

discharge

Headmistress

patient's

Signature
Dr. Shipra



POST GRADUATE INSTITUTE OF CHILD HEALTH (PGIHC)
SECTOR 30 NOIDA, NOIDA-201301, UTTAR PRADESH
PHONE-9120290090

IPD NO: 981162025004317



ADMISSION CARD

CR NO: 981162500177025

Signature



NAME

ANSH

AGE/GENDER

7 YR/M

HOSP DHT

S/O

KRISHNA

MARITAL STATUS

CATEGORY

GENERAL

IS MLC

ADM CHARGES

₹ 100.00

ADV CHARGES

RS. 250.00 /-
(RS. TWO HUNDRED FIFTY ONLY.)

MLC NO

DPT/UNIT

PAEDIATRIC/UNIT 1

WARD/BD

PAEDIATRIC GEN WARD /C3

REASON I

STATUS AT ADM

NORMAL

REFERRED FROM

REMARKS/REF NO

PROV DIAG

ADM DO

DR SHIPRA AGARWAL

ADDRESS

SEC 32, NOIDA, GAUTAM BUDDHA NAGAR, UTTAR PRADESH
NO-98116253452

EMO CONTACT

KRISHNA 987553452

ADM DATE

30-APR-2025/04:14:53

WRO-RCV. DATE

FOR MEDICO LEGAL PURPOSE

DETAILS OF

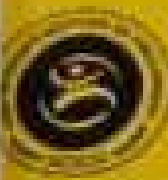
EXAMINATION

POLICE

INFORMATION

IDENTIFICATION

MARKS



Att: 14

Admission Slip / M

Page No.

71034

T - normal
Pulse - 92/min
BP - 95/55 mm
Hb - 16.5 mg/dl
Ht 120g

30/4/25 1:15 am

1st episode
Body move x 3 episodes each
episode for 2 mins & uprolling of eyes &
Afferent of limbs & incontinence & fecal incontinence
Fever x 7 d (102-103F, relieved on medication)
& apnoea

Last episode at 12:20 am 30/4/25

Q/t

PR = 100/min

CHC absent convulsions, 2/3rd

RR = 30/min

CVC 2, 3, 4

Temp = 98F

Chest B/L A+ vesicular, clear

Spo2 = 92% on

HA 29/ NT NO NO MIN

O2 by NRAM

advise No past episode of seizure

① Put in lateral decubitus position

② Inj Phenytoin 30mg IV over 30mins (loading dose)

1 Hb

Inj Phenytoin 45mg IV BD (maintenance dose)

- ⑤ Inj. Pen 200mg IV 1st 12 amp 2100h
- ⑥ Admit in Isot Medium.
- ⑦ Send CBC, SG, UTT, KFT, CAT, Blood Ue.
- ⑧ IV $\frac{1}{2}$ DNS + 100ml @ 60ml/hr.
- ⑨ Inj. ceftriaxone 400mg IV 20. in some NS over 10min
- ⑩ Inj. vancomycin 360mg IV 20. in some NS over 10min
- ⑪ Inj. Dose metformin 2.5mg QID

20/11/24 2:30 AM

हमारे वल्ले को रिमावे गंभीर हैं। वल्ले को एटके आ रहे हैं। हम अपनी जिम्मेदारी से वल्ले को भर्ती करा रहे हैं। हम सब सहायता दए अपनी जिम्मेदारी से वल्ले को उशी कर रहे हैं।

Girdle
12.1

दर नकि

- ② 24j 3% KCl @ 10mg/kg
- ③ ④ Fundus examination
- ⑤ Serious clinical condition
2 guarded prognosis explained
to parents

⑥ 2nd 24j / 1/13

⑦ Chocobay

Clinical
SR.

10/10 GTCs type of seizure

- Aborted ② Inj Midazolam 2ml 11V 561
- Inj valproate 720mg in ② 20 mg/kg
over 30 mins (loading dose)

↓

Inj valproate 360mg 11V BD.

⑧
SR-1

10/10
SR

ANSI
370K

20/09/15
03:00 PM

Maya

- My Apramox 900mg IV BP
(in 10 mins) ONSD
- My Vancomycin 360mg IV TDS
(in 20 mins) ONSD
- My Augmentin 400mg IV TDS
(in 20 mins) ONSD
- My Metoclopramide ①
- My Phenytoin 70mg w BP
@ 8mg/kg
(in 40 mins)
- My Urea 500mg IV BP
@ 40mg/kg
(in 40 mins)

Physical Examination

Physical Exam	Good	Adopted	Reduced
Heart	No	☒	Yes
Lungs	No	☒	Yes
Abdomen	No	☒	Yes
Neck	No	☒	Yes
Extremities	No	☒	Yes
Neuro	No	☒	Yes
Genit	No	☒	Yes

Date: 4/7/2018

Wt	180	-	110	-	100	-	100
Ht	170	-	170	-	170	-	170
BP							
Pulse							

Exam: ①

Exam: ②

Exam: ③

Exam: ④

Exam: ⑤, ⑥, ⑦, ⑧

Heart - normal
Lungs - normal
Abdomen - normal

Neuro - normal

True - ①

No abnormal findings

Final Diagnosis

? acute nephritis

Signature



POST GRADUATE INSTITUTE OF CHILD HEALTH

Sector 35, Noida-201303, G.B. Nagar (U.P.)
(An Autonomous Institute under Government of Uttar Pradesh)

PROGRESS NOTES AND ORDERS

File No.
25016

Name	Age	CR No.	Ward No.	Bed No.
Date & Time	Progress Notes	Orders		
7:30 AM	<u>CLSIB SR on duty</u> At 6:30 body movement (low - tonic movement of 1/2 inch of body, 6/4 lip sucking, no urinary incontinence)			
	<u>Labors</u> - Inj Phenytoin 120 mg 2x 5 and 105 mg 1x 2.5 ml (2nd loading) 1/2 - Inj Phenytoin 70-214 BD e 6 mg/kg	<u>Dr. Anand</u> <u>SR</u>		
22/05/11 11:30 AM	At 10:30 AM, episode of tonic			
6/6/2011 11:30 AM	At 10:30 AM, episode of tonic Inj Phenytoin 120 mg 2x 5 and 105 mg 1x 2.5 ml Inj Phenytoin 70-214 BD e 6 mg/kg SF analysis, 100 MDD			

POST GRADUATE INSTITUTE OF CHILD HEALTH

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ADMISSION AND DISCHARGE FORM

Feb 7/17
7025

For O.P.D. Patient:
Referring Doctor:
Department:

Hospital:
For SSPH & PGTI Ward Patient:
Referring Consultant: Dr. S. Singh
Referring Dept.:
Ward No. 17/A Bed No.:

Receipt No.	Date	Amount Rs.
Time of Admission	Date & Time of Discharge	Hospital Days
30/4/17		
Final Diagnosis	ICD Code	
Diagnosis (in Letters)		
Associated diseases / complications		
Procedure		
Discharge	☐ With medical advice ☐ Absconded	☐ LAME ☐ Any other reason
Died	☐ Under 48 hours of admission ☐ Over 48 hours of admission	Autopsy ☐ Yes ☐ No
Cause of Death (in Letters)	Direct Cause	
	Antecede Cause (Related to cause of death)	
	Other Significant conditions (Contributing to death)	
Signature	Resident	Consultant



Super Speciality Paediatric Hospital & Post Graduate Teaching Institute

Sector- 30, Noida (U.P.)

Age
Sex
Referral

Department	Consultant

Referring Doctor/Hospital

Name

Address

Date 22/04/15

History

- born a child
- mother a 30 year
- mother a child

- mother of son during
- mother of all other children, they are
- mother of son

- No other episode of
- course of this type in
- then - subacute
- spelling of age
- in all other
- concerned in

Present History

- mother of previous hospital
- now in in past

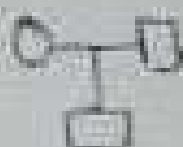
Treatment History

- Immunisation
- Immunised till age
- of age

Personal/Social/Family History

- mother of 10 children
- mother of son in family

- mother of
- Order for age



20/12/23
19:50 AM

27/12/23

11470 repeated

seizure and poor response child was
intubated & on H of 50 & fluid at

15
shifted to MV since h + R

20/12/20/20

SpO2 98%

HR > 130 bpm

BP 90/60

Adm

① 200 mg Paracetamol 20mg iv BD
@ 2mg/kg/day

② 200 mg Gentamicin 50mg iv BD
(@ 5mg/kg/day)

③ 200 mg Midazolam @ 4mg/hr
(@ 4ug/kg/hr)

④ 1:10000 DMS + 1:100000 @ 35
2/3rd scheduled