



USHA WELFARE TRUST
for the happiness of others.



① VL

- No opus word
- ~~the~~ shaded, allow 3 word not about
- try not about
- sent+ couldn't be around
- RA fulfible

X Ray clo - 41 ① shaft four

D - opus ad 1 41 ① shaft

Adv: conceal you

DL

L/S

US 4 cfp

NCCT

Non

Recovery

in the @ 100/100

my word 500 N 30

inf 400 N 30

by 100 N 100

RA 305 d ER 3.



USHA WELFARE TRUST
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DR. PARTH KAUSHIK

PG Resident

MS Orthopaedics

Central Institute of Orthopaedics

New Delhi - 110029

- mild swelling at parietal head laceration (5cm x 1cm)

Advice

USG-eFAST →

~~Canalization~~

~~IVF - 400ml NS - I/V stat~~
~~under 15 min~~

Nil active prod so intervention at present

Refer to Neurology

M.C. to be done
department

NSSR

No prod so intervention
reg.

① ↑ M.C. fall from height
22/7/24 at 4pm

② O.C. LOC ⊕

No h/o seizures / ENT bleed / vomiting

③ ECG

Pain in ④ leg

④ M.O.T. ref

⑤ ABG

Admit in NSR - A ward
↓ Dr K.B.S



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ADMITTED

DR. SUYASH SURANA
M.Ch Resident
Dept of Neurosurgery
MMC & Sridarjung Hospital
New Delhi - 110029

EDA

Ref: 11/11
B. 11/11/11

सफदरजंग अस्पताल, नई दिल्ली-110029
SAFEDARJUNG HOSPITAL, NEW DELHI-110029

विभाग-पत्र
CASE SHEET

संख्या No.	नाम Name	पुरुष-स्त्री Sex	जाति Caste	वय Age
	व्यवसाय Occupation	पता Address		
	प्रवेश तिथि Date of admission			
वर्ष Year	प्रतिक्षेप तिथि Date of discharge			
	रोग Disease			
दिनांक Date	परिणत Result			

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TO,
Sd/- duty
Dept of plastic Surgery
Bldg / Room
Henceby re
@ 10/11/11 - 10/11/11 patient with a of open wound
Paradial wound with blood injury with right
Kandly send the patient to
K. V. S. Wadgaonkar / Paradial floor 10/11/11 & admission further
unassigned
Thank you

Urdu

DR. PARTH

11/11/11

11/11/11

COS
CAS
RS
PA

WNL
- EHL healthy
- no discharge
- no gaping
- Wound done

- Post op ADL in situ
- TK splint in situ
- MHA / MHA - palp
- Toe move / move - in

Advice on Discharge:
Review immediately in Ortho emergency or any nearby hospital in case of increased swelling, pain, numbness or discoloration of fingers/toes.
पैर हाथ की उंगलियां चलते रहे व उँगली काली या नीली पड़ने पर व पैर सूखने पर तुरंत अपने डॉक्टर से मिल।

ORTHOPEDICS

cont phenytoin 100 1/2 tab TDS d 3m
cont Levofloxacin 500 1/2 tab BD
T. VACCIN (1/2) BD x 7 d
T. Line Zolid 600 1/2 tab BD x 7 d

- X Augmentin 625mg TDS
- X Oflax 400mg BD
- X Aximoral Forte TDS
- X Pantop 1 cap OD BBF
- X Diclofenac 1 tab BD
- X Calcium 500 mg OD
- X Vitamin C 1 tab OD
- X Vit D3 400 IU OD
- X Vit Complex



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DEPARTMENTS
splint
weight bearing.
elevation + Active toe m
- High protein diet
- Maintain local hygiene
- RIV + Plaster Bumpy spot & mark

Dr.
Central Institute of Orthopaedics
VMMC & SJH, New Delhi-110029

Dr. RAJAT KHANNA
Senior Resident
MS (Orthopaedics)
Central Institute of Orthopaedics
VMMC & SJH, New Delhi-110029

Mon / Thu 5/8/24

Donation No.	Date	Loc	M.O. Sign
SJ 26001	31/12/24	Kallu	R

1. Replacement Donation

MRD:- 32-31
(REPLACEMENT DONATION IS NOT TRANSFERABLE)

2. Voluntary donation entitles the availability of blood for the Donor
and his/her family comprising of parents, children, wife / husband and
brother and sisters.

यह दाता रक्त दाता के परिवार के लिए रक्त की उपलब्धता का अधिकार
देता है जिसमें माता-पिता, बच्चे, पत्नी/पति और अविवाहित भाई और बहन शामिल हैं।

3. This Entitlement is valid for one year subject to the availability of blood.
यह प्राप्ति रक्त की उपलब्धता के अधीन एक वर्ष के लिए वैध है।

(DUPLICATE CARDS ARE NOT ISSUED IN ANY CASE)

(किसी भी स्थिति में डुप्लीकेट कार्ड जारी नहीं किए जाते)

DONATE BLOOD
SAVE LIFE

रक्त दान करें
जीवन बचाएं

RECEIPT SLIP FOR TRANSFUSION DEPARTMENT

Date 31/12/24 Due For

Signature

12/10/24

1090



USHA WELFARE TRUST
for the happiness of others.



भारत सरकार
GOVT. OF INDIA

सुपर स्पेशलिटी ब्लॉक

SUPER SPECIALITY BLOCK

वी.एम.एम.सी. एवं सफदरजुंग अस्पताल, नई दिल्ली - 110029
V.M.M.C. & SAFDARJUNG HOSPITAL, NEW DELHI-110029
(दूरभाष Telephone : 011-26730000, 26165060)



UHID: 20240919672

CONSULTING ROOM NO : 521, TOKEN NO : 121

Clinic Neuro Surgery
Days: MON, TUE

LAST VISIT DATE: 05/08/2024

OUT PATIENT RECORD
Re-visit

Name : KALU

Department : Neuro Surgery

Dept No. : 2024/081/0019601

Date of Registration : 02-09-2024 10:46:18 AM

Unit : 1

Age : 8Y 8M 1D

Billing Type : General

Mobile No : *****532

Address : FATEHPUR TAGA, Faridabad, HARYANA, INDIA

Patient Type: NON MLC



(kalu1.2016_1@abdm)

Fee : 0.00

Sex : Male

S/O ROOP SINGH

Email :

Occupation : OTHER

Prepared by: Mr. SSBDEO RANJEETSINGH
OPD

Head injury
Managed conservatively

Adm

- 1. Leveo 250 7 60

- 1. Aspirin 50 7 70

- 1. b lamp 1x 1+2x 2x

- 1. D9 of fero c 50 mg 1/2 tabs
50c

2 marks

Dr. VIKASH GUGLANI
Neuro Surgery
Safdarjung Hospital
New Delhi-110029

हमारे देश में लगभग हर 8 मिनट में एक महिला की मृत्यु स्तन या सर्वाइकल कैंसर के कारण होती है। जाँच करें और इन जानलेवा कैंसरों से खुद को बचाएं। आप प्रतिदिन सुबह गायत्री ओपीडी या वेल वुमन क्लिनिक में जाँच करा सकते हैं। ये परीक्षण सरल है और दर्दनाक नहीं है।



Submit Feedback to
Mera Aspatal



NAME: [illegible] DOB: 10/10/2018
GENDER: MALE



5746 9972 4399

VID : 9164 3783 6798 3063

मेरा आधार, मेरी पहचान

संजंअ/SJH-2

सफदरजंग अस्पताल, नई दिल्ली
SAFDARJANG HOSPITAL, NEW DELHI
विशेष औषधि पर्ची
SPECIAL MEDICINE SLIP

विभाग बहिरोविं..... बहिरोविंसं..... तारीख.....

Department/O.P.D.

O.P.D. No.

Date

दवाई का नाम.....

Name of Medicine

दी जाने वाली दवाई की मात्रा (केवल एक सप्ताह के लिए).....

Quantity to be issued (upto one week only)

Dr. S. K. BASAK
Dept. of Neurosurgery
VMMC & Safdarjung Hospital
New Delhi-110029

पूरे हस्ताक्षर.....

Signature in full

रजिस्ट्रार या उससे बड़ा अधिकारी)
(Registrar or above)

पद संज्ञा.....

Designation

- mild swelling at parietal head
laceration (5cm x 1cm)

Advice

USG-eFAST →

~~Cannulization~~

~~IVF - 400ml NS - IV stat~~
~~under 15 min~~

Nil active paed sx intervention at present

Refer to Neurosurgery

MLC to be done by
department during admission. No paed sx intervention
req. c/s/b NSSR

- ① ↑ MLC (ER2) A/H/O fall from height
22/7/24 at 4 pm
- ② Ortho (ER3) LOC ⊕
Clearance
- ③ ECG. No h/o seizures / ENT bleed / vomit
Pain in ④ leg
- ④ MO.T. ref. ADMITTED
- ⑤ ABG.

Admit in NSx - A ward
L Dr K-B-S

DR. SUYASH SURANA
M.Ch Resident
Dept of Neurosurgery
Sardarjung Hospital
29

F-1303

MNO-59613

MLC → 5/25/83

Form No. 1/1980/SH-21

बाह्य रोगी विभाग का कार्ड संख्या

O.P.D. Reg. No.

COME

सफदरजंग अस्पताल, नई दिल्ली
SAFDARJANG HOSPITAL, NEW DELHI
(बाह्य रोगी विभाग का निर्देश कार्ड)
(OUT-PATIENTS REFERENCE CARD)

विभाग

Dept.

शल्य चिकित्सक/चिकित्सक का नाम
Name of Surgeon/Physician

नाम
Name Kalu

पिता/पति का नाम
Father's Name
Husband's

आयु
Age
84

लिंग
Sex
M

पता
Address

निदान
Diagnosis CS 13 SR/Pl 2 unit 6 Mo

दिनांक
Dated

उपचार
Treatment

~~17/12/83~~
A/H/O fell from height (first floor)
@ 4 PM on 22/7/84

No l/o LOC, vomiting, rigor, or bleed
head injury @

एड

[4E] [C] Thigh

- puncture wound on ~~ventral~~ lateral thigh

- swelling

- tenders

- Definite

- crepitation

- Distal most absent

- distal snt couldn't be

assured due to poor 4cs

- Rom 10A palpable

conscious

oriented

E2 V4 M5

GC poor

~~no~~ intact ankle

PCT

CCR

Spinal tenders

absent

① UL

→ No open wound

→ ~~Distal~~ Shaded, elbow & wrist not about
→ try not about

- wrist can't be moved

- RA palpable

X Ray clo - #1 ① shaft, forearm

D - open Ad 1 #1 ① shaft, forearm

Adv: cervical spine

D/L

L/S

US 4 c/f

NCCT head

Normal spine.

Re-UL X Ray

in flange @ wrist/en

inj wrist 5 cm NBD

inj distal hum NBD

by intr 10ml NBD

RA SOS d ER 3.

DR. PARTH KAUSHIK

PG Resident

MS Orthopaedics

Central Institute of Orthopaedics

New Delhi - 110029