

(6)

DR. Jagatpalsi (~~Dr. Jagatpalsi~~) Known to

NO: 321874 IPD NO: IP2518581

ne :-	Master RUDRANSH GARG	DOA :-	29-01-2026 / 11:52AM
ardian :-	S/O MANOJ AGARWAL	DOD :-	
ge & sex :-	8 M / M	Ward :-	PICU
Address :-	MAHUAKHERA TAJGANJ KALAL KHERIA AGRA	Bed :-	03/PICU -IV
Contact :-		Referred Dr :-	Dr.SELF
Company :-	ICICI Lombard General Insurance Co. Ltd.	Category:-	ICICI LOMBARD
Specialty 1 :	Dr.Rajeev Krishak	Specialty 2:-	Dr.
		Specialty 3:-	Dr.

W.T = 9.4 K.G

I - 913 ml
O - 500 ml

PHRC/IPD/MC/006

Medication Chart

02/2/26

Addressograph
Name
ant Name
Name: Master RUDRANSHI GARG
File No: IPD/215581
Ward/Room: PICU - IV03
DOA: 29-01-2026 11:52 AM

Medication	Dose	Route	Frequency	Recommended Time	Actual Time	Nursing Sign.
venti	N.P.O					
1) INT- MERO	250ML + NIB	IN	8 HRLY	6AM 2PM 10PM	6AM 2pm	Amal 21486 get messy
2) INT- TILLOCIN	20ML 100ML + NIB	IV	24 HRLY	10AM	10 AM	get messy
3) INT- ACIVER	20ML 100ML + NIB	IV	8 HRLY	8AM 4PM 12MN	8AM	get messy
4) INT- MIRACIN	70 ML	IV	12 HRLY	10AM	10 AM	get messy
5) INT- LEVIPIL	1ML + NIB 10ML	IN	12 HRLY	10PM 6AM	9:50 AM	get messy
6) INT- FOSOLIN	32ML + NIB 10ML	IV	12 HRLY	6PM 10AM	6:10 AM	Amal 21486
7) INT- PHENOBARB	25ML + NIB 10ML	IV	12 HRLY	10PM 6AM	6:10 AM	Amal 21486
8) INT- MANNITOL	18 ML	IV	12 HRLY	6PM 10AM	10 AM	get messy
9) INT- ACILOL	0.7 ML	IV	12 HRLY	10PM 6AM 12MD	6AM, 12MD	Amal 21486 get messy
10) INT- DECDAN	0.8 ML	IV	6 HRLY	6PM 12MN 6AM 12MD	6AM, 12MD	Amal 21486 get messy
11) INT- SUMOL	15 ML	IV	6 HRLY	6PM 12MN	11 AM	get messy
12) INT- ALBUMIN + LASIX	50ML + 0.5ml	IV	TOMORROW SOS			
REFRESH TEAR EYE	Drop	1	TDS	6am 2PM 10 PM	6am 2pm	Amal 21486 get messy
IV	250 ML	IV	8 HRLY			

KTL + SHL EACH DAY

and Checked By Amal 21486

Name & Signature of In-charge Nurse.....

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Hospital & Research Centre
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e-mail: info@pushpanjalihospital.in | www.pushpanjalihospital.in

EMERGENCY

EMERGENCY INITIAL ASSESSMENT FORM

Patients Addressograph

Patients Name *Mst*

UHID

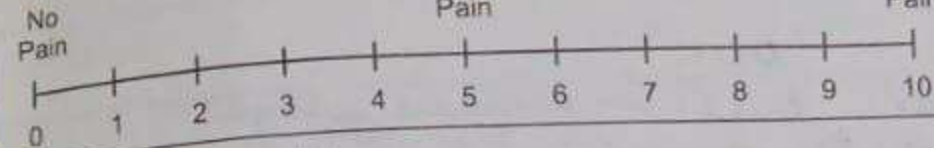
Consultant Name

Dr. Manish RUDRAJEY DMD
NO. IP2010501
DR. Room: PSCU IV/73
A. 20-21 200511 50AM
Subunit: Ramesh Khosla
Address: Dr. Manish Khosla

Patient Name: *Rudrajeey gang* Age/Sex: *8.5 months / Male* Date: *29/1/26* Time:

Triage Category: Red ☐ Yellow ☐ Green ☐ Black ☐

Pain Scale:

MLC: Yes ☐ No ☐

MLC No.:

General Assessment:

Arrival date & time:

Time Seen by ER Physician:

Referred by Doctor:

Follow up case of Doctor:

Complaint:

40 loose stool / vomiting / 4 days back

breathless

Admitted to Hospital

15-20 ICU stay → Upadhyay Hosp - On Ventilator 6 days

Primary Survey

Circulation

Airway	Breathing	Circulation
Patent	RR:...../min	Skin: Pink Pale
Obstructed	Symmetrical: Yes No	Membrane: Flush Jaundiced Ashen Cyanotic
Protected	Labored: Yes No	Pulse Rate: 111/min, Rhythm: Regular Irregular
Maintained	Trachea Midline: Yes No	Normal, Site:
Compromised	Crepitations: Yes No	Bounding, Site:
	Wheeze: Yes No	Weak, Site:
	SpO2: 100% on RA Baise	Absent, Site:
	Spo2:.....% on.....lt/min	Skin Temp: Warm Hot Cold
	O2 By Nasal Prong O ₂ Mask	Skin Moisture: WNL Dry Moist
	NRBM NIV Ventilator	Visible bleeding: Yes No
		Site:
		BP: 140/80 MM of Hg
		Temp: 99.4 °F/C
Management:	Management:	Management:
Intubation	O2 Therapy	Intravenous Fluids
ET	BVM	Inotropes/Vasopressors
ET	Chest Tube (ICD)	Compression Bandage
ET	Other:	

Liac monitor:

E.....V.....M...../15; Weight: *9.4* kg; Pupils: PERLA /..... AVPU



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ate, Agra | Phone
spital in | www



PROGRESS NOTE

Consultant1: Rajeev Krishna
Consultant2: Rajeev Krishna

Name: Master RUDRANSH GARG
File No: IP2018581
Ward/Room: PICU-IVC3
DOA: 29-01-2026 11:52AM

Addressograph
Name
Consultant Name

Time

Therapy for 1 hr

2/2/26

info CRR - Patient Temporal

Up to

Phone 29/1

2/2 → C4 B1 UT 173

dyant skull bone

4 mm b

to 14 E

CT scan

Vibrations → 100% 4.5/1

V Bone Sup (Cervical)

1152

84%

BB-13070

Name &
Signature

2/2/26 / 100% → 100%

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(H/B 10/10/2026)
At 10 Aug



Plan of Care

Investigations	Request
Blood	cbc and KFT LFT
Urine	PT INR APTT
X-ray	ABG CXR LRA view
USG	ECHO
CT Scan / MRI	CT Head
ECHO / Others	

Medication Chart (Capital Letters)

S.No.	Name of Drugs	Dose	Frequency	Route
1	ins. Mero	250mg twice daily		IV rds.
2	ins. Tirocin	100mg twice daily		IV Rds 3 dose then on
3	ins. Atilor	0.7ml		IV Rds
4	ins. Kenalogin	5mg		IV stat.
5	ins. Sumel	15mg		IV stat.
6	ins. Levifil	1-1 twice daily		IV Rds
7	ins. Folefilin	32mg twice daily		IV Rds
8	ins. clon			
9	neuro olivan			
10	Insul	250ml		IV rds.
11	ins. phenobarb	200mg twice daily		IV stat



PUSHPANJALI HOSPITAL & RESEARCH CENTRE

NABH ACCREDITED

Radiology Report

Pt. Name:	MASTER RUDRANSH GARG	Date: 29.01.2026
Age & Sex:	08 MONTHS / M	ID - 321874, 2518581
Ref. By:	Dr. RAJEEV KRISHAK, MD	

NCCT BRAIN

Axial 5 mm thickness slices were obtained to scan entire cranium from base to apex without use of I.V. contrast medium administration.

- Intracranial & extra axial hypodense fluid collections (upto 4.0 - 5.0 mm in thickness) with prominent subarachnoid spaces are seen in bilateral fronto-temporal region.
- Rest of cerebral hemispheres are showing normal attenuation values.
- Bilateral basal ganglia, thalami & internal capsule appear normal.
- Ventricular system appears normal.
- Bilateral sylvian fissures & rest of cortical sulci appear normal.
- Septum & falx cerebri are seen in midline.
- Basal cisterns are prominent.
- Bilateral cerebellar hemispheres & vermis are showing normal attenuation values.
- Brain stem is seen normally in its attenuation values.
- Nasogastric tube is seen in situ.

IMPRESSION: -

- Intracranial & extra axial hypodense fluid collections with prominent subarachnoid spaces in bilateral fronto-temporal regions, likely suggestive of benign enlargement of sub arachnoid spaces (BESS).

Suggest - Clinical & MRI brain correlation.

DR. SOURABH AGARWAL,
CONSULTANT RADIOLOGIST

The science of radiological diagnosis is based on the interpretation of various images produced by normal & diseased tissues & may not always be conclusive. Further clinico-pathological correlation is necessary. In case of any discrepancy or any typing or machine error, please get it rectified immediately.

Not Valid for Medical



Balance:1300

TEST REPORT

Date: 01/02/2026 Patient ID: 112532928
Name: MAST. RUDRANSH
Refd by: DR. RAJEEV KRISHAK, MD (Paediatrics)
Pt. E-mail ID :

Refd by Lab: PUSHPANJALI HOSPITAL
Age: 8 Mon

Booking Time: 09:15:38
Sample Drawn: 01/02/2026 09:15
Sample Received: 01/02/2026 09:25
Reported On: 01/02/2026 09:45
Print Date & Time: 01/02/2026 09:47

Mob: 76184
Gender: Ma

Test	Value	Biological Ref Interval	Unit
FMetHb	1.1	0.4 - 1.5	
<u>Metabolites Values</u>			
Glucose	68.0 L	70.0 - 170.0	%
Lactate	4.0 H	0.5 - 2.0	mg/dL
<u>Oxygen Status</u>			
ctO2(a)	17.7 H		mmol/L
BO2	17.3 H		mL/dL
<u>Calc. Values</u>			
pHt	7.5 H		mL/dL
pCO2t	14.3		
pO2t	218.2		mmHg
Base Excess (BEecf)	-11.5 L		mmHg
nBili	3.5		mmol/L
Ca++ (7.4)	0.3 H		mg/dL
Osmolality	217.8 H		mmol/L
AnGap	20.5 H		mmol/kg
pAtm	760.0 H		mmol/L
			mmHg

*** End of Report ***

Printed by: REPSUBHASH

If Results Marked with HC=High Critical & LC=Low Critical Results.

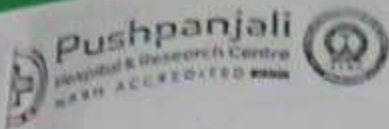
Test Requested: Arterial Blood Gas, COLLECTION CHARGE

Page No. 2 of 2



DR. SCGUPTA
DCP (PATH)
R.No. 5763/7.8

Dr. Ashok
MD (PATH. & BA.)



Lab Report Tracking Sheet

S.NO	TEST	Date	Date	Date	PHRC/JPDI/PCDA/IRIS/JAM 25	Date
		25/11/26	29/11/26	30/11/26	1/12/26	
CBC						
1	Hb	8.4	7.1		14.1	
2	TLC	8980	23.70		11040	
3	PLC					
4	N	59.70	9.34		72.4	
5	L	35.30	4.87		52.6	
6	B	0.10			00.2	
7	E	1.20			00.6	
8	P COUNT	436	372		422	
9	CRP	0.7			6.27	
10	ESR					
KFT						
11	NA+	139	143.60	141.50	133.0	
12	K+	3.75	2.50	3.10	4.26	
13	CA++	8.7	8.47	0.53	2.60	
14	B.UREA		12		16.1	
15	S.CREATININE		0.17		0.21	
LFT						
16	S.BILLRUBIN TOTAL					
17	DIRECT					
18	INDIRECT					
19	SGPT		80		271.0	
20	SGOT		105.8			
21	ALBUMIN		2.89		3.60	
22	S.A.PHOSPHATE					
23	S.PROTEIN		4.44		5.60	
24	GLOBULIN					
25	LIPASE					
26	AMYLASE					
27	PT		11.64			
28	APTT		24.80			
29	INR		1.71			
30	AGE-LEVEL					
31	LDH					
32	HBA1C/BLOOD SUGAR					
33	T3					
34	T4					
35	TSH					



Balance: 1300

TEST REPORT

Date: 01/02/2026 Patient ID: 112532928

Name: MAST. RUDRANSH

Refd by: DR. RAJEEV KRISHAK, MD (Paediatrics)

PL E-mail ID :

Refd by Lab: PUSHPANJALI HOSPITAL
Age: 8 Mon

Booking Time: 01/02/2026 09:15:57
Sample Drawn: 01/02/2026 10:28:31
Sample Received: 01/02/2026 09:45:59
Reported On: 01/02/2026 09:47:08
Print Date & Time: 01/02/2026 09:47:08

Mob: 7618444
Gender: Male

Test	Value	Biological Ref Interval	Unit
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BIOCHEMISTRY - TEST REPORT

ARTERIAL BLOOD GAS (ABG)

Blood Type : Arterial, Sample : Whole Blood

Method : Potentiometry, Amperometry, Conductance

Technology: Electrochemical Phenomena & Co-Oximeter Technology

Temperature	98.6	
FIO2	21.0	
<u>Blood Gas Values</u>		
pH	7.519 H	7.350 - 7.450
pCO2	14.3 L	27.0 - 41.0
pO2	218.2 H	80.0 - 100.0
Bicarbonate (CHCO3)	11.4 L	19.0 - 27.0
Standard Bicarbonate (CHCO3 st)	17.7 H	
Oxygen Saturation Capacity (SO2)	98.7	75.0 - 99.0
Base Excess (BEb)*	-8.5 L	+/- 1.00
ctCO2	11.8 H	

Electrolytes Values

Na+	107.0 L	135.0 - 148.0
K+	3.88	3.50 - 6.00
Ca2+	0.250 L	1.120 - 1.320
Cl	79.0 L	98.0 - 107.0

Hb Derivatives

Hemoglobin (tHb)	12.6	11.5 - 17.4
Hct	37.0	35.0 - 50.0
FO2 Hb	97.3	
FCOHb	0.3 L	0.5 - 2.5
FHHb	1.3	1.0 - 5.0

Printed by: REPSURHASH

If Results Marked with HC=High Critical & LC=Low Critical Results.

Test Requested: Arterial Blood Gas, COLLECTION CHARGE

Page No: 1 of 2



DR. SCG
DCP (P)
R.No. 5

Pushpa
Institute of E
of Pushpanjali

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Admission
03, 992