



LAMA SUMMARY

IPD NO :	IPD000356721-22	UHID NO :	UHID02840024
PATIENT NAME :	Baby GAURI	CATEGORY :	VIDAL HEALTHCARE
AGE :	1 Y/F	DATE OF ADMISSION :	14-09-2021_6:30PM
CONTACT NO :	8999968309	MLC NO. :	
BED NO :	ICU/19	DATE OF DISCHARGE :	15-09-2021_8:32PM
CONSULTANT DR:	DR NAMAN DR RASHMI	DEPARTMENT:	PEADIATRICS
ADDRESS	13-63A RAM NAGAR, NEAR RADHEY SHYAM DEPT STORE, OM VIHAR , UTTAM NAGAR NEW DELHI		
		LAMA SUMMARY	

FINAL DIAGNOSIS AT THE TIME OF DISCHARGE :- TYPICAL FEBRILE SEIZURE

COURSE OF STAY: - Patient was admitted with complaint of high grade fever with chills, cough, uprolling of eyes, frothing from mouth, jerky movement of fore limb, vomiting, fatigue and generalized weakness.

Clinical findings at the time of admission were HR- 152/min, RR- 26/min, temp-102.6°F, SPO2- 98%, RBS -88mg/dl.

Patient was treated with medical treatment in form of Inj. Monocef, Amikacin, Rantac, EMset, Pan, Syp. Ambrodil-s and Cetirizine.

Patient's attendants want to take their patient LAMA.

Signature of RMO
Telephone no: -

Signature of Consultant
Signature of attendant / Patient: -

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Ph.: 011-2537-2226, 2537-2227, 2537-2229, 2537-2230. Fax :011-2537-2228. Email : mrrmhospital@yahoo.in



FULLY COMPUTERISED LABORATORY

Name :BabyGAURI	Reg. No. :UHID02840024	IPD/OPD Status :IPD
Relative :D/O.ANIRUDH MISHRA	Accession No. :20210914215	Category :GENERAL
Age/Sex :1 Y/Female	Consultant Dr. DR NAMAN DR RASHMI	Location/Bed.No :ICU,19
Registration :14/09/2021 7:48:00 PM	Sample Collected 14/09/2021 8:55:09 PM	Sample Reported :



Accession No

HAEMATOLOGY REPORT



Registration No

SAMPLE TYPE : EDTA BLOOD

HAEMATOLOGY REPORT

Investigations	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT			
Hemoglobin (Hb)	10.40	gm/dl	11.0 - 15.50
TLC	14100	cells/cumm.	6000 - 15000
DLC			
Neutrophils	71	%	40 - 75
Lymphocytes	24	%	20 - 45
Eosinophils	02	%	0 - 6
Monocytes	03	%	0 - 8
Basophils	00	%	0 - 1
ESR	26.0	mm/1hr	0.0-15.0
Red Blood Cell	4.80	million/cumm	4.00 - 5.00
Haematocrit (HCT/ PCV)	34.5	%	40.0 - 50.0
MCV	71.9	fl	80.0 - 100.0
MCH	21.7	pg	27.0 - 31.0
MCHC	30.1	g/dl	33.0 - 37.0
Platelet Count	2.00	Lakh/cmm	1.50 - 4.00

*** End of Report ***

Checked By :

[Signature]

[Signature]

Dr. NITYANAND DAS
MBBS MD
CONSULTANT PATHOLOGIST

FULLY COMPUTERISED LABORATORY

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Registration	:14/09/2021 7:48:00 PM	Sample Collected	14/09/2021 8:55:09 PM	Sample Reported	:14/09/2021 8:55:10 PM



Accession No

HAEMATOLOGY REPORT



Registration No

MALARIA ANTIGEN :

Result :-

Plasmodium Vivax - Negative

Plasmodium Falciparum - Negative

Method : Rapid card test (Sandwich Immunoassay)

REMARKS :-

The test detects parasitemia levels of 100 - 200 parasites per uL of blood. It detects the presence of Plasmodium lactate dehydrogenase, an enzyme produced by all forms of the parasite, using monoclonal antibodies against the enzyme.

COMMENT / NOTE : This is screening test only having high sensitivity & specificity. However, false positive & false negative may occur in certain circumstances. Correlation with peripheral blood smear is recommended if necessary.

Tested By : 



Dr. NITYANAND DAS
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Registration	:14/09/2021 7:48:00 PM	Sample Collected	14/09/2021 8:55:09 PM	Sample Reported	:



Accession No

LIVER FUNCTION TEST



Registration No

SAMPLE TYPE : SERUM

LIVER FUNCTION TEST

Investigations	Result	Unit	Biological Reference Interval
LIVER FUNCTION TEST (LFT)			
Bilirubin Total	0.43	mg/dl	0.10- 1.20
Bilirubin Direct	0.15	mg/dl	0.0 - 0.30
Bilirubin Indirect	0.28	mg/dl	0.0 - 0.90
SGOT (AST)	39.02	U/l	0.0 - 31.0
SGPT (ALT)	14.90	U/l	0.0 - 34.0
ALKALINE PHOSPHATASE	270.25	U/L	104.0 - 345.0
TOTAL PROTEIN	6.96	gm/dL	6.60 - 8.30
ALBUMIN	4.50	g/dl	3.60 - 5.10
GLOBULIN	2.46	g/dl	2.30 - 3.50
A/G RATIO	1.83		1.25 - 1.56

*** End of Report ***

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Age/Sex	:1 Y/Female	Consultant	Dr. DR NAMAN DR RASHMI	Location/Bed.No	:ICU,19
Registration	:14/09/2021 7:48:00 PM	Sample Collected	14/09/2021 8:55:09 PM	Sample Reported	:14/09/2021 8:56:51 PM



SEROLOGY



Accession No

Registration No

DENGUE NS1 ANTIGEN TEST

DENGUE NS1 AG - NON - REACTIVE

Method : Rapid card test (Rapid solid phase Immuno-chromatography)

COMMENT / NOTE : This is screening test only having high sensitivity & specificity. However, false positive & false negative results may occur in certain circumstances. Confirmation by alternative method for example PCR, ELISA or other specific methods & clinical correlation is recommended.

Checked By:

Signature

Signature

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Age/Sex	:1 Y/Female	Consultant	Dr. DR NAMAN DR RASHMI	Location/Bed.No	:ICU,19
Registration	:14/09/2021 7:48:00 PM	Sample Collected	14/09/2021 8:55:09 PM	Sample Reported	:14/09/2021 8:58:11 PM



Accession No

SEROLOGY



Registration No

TYPHIDOT IGM TEST

TYPHIDOT IGM - POSITIVE

Method : Rapid card test (Lateral flow chromatographic immunoassay)

COMMENT / NOTE : This is screening test only having high sensitivity & specificity. However, false positive & false negative may occur in certain circumstances. Confirmation by alternative method for example PCR, ELISA or other specific methods etc. is recommended.

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SEROLOGY



Accession No

Registration No

SAMPLE TYPE : SERUM

SEROLOGY

Investigations	Result	Unit	Biological Reference Interval
CRP (QUANTITATIVE)	4.94	mg/L	0.00 - 5.00

*** End of Report ***

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Signature

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Age/Sex	:1 Y/Female	Consultant	Dr. DR NAMAN DR RASHMI	Location/Bed.No	:ICU,19
Registration	:14/09/2021 7:48:00 PM	Sample Collected	14/09/2021 8:55:09 PM	Sample Reported	:14/09/2021 8:57:21 PM



KIDNEY FUNCTION TEST



Accession No

Registration No

SAMPLE TYPE : SERUM

KIDNEY FUNCTION TEST			
Investigations	Result	Unit	Biological Reference Interval
UREA	19.74	mg/dl	10.0 - 50.0
BLOOD UREA NITROGEN (BUN)	9.22	mg/dl	6.0-20.0
CREATININE	0.33	mg/dl	0.50 - 0.90
URIC ACID	3.44	mg/dl	2.40 - 5.70
Na+	136.1	mmol/L	135.0 - 150.0
K+	3.77	mmol/L	3.50 - 5.50
CALCIUM	9.53	mg/dL	8.50 - 10.50
PHOSPHORUS	5.44	mg/dl	2.50 - 4.50

*** End of Report ***

Checked By:

Dr. NITYANAND DAS
MBBS MD
CONSULTANT PATHOLOGIST

TAX/GST INVOICE

VIAAN ENTERPRISES

C-9, OM VIHAR
UTTAM NAGAR

NEW DELHI-110059

GSTIN : 07AAHPP8380B1ZK Tel.No : /
 DL.No : UTN-139025 /
 Inv.No : 220/21/S/28327 Date:14/09/21 20:14
 Name: BABY GAURI

DrName: -MAGGO HOSPITAL

Dr Add :

Item	Product Name	Batch
Exp. Mfac Qty Mrp Gst% Disc Amount		
010 SYRINGE 2ML BD EMERALD 1S		1121610
04-26 BIOCHI 6	13.00 12.00	7.80
010 SYRINGE 5ML 1S		1159297
05-26 BIOCHI 12	20.00 12.00	24.00
01018 IV SET		NH153122

03-24 JMS 1	198.00 12.00	19.80	106.00
03930 VENFLON PRO 22 G		1114048	

04-24 BECTO 2	401.00 12.00	401.00	802.00
01-25 BIOCHI 2	132.00 12.00	52.80	01440832

01004 ZOXICEF 1GM INJ			PBY21074
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05-23 BIOCHI 3	60.20 12.00	18.06	180.60
01004 RANLOC INJ 2ML		IRH-6711	

03-24 INTAS 3	3.23 12.00	0.97	9.69
010 ROPAMOL INFUSION 100ML		213070C	

04-23 BIOCHI 2	285.00 12.00	114.00	570.00
010 OLDAY INJ		RP-259	

03-22 BIOCHI 3	13.05 12.00	3.92	39.15
010 NKACIN 100MG INJ		NPGR032	

03-23 ABBOT 1	39.32 5.00	3.93	39.32
0099 AMBROOLITE S SYP 100ML		BALJ1F1	

03-22 TABLET 1	97.00 12.00	9.70	97.00
0031 ALERID SYP 30ML		J510070	

03-24 - 1	19.82 12.00	1.98	19.82
010 DNS 0.45% 500ML 1S		1111622S.	

01-23 BIOCHI 3	145.20 12.00	43.56	435.60
Total Lines 13	MRP.Val :	2973.18	
Tot QTY : 40	Disc :	701.52	

Net Bill Value : **2272.00**

Tax Type	Tax Amt	Tax Type	Tax Amt
GST 0%	0.00	GST 0%	0.00
GST 2.5%	0.84	GST 2.5%	0.84
GST 6%	119.74	GST 6%	119.74
GST 9%	0.00	GST 9%	0.00
GST 14%	0.00	GST 14%	0.00

User :SHEHNAWAZ

Cash Recd 0.00 Change : 2272.00

MATA ROOP RANI MAGGO HOSPITAL
 C-9, OM VIHAR, PHASE-1, UTTAM NAGAR, METRO PILLAR NO. 709 NEW DELHI-110059
 EMAIL: mrrmhospital@yahoo.com
 Helpline numbers : 011-6129 0000 /+91 95550 59059

ADVANCE PAYMENT RECEIPT

REG NO.	UHID02840024
IPD NO.	IPD000356721-22
NAME	Baby GAURI
AGE / GENDER	1 Y/Female
CONSULTANT DR.	DR NAMAN DR RASHMI
REF BY	SELF
ADDRESS	13-63A RAM NAGAR, NEAR RADHEY SHYAM DEPT STORE, OM VIHAR UTTAM NAGAR

DATE : 14-09-2021
 ADM. DATE : 14/09/2021 6:30:50 PM
 FATHER/HUSBAND : ANIRUDH MISHRA
 RECEIPT NO. : 21220051004R
 DEPARTMENT : PEDIATRICS
 CATEGORY : GENERAL
 UTTAM NAGAR

Particulars	
Received Advance Amount	20000.00
TOTAL AMOUNT	20000.00

PAYMENT MODE : DEBIT CARD ANIRUDH, 9103, 1, 2021, 002010, ,
 Twenty Thousand Rupees only
 Remarks :

Invoice Remarks :
 Authorised Signatory