ACTIVITY RECORD FOR BILLING

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Name: MRS. AISWARYA

UHID No: SNC-00019100 IP No: 8949 Consultant: Dr. Sneg PushPalatha Dept:

Date of Admission: 18/7/2026 Time: 12:58 pm Date of Discharge: Time:

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

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
18/7/26	4pm	RR	ward	
19/7/26	12:30 pm	Ward	RR	Mach 607651.
19/7/26	1:30pm	RR	OT	
19/7	2:30pm	OT	RR	
19/7	6 pm	RR	ward	

CROSS CONSULTATION VISIT

	Doctor Name	Date	Order No.	Signature
1.	PAC Dr. Arafath	19/7/26	7735	1:45pm
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
18/7/26	Blood Reservation	7487	[illegible]

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
18/7	CTG	9 pm	9.10pm	4763	
19/7	CTG	2.12pm	9.10pm		
19/7	CTG	6 Am	6.10 Am	4764	
19/7	CTG	10Am	10.10Am		

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
19/7	Iv placement	1	5677 ✓	Neofolbus
19/7/26	Catheterization	01	7736 ✓	01145xx
20/7/26	physiotherapy	01	7955 ✓	[illegible]

ANY OTHER INFORMATION:

procedure :- Emergency LSCS
surgeon :- Dr. Sura pushpalatha
Assisted surgeon Dr. vidhya
Anaesthologist :- Dr. Arafath.
in time : 1:30 pm out : 2:30 pm
Duration 1 hours.

Date: 21/7/2026 Time: 8:50 AM Prepared By: [signature]

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
[signature] 820437	Ramya.K 018964		

Patient Sticker

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SURGERY DETAILS

Date : 19/7/26

Patient Name: MRS: AISWARYA Date of Birth: ..... Age: 37Y

Gender: F Ward : OT UHID No.: 00019100

Date of Surgery: 19/7/26 ☐ OT -1 ☑ OT -2 ☐ OT -3 ☐ OT -4 ☐ OBG OT-1 ☐ OBG OT-2

Name of the Surgery : Failled Induction Emergency LSCS

Time in : 1.30 pm Time Out : 2:30 pm

	NAME	AMOUNT
1. Surgeon	: DR. SURA PUSHPALATHA	
2. Anaesthetist	: DR. ARAFATH	
3. Assistant Surgeon	: DR. VIDHYA	
4. OT Technician	: TECH. LOKESH	
5. Circulating Nurse	: SIN VENNILA	
6. Assistant Nurse	: SIN MANIKANDAN	

Special Equipment: ☐ Laparascopy ☐ Broncoscope ☐ Harmonic ☐ Morcelator
☐ C-ARM ☐ Cystoscopy ☐ Versa Point ☐ Liver Cusa
☐ Neuro Cusa ☐ Others .....

S. Purushotha
Signature of the Surgeon

Signature of Circulating Nurse

Order No: 57762 Order by: 07844

Docu. No. : RCH /FRM / GENERAL / 114

Patient Sticker

MRS. AISWARYA (37Y/F)
(SNC: 19100)

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CONSUMABLES OF OT

Circulating staff : S/N. vanila Technician : Mr. lokesh Date : 19/07/26 Time :

Anaesthesia Disposables	Qty Issued	Qty Used	Surgical Disposables	Qty Issued	Qty Used	Disposables (Baby Side)	Qty Issued	Qty Used
ET tube			Major Pack LSCS		1	Inj Vit.K		1
LMA			Sutures V. 2347		1	Cord Clamp		1
ECG leads (A) / P / N		03	V. 2346		1	Suction Catheter 8		1
HME filter : A / P / N			9350		1	Feeding Tube 6		1
Syringes : 10 cc		03	1326		1	Vaccum Suction Set		1
05 cc		03	Gloves - 7½ (P/F)		01	Surgical Gloves 6½ SC		2
02 cc		03	6½ PF. J		2	Gauze Pack (Plain)		01+2
01 cc						Syringe 1ml / 2ml		
Cautery plate (A) / P / N		01	Surgical blade W		1	Surgical Blade # 20		
IV set		1	NG tube			Koochies (S)		
RL		01	Cautery pencil		1			
NS : 10ml / ~~100ml~~ / 500ml / 1000ml		01	Koochies			Needle 26 1½		01
			Ointments			Oxygen Mask (Adult)		01
			Suction Catheter			Inj. carbetocin		01
Fentanyl			Cap, Mask			D. water		05
Morphine			Gauze Pack 2/0		1	Inj: Lox 2.1.		01
Ketamine			Mop Pack		1	Inj. MGM		01
Propofol			Steristrip			~~Alcohol~~ Swabs		~~01~~
Rocuronium			Underpad		2			
Glycopyrolate			Draw sheet					
Myopyrolate			Abgel		1			
Ondansetron			Foleys catheter					
Pencan 25g/ Spinal Needle 22 B whitacre		1	Urobag					
Bupivacaine 0.25%			Chest Drainage Catheter					
Bupivacaine 0.25% (Heavy)		01	Romodrain bag					
Antibiotics			Bandage					
			Tegaderm					
Suppositories			Ioban					
Anamol : 80mg / 250mg / 170 mg			Double J Stent					
Supridol : 100mg			Vaccum Suction set		2			
Justin : 12.5 mg / 25mg / 100mg			Plastic Bed Sheet		2			
Tab. Misoprost : 200mg			Betadine Solution		1			
			Microshield					
Inj. Bupigesic		01	Cotton Balls					
Inj. Tropic		02	Latex Gloves					
Spinal 25 quincke		01	Ramdione Scrub					
			Saral 3M		1			

Surgeon

Anaesthesiologist 139935

Nurse 017844

Lokesh
OT Technician

Order No. : 57762 Ordered by : 017849

Doc. No. : RCH / FRM / GENERAL / 125

SNC-00019100 IP24-00008949
Mrs AISWARYA
09-10-1988 37 Y 9 M 9 D (F)
Dr. SURA PUSHPALATHA

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/7/20		
	9.00	D - [illegible]
	G2A1; G4 39wks 15days	
	IOL.	
BP - 110/70 mmHg		
HR - 84/min Foley's		Ap.
Hybrid Induction done.		
	At. 2pm.	1) GCI FHR (2nd hrly)
	Ap.	4th hrly.
	Uterus ≈ 39wks	10min trace.
	not Active	2) soft diet
	FHR ⊕	3) vitals monitoring
	1.45pm.	4) shift to ward.
GCI - Reassure.		
		17/7/20

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

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/7/2026	S/B Mr. Yuvanani	
8 pm	G-G2A1/ms-10yr/EDD-20/7/2026/GA-39wks/	
		Rp
T: N	O/E: pt ac, fair	Sgt mier
BP-110/70	afebrile	plenty of fluids
	mm n/g no pallor/no pe	BP/PR monitoring
PR-76/min	CVS/RS-nm	NST 4 hrly
SPO2-100%	P/A: Ut d term	(10 min tracing)
	not achy	w/f contractions
	Hed/v/e	
	FHR	
	FHR-140/min	
	L/C: Wley inc/w	
	USG (15/7/26)	
		14/3/22
	simple wop 3	
	cord around neck.	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	S/s Dr. Vidhyalakshmi	
19/7/2026 10 AM	PT renewed	
	G2 A1 / NS 10yr / 39w6d	
	O/E: afebrile	
	afebrile	Ad
BP: 80/	PPE⁰	- NPO from 11AM
Gp: 110/70	PA: at term	- IVF @100ml/h
mmtg.	not active	- vitals monitoring
	feed VE	- left lateral position
CTG reactive.	fetal good	- FHRM.
	PV: cx uneffaced, soft-1	- w/f contractions
	Posterior	- Inform SOS
Plan: Emergency	OS admits 1 finger.	
LSCS @	membs (+)	
3pm.	Vx @ brim	
	Pelvis adequate	Vidhya 1 PM.
	no show / assessing PV.	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	S/s Dr. Sura Pushpalatha	
19/7/2024 2pm	PT reviewed	
	O/E: Cyanosis	
	afebrile	Adv.
	PPE	
	Pr: 80c PA: Ut fenus	- NPO
	Bp: 110/70 not active	- informed consent
	mmhg. bleed UE	for Emergency
	Regood.	LSCS
		- Ringer lactate
	PV: Cx unstaced	- Inj Dexpanthenol 1gm IV stat
	Post	- Inj Pantoprazole IV stat
	os admits finger	- Inj Emeset 4mg IV stat
	tenuis (+)	- shift to OT on call
	Ux @ -3	
	pelvis to be judge	
	reassessed.	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/7/2026 6pm	S/S Dr. Vidhyalakshmi	
	DOS	
	PT reviewed.	
	comfortable.	
	O/E: Cyanosis	
	Pallor	
	PPE°	Ad
	PA: soft	
	ut contracted	- NPO x 6hours
	Dressing intact	- IVF @100ml/h
	no soakage	- CSD / IO chart
	no undue	- vitals monitoring
	bleeding PV.	- follow drug chart
		- Breast milk expression
		- w/f bleeding PV
		- Inform SS
	Vidhya	
	Shift to ward	
19/7/2026 8pm	S/S Dr. Vidhyalakshmi	
	DOS	Ad
	PT reviewed	- NPO x 6h
	comfortable.	- IVF @100ml/h
	O/E: cyanosis	- CSD / IO chart
	pallor	- vitals monitoring
	PPE°	- follow drug chart
	PA: soft	- Breast milk expression
	ut contracted	- w/f bleeding PV
	no soakage.	- Inform SS
	no undue bleeding PV	Vidhya 19/7/26.

Pr: 90/min
BP: 110/70 mmHg
Baby NICU
B/L breast soft
Output 100ml

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/5/22 8AM.	US IB Dr. [illegible]	
	POD 1; Post NCD;	
	BP - 110/70 mmHg HR - 85/min Afebrile GC fair Pallor/JAB UB/	
	PA: Uterus well contracted. No soakage Dressing intact. Bowel sounds + PV: No bleeding PV excessive	Adv 1) IVF on flow 2) follow drug chart. 3) To remove catheter after mobilizing 4) Physiotherapist opinion. 5) semi solid diet for lunch. 6) Mobilize well. 7) Ponting of fluids
	- Baby c NICU. - Placenta not passed.	

[illegible] 1/7/22

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/7/26. 10:30am	S/B Physiotherapy	
	Thirisha (PT)	
	Post LSCS ; POD - 1	
	O/O : Patient is awake, Conscious Vitals are stable IV line ⊕ at (L) side of hand	
	O/E : WOB (N) Chest clear ⊕	
	Rx : - Breathing Exercises given - Active Toe movements done - Ankle pump given - Heel slides done actively - Feeding position taught - Splinted Coughing taught - POD 3 & POD 4 advised to the patient - Mobilised out of bed → lying → sitting → standing - Encouraged walking	
		R. Thirisha

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/7/26	S/o Mr. Yuvarani	
7pm		
	D - PIUA / POLT LSCS / POD-1 / Mature	
T:	N	Rf
BP -	110/70 mmHg O/E: Pt alert, Fair	sgt after
PR -	76/min afebrile	plenty of fluids
SpO2	100% no pallor/no pa	BP/PR monitor
	CVS/RS - NAD	follow ons cnw
Baby	NICU P/A - UR connected well - IVF @ 100 ml/hr	
BL	Breast no wound soakage	
	IJV P/V - no bleeding	PN - Dulcolax suppository 20mg (P/R)
		- Safrom (SOS)
not passed		
	FLATUS	
passed urine		R 111352

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/7/2026	S/o Dr. vidhyalakshmi	
10 Am		
POD #2	PT reviewed.	
	Comfortable.	
	O/E: Cyanosis	
	Pallor	Ad
	Pr: 80/L	PPE°
	BP: 110/70	PA: soft, BS⊕
	mmHg	ut contracted.
	baby NICU	Dressing intact
	All breast	no soakage
	soft.	no undue
	—	bleeding PV.
	Passed flatus	
	—	
	Plan discharge today	Vidhya
		10 am.

- Soft diet
- Plenty of oral fluids
- Vitals monitoring
- Follow drug chart
- Ambulation
- Breast milk expression
- W/F bleeding
- Informed

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Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Ref No:F/GYNIC/16

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CAESAREAN SECTION OPERATIVE NOTES

Name: Mrs. Aishwarya Consultant I/C: Dr. Sura Pushpalatha. Reg. No:

Surgeon's Name:	Dr. Sura Pushpalatha	Date of delivery:	19/7/2026
Assistant surgeon:	Dr. Vidhyalakshmi	Time of delivery:	2.02 pm.
Anaesthetist:	Dr. Aragalathi	Sex of baby:	Boy
Type of Anaesthesia:	Spinal	Weight of baby:	3.400 kg.
Paediatrician:	Dr. Monisha	Apgar score:	8/10 9/10
Scrup Nurse:	S/N Manigandan.	NICU Admission:	yes.

Elective ☐ Emergency ☑ Indication: Failed induction.

Urgency
- ☐ Immediate threat to life of woman or fetus
- ☐ Maternal or fetal compromise not immediately life threatening
- ☑ No maternal or fetal compromise but needs early delivery
- ☐ Delivery timed to suit woman and staff

Decision time : 1pm Knife to rectus: 3min

CTG description Reassuring.

If there was a delay give the reasons: —

EXAMINATION FINDINGS WHEN APPROPRIATE

Presentation: ☑ cephalic ☐ breech ☐ other _____ Cervical dilatation: 2 fingers cm

5th palpable: _____ Fetal position: ROA

Station: -3 ☑ -2 ☐ -1 ☐ 0 ☐ +1 ☐ 2 ☐ Moulding: None ☑ + ☐ ++ ☐ +++ ☐

Caput: + ☐ ++ ☐ +++ ☐ (–) Meconium: None ☐ + ☐ ++ ☑ +++ ☐

Bladder catheterized Yes ☑ No ☐ Urine : Clear ☑ Blood stained ☐

Skin incision: Pfannensteil ☑ Transverse ☐ midline ☐ other

Uterine incision: Lower segment ☑ Classical ☐ InvertedT ☐ J incision ☐

Previous scar: Intact ☐ Thinnedout ☐ Ruptured ☐ No scar ☑

Incision through placenta: Yes ☐ No ☑

Delivey of head: Manual ☑ Forceps ☐

Liquor: Clear ☐ Meconium: I ☐ II ☑ III ☐ Blood ☐ Offensive ☐ Not offensive ☐

Delivery of placenta: Manual ☐ CCT ☑ Complete ☑ Incomplete ☐ Piecemeal ☐

Cord appearance: Normal Cord arond the neck Yes ☐ No ☑

Appearanc of placenta: normal. Cavity explored Yes ☑ No ☐

Uterus, tubes and ovaries: Normal ☑ Not normal ☐ Sterilization Yes ☐ No ☑

Complications / Comments:

Uterine closure: One layer ☐ Two layers ☑ 1 vicryl Suture

Peritoneal closure: Pelvic ☐ Abdominal ☐ None ☑ Suture

Sheath closure: 1 PDS Suture

Fat closure: Yes ☐ No ☑ Suture

Skin closure Subcuticular ☑ Mattress ☐ 3-0 monocryl. Suture

Vaginea evacuated Yes ☑ No ☐ Estimated blood loss: ml

Drain: Yes ☐ No ☑ Remove in days Await instructiions ☐

Ctheter: Yes ☑ No ☐ Remove in days Await instructiions ☑

Swap & instruments count correct? Yes ☑ No ☐ Post-op antibiotics Yes ☑ No ☐

Intraopeative antibiotics cover: Yes ☑ No ☐ Thromboprophylaxis : Yes ☑ No ☐

Post operative Comments: –

Mox bloms.
Inf 20ml 20ns | @100ml/h
100ns
Ceo/zochart
vitals monitoring.

Inj Diclofenac 1.5gm IV 1-0-1
Inj Pantoprazole 1-0-1 IV
Inj Paracetamol 1gm 1-1-1-0 IV
Tentin suppository 1-0-1 PR
Inj Dexane 0.4mg s/c 2d 8/2024

Signature

PGA

SNC-00019100 IP24-00008949
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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)
		Admission Notes
18/7/26	12pm	MRS. Aishwarya 37y/F G2A1
		Pt came for IOL 38W + 5days
		Pt Admitted under Dr. Sura pushpalatha
		Pt vitals are stable monitoring
		The vitals maintained I/O chart
		Part preparation done, CTOT Reactive
		FHR good foley Indection done.
		@ 2pm Pt vitals are stable
		maintained FHR good —— ABP 02/02/18
		Re.Assessment
18/7/26	3pm	Pt vitals are stable monitoring
		The vitals maintained I/O chart
		Baby FHR good Provided comfortable
		Bed and position —— ABP 02/02/18
18/7/26	4pm	Post Indection FHR good Pt shifted
		TO 3F as per doctor order —— ABP 02/02/18
		Recevied Notes.
18/7/26	4:30pm	Hand over taken from
		Recovery Room duty staff.
		Patient is conscious
		and Oriented.
	5:30pm	vital sign are checked
		and Recorded.
	6pm	Maintain I/O chart —— 00/7/24

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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NURSES NOTES

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		FHR was checked
		FHR - 140 it is good.
	7pm	There is no complaint
		and in Patient side,
		vital sign are checked
		and Recorded
	8pm	Hand over given to
		night duty staff
18/7	8pm	Night duty on 18/7/26
		Patient details handover
		taken from evening duty
		pt. is conscious and oriented
	9pm	vitals are checked and
		recorded
		S/B Dr. Yuvarani Advised
		to CTG 4th hrly, FHR 2nd hrly
		to do. and Put. IV line.
	10pm.	IV line is secured.
		CTG Done and reactive
		FHR is Good - 142
		She had a soft
		diet.
	12 Am.	She slept well.

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☐ Drug Allergies .....

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
18/7		CTG Done.
		Maintained I/O chart.
	5Am.	Vitals are stable.
		CTG done. to Send the Dr.
		yavani no Advised
	7Am.	pt I/O chart maintain. Nayfolkst.
	8Am	pt handling over to.
		morning duty SIN
		Nayfolkst.
		Morning duty 19/7/26
	8Am	pt hand over taken from
		night duty
		pt had SOST clear
		pt vs checked & recorded
		pt SIB Dr. Vidhya mam
		advice
	9Am	PV Examination done
		Informed Dr Siva mam Discuss
		with plan LSCS
		PAS to day
	10Am	CTG done. seen By Dr. vidhya mam.
	11Am.	patient is on NPO. →
		FHR monitored 2hrly.
	12-30	patient Shifted to PR. Advised
		given By Dr. Vidhya mam →

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☐ No Known Drug Allergies

☐ Drug Allergies .....

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	12.30pm	Patient details handover given to RR staff nurse. → [signature] 12.30pm
19/7/26	12.40PM	Receiving Note
		pt received from ward. pt vitals are monitored, IVF - 100 ml/hr ongoing, IV in patent, pt in NPO, Inj. Pan 40mg (IV) given, Inj. Emeset 4mg (IV) given, Inj. rupacy 1.5g (IV) given. → [signature] 01:45pm
	1.10PM	catheterization done. IVF - 100 ml/hr ongoing pt shifted to OT. → [signature] 01:45pm
		OT Notes 19/7/26
19/7/26	1.30 pm	pt Received inside the OT at 1.30pm monitoring connecting vitals are the stable BP - 110/70 mmHg, pulse 70 bpm, SpO2 100%. VSD given sign in done Time out done skin incission baby delivered boy baby birth time 2.2pm. wt. 3.4 kg, cord blood sample collecting not done procedure emergency LSCS done by Dr. Suramam all counts are correct vitals are stable pt shifted to the RR room pt details handing over given to recovery staff → DOLI

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SNC-00019100 IP24-00008949
Mrs AISWARYA
09-10-1988 37 Y 9 M 9 D (F)
Dr. SURA PUSHPALATHA

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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)
19/7/26	2:35 pm	Received Notes
		Pt Received from RR Pt vitals are
		stable monitoring The vitals maintained
		I/o chart Watching for Bleeding
		IV line pattern, Pt consious and oriented
		Iv fluids on going urine out put
		good and clear No other complaints — ABP 020278
		Reassessment
19/7/26	5:30 pm	Pt vitals are stable monitoring The
		vitals maintained I/o chart Position
		Provided maintained I/V fluids
		Pt consious and oriented urine out
		Put good and clear — ABP 020278
19/7	6pm	PV Examination done PV Bleeding
		Normal Pt shifted to 3F as per
		doctor order — ABP 020278
		Received note 19/7
	6pm	patient hand over
		taken from RR Staff
		patient vitals Stable
		pv bleeding normal
		patient no pain
		complaints — S [signature] 020278

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		IV line present
		IVF onflow 100ml/hr
		Urine output clear
	7pm	Flo chart maintain
		NPO break at 8.30pm
		hand over given
	8pm	to night duty
19/7	8pm	Night duty on 19/7/26
		Patient details handover
		taken from Evening duty s/n
		pt is conscious & oriented.
	9pm	pt vitals are checked
		and recorded
		IV Cannula is present.
		IVF NS 100ml/hr onflow.
		CBD is present and
		Urine Output is clear.
		NPO is break. No
		vomiting complaints.
	4pm	She slept well.
		Maintained flo chart.
	1am	Vitals are stable.

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
20/7	5pm	She awake maintained her
		personal hygiene.
		Due medicines are given
		as per order.
		Vitals are stable
	7Am	Maintained I/O chart.
	8pm	Handover given to Morning
		duty S/n — Suba 6/7/24
		Morning Duty 20/7
	8Am	patient hand over.
		taken from night duty
		patient conscious and
		oriented →
		patient vitals stable
		patient no other
		complaints
		patient CBD (+)
		to be Done physio
		patient mobilized well
	12pm	physio Done →
		patient I/O chart
	1pm	maintained
	2pm	hand over given to

Anu 02/07/24

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		evening Duty
		Patient complaint
	2pm	of sui - para
		given
		Evening duty 2pm
	2pm	Pt hand over taken from
		morning duty sis
		pt ns checked & Records
		physio done
		Flowchart maintain
		I.V line patten position
		output clear
	3pm	pt side no any other new
		complaints
		Pt flatus not passed
		AG 103cm
		SBOr Sravam delivery
	8pm	labilit 90/mi
	10pm	pt not passed flatus
		to give Dulcolax suppos 20mg
		PR
	6pm	IV medication given
		flowchart maintain

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		pt not passed flatus
		mobilized well
20/4/26	7pm	CBD Removed at 12pm no passed
		PV Bleeding normal
		pt hand over given
	8pm	night duty sir
		Night duty 20/4/26
20/4	8pm	pt taken over from evening
		duty s/N pt is conscious
		& oriented pt mobilized.
	9pm	pt vitals stable.
		S/B Dr. Yavani mam
		Advised to continue IVF
		& IV Antibiotic. dulcoflex sup.
		give. Than I have given.
		dulcoflex suppostr.
	10.30 pm	pt IV line out informed Dr.
		Yavani Advised to new IV line
		but should Advised given.
	11pm	pt not willing for IV line for new.
	11:20pm	Than informed to Dr. Yavani. Advised
		pt if stool passed no need for IV line.
		if not passed stool new IV line.
		needed.

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	12 Am	pt stool passed,
		pt pv bleeding is normal
	5Am	pt cue done,
	7Am	pt I/O chart maintain,
	8Am	pt handing over to morning
		duty S/N
		Nauf albus
		Day shift 2/7
	8Am	patient hand over
		taken from night Duty
		patient conscious and
		oriented →
		patient vitals stable
		patient no other
		complaints
		patient taken oral diet
		patient oral medicines
		given →
		plan D/S today
		File send to Bp
	12.30	Billing →
	Pm	

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