





Urgent

GOVT. OF NCT OF DELHI / राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार

LNH-89

लोक नायक अस्पताल

जवाहर लाल नेहरू मार्ग, नई दिल्ली-110002

LOK NAYAK HOSPITAL

Jawahar Lal Nehru Marg, New Delhi-110002

एक्स-रे विभाग/X-RAY DEPARTMENT



"नेत्रदान महादान"
फ्री फोन सेवा नं 1919
Pledge Your Eyes for Noble Cause
Call Toll Free Number 1919

रोगी का नाम Name of the Patient	Rohan	आयु Age	27	लिंग Sex	M	कक्ष Ward	SB/Peds	पलंग संख्या Bed No.	यूनिट Unit	सीआर सं C.R. No.	946311
किसके द्वारा निर्दिष्ट Referred by	Dr. SKR						बाह्य रोगी विभाग O.P.D.	बारो सं O.P. No.			
परीक्षण किया जाने वाला निश्चित भाग Exact Part to be examined	USG (KUB) ↳ for (R) PCN Insertion						आय Income	तारीख Date	27/6/2022		
पिछला एक्स-रे परीक्षण (इस फार्म के साथ पिछला एक्स-रे फोटो भेजें) Previous X-Ray examination (send skiagram of previous examination with this form)											
संक्षिप्त चिकित्सालयीन इतिवृत्त व बीमारी की अवधि Short clinical history and duration of illness: 40 (R) Pyonephrosis											

चिकित्सालय द्वारा रोग निर्णय
Clinical diagnosis

Kindly provide time slot for PCN insertⁿ

Main Dept
Imms

चिकित्सा अधिकारी
Medical Officer

SKR
SKR Peds

पद

Designation

2015/03/08/4

एक्स-रे रिपोर्ट
X-Ray Report

कृपुड/P.T.O.

PHILIPS RIHAN
22-06-01-102718 ALPHA ULTRASOUND AND D TIS 0.2 10:27:51

Abd Renal
C5-2
21 Hz
15.0cm

+ Length 11.7 cm

2D
HGen
Gn 83
51
3/3/2

15.0cm

PHILIPS RIHAN
22-06-01-102718 ALPHA ULTRASOUND AND D TIS 0.2 10:30:58

Abd Renal
C5-2
21 Hz
15.0cm

+ Length 11.5 cm
x Length 8.76 cm

2D
HGen
Gn 53
51
3/3/2

15.0cm

PHILIPS RIHAN
22-06-01-102718 ALPHA ULTRASOUND AND D TIS 0.2 10:31:19

Abd Renal
C5-2
21 Hz
15.0cm

2D
HGen
Gn 53
51
3/3/2

15.0cm

PHILIPS RIHAN
22-06-01-102718 ALPHA ULTRASOUND AND D TIS 0.2 10:31:59

Abd Renal
C5-2
21 Hz
15.0cm

2D
HGen
Gn 84
51
3/3/2

15.0cm

PHILIPS RIHAN
22-06-01-102718 ALPHA ULTRASOUND AND D TIS 0.3 10:30:05

BOWEL
L12-4
13 Hz
7.0cm

+ Length 5.54 cm
x Length 5.69 cm

2D
HGen
Gn 100
50
5/1/2

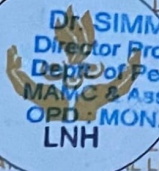
7.0cm

PHILIPS RIHAN
22-06-01-102718 ALPHA ULTRASOUND AND D TIS 0.2 10:28:56

Abd Renal
C5-2
21 Hz
15.0cm

2D
HGen
Gn 100
51
3/3/2

15.0cm



LOK NAYAK HOSPITAL

NEW DELHI 110002

लोक नयाक अस्पताल

नई दिल्ली 110002

EPBX No. 23223400, 23222400

Casualty No. 20225152

MIS Office Fax No. 23222870

E-mail: info@loknyakhospital.com

loknyakhospital@nic.in

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI

OUT PATIENT REGISTRATION CARD

Deptt.	Peds	Room No.	332	OPD Regn. No.	11/5/2022
Name	Rohan	Sex	M	Age	1
Religion	S/D/A/W	Nationally		Occupation	
Birth Wt. (Kg.)	DOB	Wt. (Kg.)		Ht. (Cms.)	

Immunization BCG	OPV 1, 2, 3	Hepatitis B 1, 2, 3	Measles	MMR	Typhoid	Other
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PROVISIONAL DIAGNOSIS: _____ Allergic to _____

INVESTIGATIONS DATE CHEMICAL FINDINGS & REPORTS TREATMENT

HEMATOLOGY			
Hb/ TLC/ DLC			
ESR			
Platelet count			
BT/ CT/ PT			
PS			
URINE EXAM			
Sugar			
Alb			
Microscopy			
C/S			
BIO-CHEMISTRY			
CGI			
Bl. Sugar F/ PP/ R			
Glycosylated Hb			
Bl. Urea			
S. Creatinine			
S. Uric Acid			
S. Electrolytes - Na/K			
S. Calcium			
S. Phosphorus			
Lipid Profile			
LET			
S. Bilirubin/ T/ D/ I			
SGOT (ALT)			
SGPT (AST)			
S. Alk. Phosp.			
S. Protein Total			
Alb			
Globulin			
AG Ratio			
Prothrombin Time / INR			
RADIOLOGY			
X-Ray Chest			
USG			
CT Scan / MRI			
MICROBIOLOGY			
HbsAg			
HIV			
ASO			
CRP			
S. Widal			
Blood C / S			
STS			
OTHERS			
ECG			
ECHO			
ABG			
Blood Group			

N. HOSPITAL
 23 JUL 2022
REVISIT

 Sig. / Name / Designation of Doctor
 Date & Time: _____

अस्पताल परिसर में बीड़ी, सिगरेट पीना (धूम्रपान) दण्डनीय अपराध है ।

GOVT. OF NCT OF DELHI / राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार

LNH-89

लोक नायक अस्पताल

जवाहर लाल नेहरू मार्ग, नई दिल्ली-110002

LOK NAYAK HOSPITAL

Jawahar Lal Nehru Marg, New Delhi-110002

एक्स-रे विभाग/X-RAY DEPARTMENT



"नेत्रदान महादान"
फ्री फोन सेवा नं 1919
Pledge Your Eyes for Noble Cause
Call Toll Free Number 1919

रोगी का नाम Name of the Patient	आयु Age	लिंग Sex	कक्ष Ward	पलंग संख्या Bed No.	यूनिट Unit	सीआर सं C.R. No.
Ruhan	2y	M	Emergency			
किसके द्वारा निर्दिष्ट Referred by	बाह्य रोगी विभाग O.P.D.			1146834	बाह्य सं O.P. No.	50
परीक्षण किया जाने वाला निश्चित भाग Exact Part to be examined	USG KUB			आय Income	तारीख Date	27/3/22

पिछला एक्स-रे परीक्षण (इस फार्म के साथ पिछला एक्स-रे फोटो भेजें)
Previous X-Ray examination (send skiagram of previous examination with this form)

संक्षिप्त चिकित्सालयीन इतिवृत्त व बीमारी की अवधि
Short clinical history and duration of illness:

चिकित्सालय द्वारा रोग निर्णय
Clinical diagnosis

Kidney Blc PUJO
on (R) sided PEN.

8 ? UTI

चिकित्सा अधिकारी
Medical Officer

पद

Designation

Dr. DIPANJAN GOSWAMI
Senior Resident
Dept. of Paediatric Surgery
LOK NAYAK HOSPITAL,
New Delhi-110002

एक्स-रे रिपोर्ट
X-Ray Report

कृपु/PTO.

एक्स रे रजिस्टर सं
X-Ray Register No.

110140 (R) pyonephrosis (L) Gross
HDN.

एक्स रे रिपोर्ट
X-Ray Report

M.H.H.

USG KUB.

Dr Akash, SR

नी गई फिल्मों की संख्या व माप
Number and size of films taken

(R) Kidney - pyonephrosis (L) organized
contents (L) thinned out renal
parenchyma
(L) PCN tube in situ

टेक्नीशियन
Technician

(L) Kidney - Gross HDN (L) internal echoes &
(L) size - 9.8 x 7.0 cms thin parenchymal
thickness ~ 7 mm

एक्स रे विशेषज्ञ
Radiologist

एक्स रे संख्या व तारीख लिखिए
Repeat X-Ray No. and Date

तारीख
Date

(L) distended (L)
UB = wall thickened (L) dependent echoes.
likely cystitis

Adv. urine
TM

Visdya Prasad.



अ० भा० आ० सं० अस्पताल / A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग / Out Patient Department



अस्पताल के अन्दर धूम्रपान मना है। / SMOKING IS PROHIBITED IN HOSPITAL PREMISES

शरीरभाद्यं स्वतु धर्मसाधनम्

New Patient

OPR-6

Dept Reg. 2022/020/0003685

एकक / Unit

General/रु 10

विभाग / Dept.

Nuclear Medicine/Unit-I

कक्षा/Room: 59A

नाम: रुहान

Days : MON, WED

Name: Mr. RUHAN

Queue No : N3

पिता : शनी अलम

ZY पुरुष/M

S/O SHANE ALAM

सं०/O.P.D. Regn. No.

पता / Address



UHID : 106042913

Date: 16/06/2022

निदान / Diagnosis

दिनांक / Date

उपचार / Treatment

9-8Kj



शरीरभाद्यं स्वतु धर्मसाधनम्



CLEAN AND GREEN AIIMS / एम्स का यही संकल्प, स्वच्छता से काया कल्प
अंगदान-जीवन का बहुमूल्य उपहार / ORGAN DONATION - A GIFT OF LIFE
O.R.B.O., AIIMS, 26588360, 26593444, www.orbo.org Helpline - 1060 (24 hrs service)





GOVT. OF N.C.T. OF DELHI / राष्ट्रीय राजधानी क्षेत्र, दिल्ली सरकार

लोक नायक अस्पताल

जवाहर लाल नेहरू मार्ग, नई दिल्ली-110 002

LOK NAYAK HOSPITAL

Jawahar Lal Nehru Marg, New Delhi-110 002

एक्स-रे विभाग / X-RAY DEPARTMENT

Pedd. Surg. OPD

LNH-89

"नेत्रदान महादान"
श्री फोन सेवा नं. 1919
Pledge Your Eyes for Noble Cause
Call Toll Free Number : 1919

रोगी का नाम Name of the Patient	आयु Age	लिंग Sex	कक्ष Ward	पलंग संख्या Bed No.	यूनिट Unit	सी.आर.नं. C.R.No.
Ruhan	2 yrs.	M				11455/065
किसके द्वारा निर्दिष्ट Referred by	बाह्य रोगी विभाग O.P.D.			बा.रो. नं. O.P. No.		
परीक्षण किया जाने वाला विशिष्ट भाग Exact Part to be examined	आय Income			तारीख Date		
Dr. Simmi K Ratan	वेग क्लिन			19/7/22		

पिछला एक्स-रे परीक्षण (इस फार्म के साथ पिछला एक्स-रे फोटो भेजें)
Previous X-Ray examination (send skiagram of previous examination with this form)

संक्षिप्त चिकित्सालयीन इतिवृत्त व बीमारी की अवधि
Short clinical history and duration of illness:

7 B/c pus

चिकित्सालय द्वारा रोग निर्णय
Clinical diagnosis

Dr. SIMMI K. RATAN
Director Professor & Head
Dept. of Pediatric Surgery
MAMC & Associated L.N.H.
OPD : MON. - SATURDAY

चिकित्सा अधिकारी

Medical Officer _____

पद

Designation _____

एक्स-रे रिपोर्ट
X-RAY REPORT

क.पू.उ./P.T.O.

एक्स-रे रजिस्टर सं.
X-Ray Register No.

19/7/22

r/b/c/c/o (R) Pyonephron Dr. Shivam
एक्स-रे रिपोर्ट & (L) Gray (S.R.)
X-Ray Report
USG KUB
NON.

R.K - Pyonephron c organized cavity c
ली गई फिल्मों की संख्या व माप
Number and size of films taken
flinned out Renal Perinephyma.

L.K - Gray NON c
+ thickness, max. thickness 8mm
demon Perinephyma

टेक्नीशियन
Technician _____

एक्स-रे विशेषज्ञ
Radiologist

U.B - distended.

एक्स-रे संख्या व तारीख लिखिए
Repeat X-Ray No. and Date

तारीख
Date

Town
Shivam



GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
OUT PATIENT REGISTRATION CARD

Name: Dr. Rajiv Kumar Age: 50 Reg No: 1149574105

Sex: M Address: 1/133 Sector 32, Connaught Place, New Delhi - 110028

Religion: Hindu Occupation: Retired Referral to Dept: Medicine

Diagnosis: DM (HbA1c 12.5%), Hypertension

Investigations: BG, HbA1c, BP

Immunizations: BG 1, 2, 3, B1/B2, Hepatitis B, Measles, MMR, Polio

PROVISIONAL DIAGNOSIS

INVESTIGATIONS DATE CLINICAL FINDINGS & REPORTS TREATMENT

INVESTIGATIONS	DATE	CLINICAL FINDINGS & REPORTS	TREATMENT
HEMATOLOGY Hb, HCT, PCV, ESR, Platelet Count, Leuko, WBC, LFT, RFT	10/12/17	Hb: 15.5, HCT: 53.5, PCV: 53.5, WBC: 10.0	Insulin, BP medicine
URINE EXAM Sugar, Albumin, Microscopy, Urea, Creatinine, Uric Acid, Electrolytes, Calcium, Phosphorus, Lipid Profile, HbA1c	10/12/17	Micro: No RBC, WBC, Casts. Urea: 24.00, Creatinine: 1.63, Uric Acid: 4.5	Insulin, BP medicine, Diet
BIO-CHEMISTRY Sugar F, HbA1c, Glycerated Hb, Urea, Creatinine, Uric Acid, Electrolytes, Calcium, Phosphorus, Lipid Profile, HbA1c	10/12/17	HbA1c: 12.5%	Insulin, BP medicine, Diet
LET S. Bilirubin (T/D), S. Creatinine (T/D), S. GPT (AST), S. ALT (ALT), S. ALP (ALP), S. Protein Total	10/12/17	S. Creatinine (T/D): 1.63	Insulin, BP medicine, Diet
RADIOLOGY X-Ray Chest, USG	10/12/17		
MICROBIOLOGY HbsAg, HIV, ASO, CRP, S. (Widal), Blood C/S, S/S	10/12/17		
OTHERS ECG, ECHO, LAB, Blood Group	10/12/17		

Adm Charge PCN (6/8 F & G) @ 1149574105

Sig. Cellulose Sine 7D - 2 week

Sig. Pen 4ml 7D - 3 days

Review after 1 week on telehealth

Sig. Name / Designation of Doctor
Narinder Singh

Signature: _____

REVISIT
2
16 JUL 2022
L. N. HOSPITAL

REVISIT
2
19 JUL 2022
L. N. HOSPITAL

? All pos.

Amnesia in low sp from lung
i.e. high pressure

Swab @ lymph node & @ mid. NON
All unkey observed.

Rt leg inserted

Discharged & followup

→ DMSA / DTPA & GFR awaited.

currently no fever/vomiting

↓
Followup.

As...

Get usg KUB & (Emergency)

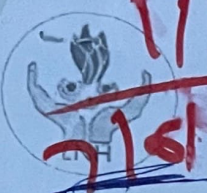
~~Sup Azithromycin 500 mg OD~~
~~Sup Amoxicillin 500 mg BID~~
~~Sup Pen 500 mg BID~~

Admission.

~~Sup ustunox 1/2 tab in 1/2 glass of water tid~~

for other drugs

Dr. NITIN JAIN
Asst. Professor
Department of Pediatric Surgery
MA. C.S. & I
No. 102
Lax Nazak Hospital



LOK NAYAK HOSPITAL

NEW DELHI - 110002
 लोक नयक अस्पताल
 नई दिल्ली 110002
 GOVERNMENT NATIONAL CAPITAL TERRITORY OF DELHI

EPBX No. : 23233400, 23232400
 Casualty No. : 23235152
 M.S. Office Fax No. : 23232670
 E-mail: inhmsoffice@gmail.com
 msinh@nic.in

OUTPATIENT REGISTRATION CARD

Queue Token No. : 1

Dept	PEDS SURGERY	DR SIMMI K RATAN (MON to SAT)	Room No	532	OPD Reg. No.	114551065					
Name	RUHAN	Sex	M	Age	1 Y	Date	04 JUN 2022 8:03 AM	Marital Status			
D/W	S/O : SHANE ALAM	Area / Location	9/162 WELCOME DL, DELHI		Referred to Dept	PEDS SURGERY	Contact No.				
Religion		Nationality	INDIAN		Occupation		APL	BPL	Monthly Income		
DOB	04 JUN, 2021	Birth Wt(K.g.)		Wt(Kg.)		HC(Cms.)		Ht(Cms.)			
Immunization	BCG	DPT	1 2 3 B1 B2	OPV	1 2 3 B1 B2	Hepatitis B	1 2 3	Measles	MMR	Typhoid	Other

PROVISIONAL DIAGNOSIS :

Allergic to :

INVESTIGATIONS

DATE

CLINICAL FINDINGS & REPORTS

TREATMENT

- Haematology
- ESR / TLC / DLC
- SR
- Platelet Count
- U / CT / PT
- URINE EXAM
- Urgar
- Urb
- Microscopy
- U/S
- CHEMISTRY
- U/S
- Sugar F / PP / R
- Unconjugated Hb.
- Urea
- Creatinine
- Uric Acid
- Electrolytes
- Calcium
- Phosphorus
- Urid Profile
- U/T
- Bilirubin / T / D / I
- UOT (ALT)
- UPT (AST)
- ALK. Phosp
- Protein Total
- Urb
- Uobulin
- U Ratio
- Uthrombin Time /INR
- RADIOLOGY
- Uray Chest
- USG
- U Scan / MRI
- ICROBIOLOGY
- UbsAg
- Urb
- U/SO
- URP
- UWidal
- Uood C/S
- US
- OTHERS
- USG
- UHO
- USG
- Uood Group

4/6/22

CSIB SR, Paed Surg (Dr. S.K. Ratan)

Ug Burning micturition
 Straining at micturition x15 days
 Poor urinary stream

Not ass. w fever.

Urb Severe valvular +
 Supravalvular PS.

Urb Patient afebrile.
 Urb P/A - Soft, but flanks full.
 Bladder palpable
 All kidneys palpable.

Chest - B/L AE (+)
 Urb - S1 S2 (+)
 Urb - E4 V5 M6

USG w/A B/L gross HDN. (R > L)
 4/6/22 (outside)

Antenatal USG : 2 cystic lesion
 36x47 and 37x49 mm seen
 in fetal abdomen cavity.

Sign. /Name/Designation of Doctor
 Date & Time: 04 JUN, 2022 08:03

24
2/7

REVISIT
2
07 JUN 2022
L. N. HOSPITAL

REVISIT
14 JUN 2022
L. N. HOSPITAL

Bye ASD in outside USG

- no ASD any fever
and sitting steadily

• Child crying excessively
as dander could not be
examined.

ASD Bye palpable
dilated pupil

2 PUSO
Plan - bring back after
exam up

Echo - Severe Valvular
PS

Adv

- USG KUB + Pvrn
- Uⁿ U^f
- KFT, CBC, VEG -
- Follow up in OPD on
Tuesday with
store

[Signature]

Dr. LIANE DIMELLO
Senior Resident
Dept. of Pediatric Surgery
MAMC & Lok Nayak Hospital
New Delhi-02 DMC No. 91437

Adv

- USG KUB
- ⊖ Plan - UEC scan
after USG Supra

- To review
Supra

- To attend
to all low
Cardiac

can be
Evaluation

Dr. Saibal Ch
Senior Resident
Pediatric Sv
MAMC & Lok Nay
New Delhi

MFT 26
05/

1/05/1
7th 5860

PH 150/3/2
M 358

