



Care For

Appetite Foundation

Aadhaar no. issued: 01/05/2026



Mahima

Date of Birth/DOB: 20/10/2023

Female/FEMALE

आधार 5 का उपयोग करें

भारत आधार



Government of India

भारत सरकार

5526 7605 8841

श्री आर, श्री पहचान

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).

www.uidai.gov.in

help@uidai.gov.in

1947

VID : 9130 8333 1291 5964

5526 7605 8841



Care For  
Appetite Foundation



Uttar Pradesh - 274306

PO: Laxmiganj, DIST: Kushinagar,

Chandarpur, C/O: Rabina Yadav, Chandarpur barwa,

Address:

Details as on: 09/05/2026



Unique Identification Authority of India

आरतीय विरिष्ट परचान प्राधिकरण



## LABORATORY ONCOLOGY (IRCH LABORATORY)

4th Floor, Room No. 414, G.F., Room No. 8, Dr. BRAIRCH, AIIMS, New Delhi, Tel : 5414, 3358, 5048

Referral form for Bone Marrow, Peripheral Smear, Flowcytometry, Molecular and Myeloma & Other Studies

### MATERIAL SENT

- |                            |           |            |
|----------------------------|-----------|------------|
| (a) Bone marrow aspiration | No. _____ | Site _____ |
| (b) BM touch preparation   | No. _____ | Site _____ |
| (c) Peripheral smear       | _____     | _____      |
| (d) Blood (ml)             | _____     | _____      |
| (e) _____                  | _____     | _____      |

### (For Lab Use Only)

Lab. Ref. No. \_\_\_\_\_

Received on \_\_\_\_\_

at \_\_\_\_\_ AM/PM \_\_\_\_\_

### SPE

DR. B.R.A. IRCH/AIIMS, NEW DELHI  
 Reg. Date-18/12/2025  
 Clinic Paediatric Medical Oncology Clinic  
 Deptt. MEDICAL ONCOLOGY  
 General  
 Clinic No. 2025/8452  
 UHID-108662073  
 Sex/Age F/2Y  
 Room 6 (Shift Afternoon)

Pati IRCH No. 355628  
 (blo) Name MAHIMA  
 Ref: D/O- AMARJEET YADAV  
 Clir Phone No. 8429928783  
 Na Address CHANDARPUR BARWA CHHAWANI, KUSHINAGAR, UTTAR

Age \_\_\_\_\_ Sex \_\_\_\_\_  
 Ward / Bed No. \_\_\_\_\_  
 Consultant-in-Charge Prof Sameer Baskel  
Dr. Sankeetha

### CLINICAL SUMMARY INCLUDING INVESTIGATIONS AND TREATMENT

CSF Cytology

For c Resinoblastoma - unilateral.  
 IORB group E  
 with suspicion on Enhancement till optic chiasma  
 S/p S#VEC.

To plan enucleate after further chems  
 And to r/o CNS disease  
 with CSF cytology.

PREVIOUS & HEMOGRAM (DATE & LAB REF. NO.) \_\_\_\_\_

BLOOD TRANSFUSIONS (TOTAL NO. & DATE OF LAST B.T.) \_\_\_\_\_

RADIOLOGICAL DATE \_\_\_\_\_

CLINICAL DIAGNOSIS \_\_\_\_\_

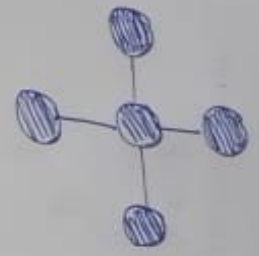
**DARK ROOM EXAMINATION**  
 Preliminary Examination

Refraction  
 Under Cycloplegic

**OPHTHALMOSCOPY**

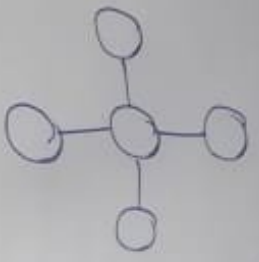
- (i) Distance Direct
- (ii) Direct Ophthalmoscopy
  - Media
  - Disc, Vessels
  - A. V. Crossing
  - Periphery
  - Macula
- (iii) Indirect Ophthalmoscopy

**RIGHT EYE**



No glow  
 Intraocular  
 mass ⊕

**LEFT EYE**



Glow ⊕  
 Media clear  
 CRO 3:1  
 NPP Healthy  
 FR ⊕  
 Uncooperating  
 for  
 Peripheral  
 examination



Care For  
 Appetite Foundation

margin  
 written  
 CRC, CI  
 HIV  
 HRTS  
 auto  
 10 B5  
 A



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

OPR-6

DR. B.R.A. I.R.C.I.A.I.M.S., NEW DELHI  
IRCH No. 355628  
Clinic: Paediatric Medical Oncology Clinic  
Dept: MEDICAL ONCOLOGY  
General  
Name: MAHIMA  
D/O: ASHARJEET VADAV  
Phone No. 8429928781  
Address: CHANDARPUR BARWA CHAWAN, KUSHINAGAR, UTTAR PRADESH, Pin 274006, INDIA  
Post-Online

Outpatient Department  
PROHIBITED IN HOSPITAL PREMISES



UHID: 108662073

वि. पंजीकृत सं. / O.P.D. Regn. No. RT-137966

आयु  
Age

जन्म तिथि / Date of Birth

↓ Prof. Anitagani Biswas.

निदान / Diagnosis	उपचार / Treatment
(R) Eye EORB - III A → S/P G OVEC → S/P (R) eye	Enudeation + 1° implant S/P 1 OVEC (post op)
दिनांक / Date 08-05-2026	<p>य/य/ Prof. Dr. A. Biswas.</p> <p>PLAN: (R) orbital PORT (↓GA) 40 Gy/20# / 4 weeks.</p> <p>Adv 1) DFRT   10/06/26   → R - (28) (8:30 AM)</p> <p>2) Anaesthesia clearance R (60) IRCH (CBC / LFT / KFT / CXR / ECG)</p> <p>3) CBC / KFT / LFT.</p> <p>4) Review in RO-OPD on 09/06/26. Tuesday (R-4) 9AM + review PAC [anaesthesia clearance] + fresh blood reports.</p>

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:

ब० रो० वि० कार्ड  
O.P.D. Card



अनुभाग व दिन  
Section and Day  
मंगलवार व शुक्रवार  
Tuesday & Friday

कमरा नंबर  
Cabin No.

डा० राजेन्द्र प्रसाद मेहता निदेशक

UHID: 108662073  
ABHA:  
Dept No: 20250050120040

संख्या / Queue 3  
कमरा / Room: 32  
Unit-V  
RPC OPD

Dr. Rachna Meel

TUE, FRI  
मंगल, शुक्र

Registration time:  
13/02/2026 08:47:29 AM

M 4 HIMA

D/O AMARJEET YADAV  
25/3M/24D / F  
CHANDARPUR BARWA CHHAVANI,  
KUSHINAGAR, UTTAR PRADESH,  
PIN: 8429928783 General Rs. 0  
Flow Lip Patient

का एकक  
it

आयु  
Age

पता  
Address

दिनांक  
DATE

निदान  
DIAGNOSIS

उपचार Treatment

13 FEB 2026

Ref'd to Dr Sameer Bhatnagar  
To plan emucleation  
after 6th chemo

Dr A (38A)  
after 3wks  
of next  
cycle

1/10 Persisting  
enhancement  
of OM till  
Chiasma

Need of  
Opt.  
ICSF  
Rachna.

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.

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

CBC/LET/RET → ~~W~~; no fresh complaint  
 to proceed ̄ C#4 C&V child is doing well.  
 - due on 31/12/25

- D1
- 1) Inj. VINCRISTINE 0.5mg IV P
  - 2) Inj. CARBOPLATIN 200mg in 250ml 5% D IV over 2 hours
  - 3) Inj. ETOPOSIDE 100mg in 10 5% D IV over 1 hour
  - 4) Inj. Emeset 4mg IV stat
  - 5) Inj. Dexamethasone 4mg IV stat } pre-chemo.
  - 6) Sup. Emeset (5ml/2mg) 5ml PO BD } x D1-D3
  - 7) Tab Dexamethasone 1mg PO BD } x D1-D3
  - 8) To F/U ̄ CBC/LET/RET on 12/01/2026

Amitabh  
 Kumar.

12/1/26

S/P C #4 (31/12/25)

ER visit yesterday - CXR infiltrate  
 Non vesicular

Symptoms improved @

Adls: Continue dyp Augmentin 5ml BD x 5 day  
 dyp Cetirizine 2.5ml OD x 5 day  
 Nasal saline drop so  
 dyp PCM (5ml=2504) 3ml SOI/6hr  
 - R/w w/ il GR

- F/U on 19/01/26 ̄ CBC/LET/RET  
 to 18/2/26 with report of CBC, LET, RET, C&F cytology

Dr. AMITABH  
 Senior Pediatrician  
 29/A.I.I.M.S., New Delhi  
 GMC Reg. No. 2671



**ULTRASONOGRAPHY**

- Upper Abdomen
- Pelvic Organs
- OCULARS
- Cranial
- Other Organ

Name: PCD Mahima  
 Age & Sex: 24/F

Ward / O.P.D.  
 Referred By

**USG BOTH EYES (B-SCAN)**

K/c/o Retina/Blashting

**Observations:**

	RIGHT EYE	LEFT EYE
AP diameter	1.68 cm	1.72 cm
Anterior chamber	N	N
Lens	N	N
Posterior chamber	lateral detachment + vit retinal hemorrhage	N
Retina	lateral detachment	N
Optic disc	Thickened (0.52 cm)	N

**Appetite Foundation**

Conclusion: Myopia max 2  
 \* Foci of calcification noted in the post chamber of the right eye, Meas 0.32 to 0.4 cm.

Date:

ULTRASONOGRAPHY  
 11/01/12



DEPARTMENT OF RADIODIAGNOSIS & INTERVENTIONAL RADIOLOGY  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)  
NEW DELHI

सर्वेभ्यो भूयुः संन्यासैः

Patient Name:	MAHIMA MAHIMA	Gender/Age:	F/2 y
UHID:	108662073	Exam Date:	04/02/2026 1:37PM
OPD / Ward:	R. P. Centre (Eye Centre)	Modality:	MR
Procedure	MRI SCAN Main	Room:	NMR MAIN

Dr. Anil  
MD (AIIMS)

Brain stem and cerebellar hemispheres are showing normal MR morphology, signal intensity and outline.

Fourth ventricle is normal in size and midline in position.

Basal cisterns are normally visualized.

No midline shift is seen.

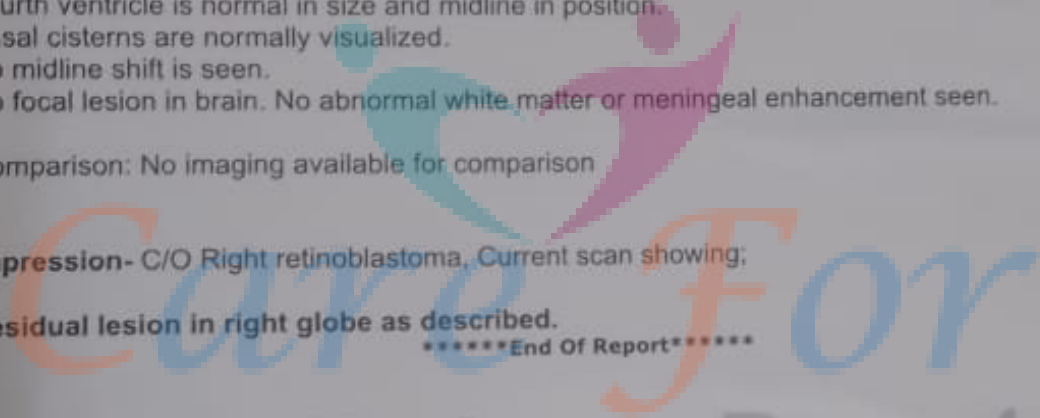
No focal lesion in brain. No abnormal white matter or meningeal enhancement seen.

Comparison: No imaging available for comparison

**Impression-** C/O Right retinoblastoma, Current scan showing;

**Residual lesion in right globe as described.**

\*\*\*\*\*End Of Report\*\*\*\*\*



Preliminary Report  
Appetite Foundation

ब. रो. वि. कार्ड  
O.P.D. Card

रा. राजेन्द्र प्रसाद नेत्र विज्ञान केन्द्र



अनुभाग व दिन  
Section and Day  
मंगलवार व शुक्रवार  
Tuesday & Friday

कमरा नंबर  
Cabin No.



UHID: 108662073  
ABHA:  
Dept No: 20250050120040

संख्या / Queue 6  
कमरा / Room: 33  
Unit-V  
RPC OPD

MAHIMA

D/O AJAY YADAV  
TY 11M 21D / F  
BARANA 52 KUSHINAGAR, UTTAR  
PRADESH, Pin 271149, INDIA  
Mob: 9429928763  
Follow Up Patient

Dr. SWATI PHULJHELE

TUE, FRI  
मंगल, शुक्र



Registration time:  
10/10/2025 08:48:32 AM

वजाज का एकक  
ajaj's Unit

आयु पता  
Age Address

दिनांक DATE	निदान DIAGNOSIS	उपचार Treatment
11 OCT 2025	(R) ? ? ? ? ?	उपचार Treatment
	<p>Handwritten notes:</p> <p>mm s/o Tendred nasal mass extending distal desc &amp; nasal mass</p> <p>splic (M) Muckening ~ 1cm</p> <p>Adv Nbc discussion</p> <p>Kndy - creamed in dharam shale + try saugay sham sv.</p> <p>Turkey</p>	<p>Wed (53) 10:30 AM</p> <p>Turkey</p>

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.

- धूम्रपान निषेध
- कूड़ा कर्कट केवल कूड़ेदान में ही डालें
- थूकिये नहीं
- No Smoking
- Use Dustbin
- No Spitting

J.S. HOSPITAL, INSTITUTE OF MEDICAL SCIENCES, B.H.U.  
CONSULTATION RECORD

ENT'S NAME	Mahima Yadav		WARD NO.	BED NO.
ATTENDING DOCTOR	Prof R.P. Maurya		MRD. NO.	7854091
CONSULTATION REQUESTED FROM DR	Department of Paediatrics (Haematology)			
BRIEF NOTES	Dr. Venita Gupta main Dr. Prabhakar - aggressive ma			

The pt came to us with complaint of 10x5x5 mm white ulcers on lips & gums. Provisional diagnosis of Leishmaniasis. Provisional diagnosis of Leishmaniasis. This has been made.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

CONSULTANT OPINION AND SUGGESTIONS

Dr. Venita Gupta main Dr. Prabhakar - aggressive ma

Need adjustment Chemotherapy on a later date. Kindly evaluate the pt and do the needed workup.

Signature: \_\_\_\_\_

Dr. Prabhakar

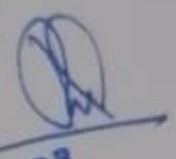
Need to assess visual acuity to try for eye salvage.



30/10/25  
Adv/

— N/U — 3/11/25

~~with~~ 9am



(Board room)

# Care For



Dr. Ruksana Sidhique P.R  
DM Resident  
Pediatric Oncology  
AIIMS, New Delhi-110029  
DMC No 113411

Height — 88cm **Foundation**

Weight — 10.3kg

स्वातंत्र्य कक्ष. date

S. HOSPITAL, INSTITUTE OF MEDICAL SCIENCES, B.H.U., VARANASI (UP)

Patient's Mobile No.

REQUISITION FORM 33

Employee/Student HD No.

Full Name Mahua Age/Gender 29/1k OPD/MRD No. 7854091

OPD/Ward Bed No. Doctor's Name

Provisional Diagnosis

Case Note

Nature of Specimen Investigation(s) Required ->

Resident Dr. Sign. Date 29/9

Handwritten notes in Hindi: 'उपरोक्त मरीज को 200/- का प्रथम रकम पर कोउपकर जमा कर जिनका रोक कर जाये।' and '9/9/25'.

USG Bscan

For the use of laboratory

Date of Receipt: Date of Despatch: Authorized Signatory of Lab:

Net Amount (Rs): 200.00

Payment Due (Rs): 0.00

Created By : MANOJ KUMAR

Prepared By : MANOJ KUMAR





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

अ.

OPR-6

शरीरमादां चक्षु धर्मसाधनम्

अस्पताल र

DR. B.R.A. IRCH/IAHMS, NEW DELHI

IRCH No. 355628

Reg. Date-07/02/2026

EMISES

Clinic Paediatric Medical Oncology Clinic

Clinic No. 2025-08431

Deptt. MEDICAL ONCOLOGY

General



एकक/Unit \_\_\_\_\_

विभाग/Dept. \_\_\_\_\_

नाम

UHD-108662073

n. No. \_\_\_\_\_

नाम / Name

Name MAHIMA

D/O- AMARJEET YADAV

Sex/Age F/2Y

तिथि / Date of Birth

Phone No. 8429928783

Room Board Room (Shift Afternoon)

Address CHANDARPUR BARWA CHHAWAN, KUSHINAGAR, UTTAR PRADESH, Pin:274306, INDIA

निदान/ Diagnosis

RAs - S2-V1

दिनांक/ Date

16/4/26

उपचार/ Treatment

Ref to RT-OPD

Handwritten notes: 25/4-13

Signature: Sameer Bhat

17/4/26 To register & Ro OPD  
↓ Dr. Anit Bhatnagar

21/5/2026 R#13

FRIDAY, IRCH f seira

Appetite Foundation