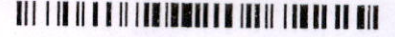


ADMISSION SHEET

Registration Details :



Admission No : IP5-00173703 Admit Date : 12-May-2026 Admit Time : 01:59 AM UHID : BAH-00567613

Patient Details :

Patient Name : Mrs SIMRAH FAHEEM Age : 26 Y 5 M 4 D  
Guardian : Mr MOHAMMED HUSSAIN DOB : 08-12-1999  
Gender : Female Religion :  
Occupation : Martial Status : Married  
Address (H) : H NO. 8-3-318/A,VIJAY PRAKASH NAGAR Phone No : 7675056464/ 9885511998  
Yellareddy Guda Hyderabad Telangana INDIA E-mail : na123@gmail.com  
500073

Admission Details :

Bed Type : SHARED WARD Bed No : SW 414 Ward Name : 4F-BIRTHING CENTRE  
Room No : SW 414 Admission Type : First Visit

Contact Details :

Name : Mr MOHAMMED HUSSAIN Relationship : Husband  
Contact Address : H NO. 8-3-318/A,VIJAY PRAKASH NAGAR Phone No : 7675056464 / 9885511998  
Yellareddy Guda Hyderabad Telangana INDIA  
500073

  
Signature

Doctor Details :

Doctor Name : Dr. NISHANTH REDDY INAVOLU Specialisation : DIABETOLOGY  
Referral Doctor : Self Phone No :  
Co-Consultant :

Payment Details :

Payment Mode : Cash Deposit Amount : 0.00  
Payor Name : SELFPAY

**ACTIVITY RECORD FOR BILLING**

Name : \_\_\_\_\_ BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU  
 UHID No. : \_\_\_\_\_ IP No. \_\_\_\_\_ t: \_\_\_\_\_ Dept : \_\_\_\_\_  
 Date of Admission: \_\_\_\_\_ Time : \_\_\_\_\_ Date of Discharge : \_\_\_\_\_ Time: \_\_\_\_\_  
 Room / Bed No : \_\_\_\_\_ Ward : \_\_\_\_\_ Suggested Billable bed type : \_\_\_\_\_

**WARD TRANSFERS**

Date	Time	From	To	Signature of Nurse
12/5/26	4:30 pm	2th	336	Kauna

**Cross Consultation Visit**

	Doctors Name	Date	Order No.	Signature
1	Dr. Srinidharan	12/5/26	9604818	Srinidharan
2	N/A	12/5/26	9604812	Srinidharan
3				
4				
5				
6				
7				
8				
9				
10				

*Cross checked by Dr. Srinidharan*

# INVESTIGATIONS

Date	Investigations	Order No.	Signature
12/5/26	CRP, creatinine, urea	26048098	Poulabi
	Electrolytes, Bicarbonate		
	glycosylated Haemoglobin		
	(HBA1C) Blood		
	cue, urine cultures,		
Sensitivity, urine for			
	ketone bodies		
12/5/26	VBU7 — (1)	26048099	
12/5/26	URBS 1:35 <sup>AM</sup> 429 mg/dl	26048100	Swanda
12/5/26	URBS 2:40 <sup>AM</sup> 355 mg/dl	26048101	Swanda
12/5/26	URBS 3:40 <sup>AM</sup> 279 mg/dl	26048154	Swanda
12/5/26	URBS 4:40 <sup>AM</sup> 193 mg/dl	26048155	Swanda
12/5/26	URBS 5:40 <sup>AM</sup> 110 mg/dl	26048156	Swanda
12/5/26	URBS 6:40 <sup>AM</sup> 138 mg/dl	26048157	Swanda
<del>12/5/26</del>	<del>URBS 7:40<sup>AM</sup></del>		Swanda
12/5/26	Urine for ketone bodies	26048343	
12/5/26	Electrolytes, CBP,	26048139	Poulabi
	Bicarbonate, GAD Antibodies		
	C-peptide GAU.		Swanda
12/5/26	GURBS 9am 348 mg/dl	Self	Swanda
12/5/26	GURBS 11am 201 mg/dl	Self	Swanda
12/5/26	GURBS 1pm 78 mg/dl	Self	Swanda
12/5/26	GURBS 3:30pm 290 mg/dl	Self	Swanda





**ACTIVITY RECORD FOR BILLING**


Name : \_\_\_\_\_

UHID No. : \_\_\_\_\_ IP No. : \_\_\_\_\_ t: \_\_\_\_\_ Dept : \_\_\_\_\_

Date of Admission: \_\_\_\_\_ Discharge : \_\_\_\_\_ Time: \_\_\_\_\_

Room / Bed No : \_\_\_\_\_ Ward : \_\_\_\_\_ Suggested Billable bed type : \_\_\_\_\_

BAH-00567613 IP5-00173703  
Mrs SIMRAH FAHEEM  
08-12-1999 26 Y 5 M 4 D (F)  
Dr. NISHANTH REDDY INAVOLU



**WARD TRANSFERS**

Date	Time	From	To	Signature of Nurse

**Cross Consultation Visit**

	Doctors Name	Date	Order No.	Signature
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				







BAH-00567613 IP5-00173703  
Mrs SIMRAH FAHEEM  
08-12-1999 26 Y 5 M 4 D (F)  
Dr. NISHANTH REDDY INAVOLU



# IP ADMISSION SHEET FOR OBSTETRICS

## Presenting Complaints

Came c/o High blood sugars

Obstetric Formula: G3A2

Obstetric History:

I:- 2023 / Spont Conception

MELIC @ 12wks

Present Pregnancy Record: in v/o

Atrioventricular septal defect to baby

II:- May 2025: Spont miscarriage @ 8 weeks

## RISK FACTORS:

III:- PP: Spont Conception Booked @ 12wks.

Height: 155 cm

Weight: 50 kg

Allergies: Nil

Breast:  Normal  Abnormal

General Examination:

Consciousness: fair

Icterus: No

Temp: Afebrile

BP: 110/76 (84)

CVS: -

Liver/Spleen: -

Pallor: No

Edema: No

PR: 88/min

DTR: -

RS: -

Urine Output: -

SpO2: 100%

LMP: 2/1/26

EDD: 20/10/26.

Corrected EDD:

GA:

Menstrual History: Regular:  Yes  No

## Obstetric Examination

Fundal Height: ut ~ 16-18wks

Ut. Activity:  Relaxed  Mild  Mod  Severe

Liquor:  Adequate  Oligo  Poly

PP:  Cephalic  Breech  Others \_\_\_\_\_

Head Fifths Palpable: \_\_\_\_\_

FHS:  Normal  Tachy  Brady  Absent

## Per Speculum Examination

Draining:  Present  Absent  Bleeding

Colour of Liquor:  Clear  Meconium  Blood Stained

## Vaginal Examination

Cervix:  Long  Partially effaced  Effaced

Os: Closed \_\_\_\_\_ Dilated \_\_\_\_\_

Membranes:  Present  Absent

Liquor:  Clear  Meconium  Blood Stained

Presenting Part:  Vertex  Breech  Others

Sutton:  -3  -2  -1  0  +1  +2

Pelvis:  Adequate  Doubtful

## DIAGNOSIS

G3A2 / 17<sup>+2</sup> wks / @ Over diabetes Severe Hyperglycemia



Family History: Nil	Surgical History: Nil
Medical History: Nil	Medication History: T. Iron / Calcium / Ecosprin 150mg
Plan of Care: Admission. strict BP / RR / SpO <sub>2</sub> / RR / temp / SpO <sub>2</sub> monitoring Condition of severe Hyperglycemia & overt diabetes ⇒ send CRP / ATE / urea / RFT / HbA1C / NBG ⇒ Hydration & IV fluids IV fluid NS 1 litre bolus to be given ⇒ To Consider insulin infusion after K <sup>+</sup> levels ⇒ Hourly ABGS monitoring ⇒ inform doc.	Investigations: Otrve 13/4/26 :- 12+3 wks. Downs Syndrome screen negative TT8 - 1 in 956 TT3 - 1 in 126 uterine artery doppler Screen +ve for PE 2/5/26 - 16+5 wks Early tiffa (2)

Doctor Name: Dr. G. Sonika

Signature: *G. Sonika*

Date & Time: 12/5/26; 1:30 AM

Consultant Name: Dr. NISHANTH

Signature: .....

Date & Time: .....

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



## DEFICIENCY CHECK LIST OF CASE SHEET

Sl.No.	List of Records	No. of Pages	Legibility	Completeness	Remarks
1	Admission sheet	1			
2	Discharge Summary	1			
3	Nursing Initial assessment	1			
4	Patient Transfer form	2			
5	In-patient Medical record	2			
6	Doctors progress sheets	8			
7	Nursing plan of care and handover sheets	4			
8	Consultation sheet				
9	General consent for treatment	1			
10	Consent for Surgery				
11	Consent for blood transfusion				
12	Consent for chemotherapy				
13	Consent for high risk				
14	Consent for Restraint				
15	LAMA consent				
16	Consent for special procedure / Sedation				
17	Consent for Formula feed				
18	Consent for MTP				
19	Consent for Radiological Investigations				
20	Consent for HIV test				
21	Anaesthesia notes (Pre Anaesthesia & post)				
22	Neonatal Admission/Delivery/Physical Exam				
23	Medication Reconciliation	1			
24	Emergency Triage record				
25	Pre operative check list				
26	Surgical safety checklist				
27	Operation Theatre notes				
28	Nurses clinical Presentation				
29	TPR & BP chart	3			
30	Intake and Out take chart (fluid chart)	2			
31	Drug chart (Regular Prescription)	1			
32	Investigation Values (result sheet)	1			
33	Nebulization chart				
34	Nutritional review chart	1			
35	Intensive care unit (ICU Charts)				
36	Consent for Admission in PICU / NICU				
37	The Humpty dumpty scale				
38	Braden Q Scale				
39	Bed side check list				
40	PICU bed formula Dilution feeds				
41	Gastro monitoring chart	1			
42	Rch ED doctors note	1			
43	BP Monitoring chart	10			
44	RBS monitoring chart				
<b>Total No. of Pages</b>		<b>40</b>			

Signature and Date: *[Signature]* 13/5/26



BirthRight  
Children's  
Hospital

## DEFICIENCY & CASE SHEET

### ERROR LOG

LOCATION : OT / Birthing Centre / BirthRight Premium / 3rd Floor (Zone A,B,C) / NICU / PICU /  
2nd Floor Ward / Oncology / 1st Floor Wards.

OBSERVATION :

DATE :

SIGNATURE OF MRD INCHARGE / EXECUTIVE

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<del>12/1/26</del>		
9 AM	C/O/w Dr Bhargavi	
	BP: 117/76 (84) PR: 88 ; SpO2: 100%	
	→ Continue IV fluids Normal saline	
1:30 AM - 429		
	→ Trace K <sup>+</sup> & plan for insulin infusion	
	→ Strict vitals monitoring	
	VBG - PH - 7.4	C/Sonika
	PCO2 - 35.7	Dr G Sonika
	PO2 - 36	
	K - 3.1	
	Ca - 1.1	
<del>12/1/26</del>		BP: 110/73
2:30 AM →	Serum repeat GRBS - 355	PR: 87/min Afebrile
<del>12/1/26</del>		
3 AM →	Serum K - 3.9 →	50 units regular insulin in 50 ml NS
	wt: 50 kg GRBS 355	5 ml bolus given then
		4 ml/hr started infusion
		NB Sundar (606244)

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/26		
3:30 AM	GRBS - 200 mg ldl.	Insulin infusion on flow
	BP: 70/42 (50)	#
	PR: 90/min	<u>Adv</u>
	SpO2: 100%	
	Temp: 97.4	Continue insulin
	P/A: ut relaxed.	infusion
	FH good	Strict hourly vitals monitoring
		u/o self void measure
		→ Strict vitals monitoring
	<u>labs</u>	
	CRP-5	→ inform doc if
	Urea 4	GRBS < 20mg ldl
	Creat 0.5	#
	Sr Bicarb - 17	→ inform doc
		A. Sonika
		Dr. Sonika
		NB
		Sumande
		(606244)



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## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<del>12/5/26</del>	4:30 AM → CRBS - 193 mg/dl	
	5:30 AM → CRBS - 110 mg/dl	
<del>12/5/26</del> 5:30 AM	CRBS - 110 mg/dl	
<div style="border: 1px solid black; padding: 5px; width: fit-content;"> <p>Voided 480ml urine (2 litre NS given)</p> </div>		<p>→ Stop insulin infusion</p> <p>→ Continue same treatment</p> <p>Alsonke Dr Alsonke</p>
<del>12/5/26</del> 5:55 AM		Dr Nishanth order
	<p>→ 2nd hourly CRBS monitoring</p> <p>→ Diabetic diet</p> <p>→ Srij mustard 10 units Before breakfast (Stat)</p> <p>→ Anti GAD antibodies / C-peptide levels to send</p> <p>→ Continue IV hydration @ 150ml/hr</p> <p>→ infam 80s</p>	<p>Alsonke Dr Alsonke</p>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/26	pt reviewed	
6:30 AM	CRBS - 138mg/dl	Adv
	BP: 99/57 (66) PR: 94/min SpO2: 100% Temp: 98.0 F	40 NS completed 5th NS outflow (@ 180ml/hr)
	P/A: <del>video</del> soft	pt doesn't want foley's catheter
	E/E: NAB	Wants to self measure
	<u>labs sent</u>	→ Encourage oral fluids
	CBP / Sr Electrolytes	→ Diabetic diet
	Sr Bicarb	→ Dietitian review
	Anti GAD antibodies	→ Strict vitals monitoring
	C-peptide levels	→ self void measure & inform
		→ Continue IV hydration @ 180ml/hr
		→ Axon review
	Celestis	→ inform 803

Dr. G. S. ...

XIB  
 Cuada  
 176249

BAH-00567613 IP5-00173703  
Mrs SIMRAH FAHEEM  
08-12-1999 26 Y 5 M 4 D (F)  
Dr. NISHANTH REDDY INAVOLU

Patient



3

Rainbow<sup>®</sup>  
Children's  
Hospital  
It takes a lot to treat the little.

BirthRight<sup>™</sup>  
BY RAINBOW HOSPITALS  
Your Right to a Safe Delivery

## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/26		
7:40 AM	Ujaya diagnostic	
	Ave profile labz	
	(11/5/26)	
	RBS - 457	
	TSH - 2.168	
	HIV / HbsAg / HCV / VDRL - NR	
	CBP - 12.1 / 6150 / 2.1 lakh	
	PCV - 37.6	


NB  
Sund  
606249

BAH-00567613  
 Mrs SIMRAH FAHEEM  
 08-12-1999  
 Dr. NISHANTH REDDY INAVOLU  
 IP5-00173703  
 26 Y 5 M 4 D  
 (F)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/26 7:30 AM	C/c/R - Axon Anesthesia Team (Dr. Nikita, Dr. Anusha)	
	G3 M2 / 17 weeks / Severe Hyperglycemia.	
	Initial CRBS → 429 mg/dl	→ IVF NSO @ 150ml/hr
	Initial HR - 80 /mt	→ Hourly sugar chart.
	② 2 AM BP - 117/76 mmHg	→ Insulin according to sliding scale.
	SpO2 - 100%	→ Input/output chart.
	VBG →	→ K <sup>+</sup> connection SOS.
	pH - 7.4	
	PCO2 - 35.7	→ Insulin infusion started
	PO2 - 36	↓ CRBS → 150 mg/dl → monitor vital
	K - 3.1	↓ infusion stopped. Inj. SOS.
	lact - 11	
	Sr. mea → 14	
	creat → 0.5.	
	Pre collapsibility checked → not collapsible.	
	→ Adequate IV fluids	
	V/c → HR - 101 /mt	
	B/p - 95/57 mmHg (66)	
	SpO2 → 100%	
	CVS - S1S2 @	
	RS - BAE @. No Cxpts	

Am  
Dr. Anusha

IP5-00173703  
 Patient BAH-00567613  
 Mrs SIMRAH FAHEEM  
 08-12-1993 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU  


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**PROGRESS NOTES AND DOCTOR'S ORDER**

Date & Time	Progress Notes	Doctor's Order
12/1/26		
9Am	G3A2 / 17 <sup>+</sup> 2 wks / overt DM c/ hyperglycaemia	
	labs	trace - HbA1c;
	CBL - 9.6 / 7.14K	COE, urine c/s
	(RCS) Plt - 2.1 lakh	Anti GAD; C-peptide levels
	Bicarbonate - 19	→ Diabetic diet
	K - 3.1	→ dietitian review
	P/A: ut relaxed PTH checked	→ 2nd hrly GBS monitor Inform Dr Nishanth
		→ IV fluids continue @ 125ml/hr.
	voided - 590ml @ 8:30Am	→ Strict vitals & 20% monitor hourly
	9Am - 378	→ Inform SOS,
	repeat @ 10:10Am GBS	C. Sonike Dr. K. Sonike
	COE Urine ketones 3+	
	glucose 4+	

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM (F)  
 08-12-1999 26 Y 5 M 4 D  
 Dr. NISHANTH REDDY INAVOLU

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/20 9:30 AM	C/E/T Dr. Nishanth	<p>Adv</p> <ul style="list-style-type: none"> <li>by Atrapid 10U &amp; now</li> <li>GRBS 2nd hly</li> <li>Inform doc</li> </ul>
		<p><i>[Signature]</i>          Dr. Sameer</p>
12/5/20 11 AM	GRBS-201 nylcl	
	Informed to Dr. Nishanth	<p>Adv</p> <ul style="list-style-type: none"> <li>nothing to be done now</li> <li>GRBS and hly</li> <li>Inform doc</li> </ul>
		<p><i>[Signature]</i>          Dr. Sameer</p>

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU

5.



**PROGRESS NOTES AND DOCTOR'S ORDER**

Date & Time	Progress Notes	Doctor's Order
12/1/26 11:10 AM	Pt comfortable.	Adv
	<p>O/E ac-fair            PR- 97/60            BP- 105/68 mmHg            SpO<sub>2</sub>- 99% on RA            P/A wt relaxed</p>	<p>- Strict Diabetic diet,            plenty of oral fluids            - GRBS and vitals inform</p>
	<p>Force <del>CUE</del> connects            Anti GAD, C-peptide level  <del>TFT</del>            CUE            urine ketones - 3+</p>	<p>Dr. Nishanth            - IV fluids @ 100ml/hr            - vitals fully            strict I/O charting            - PRR monitoring            - Inform</p>
	<p>Glucose - 47            insulin - 2-3</p>	<p>Dr. Amaree</p>
12/5/2026	C/S/B Dr. Simrathi	
1 PM	<p>Patient Reviewed            ✓ Counselled need for hospital stay, Regular Blood sugar monitoring (pre &amp; post meals), Nidd for insulin explained.            ✓ Fetal 2D ECHO (22-23 weeks)            ✓ can be shifted to Room</p>	<p>by Dr. Deepika</p>

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/20	C/S/B Dr. Nishanth	
1:25pm		
	- G <sub>3A2</sub> = 17 <sup>+</sup> w/CA	
	- Plus Overt Diabetes - De novo	
	Asymptomatic	
	MC r/c	
	Cr - 120	
	Pc - 90/min	
	Pr - 103/100 mm	
	HRA - 10.3d	
	NCT - 12d	
	K7 - 2d	
	Cr - 120	
	Pr - 103/100	
	- G <sub>2R2</sub> / 2nd day - Interm	
	- Persist p. urine in ketones - E 3pm - today	
	= =	
	- Anti GAD Ab } on report	
	- C-peptide levels }	
	- Sur. Pank/10m/110	
	- Electrolytes on 13/SR6	
	Dr. Nishanth	

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/1/20 3pm.	At comfortable o/e a-faci	<u>Adv</u> - Come down now - Diabetic diet.
	PR - 96 bpm BP - 106/62 mmHg (MAP 76) SpO <sub>2</sub> - 100% on RA P/A - ut relaxed FH (+)	plenty of oral feeds - vitalsaily - ECG charging - GRBS ahdaily - FHR monitoring yhdaily
	To send - electrolytes on B/L's - trace - Anti GAD ab's - C-peptide levels	- IV fluids @ 12ml/hr. - Inform GRBS values to Dr. Nishantha.
	GRBS - 290 mg/dl.	- Can be shifted to room.
	↓ Informed to Dr. Nishantha	<u>Adv</u> Dr. Paneev.
	<u>Adv</u> by Actrapid. 8U. SLI now	

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



**PROGRESS NOTES AND DOCTOR'S ORDER**

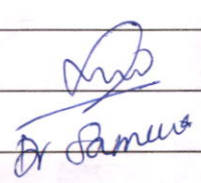
Date & Time	Progress Notes	Doctor's Order
12/5/26 7:40 PM	G3A2   17 + 2 weeks   over DM with Hyperglycemia Hypokalemic clo: sweating.	
	<u>OLF</u>	
	Ac-farg.	Adv
pre dinner-73	Bp- 111/75 mmHg PR- 93 Bpm	1) Diabetic Diet 2) plenty of oral hydration
urine ketones = Negative.	SPO <sub>2</sub> - 98% RA PIA- Ut ~ 18 weeks.	3) IVF @ 100ml/hr 4) GRBS 2nd hourly 5) I/O charting 6) FHR 4th hourly
5 SLF 13/5/26 at 6 AM	Trace anti-GAB Ab's C-peptide level	7) Drugs as charted 8) vitals 4th hourly
		<p style="text-align: center;"><del>Dr. Dny</del> Dr. Dny</p>
	C/D/w Dr. Nishanth Siga	
	Informed Pre-dinner 73 mg/dL to Dr. Nishanth Siga advised to give inj. Mixtard 15 units s/c stat & Inform GRBS at 10:00 PM.	
		<p style="text-align: center;"><del>Dr. Dny</del> Dr. Dny.</p>



BAH-00567613 IP5-00173/03  
 Mrs SIMRAH FAHEEM (F)  
 08-12-1999 26 Y 5 M 4 D  
 Dr. NISHANTH REDDY INAVOLU



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/12/26	G3A2   17+3   over DM c̄	Hyper Glycemia
8:30 AM	<p>At uncomfortable          had hypoglycemia episode in the night now better</p> <p>AC-<u>few</u>          PR-78gms          BP-100/55mmHg          (MAP 68)          SpO<sub>2</sub>-98% on RA          PA sat-180kPa          Relaxed</p>	<p><u>Adv</u></p> <ul style="list-style-type: none"> <li>- Strict Diabetic diet</li> <li>plenty of oral fluids</li> <li>- IVP @ 100ml/hr</li> <li>- vitals hourly</li> <li>- I/O counting</li> <li>(Self void measurement)</li> <li>- G12BS and hourly</li> <li>- PAE hourly</li> <li>inform AB</li> </ul>
labs today		
Na <sup>+</sup> -137		
K <sup>+</sup> -5.7		
Cl <sup>-</sup> -110		
I	8300ml	
O	4820ml	
		 Dr. Samudra

BAH-00567613 IP5-00173703  
 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/20 2:10 PM	c/s to Mr. Nishanth	
	- Pt. Reviewed	
	O/E - R/L	
	C - 12V	
	P - 93/m	
	R - 103/m	
	C - 100	
	R - 100	
	C - 100	
	R - 100	
	C - 100	
	R - 100	
	C - 100	
	R - 100	



### RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
12/5/26	1:35 AM	GORBS 429 mg/dl	-	Sunanda
12/5/26	2:45 AM	GORBS 355 mg/dl	-	Sunanda
12/5/26	3:40 AM	GORBS - 270 mg/dl	500 Insulin 4 units 50 units Atrapid	Sunanda
12/5/26	4:40 AM	GORBS - 193 mg/dl	500 Insulin 4.50 units 50 units Atrapid	Sunanda
12/5/26	5:40 AM	GORBS - 110 mg/dl	500 Insulin 5.00 units 50 units Atrapid	Sunanda
12/5/26	6:40 AM	GORBS 135 mg/dl	Stopped	Sunanda
12/5/26	9:00 AM	GRBS 245 mg/dl	Ins. Atrapid 14 units	Shubh
12/5/26	11:00 AM	GORBS 201 mg/dl	-	Shubh
12/5/26	1:00 PM	GORBS 75 mg/dl	-	Shubh
12/5/26	3 PM	GRBS 29 mg/dl	Ins. Atrapid 8 units	Kanner
12/5/26	5 PM	GRBS 131 mg/dl	-	Shilpa
12/5/26	7 PM	GRBS 73 mg/dl	15 units mixed	Shilpa
12/5	10 PM	GRBS 204 mg/dl	6 units Human Atrapid	Shilpa
13/5	1:31 AM	69 mg/dl	-	Shilpa
13/5	2:30 AM	211 mg/dl	-	Shilpa
13/5	4:30 AM	238 mg/dl	4 units Atrapid	Shilpa
13/5	6:30 AM	194 mg/dl	-	Shilpa
13/5	7:50 AM	166 mg/dl	15 units mixed	Shilpa
13/5	10 AM	325 mg/dl	8 units Atrapid	Shilpa
13/5	12 PM	74 mg/dl	-	Shilpa
13/5	12:30 PM	50 mg/dl	Sugar Water given	Shilpa
13/5	1 PM	90 mg/dl	-	Shilpa



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 Mrs SIMRAH FAHEEM  
 08-12-1999 26 Y 5 M 4 D (F)  
 Dr. NISHANTH REDDY INAVOLU



## RESULT SHEET

Date	12/5/26	12/5/26	13/5/26		
Time	2:17 Am	7 Am	6 am		
Hb		9.6			
PCV		30.6			
RBC		4.27			
WBC		7.14			
N/L					
Platelets		2.10			
CRP	5.0				
ESR					
PCT					
RBS					
Na	131	136	132		
K	3.9	3.1	3.7		
Cl	101	110	100		
Ca/Mg					
Phosphate					
Urea	14				
Creatinine	0.5				
ALP					
SGPT					
SGOT					
T.Bill/Conj					
T.Protein					
S.Albumin					
S.Globulin					
A/G Ratio					
Uric Acid					
S.Amylase					
Sr.Lipase					
Blood Lactate					
S.Cholesterol					
PT/INR					
APTT					
CSF Protein / Sugar					
Cells					
N/L Bicarbonate	17	19			

Date	12/5/26				
Time					
CUE - Alb					
CUE - Sugar	present +++				
CUE - Ketones	present ++				
CUE - PUS Cells	2-3				
CUE - RBC Cells					
CUE					
Epithelial Cells	1-2				
Stool Pus Cell					
OVA / Cyst					
Occult Blood	12/5/26 2/1/1 10.3				
HbAc					
Blood grouping (Oxix.)					

Culture and Sensitivities : .....

.....

.....

.....

Radiology :    USG : .....

                  X-Ray : .....

                  ECHO : .....

                  CT : .....

                  MRI : .....

                  Others (ECG, Contrast Studies etc.) : .....

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Mrs SIMRAH FAHEEM

08-12-1999 26 Y 5 M 4 D (F)

Dr. NISHANTH REDDY INAVOLU



## MEDICATION RECONCILIATION FORM

Drug Allergies: NICDA  Not known any Drug Allergies

Medication Reconciliation will be done at the time of admission and also whenever there is change in the treating team or shifting from one unit to another unit.

(Example: at the time of admission shifting from ICU to Ward, or Ward to ICUs)

Shifting From: ..... Shifted to: .....

S.No	MEDICATION NAME (GENERIC NAME CAPITAL LETTERS)	DOSE (mg, mcg)	ROUTE (PO, NG, SC, IV)	FREQUENCY	LAST DOSE Date / Time	ON ADMISSION / SHIFTING
1	T-IRON	1tab	PO	OD	11/5/26	<input type="checkbox"/> C <input checked="" type="checkbox"/> DC
2	T-CALCIUM	1tab	PO	OD	11/5/26	<input type="checkbox"/> C <input checked="" type="checkbox"/> DC
3	T-ECOSPIRIN	150mg	PO	OD	11/5/26	<input checked="" type="checkbox"/> C <input type="checkbox"/> DC
4						<input type="checkbox"/> C <input type="checkbox"/> DC
5						<input type="checkbox"/> C <input type="checkbox"/> DC
6						<input type="checkbox"/> C <input type="checkbox"/> DC
7						<input type="checkbox"/> C <input type="checkbox"/> DC
8						<input type="checkbox"/> C <input type="checkbox"/> DC
9						<input type="checkbox"/> C <input type="checkbox"/> DC
10						<input type="checkbox"/> C <input type="checkbox"/> DC

\* C - Continue, DC - Discontinue

### MEDICATION HISTORY RECORDED / VERIFIED BY

Doctor Name & Signature: Dr. GSONIKA ALONTE

Date & Time: 12/5/26 1:30 AM

Nurse Name & Signature: Swanda

Date & Time: 12/6/26 3 AM

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 Mrs SIMRAH FAHEEM (F)  
 08-12-1999 26 Y 5 M 4 D  
 Dr. NISHANTH REDDY INAVOLU



# DRUG CHART

Date of Admission: 12/1/26 Drug Allergies: N/A NICKA  Not known any Drug Allergies

## FOR THE SAFETY OF THE PATIENT

- GENERAL** - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.
- DOCTOR** - Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).  
 - Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.  
 - Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.  
 - Discontinue a drug by drawing a line **I** through it and a similar line through subsequent recording panels.  
 - The date and time of stopping the drug along with the doctors name and sign must be mentioned.  
 - Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.
- NURSES** - Nurses must follow strictly the FIVE RIGHTS before administration of medication.  
 1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time  
 - AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

### SOS / PRN (As Required Medication)

DRUG :				Date Time
Dose	Route	Frequency	Start Date	
Doctor's Signature			Valid Period	Pharm.
Additional Instructions:				

DRUG :				Date Time
Dose	Route	Frequency	Start Date	
Doctor's Signature			Valid Period	Pharm.
Additional Instructions:				

DRUG :				Date Time
Dose	Route	Frequency	Start Date	
Doctor's Signature			Valid Period	Pharm.
Additional Instructions:				

VERIFIED BY : Name ..... Signature .....

**REGULAR PRESCRIPTIONS**

Weight 50.895 Ward 085



<b>DRUG :</b>				Date Time																
Dose	Route	Frequency	Start Date																	
Name & Signature of the Doctor Starting the Drugs:																				
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				
<b>DRUG :</b> <u>Cap POTUCOR</u>				Date Time	<u>12/5</u>	<u>15/5</u>														
Dose	Route	Frequency	Start Date																	
<u>10ml</u>	<u>PO</u>	<u>TID</u>	<u>12/5/2015</u>																	
Name & Signature of the Doctor Starting the Drugs:																				
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				
<b>DRUG :</b>				Date Time																
Dose	Route	Frequency	Start Date																	
Name & Signature of the Doctor Starting the Drugs:																				
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				
<b>DRUG :</b>				Date Time																
Dose	Route	Frequency	Start Date																	
Name & Signature of the Doctor Starting the Drugs:																				
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				

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 Dr. NISHANTH REDDY INAVOLU

Weight 50 kgs Ward ORs



Date Time	Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.	
DRUG :	Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route	Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Start Date	Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor	Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:	Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

VARIABLE DOSE		Date Time	Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.	
DRUG :	Dose		Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route	Dose		Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Start Date	Dose		Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor	Dose		Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:	Dose		Dose		Dose		Dose		Dose	
	Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
12/05/20	7:30 AM	Inj MIXTARD	100	SC	Celantik	Suanda Tunna
12/5/20	10:00 AM	Inj ACTRAPID	14U	SLC	AS	Chaitan Yamuna
12/5/20	3pm	Inj ACTRAPID	8U	SLC	AS	Kamuna Anjali
12/5/20	8pm	Inj MIXTARD	15U	SLC	AS	Shikha Anjali
12/5/20	10pm	Inj ACTRAPID	8U	SLC	AS	Supriya Ananika
13/5/20	11:30AM	Inj ACTRAPID	9U	SLC	AS	Supriya Ananika
13/5/20	8AM	Inj MIXTARD	15U	SLC	AS	Supriya Shilpa

VERIFIED BY : Name Signature



I.V. FLUIDS CHART

Weight 50 kg Ward GBS

Date	Time	Composition of I.V. Fluid (If infusion, mention ml/hr = Mcg/kg/min. etc)	Route	Flow Rate ml/hr	Doctor Sign	Nurse Sign	Date of Stopping	Doctor Sign	Nurse Sign
12/5/26	3 AM	50 units REGULAR INSULIN in 50ml NS	IV	4ml/hr	Ceg	Poulab Tonna	12/5/26 5:30 AM	Abont	Suanda Tonna
		4ml Bolus AB 4ml/hr Hourly CRBS monitoring & titrate accordingly.							
12/05/26	2:00 AM	NORMAL SALINE	IV	500 ml	Cg	Suanda Tonna	12/05	Abont	Suanda Tonna
12/05/26	2:40 AM	NORMAL SALINE	PO	500 ml	Cg	Suanda Tonna	12/05	Abont	Suanda Tonna
12/05/26	3:20 AM	NORMAL SALINE	IV	500ml	Abont	Suanda Tonna	12/05	Abont	Suanda Tonna
12/05/26	4 AM	NORMAL SALINE	IV	<del>1500</del> 500 ml	Abont	Suanda Tonna	12/5	Abont	Suanda Tonna
12/05/26	5:30 AM	NORMAL SALINE	IV	150 ml	Abont	Suanda Tonna	12/5	Abont	Suanda Tonna
12/5/26	9:25 AM	NORMAL SALINE	PO	150 ml	Abont	Suanda Yamina	12/5/26 12:00 PM	Abont	Suanda Yamina
12/5/26	12:35 PM	NORMAL SALINE	IV	150ml	Abont	Suanda Yamina			

Signature

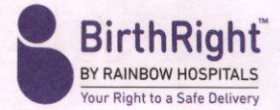
VERIFIED BY: Name

BAH-00567613 IP5-00173703

Mrs SIMRAH FAHEEM

08-12-1999 26 Y 5 M 4 D (F)

Dr. NISHANTH REDDY INAVOLU



# Early Warning Observation Score Chart - Obstetrics

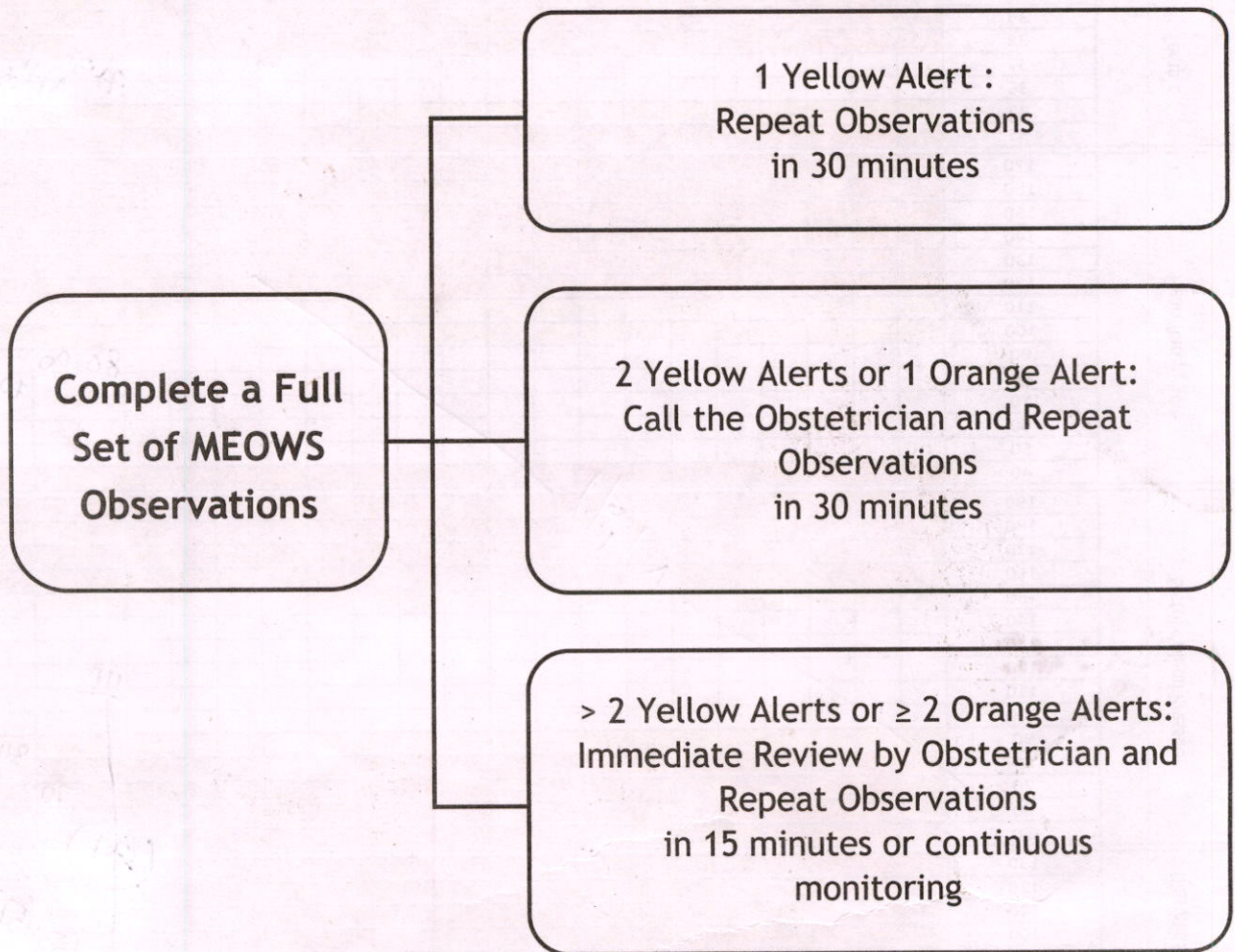
CONTACT DOCTOR FOR EARLY INTERVENTION IF PATIENT TRIGGERS ONE ORANGE OR TWO YELLOW SCORES AT ANY ONE TIME

12/05/20

		Date	8	9	10	11	12	1	2	3	4	5	6	7	8	9	10	11	12	1	2	3	4	5	6	7	
		Time																									
RESP (write rate in corresp. box)	> 30																										
	21 - 30																										
	11 - 20																										
	0 - 10																										
Saturations	94 - 100 %																										
	< 94 %																										
Administered O <sub>2</sub> (L/min.)																											
Temp °C	40																										
	39																										
	38																										
	37																										
	36																										
	35																										
	< 35																										
Heart Rate	170																										
	160																										
	150																										
	140																										
	130																										
	120																										
	110																										
	100																										
	90																										
	80																										
	70																										
	60																										
	50																										
40																											
Systolic Blood Pressure	190																										
	180																										
	170																										
	160																										
	150																										
	140																										
	130																										
	120																										
	110																										
	100																										
	90																										
	80																										
	70																										
60																											
50																											
Diastolic Blood Pressure	130																										
	120																										
	110																										
	100																										
	90																										
	80																										
	70																										
	60																										
	50																										
	40																										
	NEURO RESPONSE [✓]	Alert																									
		Voice																									
		Pain																									
Unresponsive																											
URINE mls / hour	> 30																										
	< 30																										
Proteinuria	Protein ++																										
	Protein > ++																										
Lochia	Normal																										
	Heavy / Foul																										
Liquor	Clear / Pink																										
	Green																										
TOTAL YELLOW SCORES																											
TOTAL ORANGE SCORES																											
Nurse Initial																											

Handwritten notes and signatures at the bottom right of the chart, including names like 'S. Srinivas' and 'S. Srinivas'.

## Obstetrics and Gynaecology Early Warning Signs



\* The Modified Early Warning Score (MEOWS)



12/5/20

FHR

9Pm - 145b/m - 168b/m

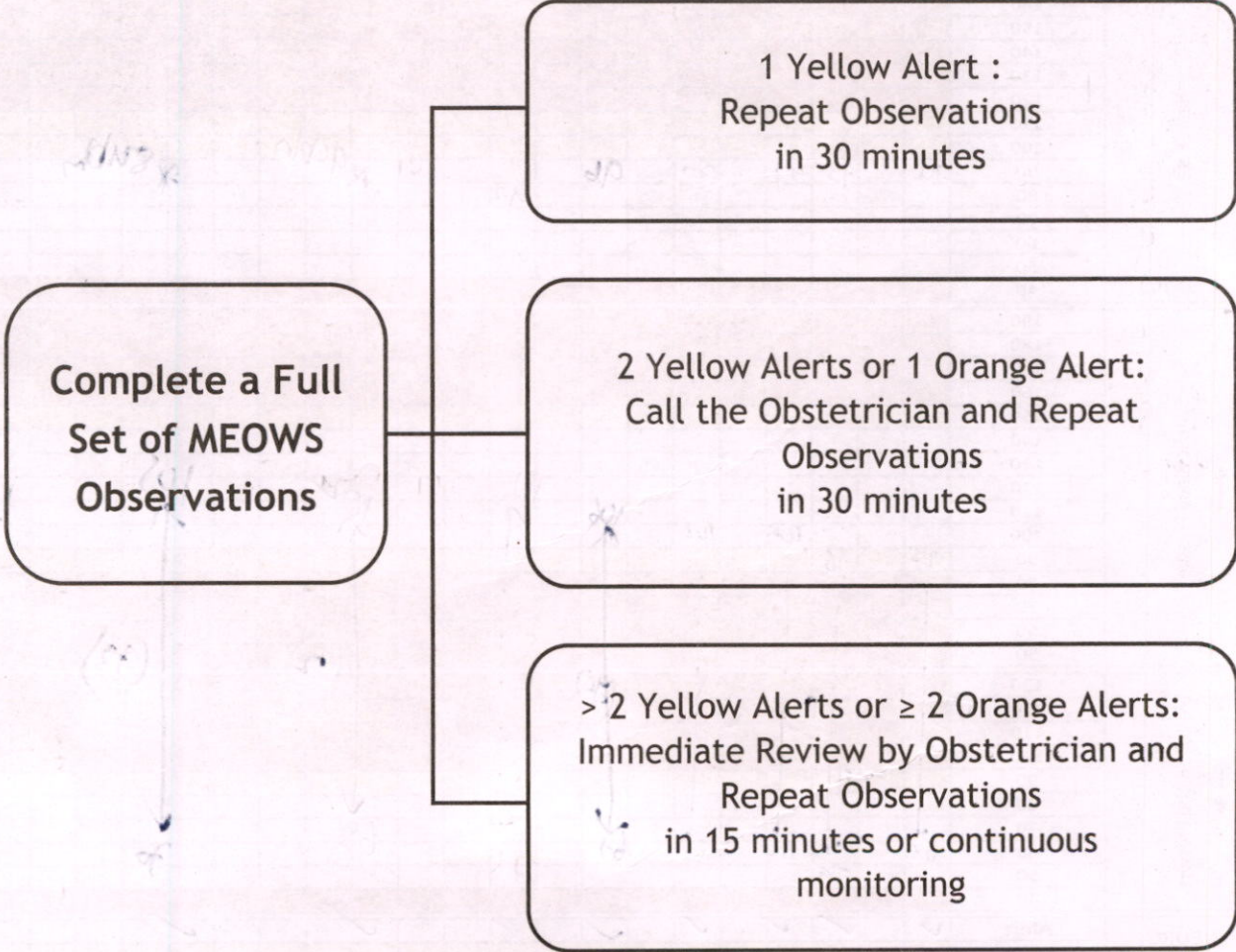
1Am - 148b/m - 165b/m

3Am - 145b/m - 168b/m

7Am - 148b/m - 160b/m

11Am - 155b/m - 156b/m

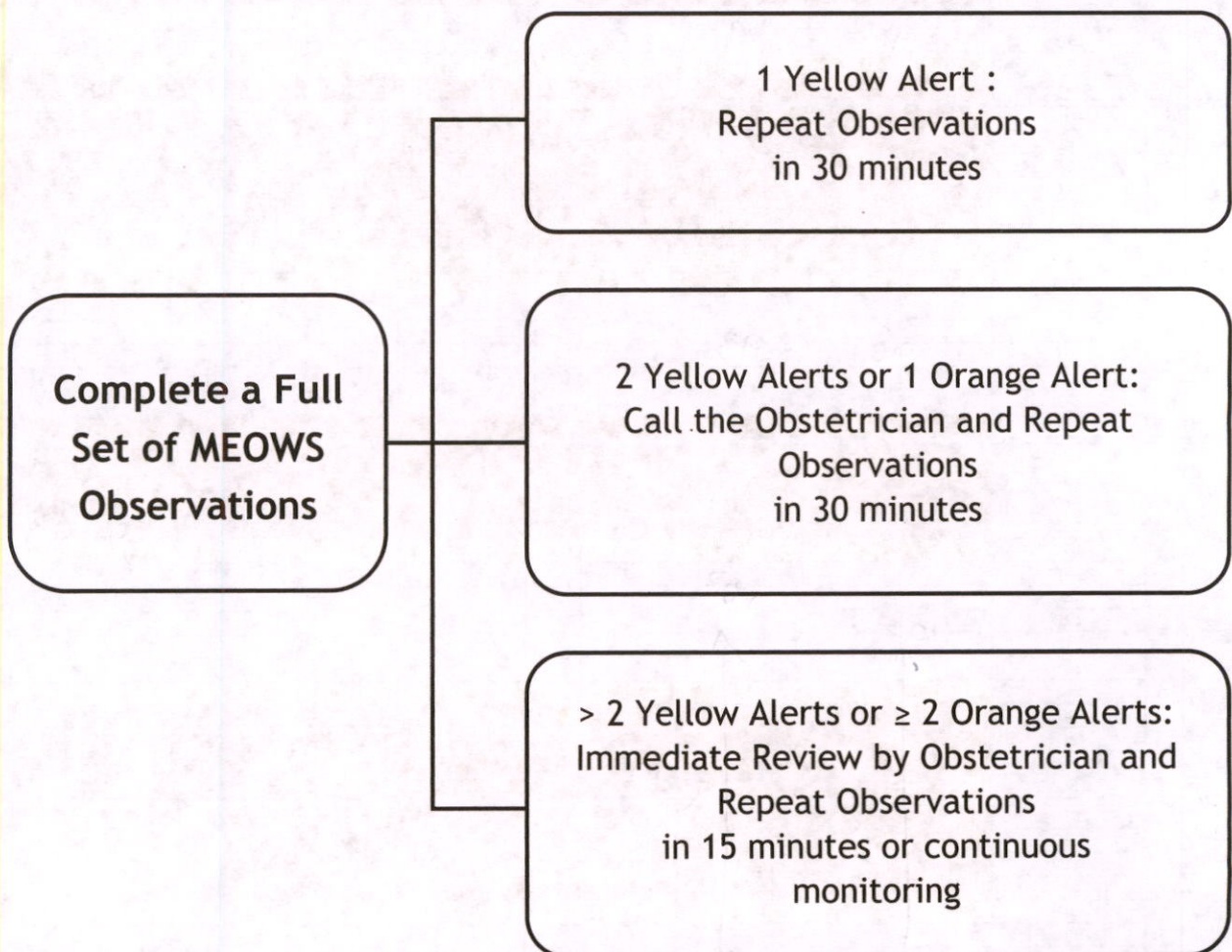
**Obstetrics and Gynaecology  
Early Warning Signs**



\* The Modified Early Warning Score (MEOWS)



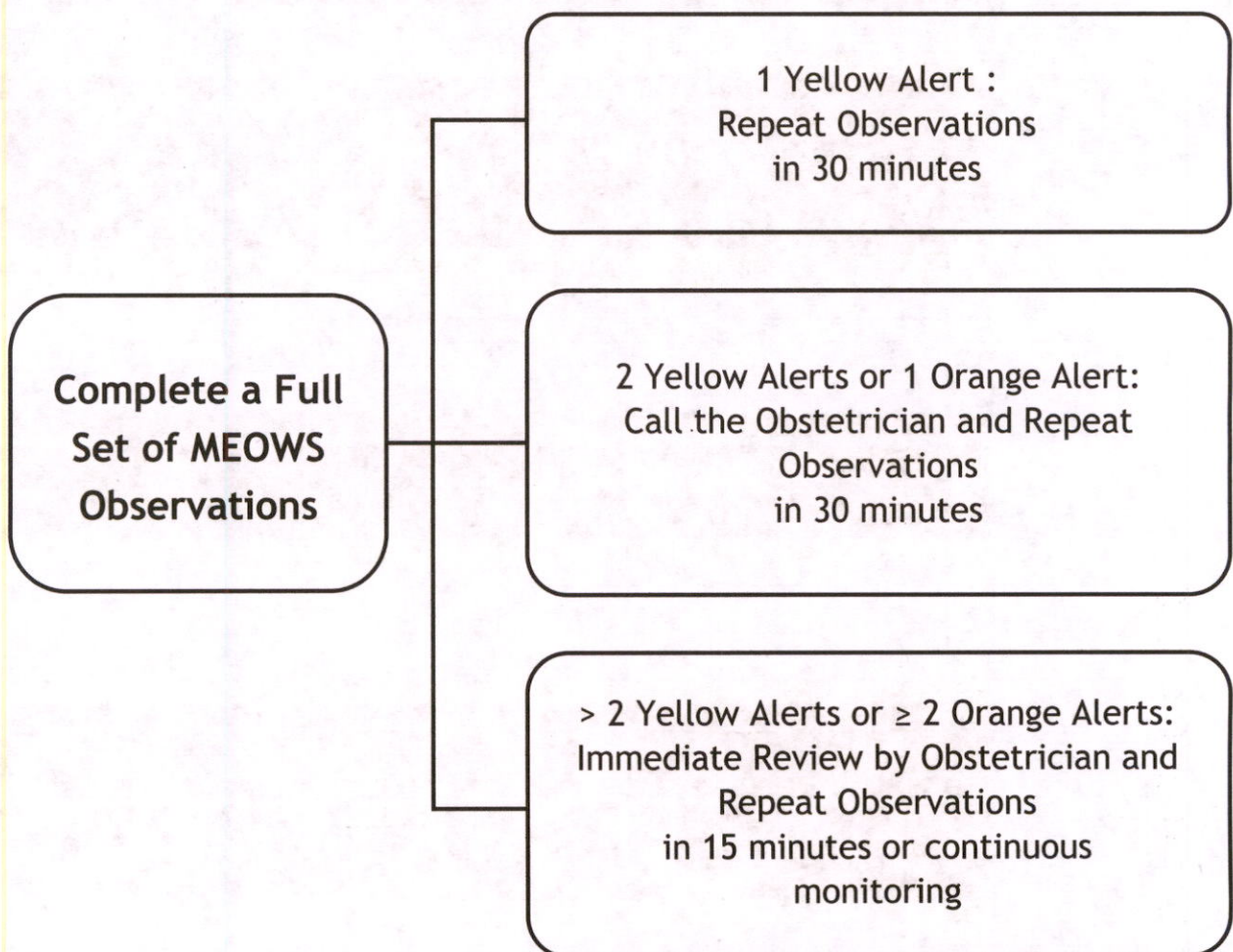
## Obstetrics and Gynaecology Early Warning Signs



\* The Modified Early Warning Score (MEOWS)



## Obstetrics and Gynaecology Early Warning Signs



\* The Modified Early Warning Score (MEOWS)



# FLUID CHART

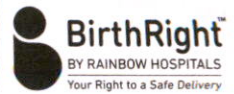
Sheet No. : .....

- All measurements in ml.
- Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
			<b>Total Intake :</b>			<b>Total Output :</b>						
	08:00 am											
	09:00 am											
	10:00 am											
	11:00 am											
	12:00 pm											
	01:00 pm											
			<b>Total Intake :</b>			<b>Total Output :</b>						
	02:00 pm											
	03:00 pm											
	04:00 pm											
	05:00 pm											
	06:00 pm											
	07:00 pm											
			<b>Total Intake :</b>			<b>Total Output :</b>						
	08:00 pm											
	09:00 pm											
	10:00 pm											
	11:00 pm											
	12:00 am											
	01:00 am											
			<b>Total Intake :</b>			<b>Total Output :</b>						
	02:00 am	NS		100ml						✓	0	Poulabi
	03:00 am	NS		50ml							0	Poulabi
	04:00 am	NS		250ml							0	Poulabi
	05:00 am	NS		150ml						480 ml	0	Poulabi
	06:00 am	NS		150ml							0	Swade
	07:00 am	NS		150ml							0	Swade
			<b>Total Intake :</b>			<b>Total Output :</b>						
			NS - 2100ml								passed.	
<b>Total 24 hrs. Intake</b>		NS - 2100ml										
<b>Total 24 hrs. Output</b>		U -										



# FLUID CHART

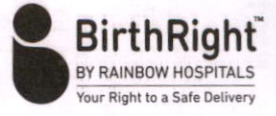


Sheet No. : ..... 2 .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse		
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage			Urine	
			Mouth	I.V	N.G								
12/5/26	08:00 am		Tea	NS 150ml						50ml	0	Kam	
	09:00 am			NS 150ml							0	Kam	
	10:00 am			NS 150ml							0	Kam	
	11:00 am			NS 150ml		MP				50ml	0	Yamina	
	12:00 pm			NS 150ml							0	Yama	
	01:00 pm			NS 150ml						50ml	0	Yama	
<b>Total Intake :</b>			200ml			900ml			<b>Total Output :</b>				
	02:00 pm	NS		NS 150ml							0	Kam	
	03:00 pm	NS	H <sub>2</sub> O	NS 150ml							0	Kam	
	04:00 pm	NS		NS 150ml						60ml	0	Kam	
	05:00 pm	NS	Soup 100ml	NS 100ml		MP					0	Shin	
	06:00 pm	NS		NS 100ml							0	Shin	
	07:00 pm	NS		NS 100ml							0	Shin	
<b>Total Intake :</b>			0 - Total Taken 750ml			<b>Total Output :</b> U-600 ml							
	08:00 pm	NS		NS 100ml						70ml	0		
	09:00 pm	NS	water 100ml	NS 100ml							0		
	10:00 pm	NS		NS 100ml		MP				40ml	0	Shin	
	11:00 pm	NS		NS 100ml							0		
	12:00 am	NS	water 100ml	NS 100ml							0		
	01:00 am	DNS		NS 250ml							0		
<b>Total Intake :</b>						<b>Total Output :</b> U-1100ml							
	02:00 am	NS		NS 100ml						50ml	0		
	03:00 am	NS	water 100ml	NS 100ml							0		
	04:00 am	NS		NS 100ml		MP					0	Supai	
	05:00 am	NS		NS 100ml							0		
	06:00 am	NS	water 100ml	NS 100ml							0		
	07:00 am	NS		NS 100ml						50ml	0		
<b>Total Intake :</b>						<b>Total Output :</b> U-1000ml							
<b>Total 24 hrs. Intake</b>		3,300 ml			<b>Total 24 hrs. Output</b>		U-4820ml						

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 Mrs SIMRAH FAHEEM  
 06-12-1999      26 Y 1 M 4 D  
 Dr. NISHANTH REDDY INAVOLU



# FLUID CHART

Sheet No. : .....

13/5/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine			
13/5	08:00 am	N	100ml				I				0	Shily	
	09:00 am	N	100ml						400ml		0	Shily	
	10:00 am		100ml				NP				0	Shily	
	11:00 am	S	100ml						-		0	Shily	
	12:00 pm	S	100ml				I				0	Shily	
	01:00 pm		100ml						500ml		0	Shily	
<b>Total Intake :</b>			100ml 600ml			<b>Total Output :</b> 0 - 910ml - 0							
	02:00 pm												
	03:00 pm												
	04:00 pm												
	05:00 pm												
	06:00 pm												
	07:00 pm												
<b>Total Intake :</b>						<b>Total Output :</b>							
	08:00 pm												
	09:00 pm												
	10:00 pm												
	11:00 pm												
	12:00 am												
	01:00 am												
<b>Total Intake :</b>						<b>Total Output :</b>							
	02:00 am												
	03:00 am												
	04:00 am												
	05:00 am												
	06:00 am												
	07:00 am												
<b>Total Intake :</b>						<b>Total Output :</b>							

**Total 24 hrs. Intake**

**Total 24 hrs. Output**

Patient Sticker

# FLUID CHART



Sheet No. : .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

		Intake				Output					IV Site Thrombophlebitis Score	Sign. Nurse	
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine			
			Mouth	I.V	N.G								
	08:00 am												
	09:00 am												
	10:00 am												
	11:00 am												
	12:00 pm												
	01:00 pm												
<b>Total Intake :</b>						<b>Total Output :</b>							
	02:00 pm												
	03:00 pm												
	04:00 pm												
	05:00 pm												
	06:00 pm												
	07:00 pm												
<b>Total Intake :</b>						<b>Total Output :</b>							
	08:00 pm												
	09:00 pm												
	10:00 pm												
	11:00 pm												
	12:00 am												
	01:00 am												
<b>Total Intake :</b>						<b>Total Output :</b>							
	02:00 am												
	03:00 am												
	04:00 am												
	05:00 am												
	06:00 am												
	07:00 am												
<b>Total Intake :</b>						<b>Total Output :</b>							

**Total 24 hrs. Intake**

**Total 24 hrs. Output**