



**Atal Bihari Vajpayee Institute of Medical Sciences and
Dr Ram Manohar Lohia Hospital
Baba Kharak Singh Marg, New Delhi-110001**

Doctor's Daily Assessment Sheet

NAME: Preeti Singh BED NO./WARD: 37/22 CR NO./UHID:
MLC NO.(IF ANY):

DATE & TIME	DAILY NOTES AND TREATMENT	DOCTOR'S SIGN.
<u>30/6/23</u>		
	<u>Dis</u> → ① sided empyema & ICD insertion (27/6/23)	
	<u>A/I</u> →	
	① fever spikes $\oplus$ = 100.2°F single spike	
	② <u>R.D</u> $\oplus$ = RR = 42/min	
	SpO ₂ = 98% on NP	
	Chest = LAE on ① side	
	(100/100) subscapular area)	
	ICD in situ $\oplus$ → (100ml output)	
	③ Hemodynamically stable	
	④ accepting orally well.	
	<u>O/E</u>	
	PR = 108/min	Q ₁₂ = B/L NVBS $\oplus$
	RR = 42/min	LAE on ① 100/100
	SpO ₂ = 98% on NP	Subscapular area
	Ext = warm	
	PP/PV = $\oplus$ / $\ominus$	CVS CNS PIA } WNL

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Doctor's Daily Assessment Sheet

NAME: PREETI

BED NO./WARD: C3F

CR NO./UHID

MLC NO.(IF ANY)

54r/F

DATE & TIME	DAILY NOTES AND TREATMENT	DOCTOR SIGN
29/6/23 6:30 AM	Dr → left sided Emphysema (ICD Indium (27/6/23))	
12000 P ₆₅ L25	Active Emphysema	
	1) high grade fever 101W @nt (upto 103°F)	
Urea/Creat → 14/0.2	2) <u>RD @nt</u>	
TS/DO → 0.2/0.1	RR → 50/min.	
OT/PT → 23/7 U/L	SPO ₂ → 98% LNP @ 2L/min	
TP/AIB → 7.1/2.69/1.1	Chest → ↓ AEM left sided Chest (T 4A/EmA/)	
Na+/K+ → 133/4.063		
Ca++/PO4 → 8.1/3.7 mg/dl 3)	<u>ICD indium</u>	
	Output →	
P.F → 25000 cells (P ₈₀ L ₂₅)		
S → 43 R → 10.1 AIB → 7.7 <u>O/E</u> act → 4.9 exudative	4) Hemodynamic stability	
	5) Oral Acupunct. adequate	
	6) Passing urine & stool adequately	
HR → 114/min	CRT → 3 sec	
RR → 50/min	CVS → S ₁ S ₂ @nt MO	

SPO₂ → 98% LNP

PP/PV → @/N
Ext → warm

Chest → B/L NVB S₁ S₂

↓ AEM left sided Chest (S₁ S₂)
CNS } WNL
P/A } WNL

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Doctor's Daily Assessment Sheet

NAME: Bhuti 5y/f BED NO./WARD: C3F/22 CR NO./UHID: _____
MLC NO.(IF ANY): _____

DATE & TIME	DAILY NOTES AND TREATMENT	DOCTOR'S SIGNATURE
<u>28/6/23</u>	<u>Dis</u> → <u>① sided empyema</u> & <u>ICD in situ</u> [27/6/23] 12000 (4.0 Lakh) 65/L5 KFT/LFT/SE. <u>A/G</u> → • <u>few spikes</u> ⊕ • B.D = ⊕ = RR = 40/min P.F → cyto = 75000 cells ↳ 80% Polymorph ↳ 20% Mononuclear P.A = Bio = 43 = S 10.1 = P 7.8 = ABG • Hemodynamically stable • Accepting orally well. <u>dx</u> <u>Adv</u> (Int = 15 Kg) PH = 108/min RR = 40/min SpO₂ = 98% on NP Ext warm ICD = B/L NUBS; 2 A&E on ① side CVS CNS PIA } WNL	
	① sided ICD in situ. Output = 500ml in last 24 hrs. (thick pus) - D₂ via NP @ 2 l/hr D₂ - inj mono 750mg i/v D₂ - inj Vanc 225mg i/v slowly over 1h - inj Pam 100mg i/v so - inj Pantop 15mg i/v - inj emet 2mg i/v so - strepto Kinase 3,00,000 U ICD slowly.	

Preeti 57 R/L

(L) sided empyema

5 ICD Insertion 27/6/2

AIR

(I) Fever

(II) Respiratory Distress.
(L) side empyema

(III) ICD Insertion Approx 400 ml ^{pus} drained

pus drained.

c/s by Dr. Varma

Plans

- ICD insertion call.
- Start Streptokinase

Vital

HR = 128/min

RR = 68/min $\rightarrow$ 52/min

PRRv $\rightarrow$ Hgnd

EPT warm

CRT < 3 sec

28/6/2

RR = 64

9.08 AM

Chest

BL ABP

$\downarrow$ in (L) side.

$\rightarrow$ O2 via NP.

- ~~IVF DNS~~ orally running

- IVF DNS (1:1000) 25 ml/hr

D' - 2g mono 750mg iv B.D

D' - 2g vanco 225 mg iv QID 8/00
over 1hr

- 2g Pen 150mg iv sos

- 2g Pantop 15mg iv QID

- 2g Emeral 2mg iv sos

- WIP R.D 1/27

11.0 $\rightarrow$ 12L $\rightarrow$ 4.6L
65/125/87

U = 14

CRT = 0.2

Na⁺ = 133.9

K⁺ = 4.63

Plan

- Repeat xy (post ICD)
- USG Chest (date)
 $\downarrow$ if separation
- Streptokinase

Dr. VISHU
MBBS, MSc
Senior
Department
ABVIMC
N...





Date: 30/06/23

सुवा में,
अस्थापक महोदय,
सेव लाइफ ट्रस्ट,
लाडो सराय
नई दिल्ली

महोदया मैं नन्दु प्रिती का पिता आपकी
अस्था से निवेदन करता हूँ, कि मेरी बेटी जोकी 5
वर्ष की है। मेरी बेटी जोकी खतरनाक बिमाड़ी से
पिड़ित है। उसकी तबीयत प्रतिदिन खराब होती जा
रही है। मेरी आर्थिक स्थिति खराब है।

कृपया करके हमें ज्यादा से ज्यादा मदद
प्रदान करें, अतः मेरी बेटी को नया जीवन प्रदान करें।

प्राची
नन्दु

