Department of Pediatrics
Division of Pediatric Oncology
ia Institute of Medical Sciences, New Delhi

Dr. Prashant's Thesis

शरीरमाद्यं खलु धर्मसाधनम्

C.K- 62115

Patient N

Name : ROHIT

UHID : 105817243

(L) Group E (Enucleated) B/L RB
(R) Group D IORB

बाल चिकित्सा विभाग.
UHID:105817243

Dept No: 20220030012320

ROHIT NISHAD

S/O SURAJ KUMAR NISHAD
6Y 5M 27D / M(पुरुष)
AWADHAPUR, GORAKHPUR, DELHI,
Pin:273202, INDIA
Ph: 7068342967 General Rs. 0
Follow Up Patient

कमरा / Room
C-210
Queue / संख्या F57
Unit-III, Paediatric,

SAT बुध,शनि,
Reporting: 09:24:44
26/06/2024

43 → 16.6 kg

N/V 03/07/2024.

CBC/LFT/RFT करें/
29/6/24.

Shami
SR

DR. G. SRINIVASAN REDDY

LH2806240703 105817243
LC2806241103 105817243
ROHITNISHAD

3) ~~Review on OPD on 28/3/24~~

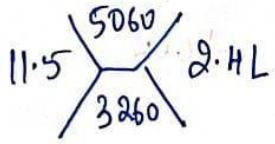
4) Review in POC clinic on 15/04/24 with CBC | KFSP | RFT | LFT

Nikuli
Dr NIKITA SINGH
DM Resident
Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi

15/4/24

B/L RB → (L) Gp.E enucleated
↘ (R) Gp.D → EORB.

~~Post~~ On Augmented chemo.
due for Wk.3 chemo



Plan:

1. PET-CT dated (? 17/4/24) ? → To confirm slot
2. PET-CT slot to be confirmed and date for next chemo to be given post scan. (To meet Dr. Ruksana / Dr. Shaslan)
3. PET date 18/4/24 (Thursday)
   chemo date 21/4/24
4. Pre chemo: Inj. Emeset 4mg + Inj. Dexa 4mg iv.
   chemo: Inj. CARBOPLATIN 340mg in 100mL NS iv over 1h on ~~D1~~ 21/4 D2 ~~22/4~~ 22/4
   Inj. ETOPOSIDE 60mg in 200mL NS iv over 2h on ~~D1~~ ~~21/4~~ D2 ~~22/4~~ 22/4 D3.

6/4/24
- Maglee/8/3/hyperu
- OP Replicau
- post A & Augmented chemo last on 25/3.
- photocopy.

B/LRB
- (L) group E Enucleated
- (R) group D DS
  ↓
  planned for enucleation
  R(E)T01 but Refaulted

Now B (R) sided EOLB
ON involvement till canalicular part
chasma spared

Metastatic work up –
- CSF – acellular
- BMA – No malignant cells
- BM biopsy – No evidence of malignant
- PET-CT – Date on 17/4/24

started On Augmented chemo
week 0 + on 24/03/24

Due for week 3 chemo on 14/04/24

No complaints

11.2 > 3.55 / 1.75 < 174,000

Ad:-
1) ct as plan
2) Review SOS in emergency in case of fever / loose stool / pain in abdomen
3) Review in OPD on Plan to start next cycle of chemo post PET-CT

8/5/24
week 3 received
on sepsis
NNT

B/L RB

(L) EN.
(R) EN RB

RNT / (R)
CFT
43 9:6
PL < 10 mo.
7/5/24

→ Emergency
not

NBC 3.3.
ANC 1.01.

WBC.
9/5/24
&
Discuss

LH0905240575 105817243
LC0905240964 105817243
ROHITNISHAD

require packed transfusion
2 cycles of oxygen require.

13/5/24
3rd cycle of oxygen ... 0, 3, 1 week

18/5/24
CBC / CFT.

No c/o bleeding manifest.

09/05/24   8.8   300   30000.
ANC-1210.

29/4/24 To
CANKID's
Kindly provide GCSF 80mg

04/05/24 B/L RB < (Lt) gr E - enucleated / (Rt) gr D - EORB.

Last chemo - week 3 Augmented
21/4 - 24/4/24

2L
8.7 > 1650 / 560 < 51 x10^3

No complaints at present except
occasional cough
nasal discharge (+).
! low grade fever.

O/E PP(-) CR(+)
Nasal discharge (+).
HR - 110/m
RR - 20/min
RS / CVS | NAD
P/A - Soft.

Adv
→ Inj GCSF
80 mcg S.C. OD.
4/5/24 5/5/24 6/5/24 x (3) day
→ Syp Augmentin
(5ml = 200 mg).
5ml 8hrly x (5) day
0-0-0
→ Septran prophylaxis.
- Repeat count on Monday.
→ If no worsening or new symptom - R/v on 8/4/24.
to given week 6 Aug chemo due

Danger signs explained
- fever, fast breathing
vomiting, bleeding from any site
| R/v in ER. immediately

Adv/ Prechemo

1. INJ. EMESET 4mg IV Nsh.

2. INJ. DEXA 4mg IV push.

Chemo

- INJ. ETOPOSIDE 60mg in 300ml NS IV over 2hrs.

[signature]

- Postchemo

- 1. EMESET 4mg 1tab TDS.

- 1. DEXA 4mg 1tab BD.

- INJ. GCSF 50microgram S/C OD x5days/ till ANC recovery.

- R/V → 04/05/24 Saturday 9am with CBC, LFT, RFT

[signatures with dates]

- Collect protocol from MCH daycare.

[signature]

To
CANKIDS,

Kindly arrange chemo for the patient.

- INJ. ETOPOSIDE 60mg ——— (1vial.)

- INJ. GCSF 50microgram OD ——— (3vial)

Thanks

5. Post chemo: T. EMEJET 4mg 1 tab TDS
T. DEXA 4mg 1 tab BD
Inj. G-CSF 80 µg S.C OD x 5d | till ANC recovery.

6. N/V on 24/4/2024 C CBC.

7. Dietician review -

Dr. Sanjeet
DM, Pediatric Oncology
AIIMS, New Delhi
DMC 109696

24/04/24 Bilateral RB
- (Lt) Group E enucleated.
- (Rt) Group D. —— EORB

On augmented chemo (Week 3 received)
—— 21/04/24.

PET-CT (FDGN/34741/24) 18/04/24.

- Mildly FDG avid right orbit lesion as described (primary) with metastasis to right preauricular / right intraparotid lymphnode
- No definite scan evidence of metabolically active distant metastasis.
- No previous PET-CT for comparison

27/5/24

counselling done

→ Betadiene gargle 2%

→ Sitz bath

→ Personal hygiene

No fresh complain

On Septran ½ tab OPD.

(Photocopy of OPD cards).

⇒ Port 3 Augmented

↓

NRC shall s/o

ONI ; scleral breach

↙

d/w Dr R Seth

3 more cycles of Aug

f/b reeval

R/W 5/06/2024 ☐ CBC, LFT/RFT

Dated for 08/06/24

Labelled

DR. G. SHRAVANI REDDY
Senior Resident
Pediatric Oncology
Deptt. of Paediatrics
All India Institute of Medical Sciences,
New Delhi-110029

23/5/24 :- c/o headache x nausea.

c/o vomiting, 2 episodes, not bile stained x 1 day.

no H/o fever/ altered sensorium/ ab@ body movements

[Has received cyclo/ Doxo on 18/5/24]

O/E :- VITALS

HR → 98/m

RR → 24/m

Pulses → WP

Peripheries → warm

SpO_2 → 98% RA

BP → 90/56 mmHg.

CVS → S_1S_2 (+), no murmurs.

RS → B/L AE/ no added sounds.

CNS → no meningeal signs

Adv

→ Syp. PCM [5ml/250mg] 5ml SOS

→ Syp. Emeset [5ml/2mg] 5ml SOS

→ Danger signs explained

→ To B/U in OPD clinic on monday @ 2pm.

N/V —— 15/05/24

15/5

B/L RB — (L) LPE - Emphysema
(R) D ⇒ FORB (HL)

No Fc

Due for wk 6 CT

Fresh Labs — NA

* Check CBC *

Inj. Emset 3mg IV stat
Inj. Dexa 3mg

↓

INF DNS @ 1:100 KC @ 85ml/hr x 6h
↓ 2hr

Inj Cyclophosphamide 1000mg + 100ml NS over 1hr D1
Inj Mesna 300mg + 100ml NS @ 0, 3, 6h
Doxorubicin 20mg + 100ml NS over 1hr D1
Inj VCR 1mg slow IVP

Post CT

- Syp Emeset (2mg/5ml) 5ml TDS | x 3d.
- T. Dexa (4mg) ½ tab BD |
* Inj GCSF 80 ug S/C OD x 5 days | till ANC recovery from D2 onwards
- t/c Septran on alternate days
- R/v 25/5/24 c̄ CBC / LFT / RFT.
- RPC opinion for response assessment

Seen in daycare 18/5/24. - for week 6 chemo.

16/5/24 9.2 > 5850 / ANC - 3480 < 2.55 lakhs.

Wt. 15.70 kg BSA - 0.6 m²

LC2405240704 105817243
LH2405240446 105817243
ROHITNISHAD

5/6/24

Δ - B/L RB - (L) GpE - Enucleation
(R) GpD → EORB

P | 7# HDCEC
1# IAC → Defaulted - EORB

↓

P | 3# Augmented CT

↓

Reassessment MRI - ONI and scleral breach (+)

(3/6)
1012 — 5710 — 4.06
3310

LFT/RFT (N)

To proceed with WK-9 CT

Adv (WK-9)

- Inj Emset 2mg + Dexa 2mg - I/V stat
- C. Aprecap 125mg - D_1, 80mg - D_2, D_3

9/6/24

↓

Inj Carboplatin 340mg + 100ml NS over 1hr
← (D1), (D2) 9/6, 11/6

Inj Etoposide 60mg + 200ml NS over 1hr
← (D1), (D2), (D3) 9/6, 11/6, 12/6

Post CT

- Inj GCSF 85µg S/C OD x 5 day from D_4 onwards x 5 day.
13/6, 14/6, 16/6

- T. Dexa (4mg) ½ tab BD x 3d
- T. Pantop (20mg) 1 tab OD BBF x 3d
- T/C Septran as advised
- N/V POC - 24/6/24 @ 2pm
  = CBC/LFT/RFT

Qun
SR/PG
Dr. Himan

11/6/24

C/O 3 episodes of vomiting already received emset/Dexa & Cap Aprecap yesterday & today.

O/E HDStable
No dehydration
HR - 96/min
RR - 24/min.
good volume pulses

Adv: CINV

Advice

① T. OLANZEPINE (1 Tab = 2.5mg) ½ Tab stat / OD x 3 days.

② Danger signs explained R/V SOS in emergency.

Shivani
SR POC

⊙ T- Dexa 2mg TDS x 3days o—o—o
⊙ T- LANZOL Jr 15mg OD x 3days o—
· Inj GCSF 80 ug s/c OD
[D2 D3 D4 D5 D6]

· N/V 03/07/2024. at 9am OPD

Shravani
DR. G. SHRAVANI REDDY,
Senior Resident
Paediatric Oncology
Deptt. of Paediatrics
All India Institute of Medical Sciences
New Delhi- 110029

TO
Candids
please arrange.

dated 1/7/24
from DayCare.
Latyens
Sr

29/06/24

B/L RB < Rt FORB III, (L) enucleated

4th Augment 9/6 – 11/6.

LH0107241665 105817243
ROHITNISHAD

1.84 / 15,000
8.1 / 0.46

Rx) :-
(I) chemo not date on 3/7/24.
(II) Review in daycare on 1/07/24 c̄
CBC

Dr NIKITA SINGH
DM Resident
Pediatric Oncology
Department of Pediatrics
AIIMS, New Delhi

26/06/24

BL RB → Rt EORB III
→ (L) enucleated

Post 3# chemo → MRI s/o ON(+)/scleral breach (+)

↓

planned for 3# more Qty chemo.

4TH ~~#~~ Aug / wk-9 → 9/6 – 11/6. f/b GIII r.

No clinical issues.

CBC/LFT/RFT N/A

plan

(1) ~~Repeat~~ 29/06/24 ~~at~~ ~~Room~~ ī CBC/LFT/RFT

(2) Daycare date for cyclophosphamide after 01/07/24 ✓

(check labs)

Chemotherapy

(give 2/7/24)

- Inj Emeset 2mg + Dexa 2mg IV stat

(D1) Inj VCR 0.9mg IV slow push

(P1) IVF DNS ī 1:100 KCl @ 75 ml/hr (6hrs)
(2hrs prehydration)

↓

Inj CYCLOPHOSPHAMIDE 1g in 100 ml NS over 1hr

Inj MESNA 300 mg IV @ 0, 3, 6 hrs

(b1) Inj DOXORUBICIN 20mg in 100 ml NS over 1hr.

week-12
cycle 5 (Aug).

Cycle no ..... Date.....Wt.....16.....BSA.....0.6.....

Hb.....TLC.....ANC.....Platelets.....

SGOT.....SGPT.....S Bil.....Urea.....Creatinine.....

} to check.

Drugs	Dose given	Day
VCR	0.9mg slow IV	D_1
~~Carboplatin~~ CYCLOPHOSPHAMIDE	1000mg /100ml NS	over 1hr D_1
~~Etoposide~~ DOXORUBICIN	20mg /100ml NS	over 1hr D_1
GCSF	D_2 D_3 D_4 D_5 D_6	

Next visit.....

Cycle no ..... Date.....Wt.....BSA.....

Hb.....TLC.....ANC.....Platelets.....

SGOT.....SGPT.....S Bil.....Urea.....Creatinine.....

Drugs	Dose given	Day
VCR		
Carboplatin		
Etoposide		

Next visit.....

week 6 :

Cycle no ..... Date 16/5 Wt 15.7 BSA 0.6 m²

Hb 9.2 TLC 5850 ANC 3480 Platelets 2.55 lakh

SGOT 36 SGPT 22 S Bil 0.13 Urea 24 Creatinine 0.4

Drugs	Dose given	Day
VCR	0.9 mg Slow IV Push	D1 16/5
~~Carboplatin~~ CYCLOPHOSPHAMIDE	1000 mg + 100 ml NS over 1 hour	D1 16/5
~~Etoposide~~ DOXORUBICIN	20 mg + 100 ml NS over 1 hour	D1 16/5
G-CSF	D3 D4 D5 D6	D7 19/5 20/5 21/5 22/5 23/5

Next visit.....

Cycle no Week ..... Date..... Wt..... BSA.....

Hb..... TLC..... ANC..... Platelets.....

SGOT..... SGPT..... S Bil..... Urea..... Creatinine.....

] planched

Drugs	Dose given	Day
~~VCR~~		
Carboplatin	340 mg	D1 9/6
Etoposide	60 mg	D1 9/6 D2 10/6 D3 11/6

4 G-CSF 85 mg SC ÷ 13/06
14/06
15/06
16/06
19/06

Next visit.....

Echo →

→ Week "0"

Cycle no ..... Date 28/3/24 Wt 16kg BSA 0.60 m²

Hb 13.9 g/dL TLC 11,600 ANC 7000 Platelets 2.6 lac

SGOT ..... SGPT ..... S Bil ..... Urea ..... Creatinine .....

Drugs	Dose given	Day
VCR	1mg iv push	① [24/3/24] 28/3
~~Carboplatin~~		
~~Etoposide~~		
Cyclophosphamide	1000mg/100ml NS	① [24/3/24] 28/3
DOXORUBICIN	20mg/100ml NS	① [24/3/24] 28/3

Inj. G-CSF 80µg SC OD x 5d [25/3 - 29/3/24]

Chemotherapy: checked by ..... Administrated by .....
(Signature SR) (Signature JR/SR)

Next visit.....

Wk·3

Cycle no ..... Date ..... Wt 16kg BSA .....

Hb ..... TLC ..... ANC ..... Platelets .....

SGOT ..... SGPT ..... S Bil ..... Urea ..... Creatinine .....

Drugs	Dose given	Day
~~VCR~~		21/4/24
Carboplatin	340mg	D1 D2 def 22/4/24
Etoposide	60mg	D1 D2 D3 21/4/24 def 22/4/24 24/4/24

Next visit.....

Inj. G-CSF 80µg. S/C.

D4 25/4 D5 26/4 D6 27/4 D7 28/4 D8 29/4 30/4

UHID- 10581724

All India Institute of Medical Sciences, New Delhi.

Division of pediatric Oncology

TREATMENT PROTOCOL FOR RETINOBLASTOMA

Name Rohit Father's name Suraj 6y Male 10/5/22 Age Sex POC NO family history

Squint/white reflex/diminishes vision/red eye/watering of eyes/Proptosis Bilateral RB → (R) Gp E, (R) Gp D

Others

Unilateral/bilateral

MT HBsAg HIV

L Intraocular/Extraocular R Intraocular/Extraocular

Group Metastatic/Non metastatic Group Metastatic/Non metastatic

7# HOCEV

1# IAC

(L) eye enucleated

↓

defaulted x 1 yr

Presented c (R) extraocular disease in March 2024

Baseline workup/Investigations

USG

EUA (R) extraocular ds.

Indirect Ophthalmoscopy

CT/MRI date & report (March 24)

Review of imaging at radioconference Yes/No

(R) ON involvement upto intracanalicular part (L) no intracranial extension / chiasm

(L) optic (R) atrophic

(R) T2 hyperintense mass c extraocular extension

(R) Hb TLC Platelet ANC

SGOT/SGPT/S.Bil/SAP

MT HBsAg HIV

Staging W/u → CSF - cytospin: acellular (22/3/24) cytopath

→ BMA + Bx : aspirate s/o no e/o mets (22/3/24)

→ PET CT scan (17/4/24)

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)
अखिल भारतीय आयुर्विज्ञान संस्थान / ALL INDIA INSTITUTE OF MEDICAL SCIENCES
अंसारी नगर, नई दिल्ली-110029 / Ansari Nagar, New Delhi-110029

दूरभाष / Phones 26588500 26588700

नियुक्ति पर्ची / APPOINTMENT SLIP

रसीद संख्या / Receipt No. : CASH / CASH RECEIPT

Done By-Mr.MANISH KUMAR 2 DEO SWSC **(Follow-up)** General ₹ 0.0 Print Appointment Slip

जमाकर्ता / Received From: दिनांक / Dated :

Department Name: Paediatrics/Paediatric **Appointment Date: 03/07/2024** रोगी प्रकार / Patient Type :

आ.पा.वि./यू.एच.आई.डी. स / OPD / UHID No.: **Reporting Time: 8:00 AM-9:00 AM** कक्ष संख्या / Room No. :

के नाम / ON ACCOUNT OF

Doctor Name	**Dr. RACHNA SETH**	Appointment Request date	**26/06/2024**
Name of Patient	**MR. ROHIT NISHAD**	Appointment No	**2024062616498**
Sex	**Male**	Age	6 years 5 months 27 days
Contact Details	Mobile: XXXXXXX967	Request Mode	counter
Queue No:	F7		

Remarks:
Your UHID Is : 105817243.

भुगतान का प्रकार / Payment Mode :
रुपये / INR (Rs.) :
रुपये शब्दों में / Rs. in Words

यह कम्प्यूटर द्वारा जारी की गई रसीद है और इसमें हस्ताक्षर और मोहर अपेक्षित नहीं है।
THIS IS COMPUTER GENERATED SLIP AND DOES NOT REQUIRE SIGNATURE AND STAMP

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

OPR-6

कमरा / Room C-210
बाल चिकित्सा विभाग
UHID: 105817243
ABHA: 91-7773-0260-7638
Dept No: 20220030012320
Clinic No: 2022/POC/105
ROHIT NISHAD
Queue / संख्या F9
Unit-III, Paediatric
S/O SURAJ KUMAR NISHAD
5Y 5M 6D / M(पुरुष)
A.WADHAPUR, GORAKHPUR DELHI
Pin 273202 INDIA
Ph: 7068342967
Follow Up Patient
General Rs. 0
Reporting: 08 45 44 06/06/2024

एकक/Unit
विभाग/Dept.
ओ.पी.डी. पंजीकृत सं०/O.P.D. Regn. No.
पता/Address
Age

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
16.7 Kg TO, Cankids/Apna Ghar Kindly extend the stay of patient by 1 week	N/v POC - 24/6/24 c CBC/LFT/RFT c Syp Conset (2mg/5ml) 5ml TDS x 3d
15/6/24	• Syp Cetrizine (5ml/5mg) 5ml H/S x 3days • Syp Honnitus 5ml BD x 3days DR. G. SHRAVANTHI REDDY, Paediatrics, All India Institute of Medical Sciences, New Delhi 110029