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REG NO- 2025/4/IV/557
PAN NO- ABLTS3460N
Unique ID: DL/2025/0572597
www.smilencare.org
info@smilencare.org

PATIENT DETAILS



NAME	SHREYA TIWARI
FATHER NAME	MR SATYANAND TIWARI
DATE OF BRITH / AGE	4 -YEAR-OLD
SEX	FEMALE
DISEASE	B-ALL(BLOOD CANCER)
HOSPITAL	AIIMS
ADDRESS	VIKARAMPUR GOPALGANJ, BIHAR 841508, INDIA
U.H.I.D NO	108334206
DEPARTMENT/ DIAGNOSIS	ONCOLOGY
EST TREATMENT COST	2,55,000/-

Join us in making a difference! Smile N Care Foundation is reaching out to support underprivileged children in need. Your contribution, big or small, can bring hope and happiness to their lives. Together, let's ensure no child is left behind. Today to be a part of this noble mission.



शरीरमाद्यं खनु धर्मसाधनम्

अ० धा० आ०।सं० अस्पताल / A.I.I.M.S. HOSPITAL



बाल चिकित्सा विभाग

UHID: 108334206



Dept No: 20250030014143

कमरा / Room
C-210

Queue / संख्या
F17

Unit-III, Paediatric.

Department
HOSPITAL PREMISES

OPR-6

एकक / Unit _____

विभाग / Dept. _____

नाम / N _____

D/O SATYA NAND TIWARI
3Y 2M 26D / F(महिला)

448 LIG FLATS, DUGRI PHASE-3, DIST
LUDHIANA, PUNJAB, INDIA

General Rs. 0

Follow Up Patient

बुध, शनि, Wed, Sat



Reporting: 08:28:31
18/08/2025

सं० / O.P.D. Regn. No. _____

पता / Address

pedi

108333

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

14

11-15

Pls give USF report.
(7/8/25)

Dr. Anurag K. Mittal
Pediatrician
All India Institute of Medical Sciences
Anand, New Delhi

RUC CBC on 18/8/25

Net



Department of Pediatrics
 Division of Pediatrics
 All India Institute of Medical Sciences

DR. SATYA NAND TIWARI
 3Y 3M 80 / F (पेडियाट्रि)
 448 LIG FLATS, DUGRI PHASE-1 DIST
 LUDHIANA PUNJAB INDIA
 Ph: 9501412818 General Ex 0
 Follow Up Patient



CKID-104477



शरीरमाद्यं खलु धर्मसाधनम्

Patient Note Book

डॉ. स. चिकित्सा विभाग,
 UHID: 108334206



Dept No: 2025003014

SHREYA TIWARI

DR. SATYA NAND TIWARI
 3Y 3M 80 / F (पेडियाट्रि)
 448 LIG FLATS, DUGRI PHASE-1 D
 LUDHIANA PUNJAB INDIA
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 Follow Up Patient

Name : SHREYA

HID : 108334206 | ~~108334206~~ | ~~108334206~~

Diagnosis: B.A.II



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 Follow Up Patient

11/8/25 BALZ/IR/consolidation / cytotoxic 8/8-10/8

no fever x 1 episode yesterday 100°F
no dry cough } 2 days.
no cold ⊕

Vitals

HR = 110/min

RR = 24/min

Pulses = WP

peripheries = warm.

CA T < 3 sec.

Chest: - BIL AE ⊕ NVBS
NO crepts NO wheezing

PIA ? - soft Non tend.

CVS - S₁ & S₂ ⊕ NO murmur.

CNS → NAD

CBC → Awaited.

- IVy Amc-c 39mg
slow push

11/8/25.

Plan ① Peds Emergency.

② Chest Xray.

③ to see CBC if Neutropenic
Start Antibiotics ~~PIA~~





Patient copy

Paediatrics Unit III, Division of Pediatric Oncology
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, New Delhi
Department of Pediatrics

Name: Shreya	Age/Sex: 4 years/ Female	Bed No: C6/24
UHID: 108235299	Date of admission: /25	11/12/25
Address: 418 LIG Flat Dugri Phase 3 Ludhiana		(Kritika)
Consultants in charge: Prof R Seth/ Prof K R Jai/ Dr A Gupta/ Dr JP Meena		
Diagnosis: B-ALL / IR/Block-1/ Interim maintenance/1st HDMTX/ Pre septal cellulitis with maxillary and ethmoidal sinusitis polymicrobial (fungal and bacterial radiological evidence)		

Chief complaints

Swelling and discoloration of both eyes since 3 days

HPI

The child is a known case of B-ALL (Interim Maintenance), currently on treatment, with the last chemotherapy received on 06/11/25. The child was apparently well until 6-11/11/25, when he developed swelling and bluish discoloration of the left eye, involving both the upper and lower eyelids. The swelling was gradual in onset and has been progressively increasing over the last few days.

The discoloration is described as bluish-reddish and is associated with increased watery secretions from both eyes and the nose. There is no history of trauma prior to onset of symptoms. No sudden pain or visual disturbance is reported.

There is no history of fever or chills, no headache, no irritability, and no abnormal body movements. There is no history of epistaxis or bleeding from any other site, and no deviation of the eyes or difficulty in eye movements. Parents also deny any history of upper respiratory symptoms other than watery secretions.

Past history - B-ALL

Peripheral blood - flow cytometry → 50% CD45 dim blasts

Positive for CD19, CD79a, CD10, CD22

CD38, CD123, CD20 → s/c B-ALL





Paediatrics Unit III, Division of Pediatric Oncology
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, New Delhi
Department of Pediatrics

Name: Shreya	Age/Sex: 4 years / Female	Bed No: 5a/13
UHID: 108334206 108334206	Date of admission: 16/10/25	
Address: 418 LIG Flat Dugri Phase 3 Ludhiana		
Consultants in charge: Prof R Seth / Prof K R Jat / Dr A Gupta / Dr JP Meena		
Diagnosis: B-ALL / IR / Interim maintenance / <u>1st High dose methotrexate</u>		

Child was admitted for 1st High dose methotrexate. He had no complaints at time of admission.

No eye/ear discharge

No bleeding from any site

No cough, coryza, fast breathing

No h/o hematuria, frothy urine, alopecia, arthritis, oral ulcers, photosensitivity

No h/o growth failure or bony deformities

No h/o headache, blurring of vision, seizures, altered sensorium

Past history - B-ALL.

Peripheral blood - flow cytometry → 50% CD45 dim blasts

Positive for CD19, CD79a, CD10, CD22

CD38, CD123, CD20 → ✓ B-ALL

BMA → blast present B-ALL

Karyotype → 46,XX

FISH → No HR (high-risk) cytogenetics

HbsAg → negative

HCV → negative

HIV → negative



Tympanic on percussion, Bowel sounds present

RS: Central trachea, I/VL equal chest expansion, symmetrical chest shape, no signs of nasal flaring, no intercostal retractions and supraclavicular retractions, scars, dilated veins, sinuses.

Normal vesicular breath sounds were heard, Bilateral conducted sounds

CVS: Normal precordial activity, S1 S2 normal, no added sounds or murmurs

CNS: Normal higher mental functions, conscious, No cranial nerve deficit

Motor examination: Bulk - bilaterally symmetrical, Tone- normal in all 4 limbs, Power- 5/5 in all limbs, DTRs 2+ in upper and lower limbs, Plantar response - B/L flexor, Sensory system - Normal, No meningeal signs, no cerebellar signs

HOSPITAL COURSE:

Sherya, case of BALL / IR/ Post 1st HDMTX/ with left eyelid swelling and conjunctival redness, on examination she was afebrile, neutropenic with not able to open left eye, possibility of left eye cellulitis / sinusitis was kept. CECT PNS and orbit was done which was suggestive of left sided maxillary and ethmoidal sinusitis with pre septal cellulitis, left inferior turbinate hypodense. No intra cranial extension. Possibilities of fungal invasive disease and bacterial infection were kept and further ENT consult was sought on examination the mucosa was healthy. Hence no intervention was done and empirical antibiotics piperacillin and tazobactam, teicoplanin for 14 days clindamycin and lipoamphoB were continued. Posaconazole was started and lipoampho B was continued for an overlap period of 5 days.

She received 14 days of piperacillin and tazobactam and teicoplanin. Plan to give 14 days of clindamycin till 16/12/25. Posaconazole was started on 6/12/25. LAMP was started on 29/11/25

Primary disease - as a child was afebrile and became nonneutropenic 6-MP was restarted.

INVESTIGATIONS

Hemogram:

Date	Hb	TLC	ANC	Platelets ($\times 10^3$)
29/11/25	9.8	1520	320	83
5/12/25	10.5	6870	88 %	144

Biochemistry



3) to do reassessment CECT PNS and orbit after 14 days

Advice at discharge: weight - 12 kg, BSA 0.54

1) Pre medication

- a) Inj PCM 120 mg IV push
- b) Inj Avil 1ml iv push
- c) Inj hydrocort 48 mg iv slow push

2) Pre hydration

IVF DNS (2:100 KCl) with (0.5: 100 MgSO₄) @ 60 ml/ hr for 2 hrs

- 3) To do VBG prior to LAMB - 60mg in 200ml NS over 2 hrs
 - 4) Tab Posaconazole 100 mg/ tab one tablet once a day after 20 mins of feeds
 - 5) To continue syp septran (40mg/5ml) 7.5ml on saturday sunday
 - 6) To continue 6MP (50mg/tab) to dissolve in 10 ml and give 2.5 ml once a day do not feed on hr prior and post medication.
 - 7) Sitz bath/ Betadine gargles
 - 8) To follow up in POC clinic on 13/12/25 at 9 am with cbc rft lft
- ↳ To follow up in ENT unit II

Junior Resident

Dr. Aaushi/ Dr lokesh

Krishna

Senior Resident

Dr Saurav/ Dr Vishakha

Vishakha
Dr. VISHAKHA VARSHNEY
SR, Paediatric O
Deptt. of Paed
AIIMS, New



Child is a k/c/o B-ALL/IR/ admitted for 1st high dose methotrexate as part of Interim maintenance.-

She received IV methotrexate therapy @5 gm/m² with IV hydration and rescue doses of Leucovorin. Methotrexate level monitoring was done. ITM was done according to the protocol. Mtx levels at 24 hours and at 42 hours were sent and were normal. RFTs were sent at 24 hour Mtx infusion which were also within normal limits. CSF for morphology is sent plus ITM was given. The child remained stable throughout hospital stay and rescue leucovorin was given at 42, 48 and 54 hours.

INVESTIGATIONS

Hemogram:

Date	Hb	TLC	ANC	Platelets (x10 ³)
17/10/25	11.9	6730	2340	168

Biochemistry

Date	Urea/Cr	UA	Ca/PO ₄	Na/K	ALT/AST/ALP	TB/DB	TP/Alb
17/10/25	12/0.26	5	9.1/ 5.6	138/5.7	40/49/253	1.21/0.57	7.4/3.9
18/10/25	9/0.22	3.3	8.9/5.7	131/5.2	40/46/211	0.46/0.26	6.2 / 3.3

Others:

Date	Test	Report
18/10/25	24 hr Methotrexate	84.4 umol/l
	42 hr Methotrexate	0.483 umol/l
	CSF for blast	Acellular
	PS	No blast

Plan: 1) To continue chemotherapy as per protocol.





भारत सरकार

Government of India



Aadhaar no. issued: 120412013



Priti Devi

Date of Birth/DOB: 11/11/1998

Female/ FEMALE

आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।
इसका उपयोग सहायक (ऑनलाइन प्रमाणीकरण, या उपचार जीडी/ऑनलाइन सहायता की स्थिति) के साथ किया जाना चाहिए।

Aadhaar is proof of identity, not of citizenship or date of birth. It should be used with verification (online authentication/DB, or scanning of QR code / offline XML).



8064 9071 0420

मेरा आधार, मेरी पहचान



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



Address:

C/O: Satyanand Tiwari, vikrampur, matiari,
Bikrampur, PO: Bijaipur, DIST: Gopalganj,
Bihar - 841508



Details as on: 14/03/2021

8064 9071 0420

VID: 9185 421931 7258



1047



help@uidai.gov.in



www.uidai.gov.in

भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India

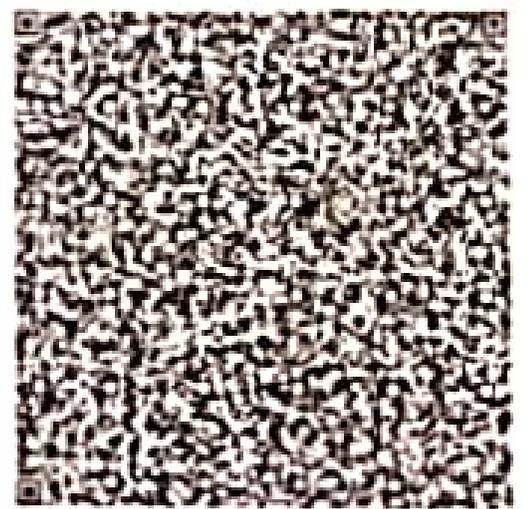
Enrollment No.: 2309/18318/59453

To
Shreya Tiwari
C/O: Satya Nand Tiwari,
House No 448,
LIG Flats Phase-3 Dugri,
VTC, Basant Avenue,
PO: Basant Avenue,
Sub District: Ludhiana, District: Ludhiana,
State: Punjab,
PIN Code: 141013,

177470309



MG774703093FI



आपका आधार क्रमांक / Your Aadhaar No. :

3496 9902 9768

मेरा आधार, मेरी पहचान



भारत सरकार

Government of India



Shreya Tiwari
DOB : 10/01/2022
Female

यह आधार 5 वर्ष की उम्र तक ही वैध है

3496 9902 9768

मेरा आधार, मेरी पहचान

