **KISHOR**
 Gender: **Female**
 Department:
 Mode: **AL-WB-CD**
 Serial No.: **TW-25002239**
 Diagnosis:

Last Name:
 Age: **2Year(s)**
 Bed No.:
 Date of Birth:

Sample ID: **N.183**
 Patient ID: **108564918**
 Date of Analysis: **24-06-2026 00:13**
 Ward:
 Tube Pos.: **1-1**

Para.	Result	Unit	Ref. Ranges	Flag
1 WBC	6.70	$10^9/L$	4.00 - 12.00	
2 Neu#	5.03	$10^9/L$	2.00 - 8.00	
3 Lym#	1.25	$10^9/L$	0.80 - 7.00	
4 Mon#	0.41	$10^9/L$	0.12 - 1.20	
5 Eos#	0.00	$10^9/L$	0.02 - 0.80	
6 Bas#	0.01	$10^9/L$	0.00 - 0.10	
7 IMG#	0.03	$10^9/L$	0.00 - 999.99	
8 Neu%	75.2	%	50.0 - 70.0	
9 Lym%	18.6	%	20.0 - 60.0	
10 Mon%	6.1	%	3.0 - 12.0	
11 Eos%	0.0	%	0.5 - 5.0	
12 Bas%	0.1	%	0.0 - 1.0	
13 IMG%	0.4	%	0.0 - 100.0	
14 RBC	4.85	$10^{12}/L$	3.50 - 5.20	
15 HGB	12.5	g/dL	12.0 - 16.0	
16 HCT	40.3	%	35.0 - 49.0	
17 MCV	83.0	fL	80.0 - 100.0	
18 MCH	25.8	pg	27.0 - 34.0	
19 MCHC	310	g/L	310 - 370	
20 RDW-CV	14.3	%	11.0 - 16.0	
21 RDW-SD	44.7	fL	35.0 - 56.0	
22 PLT	209	$10^9/L$	150 - 450	
23 MPV	10.1	fL	6.5 - 12.0	
24 PDW	16.3		15.0 - 17.0	
25 PCT	0.211	%	0.108 - 0.282	
26 P-LCC	56	$10^9/L$	30 - 90	
27 P-LCR	26.6	%	11.0 - 45.0	
28 NRBC#	0.000	$10^9/L$		
29 NRBC%	0.00	/100WBC		
* 30 HFC#	0.01	$10^9/L$		



Delivered by:
 Order Time:
 Comments:

[The analysis results only answer to the corresponding sample]

Operated by: User
 Draw Time:

Validated by:
 Time of Printing: 24-06-2026 00:23

*For research use only. Not for diagnostic use.