









INITIAL ASSESSMENT FORM PEDIATRIC EMERGENCY ROOM ER-2

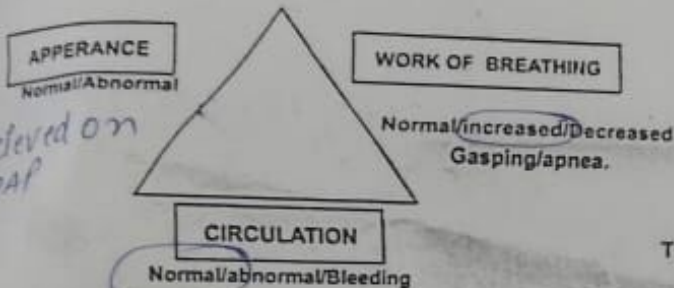
Name	Bhokavita			Referred from Kanti Devi Hospital
Age/Gender	07/M	Weight	7.5 kg	
S/D of	Pushkar			
Date/Time	12/09/23	MLC		
Informant	Uncle Father	Y	(N)	

Term 05/10/23 DNCIAB-HIE-III  
 NVD 3:30 PM 7.5 kg

Chief Complaints: PA HIE-III Symptomatic Hyperchloremia & AKI  
 MRSA (+) on Blood-C/S

INITIAL EVALUATION (PAT)

CLASSIFICATION AFTER PAT



- Respiratory distress (+)
- Respiratory failure
- Shock - Compensated/De-compensated
- Cardiopulmonary failure/arrest
- CNS system/ metabolic dysfunction

TRIAGE CATEGORIZATION RED YELLOW GREEN

PRIMARY EVALUATION (ABCDE) ASSESSMENT PENTAGON

Airway	Breathing	Circulation
Open and stable: ✓	RR: 64/min Efforts: Normal/Poor/Increased Auscultation: Normal/Poor/Differential Added sounds: Grunting (+)	HR/PR: 120 CFT: 135g BP: ..... Peripheral pulses: Good/poor Central pulses: Good/poor Skin Temperature: Warm/cool ECG: .....
Open but unstable:	None/stridor/wheeze/crackles	
Obstructed:	SpO2 (room air): 96% on O2 by NP	
Disability		Exposure
GCS: Pupil Size: Reaction: Motor activity: Normal & symmetrical/Asymmetrical/posturing/Flaccidity/Seizure/EPS Blood sugar: 134 mg/dl		Temperature: Colour: Normal/pallor/cyanosis/mottled Any other skin lesions: None Petechiae/bleeding/rash/pustules/abscess/any other

History of present illness:

child was born to G2 P1 L1 A0 mother @ 9MA, DNCIAB, Intubated and put on MV, developed Bradycardia, Inotropes added, (for 4 days), extubated today and put on CPAP and referred here.

on B-C/S - MRSA (+)

child also had Deranged KFT - SLO AKI (? 2° to BA)

8/10      9/10      10/10  
 57/103      37/106

CLINICAL EXAMINATION AND ASSESSMENT

General examination: General condition sick  
Pallor (+)  
Cyanosis (+)  
Clubbing (+)  
Edema (+)  
Jaundice (+)

Systemic examination:  
RS.  $\text{R/L AP } (+)$ , crackling (+)  
CVS.  $\text{Sp2 } (+)$ , murmur (+)  
Abd- soft, NT, No DM  
CNS-  $\text{CTA } (+)$ , AF-Bolging

mod  
DVM -  $\text{C/ld Retracting } (+)$   
RA -  $646/m$   
counting (+) on  
AL (+)  
SpO2 -  $96\% - 98\% - 99\%$

DVM - 4/10

INVESTIGATIONS:

CBC / LKS / CRP / BLOOD-C/S / ABG / lactate / CXR / NP-cyto

DIAGNOSIS: TIAQA /  $\text{MIE-III}$  / symptomatic hyperkalemic  
MRSA (+) sepsis + holo meningitis

PLAN OF CARE:

(1) - NPO / NP Insitu  
Isol

(2) - ~~IVF -  $\text{D5 } 100\text{ml}$  - 10ml/hr~~

(3) - ~~inj. Mero 50mg i.v TDS~~

(4) - ~~inj. vanco - 35mg in 10ml D5 slowly over 1hr~~

(5) - ~~inj. Tevema - 35mg i.v BD~~

(6) - W/F Vitals / RD / seizure.

(7) -  $\downarrow$  indigenous CPAP

(8) - R/V SOS

REASSESSMENT AND OUTCOME:



[Signature]

B/o Kaveela | D<sub>20</sub> | M  
 T | AGA | MIE III | LOS = meningitis  
 fungal sepsis | Thrombocytopenia |  
 PED 9.

25/10/23

Issues

1 ep seizure → laccera neurology  
 ↑ laccera @ 40

Plan = if repeat S<sub>2</sub> = Phenobarb

Oxygen dependency ⊕

Plan = 2D Echo

Fever spikes 100°F

c.wet = 2.9 kg  
 TFR = 150 ml  
 Ag/hr

Adm

↳ O<sub>2</sub> by NP @ 2L/min

↳ NPO | IVF 150P . 15ml/hour

↳ ~~laccera~~ laccera 30mg IV neurology

@ 40 f/b 60mg IV P&P

BD Kavita / D21 / M

26/10/23

$\Delta T/ASA/HIE III$  [LOS c meningitis] fungal sepsis [Thrombocytopenia]

PED10

Current Status

Oxygen dependency (of  $FiO_2 = 84\%$ )  $\rightarrow$   $2L O_2 @ 0.5L/min$

Free for 24hr  $\rightarrow$  Restart feed

Wt = 2950g

SpO<sub>2</sub> = 87%

HR = 137

RR = 34

SpO<sub>2</sub> = 98%  $10L$  by NP @ 0.5

Temp = 37.1

Adv

①  $O_2$  by NP @ 0.5L/min

② OG feed 30ml q 2hr

amik ③ 9ml LEVERA 60mg iv BD

④ 9ml MEROPENEM  $\rightarrow$  D14

COLISTIN - D10

AMPHORS  $\rightarrow$  D13

⑤ Syp OSTEOCAL 3.5ml qid

VITD<sub>3</sub> 400IU/ml 2x/0/0

MOVITE 0.5ml BD

Noted  
BTS 9pm

⑥ w/f RD/Sz/RV 505

⑦ syp. kluna (100/1) 0.4ml  
Tafel 4 P/O BD

Noted

1/2

Plan

✓ chest

✓ co Bay

✓ shift to 15 Bed