CANCER CARE TRUST

Web.add : www.cancercaretrust.org
E.id : help@cancercaretrust.org
Contact No:. +91 9643335086

PATIENT APPLICATION FORM

PATIENT'S DETAILS

NAME:	**Umaam Khan**
FATHER NAME:	**Shahnawaz Khan**
DATE OF BIRTH / AGE:	**4 Years**
SEX:	**Male**
ADDRESS:	**5 Kulhada Peer Bankhana Road, Bareilly, Uttar Pradesh-243003**
DISEASE:	**Brain Tumor/ Retinoblastoma**
HOSPITAL DEPARTMENT TREATMENT	**AIIMS** **Oncology** **Chemotherapy**

For CANCER CARE TRUST

Authorized Signatory

Authorized Sign

शाहनवाज

Parent's Sign

Cancer Care Trust

डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

शरीरमाद्यं खलु धर्मसाधनम्

OPR-6

DR. B.R.A. IRCH,AIIMS,NEW DELHI
IRCH No. 278858 Reg.Date-04/08/2022
Clinic Paediatric Medical Oncology Clinic Clinic No. 2022//6459
Deptt. MEDICAL ONCOLOGY
General
UHID-106126241
नाम
Name UMAAM KHAN
- Shahnawaz Khan
Sex/Age M /3Y
Room 5 (Shift Morning)
Address ,05 kulhada peer bankhana road,,Bareilly,Bareilly, UTTAR PRADESH, Pin:243003, INDIA

एकक/Unit
विभाग/Dept.
नाम/Name
जन्म तिथि/Date of Birth

निदान/Diagnosis - Recurrent RB - Suprasellar recurrence

दिनांक/Date	उपचार/Treatment
21/09/23	- Asymptomatic Adv: - Bone Scan (Done) Redated on 25/9/23 at 8.30 am - CSF Cytopathology (22/09 only) ① Dated 22/9/23 @ 8.30 am + TIT monthly every 4 weeks (कमर में) → IT MTX 12 mg → IT Ara-C 30 mg → IT Hydrocort 15 mg - Cap Thalidomide 50 mg HS (रात) - Tab Celecoxib 100 mg BD - Tab Endoxan 50 mg. — Mon, Thu (सोम, वीरवार) — 1st 3 wk - Tab Etoposide 50 mg — Mon, Thu (सोम, वीर) — Next 3 wee

Ht = 102 cm
Wt = 17.8 kg
Redate 25/9/23 4pm

continue for 2 months
माह तक

Come on 25/9/23 at 8.30 am

अंगलेतीन 647

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

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- F/U on 4/9/23 c̄ CBC/LFT/KFT
+ CECT Head+orbit

- Tab Emset 8 mg
0-0-0

Sh
Shivradhey

वरिष्ठ रेजीडेंट/SENIOR RESIDENT
चिकित्सा अर्बुदविज्ञान/MEDICAL ONCOLOGY
डॉ. बी.आर.अ.रो.कें.अ./Dr. B.R.A.I.R.C.I.
अ.भा.आ.सं., नई दिल्ली/A.I.I.M.S. New Delhi-29

27/9/23

प्रभारी अधिकारी/Officer Incharge
डॉ. बी.आर.एस.रो.कें.अ. दिल्ली-29
Dr. B.R.A.I.R.C.N.Delhi-29
अ.भा.आ.संस्थान/A.I.I.M.S.
नई दिल्ली-29/New Delhi-29

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↓ Prof. S. Pathy

डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R.A. Institute Rotary Cancer Hospital
AIIMS/A.I.I.M.S. HOSPITAL

OPR-6

Out Patient Department
SMOKING PROHIBITED IN HOSPITAL PREMISES

DR. B.R.A. IRCH,AIIMS,NEW DELHI
IRCH No. 278858 Reg.Date-04/08/2022
Clinic Paediatric Medical Oncology Clinic, Clinic No. 2022//6459
Deptt. MEDICAL ONCOLOGY
General
UHID-106126241
नाम
Name UMAAM KHAN
S/o Shahnawaz Khan
Sex/Age M /3Y
Room 5 (Shift Morning)
Address ,05 kulhada peer bankhana road,,,Bareilly,Bareilly, UTTAR PRADESH, Pin:243003, INDIA
Paid Online

बा०रो०वि० पंजीकृत सं०/O.P.D. Regn. No. RT – 120640.

नाम/Name	लिंग Sex	आयु Age	जन्म तिथि/Date of Birth

निदान/Diagnosis: (D) Eye EORB. (30 Gy/EC → Enucleation (LE) → 60 Gy/EC).

दिनांक/Date	उपचार/Treatment
24/5/23. (5) SEP 2023	Radiation completion Patient completed EBRT to (D) eye <40 Gy/20# /4 wk> by VMAT - Rapid Arc technique by UNAC. Wef. 26/4/23 – 24/5/23. No fresh complaints O/E: Active, Alert, Afeb. gr I Dermatitis over (D) periocular area. Adv. – RPC review – Review in RO-OPD after 1 month on ~~[illegible]~~ Tuesday/Friday at 8:30 AM. (23/6/23). Dr. R. M/RO Review in RT OPD - 29/9/23 DVD Tracey SR/RO

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24/5/23 -
— Railway ticket 1 -

19/2023 C/S/O RO OPD ↓ Prof. S. Pattry

O/E (L) Cervical LN. 1X1 cm firm mobile.

CECT Head (5/9/2023)

Pre septal thickening in left orbit ? post op change.

19X19 mm enhancing mass in suprasellar region

-? Suprasellar PNET.

Advice

- FNAC from (L) Cervical Node ↳ (9B)
- CE MRI Brain + B/L Orbit + Screening Spine.
- CSF cytology report
- RM in RO OPD Tue/Fri with Reports

SMO

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ब० रो० वि० कार्ड
O.P.D. Card

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र
अ० भा० आयु० सं०, नई दिल्ली - 110029

Dr. Rajendra Prasad Centre for Ophthalmic Sciences
A.I.I.M.S., New Delhi-110029

दृष्टि
नेत्र अमूल्य उपहार है जो आप ही दे सकते है

अनुभाग व दिन Section and Day मंगलवार व शुक्रवार Tuesday & Friday	V	कमरा नंबर Cabin No.

यू०एच०आई०डी० संख्या
UHID No. 1061 26 244

आचार्य एम. एस. बजाज का एकक
Prof. M. S. Bajaj's Unit

रोगी का नाम Name of the Patient	पुत्र/पुत्री/पत्नी S/D/W	लिंग Sex	आयु Age	पता Address
Umaan		44		

दिनांक DATE	निदान DIAGNOSIS / उपचार Treatment
14/9/23	
VA (R) 6/24 + 50 (25/28)	(L) Enucleated (EORB) (Grp E) (31/10/22)
	10 cycles chemo → 18/03/23 (~~last 01/23~~)
EBRT done (20 cycles) (last 24/5/23)	last ECA → 24/03/23
	20/2/23 last ECA (L) Enucleated (R) WM

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।
Kindly keep this Card safely and bring it on your follow-up visits.

1. धूम्रपान निषेध 2. कूड़ा कर्कट केवल कूड़ेदान में ही डालें 3. थूकिये नहीं
1. No Smoking 2. Use Dustbin 3. No Spitting

CECT done

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दिनांक - Date	उपचार - Treatment

CT scan → ? suggestive of RNET.

Advice:

#151 Optos CR → uncooperative child

- Date fd EUA for
- IRCH referral

Retraction

RIE ↓ Elevated

Atropine 1% TDS

0 0 0
0 0 0
0 0 0 | 3 day

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Address ,05 kulhada peer bankhana road,..Bareilly,Bareilly, UTTAR PRADESH, Pin:243003, INDIA

Room NO - 5054.

IRIT KAUR OPD, Ground Floor, Counter No. 1-15
54, 5th FLOOR, OPD BLOCK
STITUTE OF MEDICAL SCIENCES, NEW DELHI-110 029
069, FIRST FLOOR, TEACHING BLOCK, PH. : 4393

DR. B.R.A. IRCH,AIIMS,NEW DELHI

UHID: 106126241

IRCH No. 278858 General

नाम

Name UMAAM KHAN

Phone Number of Patient : .....

Name of OPD / Ward / Clinic: RC Bed No. .....

Consultant-in-charge: .....

Signature of Resident ..... SRD

(Sign after verifying accurate and complete information)

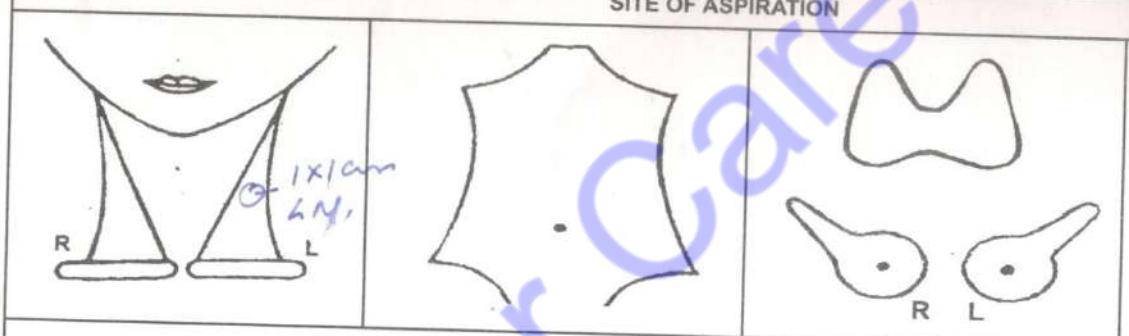
Name of Resident.....

(Capital Letters) Contact No. .....

SPECIMEN COLLECTED ON (DATE).....AT.....AM/PM

PAP.....MGG.....Other stains.....

SITE OF ASPIRATION



OTHERS

HISTORY AND INVESTIGATION

h/c/o (L) eye EOAB
post chemo post Sx
post RT

RADIOLOGICAL FINDINGS

CLINICAL DIAGNOSIS (L) eye EOAB mass
with Supraclavicular LNET

Previous Biopsy Date, Number and Report :

Previous Cystology Number and Report :

Cytopath Number.....

Specimen Received.....

DO NOT WRITE BELOW THIS LINE

CYTOPATHOLOGY REPORT

PLEASE DO NOT FOLD

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RADIOLOGY UNIT

Dr. B. R. Ambedkar Institute Rotary Cancer Hospital

All India Institute of Medical Sciences, New Delhi-110029

Patient Name: Mr.Umaam Khan	Age/Gender: 4 Years and 3 Months / M
Patient UHID : 106126241	IRCH No : 278858
Accession No : 1231838.	Location : MO OPD
Date of Examination : 05-SEP-2023 10:28 AM	

Procedure: **CECT of Head.**

Clinical background: Left extraocular retinoblastoma

Left globe shows ocular prosthesis with presence of preseptal thickening and enhancement

A well-defined avidly enhancing mass lesion is seen in the suprasellar region measuring ~ 19 x 19 mm extending into the sellar region anteriorly the lesion is abutting the A1 segment of b/l ACA.

Posterior fossa: Normal.

Cerebral parenchyma: Normal.

Ventricles: Normal.

Basal ganglia and thalami: Normal.

Comparison: None.

Impression: Pre-septal thickening in the left orbit ? post op change

Suprasellar enhancing mass likely suprasellar PNET

Radiologist: Dr. Amit Yadav (SR) / Dr. Krithika Rangarajan

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