बाल चिकित्सा विभाग
UHID:108609229
Dept No: 20251030025395
सागर सागर / SAGAR SAGAR
S/O SURENDRA SINGH
5Y 1M 8D / M/पुरुष
MUNIGAON MAINPURI, UTTAR PRADESH, Pin, INDIA
Ph: 730282015 General Rs. 0
Follow Up Patient

कमरा / Room C-211
Queue / संख्या F22
Unit-I, Paediatric.
Reporting: 08:20:54 23/10/2025

(4)
14.1 kg
Ht 103.5 cm
BP. 94/60 mmHg

Suspected PUV

MCU not done yet

Adv. — Repeat urine culture; If sterile MCU study

— Inj. Darbepoeitin 25 mcg once in 2 weeks s/c

— Rocalcitrol 0.25 mcg once daily

— ~~Syp. Tonoferon 5 ml once daily~~

— ~~Tab. Shelcal 500 mg per oral 1—1—1 before meal~~ once after meal

— Tab. Sevelamer 400 mg 1—1—1

— ~~Tab. Levoflox~~

CBC, RFT, LFT

— Review on monday.

Dr. JITENDRA KUMAR MEENA
Assistant Professor

LH24102500043 108609229
LC2410250186 108609229
URN-241025108 108609229
CUC-241025066 108609229

2/7 → Hb 4.7
5/7 Hb 11.8
6/7 → 10.0

16/7 USG → CMD lost
HDN
thinning of parenchyma
bladder → Proximal dilated
Post void residue (15 ml)
~ 87 cc
Pre void 140 cc
obstructed

24/7 urea / cr
142.6 / 4.28

BP → 95 + 12 centile
↓
Amlo & Enalas

6 days urine retention (swelling) & pain.
~~c fever c chills~~
admitted 20/7 to 24/7 → ?BOO
USG → B/L hydronephrosis.
↓
evaluate creatinine → CKD stage 5
↳ HB → 10.5 | PLt - 2.75 | TLC - 10.7k

↓

26/7/25 to 7/8/25

urine retention & fever with chills
↓ 10 ci.
received i/v antibiotic
↓
discharge
On OPD follow up.

27/7
ur/cr - 145.8 / 1.98

NCCT KUB → chronic cystitis
B/L HDUN
- Peri urethra bulge.

16/7/25	18/7	18/7 ABG	31/7	14/8	4/9
230	243.7	pH - 7.34	urine C/S (n)	ur 132.9	142.8
6.95	7.24	HCO3 12.3		cr 2.1	3.2
7.3	5.6	Na/K - 128/3.2			
14.100 (85/13)	8840 (76/20)	ur/cr 202/5.24			

RM → Pus cells (80-100)

Turbid urine (+)

Adv
- MCU (after UTI resolution)
- CBC/RFT/LFT/KFT/PTH/VitD/Ferritin/TIBC
- urine R/M, urine C/S
- USG KUB (AIIMS)
→ Keraflon 250 mg PO OD x 10 days
→ Shelcal 500 mg OD.

अ० भा० आ० सं० अस्पताल/A.I.I.M.S. HOSPITAL
बहिरंग रोगी विभाग /Out Patient Department
अस्पताल के अन्दर धूम्रपान [illegible] PROHIBITED IN HOSPITAL PREMISES

बाल चिकित्सा विभाग UHID:108609229
Dept No: 20250030025395
सागर सागर / SAGAR SAGAR
S/O SURENDRA SINGH
SY QM QD / MI(ख्रम)
VIJNIGAON MAINPURI, UTTAR PRADESH, PIN:0, INDIA
Pin: 7302826 General Rs. 0
New Patient

Queue/ क्रम संख्या N16
कमरा / Room C 214
Unit-I, Paediatric

सोम,गुरु, Mon,Thu (सोम,गुरु)
Reporting: 10:52:31
15/09/2025

OPR-6

केन्द्रीकृत पंजीकृत सं/O.P.D. Regn. No.
आयु Age
पता/Address Padrauna 10860925

निदान/Diagnosis

दिनांक/Date

उपचार/Treatment

→ antenatal USG not possible

Antenatal → NOT hlo of oligohydramnios / no. used DFMC

Natal → FT | LSCS (previous CSCS) | 3.5kg | CIAB | No NICU Stay |

non consanguineous

No Neonatal jaundice

13 11 9 1 5 years

- died at 7 months
- diarrhoea

No significant history till 5 years of age
- no blood transfusion
- no urine stream
- no abd distension
- no blood in urine
- no burning micturition

Operated for ~~congenital hydrocele~~ left open herniotomy on 6/7/25

4/7 to 11/7 → received 2 blood transfusion

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

OPR-6

बाल चिकित्सा विभाग
UHID:108609229
Dept No: 20250030025395
सागर सागर / SAGAR SAGAR
S/O SURENDRA SINGH
5Y 0M 0D / M/(पुरुष)
NUNIGAON MAINPURI, UTTAR PRADESH, Pin:0, INDIA
Ph: 7302820
General Rs 0
New Patient

कमरा / Room C 214
Queue / संख्या N16
Unit-I, Paediatric
सोम,गुरु, Mon,Thu (सोम,गुरु)
Reporting: 10:52:31 15/09/2025

पंजीकृत सं०/O.P.D. Regn. No.
आयु Age
पता/Address

SBP	DBP
75	36
91	51
103	63
108	

निदान/Diagnosis BP → 108/60

HR → 103

उपचार/Treatment

दिनांक/Date

52

13.8 kg

BP →

6/9/25

Urine P/m → Pus full filled

Hb 4.2 | 13800 / 3.91 → received PRBC
68/21/5/2

Urine Culture
Citrobacter sp.
Sn to Am... /lefloxacin/
Cefip... / mer... /
Ofloxacin / Magnex
Cefuroxime / Pipta / Norflox / Levoflox

K/c/o B/L Hydronephrosis c Pyonephritis
(~~...~~)
↓
urinary catheter in-situ

HOPI :- operated for hernia x3 months back (left) open herniotomy. on 6/7/25)
↓
f/b. - urine retention 6 days after.
↓
was catheterized and given medication
fever c chills
catheter still present
↓
admitted in Ambedkar hospital
discharged on 7/August

Child life care foundation

प्रयोगशाला कायचिकित्सा विभाग
DEPARTMENT OF LABORATORY MEDICINE
नैदानिक सूक्ष्म जीव विज्ञान
Clinical microbiology
अखिल भारतीय आयुर्विज्ञान संस्थान, अंसारी नगर, नई दिल्ली-110029
All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029

UHID:	108609229	**Reg Date :**	15/09/2025 10:52 AM
Patient Name :	Mr SAGAR SAGAR		
Sex :	Male	**Age :**	5 years 14 days
Department :	Paediatrics	**Unit Name :**	Unit-1
Unit Incharge :		**Sample Collection Date:**	29/09/2025 03:06 PM
Lab Name:	Microbiology	**Sample Received Date:**	
Lab Sub Centre:	Clinical Microbiology (Urine C/S)		
Dept / IRCH No:	20250030025395	**Recommended By:**	Dr. Manoj Kumar CCF 28
Lab Reference No:			
Ward Name:	DAY CARE PEDS MCH GF		

Sample Details : CUC-290925163 (Urine) / Report Date: 03/10/2025 02:51 PM

Urine Culture and Sensitivity (Disc Diffusion Method)

Antimicrobial	ORGANISM ISOLATED		
	Klebsiella oxytoca (>10^5 CFU/ml)	MIC(µg/ml)	MIC(µg/ml)
Amikacin	R		
Amoxicillin-clavulanate	R		
Ampicillin-Sulbactam	R		
Cefoxitin(MRSA)	R		
Cefepime	R		
Cotrimazole (Trimethoprim/Sulfamethoxazole)	R		
Ciprofloxacin	R		
Imipenem	R		
Levofloxacin	R		
Meropenem	R		
Nitrofurantoin	R		
Norfloxacin	R		
Piperacillin+Tazobactam	R		
Tetracycline	R		
Gentamicin	S		
Verification Comments :	Doripenam-resistant Pan resistant.		

...erated report, authorized signature is not required. The test reports have been ... permitted.

	Urea / Creat	Na / K⁺
4/9	142.8 / 3.2	138 / 4.5
6/9	121.8 / 3.3	137 / 3.7

eGFR → 12.79

B.P > 95th centile

1
on OPD follow up
1
on 8 off fever

?CKD ? BLADDER/DUN 2° to PUR

R-efr to Peds emergency.

Adv — Inj. Levofloxacin

— change Catheter — Repeat Urine C/S

— USG KUB — to look for Hydronephrosis

— Peds Nephrology review

AIIMS EMERGENCY PASS ISSUED

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029 (REVISIT)

ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI -110029

आपातकालीन विभाग

(DEPT. OF EMERGENCY MEDICINE)

UHID No:108609229

आपातकालीन क्र.(Emergency No): 2025/030/0108968 दिनांक DATE: 15/09/2025 समय TIME: 03:31:22 PM

NON-MLC

नाम NAME: MR SAGAR SAGAR आयु AGE: 5 years लिंग SEX: M

S/O : SURENDRA SINGH

पता ADDRESS: मकान संख्या H.NO: MUNIGAON MAINPURI गली / मुहल्ला STREET/MOH:

शहर/गांव CITY/BLOCK: पिन PIN: 0

राज्य STATE: UTTAR PRADESH फोन क्र. PHONE NO: 7302820158

मोबाइल MOBILE NO: 7302820158 स्थान Location: Paediatrics Emergency

द्वारा BROUGHT BY: Relative MOTHER Criticality: Red / Yellow / Green

Triage: Responsive/ Unresponsive HR /min BP mmHg RR /min spO2 %

Shifted to Paeds/ Main/ New Emergency

Presenting Complaints

Primary Assessment (ABCDE) : Assessment Pentagon

Airway

Open & stable : Yes/No

If No.....

Breathing: RR /min

Efforts: Normal/Poor/increased

Auscultation:

Air entry:

Normal/poor/Differential

Added sounds:

None/Stridor/Wheeze/Crackles

SpO2 on Room air.....

Circulation

HR...../min

CFT.....secs.

BP.....mmHg

Peripheral pulse: Poor/Good

Central pulse:Poor/Good

Skin temp: Warm/cool

Others

Disability

GCS.....

Pupil size...../min

Pupillary Reactions.....

Motor activity:

Normal & Symmetrical/

Asymetrical/

Posturing/Flacidity/Seizure

Blood Sugar.....mg/dl

Exposure:

Temp.....

Colour:Normal/pallor/cyanosis/ mottled

Any other skin lesions.....

Diagnosis

एम.आर.-3 जनरल हिस्टरी
M.R.- 3 General History

अखिल भारतीय आयुर्विज्ञान संस्थान, नई दिल्ली-110029
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

नाम Name: Sagar | उम्र Age: 5yo/M | सर्विस Service | दिनांक Date: 15/9/25 | यू.एच.आई.डी. नं. UHID No.

प्रोफेसर इंचार्ज Professor I/C | Notes written by Dr Tanvi

CLINICAL NOTES

3:45pm

C/S/b Paeds nephro SR

B/L Hydronephrosis / UTI / CKD G5 ? AKI on CKD

foley's catheter in situ — MCU → not done

urine Turbid — sent from OPD

on & off fever (+)

Adv: (D/W Dr Jitendra)

Inj Levoflox 200mg IV q 24 hourly – from daycare.

- USG KUB for hydronephrosis
- RFT / CBC / VBG / iPTH / vit D / Fe / ferritin / TIBC → f/w reports
- change foley catheter
- urine R/M, urine C/S

प्रयोगशाला कायचिकित्सा विभाग
DEPARTMENT OF LABORATORY MEDICINE
नैदानिक सूक्ष्म जीव विज्ञान
Clinical Microbiology & Molecular Medicine
अखिल भारतीय आयुर्विज्ञान संस्थान, अंसारी नगर, नई दिल्ली-110029
All India Institute of Medical Sciences, Ansari Nagar, New Delhi-110029

UHID:	108609229	**Reg Date :**	15/09/2025 10:52 AM
Patient Name :	Mr SAGAR SAGAR		

Uric Acid:	NIL
Yeast:	NIL
Mucus:	NIL

SPECIAL:

Ketones (Nitroprusside method):	
Bile Salts(Hays test):	
Bile Pigments(Fouchets method):	
Urobilinogen(Ehrlich reaction):	
Chyle(Ether test):	
Bence-Jones-Protein(Heat method):	
Porphyrine(Watson-Schwartz test):	
Nitrites(Nitrite Reducing test):	Negative

OTHER FINDING:

This is an electronicaily generated report, authorized signature is not required. The test reports have authenticated. Partial reproduction of the report is not permitted.

(NISHTHA KAPIL)
Verified By

Authorized S

**********END OF THE REPORT**********

विकिरण नैदानिक विभाग

अ० भा० आ० सं०, नई दिल्ली-११००२६

DEPARTMENT OF RADIODIAGNOSIS

A.I.I.M.S., NEW DELHI - 110029

PLAIN X-RAY/CONTRAST STUDIES REQUISITION FORM

Name : Sagar Age/Sex : 5yrs M Ref. Deptt./Unit : Date : 15/9/25

Indoor (Bed No.) / Outdoor / Casualty UHID No. : 10860922 9 LMP :

Examination Required : Peds

Clinical History and Examination :

USG KUB

(? B/o Pyonephrosis)

Clinical / Working Diagnosis :

Blood Urea / S. Creatinine :

Any h / o allergy or asthma :

(for IVU patients only) :

Signature of Referring Physician / Date :

Consent :

I hereby give consent for the performance of any diagnostic or therapeutic radiological procedure with or without the use of contrast injection and / or sedation. The associated complications and risks have been explained to me.

Signature of Patient / Date :

Your appointment is on : _____ Room No. : _____

Time Slot : 8:30 9:00 9:30 10:00 10:30 11:00 11:30 12:00 12:30

X- Ray No. : Size / No. of Films

Kvp/mAS:

Date : P.T.O.

Sign. of Radiographer :