







व्याधिकी विभाग

MAMC-Appendix No. 18-p
Annex-5

DEPARTMENT OF PATHOLOGY

मौलाना आजाद मेडिकल कालेज एवं लोकनायक अस्पताल, नई दिल्ली-110002
MAULANA AZAD MEDICAL COLLEGE AND L.N. HOSPITAL
NEW DELHI-110002

(Duplicate)

नाम
Name
वार्ड और फ्लंग संख्या
Ward and Bed No
चिकित्सक का नाम
Refd. by
नमूना
Specimen

प्रयोगशाला संदर्भ संख्या / Lab. ref. No. 5-4873/2
आयु व लिंग 24 / male
Age & Sex
केन्द्रीय पंजीकरण सं. / विभाग सं. 46/11
CR/OPD No.
नमूना पाने की तिथि 10/4/24
Date of receipt of specimen

रिपोर्ट
REPORT

Tiny cores of tissue comprised of dense collagenised tissue with few entrapped ganglion cells and nerve bundles.

One edge of biopsy shows few round cells with scanty cytoplasm and high NC ratio.

Immunohistochemistry attempted is negative for LCA, NSE & show diffuse strong immunoreactivity for desmin. Features indicative of embryonal rhabdomyosarcoma.

Report on further IHC to follow, if contributory.

Dr. Nitakhuana

16/4/24

EXAMINED AND REPORTED BY
REPORTED ON

Course 2

Height: 76 cm. Weight: 8.5 Kg. Surface area: 0.56 m²

Hb: 8.0 gm% TLC: 5,900/mm³ DLC: 71/23 Platelets: 1.27

BU: 40 mg% Serum Creatinine 0.4 mg%

Week 3 Date: 20/5/2024

Drug	Dose	Date and time	Sign and name of Staff	Sign and name of Senior Resident
Vincristine	<u>0.84 mg</u>	<u>20/5/24</u>		<u>[Signature]</u>
Actinomycin D	<u>756 ug/m</u>			
Cyclophosphamide	<u>1.1 gm</u>			
Mesna 1	<u>280 mg</u>			
Mesna 2	<u>280 mg</u>			
Mesna 3	<u>280 mg</u>			

Pt to be Started on GM- CSF the next day

NOTE: Patient to be planned for RT which is to start week 9 (during 4th course)

wt - 7kg 800 gm | BSA - 0.54 m²
Ht - 76 cm

Week 4 Date: 6/6/2024
(not given a/t dose)

Hb: _____ gm% TLC: _____ /mm³ DLC _____ Platelets: _____

Drug	Dose	Date and time	Sign and name of Staff	Sign and name of Senior Resident
Vincristine	<u>0.81 mg</u>			

→ Dose - Week 5 Date: 18/6/24

Hb: _____ gm% TLC: _____ /mm³ DLC _____ Platelets: _____

Drug	Dose	Date and time	Sign and name of Staff	Sign and name of Senior Resident
Vincristine	<u>0.45 gm</u>	<u>18/6/24</u>		<u>[Signature]</u>



Nishkam Imaging Solutions Pvt. Ltd.

(CENTRE FOR COMPLETE SOLUTIONS TO ALL DIAGNOSTIC NEEDS.)

B-1/24, Yamuna Vihar Delhi-110053

Phone : 011-45026753, 08800306799, 9971278123, 8750341345

Name:	Alfmash	Age/Sex:	02y/M
Reg ID:	2403280056GKIP	Date:	28/03/2024
Exmn:	CECT Abdomen	Ref By:	CNBC Hospital

C. T. SCAN WHOLE ABDOMEN (CONTRAST)

STUDY PROTOCOL: SECTIONS OF APPROPRIATE THICKNESS WERE DONE AT ADEQUATE INTERVALS IN STATE OF ART DETECTOR CT SCANNER SO AS TO COVER THE ENTIRE REGION FROM DIAPHRAGMATIC DOMES TO THE PUBIC SYMPHYSIS AFTER THE ADMINISTRATION OF ORAL AND I.V. CONTRAST (NON-IONIC). FEW PLAIN CUTS WERE ALSO OBTAINED THROUGH THE REGION OF INTEREST.

FINDINGS:

Study reveals a large well defined lobulated hypodense lesion showing peripheral and internal curvilinear thin moderate contrast enhancement having small eccentric hypodense fat density areas, measuring approximately 80mm x 56mm x 53mm, originating from coccyx seen occupying whole of the pelvis compressing and displacing the urinary bladder anteriorly with leftwards displacement and compression of rectum. However, no obvious vesicorectal infiltration by the mass is seen. In view of patient age and image morphology, possibility of Sacrococcygeal teratoma should be kept.

LIVER appears normal in size, shape, position and parenchymal attenuation with normal contrast enhancement. Intra hepatic biliary radicals appear normal.

GALL BLADDER appears well distended with normal wall thickness and no intraluminal calcific focus. CBD and Portal vein appear normal. Spleno-portal axis appears normal in course and caliber.

SPLEEN is normal in size, shape, position & tissue attenuation.

PANCREAS is normal in size, shape, position and tissue attenuation with no diffuse/focal lesion. Pancreatic duct appears normal.

BOTH KIDNEYS are normal in size, shape, position and attenuation. No calculus or hydronephrotic changes seen.

URINARY BLADDER is compressed with Fole's catheter in situ but has normal wall thickness.

Visualized pelvic viscera also appear normal. Visualized bony structures appear normal. Visualized small and large bowel loops are normal. No significant free fluid is seen in abdomen.

Contd...



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OPINION: CONTRAST ENHANCED CT SCAN ABDOMEN REVEALS A LARGE WELL DEFINED LOBULATED HYPODENSE LESION SHOWING PERIPHERAL AND INTERNAL CURVILINEAR THIN MODERATE CONTRAST ENHANCEMENT HAVING SMALL ECCENTRIC HYPODENSE ?FAT DENSITY AREAS, MEASURING APPROXIMATELY 80MM X 56MM X 53MM, ?ORIGINATING FROM COCCYX SEEN OCCUPYING WHOLE OF THE PELVIS COMPRESSING AND DISPLACING THE URINARY BLADDER ANTERIORLY WITH LEFTWARDS DISPLACEMENT AND COMPRESSION OF RECTUM. HOWEVER, NO OBVIOUS VESICORECTAL INFILTRATION BY THE MASS IS SEEN. IN VIEW OF PATIENT AGE AND IMAGE MORPHOLOGY, POSSIBILITY OF SACROCOCCYGEAL TERATOMA SHOULD BE KEPT.

ADVISE: CLINICAL CORRELATION

Dr. Shashank Jain
MD [Radiodiagnosis]

Department of Pediatric Surgery
Chemotherapy regimen for Rhabdomyosarcoma (VAC)

75% dosage of
chem
w.e.B 09/06/24

Patients Name Altamash Age/Sex 2y/M

RMS registration number 0006000 p.clinic R.M.S

Guidelines and road map:

WEEKS												16	20	21	22	23	24	25
0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V
A			A			A			A			C	C	A			A	
C			C			C			C					C			C	

WEEKS												41	42	43
29	30	31	32	33	34	35	36	37	38	39	40	41	42	43
V	V	V	V	V	V	V	V	V	V	V	V	V	V	V
A			A			A			A			A		
C			C			C			C			C		

1. Vincristine: $1.5\text{mg}/\text{m}^2$ IV weekly (Maximum dose = 2mg).
2. Actinomycin D: $1350\mu\text{g}/\text{m}^2$ IV single dose. (Maximum dose = $2500\mu\text{g}$).
3. Cyclophosphamide: $2.2\text{g}/\text{m}^2$ IV single dose given over 1 hour with MESNA. At least 2 hours of pre-hydration and 6 hours of post hydration to be given with $125\text{ml}/\text{m}^2/\text{hour}$ of N/2 saline in 5% dextrose
4. MESNA: $500\text{mg}/\text{m}^2/\text{dose}$ at 0,3,6 hours after cyclophosphamide and ifosphosphamide infusions. Each dose to be given over 1 hour.
5. GCS $5\text{ microgm}/\text{kg}/\text{day}$ from 24 hours after cyclophosphamide.
6. Radiotherapy is given to the tumor bed as well as to any sites of metastasis starting week 9.

NOTE:

1. Doses are reduced 50% in children < 1 year of age. If the drugs are tolerated, the doses are increased to 75% and then to 100%.
2. Cyclophosphamide should be omitted on days 42 and 63 in children who have urinary bladder included in the radiation portal, or who will have large volumes or bone marrow irradiated, such as irradiation to the whole abdomen, including the pelvic bones.

- 2 admissions of febrile
Kindly use chemo dose to 75% dose.
Dr. An

VAC chemo given for 1 day

OPERATION OR PROCEDURE DONE:

IMAGING STUDIES:

Radiologically and Symptomatically child was
Suspicion to have Neuroblastoma,
Post Biopsy chemotherapy was started.

किया गया उपचार :

TREATMENT RECEIVED:

Pt. received Iriglyclophosphamide x 7 days

↓
Li Asplatin

from Lab at NAMC → NOW Biopsy results revealed Embryonal RMS *

CONDITION AT DISCHARGE:

Stable

so chemotherapy VAC
will be started
from 23/4/24.

छुट्टी के समय परामर्श :

ADVISE AT DISCHARGE AND PLAN:

Syp. mvi 3me OD

Syp. IFA 3me OD

Syp. septran 40mg (5ml)
(40/5)

P/O OD

1month.

VISIT EMERGENCY IF ANY OF FOLLOWING SYMPTOMS APPEARS:

And distention.

FOLLOW UP IN OPD ON:

OPD 132/136 Tuesday at 2pm

Pediatric ONCOSURGERY OPD.

23/4/24

वरिष्ठ रेजिडेंट चिकित्सक के हस्ताक्षर
रेजिडेंट के हस्ताक्षर

SIGNATURE OF SENIOR RESIDENT

SIGNATURE OF JUNIOR RESIDENT

Shushk
Splend
18/4/24

कनिष्ठ



भारत सरकार

Government of India



Issue Date: 28/11/2022



अल्तामश

Altamash

जन्म तिथि/DOB: 28/02/2022

पुरुष/ MALE

बाल आधार

यह आधार 5 वर्ष की उम्र तक ही वैध है

7639 6545 3986

VID : 9160 1223 9825 7739

मेरा **आधार**, मेरी पहचान



PAN NO :- AAETT1313K

REG.NO.610

HOUSE NO.-I-16/489, Fourth Floor, Military Road, Bapa Nagar, Karol Bagh, Delhi-110005

S.NO...04.....

Date 05/07/2024

सेवा में

दा दिलिया हेल्थ काउन्सिलर

महोदय जी,

मेरा नाम रुबीना है मैं मुहम्मद नगर गाँव का हूँ
की रहती हूँ मेरे बेटे का नाम अलमरा
है। जिसकी आयु 2 वर्ष है। मेरे बेटे को पेट
का ट्यूमर (abdominal tumour) है। डाक्टर
ने ऑपरेशन करने को बोला है, जिसका
खर्चा बहुत है, मैं इसकी सहायता नहीं कर
सकती हूँ। आपसे अपील है कि आपकी
सहायता प्राप्त करे जिससे मैं अपने बच्चे
का इलाज करवा सकूँ।

धन्यवाद

रुबीना

THE HEALING HEALTH FOUNDATION
REGD. No. 8172
NEW DELHI

Address :- I-16/489, Fourth Floor, Military Road, Bapa Nagar, Karol Bagh Delhi-110005.

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