

Patient Name: Dipanshu
Age/Sex: 6y/m UHID: 18614 IP No: 2561
Ward: HPU Room/Bed:
Doctor Name: PILU Date: 12.11.19

PICU OBSERVATION CHART

Diagnosis: RTA Date of birth: 1/11/2013 No. of Days: 12th
Weight: 20 kg Height: BSA:

Doctors Notes/Plan

12/11/19 S/S D. Meenal Garg
Plan: Feeds
- chest & x ray
- Physiotherapy
- Meenal - very oral & spoon/straw
Airway down (K) there
Parents do interfere
difficultly breathing.

Tissue Viability Risk

Key Events/ Procedure (Today)





Patient Name: masi. Depantlu
Age/Sex: 64/m WT: 20 kg BSA:
IP No: 2561 Room/Bed: Date:
Doctor Name: Dr. PLW Team

MEDICATIONS SHEET

Drug 1	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength <u>Inj. Pantop</u>															
Dose: <u>20 mg</u>	<u>6 Am</u>														
Route: <u>P.V.</u>															
Frequency: <u>24 hdy.</u>															
Name of Doctor <u>[Signature]</u>	Signature	<u>P13</u>													

Drug 2	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength <u>Inj. CEVEPAIL</u>															
Dose: <u>200mg</u>	<u>2 Am</u>														
Route: <u>P.V.</u>	<u>2 Pm</u>														
Frequency: <u>12 hdy.</u>															
Name of Doctor <u>[Signature]</u>	Signature	<u>P12</u>													

सेवा में

श्रीमि. अध्यापिका

होल्डिंग्स हेल्थ आरगनइजेशन

पता :- F-255, गार्ड फॉलर

लक्ष्मी नगर

दिल्ली - 110092.

विषय - आर्थिक सहायता हेतु प्रार्थना पत्र

सर मेरी नाम राजेश है मैं शाय मलीकपुर
हरियाणा का रहने वाला हूँ। मेरा एकलौता
बेटा है उसकी आयु 6 वर्ष की है।
मेरे बेटे हिपानसु किसी गाड़ी ने टकरा
माशी है जिससे उसे गंभीर रूप से
घोटे आई है। और कई फ्रैक्चर भी
हैं। सर यह रेकॉर्ड 12/11/19
को हुआ है और उसे हमने जयपुर
के सूर्य अस्पताल में भर्ती कराया
है जहाँ उसके इलाज के लिए
₹ 35,000 का खर्च बताया है जो कि
मेरे यह खर्च उठाने में असमर्थ हूँ
मैं आपसे निवेदन करता हूँ कि आप
मेरे बेटे के इलाज के लिए सहायता
प्रदान करें। आपकी कृपा होगी।

आपका धन्यवाद

राजेश

दिनांक: 25/11/19..

बेटे का नाम - हिपानसु
उम्र - 6 वर्ष
पता - हरियाणा।

Drug 3	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength Inj. CPTICHOLINE															
Dose: 250 mg + 10 ml NS	1 Pm														
Route: P.V.	1 Am														
Frequency: 12 hourly.															
Name of Doctor	Signature	D ₁₁													

Drug 4	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength Inj. NEOMOL															
Dose: 200mg															
Route: P.V.															
Frequency: SOS.															
Name of Doctor	Signature														

Drug 5	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength Inj. Pip taz	12/11/19														
Dose: 200mg	3 Pm														
Route: P.V.	11 Pm														
Frequency: 8 hourly.	7 Am														
Name of Doctor	Signature	D ₂													

Patient Name: Dipanshu
Age/Sex: 6y/m UHID: 18619 IP No: 2561
Ward: HBU Room/Bed:
Doctor Name: PICU Team Date: 11/11/19

PICU OBSERVATION CHART

Diagnosis: RTA Date of birth: 11/11/2013 No. of Days: 11th
Weight: 20kg Height: BSA:

Doctors Notes/Plan

11/11/19

- Stop nuro, mmp
- Start pipper
- stop 31-Mall

AC

- Picturh wen.
S/S Dr. Reed Gay

AC slow, vessel slow
- spiculy sed, heavy comrad, mmp
- toleraty feeds

Plan: stop nuro/varo → switch to pip/ty
- 1st feed, under feed, try oral → 2D at
Cupre ref.

Tissue Viability Risk

<u>DM</u>
<u>port feed/line</u>
<u></u>

Key Events/ Procedure (Today)

<u></u>
<u></u>
<u></u>

Patient Name: Master Dipansu
Age/Sex: 6 years UHID: 18614 IP No: 265 2561
Ward: H.D.U. Room/Bed:
Doctor Name: P.I.V. team Date: 10/11/19

PICU OBSERVATION CHART

Diagnosis: R.T.A. Date of birth: 1/11/19 No. of Days: 8th day
Weight: 20 kg Height: BSA:

Doctors Notes/Plan

10/11/19 S/S Dr. Keerul Garg.
 • Today feeds
 • Responds better, walk, speaks few words
Plan: • Increase feeds • STOP TAN.
 • Physiotherapy
 • Start MVI in feeds
 • Thicken feeds → from tomorrow
 • D/C to decrease antibiotics
 • Dietician referral tomorrow.

Keerul

Tissue Viability Risk

Key Events/ Procedure (Today)

Patient Name: Mast Deepanshu
Age/Sex: 6 y / M WT: BSA:
IP No: 2581 Room/Bed: Date:
Doctor Name: Dr. PICU Team

MEDICATIONS SHEET

Drug 1	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength		<u>1/19</u>	<u>2/19</u>	<u>3/19</u>											
Dose:	<u>8pm</u>	<u>2.25 gm</u>	<u>2.25 gm</u>	<u>2.25 gm</u>											
Route:	<u>4AM</u>	<u>2.25 gm</u>	<u>2.25 gm</u>	<u>2.25 gm</u>											
Frequency :	<u>12PM</u>	<u>2.25 gm</u>	<u>2.25 gm</u>	<u>2.25 gm</u>											
Name of Doctor	Signature														
<u>J A G A T</u>	<u>[Signature]</u>														

Drug 2	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength		<u>1/19</u>	<u>2/19</u>	<u>3/19</u>	<u>4/19</u>	<u>5/19</u>	<u>6/19</u>	<u>7/19</u>	<u>8/19</u>						
Dose:	<u>8pm</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>						
Route:	<u>4AM</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>						
Frequency :	<u>12PM</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>	<u>200mg</u>						
Name of Doctor	Signature														
<u>J A G A T</u>	<u>[Signature]</u>														

Drug 3	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength		1 11	2 11												
INJ AMIKACTIN		19	19												
Dose:	8pm	290	290												
Boomy															
Route:															
IV															
Frequency :	OD														
Name of Doctor	Signature														
JALAT															

Drug 4	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13
Generic Name:/ Strength		1 11	2 11	3 11	4 11	5 11	6 11	7 11	8 11	9 11	10 11	11 11	12 11	
INJ PANTOL		19	19	19	19	19	19	19	19	19	19	19	19	
Dose:	8pm	290												
20mg														
Route:														
IV														
Frequency :	OD													
Name of Doctor	Signature													
JALAT														

Drug 5	Date/ Time	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Generic Name:/ Strength		1 11	2 11	3 11	4 11										
INJ VITK VITK		19	19	19	19										
Dose:	8pm	290	290	290	290										
5mg															
Route:															
IV															
Frequency :	OD X3														
Name of Doctor	Signature														
JALAT															

Patient Name: Dipankar
 Age/Sex: 57 / M UHID: 1861 IP No. 2561
 Ward: PSW Room/Bed: PSW
 Doctor Name: Dr. P. C. W. / Dr. P. C. W. Date: 01/11/19

ADMISSION / PLAN OF CARE FORM

Admission:

1/11/19

Expected date of discharge:

Ref:

Dr. Meenakshi Garg / P. C. W.

Referred From: OPD / Casualty / Other Hospital):

Final Diagnosis:

RTA - T & F - Pneumo pneumonia

Transferable: Y / N

Allergic to: None ☐ Not Known ☐ yes ☐

If yes (describe)

Plan of care:

- Medical + Surgical Management

Possible complication:

Dietary Advice:

Tentative outcome:

Any Other Remarks.....

Consultant Name.....

Dr. Meenakshi Garg / P. C. W.

Date: 1/11/19

Consultant Signature.....

[Signature]

Time: 5:50 (am/pm)

SHJ/IPD/003


B-7, Sawal Ram Singh Road, Opp. SMS Hospital Gate No. 1, Jaipur-302001 Ph. 0141-4333777
www.suryahospitals.com

भारत सरकार
Government of India

राजेश
जन्म तिथि / DOB : 10/07/1996
पुरुष / Male

आधार - आम आदमी का अधिकार

4948 6924 2188




भारतीय विनिर्दिष्ट माध्यम प्राधिकरण
Unique Identification Authority of India

पता: आत्मल नारायण,
राय मलीकपुर(२३६), बुधवाल,
महेन्द्रगढ़, हरियाणा, 123023



Address:
S/O: Narayan, Rai Malikpur(236),
Budhwal, Mahendragarh,
Haryana, 123023

4948 6924 2188

1847
1800 300 1947

help@uidai.gov.in

www.uidai.gov.in

Patient Name: Mast. Depanshu
Age/Sex: 6 y/M. UHID: 18614 IP No: 2561
Ward: PICU Room/Bed: _____
Doctor Name: Dr. P.C. U. Team Date: 11/11/19

INITIAL ASSESSMENT FOR PEDIATRICS

Father's Name: _____ Mother's Name: _____

Date First Seen: _____ Referred by: _____

Source of History: _____ Relationship: Father/mother/others: _____

Reliability: ☐ Good ☐ Fair ☐ Poor

Chief Complaints: _____

for Abdomen case of RTA (29/10/19)

distended abdomen multiple abrasions bruise over
History of Present Illness: face and Abdomen in left side

two No 2 episodes of vomiting

Refer to hospital in car not with other

Refer to LOS Hospital

Past History: _____

Smoking hx (AEB - 4 cigarettes)

CT Brain s/o multiple small

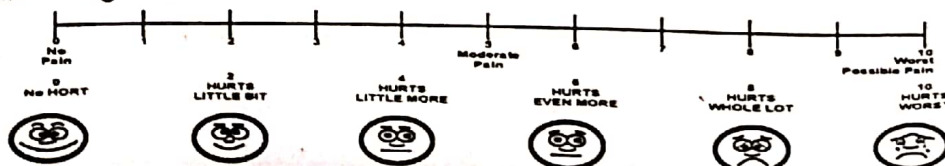
Treatment History: Concussion

Wt. Abdomen - Pseudoepistaxis Refer to

CURRENT MEDICATIONS (Medications on which patient was regular before admission to the Hospital) Surgery

S. No	Name of the Drug	Dose	Frequency	S. No	Name of the Drug	Dose	Frequency

Pain scale: Wong-Baker Faces



Pain: Yes No If yes score (1-10): _____ Duration: _____ sharp/Dull/Aching/Burning

Location: _____ Action Needed Yes ☐ No ☐

DATE: 6-Nov-19

NAME: DIPANSHU

6Y/M.

REF.BY: SURYA HOSPITAL

Clinical profile- RTA, open laparotomy, now presenting with tremors and altered consciousness.

MRI OF BRAIN (3 TESLA):

Supra-tentorial compartment:

Multiple T2W/ FLAIR hyperintense lesion with perilesional edema and showing patchy diffusion restriction is seen in bilateral cerebral cortical and subcortical regions predominantly in bilateral basifrontal and basitemporal lobes. It is also involving posterior body of corpus callosum and shows patchy SWI susceptibility.

Size of largest hemorrhagic contusion measures about 13 x 10mm in right basitemporal lobe.

No intraventricular dissection or midline shift seen.

Small SDH is seen in anterior interhemispheric falx with maximal thickness of 1.3 mm.

Significant symmetrical diffusion restriction is seen in bilateral fronto-parietal and periventricular deep white matter, subcortical white matter and involving corpus callosum and cortical regions of bilateral fronto-temporal lobes, bilateral parietal lobes – s/o diffuse brain edema / diffuse Cytotoxic edema.

Sellar and supra-sellar region and pituitary gland appears to be normal.

The lateral & third ventricles are normal in size, shape, and position.

Infra-tentorial compartment (Posterior fossa):

The cerebellum and brainstem appear normal.

Cerebral & cerebellar peduncles and tectal plate do not reveal any abnormality.

The basal cisterns and cerebello-pontine angles do not reveal any abnormality.

Cervico-medullary junction does not reveal any abnormality.

DATE: 6-Nov-19

NAME: DIPANSHU

6Y/M.

REF.BY: SURYA HOSPITAL

IMPRESSION:

The MRI findings are of:

- Multiple T2W/ FLAIR hyperintense lesion with perilesional edema and showing patchy diffusion restriction in bilateral cerebral cortical and subcortical regions predominantly in bilateral basifrontal and basitemporal lobes. it is also involving posterior body of corpus callosum and shows patchy SWI susceptibility. Features are suggestive of multiple hemorrhagic and non hemorrhagic contusions with diffuse axonal injury.
- Size of largest hemorrhagic contusion measures about 13 x 10mm in right basitemporal lobe.
- Significant symmetrical diffusion restriction in bilateral fronto-parietal and periventricular deep white matter, subcortical white matter and involving corpus callosum and cortical regions of bilateral fronto-temporal lobes, bilateral parietal lobes – s/o diffuse brain edema / diffuse Cytotoxic edema.
- Small SDH in anterior interhemispheric falx with maximal thickness of 1.3 mm.
- No intraventricular dissection of hemorrhage or midline shift.



Dr. Mohit Khandelwal
MD (Radiodiagnosis)
Consultant Radiologist

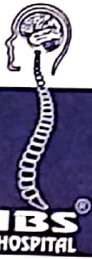
Dr. Nitesh Agarwal
DMRD, DNB (Radiodiagnosis)
Consultant Radiologist

Dr. Bijendar Kumar
MD (Radiodiagnosis)
Consultant Radiologist

Dr. Mitesh Gupta
MD (Radiodiagnosis)
Consultant Radiologist

DIAGNOSIS IS Must For Cure, We Are Committed To Make It Sure

Ground Floor Akshat Retreat, Opp. Gate No. 1 of SMS Hospital, Tonk Road, Jaipur



INDOWESTERN[®] BRAIN & SPINE HOSPITAL

Near New Vidhan Sabha,
Lal Kothi, Jaipur-302015
Ph.: 0141-2744441 - 42
Email : lbshjaipur@gmail.com

NAME	DIPANSHU	AGE	05 YRS	SEX	M
DATE	31-10-2019	HR NO	1905854		

COMPUTERIZED TOMOGRAPHY (C.T.) SCAN REPORT

C.T. SCAN OF CERVICAL SPINE:

Straightening of cervical spine is seen.

The vertebral bodies are normal in size, shape and density. No evidence of any fracture is seen.

The cranio-vertebral junction appears normal.

The atlanto-axial joint is normal. No evidence of dislocation seen.

Their pedicles and the spinous processes appear intact.

IMPRESSION:

- No significant abnormality detected.

ADV: CORRELATION WITH CLINICAL FINDINGS AND RELEVANT FURTHER INVESTIGATIONS MAY BE MORE INFORMATIVE.


Consultant Radiology

A UNIT OF DINA NATH JAGDISH PRASAD HEALTHCARE AND HOTEL PVT. LTD.
Regd. Office : C-18, NEAR NEW VIDHAN SABHA, LAL KOTHI, JAIPUR-302015
(CIN) : U85110RJ2007PTC024165
Contact No : +91-141-2744441-42; e-mail: dnjpjaipur@gmail.com

Date :- 12/10/19

To,

Care India Foundation / Holistic Health Organization

C/O Guru Nanak Vihar,

Chander Vihar, Nangoli,

New Delhi- 110041

Dear Sir/Mam,

Re- Dipanshu

Age- 6 Years

Dipanshu admitted in PICU unit with road accident with injury of perforated intestine and severe head trauma requiring ventilatory support and surgery (laprotomy with colostomy). Presently he is admitted in PICU and he is very critical requires extensive PICU care.

The approximate cost of the treatment and supportive care for baby would be Rs. 5 Lakhs.

Thanking you

With Regards

Consultant F&B

Surya Mother and child care jaipur pvt. Ltd.

Jaipur - 302001



Scanned by CamScanner