
REDMI NOTE 8 PRO
AI QUAD CAMERA


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NUATION CH... Room/Bed No.

7/6/2021
10:00am

उपलोअ-11
R.M.L.H.-11

लगातार चार्ट / CONTINUATION CHART

नाम/Name .... कमरा/शय्या सं./Room/Bed No. ....

तिथि/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
CXR: Rt middle & upper zone consolidation. CT Ratio 0.63	To The Consultant Department of Pediatrics, P3 Dr RML Hospital New Delhi Respected Sir, The above mentioned patient who came with c/o cough for 5 days duration, fever of 1 day duration and fast breathing of 1 day duration. Patient was put on O2 by nasal prongs, nebulized with asthalin, put on IV antibiotics inj monocef, inj azithromycin (O3 today) and inj lasix was given. Diagnosis: ? ACHD c pneumonia EFTT r/o COVID myositis (6/6/2021) Currently patient is afebrile, maintaining SpO2 99% on O2 by nasal prongs @ 3L/min and has been added on Tab aldactone (ENR). O/E: child is alert & active. HR: 122/m RR: 48/m SpO2: 99% on O2 by nasal prongs PP/PV: ⊕ in ... Hydration Adequate CRT <3 sec P/A: Liver 2cm BCM, spleen NP. BS ⊕ R/S: B/L AE ⊕ B/L conducted sounds ⊕ CVS: Hyperdynamic precordium, loud grade 3 PSM ⊕ CNS: any activity of N tone Kindly consider transfer to your side for further management. Thanking you Yours truly Neha DR. NEHA MEHRA ... Department of ... PGIMER & DR. RML HOSPITAL, NEW DELHI	SAHONI. 6m/F 27667 Dr Deepak Sachan P3 currently admitted in ward 3 SARI

Noted ... Dr ... P3

रा.म.लो.अ.-11
R.M.L.H.-11

लगातार चार्ट / CONTINUATION CHART

नाम/Name Saloni / 6 month / F   कमरा/शय्या सं/Room/Bed No.

तिथि/Date	दैनिक विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
8/6/21	Δ- ACHD (?VSD) c̄ Pneumonia c̄ CHF c̄ FTT	
7/6/21	Issues @ Admission :	
Hb- 7.9	- Cough x 5 days	
TLC- 24,000	- Fever x 1 day	
N37 L54	- Fast breathing x 1 day	
Plt- 5.4 lakh	Current Issues: - Afebrile for last 24 hrs	
RBC- 3.95x10⁶	- loose stools - ? ...	
PCV- 26.1	- RD ...	
MCV- 66.5	- Accepting orally well	
PS- Microcytic hypochromic anemia	- Passing urine & stool adequately	
- Leucocytosis c̄ lymphocytosis	O/E: GC- sick	Advice (wt- 4.5 kg)
	HR- 152/min	① DBF allowed
	PP/PV- ⊕/Ⓝ	D5 ② Inj Monocef 225 mg IV bd
OCTRD	CRT- <3 sec	
SGOT- 72 (↑)	RR- 42/min, SCR ⊕	D5 ③ Inj Azee 45 mg IV
CKMB- 39.9 (↑)	SpO_2- 99% on O_2 by NP (@ 2 L O_2)	④ Inj PCM 80 mg iv S...
CK- 505	Hydration- adequate	⑤ Inj Lasix ... IV
LDH- 704 (↑)	p⁺ I⁻ cy⁻ Cl⁻ E⁻ L⁻	@ ... mg ...
Urea/Creat- 15/0.7		⑥ Tab Envas 2.5 mg in 5 ml DW 0.5 ml bd
TB/DB- 0.4/0.2	Resp- B/L AE ⊕	
OT/PT- 77/45	B/L Rhonchi ⊕	
ALP- 202	P/A- Soft, NT, BS ⊕	⑦ IVF N/5 c̄ 5% D c̄ 1:100 KCl @ 10...
Na^+/K^+- 130.7/3.57	L→ 2 cm BRCM	
Ca^{2+}/PO_4^{3-}- 10.5/3.7	S- NP	
	CVS- S_1S_2 ⊕, PSM ⊕	⑧ Neb c̄ Budecort 0.25 mg 12 hrly
Plan	CNS- Cry, Tone, Activity } Ⓝ	
- 2D Echo	Chest X-ray	⑨ Syp Zinc 2.5 ml od
- CRP		⑩ ... Vitals.
- Blood C/S		

Sd/- PR-I

...RMO—1957RML—21-07-2016—12000 x 100 LEAVES

RMLH-1

लगातार चार्ट / CONTINUATION CHART

नाम/Name SALONI 6M/F CR: 27667 कमरा/शय्या सं/Room/Bed No.

तिथि/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
11/06/2021	A ACHD (2VSD) c̄ pneumonia c̄ CHF (R) c̄ FTT (mod. lag, USN)	
	# Subjective issue	
	presently: cough : mild : intermittent	
	# Objective issue	
	1. fever x 1 day	
	2. cough x 1 day	
	3. fast breathing x 1 day	
QR - CRP - Biochem ✓ - CBC ✓ - Echo	CBC Hb: 11.5 → 11.7 TLC: 12900 → 10200 DLC: 49/46/2/3 → 43/47/ PC: 3.6 lakh → 4.6 L	
	O/E GC: well — Chest: B/L AE ⊕ : B/L occasional conducted sounds ⊕ HR: 130/m RR: 36/m — CVS: S_1S_2 ⊕ M ⊕ PP/PV ⊕/⊕ — CNS: GUCMG SpO_2: 96% on O_2 — NA neck sign P/A: soft NT L - 2cm BCM S - NP	

GMGIPMRND—1957RML—24-07-2019—12000 x 100 LEAVES

Pt also gave h/o fast breathing V/da, a/w indrawing in b/w chest.

No h/o bluish discoloration

No h/o vomiting, loose stool

No h/o Ab(N) body movements

No h/o yellow discoloration of body.

No h/o altered sensorium

No h/o swelling of hands & feet

No h/o contact c̄ covid (+)ve pt.

No h/o current red urine yell.

Past h/o - Pt was admitted for above complaints in [illegible] hospital from 18/2/21 - 23/2/21. (c̄ an ep. of Apnea [illegible])

- Ased as ACHD c̄ pneumonia. c̄ Apnea

-

Birth h/ - S/ PostTerm / NVD / CIAB / B wt - 3 kg /

Institutional delivery

Immunisation h/ - immunised till 2½ months of age. documents not available.

(Wt: 4.5kg)

Adv

1. Orally BF allowed
2. Inj meronem 225mg IV bd
3. Inj Lasix 7mg IV bd @ 2mg/kg/dose
4. Inj PCM 50mg IV SOS for fever
5. Tab Evion 2.5mg in 5ml DW 0.5ml bd
6. INF N/2 @ 5/. DM. @ 1/100kcal @ 10ml/hr
7. Neb^n @ budecort 125mg DHly.
8. Syp Zn 2.5ml OD.
9. Syp VitD3 (400IU/ml) 1ml OD.
10. MF Vitals.

Dr
PGm

डॉ॰ राम मनोहर लोहिया अस्पताल
(विकिरण विभाग)

Dr. Ram Manohar Lohia Hospital
(Department of Radiology)

एक्सरे/अल्ट्रासाउन्ड की जांच के लिए मांग पत्र
X-RAY/ULTRASOUND REQUISITION

एक्सरे/अल्ट्रासाउन्ड रिपोर्ट
X-RAY/ULTRASOUND REPORT

यूनिट का नाम / Name of Unit: P3
तारीख / Date: 11/6/21
नाम / Name:
आयु/लिंग / Age/Sex:

रोगी का नाम / Name of Patient: Saloni
आयु/लिंग / Age/Sex: 6 mo, F
भेजने वाले डा० का नाम / Refered by:

के.स.स्वा. योजना कार्ड सं / C.G.H.S. Card No: 27667
वार्ड/ओ.पी.डि / Ward/O.P.D: P3, CCS 3rd floor
रिपोर्ट सं / Report No:

संक्षिप्त नैदानिक टिप्पणी / Brief Clinical Notes: H/o ACHD (? VSD) c̄ pneumonia c̄ CHF c̄ FTT
बिस्तर सं / Bed No:
दिनांक / Date:

अपेक्षित जांच / Examination Required: 2D - Echo

अस्थायी निदान / Provisional Diagnosis:

चिकित्सक के हस्ताक्षर / Signature of Clinicians

विकिरण विज्ञानी के हस्ताक्षर / Signature of Radiologist

Wd 27
Wt 17

SS, LC
(N) NSM / sys venous ret
mod- large mid muscular
VSD 5mm L→R PSG 38 mmHg
NO MR
Las Inlet -
left arch arch
NO LSVC
NO COA
NO PDA -
(N) LV ϕ, no m

- close MFU
→ K/V monthly for weight gain

Imp : mod large. Mid muscular VSD

DOA = 5/06/21

लगातार चार्ट / CONTINUATION CHART

Saloni, 6 month, F   कमरा/शय्या सं/Room/Bed No. ....

/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
7/06/21 12:00 pm	Δ: ACHD c̄ (? VSD) c̄ pneumonia c̄ CHF c̄ FTT Issue at admission: Cough Fever fast breathing Issue at present: — febrile ⊕ — 99.4°F — RD ⊕ — Minimal — Loose stool - 4 episod O/E HR 148/m R/S: B/L AE ⊕ RR 45/min B/L Rhonchi PP ⊕ PV - Good vol P/A: soft Liver 2cm SpO2 - 98% on O2 by NP Spleen NP P/I/Cy/Cl/LAP CVS S1 S2 ⊕ PSM grade IV CNS E4 V5 M6 Tone N/N N/N	

आरएमएलअ-11
R.M.L.H.-11

लगातार चार्ट / CONTINUATION CHART

नाम/Name .... कमरा/शय्या सं/Room/Bed No. ....

तिथि/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
5/6/21	Name - Saloni Age/sex - 6m/F CRNO - 20212767 Add - Mukund pur, Delhi Informant - Mother reliability - fair c/c - • cough x 5days • fever x 1day • fast breathing x 1 day HOPI - Pt was asymptomatic 5days back when she developed cough. Insidious onset, progressive in nature, a/w expectoration (minimal) not a/w postural variation, not a/w diurnal variation. Pt also c/o fever x 1day (upto 102°F). Partially relieved on medication, Moderate intensity, continuous nature. Not a/w chills / rigor	

MG/PMRND—3966RML—27-02-2019

राममलोअ-11
R.M.L.H.-11

लगातार चार्ट / CONTINUATION CHART

नाम/Name Saloni 6Mo/F कमरा/शय्या सं/Room/Bed No.

तिथि/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet
7/6/21	Receiving note Dx: ACHD (VSD) c̄ Pneumonia c̄ CHF c̄ FTT C/o @ admission: ① Cough × 5d ② Fever × 1 day ③ Fast breathing × 1 day A/E: ① Febrile ② RD ⊕ - Minimal ③ Accepting orally well O/E: PR - 136 b/m RR - 56 c/m CF/CV - t/N SpO_2 - 99% on O_2 by NP P̄ Ī C̄ Ū L̄ Ē No signs of dehydration S/E: CVS - S_1S_2 ⊕, M ⊕ (PSM) RS - B/L AE ⊕, B/L Rhonchi ⊕ P/A - Soft, Liver ⊕ BCM, Spleen - NP CNS - Cry, Tone, Activity } ⊕ Adv. wt 6.5 kg ① DBF allowed ② Inj. Monocef 225 mg IV OD ③ Inj. Vanc 65 mg IV OD ④ Inj. PCM 80 mg IV SOS ⑤ Inj. Lasix 6 mg IV BD ⑥ Tab. Envas 2.5 mg in 5 ml DW → 0.5 ml OD ⑦ IVF N/2 c̄ 5% D c̄ 1:100 KCl @ 10 ml/hr ⑧ Neb c̄ asthalin 0.5 ml + 2.5 ml NS @ 6 ⑨ Neb c̄ budecort 0.25 mg BD ⑩ Syp. Zinc 2.5 ml OD ⑪ ORS 50 ml after every loose stools	

Margin notes: c/R → CBC → Biochem; Lasix 3 mg/kg

GMGIPMRND—1957RML—24-07-2019—12000 x 100 LEAVES

लगातार चार्ट / CONTINUATION CHART

नाम/Name Aaraz / 6month / Male. कमरा/शय्या नं/Room/Bed No.

तिथि/Date	प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment	आहार/Diet

Anthropometry

	Expected	Inference
HC – 37.5cm	43.7cm	<-3SD
wt – 4Kg	7.9Kg	<-3SD
length – 54cm	67.6cm	<-3SD
wt for length	4.3Kg	b/w -1SD & Median

GOVERNMENT OF INDIA

DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

BIOCHEMISTRY—LAB REPORT

Name : Saloni	Age/Sex : 6 month/F	Date : 7/6/24
CR/REGD No. : 27667	CGHS No. :	OPD/Wd : 3
Clinical Diagnosis :		
Unit Incharge : Dr Neha Mathur	Signature :	

1. **Blood Sugar :**

F : .... mg/dl(70-110) ABG

PP : .... mg/dl(90-160)

R : .... mg/dl(70-140)

2. **Kidney Function Test :**

Urea : .... mg/dl(15-45)

Creatinine : .... mg/dl(0.6-1.2)

Uric Acid : .... mg/dl(2.5-6.0)

3. **Liver Function Test :**

Total Bil : .... mg/dl(0.2-1.2)

Direct Bil : .... mg/dl(0.1-0.3)

In. D. Bil : .... mg/dl(0.2-1.1)

SGOT : .... U/L (15-50)

SGPT : .... U/L (15-50)

Alk. Phos : .... U/L (50-130)

GGT : .... U/L (8-61M; 5-36F)

4. **S. Proteins :**

T. Prot : .... gm/dl (6.0-8.0)

Albumin : .... gm/dl (3.5-5.5)

Globulin : .... gm/dl (1.5-3.5)

5. **Lipid Profile :**

T. Cholesterol : .... mg/dl(130-230)

HDL Chol. : .... mg/dl(30-65)

LDL Chol. : .... mg/dl (50-150)

VLDL Chol. : .... mg/dl (upto 40)

Triglyceride : .... mg/dl (50-200)

6. **S. Electrolytes :**

Sodium : .... mmol/L (130-150)

Potassium : .... mmol/L (3.5-5.5)

Chloride : .... mol/L (95-110)

Calcium : .... mg/dl (8.5-10.5)

Phosphorus : .... mg/dl (2.5-5.5)

7. **Cardiac Profile :**

CPK : .... U/L (50-200)

CK-MB : .... U/L (upto 25)

LDH : .... U/L (110-240)

SGOT : .... U/L (15-50)

8. **Iron Profile :**

T. Iron : .... µg/dl (60-150)

TIBC : .... µg/dl (250-400)

UIBC : .... µg/dl (150-250)

Saturation : .... % (20-35)

9. **Others :**

S. Amylase : .... U/L (30-110)

S. Lipase : .... U/L (23-300)

S. Magnesium : .... mg/dl (1.6-2.3)

Ammonia (NH_3) : .... µmol/L (9-30)

Lactate .... mmol/L (0.7-2.1)

DC. GIPRB. ND-19RMLH/10000Padsx100pages-2020

BIOCHEMIST

Mob. : 9821233869

JEEVAN CARE FOUNDATION

Address:- 697, Village Madanpur Khadar, New Delhi 110076
Mail- Jeevancarefoundation@gmail.com

Reg No. 92

Ref. No. .....

Date 13 June 202

सेवा में,

श्री मान ट्रस्टी जी
Jeevan care foundation
697, GIF Madanpur khadar
Sarita vihar New Delhi

मान्यवर जी,

सविनय निवेदन करती हूँ मेरा नाम गुड़िया है। मेरी बच्ची सलोनी जिसकी आयु अभी 6 महीने है, उसके दिल मे छेद है उसकी हालत बहुत ही नाजुक है मे एक गृहणी हूँ और हमारे घर की आर्थिक स्थिति बहुत ही कमजोर है, जिसके कारण अपनी बच्ची का इलाज करने मे असमर्थ हूँ और डॉक्टर ने इलाज के लिए 1 लाख 20 हजार का खर्चा दिल की सर्जरी के लिए बताया है, मैं आपके Ngo से प्रदान करती हूँ की मेरी बच्ची के इलाज के लिए मुझे आर्थिक मदद करें, ताकि अपनी बच्ची का इलाज करा सकू!
मे आपकी आभारी रहूंगी

धन्यवाद

प्रार्थी
गुड़िया

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