## PROFORMA - I

Remarks/assessment of Chief Medical Officer/Chief Medical Superinte	ndent
along with verified/countersigned papers	

- I. I have personally examined Sri/Spm./Systri. Advik. Chauhan s/o smt SHIVANI who is suffering from the disease/syndrome/disability k/c/o.lyH. sequalae = RoP zone 2 [Name of the disease] . . . . and in my opinion he/she may require frequent hospitalization for treatment/management.
- II. I also verify that Sri/Srit./Sushri. Advik Chauhan Slo Smt Shivang suffering from the disease/syndrome/disability/disorder k/clo. IVH sequalae c RoP zone 2 [Name of the disease] . . . . and the disease(s) find(s) mention at paragraph no. II. of the Annexure-I enclosed herewith.
- III.In my professional opinion and assessment, I am convinced that the treatment/management of the above-mentioned disease/syndrome/disability/disorder in paragraph two above is possible at the districts mentioned by the officer in his/her application submitted to Hon'ble High Court.
- IV. The treatment/management of the above-mentioned disease/
  syndrome/disability/disorder in paragraph two above is also available
  at the districts namely. Higher Centre, Sh.Ph.I. Lucknow, Alims. New Delhi, ETC
- V. I am aware that this document may be presented by the competent authority/applicant for further use by a competent Medical Board.
- VI. This document shall be valid only for . Twelve. . . . months only.

- Concerned District Judge/Officers in equivalent rank to get these matter expedited from the office of CMO/CMS.
- 2. The CMO/CMS are requested to retain the copy of this documents and documents placed before them for issuance of this document for future reference.



[Unit of Ashirvad Health Services Pvt. Ltd.]
B.38/1-C, Birdopur, Mahmooranj, Varanasi Tel.: 0542-2360146,2363534, 2362246
E-mail: ahrc2710@gmail.com | Website: www.ashirvad.org.in

### **Department of Neonatology**

# DISCHARGE SUMMARY

(91)

Name: B/O SHIVANI -1

Father Name: SHWETANK.

DOA:27/06/2023

Birth weight: 1.07kg.

APGAR: 5 & 9 @ 1' & 5'.

Mother's age: 31 yrs.

Gestational age: 28 WKS + 4 DAYS

MBG:-.O + VE

Sex: male

DOD: 21/08/2023.

Dis. Weight: 1.833 kgs.

Mode: : EM LSCS

Obstetric score: PRIMI

TSH: -

BBG: A+ VE

Vaccination: After weight gain of 2 kg

Diagnosis: PRETERM [ 28WKS+4 DAYS } / AGA/ VLBW/ RDS - POST

SURFACTANT /GRADE 2 IVH [LEFT] / RIGHT ROP STAGE 1

#### Mother history:

- Born to 31 years old primi.
- IVF conceived
- GDM
- LEAKING P/V SINCE 8 DAYS

#### Birth history:

- LSCS delivered on: 27/06/2023
- Poor respiration, delivery room cpap was given.
- Admitted in Ashirvad NICU.

#### Examination at birth:

Temp-35.6°C, HR-148/min, RR-45/min, SPO2-98% on ET-SIMV support.



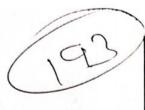




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#### Neonatal course:

- 1. RDS: In view of respiratory distress with silvermann Anderson score of 5/10, baby was given C-PAP support in delivery room and shifted to NICU and connected to NIPPV support with fio2 25%, PEEP-6. In view of persistent increase of oxygen requirement, surfactant was given under aseptic Precautions, Presently baby on mechanical ventilator with minimum oxygen requirement (SIMV/PIP 16/PEEP 6/FIO2 25%)
- 2. EONS: In view of leaking p/v for more than 8 days, antibiotic started at admission and sepsis screen and culture was sent.
- 3. NUTRTION: Baby was started on total parentral nutrition with amino acid 3g/per kg and kept NPO for baby. RT feeds were started from day 9th of life. feeds were escalated and baby was changed to paladai feeds . baby accepted and tolerated paladai feeds well . Mother trained in KMC, paladai feeds and nutrition. Lactational counseling was given to mother.
- 4. GRADE 2 IVH; Baby had recurrent apnoea, cranium ultrasound done revealing grade 2 ivh. screening was done on day 0,3,7,21 days. In last screening ivh was resolving.
- 5. ROP GRADE 1 [RIGHT EYE] :On 24-07-23 ROP screening was done revealing zone 2 vascularization. Then on 03-8-23 screening was done revealing zone 2 vascularization with no plus disease. Then on 10-8-23 again screening was done revealing zone 2 vascularization with no plus disease. [right eye]. On 17-08-23 iv ANTI VEGF was given.
- 6. INVESTIGATION: 27.06.23 HB 15.00, WBC 12.70, PLT 302, Cal 9.5, CRP 2.10
- 7. 29.06.23 HB 14.70, WBC 21.30, PLT 232, Sr create 1.05, Blood urea 55.50, Na 143, nk 5.10 cal 8.60, CRP 18.0
- 8. 01.07.23 HB 17.50, WBC 17.30, PLT 100, Creatinine 1.21, urea 98.00 8.47 Cal 8.97 CRP 5.90
- 9. 05.07023 HB 16.90, WBC 13.10 , PLT 0.22, Creatinine 0.83, Urea 152.36, Na-1 5.30,TSB 7.58 Cal 9.76 CRP 4.30
- 10.06.07.23 HB 16.80 WBC 22.70,PLT 0.75, Creatinine 1.18, Urea 182.54, Na 156.60 K 6.16 TSB 9.10, Cal 9.76 CRP 50
- 11.09.07.23 HB 18.20, WBC 13.30, PLT 0.50 Creatinine 0.90, Urea 68. Na 145 K 4.30 Cal 9.77. CRP 152





12. 12.07.23 HB 16.50, WBC 16.40, PLT 0.90, Graning A.Stril Vad Health 36.00

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Graphining A.Shri Vad Fleatin Services Pvt. Ltd.]

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- 13. 14.07.23 HB 14.30, WBC 20.90, PLT 0.45 Creatinine 0.72, Urea 28.60, Na 139.50, K 5.23 Cal 9.90 CRP 51.20
- 14. 18.07.23 HB 10.90 , WBC 19.30, PLT 0.95, Creatinine 0.60 Urea 26.30 Na 139.20, k 4.70 .cal 9.26 CRP 13.50
- 15. 25.07.23 HB 14.30 WBC 37.40 PLT 100.0 ,Creatinine 0.60, Urea 32.30, Na 145.20 K 5.40 Cal 9.47 CRP 1.33
- 16. 27.07.23 HB 13.80, WBC 37.30 PLT 160.0
  - 17. 31.07.23 HB 12.80 WBC 21.60 PLT 207.0, Creatinine 0.54 Urea 41.20, Na 137.10 k 5.35, cal 9.30
  - 18. 1.08.23 HB 11.50, WBC 12.90, PLC 202.0 Cal 9.33.
  - 19. 4.08.23 HB 10.20 WBC 15.00 PLC 185.0 Creatinine 0.40 Urea 14.90 Na 146.00 k 5.30 CRP 43.30
- **20.** 07.08.23 HB 13.50 WBC 20.30 PLT 260.0 CRP 8.90

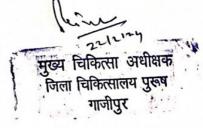
#### Examination at discharge:

Temp-36.5°C, Tummy Toe difference-Nil, HR-140/min, RR-40/min, CFT<3sec, SPO<sub>2</sub>-96% in roomair, RS-Air entry equal bilaterally, clear, CVS-S<sub>1</sub>S<sub>2</sub>+, PA Soft/NT, CNS-alert, AF at level, Cry, reflex, activity- Normal.

#### Advice on discharge:

- Palladai feeds 2<sup>rd</sup> hrly f/b burping.
- Drop Zincovit 0.5ml OD
- Drop Mount D3 1.5ML drops
- Syp Ostocalcium 1.5 ml TDS
- Drop. Gesispas 0.3ml SOS
- Warm care/Oil Massage.
- Danger signs explained. Follow up immediately if danger signs like †Respiratory Rate,

\*investigate for the Lethard | Hrine output and pustules > 10 in number.







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Follow up in neonatal OPD for weight check and Hearing screen review after 3days at 10amto 4pm.

- ROP Review as advised, MRI BRAIN, BERA

Dr. S.P. GUPTA M.B.B.S., D.C.H., M.R.C.P., (UK) Reg No: 8369. Paediatrician

Dr. SAMEER GUPTA

M.B.B.S., M.D. Pediatrician & Neonatologist Reg. No: 40360

Paediatrician & Neonatologist.

Dr. NIRANJAN N

MBBS, MD (Ped) DNB (Ped), DM (Neo)

Reg. No: 95043

Paediatrician & Neonatologist

Go de Sumt

# DR. R.P. CENTRE FOR OPHTHALMIC SCIENCES, AIIMS, NEW DELH RETINOPATHY OF PREMATURITY (ROP) SERVICES

UNIT I PHONE 9808725726 DATE 4/10/23 NAME ADVIK ROP No. UHID 107052195 General DOB 27/6/23 Clinic No: ROP- Clinic No.2023/ROP/1135 GA 28 WHS BW 1 kg Unit: Unit-II Room: 148 S/O SHEWATANK CHAUHAN, 3M 2D , M Days: Wednesday PMA 40 WK T 4/2 JUGES COLONY CIVIL COURT COMPOUND GHAZIPUR, DELHI, INDI Single/twins/others U expuld , NICU X2,0 mouth; & RDS, Ruemalitie Systemic Risk Factors VLBN , 02.71.6 money deluny Supplemenation; IVH Oland transfusion x 3 temes History of Previous Screening/Treatment (Date/Place/Diagnosis/Procedure)

24/7/25 RE ROP Zone 2 & no plus (Ashumad

18/8/23 R Huybrid disease 4 Zone 2 (Ash Vasanasi) x son Vasanasi) Injection Accounting 724/8/23 (ASCY Decranasi) Diagnosis / Examination Findings stagn 1- early 2 mi places. M. Early reachiats du pallor & Advice & Next Follow Up hip lak - Review for Lio DE

Neuro-oph clima opman

### FOLLOW UP

Date / PMA Examination Findings / Advice / Next Follow Up We can't reach untin RSC LIGHE CI Clegrance BES LIO dous ISR G-II 12/10/23 Adv & FEID Gariquin - P @ 0000 EID UAZV. (4) 00000 # (M) For aft / week in (M) 12/10/1023 BIE LIO dine & sedation inder muitions
No adverse events \_ arrepted feeds, well Mr = 42/min Spor = ax/. CES = sound 0 [ = 1 = 130 | win puis heves = war g 6 hours x1day for ros (D Syp VIr D (IM = 400 4) Int BI 3 vacculatu as per NES , dange signs explaned मुख्य चिकित्सा अंधीक्षक @ मुख्य कित्सालय पुरुष

Date / PMA	FOLLOW  Examination Findings / Advice / Next Follow	ALL IND	रतीय आयुर्विज्ञान संस्था DIA INSTITUTE OF ! SCIENCES (AIIMS) New Delhi, नियुक्ति पुर्ची APPOINTMENT SLIE KARAN SINGH RPC (I	MEDICAL	
- 11.23	211 12-13W	Department !	Name: R. P. Centre (Eye C Reporting Time: 9.00		ent Date: 15/02/202
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	(B) E) ROPLASER.
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* MON / WGD	Dr. Kartikey Singh 15:49
12 pm	MBBS, MS, HAPT, FVRS Ophthalmology
ROOM NO 14P	ASG HOSPITAL PVT, LTD.  Mahmoorgani, Varanasi
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Seal and Signature of the treating Doctor

REGISTER NOW **\** 1800 1200 111

# R. P. Center Go Mr Nbroy ji (M. s office)



## अo भाo आo संo अस्पताल/A.I.I.M.S. HOSPITAL बहिरंग रोगी विभाग /Out Patient Department



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अस्पताल के अन्दर धूमपान मना है।/SMOKING IS PROHIBITED IN HOSPITAL PREMISES

OPR-6 कमरा / Room बात चिकित्सा विभाग UHID: 107052195 Dept No.: 20230030032876 य०रो०वि० पंजीकृत रां०/O.P.D. Regn. No. Paedlatric पता/Address लंग मंगल, शुक्र, iex Age TUE.FRI(मेगत. शक) 14/11/2023 ADVIK ADVIK Queue: N18 SIOSHEWATANK CHAUHAN 208: 27 0b 2023: Port Natal 1- दान Diagnosis उपचार/Treatment दिनाक/Date Vendulation x 15 days slury topered PRBC'S & 17/8/23-> IVF Conception GDM. - Antebartin VLBW./L RDS-Part Surfactainit-LPriot done) क्रुंड्य चिकित्सा अधीक्षक dexa me luae of EAN AND GREEN AIIMS एमा के यही अंगदान जीवन का यहुमूल्य उपहार ORGAN O.R.B.O., AIIMS, 26588360, 26593444 www.orbo.org Helding - 1060 (24 hts service) meraaspatal.nhp.gov.in