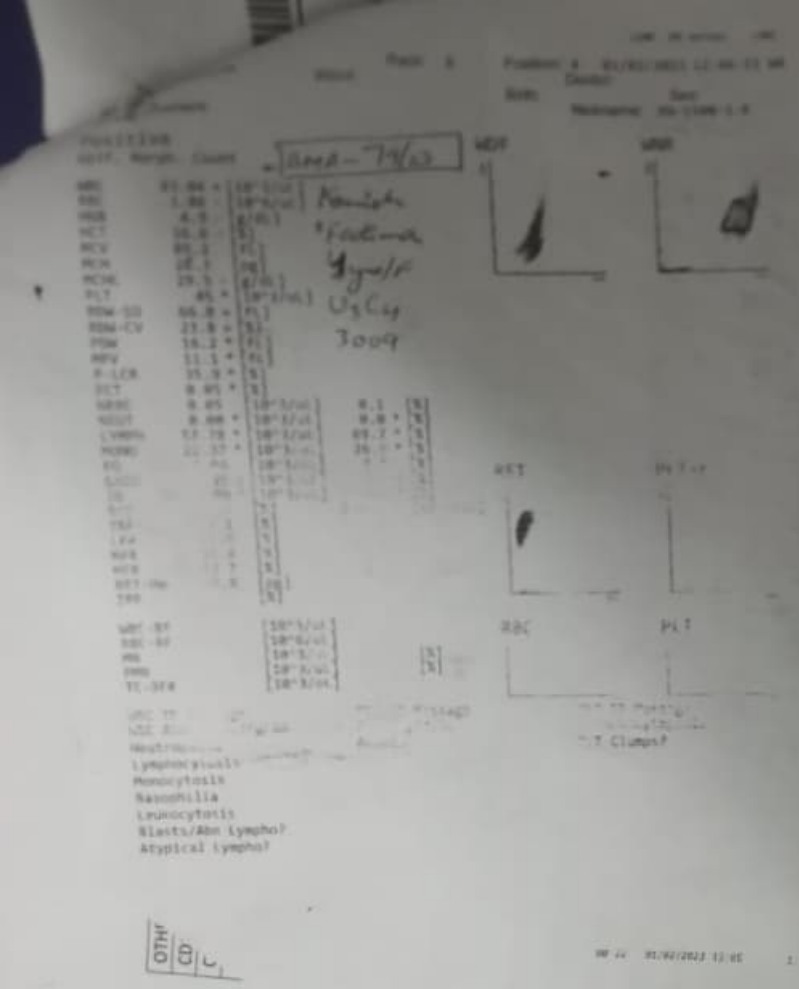


PBS - Sheet shows marked [illegible] with frequent 91% blasts are seen. The size of small medium lymphocytes, having high N/C ratio, scant agranular cytoplasm, round nuclei with many showing nuclear indentations and clefting, slightly clumped chromatin, inconspicuous 0-1 nucleoli.

DLC - Blasts 91 L8 N1

Morphology in conjunction with flowcytometric immunophenotyping (report attached) is suggestive of CALLA positive B-cell Acute Lymphoblastic leukemia

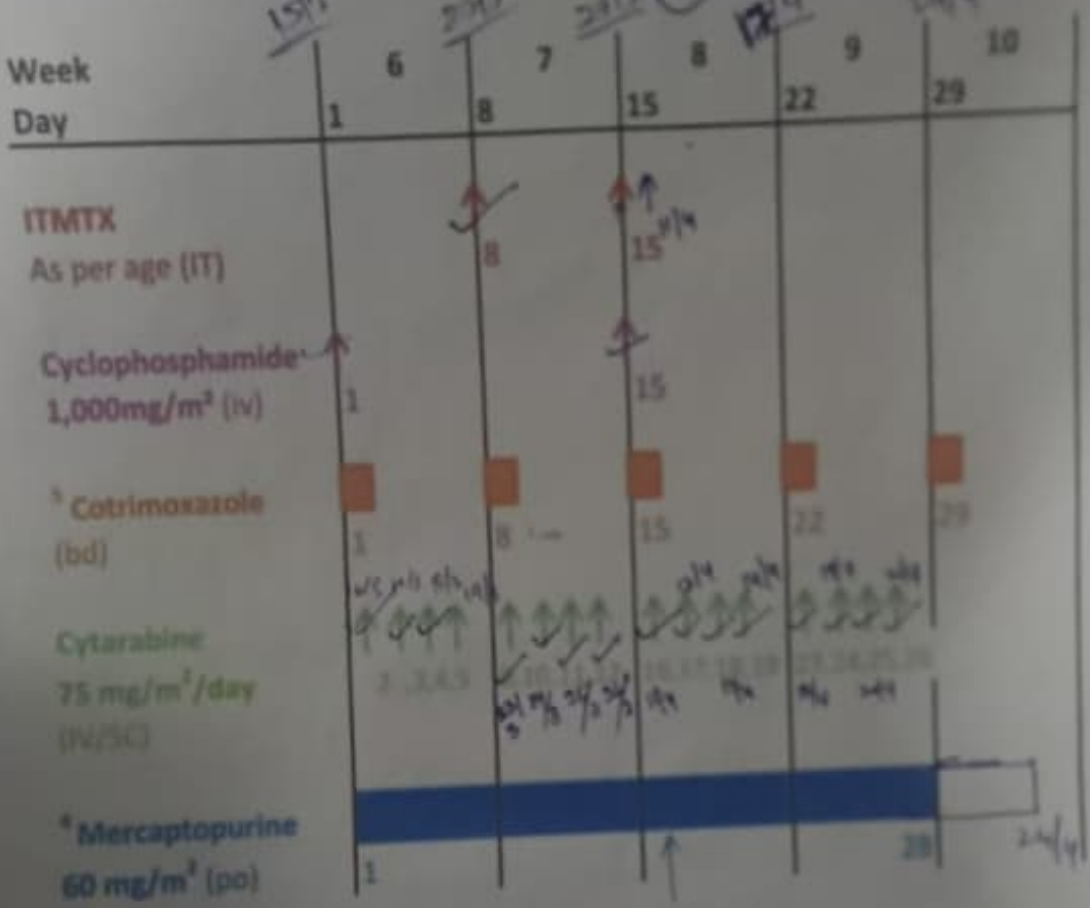
Dr

Kanith, 4y/F

B-cell ALL (IA)

BSA = 0.62 m²

Intermediate Risk, Consolidation Phase



*Mercaptopurine: 60mg/m²/day once at night.

Child admitted & FN from 29/3 – 6/4

Day 15 → 10/4/23 (modified date)

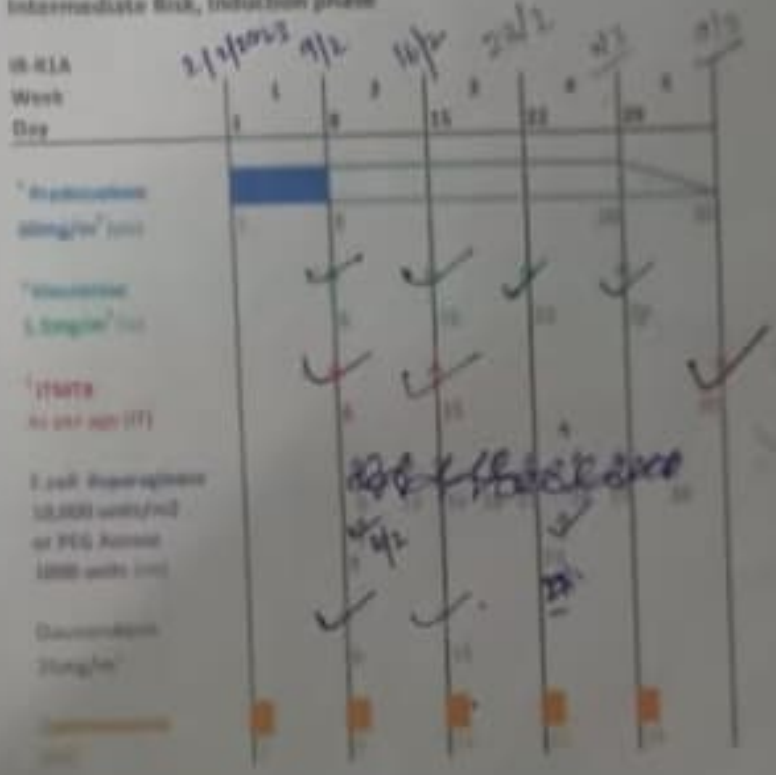
6 mp restarted on 10.4.23

Manual follow

4yr. IF

ALL (JR)

Intermediate Risk, Induction phase



Rx PC	Rx C SP
20 Blast | 200 cells	acellular
cytopaenias	PCR done

DEPARTMENT OF PATHOLOGY

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

CYTOLOGY REPORT FORM

Name of Patient Kanish Fatima Sex M Age 3yr Regd. No. —

Hospital LSCH Ward 4 2 Heart Dr. In-Charge —

Case No — Smear No 2689-90/23

Received on 22/3/23 Reported on 23/3/23

Investigation asked for :-

CSF for cytology (2689-90/23)

Report :- Gross: Received 0.5ml of clear fluid

TLC- 01 cell/mm^3

Microscopy:

Smears show only an occasional lymphocyte.

No blast seen in smear examined.

RSK
22/3/23

Dr Rakesh
Assistant Professor

DEPARTMENT OF PATHOLOGY

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

CYTOLOGY REPORT FORM

Name of Patient Hanuki Fatima Sex Fy Age F Regd No. 2005

Hospital LHMC Ward W2 Dr. In-Charge Dr. V Singh

Case No 394 Smear No 1168 - 1169/23

Received on 09/02/23 Reported on 09/02/23

Investigation asked for :-

CSF Cytology

Report :-

Gross - Received approximately 500 µl of clear fluid

Microscopy - Acellular smears.

Dr Rohit
Resident
09/02/23

Biochemistry Sheet

Date	Na/K	Urea/Cr	Bil (T) D/I	OT/PT	Uric acid	Ca^{2+}	IP	CRP	Interventions
29/1	145/4.3	5.6/0.7	0.2/0.08	31/32		9.8	4.3		
30/1	137/4.5	2.6/0.3	0.2/0.1	16/8	4	9.7/9.4	5.2	1.2	
1/2	139/4.2	38/0.3	0.3/0.1	17/6		4.9	5.6	1.8	
3/2	140/49	45/0.53	0.2/0.14	22/12	2.7	4.7	5.4	2.8	

Sample No 8/1435 | Rack 1 | Position 7 | [illegible]
Patient ID | Ward | Doctor
Name | Birth | Sex
Sample Comment | Nickname [illegible]

Positive

Diff. Morph. Count

WBC	1.20 -	[10^3/uL]		
RBC	2.77	[10^6/uL]		
HGB	8.3	[g/dL]		
HCT	26.4	[%]		
MCV	95.3	[fL]		
MCH	30.0	[pg]		
MCHC	31.4	[g/dL]		
PLT	19 *	[10^3/uL]		
RDW-SD	59.7 +	[fL]		
RDW-CV	18.8 +	[%]		
PDW	11.6 *	[fL]		
MPV	9.9 *	[fL]		
P-LCR	26.0 *	[%]		
PCT	0.02 *	[%]		
NRBC	0.00	[10^3/uL]	0.0	[%]
NEUT	0.12 *	[10^3/uL]	10.0 *	[%]
LYMPH	1.03 *	[10^3/uL]	85.8 *	[%]
MONO	0.05 *	[10^3/uL]	4.2 *	[%]
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	2.20	[%]	0.0609	[10^6/uL]
IRF	20.9	[%]		
LFR	79.1	[%]		
MFR	13.9	[%]		
HFR	7.0	[%]		
RET-He	40.4	[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

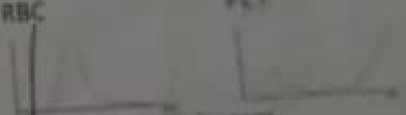
smear shows leucopenia with thrombocytopenia

RBC- shows normocytic normochromic (In 200 cells)

DLC - Blast 20
N 19
Lymph 16
Mono 1 in 100 WBC cells.

RET PLT-F

RBC PLT



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

RBC IP Message
Anemia

PLT IP Message
Thrombocytopenia
PLT Clumps?

Ds ABC

120/uL

SPECIAL HEMATOLOGY LABORATORY

DEPARTMENT OF PATHOLOGY

LADY HARDINGE MEDICAL COLLEGE AND ASSOCIATED HOSTPITALS, NEW DELHI

FLOW CYTOMETRY REPORT

LAB REFERENCE NO: 21/23 BMA: 79/23 DATE: 1/2/23

NAME	AGE/SEX	REG NO	HOSPITAL	UNIT	DOCTOR INCHARGE
Yamish Jaitma	44Y/F	3004	KEM	U3	

Type of specimen: Peripheral blood

Total cell count of sample:

Percentage of gated population: 87 %

Gating strategy : FSC VS SSC

SSC VS CD

Intensity of CD45 expression on Gated population: Dim

MARKERS	RESULT	INTENSITY	INTERPREATATION
T CELL MARKERS			
cCD 3			Negative
CD5			-
CD7			Negative
sCD3			Negative
CD4			-
CD8			-
CD1a			
B Cell Markers			
CD19	98 %	moderate	Positive
CD79a	97 %	moderate	Positive
CD10	99 %	bright	Positive
CD22	34 %	dim	Positive
CD20	-	-	Negative
sigM			
CD19 & CD10 coexpression	98 %	moderate to bright	Positive
Myeloid markers			
CD13			Negative
CD33			Negative
CD14			Negative
CD15			Negative
MPO			Negative
Immaturity markers			
HLA -DR	98 %	Bright	Positive
CD34	-	-	Negative
CD117			Negative
TdT			

Sample ID 3005 CSF B Not validated BF

--- Order ---

Reception date 09/02/2023 14:19:09 Receptionnumber 005005

Collection time

Location name Medical unit name

Doctor name

Sample comment

--- Patient ---

Patient ID Patient Name kaushi fatima

Sex Birth 44/F U2

Patient comment

--- Measurement ---

BF

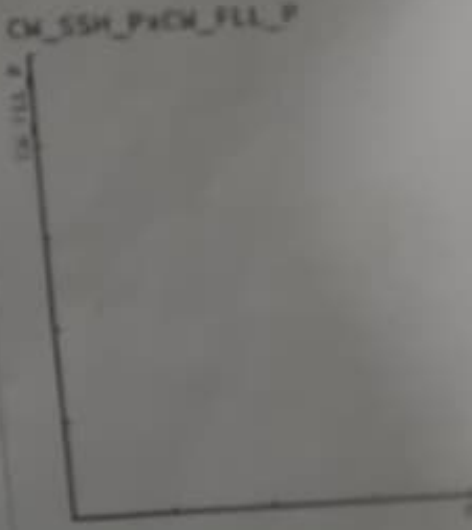
Analyzer name UF-5000

Analysis time09/02/2023 14:23:50

()

RBC	0.0	/µl
WBC	0.7	/µl
MN#	0.2	/µl
MN%	33.3	%
PMN#	0.4	/µl
PMN%	66.7	%
EC	0.0	/µl
TNC	0.7	/µl
BACT	4.3	/µl
DEBRIS	98.9	/µl

Dr CSF



--- Report comment ---

--- Rule comment ---

Sample No.: 8/1435
Patient ID:
Name:
Sample Comment:

8/1435

NAME: KAVISH FATIMA AYUB 3885 U
TEST: CBC 08/03/2023

Positive
Diff, Morph, Count

WBC	1.28 *	[10^3/uL]		
RBC	2.77	[10^6/uL]		
HGB	8.3	[g/dL]		
HCT	26.4	[%]		
MCV	95.3	[fL]		
MCH	30.0	[pg]		
MCHC	31.4	[g/dL]		
PLT	19 *	[10^3/uL]		
RDW-SD	59.7 *	[fL]		
RDW-CV	18.8 *	[%]		
PDW	11.6 *	[fL]		
MPV	9.9 *	[fL]		
P-LCR	26.0 *	[%]		
PCT	0.02 *	[%]		
NRBC	0.00	[10^3/uL]	0.0	[%]
NEUT	0.12 *	[10^3/uL]	10.0 *	[%]
LYMPH	1.03 *	[10^3/uL]	85.8 *	[%]
MONO	0.05 *	[10^3/uL]	4.2 *	[%]
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	2.20	[%]	0.0609	[10^6/ul]
IRF	28.9	[%]		
LFR	79.1	[%]		
MFR	13.9	[%]		
HFR	7.0	[%]		
RET-He	40.4	[pg]		
IPF		[%]		

WBC-BF		[10^3/ul]
RBC-BF		[10^6/ul]
MN		[10^3/ul]
PMN		[10^3/ul]
TC-BFx		[10^3/ul]

[%]
[%]

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

RBC IP Message
Anemia

PLT IP Message
Thrombocytopenia
PLT Clumps?

WDR

RET

PLT-F

RBC

PLT

231

कलावती सरन बाल चिकित्सालय
KALAWATI SARAN CHILDREN'S HOSPITAL
बंगला साहिब मार्ग, नई दिल्ली-110001, Bangla Sahib Marg, New Delhi-110001

क्लीनिकल हिमेटोलाजी लैब
CLINICAL HAEMATOLOGY LAB

नाम /Name Kanish Fatima आयु /Age 1Yr/F लिंग /Sex

C.R. No. 8832 Consultant Dr Nilesh

Ward/OPD U2-Homat Unit/Bed No.

Date/Time 22/3/23

Nature of Anticoagulant EDTA/Citrate/Heparin/Nil

Diagnosis/History B-cell ALL (Rx) on DI for ccs - cyto. Signature of the Doctor

Today's Lab. Ref. No. Time of Receipt

INCOMPLETE FORM IS NOT ACCEPTABLE

IG		[10^3/uL]	[%]	
RET		[%]	[10^6/uL]	
IRF		[%]		
LFR		[%]		
MFR		[%]		
HFR		[%]		
RET-He		[pg]		
IPF		[%]		
WBC-BF	0.001	[10^3/uL]		
RBC-BF	0.000	[10^6/uL]		
MN	0.000	[10^3/uL]	0.0	[%]
PMN	0.001	[10^3/uL]	100.0	[%]
TC-BF#	0.001	[10^3/uL]		

WBC IP Message

RBC IP Message

RBC

PLT

PLT IP Message

00-33 23/01/2023 12:44

Rank: 12

Position: 5

Sex:

Sample Comment:

RMA - 161/23

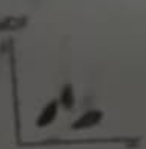
Positive

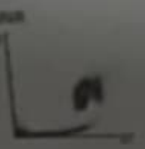
Diff. Morph. Count

Karishma

9 yr/F

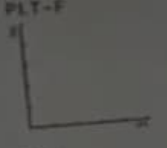
7394 pada

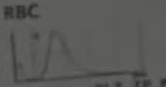


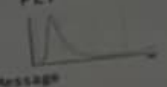


2PS + 2RMA

M:E RATIO = 1:86







PLT IP Message

WBC IP Message
Lymphocytosis
Monocytosis
IG Present
Atypical Lympho?

RBC IP Message
Anisocytosis
RET Abn Scattergram
Fragments?

PS - RBCs showing mild anisocytosis with presence of predominantly normocytic normochromic cells along with few macrocytes. WBC series showing mild shift to left. Platelets are adequate in number.

DLC - My1 Pt2 N69 L21 M8

BMA - Aspirate smears show no marrow particles, however are cellular. Erythroid series show normoblastic maturation. Myeloid series shows normal maturation. Megakaryocytes are adequate in number. No atypical cells, granulomas, parasites seen in the smears examined.

Myelogram - MyO6 MMyO8 EoB9 N39 L14 PlasmaC

Impression - Bone marrow in morphological remission.

Dr Sunita Sharma

Resp System

CVS

Provisional/Clinical Diagnosis: B-cell ALL (IR)

Basic Hematology Data (At admission)

- Hb: 3·8 gm dl
- TLC: 95,550 /mm3
- DLC: N 1% L 85% E ...% M ...% B ...% Myleo ...% Meta ...%
  Blasts ..... % n RBC ...../100wbc
- Platelets: 29,000 / mm3
- Smear Exam → Sparse RBC anisocytomes +.
  9% Blasts
- BMA (No – 79/23)---- Report
  CALLA ⊕ve B-cell ALL.
- Morphological Subtype
- Special Stains
  - MPO.....
  - PAS.....
  - Peroxidase.....
  - Other..... Flowcytometry
- Immunophenotyping: CALLA ⊕ve B-cell ALL.
- Chromosomal studies
  - Numerical
  - Structural
  - BCR-ABL
- BM biopsy (No) Imprint report
- BM Biopsy report

Diagnosis: BRAIN TB

HEMATOLOGY CASE RECORD

P[illegible] ANE[illegible]PA[illegible] NTS

Name: Kanisha Fatima Age/Sex: 4 yr 1 F

Father's Name: Sajid Ansari Date of Admission: 24/1/2023

Address: H No - A734, Rcm nagar, [illegible] Ranga[illegible]

Ph. / Mob: 7011849482

Blood Group: A+ve Weight: 15kg, Height: 104cm Surface Area: 0.67m²

SYMPTOMS: (mention duration of each symptom)

Fever: +

Pallor: +

Skin bleeds: +/-

Epistaxis: +

Other bleeds: -

Lymphadenopathy: +

Bone pains: -

Joint pain: -

Eye Swelling: -

SIGNS

Pallor: +

Skin bleeds: -

Lymphadenopathy (size/ sites): post cervical LAP 2x2cm

Joint swelling: -

Liver (cms): 3cm

Spleen (cms): 4cm

Other lumps: -

Meningeal sings/Focal: -

Fundus: -

Head circumference: -

Facial dysmorphism (compare with photograph of a patient with FA):

-

DR.DANGS LAB

Dr. Manju Dang
M.D. (Pathology)

Prof (Dr.) Navin Dang
M.D. (Microbiology)

Dr. Manavi Dang
M.D. (Pathology)

Dr. Arjun Dang
M.D. (Pathology)

Lab Ref. No	SDA230003187	Centre	DR DANGS LAB
Name	MISS. KANEEZ FATIMA	Client	CAN KIDS
Age / Gender	4Y 0M 0D/FEMALE	Collection Time	09-03-2023 04:36 PM
Ref. By Dr	KALAWATI HOSPITAL	Reporting Time	11-03-2023 05:34 PM
		Report Status	Final Report

DEPARTMENT OF HAEMATOLOGY

MINIMAL RESIDUAL DISEASE (MRD)

Flow ID: 2303F047M034

Clinical History: Case of B-ALL, IR. MRD evaluation at end of induction.

Specimen: Bone marrow in EDTA.

TLC in flow-cytometry bone marrow specimen – 44,440/ul.

CD markers used: Surface: CD45, CD19, CD10, CD34, CD38, CD58, CD73, CD86, CD66c, CD20, CD81 and CD123.

Descriptive summary:

8-colour, 3-laserflowcytometry done on a BD FACS CANTO™ II flow cytometer. Analysis was done on FACS Diva™ v8.0.3 software.

Gating Strategy: The tubes were run till empty/ acquisition of a minimum 2 million events in each tube. ~2.0 million events could be acquired. Exclusion of doublets on FSC-A vs FSC-H plot followed by exclusion of debris on the FSC vs SSC was done. Populations were gated on CD45 vs CD19 plot. Cells with abnormal expression of surface markers (expression pattern different from normal 'B' precursors and LAIPs) were looked for. The final MRD population is calculated with respect to nucleated cell population obtained from Syto13 tube.

Total CD19 positive events: 10,292.

Hematogones are almost nil and **myeloblasts** constitute 0.07% of all cells.

On extensive analysis of these 'B' cells, **no distinct cluster of cells identified which shows abnormal expression of leukemic markers.**

Impression - The flow-cytometry immune-phenotyping analysis of bone marrow specimen in a case of B-ALL do not show any evidence of Minimal residual disease.

Limitation: Diagnostic sample not available.

*** End Of Report ***

DR. SHIKHA GARG
M.D.(PATHOLOGY)

DR. MANAVI DANG
M.D. (PATHOLOGY)

Hcw.

- Liver > mid-umbilicus ..yes / no
- Spleen > mid-umbilicus Hcw.
- AP > 5 cms

- IPT: pre B cell/ T cell/ other.....

- D 35 Marrow
- D 35 MRD
- Risk category

FINAL DIAGNOSIS: B-cell ALL [illegible] IR.

- Date treatment started:
  - ALL Induction (SR/ IR/ HR).....

- RISK ASSESSMENT: (post induction).....
- Final protocol:.....

Reading from 4 out of 5

B-cell ALL

(IR)

Acute lymphoblastic Leukaemia

Age at Diagnosis: 4 yrs 1 m

Presentation: Complaints of fever

Initial TLC: 96500

CXR: >1/3 Yes/No

Liver: Bulky Yes/No

Spleen: Bulky Yes/No

B/L testis: normal/Enlarged NA

Bone Marrow/Peripheral Blood: Normal hematological picture. Blasts.

Flowcytometry/IPF: MRD ⊖ CMLA ⊖ B cell ALL

Cytogenetics: negative

1st CSF: TLC/DLC/RBCs 0/0

Malignant cells — acellular

Day 8 Absolute Blast Count: 120/cu.

Day 35: Bone Marrow — morphological Remission

MRD - negative

EOC (T-ALL/Refractory): Bone marrow

MRD

Initial Risk IR

↓

Final Risk IR

- CSF _____ CNS Status _____
- FNAC (No.....
- LN Biopsy: (Yes.....
- D 8 PS blasts(exact number).....
- D 14 marrow: (with percentage of blasts).....
- OTHER TESTS
- Mix test.....
- HIV.....
- HBsAg.....
- HCV.....
- LFT: Bil T 0.7 D 0.1 I ___ SGOT 17 SGPT 7.5 ALP 147
- KFT ___ Urea 5.6 Creatinine 0.7 Uric Acid 3.5
- S Calcium 9.8 Phosphorus 4.3
- CXR.....
- Skeletal Survey.....
- USG Abdomen.....
- CT.....
- PET Scan: (date).....
- RISK ASSESSMENT:
  - Initial:
    - Age: < 1 yr/ ≥1 <10 yr/ ≥ 10 yr
    - WBC (presentation): < 50,000/mm3/ 50,000-100,000/mm3/ >100,000/mm3
    - Bulky disease:

			Negative
OTHERS			
CD11b			
CD11c			
CD56			
CD16			
GLYCOPHORIN			
CD41			

Impression:

Flow cytometric analysis reveals approximately 87 % of blasts showing

Bright expression of HLADR, CD10

Moderate expression of CD79a, CD19

Dim expression of CD22

Negative for MPO, CD11b, CD13, CD14, CD15, CD33, CD34, CD117

Co-expression of CD3, CD5, CD7, CD20

The scatter parameter and antigenic distribution of peripheral blood/bone marrow provided for flow cytometry study are suggestive of

CALLA positive B-cell Acute Lymphoblastic Leukemia

CD19 & CD10 - 98%.

1/2/22

Regd. No. 526

Mob.: 9717937012

BACHPAN CARE ORGANIZATION

YOUR CONTRIBUTION, MANY SOLUTION

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

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

Ref. No. ..... **Date** .....

दिनांक - 26-4-23

सेवा में,

फाउंडर महोदय,

बचपन केयर ऑर्गेनाइजेशन,

सर

हमारे बच्चे को ब्लड कैंसर है। इसके इलाज में बहुत खर्च है आपके संस्था से निवेदन है की कृपया इसका इलाज करवाये। आपका एक छोटा मदद हमारे बच्चे को जीवन दे सकता है।

हमारा पूरा परिवार आपका धन्यवाद करेगा। आपके सहयोग का आशा करती हूँ।

आभारी रहेंगे।

सधन्यवाद

शहीद अंसारी