



Healing Hand

Sant Parmanand Hospital

NABH & NABL Accredited Hospital

Multi Super Speciality Hospital ISO 9001:2008

DISCHARGE SUMMARY



Name	Ms. PRIYA YADAV	UHID No.	PN957690
Age/Sex	14 Yrs /F	Regn No.	IP256756
Guardian	D/O SH. VIJAY CHAND YADAV	IPMR No.	MR195043
Address	4/5, SHAHEED SMARAK COLONY BARABANKI, LUCKNOW U.P.	Admitted on	18/Jun/2019 13:42
Panel	SMILE TRAIN	Consultant	Dr. S. C. SOOD / SACHIN RAJPAL
P.Condition	UNCHANGED, DISCHARGED ON 19/06/19	Case type	PLASTIC SURGERY
		Mobile No.	7827177405

Smile Train

DIAGNOSIS: Cleft Lip / Palate

CHIEF COMPLAINTS: Cleft Lip / Palate since birth

HISTORY & EXAMINATION:

History:

Patient was admitted with the above mentioned complaint. No history of Breathlessness, Fever, Vomiting. No past history of Bronchial Asthma or any known drug allergy. No other significant / relevant history.

On Examination:

Conscious, Oriented, Afebrile
No Pallor / Cyanosis / Icterus / Lymphadenopathy / Oedema .
Pulse - 81/minute, BP -100/60mmHg, Respiratory Rate -20/minute, Temp. 98°F
Chest - Bilateral clear & resonant
CVS - S1, S2 normal
P/A - Soft, Bowel sounds present.
CNS - Pupils B/L NSNR, moving all four limbs.

INVESTIGATIONS:

(12/06/2019) OPD Basis :

Hb: 11.4gm/dl, TLC: 9100 thous/ul
DLC : N- 68%, L -26%, E-04%, M-02%
BT: 2-10" , CT: 5-30"

All Lab Reports Attached

DETAILS OF TREATMENT :

Also seen by Dr. C.K.Jain (Physician)
Vital charting.

Self Attested

23/11/19

ADVICE ON DISCHARGE:

TAB. CLARINOVA 250mg ONE TAB TWICE DAILY
TAB. SINAREST ¼ TAB THRICE DAILY
SYP. RAPITUS PLUS 1TSF THRICE DAILY

ALL MEDICINES FOR 5 DAYS

SURGERY POSTPONED DUE TO COUGH, RUNNING NOSE

For Emergency Ambulance Contact: 23926465

Review with Dr. S.C.Sood in OPD, R.No.430, on Wednesday / Saturday at 4 pm
or in Casualty SOS.

"N"

S. Sood
CONSULTANT / REGISTRAR / RESIDENT M.O.

*** NOTE : THIS IS AN IMPORTANT DOCUMENT, KEEP IT FOR FUTURE REFERENCE AND
PLEASE BRING THIS DOCUMENT ON YOUR NEXT VISIT.**



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DISCHARGE SUMMARY

Name	Ms. PRIYA YADAV	UHID No.	PN957690
Age/Sex	15 Yrs /F	Regn No.	IP260578
Guardian	D/O SH. VIJAY CHAND YADAV	IPMR No.	MR195043
Address	4/5, SHAHEED SMARAK COLONY BARABANKI, LUCKNOW U.P.	Admitted on	30/Aug/2019 13:47
Panel	SMILE TRAIN	Consultant	Dr. S. C. SOOD / SACHIN RAJPAL
P. Condition	IMPROVED, DISCHARGED ON 03/09/19	Case type	PLASTIC SURGERY
		Mobile No.	9415957522

Smile Train

DIAGNOSIS: Cleft Lip / Palate

OPERATION PERFORMED: Alveolar bone graft done under GA on 31/08/19.

CHIEF COMPLAINTS: Cleft Lip / Palate since birth

HISTORY & EXAMINATION:

History:

Patient was admitted with the above mentioned complaint. No history of Cough, Cold, Breathlessness, Fever, Vomiting. No past history of Bronchial Asthma or any known drug allergy. No other significant / relevant history.

On Examination:

Conscious, Oriented, Afebrile
No Pallor / Cyanosis / Icterus / Lymphadenopathy / Oedema .
Pulse - 80/minute, BP -110/70mmHg, Respiratory Rate -22/minute, Temp. 98°F
Chest - Bilateral clear & resonant
CVS - S1, S2 normal
P/A - Soft, Bowel sounds present.
CNS - Pupils B/L NSNR, moving all four limbs.

INVESTIGATIONS:

(30/08/19) OPD Basis :

Hb: 11.7gm/dl, TLC: 10200 thous/ul
DLC : N- 69%, L -27%, E-02%, M-02%
BT: 2-05" . CT: 5-10"

All Lab Reports Attached

Self Attached
[Signature]
23/11/19

DETAILS OF TREATMENT :

Milk diet, Vital charting, Input /output charting, I.V. Fluids, Inj. Taxim, Inj. Voveran,
Tab. Cifran, Tab. Flexon, Tab. Rantac, Tab. Alprax, Tab. Panmid DSR.

ADVICE ON DISCHARGE:

LIQUID DIET

TAB. CIFRAN 500mg ONE TAB TWICE DAILY
TAB. FLEXON ONE TAB THRICE DAILY
TAB. ZINETAC 150mg ONE TAB TWICE DAILY

In case of Bleeding from operated site Report immediately to Hospital Casualty.
Emergency Ambulance Contact: 23926465.

Review with Dr. S.C.Sood in OPD, R.No.430, on Saturday(07/09/19) at 4 pm or in Casualty SOS.

"N"

CONSULTANT / REGISTRAR / RESIDENT M.O.

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-EIPT

12576 714 500/01
12702 4171 1000/01
12792 1419/10 500/01

भुगतान की रसीद साथ अवश्य लायें



Institute of Dental Studies & Technologies

N.H.-58, Delhi-Meerut Road, Kadrabad,
Modinagar-201 201, Distt. Ghaziabad (U.P.)

13004 - 500/- 23/11/19

Cr. No. 6809999- [] [] [] []

Date: 08/04/18

Name: Priya

Address: Meerut/ctk

Age/Sex: 13/F

Marital Status: Tel. No.:

Date	Department	Operator Name	Next App. On	Sign.
08/04/18	13274 - 500/-			

Self Attest
[Signature]
23/11/19