







# Jindal Super Specialty Hospital

(A unit of Raj Jindal Hospital & Research Centre Pvt. Ltd.)

IACMRA



<b>UMR NO / IP No</b>	: UMR0021414 / IP260001573	<b>Bill Date</b>	: 12-May-2026 09:38 AM
<b>Name</b>	: Baby . VANDNA	<b>Sample Date</b>	: 12-May-2026 09:41 AM
<b>Age / Gender</b>	: 4Y(s) / Female	<b>Reporting Date</b>	: 12-May-2026 11:43 AM
<b>Specimen Type</b>	: Serum	<b>Type / Bed No</b>	: CASH / GENRAL WARD PEDIATRIC
<b>Doctor Name</b>	: Dr.KAPIL JINDAL/ LK MISHRA		

## BIOCHEMISTRY

BAR CD : 2605120035

PARAMETER	RESULT VALUES	UNITS	NORMAL VALUES
<b>RENAL FUNCTION TEST (RFT)</b>			
UREA	34.0	mg/dL	10.0-50.0
S. CREATININE	0.45		0.6-1.1
S.PHOSPHOROUS	4.21	mg/dL	2.5-4.5
URIC ACID	3.45	mg/dL	2.4-5.7
SODIUM	129.34		135.0- 145.0
POTASSIUM	3.81	mmol/L	3.50 - 5.0
CHLORIDE	97.39	mmol/L	98- 106
<b>CRP</b>			
CRP ( Quantitative )	1.1	mg/L	0.6 - 6.0
<b>BLOOD SUGAR RANDOM</b>			
BLOOD SUGAR (RANDOM)	211.51	mg/dL	70- 140

\*\*\* End Of Report \*\*\*

Dr. PREETI TYAGI  
MD (PATHOLOGY)  
CONSULTANT  
Reg No : MCI/09-35445

Verified By

05/11/2026 12:15 PM

SP Mukherjee Nagar, Bharatpur-321001 (Raj.)  
Ph.: 05644 - 294560 Helpline : 9929711555, 9414025942  
E-mail: rjhospital@gmail.com web: www.jindalhospital.in

DOC NO: JSSH/CNC/OPD-LH/06



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IAC-MRA



UMR NO / IP No	: UMR0021414 / IP260001573	Bill Date	: 12-May-2026 09:41 AM
Name	: Baby . VANDNA	Sample Date	: 12-May-2026 09:41 AM
Age / Gender	: 4Y(s) / Female	Reporting Date	
Specimen Type	: EDTA Blood	Type / Bed No	: CASH / GENRAL WARD PEDIATRIC
Doctor Name	: Dr.KAPIL JINDAL/ LK MISHRA		

## HAEMATOLOGY

BAR CD : 2605120037

PARAMETER	RESULT VALUES	UNITS	NORMAL VALUES
<b>CBC (COMPLETE BLOOD COUNT)</b>			
HAEMOGLOBIN	12.9		11.00-21.00
WBC	29.94	10 <sup>3</sup> /ul	6.0 - 26.0
NEUTROPHILS	84.7	%	45.0-70.0
LYMPHOCYTES	8.5	%	20.0-40.0
MONOCYTES	6.1	%	2.0-10.0
EOSINOPHIL	0.3	%	1.0-6.0
BASOPHIL	0.4	%	0.0-2.0
HAEMATOCRIT(HCT) ( ABG )	41.8		40.0 - 54.0
Red Cell Count (TRBC)	5.58		4.0 - 5.2
MCV	74.9		83.0 - 101.0
MCH	23.2	pg	31.0-37.0
MCHC	30.9	g/dl	32.0-36.0
PLATELET COUNT	466	10 <sup>3</sup> /ul	150-500

\*\*\* End Of Report \*\*\*

Verified By

User :

Printed on : 12-May-2026 10:03 AM

SP Mukherjee Nagar, Bharatpur-321001 (Raj.)  
 Ph.: 05644 - 294560 Helpline : 9929711555, 9414025042  
 E-mail: rjhospital@gmail.com web: www.jindalhospital.in



## INDOOR TICKET

MLCNO.:

No: 21414 I.P.D. No.: Ward/Bed: P. ward Consultant: DR. Kapil Jindal  
Patient Name: Baby VANDNA W/S/D: HARBAN Age: 4y Sec: M (F)  
Address: PO NALLA KALYAN BHARATPUR Ph. No.:

Admission & Time: 12/05/2026 D.O Operation & Time:

Discharge & Time: D.O. Delivery & Time:

Final Diagnosis: BURN.

- Chief complaints with Duration:
- Superficial Burn 25-30%
  - High grade fever
  - irritable
  - Dehydrated

### Vitals

BP: 90/50 mm Hg  
HR: 128/mt  
RR: 26/mt  
Sat: 95%  
Temp: 101.3° F

### Examination

Front Back

CNS: TONE NAD. Irritable

CVS: S1 S2 N. mid Tachy

Resp: NAD

Abd: Soft

Blisters

Local:

### Past History:

M: HT: SNK  
AD: Asthma: SNKRA  
Any other (Medical/Surgical):

### Allergies:

Medication History: SNK

Nutritional Screening:  Diabetic  Diet-Non Diabetic  Type of Diet.....

Last Three Month Appetite:  Increase  Decrease  No change

Physician Inform:  Yes  No  Not know it  yes specify.....

Pain Scale - Wong-Baker FACES

0 No Pain  
1 Mild Pain  
2 Moderate Pain  
3 Severe Pain  
4 Very Severe Pain  
5 Worst Pain

Signature: P. Jindal



# Jindal Siner Specialty Hospital



Patient Name : Baby.VANDNA  
 Age : 4 Years 0 Months 11 Days  
 Sex : Female

Hospital and Research Centre Pvt. Ltd.)  
 Jaipur - 321001 (Rajasthan)

Reg. No. \_\_\_\_\_ Ward/Bed : \_\_\_\_\_  
 UMR No : UMR0021414 Age/Sex : \_\_\_\_\_  
 Consultant Name Unit : Dr. KAPIL JINDAL/ LK MISHRA

## INVESTIGATION CHART

Date	12/5/26								
Urine									
• Volume									
• pH									
• Sp. Gravity									
• Proteins									
• Sugar									
• Pus Cells									
• RBC									
• Casts									
• Crystal									
• Bacteria									

Haemogram									
• Hb/PCV	12.9								
• TLC	29.94								
• DLC									
• ESR									
• Platelets	466								

Bio-Chemistry									
• Blood Sugar F	211.5								
• Blood Sugar P.P.									
• Blood Urea	34.0								
• Creatinine	0.30								
• Phosphate	4.21								
• Uric Acid	0.22								
• Sodium									
• Potassium									
• Cholesterol									
• Calcium									
• Total Proteins									
• Albumin									
• Globulin									
• Bilirubin	T Bil								
	D Bil								
• SGOT/SGPT									
• Alk-Phosphatase									
• HBs Ag.									
• HCV									
• HIV									
• PT/INR									

BABY: VANISHA

REGULAR DOSE PRESCRIPTIONS

TIME	DATE	DATE	DATE	DATE	DATE	DATE	DATE
	12/5/26						

**DRUG** IM. TAZOREFF

**DOSE** 200mg

**ROUTE** IV

**TIMING** 12hr

**SIGNATURE** 12/5/26

**START** 9pm

**STOP**

7Am Dhand

**DRUG** IM. LINOZOLIDIC

**DOSE** 50mg

**ROUTE** IV

**TIMING** 12hr

**SIGNATURE** 12/5/26

**START** 9Am

**STOP**

9Am Dhand

**DRUG** Sol. IBUTOP

**DOSE** 5ml

**ROUTE** P/O

**TIMING** 8hr

**SIGNATURE** 12/5/25

**START** 5pm

**STOP** 1Am

9Am Dhand

**DRUG**

**DOSE**

**ROUTE**

**TIMING**

**SIGNATURE**

**START**

**STOP**

**DRUG**

**DOSE**

**ROUTE**

**TIMING**

**SIGNATURE**

**START**

**STOP**

**DRUG**

**DOSE**

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**TIMING**

**SIGNATURE**

**START**

**STOP**

**DRUG**

**DOSE**

**ROUTE**

**TIMING**

**SIGNATURE**

**START**

**STOP**





## रोगी परामर्श रिकॉर्ड

Information Given by  
Signature with  
Employee Code)

संवाद का विषय :

इमें समझाया गया है कि हमारे मरीज BABY. VANAMA की स्थिति  
साजुक है।

मरीज को होने वाली दिक्कतों से अवगत कराया गया है।

1. खुशखबर
2. पानी की कमी
3. रुग्ण फीसिअल वर्क
4. ....
5. ....
6. ....

सभी तौर- तरीकों सहित प्रबंधन की मुझे खुशखबर भाषा में समझाई गई है। हस्तक्षेपों और प्रक्रिया को  
विधिवत समझाया गया है।

डॉक्टर का नाम Dr. KANU JAIN रिश्तेदार का नाम खुशखबर दुभाषिया का नाम  
(यदि लागू हो तो)

हस्ताक्षर.....हस्ताक्षर.....हस्ताक्षर.....

तारीख 12/05/26 समय.....तारीख.....समय.....तारीख.....समय.....

रोगी के साथ संबंध पिता

We also

Billing Instructions

1. Actual, 2. Package: Rs. .... (Excluding-Medicine, Bed, Blood, ICU, investigation) For.....

3. Medicines: Own/Hospital

Provisional Diagnosis:

→ Superficial Burn 25-30%

Investigations Advised:

CBC, CRP, ABS, RFT,

Care Plan:

→ CLEANING and DRESSING  
- ADMIT in ward.

→ 19. NS. 250 ml IV. STAT Bolus.  
then @ 40ml/hr

→ 19. TAZOLEFT 250 mg IV. BD.

→ 19. LINDOCTID 50mg IV. BD.

→ 19. PCM 300mg IV. STAT/SOS

→ SYP - IBUTOP 5ml. P/O STAT/TDS

Diet/Nutrition Advice: → SYP. ATARAX 5ml. SOS.

Soft Diet allowed.  
Safe Parenting:

Immunization:

Rehabilitation Advice:

RMO Name: .....

Doctor Name: DR. Kapil Jindal

Date & Time: .....

Date & Time: 12/05/2026, 8:30

Signature: .....

Signature: .....

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SPM Nagar, Bharatpur-321001 (Rajasthan)



## CARE FLOW SHEET

Name: Patient Name : Baby.VANDNA  
Age : 4 Years 0 Months 11 Days  
Reg. No. Sex : Female  
CU Bed /  
UMR No : UMR0021414  
Unit : Dr. KAPIL JINDAL/ LK MISHRA

Age/Sex:  
Consultant Name :  
Unit :  
DOD :



Date	12/05/26																			
Time	9Am	10Am	12ma	2pm.																
Temp(F)	101.3f	100.4f	98.6	98.4																
Heart Rate	128bmi	124bmi	122	126																
NIBP/IBP	99/50																			
Resp Rate	26	26	24	26																
SPO2	95.0	95.1	96	95																
CRT																				
RBS																				
Doramine																				
Dobutamine																				
Adrenaline																				
Noradrenaline																				
KCL																				
Insuline																				
Pupils																				
SCS-EMV																				
Venti. Data																				
Mode																				
FiO2	Pt. Inrain																			
Set Tidal Vol																				
Set Brs/Min																				
PEEP/CPA																				
Pr. Support																				
PIP																				
Patient Data Spont R.R.																				
TV/MV.																				
Pl. Position																				
Ur. Quantity																				
V Fluid Type	N. Saline																			
V Fluid R./Hr.	40ml/hr																			
Feed Type	Oral																			
Feed Mode	Cup																			
Feed Quantity																				