



LADY HARDINGE MEDICAL COLLEGE & SMT. SUCHETA KRIPLANI HOSPITAL

DEPARTMENT OF RADIODIAGNOSIS

NEW DELHI

NAME: Ashutosh	AGE/SEX: 4y/M	REGISTRATION NO: 29677
REFERRED BY: Paediatrics OPD	CT NO: 7227/23	DATE: 28-12-2023
CLINICAL DIAGNOSIS: K/o Aplastic anemia		

CECT chest + PNS + Abdomen

Motion artefacts ++

Bilateral lung fields are normal in attenuation.
No significant lymphadenopathy noted.
Trachea is central and normal in course & caliber.
Major mediastinal vasculature appear normal in course & caliber.
No evidence of pleural effusion seen.
No evidence of pericardial effusion/calcification seen.
Visualized bones show no significant abnormality.

CECT PNS

Soft tissue mucosal thickening in involving bilateral maxillary, ethmoidal, sphenoid sinuses causing blockage of left frontal recess and left osteomeatal complex - s/o sinusitis Delano's Type I bilaterally.
Right frontal recesses are patent.
Right osteomeatal complex is patent.
Bilateral speno-ethmoidal recesses are patent.
Bilateral orbit and optic nerves are unremarkable. Bilateral lamina papyracea is intact.
Bilateral pterygopalatine and infratemporal fossa are normal.

Abdomen

Department of Microbiology, Lady Hardinge Medical College, New Delhi
Blood Culture Reporting Form

Lab. No. A 11697, 11694 Name Ashutosh CR No. 2023 017 3832
 Age / Sex 44 M Ward / OPD / ICU ESLI, Ward VCT
 Date & Time of collection: 8/1/23
 Amount of blood inoculated: (peripheral vein/indwelling catheter)..... Set I/II.....
 Duration of Antimicrobials intake:
 Clinical Diagnosis:
 Blood culture system: Manual/ Automated Pediatric/ Adult : Aerobic/ Anaerobic
 Previous report :
 Organism Isolated Staphylococcus hominis MRSA/ VRE/ HLAR/ CRE/ESBL/ ICR
 Isolated after 16 hours (Methicillin resistant) - MRCONS
 days of aerobic/anaerobic incubation.

?? Significant. Please correlate clinically
Antimicrobial susceptibility Report

Antibiotics	S	IS	R	MIC (µg/ml)
Penicillin				
Ampicillin/ Amoxicillin				
Amoxy-clavulanate/ Piperacillin- Tazobactam-sulbactam				
Cefazolin/ Cephalexin/ Ceftazidime/ Cefopime/ Cefexime/ Ceftriaxone				
Imipenem/Meropenem/Ertapenem				
Vancomycin/ Telcoplanin/ Aztreonam	S/S			
Colistin				
Polymyxin B	S			
Amikacin/Gentamicin			R/L	
Azithromycin/ Clindamycin/ Erythromycin				
Chloramphenicol			R	
Nalidixic acid/Ciprofloxacin/Ofloxacin/Norfloxacin/ Levofloxacin				
Trimethoprim-sulphamethoxazole	S			
Izozolid	S			

S: susceptible, IS: intermediate susceptible, R: resistant, MIC: minimum inhibitory concentration
 Note: MRSA: Implies resistance to all beta lactam groups of antibiotics including cephalosporins.
 Strains of Salmonella that are resistant to nalidixic acid may be associated with delayed response or treatment failure in fluoroquinolone treated patients of salmonellosis.
 Organism may be part of normal flora.

Reported on: 12/1/23 Along with combination of B-lactam + B lactamase inhibitors with the exception of Ceftazoline
 Signature Microbiologist *[Signature]*

MRSA: Methicillin resistant Staphylococcus aureus, HLAR: High level Aminoglycoside resistant, VRE: Vancomycin resistant enterococci, ESBL: Extended spectrum beta lactamase, CRE: Carbapenem resistant enterobacteriaceae, ICR: Inducible clindamycin resistance

KALAWATI SARAN CHILDREN
HOSPITAL - NEW DELHI

24 HRS. EMERGENCY LAB
DEPARTMENT OF BIOCHEMISTRY

DXH 500
MACHINE-I

Specimen ID: N26
Patient ID: 6692
First Name: ASHUTOSH

Test: CD
Gender: U
Last Name:

Specimen: WB

Run Date/Time: 28/03/2024 06:45 AM
Collection:
Location: U2
Comments:

Date of Birth:
Sequence #: 26973
Physician:

Age:

Test	Result	Flags	Units	Low	High
WBC	1.73	Ri	$\times 10^3/\mu\text{L}$	4.30	13.40
LY	92.89	Rh	%	8.00	57.80
MO	5.76	R	%	4.00	12.30
NE	1.01	Ri	%	22.40	77.50
EO	0.34	R	%	0.00	4.70
BA	0.00	R	%	0.00	1.00
LY#	1.61	R	$\times 10^3/\mu\text{L}$	1.00	5.80
MO#	0.10	Ri	$\times 10^3/\mu\text{L}$	0.20	1.00
NE#	0.02	Ri	$\times 10^3/\mu\text{L}$	1.50	7.90
EO#	0.01	R	$\times 10^3/\mu\text{L}$	0.00	0.50
BA#	0.00	R	$\times 10^3/\mu\text{L}$	0.00	0.10

Test	Result	Flags	Units	Low	High
RBC	1.86		$\times 10^6/\mu\text{L}$	3.84	5.03
HGB	5.45		g/dL	10.20	13.40
HCT	16.1		%	31.0	39.8
MCV	86.3		fL	71.3	87.6
MCH	29.3		pg	23.7	30.0
MCHC	33.9		g/dL	31.8	35.8
RDW	13.9		%	12.2	14.9
RDW-SD	39.8		fL	34.9	42.0
PLT	10.6	Ri	$\times 10^3/\mu\text{L}$	189.0	403.0
MPV	9.80		fL	7.20	11.40

Flags & Messages

Flags:
Abnormal Diff
Cellular interference
Suspect Diff

RBC

PLT

Sample No: B047 ASHUTOSH U2 Rack
 Patient ID Ward:
 Name:
 Sample Comment

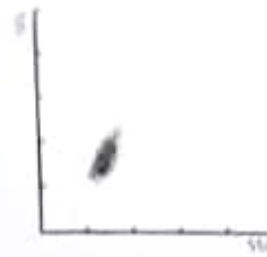
Position: 29/03/2024 11:17:33 WB
 Doctor:
 Birth Sex
 Nickname: XN-1000-1-A

Positive

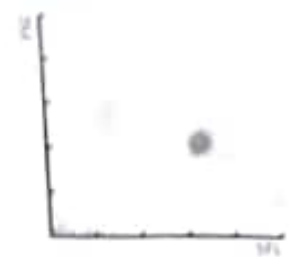
Diff. Morph. Count

WBC	2.32	-	[10 ³ /uL]	
RBC	3.58		[10 ⁶ /uL]	
HGB	8.6		[g/dL]	
HCT	25.7	-	[%]	
MCV	71.8	-	[fL]	
MCH	24.0	-	[pg]	
MCHC	33.5		[g/dL]	
PLT	14	*	[10 ³ /uL]	
RDW-SD	46.9		[fL]	
RDW-CV	18.1	+	[%]	
PDW	----		[fL]	
MPV	----		[fL]	
P-LCR	----		[%]	
PCT	----		[%]	
NRBC	0.00		[10 ³ /uL]	0.0 [%]
NEUT	0.03	*	[10 ³ /uL]	1.3 [%]
LYMPH	2.19	*	[10 ³ /uL]	94.4 [%]
MONO	0.10	*	[10 ³ /uL]	4.3 [%]
EO	0.00		[10 ³ /uL]	0.0 [%]
BASO	0.00		[10 ³ /uL]	0.0 [%]
IG	0.00	*	[10 ³ /uL]	0.0 [%]
RET			[%]	[10 ⁶ /uL]
IRF			[%]	
LFR			[%]	
MFR			[%]	
HFR			[%]	
RET-He			[pg]	
IPF			[%]	
WBC-BF			[10 ³ /uL]	
RBC-BF			[10 ⁶ /uL]	
MN			[10 ³ /uL]	[%]
PMN			[10 ³ /uL]	[%]
TC-BF#			[10 ³ /uL]	

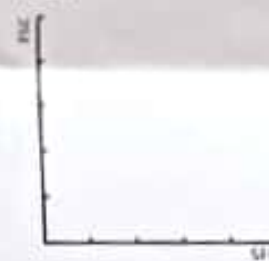
WDF



WNR



RET



PLT-F



RBC



PLT



WBC IP Message
 WBC Abn Scattergram
 Neutropenia
 Lymphocytosis
 Leukocytopenia
 Blasts/Abn Lympho?
 Atypical Lympho?

RBC IP Message
 Anemia

PLT IP Message
 PLT Abn Distribution
 Thrombocytopenia

Kalawati Saran Children's Hospital, New

Department of Biochemistry

Sample Id **69** Date **13-03-2024 11:11:38**

UHID/CR No
Name *PD*

Test Name	Result	Units	Normal Range
Urea	31	mg/dL	15 - 45
Creatinine	0.67	mg/dL	0.59 - 1.45
Bilirubin Total	<u>0.98</u>	mg/dL	0.30 - 1.20
Bilirubin Direct	<u>0.44</u>	mg/dL	0.00 - 0.40
AST/GOT	13	U/L	5 - 40
ALT/GPT	13	U/L	5 - 35
Alkaline Phos	151	U/L	25 - 125
Total Protein	7.5	g/dL	6.2 - 8.5
Albumin	3.8	g/dL	3.5 - 5.2
Calcium	9.0	mg/dL	8.1 - 10.4
Phosphorus	3.9	mg/dL	2.6 - 4.5
C-Reactive Protein	155.64	mg/L	0.00 - 7.00

Na^+ - 138
 K^+ - 3.6
 Cl^- - 101
 Ca^{++} - 4.6 mg/dL

UHID: 20230133832

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Govt. of India
KALAWATI SARAN CHILDREN'S HOSPITAL

INVESTIGATION RECORD SHEET

Name: Ashutosh

Age: 4y

Sex: M

C.R. No. 2967H

Date	29/11	17/12/20	2/12	3/12	5/12	4/12	5/12	7/12	8/12	19/12	10/12
HB/HCT	8.2 25	7.9 26	9.1 28	7.8 23	8.05 24	7.7 25	8.05 24	7.0 23.5	7.2 22.5		6.23
TLC/DLC	1610 NoctL	1280 .51	2120 80	1780 NoctL	2150 70	2390 40	2950 50	2250	3080		2310 20
Platelet Count	29K	37K	29K	14K	26K	7K	26K	4000	7000		14K
Urea	25	19.5		15				16.3			
Creatinine	0.36	0.3		0.35				0.31			
Na	130	133		131				133			
K	4.4	4.1		5.0				4.1			141
Serum Bilirubin Direct / Indirect	0.5 0.2	0.5 0.2		0.28 0.17				0.61 0.29			5.6 0.51 0.23
SGOT	33	34		30				19.7			9.7
SGPT	42	33		27				16.6			150
Alk Po ₄	115	117		116				118			98
S. Protein/Alb	6.7	6.5						5.75			
S. Calcium/l	9.8 4.3	9.9 3.9		9.0 4.4				9.0 4.5			8.6 4.5
Phosphate	4.7	4.5		2.25				4.37			
BS CRP	37.3	47.9		66				43.0			110
lipid Profile											
SF ANC VE	400	30		20							
C											
Other Fluid amination											
RMAT GUE OLOGY											

2/12 Blood CS → *Enterococcus faecium*
S-vanco / Linezolid

28/11 → sterile

20/11 vcs
↓
E.coli (+)

5/12 → G.A-MTB Not detected

Parvo }
EBV } Negative

SM Culture →

CMV →
12/12

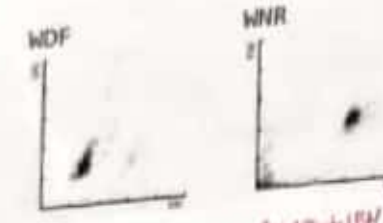
16/11/2023 15:09:32 MB

P/S :- Smear shows red cells are predominantly normocytic with mild anisocytosis

DLC - L N M E O
95 0 02 01

BMA-776/23

Ashutosh
4yr/M
27677
U3G



BMI + BMA → Smears show few tiny marrow particles which are hypocellular for age.

BMFC: S+

Smears show mainly lymphocytes, few plasma cells and mast cells.

There is marked paucity of erythroid, myeloid and megakaryocytic series.

No megakaryocytes seen in smears examined.

No abnormal cell or parasite seen.

Imp. Pancytopenia with hypocellular marrow
Report on bone marrow biopsy to follow.

Sample No. 33/11412
Patient ID
Name
Sample Comment

Name c
Hospital
Specimen
Nature
Date o

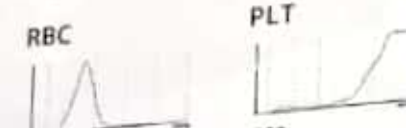
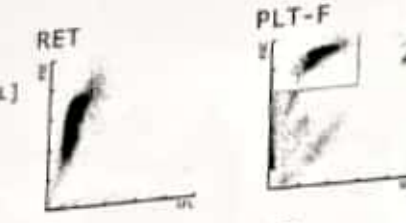
Positive
DIFF. Morph. Count

WBC	1.82	10 ³ /uL	0.0	%
HGB	2.89	10 ⁶ /uL	3.9	%
HCT	7.8	g/dL	91.2	%
MCV	23.9	fL	4.4	%
MCH	82.7	pg	0.0	%
MCHC	27.8	g/dL	0.5	%
RDW	32.6	%	0.0	%
PLT BF	7	10 ³ /uL	0.0	%
RDW-SO	53.1	%	0.0	%
RDW-CV	17.9	%	0.0	%
PDW	-----	fL	-----	%
MPV	-----	fL	-----	%
P-LCR	-----	%	-----	%
PCT	-----	%	-----	%
NRBC	0.00	10 ³ /uL	-----	%
NEUT	0.07	10 ³ /uL	-----	%
LYMPH	1.66	10 ³ /uL	-----	%
MONO	0.08	10 ³ /uL	-----	%
EO	0.00	10 ³ /uL	-----	%
BAZO	0.01	10 ³ /uL	-----	%
IG	0.00	10 ³ /uL	-----	%
RET	0.27	%	0.0078	10 ⁶ /uL
IRF	3.6	%	-----	%
LFA	96.4	%	-----	%
MFR	3.6	%	-----	%
MFR	0.0	%	-----	%
RET-HB	31.1	%	-----	%
IPF	2.2	%	-----	%

WBC-BF 10³/uL
RBC-BF 10⁶/uL
PW 10³/uL
PMN 10³/uL
TC-BF# 10³/uL

WBC IP Message
WBC Abn Scattergram
Neutropenia
Leukocytopenia
Blasts/Abn Lympho?
Atypical Lympho?

RBC IP Message
Anemia



PLT IP Message
PLT Abn Distribution
Thrombocytopenia

[Signature]

Dr. Deeksha Singh
Asst. Prof
17/11/23





BACHPAN CARE ORGANIZATION

YOUR CONTRIBUTION, MANY SOLUTION

B-360, Jaitpur, Extension, Badarpur, New Delhi - 110044

E-mail: into@bachpancareorganization.org | Web: bachpancareorganization.org

Ref. No. 30/03/24

Date 30/03/24

सेवा में
संस्थापक मधुपथ
बचपन केंद्र आर्गेनाइजेशन
बदरपुर नई दिल्ली

मधुपथ,

मैं बच्चा ठाकुर अपने लक्ष्य के लिए निर्वाह करती हूँ।
मेरे लक्ष्य की मदद करे वह लक्ष्य विचार है। काली
दिना मैं अस्पताल में जाती हूँ। मेरे लक्ष्य का
ब्रह्म केंद्र जैसी बीमारी से झुझना पड़ रहा है।
मैं आपसे धन जुटा कर विनती करती हूँ मेरे लक्ष्य
का नाम आशीर्वादा है। जो कि 4 साल का है।
अबनी इस बीमारी में मदद करे आपका जीवन भर
अपना मानुगी और मेरा परिवार भी जीवन भर
आभारी रहेगा।

आर्थिक सहायता प्रदान करे

हार्थी।

बदना

