ACTIVITY RECORD FOR BILLING

Rainbow® Children's Hospital
It takes a lot to treat the little.

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

Name: .....

UHID No: SNC-00031120 IP24-00008939
Baby SHAKTHI
25-02-2026 0 Y 4 M 22 D (F)
Dr. BHARATH PERIASAMY

Consultant: ..... Dept: .....

Date of Admission: .....

Date of Discharge: ..... Time: .....

Room / Bed No: ..... Ward: .....

Suggested Billable bed type: .....

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
17/7/26	7PM	ER	ward	[illegible]

CROSS CONSULTATION VISIT

	Doctor Name	Date	Order No.	Signature
1.	Dr. Padma phone call advice	20/7/26)	1949.	[illegible]
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
17/7/26	CBC · LRP. RP. LFT	8959	
	Blood cls. S. calcium,		
	S. Magnesium, Dengue NS1		
	Resp BioFire		
17/7/26	VBG, RBS	8958.	
18/8/26	U/E, U/C		
18/7/26	VBG	9061	
19/7/26.	S. Amonia	9017	
19/7/26	S. Lactate	9079	
	TMS (Acyl carnitine & amino acid (Amino-Acid - HPLC)		
	Radiology:		
18/7/26	MRI MRA, MRV,	to be raise	
	MRI - Spectroscopy	(4737)	
19/7/26.	MRI - Brain & Contrast	(4769)	
20/7/26	EEG (Video)	(to be raise)	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
17/7	Infusion pump	7pm	18/7/26 5AM	H316	Dr. Anup
17/7	Syringe pump	7:30pm	20/7/26 9AM.	9038.	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
17/7/26	I.V placed	(1)	57275	

ANY OTHER INFORMATION:

Date: 20/7/26 Time: 1 pm. Prepared By: Punithan

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
ODB	Ramya. IC 018		

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(1)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/07/26 09:50PM	S/B Dr. Bharath / Dr. Ravi Raj	
	O/E: child alert / active / afebrile	
	(SE/HR), CRT<3sec	
	No fever / No seizures.	
	S/E: CVS - $S_1 S_2$ +, no murmur	
	RS - BAE +, clear	
	P/A - soft, BS+	
	CNS - Tone - N	
To do		
- MRI - Brain (Tomorrow morning)		
- S. Lactate VBG		
S. Ammonia		
T.MS		
Urine GCMS		

Docu. No. : RCH /FRM / CLINICAL / 088

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	S/B Dr. Bharathi P	
18/2.		
	Δ - ? Acute symptomatic	
	seizure	
	? Fever provoked ? metabolic	
	v alert, accepting feeds well	
	NO further fever spikes	
	Vitals	
	stable	
	CNS: alert	↓
	oriented	
	Tone (N) all limbs	plan
	NFND	v MRI Brain
		v Neuro opinion
		v send: S. ammonia
	Awaiting MRI Brain report	VBG
		urine Routines
		TMS, GCMS
	S. ammonia S. Lactate, VBG TMS	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/2/26	S/B Dr. Kishore	
10pm	A - ? Seizure disorder :	
	No fever since admission.	
	No further seizures.	
	Tolerating feeds	
	U/O good.	
	Sleeping	
HR-120/min	hydration fair	
RR-28/min	S/E:	
SpO2-100%,	CVS - S1S2 (+)	
LPA.	RS - B/L AE (+)	
	NVBS (+)	
HT/HL	CNS - Tone (N)	
	P/A - Soft, NT.	
Hyperammonemia to rule out; S. Ammonia, S. Lactate, Urine GCMS, TMS.	Plan:	
		- Oral feeds / fluid.
		- Continue IV. Lone.
		- To send routine & more as charted.
		- Monitor vitals
	183481 Dr. Kishore	

Docu. No. : RCH /FRM / CLINICAL / 088

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	S/B Dr. Imran.	
9:AM	Δ= Seizure disorder.	
	No further spikes	Since admission.
	No further seizures	
	Tolerating oral formula feeds.	
	U/o good	
	O/E active, alert,	
	S/B CVS — S1S2 ✓.	
	RS — NVBS	
	P/A — Soft,	
HR → 125/min		
RR → 36/min.		Plan
SPO2 → 100% RA		- oral feeds
Active.	D2	- Inj. CEFTRIAXONE 250mg IV BD
		- Vitals monitoring.
		- To follow S. Ammonia, lactate, Urine ketones, TMS.
12/2/26 (Dr. Imran).		
Ammonia ↑↑		
Lactate ↑ 3-6		

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/1/2026 10:00PM	S/B Dr. Ajith	
	Δ: Seizure disorder	
	+ No fever spike	
	+ No seizure (Since)	
	O/E Sleeping arousable, quiet	
	HR-120/min	Adv:
	RR-32/min S/E-Ⓝ	- Continue the same.
	[illegible]	
	Dr. [illegible]	
20/1/26 9AM	C/S/B DR SHANYOUKTHA	
	Δ - ? Acute Symptomatic Seizures ↓ Evaluation.	
	C/C: No fever / on DBF / FF	
MRI - Grade 1 GMH No other changes	O/E: Vitals stable	
	S/E. Ⓝ	
Metabolic - Ⓝ so far		Plan.
		1) To do EEG today
TMS, urine for GCMS } awaited.		2) Monitor vitals
		3) Cont. Inj- Cefotaxime
		Dr. Shanyuktha 18860

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GRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/1/26		
	- Non-consanguineous parents	
	- H/o 1st child (male) died expired @ 1½ years. - admitted for 7 months for Pneumonia	
	- Ventilated →	ECMO
	- Unable to wean off from ventilator	
	- Genetics work up	
	s/o Nemaline Rod Myopathy	
	- Had delayed milestones.	
	- Patient/child & Surname has been adopted.	

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NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies ....

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Received notes on 17/7/26
17/7	7pm	Baby details taken over from
		the ER staff Baby was
		conscious and active Good vitaly
		Baby stable & record
		IV line patten VIP score 0/10
		no any other complain IV fluid
		on flow → [signature]
	7:30 PM	Inj Xonce 250 mg given as
		per drug chart
		I/O chart monitoring
	8Pm	Baby details handing over to
		night duty staff → [signature]

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

Docu. No. : RCH /FRM / CLINICAL / 089

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
17/2		Night duty on 17/2/26
	8pm	Baby details taken from the from Evening duty S/r. Baby was conscious and oriented. IV in patient. DVF DNS 20 ml/hr on flow. U/R, U/C to do. → VNO 017146
	9pm	Checking vital Signs and Recording. vital is stable. To plan for MRI Brain plain & contrast. → VNO 017146
	10pm	billing clearance done. To explain about parents for MRI scan details. → VNO 017146 To fixed Tomorrow 6AM AVR Scan Random, MRI brain & contrast MRA/MRV/MRS. → VNO 017146
	11pm	Baby last feeding taken 10pm So to keep NPO baby.
18/2	1AM	Baby vital is stable and Recording. → VNO 017146
	8AM	Baby comfortable Sleeping. Baby said No complaint. → VNO 017146 Handing over given to nursing duty Slr Baby shifted to MRI scan

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
18/7	6 Am.	~~Day duty~~ Rt Shift to AVR.
	6:45am	Inj. Ketamine 0.5ml, Inj. Propofol 0.5ml given by Dr. Ravirajpal.
	7 Am	MRI Brain Done.
	7:10am	Inj. Ketamine 0.5ml, Inj. Propofol 0.5ml given then, MRI Brain C Contrast Done. Shift do lalord. — Sister 6.9.25
		Day duty (18/7/25)
	8 Am.	Pt. hand over taken from night duty staffs. Pt is Consious and Oriented → Given
	9 Am.	Check Vital sign & recored. Dr. Bharath is seen the pt condition advice to conteins IV antibiotics → Given 6.9.25
	11 Am	Maintins I/O Chart. IV line patten. NO Swelling → Given
	1 pm	Check vital sign & recorded No other complaints.
	3 pm.	Maintein I/O Chart. → Given 6.9.25
	5 pm	Check vital sign & recored.
	8 pm	Hand over given to night duty staffs.

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
18/7/26		Night duty on 18/7/26
	8pm	Baby details taken over the
		From evening duty S/N. Baby was
		conscious and oriented. Dr Kin
		pattern. plan for bed side EEG
		for Monday to informed radiologyist.
		to do TMS, S.amonia, S. Lactate.
		I/O chart maintain. → Vino 01/7/26
	9pm	checking vital signs and Recording.
		Vital is stable.
	10pm	Baby father night time blood
		Not willing. to informed Dr. Bharath
		Sir. adviced Tommorrow morning to
		taken blood sample. → Vino 01/7/26
19/7	12AM	Baby comfortable sleeping.
		Baby said no complaint. → Vino 01/7/26
	6AM	Baby vital is stable and
		Recording. vital is stable. → Vino 01/7/26
	6AM	Baby I/O chart maintain.
	8AM	Baby details handing over
		given to morning duty S/N. → Vino 01/7/26

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Morning duty (19/7/26)
	8AM.	Pt Hand Over taken from Night duty staffs - Pt is conscious and Oriented.
	9AM	Check vital sign & recored. Maintain I/O Chart. → Gunasi 19/7/26
		Due Medicine given.
	10AM	IV line patten. NO Swelling → Gunasi 19/7/26
		NO other complaints
	12 PM	TMs, Ammonia, Lactate Sample send to Lab.
		Dr. Bharath sir seen the Pt tommorow. Plan EEG.
	1pm	Maintain I/O Chart.
	2pm	Hand over given to evening duty staffs — 19/7/26

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Evening duty 19/7/26.
19/7/26	2pm	Baby details handing over taken from morning duty staff.
	3pm.	Baby is conscious & oriented. Baby Vitals are checked & Recorded.
		I/O chart is maintained. I/V line & Pig good. → sushmitha bora
		Baby had tomorrow plan for Bedside EEG. → sushmitha bora
	5pm	Baby vitals are checked & Recorded. I/O chart maintained. → sushmitha bora.
	8pm.	Baby details handing over given to Night duty staff → sushmitha bora.

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