



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

208

उपचार/ Ticket

HOSPITAL

OPR-6

अस्पताल/ Hospital

Department

PREMISES

एकक/Unit TK
विभाग/Dept. TK
नाम/Name

DR. B.R.A. IRCH, AIIMS, NEW DELHI
IRCH No. 220524
Reg. Date-13/11/2018
Clinic Adult Medical Oncology Clinic
Clinic No. 27871/2018
Dept. MEDICAL ONCOLOGY
General
Name SHAINA
UHID-104118702
नाम
W/O- KHAN MOHAMMAD
Sex/Age F/28Y
Phone No. 8853538504
Room 1 (Shift Afternoon)
Address GRAM, NOREIDIPUR, DO, DEERICKERWAR, JALAIJI, UTTAR

Regn. No.

जन्म तिथि/Date of Birth

निदान/Diagnosis

दिनांक/Date

High Risk STAD (Relapsed)

उपचार/Treatment

C3D1 - EMA → 12/4/19

11/4/19

inj Emeret 8mg
inj. Dexa 8mg
inj. Rantec 50mg
inj. Axi 1 cap
100mg / 200mg

inj Etoposide 150mg / 105% D / 1 hour
inj Actinomycin D - 0.5mg 1up
D1 & D2

inj MTX 140mg / 100mg ML / 200mg
inj MTX 200mg / 200mg / 12 hours
D1, only

T Leucovorin 15mg 0-0 x 4 doses

Starts at 4 hours of start of MTX

15th
OK
C3D1 y

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

R

- ① T. nodosus 1tae o—o—o
 - ② T. Emerit 4wys o—o—o
 - ③ T. Rautae 110wys o—o—o
- | 50ans

sup cremaffin for constipation

Height of plants fl. on. 18/4/09 @ 4mm
45 y/days Quar CRC/45/145



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Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.सं. अस्पताल / A.I.I.M.S. HOSPITAL

OPR-6

बहिरंग रोगी विभाग / Out Patient Department

SMOKING PROHIBITED IN HOSPITAL PREMISES

DR. B.R.A. IRC, AIIMS, NEW DELHI
IRCH No. 220524
Clinic Adult Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General
Name SHAINA
W/O- KHAN MOHAMMAD
Phone No. 8853538504
Address GRAM- NOREJPUR, PO- PEPRI GERWAR, JALAUN, UTTAR
PRADESH, INDIA

Reg. Date-13/11/2017
Clinic No. 27871/2017
UHIP-10411870

ब०रो०वि० मंजीकृत सं०/O.P.D. Regn. No.

पति/पुत्री / D of	लिंग / Sex	आयु / Age	जन्म तिथि / Date of Birth
			1/12/27 25/3

Sex/Age F/28
Room 1 (Shift Afternoon)

Due to high rise of TNF
Progressive disease

दिनांक / Date

19/3/17

उपचार / Treatment

on EMA-EP regime
due to CIDG
(E-P due)

Ht 158 cm
Wt 46 kg
BSA - 1.47 m²

Pre-medication

- inj Dexam 12mg iv
- inj Emet 8mg iv
- inj Ranfac 50mg iv
- inj Avil 200 iv

100ML NS
over 1/2 hour.

- inj Fosapp 150mg in 100ML NS
1/2 over 30min.

- inj Etoposide 200mg in 500ML D5
iv over 60 min [only on Day 1]

- ivf NS over 60min

Etoposide -
initially given @
~~100~~ reduced dose
due to H/O hyper @

now to give full @
150mg/m²
= 200mg.

Aspirin
50mg D1
50mg D2

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

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inj cisplatin 50mg in 1000 mL NS over 2 hours
Day 1 (50mg)
Day 2 (50mg)

inj mg 504 2cc + inj KCl 20 meq in 100 DNS
over 60 min

inj mannitol (20%) 100mL i/v over 20 min

Post chemo

Tab Dexam 4mg BD $\xrightarrow{\text{Dose of 9}} \times 3 \text{ days}$
Tab Enset 4mg TDS $\times 5 \text{ days}$
Tab Domstal 10mg TDS $\times 5 \text{ days}$
Tab Rantac 150mg BD $\times 5 \text{ days}$
(Dose of 4 mg)

Syp cremaffin 2sp HS (Dose of 4)
Syp mucaine gel 2sp TDS $\times 5 \text{ days}$
पानी ५-६ ग्लास पीना

Adv

R/v on 25/03/19 c
Pathology report
CBC
RFT
LFT

धम
Sphered
cells.

OK
19/3/19



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Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.सं. अस्पताल / A.I.I.M.S. HOSPITAL

OPR-6

उपचार विभाग / Out Patient Department

PROHIBITED IN HOSPITAL PREMISES

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

एकपत्र ID: 104118702

विभाग IIRCH No. 220524



रोगी पंजीकृत सं./O.P.D. Regn. No.

नाम SHAINA.
पिता/O- KHAN MOHAMMAD
फोन नं. 8853538504
पता GRAM- NOREJPUR, PO- PEPRI GERWAR, JALAUN, UTTAR
प्रदेश, INDIA

General
Sex/Age F/28Y

लिंग Sex	आयु Age	जन्म तिथि/Date of Birth
		08/10/19

High risk GTN.
EMA CO P/Cy - Recurrent disease

निदान

दिनांक/Date

उपचार/Treatment

25/03/19

P/CH1 EMA-EP

Kindly give early date

take date for C#2 EMA EP
Day 1, 2
Day 8

to proceed to chemo if RFT WNL
- CBC is ok

Thanks

EMA-EP protocol

OK
28/3
Dp

Shaini

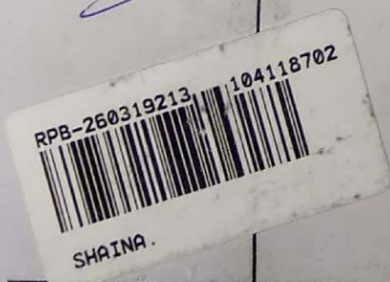
Rx

Day 1

Prechemo:

- inj Dexam 8mg
- inj Emsel 8mg
- inj Rantae 50mg
- inj Avil 2cc

inj 100 ml NS IV over 1/2 hr



अंगदान-जीवन का बहुमूल्य उपहार/ORGAN DONATION - A GIFT OF LIFE

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

inj Etoposide 150 mg in 200 ml NS i/v over 30 min.

^{16/11}
^{31/3/19} inj Actinomycin-D 0.5 mg i/v push
inj Mitomycinate 140 mg in 100 ml NS i/v over 30 min (pb)

↓
inj MTX 280 mg in 1000 ml NS i/v over 12 hours.

Day 2

inj Dexam 8mg
inj Enset 8mg
inj Rantac 30mg] in 100ml NS i/v over 24h.

↓
inj Etoposide 150 mg in 200 ml NS i/v over 30 min

inj Actinomycin-D 0.5 mg i/v push

Tab Leucovorin 15mg p/o (~~0-0-0~~)
@ starting 24h after starting MTX

(total 212 mg)

Postchemo

^{16/11}
^{31/3}

Tab Nadosis 500mg qd x 3d

Tab Enset 4mg BD x 5d

Tab Rantac 150mg BD x 5d.

Syp Numa 100mg 2x p/d.

R/v on 04/19
PHea/CBE/RAV.

Amel
Asghar
SRMO.



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

DISCHARGE SLIP

Indoor Reg No 220524 IRCH NO 220524 Ward DAYCARE

Consultant Name DR. LALIT KUMAR

Patient Name Mrs. SHAINA Age 28 Sex Female

Admission For CHEMOTHERAPY Admission Date 4/4/2019 Discharged Date 4/4/2019

Diagnosis

Chemo. Protocol: EMA-CO

Cycle/Day: c2d8

Drugs Administered

PREMEDICATION GIVEN

Inj Ondansetron 8 mg	IVP
Inj Dexamethasone 8 mg	250 ml NS
Inj Ranitidine 50 mg	IVP
Inj Avil 1 Amp.	IVP

CHEMOTHERAPY/IMMUNOTHERAPY GIVEN

Drug Name	Final Dose	Unit	Soln.	Infusion Time
Inj Etoposide	150 mg	500 m	5%D	1 hr
Inj Cisplatin	50 mg	500 m	NS	2 hrs

SUPPORTIVE CARE GIVEN

Inj. Mannitol 100 cc		20 minutes
Inj. MgSO4 2cc	5%D 500ml	2 hours

Advice

Re-appointment in on 4/4/2019

Signature of Physician
Dr Kapil Goyal



DISCHARGE SLIP

Indoor Reg No 220524 IRCH NO 220524 Ward DAYCARE
 Consultant Name DR. LALIT KUMAR
 Patient Name Mrs. SHAINA . Age 28 Sex Female

Admission For CHEMOTHERAPY Admission Date 5/4/2019 Discharged Date 5/4/2019

Diagnosis

Chemo. Protocol: Weekly Cisplatin Cycle/Day: c2d8

Drugs Administered

PREMEDICATION GIVEN

Inj Ondansetron 8 mg	IVP
Inj Dexamethasone 8 mg	250 ml NS
Inj Ranitidine 50 mg	IVP
Inj Avil 1 Amp.	IVP

CHEMOTHERAPY/IMMUNOTHERAPY GIVEN

Drug Name	Final Dose	Unit	Soln.	Infusion Time
Inj Cisplatin	40 mg	500 m	NS	2 hrs

SUPPORTIVE CARE GIVEN

Inj. Mannitol 100 cc		20 minutes
Inj. MgSO4 2cc	5%D 500ml	2 hours

Advice

Re-appointment in on 5/4/2019

Signature of Physician
 Dr Kapil Goyal



**Dr.B.R.A IRCH, AIIMS, New Delhi.
LAB ONCOLOGY IRCH (HAEMOGRAM)**

A.I.I.M.S., New Delhi-110029

अ. भा. आ. सं., नई दिल्ली-110029 A.I.I.M.S., New Delhi-110029

UHID: 104118702
Name: Mrs. SHAINA
Ward Name:

Sample No: HMI-260319022
Lab Ref No: 022
Verification Time: 26/03/2019 03:01 pm

Report

Test Name	Result	Comment	Normal Range
HB	11.1 g/dL		• 12 - 16 g/dL
PLATELET	409 $10^3/\mu\text{L}$		150 00-400.00
HCT	36.2 %		• 36 - 48 %
TLC	4.61 $10^3/\mu\text{L}$		• 4 - 11 $10^3/\mu\text{L}$
ANC	1.18 $10^3/\mu\text{L}$		• 2 - 7 $10^3/\mu\text{L}$
RBC	4.16 $10^6/\mu\text{L}$		4.50-5.50

Overall Comment :



प्रयोगशाला कायचिकित्सा विभाग
DEPARTMENT OF LABORATORY MEDICINE
नैदानिक रसायनिक
CLINICAL CHEMISTRY

अखिल भारतीय आयुर्विज्ञान संस्थान, अंसारी नगर, नई दिल्ली-110029
All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029
रक्त रसायन / BLOOD CHEMISTRY

UHID: 104118702 Sample No: CH-2603190577
Name: Mrs. SHAINA Lab Ref No: 701
Ward Name: Verification Time: 27/03/2019 02:13 am

Report

Test Name	Result	Comment	Normal Range
UREA	35 mg/dL		10.00-40.00
CREATININE	0.7 mg/dL		0.50-1.00
CALCIUM	9.5 mg/dL		8.50-10.50
PHOSPHATE	5.9 mg/dL		2.50-4.50
URIC ACID	2.7 mg%		• 2.5 - 6 mg/dL
TOTAL PROTEIN	7.4 g/dL		6.00-8.00
ALBUMIN	3.9 g/dL		3.50-5.00
GLOBULIN	3.5 g/dL		2.00-3.50
SGOT (AST)	23 U/L		5.00-40.00
SGPT (ALT)	30 U/L		5.00-45.00
ALK PHOS (ALP)	255 IU/L		• 80 - 240 IU/L
BILIRUBIN TOTAL	0.1 mg/dL		0.20-1.20
Overall Comment :			



Central R.I.A Facility(C.R.I.A), Room No-5010
DEPARTMENT OF REPRODUCTIVE BIOLOGY
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
(New Delhi)

UHID : 104118702
Lab No. : 190324055
Patient : SHAINA
Age / Sex : 28 Years / FEMALE
Category : PAID





Collected On : 26/03/2019 9.22 AM
Printed On : 29/03/2019 3.39 PM
OPD :


Page 1 of 1

Specimen	Test Description	Result / Units	Reference Range
SERUM	BHCG	326772.00 mIU/ml	<5.00 Negative, >5.00 Positive mIU/ml

-----End of Report-----

INDICATIONS: HIGH  LOW 

Lab Technician


Lab Incharge

Values valid for samples between 8:00 AM to 10:00 AM

Receipt Number : 246057

Receipt Date : 26/03/2019

Amount : Rs.250/- (Rupees two hundred fifty Only)



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

DISCHARGE SLIP

Indoor Reg No 220524 IRCH NO 220524 Ward DAYCARE

Consultant Name DR. LALIT KUMAR

Patient Name Mrs. SHAINA .

Age 28

Sex Female

Admission For CHEMOTHERAPY

Admission Date 16/4/2019

Discharged Date 16/4/2019

Diagnosis

Chemo. Protocol: EMA-CO

Cycle/Day: c3d2

Drugs Administered

PREMEDICATION GIVEN

Inj Ondansetron 8 mg	IVP
Inj Dexamethasone 8 mg	250 ml NS
Inj Ranitidine 50 mg	IVP
Inj Avil 1 Amp.	IVP

CHEMOTHERAPY/IMMUNOTHERAPY GIVEN

Drug Name	Final Dose	Unit	Soln.	Infusion Time
Inj Dactinomycin D1-D2	0.5 mg	IVP		
Inj Etoposide	150 mg	500 m	5%D	1 hr

20 minutes

2 hours

Advice

Re-appointment in on 16/4/2019

Signature of Physician
Dr Kapil goyal

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

205

DISCHARGE SLIP

Indoor Reg No 220524 IRCH NO 220524 Ward DAYCARE
Consultant Name DR. LALIT KUMAR
Patient Name Mrs. SHAINA . Age 28 Sex Female

Admission For CHEMOTHERAPY Admission Date 15/4/2019 Discharged Date 15/4/2019

Diagnosis

Chemo. Protocol: EMA-CO

Cycle/Day: c3d1

Drugs Administered

PREMEDICATION GIVEN

Inj Ondansetron 8 mg IVP
Inj Dexamethasone 8 mg 250 ml NS
Inj Ranitidine 50 mg IVP
Inj Avil 1 Amp. IVP

CHEMOTHERAPY/IMMUNOTHERAPY GIVEN

Drug Name	Final Dose	Unit	Soln.	Infusion Time
Inj Dactinomycin D1-D2	0.5 mg	IVP		
Inj Etoposide	150 mg	500 m	5%D	1 hr
Inj Methotrexate D1	280 mg	500 m	NS	12 hrs
Inj Methotrexate D1	140 mg	100 m	NS	1/2 hr

20 minutes
2 hours

Advice

Re-appointment in on 15/4/2019

Signature of Physician
Dr Kapil Goyal



भारत सरकार

Government of India



खान मुहम्मद

Khan Muhammad

जन्म तिथि / DOB : 10/10/1987

पुरुष / Male



9484 5885 9859

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

आत्मज: छुट्टे खान, नौरेजपुर, पीपरी
गहरवार, पिपरी गहरवार, जालौन,
उत्तर प्रदेश, 285125

Address:

S/O: Chhutte Khan, naurejpur,
Pipri Gaharwar, Pipri Gaharwar,
Jalaun, Uttar Pradesh, 285125

9484 5885 9859



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