



Tel. : 2494169, 2495006, 2494077
Ext. : 5006, 4077 (OPD), 4169 (O)

Department of Neurology
Sanjay Gandhi Postgraduate Institute of Medical Sciences
Raebareli Road, Lucknow-226014

OPD Follow-up Visit

Patient's Name... *Hari Shwardhan Singh* Age & Sex... *13 yrs. M.*
CR No... *2015901618* Consultant... *Prof. Sunil Pradhan*
Diagnosis... *GBS* MD, DM, FRCP, FAMS, FNASC, JSC.

- Antin type

met 17 Nov 2015

Date	Clinical Details & Advice
11 DEC 2015	

SGPGIMS - Lucknow

Registration Receipt

CR No 2015901618

Patient Name Harshwardhan Singh

Invoice No 18-191286814, 06/07/2018

Amount(Rs.) 100 (Rupees One Hundred Only)

Printed on 6-7-2018 12:37:3 Anurag Verma @172.16.5.29

189 20 74 19

05222496322 (11)

Date	Clinical Details & Advice
11 DEC 2015	<p>Symloc-DS 180 for 5 days. Agi-Moral (500) 1 tab daily x 5 days.</p> <p>• Nervijen plus 1 — 1</p> <p>Epo-forte 1 — 1</p> <p>• Gabaprin (100) 1/2 — 1/2 — 1</p> <p>1 — 1 x 1 month</p>
22 JAN 2016	<p>Alfa GPC 1/2 — 1/2 — 1/2</p> <p>✓ Pilo Laring 1 packet <u>once</u> daily.</p>

Next App 28/03/2016
28/03/16

Date	Clinical Details & Advice
28 MAR 2016	<p>Cap. Dalgheyon 100 (100) 100</p> <p>1. GLA (120) 1 — X — X</p> <p>2. Cap. Dalgheyon 100</p> <p>6/7/18 → (2). Sea-cod 1 — 1</p> <p>✓ SEA-COD X — X — X</p> <p>3. Alfa GPC 1 — X — 1</p> <p>4. Laring powder 1 packet — X — 1 packet</p> <p>✓ Gintage forte 1 — 1</p> <p>✓ SEA-COD</p>

Next App 28/03/16

Date	Clinical Details & Advice
08 JUL 2016	<p>Imaging</p> <p>S. Coenzym x — — x</p> <p>Adviser x 6 months</p>
27 JAN 2017	<p>CST</p> <p>Adviser x 2 months</p>
- 3 APR 2017	<p>CST</p> <p>Adviser x 3 months</p>
27 OCT 2017	<p>CST</p> <p>Adviser x 2 months</p>
27 OCT 2017	<p>6. Neurobin forte</p> <p>Adviser x 4 months</p>

Next App
9/11/2017
D.K.

Next App
10/7/2017
D.K.

Next App
27/10/2017
D.K.

Nusovin powder + will.
 Complan powder = ~~Intabril~~ Para oil
 27 OCT 2017
 14/11/18
 15/11/18
 16/11/18

CST
 6/7/18
 05 MAR 2018
 6/7/18
 14/12/18
 14/12/18
 14/12/18

Nervon 1
 Storkit 1
 alfa GPC 1
 Coenzym x 1
 CST
 29/04/19
 4 months
 7/8/20 Nervon 100
 Nervon 100 x 6 months
 Alfa GPC 100 x 6 months
 25/11/19 CST
 4 months

Department of Neurology, SGPGIMS, Lucknow
 24-7-20. EOPD
 Dr. Subant C.S.T. 6 Months (11-0-AM)
 Dr. Robin

Intabril
 Details of Certificates Issued
 Billed till 28-3-16 Date 28.3.16
 Billed till 26-1-17 Date 27.1.17
 Billed till 31-3-17 Date 3.4.17
 Billed till 26-10-17 Date 27.10.17
 Billed till 18-12-18 Date 14.12.18
 Billed till 29/4/19 k 11sting
 Billed till 23/6/20 seen in OPD
 Billed till 23/08/20 seen in OPD
 line OPD

9956998833 - 040404
 (Wave Cinema)

Important Information
 Monday/Friday
 Tuesday/Thursday
 - 8:00 AM OPD Days
 Prof. Sunil Pradhan/Dr. S. Jha/Dr. VK Paliwal
 Prof. UK Mishra/Dr. J. Kalita

Patients are advised to submit their medical vouchers (with original prescription) for reimbursement within 06 months



GEETA KRISHNA PHYSIOTHERAPY CENTRE

CONSULTANT PHYSIOTHERAPIST

Sandeep Tiwari

B.Sc., D.P.T.R., B.P.T., M.C.M.P.H.
Regd. No. : 143
Mob. : 9838681421

Mahesh Tiwari

B.Sc., D.P.T.R., B.P.T.
Regd. No. : 144
Mob. : 9919282145

ALL TYPES OF ORTHO & NEURO REHABILITATION

Name - Harshvardhan Singh 16/M Date - 27.11.20

Date of onset - November 2015

Δ - G.B. Syndrome

C/G - Problem in proper walking and Running.

O/E - Upper Extremities (Both are Normal)

- LOWER Extremities

Right	Left
Hip jt. - Flexor - 4 ⁺	NORMAL
Extensor - 4 ⁺	NORMAL
Abductor - 4 ⁺	NORMAL
Adductor - 4 ⁺	NORMAL
Knee jt. -	
Flexor 4 ⁺	NORMAL
Extensor 4 ⁺	NORMAL
Ankle jt. - Dorsi flexor 1 st	1 st
Plantar flexor 2 ⁺	Plantar flexor 2 ⁺
Inversion 1 ⁺⁺	1 ⁺⁺
Eversion 0 grade	0 grade

P.T.O.

Deformity and contracture - Foot drop @ Slightly Inversion.

P. T. Management - Controlled sustaine Stretching Programms.

- Passive Free Mobilization

- Active Assisted exxs.

- Active Resisted exxs.

- Active exxs.

Advised

- Active exxs

- A.F.O.

MAHESH TIWARI
B.SC.B.PT
CONSULTANT PHYSIOTHERAPIST
REGD. NO. 0144

Mahesh Tiwari

27/11/2020

RADIO IMAGING SERVICES



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PATIENT'S NAME	: Mr. HARSH SINGH	DATE: 18.11.2015
REF. BY	: Dr. A. K UTTAM	AGE/SEX: 12Y/M
IPD	: 94288	

PLAIN MRI D.L. SPINE WITH CONTRAST

SEQUENCES:

- MRI-spine dorso-lumbar was done with SE T1, T2, FAT SAT sequences in sagittal and SE T2 sequences in the axial plane. Post contrast study was also done.

STUDY SHOWS:

- Spinal curvature is maintained.
- Vertebral bodies are normal in signal intensities and alignment. Posterior elements are normal.
- Intervertebral discs are normal in signal intensity and height.
- **There is significant enhancement of conus medullaris and nerve roots of cauda equina, involving both anterior and posterior nerve roots.**
- Para vertebral soft tissues appear normal.

IMPRESSION: MR Study reveals-

- **Significant enhancement of conus medullaris and nerve roots of cauda equina- likely inflammatory polyradiculoneuropathy.**

Dr. SAKET NIGAM, MD
RADIOLOGIST

Dr. ANKITA V. YADAV, DMRD
RADIOLOGIST

Dr. DHIRENDRA RAY DNB, DMRD
RADIOLOGIST

Dr. SACHIN KHANNA, DMRD
RADIOLOGIST

Dr. ASHISH MAGGO, DMRD
RADIOLOGIST

Kindly inform any technical/typing mistake within 5 days for correction.

KINDLY NOTE

This Science of radiological diagnosis is based on the interpretation of various shadows produced by both the normal & abnormal tissues & are not always conclusive. Further Biochemical & Radiological investigations & clinically correlation is required to enable the clinician to reach the final diagnosis.

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PATIENT'S NAME : Mr. HARSH SINGH
REF. BY : Dr. A. K UTTAM
IPD : 94288

DATE: 18.11.2015

AGE/SEX: 12Y/M

SCREENING OF REST SPINE (MOBI VIEW)

- Vertebral bodies are normal in signal intensities and alignment.
- Intervertebral discs are normal in height and signal intensity.
- No significant disc bulge seen.
- Spinal cord is normal in size and signal intensity.

AKC

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RADIOLOGIST

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REGENCY HOSPITAL LTD.

A-2, Sarvodaya Nagar Kanpur

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PATIENT INFORMATION

Date: 19/11/15

ID: 15 1369

Name: MAST.HARSH -276-PICU

Age: 12 Yrs/Male

Ht/Wt: 0 cms/0 Kgs

Refd. By: DR.A K UTTAM DM Neurology (AIIMS)

IMPRESSION


Nerve conduction study was done in b/l median, b/l ulnar, b/l posterior tibial, b/l deep peroneal and b/l sural nerves.

MNCS: Normal DL, reduced CMAP and normal CV is recorded in b/l ulnar and posterior tibial nerves. Not recordable in b/l deep peroneal nerves. Normal in all other tested nerves.

SNCS: Normal in all other tested nerves.

F wave: Not recordable in b/l posterior tibial and b/l deep peroneal nerves and b/l ulnar nerves. Normal in rest of all tested nerves.

Impression: NCS is suggestive of pure motor axonal neuropathy in upper and lower limbs (AMAN). Please correlated clinically.


By: DR.A K UTTAM DM Neurology (AIIMS)



20.11.2015

CLINICAL SUMMARY

Master Harsh Singh 12 /M was admitted on 17.11 .15 with history of fever for 2-3 days around 5 days back and acute onset weakness in lower limbs since morning. There was no history of upper limb weakness, history suggestive of cranial nerve dysfunction or bladder/ bowel involvement. There was no history of animal bite. On examination patient was conscious, oriented, had normal cranial nerves examination, bulk was normal and tone was decreased in lower limbs. Power in upper limbs was 5/5 and in lower limbs 4-/5. Sensory examination was normal. DTRs were normal except ankle reflexes which were diminished. Planters were flexor. Nerve conduction study revealed CMAP drop of left posterior tibial nerve and absent F wave response in B/L posterior tibial and deep peroneal nerves. Serum sodium, potassium and CPK were normal. GBS was kept as provisional diagnosis and Inj. IVIG 20 gm/day was started and planed to continue for 4 days. MRI dorsal lumbers spine revealed significant enhancement of conus medullaris and nerve roots of cauda equina. NCS repeated after 2 days revealed sensorimotor axonal neuropathy in upper and lower limbs. However patient's weakness continued to increase and now he has weakness in upper limbs (shoulder 5/5, elbow 3/6, wrist 2/5) and neck (4+/5). Power in right lower limb is 0/5 and left lower limb 1-2/5. In the view of progressive course of disease and involvement of neck muscle impending need of Ventilatory support has been explained.

**Dr. Ashwani Kumar Uttam
DM (Neurology)**

SANJAY GANDHI POSTGRADUATE INSTITUTE OF MEDICAL SCIENCES, LUCKNOW

Physical Examination

Harshwardhan Singh / 11 / M

Department	Unit/Consultant
↳ Prof	Sunil Pradhan

Referring Doctor/Hospital:

Name:

Address:

Date

History

- Acute onset weakness in both Lt → Rt upper limbs x 25 days back
- Progressed to peak over 3-4 days
- No Bulbar involvement / respiratory involvement.
- Power improved but moderate weakness persisting in
- (History of Loose motion & fever preceded event).
- No H/O similar illness in past.
- No H/O family of similar illness.

Past History

Treatment History

- H/O ~~diarrhea~~ ~~fever~~ releases? Chicken pox at age of 5 year age.
- NO H/O ATT.

Personal/Social/Family History

- Mixed diet
- Normal birth history

- NCV → Pure motor axonal neuropathy
- MRE - D-L Spm

Inflammatory polyradiculopathy
(Contrast enhancement)

G-1

Cranioctm
Tr: Toponcle ER (50)
vit B₃

Physical Examination

Nutrition Status: Good/Adequate/Reduced

Anaemia	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Dyspnea	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Cyanosis	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Jaundice	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Edema	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>
Exanthem	No	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>

W		Kg
H		Cm
BP		mmHg
Pulse		/min

Extremities

Skin

Thyroid

WNL

Lymph Nodes

Not enlarged

Head & Neck

WNL

Chest

Bi clear

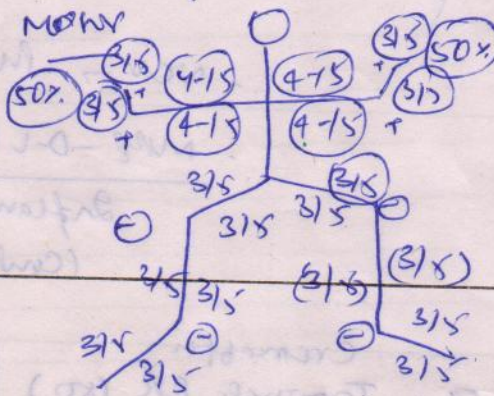
CVS

S1 @

Abdomen

Soft

*CNS → HMF → Subcut
Sunny → WNL*



Biceps Triceps

*RT +
LT +*

DTR

Flaccid

CNS

Provisional Diagnosis

Plan

Followup Notes

Impressos → GBG (Improving)
(AMAN)

R,

As Adv on Card



BHAWANI SINGH MARG, JAIPUR - 302 015, Raj. (India)

Tel. : 91 141 2566251-58, 5196666

Fax : 91 141 5110209

Email : info@sdmh.in

W : www.sdmh.in F : [www.facebook.com / sdmhjaipur](https://www.facebook.com/sdmhjaipur) Y : www.youtube.com/user/SDMHCARE

<p>नाम/ Name : MR. HARSHVARDHAN 100565 8/10/19</p>	<p>निदान/ Diagnosis : L4B Syndrome Lecumy</p>
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17 yrs / m Ambulatory

- ⊕ - In walking - Bil Ant drop, & Hypertension (Hemecushetor)
- Poor balance - in one leg standing
 - Can't squat to standing
 - Can't balance in one leg
 - Bil deviation in walk
- ⊕ Muscle power - Bil upper limb - 4/5
lower limb - 4/5
Ankle deviation of,

Adv - Bil T.A- stretching exercises & active & passive
deviation + feet bearing exercises
- balancing balance explained

Chauhan

Physiotherapy Section
Dr. P. K. Sethi Department of
Physical Medicine & Rehabilitation
S.D.M. Hospital, Bhawani Singh Marg
Jaipur, India

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24 x 7 आपात कालीन सेवाएँ उपलब्ध है।

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आपका खून किसी की जान बचा सकता है।



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cum Medical Research Institute, Jaipur**

Patient Copy



BHAWANI SINGH MARG, JAIPUR - 302 015, Raj. (India)
Tel. : 91 141 2566251-58, 5196666

Fax : 91 141 5110209

IID : 19100565 Date 08/10/2019 10:29

patient: MR HARSH VARDHAN SINGH www.facebook.com/sdmhjaipur www.youtube.com/user/SDMHCARE

Hus : MR H.B. SINGH

Age : 17 Yrs Sex : M

Address : 503-MSA TOWER -1 BUTTLER PA
LUCKNOW HAZRATGANT
LUCKNOW 7376741864

Physician : Dr. Anil Jain (P M R)

Rate : 600.00

निदान/ Diagnosis :

BP : mm / Hg
PR : per minute
WEIGHT : kg
PREGANCY : Y / N / NA
FEEDING MOTHER : Y / N / NA
DRUG ALLERGY : Y / N
SMOKING : Y / N / NA
ALCOHOL INTAKE : Y / N / NA
DIET : Veg. / Non-V.

8.10.19

FIC LGB Syndrome
recovering NOV 17, 2015

Ambulatory
used orthosis made in ottobock and
one got online. (Articulated AFO)
and Lucknow.
upper limbs recovered completely.
PT for muscle power chart both
upper and lower limbs.

Anil

डॉ. अनिल कुमार शर्मा
एमडी डीएनबी एनएमएफएलएल
डॉ. पी. के. सेठी, फिजीकल मेडिसिन
एवं रिहबिलिटेशन विभाग, एस.डी.एम.
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SDMH/REC/04