

**URGENT**

Child Jeevan Foundation.





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

बहिरंग :  
अस्पताल के अन्दर धू

एकक / Unit Dr. S. B. / Dr. O. P.

विभाग / Dept. MD.

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

IRCH No. 327833

Clinic Paediatric Medical Oncology Clinic

Dept. MEDICAL ONCOLOGY

General

Reg. Date-17/02/2021

Clinic No. 7782829



11111782829

ite of Birth

CTP-120825008 107782829



Miss SURBHI...

पिता/पुत्र नाम

F/S/

Name SURBHI SINGH

D/O- SUNEEL SINGH

Phone No. [REDACTED]

Address JAINAGAR NO 3 CHATTARPUR NAGAR, UTTARAKHAND, Pin 26315

Sex/Age F/5Y

Shift 6 (Shift Afternoon)

DR. R. UDHAM SINGH

निदान / Diagnosis

AML Relapse

दिनांक / Date

11/08/21

उपचार / Treatment

AJUV

1. 60bld donation

रक्त दान (Blood Bank)

2. Transplant w/

refuge

- eufra

- dental opinion

- TORCH profile

- viral markers

- DSA after 21

Priyanka 3. peripheral blood

- NGS  
cytogenetics

cytogenetics

790624234

u. BMA  
CR flow cytometry

N/V on 14/08/21

5. restart AOE (re-induction after blood donation)

D

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

2  
3pm [inj magner 1gm x IV x 12hly  
inj Amikacin 300mg IV x 2hly ] 5 days  
can ops once fever subsided Discussed  
Med  
ONCO SR.

and to continue

- Dy  
20/8/25
- ① inj magner 1gm x IV x 12hly.
  - ② inj Amikacin 300mg IV x 2hly.
  - ③ Tab PCM. (500mg/tub) 1 tub PO SOS
  - ④ Tab Leptan (50/400) 1 tub x 2hly
  - ⑤ Tab vancomycin (200mg/tub) alternate days
- BD

To Review in Med onco OPD 25/8/25

DANGER ZON EXPLAINED.  
⑥ w/o obs adli ⑦ Tab. Emiet (4mg/tub)  
2 tub. PO SOS  
⑧ T. Canvie junior  
(15mg/tub) 1 tub x 2hly  
x 5 days

Dr. DURGESHWARI SHARMA  
Senior Resident  
Department of Paediatrics  
AIIMS, New Delhi-110029

AIIMS, NEW DELHI  
RECEIVED

DATE 22/08/2025

SIGN

FH  
NS

GE

ac fair  
hyaladeq  
Temp Afebr  
No Pallor  
P/A - soft, nontender  
P/S - cervix & vagina (CH)  
P/V - cervix firm  
ut NS, AV  
B/P KFT B/L FNT

Adv NDA

- medicine consult to rule out  
TB

- GE MRI pelvis

- RFT

- R/w & reports in case of fever,  
abdominal pain

RU

26/5/25

Chest Xray - (L)  
basal pleural effusion/  
thickening

26/5/25

USG - ut A/V  
ET - 10mm

② ovary N/L  
dilated tubular structure  
4.6 x 2 cm ? hydrosalpinx  
? pyosalpinx  
① ovary N/L

Dr. RESHMA DILIP  
Junior Resident  
Obstetrics & Gynaecology  
AIIMS, New Delhi  
DMC No-105229

## ECHOCARDIOGRAPHY INVESTIGATION REPORT

Patient Name : Baby Surbhi Singh  
AGE/SEX : 6 Years /Female  
UHID NO : Reg No -65336  
Referred By : Self

LOCATION : TMR  
Order Date : 08-08-202  
Report Date : 08-08-202

### Results:

- Situs Solitus.
- Levocardia.
- AV and VA concordance.
- Normal Related Great Arteries.
- No MVP.
- LVEF 60%.
- Normal Mitral inflow Doppler .E>A.
- Tricuspid Aortic Valve.
- Normal RV Systolic Function.
- Mild TR RVSP 36mmHg.
- Peak Velocity across Pulmonary valve 1.2m/sec.
- No Intra cardiac mass Clot.
- No Vegetation. No Pericardial Effusions.
- IVC Normal Collapsing.

**Dr Abhishek Sakwariya**  
MBBS,MD,DM Cardiology

**Dr Jitendra Mohan Sharma**  
MBBS,DNB,CARDIO THORAC  
VASCULAR SURGEON (CTVS)

(This is opinion and not final Diagnosis Clinical Pathological Co-relation is Must. Report is not V  
purpose.)

अ.भा.आ.संस्थान अस्पताल

A.I.I.M.S. HOSPITAL

प्रवेश-पत्र / Entry Pass

(केवल एक व्यक्ति के लिए / For One Person only)

रोगी का नाम

Name of the Patient .....

Surbhi

वार्ड/शैया सं.

Ward/Bed No. ....

(6-36)

अवधि दिनांक

Period from

29-8-25

तक

to

19.25



कृते चिकित्सा अधीक्षक

For Medical Superintendent



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL  
बहिरंग रोगी विभाग / Out Patient Department  
अस्पताल के अन्दर धूम्रपान करना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

3



संकेतित कर्तव्य धर्मस्थानम्

एकक / Unit

विभाग / Dept.

नाम / Name

प्रसूति विभाग

UHD:108427313



Dept No: 20250100018338

प्रीति प्रीति / PREETI PREETI

W/O SUNIL SINGH  
28Y 2M DD / F (महिला)  
JAINAGAR NO.3 POST CHATTARPUR  
UDHAM SINGH NAGAR RUDARPUR  
New Patient General Rs. 0

कमरा / Room

3

Queue / संख्या

N16

Unit-I, Obs. and Gynae.

OPR-6

/O.P.D. Regn. No.

पता / Address

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

90 lower abdominal pain x 3 months

MH

LMP - 12/6/25

Regular cyclic avg. flow

OH

P<sub>2</sub>L<sub>2</sub>

both E-NVP

LC 2019

PH

90 SANO

in 2019 →

Adhesiolysis

90

⊕

tubal

ectopic

ruptured

→ under

went

laparotomy

in 2017

in post.

Subacute Intestinal Obstruction.

Underwent laparotomy +

⇒ diagnosed to AdTB, took ATT for 6 months

laparotomy in 2017 in post.

CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प

अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE

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Apurva Bhat

PM-JAY

प्रधानमंत्री जन आरोग्य योजना  
(pmjay.gov.in)



My Hospital

meraaspatal.nhp.gov.in



भारतीय विशिष्ट पहचान प्राधिकरण  
Unique Identification Authority of India



पता:

द्वारा: सुनील सिंह, जयनगर न.3, छत्तरपुर, रुद्रपुर, छत्तरपुर,  
उधम सिंह नगर,  
उत्तराखण्ड - 263153

Address:

C/O: Suneel Singh, Jainagar No.3,  
Chattarpur, Rudrapur, Chhatarpur, Udham  
Singh Nagar,  
Uttarakhand - 263153



6453 7335 1012

VID : 9174 3853 5693 4554



1947

help@uidai.gov.in

www

www.uidai.gov.in



भारत सरकार  
Government of India



सुरभी सिंह

Surbhi Singh

जन्म तिथि/DOB: 07/02/2019

महिला/ FEMALE

Issue Date: 29/12/2020

बाल आधार

यह आधार 5 वर्ष की उम्र तक ही वैध है

6453 7335 1012

VID : 9174 3853 5693 4554

मेरा आधार, मेरी पहचान

भारत सरकार

Government of India

सुनील सिंह

Sunil Singh

जन्म तिथि / DOB : 16/04/1987

पुरुष / Male



3390 9922 8019

आधार

- आम आदमी का

आधार

Child Jeevan Foundation.

21/8/25

4/0 fever x 2 days

reading upto 103°F

→ no cough/cold/wheezing/loose stools/rashes/burning

CBC: 8.9  $\frac{12,800}{640}$   $\frac{80,000}{80,000}$

CDLW Dr D.P.Sir

D2 (M)  
24/8/25

Adv

1. Mgrex 1gm iv BD

2. Amika 300mg iv BD

x 5 days

D3 (M)  
24/8/25  
D4 (M)  
24/8/25

2. tab PCM (500mg) 1/2 tab 500

3. tab SEPTAN 1/2 tab 500

alternate day

4. tab VORICAZOLE (200mg) 1 tab BD

5. Re-induction chemo

— kindly donate 10 PRP

kindly  
send

25/08/25  
9AM

\* danger sign explained

Optim

25/8/25

1. T-D (Daycare)

2. P lin 2 bag

Cont. Mg/Amika x 3 day

3. Inj. AAA-C 75 mg

IVP/SG

B 10 x 6 day

5. Fr with CBC on 119



Date: 26/8  
Time: 7:30 AM



Date: 27/8  
Time: 7:30 AM



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OPR-6

बहिरंग :  
अस्पताल के अन्दर धू

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

Reg. Date-17/10/2024

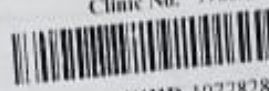
Clinic No. 7780/2024

IRCH No. 327833

Clinic Paediatric Medical Oncology Clinic

Deptt. MEDICAL ONCOLOGY

General



UHID-107782829

ite of Birth

एकक /Unit Dr. SB/Dr. OP

विभाग/Dept. MO.

नाम /Name

CTP-120825008 107782829



Miss SURBHI...

पिता/पुत्र नाम

Name SURBHI SINGH

D/O- SUNEEL SINGH

Phone No.

Address JAINAGAR NO 3 CHATTARPUR RUDRAPUR  
NAGAR, UTTARAKHAND, Pin 263153, INDIA

Sex/Age F/5Y

Room 6 (Sh. A.I.M.S.)

निदान / Diagnosis

दिनांक / Date

11/08/25

AML Relapse

उपचार / Treatment

Adv

1. 60 blood donation

2. Transfusion

relapse

elFR

dental opinion

- TORCH profile

- viral workup

- DSA after 2 w

3. peripheral blood - NGS  
cytogenetics

7906294234

4. flow cytometry

5. re-advise AOE (re-induction after blood donation)

donor (blood)

- Viral workup

- TORCH profile

- Blood group

NIV on 14/08/25

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ORIGINAL

Invoice No : BOS-25-13317  
Invoice Date : 04/09/2025



Challan No :  
Challan Date :  
P Order No :  
P Order Date : 05-Sep-25  
Credit Days : 1

PURCHASE  
BILL NO.  
PURCHASE  
DATE

**\*\* RETAIL INVOICE \*\***

Customer Details : 84363  
**SURBI SINGH**  
AIMS  
AIMS HOSPITAL  
NEW DELHI  
Place of Supply : DELHI  
PIN CODE : 110029  
D.L No. 1  
D.L No. 2  
Ship To :-

**AARK PHARMACEUTICALS**

(Pharmaceuticals & Surgical Distributors)  
S-14, GROUND FLOOR, UPLAX CENTRA COMPLEX, M-1  
GREEN PARK, EXT., NEW DELHI-110016  
Tel No : 8800111111  
Mobile Number : 9810300118, 8800300119, 09310155904, 09310155905  
Website : www.aarkpharma.com  
E-mail : aarkdelhi@aarkpharma.com  
State Code : 07  
GST No. : 07AFAA2350E1ZY  
D.L No. : MLN-139021  
PAN No. : AAHFA2350E  
FSSAI No. : 1331700800003  
Mode Of Transport :-  
Bike/Auto/Tampo/Courier/Bus

| SR. | PRODUCT NAME           | EXP. DT. | BATCH NO.  | PACK  | HSN  | MRP.     | SALE QTY. | DIS. QTY. | RATE    | AMOUNT  | DIS% | TAXABLE AMOUNT | GST% | CGST | SGST | GST Amt | Gross Amt |
|-----|------------------------|----------|------------|-------|------|----------|-----------|-----------|---------|---------|------|----------------|------|------|------|---------|-----------|
| 1.  | PIYA KIT               | 12/27    | 5AA301     | 1*KIT | 3004 | 12221.00 | 1         | --        | 8650.00 | 8650.00 | 0.00 | 8650.00        | 12   | 5.00 | 6.00 | 0.00    | 8650.00   |
| 2.  | ACD 500ML SOLUTION BOT | 12/26    | 82UA183601 |       |      | 553.00   | 0         | 2         | 0.01    | 0.00    | 0.00 | 0.00           | 12   | 5.00 | 6.00 | 0.00    | 0.00      |

HDFC BANK-UPI  
04/09/25  
9688/-

No of Items : 2  
Tot Qty : 3  
Made By : PREM  
Print By : PREM  
Total : 8650.00  
Invoice Amount in Words (Rs.) : Nine Thousand Six Hundred Eighty Eight Only

**BANK ACCOUNT DETAIL**

**AARK PHARMACEUTICALS**  
BANK NAME : YES BANK LIMITED  
BANK NO. : 005090000099  
A/C NO. : GREEN PARK  
BRANCH : YESB00000055  
IFSC CODE : 110016  
NEW DELHI



**UPI QR CODE**

**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

DO

RD

SO

SI

(Confirmed the figures given above are true and correct.)

(Computer Generated Invoice)



For AARK PHARMACEUTICALS  
E&OE