

ANC-00010586
Mrs DEEPIKA
08-03-1989
Dr. NANDINI L

IP28-00004453

37 Y 2 M 17 D (F)



DISCHARGE TRACKING SHEET


CONSULTANT NAME: DR.

ACTIVITY	IN TIME	OUT TIME	REMARKS	<To be filled by Admin>
Activity Sheet updated by Nursing				
Activity Sheet updated by Pharmacy		7:14 Am	<i>[Signature]</i>	

ACTIVITY RECORD FOR BILLING



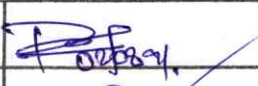
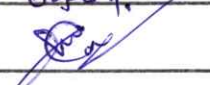
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 Dr. NANDINI L

UHII  No: Consultant: Dept: 34722

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
24/5/26	9.20pm	BDR	M Floor	
25/5/26	1:45AM	M14	WR	
25/5/26	1pm	LDR	M Floor	DR

CROSS CONSULTATION VISIT

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

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
24/5/26	CTG.	01	3919 ✓	<i>[Signature]</i>
25/5/26	CTG	01 (3)	3929 ✓	<i>[Signature]</i>
"	CTG	1	3925 ✓	<i>[Signature]</i>
25/5/26	CTG	3	3941 ✓	<i>[Signature]</i>
25/5/26	Infusion pump pre anaesthesia	1 lam	12pm 6706 ✓	<i>[Signature]</i>
25/5/26	Nutritional Assessment	1		<i>[Signature]</i>
25/5/26	IV placement	1	6707 ✓	<i>[Signature]</i>
			6707	

ANY OTHER INFORMATION:

No need assisted Normal delivery
Under epidural analgesia. ✓

Date: Time: Prepared By:

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
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IP ADMISSION SHEET FOR OBSTETRICS

Presenting Complaints

G₂P₁L₁, at 38⁺³ wks came i yo pain abd on 2 off.

LMP: 28/8/2025. EDD: 4/6/2026.
 Corrected EDD: GA: 38⁺³ wks.

Obstetric Formula:

PFM ⊕

Menstrual History: Regular: Yes No

Obstetric History:

Obstetric Examination

Fundal Height:

uterus term

Ut. Activity: Relaxed Mild Mod Severe

1-2/10-15"/10'

Present Pregnancy Record:

2017 G₁ - G₁ P₁ L₁ (Tambaram Newlife Hospital)

9 kg / vaginal / A2H. PP: Adequate Oligo Poly
 Cephalic Breech Others _____
 Head/Fifths Palpable: 3/5th palpable

RISK FACTORS:

G₂ P₁ Spontaneous Conception

FHS: Normal Tachy Brady Absent

Booked & Immunised.
 was on T. Ecospirin 75mg oot stopped before 36 wks.
 Anaemia - Corrected
 Anaemia - Corrected
 E oral Iron

Per Speculum Examination

Draining: Present Absent Bleeding

Colour of Liquor: Clear Meconium Blood Stained

Vaginal Examination

Cervix: 1cm Long Partially effaced Effaced

Os: Closed _____ Dilated 2 cm dilated.

Height: 163 cm

Weight: 69.7 kg

Allergies: Nil

Breast: Normal Abnormal

General Examination:

Consciousness: Pallor: Nil

Icterus: Edema: Nil

Temp: PR:

BP: DTR:

CVS: RS

Liver/Spleen: Urine Output:

Membranes: Present Absent

Liquor: Clear Meconium Blood Stained

Presenting Part: Vertex Breech Others

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

Pelvis: Adequate Doubtful

DIAGNOSIS

G₂P₁L₁ / prev₁ vaginal delivery in Early Labour @ 38⁺³ wks. vacuum assisted



Family History: Parents - DM	Surgical History: _____
Medical History: _____	Medication History: T. Iron p/o 10D T. Calcium p/o 10D T. Magnesium p/o 10D T. Folic acid p/o 10D
Plan of Care: <ul style="list-style-type: none">- Admission- Part preparation- CTA 4th hourly- T. Misoprostol 50mg Per oral @ 1am- w/f Contractions- post induction CTA @ 2am- To send coagulation profile	Investigations: 10/5/26 FBS-84 PPBS-116 Hb-11.7 Plt-2.37 HIV I & II HbsAg VDRL Hev NT + FTS - Negative E CG ECHO / (N) 20/5/2026 SLUG of 37 ⁺⁶ weeks. Cephalic Liquor - Normal Placenta - posterior

Doctor Name: _____
Signature: *Dr. Parithra*
Date & Time: 24/5/26 at 9pm

Consultant Name: *Dr. Nandhini*
Signature: _____
Date & Time: 24/5/26 at 9pm



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/5/26 11 P.M	8/3	<u>Dr. Nandhini.</u>
	Pain	Pt. Reviewed.
	e/o	pain abd on & off.
	vitals stable	P/A - uterus Acting (1-2/15"/10") Cephalic.
		FHR - good.
		P/v - Lx 1cm long.
		2 cm dilated.
		Vx @ - 3 station
		Adv
		- CTA @ 12 a.m.
		- T. Misoprostol 50mcg (P/o) @ 10 h.
		- post induction CTA
		- w/F Contractions.
		- CTA 2 nd hourly.
		Aani

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/5/26 6 a.m	S/B. Dr. Parthsa	
	Pt. Reviewed.	
	No pain abdomen on & off	
C/A- Reactive	P/A - uterus term Acting (3) 20" / 10". Cephalic. FHR - good.	
	P/v - 6-5cm long. os 2-3cm dilated. Vx @ -2 station. Membr (+)	
		Adv - Enema - Inj. Synte augmentation
		[Signature]

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/1/14 9:15 AM	By Dr Chauthan	
	Vital signs	
	RA Ur. spec	
	acc - 0	
	cephic	
	FBS @	
	PE - CA - 2-3 cm dilated	As
	0.5 cm bag	Epidural anaesthesia
	status 1-1	- RA PR catheter 50%
	APM done, clear lungs	
	By Dr Nandini	As
	Vital signs	As
	acc - 0	WFOC catheter
	PE - CA - 3-4 cm dilated	As
	well effaced	As
	status 1-1	As
	By Dr Chauthan	As
	Vital signs	As
	acc - 0	As
	PE - CA - fully dilated	As

As Effaced
 status 1-1

As

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/5/18 1:30 PM	<p>Normal vaginal delivery @ 12:24 PM</p>	
	<p>Full term</p>	
	<p>↓</p>	
	<p>↓ LA RMLE given</p>	
	<p>↓</p>	
	<p>Full term vaginal delivery, male baby</p>	
	<p>who cried immediately</p>	
	<p>↓</p>	
	<p>placenta & membranes delivered intact</p>	
	<p>↓</p>	
	<p>perineal wound sutured in layers</p>	
	<p>↓</p>	
	<p>wt well contracted</p>	
	<p>Male.</p>	
	<p>25/5/18 @ 12:47 PM 12:24 PM</p>	
	<p>2.420 kg</p>	
	<p>8/10 9/10 10</p>	<p>As per chart</p>
		<p>12/5/18</p>

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/5/26	S/B Dr. Sivasampa	
3:30 pm		
(PND - 0)	Pt. reviewed no complaints vitals stable.	
T - (N)		
BP - 110/80 mmHg	O/E - Afebrile, no pallor	
PR - 80/min	P/A - Uterus well contracted, soft	
Baby M/S;	HE - Bleeding pv WNL	
	Patient can be shifted to room.	
		Suf 201011
25/5/26	Dr. DeRaga	
8pm	Pt received	
	O/E - Afebrile vitals stable	
	P/A - Uterus well	Adv Admit DBF
		DeRaga 12/1/26

