

ALAM COLONY,
WITHIN 2 DAYS (NO EXCHANGE ON SATURDAY & SUNDAY)



R



सफदरजंग अस्पताल, नई दिल्ली - 110029
SAFDARJANG HOSPITAL, NEW DELHI - 110029

अन्तर्गमन बहिर्गमन चिट्ठा
INTAKE OUTPUT CHART

नाम/Name Shyam आयु/Age
एम.आर.डी. नं. वाई पलंग नं. तारीख
MRD No. Ward 21 Bed No. 7R Date 23/08/26

सभी इन्द्राज मिली लि. में किए जाएं
entries to be made in ml. (milli litres)

पिछला समय Previous Time	अन्तर्गमन Intake				बहिर्गमन Output		अन्य Others
	ORAL Type Qty.	IV Type Qty.	Others Type Qty.	Urine	Suction	Drainage	
Day Total							
8 A.M.	milk 30 ml	2jct 30 ml		200 ml 1 hr			
9							
10							
11							
12 Noon							
1 P.M.							
2							
3							
4	NPO	2j- 60 ml		200 ml			
5							
6							
7							
8							
9							
10		2j- 11					
11							
12 Mid Night							
1 A.M.							
2		100 ml FL		U/O = 220 ml			
3							
4							
5							
6							
7							
कुल/Total		220 ml		620 ml			

Shyam / 7m/M

$\Delta =$ FTT $\bar{c}$ ADD $\bar{c}$ epilepsy $\downarrow$ evaluation $\bar{c}$

@ 12:00pm ~~encephalopathy $\bar{c}$~~ ~~VAD Ecoli + Renal AKI~~

• Inj hydrocort 20mg IV stat. ~~stat.~~

• i/v/o

morning

$\uparrow$ PCO₂



child taken
on max. settings

• Neb $\bar{c}$ ~~Adx~~ 1ml in 4ml NS
q 2hly

• Neb $\bar{c}$ Budecort 1ml + 4ml NS
q 8hly

• ~~Neb~~ Chest physiotherapy

S/V/O R-D

OG feeds
withhold

R/V SOS

conely,

$\rightarrow$ IVP DNS + 1:100KCl @ 20ml/hr
via dial
flow.

3/26

Shyam / 7M / M

A = PTT $\approx$ GDD $\approx$ Epilepsy & Evaluation $\approx$

Encephalopathy $\approx$ 4 AP (E. coli) $\approx$ the
local
ACU

AIO

• Extubated yesterday
Night

• MRI done yesterday

$\rightarrow$ C/L Report

• Cxh 8/0 @ OL collapse

O/E

HR = 93/min

RR = 28/min

CBT < 3 sec

CHPT = +/+

SPO₂ = 97%, 4 min

R/S = B/L A & tnt.
AE $\downarrow$ on @ Side
B/L Crepts (+)

CUS = S₁ S₂ tnt.

QIT = PA Sat 100%

Noted
plus

WT = 4.8 kg

Adv

- 1 min / 0.6 in situ

• RAM in situ

Dg - C+ Ins
~~macropenem~~
✓ Vancomycin

- C+ Ins ~~Levora~~
✓ @ 60
Ins Phenytoin @ 5
Ins Valproate @ 50

- Omit Ins ~~alex~~
✓

- Omit Ins F.

- OC feed
40% 2 hrs

- Neb Σ
Budecort
2 8 hrs

- Neb Σ Adv.
2 6 hrs

28/8/26

at
10:30pm

Shejam
7m/m

Child Extubated

↓ PSV-12
PEEP -6
FiO₂ - 30%.

Cpont. Breathing (+)

Activity (+)

B/LAE (+), Rt led

Kept ↓ NIMV

	HR	SpO ₂	CP/PP	Retractions	PIP	Mode - PSIMV PEEP	FiO ₂	RR
opm	170/min	98%	(+) / (+)	mild scr (+)	20	7	60%	30
2.00am	160/min	98%	(+) / (+)	mild scr (+)	20	7	60%	30
4.00am	142/min	98%	(+) / (+)	mild scr (+)	20	7	45%	30
6.00am	130/min	98%	(+) / (+)	mild scr	20	7	35%	30
8.00am	112/min	98%	(+) / (+)	mild scr	20	7	35%	30

BP - 98/52 mmHg

omit P.V. fluids

To start

OG feeds 40ml q2h

- Rest to continue

Dr. S. S. Srinivas

8/8/16

Shyam / 7m / m

Diso - FIT & ADD & Epilepsy & evaluation &
encephalopathy & VAP Acute & Prerenal AKI

↳ ? Infective encephalitis

AI

Spontaneous efforts +
Sensorium improving +

Plan to extubate after MRI brain
today.

CXR sp Rt upper lobe
collapse.

EKG

regular rhythm

QTc - 775 msec

PR - 1156 HR 136/min

Plan

- 5ca / mg / LKS
repeat sent

- Repeat vBG in
evening.

IX

CSF Bio < 70 S
65 P

CRP POS

RMAT

Typhidot

} neg

Cyto -

outside CSF

CSF < 5 cells all
lympho
30p / 50s

↓ JE neg

CBNAAT neg

4S - NG

Vitals

HR - 88/min

SpO2 - 100%

CRT - < 3s

CP / PP - +H

BP -

UO - 4.1 ml/kg/hr

Pls - B/L Act use Rt side cephal +

CVS - SIS + Mo

P/A - Soft NOOM Bst

18/2/26

FTT & GDD & Epilepsy & Evaluation

Shyam

1.12.26
24/2/26

fundus ok

To

DD

Dept of ophthalmology

VMMC & STN

Respected Sir/Mam,

This is regarding patient Shyam Kumar
Adm in wd-21 & Dx of FTT & GDD & seizure disorder
history. patient has features of Tuber on the body
& bedside examination as patient is on ventilator

Thanking you

DD

wd-21

Dr Shilvaggi

PhD

24/2/26

O/E: scleroderm
glau - - -
rube - - -

dis - - -

sk - - - skull - - -

Sp: No. of Hct

Abs: TORCH
profile

Ph 2 reports



macula scan

Dr. Rupal
PG Resident
Department of Ophthalmology
VMMC & Safdarjung Hospital
New Delhi-110029

[Signature]
Shyam



Siyah Huda

1000-1000

100 — by. 1000-1000
1000-1000
100

1000-1000
1000-1000
1000-1000
1000-1000

Shyam | 7m | male

21/8/26

gradually progressive.

weakness of left hand not raising (L) or R >
LH after 8 days of (R).

Not able to Raise Arm but able to legs.

→ altered consciousness since 17 days in form.

↓ eye opening, non responsive, eye opening,

no. eye, ↓ activity not recognizing.

parents. currently since 3 days not opening

eyes & ↓ minimal movements. one legs ble.

raising on tickling ~~siss~~.

→ past H/o

2m → fever & cold x 5 days

↓ NP

Nebr ✓

WAb ✓

342m → fever & cough & cold.

noisy breathing

admitted.

⊕ also abn left focal S₂ x 15 min. 1st 10.
↓ to AED x 2 wk stopped.

admit today

UREB

GTLS

type

(30 min) → Loc 1-2 hr

20/21/8/26

shyam / 7m / male

- Pls ① fever x ~~22 days~~ ^{22 days} 3-4 days. 25 days back
- ② abn body movement since 3rd day of fever.
(multiple episodes) ~~on~~ till 3 days back.
- ③ paucity of (R) limb movements. since 20-22 days
- ④ altered consciousness since 17 days.

HCOPI :-

Fever since 22 days. 25 days back.

• chronic

• documented ~~104~~ 104 F

• not a/w chills / rigors.

• relieved temp on medication.

• not a/w diurnal variation. currently
absent.

~~not~~ a/w cough ← mild, not a/w post tuss.
x 5 day
vomiting, currently not present, not a/w
any diurnal variatⁿ / postural variatⁿ.

Not a/w Rash / conjunctiv^e / Bm / EO /

Sinusitis.

SUSHAKTI CHARITABLE TRUST

OUR RELIGION IS HUMANITY

PAN NO. ABBTS0498N

S. No. 79

Date 30/8/21

सेवा में,

सुशक्ति चारिटेबल ट्रस्ट

ऑफिस नं. 5, इस्ट सफायर

सेक्टर-45, नोएडा

महोदय,

मेरा नाम सोहानी है और मैं बच्चे (उ.प्र) की रहने वाली हूँ। मेरे बच्चे का नाम श्याम है। वह केवल अभी 8 महीने का है। बच्चे में ही उसके दिल में दर्द और बेहोश होना होता रहा है। और जब हमने उसका इलाज करवाया तो उसके दिल में दर्द बहाया तो उसका ऑपरेशन जल्द से जल्द करवाना जरूरी है लेकिन ऑपरेशन में बहुत खर्च है और हम गरीब किसान हैं। हम ऑपरेशन का खर्च नहीं उठा सकते हैं। तो कृपया कहे आप हमारे इलाज में हमारी मदद कीजिए।

धन्यवाद

सोहानी

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