

Rebirth Care Trust

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Girraj Ji Children Hospital

First Exclusive Pediatric Hospital in Gurugram

Opp. BSNL II Office, Car Market, Sector-12A, Gurugram - 122001 (Hr.)
Tel.: 9871869863 | Email : girrajijichildrenhospital@gmail.com



CASE SUMMARY

Patient's Name	Master KRIYANSH	IPD No.	1989
S/O	AJAY KAPOOR	UHID	20/00 2543
Address	HNO 1325, DAYANANAD COLONY	DOA	24-Mar-2022 08:50 PM
Age/Sex	4 Months/27 Days / Male	CASE SUMMARY	04-Apr-2022 06:05 PM
Consultant Name	DR.MOHIT		
Contact No.			
Department/Speciality	PEDIATRICIAN & NEONATOLOGIST		

DIAGNOSIS

K/C/O Hirschsprung Disease - Post Colostomy (03-11-2021). Colostomy closure and Endorectal Transanal Pull Through was done (01-03-2022). Septic ileus with Anemia, Redo enorectal pull through with perforation closure (26-03-2022). Small bowel perforation. Post resection and anastomosis (02-04-2022).

PRESENTING COMPLAINTS

C/O Abdominal distention for 2 days.

Discharge of pus from wound site for 2 days.

HISTORY OF PRESENTING ILLNESS

Baby presented to us with complaints of abdominal distention and discharge of pus from wound site for 2 days.

EXAMINATION FINDING

GC: Sick.

CVS: normotensive, no murmur.

Resp: mild tachypnea +

P/A: shiny, distended.

CNS: lethargic.

Local examination: leakage of milk and pus from incision wound.

COURSE IN THE HOSPITAL

Baby came to us with above mentioned complaints, was started on IV Fluids, IV antibiotics, Inotropes. Exploratory laprotomy was done and Resection and anastomosis done for perforation found 10-15cms from duodeno-jejunal junction. Post op baby was on mechanical ventilation, started on inotropes in view of shock, after stabilization, extubated to high flow which was gradually weaned and then stopped. PRBC and FFP transfusion given. Biopsy sent for histopathology showed ganglion cells. Serial CRP was rising. Antibiotics were changed as per swab culture report. After baby became normotensive, inotropes were weaned and then stopped. Investigation revealed hypokalemia which was managed accordingly

Mechanical Ventilation.

High Flow.

Inotropes.

Inj. Monocef.

Inj. Meropenam.

Inj. Metrogyl.

Syp. potklor.

Inj. Amikacin.

Inj. PCM.

PRBC and FFP transfusion.

INVESTIGATION RESULT





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24-03-2022 KIDNEY FUNCTION TEST BLOOD UREA 17.4 mg/dL...24-03-2022 KIDNEY FUNCTION TEST S. CREATININE 0.39 mg/dL...24-03-2022 KIDNEY FUNCTION TEST S. POTASSIUM (K+) 3.83 m Eq/litre...24-03-2022 KIDNEY FUNCTION TEST S. SODIUM (Na+) 133.6 m Eq/litre...24-03-2022 KIDNEY FUNCTION TEST S. Uric Acid 3.9 mg/dl...24-03-2022 KIDNEY FUNCTION TEST BLOOD UREA 17.4 mg/dL...24-03-2022 KIDNEY FUNCTION TEST S. CREATININE 0.39 mg/dL...24-03-2022 KIDNEY FUNCTION TEST S. POTASSIUM (K+) 3.83 m Eq/litre...24-03-2022 KIDNEY FUNCTION TEST S. SODIUM (Na+) 133.6 m Eq/litre...24-03-2022 KIDNEY FUNCTION TEST BLOOD UREA 17.4 mg/dL...24-03-2022 KIDNEY FUNCTION TEST S. CREATININE 0.39 mg/dL...24-03-2022 KIDNEY FUNCTION TEST S. POTASSIUM (K+) 3.83 m Eq/litre...24-03-2022 KIDNEY FUNCTION TEST S. SODIUM (Na+) 133.6 m Eq/litre...24-03-2022 KIDNEY FUNCTION TEST S. Uric Acid 3.9 mg/dl...24-03-2022 CBC PROFILE TLC 24100/Cu mm, 24-03-2022 CBC PROFILE HAEMOGLOBIN 14.1 gm%, 24-03-2022 CBC PROFILE DIFFERENTIAL LEUCOCYTE COUNT . .24-

Treating Consultant / Authorized Team Doctor	Name / Signature	
Patient / Attendant	Name / Signature	
	Mobile No.	





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Date 04/04/2022

REQUISITION LETTER

To,
Rebirth care trust

Sub- Help the poor Mast. KIRYANSH (ID – 20/002543)

Respected Sir/Madam,

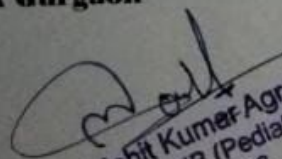
This is to certify that Mast. KIRYANSH (ID – 20/002543) is being treated at Girraj Ji Children Hospital since 24/04/2022.. The expected stay of baby is for another 3 weeks.
Parents are poor & unable to bare the expanses.

Expected expanses are Rs220,000/- to Rs 280,000/-

Please help the poor baby financially & oblige them. That shall be a great help for the parents.

Thanks

Dr Mohit Kumar Agrawal
Head NICU/PICU
Girraj Ji Children Hospital
Sector 12A Gurgaon


Dr. Mohit Kumar Agrawal
MBBS, DNB (Pediatrics)
HN-13926
Pediatrician & Neonatologist

