



# DEPARTMENT OF PATHOLOGY

LADY HARDINGE MEDICAL COLLEGE & SMT. S.K. HOSPITAL, NEW DELHI

## CYTOLOGY REPORT FORM

Name of Patient Yash Sex Male Age 5yr Regd. No. 19.22.2

Hospital KSCH Ward U2 PMDC Dr. In-Charge .....

Case No 1050 Smear No 2354-53/24

Received on 04/07/24 Reported on 04/07/24

Investigation asked for :- CSF for Malignant cytology (F2354-53/24)

**Report :-**  
Gross : Received 500  $\mu$ l of clear fluid.  
TLC = 21 cells/ $\text{mm}^3$   
DLC = Lymphocytes 87% Macocytes 13%

Microscopy :- Smears examined show many mature and transformed lymphocytes along with many bare nuclei.

Advice - In view of increased cell count, & bare nuclei  
Close follow up and repeat CSF examination.

*Nangia*

Dr. Anita Nangia  
Director In-charge  
4/7/24

SPECIAL HEMATOLOGY LABORATORY

DEPARTMENT OF PATHOLOGY

LADY HARDINGE MEDICAL COLLEGE AND ASSOCIATED HOSPITALS, NEW DELHI

FLOW CYTOMETRY REPORT

LAB REFERENCE NO: 180/24

BMA: 292/24

DATE: 11/05/24

NAME	AGE/SEX	REG NO	HOSPITAL	UNIT	DOCTOR INCHARGE
Yash	5y/M	12100	KSCM	U1	—

Type of specimen: Bone Marrow Aspirate Total cell count of sample:  $26.9 \times 10^3/\mu\text{l}$

Percentage of gated population: 79.57% Gating strategy: FSC VS SSC: CD45 vs SSC

Intensity of CD45 expression on Gated population: Dim

MARKERS	RESULT	INTENSITY	INTERPRETATION
<b>T CELL MARKERS</b>			
cCD 3	—	—	Negative
CD5	—	—	Negative
CD7	—	—	Negative
sCD3	—	—	Negative
CD4	—	—	Negative
CD8	—	—	—
CD1a	—	—	—
<b>B Cell Markers</b>			
CD19	91%	Moderate	Positive
CD79a	25%	Dim	Positive
CD10	72%	Dim to Moderate	Positive
CD22	—	—	Negative
CD20	—	—	Negative
sigM	—	—	—
CD19 & CD10 coexpression	70%	—	—
<b>Myeloid Markers</b>			
CD13	—	—	—
CD33	—	—	—
CD14	—	—	—
CD15	—	—	—
MPO	—	—	Negative
<b>Immaturity Markers</b>			
HLA-DR	94%	Moderate to bright	Positive
CD34	92%	Moderate	Positive
CD117	—	—	Negative
TdT	—	—	—



PLS - Smears show leucopenia with presence of 5% blasts.

PLC - Blast 05 St 01 N 23 L 70 M 01 E 00

Red blood cells are predominantly normocytic normochromic. Platelets are adequate.

Bone marrow aspirate - Smears show no particles, however are cellular.

There is presence of 80% blasts. These blasts are 2-4 times the size of a small mature lymphocyte, have high nucleo-cytoplasmic ratio and scant agranular cytoplasm. The nuclei are round to ovoid with irregular nuclear membrane, condensed chromatin and 0-2 inconspicuous nucleoli. Erythroid and myeloid series are suppressed.

Occasional megakaryocytes are seen.

Myelogram - Blast 80 My 01 M 01 St 03 N 00 L 10 NRBC 05

Bone marrow imprint - Smears are showing poorly preserved morphology of cells, however many blasts are seen.

Impression - MPO-negative acute leukemia. Based on morphology and immunophenotyping, suggestive of CALLA positive B-cell Acute lymphoblastic leukemia.

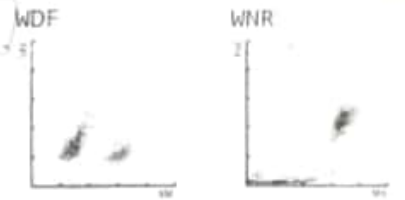
Sample No 54/4255 Patient ID: \_\_\_\_\_ Ward: \_\_\_\_\_ Rack: 14 Position: 1 2024/05/10 11:41 WB  
 Name: \_\_\_\_\_ Doctor: \_\_\_\_\_ Birth: \_\_\_\_\_  
 Sample Comment: \_\_\_\_\_ Nickname: X. 1980-1-R

Positive Diff. Morph. Count

B.M.A - 092/27

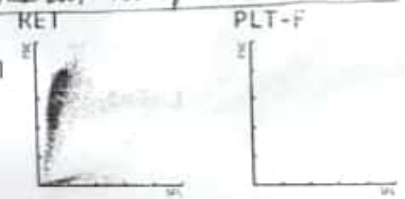
Yash  
 Sy/Male  
 12100  
 K5CH  
 VIC3

WBC	2.79	[10 <sup>3</sup> /uL]	
RBC	2.31	[10 <sup>6</sup> /uL]	
HGB	6.3	[g/dL]	
HCT	19.0	[%]	
MCV	82.3	[fL]	
MCH	27.3	[pg]	
MCHC	33.2	[g/dL]	
PLT	164	[10 <sup>3</sup> /uL]	
RDW-SD	56.9	[fL]	
RDW-CV	19.3	[%]	
PDW	8.8	[fL]	
MPV	9.6	[fL]	
P-LCR	21.3	[%]	
PCT	0.16	[%]	
NRBC	0.01	[10 <sup>3</sup> /uL]	0.4 [%]
NEUT	0.70	[10 <sup>3</sup> /uL]	25.0 [%]
LYMPH	1.97	[10 <sup>3</sup> /uL]	70.6 [%]
MONO	0.08	[10 <sup>3</sup> /uL]	2.9 [%]
EO	0.01	[10 <sup>3</sup> /uL]	0.4 [%]
BAZO	0.03	[10 <sup>3</sup> /uL]	1.1 [%]
IG	0.03	[10 <sup>3</sup> /uL]	1.1 [%]
RET	1.48	[%]	0.0342 [10 <sup>6</sup> /uL]
IRF	26.4	[%]	
LFR	73.6	[%]	
MFR	13.1	[%]	
HFR	13.3	[%]	
RET-He	27.1	[pg]	
IPF		[%]	



2 PLS + 2 BMA + 10 MI + 1 MPO

MPO - Negative  
 Bn Iron - No particles seen.



WBC-BF	[10 <sup>3</sup> /uL]	
RBC-BF	[10 <sup>6</sup> /uL]	
MN	[10 <sup>3</sup> /uL]	
PMN	[10 <sup>3</sup> /uL]	
TC-BF#	[10 <sup>3</sup> /uL]	



WBC IP Message: Neutropenia, Blasts/Abn Lympho?, Atypical Lympho?  
 RBC IP Message: Anemia  
 RET Abn Scattergram

*[Signature]*  
 11/5/24  
 Dr. Shivani Sengal  
 Assistant Professor

रोग का संक्षिप्त विवरण / Brief Clinical History & Examination :

K/C/O B cell ALL (SR) completed CP 01/08/2024

Now fever x 2 days

H/O ear discharge - white from (R) ear

H/O cough ⊕, & cough ⊕

↓  
P ⊕ (R) ear mucoid discharge ⊕

TALN ⊕ reacting size 1.5 x 1.5 cm

received Augmentin x 2 days

↓

Acute otitis media - cephalosporin & Amoxicillin

5/8/24

7.6 → 2250  
ANC 80 ← 13K

जांच / Investigation :

Nocturnal cough / mastoiditis

8/8/24 → ENT opinion discharge out

up antibiotic 30 TOG

8/8/24 → Blood dryed out  
fever spikes out

LW ⊕ swelling & tenderness ⊕

↓

vancomycin, meropenem added

↓

fever ↓ sed. & swelling redness

↓

child improved

↓  
D/S

9/8/24

Hb: 7.6

TLC: 2.42K

ANC: 240

monocyte: 340

plt: 30K



Govt. of India  
**KALAWATI SARAN CHILDREN'S HOSPITAL**  
**INVESTIGATION RECORD SHEET**

17819  
 C.R. No.

Name : Yash ↓ Age : 5y/m Sex :

Date	22/6	23/6	24/6	26/6	27/6	29/6						
HB/HCT	7 22.9		7.7 24.6	6.8 22	9.1 30	9.0 28						
TLC/DLC Arrc	1900 440		3200 270	12750 370	17120 560	9580 660						
Platelet Count	1.86L		1.2L	82k	73k	1.06L						
Urea		28	17	<del>20</del> 13.1		21						
Creatinine		0.42	0.10	<del>0.19</del> 0.2	0	0.22						
Na		128		<del>131</del> 130	135	137						
K		3.7		<del>3.2</del> 0.6	3.6	5.4						
Serum Bilirubin Direct / Indirect		0.65 0.34		0.44 0.16		0.54 0.22						
SGOT		71		83		101						
SGPT		24		21		54						
Alk Po <sub>4</sub>		119	50	126		175						
S. Protein/Alb		6.6 3.4				5.7 3.1						
S. Calcium/l		8.7 2.6	6	7.0 4.4		8.8 2.8						
Phosphate		3.7	3.5			3.8						
RBS <u>CRP</u>		60.14			11	60						
Lipid Profile <u>UA</u>			0.6									
CSF M/E												
B/C		<u>24/6/24</u>										
Any Other Fluid Examination		widal - neg		Ernat - neg		Asmp - no up den						
PS/RMAT <u>16/6</u>		BDCS of site										
DENGUE SEROLOGY <u>20/6</u>		BDCS → sterile										

Govt. of India  
**KALAWATI SARAN CHILDREN'S HOSPITAL**  
**INVESTIGATION RECORD SHEET**

24176  
 C.R. No. 23814

Name: Yash

Age: 5y

Sex: m

Date	05/9	6/9	8/9	8/9	9/9								
HB/HCT	7.4 22.2	6.7 20.1	8.2 24.5		8.33 24.8								
TLC/DLC ANC	2120 650	2440 910	2000 640		1360 350								
Platelet Count	60k	31k	17900		19.8								
Urea	29		3.5	8	15.4								
Creatinine	0.31		0.24	0.2	0.16								
Na	134		133	134	136								
K	3.7		2.9	2.8	3.03								
Serum Bilirubin Direct / Indirect	1.3 0.5		1.09 0.41		0.44 0.22								
SGOT	27		18		19.2								
SGPT	14		6		12.5								
Alk Po <sub>4</sub>	80		72		78								
S. Protein/Alb	6.8 3.9		6.6 3.6										
S. Calcium/l	8.9		9.4 3.9										
Phosphate	4.0		3.9										
RBS <del>red</del>	79.19		51.4		18.9								
Lipid Profile													
CSF ME 6/9 BDL W/C	- No red flag. Answered till 12/9/2024												
Any Other Fluid Examination													
CS/RMAT ENGUE EROLOGY													



Sample No.: YASH 25819 U2C5  
 Patient ID:  
 Name:  
 Sample Comment:

Ward: Rack:

Position: 03/10/2024 12:54  
 Doctor:  
 Birth: Sex:  
 Nickname: XN-1000-1-

Physical App  
 Albumin

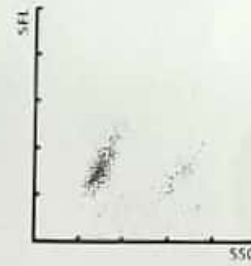
**Positive**

Diff. Morph. Count

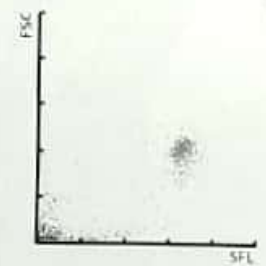
WBC	0.82	[10 <sup>3</sup> /uL]		
RBC	2.41	[10 <sup>6</sup> /uL]		
HGB	7.0	[g/dL]		
HCT	21.7	[%]		
MCV	90.0	[fL]		
MCH	29.0	[pg]		
MCHC	32.3	[g/dL]		
PLT &F	23	[10 <sup>3</sup> /uL]		
RDW-SD	60.0	[fL]		
RDW-CV	19.6	[%]		
PDW	----	[fL]		
MPV	----	[fL]		
P-LCR	----	[%]		
PCT	----	[%]		
NRBC	0.01	[10 <sup>3</sup> /uL]	1.2	[%]
NEUT	0.21	* [10 <sup>3</sup> /uL]	25.6	* [%]
LYMPH	0.57	* [10 <sup>3</sup> /uL]	69.5	* [%]
MONO	0.03	* [10 <sup>3</sup> /uL]	3.7	* [%]
EO	0.01	* [10 <sup>3</sup> /uL]	1.2	* [%]
BASO	0.00	* [10 <sup>3</sup> /uL]	0.0	* [%]
IG	0.00	* [10 <sup>3</sup> /uL]	0.0	* [%]
RET	0.49	[%]	0.0118	[10 <sup>6</sup> /uL]
TRF	1.7	[%]		
LFER	98.3	[%]		
MFR	1.7	[%]		
HFR	0.0	[%]		
RET-He	32.9	[pg]		
IPF	5.5	[%]		
WBC-BF		[10 <sup>3</sup> /uL]		
RBC-BF		[10 <sup>6</sup> /uL]		
MN		[10 <sup>3</sup> /uL]		[%]
PMN		[10 <sup>3</sup> /uL]		[%]
TC-BF#		[10 <sup>3</sup> /uL]		

*R/v pt*

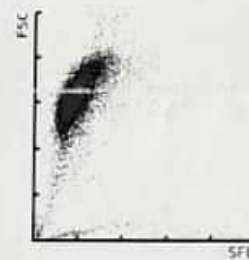
WDF



WNR



RET



PLT-F



RBC



PLT



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

RBC IP Message  
 Anemia  
 RET Abn Scattergram

PLT IP Message  
 PLT Abn Distribution  
 Thrombocytopenia



किया गया उपचार / Treatment Given :

Cefoperazone, Amikacin - 48 hrs  
Vancomycin, meropenem - 48 hrs.

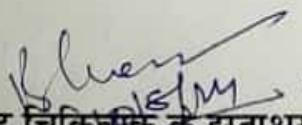
छुटी के समय परामर्श / Advise on Discharge :

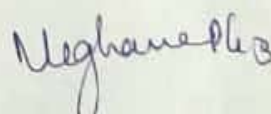
- ① Syp Augmentin (45mg/5ml) 5ml PO q8hly x 3 days
- ② eld mix biotic 30 g haly x 3 days
- ③ Syp septran 5ml PO q12hly sat  
8am.
- ④ Tab PCM (500 tabs) 1/2 tab PO BID if temp > 100.4°F more than  
6 hrs apart.
- ⑤ Review in Day care after 5 days - 16/10/24

छुटी के बाद ओ.पी.डी. में ..... / ..... पर सुबह 9.00 बजे कमरा नं. .... में आएंगे।

छुटी के बाद ..... bled ..... स्पेशल क्लिनिक में 2.00 बजे कमरा नं. .... 220 ..... में आएंगे।

अगला टीकाकरण ..... तारीख .....

  
वरिष्ठ रेजिडेंट चिकित्सक के हस्ताक्षर  
Signature of Senior Resident

  
कनिष्ठ रेजिडेंट चिकित्सक के हस्ताक्षर  
Signature of Junior Resident





# JEEVAN CARE FOUNDATION

Address:- 697, Village Madanpur Khadar, New Delhi 110076

Mail- Jeevancarefoundation@gmail.com

Reg No. 92

Ref. No. ....

Date 05/10/24

सेवा में

श्रीमान फाउंडर महोदय  
जीवन केयर फाउंडेशन,

महोदय,

मे लखे का पिता अमरपाल आपसे सहाय  
जोड़कर विन्ती करता हूँ मेरा लया  
यश जो कि बर्हात विमार है।  
वह ब्लड कैंसर जैसी समस्या से  
लड़ रहा है। हम अपने लखे की अधिक  
शप से मदद नहीं कर पा रहे हैं। कृपा  
करके आप हमारी मदद करें मे भैया  
परिवार आपका जीवन भर उपकार  
मनेबा। मे जीवन भर आभारी रहूंगा।  
कृपा करके मदद करें।



प्राथमिक  
अमरपाल