

APHARESIS FORM

UHID	107220152
NAME	ANBIRA KUMARI
AGE	3y
GENDER	F
DIAGNOSIS	B-ALL CMC Relapsed
PRODUCT REQUIRED	SDP
CONSULTANT	Dr. Deepam Puri
WARD	NEW EM / 17.
INDICATION	Severe thrombocytopenia
SIGNATURE	
APPOINTMENT	 Dr. SANKEERTH Senior Resident Department of Medical Oncology Dr. B.R.A.I.R.C.H. AIMS, New Delhi



DEPARTMENT OF LABORATORY MEDICINE

Hematology

333 South Main Street, Suite 101, St. Louis, MO 63102
633 South Main Street, Suite 101, St. Louis, MO 63102
Phone: 314-241-1000

REC-904



UNION

Patient Name

Sex

Department

Order Physician

Lab Name

Lab Sub Center

Dept / Bldg No.

Lab Reference No.

REFERENCE

MR. ANITA KUMAR

Female

Internal Medicine

Dr. Tushar Sehgal

St. Louis, MO

333 South Main

St. Louis, MO

63102

Req Date

Age

Unit Name

Sample Collection Date

Sample Received Date

Recommended By

03/05/2024 10:24 AM

4 years 5 months 4 days

Unit 1

03/05/2024 12:15 PM

03/05/2024 07:49 AM

Dr. ANITA KUMAR

Sample Details: HKW-02052606 (EDTA Whole Blood) / Report Date: 03/05/2024
04:16 PM

Bone Marrow Aspirate for Flow Cytometry

1. Clinical Data: MDS, B-ALL, suspected leukemia, mouth black, pain to use if indurated.
2. Peripheral Blood Morphology: Not Provided
3. Bone Marrow Morphology: Bone Marrow is cellular with hypercellular trabeculae, hypercellular for age. Low megakaryocytes are seen, some show dysmegakaryopoiesis. No form of hyperplasia and no separation. No hemophagocytosis seen in the aspirate smear.
4. Hematology: Hemoglobin: 7.1g, Hematocrit: 21%, RBC: 2.1 million/mm³, Hemoglobin A1c: 4.1%, Lymphocytes: 12%, Monocytes: 10%, Neutrophils (including promyelocytes): 18%, Basophils: 0%, Eosinophils: 15%.
5. WBC: 4.7 x 10⁹/L
6. Interpretation: Data does not show evidence of disease. There is no evidence of disease.
7. Advice: Bone Marrow Examination for MDS.

This is an electronically generated report, authorized signature is not required. The test reports have been authenticated. Partial reproduction of the report is not permitted.

(DEVENDRA KUMAR VERMA)

Verified By

*****END OF THE REPORT*****

(Dr. Tushar Sehgal)

Authorized Signatory

Shree bhawani prasad Jan sewa trust



डा. बी. आर. अम्बेडकर संस्थान रोटरी कैंसर अस्पताल
Dr. B.R. Ambekar Institute Rotary Cancer Hospital
JSPITAL
HOSPITAL PREMISES



प्राप्त/Unit - Name: AMBARIK KIRAN
विभाग/Dept. - Address: KALYAN, DISTRICT: THANE, PIN: 401 103
अंग्रेजी/English -
OPD: Regn. No. 1001130
अंग्रेजी/English -

दिनांक/Date
चिकित्सा/Doctor

12/1/25

MB - d#42

T. bMP 2 Tals (extra 9H)
T. N-TX 35 (weekly)
T. N-TX 35 (weekly)

Cont. Sept 12/12/25

- Feb

13/2/25

Cont. Sept 12/12/25

18/2/25

Chc on

Shree bhawani prasad Jan sewa trust

OPR-6

MISES

2006/06 2004/07/00

Crash No. 212471-00

地址: 上海南京路 100 号

00000000000000000000

Place of Birth

2007-2008

SexAge F/FE

Room: Board Room (Staff: Administrator)

12-01-01/02

संयचार/ Treatment	संयचार/ Treatment
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संपचार/ Treatment

Inj. G-6 75 mg q 3 day
T. Folvite 10 mg
CBC 3D/X

From 4/11

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)
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
अ. भा. आ

OPR-6

DR. B.R.A. IICIL AIIMS, NEW DELHI



General

UHID: 107220152

IRCH No. 310985

नाम

Name: AMBIKA KUMARI

D/O: RAJA RAM YADAV

Phone No. 9810763422

Address: MALIN MADHUBANI, BIHAR, PIN-8, INDIA

Sex/Age: 1/5Y Date of Birth

दिनांक/Date

27/5/26

विशेष/ Diagnosis

दिनांक/ Date

27/5/26

MT 206
LT - 28/8/19
MORC - 19-20

4/6/26

LT - 28/19

उपचार/ Treatment

ALL - bone marrow - now relapse - 29 months from diagnosis

CSF flow - lumbar
60 blood donation - (Blood Bank)

2P Echo (outside)

Flu 4/6/26 - CBC / UFT / KFT

60 blood donation [not emergency] - Blood Bank

2P Echo (outside)

CL BM flow

Flu 11/6/26 - CBC

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

Shree bhawani prasad van sewa trust



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

अ मा आ जे
DR. B.R. AMBEDKAR INSTITUTE NEW DELHI

I.I.M.S. HOSPITAL

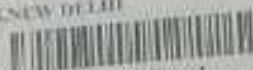
Patient Department

PROHIBITED IN HOSPITAL PREMISES

OPR-6

UHID: 107220152

IRCH No. 310985



General

तारीख/पंजीकृत सं./O.P.D. Regn. No.

लिंग
Sex

वय
Age

जन्म तिथि/Date of Birth

Sex/Age: F/OY

Name: AMBIKA KUMARI

P.O. RAJA RAM YADAV

Phone No. 9810763422

Address: MALINI NADHUBHANI BIHAR, PIN-8, INDIA

20.10.2011

निदान/Diagnosis

उपचार/Treatment

दिनांक/Date

27/12/11

क दि (लोले)
27/12/11
लोले (रात)

Tab #55

T. 6-M Tab 1/1/2 Tab 9 M
T. MX 5mg weekly
one (दोहरा)

Cont. Septarav Azivus

max 12mg
+
CSF by topalt

Fr mths CAC on

Sanjivani

09 21.3kg
ht 114cm

Tab on
28/12
at 8:30

511125175 107220152

511125184 107220152



PR-10000000000000000000

जीवन का बहुमूल्य उपहार/OPR-6

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15/4/26

v. g. ann/ on or at R1 kinship
[plant loss
& provision]

undocumented
fossil spikes

① multiple clo semi solid
spools

x26

ANC-1604

24/1/26

Advice

① refer to EE (1/1/26)
stat

⇒ short

ring set
invented.

24/1/26
24/1/26
0100 2 115

mf ① some ①/1/26
some ①/1/26
concern

1st time
Hypocistis

② 1/1/26 to 2/1/26

③ 1/1/26 on 20/1/26

shree bhawani prasad Jan sewa trust

2/1/26

sk

Shree bhawani prasad Jan sewa trust

23/12/20 M2 - d # 20
 1 tab q, HS (K2)

T. 6MP 300mg weekly
 T. MTX (25mg) 2 weeks

cont. Sept 2019 / Dec 2019

TV with

down

23/12/20 M2

Tas 6MP 1 tab 300mg

Tas MTX 300mg 2 weeks

• 1 tab 300mg 2 weeks

• 1 tab 300mg

Dated 23/12/20

(15)

14-115C
 31.8.81-F

Shree

23/12/20

RECEIVED
 23/12/20

23/12/20

23/12/20