



EK PARIVARTAN

F O U N D A T I O N

Working for a Better Tomorrow

EK PARIVARTAN FOUNDATION REGISTRATION NO: 130

EK PARIVARTAN FOUNDATION PAN NO: AAATE9879M

EK PARIVARTAN FOUNDATION 80G NO: AAATE9879MF20221

EK PARIVARTAN FOUNDATION NGO DARPAN : DL/2019/0230573

EK PARIVARTAN FOUNDATION GUIDESTAR INDIA : 11308

EK PARIVARTAN FOUNDATION CSR REG NO : CSR00040314

EK PARIVARTAN FOUNDATION TM APP NO : 5822870

EK PARIVARTAN FOUNDATION MSME NO : DL-02-0040746

EK PARIVARTAN FOUNDATION WEBSITE : WWW.EPFNGO.ORG

EK PARIVARTAN FOUNDATION E-MAIL : INFO@EPFNGO.ORG

PATIENT NAME	MASTER KISHOR
PATIENT FATHER NAME	MR. MANO KUMAR
DOB AND GENDER	2 YR / MALE
DISEASE NAME	EYE CANCER
TREATMENT HOSPITAL	(AIIMS) ALL INDIA INSTITUTE OF MEDICAL SCIENCE
REGISTRATION NO	108564918
DEPARTMENT NAME	PAEDIATRICS, DAYCARE
TREATMENT COST	APPROX 2 TO 3 LAKH
PATIENT FATHER OCCUPATION	LABOR
PATIENT ADDRESS	MATHURA, UTTAR PRADESH





D.R. P. CENTRE RIIMS - 2018

TM





TM

Diagnostic Work UP & Risk Stratification

2 yr old Boy

C/O (L) eye leukocoria 7 NOV 2025

LE → large mass in post^r aspect of retina
USG → Intra lesional aspect c⁺

MRI → T2 Hypo Intense IO Lesion, ON Not Enhanced

EUA → (L) eye EOPRB

Upfront Enucleation ⇒ 5/8/25

HPE → Poorly differentiated RB, Tumor Extensive/
Infiltrating the choroid
Infiltrating entire length of ON, cut end neg
Sclera Not Breached. 18mm

- Viral marks not done

- PET done on 10/3/25

- BMA + CSF → not involved
acellula

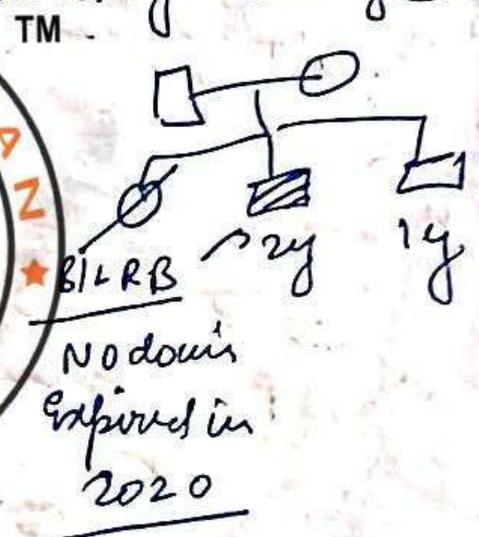
Biopsy → not involved

Name of treatment protocol

(L) EORB / Familial

genetic testing ⇒

Family history ⊕





Dr. B.R.A. INSTITUTE ROTARY CANCER HOSPITAL
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
ANSARI NAGAR, NEW DELHI-110029

Walk-in

Oncology Screening OPD Proforma

Name Kishore Age 2 Sex M
Date of Visit 26/11/25 Appointment ID 16/12/25
(2025112612337) 8:30 AM
Clinical /Referral Summary: _____
Provisional Diagnosis: (L) EO Retinoblastoma (Post enucleation)

Dr. Anitagru
Biswas
16/12/25
Room No. 4
@ 9:00 am

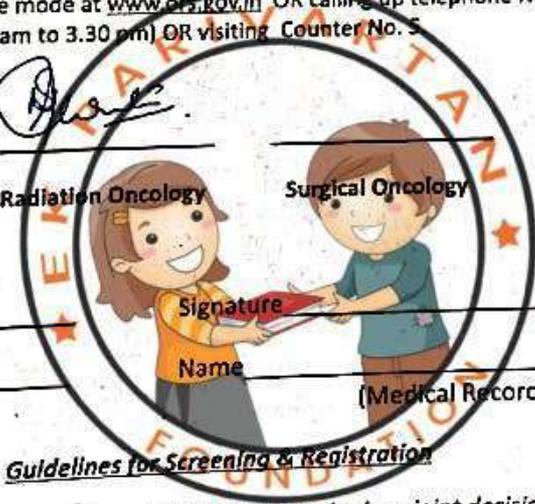
Register at BRA-IRCH/NCI
_____ OPD _____ Clinic
(Please register for UHID & IRCH/NCI No. at the adjacent Counter after filling up patient Information slip.)

Referred to Department of

AIIMS OPD

Referred to: _____ OPD/ Clinic at DR BRAIRCH/NCI on earliest available date & time. Advised to take appointment through online mode at www.ais.gov.in OR calling up telephone No. 011-26589142 (9.30 am to 5.00 pm) or 911-5444155 (8.30 am to 3.30 pm) OR visiting Counter No. 5

Signatures _____
Name _____
Dept Medical Oncology Radiation Oncology Surgical Oncology OA & Palliative Medicine
UHID No _____
IRCH No _____
(Medical Record Section)



Guidelines for Screening & Registration

1. SRs posted in screening OPD should review referral papers and take a joint decision regarding appropriate referral to clinic /OPD of IRCH.
2. Completely worked-up patients can be referred directly to specific organ /specialty based clinic and the remaining patients can be registered in respective OPD.
3. Patients referred directly to specific departments /clinics/faculty should be referred to respective department/clinic/faculty.
4. If there is a need, patient can be referred to specific OPD/ Clinic of main AIIMS.

Disclaimer: You have been screened in the Cancer Screening OPD and have been referred to the treating unit for registration and treatment appointments. The registration and treatment appointment will be given depending on the slot availability, as slots are restricted due to COVID-19. As cancer requires timely treatment and waiting may have adverse effect on patient's disease; patient is suggested/advised to explore treatment options at other AIIMS/ Regional Cancer Centre/State Medical Colleges and other Govt. Cancer facilities, in case there is delay in availability of slots at Dr. BRA IRCH.

25/02/2026

ADV

• CBC, LFT, KFT

• Next visit →

02/03/2026,

POC / 210PM



Arpita

25/2/26



- Pediatric Medication started at an syp. *kenesol* 200mg
(5ml / 2.5mg) at.

- To be reviewed prior procedure by anesthesia team

Yuki



ओ माओ एंड रीड अस्पताल / A.I.I.M.S. HOSPITAL
बाहिरंग शोमी विभाग / Out Patient Department



अस्पताल में अन्दर घुसना मना है / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

बाहिर विभाग / बाहिर
UHD: 100884818

कक्षा / कक्षा
0 218

OPR-6



Dept No: 20280030023388

कक्षा / कक्षा
F11
Unit III Paediatric

कक्षा/विभाग नं./OPD Regn. No

किशोर किशोर / KIBHOR KIBHOR

वय
Age

व्य./Address

डॉ. मंगू
2Y BM 4D / मंगू
VILL BARARI DIST MATHURA, UTTAR
PRADESH Pin 0 INDIA
General Rs 0

डॉ. मंगू वसू 001



Reporting: 02 03 27
11:41:1928

रिपोर्ट/Diagnosis

उपचार/Treatment

दिनांक/Date

12-11-26

उपचार/Treatment



TM

कक्षा / कक्षा
F11
Unit III Paediatric

डॉ. मंगू वसू 001



Reporting: 10 10 4
11:07:2021

बाहिर विभाग / बाहिर
UHD: 100884818
Dept No: 20280030023388
किशोर किशोर / KIBHOR KIBHOR
डॉ. मंगू
2Y BM 28D / मंगू
VILL BARARI DIST MATHURA, UTTAR
PRADESH Pin 0 INDIA
General Rs 0

13-11-26

C6

R-PAC

Reducta

Details in notebook

R/P in Peds OPD on 14/03/26 E
CBC, LFT, RFT reports

cough, cold (+)
no fever
NEED Buffalo milk @ 7am
Pediatric medicine R/V for
optimization of URTI &
not shalofn yuki
R/O



CLEAN AND GREEN AIIMS / एम का घड़ी संकल्प 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)



merasospital.nh

Follow up Visit

Date:

Previous Treatment:

Treatment

Right Eye

Left Eye

IAC

23/2/26.
IVC

D/P w/a →

14/3/26.

NPO solid - she
TM scurried she
clearified hrs.
NPO explained

Intravitreal chemo



Plaque
brachytherapy/EBRT

Photodynamic therapy
/Transpupillary
thermotherapy

Adv →

- ① Inj Emetet 2mg + Inj DEXA 2mg slow iv flush
- ② Inj VCR 0.3mg slow iv flush - D1
- ③ Inj Carboplatin 335mg in 100ml NS iv over 1hr - ~~D1~~
- ④ Inj Etoposide 145mg in ~~100~~⁴⁰⁰ ml NS iv over 2hrs - D1 ^{D2} ~~7/2/26~~
- ⑤ syp Emetet (2mg/ml) 5ml TDS X 3days
- ⑥ T. Dexa 4mg 1/2 Tab BD X 3days
- ⑦ Inj G-CSF 60ug s/c OD~~X~~ 5days till ANC recovery.
 start from Day D1 / D5 / D6 / D7 / D8
- ⑧ Continue septran as advised.

total chemo date → Monika Sista

Chemo date - 7/2/26
6/2/26

- ⑩ N/V on 21/2/26 with CBC, LFT, RET



- Thy. Etoposide . 145 mg in 350 ml NSIV
over 2 hrs . D1, D2

- Thy. GCSF 60 mg sc q 24 hrs D3 till ANC
recovery

- Cont. ceftaz/AB/DG

- Date for chemo - Daycare

- N/V in OPD \approx CAJ 25/1/26 on 31/1/2026



Shivani
SR

Ans: (L) EORB / Most 5 HOC (20/12 - 20/12/26)

2/1/26

6240 / 2340 = 2.66

Ans =

- flu in RT OPD
- cont septem / SB / Bg
- Bangor signs untreated



in OPD on CBCI RFE / UA

14/1/26

- No mouth ulcer
- 2x betadine gargle
- sitz bath
- on septem
- Personal hygiene
- No fresh complaints.

Ret follow-up

17/2/26

EORB / Most HD CEV

due for cycle 6 HOC

Adv :-

- flu in RT OPD

→ Inj. Emet 2mg + Inj. Dexam 2mg slow IV push.

→ Inj. Vincristine 0.3mg slow IV push - D1

- Inj. Carboplatin 335mg in 100ml NS IV over 1 hr. → D1

8 / 4610 / 340 = 2.302

chemo date 17/1/26 - 18/1/26

14/1/26

CEO
Bilateral RB $\left\{ \begin{array}{l} \text{GPE B written/oral (P)} \\ \text{GPE (L)} \end{array} \right.$

post 6 # HDCEV \therefore 13/11/24.

(L) Evaluation 13/2/25

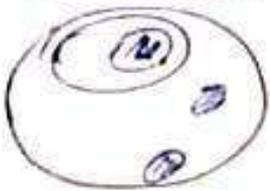
planned & decided for IAC.

post 2 # IAC July 2025
Nov 2025



Due for 3rd #

EUA
27/12/25
Regressed.
lessons.



Adv. DW prof R. Sethi
Ms Priya p12 facilitated
ICS.

F/U on 28/2/26 after
IAC & response EUA



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



अस्पताल में जलन धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL

बात विफिल्टा विभाग
 UHID: 1088849111

कमरा / Room
 C 210
 Queue /
 शेखरी F37
 Unit-III, Paediatric

L112012691435 188564916

एकड
 डिप्टर
 Dept No: 20260010023388

L11201267877 188564916

किशोर किशोर / KISHOR KISHOR

निर्दिष्ट पंजीकृत सं./O #

SOMANO
 2Y 4M 7D / M (पुरुष)
 VILL BARARI DIST MATHURA, UTTAR
 PRADESH Pin 0 INDIA
 General Rs. 0

रुप धरि वाट 500

आयु
 Age

KISHOR KISHOR

Handwritten signature



Reporting 08 22 30
 03/01/2026

निदान/Diagnosis

दिनांक/Date

उपचार/Treatment

43
 12/12/25

NIV in OPD on 14/1/2026
 CBDPRA/CF



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 SK

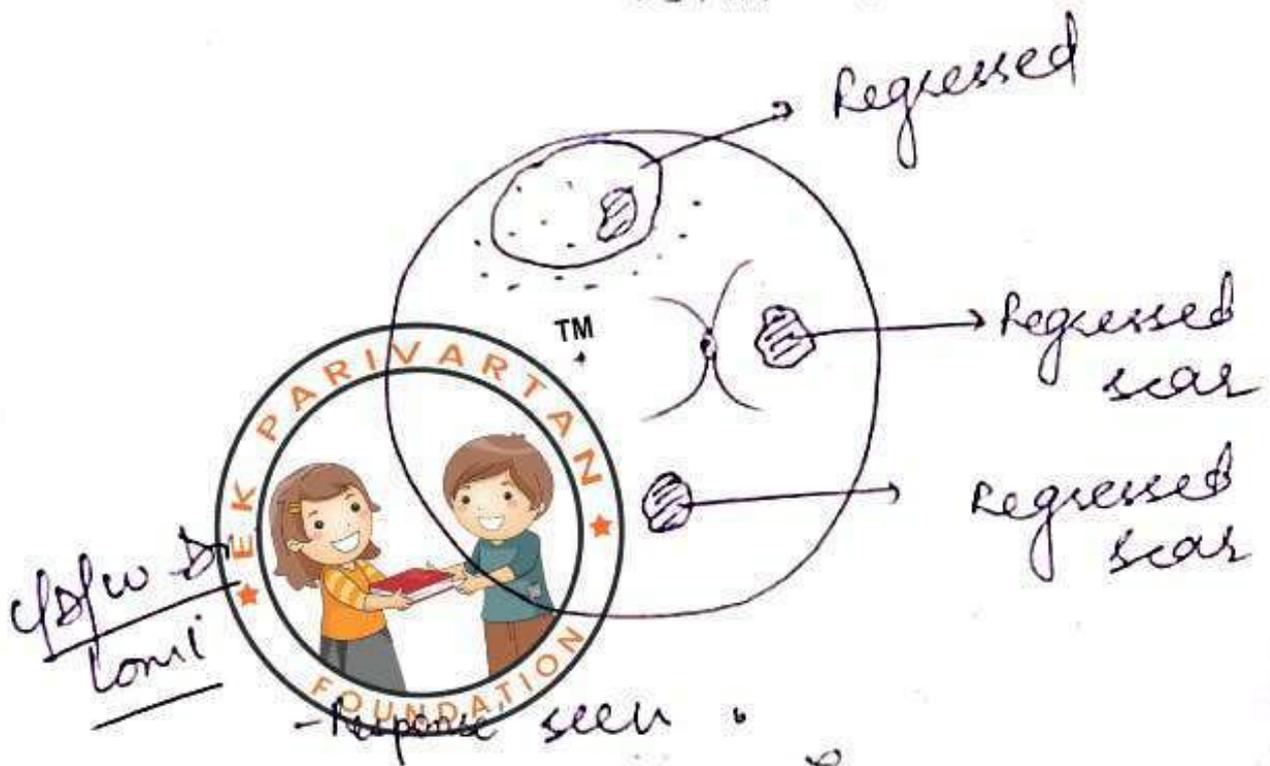


CLEAN AND GREEN AIIMS / एम का यही संकल्प, स्वच्छता से बनाया कल्प
 अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
 O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)



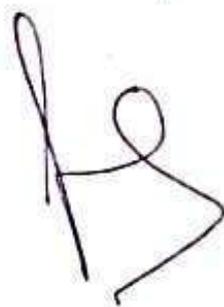
27/11/24 EVA done & unit-4 & Dr Lomi / Dr Avneet

- Handwritten notes:
- (A) Multiphasic group B RB (partially regressed)
 - (B) Enucleated group E RB (18/03/24) (210 NR (-))
 - (C) CEU - 201- 9/11/24
 - (D) IAC - 22/03/24 (M) 25/11/24 (M+T)



- ~~DOT~~ DOT - third dose IAC (Triple Drug)

(R) Admycin 37/1/5 days



12/1/26
7:30am
ward 2A

भारत चिकित्सा विभाग
UHID: 108364918



Dept No: 20250030023385

कमरा / Room C 218
Queue / संख्या F4
Unit-III, Paediatric.

किशोर किशोर / KISHOR KISHOR

S/O MANO
2Y 3M 28D / M(पुरुष)
VILL BARARI DIST MATHURA, UTTAR
PRADESH Pin 0 INDIA
General Rs 0

बुध, 03/01/2025



Reporting: 09:23:01
24/12/2023

- CBC/LFT/KFT new

(53)

12.15



N/A on

03/01/26 - CBC

Manoj
SR-Ped onco

Triage: Responsive/ Unresponsive HR /min BP mmHg RR /min SpO2 %
 Shifted to Paeds/ Main/ New Emergency (↓ Paeds one) B/L RB ~~SB~~ ↓ Paeds one Post 3rd IAC 17/2/26

Presenting Complaints

do, fever x 3 days
cough, coryza

H/o 2-episode of loose stool since morning (+), watery.
 No H/o vomiting, fast breathing, altered consciousness
 H/o poor feeding x 1 day

Primary Assessment (ABCDE) : Assessment Pentagon

Airway	Circulation	Disability
Open & stable: <u>Yes</u> /No If No.....	HR <u>139</u> /min CFT <u>12</u> /sec	GCS... <u>15/15</u>
Breathing: RR/min Efforts: <u>Normal</u> /Poor/increased	BP.....mmHg	Pupil size <u>2mm</u> /min
Auscultation: Air entry: <u>Normal</u> /poor/Differential	Peripheral pulse: <u>Poor</u> / <u>600</u>	Pupillary Reactions... <u>PR</u> ...
Added sounds: <u>None</u> /Stridor/Wheeze/Crackles	Central pulse: <u>Poor</u> / <u>600</u>	Motor activity: <u>Normal & Symmetrical</u> Asymmetrical/ Posturing/Flaccidity/Seizure
SpO2 on Room air..... <u>100</u> %	Skin temp: <u>Warm</u> / <u>cool</u>	Blood Sugar.....mg/dl
WC: <u>12kg</u>	Others	Exposure: Temp..... Colour: <u>Normal</u> /pallor/cyanosis/ mottled Any other skin lesions.....

a/c (14/2/26): 8.9 → 7260
 A/c 2395

(R) inguinal region - infected ~~at~~ arterial cannula insertion site

Diagnosis

- Cannula
- CBC, RFT, LFT, ~~blood c/s~~
- PLW CBC report
- 'Paeds one' also

Imp: URI = gastroenteritis - ? viral

IVF DNS @ 40ml/hr

ORS 50-100ml after each loose stool
 Syn Zinc (3/20) 5ml po OD x 2 weeks

Syn Cefixime (5/5) 2.5ml OD x 3 days

2am L.S. 26/2/26
 1. Piptory 1.2 gm IV IM
 2. Amikacin 180 mg IV OD

Post chemo

→ dtp . Emeset 2mg/5ml
 4ml ————— x 3 days

- T. Dexa 4mg 1/2 ————— 1/2 x 3 days

→ fu on ~~18/10/25~~ 29/10/25

→ RT registration

- MOD. injⁿ had already been given
 - To collect PETCT. report urgently



Dr. REMA KURADE
 Senior Resident
 DM Pediatric Gastroenterology
 Department of Pediatrics
 AIIMS, New Delhi-110029

F
29/10/25

- no mouth ulcers
- 2x betadine gargle.
- Sitz bath
- on sepbac
- no fresh complaints
- personal hygiene.

© EORB
10st 2# HDLEV
 (12/10 - 19/10).

- no active complaints
- reassessment M/R pending
- date not taken

~~please~~ - 9.4 > 6080 < 1.98 L
 2230

• Kindly get chemo start

• RT registration etc done for us. (IRCH)

• NIV 23 24/12/25 T CBC /RST/UT

• Syf 6MISCT (5ml/2mg) 5ml POBDS } x3dgs
• Tab DEXA 2mg 1000



TM

Nikita

DR. NIKITA SINGH
SR. Pediatrics Oncology
Dept. of Pediatrics Oncology
All. IS. New Delhi

26/11/25

(L) FORAS

initial (L) group 6

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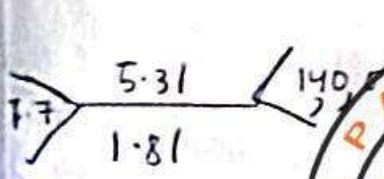
LH19112501845 188564918



MR KISHORKISHOR

↑ support immediate

- HPR -
- poorly differentiated PC
 - infiltrates entire length of ONJ
 - central and peripheral
 - scleral breach - negative
 - infiltrates choroid



TM sample 4 color

DEXA - 2mg 10ml water
 GHRH T. 2mg 10ml water

i) Q_4 VCR 0.2 mg IV dose fresh D_1

(ii) Q_4 CARBO PLATIN 300 mg in 100ml NS IV slowly over 1 hour D_1

(iii) Q_4 ETOPOSID 130 mg in 300ml NS IV slowly over 2 hours D_1 | D_2

iv Q_4 G-CSF 55 mg - D_4 (if chemo)

- D_5
- D_6
- D_7
- D_8

Chemotherapy 6/12/25 - 7/12/25

11/12/25 - Neela