

Dr. A. S. Vasudev

M.B.B.S., D.Ped. D.N.B., D.C.P., MNAMS, FIAP
Fellow International Medical Sciences Academy

CONSULTANT PEDIATRIC NEPHROLOGIST
(Children Kidney and Urinary Diseases)

From
ALL INDIA INSTITUTE OF MEDICAL SCIENCES
New Delhi.

Presently : Sr. Consultant
Apollo Hospitals
Holy Family Hospital
Max Hospitals
New Delhi (India)

Visiting
Department of Pediatric Nephrology
Montefiore Children's Hospital
Albert Einstein University, New York (USA)

Deptt. of Pediatric Nephrology
Medical College of Wisconsin
Milwaukee, WI, (USA)

Clinic :
" SHAISHAV "
181, Pocket-A,
Mayur Vihar, Phase-II,
Delhi - 110091, India
Ph.: 011-22779484, 22778552
(Consultation by Appointment)

Life Member :
Indian Academy of Pediatrics
Indian Society of Nephrology
Indian Society of Pediatric Nephrology
International Pediatric Nephrology Asso.
Delhi Nephrology Society
Exec. Board Member, IAP (2009-2010)
President IAP Delhi State (2011)
Exec. Director IAP (H.Q) 2011, 2012
Joint Secretary IAP (H.Q.) 2014, 2015
Convener, NCD, TAG, Asia Pacific Ped. Asso. (2016-2018)



Dr. Girish Agarwal
Dr. Manish

13/9/16

PMU 2 1/2 yr f.

21.6 kg

Idiopathic Nephrotic Syndrome

110/80

(RAS 3")

Initial Onset

No Hematuria RBC 0-1

Amasarca+

BP 110/80 (RAS 3")

S. Creat 1.14

CBC 13.2, 16, 000, P63 L34

S. Chel / 346

ESR / 114 4.5 / 0.6

Abl. 1. X-ray chest PA view → NAD

2. US KUB area & all measurements. NAD

Rx: Givan. Megaev forte for 2 days, Furosemide x 2 day

✓ 1. Syp. Argamentin DDS 5 ml BD 9 9 x 3 day

2. Syp. Flucold HF 1 ml OD 9 9 x 3 day

3. Nasal dps saline sos.

✓ 4. Tab Lasix (40) 1 OD 0 x 2d

5. Syp Ondem 5 ml sos
Emset

Rm.

- 14/9/18
20.8 kg
1. Omnacartil frate 5ml - 4ml - 4ml after meals
 2. Tab Lanzol jr (15) 1 OD.
 3. Uristix for urine test & maintain diary.

Rin 17/9/18

4. T. Loxix (40) 1 OD x 2 days. mm

- 17/9/18
21.4 kg
- Adv
1. T. Loxix (40) 1 sos

- Urine 3+
- Bl. 112/80
2. Continue Omnacartil, Lanzol
 3. Tab Envas (2.5) 1/2 OD

Rin 24/9/18

Bp was checked in Bareilly - found to be high
Envas 5 mg BD + Amlopim 2.5 mg OD

24/9/18
Urine since
20/9/18.
18 kg from
Bp 120/80
(RAS 34)
19.6 kg

In view of a quick response to steroids and a high Bp. the dose of Pred. is to be reduced (compromised situation)

- Adv
1. Omnacartil frate 5 ml BD os
 2. Continue Envas, Amlopim
 3. Lanzol. to continue

28/9/18
Bp 100/70
Urine ✓

Rin 2/10/18

Labetalol added yesterday 25 mg BD ..

Adv. Hospitalize for monitoring.

Adm Apollo

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Dr. Anish Agarwal
Dr. Manish

8/10/18

PIHU 2 1/2 yr F

IXIS

20 kg

Initial.

Urine ✓

Post 14.9.18.

Bp 118/80 (RAS 3") (95th centile 106/63)

Taking Omnefate 21 mg daily
+ Labetalol (100) 1/3 BD ^{10 10}_{0 0}

Bp in Bareilly (5/10/18) 99/55

Adv In view of HT, the dose of Prednisolone can
be reduced marginally

1. Sup Omnefate (5 mg) daily & after breakfast.
2. T. Lanzol (15) 1 D.
3. T. Labetalol (100) 1/2 BD ⁰⁰ if Bp is higher.
4. Sup Caldikind-B 2.5 mg D.

Rin 2 weeks.

20/10/18

1 Omnefate 5 mg daily till 26/10/18 (6 weeks)
→ Alt days

20.8 kg

Bp 110/60

Urine ✓

2. Lanzol, Caldikind, Labetalol.

Rin 9/11/18

9/11/18 Urine ✓

21 kg Behavior better

BP 120/80 Missed morning dose of Labetalol.

(RAS 3") Adh

1. Omnapate 5 ml A/D to continue
2. Continue Labetalol (100) 1/2 BD ..
3. Caldikind, Larizol to continue

Rn 28/11/18

4. Laxopex sachet 1/2 sach if reqd.

27/11/18

Wt: 21 kg

BP 104/70

Urine ✓

1. Omnaforte 2.5 ml A/D after meals
2. Tab Labibet (100) 1/2 QD ..
3. Caldikind to continue

Rn 4/12/18

11/12/18

Urine 2+

22 kg

No Edema

BP 110/70

Proteinuria x 5 day. No obvious infection
on Pred 7.5 mg daily since 7/12/18

- Adh.
1. Tab Labibet (100) 1/2 BD ..

2. Omnaforte 5 ml daily till rem → 5ml A/D

3. Calcium

27/12/18

21 kg

100/60

Urine 1+

Proteinuria x 1 wk. No obvious infection
Taking Omnaforte 39 mg daily x 3 day

Adh. 1. Omnaforte 13 ml daily till rem

→ O.F. 7 ml A/D → 5 ml A/D

2. Tab Dicaris (50) A/D

3. Calcium, Labibet to continue

Rn 27/1/19

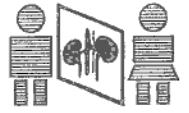
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Dr. Anish Agarwal

24.3.16

Presently : Sr. Consultant
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Holy Family Hospital
Max Hospitals
New Delhi (India)

16/2/19

P1114 ~ 3yr
(Barcilly)

IXIS

Visiting
Department of Pediatric Nephrology
Montefiore Children's Hospital
Albert Einstein University, New York (USA)

currently.

Initial.

Deptt. of Pediatric Nephrology
Medical College of Wisconsin
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22kg, urine

SDKIS

fb 110/70 (RAS 3")

Let 27.12.18

Cough+
chest Ravelin+

HT ⊕.

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Ab Urine R/m - WBC 60-70
E. coli

1. Syf Oflox (100) 5 ml BD x 1wk
2. Syf Levosalbutamol x 5day
3. Omnapate 5 ml A/D
4. T. Dicaris (50) A/D
5. T. Labibet (100) 1/2 BD ..
6. Syf Caldikind 2.5 ml OD.
7. Depura Syf (60K 5ml) 1/wk x 4 → 1/month.
18/4, 16/5, 16/6, 16/7.

27/3/19

90% Dysuria. Urine R/E WBC 65-70
Urine 2+ on Omnapate 3 ml A/D since 6/3/19

- (Home) BP 100/46 Ab
1. Syf Oflox (100) 5 ml BD x 1 wk.
 2. Syf Omnapate 3 ml daily till rem → A/D
 3. Continue Dicaris, Calcium.
 4. T. Labibet (100) 1/2 OD . rem.
 5. Syf Septran
 6. Depura (60K 5ml)

22/4/19

22.2/5 Urine R/m - WBC 18-20
Bd. 110/60 Cls - No gran

Urine (Spot) ^{R/m} Protein, Creatinine ratio

1. Continue Omnipate 3ml BID
2. Continue Dicaris, Calcium, Libibet, Septtran

Rin 10/5/19

4. Complete remaining vaccinations

20/5/19 Bd 110/100 / 50-54
wt: 22.5 kg Bd 100/60

Proteinuria 2+

Urine (Spot) Protein, Creatinine Ratio

1. Omnipate 5 ml BID till rem →
2. 5 ml BID → 3 ml BID
3. -Syp Argonentin DDS 5 ml BID x 5 day
4. Syp Ascoril Flu 2.5 ml BID
5. Continue Dicaris, Calcium, Libibet, Septtran

Rin 15/6/19

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9.30 - 12.30 pm.

3.30 - 8.30 pm.

(Sunday Closed)

Take Prior Appointments
to Save Time

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Sr. Consultant :
Indraprastha Apollo Hosp.
Max Hospital
Holy Family Hospital
N. Delhi, India

26/7/19

Pihu

1. Syf Omnacrid forte 10 ml daily
2. T. Labipet (100) $\frac{1}{2}$ tab B
3. T. Dicaris (50) 1 A/D
4. Syf. Caldikind P 2.5 ml Q
5. Syf Alex jr 5 ml B/D ...
3-5 day
6. Turkey lozenges
7. Immune UP KID 5 ml Q .

8. Urine R/as
(Spot) Protein / Creatinine ratio

Note : All Emergency Patients Must Reach Max Balaji Hospital Patparganj. Casualty &
Simultaneously inform me. This will ensure Prompt & Effective Management of Emergency Cases.

24/9/19

Proteinuria since 16/9/19. No obvious infection.
Was on Pred 9 mg BID + Dicaris.
Pred ↑ to 21 mg BID

Urine 2+

Adv

24/5 (Home) 24.7 (Clinic)
BP 101/54 (Home)
102/60 (Clinic)

1. Amnafate 7ml daily till
rem. → 5 ml BID x 2 wk.

2. Continue Dicaris, Labibet, Calcium, Vit D
Immune lg kid.

Res

3 CBC, KFT