

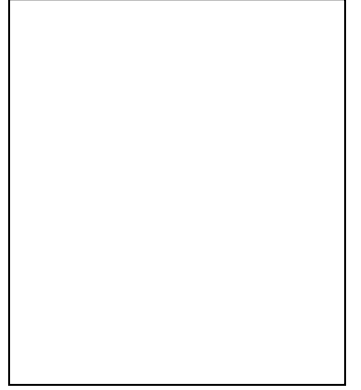


# KINNERA MEMORIAL TRUST

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## Application for Help

PATIENT NAME : BABY OF SWATHI  
FATHER/GUARDIAN : GUNDETI SHEKHAR  
ADDRESS : H.NO 5.39,MAIN ROAD GARLA , KHAMMMM  
PHONE NUMBER : 9642434422, 9642434141  
UHID : BAH00288594(RAINBOW HOSPITAL)  
AGE : 20 DAYS  
GENDER : Female



## DISEASE INFORMATION

(To be filled by Doctor )

**Diagnosis:** HMD, SEPSIS, HYPOTENSION, ANEMIA OF PREMATURITY  
**Date of Diagnosis:** 28-07-2015

**Investigations:** Complete Blood Picture  
Serum Creatinine  
Blood Grouping  
Blood Cultures

**Treatment** Mechanical Ventilator IV Fluids and iv antibiotics and  
**inotropic support**

**Recommendations:**

Kindly sanction

**Consultant Name :** Dr DINESH KUMAR CHIRLA

**Consultant Signature :**

**Approved By:**

