

From,

Paritosh Shreshth,

Additional District and Session Judge,

Sonbhadra.

To,

The Registrar General Sir,

Hon'ble High Court of Judicature at Allahabad.

Through:

District Judge ,

Sonbhadra.

Subject:- Representation for my premature transfer from District Sonbhadra due to my mother being cancer patient and survivor.

Most respected Sir,

With utmost respect, I humbly beg to submit that;

That my mother Smt. Promila Lall suffered from Ovarian Cancer in 2011 and she underwent major surgery and was administered Chemotherapy and a strict regimen of medical care follow-up, regular checkups and tests. Her medical treatment, post operation and post Chemotherapy care is being continuously done till date from Deep Hospital, Ludhiana (Punjab) and Satguru Apollo Ludhiana (Punjab) (Papers attached).

Regular check of my mother was done and her reports till March 2023 were nearly normal. But her recent follow up CA-125 test on 13.08.2023 has shown that it is 107.91 against the normal value of less than 35 and on 21 March 2023 CA-125 of my mother was just 6.50.

Vide notification no.-2007/Admin.(Services)/2023, dated on 21.08.2023 I was transferred midterm from District Saharanpur to District Sonbhadra. **I took charge at Sonbhadra on 30.08.2023.** My new posting at Sonbhadra is nearly 1200 Kms from Ludhiana.

A
31.12.23

Further I humbly submit that my mother has undergone Chemotherapy of nearly 50 cycles and a Chemoport has been permanently embedded in her body. She is a cancer patient and survivor who needs special care and medical attention. Due to the after effects of Chemotherapy she needs much more constant medical, emotional care and attention. She is undergoing regular medication, regular follow up, Ultrasound and CT Scan.

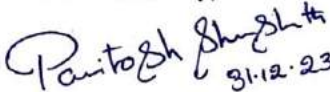
Due to the distance of my new posting i.e. Sonbhadra to Ludhiana her medical care, regular follow has become very difficult for her and is causing immense hardship and difficulty for her and also for me , the followup journey to Ludhiana took nearly two days . Moreover there is no medical facility available in Sonbhadra in case medical emergency or exigency. Being posted at a Station near NCR had been very convenient for me and my mother for her regular check up, care and recovery especially being preventive for my mother

Thus I request the Hon'ble High Court with utmost humility and humbleness to kindly permit my premature transfer at any Station **near NCR like Amroha, Bijnor, Meerut, Hapur** so that if my mother needs urgent medical need and attention in case of any emergency I can immediately access her to medical facilities. It is further stated that Hon'ble High Court has been kind and gracious enough to consider the afore mentioned ground and post me to Saharanpur from Gorakhpur in September 2020.

So, I humbly request that the same may be again kept in consideration so that the munificence extended to me is not undone and continues uninterrupted. I thus request your kindness to place my request before the Hon'ble High Court Allahabad for its kind consideration and I have utmost faith that my representation will be very considerately and favourably considered so as to enable me discharge my filial duties. I shall always remain highly obliged.

Thanking you in anticipation

Yours' faithfully,


(Paritosh Shreshth),
31.12.23

Additional District and Session Judge

Sonbhadra

I.D.-U.P. 1580

Dated: 31.12.2023

Dr. Amit K. Dhiman

M.B.B.S., M.D. (Medicine) PDCR,
DNB (Medical Oncology, Rajiv Gandhi Cancer Institute &
Research Center, New Delhi.
Associate Consultant
Department of Medical & Haemato - Oncology
Ex-Associate Consultant, Rajiv Gandhi Cancer Institute &
Research Center, New Delhi.
Registration No.: 31448

4.01.11 :

MRE PROMILA LAL :

28.01.11
NEXT
20.01.11
for Surgery

T. Glicet 8mg TDS
T. Domst 10mg TDS

x 3 days

Tab DECADEK 4mg
E2ACT ~~8mg~~ 2mg x 3 days

Syr Neospoicene Elixir 2HA TDS 1/2 hr before meals.

T. LESURINT 25mg TDS

T. Clonidril 0.25mg TDS x 21 days

Dum.

INVESTIGATION REPORT

Lab No. : 477,376 UHID : 156431 Name : Mrs. PROMILA LALL Age / Sex : 62 Yrs.(Y) / F Company : CASH IP. No. : 11/662 Bed No. : 533 Dept Ref No : S-116/11 Method/Instrument :	Date : 27/01/2011 Sample Date : 27/01/11 03:18PM Referred by : Dr. Vaneet Kaur Ward : PRIVATE (FIFTH FLOOR) Primary Sample : BIOPSY Result Date 01/02/2011 03:29:00PM
---	---

HISTOPATHOLOGY

Uterus, cervix, bilateral adenexae, Omentum; TAH, BSO & Omentectomy:

Microscopy: Sections studied from both the ovarian masses show totally necrotic luminal contents. The wall show fibrous tissue, mild inflammation and necrotic inner aspect. The larger ovarian mass show few residual high grade carcinoma areas while smaller one do not show viable tumour. The overlying capsule of both ovaries appear intact. No tumour emboli are seen.

Opinion: - Residual carcinoma, larger ovarian mass

- Unremarkable, bilateral fallopian tubes and uterus
- Benign endocervical polyp
- Omentum-free of tumour

Specimen: Uterus, cervix bilateral adenexae, Omentum

Gross: Received two ovarian cystic masses measuring 25x14x9.0cms and 11.0x9.5x6.0cm. The larger mass has multilobated lobulated appearance. Cut surface shows prominently cystic tumour. The wall thickness varies from 1mm to 1.0cm. The smaller ovary mass shows smooth outer surface. Cut surface shows necrotic contents in lumen and thin wall. No papillary or solid areas are identified. Also received in same container hystrectomy specimen measuring 8.5 x 4.5 x 2.5cm with attached one of fallopian tube. On slicing uterus appear unremarkable while cervix shows endocervix polyp (1.0cm long) and nabothian follicles. Random sections from the larger ovary mass in A to F, G - cyst content. Section from smaller mass in H, J, K, L; attached bilateral tubes in M; N, P - cervix; Q - uterus. Also received in same container omentum

INVESTIGATION REPORT


Lab No. : 477,376 Date : 27/01/2011
UHID : 156431 Sample Date : 27/01/11 03:18PM
Name : Mrs. PROMILA LALL Referred by : Dr. Vaneet Kaur
Age / Sex : 62 Yrs.(Y)/ F
Company : CASH
IP. No. : 11/662 Ward : PRIVATE (FIFTH FLOOR
Bed No. : 533

Dept Ref No : S-116/11 Primary Sample: BIOPSY
Method/Instrument : Result Date 01/02/2011 03:29:00PM

HISTOPATHOLOGY

measuring 35x11.0x1.0cms. No tumour nodules are identified grossly. Random section in R, S, T, U.

End Of Report


Dr. RICHA GOYAL 10099
CONSULTANT
M.D PATHOLOGY (PGI), DNB

Note:-

1. Laboratory Investigations only help in arriving at a diagnosis. The results have to be correlated with the clinical findings.
2. Results pertain to the specimen received.

01/02/2011 03:35PM

Printed By Charanjit Kaur 1241

Page 2 of 2

26

21/6/22



DEEP HOSPITAL

LAMP OF LIFE

21036541

Dr. Amit K. Dhiman

MD (Medicine), DNB (Medical and Hemato-oncology)
Bone Marrow Transplant Specialist
Director, Oncology and Hematology Services,
ECMO (European certified medical oncology)

Formerly at

- Head of Dept - Medical Oncology, Dayanand Medical College & Hospital, Ludhiana
 - Associate Consultant - Medical & Hemato Oncology - Medanta Medicity, Gurgaon
 - Associate Consultant - Medical & Hemato Oncology - Rajiv Gandhi Cancer Institute and Research Centre, New Delhi
- Regd. No. 31448 (PMC)

mas. Promila
Age - 66 Y/F

737999977

WT 72 kg
BP 160/90
Pulse 88
SpO2 97%
Temp 98°F
HT 154 cm

↓
Ca Oxidation
Malnutrition

U/S whole abdomen

- CAIPI = 11.3

- U/S: whole abdomen; NAD
✓ NO Vomit Dx

↓

- T. Pan 40g OD 1 — 00 (20 min before meal)
- T. Azuma - Ai 1 00
- Cap Recorri Plb 1 — 1 Bn
- T. Litomiv 1 — 1 Bn

x 6 months

- CAIPI
U/S whole abdomen

Memberships

- European Society of Medical Oncology, Sweden
- American Society of Clinical Oncology, USA
- ICON, India

Mobile : +91-97798 98339, 97009 44442
E-mail : dramit.meet@gmail.com



481, Model Town, Ludhiana,
Punjab-141002



+91-161-5299999



www.deephospital.co.in



Patient : Mrs. PROMILA LAL Registered On : 21/03/2023 11:35:44 Patient ID : 102250946
Ref. by : DR. AMIT DHIMAN Printed On : 21/03/2023 18:51:44 IPD No :
Category : GENERAL Age/Sex : 69 YrsFemale

Test Name **Value** **Unit** **Biological Ref Interval**

IMMUNOLOGY - SEROLOGY

CA - 125 6.50 U/ml 0.00 - 35.00
COMMENTS

CA-125 is a reliable tumor marker for already diagnosed ovarian carcinomas. Baseline levels measured prior to therapeutic intervention and followed later by serial periodical measurements will enable the treating doctor to predict outcome of the therapy. It also helps in early discovery of recurrences, relapses and metastasis, where it will play the role of "Second look laparotomy".

In general tumor Marker levels are directly related to the tumor mass and the stage of the cancer. However, it is the rate of change of the tumor marker level which is more important rather than its absolute value. A 50%change can be considered clinically significant.

As with other tumor marker, CA-125 should not be used alone but in conjunction with other clinical criteria. Combined use of CA-125 and CA-72.4 increases sensitivity, specificity and predictability of tumor marker in ovarian cancers.

It must be emphasised that CA-125 may also be elevated in pancreatic cancers, adenocarcinoma of other organ, certain non-malignant conditions like endometriosis, liver cirrhosis, pancreatitis and colitis and physiological states such as pregnancy and menstruation. Therefore this should never be used as a screening test for diagnosing ovarian cancers, but only as an aid in follow-up studies.

OK BY

Dr. NIMESH MISHRA
MD, PATHOLOGY

Dr. TANMAI TANDON
MD, PATHOLOGY

DR. KAVITA SOMANI
MD PATHOLOGY
(DIRECTOR & CHIEF PATHOLOGIST)

Care Pathology

Regd. Off. Bara Birwa House, Kanpur Road, Lucknow-226 023
Web: www.carepdx.com | E-mail : help@carepdx.com
Ph. : 91-522-2473888, Mob. : 91-99355 02002, 7705002272
Home Sample Collection No.: 7705002208, 7705002238
Satellite Centres : Avadh Hospital and Heart Centre, Prof. R.C. Ahuja, Saha Clinic



Patient : Mrs. PROMILA LAL	Registered On : 13/08/2023 11:46:21	Patient ID : 102316612
Ref. by : DR. AMIT DHIMAN	Printed On : 13/08/2023 17:09:09	IPD No :
Category : GENERAL		Age/Sex : 70 YrsFemale

Test Name	Value	Unit	Biological Ref Interval
-----------	-------	------	-------------------------

IMMUNOLOGY - SEROLOGY

CA - 125	107.01	U/ml	0.00 - 35.00
-----------------	---------------	------	--------------

COMMENTS

CA-125 is a reliable tumor marker for already diagnosed ovarian carcinomas. Baseline levels measured prior to therapeutic intervention and followed later by serial periodical measurements will enable the treating doctor to predict outcome of the therapy. It also helps in early discovery of recurrences, relapses and metastasis, where it will play the role of "Second look laparotomy".

In general tumor Marker levels are directly related to the tumor mass and the stage of the cancer. However, it is the rate of change of the tumor marker level which is more important rather than its absolute value. A 50% change can be considered clinically significant.

As with other tumor marker, CA-125 should not be used alone but in conjunction with other clinical criteria. Combined use of CA-125 and CA-72.4 increases sensitivity, specificity and predictability of tumor marker in ovarian cancers.

It must be emphasised that CA-125 may also be elevated in pancreatic cancers, adenocarcinoma of other organ, certain non-malignant conditions like endometriosis, liver cirrhosis, pancreatitis and colitis and physiological states such as pregnancy and menstruation. Therefore this should never be used as a screening test for diagnosing ovarian cancers, but only as an aid in follow-up studies.


CHINBY

Dr. NIMESH MISHRA
MD, PATHOLOGY


Dr. TANMAI TANDON
MD, PATHOLOGY

DR. KAVITA SOMANI
MD PATHOLOGY
(DIRECTOR & CHIEF PATHOLOGIST)

Care Pathology

Regd. Off. Bara Birwa House, Kanpur Road, Lucknow-226 023
 Web: www.carepdx.com | E-mail : help@carepdx.com
 Ph. : 91-522-2473888, Mob. : 91-99355 02002, 7705002272
 Home Sample Collection No.: 7705002208, 7705002238
 Satellite Centres : Avadh Hospital and Heart Centre, Prof. R.C. Ahuja, Saha Clinic

Dr. Amit K. Dhiman
MBBS, MD, DNB (Medical Oncology)
PMC No. 31448
Sr. Consultant Medical Oncology

29/12/2023

wt - 69kg
BP - 130/80

MRS PROMILA G Gyn F.
7379999772.

Ca ovary - Recur.
- Platinum Sensitive

— 1st Cycle: 2 in last 3 months.

T. Pm 400 po OD

T. AEW MAX - AT 100

Cap Recurin 1000 1 ——— 1000

T. Lebm 1 ——— 1000

T. Cyclophosphamide / Gemtazabine 0 ——— 0 BD
x 2 cycles
off / 7 days on.

Upreti
CA 125
T. LETROZOLE 25 po OD → TO Continue
x 3 months

