





- Tab Methylcellulose (Wong)
1 tab QD

- Syg A.C. 5 ml QD

- Tab riflofanis 20mg 1 tab QD

- Syg Digoxin 5ml QD

- H/C spells

- Refs to ENT O/D
EYE SPD.

by

- BERA

- Ophthalmic
evaluation

LAMA Summary

Acute Meningoencephalitis = raised ICP = Post-encephalitic sequelae = VAP (Pseudomonas) Acetabacter
 MRSA = RF = Dystonia = TT in situ

Actw (wt-15 Kg)

- Sypp Levure (100 mg/ml) 4 ml BD
- Sypp Phenytoin 60 mg BID
- Sypp Baclofen 3mg QID
- Sypp Levocarnitine 5ml TDS
- Tab Methylcobalamin 500 mg OD
- Sypp A to Z 5ml OD
- ✓ Tab Riboflavin 20 mg OD
- ~~Tab~~ Sypp Digene 5ml BD
- ~~Sypp~~ ^{Sypp} linezolid (100mg/5ml) 7.5 ml TDS
- ~~Sypp Amoxiclav~~ (
- ✓ - Sypp faropenem (50mg/5ml) 15ml TDS

Antibiogram → PTO

206/2



- Tab metoprolol sublingual 5mg OD
- Cef 2000 5mg OD
- Tab atorvastatin 20mg 1 tab OD
- Klorange 20mg 1 tab OD
- Lido physostigmine
- Leuovaflo 100mg 1 tab OD
- Leuovaflo 100mg 1 tab OD
- Leuovaflo 100mg 1 tab OD

Rule of embryonephalitis & virus 10th

No fever present.

OLF

Afibula, Neurolymphae Galle

- 100 90/mi
- 80 80/mi
- 60 60
- 40 40
- 20 20
- 10 10
- 5 5
- 2 2
- 1 1

Blub ①
Lenditel sandla ①

Salv (11/11)

1. H/W in 2000/1000 for 22 treatment.
2. Cyt nucleoside (5mg/1ml) 4ml 5-0, PO OD
3. Cyt pencytine (5mg/1ml) 7ml PO OD
4. Cyt baclofen (5mg/1ml) 5ml OD
5. Cyt leucocytine 5ml PO OD
6. Cyt PM (12mg/1ml) 5ml PO OD
7. Tab metoprolol 5mg OD
8. Tab pantop 20mg PO OD 7-10 days
9. Cyt A+O2 5ml PO OD
10. Tab atorvastatin 20mg 1 tab PO OD
11. Leuovaflo 100mg 1 tab OD

246/2



11kg

Plu/c. acute meningococcal & raised ICP post biopsy & wash
= dysentery & RT in situ

Dating fine
Abstable

Tracheostomy tube changed 13/1/23

RT changed 13/1/23.

No visible necrotics

O/E

Dysentery not

UL contracted not

Adv

- ① Syt dexusa (100mg/ml) 4ml \rightarrow
- ② Syt phenytoin (30mg/ml) 10ml \rightarrow
- ③ Syt Baclofen (5mg/5ml) 5ml \rightarrow (10)
- ④ Syt zincovit 5ml \rightarrow
- ⑤ Tab Methylcobalamine 500mg od
- ⑥ Syt A to Z 5ml od
- ⑦ Syt ~~idigate~~ tab Mboflavin 20mg 1 tab od
- ⑧ To change tracheostomy tube every 20-21 days
- ⑨ To change feeding tube every 3w-4w
- ⑩ Limb physiotherapy
- ⑪ RIV after 1 month in bed od wed/sat

Small
to

Adv ASLOCAL 3.5ml 7d 7-8 days

Antibiogram

Ankit 66209

	24/10	27/10	28/10	29/10	2/11	8/11	8/12	10/12
Monocly		9 d.	//					
Vancomycin		15 d				//		
Aciclovir			9 d.		//			
Azithro		1 d	//					
Meropenem	19/10	Meropenem		3 d.	//			
		Doxycycline		6	//			
				Colistin				

Aztreonam

Piptax

Linezolid

09
stopped
on
20/12

202A/9



patient referred from Paeds
w/ T-tube downsizing

Please large T-tube
for new patient.
(204-A)



4.5cm waffle Tube
inserted

Air Heat ⊕
B/L ALE ⊕

T-tube downsizing done

so Rd
P. Ray



DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI - 110001

OPD Registration Card

OPD Regd. No.

Book Date

CGHS Token No.

Registration Date

OPD No.

Referral No.

Referral Date

Patient Name

Age

Sex

Month

Day

Diagnosis

2/10 acute myocardial infarction
- 7- tube changed 2 month ago

old drawing
vital - stable

7- tube of 4.5 mm
unuffed in situ

R 7 insert

T-tube
changed
to 5.5 mm
unuffed
in situ

kindly change
7- tube to 4.5 mm
unuffed

(Lob-A)
R 10 SOS

Sharma

DR. RAM MANOHAR LOHIA
HOSPITAL
NEW DELHI

Note: You can get OPD appointment and print opd slip at home through online registration system (ORS) - ors.gov.in
Always bring this card with you when you come to Hospital.
Warning is Injurious To Your & Others Health.
EWS Patients to private hospital for free

You can consult your doctor through telemedicine from your home for more detail please visit rmlh.nic.in
Surgery is a major risk to your health.
Surgery is a major risk to your health.
Surgery is a major risk to your health.

2024/11



- 2116 acute nonperforating,
fast response signals
VAP 7 AF 1 system

- 1 tube changed on 10/10/22

0/11
- tube of dry
4.3 - - - - -
unuffed

Kindly change

1 - tube 10

dry 4.3 - - - - -
(204-11)

↓
Zone 4.3 - - - - - unuffed tube
- bio block (2) inside

CCPA dated

on 7/6/23

PG2

Dr. Kater
1/2/23

Dr. Kater
1/2/23
10/10/22
10/10/22
10/10/22
10/10/22

2/12/11

CU/B (RTDND)

CU/B
Dr. Anker.
Specialist RT
Respiratory
Intensive Care
Hospital, ...

TFR

CU Acute Vocal Dyspareunia.

2.9.11 2 respiratory failure.

on PS/CPAP 2 ET tube in situ.

(5mm uncuffed)

Referred to ENT for elective tracheostomy.

Plan

- 1) As per patient attendant, 4.5mm cuffed T-tube will be arranged on Sunday (12/12/11).
 RLU in RT 2 cuffed 4.5mm T-tube on Sunday (12/12/11) for tracheostomy.
- 2) SpO2 monitoring.
- 3) RLU in RT. JOL in respiratory distress.

[Signature]
Anker



अस्पताल में धूम्रपान निषेध है
 HOSPITAL IS NO SMOKING ZONE

स्ना० चि० शि० अनु० सं० और
 डॉ० राम मनोहर लोहिया अस्पताल, नई दिल्ली

DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

वाड सं/ Ward No. 102

परिचर पास

ATTENDANT'S PASS

रोगी का नाम

Name of the Patient

Mit

बिस्तर सं०

Bed No.

दिनांक तक वैध/Valid upto

3/11/22

सिस्टर इन्चार्ज/उपस्थित वरि० सिस्टर के हस्ताक्षर

Sign. of Sister I/C/on duty Sr. Sister



SUSHAKTI CHARITABLE TRUST

OUR RELIGION IS HUMANITY

PAN NO. ABBTS0498N

S. No 19

Date 27/02/23

सेवा में,

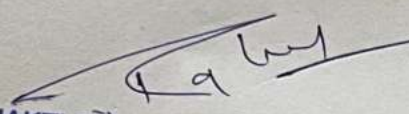
SUSHAKTI CHARITABLE TRUST
LGF-90, ANSAL ARCADE SECTOR-18
NOIDA, GAUTAM BUDDH NAGAR
U.P - 201301

महोदय,

मेरा नाम रामगीता है मैं आगरा अल्पवय की निवासी हूँ।
मेरे बच्चे का नाम अंकित है जिसकी उम्र 3 साल है।
डॉक्टर ने अंकित को "ब्रेन फिबर" कि शिकायत बतालाई
है जिसके कारण उसके दिमाग की नस टूटाई हो गई है
और उसे कोई भी पढ़ने लगे हैं। हमारी आर्थिक स्थिति
सही ना होने के कारण मैं हमें इसका इलाज करने में
अक्षम है। सुशक्ति चरिटेबल ट्रस्ट वाली ने हमारी मदद की है
और हमें आगे भी मदद दि जारे जिससे हम अपने अंकित
का इलाज अच्छे से करा सके।

धन्यवाद

रामगीता


SUSHAKTI CHARITABLE TRUST
Regn. No. 38/2021
LG 90, Ansal Furtunear Cade
Sector-18, G. B. Nagar
NOIDA-201301(U.P.)

LGF -90, Ansal Arcade, Sector -18,
Noida, Gautam Buddh Nager, U.P. 201301



भारत सरकार

Government of India



आधार

बाल आधार

Issue Date : 06/01/2021



अंकित

Ankit

जन्म तिथि / DOB : 07/11/2019

पुरुष / Male

यह आधार 5 वर्ष की उम्र तक ही वैध है

9652 9812 7579

मेरा आधार, मेरी पहचान