



THE CURABLE TRUST

ARMANI

S FASH

MEN

Name : Master PAWAN KUSH  
 Lab No. : 510876974  
 Ref By : AIIMS  
 Collected : 13/5/2026 9:10:00AM  
 A/c Status : P  
 Collected at : Yusuf Sarai - Lab  
 C.L HOUSE, UPPER GROUND FLOOR, 4/1-3  
 AUROBINDO MARG, YUSUF SARAI( NEAR AIIMS  
 GATE NO.3) New Delhi - 110016

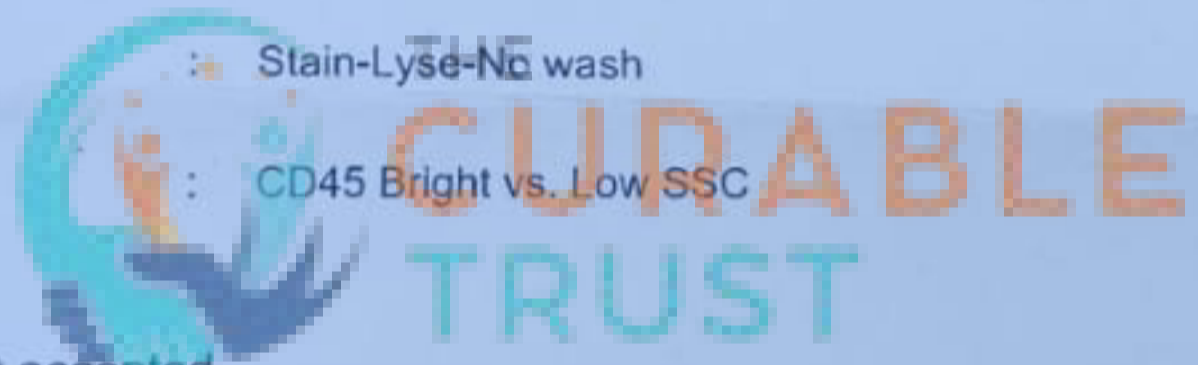
Age : 5 Years  
 Gender : Male  
 Reported : 13/5/2026 6:15:07PM  
 Report Status : Final  
 Processed at : LPL-NATIONAL REFERENCE LAB  
 National Reference laboratory, Block E,  
 Sector 18, Rohini, New Delhi -110085



Test Report

Test Name	Results	Units	Bio. Ref. Interval
CD19 (Flow Cytometry-Single platform bead assay)			
Absolute Lymphocyte Count	3792	/uL	660.00 - 4600.00
CD19 (Total B cells)	0.61	%	14.00 - 33.00
Absolute CD19	23.00	/uL	390.00 - 1400.00

Instrument : BD FACS Lyric  
 Software : BD FACSuite Clinical V1.5  
 Type of Specimen : Peripheral blood in EDTA/Heparin vacutainer  
 Cell Preparation Method : Stain-Lyse-No wash  
 Gating strategy : CD45 Bright vs. Low SSC



- Note
- ACD samples not accepted
  - CD19 counts increase between 8.30 am to 12 noon

*Beena Chandrasekhar*

Dr Beena Chandrasekhar  
 PhD, Life Sciences  
 Technical Director - Flowcytometry  
 NRL - Dr Lal PathLabs Ltd

*Nagarjun Sai*

Dr. Nagarjun Sai Jaine  
 MD, Pathology (DMC - 117735)  
 Fellowship in Hematopathology  
 (AIIMS) Consultant-  
 Hemato-Oncopathology &  
 Flowcytometry  
 NRL - Dr Lal PathLabs Ltd

*Sunanda*

Dr Sunanda  
 MD, Pathology (DMC - 46663)  
 Sr. Consultant Pathologist -  
 Hematology & Immunology  
 NRL - Dr Lal PathLabs Ltd

End of report



Authenticity assured - scan the QR code to access the original report from our verified database



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

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



बाल चिकित्सा विभाग, UHID: 10802941(i)  
कमरा / Room C-210  
Queue / संख्या F14  
Dept No: 20250030000110  
Unit-I, Paediatric.  
OPR-6  
पांजीकृत सं० / O.P.D. Regn. No. \_\_\_\_\_  
PAWAN KUSH  
आयु / Age  
पता / Address  
S/O GAJENDER YADAV  
5Y 9M 27D / M (पुरुष)  
VILL+POST AMARPUR, DISTT SAHARSA,  
BIHAR. Pin: 852202. INDIA  
General Rs. 0  
सोम, गुरु, Mon, Thu (सोम, गुरु)  
Reporting: 08:27:17  
27/04/2026

निदान / Diagnosis

SLEWS - UR / CNI - NR | Randomized in CNI arm

दिनांक / Date  
3

उपचार / Treatment  
CNI now CNI NR at 6 months so planned for ritux  
Generics reg.

W 99  
B.P → 108/68 mmHg

- ① CAP VINGRAB 2 — 2.5 mg
- ② Tab Prednisolone 7.5mg AD
- ③ Tab furose 2.5 — 2.5
- ④ Tab syp calcium 5ml OD
- ⑤ syp Septan SS 5ml all day
- ⑥ Tab Meccabamine 1000mg 1 tab OD x 1 month
- ⑦ syp vitropel 5ml PO OD x 1 month

Ritux { 29.4.26 200mg  
6.5.26 300mg

CBC  
RF, se albumin  
spot/pluc

CS14 { absolute - 13.5.26

e/a 11.5.26

CLEAN AND GREEN AIIMS / एम्स का यही 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)

मेरी अस्पताल  
My Hospital  
meraaspatal.nhp.gov.in  
Senior Resident  
Pediatric Nephrology  
AIIMS, New Delhi-28





UHID: 108029410 Reg Date : 31/12/2024 07:52 AM  
Patient Name : Master. PAWAN KUSH  
Sex : Male Age : 5 years 10 months 15 days  
Department : Paediatrics Unit Name : Unit-I  
Unit Incharge : Dr. Rakesh Yadav Sample Collection Date: 15/05/2026 10:27 AM  
Lab Name: Microbiology Sample Received Date:  
Lab Sub Centre: Clinical Microbiology (Stool)  
Dept / IRCH No: 20250030000110 Recommended By: Mrs. DR.SHIVEHA VERMA  
Lab Reference No:  
Ward Name: DAY CARE PEDS MCH GF

Sample Details : CST-150526050 (Stool) / Report Date: 15/05/2026 02:47 PM

### STOOL ROUTINE MICROSCOPY

STOOL MACROSCOPIC	
Colour	Brown
Consistency	Semisolid
Blood	Absent
Mucus	Absent
Parasite	Absent
MICROSCOPIC	
No Abnormality Detected	
Ova	Nil
Ascaris	Nil /HPF
Hookworm	Nil /HPF
Taenia	Nil /HPF
Trichuris trichiura	Nil /HPF
Enterobius vermicularis	Nil /HPF
Flukes	Nil
Others:	Nil
Larva	Nil
Cysts/Trophozoites	Nil
Giardia lamblia	Nil
Entamoeba histolytica	Nil

# Hematology Analysis Report

PAWAN  
Male

AL-WB-CD  
TW-25002239

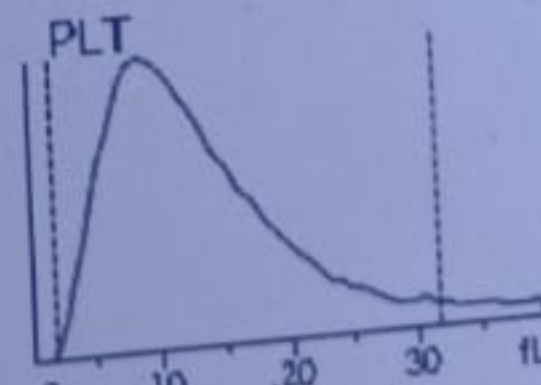
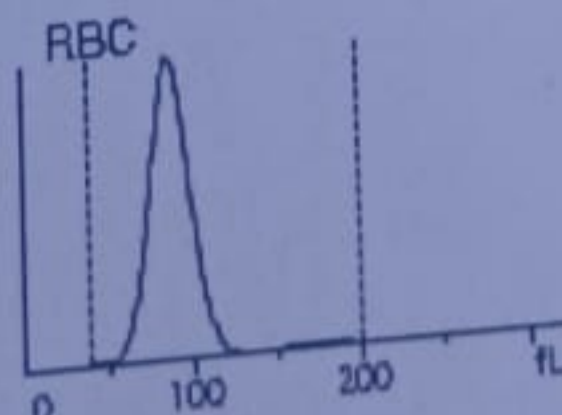
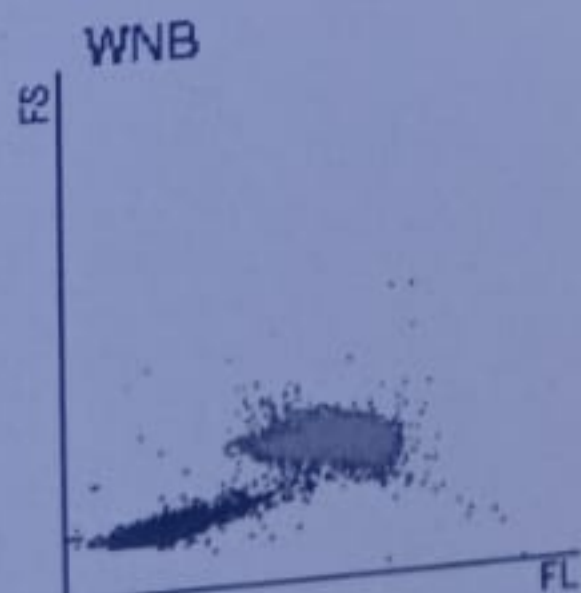
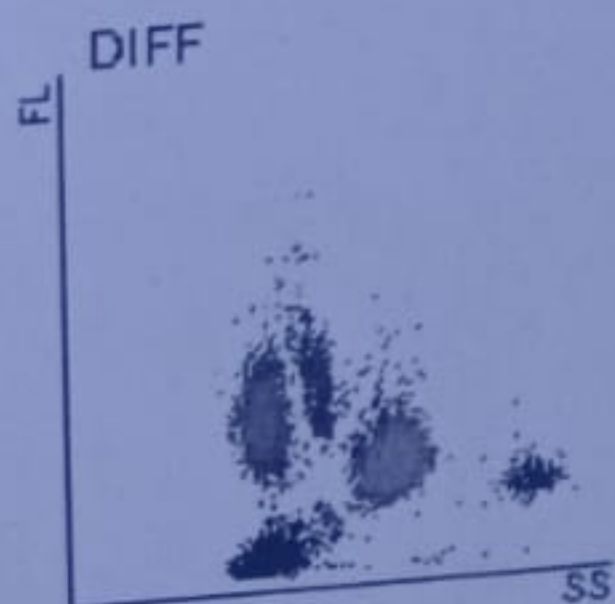
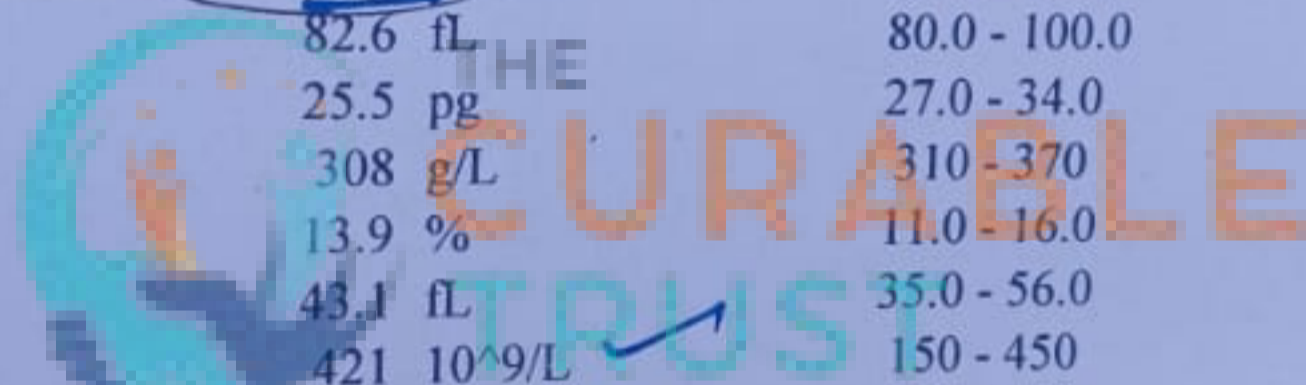
Last Name: **KUSH**  
Age: 4Year(s)  
Bed No.:

Date of Birth:

Sample ID: M.41  
Patient ID: 108029410  
Date of Analysis: 14-05-2026 11:37  
Ward:  
Tube Pos.: 1-1

Para.	Result	Unit	Ref. Ranges
1 WBC	15.53	$10^9/L$	4.00 - 12.00
2 Neu#	11.49	$10^9/L$	2.00 - 8.00
3 Lym#	3.11	$10^9/L$	0.80 - 7.00
4 Mon#	0.65	$10^9/L$	0.12 - 1.20
5 Eos#	0.25	$10^9/L$	0.02 - 0.80
6 Bas#	0.03	$10^9/L$	0.00 - 0.10
7 IMG#	0.12	$10^9/L$	0.00 - 999.99
8 Neu%	74.0	%	50.0 - 70.0
9 Lym%	20.0	%	20.0 - 60.0
10 Mon%	4.2	%	3.0 - 12.0
11 Eos%	1.6	%	0.5 - 5.0
12 Bas%	0.2	%	0.0 - 1.0
13 IMG%	0.8	%	0.0 - 100.0
14 RBC	5.07	$10^{12}/L$	3.50 - 5.20
15 HGB	12.9	g/dL	12.0 - 16.0
16 HCT	41.9	%	35.0 - 49.0
17 MCV	82.6	fL	80.0 - 100.0
18 MCH	25.5	pg	27.0 - 34.0
19 MCHC	308	g/L	310 - 370
20 RDW-CV	13.9	%	11.0 - 16.0
21 RDW-SD	43.1	fL	35.0 - 56.0
22 PLT	421	$10^9/L$	150 - 450
23 MPV	12.8	fL	6.5 - 12.0
24 PDW	16.1		15.0 - 17.0
25 PCT	0.538	%	0.108 - 0.282
26 P-LCC	192	$10^9/L$	30 - 90
27 P-LCR	45.6	%	11.0 - 45.0
28 NRBC#	0.00	$10^9/L$	
29 NRBC%	0.00	/100WBC	
* 30 HFC#	0.02	$10^9/L$	

Flag  
Neutrophilia



अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029  
 All India Institute of Medical Sciences, New Delhi-110029

इन्टेक आउट चार्ट एम.आर.-6  
 Intake Output Chart M.R.-6

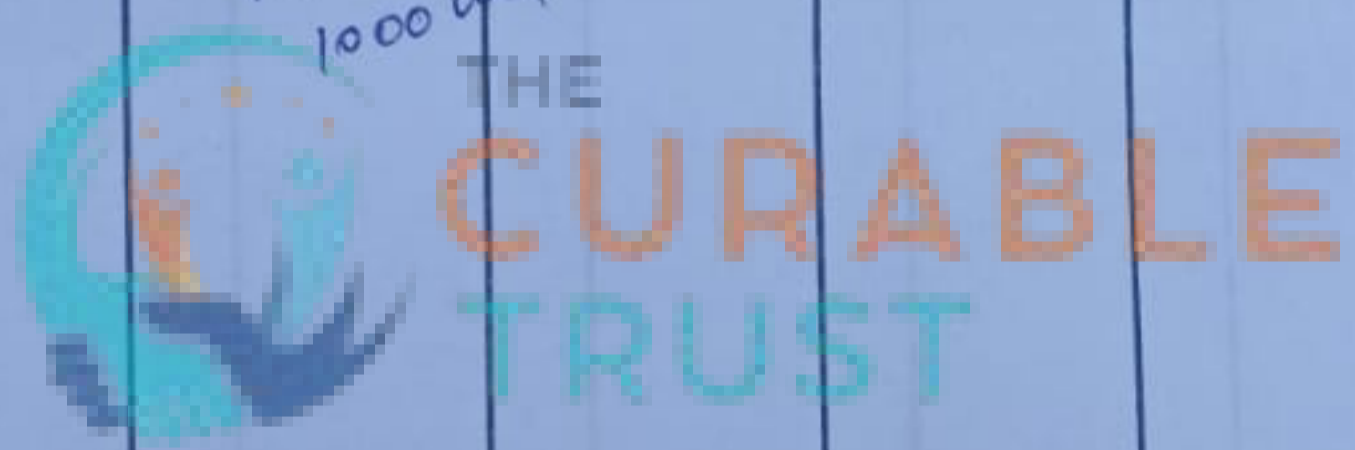
*Pawan kumar* 14/11

तारीख DATE 14/11/20  
 समय 8 बजे प्रातः  
 Time 8 A.M. every morning

सभी प्रविष्टियां मि.ली. में  
 All entries to be made in ml. (milli liters)

TIME PREVIOUS DAY TIME	INTAKE						OUTPUT			OTHERS
	ORAL		I.V.		OTHERS		URINE	SUCTION	DRAINAGE	
	Type	Qty.	Type	Qty.	Type	Qty.				
8 A.M.										
9										
10										
11										
12 Noon										
1 P.M.										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
Midnight										
1 A.M.										
2										
3										
4										
5										
6										
7										
TOTAL										

*Lison  
 1000 ml*





DEPART

WC-1405260721 108029410

अखिल भारत

All India Institute

PAWANKUSH



रसायन विभाग

LABORATORY MEDICINE

नगर, नई दिल्ली-११००२९

ANSARI Nagar, New Delhi-110029

रक्त रसायन / BLOOD CHEMISTRY

नाम/NAME

Pawam kush

आयु/Age

5yr

लिंग/Sex

M

UHID NO. 108029410

OPD / WARD

UNIT

BED NO.

Date 14/05/2026

Diagnosis

&

Clinical

Note :-

Signature

Name of Medical Officer

Time of

Specimen Collection

Time of Receiving Specimen

For Lab. Use only

Lab. Ref. No.

INCOMPLETE FORM WILL NOT BE ACCEPTED

Patient to Report Fasting

THE CURABLE TRUST

1256

Plan:

11:30 AM  
Plan

- ① inj Emset 3mg 1/2 stat
- ② inj Pantop 20mg 1/2 stat
- ③ IVF DNS (potassium free) @/
- ④ ORS 1 glass after each loose stool
- ⑤ Syntu (172) 5ml 50 x 14 days
- ⑥ Paed Nylma 14d.
- ⑦ 4r suposi / med of Asitū tap / oral intake 4r

Dr Akanksha  
Senior Resident  
Dept. of Pediatrics  
AIIMS, New Delhi-110029



THE CURABLE TRUST

ORS → 200 ml every loose stool

2:30 PM

IVF

R2

(500 + 500)

1000 ml

IV over 4 hrs

Dr Ak

VISHRAM SADAN  
ANSARI NAGAR, NEW DELHI-110029



RECEIPT NO: 1778914324341  
BOOKING NO: 1778908729  
RECEIPT TYPE: NEW\_BOOKING\_RECEIPT

PATIENT DETAILS

Name: PAWAN KUSH	
UHID: 108029410	Address: VILL+POST AMARPUR^DISTT SAHARSA^^5^852202^^91^

BOOKING DESCRIPTION

Sadan-Room & Category	Check-In	To Date	Amount
SSVS- Room:C-6B (Semi-Dormitory) Neha Kumari, [F] [Sister] 14Yrs , Id:4786	12:22 16/05/26	23/05/26	280
SSVS- Room:C-6C (Semi-Dormitory) Gajendra Yadav, [M] [Father] 43Yrs , Id:1371	12:22 16/05/26	23/05/26	280
SSVS- Room:C-6A (Semi-Dormitory) Tetri Devi, [F] [Mother] 60Yrs , Id:6189	12:22 16/05/26	23/05/26	280
SSVS- Room:C-6D (Semi-Dormitory) Khushboo Kumari, [F] [Sister] 19Yrs , Id:9802	12:22 16/05/26	23/05/26	280
		Total	1120 Rs.

रसीद/RECEIPT

15750

पंजी. संख्या/Registration No.: 565

क्र. सं./Sr. No. \_\_\_\_\_

New Aded

दिनांक/Date: 16/05/26

श्री/श्रीमती/कुमारी \_\_\_\_\_

से \_\_\_\_\_

Received with thanks from Shri / Smt. / Kumari Teteri Devi

डोरमेटरी/सेमीडोरमेटरी/कमरा सं. C-6C 4Brd

में दिनांक \_\_\_\_\_ से \_\_\_\_\_ तक

RVS

SVS

SSVS

Dormitory /Semi Dormitory/ Room No. \_\_\_\_\_ dated from 16/05/26 to 22/05/26

दिनों के लिए \_\_\_\_\_ व्यक्तियों के रहने हेतु किराए के रूप में रु. \_\_\_\_\_

days(s) for 7 days (4/24/26) on account of rent for person(s) in Rs. 11201-

रूपये \_\_\_\_\_ सधन्यवाद प्राप्त किए।

(Rupees One thousand one hundred Twenty only)

हस्ताक्षर/Signature \_\_\_\_\_

(प्रबंधक)/(Manager)

THE मोहर/Stamp

रु. \_\_\_\_\_

Refunded Rs. \_\_\_\_\_

(रूपये)

(Rupees)

दिनांक \_\_\_\_\_

के वापसी वाउचर सं. \_\_\_\_\_

) Dated \_\_\_\_\_

vide Refund Voucher No. \_\_\_\_\_

द्वारा वापस किए गए।

दिनांक \_\_\_\_\_

23/5/26

को \_\_\_\_\_

at \_\_\_\_\_

बजे कमरा खाली किया गया।

1. Vacated on \_\_\_\_\_  
किसी भी पक्ष की तरफ कोई बकाया नहीं है और कमरा/सेमीडोरमेटरी/डोरमेटरी दिनांक  
को बजे खाली किया गया/की गई।

2. No dues from either side & Vacated Room/Semi Dormitory/Dormitory on \_\_\_\_\_ at \_\_\_\_\_  
ठहरने की अवधि बढ़ाई गई (पिछली रसीद सं. \_\_\_\_\_) दिनांक \_\_\_\_\_

3. Stay extended (Previous Receipt No. \_\_\_\_\_) Dated \_\_\_\_\_

हस्ताक्षर/Signature \_\_\_\_\_

(प्रबंधक)/(Manager)

मोहर/Stamp

कृपया पृष्ठ के पिछली तरफ छपे निर्देशों को ध्यानपूर्वक पढ़ें।  
PLEASE READ INSTRUCTIONS CAREFULLY PRINTED OVERLEAF



अखिल भारतीय आयुर्विज्ञान संस्थान  
ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS) New Delhi, null  
नकदी रसीद / CASH RECEIPT  
नियुक्ति पर्चा

26588500  
26588700

रसीद संख्या / Receipt No.:

APPOINTMENT SLIP



जमाकर्ता / Received From:

ओ. पी. डोगे / Dr. P. D. Doga / Ms. HEMA YADAV BEB SWNSC (Follow-up)

रोगी प्रकार / Patient Type: General ₹ 0.0  
कक्षा संख्या / Room No.:

के नाम / Department Name: Paediatrics/Paediatric

Reporting Time: BATCH A 8:00 AM-9:00 AM  
Appointment Date: 01/06/2026

Doctor Name	Dr. SR/JR UNIT 1 ROOM NO 4	Appointment Request date	25/05/2026
Name of Patient	MASTER. PAWAN KUSH	Appointment No	2026052512691
Sex	Male	Age	5 years 10 months 25 days
Contact Details	Mobile: XXXXXXXX424	Request Mode	counter
Queue No:	F4		

Remarks:

Your UHID Is : 108029410.

Book Online appointment from : <https://ors.gov.in> Developed by NIC

भुगतान का प्रकार / Payment Mode :

रुपये / INR (Rs.):

रुपये शब्दों में / Rs. in Words

यह कम्प्यूटर द्वारा जारी की गई रसीद है और इसमें हस्ताक्षर और मोहर अपेक्षित नहीं है।

THIS IS COMPUTER GENERATED SLIP AND DOES NOT REQUIRE SIGNATURE AND STAMP



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

अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

बाल चिकित्सा विभाग, UHID:108029410

कमरा / Room C-210

Queue / संख्या F4

Unit-I, Paediatric,



एकक / Unit  
विभाग / Dept.

Dept No: 20250030000110

सं/O.P.D.

Master: PAJANKUS

PAWAN KUSH

नाम /

S/O GAJENDER YADAV  
5Y 10M 18D / M/(पुरुष)  
VILL+POST AMARPUR, DISTT SAHARSA,  
BIHAR. Pin.852202. INDIA

सोम, गुरु, Mon, Thu (सोम, गुरु)

पता / Address

Follow Up Patient

General Rs. 0



Reporting: 08:27:51  
18/05/2021

निदान / Diagnosis

SRNS-UR / CrI-NR / randomized in CrI arm / NR at 6 months

दिनांक / Date

4

15-11

Ht-99cm

Rt-95/62

उपचार / Treatment

Received 2 Doses of Ritux  $\leq$  29.4.26,  
6.5.26.

Rx/

1) Capringof 2mg ——— 2.5mg

2) Tab Prednisolone 7.5mg AD

3) Tab Envars 5mg PO QD

4) syp Calcium 5ml QD

5) syp Septhan CS 5ml AD

6) Tab Meeobalamin 1000mg  $\times$  15 days

7) syp Vitrofol 5ml QD

R/A 2 weeks

CBC, ECT, UET

serp/albumin

24 hour metallo / anal

CLEAN AND GREEN AIIMS / एम्स का यही 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)



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