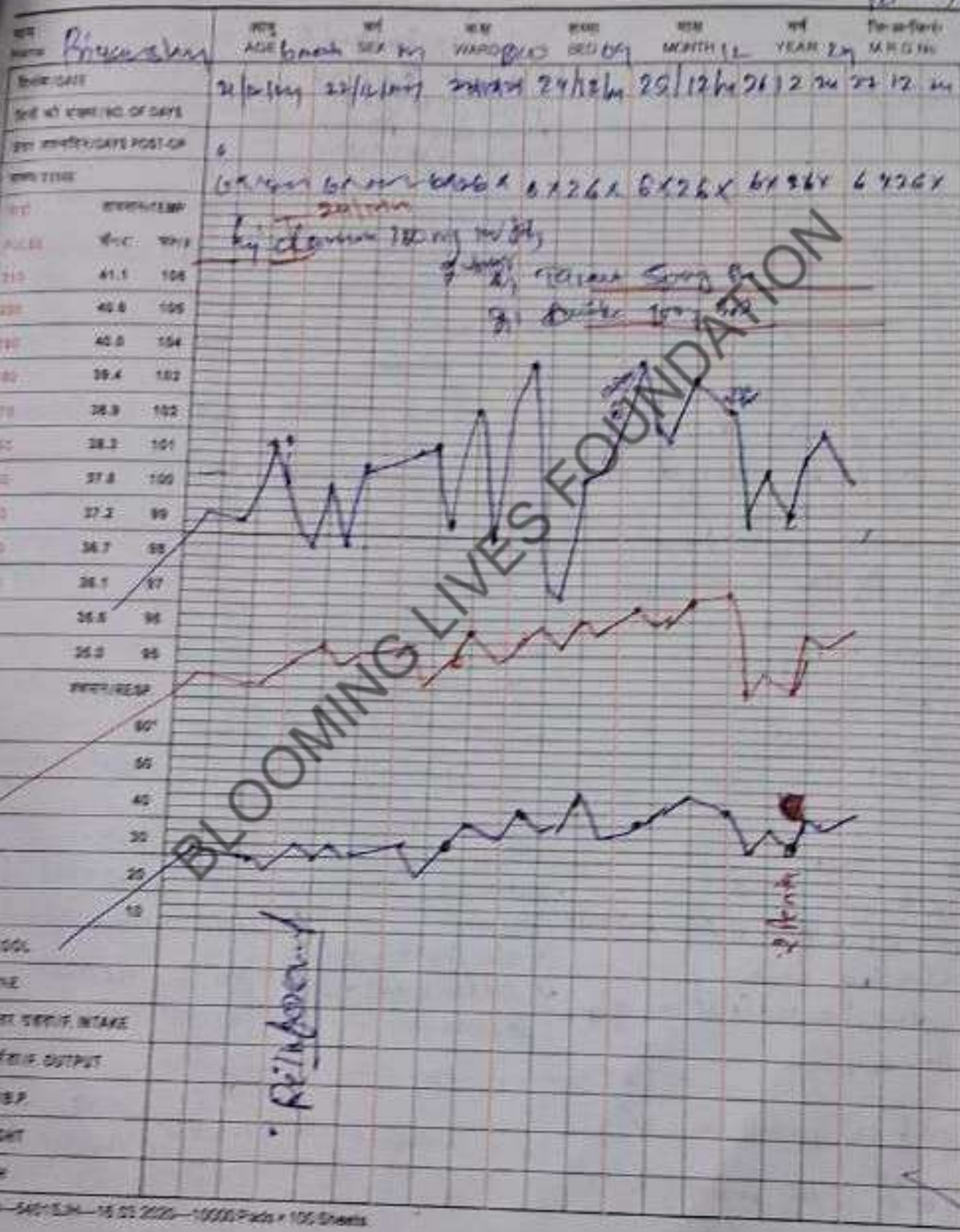




सफदरजंग अस्पताल, नई दिल्ली  
SAFDARJUNG HOSPITAL, NEW DELHI  
शारीरिक (हेल्थ-कार्ड) चार्ट  
GRAPHIC (T.P.R.) CHART

H.P.N. - 180263

180263



MU: 11689

DOCTOR'S INITIAL ASSESSMENT  
BURNS PATIENT HISTORY

Name: Prayanshu Age: 18 yr Gender: Male IP/UID No: \_\_\_\_\_  
 Date of burn: 20/07/20 Time of burn: 6:00pm  
 Date of admission: 20/07/20 Time of admission: 11:00pm  
 Cause: match  
 Referred hospital/Street address: P. Landshche Govt Hospital.  
 Referred hospital record no: 387065

- Also sustaining mild burn to the patient  
 by hot sals, when he accidentally spilled a  
 bowl filled with hot sals, which fell over him.  
 No up to vomitory/urinary  
 It was relieved by parents who cleared  
 the sals & clothes and applied corant oil  
 and took him to P. Landshche Govt Hospital  
 from where he was referred here for further  
 management.

History of associated trauma/fractures/head injury: none  
 Fluid therapy (if any) before Admission: none  
 History - Developmental milestones: achieve  
 overnight history: up to date

Present history  
 Surgeries/Injuries  
 Allergies  
 Medications  
 Family/Last Menstrual Period  
 Immunization/congenital anomaly

DR. HARSHA M.  
 Senior Resident  
 Dept of Burns, Plastic and Reconstructive Surgery  
 VMHC & S. J. H. Hospital  
 P. Landshche, Gandhinagar, Gandhinagar, Gandhinagar

सुश्रापण व तम्बाकू खेवन दंडनीय अपराध है।  
SMOKING/TOBACCO CHEWING IS PUNISHABLE OFFENCE



जी. एम. एम. सी. एवं सफ़दरजंग अस्पताल, नई दिल्ली  
V.M.C & SAFDARJANG HOSPITAL, NEW DELHI  
बासिंदा और छुट्टी का सारांश रिपोर्ट/ADMISSION AND DISCHARGE

Barcode and Hospital Information:

REGISTRATION NO: 11041001111111111111  
NAMES: TEJASWATI AG (Wife) / TEJASWATI AG (Wife)  
PATIENT'S NAME: TEJASWATI AG (Wife)  
PATIENT'S ID: 11041001111111111111  
PATIENT'S ADDRESS: ...

ICD Code: I10 (Hypertension, systolic)

रि. नं. / MRD No. वार्ड/Ward यूनिट/Unit CGHS Bed 1  
नाम/Name आयु/Age & Sex नं. / CIVIL Stat  
धर्म/Religion व्यवसाय/Occupation  
पिता/पति का नाम /Father/Husband Name आय/Income  
बं. गाँव/H.No. St. गाँव/Village टेलिफोन/Tele. Res. Office  
छात्र/छात्रवृत्त/Town P.O. जिला/District राज्य/State  
बासिंदा की तिथि और समय/Date of Admission & Time  
पता: निकटतम रिश्तेदार/Next to Kin's Address  
स्थानीय पता/Local Address

छुट्टी की तारीख और समय Date & Time Of Discharge	अस्पताल दिवस Hospital Days		
अंतिम निदान Provisional Diagnosis			
अंतिम निदान (साफ अक्षरों में) Final Diagnosis (In Block Letters)			कोड ICD Code
द्वितीयक निदान (साफ अक्षरों में) Secondary Diagnosis (In Block Letters)			
शल्य विचारों (साफ अक्षरों में) Operative Procedure (In Block Letters)			
परिणाम Result	व्यसित किया-जीवित Discharge - Alive	मर गया Died	अप autops Autopsy
	<input type="checkbox"/> डॉक्टर की सलाह से With Medical Advice <input type="checkbox"/> डॉक्टर की सलाह के बिना LAMA <input type="checkbox"/> लपटा Absconded	<input type="checkbox"/> 48 घंटे से कम Under 48 Hours  <input type="checkbox"/> 48 घंटे से अधिक Over 48 Hours	<input type="checkbox"/> हाँ Yes  <input type="checkbox"/> नहीं No
मृत्यु का कारण (साफ अक्षरों में) Cause of Death (Block Letter)	1. प्रत्यक्ष कारण Direct Cause (क) _____ की वजह से अथवा (परिणामस्वरूप) (ii) Due to (or as a consequences of) पूर्ववर्त कारण ANTECEDENT CAUSES (ख) _____ की वजह से अथवा (परिणामस्वरूप) (b) Due to (or as a consequences of) (ग) _____ की वजह से अथवा (परिणामस्वरूप) (a) Due to (or as a consequences of)		2. अन्य महत्वपूर्ण स्थिति OTHER SIGNIFICANT CONDITIONS मृत्यु की वजह सीमाती अथवा यह कारण जो बीमारी की स्थिति से सम्बन्धित नहीं है। Contributing to the death, but not related to the disease or condition causing it. _____ _____
दूर निवासी Jr. Resident	सी. रेजी. Sr. Resident	यू.प्रमुख Head of Unit	

श्री/श्री \_\_\_\_\_ सफ़दरजंग अस्पताल में भर्ती के लिए इस प्रकार का मूखे उपचार, जखिरर एवं उत्तरदायित्व के बारे में समझाया गया है। मैं अस्पताल के सभी नियमों और विनियमों का पालन करूँगा। | Mrs. / Mr. \_\_\_\_\_ willing for admission to Safdarjung Hospital & I have been explained about course of treatment. Right & responsibility I will abide by all Rules & Regulations of Hospital.

INPUTS/INTAKE					Outputs/OUTPUT		
Ref ID	Area	QTY	Unit	Time	QTY	Unit	Remarks
LV	Type	Cost			Laund	Wash Soap, & Other Use	
217	Breastfeed			217	50ml		
307	H2O 20ml			307	50ml		
317	Milk			317	80ml		
327	Wipe			327	50ml		
337	Diaper			337	50ml		
347	Diaper			347	50ml		
357	Diaper			357	50ml		
367	Diaper			367	50ml		
377	Diaper			377	50ml		
387	Diaper			387	50ml		
397	Diaper			397	50ml		
407	Diaper			407	50ml		
417	Diaper			417	50ml		
427	Diaper			427	50ml		
437	Diaper			437	50ml		
447	Diaper			447	50ml		
457	Diaper			457	50ml		
467	Diaper			467	50ml		
477	Diaper			477	50ml		
487	Diaper			487	50ml		
497	Diaper			497	50ml		
507	Diaper			507	50ml		

BLOOMING LIVES FOUNDATION

DEPARTMENT OF BURNS, PLASTIC & MAXILLOFACIAL SURGERY, SAFDARJUNG HOSPITAL

5.3.14-219

नाम:  
Name

आयु:  
Age:

दाहों का सूचकांक  
Burns Index No

दाहों की तारीख और समय  
Date & Time of Burns

लिंग  
Sex

पुरुष/स्त्री  
M/F

पि. अमि. वि. नं.  
MRD. No.

3am 5ml

इलाज कब शुरू हुआ  
Treatment Started at

दाहों का प्रतिशत  
Percentage of Burns

वजन  
Weight

कि. पा.  
Kg.

4am 5ml

पहले 24 घंटों का तरल पदार्थ  
I.V. Fluid First 24 Hrs.

5am 5ml

पहले 8 घंटों में तरल पदार्थ जिनकी सिफारिश की गई हो 1st 8 Hours Recommended Fluids	अवशोषण INTAKE						निकास OUTPUT	टिप्पणी Remarks
	समय Time	रक्त तथा प्लाज्मा Blood & Plasma	डेक्सट्रान Dextran रिंगर Ringers	ग्लूकोज Glucose सैलिन Saline	ग्लूकोज Glucose	एन. सैलिन N. Saline		
		1100 ml 2 Dext. Soln		900 ml		900 ml	900 ml	
				1100 ml		1100 ml	1100 ml	
जोड़ Total				2000 ml		2000 ml	2000 ml	
अगले 16 घंटों के लिए मात्रा Amount for Next 16 hours				3000 ml		3000 ml	3000 ml	
				500 ml		500 ml	500 ml	
जोड़ Total				1600 ml		1600 ml	1600 ml	
24 घंटों का कुल जोड़ Grand total for 24 hours				3600 ml		3600 ml	3600 ml	

VMHC & SH (11)



BIOCHEMISTRY LABORATORY REPORT  
भारत सरकार / GOVERNMENT OF INDIA  
संशोधन प्रयोगशाला / CLINICAL BIOCHEMISTRY UNIT  
संशोधन प्रयोगशाला / DEPARTMENT OF BIOCHEMISTRY  
आर्य समाज अस्पताल, जे.ए.ए. रोड / V.M.M.C. & Safdarjung Hospital, New Delhi

परीक्षा को अग्रिम में प्रेषित करें  
MARK THE INVESTIGATION

Aug 20-1

Device No.

Age Years Month Sex  
S. No. OPT Serus  
WARD Sample Type

14 08:14  
14 16:02  
PK17ANSHU  
0793  
2:40PM

Low Range - High Range Unit

Result	Low Range	High Range	Unit
136	136	145	mmol/L
3.3	3.3	5.1	mmol/L
13.9	17.0	43.0	mg/dl
0.18	0.80	3.30	mg/dl
0.32	0.30	1.20	u/L
38	10	35	u/L
14	10	45	u/L
126	40	128	u/L

TESTS  
GLUCOSE (ISE)  
GLUCOSE (ISE)  
CHOLESTEROL  
TRIGLYCERIDES (AFFE'S)  
TOTAL BILIRUBIN (OPP)  
ALT (OPCC w/o PSP)  
AST (OPCC w/o PSP)  
ALP (OPCC)  
AMYLASE

BLOOMING LIVES FOUNDATION

Dr. SHUBHAM SINGH  
Dist. of Biochem  
V.M.M.C. & Safdarjung  
New Delhi

Remark/Comments:

Sign. of Technician:

BLOOD ISSUE FORM / REACTION FORM

Please carefully check the details on bag form with patient's details before transfusion

IRB	PRBC	FFP	CRYO	SCAP
-----	------	-----	------	------

रक्त जारी करने वाले  
Date: 26/11/2018

रक्त मिलान  
रक्त समूह: A

रक्त के मात्रा  
No. of Units: 2

रक्त जारी करने वाले का नाम  
Dr. Anket Dewanda

रक्त जारी करने वाले का पता  
44943

रक्त मिलान करने वाले का नाम  
Patient's Name

Priyanshu

रक्त समूह  
Blood Group

A+ 22 Nov 2018 No 763

Blood Transfusion Notes

1. Time of starting transfusion
2. Any reaction observed (Yes/No) Specify
3. When did you notice?
4. What Measures were taken to counteract reaction & any other relevant comments

Sub transfusion @ 200 ml/hr  
No reaction observed  
Transfusion completed  
Dr. Anket Dewanda  
Junior Resident  
VMMC & SSG Hospital  
New Delhi

Transfusion Done By (Full Name of Doctor with Sign & Stamp)

Unit Head:

Instructions

1. Once issued, blood should be used immediately, never store even in ward refrigerator.
2. The blood bank will take it back only if it is returned within 30 minutes of issue.
3. When returning, please fill up the reaction form & give the reasons for returning the blood.
4. In case of serious reaction, the entire blood bag with the green IV Set & needle should be sent with 2ml of Post transfusion Patient's blood sample in EDTA/Plain vial.

अनुदेश

1. एक बार जारी करने के बाद रक्त को सुरक्षित रखना किताब बंद करके कभी भी रक्त फ्रिजरेटर में भी रखा नहीं जानना चाहिए।
2. ब्लड बैग इसे तभी वापस लेना, जब इसे इन्फ्यूजन के 30 मिनट के भीतर लौटा दिया जाएगा।
3. लौटाने समय, सूचना प्रतिक्रिया पोथी भरी और रक्त वापस करने के लिए कारण दे।
4. गंभीर प्रतिक्रिया के मामले में, रक्त नए किराबन्दा सेट और नुई के साथ, पूरे रक्त बैग को, रोगी के आराम के व रक्त के 2 मिलीलीटर नमूने को (EDTA / सादा शीशी में) के साथ भेजा जाना चाहिए।



सफदर जंग अस्पताल, नई दिल्ली  
 SAFDARIANG HOSPITAL, NEW DELHI  
 अस्पताल/अधिकांश O.P.D. RECORD

UCC: 116809

पेशवा/वर्क नं. 4551/24  
 CGHS Token No. 74  
 पेशवा/वर्क नं. 74

नाम	पेशवा/वर्क नं.	वर्क नं.	पेशवा/वर्क नं.
Priyanku	Mohit Kumar	74	R/o Delhi

दिनांक  
 20/12/24

DOB: 20/12/24  
 TOB: 6:00 pm  
 DOB: 20/12/24  
 TOB: 11:00 pm

Info: maintaining said from  
 to the patient by hot sabzi  
 when he suddenly pulled  
 @ bowl falled with hot sabzi;  
 which fell over him  
 No hot oil coming requires  
 It was found by parents who  
 cleaned the sabzi & clothes  
 and applied coconut oil and  
 took him to Panchsheel hospital  
 referred here to mother. Not  
 development after 24 hrs. always  
 hydration his tons. upto date

OTHER SIGNIFICANT CONDITION  
 मृत्यु की वजह दीजिए

Handwritten notes on the left margin, including a circled number '1424'.

INPUT/INTAKE					OUTPUT		
DATE	TIME	TYPE	QTY	TIME	TYPE	QTY	REMARKS
10/11/2004	9:14	Dalya	9:14				
	11:11	H2O SOND				10. passed	
		Breast feeding				13. passed	
	11:11	Kuchidi	11:11				
	3:11	Milk 100ml	3:11			10. passed	
3/11/2004	5:11	H2O SOND	5:11				
	7:11	Blood	7:11			10. passed	

BLOOMING LIVES FOUNDATION

सं. ४३-४१०९  
ए.ए.ए.सी.

बाबरजुंग अस्पताल, नई दिल्ली - ११००२९  
BABARJUNG HOSPITAL, NEW DELHI-110029  
रैडियोलॉजिकल विभाग (रैडियोलॉजी विभाग)  
MEDICAL PATHOLOGY (FLUIDS & EXCRETIONS)

रोगी का नाम  
Rajeshu

दिनांक  
22/12/24

डॉक्टर का नाम  
Dr. Sun

विकास  
M

रोगी का आई.डी. नंबर  
190703

रक्त/मूत्र/दूध  
R.B.P.D.

रोगी का नंबर  
22

रोगी का नाम  
Rajeshu

अध्ययन के लिए आवश्यक  
LEP

वैद्यकीय टिप्पणी/Clinical Notes :

BLOOMING LIVES FOUNDATION

वैद्यकीय अधिकारी का नाम एवं पद  
Name of Medical Officer with Seal

Name (Print)

दिनांक

पृष्ठ सं.  
0277

विकास

रक्त/मूत्र/दूध  
R.B.P.D.

Report Printout

Validated

Sample ID: 88  
 Department: \_\_\_\_\_  
 Patient Name: \_\_\_\_\_  
 Age: \_\_\_\_\_  
 Collection: 22  
 Physician: \_\_\_\_\_  
 First Name: \_\_\_\_\_  
 Gender: \_\_\_\_\_  
 Last Name: \_\_\_\_\_

RBC



Parameter	Value	Unit	Range	Reference
RBC	5.12	L	3.80 - 5.00	10 <sup>12</sup> /mm <sup>3</sup>
HGB	9.8	L	11.5 - 17.0	g/dL
HCT	30.4	L	37.0 - 47.0	%
MCV	59	L	80 - 100	fL
MCH	17.2	L	27.0 - 32.0	pg
MCHC	29.1	L	32.0 - 36.0	g/dL
RDWcv	19.8	H	11.0 - 16.0	%
RDWsd	47		39 - 57	fL
PLT	455		150 - 400	10 <sup>9</sup> /mm <sup>3</sup>
MPV	8.6		9.0 - 11.0	fL
PCT	0.415		0.100 - 0.500	%
PDW	—		11.0 - 13.0	fL

Morphology: 10  
 L: 11, A: 1, V: 1, M: 1, W: 1  
 Suspended Part: 0  
 Abn: 1, Lympho: 1  
 NRBC: 0  
 Anis: 0  
 Anis: 0  
 Micro: 0  
 Micro: 0  
 Micro: 0

Remarks: RBC: no Run 12/22/2024 15:37:17  
 WBC: no Run 12/22/2024 15:37:17  
 PLT: no Run 12/22/2024 15:37:17  
 DWT: no Run 12/22/2024 15:37:17  
 Range: Limited

WBC



Parameter	Value	Unit	Range	Reference
WBC	11.1	H	4.0 - 10.0	10 <sup>9</sup> /mm <sup>3</sup>
NEU	67.8	%	55 - 70	%
LYM	26.2	%	20 - 40	%
MON	1.3	%	1 - 8	%
EOS	0.1	%	0 - 5	%
BAS	0.1	%	0 - 5	%
ALY	1.2	H	0 - 5	%
PL	1.7	%	0 - 5	%

LMW



Microscopic Examination

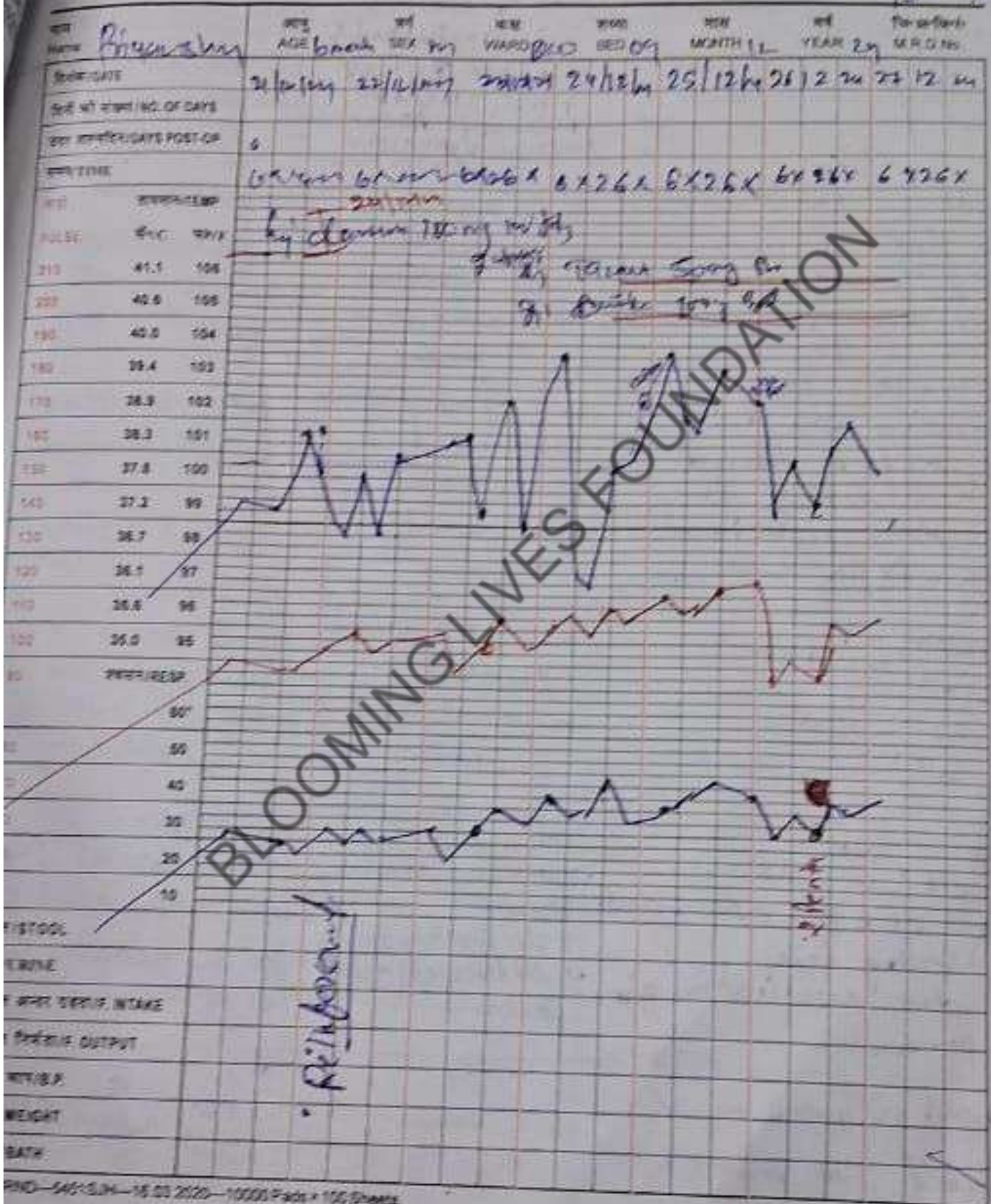
Neutrophils	<input type="checkbox"/>	<input type="checkbox"/>
Bands	<input type="checkbox"/>	<input type="checkbox"/>
Lymphocytes	<input type="checkbox"/>	<input type="checkbox"/>
Monocytes	<input type="checkbox"/>	<input type="checkbox"/>
Eosinophils	<input type="checkbox"/>	<input type="checkbox"/>
Basophils	<input type="checkbox"/>	<input type="checkbox"/>

Metamyelocytes  
 Myelocytes  
 Promyelocytes  
 Band  
 ATY LYM  
 Other  
 Total WBC  
 NRBCs

साफदरजंग अस्पताल, नई दिल्ली  
 SAFDARJUNG HOSPITAL, NEW DELHI  
 ग्राफिक (टी.पी.आर.) चार्ट  
 GRAPHIC (T.P.R.) CHART

R.P.R.-118.J.H.-3

180763



HEC: 11689.

DOCTOR'S INITIAL ASSESSMENT  
BURNS PATIENT HISTORY

Prayondin 19/11/1989 Male  
Age 19 Gender Male IP/UIDO No. \_\_\_\_\_  
Time of burn 6:00pm  
Time of admission 11:00pm  
Admitted by mother

Referring hospital/clinic address: Bulandshahr Govt Hospital.  
Referring hospital record no: 887085

- M/o Santaromy told him to the patient  
by hot water, when he accidentally pulled a  
bowl filled with hot water, which fell over him.

No h/o loss of vomiting/diarrhoea

It was removed by parents who cleared  
the site & clothes and applied coolant oil  
and took him to Bulandshahr Govt Hospital  
from where he was referred here for further  
management

Developmental milestones: achieved  
immunization history: up to date

BLOOMING LIVES FOUNDATION

DR. HARSHAN  
Senior Resident  
Department of Burns and Plastic Surgery  
VMHC & Bulandshahr Hospital  
Bulandshahr, U.P.

Intake					Output		
No.	Time	Food	Time	Amount	Urine	Stool	Other
	11:00	Breakfast	11:00	50ml			
	12:00	H <sub>2</sub> O 20ml	12:00	50ml			
	1:00	Milk	1:00	50ml			
	2:00	Milk	2:00	50ml			
	3:00	Milk	3:00	50ml			
	4:00	Milk	4:00	50ml			
	5:00	Milk	5:00	50ml			
	6:00	Milk	6:00	50ml			
	7:00	Milk	7:00	50ml			
	8:00	Milk	8:00	50ml			
	9:00	Milk	9:00	50ml			
	10:00	Milk	10:00	50ml			
	11:00	Milk	11:00	50ml			
	12:00	Milk	12:00	50ml			
	1:00	Milk	1:00	50ml			
	2:00	Milk	2:00	50ml			
	3:00	Milk	3:00	50ml			
	4:00	Milk	4:00	50ml			
	5:00	Milk	5:00	50ml			
	6:00	Milk	6:00	50ml			
	7:00	Milk	7:00	50ml			
	8:00	Milk	8:00	50ml			
	9:00	Milk	9:00	50ml			
	10:00	Milk	10:00	50ml			
	11:00	Milk	11:00	50ml			
	12:00	Milk	12:00	50ml			

2R -  $\frac{N}{2}$  days from

1 hour

12PM - biscuits  
3PM - 1hr  
4PM - 2hr  
5PM - 2hr  
6PM - 20min

1 hour

45/60  
Bacterial  
- 1 oral  
- high protein diet  
- monitor vital

BLOOMING LIVES FOUNDATION