

PAIN AND PALLIATIVE FOLLOWUP FORM

Dr. BRA IRCH, AIIMS, New Delhi

Handwritten signature

Name-	Date
Age/Sex	Phone No.
IRCH/NCI No.	Address

	Follow up No. Date-	Follow up No. Date- <i>14/7/23</i>	Follow up No. Date- <i>12/08/2023</i>	Follow up No. Date-
Symptoms	Severity Medications	Severity Medications	Severity Medications	Severity Medications
Pain : (Site/Type)	Opioid (does with quantity) Tramadol..... <i>50mg TDS</i> Morphine..... Fentanyl Patch..... Other..... Other Analgesics: T. PCM..... <i>70mg 2hb TDS</i> T. Flexon..... T. Gabapentin..... <i>300mg BID</i> T. Pregabalin..... Others	Opioid (does with quantity) Tramadol..... Morphine..... Fentanyl Patch..... Other..... Other Analgesics: T. PCM..... T. Flexon..... T. Gabapentin..... T. Pregabalin..... Others	Opioid (does with quantity) Tramadol..... Morphine..... Fentanyl Patch..... Other..... Other Analgesics: T. PCM..... <i>300 QID</i> T. Flexon..... T. Gabapentin..... <i>300 TDS (N/E)</i> T. Pregabalin..... Others	Opioid (does with quantity) Tramadol..... Morphine..... Fentanyl Patch..... Other..... Other Analgesics: T. PCM..... T. Flexon..... T. Gabapentin..... T. Pregabalin..... Others
GI prophylaxis	T. Pan 40..... T. Rantac..... Others.....	T. Pan 40..... T. Rantac..... Others.....	✓ T. Pan 40..... T. Rantac..... Others.....	T. Pan 40..... T. Rantac..... Others.....
Constipation:	Syp Cremaffin..... T. Dulcolax..... Others.....	Syp Cremaffin..... T. Dulcolax..... Others.....	✓ Syp Cremaffin..... T. Dulcolax..... Others.....	Syp Cremaffin..... T. Dulcolax..... Others.....
Nausea/Vomiting	T. Emsel..... T. Perinorm..... Others.....	T. Emsel..... T. Perinorm..... Others.....	T. Emsel..... T. Perinorm..... Others.....	T. Emsel..... T. Perinorm..... Others.....
Dyspnoea:				
Others/Plan :	<i>R/A 2 weeks</i> <i>ES</i>	<i>14/7/23</i>		
Next review Date			<i>12/09/23</i>	
Name of Doctor			<i>12/08/23</i>	



PAIN AND PALLIATIVE ASSESSMENT FORM

Department of Onco-Anaesthesia and Palliative Medicine
Dr BRA IRCH, AIIMS, New Delhi



Name	<i>Shakeel Ahmad</i>	Date	
Age/Sex		Phone No.	
IRCH/NCI No.		Address	

Current Diagnosis:	<i>mm</i>
Stage of cancer:	<i>(m)</i>
Secondaries:	<i>(m) bony lesion</i>
When was cancer diagnosed?	<i>May 2011</i>
Treatment received	: Surgery / Radiotherapy / Chemotherapy / Others
Details:	<i>—</i>
Present status:	On active therapy (CT/RT) Advanced malignancy stable Advanced malignancy progressive <i>—</i>

Referral to palliative care ward	
1. Referred from DMG.....	
2. Referred from other oncology department.....	
3. Directly presented to palliative department.....	<i>✓</i>
Indication for referral	<i>Pain</i>
Time of presentation to palliative care ward after diagnosis	
Less than 8 weeks/ Less than 6 months/6 months to 1 year/ More than 1 year	

PAIN ASSESSMENT

MAXIMUM PAIN experienced- 0 / 10 / 20 / 30 / 40 / 50 / 60 / 70 / 80 / 90 / 100

NRS representing LEAST PAIN- 0 / 10 / 20 / 30 / 40 / 50 / 60 / 70 / 80 / 90 / 100

Pain Maximum At- Through Out / Morning / Afternoon / Evening / Not Specific

Does It Radiate From The Point Of Origin: Yes/No.....*back*

Worsened By Activity: Yes / No.....*axial movement*

Position/Posture Gives Relief:*7. Ulterior*

Have You Received Treatment For Your Pain:

Pain Relief After Medication: 0 / 10 / 20 / 30 / 40 / 50 / 60 / 70 / 80 / 90 / 100

How Long Relief Last- < 2 Hr / < 4 Hr / < 6 Hr / 6-10 Hr / > 10 Hr

Describe/Nature The Type Of Your Pain

Aching	Throbbing	Burning	Shooting <input checked="" type="checkbox"/>
Dull	Immobilizing	Exhausting	Electric like
Boring	Stabbing	Numbness	Stinging

How Much Does Pain Interfere with Your Daily Activity-

Not at All / A little / Quite a Bit / A lot / Can't do anything

PAIN DIAGNOSIS

Somatic / Visceral / Neuropathic / Bony / Mixed

WHO LADDER STEP : Step I / Step II / Step III

OTHER SYMPTOMS :

Headache	Diarrhoea	Vomiting	Fatigue
Nausea	Fever	Mucositis	Dizziness
Constipation <input checked="" type="checkbox"/>	Shortness of breath	Lymphoedema	Urinary problems
Lack of appetite	Cough	Anxiety	Bleeding
Loss of weight	Lethargy	Depression	Seizures

डॉ० बी० आर० अम्बेडकर संस्थान रोटरी कैंसर अस्पताल, अ.भा.आ.सं., नई दिल्ली
Dr. B.R.A. Institute Rotary Cancer Hospital, AIIMS, New Delhi
MEDICAL ONCOLOGY

3/4

55yr old male, evaluated for backache

PET-CT
3/6/23

- subtle lytic lesions + partial collapse and fracture D10.

- small non avid lesions in axial + appendicular skeleton.

- multiple lytic lesions skull.

Urea - 90

BMA - 44% plasma cells.

creat - 2.1

Ca²⁺ - 11.2

Δs_{is} - Multiple myeloma.
- [Ig? kappa] C⁺R⁺A⁺B⁺

Hb - 7.8

- FISH - N/A

β_2 MG - 5.6

- LDH - WNL

LDH - 148

- β_2 MG - ↑.

$$\frac{k}{\lambda} = \frac{22.10}{181.67} \rightarrow 8.22$$

SPEP - 5.54 g/dL

2 more cycles of VCD
flb Vd maintenance
until transplant

Stu
8/10

Plan Symp. butts

→ Plan - Vd maintenance.

→ transplant. WIV.

Jedham R

डॉ० बी० आर० अम्बेडकर संस्थान रोटरी कैंसर अस्पताल, अ.भा.आ.सं., नई दिल्ली
विकिरण चिकित्सा

Dr. B.R.A. Institute Rotary Cancer Hospital, AIIMS, New Delhi
RADIOTHERPAY

C/S/1- RO OPD (Dr A Biswas)

DR. B.R.A. IRCH, AIIMS, NEW DELHI

IRCH No. 298129

Reg. Date-14/06/2023

Clinic PAC & Palliative Care Clinic

Clinic No. 2023/69960

Deptt. ONCO-ANAESTHESIA AND PALLIATIVE MEDICINE (OAPM)
General



UHID-106710721

नाम शाकील अहमड

Name SHAKEEL AHMAD

S/O- ALI AHMAD

Phone No. 9430897440

Sex/Age M/55Y

Room 60 (Shift Afternoon)

AIIMS CAMPUS, DR. BIRAJI DARRANA BHAD, BHAD INDIA

- ~~known diabetic~~ no known co-morbidities
- no family h/o malignancy
- no prev. h/o - sx or chronic infectm (like TB)

H/o present illness -

c/o - lower backache x ~ 1 1/2 mo.



radiates to B/L LL.

no c/o - LL weakness/ loss of bowel or bladder control
pain anywhere else in the body.



evaluated ↓ OAPM,
diagnosed = multiple myeloma

o/e -

ECOG PS - III

BW - could not be measured

GC - average

P/1/1/1/1/0/1/D. ⊖

o/e -

(I) sensory functm - preserved

(II) motor functm - a) tone - ↓ - B/L LL

b) power - 5/5 | 5/5

2/5 | 2/5

(III) DTR. - ↓ in B/L LL.

4 spinal tenderness - D₁₁ - D₁₂

↳ pt could not comply thereafter due to pain

Investigations -

1. MRI - WSS - 01/06/23 - Pvt -

- diffuse disc bulge \bar{c} thecal sac compressⁿ & B/L neural foramina compressⁿ - C5-C6, C6-C7.

- partial collapse unv D₁₂ body \bar{c} extrusion of bony fragments \bar{c} paravertebral edema

- diffuse disc bulge \bar{c} thecal sac compressⁿ & B/L neural foramina compressⁿ - L5-S₁.

2. PET/CT - 03/06/2023 - Pvt -

ill def. lytic lesion - partial collapse & fracture - D₁₀

few cystic lesions - axial & appendicular skeleton, multiple lytic lesions - skull.

3. protein electrophoresis - 03/06/23 - Pvt -

~~Alb~~ - Alb - 4.41

Glob - 7.5

Total - 11.91

γ -glob - 5.78 (M-band - 5.54)

4. Bence Jones protein (urine) - absent (06/06/23)

5. Lab 1x - 16/06

CBC - $\frac{6050}{7.8} \frac{93,000}{3218} A^+$

LFT - Alb - 3.12 (V) *

Bil - 1.15 (0.4/0.75)

ALT/AST - 21/27

T. protein/A-G - 13/0.3

RFT - $\frac{urea}{creat} = \frac{90}{2.12} (1) R^+$

Ca/PO₄ - 11.2/5.1 C⁻

Na⁺/K⁺ - 133/3.3

LDH - 148 U/L (N)

β_2 MG - 5.66 mg/L (\uparrow) *

s. free K - 22.1

λ - 181.67

K: λ - 8.22

[* Myeloma translocatⁿ panel - N/A]

6. BMA/BMT PS - AIMS - 19/06/23 - 44% plasma cells. - s/o plasma cell myeloma.
BMBx - N/A

Temp. - 55°/M, no known co-morbidities, ECG PS-III

c/o - lower backache

diag. - multiple myeloma, IgG λ variant, C⁻R⁺A⁺B⁺,

ISS stage - III, R-ISS stage N/A

c partial collapse / fracture - D₁₂.

C/D/W - SR/RO

prev. plan - pall RT - 8Gy/1#/1d - Dg - D₁₁.

Adv. - 1. DRC for localisation of lytic lesion

2. DFRT - 01/07/2023

Anindya
SR/RO

डॉ० बी० आर० अम्बेडकर संस्थान रोटरी कैंसर अस्पताल, अ.भा.आ.सं., नई दिल्ली

अर्बुद-संवेदनाहरण एवं प्रशामक चिकित्सा विभाग

Dr. B.R.A. Institute Rotary Cancer Hospital, AIIMS, New Delhi

Onco-Anaesthesia & Palliative Medicine

8/8/23

Received 8Gy/1#/1d to D₉-D₁₁ vertebrae
on 6/7/23

Subjective improvement in pain → 70%
at RT side

ENS examⁿ

L₅ 5/5 | 5/5 Power
3/5 | 3/5

PT on VED Protocol, Received full wk 8 last
on 8/8/23

~~Adv~~ o/e :- Pt walking c support

c/o pain in lower back

No other complaints

CBC → 9.4 $\frac{5880}{3390}$ 1.36L
(7/8/23)

No spinal tenderness

Adv

- Continue chemo ↓ MO

- R/A 3 months

- Pain being relieved

[Signature]

C/S1/3 JR Pall med

Back ache - 1 month
NRS $\left\{ \begin{array}{l} 6/10 \\ 2/10 \end{array} \right.$

HPI

Pt was in his usual state of health 1 month back to start pt had pain in back insidious in onset gradually progressed to present status of bimodal shooting type pain aggravates on axial movement
⊗ sleeping in a static position gives some relief. There is no such spiritual distress present. The pain radiates
Above symptoms are also constipation tingling not all even. vomiting, abdominal distension etc

Treatment History

Baseline
May 2023

Back ache
L

MRI Whole Spine

1.6.23

cervical - marginal anterior & posterior osteophytes are seen
prominent uncovertebral joints are noted
disc desiccation @ m12 levels
diffuse disc bulge causing neural sac compression and S10 neural foramen compression @ C5-C6, C6-C7 levels

Dorsal spine :- Partial collapse involving D12 via body
:- mild retropulsion of bony fragments
:- no obvious cord compression
mild paravertebral edema is noted
:- small collection in S10 paravertebral regions
→ Disc desiccation is noted at m12 levels
→ There is facet joint arthropathy & ligamentum flavum thickening is noted at m12 levels

Lumbosacral Spine:-

- > marginal anterior & posterior osteophytes are seen
- > diffuse disc bulge is noted causing thecal sac compression and (S10) neural foraminal compression @ L5-S1 level
- > Ligamentum Flavum in facetoid joint hypertrophy is seen at (m10) levels
- > (m10) lesions involving the vertebral body
? Bone marrow changes => ? Multiple Myeloma

PECT
3.6.23

↓
lytic lesion i/partial collapse in fracture is seen involving D-vertebrae showing increased hypermetabolism.
few small non-Fx bony lytic lesions involving axial appendicular skeleton in (m10) small lytic lytic lesions in skull
? multiple myeloma

Serum Protein Electrophoresis
3.6.23

↓
Paraproteinemia (M-band - 5.5g/dl)
B2 - protein. (ur)

↑
~~retained~~ returned to IRCH go
registered under OAPM & on Sushma mo'on

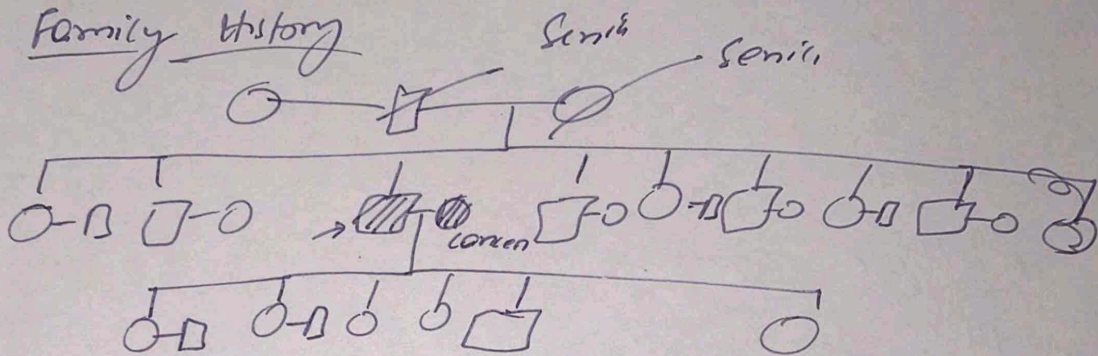
Past History

- > M10 T2DM on OHA
- > No comorbidities - HTN, TB, Epilepsy

Personal History

- > (P) sleep
- > (M) appetite Mixed Indian diet
- > Bowel - constipation
- > Stodden - (P)
- > No addiction history

Family History



-> (P) H/O malignancy in with

Psychosocial History

- > Psychologically stable
- > RIO Biken
- > occupation Teacher
- > Education - Ph
- > I Canegate - con. (P) 117 Aspirin

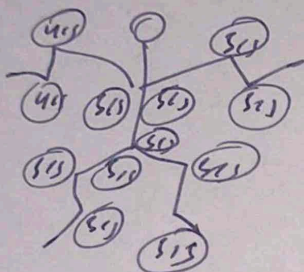
(P) Pt is conscious oriented
 ELOH Pt IV
 Vc - poor

vital stable

P - I - L - CL - L - E -

chest (SIO) VBS
 CVS. Si Si r r
 PIA. SOH M7

Neuro- HME (V)
No Profuses or TMD ICP
Coordination (P)
No sensory deficit
Reflexes (P)



Imp multiple myeloma
MSCC @ L5-6, L6-7, L5-S1

CIDW Dr. Sushma mo'om (Faculty OAPM)

- > Manage pain, constipation, tingling *
- > M.O review (↓ Dr Ranjit Sir)
- > Physio therapist review

Dr Sonoswato
DRIPM



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

OPR-6

अ.भा.आ
बहिरंग
अस्पताल के अन्दर

DR. B.R.A. IRCH, AIIMS, NEW DELHI

IRCH No. 298129

Reg. Date-05/02/2024

Clinic Adult Medical Oncology Clinic

Clinic No. 2024/43144

Deptt. MEDICAL ONCOLOGY

General



UHID-106710721

एकक/Unit Dr CR

विभाग/Dept. MD

नाम/Name

नाम शाकील अहमद

थे/Date of Birth

Name SHAKEEL AHMAD

S/O- ALI AHMAD

Sex/Age M/56Y

Phone No. 9430897440

Room Board Room (Shift Afternoon)

Address GAYARI PO-PS- BIRAUL DARBANGA, BIHAR, Pin:0, INDIA

PKU

निदान/Diagnosis

Multiple Myeloma - Relapsed

106710721

दिनांक/Date

07/02/25

उपचार/Treatment

P/15# VCD

VRd (#1)

- Inj Darzalex 100 mg - D1/ D8/ D15/ D21
- Tab Lenalidomide 20mg D1 → D21 → 7days off
- Tab Dexamethasone 40 mg OD D1/ D8/ D15/ D21
- Tab Pantop 40 mg OD D1/ D8/ D15/ D21
- Tab Escoparin 75 mg HS
- Tab S Calcium 1 OD
- Calcitriol Sachet 60,000 U/ month
- Inj Zometa 4 mg in 100 ml NS 3 times q. 3 mon
- T. Septran DS Mon/ ~~Wed~~ Thur
- T. Acivir 400 mg BD Mon/ ~~Wed~~ Thur
- Flup on 04/04/25 c SPEP/SFUC/LBC/RF

MEDICINE RECEIVED

7/02/2025

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

डॉ. नवीन शर्मा/Dr. NAVIN SHARMA
Senior Resident
Department of Medical Oncology
B.R.A.
29, Ansary Nagar, New Delhi

ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)

New Delhi ,

LABORATORY OBSERVATION REPORT

UHID: 106710721
Name: Mr SHAKEEL AHMAD
Sex: Male
Department: Medicine
Unit In-charge: Dr. SANJEEV SINHA
Sample Received Time: 03/02/2025 05:25 PM

Reg Date: 10/05/2023 08:54 AM
Ward Name :
Age: 56 years 8 months 24 days
Unit Name: Unit-III
Sample Collection Date:03/02/2025 09:43 AM
Report Time:03/02/2025 10:19 PM

Sample Details :E030225233 (Whole Blood (EDTA)) /

Test Name	Result	Reference Range	Verification Comment
141			
Hemoglobin (Cyanide Free Colorimetric)	10.700 g/dL	13 - 17 g/dL	
Hematocrit (Calculated)	33.7 %	40 - 50 %	
RBC Count (Isovolumetric Sphering)	3.370	4.5 - 5.5 10 ⁶ /μL	
WBC Count (Flowcytometric)	10.170	4 - 10 10 ³ /μL	
Platelet Count (Optical Analysis)	99 10 ³ /uL	150 - 400 10 ³ /μL	
MCV (Optical Analysis)	100.000 fL	83 - 101 fL	
MCH (Calculated)	31.7507 pg	27 - 32 pg	
MCHC (Calculated)	31.7507 g/dL	31.5 - 34.5 g/dL	
RDW (Calculated)	16.000 %	11.6 - 15 %	
142			
Neutrophils (Flocytometry)	73.400 %	40 - 80 %	
Lymphocytes (Flocytometry)	13.800 %	20 - 40 %	
Eosinophils (Flocytometry)	0.300 %	0 - 7 %	
Monocytes (Flocytometry)	7.700 %	3 - 11 %	
Basophils (Flocytometry)	0.200 %	0 - 2 %	
Neutrophils - Abs (Flocytometry)	7.46478	2 - 7 10 ³ /μL	
Lymphocytes - Abs (Flocytometry)	1.40346	1 - 3 10 ³ /μL	
Eosinophils - Abs (Flocytometry)	0.03051	0.02 - 0.5 10 ³ /μL	
Monocytes - Abs (Flocytometry)	0.78309	0.2 - 1 10 ³ /μL	
Basophils-Abs (Flocytometry)	0.02034	0 - 0.1 10 ³ /μL	

ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)

New Delhi ,

LABORATORY OBSERVATION REPORT

UHID: 106710721
Name: Mr SHAKEEL AHMAD
Sex: Male
Department: Medicine
Unit In-charge: Dr. SANJEEV SINHA
Sample Received Time: 14/02/2025 01:57 PM

Reg Date: 10/05/2023 08:54 AM
Ward Name :
Age: 56 years 9 months 4 days
Unit Name: Unit-III
Sample Collection Date: 14/02/2025 10:12 AM
Report Time: 14/02/2025 03:41 PM

Sample Details :S140225287 (Serum) /

Test Name	Result	Reference Range	Verification Comment
CEA (CLIA)	1.890 ng/ml	< 3 ng/ml Non -Smokers < 5 ng/ml Smokers	
CA 19-9 (CLIA)	20.790 U/mL	< 37 U/mL	
Vitamin B12 LEVEL (CLIA)	479 pg/mL	180 - 900 Normal (pg/ml) 145 - 180 Borderline low (pg/ml) < 145 Low (pg/ml)	
Vitamin D (CLIA)	39.090 ng/ml	< 10 Deficiency (ng/ml) 10 - 30 Insufficiency (ng/ml) 30 - 100 Sufficiency (ng/ml)	

Lab Technologist

Laboratory In-charge

ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)
New Delhi ,

LABORATORY OBSERVATION REPORT

UHID: 106710721
Name: Mr SHAKEEL AHMAD
Sex: Male
Department: Medicine
Unit In-charge: Dr. SANJEEV SINHA
Sample Received Time: 03/02/2025 05:18 PM

Reg Date: 10/05/2023 08:54 AM
Ward Name :
Age: 56 years 8 months 24 days
Unit Name: Unit-III
Sample Collection Date:03/02/2025 09:43 AM
Report Time:03/02/2025 11:13 PM

Sample Details :S030225239 (Serum) /

Test Name	Result	Reference Range	Verification Comment
Vitamin D (CLIA)	37.800 ng/ml	< 10 Deficiency (ng/ml) 10 - 30 Insufficiency (ng/ml) 30 - 100 Sufficiency (ng/ml) > 100 Toxicity (ng/ml)	
Vitamin B12 LEVEL (CLIA)	434 pg/mL	180 - 900 Normal (pg/ml) 145 - 180 Borderline low (pg/ml) < 145 Low (pg/ml)	
179			
A/G Ratio (Calculated)	1.16216 ratio	1.2 - 2.2 ratio	
Gamma-Glutamyl Transferase	31	0.00-0.00	
DIRECT BILIRUBIN (Vanadate Oxidation)	0.200 mg/dL	< 0.3 mg/dL	
INDIRECT BILIRUBIN (Calculated)	0.5 mg/dL	< 0.9 mg/dL	
SGPT/ALT (IFCC)	26 U/L	10 - 49 U/L	
SGOT/AST (Modified IFCC)	26 U/L	< 34 U/L	
TOTAL PROTEIN (Biuret)	8.000 g/dL	5.7 - 8.2 g/dL	
ALKALINE PHOSPHATASE	31 I.U.	80 - 240 I.U.	
GLOBULIN (Calculated)	3.7 g/dL	2.5 - 3.4 g/dL	
Albumin (BCG Dye Binding)	4.300 g/dL	3.2 - 4.8 g/dL	
TOTAL BILIRUBIN (Vanadate Oxidation)	0.700 mg/dL	0.3 - 1.2 mg/dL	
180			
CREATININE (Jaffe- Alkaline Picrate)	1.120 mg/dL	0.7 - 1.3 mg/dL	
CALCIUM (Arsenazo III)	9.500 mg/dL	8.7 - 10.4 mg/dL	
PHOSPHOROUS (Phosphomolybdate/UV)	2.900 mg/dL	2.4 - 5.1 mg/dL	
SODIUM (NA) (ISE)	140 mmol/L	132 - 146 mmol/L	

Test Name	Result	Reference Range	Verification Comment
POTASSIUM (K) (ISE)	4.100 mmol/L	3.5 - 5.5 mmol/L	
CHLORIDE(CL-) (ISE)	104 mmol/L	99 - 109 mmol/L	
Uric Acid (Uricase/Paroxidase)	4.300 mg/dL	3.7 - 9.2 mg/dL	
UREA (Urease with GLDH)	59.900 mg/dL	< 50 mg/dL	

Lab Technologist

Laboratory In-charge

ALL INDIA INSTITUTE OF MEDICAL SCIENCES (AIIMS)
New Delhi ,

LABORATORY OBSERVATION REPORT

UHID: 106710721	Reg Date: 10/05/2023 08:54 AM
Name: Mr SHAKEEL AHMAD	Ward Name :
Sex: Male	Age: 55 years 1 month 6 days
Department: Medical Oncology	Unit Name: Unit-I
Unit In-charge: Dr. Sushma Bhatnagar	Sample Collection Date:16/06/2023 09:46 AM
Sample Received Time: 17/06/2023 10:58 AM	Report Time:19/06/2023 04:16 PM

Sample Details :LOI-160623072-BP (Bone Marrow) / Lab Oncology (IRCH)

BMA BMT PS (BMA BMT PS)

Report: Bone marrow preparation is aparticulate and diluted, shows 44% plasma cell along with myeloid and erythroid series of cells.

Peripheral blood smear shows marked rouleaux formation.

Imp : Plasma cell myeloma.

Advice : Correlate with SPEP, SFLC bone marrow biopsy, skeletal survey.

Senior Resident: Dr Gaddam Pranitha

Consultant Dr Sanjeev K Gupta

Verification Comment:

Lab Technologist

Laboratory In-charge