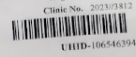






डा. बी. आर. अम्बे
Dr. B.R. Ambedka
अ. मा. आ. स. स.
बहिरंग रोगी
अस्पताल के अन्दर धुमपान

Report
DR. B.R. AMBEDKAR, NEW DELHI
Reg. Date: 15/04/2023
Clinic No. 294125
Clinic Name: Oncology Clinic
Deptt. RADIATION ONCOLOGY
General
Name: VISHAL
Sex/Age: M/3Y
Room: Board Room (Shift: Morning)
Phone No. 816 8888888
Address: c1798 jahangpuri delhi 33, DELHI, INDIA



OPR-6

एकक/Unit: Endo SG/OP
विभाग/Dept: med onc

नाम/Name

पिता/ F / S

Birth

निदान/Diagnosis: medulloblastoma - WHO grade IV

दिनांक/Date	उपचार/Treatment
date 3/07/2023	C2 cap Apricap 80mg D1-D3 → aj. bonon 4mg IV D1, D2 aj. emeset 4mg IV aj. VCR 1mg IV P D1 D8 D15 C2 D1 thick labs 8/7 (C2)
(2nd floor Daycare)	aj. CISPLATIN D1 - 25mg D2 - 25mg in 10 NS on 2 hrs
	aj. Mannitol 20-1. 70ml IV D1, D2
	aj. fd 10mg + MgSO4 + 0.5ml in 10 NS on 3 hours D1, D2
	aj. Endonan D1 - 350mg D2 - 300mg in 250ml 5% D over 1 hour P-1

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



Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.स.
अस्पताल के अन्दर धुम

DR. B.R.A. I.R.C.H.A.I.M.S. NEW DELHI

IRCH No. 294126

Clinic: Neuro Oncology Clinic

Deptt: RADIATION ONCOLOGY

General

Name: VISHAL

Phone No.

Address: c/799, Jahangirpuri Delhi 33, DELHI, INDIA

Reg. Date: 15/04/2023

Clinic No. 2023/7812

UHID: 106565394

Date of Birth

OPR-6

एकक/Unit: NCC

विभाग/Deptt:

नाम/Name:

निदान/Diagnosis

Medulloblastoma WHO-Gr IV Post op

दिनांक/Date

उपचार/Treatment

MD/Dr Prof. S. Gupta

Plan: PORT + CSI + pf Boost
30Gy → 55-8Gy

DFRT 24/4/23

Iv Contrast Trj amipaque 50ml

Empty Stomach

Post op CEMRI Brain

ABC, MR, CT

Spine Screening

in Disc format

CSF cytology - Admit in RT ward, 1st floor.

Ophthalmology review in OPD

G. Moura

15/4/23 Come for CSF cytology
→ Sample won't be sent today
→ Come to ward on Monday 10:30am
Amir

120 → 43 → 50
↓ ↓
Canula CF can.

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



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

अस्पताल के अंतर्गत
बहिः

एकक/Unit: Rad Onc
विभाग/Dept: Rad Onc
नाम/Name:

DR. B.R. AMBEDKAR INSTITUTE, NEW DELHI
IRCH No. 294126 Reg. Date: 15/04/2023
Clinic: Neuro Oncology Clinic Clinic No. 2023/0812
Deptt: RADIATION ONCOLOGY
General
नाम: VISHAL
UHD-106546394
Name: VISHAL रिति/Date of Birth
Phone No. Sex/Age: M/5Y
Room: Board Room (Shift: Morning)
Address: c179a janagipuri delhi 33, DELHI, INDIA

OPR-6

निदान/Diagnosis

Medulloblastoma - WHO Gr IV

दिनांक/Date

3/6/23

उपचार/Treatment

Adv: - C#1 - Packer's

80
80/80

- Cap Apocap 80mg D1 - D3

- Inj. Dexam 4mg i.v.p. D1, D2

- Inj. Emeset 4mg i.v.p.

- Inj. VCR 1mg i.v.p. → D1 only in Day 0

- Inj. Cisplatin → D8, D15 (R.No. 15)

D1 = 25mg / 10NS i.v. 2hrs
D2 = 25mg / 10NS i.v. 2hrs

- Inj. Mannitol (20%) 70ml i.v.
D1, D2

- Inj. KCl 10meq + MgSO₄ 0.5ml
+ 10NS i.v. over 3hrs D1, D2

Day Care
2nd floor

C#1
3/6
OK

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

APRO Bed 21

आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Ambedkar Institute Rotary Cancer Hospital
I/A.I.I.M.S. HOSPITAL

IRCH No. 204126
DR. R.A. IRCHAIMS, NEW DELHI
Clinic: Neuro Oncology Clinic
Deptt: RADIATION ONCOLOGY
General
Name: VISHAL
Phone No.:
Address: c1 798 jahangirpur delhi 110033, DELHI, INDIA
UHD-106546394
Room: Board Room (Shift: Morning)
Sex: M
Age: 25Y

Out Patient Department
KING PROHIBITED IN HOSPITAL PREMISES

OPR-6

बनारस/पंजीकृत सं/OPD. Regn. No.

RT-122453.

उमेर

लिंग

जन्म

जन्म तिथि/Date of Birth

↓ Prof. S. Gupta.

निदान/Diagnosis

Medulloblastoma - Sp-Surgery - on CSI + Boost

दिनांक/Date

उपचार/Treatment

31/7/23

Patient started on CSI + Posterior fossa Boost to dose 36 Gy/20#/4 weeks PLE 18 Gy/9#/9 days. by Rapid Arc VMAT technique

Advice

- SKIN CARE

No oil/No cream/No soap applicat
Wash daily with regular water
& let it stand dry - DO NOT RUB.

- No RAW FOOD.

- Maintain Hand Hygiene of child & Caregiver

- Weekly review with CBC/KFT/LFT on Thursday 2pm Room-60

- RT payment Rs 750/-

1/8-1pm
2/8-1pm
3/8-1pm
4/8/23-1pm
7/8-1pm
16/8/23-1pm
17/8/23-1pm
18/8/23-1pm
21/8/23-5pm
22/8/23-1:00pm
23/8/23-1pm
24/8/23-1:00pm
25/8/23-1:00pm
28/8/23-1pm
30/8/23-1pm

4/9-1pm
5/9/23-1:00pm
6/9/23-1pm
7/9/23-1pm
11/9/23-1pm

12/9/23-1pm
13/9/23-1pm
14/9/23-1pm
15/9-1pm
18/9-1pm

20/9-1pm

Signature
SRRO

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

31/8/23-1:00pm

19/9/23-1:00pm



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

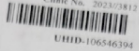
Patient Department
PROHIBITED IN HOSPITAL PREMISES

OPR-6

IRCH No. 294126
Clinic: Neuro Oncology Clinic
Deptt: RADIATION ONCOLOGY
General
नाम
Name: VISHAL
Phone No.
Address: c1 708 Jahangirpuri Delhi 33, DELHI, INDIA
Paid Online

Reg. Date: 15/04/2023

Clinic No. 2023/2812



UHID-106546394

रोगी संकीर्ण सं./O.P.D. Regn. No.

लिंग
Sexउम्र
Age

जन्म तिथि/Date of Birth

निदान/Diagnosis:

दिनांक/Date

उपचार/Treatment

- Rongomg

- Fogel weekly VCR → 11/09/23

Immunoglobulin → 18/09/23

- R/w 25/09/23

EUC/LFT/AST

- Contracept

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)

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23:58

VoLTE 4G 5



23:58

VoD FEB 4G 5



13.750/9/12165/31/123 By Measur 7551

डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.स
वहिरंग र
अस्पताल के अन्दर धुम

DR. B.R.A. IRCH, AIIMS, NEW DELHI
IRCH No. 294126
Clinic: Neuro Oncology Clinic
Deptt: RADIATION ONCOLOGY
General

Reg. Date: 15/04/2023
Clinic No. 2023/7812
UHID: 106565394

RT-122453

RT/21

नाम: VISHAL
Sex: M, Age: 5Y
Room: Board Room (Shift: Morning)
Address: c1799 jahagpur delhi 33, DELHI, INDIA

Unit: NCC
Deptt: General

31 MAY 2023

निदान/Diagnosis: Medulloblastoma WHO-Gr IV Post op

उपचार/Treatment

10/10 Prof. S. Gupta

Plan: PORT + CSI + pf Boost
30Gy → 55.8Gy

DFRT 24 4 23

Post op CEMRI Brain: Empty Stomach
CBC, Hb, LT

Spine Screening in Discom format

CSF cytology - Admit in RT ward, 1st floor.

Ophthalmology review in OPD

15/4/23 Come for CSF cytology
→ Sample won't be sent today
→ Come to ward on Monday 10:30am

120 → 43 → 50
↓
Canula CF can.

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)

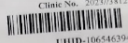
बाहर से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है/Dharamshala facility is available for outstation patients



डा. बी. आर. अम्बे
Dr. B.R. Ambedka
अ. मा. आ. सं. सं.
बहिरंग रोगी
अस्पताल के अन्दर धुमपान

Report

DR. B.R. AMBEDKAR INSTITUTE OF RADIATION ONCOLOGY
Reg. Date: 15/04/2012
Clinic No. 294125
Clinic Name: Oncology Clinic
Deptt. RADIATION ONCOLOGY
General



OPR-6

एकक/Unit radf SG/OP
विभाग/Dept. radf one

नाम Name VISHAL
Sex/Age M/3Y
Room Board Room (Shift Morning)
Phone No. Address c1798 jahangpuri delhi 33, DELHI, INDIA

नाम/Name

दिनांक/Date

Birth

निदान/Diagnosis

medulloblastoma - WHO grade IV

दिनांक/Date

उपचार/Treatment

date
3/07/2023

C2
cap Apricap 80mg D1-D3 →

aj. bexon 4mg IV D1, D2
aj. emeset 4mg IV

aj. VCR 1mg IV P D1
D8
bis

day 1
day 2
day 3

(2nd floor
daycare)

C2 D1
thick lab.
8/7
OK

aj. CISPLATIN D1 - 25mg
D2 - 25mg in 10 NS on 2 hrs

aj. Mannitol 20-1. 70ml IV D1, D2

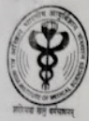
aj. fd 10mg + MgSO4 + 0.5ml in 10 NS on 3 hours D1, D2

aj. Endonan D1 - 350mg
D2 - 300mg in 20 NS on 5 hrs over 1 hour P-1

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



CASH RECEIPT

ALL INDIA INSTITUTE OF MEDICAL
SCIENCES

Ansari Nagar, New Delhi 110029

Phones :26588500,
26588700

<https://ehospital.aiims.edu/ehospital/billing/moneyreceipts/send>

Printed on 02 Sep 2023 13:05:03 PM
Due Paid Receipt After Bill Settlement of Settlement Id: 689845

Receipt No: ACCOUNTS-9/22271/202324 [Original]IRCH Receipts
Received From: MR VISHAL ,Age :5 Yrs 9 Mths 8 Days
Billing Type : General

Dept No: 294126

UHID :106546394
DATED: 02/09/2023

Sl No.	Service Name	Quantity	Rate	Net Amount
2	ADMISSION CHARGE - BED CHARGE FOR 1 DAY	23	35	805

Payment Mode : Cash

Total Service Amount Rs.: 805.0

Donation Adjusted Rs.: 0.0

Advance Adjusted Rs.: 700.0

Grant Adjusted Rs.: 0.0

Exempted Amount Rs.: 0

Due Amount Rs.: 105.0

Paid Successfully
Rupees One Hundred Five Only

0

MR.AWDHESH DWIVEDI IRCH

Receipt No. : _____

Date : _____ against which the advance was deposited

1. Amount recoverable from the patient : _____

2. Amount refundable to the patient : _____

विकिरण नैदानिक विभाग
अ० भा० आ० सं०, नई दिल्ली-११००२६
DEPARTMENT OF RADIODIAGNOSIS
A.I.I.M.S., NEW DELHI - 110029

PLAIN X-RAY/CONTRAST STUDIES REQUISITION FORM

Name : VISHAL Age/Sex : 55/M Ref. Deptt./Unit : Peds Date : 20/6/23

Indoor (Bed No.) / Outdoor / Casualty

UHID No. :

LMP :

106546394

Examination Required :

Clinical History and Examination :

X Ray BREAST Abdomen

Clinical / Working Diagnosis :

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

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.

our/hospital/opdreport/AIMS_IRCH_opd

ELHI
Reg Date: 15/04/2023
Clinic No: 2023/3812
UHID: 106546394
Sex/Age: M/3Y
Morn (Shift Morning)

Reg Date: 15/04/2023
Clinic No: 2023/3812
UHID: 106546394
Sex/Age: M/3Y
Morn (Shift Morning)

Reg Date: 15/04/2023
Clinic No: 2023/3812
UHID: 106546394
Sex/Age: M/3Y
Morn (Shift Morning)

Reg Date: 15/04/2023
Clinic No: 2023/3812
UHID: 106546394
Sex/Age: M/3Y
Morn (Shift Morning)



**DR. B.R.A INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi 110029**

Printed on 06 Nov 2023 09:52:06 AM

Dept No: 0

Receipt No: ACCOUNTS-9/32873/2023-4 - Original IRCH Receipts IRCH No: 0 UHID: 106546394
Received From: MR VISHAL, Age: 5 yrs 11 Mns 12 Days DATED: 06/11/2023
Payment By: Cash Billing Type: General

On ACCOUNT Of

Sl No.	Service Name	Quantity	Rate	Net Amount
1	ADVANCE - IRCH DAY CARE	1	60.00	60.00

Payment Mode : Cash

RS.: 60.0

Rupees Sixty Only

MRS.SARITA VERMA

Printed on 06 Nov 2023 09:52:06 AM

DR. B.R.A. INSTITUTE ROTARY CANCER HOSPITAL

ALL INDIA INSTITUTE OF MEDICAL SCIENCES

PHYSICAL EXAMINATION

Temp.	Pulse	Resp.	B.P.	Weight
Adm: 1) 250mg 400mg/5mL 100 x 5 days				
2) 250mg 250mg/5mL 75X6 5 days f/b 101				
3) Syr. penicillin 2.5mL OD.				
4) Flv in paed. one for Adm Adm				
5) Syr A to Z				
Syr. Virob				
6) 500mg 500mg 10X5 days				

U/S / b SR Med omo
(notes on opd card)

healed fr, conts almost received
(870) Amc

∴ discharge on augmentin, penicillin
gabap

(as chaled on opd
card) kr

IRCH No 294126

Ward

Indo

Con: 1

Pati

Ac

one Vishal

for Cy D,

Age 5/M

Sex

DOA 31/7/2023

DOD

medulloblastoma

① Drug. VCR 1mg iv

② Drug. Cisplatin 25mg iv 2Hrs.

③ Drug. Etoposide 350mg iv 1Hrs.

<https://ehospital.aiims.edu/ehospital/billing/moneyreceipts/mone...>



DR. B.R.A INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
Ansari Nagar, New Delhi 110029

Printed on 31 Jul 2023 20:30:21 PM

Dept No: 0

Receipt No: ACCOUNTS-9/17165/202324 [Original] IRCH Receipts IRCH No: 0 UHID: 106546394
Received From: MR VISHAL, Age: 5 Yrs 8 Mons 7 Days DATED: 31/07/2023
Payment By: Cash Billing Type: General

On ACCOUNT OF

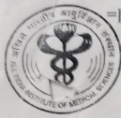
SI No.	Service Name	Quantity	Rate	Net Amount
1	RADIOTHERAPY (IRCH) - RT CHARGES	1	750.00	750.00

Payment Mode : Cash

RS.: 750.0

Rupees Seven Hundred Fifty Only

MR. ATAL KUMAR BHANDARY
Printed on 31 Jul 2023 20:30:21 PM



Dr. B. R. AMBEDKAR INSTITUTE CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHI

DISCHARGE SLIP

Indoor Reg No	IRCH No	294126	Ward
Consultant Name			
Patient Name	Vishal	Age	51M Sex
Admission for	C2D2	DOA	10/7/2023 DOD

Diagnosis Medulloblastoma WHO Grade IV

- (i) ~~Eq. VCR 1mg iv~~
- (ii) Eq. Cisplatin 25mg iv 2Hrs.
- (iii) Eq. Endoxan 300mg iv 1Hrs.

Advice

Re-appointment on

Signature of Doctor



Dr. B. R. AMBEDKAR INSTITUTE CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES NEW DELHI

DISCHARGE SLIP

208

No. _____
Name: Vishal
Age: 5/M Sex: _____
for: Cy D₁ DOA: 31/7/2022 DOD: _____

medulloblastoma

- i) Inj. VCR 1mg iv
- ii) Inj. Cisplatin 25mg iv 2Hrs.
- iii) Inj. Etoposide 350mg iv 1Hrs.

ment on


Signature of Doctor

AIIMS, NEW DELHI
DR B R AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL

DEPARTMENT OF RADIATION ONCOLOGY

PATIENT'S DETAILS:

DISCHARGE SUMMARY

डा. बी.आर.ए. संस्थान रोटरी कैंसर अस्पताल (प्राइवेट वार्ड)
DR. B. R. A. INSTITUTE ROTARY CANCER HOSPITAL (PRIVATE WARD)
अ. भा. आ. वि. संस्थान अस्पताल
A. I. I. M. S. HOSPITAL
प्रवेश-पत्र/Entry Pass
(केवल एक व्यक्ति के लिए/for One Person only)

रोगी का नाम
Name of the Patient VISHAL

वार्ड/शैया सं.
Ward/Bed No. RT Ward/21

अवधि दिनांक
Period from 15/9/23 to 28/9/23

Kam Singh
कुल चिकित्सा अधिकारी
For Medical Superintendent

5 YEARS

H No: 294126

GENDER: MALE

WARD/BED: RT WARD/ BED 21

DATE OF DISCHARGE: 19/4/23

PTA

LUIDS

Amrit
SIGNED BY DR AMRIT NEUPANE

AND F/U IN RADIATION ONCOLOGY OPD ON TUE/FRI ROOM 7 AT 9AM.

AIIMS, NEW DELHI
DR B R AMBEDKAR INSTITUTE ROTARY CANCER HOSPITAL
DEPARTMENT OF RADIATION ONCOLOGY

DISCHARGE SUMMARY

PATIENT'S DETAILS:

NAME: VISHAL

AGE: 5 YEARS

GENDER: MALE

UHID: 10656394

IRCH No: 294126

WARD/BED: RT WARD/ BED 21

DATE OF ADMISSION: 19/4/23

DATE OF DISCHARGE: 19/4/23

CONSULTANT IN CHARGE: DR S GUPTA

DIAGNOSIS AND STAGE:

MEDULLOBLASTOMA

PURPOSE OF ADMISSION:

CSF CYTOLOGY

COURSE OF STAY:

PROCEDURE UNEVENTFUL

CONDITION ON DISCHARGE:

HEMODYNAMICALLY STABLE

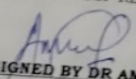
ADVICE ON DISCHARGE

1. SYP PCM 5ML (250/5) SOS

DRINK PLENTY OF WATER AND FLUIDS

FOLLOW UP

COLLECT CSF REPORTS AND F/U IN RADIATION ONCOLOGY OPD ON TUE/FRI ROOM 7 AT 9AM.


SIGNED BY DR AMRIT NEUPANE