

# **MEDICAL CASE SHEET**

(ADMISSION CASE SUMMARY & DISCHARGE RECORD)

|                                                                                                                                                                                                                                                                                                                          |                                                           |                                        |                                      |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|----------------------------------------|--------------------------------------|
| ADM No.<br>123.                                                                                                                                                                                                                                                                                                          | NAME <u>Adina</u><br>AGE <u>1 1/2 yrs</u> SEX <u>Male</u> | OCCUPATION &<br>ADDRESS<br><u>M.S.</u> | NEXT OF<br>KIN<br><u>S/o Titabai</u> |
| DATE OF ADMISSION <u>2/6/10</u>                                                                                                                                                                                                                                                                                          |                                                           | TIME <u>5:45 PM</u>                    | WARD                                 |
| FINAL DIAGNOSIS                                                                                                                                                                                                                                                                                                          |                                                           | DATE OF DISCHARGE                      | SIGN OF M.O. I/C<br>NAME             |
| <p>PRESENTING SYMPTOMS</p> <p><u>M.L.C.</u></p> <p><u>H/O Inaugural to head at back of head</u><br/><u>at about 5:30 PM</u></p> <p><u>Patient brought to PHC Kadambur</u><br/><u>at 5:35 PM</u></p> <p><u>H/O 3-4 episode of vomiting</u><br/><u>No H/O any seizure activity.</u></p> <p><u>O/E: Child is drowsy</u></p> |                                                           |                                        |                                      |
| <p>PHYSICAL FINDING</p> <p><u>Wt = 8 kg</u></p> <p><u>Admission</u></p> <p><u>- Inj Paracetamol 3mg IM</u></p> <p><u>- Nil by mouth</u></p> <p><u>- I.V Diazepam 1/2 cc SOS</u></p> <p><u>Refer to G.B.P.H for CT scan</u><br/><u>&amp; specialist review by Paediatric</u><br/><u>&amp; Surgery specialist</u></p>      |                                                           |                                        |                                      |
| <p>PROVISIONAL DIAGNOSIS</p> <p><u>Shashank Shekhar</u></p> <p><u>2/6/10</u></p> <p><u>Medical Officer Incharge</u></p> <p><u>PHC Kadambur</u></p> <p><u>PRIVACY NOTICE CENTRE</u></p> <p><u>REGISTRATION NO. 144203</u></p>                                                                                             |                                                           |                                        |                                      |

P.T.O.