



डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.सं. अस्पताल/A.I.I.M.S. HOSPITAL

OPR-6

VIHAR PO SAKHA VIHAR DIST SOUTH DELHI Pin-110076 INDIA

Out Patient Department
TED IN HOSPITAL PREMISES

एकक/Un

विभाग/D

DR. B.R.A. IRCILAIMS, NEW DELHI

IRCH No. 351871
Clinic Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General

Reg. Date-08-12-2025

Clinic No. 8351/2025

िकृत सं./O.P.D. Regn. No.

आयु
Age

जन्म तिथि / Date of Birth

नाम

Name LAKSHITA CHAUHAN

D/O- GULSHAN KUMAR

Phone No. 8743007383

Sex/Age F/11Y

Room Board Room (Shift Admision)

निदान/ Diagnosis

दिनांक/ Date

उपचार/ Treatment

22/12/25 - Cont 1st flow
stop 6 MP
SDP - 1D (Day care) Apheresis lab 1st flow
inj. VCR 1.35mg IVP - 22/12
inj. L-Asparaginase 9000 units
- 26/12
Fv with CBC on 29/12/25
Inj. G-CSF 150 mcg SC on 29/12/25
x 4 days 83

अंगदान-जोवन का बहुमूल्य उपहार / ORGAN DONATION-A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline-1060 (24 hrs.service)
से आने वाले रोगियों के लिए धर्मशाला की सुविधा उपलब्ध है / Dharamshala facility is available for outstation patients

**AARK PHARMACEUTICALS PVT. LTD.**

(Pharmaceuticals & Surgical Distributors)

S-14, 1ST FLOOR, UPHAR CINEMA COMPLEX MKT

GREEN PARK EXT., NEW DELHI-110016

Tel No. : 8800300118, 011-40743520/21/22/23/24, 40566902

Mobile Number : 7428397365, 08800300118, 8800300119, 09310155904, 09310155905

Website : www.aarkpharma.com E-mail : aarkdelhi@aarkpharma.com State Code : 07

GST No. : 07ABCCA6570H1ZN

D.L. No. : RLF20DL2024001579, RLF21DL2024001592, WLF20B2024DL000916,
WLF21B2024DL000907 RLF20G2024DL000013, RLF20F2024DL000018

PAN. No. : ABCCA6570H

FSSAI No. : 13324002000128

Mode Of Transport:- Bike/Auto/Tampo/Courier/Bus/

**** RETAIL INVOICE ****

Customer Details :- 92513

LAKSHITA CHAUHAN

AIIMS HOSPITAL PATIENT

C/O CHILD SEWA FOUNDATION

AIIMS HOSPITAL, DELHI

GST No. :

Tel No. :

Mob. No. 9871486474

PIN CODE : 110029

Place of Supply : DELHI

D.L. No. 1:

D.L. No. 2

Ship To :-

ORIGINAL

Invoice No. : **RET-25-24007**

Invoice Date : 05/01/2026



Challan No. :

Challan Date :

P.Order No. :

P.Order Date :

Credit Days : 15

20-Jan-26

SR.	PRODUCT NAME	TEMP	HSN CODE	PACK	BATCH NO.	EXP. DT.	MRP.	SALE QTY.	DIS. QTY.	RATE	AMOUNT	DIS%	TAXABLE AMOUNT	GST%	CGST %	SGST %	IGST %	COMPANY	PURCHASE BILL NO.	PURCHASE DATE
1.	C-5L KIT		90189032	1*KIT	PGA101	06/27	9537.00	1	--	7476.20	7476.20	0.00	7476.20	5	2.50	2.50	0			
2.	ACD 500ML SOLUTION BOT		30049099	BOT	82UG183601	06/27	518.00	0	1	0.01	0.00	0.00	0.00	5	2.50	2.50	0			
3.	FREE FLEX 1LTR		30049099	1LTR	82UE604805	04/28	105.20	0	1	0.01	0.00	0.00	0.00	5	2.50	2.50	0			

PAYMENT MODE

Bank Name

Account No. HDFC BANK-UP

Date

Courier Charge : 05/01/26

Amount

Signature

4

UPI QR CODE**BANK ACCOUNT DETAIL****AARK PHARMACEUTICALS**

BANK NAME : YES BANK LIMITED

A/C NO. : 005583900002099

BRANCH : GREEN PARK

IFSC CODE : YESB0000055

NEW DELHI : 110016

No of Items : 3	Taxable Amt.	CGST%	CGST Amt	SGST%	SGST Amt	Gross Amt	7476.20	
Tot Qty : 3	0.00	14 %	0.00	14 %	0.00	Scm. Amt	0.00	
Made By : ARUN	0.00	9 %	0.00	9 %	0.00	Disc. Amt	0.00	
Print By : ARUN	0.00	6 %	0.00	6 %	0.00	Add CGST	186.91	
	7476.20	2.5 %	186.91	2.5 %	186.91	Add SGST	186.91	
	0.00	0 %	0.00	0 %	0.00	Net Amount:	7850.02	
Total :	7476.20		186.91		186.91			
Invoice Amount in Words (Rs.) : Seven Thousand Eight Hundred Fifty Only							Less CN :	0.00
							Add TCS %	0.00

(Certified that particulars given above are true and correct.)

(Computer Generated Invoice)

Inv. Amt.
R/Off

7850.00

Terms & Conditions :-

All Disputes Are Subject To Delhi Jurisdiction Only.

Interest @18% P.a. will be charged after due date.

Goods Once Sold Will Not Be Taken Back Or Exchange

For AARK PHARMACEUTICALS PVT. LTD.



E.&O.E.

SI

SO

RD

DO

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली- 110029
All India Institute of Medical Sciences, New Delhi-110029
परामर्श अभिलेख / CONSULTATION RECORD

एम.आर.- 9
M.R.-9

नाम Name	Carshita	आयु Age	11 year	लिंग Sex	female	देवाहिक स्थिति Marital Status	यू.एच.आई.डी. सं. UHD No.
सेवा Service		वार्ड Ward		विस्तर Bed		व्यवसाय Occupation	धर्म Religion
							स्थिति Status

Referred by Dr.

Requesting Doctor

to Dr. SR Blood bank
Consultant & Specialty

Findings :

Date : 04/01/2015

Kindly take the patient for
SDP donation

Diagnosis or Impression :

Recommendations:

31/12/25
~~st~~

D5 (M) + GCSF
5/1/25

D1 (M) + GCSF
11/1/2026

D2 (M) + GCSF
21/1/25

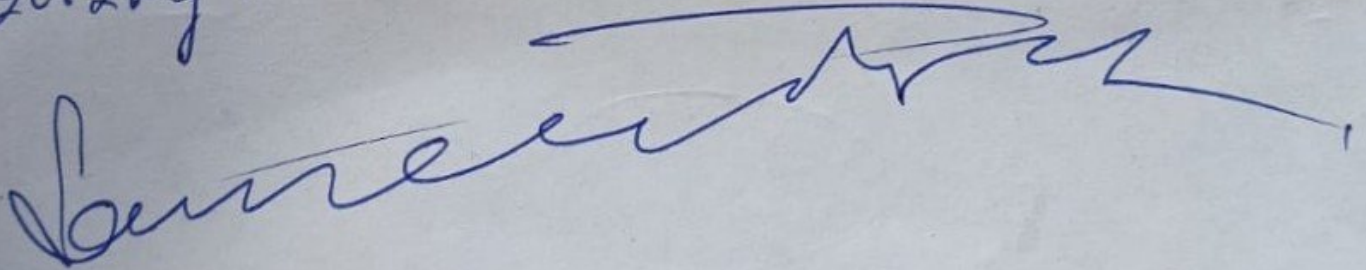
Inj. MAGNEX 2gm IV BID 000
X 4 day

Inj. AMIKACIN 250mg IV BID 0
X 4 day

Inj. G-CSF 100mcg SLC BID 0
X 4 day

FW with CBC + TFT / RFT ON
7/1/2026

20.2kg.



31/12/25

~~2~~

Inj. MAGNEX 2gm IV
X 4 day

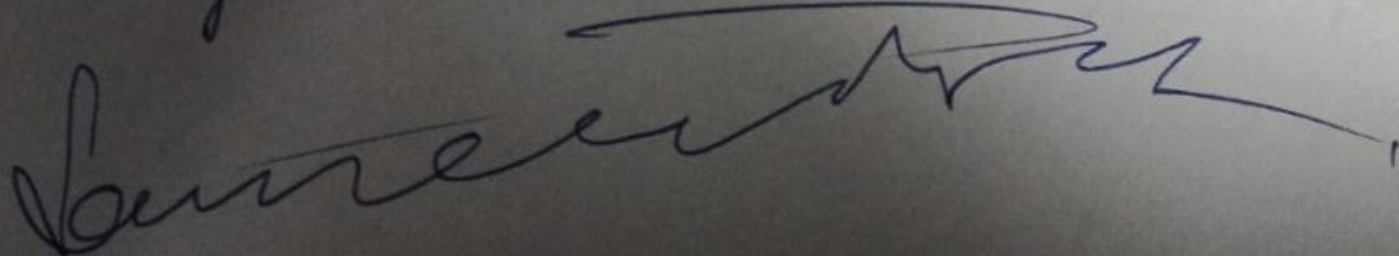
Inj. AMIKACIN 250mg IV OD
X 4 day

Inj. G-CSF 100mcg SC OD
X 4 day

Ev with CBC + TFT / RFT OD

20.2Kg

7/1/2026



D1 D+HSE
1/1/2026

D2 D+HSE
2/1/25

NURSES DAILY RECORD

ALL INJECTIONS TO BE INITIALED BY PERSON ADMINISTERING

Date & Time	Medication & Treatment	Diet	Observation by the Nurse
4/1/80	UK/B Mr SR Dr. Madhu		
	Clo B - see ph + on Cannoid ⁿ FN.		
<u>Adw</u>			
	by MAGNEX 2g iv BD		3 days - room
	by AMIKACEN 250mg iv OD		
2/1/80	by G-CSF 100 µg s.c. O.D x 3 days		
	To receive RDP more info for for ongoing To make SDP tomorrow - counselled exchange after RDP		
			Dr Madhu Sms



DR. B.R.A. IRCH, AIIMS, NEW DELHI
IRCH No. 351871
Clinic Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General

Reg. Date-28/08/2025

Clinic No. 8351/2025



UHID-108567634

कैंसर अस्पताल
Cancer Hospital
HOSPITAL

OPR-6

Department
D IN HOSPITAL PREMISES

नाम
Name LAKSHITA CHAUHAN

D/O- GULSHAN KUMAR

Phone No. 8743007383

Address A 2/864 PH 1ST J. J COLONY MADANPUR KHADAR SARITA
VIHAR PO SARITA VIHAR DIST SOUTH, DELHI, Pin: 110076, INDIA

Sex/Age F/10Y

Room 6 (Shift Morning)

एकक / Unit

विभाग / Dept.

कृत सं. / O.P.D. Regn. No.

नाम / Name	पिता / पुत्र / पत्नी / पति / पुत्री F/S/W/H/D of	लिंग Sex	आयु Age	जन्म तिथि / Date of Birth
------------	---	-------------	------------	---------------------------

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

17/11/25	- Stop Pred / Pain etc	
	- Inj VCR 1.35mg IVP	
	- Inj Doxorubicin 22mg IVI	- 18/11/25
	- Inj Zofen 4mg IVP	दोसरा No-15
	- Inj L-Asparaginase	9000 units IV
	- 17/11/25 20/11/25 22/11/25	दोसरा No-15
	- IT-MTX 12mg X 1 DO	दोसरा No-15
	- 5x with CBC + LFT RFT	
	on 24/11/25	

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



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

OPR-6

हॉस्पिटल / A.I.I.M.S. HOSPITAL

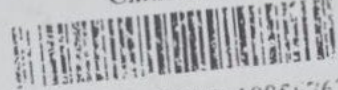
/ Out Patient Department

SMOKING PROHIBITED IN HOSPITAL PREMISES

DR. B.R.A. I.RCH, AIIMS, NEW DELHI

Reg. Date-29/09/2025

Clinic No. 8351/2023



108567634

No. _____

ब.रो.वि. पंजीकृत सं. / O.P.D. Regn. No. _____

लिंग
Sex

आयु
Age

जन्म तिथि / Date of Birth

नाम LAKSHITA CHAUHAN

डॉ. गुल्शन कुमार

फोन नं. 8743007383

Address A/2864 PH 1ST J.J. COLONY MADANPUR KHADAR SARITA
VIHAR PG SARITA VIHAR DIST SOUTH, DELHI. Pin: 110076, INDIA

Sex/Age F/11Y

Room Board/Room (Shift Afternoon)

निदान / Diagnosis

ALL - Ph +ve

दिनांक / Date

उपचार / Treatment

27/10/25

C - MR
1. गीली
T. 6-MP 1 Tab
T. Septicin - 55
T. Ativir R. 20mg
MSX 2 Tab
M सोम
W बुधवार
R शुक
1 1/2 Tab
2 बार

⑦ P/u in Med Onco OPD on 12/10/25 ~
12/11/25 CBC.

To Candidates,
please help 2 SDP Kit



Date: SDP
Time: 7:30 AM



12/11/25 - stop Map / Amnol (बन्द)
- SDP - 1 @ (Date - NPV) x 3 days
→ Daycare (2 बार)
(उपनिर्देश)

12-21/11 From 1-7/11

T. b-MP 1 Tab / 1/2 Tab q M. 1 (रात में)
Cort. 1 MAT (पहले जैसे)

(पहले जैसे) Cort Septeran 17/11
1.35 mg IVP → 24/11

Inj. L-Asparaginase 9000 units
- 17/11, 19/11, 22/11, 24/11

FBS / Mg / Amylase / Lipase / ALP on 11/12/25
Fr with CBC + LF + ALP on 11/12/25
Source



Dr. B.R. Ambedkar Institute Rotary Cancer Hospital

OPR-6

25by

एकक/Unit Dr SB/DP
विभाग/Dept. MO.

नाम/Name

IRCH No. 351871

Clinic: Paediatric Medical Oncology Clinic
Deptt. MEDICAL ONCOLOGY
General

Reg. Date: 29/09/2025

Clinic No. 8351/2025



UHID-108567634

नाम

Name LAKSHITA CHAUHAN

D/O- GULSHAN KUMAR

Phone No. 8743007383

Sex/Age F/11Y

Room Board Room (Shift Afternoon)

Address A 2/864 PH 1ST J. J COLONY MADANPUR KHADAR SARITA
VIHAR PO SARITA VIHAR DIST SOUTH, DELHI, Pin: 110076, INDIA

1 तिथि/Date of Birth

निदान/Diagnosis

Ph⁺ B-ALL / Consolidation (Received Area-C block.

दिनांक/Date

4/25

उपचार/Treatment

No. 2 fever & TCP

3/11 - 6/11

Dengue (-).

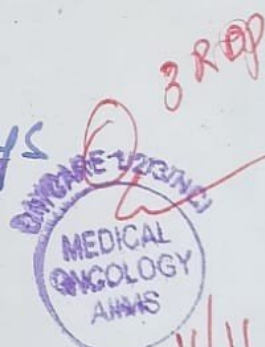
85 / 8310 / 12K.
7170

Advice w/H Intake

11/11/25 (M) + 997- (E)

1 No 15

- ① ly Magnex 105gm w BD
- ② ly Amikacin 300mg w OD
- ③ ly ACSF 125mg sc OD x 3 days
- ④ SDP/RDP → 11/11/25
- ⑤ Tab PCM 500mg 1/2 tab SOS
- ⑥ Plenty of fluids



Date: 11/11/25
Time: 7:30 AM

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)

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

T. 2 Jfeer 4mg - for ARA-6 3rd day 4th day 5th day
qms ✓

IT-MTX 12mg weekly x 2 days <sup>दमर
No-15</sup>

Adj. G-CSF 100mcg s/c - 6/11, 7/11, 8/11 <sup>दमर
No-15</sup>

T. 1 MATING 300mg qms 2nd day
Ev with CBC + LFT / RFT on
10/11/25

Same as before.

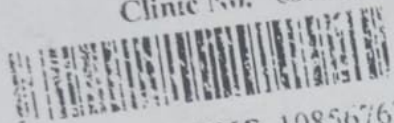
Out Patient Department

SMOKING PROHIBITED IN HOSPITAL PREMISES

IRCH, AIIMS, NEW DELHI

Reg. Date-29/09/2025

Clinic No. 8351/2025



UINP-108567634

Sex/Age F/11Y

Room Board Room (Shift Afternoon)

T.J.J COLONY MADANPUR KHADAR SARITA
HAR DIST SOUTH, DELHI, Pin: 110076, INDIA

No. _____

ब०रो०वि. पंजीकृत सं. / O.P.D. Regn. No. _____

लिंग
Sex

आयु
Age

जन्म तिथि / Date of Birth

ALL - Ph +ve

agnosis

उपचार / Treatment

Date

12/25

C - MR
1 गीली
T. 6 MP 1 Tab
T. Septican - 55
T. Ativir R. 20mg
MSX 2 Tab
1 1/2 Tab
24 तक
M सोम
W बुध
R शुक
2 व 12



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

OPR-6

अ.भा.आ.र.
बहिरंग
अस्पताल के अन्दर धुम

DR. B.R.A. IRCH, AIIMS, NEW DELHI
Reg. Date-08/09/2025
Clinic No. 8351/2025
IRCH No. 351871
Clinic Paediatric Medical Oncology Clinic
Dept. MEDICAL ONCOLOGY
General



UHID-108567634

नाम
Name LAKSHITA CHAUHAN
D/O GULSHAN KUMAR
Phone No. 8743007383
Address A 2/864 PE 1ST J J COLONY MADANPUR KHADAR SARITA
VIHAR PO SARITA VIHAR DIST SOUTH, DELHI, Pin 110076, INDIA

Sex/Age F/10Y Date of Birth

Room Board Room (Shift Afternoon)

41025018 108567634
041025184 108567634
E041025184 108567634
Miss LAKSHITA CHA
Diagnosis

Ph⁺ B-AU

t(9;22)⁺ (q34;q11)

उपचार/Treatment

on NGs

दिनांक/Date

29/9/25

Induction 1 + 22 today

① Tab PREDNISOLONE 50mg PO OD x 7 days → stop
(WYSOLONE)
10/12 7 दिन तक
ABF (29/9 - 5/10/25)
खाने के बाद

W-12.3kg
BIA-0.81m

② Tab LANZOL 15mg PO OD B.B.F. 29/9/25 से पहले
10/12 CT CT

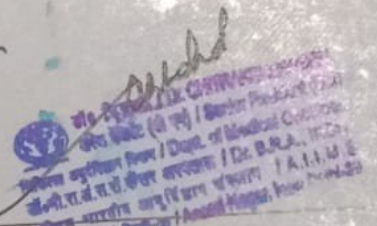
③ Sy. VR 12mg low sup - 29/9/25

④ Sy. L-asparaginase 8000 IU deep sup - 29/9/25

⑤ TAB EMATINIB 300mg PO OD 10/12

दिनांक
NO-15

Sup c CRAB/PS/US on 6/10/25
2 NGs philosophy



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

Ab T. zyloic 100mg x 5 days
 24/12

Dr. D New Forward Dargah.

CBC - 10/9
 HFT/HF

ABC + PS - 11/9 Homecoming

Diagnosis on

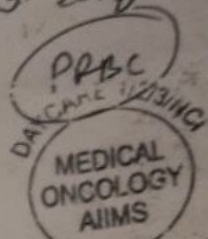
10/9/25
 of 12/30/25

CSE cytopathis

IT-M-X 12mg

11/9
 di HRI
 No-15

4-2019



Date: 12/24/25
 Time: 7:30 AM

Fi on 11/9/25

1st floor Apheresis Lab

11/9/25

12/9/25
 sample 2/3

Inj. VCA 1130mg 22mg IVF

Inj. Benizomycin

Inj. Zofen 8mg IVF

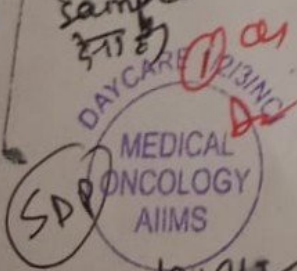
Inj. L-Ampicillin 9000 units
 12/9 - 15/9

15/9/25
 sample 2/3

SDP-10 } daycare
 BT-10 }
 Fu with

CBC + LFT/RFT on
 17/9
 Rainy

Kindly
 line
 SDP



Date: 12/9/25
 Time: 7:30 AM



Seema- 9717936244 -
डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambedkar Institute Rotary Cancer Hospital
अ.भा.आ.सं अस्पताल / A.I.I.M.S. HOSPITAL

OPR-6

एकक /Unit

विभाग/Dept.

नाम /Na

DR. B.R.A. I.RCH, AIIMS, NEW DELHI

IRCH No. 351871

Deptt. MEDICAL ONCOLOGY
General

Clinic Paediatric Medical Oncology Clinic
नाम
Name LAKSHITA CHAUHAN

D/O- GULSHAN KUMAR

Phone No. 8743007383

Reg. Date-28/08/2025



Clinic No. 8351/2025

UHD-108567634

Sex/Age F/10Y

Room 6 (Shift Morning)

ment

SPITAL PREMISES

O.P.D. Regn. No.

जन्म तिथि / Date of Birth

निदान / Diagnosis

दिनांक / Date

28/8/25

B-cell ALL t Hyperleukocytosis

उपचार / Treatment

Plan:-

- Refer to pediatric emergency
- To rule out TLS
- RDP transfusion
- Inj. Rasburicase 1.5mg/kg
bolus NS IV over 30min
- 60 Blood donation. Review emergency Blood Bank
- Arrange for SDF transfusion
- 1st Floor (Apharmacist)
Daycare (Nurse)
- CBL/LFT/RET/VM/LDH
- 20 Echo (outpatient)
- BMA/PS
- Flowcytometry
- Cytogenetics
- NGS
- Tab Allopurinol 100mg $\frac{1}{2}$ tab PO TDS (30HR)
- Tab Pantoprazole 40mg $\frac{1}{2}$ tab PO OD BBF (For acid suppression)
- Flu on 1/9/25 (Board Room)

Dabeleen
29/8/25
@ 13

Amish
Varun

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

Remarks: