





ABVIMS and Dr RML Hospital

New Delhi - 110001

ECS PICU / HDU DAYCARE SHEET

DEPARTMENT OF PEDIATRICS

Name	Almpal.	Date / Time-	27/8/25	DOA-	17/8/25
Age/Gender	1y1f.	CR. No. -	52261	DOPICU / HDU -	3
Weight	7kg	Bed number	3.	DOMV-	5+3
Diagnosis	PTBM & Raised ICP & shock. O HCP (Obstructive) & Dyselectrolytemia (hypernatremia + hypokalemia)				

Current issues

Issue	Intervention	Current status
① Shock -	On Adm stopped.	
② Hypernatremia -		Urine output
③ Hypokalemia -	3.08 → potassium added.	@ 1.1 meq/L.
④ Obstructed HCP -	END in situ	

Respiratory system

Support	SIMV/PSV/CPAP/HFNC Morning Evening	ABG/VBG	Time- Morning Evening	ET size	4
Delta P/PS	10+5/10	PH	7.41	Fixed at	
PEEP	5	PCO2	30.7	Changed on	21/8/25
MAP		HCO3	19.8	VAP---	no.
RR (T/Vent)	28.	BE		ICDT----	
VT _E /VT _I	1.7	PO2	68.7.	(drain volume)	
Min Vent		OI		other drains	
FIO2 / SPO2	40%/98	ICa	0.8		
C/R		P/F ratio			
CXR/USG		Anion Gap			
Examination + Other issues with Mx	lac 1.8				

Atal Bihari Vajpayee Institute of Medical Sciences and
Dr. Ram Manohar Lohia Hospital
Baba Kharak Singh Marg, New Delhi-110001



Doctor's Daily Assessment Sheet

NAME: Dimpal
1 yr / F

BED NO./WARD:

HOU-3

CR NO./UHID

MLC NO. (IF ANY)

DATE & TIME	DAILY NOTES AND TREATMENT	DOCTOR'S SIGN.
25/8/25	Neurosurgery Reference	
	To	
	The SR/DOD	
	dept of Neurosurgery	
	Dr RML Hospital, Delhi	
	Respected sir/Ma'am	
	above mentioned pt is c/o partially treated	
	meningitis T RF T obstructed HCP (EVD-in-situ 21/8/25)	
	T shock T hyponatremia T hypokalemia	
	kindly visit this pt bedside evaluate and	
	plan for VP shunt & give your valuable opinion	
	for further management.	
	Thanking you	
	Noted	
	Cg	
	Dr. Saddam Husain Junior Resident Department of Pediatrics AVBIMS & RML Hospital New Delhi-110001	

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Doctor's Daily Assessment Sheet

NAME:

BED NO./WARD:

CR NO./UHID

MLC NO. (IF ANY)

DATE & TIME	DAILY NOTES AND TREATMENT	DOCTOR'S SIGN.
25.08.2025 1:35 pm	<u>Shifting vitals (on receiving at HCU)</u> RR = 152/min RR ↓ vent BP - 92/86 mmHg W good Pwasm SpO₂ 98% CA-T < 3 sec (on Adv @ 0.2)	
vent settings	for PEEP 12-10. 0-6. 28. 60. 5 <u>Kohli</u>	

ABVIMS & DR. RAM MANOHAR LOHIA HOSPITAL
NEW DELHI-110001

लगातार चार्ट / CONTINUATION CHART

Dimple / 14/11 / P3A 42261

नाम/Name कमरा/शय्या सं/Room/Bed No.

दिनांक/Date

प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment

आहार/Diet

Transfer summary

P3A → 8 HDU

Dis : - PTBM & obstructive ^{HCP} EVD inserted & 52261
Shock & RF on MV & refractory seizure

Pt. admitted on 17/8/25 & c/o abnormal body movements x 15 days, fever x 2 days, altered sensorium x 1 day.

course of illness.

Past H/O - H/O seizure 15 days back - admitted in private hospital

NCCT → Mildine falx hyperdensity mid part of falx (? SDH)

MRI → Cystic encephalomalacia & gliosis in subcortical IV region post ischemic/hypoxic insult

NCCT (17/8) → f/s/o Extranentricular obs. HCP & periventricular illdefined hypodensity c/o acute etiology.

O/E - PR - 140/90, SPO₂ - 96% ↓ RA, CRT - < 3sec.

PP/PV - +/N, Ext - warm

CNS → Irritable, E2V2 M5, Tone N/N, lower moving

D/R - 3+/3+, plantar ↓/↓

No meningeal / cerebellar signs

Deviation of mouth to Rt. (A)

all 4 limbs

HDU call

Dimple

1y/F ECS-3rd
↓ P3A 8100r

Bed 58

52261

To
the SR/DO
Dept of HDU
RMLH

Respected Sir/Maam,

This is a case of PEBM HCP &

EVD insert & shock & RF on & refractory
seizures.

Pt. intubated on 2/18/25 i/v/o poor sensation
Pt. was done EVD insertion - post procedure
Pt in shock - started Adr (@ 0.2)

OLE - SpO₂ - 93% ↓ MV

PR - 147/min

PP/PR - 4/4

Ext - warm

CFT - 3 sec

S-Na⁺ (176 mg/dl)

↓

on N/A & DS

Pt. on 300 mg Meprobamate, 300 mg Valproate/
levetiracetam/phenytoin for refractory seizures,
300 mg Adr (@ 0.2)

kindly consider this pt & transfer to
your side for further management

Thanking you,

can noted
Dr. Harika
11:15 am

Dr. Harika
(PG-1)

ABVIMS & DR. RAM MANOHAR LOHIA HOSPITAL
NEW DELHI-110001

लगातार चार्ट / CONTINUATION CHART

नाम/Name Dimple 14r/A 52261 कमरा/शय्या सं/Room/Bed No.

आहार/Diet

दिनांक/Date

प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment

25/8/14

sl. periorbital marked bilateral meningitis & AF
obstructive ncp & shock & GVO in situ (21/8)

T. Hypernatremia

→ type A RA & Refractory seizure

→ GVO m. pupil → BIL mid dilated

→ Tone ↑↑

→ DSK - 3+/5+

Sleeping reactive

- mmv Pp - 12-0, PEEP - 50 Hz - 50% RR - 20

2mm

4mm

- Refractory S2 →

midax - 2

(even - 50)

fenta - 1

Valproate - 40

phenytoin - 5.2

Plan
- PEG
- HDO can
- S.E. / 4r/4r
- post GVO case

periorbital puffiness

Uterus
UC - 500g

HR → 150/min

PR - 80/min

CAVP - 1/2

SpO2 → 98%

CR - 2.5

Dysrhythmia →

Na - 180 → 176

K → 3.9

U.O → 2.85 ml / 1.5 hr

fluid N/A + D5 + 2:100 KCl

SE

AS → BICABE

Conduction band

PIA → 50% wt, no

AS → 50% wt

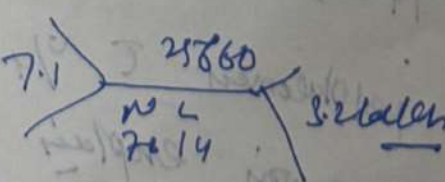
CR → - Tone ↑↑

- GVO m.

- pupil unequal

Shock →

Ad @ 0.12



↓ sedation

CR 150 - 5 - 57

P - 88

CR - 1.2

post BT awaited

ABVIMS & DR. RAM MANOHAR LOHIA HOSPITAL
NEW DELHI-110001

लगातार चार्ट / CONTINUATION CHART

उपनाम/Name Dimple 1 Yr ↓ ECG - 3rd floor (P3A) कमरा/शय्या सं/Room/Bed No.

दिनांक/Date प्रतिदिन विवरण और चिकित्सा/Daily Notes and Treatment आहार/Diet

24/8/21

Neurology call

To
The SR/DOD
Dept of Neurology
RMLH

Respected sir/mam,

This is a case of PTBM & obstructive
HCP & EVD insert & shock & RF on MV &
refractory seizure & dyselectrolytemia

O/E - PR - 145/min, SpO_2 - 100% ↓ MV

PP/PV - +N Ext - warm

PE - was done EVD insertion on 21/3/25

Pt. has been planned for VP shunt
procedure, NPO, EVD blocked

kindly consider this pt. & give
your valuable opinion on VP shunt &
so that pt. can be started on feeds

9/4/21
24/8/21
Patient will be
taken for
as per
after
Sodium & other electrolyte
shunt
availability
collection of
Dr. Harika

Dr. Harika
(P4-1)



सेवा में,

हौप एंड लाइफ फाउंडेशन
B-516, संगम विहार सारनव दिल्ली
नई दिल्ली - 110062

विषय :- आर्थिक सहायता हेतु प्रार्थना पत्र !

महोदया , मैं अमन हौप एंड लाइफ फाउंडेशन से विनम्र
करता हूँ कि मेरी बेटी जिसका नाम डिम्पल है वह केवल
1 साल की बच्ची है जो कि इस समय दिमाग में पानी
भरने के कारण बच्ची की दिमागी हालत ठीक नहीं है जो
कि इस समय आर.एम.एल हॉस्पिटल में भर्ती है
मेरी आप से वस यही प्रार्थना है कि मेरी बच्ची के
लिए आर्थिक सहायता करी जाए ताकि मैं एकलौती
बच्ची का इलाज करवा पाऊं

बेटी का नाम :- डिम्पल

उम्र :- 1 साल

पता :

दिनांक :- 30/8/25

धन्यवाद
आपसे अति सच्चा
होगा
आपका प्रार्थी

अमन



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