



ABVIMS and Dr RML Hospital

New Delhi - 110001

3rd Floor ECS HDU DAYCARE SHEET

DEPARTMENT OF PEDIATRICS

Name	Sridhar	Date / Time-	29/1/24	DOA-
Age/Gender	11M/M	CR. No. -	774	DOPICU--
Weight	6.5Kg	Bed number	①	DOMV--
Diagnosis	ILD & ABCA-3 mutation & BOP & Small os-ARD			

Current issues

Issue	Intervention	Current status
1. RD - Improving.		
2. fever fever spikes (100.5°F) (103°F)		
3. on full feeds.		

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time-		ET size
	Morning	Evening		Morning	Evening	
PIP	101 → 91 cm		PH			Fixed at
Delta P			PCO2			Changed on
PS			HCO3			VAP---
PEEP			BE			ICDT----
VR			PO2			(drain volume)
FiO2 / SPO2			OI			other drains
VTe			ICa			
CXR			P/F ratio			
Examination + Other issues with Mx	B/L clear					

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DEPARTMENT OF PEDIATRICS

Name	Sidhant	Date / Time- 29/01	DOA- 7/11/21
Age/Gender	11m/m	CR. No. - 77114	DOPICU-- 23/1
Weight	6.5	Bed number 4	DOMV-
Diagnosis	Childhood ILD (AT3CA 3 mutation ⊕) ⊖ BD ⊖ Small OS ASD ⊖ Bronchospasm		

Current issues

Issue	Intervention	Current status
RD.	→ Improving. RR - 30/min. no retraction, no new episodes of bronchospasm	
fever episodes	→ Afebrile.	
NG feeds	→ tolerating well.	

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time-		ET size
	Morning	Evening		Morning	Evening	
PIP	flow -	10 lit/min	PH			Fixed at
Delta P	fio ₂ -	80%	PCO ₂			Changed on
PS			HCO ₃			VAP---
PEEP			BE			ICDT----
VR			PO ₂			(drain volume)
FIO ₂ / SPO ₂			OI			other drains
VTe			ICa			
CXR			P/F ratio			
Examination + Other issues with Mx	B/C A ⊕ ⊕ ⊕ ⊕ no added sounds					

Cardiovascular System

Macro-circulation		Microcirculation		Shock-Hypovolemic/cardiogenic/distributive/obstructive Hypotensive/Compensated	
HR	Morning Evening 120	CFT	Morning Evening 135/4	Bolus-	
SBP/DBP/ MAP		Central to peripheral temp difference		Vasoactives	
				Adrenaline	ug/kg/min
CVP		Perfusion index		Noradrenaline	ug/kg/min
				Dobutamine	ug/kg/min
Lactate		Hb		Milrinone	ug/kg/min
SCVO2				Vasopressin	IJug/kg/min
POCUS- IVC/Cardiac contractility--			CVS examination--- + Other issues & Mx	Steroids	
				Hydrocortisone	
			Myocarditis	CK-MB	
				ProBNP	
				Trop I	
			ECG		
			ECHO		
			S/S @ M @		

Neurological system

Sedoanalgesia	Midazolam	ug/kg/min
	Fentanyl	ug/kg/min
	Dexmedetomidine	ug/kg/min
	Ketamine	ug/kg/min
COMFORT SCORE		
GCS		
Pupils		
Fundus		
Tone		
Power	WNL	
DTR		
Plantars		
Clonus		
Meningeal sign		
Cerebellar signs		
Focal deficit		
Seizures/type/ Number of episodes		
AED		
Anti raised ICP measures		

Gastrointestinal System

Examination	L NP S NP	
Feed (type + fortification)	50ml - 2 huly	TPN-
NG aspirates		1. Na--
Stool		2. K--
Calorie	Kcal/kg/day	3. Calcium--
Protein	gm/kg/day	4. Aminoven--
GIR	mg/kg/min	5. Lipids--
		Bowel Sounds
		(+)
RENAL System & Fluids		
6hrly urine output ↓		
Fluid Charted (type)		1. ml/kg/hour
AKI (KIDGO stage)		2. ml/kg/hour
Total intake		3. ml/kg/hour
		4. ml/kg/hour
Total output		RBS.....
Net balance		PD-----
		Net balance -
Cumulative balance		Y/N DAY---
FO %		1. Na --- 136/1
		2. K --- 5.3
		3. Ur --- 14
		4. Cr --- 0.18

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DEPARTMENT OF PEDIATRICS

Name	Sidhant	Date / Time- 29/01	DOA- 7/11/21
Age/Gender	11m/m	CR. No. - 77114	DOPICU-- 23/1
Weight	6.5	Bed number (4)	DOMV-
Diagnosis	Child hood ILD (AT3CA 3 mutation ⊕) ⊖ BD ⊖ Small os ASD ⊖ Bronchospasm		

Current issues

Issue	Intervention	Current status
RD.	→ Improving. RR - 30/min.	
	no refraction, no new episodes of bronchospasm	
fever episodes →	Acetylsalicylic acid	
NG feeds →	tolerating well.	

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time-		ET size	Fixed at
	Morning	Evening		Morning	Evening		
PIP	Flow -	10 lit/min	PH				
Delta P	FiO2 -	80%	PCO2				
PS			HCO3				
PEEP			BE				
VR			PO2				
FiO2 / SPO2			OI				
VTe			ICa				
CXR			P/F ratio				
Examination + Other issues with Mx	B/L A-C ⊕ no added sounds						

VAP---
ICDT----
(drain volume)
other drains

PLAN-

mg. PIPZO - 650mg in 10ml NS - 2v -

mg. AMIKACIN - 100mg in 10ml NS - 2v -

Syp. AZITHRO - 0.7ml - 10h - OD

mg. AMBOPRIMINE - 156mg in 2ml NS @ 0.5ml/hr

NEB C ASTHALIN - 6th haly → 2haly

IPRAVENT → BID

BODEZORT

subcutaneous MVZ calcium - as advised before
 sub feeds - 60ml - 10h - ~~2~~ 2 haly.

Weight	6.5kg
TF	
R (%)	
Drugs	
Feeds	
Na	meq/kg/day
K	meq/kg/day

- 7/11
 CU- 2
 V-
 30

tatus

cm

[Handwritten Signature]

JR Signature

SR Signature

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DEPARTMENT OF PEDIATRICS

2PM

Name	Lidhant	Date / Time- 29/1/24	DOA- 7/11/23
Age/Gender	11mth / Male	CR. No. - 77114	DOPICU-- 23/1/24
Weight	6.5kg	Bed number (4)	DOMV-
Diagnosis	ILD (ABCA3 mutation ⊕) ⊖ BD ⊖ small OS ASD ⊖ Bronchospasm		

Current issues

Issue	Intervention	Current status
① R.D →	RR-30, prolonged expiration ⊕.	
	B/L breath sounds ⊕, clear, no added sounds.	
② Bronchospasm -	O ₂ delivery disrupted ⊕ + venti mask ^u	
	B/L breath sounds ⊕ on auscultation	
	Empneum ⊖ + Albuterol Neb	

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time-		ET size
	Morning	Evening		Morning	Evening	
PIP	H3FNC from covid venti		PH			Fixed at
Delta P			PCO ₂			Changed on
PS			BE			VAP---
PEEP			PO ₂			ICDT---- (drain volume)
VR			13Lts / 100%	OI		other drains
FiO ₂ / SPO ₂				ICa		
VTe			(b4) spasm	P/F ratio		
CXR						
Examination + Other issues with Mx	B/L breath sounds ⊕, no added sounds.					

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DEPARTMENT OF PEDIATRICS

Name	SIDDHANT	Date / Time- 28/1/24	DOA- 7/1/24
Age/Gender	11m/M	CR. No. - 7114	DOPICU-- 23/1/24
Weight	6.5kg	Bed number (4)	DOMV-
Diagnosis	HD: Bronchiolitis obliterans + ABGA 3 mutation + surfactant deficiency + small LBA + severe bronchiolospasm		

Current issues

Issue	Intervention	Current status
① RD = on HFNC (10 → 9L/min, 60% FiO ₂)		
② Bronchiolospasm: NE of bronchiolospasm in 36 hours		

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time-		ET size
	Morning	Evening		Morning	Evening	
PIP	flow = 10 → 9 L/min		PH			Changed on
Delta P			PCO ₂			
PS	FiO ₂ 60%		HCO ₃			
PEEP			BE			VAP---
VR			PO ₂			ICDT---- (drain volume)
FiO ₂ / SPO ₂	100%		OI			other drains
VTe			ICa			
CXR			P/F ratio			
Examination + Other issues with Mx	BIL AC ⊕ clear wpts ⊕ axillary RR: 30/min mild LCR ⊕					

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DEPARTMENT OF PEDIATRICS

Name	Siddhant	Date / Time - 27/1/07	DOA - 27/1/07
Age/Gender	11 months / m	CR. No. - 77117	DOPICU - 27/1/07
Weight	6.5 kg	Bed number 5	DOMV -
Diagnosis	T-tubercle Bronchitis, Adenitis, ABGCA3, multiple suppurative lymphadenitis, T-tubercle adenitis, adenitis Bronchitis.		

Current issues

Issue	Intervention	Current status
DLG	on h ₂ /Nc - 2/1/07	
DLG	on h ₂ /Nc - 2/1/07	
3		

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time		ET size	Fixed at
	Morning	Evening		Morning	Evening		
PIP	11/14		PH				
Delta P	11/14		PCO2				
PS	11/14		HCO3				
PEEP			BE				
VR			PO2				
FiO2 / SPO2	1/100		OI				
VTe			ICa				
CXR			P/F ratio				
Examination + Other issues with Mx	B/L AEE, clear, ole. wheeze & crackles - 34/min, SpO2 94% s/o = 100% on h ₂ /Nc T-tubercle adenitis						

ए.बी.वी.आई.एम.एस. एवं डा. राम मनोहर लोहिया अस्पताल, नई दिल्ली
A.B.V.I.M.S. & DR. RAM MANOHAR LOHIA HOSPITAL, NEW DELHI

सूक्ष्म जीव विज्ञान विभाग
DEPARTMENT OF MICROBIOLOGY

नाम
NAME Siddhant

आयु
AGE 10m

लिंग
SEX M

पंजीकरण सं०
REGN. No. 77118

बहिरंग रोगी विभाग/वार्ड
OPD/WARD ER311/400

बिस्तर सं०
BED No.

यूनिट
UNIT 4004

नमूने का प्रकार
NATURE OF SPECIMEN Blood

नमूने लेने की तारीख और समय
DATE & TIME OF COLLECTION

अपेक्षित जांच
INVESTIGATION REQUIRED

UBG

27/1/24

CLINICAL NOTES:-

1. Presenting symptoms with duration.....
2. Previous reports on similar material with date & Lab. No.....
3. Antibiotic therapy.....
4. Prov. diagnosis.....

INCOMPLETE FORMS WILL NOT BE ACCEPTED

SIGNATURE & DESIGNATION

Respiratory system		ABG/VBG		Time		ET size	
Morning	Evening	PH	PCO2	Morning	Evening	Fixed at	
13L with \bar{c}				7.40L			
100% O ₂				52.9			
				20			

Current status: (O₂ saturation) differential AF (R&L)

PH 24hrs → resp. breath sounds; differential AF (R&L)

Name	Siddhant	Date / Time-	27/1/24	DOA-	17/11/23
Age/Gender	11m/M	CR. No. -	77/14	DOPICU--	23/1/24
Weight	6.5 kg	Bed number	(4)	DOMV-	11/1
Diagnosis	ILD \bar{c} bronchiolitis obliterans \bar{c} ABCA3 mutation \bar{c} surfactant deficiency \bar{c} small OS-ASD \bar{c} severe bronchospasm				

Current issues

Issue	Intervention	Current status
1. Respiratory distress - 2 episodes in 24 hr bronchospasm (1 day back)	RR - on H3FNC \rightarrow Flow - 11 lit/min FiO2 - 70%	maintaining SpO2
2. NG feed \rightarrow	70 ml \downarrow 3 hourly tolerating well.	

Respiratory system

Support	SIMV/PSV/CPAP/HFNC		ABG/VBG	Time- 7:7 Am		ET size	Fixed at	
	Morning	Evening		Morning	Evening			
PIP	12 ltr / 100 l FiO2		PH	7.402		Changed on		
Delta P			PCO2	52.9				
PS			HCO3	33.3				
PEEP			H3FNC	BE			VAP---	
VR			12 ltr	PO2	125.5		ICDT----	
FiO2 / SPO2			100 l FiO2	OI			(drain volume)	
VTe				ICa	1.2		other drains	
CXR		P/F ratio						
Examination + Other issues with Mx	RR - 32/min							



MERI MAA TRUST

Always Love Your Mother

Ref. No.....

Date 30/01/24

स्वीकृत

मेरी माँ ट्रस्ट
संगम विहार दिल्ली

महोदय

शुभिनय निवेदन यह है कि मेरा बेटा सिधांत/Sidhant
7 माहिन का है मेरी बेटे के दिल में दफ है और
यह राम मनोहर लोश्था में मर्ती है मेरे बच्चे की
सजरी होनी है हमारी आर्थिक स्थिति खराब है, मैं
निवेदन करती हूँ आप अपनी संस्था से आर्थिक मदद
प्रदान करे मैं आपकी हमेशा आभारी रहूँगी।

धन्यवाद

