SMILE N CARE FOUNDATION

"TOGETHER WE CARE, TOGERTHER WE SMILE"

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

PATIENT DETAILS

NAME	Sandeep Kumar
FATHER NAME	MR Sanjay Kumar
DATE OF BRITH / AGE	10-Year-Old
SEX	MALE
DISEASE	BLOOD CANCER
HOSPITAL	AIIMS, HOSPITAL
ADDRESS	BIHAR, INDIA
U.H.I.D NO DEPARTMENT/ DIAGNOSIS	109020392
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.

last card lost

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

अस्पताल के अन्दर धूम्रपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES

रुधिर विज्ञान

UHID:109020392

Dept No: 20260240145532
Clinic No: 2026/AA/6064

संदीप कुमार / SANDEEP KUMAR

S/O SANJAY RAM
10Y 8M 23D / M(पुरुष)
BUXER, BIHAR, Pin 0, INDIA

Ph: 7256948902 General Rs. 0
Follow Up Patient

कमरा / Room C-510
Queue / संख्या F22
Unit-I, Aplastic Anemia Clinic (AA)

OPR-6

बा०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. AA 6064/2026

आयु Age

पता/Address 109020392

निदान/Diagnosis

दिनांक/Date 136

उपचार/Treatment

v SAA

Hb ↓

CBI = 40 blood ⊕ ??

6.9 / ? / 6k

R 19/11/24 Thym Cyclosporin 60

Tab Tranexa 500mg po bd
1) Tab Eltrombopag 75mg po OD RBF
2) Tab Cyclosporin 75mg po BD
3) Transfuse to maintain Hb > 6.0 ...

F/u ?

1 month

last card lost

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बहिरंग रोगी विभाग /Out Patient Department

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OPR-6

अ०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. AA 6064/2026

आयु Age	पता/Address
	109020392

निदान/Diagnosis

दिनांक/Date: 136

उपचार/Treatment

V SAA

Adherent,

CBC = No Bleed ⊕ ears

6.9 / 1.7 / 6K

R 19/1/25 7mth cyclosporin 60

1. Tab Thiamin 500mg po 1o1
2. Tab Eltrombopag 75mg po OD BBF
3. Tab Cyclosporine 75mg PO BD
4. Transfuse to maintain - Hb > 6.0 / Plat 10k

F/u Revisit - 2/1

1 week

CLEAN AND GREEN ... ORGAN DONATION - A GIFT OF LIFE

O.R.B.O., AIIMS, 26593444 ... Helpline - 1060 (24 hrs service)

DEPARTMENT OF HAEMATOLOGY
2nd Floor,(NEW PVT WARD)
A.I.I.M.S., New Delhi-110029
अ. भा. आ. सं., नई दिल्ली-110029A.I.I.M.S., New Delhi-110029
अ. भा. आ. सं., नई दिल्ली-110029

23/03/2026 07:57 AM

UHID:	109020392	Reg Date :	
Patient Name :	Mr SANDEEP KUMAR		10 years 8 months 1 day
Age :	Male	Age :	Unit I
Department :	Hematology	Unit Name :	27/05/2026 02:47 PM
Unit Incharge :	Dr. Manoranjan Mahapatra	Sample Collection Date:	
Lab Name:	Hematology	Sample Received Date:	
Lab Sub Centre:	HEMATOLOGY 204		Ms. VIDUSHI UNIYAL 208
Dept / IRCH No:	20260240145512	Recommended By:	
Lab Reference No:			
Ward Name:	Hematology Day Care		

Sample Details : DHM-270526015 (Bone Marrow) / Report Date: 08/06/2026 05:14 PM

BONE MARROW ASPIRATE

BMA:	B-1436-26
BMBx:	268X-1415
Clinical details:	Suspected severe aplastic anemia ?Fanconi anemia
CBC:DLC (%):	**Hb: 5.8 g/dl WBC: 2.34 x10^9/L Platelets: 20 x10^9/L** N3, L95, M02 ANC-50cells/ul , ARC-2500cells/ul
Peripheral smear:	RBC normocytic normochromic. WBCshow leucopenia with very serve neutropenia.Few reactive lymphocytes seen.Plateletcounts are reduced ~25,000/ ul.
Aspirate:	Fat rich Particulate and cellular
Imprint:	Paucicellular
Erythropoiesis:	Reduced
Megakaryopoiesis:	Not seen
Granulopoiesis:	Reduced

Myelogram (%):

Blasts		Neutrophils	02	Basophil	
Promyelocytes		Lymphocytes	81	Erythroid cells	02
Myelocytes	04	Monocytes		Plasma cells	10
Metamyelocytes	01	Eosinophils		Others	

Description:	Prominence of mast cells, osteoblastclusters seen
Bone marrow biopsy	Gross :- Received 2 linear core measuring 2 and 1.2 cm Microscopy :- Bone marrow biopsy is hypocellular for age(overall cellularity of 10-20%.Megakaryocytes are reduced.Patchy increase in small lymphocytes, histiocytes. Plasma cell seen. Trilineage hematopoiesis present.No interstitial increase in immature cells noted.
Impression:	Peripheral smearshow pancytopenia with very severe neutropenia, reticulocytopenia. Hypocellular marrow showing trilineage hematopoiesis. Features are suggestive of hypocellular marrow. Advice :- work up for inherited bone marrow failure syndrome

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029 (REVISIT)
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI -110029
आपातकालीन विभाग
(DEPT. OF EMERGENCY MEDICINE)

UHID No:109020392

आपातकालीन सं.(Emergency No): 2026/030/0058704 दिनांक DATE: 24/05/2026 समय TIME: 07:04:49 PM

NON-MLC

नाम NAME: **MR SANDEEP KUMAR** आयु AGE: **10 years 7 months 28 days** लिंग SEX: M

S/O : SANJAY RAM

पता ADDRESS: मकान नंबर H NO: BUXER गली / मुहल्ला STREET/MOH:
शहर/ब्लॉक CITY/BLOCK: पिन PIN: 0
राज्य STATE: BIHAR दूरभाष PHONE NO: 7256948902
मोबाइल MOBILE NO: 7256948902 बेड Location: [redacted] Jaale

द्वारा BROUGHT BY: Relative Criticality: Red / (Yellow) / Green

Triage: (Responsive) / Unresponsive HR 109 /min BP 104/76 (89) mmHg RR 24 /min spO2 100 %

Shifted to Paeds/ Main/ New Emergency

K/c/o S.AA (L) elbow? H/o ...

Presenting Complaints
(L) elbow

C/o (L) knee pain + diff. wt bearing since evening
no fever/trauma/rash

Primary Assessment (ABCDE) / Assessment Pentagon

Airway	Circulation	Disability
Open & stable: (Yes)/No If No... Breathing: RR 24 /min Efforts: (Normal)/Poor/increased Auscultation Air entry: (Normal)/poor/Differential Added sounds: (None)/Stridor/Wheeze/Crackles SpO2 on Room air 99%. wt - 17kg	HR 108 /min CFT <3s. BP 104/76 (89) mmHg Peripheral pulse: Poor/(Good) Central pulse: Poor/(Good) Skin temp: (Warm)/Cool Others B: SAA	GCS 15/15 Pupil size 2mm NRTL Pupillary Reactions Motor activity: Normal & Symmetrical/ Asymmetrical/ Posturing/Flaccidity/Seizure Blood Sugar .... mg/dl Exposure Temp: (L) knee (+) effu... Colour: Normal/(pallor)/cyanosis/ mottled Any other skin lesions

(41/65)
4-5) 2-6 (52
ANC - 1000

Diagnosis

USG - (L) knee
X-ray (AP Lateral)
CBC

... no O/O.

(1) 3 ...
on ...

...nexa 100 mg IV ...
Vit... ...g IV ...

(3) All reports / Advised to arrange

अखिल भारतीय आयुर्विज्ञान संस्थान,नई दिल्ली
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI
Department of Microbiology

UHID:	109020392	Reg Date :	23/03/2026 07:52 AM
Patient Name :	Mr SANDEEP KUMAR	Age :	10 years 8 months 14 days
Sex :	Male	Unit Name :	Unit-I
Department :	DEPT. OF EMERGENCY MEDICINE	Sample Collection Date:	10/06/2026 10:14 PM
Unit Incharge :	Dr. Rakesh Yadav	Lab Sub Centre:	Blood Culture (Microbiology Room No. 2071)
Lab Name:	Microbiology	Report Generated Date:	15/06/2026 04:24 PM
Sample Received Date:	11/06/2026 12:58 PM	Recommended By:	Dr. Shikhar JR
Dept / IRCH No:	20260240145532		
Lab Reference No:	21223		

Sample Details : MBL-100626173 (Blood)

TEST NAME : BLOOD FOR CULTURE

TEST METHOD : CONVENTIONAL/AUTOMATED CULTURE

Culture Result (Conventional Method): Sterile

This is an electronically generated report, authorized signature is not required. The test reports have been authenticated.
Partial reproduction of the report is not permitted.

Authorized Signatory

· R/v in UNT I (D4) → spoken to UNT …

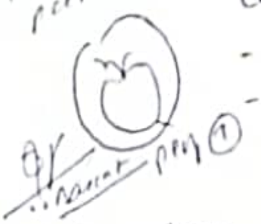
14/06/2026

C/s/b ENT on call
- Dr Anju
- Dr Laasya.

C/o/c Dr Sindhura

A C/o Aplastic Anemia ē Pancytopenia
(Recieved multiple transfusions and
Broad spectrum antibiotics)

17/06/26
Pl removed … pack …



Complaints of Ⓛ ear Blood tinged discharge since 1 day.
- No H/o any trauma / foreign Body insertion.
- No H/o fever.

Pt is vitally stable.

- H/o on and off B/L ear discharge (Relieved ī topical medication,). aggravated ē URTI episode

O/E

Ⓡ Ⓛ

Large CP⊕

Ⓛ ear
· Blood in EAC
· Large CP ⊕
· No foreign Body or mass in EAC

→ tried to suction the Blood → suction trauma ⊕
↓
Adr soaked cotton balls inserted for 10 mins
↓
Bleeding didn't stop (… Ooze)
↓
Packing ī umbilical tape done.

Inv - 15th/06/26
Hb - 9.60
Plt - 15.0
WBC - 1.6K

Adv
Syrup Augmentin (~~228.5~~ 475 / 5ml) → 7ml TDS PO
Syrup PCM (250/5ml) - 5ml TDS PO
Syrup Pan 20mg PO OD
} 5 days.

F/u on wednesday for pack removal in ENT minor OT A616 6th floor by Dr Laasya
R/A 2 wks on Mon/7th … 16/6/26
Otrivin - P N/d 2TDS × 3d.
Steam inhalation BID
CPS …

विकिरण नैदानिक विभाग

अ० भा० आ० सं०, नई दिल्ली-110029

DEPARTMENT OF RADIODIAGNOSIS

A.I.I.M.S., NEW DELHI - 110029

PLAIN X-RAY/CONTRAST STUDIES REQUISITION FORM

Name : Sunday Age/Sex : 14yr/M Ref. Deptt./Unit : Pseudo Gen Date : 24/05/2021

Indoor (Bed No.) / Outdoor / Casualty UHID No. : 10902039L LMP :

Examination Required :

Clinical History and Examination :

K/C/O SLA

c (L) knee pain
difficulty to bear wt

Clinical / Working Diagnosis :

Blood Urea / S. Creatinine :
Any h / o allergy or asthma :
(for IVU patients only) :

USG (L) knee
for hemarthrosis

Signature of Referring Physician / Date :

Consent :

I hereby give consent for the performance of any diagnostic or therapeutic radiological procedure with or without the use of contrast injection and / or sedation. The associated complications and risks have been explained to me.

Signature of Patient / Date :

Your appointment is on : _____ Room No. : _____

Time Slot : 8:30 9:00 9:30 10:00 10:30 11:00 11:30 12:00 12:30

X- Ray No : Size / No. of Films

Date : Kvp/mAS:

Sign. of Radiographer :

P.T.O.

USG W/A

Liver - (N) size, echotexture, no SOL, no IHBRD

GB, CBD - (N)

PV - (N)

Pancreas - Head (N), rest obscured

Spleen - (N)

RK } - (N)
LK }

Report :

UB - (N)

No ascites

Visualised bowel normal. No FH/NEC in current scan.

Imp: NAD

Mayuri
7/10

Sign of Radiologist / Date :

SMILE N CARE FOUNDATION

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

अस्पताल के अन्दर धूम्रपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6

बाल चिकित्सा विभाग
UHID 109020392
ABHA
sandeepkumar_37909@abdm
Dept No: 20260030006737
संदीप कुमार / SANDEEP KUMAR
S/O SANJAY RAM
10Y 5M 27D / M(पुरुष)
BUXER, BIHAR, Pin:0, INDIA
Ph: 7256948902 General Rs 0
New Patient

कमरा / Room C-208
Queue / संख्या N8
Unit: Paediatric
सोम, गुरु, Mon, Thu (पूर्वाह्न)
Reporting: 07:52:34 23/03/2026

बहिरंग पंजीकृत सं०/O.P.D. Regn. No.

आयु / Age

पता / Address

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
22/3/26	16.1
	Child symptomatic since 6 months of age.
	- On & off fever since then.
	- c/o bleeding from nose ? 8 days
	Admitted in Patna hosp: Pancytopenia + BM-aplastic anemia.
1910 / 5.1 / 7000 / 98/25.5	infected hematoma
	Received 3 Ⓞ PRBC / 3 Ⓞ FFP / 5 Ⓞ Plt
	↓
	AIIMS Delhi. Casualty 22/3/26. - Given 4 Ⓞ PRBP. 1 Ⓞ PRBC.
	Received IV Antibiotics - Magna/ Amikacin
	O/E: anemia
	P Ⓞ

अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग /Out Patient Department
अस्पताल के अंदर धूम्रपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6

बाल चिकित्सा विभाग
UHID: 109020392
ABHA:
sandeepkumar_27909@abdm
Dept No: 20260030006737
संदीप कुमार / SANDEEP KUMAR
S/O SANJAY RAM
10Y 5M 27D / M(पुरुष)
BUXER, BIHAR, Pin:0, INDIA
Ph: 7256948902
General Rs. 0
Male Patient

कमरा / Room C-206
Queue / संख्या N8
Unit-I, Paediatric
सोम,गुरु, Mon,Thu
Reporting: 07:52:56
23/03/2026

बाह्यरोग पंजीकरण सं०/O.P.D. Regn. No.

आयु Age	पता/Address

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
	16.1/J
	Child symptomatic since 6 months of age,
	- On & off fever since then.
	- c/o bleeding from nose 7-8 days
22/3/26	Admitted in Patna hosp: Pancytopenia + BM-aplastic anemia,
5.1 / 1910 / 7,000 / 9.8/86.5	infected hematome
	Received 3 ⊙ PRBC / 3 ⊙ FFP / 5 ⊙ Plt.
	↓
	AIIMS Delhi - casualty 22/3/26. - given 4 ⊙ RDP. 1 ⊙ PRBC.
	Received IV Antibiotic - Mero / Amikacin
	O/E awake,
	P⊙

since 6 months
fever since 6 months
bluish black discoloration since 20 days

Brief Clinical History / Findings :-

Pt is conscious, oriented, afebrile
P/I/C/C/L/E – petechiae, purpura all over body
SpO2 – 95% @ RA
PR – 104/min, regular, f.v., PPP
RR – 28/min
BP – 120/70 mmHg

Chest – B/L NVBS, clear
CVS – S1 S2, no m
CNS – E4 V5 M6
Pupil – B/L (N) size, RRTL
Tone – (N) in all limbs
Power – 5/5 in all limbs
DTR – K/A – N E   Plantar – withdrawal

Investigation :-

Investigation : Date	03/03/26	01/03/26	2/3/26	6/3/26	9/3/26	10/3/26
TLC	1210	1100	900	1600	1500	1400
DLC	-/88.7/-	64/26/10	62/28/10	33/63/03.9	C	P6.4/-/76.4
Hb%	9.4	11.9	10.3	8.7	6.6	5.4
~~ESR~~ Plt	11000	34000	57000	0.64	0.16	0.14
R/E of Urine						
Sugar/PP/R/F						
Bl. Urea/Sr. Cr.	38/-			35/0.5		
Sr. Ca / Alk Phos			-/2019	730		
Sr. Bilirubin(T/D/I)			1.2/0.6/0.6	0.5		
SGPT/SGOT			421/733	158/77.		
S/T Protein (T/A/G)	7.5/3.8/3.7		5.6/3.2/2.4	6.9/3.6/3.0		
A:G Ratio	1.03:1		1.33:1	1.16:1		
PT & IIPT						
Na+/K+/Cl-	129/4.3/98		129/4.1/98	131/3.5/97		
E.C.G.						
Chest X-ray					BMA →	H/S/O
USG	9/3/26					Aplastic Anemia
CT Scan	S. ferritin → 5484 µg/L					
CSF	PT/INR – 12.8/0.98					
ECHO	APTT – 33 sec					
Others	viral markers – HIV I/II, HCV] NR					

Bone marrow Biopsy (23/2/26), BMA (18/2/26)] F/S/O hypoplastic marrow (Aplastic anemia)

CBC – [illegible]
WBC – 200 cells/cumm
N/L/M – 12.8/67/[illegible]
ANC – 25.6, Retic – 0.2[illegible]
Hb – 7.2, Plt – [illegible]   No abnormal cells seen

bleeding from nose & hematuria. swelling was investigated & found to be infected hematoma. Pt was given 5 units of platelets, 2 units FFP & 2 units of PRBC. ~~No episode~~ currently pt is afebrile from last 48hrs & no episode of bleeding from any orifice since 5 days

Treatment Given in Hospital / Operative Note :-

1. Inj pipzo
2. Inj Amikacin
3. Inj Meropenem
4. Inj Vancomycin
5. Inj emdem
6. Inj vit K
7. Tab voriconazole
8. IVF DNS + 5ml KCl
9. Platelet transfusion (5 units)
10. PRBC transfusion (150cc)

- Inj PCM
- Inj Drotin
- Inj fluconazole

Advice on Discharge :-

1. Refer to AIIMS Patna / IGIMS Patna / AIIMS Delhi / IMS-BHU / Other higher centres for HSCT & further management
2. Tab Amoxyclav (625mg) — 1 tab PO BD x 7days
3. Tab Levofloxacin (750mg) — 1 tab PO OD x 5days
4. Syp Calcium (300/10) — 7.5ml PO BD
5. Tab Folvite (5mg) — 1/4 th tab PO OD
6. Pediatric surgery consultation i/v/o infected Hematoma

... आप के लिए .... आउटडोर में सुबह 9 बजे से ...
... के दिन .... दिनों के बाद आएं।

Resident/Asstt. Prof.

Junior Resident

Brief Clinical History / Findings :-

Pt is conscious, oriented, afebrile
Petechiae, purpura all over body
[illegible]
PR 100/min, regular
RR 24/min
BP 120/70 mmHg

Chest B/L NVBS, clear
CVS S1 S2 (+)
CNS [illegible]
Pupil B/L (N) size, NRTL
Tone (N) in all limbs
Power [illegible] in all limbs
DTR [illegible] Plantar [illegible]

Investigation :-

Investigation : Date	01/3/26	01/03/26	2/3/26	6/3/26	9/3/26	10/3/26
TLC	1210	1100	900	1600	1500	1400
DLC	[illegible]	84/14/[illegible]	62/28/10	33/63/[illegible]	[illegible]	[illegible]
Hb%	9.4	11.9	10.3	8.7	6.6	5.4
~~ESR~~ Plt	11000	34000	57000	0.64	0.16	0.14
R/E of Urine						
Sugar/PP/R/F						
Bl. Urea/Sr. Cr	33/			35/0.5		
Sr. Ca / Alk Phos			-/2019	730		
Sr. Bilirubin(T/D/I)			[illegible]	0.5		
SGPT/SGOT			421/[illegible]	158/77		
S/T Protein (T/A/G)	7.3/[illegible]		5.6/[illegible]	6.7/3.4/[illegible]		
A:G Ratio	[illegible]		1.33:1	1.16:1		
PT & APT						
Na+/K+/Cl	127/[illegible]		129/4.1/[illegible]	13[illegible]/[illegible]		
E.C.G						
Chest X-ray					BMA → [illegible]	
USG						
CT Scan						
CSF						
ECHO						
Others						

S. ferritin → 5984 μg/L
PT/INR - 11.8/0.93
APTT - 31 sec

Treatment Given in Hospital / Operative Note :-

1. Inj Pipzo
2. Inj Amikacin
3. Inj Meropenem
4. Inj Vancomycin
5. Inj Emdem
6. Inj Vit K
7. Tab Voriconazole
8. IVF DNS + 5ml KCl
9. Platelet transfusion (5 units)
10. PRBC transfusion (150cc)

- Inj [illegible]
- Inj [illegible]
- Inj Fluconazole

Advice on Discharge :-

1. Refer to AIIMS Patna / IGIMS Patna / AIIMS Delhi / IMS-BHU / Other [illegible] for HSCT & further management
2. Tab Amoxyclav (625mg) — 1 tab PO BD x 7 days
3. Tab Levofloxacin (250mg) — 1 tab PO OD x 5 days
4. Syp Calcium (300/10) — 7.5ml PO BD
5. Tab Folvite (5mg) — 1/4 tab per POD
6. Pediatric surgery consultation i/v/o infected hema[illegible]

चेकअप के लिए .... आउटडोर में सुबह ९ बजे
.... के दिन .... दिनों के बाद आयें।

Resident/Asstt. Prof.

Junior Res[ident]

O/E - Pt is alert, active, afebrile

PTT ↓ + cl - cy - LN - ad -

Brief Clinical History / Findings :-

Rt Submandibular LN (1x1cm)

Rt post Cervical LN (2x2cm)

SpO_2 - 85% @ RA, 98% @ LO_2 mask

PR - 68/min

RR - 40/min

Chest - B/L BAE & clear

CVS - S_1S_2 ⊕, No murmur

P/A - Soft & NT
Liver 5 N D

CNS - E4V5M6

Pupil - B/L equal RSL & DRR

DTR - N/L 2+

Planter - B/L ↓

C/O - fever - 4 days Headache - 4 days
Vomiting - 4 days Pain Abd - 4 days

Investigation :-

Investigation : Date	23/11/20		22/11/20			
TLC	1950		2600			
DLC N/L/M	53/32/6		37/55/7			
Hb%	2.2		6.1			
ESR						
R/E of Urine						
Sugar/PP/R/F						
Bl. Urea/Sr. Cr.	32/0.6					
Sr. Ca / Alk Phos	342					
Sr. Bilirubin	T/D/I - 0.3/0.1/0.2					
SGPT/SGOT	20/28					
S/T Protein						
A:G Ratio						
PT & IIPT						
Na+/K+/Cl-	133/4.2/103					
E.C.G. PLT -	51K		15K			
Chest X-ray						
USG						
CT Scan						
~~CSF~~ Bone Marrow	Trilineage Hemat					
ECHO	Aspirate Cytology Predominantly m					
Others	maturation of Erythroid c					

- Widal - Negative in all dilutions
- Dengue - NS1 Ag - N/R

Treatment Given in Hospital / Operative Note :-

- 1 Unit of PRBC transfusion
- 2 units of Platelets transfusion
- 3/1 Pip 3.0
- 2/1 Amikacin
- 3/1 PCM

→ Pt is hemodynamically stable at time of discharge may Need Platelet transfusion & PRBC transfusion & discharged on persistent Request

Advice on Discharge :-

1) Tab PCM (500 mg) - ½ tab - P/O - 1-0-1
2) Tab M.V - 1 tab - P/O - 0-0-1 - 14 days

Patient is Refered to Higher Centre (I.M.S, BHU) for further Management & others

पुनः चेकअप के लिए ..... 9/24 ..... आउटडोर में

सुबह ..... के दिन ..... दिनों के बाद आएँ।

Sr. Resident/Asstt. Prof.

SMILE N CARE FOUNDATION

O/E - Pt is alert, active, afebrile

PTT I+ cl - Cy - LN - ed -

Brief Clinical History / Findings :-

Rt Submandibular LN (1x1 cms)

Rt post Cervical LN (2x2cms)

SpO_2 - 88 % @ RA, 95 % @ O_2 mask

PR - 68/min

RR - 40/min

Chest - B/L ENE & clear

CVS - S_1S_2 (+), No murmur

P/A - Soft & NT
Liver 5 N.B

CNS - E4V5M6

Pupil - B/L Equal Size & RR

DTR - B/L 2+

Planter - B/L ↓

C/O - fever - 4 days Headache - 4 days
Vomiting - 4 days Pain Abd - 4 days

Investigation :-

Investigation : Date	23/11/23		27/11/23			
TLC	1950		2600			
DLC N/L/M -	53/39/6.1		37/55/7			
Hb%	2.2		6.1			
ESR						
R/E of Urine						
Sugar/PP/R/F						
Bl. Urea/Sr. Cr.	39/0.6					
Sr. Ca / Alk Phos	342					
Sr. Bilirubin T/D/I -	0.3/0.4/0.3					
SGPT/SGOT -	20/23					
S/T Protein						
A:G Ratio						
PT & IIPT						
Na+/K+/Cl-	133/4.2/103					
E.C.G. PLT -	51K		15K			
Chest X-ray						
USG						
CT Scan						
~~CSF~~ Bone Marrow	Trilineage Hematopoiesis					
ECHO	Aspirate Cytology - Predominantly micronormoblastic maturation of erythroid cells &					
Others						

Widal - Negative in all dilutions

Dengue - NS1 Ag - N/R

Treatment Given in Hospital / Operative Note :-

- 1 Unit of PRBC transfusion
- 2 Units of Platelets transfusion
- 2) Pip 3.0
- 2) Amikacin
- 2) PCM

→ Pt is hemodynamically stable at time of discha
may
& Need platelet transfusion & PRBC transfusion &
discharged on persistent Request

Advice on Discharge :-

1) Tab PCM (500 mg) - ½ tab - P/O - S.O.S
2) Tab M.V - 1 tab - P/O - OD - 14 days

Pateint is Refered to Higher Centre (AIIM Pa
I.M.S, BHU) for further Management
& others

पुनः चेकअप के लिए ..... 9/24 ..... आउटडोर में सुबह 9 बजे

..... के दिन ..... दिनों के बाद आएँ।

Sr. Resident/Asstt. Prof.

Junior Res

फॉलोअप (Follow up)

दिनांक (Date)	संक्षिप्त परीक्षण विवरण एवं उपचार (Clinical Examination, Investigations and Treatment)
	R/S - B/L AE (+) ; B/L conducted sounds.
	CVS - S1 S2 (+), hyperdynamic
	CNS - 15/15 - GCS ; pupils - B/L RTL
	P/A - Soft, NT, No o/g.
	Rx
	- Orally allowed
	- Inj CEFTRIAXONE (1g/10) 10ml + 10ml NS IV q 12hrly.
	- Inj EMSET (2/1) 2ml + 5ml NS IV q 8hrly.
	- Inj SUMOL (10/1) 20ml slow IV q SOS if BT ≥ 100°F.
	- Inj TRAMADOL (50/1) 1ml + 30ml NS IV stat c̄ Inj EMSET (2ml) IV stat
	- PRBC transfusion @ slow over 4 hrs
	- Monitor vitals

फॉलोअप (Follow up)

दिनांक (Date)	संक्षिप्त परीक्षण विवरण एवं उपचार (Clinical Examination, Investigations and Treatment)
	Child needs urgent HDU/ICU bed however child has been regretted due to non availability of HDU/ICU bed with above advice
10/12/25	1 (u) PRBC transfused under aseptic condition. All advised 2x explained [illegible] of adverse reactions → (i) stop transfusion (ii) call DOD (iii) give [illegible] [illegible]
11/12/25	Attendant want to take the child to Homi Bhabha Institute hence child is being referred

DTOR : Referral

DISCHARGE TICKET

PATNA MEDICAL COLLEGE & HOSPITAL

PATNA - 800004

DEPARTMENT OF ....Paediatrics.....

UNIT OF .....Dr. Vivek Prakash.....

wt - 20kg

Name ....Sandeep Kumar..... Age/Sex : 9y/M

Reg. No. ERC 1290 Bed No. : Ward : PICU

Address : Kasuy, Buxar ... Bihar

Date of Admission 28/02/26 Date of Discharge : 13/3/26

Date of Operation :

Diagnosis : Aplastic [illegible]