







फॉर्म 1  
S.No.1



झारखंड सरकार

GOVERNMENT OF JHARKHAND  
DEPARTMENT OF ECONOMICS & STATISTICS  
COMMUNITY HEALTH CENTERS MADHUPUR  
COMMUNITY HEALTH CENTERS MADHUPUR

फॉर्म 5  
FORMS



जन्म प्रमाण-पत्र  
BIRTH CERTIFICATE

(जन्म और मृत्यु रजिस्ट्रेशन अधिनियम, 1969 की धारा 12/17 तथा झारखंड जन्म और मृत्यु रजिस्ट्रेशन नियम 2009 के नियम 8/13 के अंतर्गत जारी किया गया)  
(ISSUED UNDER SECTION 12/17 OF THE REGISTRATION OF BIRTHS AND DEATHS ACT, 1969 AND RULE 8/13 OF THE JHARKHAND REGISTRATION OF BIRTHS & DEATHS RULES 2009)

यह प्रमाणित किया जाता है कि निम्नलिखित सूचना जन्म के मूल लेख से ली गई है जो कि COMMUNITY HEALTH CENTERS MADHUPUR सहस्रील मधुपुर जिला देवघर राज्य/संघ प्रदेश झारखंड, भारत के रजिस्टर में उल्लिखित है।

THIS IS TO CERTIFY THAT THE FOLLOWING INFORMATION HAS BEEN TAKEN FROM THE ORIGINAL RECORD OF BIRTH WHICH IS THE REGISTER FOR COMMUNITY HEALTH CENTERS MADHUPUR OF TAHSIL/BLOCK MADHUPUR OF DISTRICT DEOGHAR OF STATE/UNION TERRITORY OF JHARKHAND, INDIA

नाम / NAME: VAIHNAV KUMAR / वैभव कुमार

लिंग / SEX: MALE / पुरुष

आधार संख्या / AADHAAR NUMBER:

जन्म तिथि / DATE OF BIRTH:

02-10-2024

SECOND-OCTOBER-TWO THOUSAND TWENTY FOUR

जन्म स्थान / PLACE OF BIRTH:

COMMUNITY HEALTH CENTERS MADHUPUR, KUSHMAHA,  
MADHUPUR, DEOGHAR, JHARKHAND / COMMUNITY HEALTH CENTERS  
MADHUPUR, KUSHMAHA, मधुपुर, देवघर, झारखंड

माता का नाम / NAME OF MOTHER:

GUNJAN KUMARI / गुंजन कुमारी

पिता का नाम / NAME OF FATHER:

VIJAY NAIT / विजय नाथ

माता का आधार नंबर / AADHAAR NUMBER OF MOTHER:

XXXX-XXXX-7330

पिता का आधार नंबर / AADHAAR NUMBER OF FATHER:

XXXX-XXXX-6927

बच्चे के जन्म के समय माता-पिता का पता / ADDRESS OF PARENTS AT THE TIME OF BIRTH OF THE CHILD:

GRAM - CHARPA, POST - CHARPA, CHARPA, MADHUPUR, DEOGHAR,  
JHARKHAND, 815353 / ग्राम - चरपा, पोस्ट - चरपा, चरपा, मधुपुर, देवघर, झारखंड,  
815353

माता-पिता का स्थायी पता / PERMANENT ADDRESS OF PARENTS:

GRAM - CHARPA, POST - CHARPA, CHARPA, MADHUPUR, DEOGHAR,  
JHARKHAND, 815353 / ग्राम - चरपा, पोस्ट - चरपा, चरपा, मधुपुर, देवघर, झारखंड,  
815353

पंजीकरण संख्या / REGISTRATION NUMBER:

B202520690830000674

पंजीकरण दिनांक / DATE OF REGISTRATION:

11-02-2025

टिप्पणी (यदि कोई हो) / REMARKS (IF ANY):

जारी करने की तिथि / DATE OF ISSUE:

12-09-2025

Updated On : 11-02-2025 14:32:26



'This QR code can be used to check the authenticity of the certificate'



*[Handwritten Signature]*

प्राधिकारी के हस्ताक्षर / SIGNATURE OF ISSUING AUTHORITY :

रजिस्ट्रार (जन्म एवं मृत्यु)

Registrar (BIRTH & DEATH)

COMMUNITY HEALTH CENTERS MADHUPUR  
COMMUNITY HEALTH CENTERS MADHUPUR

"प्रत्येक जन्म एवं मृत्यु का पंजीकरण सुनिश्चित करें / ENSURE REGISTRATION OF EVERY BIRTH AND DEATH"



भारत सरकार  
Government of India



Aadhaar No. Issued: 03/11/2011



विजय नापित

Vijay Napit

जन्म तिथि / DOB : 25/01/1993

पुरुष / Male



आधार पहचान का प्रमाण है, नागरिकता या जन्मतिथि का नहीं।  
इसका उपयोग सत्यापन (ऑनलाइन प्रमाणीकरण, या क्यूआर कोड/  
ऑफलाइन एक्सएमएल की स्कैनिंग) के साथ किया जाना चाहिए।

Aadhaar is proof of identity, not of citizenship  
or date of birth. It should be used with verification (online  
authentication or scanning of QR code / offline XML).

2122 1118 6927

मेरा आधार, मेरी पहचान

Scanned with JAIIN Scanner



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India



Details as on: 06/08/2024

पता: S/O दुर्योधन नापित, वार्ड संख्या ०८,  
डारुपूर/चा प- चरपा, पंचखण्ड- मधुपुर, चरपा,  
टीवणर, झारखण्ड, 815353

Address: S/O Duryodhan Napit, Ward No 08,  
Post/G P- Charpa. Block- Madhupur,  
Charpa, DIST Deoghar, Jharkhand, 815353



2122 1118 6927



1947

help@uidai.gov.in

www.uidai.gov.in



MIS 2022-0134

PATIENT'S NAME: VAIBHAV KUMAR	AGE/SEX: 1Y2M/M
REF. BY: AIIMS	REG./UID: VAR0256
TEST NAME: 3T MRI SCAN - CEMRI HEAD & ORBITS	EXAM. DATE: 22-DEC-2025

**CONTRAST MRI BRAIN WITH ORBIT**

**TECHNIQUE:**

MRI of the brain and orbits was performed with standard sequences in axial, coronal, and sagittal planes before and after intravenous contrast administration (4 ml). No contrast reaction is noted.

**Clinical Details:** Known case of bilateral retinoblastoma.

**FINDINGS:**

**Orbits:**

**Left Eyeball:** There is evidence of a heterogeneously enhancing altered signal intensity lesion measuring 20 x 14 mm in the posterior chamber of the left eyeball, showing internal foci of calcification. No evidence of extraocular extension. No involvement of the left optic nerve.

**Right Eyeball:** There is a heterogeneously enhancing plaque-like altered signal intensity lesion measuring approximately 6 x 3 mm in the temporal region of the posterior chamber of the right eyeball. No evidence of extraocular extension. No involvement of the right optic nerve.

**Optic Nerves:** No abnormal thickening or enhancement of the bilateral optic nerves. No intraorbital or intracanalicular extension seen.

**Extraocular Muscles:** Appear normal bilaterally.

**Retrobulbar Fat:** Preserved bilaterally.

**Lacrimal Glands:** Appear normal bilaterally.

**Orbital Walls:** Appear intact bilaterally.

**Sinuses:** Clear.

**Brain Parenchyma:**

No focal lesions or abnormal signal intensities are seen in the cerebral hemispheres, brainstem, or cerebellum. No evidence of leptomeningeal enhancement. Ventricular system is normal in size and configuration. No evidence of hydrocephalus. Basal ganglia, thalami, and internal capsules are unremarkable.

**Sellar and Parasellar Region:**

Pituitary gland and stalk are normal in size and signal. No abnormal enhancement or mass lesion.

**Brainstem and Cerebellum:**

Normal in morphology and signal intensity. No abnormal enhancement.

**Cerebrospinal Fluid Spaces:**

Basal cisterns and cortical sulci are within normal limits for age. No evidence of abnormal extra-axial collections.

**Disclaimer:** : It is an interpretation of medical imaging/diagnostic based on clinical data. All modern machines/procedures have their own limitation. This is neither complete nor accurate; hence, findings should always be interpreted in the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. Any typographical error should be informed and report sent for correction within 7 days.





MIS 2022-0134

PATIENT'S NAME: VAIBHAV KUMAR	AGE/SEX: 1Y2M/M
REF. BY: AIIMS	REG./UID: VAR0256
TEST NAME: 3T MRI SCAN - CEMRI HEAD & ORBITS	EXAM. DATE: 22-DEC-2025

**Major Vessels:**

Major intracranial vessels appear normal in course and caliber. No abnormal flow voids or vascular malformations seen.

**Other Incidental Findings:**

No other significant abnormalities detected.

**IMPRESSION:**

- Heterogeneously enhancing altered signal intensity lesion measuring 20 x 14 mm with internal foci of calcification in the posterior chamber of the left eyeball, without extraocular or optic nerve extension, likely retinoblastoma.
- Heterogeneously enhancing plaque-like altered signal intensity lesion measuring approximately 6 x 3 mm in the temporal region of the posterior chamber of the right eyeball, without extraocular or optic nerve extension, likely retinoblastoma.
- No evidence of intracranial extension or associated brain parenchymal abnormality.

**ADVICE: CLINICAL CORRELATION.**

Dr. Sachidanand Purkait Chief Consultant Radiologist	Dr. K. K. MISHRA Consultant Radiologist	Dr. Bhavesh Patel Consultant Radiologist	Dr Rahul Bhartiya Consultant Radiologist
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**Disclaimer:** It is an interpretation of medical imaging/diagnostic based on clinical data. All modern machines/procedures have their own limitation. This is neither complete nor accurate; hence, findings should always be interpreted in the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. Any typographical error should be informed and report sent for correction within 7 days.



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL  
बहिरंग रोगी विभाग / Out Patient Department



अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

करीस्पष्ट चतुर्धरस्य

OPR-6

एकक/Unit III  
विभाग/Dept. Med Onco

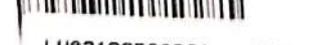
ब०रो०नि० पंजीकृत सं०/O.P.D. Regn. No. 108769728

नाम/Name	पिता/पुत्र/पत्नी/पुत्री F / S / W / D of	लिंग Sex	आयु Age	पता/Address
Vaibhav Kumar		M	Male	

निदान/Diagnosis

दिनांक/Date	उपचार/Treatment
<p><u>01/12/2015</u></p> <p>23y 30y 14mo Sy</p> <p>EVA: ⊖ - N/A active lesion</p>	<p>• white eye reflex } x Smo &amp; age. • in ⊖ eye } • Buphthalmos in ⊖ } • cough x 3 days • No eye - headache monitoring / FND • NO H/O RB in family</p> <p>O/E: PR: 120/m RR: 50/m PP/LP: w/p Peripherals: wam CFT &lt; 3 sec YE: ⊖ eye Buphthalmos 2 Squint ⊕</p> <p>P+I = cy<sup>-</sup> L<sup>-</sup> E<sup>-</sup></p> <p>Chox: B/L wheeze ⊕ B/L HE ⊕ SCR ⊕ / ICR ⊕</p> <p>COS: ⊖ S1, S2 heard Tachycardia ⊕</p> <p>PO SR shall review</p>
	<p>Adw s.</p> <p>→ Neb z dextroalbin 1.5mg z 3ml NS at 0, 20min, 40min</p> <p>→ Neb z budesonid 125ug / 3ml NS q12h</p> <p>→ outside ICR box in orbit for discussion</p>

LC0212251425 108769728



LH02122500920 108769728



Mr VAIBHAVKUMAR

का यही संकल्प, स्वच्छता से काया कल्प / CLEAN AND GREEN AIIMS  
जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE  
3, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)

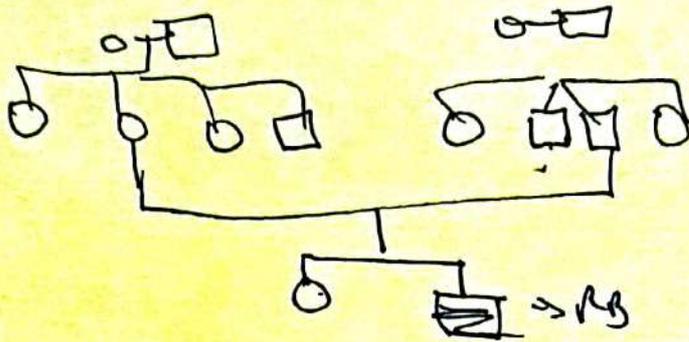


- CE-MRI Brain + orbit to be done.
  - CBC/RA/UA/HBAg/Anti HCV → Smart lab.
  - HW - Gate no. I
  - Mantoux - 205. — Reading on 4/12/25 at 10am
  - RPC - To kindly provide the exact grouping of the (L) Eye disease. — Ward 2A
  - N/V in OPD - 3/12/25 = reports.
- Shivan  
SR

3/12/25. (L) Eye RB - Grouping Pending.

- Adv:
- CE-MRI Brain + Orbit.
  - QR labs.
  - RPC - kindly provide exact grouping of (L) eye disease.
  - cont. neb. = Asthalin/ neb = Budecort x 3 days
  - cont. nasoclear.
  - N/V in OPD on 6/12/25 = reports

|  
Shivan  
SR



No Family Wo

Rz 20/11/25

Du Zahid

→ 29/11/25

7th floor  
at 7:30am

NPO explained  
glusally  
4 hrs 15 min

FEVA

Went for bus

Sat. 05

miss orbit & brain  
T1 & T2 weighted  
ECE MRI images

2 mm coronal sections through optic nerve & pineal gland

for MRI T2 wdw  
on 2/12/25 (53) 10am

Ce MRI brain & orbit T1 & T2

weighted images in sagittal, axial & coronal planes

2 mm

cut sections through optic nerve & pineal gland (fat suppressed)

नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में दान करना परमश्रेष्ठ है।

इनकी पूर्ण रक्षा कीजिए ताकि ये आपकी रक्षा कर सकें।

Eyes are God's most precious gift to man kind and eye donation is the most noble deed.

Take full care of them so that they can take care of you.

ब० रो० वि० कार्ड

दृष्टि

अनुभाग व दिन  
Section and Day  
बुधवार व शनिवार  
Wednesday & Saturday

कमरा नंबर  
Cabin No.

UHID: 108769728  
ABHA:  
Dept No: 20250050140242

मंथाना / Queue 21  
कमरा / Room: 17A  
Unit-I  
RPL OFC

वेभव कुमार / VAIBHAV KUMAR

S/O VIJAY NADIP  
1Y / M पुरुष  
EAST DEOGARH JHARKHAND, INDIA

Mob No: 237273 General Rx  
New Patient

REGISTRATION TIME  
28/11/2025 09:40:45 AM

आयु Age	पता Address
------------	----------------

दिनांक DATE	निदान DIAGNOSIS
----------------	--------------------

VA < ) Follows objects  
② Does not follow object

उपचार Treatment  
outside Assoc - (B) RB

no leucocoria x smudges.

O/E - (R) A/S - WNL  
(L) Enlarged corneal diameters  
(R) retroretinal vessels visible.

FT / NVD /  
No NICU stay

CCCT < ) (R) Hypertense enhancing mass i calcifications s/o RB  
(21/11/25) 26/11/25

No similar family  
History

(R) INFERIOR RETINAL MASS (+)  
(L) LARGE MASS OCCUPYING  
VITREOUS CAVITY

(R) Debate

(1428) Dr. Kathiyajini plz

DR. SATYAJIT

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।  
Kindly keep this Card safely and bring it on your follow-up visits.

1428  
RB Clinic  
Registration  
Wed

1. धूम्रपान निषेध No Smoking
2. कूड़ा कर्कट केवल कूड़ेदान में ही डालें Use Dustbin
3. थूकिये नहीं No Spitting

अखिल भारतीय आयुर्विज्ञान संस्थान / ALL INDIA INSTITUTE OF MEDICAL SCIENCES

एन.एम.आर. विभाग / DEPARTMENT OF N.M.R.

नैदानिक एम. आर.आई. मांग प्रपत्र / CLINICAL MRI REQUISITION FORM

1. Clinical Dept. or Unit IV Date of Requisition 2/12/25  
CPD No 108769728 CR No \_\_\_\_\_ Ward / Bed No. \_\_\_\_\_

2. Screening Dept. : Radio-diagnosis  Neuro-Radiology  Cardiac Radiology   
(Tick as appropriate)

3. रोगी का नाम /Patient's Name Vaibhav Kumar आयु / Age 14 लिंग /Sex M  
(साफ अक्षरों में / In Block letters)

जन्म तिथि /Date of Birth : दिन /Day \_\_\_\_\_ माह /Month \_\_\_\_\_ वर्ष / Year \_\_\_\_\_ वजन /Weight \_\_\_\_\_ कि. ग्रा. /kg

4. General Patient Condition (Tick as appropriate)  
(i) Critical and with life support (ii) III but without life support

(iii) Ambulatory   
DA: 11/2/26  
OTHER: \_\_\_\_\_  
NPO X 6 HOURS  
RFT (JREAS, CHEATUNE)  
WITHIN 1 WEEK  
PAYMENT OF \_\_\_\_\_  
SIGN \_\_\_\_\_

5. Clinical Details : History :

Examinations:

Ⓛ supthalamus & equit ⊕  
Ⓡ inferior retinal mass ⊕

Relevant Investigations :

Previous CT / MR / Other Reports / Studies

Ⓛ large mass occupying vitreous cavity  
?Petroblastoma

(with numbers, if any)

6. Blood Urea / S Creatinine

7. Clinical Diagnosis : MRI (Brain + orbit) 2mm cuts through optic nerve +  
pituitary gland fat suppressed contrast enhanced Axial  
Coronal  
sagittal  
sections

Exact Anatomical site for MRI

Special Instructions (Sedation, Allergy or other details which may facilitate a safe and informative study).

10 (a) Contrast Enhancement Required : Yes \_\_\_\_\_ No \_\_\_\_\_

(b) Allergic to any drugs :

(c) Implant in Body (Tick as appropriate)

Cardiac Pacemaker \_\_\_\_\_

Aneurysmal clips \_\_\_\_\_

Cardiac Valve/Prosthesis \_\_\_\_\_

Metallic Implants \_\_\_\_\_

Sharpnel/Pellet \_\_\_\_\_

Others \_\_\_\_\_

None \_\_\_\_\_

हस्ताक्षर / Signature

नाम / Name

(साफ अक्षरों में / In Block letters)

पदनाम / Designation

(Requisition may be signed by a Faculty Member/Sr. Resident)

msfo  
to head  
help  
MRI  
urgent  
69 week

डॉ. निरंजिता लोनी / Dr. NINETE LONI  
अतिरिक्त / Additional Prof.  
डॉ. एन.एम.आर. विभाग, आयुर्विज्ञान संस्थान, दिल्ली  
Dr. N.M.R. Centre for Ophthalmic Sciences, AIIMS

Dr. book  
SR  
2/12/25  
DR. SANKU  
Professor  
DR. P



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL  
बहिरंग रोगी विभाग / Out Patient Department



अस्पताल के अन्दर धूम्रपान करना प्रोhibited / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

हाल चिकित्सा विभाग,  
UHID:108769728



Dept No: 20250030032863

वैभव कुमार / VAIBHAV KUMAR

S/O VUJAY NARIT  
17 DM 280 / भा.पुर.पं.  
DIST DEOGARH, JHARKHAND, INDIA

General Re 0  
Follow Up Patient

कमरा / Room  
C 218

Queue / संख्या  
F37

Unit-III, Paediatric

OPR-6

करोड़ों में पंजीकृत नं./O.P.D. Regn. No.

आयु  
Age

पता / Address

बुध वारी, Wed Sat



Reporting: 10:47:30  
24/12/2023

निदान / Diagnosis

B/LC RB ← (R) GP B  
(L) GP E

दिनांक / Date

उपचार / Treatment

1st 1st HOCV - B/LC - 14/12/25  
D+11

was seen in ER - for AGE - i dehydration  
requiring correction  
on zinc / ampic / cefixime

GUNJAN KUMARI  
Molokh

HIV - NR

dent / nit complaints

LEMRI - baseline; done on 22/12/2023

ARC -

(R) nasal aspect - Small enhancing lesion  
ON - non-enhancing  
no coats cracks

(L)

> 80% of globe involved

Inflammatory Spt - (++)

(1st Exptal) in Superior labial aspect



CLEAN AND GREEN AIIMS / एम्स का यही सकल स्वच्छता से काया कल्प  
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)



no ON enhancement  
no coats track  
no involvement of parotid gland

Plan:

- 1) Syg. zinc (20mg (5ml)) ~~20~~ 5ml OD x (with meal)
- 2) Re-dissection of mnx
- 3) Syg. Septivan (40mg (5ml)) 5ml 10 A/D.
- 4) N/u - 27/12/2015

CBCL  
- EF-7  
RF-7 } (BI) -

RC-Dissection - Dr. VISHAKHA / NIAHHA SINGH

POC-File - Date - 5/1/26.

Mujaji

Monday 2pm  
with all photocopies.

Dr. SHARAN SHANUBHOGUE  
Senior Resident-DM  
Pediatric Oncology  
Department of Pediatrics  
AIIMS, New Delhi-28

# ब० रो० वि० कार्ड O.P.D. Card



मेत्र अमृत उपहार हे  
जो आप ही दे सकते हे

अनुभाग व दिन  
Section and Day **IV**  
सोमवार व बृहस्पतिवार  
Monday & Thursday

कमरा नंबर  
Cabin No.

डा० राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र  
अ० भा० २

Dr. Rajen  
A.I.I.M.S.



UHID: 108769728  
ABHA  
Dept No. 21250050140112

पंरसी / Queue: 9  
कमरा / Room: 43  
Unit-IV  
RPL OPD

यू०एच०आः  
UHID N

वैभव कुमार / VAIBHAV KUMAR

Dr. Bhavna Chawla

रों  
Name

SRO VIKAS NARAYAN  
DR. SURESH K. M. P. SRI  
DR. SURESH K. M. P. SRI

MON TPU  
OPD

Dist. 914227273 General Es. 9  
Follow-Up Patient

Registration time:  
02/02/2026 09:51:35 AM

पता  
Address

26A

दिनांक  
DATE

निदान  
DIAGNOSIS

उपचार Treatment

02 FEB 2026  
V n 5/48  
Cannat  
Ad  
25/26  
cardist

Continuous chemotherapy  
- ECA after 4th cycle  
↓  
DIF ECA after 4 weeks  
↓  
37A or stage 14  
14 20/26  
5th floor  
7:30 AM  
Phant

कृपया इस कार्ड को सुरक्षित रखें तथा अस्पताल में दिखाने के समय हर वक्त साथ लायें।

Kindly keep this Card safely and bring it on your follow-up visits.

1. धूम्रपान निषेध 2. कूड़ा कर्कट केवल कूड़ेदान में ही डालें 3. थूकिये नहीं
1. No Smoking 2. Use Dustbin 3. No Spitting

(L) | End Iobit <sup>0.25'</sup> (2)  
 E/d. curc 0.5' (4)  
 E/d. moni (4)

13/2/2026

**URGENT**

D/O EOA-14/2/2026 (Saturday)  
 7<sup>th</sup> Floor RPC @ 7:00AM  
 NPO explained

- solid (8hr) → 12AM
- Broth (4hr) → 4AM
- liquid (6hr) → 2AM
- clear fluid (2hr) → 6AM

→ to assess for <sup>(R)</sup> brucation post ● CVA

*[Signature]*  
 Dr. Tannay

नेत्र ईश्वरीय सर्वश्रेष्ठ उपहार है जिनका मनुष्य जीवन में दान करना परमश्रेष्ठ है।

इनकी पूर्ण रक्षा कीजिए ताकि ये आपकी रक्षा कर सकें।

Eyes are God's most precious gift to man kind and eye donation is the most noble deed.

Take full care of them so that they can take care of you.

14/2/2026  
 Report 142B  
 Nithinji

14/2/2026

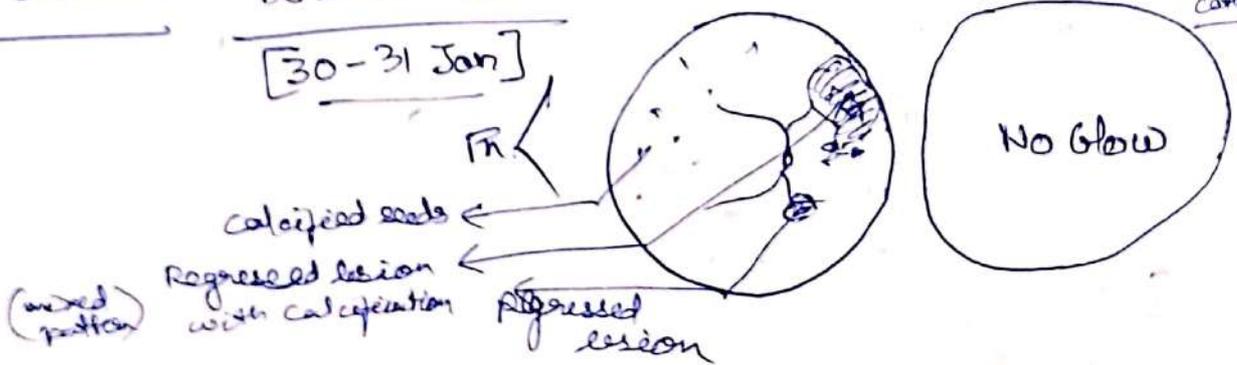
BUS done by Dr N. Lonn / Dr Sunit  
 gored  
 Dr Sunit

s/p 3 cycles of chem  
 Ph clo  
 (R) Regressing gap BKB  
 (L) group BKB

Last Chem:

2 weeks ball

[30-31 Jan]



Last (B) USG: USG machine malfunction  
 ↳ mass in superolateral aspect  
 ↳ calcification (A)  
 ↳ reduced in mass

Adv  
 (B) 2 x 7 days  
 #143 Monday qm for  
 Epimor on (L) Emulex

Prog. Bravna open:

OPD: 43

Mon / Thu

9:00 AM

USIB Prof Bhavna June 4 - OPO (4)

16/2/26

Ⓟ regarding GP & RA

Ⓛ GP ERB

Ad

Continue chemotherapy - 4th cycle

- D/F admission after 4th cycle

Dr Shyams Ⓞ Eucelate +

3TB Ⓡ EUA

cardiff - 21/2/26

✓ 6/48 @ 50cm

not follow

cards

40 waiting Ⓡ

Dhaul

Ⓞ DOA - 11/3/26  
Wanted DOA, 7:30 AM  
8:00 AM  
2nd floor

- Ⓡ E10 1000 Ⓡ
- E10 Vigamox Ⓞ
- E10 Acupol 720 - 0.5
- E10 HA 24 Ⓡ
- E10 mco. 54 Ⓡ 2 weeks

Refer to Paeds oncology New RAIC 2nd floor

209, 210, 211 - Dr Aditya / Prof Ramesh

Dr Jagdish - for 4th cycle

(Wed / Sat 9-1 PM)

chemotherapy

↓

Flu after 4th cycle

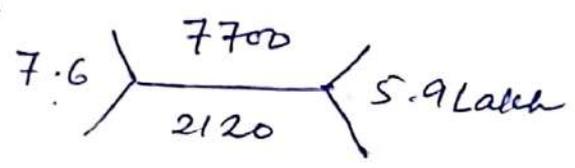
in for D/F admission

28/1/26

B/L IO RB — (R) Grp B R6  
(L) Grp E R6

- oral Care
- Sitz bath
- personal hygiene.
- on septran. A/D.

2<sup>nd</sup> HDCEV received on 4/1/26



No fever  
No bleeding  
No irritability/  
crying

LFT/RFT - WNL

D<sub>1</sub> - 30/1/26 <sup>advised</sup>  
D<sub>2</sub> - 31/1/26

Adv.

- Due for Cycle 3 #

- Premedicate  $\bar{c}$  Inj Emset 2mg IV STAT

DL - Inj VCR 0.2mg IV slow push

DL - Inj CARBOPLATIN 250mg / 100ml NS IV  
over 1 hour

(D<sub>1</sub> - D<sub>2</sub>) Inj ETOPOSIDE 110mg / 300ml NS IV  
over 2 hours

(~~D<sub>3</sub>~~ - ~~D<sub>7</sub>~~) - Inj 9-CSF 45mcg SC OD

chemo date - chemotherapy to be given in Daycare <sup>1</sup> <sub>1st</sub>

30/1/26 - RB gene testing advised

31/1/26 - Vision assessment of left eye to be done today in RBC ~~OPD~~ for plan of Enucleation

- Tab Emset 2mg 1/2 tab<sup>8</sup> PO ~~bid~~ x 2 days

- Tab Dexa 1/2 tab 2mg PO OD x 3 days

DG @  
u/2/26  
B- mmm  
6/2/26



Adv.

11/2/26

Bilateral IORB.

- (R) GFB. (unrel + focal)
- (L) GFE



post 2# EUA.  
↳ Regress (R)

post 3# HDCEV ∴ 3/1/26

Due for #4 on/after 2/2/26

6.2 } 5360 } 90000  
 } 250 }  
 LFT/RFT - OK

No fresh couplants

EUA FU deleted 7/3/26

Recheck fresh  
CBC before  
next #

Adv.

- Take #4 delete
- To plan (L) evacuation  
↓ RPC

• Prechem

- Iy. Dexa 2y + Emeset 2y IV

• chemo

- Iy. VCR 0.2 y IV push

- Iy. Carboplatin 250y/100u/m<sup>2</sup>

- Iy. Etoposide 110y/50u/m<sup>2</sup> IV.

• post chemo

- Tab Dexa 2y OD | x30

- syp Emeset 5ul TDS | x30

- Iy. G-CSF 50 ug SC OD  
PA - D11

- FU c CBC, LFT/RFT on 7/3/26