

ECHS / RGHS / ESIC / TPA / Cash / CSBY

# Jindal Super Specialty Hospital

(A Unit of Raj Jindal Hospital and Research Centre Pvt. Ltd.)  
SPM Nagar, Bharatpur-321001 (Rajasthan)



## INDOOR TICKET

MLC NO.: \_\_\_\_\_

Reg. No: 32753 LPD. No: 6252 Ward/Bed: NICU Consultant: DR. KAPIL JINDAL

Patient Name: B/o KHUSHBOO W/S/D/o: ANSHU CHAUHAN Age: MB Sex: M

Address: PAHARI GOPAL CHAUHAN, DEEN Ph. No.: \_\_\_\_\_

D.O Admission & Time: 21/8/2026

D.O Operation & Time: \_\_\_\_\_

D.O Discharge & Time: \_\_\_\_\_

D.O Delivery & Time: \_\_\_\_\_

Final Diagnosis: \_\_\_\_\_

Chief complaints with Duration:

→ BABY BORN BY EMR. LSCS. A FEMALE CHILD. 2 LOOP OF CORD. PRETERM (36 WKS) LOW BIRTH WEIGHT, RESPIRATORY DISTRESS MECONIUM ASPIRATION SYNDROME. SIC RETRACTION. SO GIVEN SBC / N. S. ASINE BOLUS. SUCTIONING. BABY ADMIT IN NICU.

- ① PRETERM (36 WKS)
- ② LBW (2.2 KG)
- ③ MODERATE RDS & MAS - HMD - GIVEN 2 BY HHFNC
- ④ PRESUMED SEPSIS

Past History:

DM: NONE

HT: NONE  
Asthma: NONE

Any other (Medical/Surgical):

Allergies: NONE

Medication History:

Nutritional Screening: ☐ Diabetic ☐ Diet Non Diabetic ☐ Type of Diet: 7

Last Three Month Appetite: ☐ Increase ☐ Decrease ☐ No change

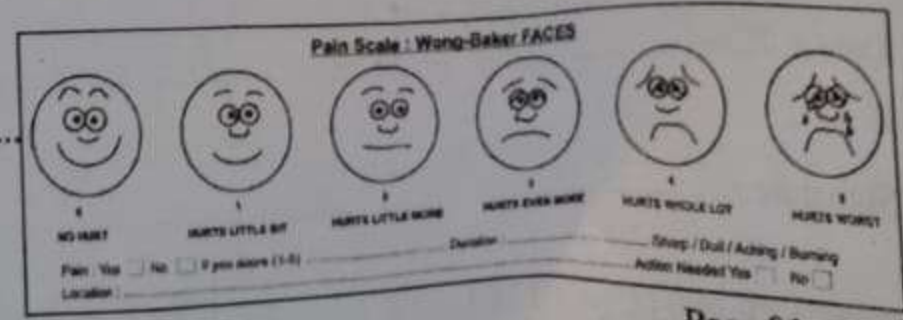
Dietician Inform: ☐ Yes ☐ No ☐ Not know it ☐ yes specify: 2

### Vitals

BP: 44 mmHg  
HR: 170 / min  
RR: 68 / min  
Sat: 94% C 2 BY HHFNC  
Temp: 98.4 OF

### Examination

CNS: TONE @ AIF AT LEVEL  
TACHYPNEA  
CVS: S1 S2 @ NO MURMUR  
Resp: BIL SUBCOSTAL RETRACTION  
Abd: P.A SOFT  
Local: 1 M A





Billing Instructions

(Excluding-Medicine, Bed, Blood, ICU, investigation) For.....Day

1. Actual

2. Package: Rs. ....

3. Medicines: Own Hospital

Provisional Diagnosis:

PRETERM (36 WKS), LBW (2.2 KG), MODERATE  
RDS & MAS - HMD / PRESUMED SEPSIS

Investigations Advised:

CBC, CRP, ABORH, CXR, ABU

Care Plan:

Rx → ① 2 BY HHFNC VENTILATION. FIO<sub>2</sub> 30%.

② N. SALINE 10 ML IV STAT.

③ INT. NAHCO<sub>3</sub> 2 ML + N. SALINE 3 ML IV STAT.

④ INT. VIT-K 0.5 ML IV STAT.

⑤ IV FLUID - DEX-10%, 45 ML + INT-NAHCO<sub>3</sub> 5 ML @ 5 ML/HR

⑥ INT. CEFOTAXIME 60 ML QV 12 HRLY  
(25 MG/KG/DOSE)

⑦ INT. AMIKACIN 15 ML QV 12 HRLY  
(7.5 MG/KG/DOSE).

⑧ MONITOR VITALS TEM | SP02 | HR | RR

⑨ CONDITION EXPLAINED TO PARENTS.

Diet / Nutrition Advice:

NBM

Safe Parenting:

→ NONE

Immunization:

→ NONE

Rehabilitation Advice:

→ MONITOR VITALS CLOSELY.

RMO Name:

DR. UTSAVI

Doctor Name:

DR. KAPIL JAIN

Date & Time:

21/8/26

Date & Time:

21/8/26

Signature:

Signature:

# Medical Laboratory, Raj Jindal Hospital and Research Centre Pvt. Ltd.

S.P. Mukherjee Nagar, Bharatpur-321001 (Raj.)

Contact No.: 05644-294560, 9929711555, 9414025942 E-mail: rjhospital@gmail.com, www.jindalhospital.in



UHID: UMR0032753  
Name: B/O KHUSHBOO D/O ANSHU GARG  
Age/ Gender: 1 Day / Female  
DR. KAPIL JINDAL  
Type/Remark: OPD  
Address: PAHARI GOPAL GARH DEEG

Case No: J13002

Registered On: 21/08/2026 11:51 AM  
Collected On: 21/08/2026 12:31 PM  
Received On: 21/08/2026 12:31 PM  
Reported On: 21/08/2026 12:33 PM



| TEST | RESULT | UNIT | REFERENCE RANGE |
|------|--------|------|-----------------|
|------|--------|------|-----------------|

3. Increase in CRP values are non-specific and should not be interpreted without a complete history

## BLOOD GAS ANALYSIS

### BLOOD GAS & ELECTROLYTE

|                               |        |        |          |
|-------------------------------|--------|--------|----------|
| pH. ( Strip Method )          | 7.286  |        |          |
| pCO <sub>2</sub> ( ABG )      | L 28.3 | mmHg   | 35 - 45  |
| pO <sub>2</sub> ( ABG )       | 82.8   | mmHg   |          |
| HCO <sub>3</sub> ( ABG )      | L 13.2 | mmol/L | 22 - 28  |
| HCO <sub>3</sub> (ST) ( ABG ) | L 15.0 | mmol/L | 94 - 100 |
| BE(ecf) ( ABG )               | -12.1  | mmol/L |          |
| ctCO <sub>2</sub>             | 14.0   | mmol/L |          |
| HCT                           | 34     | %      |          |
| tHb ( ABG )                   | 11.6   | mg/dl  |          |
| SO <sub>2</sub> ( ABG )       | 98.4   | %      |          |
| FO <sub>2</sub> Hb            | 97.8   | %      |          |
| FCOHb                         | 0.2    | %      |          |
| FMetHb                        | 0.4    | %      |          |
| nBiLi                         | <2     | mg/dl  |          |
| Ca <sup>++</sup> ( ABG )      | 0.31   | mmol/L |          |
| Lac                           | 3.47   | mmol/L |          |
| pAtm                          | 760    | mmHg   |          |



DR. PREETI TYAGI  
M.D. (Pathology)  
MCI/98-35445

*Preeti*

Dr. PREETI TYAGI  
MD (PATHOLOGY)  
CONSULTANT

Reg No: MCI/99-35445





UMID: UMHN032753  
 Name: BUNDESHBANDU D/O ANANDI BARI  
 Age/Gender: 1 Day / Female  
 Type/Remark: C/D  
 Address: RAJAJI GYNAL GARN DEEL

Case No: JJ0002

Registered On: 21/08/2026 11:51 AM  
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## HEMATOLOGY

### BLOOD GROUP & RH TYPING

BLOOD GROUP

BLOOD GROUP

B + POSITIVE

### CBC (COMPLETE BLOOD COUNT)

|                          |         |                     |         |
|--------------------------|---------|---------------------|---------|
| HAEMOGLOBIN              | 15.6    |                     |         |
| WBC                      | H 23.01 | 10 <sup>3</sup> /μl | 4 - 10  |
| NEUTROPHILS              | 62.1    | %                   | 45 - 70 |
| LYMPHOCYTES              | 26      | %                   | 20 - 40 |
| MONOCYTES                | H 10.9  | %                   | 2 - 10  |
| EOSINOPHIL               | L 0.8   | %                   | 1 - 6   |
| BASOPHIL                 | 0.5     | %                   | 0 - 2   |
| HAEMATOCRIT(HCT) ( ABG ) | 51.1    | %                   |         |
| Red Cell Count (TRBC)    | 4.3     |                     | 3.8 - 5 |
| MCV                      | 118.8   | fL                  |         |
| MCH                      | 36.3    | pg                  |         |
| MCHC                     | L 30.83 | g/dL                | 32 - 36 |
| PLATELET COUNT           | 273     | 10 <sup>3</sup> /μl |         |

## BIOCHEMISTRY

### CRP (C - REACTIVE PROTEIN)

|                            |     |      |        |
|----------------------------|-----|------|--------|
| CRP (C - REACTIVE PROTEIN) | 1.1 | mg/L | <5mg/L |
|----------------------------|-----|------|--------|

### Interpretation :

#### INTERPRETATION :

1. Measurement of CRP is useful for the detection and evolution of infection, tissue injury, inflammatory disorders and associated diseases.
2. High sensitivity CRP (hsCRP) measurements may be used as an independent risk marker for the identification of individual at risk for future cardiovascular disease.



DR. PREETI YAGI  
 M.D. (PATHOLOGY)  
 20/08/2026

DR. PREETI YAGI  
 MD (PATHOLOGY)  
 CONSULTANT

Reg No: MCI/08-35443