



डा. बा. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B. A. Ambekar Sansthan Rotary Cancer Hospital

DR. BRA IRCH, AIIMS, NEW DELHI

cer Hospital
SPITAL

OPR-6

CH No. 157148

Reg. Date 29/7/2013

st Visit PD MEDICAL ONCOLOGY
CLINIC

Clinic No. 2614

rent
TAL PREMISES

एक/ Unit

eptt. MEDICAL ONCOLOGY

Rs. 10/- Re

विभाग/ Dept.

ame RAMANAND

M/10 Yrs

नाम/ Name

SH. MAHENDRA

DOB

D. Regn. No.

पता/ Address

Room BR
VILL & PO- HAIN SAR BAZAR, DISTT- SANT KABIR
NAGAR, PIN- 2721 Uttar Pradesh INDIA

निदान/ Diagnosis

AML

दिनांक/ Date

उपचार/ Treatment

17/11/14

1. BMA + Cytogenetics - *done on 22/9/14*

2. Blood Donation - 40

Discharge

3. Estimate Certificate -
Rs. 5 Lacs

4. Rx on 1/10/14

Sameer Bedki

1/10/14

Ad
200 Blood donation

Review on 8/10/14

Len

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. BRA IRCH, AIIMS, NEW DELHI		पर अस्पताल
IRCH No.	157148	Reg. Date	29/7/2013	er Hospital
First Visit	PD MEDICAL ONCOLOGY CLINIC	Clinic No.	2614	६
Deptt.	MEDICAL ONCOLOGY	Rs. 10/- Re		29
Name	RAMANAND	M/10 Yrs		LOGY
S/O	SH. MAHENDRA	DOB		
नाम/Name		Room	BR	/Age
C.R. No.		Address	VILL & PO- HAIN SAR BAZAR, DISTT- SANT KABIR NAGAR, PIN- 2721 Uttar Pradesh INDIA	sultant
Ward/OPD		Unit/Bed No.		
Date/Time				
Nature of Anticoagulant	: EDTA/Citrate/Heparin/Nil			
Diagnosis/History				
Previous Lab. Ref. No.	AMM		Signature of Doctor	
Today's Lab. Ref. No.			Time of Receipt	

INCOMPLETELY FILLED FORM IS NOT ACCEPTABLE

INVESTIGATION (EDTA BLOOD)

LAB REF. NO.

16/8/14

HGB	11.6	gms/dl	MCV	FI(86+10fl)
HCT		%	MCH	Pg(30Pgs)
RBC Count		10 ⁶ / Cumm	MCHC	gms/dl
Platelet Count	172000	10 ³ / Cumm	RDW	(up to 16)
Retic Count		%	RBC Morphology	
T.L.C.	13200	10 ³ / Cumm		
DIFF Count				
Neutro		%	Mono	%
Lympho		%	WBC Precursor	
Eosino		%	RBC Precursor	
Baso		%	Others	
Blood Parasites				

Blood Film Morphology

Impression / Diagnosis

Slide Filled - Yes / No.

Signature

INVESTIGATION (CITRATED BLOOD)

ESR (Citrate : Blood ☺ 1:4)

mm / 1st Hour

Coagulation Studies (Citrate : Blood ☺ 1:9)

Control	Patient	Control	Patient
B.T.		A.P.T.T.	
C.T.		TT	
P.T.		Platelet Count	
F. DP		Morphology	10 ³ /Cu
Fibrinogen			
Others			

Signature



DEPARTMENT OF LABORATORY ONCOLOGY

Dr. B. R. A. Institute Rotary Cancer Hospital

All India Institute of Medical Sciences, New Delhi -110029

Peripheral Smear Report

Lab No. P5532/14

Name RAMANAND

Department MEDICAL ONCOLOGY

IRCH No. 157148

Age / Sex 10 / M

Date of birth

Date of receiving : 15/9/2014

Date of reporting : 16/9/2014

WBC : N 42	L 39	E 06	M 03	B -	Meta -	Myelo 01
Pro -		Blast	(09)		Others -	
RBC : Normocyt normochrom +			Aniso -		Micro -	Macro -
Polk -	Ellipto -		Dachro -		Schisto -	Acantho -
Crenat -	Sphero -		Blister -		Bite -	Hypo -
Target -	Polychr -		Anisochrom -		Nucleated RBC -	
HJ Body -	Baso stipl		Cabot ring -		Parasite -	
Rouleaux -			Agglutination -		Others -	
Platelets Adequate					Rectic -	
Cytochemistry						
Remarks	AML, relapse					

Date: 16/9/2014

Report Entered by

Dr. Anita Chopra

Consultant Incharge

Your Test Results

Patient Name	Ramanand
Case Number	14-C04562
Physician	C/O AIIMS IRCH
Date of Accessioning	22/09/2014
Date of Reporting	27/09/2014
DOB/Age	10 yrs
Sex	Male

SPECIMEN INFORMATION

Heparinized Bone Marrow sample collected on 22/09/2014 at 10:50 AM.

CYTOGENETICS**Karyotyping****INTERPRETATION****Normal****RESULT****46,XY****CYTOGENETICS REPORT**

Metaphases Counted	20
Metaphases Analyzed	20
Metaphases Karyotyped	20
Mitotic Index	Good
Culture Type	Direct/24 Hrs Unstimulated
Banding Technique	GTG
Banding Resolution	400
Quality of Metaphases	Good

COMMENTS:

The karyotype report is enclosed herewith and is normal.

There is no evidence of any structural or numerical abnormality in any of the metaphases studied.

Dr. Bhavna Khandpur, Gurgaon

[Signature]
27/09/2014

CÔRE DIAGNOSTICS

hema CÔRE

Your Test Results

Patient Name:	Ramanand
Case Number:	14-C04562
Physician:	C/O AIIMS IRCH
Date of Accessioning:	22/09/2014
Date of Reporting:	27/09/2014
DOB/Age:	10 yrs
Sex:	Male

KARYOTYPE

The bone marrow was processed by two different ways. One part of the marrow was directly terminated and the other part was incubated in 'Marrowmax' medium for 18-20 hrs. before termination to obtain good quality metaphases.

Bone marrow culture metaphase karyotype: 'G' banding.



Dr. Bhavna Khandpur, Gurgaon

[Signature]
9/27/2014
CÔRE DIAGNOSTICS

Central Registration Counter

AIIMS, New Delhi- 110029

REGISTRATION FORM

To be filled by the attending doctor at Emergency Department

Date: 25/9/14

Time: _____

SCREENING/PAEDS/MAIN/NEW

Criticality: RED/YELLOW/GREEN

MLC/NMLC

Name of the Attending Dr. _____

Sign _____

Particulars to be provide by Patient/Attendant

Patient Name: _____

Age/Sex: _____

Father/Husband Name: _____

Permanent Address _____

District _____ State _____ Pin _____

Tele No _____ Mobile No _____

Brought by: Name: _____ Relation: _____

Address _____

Tele No _____ Mobile No _____

Signature of Attendant/Patient _____

Patient type: EHS/ Non-EHS

Q1111111

डॉ. बी. आर. अम्बेडकर संस्थान रॉटरी कैंसर अस्पताल
Dr. B. R. Ambedkar Institute Rotary Cancer Hospital

अ.भा.आ.सं., अन्सारी नगर, नई दिल्ली-११००२६
A.I.M.S., Ansari Nagar, New Delhi-110029

क्लीनिकल पैथोलोजी / CLINICAL PATHOLOGY

हेमटोलोजी / HEMATOLOGY

नाम/Name	Panwarney	आयु.		/Sex
C.R. No.		Con		
Ward/OPD	157148	Unit		
Date/Time				
Nature of Anticoagulant	EDTA/Citrate/Heparin/Nil			
Diagnosis/History				
Previous Lab. Ref. No.		Sig		
Today's Lab. Ref. No.		Time of Receipt		

INCOMPLETELY FILLED FORM IS NOT ACCEPTABLE

INVESTIGATION (EDTA BLOOD)

LAB REF. NO.

HGB <u>13.4</u>	gms/dl	MCV	Fl(86+10fl)
HCT	%	MCH	Pg(30Pgs)
RBC Count	10^6 / Cumm	MCHC	gms/dl
Platelet Count <u>81000</u>	10^3 / Cumm	RDW	(up to 16)
Retic Count	%	RBC Morphology	
T.L.C. <u>9700</u>	10^3 / Cumm		
DIFF Count			
Neutro	%	Mono	%
Lympho	%	WBC Precursor	
Eosino	%	RBC Precursor	
Baso	%	Others	
Blood Parasites			

Blood Film Morphology

ANC - 3.7

Impression / Diagnosis

Slide Filled - Yes / No.

Signature

INVESTIGATION (CITRATED BLOOD)

ESR (Citrate : Blood \odot 1:4)

mm / 1st Hour

Coagulation Studies (Citrate : Blood \odot 1:9)

Control	Patient	Control	Patient
B.T.		A.P.T.T.	
C.T.		TT	
P.T.		Platelet Count	
F. DP		Morphology	10^3 /Cu
Fibrinogen			
Others			

Signature