







**RADIOLOGY / SCANS**

Date	Service	Signature	Date	Service	Signature

**SUPPORT SERVICES**

Date	Physiotherapy	Signature	Date	Others Services	Signature
19/6	post op exs	<i>[Signature]</i>			
<del>19/6</del>	<del>post natal exs</del>	<del><i>[Signature]</i></del>			

**BLOOD BANK**

Date									
Units									
Remarks									

**ANY OTHER INFORMATION**

Date: 20/6/26 Time: 10AM

Prepared By: *[Signature]*

Staff Nurse / Floor Co-ordinator  <i>[Signature]</i>	Nursing Supervisor  <i>[Signature]</i>	Billing Assistant	Billing Supervisor
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no due in pharmacy *[Signature]* 20/6/26 10:54 AM

DISCHARGE SUMMARY	
<b>Name:</b> Mrs DEBA PRIYA WADDADAR	<b>MRN:</b> JNB-00053513
<b>Father/Guardian:</b> W/O SIDDARTHA DASGUPTA	<b>IP No:</b> IP11-00056713
<b>Age:</b> 37 Y 11 M 17 D	<b>Gender:</b> Female
<b>Address:</b> Bannerghata Road, Bangalore, Karnataka, INDIA, 560076	<b>Admission Date:</b> 18-06-2026
<b>Referral Doc:</b> self	<b>Discharge Date:</b> 20.6.2026

**Consultants:**  
**Dr. APARNA PANDA**  
MBBS, MD (OBG)  
CONSULTANT GYNECOLOGIST & OBSTETRICIAN  
Reg. No:

DIAGNOSIS	ICD CODE
ELDERLY G2P1L1 WITH 36 WEEKS 1 DAY OF GESTATION WITH ? PPROM OVERT DIABETES MELLITUS ON INSULIN AND OHA	

**Procedure:**  
PRE TERM TERM VAGINAL DELIVERY WITH RMLE DONE ON 19.6.2026

**Reason for admission**  
G2P1L1 with 36 weeks 1 day of gestation with c/o leaking PV since 7.30 pm and pain abdomen on and off since 7pm On 18.6.2026  
Appreciating fetal movements well.  
No c/o bleeding PV

**History**  
Menstrual History: 3-4/28-30days.

Medical History: Overt diabetes mellitus on Tab Metformin 750mg-250mg-  
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 **Marathahalli:**  
Survey No. 8/5,  
Marathahalli-KR Puram, Outer Ring Road  
Doddanekundi, Bengaluru - 560 037.  
Ph: 1800 2122

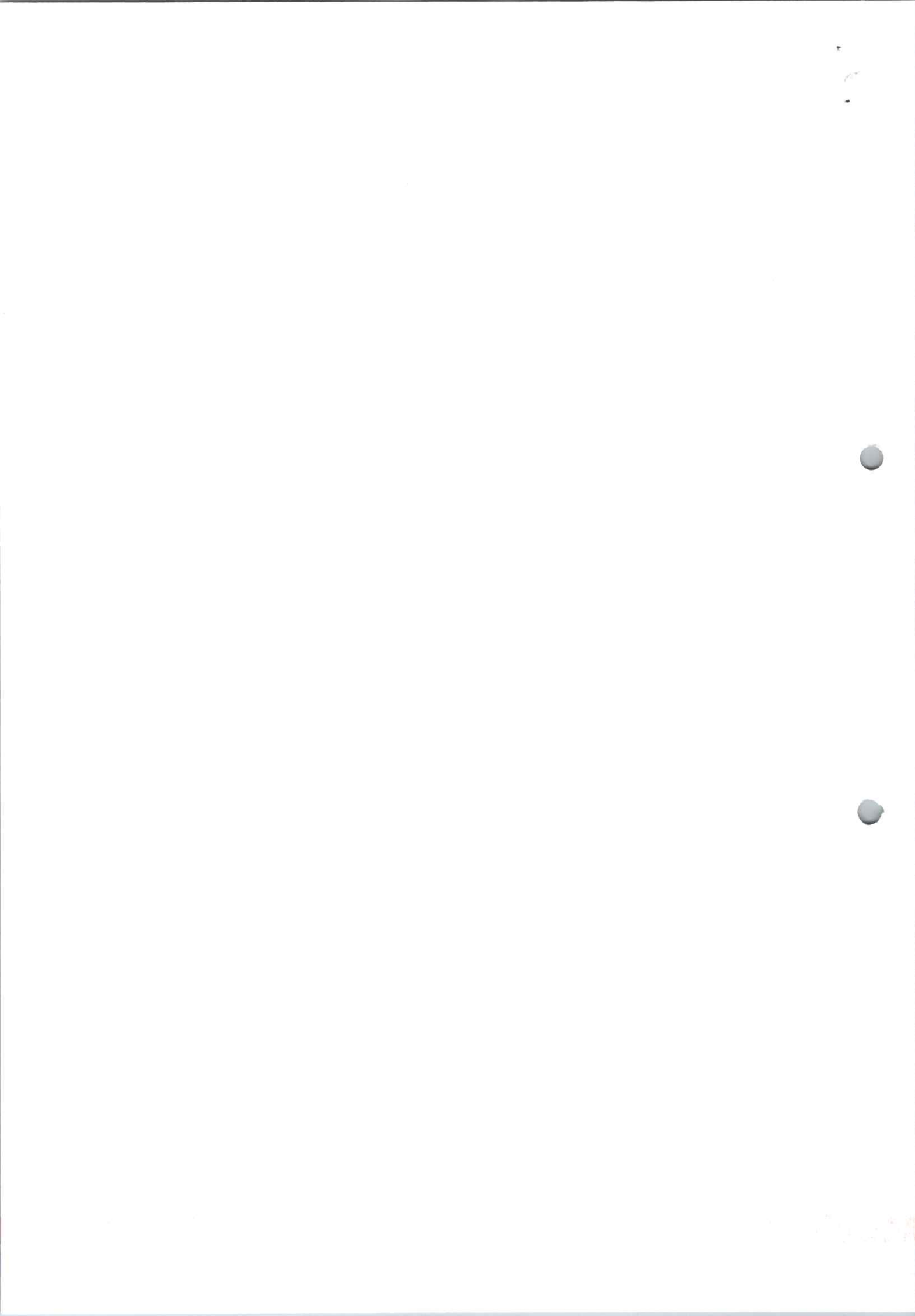
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Bengaluru - 560 092.  
Ph: 1800 2122

**Sarjapur Road :**  
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<b>Name:</b> Mrs. DEBA PRIYA WADDADAR	<b>MRN:</b> JNB-00053513
<b>IP No:</b> IP11-00056713	<b>Admission Date:</b> 18-06-2026

1000mg and Inj Tresiba 0-0-0-22 units, Inj Lyumjev 12-10-10 units

Surgical History: Nil, Allergies: Nil, Family History: Nil

Obstetric History: Married life 09 years, NCM

G1 - FTNVD / 2.55kgs / 5 years 4 months / A and H

G2- Present pregnancy spontaneous conception

She received Inj. TT 2 doses in antenatal period and was uneventful

Inj Betnesol 1st Dose given on 19.6.2026

LMP: 8.10.2025

Obstetric formula: G2P1L1

EDD: 15.7.2026

Gestation at admission: 36 weeks 1 day

### Examination and findings:

Pulse: 92/min, BP: 110/70mm of Hg, RR: 16/min, Spo2: 98% at Ra

### Systemic Examination:

CVS: S1S2 heard, no murmurs

CNS: NAD

RS: NVBS, no added sounds

PA: Uterus term size, 2 contractions / 10'/10" cephalic lower pole, FHS+ 148/  
bpm

PV: Cervix 40% effaced, OS 3cm dilated, vertex at -2 station, Membrane +, No  
leak

**Investigations:** Enclosed.

### Course in the hospital:

She was admitted with above complaints. Vitals checked were stable. At

12.30am : PA: Uterus term size, 2-3 contractions / 10'/15-20", cephalic lower  
pole, FHS +. PV: Cervix 4-5cm dilated, 30-40% effaced, show +, membrane

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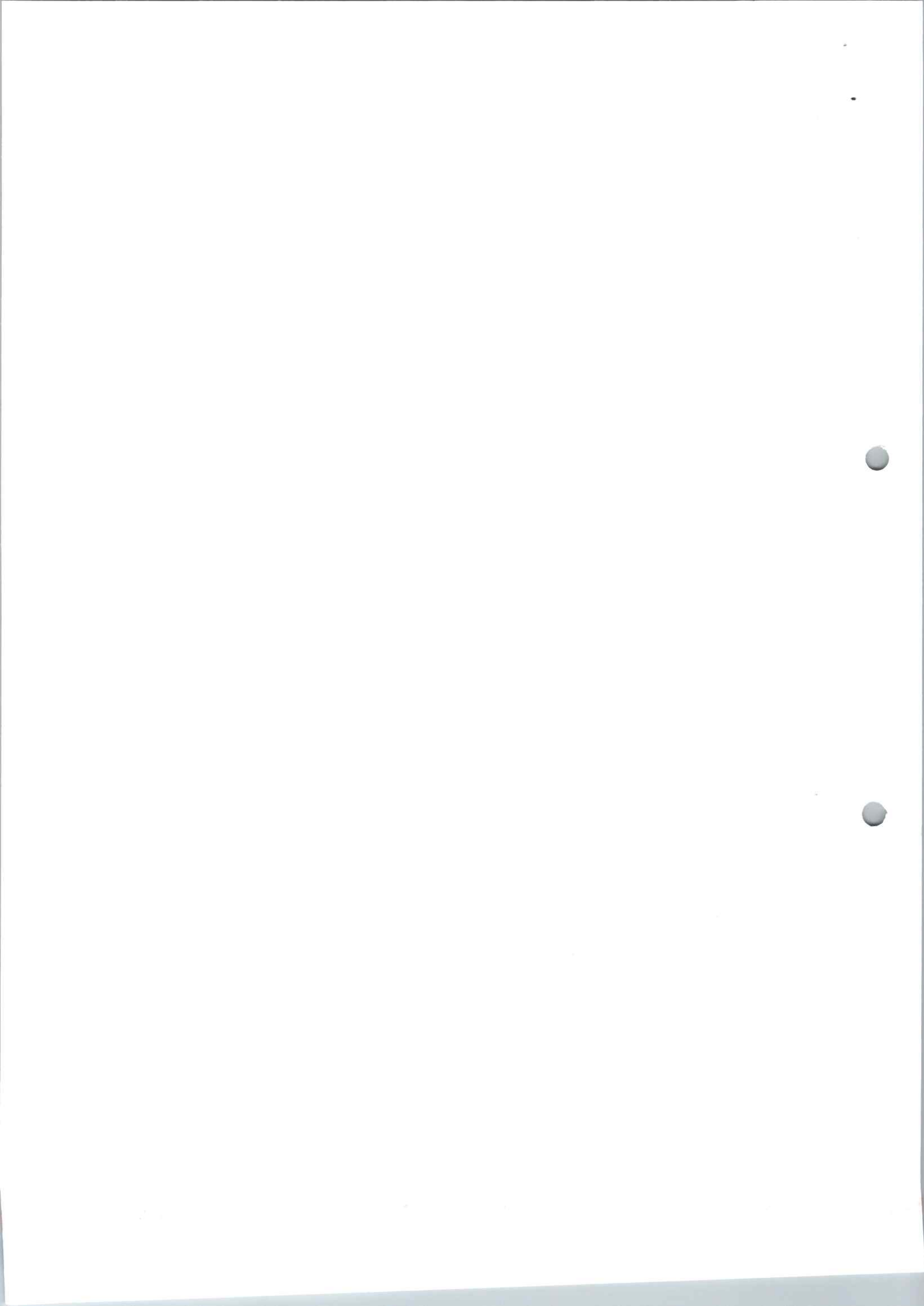
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<b>IP No:</b> IP11-00056713	<b>Admission Date:</b> 18-06-2026

absent, clear leak, vertex at -2 station. Labour progressed and fetal heart monitoring done. At 1.00am: PA: Uterus term size, 2-3 contractions /10'/30-35", cephalic lower pole, FHS +. PV: Cervix fully dilated, well effaced, vertex at +2 station, She progressed well and had a preterm vaginal delivery with RMLE done on 19.6.2026

**Procedure:**

PRE TERM TERM VAGINAL DELIVERY WITH RMLE DONE ON 19.6.2026

Conducted by: Dr. Aparnaa Panda  
Assisted by : Dr. Shreesha /Dr Chalak

Under aseptic precaution, after cervix fully dilated, with good uterine contractions, she was placed in lithotomy position.  
She was encouraged to bear down.  
At crowning of head RMLE given  
A live male baby delivered on 19.6.2026 at 1.10am with birth weight 2.38kgs.  
Liquor clear and adequate.  
Baby cried immediately after birth.  
Delayed cord clamping done, Baby handed over to paediatrician.  
Inj. Carbetocin 100mcg IV given  
Placenta in situ  
Inj Syntocin 20 units added in IVF  
Manual removal of placenta done  
Placenta and membranes removed  
Placenta and membranes complete and healthy.  
RMLE sutured in layers.  
No PPH / tears.  
No maternal / neonatal injuries.  
She withstood the procedure well.

**Baby Details:**

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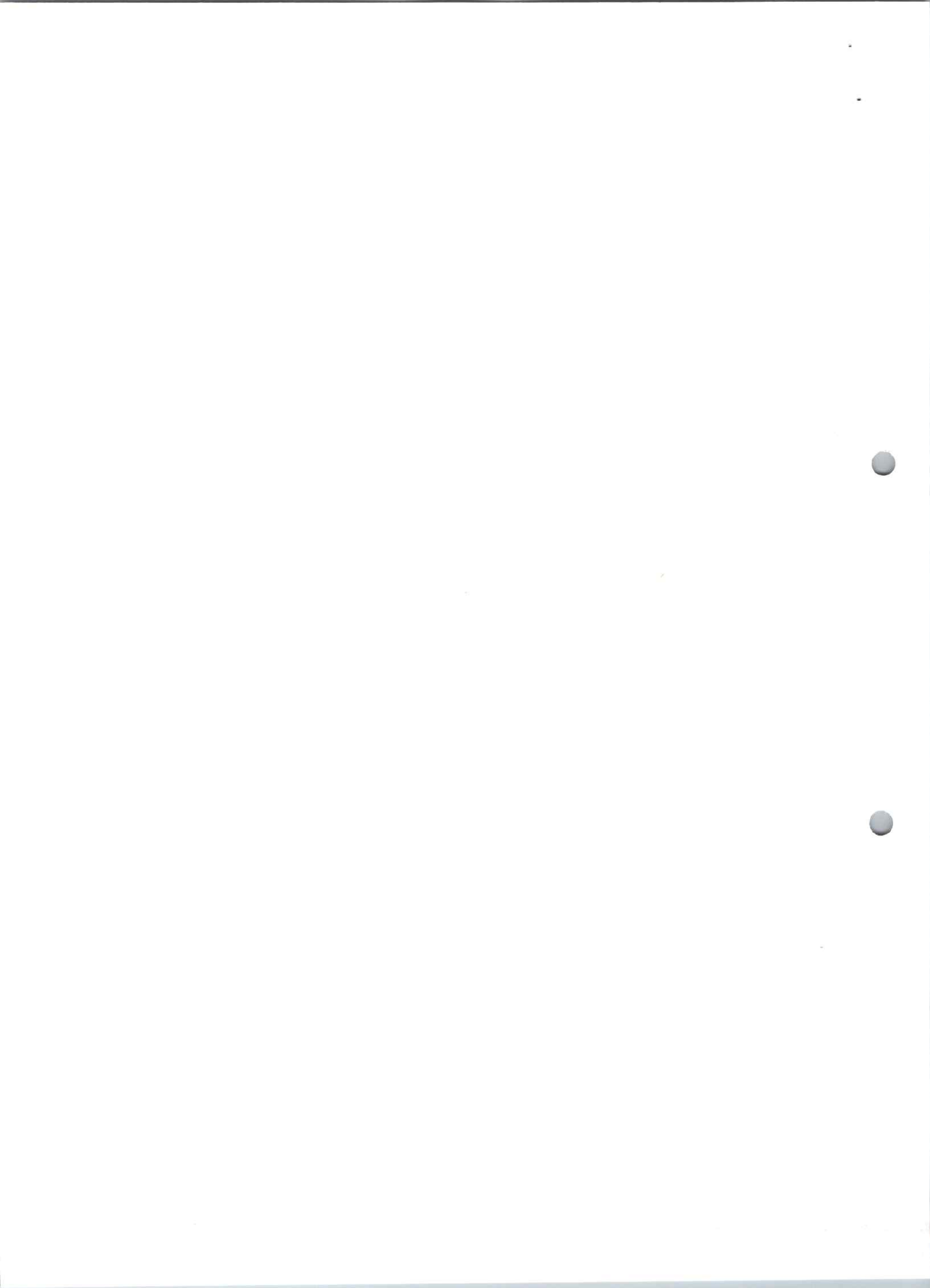
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<b>IP No:</b> IP11-00056713	<b>Admission Date:</b> 18-06-2026

Date: 19.6.2026

Time: 1.10am

Sex: Male

Weight: 2.38kgs

**Post-delivery Notes:**

She was closely monitored for post partum hemorrhage. Uterus well contracted and retracted. Breast feeding initiated. She was encouraged for spontaneous voiding. Vitals were stable, patient ambulated and was shifted to room. Dietary advice given. Her postpartum period following that was uneventful. She was treated with supportive measures. FBS, PPBS done, reports enclosed

**Treatment given:**

IV fluids / Inj Oxytocin / Inj Taxim / Inj Carbetocin / Justin suppository / Inj Pan / Inj Perinorm / Tab Misoprostol / Inj Methergin/ Inj Clexane

**Condition at discharge:** Her general condition was satisfactory, her vitals stable, and she is haemodynamically stable and she is being discharged in stable state with following advice.

**ADVICE ON DISCHARGE**

Tab. Taxim O 200mg 1-0-1 x 05 days (after food)

Tab.Lyser D 2-2-2 x 15 days

Tab.Pantodac DSR 1-0-1 x 15 days (before food)

Cap.Lactare 2-2-2 x 15 days (if milk secretion is less)

Continue iron and calcium medication after 2 weeks

Perineal wound care with Metrogyl P ointment and 2% Lox Jelly for local application

Avoid lifting heavy weight

Diabetic diet with plenty of oral fluids

Sugar monitoring at home

Continue Diabetic medications as per diabetologist and review with

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endocrinologist for diabetic management

Review after 10 days with Dr Aparnaa Panda with prior appointment.

Review after 06 weeks with Dr.Rajalakshmi (Physiotherapist) for postnatal exercises with prior appointment.

Review SOS in case of fever / pain abdomen / headache / blurring of vision / giddiness / loss of consciousness / epigastric pain / vomiting / BP >140/90mmHg / Difficulty in breathing or breathlessness / Leg swelling / Excessive PV bleeding / Breast pain or lump please report to hospital on 18002122.

“The content of the patient discharge summary/ medication/ food & drug interaction/ care to be provided at home/ nutrition/ immunization and safe parenting/ when and how to obtain emergency care etc also have been explained by doctor”.

Consultant Name & signature

**Dr. APARNA PANDA**

MBBS, MD (OBG)

CONSULTANT GYNECOLOGIST & OBSTETRICIAN

Reg.No:

Summary explained and understood by me

Registrar Name & Signature

Signature of patient and Attendant

Summary explained and handed over by  
Nurse Name & Signature:

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