भारत सरकार
GOVT. OF INDIA
सुपर स्पेशलिटी ब्लॉक
SUPER SPECIALITY BLOCK
वी.एम.एम.सी. एवं सफदरजंग अस्पताल, नई दिल्ली –110029
V.M.M.C. & SAFDARJUNG HOSPITAL, NEW DELHI-110029
(दूरभाष Telephone : 011-26730000, 26165060)

UHID: 20250362595

CONSULTING ROOM NO :P002, TOKEN NO : 51
Clinic Paediatric Surgery
Days:MON,TUE,WED,THU,FRI,SAT

TUES/FRIDAY

OUT PATIENT RECORD

Name : ANNU
Department : Paediatric Surgery
Dept No. : 2025/059/0002646
Date of Registration : 01-04-2025 09:39:37 AM
Unit: : 1
Age : 1Y 10M
Billing Type : General
Mobile No : ******805
Address : UTTAR PRADESH, South Delhi, DELHI, INDIA
Patient Type:NON MLC

Sex : Female
D/O RAJVEER SINGH
Email :
Occupation : OTHER
Prepared by:Mr. NASEEM AHMED

8.6 Kg

malignant SCT c pub meti
received 2 cycles of PEB
(completed on 24/3/25)

CBC
Hb 8.5
Tc 4400
PH 4232

constipation ⊕.

Adv

1. High dietary fibre
2. plenty of oral fluids.
3. Syp Lactulose 1 tsp BD x 3 months
4. Mucaid powder 1 tsp in ½ glass water tds x 1 month

8/4/25

देश में लगभग हर 8 मिनट में एक महिला की मृत्यु स्तन या सर्वाइकल कैंसर के कारण होती है। जाँच करें और इन जानलेवा कैंसरों से खुद को बचाएं। आप प्रतिदिन सुबह गायनी ओपीडी या वेल वुमन क्लिनिक में जाँच करा सकते हैं। परीक्षण सरल है और दर्दनाक नहीं है।

मेरा अस्पताल My Hospital
Submit Feedback through Mera Aspataal

2/77
wt - 8.5 / 8P00

S/B GP —

- f/u - CT c̄ pulmonary mets.
- for course 3 PEB to be given

8/4/25

Hb - 9.1
Tc - 7800
Plt 1.68

- 2 year / 7 c̄ SCT
recent 2 cycle
- ... / ...
- PA 2 ... ... / ...
Ad
CBC
- LFT
- RFT
- PT / INR
- CFP
- Blood donation
PAC
Ifosfamide
- Echo

11/4/25 - Syp ... 1 g ... - 8 hrly
- Syp ... 1 g ... - ...
- Syp MVI
Syp ... 1 g = ...

ईडब्लयूएस (आर्थिक रूप से कमजोर वर्ग) रोगियों के लिए महत्वपूर्ण सूचना

माननीय "उच्च न्यायालय दिल्ली" के अनुसार-ईडब्ल्युएस के व्यक्तियों जिनकी पारिवारिक आय प्रतिमाह परिवार है, हेतु अभिचिहिनत निजी अस्पतालों द्वारा उपलब्ध करवाए जा रहे निःशुल्क उपचार का लाभ लेने के लिए संदर्भ सुविधा उपलब्ध है। कृपया उपचार कर रहे चिकित्सक से संपर्क करें वे संदर्भ किए जाने के तंत्र की शुरूआत करेंगें। अधिक जानकारी के लिए कृपया नोटिसबोर्ड देखें अथवा प्रभारी-ओपीडी (बाह्य रोगी मामलों में) यथ पंजीकरण काउंटर के पीछे, दूरभाष सं. 26707461 नोडल अधिकारी/सीएमओ-प्रभारी-कैज्युल्टी (भर्ती रोगियों के मामले में), कक्ष सं. 12 (NEB), आपातकालीन ब्लॉक दूरभाष सं. 011-26194690, 26761225

112PXL9378
SAFDARJUNG HOSPITAL

Report Printout

IMPEDANCE AND FCM
SPECTROPHOTOMETRY

Validated

Sample ID
6

Department

Collection Date

Physician

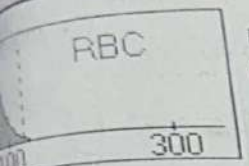
Patient Name

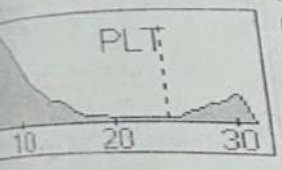
Age

First Name

Gender
Unknown

User1





				< Range >	
RBC	3.95	!	$10^6/mm^3$	3.80	6.50
HGB	8.5	L	g/dL	11.5	17.0
HCT	26.6	!L	%	37.0	54.0
MCV	67	!L	μm^3	80	100
MCH	21.6	L	pg	27.0	32.0
MCHC	32.1		g/dL	32.0	36.0
RDWcv	25.4	H	%	11.0	16.0
RDWsd	61	H	μm^3	39	52
PLT	656	!H	$10^3/mm^3$	150	500
MPV	9.5		μm^3	6.0	11.0
PCT	0.625	h	%	0.150	0.500
PDW	17.3		%	11.0	18.0

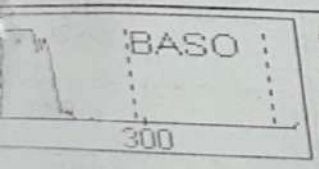
Flags and Alarms

Morphology Flags
LL, NL, LN, LL1, MIC

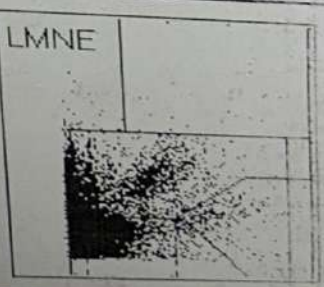
Analyzer Alarms
NO
LMNE+

Suspected Pathology
Neutropenia
NRBCs
Anemia
Anisocytosis
Microcytes++
Microcytosis
Thrombocytosis

Remarks
RBC of the Run 25/03/2025 15:48:22
WBC of the Run 25/03/2025 15:48:22
PLT of the Run 25/03/2025 15:48:22
DIFF of the Run 25/03/2025 15:48:22



					Range			
WBC	3.7	!!	$10^3/mm^3$		4.0		10.0	
	%		#	<	%		#	>
NEU	23.7	!	0.87	!L	0.0	99.9	2.00	7.50
LYM	73.6	!	2.71	!	0.0	99.9	1.00	4.00
MON	2.4	!	0.09	!!	0.0	99.9	0.20	1.00
EOS	0.3	!	0.01	!	0.0	99.9	0.00	0.50
BAS	0.0	!	0.00	!	0.0	99.9	0.00	0.20
ALY	0.8	!	0.03	!	0.0	2.5	0.00	0.25
LIC	0.2	!	0.01	!	0.0	3.0	0.00	0.30



Microscopic Examination

	+	++	+++	%	#		
Neutrophils	☐	☐	☐			Metamyelocytes	
Bands	☐	☐	☐			Myelocytes	
Lymphocytes	☐	☐	☐			Promyelocytes	
Monocytes	☐	☐	☐			Blast	
Eosinophils	☐	☐	☐			ATY LYM	
Basophils	☐	☐	☐			Other	
	☐	☐	☐			Total(100%)	
						NRBC's	

Anisocytosis
Hypochromia
Polychromasia
Poikilocytosis
Macrocytosis
Microcytosis
PLT Clumps

Department of Pediatric Surgery
Safdarjung Hospital, New Delhi
AIIMS Malignant germ cell tumor study - PEB REGIME

NAME: Annu AGE/SEX 1.5y/F

PAED(S) No. IRCH NO.:

DIAGNOSIS/STAGE:
Histology No.:

DRUGS
1. Inj. Cis-platinum: 35 mg/m^2/day, Day 1 to 3 (IV infusion over 1 hr.)

2. Inj. Etoposide(VP-16): 100 mg/m^2/day, Day 1 to 3 (IV infusion over 1 hr.)

3. Inj. Bleomycin: 10 mg/m^2/day, Day 1 to 3 (IV infusion over 1 hr)

4. IV infusion(IVF): 3000 mL/m^2/day or125 mL/m^2/hr, N/2 saline in 5% dextrose + 1mL/100mL KCL

5. Hematinics and multivitamin syrup.

6. Syr. Septran: 5mg/kg of trimethoprim/day in two divided doses for three consecutive days every week for upto 6 months after completion of all therapy.

DURATION: Cycles at 3 weekly interval (day 1- day1). Total of 4 courses.

Course No.1 Date: 1/3/25 CR NO.:

HEIGHT: ~~75~~ cm WEIGHT: 9 kg AREA: 0.42 m^2

Hb: 6.4 TLC: 9.3 ANC: Platelet: 4.59

→ 100ml PRBC given.

BU: S.Cr:

ADMINISTRATION
DAY 1 DATE: 1/3/25

HOUR	TIME		
0	11PM	VP-16 42 mg/IV in N/2 saline	
1 - 4		IVF mL/hr N/2 saline + KCL	
4 - 5	2/3/25	CIS-P 14.7 mg/IV in N/2 saline	
~~10AM~~ 6	2/3/25	BLEOMYCIN 4.2 mg/IV in N/2 saline	done once only Line = 3rd
= 6 - 24	2/3/25	IVF mL/hr N/2 saline + KCL	

DEPARTMENT OF PEDIATRIC SURGERY
SAFDARJUNG HOSPITAL, NEW DELHI
(WARD 19, H BLOCK)
DISCHARGE SUMMARY

Name	Annu
Age/Sex	1.5y/F
Father Name	Rajveer Singh
MRD No.	202539693
Diagnosis	Sacrococcygeal teratoma
Management	Neoadjuvant chemotherapy - PEB regimen

Date of admission	21/3/25
Date of discharge	25/3/25
Date of chemotherapy	22/3/25
Date of 1st chemotherapy	1/3/25
Chemotherapy Regimen	PEB regimen
Address	Uttar Pradesh
Phone no.	
Wt.	8.5 kg
Blood group	O +ve

CASE SUMMARY:

Child presented with c/o difficulty in passing urine and stool since 4 days
No h/o bowel/bladder inc[illegible]e. No h/o urinary complaints.
No h/o loss of weight or [illegible] No h/o jaundice.

O/E: GC moderate, afeb[illegible]2/min, spo2 99% RA
CVS S1S2+, RS BAE+ [illegible]ort, non-tender, no mass palpable
DRE: posterior rectal w[illegible]shed by mass anteriorly. Upper margin of mass not felt. Stool staining present

Investigations

	HB	[illegible]C	PLT	Na/K	Urea/creat	TB/DB	AST/ALT/ALP
21/3/25	9.5	300	5.9L	138/3.5	18.4/0.2	0.38	37/21/145
25/3/25	8.5	7700	6.56 L				

PT-INR (28/2/25): 10[illegible]/0.9

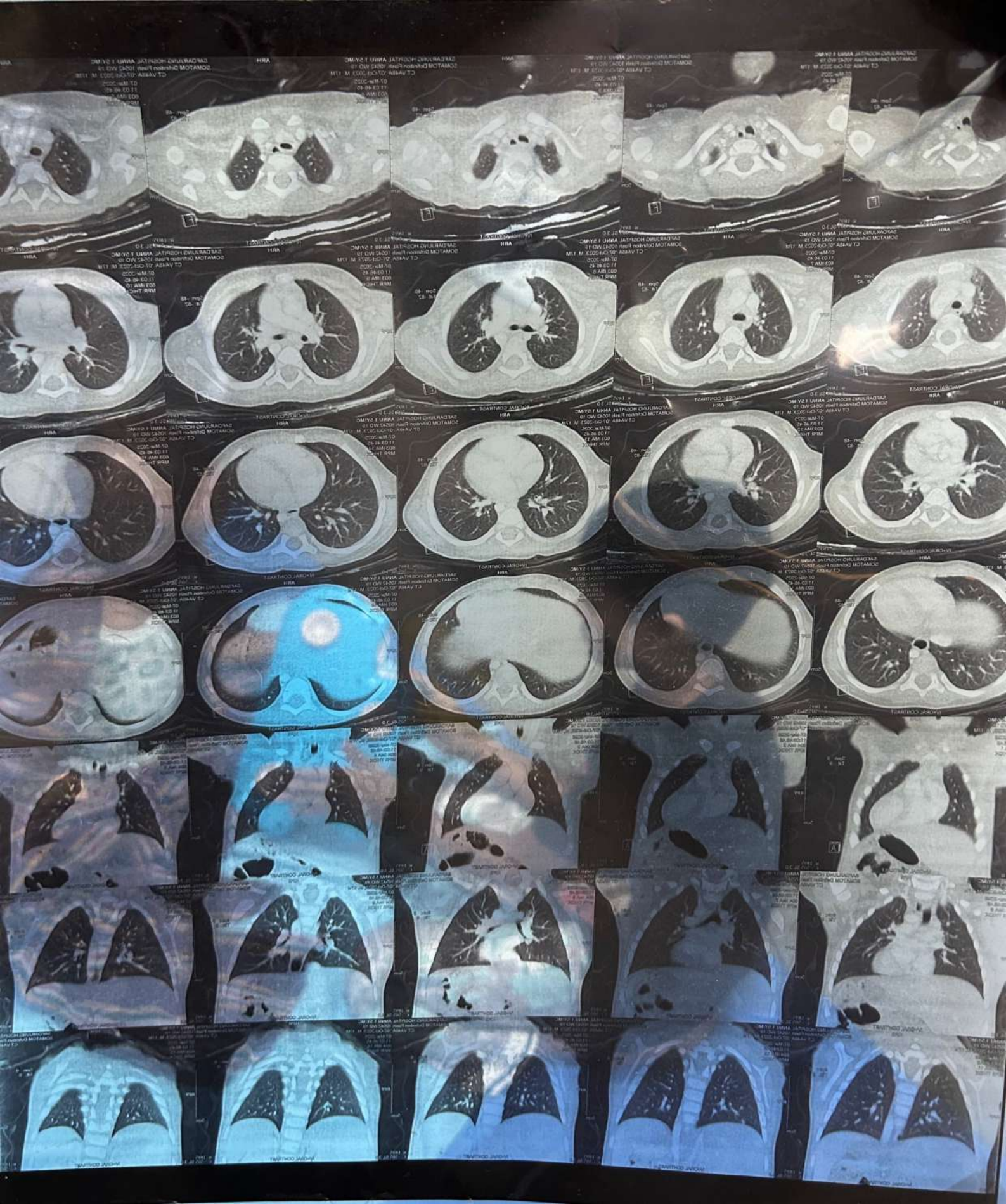
USG outside (27/2/25[illegible] large cystic lesion near right side liver or in liver. Left renal mild HDN. Complex-cystic mass in left pelvic region.

CECT W/A (outside)(27/2/25): large soft tissue mass ~45x 56x 43mm in midline, retrovesical, pre sacral region. Cystic area of size3 42x 36mm noted along left anterior aspect of mass ~ cystic component. Mass closely related to tip of coccyx with mild focal bony defect. Loss of plane with right lateral pelvic wall, with associated compression over anorectal region by the mass.

S.AFP (28/2/25): 25359 ng/ml (normal 0- 8)

S. AFP (21/3/25): >1000ng/ml

CECT W/A + Chest (7/3/25): A large relatively well defined heterogeneously enhancing complex solid-cystic lesion (predominantly cystic) soft tissue mass is seen in pelvis in the



NATIONAL INSTITUTE OF PATHOLOGY (I.C.M.R)

SAFDARJANG HOSPITAL CAMPUS, POST BOX NO. 4909, NEW DELHI-110029

Ref. No. 06-07/14674

Date	08/05/2025	Srl No. 3	Hospital No. 2270
Name	BABY ANNU	Age 1 Yrs. 11 Mn.	Sex Female
Ref. By	DR. A . PURI	I.O.P. No. B-957-25	Date of Receipt 24/4/25

HISTOPATHOLOGY

SPECIMEN - 1)Sacrococcygeal Tumor 2) Pararectal pad of fat

GROSS

Received 2 containers

Container 1 labelled as Sacrococcygeal Tumor

Received single cut open grey white grey brown globular soft tissue piece measuring 3.5x2.3x1cm. On cut section tumor is firm white and glistening surface areas identified measuring 2x1.3x1cm.

Container 2 labelled as Pararectal fat.

Received 2 grey white grey brown soft tissue pieces measuring 0.4cm and 1x0.6x0.6cm.

MICROSCOPY

Multiple sections examined from container 1 Sacrococcygeal Tumor with coccyx shows predominantly hyalinisation, fibrosis, sheets of foamy macrophages, necrosis and marked cautery effect (probably treatment related changes). Interspersed areas show mucinous glands, cystic spaces lined by mature islands of hyaline cartilage, fibrofatty and fibrocollagenous tissue, respiratory epithelium (pseudostratified columnar lining), squamous epithelial lining and few adnexal structures.

Container 2: Labelled as pararectal pad of fat comprises lobules of mature adipocytes of unremarkable histology.

IMPRESSION: Due to prominent chemotherapy related changes the possibility of teratoma cannot be ruled out.

(DR. FOUZIA SIRAJ) **(DR. BHAVIKA RISHI)**

** End of Report **

Charity
REG.NO. 38/2021

SUSHAKTI CHARITABLE TRUST

OUR RELIGION IS HUMANITY

PAN NO. ABBTS0498N

S. No. 63

Date. 31/5/25

सेवा में,
सुशक्ति चैरिटेबल ट्रस्ट
ऑफिस no:-5, ईस्ट सफायर
सदरपुर, नोएडा -45.

महोदय

मेरा नाम अंजली है मैं मुरादाबाद (उ.प्र.) की रहने वाली हूँ। मेरी बच्ची का नाम अन्वी है। वह केवल अभी दो साल की ही है और इतनी छोटी उम्र में ही उसे दो बार जैसी बिमारी से लड़ना पड़ रहा है उसका रक्त ऑपरेशन तो हो गया है। और उसकी कीमो भी चल रही थी पर अब हमारे पास पैसे नहीं बचे हैं। हमारी सारी जमा पूंजी उसके इलाज में चली गई है और उसके इलाज के लिए हमें पैसों की जरूरत है कृपया करके हमारी मदद दिजिए। धन्यवाद।

अंजली

For SUSHAKTI CHARITABLE TRUST

Founder

भारत सरकार

Government of India

अन्जली

Anjali

जन्म तिथि / DOB : 21/11/1986

महिला / Female

8691 6052 1304

आधार - आम आदमी का अधिकार