

1570 Bhavna

UHID - 12152

19/06/25







Girraj Ji Children Hospital

बच्चो का विशेष अस्पताल

MG Road, Near Girls College Gurugram - 122001 (Hr)
Tel.: 9871869863, 9910979863 | Email : girrajchildrenhospital@gmail.com



Dr. Mohit Kumar Agrawal

CASE SUMMARY

Patient's Name	Babyof BHAVNA	IPD No.	4399
S/O	GAURAV BHARDWAJ	UHID	20/00 12182
Address	PREM NAGAR -2 MATA ROAD SECTOR 12A GGN HR -12001	DOA	19-Jun-2025 01:02 PM
Age/Sex	3 Days / Female	TILL DATE	27-Jun-2025 04:02 PM
Consultant Name	Dr. Mohit	Discharge Type	CASE SUMMARY
Department/Speciality	PEDIATRICIAN & NEONATOLOGIST		

DIAGNOSIS

Term/AGA/Wt.3.0 kg/Female/MSL/ Respiratory Distress/HIE -II /Sepsis/Shock/NVD/Delivered at Silver Crest Hospital on 16-06-2025.

PRESENTING COMPLAINTS

Term/AGA/Wt.3.0 kg/Female/MSL/Respiratory Distress/HIE -II/Sepsis/Shock/NVD/Delivered at Silver Crest Hospital on 16-06-2025.. Baby had deleyed cry and developed respiratory distress just after birth, baby was put on Mechanical Ventilator Support and other supportive treatment given at Silver Crest Hospital, but dursing stay distress increased so, baby was referred to our hospital for further management.

EXAMINATION FINDING

O/E:

GC- Sick

CVS: no murmur, normotensive.

Respi: RR: 90/min, distress present, SpO2: 92% on Mechanical Ventilater

P/A: soft.

CNS: Af at level. Tone/cry/reflex: good.

COURSE IN THE HOSPITAL

Baby came to us with above mentioned complaints. Resp/CVS: baby was started on Mechanical Ventelater Support, during stay as need of FiO2 requirement increased, Baby had multiple episodes of apnea, so Inj Capnea started. Multiple inotorp (Inj Dopa/ Inj Dobuta) support started in v/o poor perfusion. Gradually distress settled, baby was extubated on day 6 of life and put on NIPPV Support again. As baby stabilized during stay shift to High flow on 7th day of life and still continue. As baby improved inotrops weaned and stopped. There is no episode of apnea seen in last 7 days and gestation is more tha 36 weeks now, Inj Capnea stopped.

CNS- Baby had seizure episodes at the time of admission. Inj Levera/Inj Midazolam/Inj Gardinal .out side EEG done s/o this bedside EEG record is abnormal and shows very low amplitude theta deita activity over hemisphere with poor reactivity seen .Suggestive of severe cerebral dysfunction . As baby improved ionotrops weaned and stopped.

GIT: baby was started on IV fluids, after stabilization minimal feeds were started, which were hiked as per tolerance and at present baby is on full feeds, tolerating well. Baby was euglycemic during hospital stay. Stool and urine passed. Sepsis: septic screen was done and IV antibiotics(Inj Piptaz/ Inj Amikacin) were given, repeat screen was raised CRP, so IV Antibiotics upgraded to level 2 IV Antibiotics(Inj Piptaz stopped and Inj Meropenm started).

TREATMENT GIVEN



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Mechanical Ventilatiion
NIPPV
HHHFNC
Inj Meropenum/Inj Amikacin
Inj Dopamine/Inj Dobutamine
Inj Capnea
Inj Midaz
Inj Vit K
IV Fluid
FFP/PRBC Transfusion
Oral feed

INVESTIGATION RESULT

All reports are attached with case summary

Rx	Name	Frequency	Duration	Route	Notes
I					
Treating Consultant / Authorized Team Doctor		Name / Signature			
Patient / Attendant		Name / Signature			
		Mobile No.			



Girrajji Children Hospital

Near Govt Girls collage ,MG Road, Sector 14, Gurugram, Haryana, 122001
9871869863/01242979863
hospitalgirrajji@gmail.com

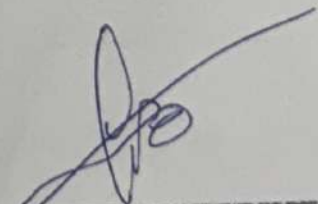
Admission & Discharge Record

Patient Name Babyof BHAVNA	UHID 20/00121 82	IPD No. .4399	Age 3 Days	Sex Female	Ward /Room NICU-NICU 1
S/O GAURAV BHARDWAJ			Patient No. 9971907398 Patient Type General		
Full Address	PREM NAGAR -2 MATA ROAD SECTOR 12A GGN HR -12001				
Date & Time of Admission 19/06/2025 01:02 PM					
Date & Time of Discharge					
Hospital Stay (No. of Days)					
Provisional Diagnosis			Clinical Assessment on Admission		
Final Diagnosis					
Secondary Diagnosis or Complication					
Operation / Special Procedure					
RESULTS	Improved	Referred	Left Against Medical Advise	Discharge on Request	Absconded

Dr. Mohit-

Doctor Name & Signature

Patient Name & Signature





Girraj Ji Children Hospital

Sec 14, Gurugram



Admission Request Form

Name ... B/o Bhavna ... Age ... 3 days ... Sex ... Female
ID ... 12182 ... Date of Admission ... 19/06/25 ... Time ... 1:02 PM
Routine () Emergency (✓) Planned ()

Brief History

Diagnosis

Plan of treatment

Any Known allergy

Aprox Estimate ... 5-6k per day | LAB Medication extra ... Velti-4k extra
ABG | X-Ray | PBS extra

Expected length of stay

Consultant Name Signature

Patient /Attendent Name ... Paurav Bhatnagar

Patient /Attendent signature ... 9911907398



Girraj Ji Children Hospital

Sec 14, Gurugram



Name B/o Bhavna Age Sex Wt Ht
Id 12182 Blood Group Date of Admission
Consultant Dr Mohit & Team Diet
Diagnosis HIE III

Doctor Progress Notes

26/06/2025

U/B DOD ↓ Dr Mohit

Q&A Image
On HFNC Support @ 3L for
HR - 150/40b/s SpO₂ - 92%
AE - R/O BIL AC Out on HFNC
w/o 1, 2 Out
MO - Jcture @ 4y @
P/B soft & 17
On Quality Feed
Anything well

2nd CRT 2y

Ch/B Duty Doctor

Q&A AC Stable.

All vitals stable on room air

Chest BIL AC Out

CRT 1st Out

CAS - Activity Out

PIA soft

Sepsis - Inj Pipterz B, Inj Amikacin

Rest on 1y

27/06/2025

tolerate orally well
so not 12y

↓
Plan to shift mother
side



UHID No : 20/002201

Patient Name Babyof BHAVNA

Rep. By : DR MOHIT

Lab No : 3987

Age/Sex : 6 Days / Female

Coll. Date 22-Jun-2025 10:17 AM

Rep. Date 22-Jun-2025 11:01 AM

HAEMATOLOGY

Description	Result	Unit	Ref.Range
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN (Hb)	12.9	gm/dl	14 - 18
TOTAL LEUCOCYTES COUNT	15250	/cumm	4000 - 11000
DIFFERENTIAL LEUCOCYTES COUNT (DLC)			
Segmented Neutrophils	17	%	50 - 70
Lymphocytes	66	%	20 - 40
Eosinophils	03	%	1 - 6
Monocytes	14	%	1 - 10
Basophils	00	%	0 - 0
TOTAL R.B.C. COUNT	3.84	million/cumm	3.5 - 6.5
P.C.V./ Haematocrit value	37.2	%	35 - 40
PLATELET COUNT	4.43	lacs/mm ³	1.5 - 4.5
RED CELL DISTRIBUTION WIDTH-RDW	14.5	%	11.7 - 14.5

Test done on Erba H-360 Automated Hematology Analyzer and Correlation with smear Examination.

Test conducted on EDTA whole blood

**** End of The Report ****



Shweta

Dr. Shweta Yadav
MD Pathology
Consultant Pathologist
Reg.No.- 88023

Customer Care

85274 94



UHID No : 20/002201

Patient Name Babyof BHAVNA

Rep. By : DR MOHIT

Lab No : 3987

Age/Sex : 6 Days / Female

Coll. Date 22-Jun-2025 10:17 AM

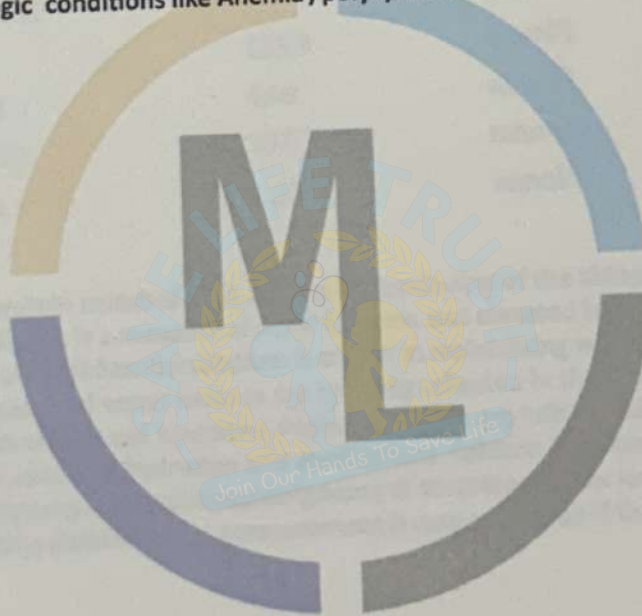
Rep. Date 22-Jun-2025 11:01 AM

SEROLOGY

Description	Result	Unit	Ref.Range
CRP (C-REACTIVE PROTEIN)			
C- Reactive Protein (CRP) Quantitative	7.8	mg/l	0 - 6

CRP is an acute phase reactant which is used in inflammatory disorders for monitoring course and effect of therapy. It is most useful as an indicator of activity in Rheumatoid arthritis, Rheumatic fever, tissue injury or necrosis and infections. As compared to ESR, CRP shows an earlier rise in inflammatory disorders which begins in 4-6 hrs, the intensity of the rise being higher than ESR and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, polycythemia etc.

(POSITIVE)

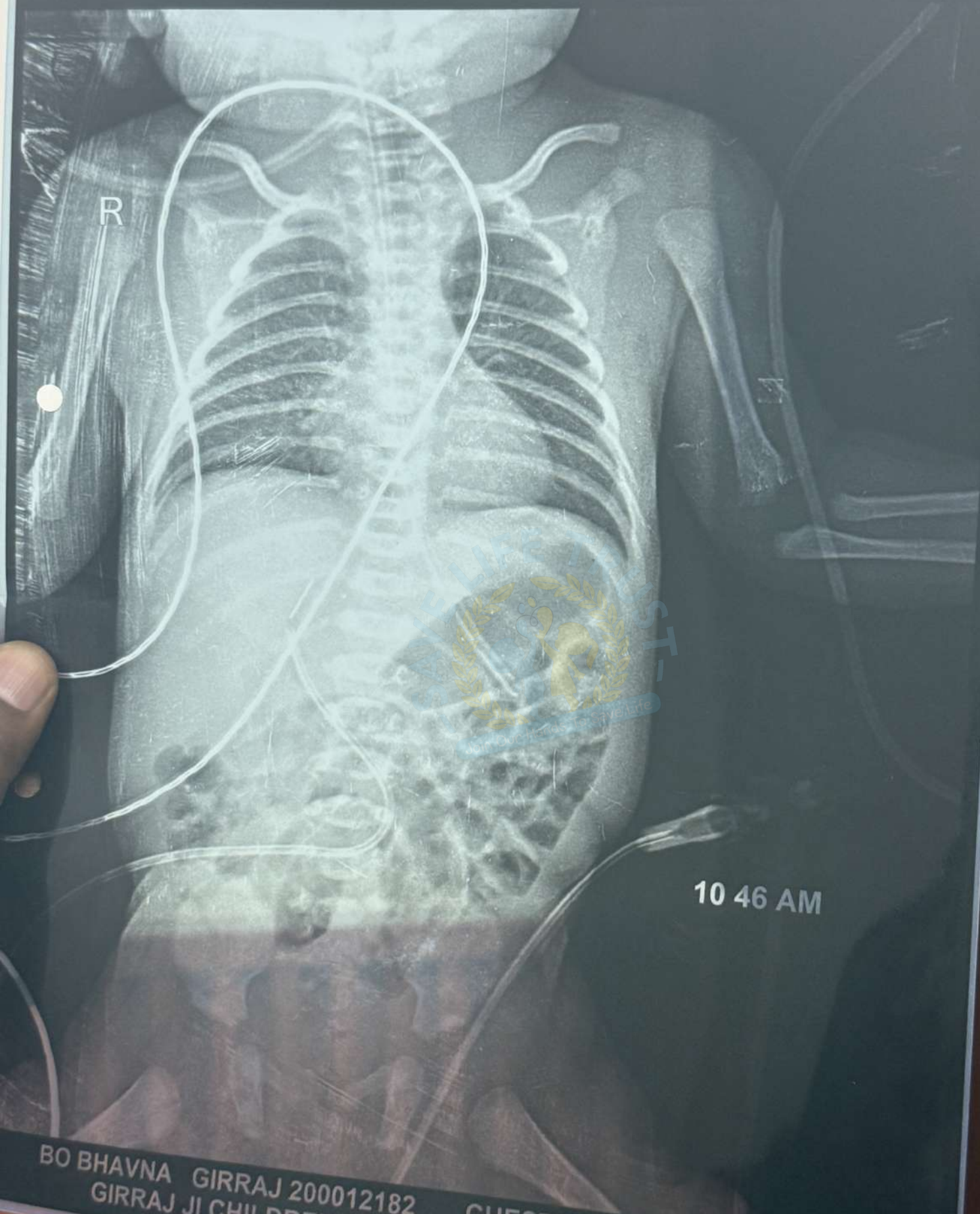


**** End of The Report ****



Shweta

Dr. Shweta Yadav
MD Pathology
Consultant Pathologist
Reg.No.- 88023



10 46 AM

BO BHAVNA GIRRAJ 200012182 CHEST,FRN A->P 06/22/25
GIRRAJ JI CHILDREN HOSPITAL,SEC-14 GURUGRAM



Girraj Ji Children Hospital

Sec 14, Gurugram



Name Blo Bhavana Age 30 days Sex F Wt Ht
 Id Blood Group Date of Admission
 Consultant Diet
 Diagnosis

Family Meeting Record & Consent Form

Sr No	Issue & discussion
1	हमने अपने मरीज Blo Bhavana को Girraj Ji Children Hospital में भरती कराया है। डॉ साहव ने बताया है कि बच्चे को सांस लेने में समस्या है इस लिए बच्चे को सांस की मशीन (Ventilator) पर रखना पड़ा है। डॉ साहव ने हमें खतरों व खर्चों को बली भाँति समझा दिया है। हम डॉ साहव की सभी बातों को समझते हुए हम अपने बच्चे का इलाज इसी अस्पताल में रहकर करा रहे हैं। अगर बच्चे को कुछ भी होता है तो इसकी जिम्मेदार हम स्वयं होंगे। इसमें डॉ साहव व स्टाफ व अस्पताल की कोई जिम्मेदारी नहीं होगी।

Sr no	Hospital Member present	Comment & signature
Sr no	Name of Pt. Relative	Relationship & signature
	<u>Ramesh</u> <u>Father</u>	
	<u>Prem Chandra</u> <u>Grand father</u>	



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Dr. Mohit Kumar Agrawal

ESTIMATE COST CERTIFICATE

Date: - 30/06/2025

To,

SAVE LIFE TRUST

This is to certify that **B/o Bhavna (UHID 20/00 12182)**. Baby was admitted in N.I.C.U. Girraj Ji Children Hospital on **19/06/2025 at 01:02 pm**. This baby is still very serious and needs NICU care.

Diagnosis: " Term /AGA/MSL / ELBW / HIE-II/ RDS /Apnea of Prematurity/Ventilator Support/ Sepsis".

The expenditure, including hospitalization, supportive care, and medical total expenses for treatment, is **approximately Rs. 2,90,000**. The details are attached with the letter.

S.NO	Description	Estimate (IN Rs.)
1	NICU Package Charges (5500*30)	1,65,000
2	Medical Charges	65,000
3	Laboratory Charges	15,000
4	Radiology Charges	5,000
5.	Ventilator Charges (4000*10)	40,000
	TOTAL	Rs 2,90,000/-

Please do the needful.

