

ACTIVITY RECORD FOR BILLING

Name: IP24-00008757
UHID No: SNC-00030449
Date of Admission: Baby THANYA 11-05-2025 1 Y 1 M 11 D (F)
Room / Bed No: Dr. BRAVANTHI KOSURI
Ward: Consultant: Dept:
Date of Discharge: Time:
Suggested Billable bed type:

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
22/6/26	11:30 AM	EP	ward	Tgt 293
22/6/26	5 pm	End of floor	3rd floor	Nitya Olubun

CROSS CONSULTATION VISIT

	Doctor Name	Date	Order No.	Signature
1.	Dr. Naveesh Kumar (Nephrologist)	29/6/26	to be reviewed	Dr. Naveesh Kumar
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

[illegible]

22/6/20

Blood c/s ✓ RP/II

7620

copy

\$ RBS (P_{act})

7621

only.

25/6/20

CBC, CRP ✓

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VW

26/6/26

Spot PCR, Routine ^{urine}

(7806)

Ork
Ork

[illegible]

Date _____

Name of Equipment

Connecting Time

Disconnecting
Time

Order No.

Signature

22/6

Infusion pump

2/6/26
4
1 PM

22/6/26
10 PM

2143

28/07/2024

22/6

Syringe pump

2/6/26
@
2pm.

29/6/26
at
2pm.

2143

11
1001251

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
22/6/26	IV placement ✓	1	252110	
22/6/26	IV placement ✓	1	312	
25/6/26	IV placement ✓	1	2630	
27/6/26	IV placement ✓	1	8073	

ANY OTHER INFORMATION:

.....

.....

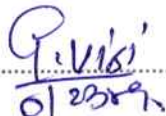
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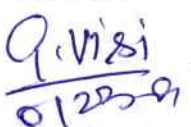
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Date: 29/6/26 Time: 8AM Prepared By:  01234567

Staff Nurse  01234567	Shift / Ward	Billing Assistant	Billing Supervisor
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/6/26 BPM	C/S/B DR. SHAMYOURTAA Δ - UTI / ⊕ Pyelonephritis fauci spikes ⊕ O/E: CNS - S1 S2 ⊕ RS - B/L AE ⊕ P/A - Rgt CNS - Aut	Plan 1) Monitor vitals 2) Continue IV Antibio R. Shamyourtaa 155630

SNC-00030449
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 Dr. BRAVANTHI KOSURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
93/6/26 8.00a.m.	s/s Dr Bravanthi Keer-	
	1y 1m / Female / Recurrent UTI /	
	Left Pyelonephritis / Complicated UTI	
	→ H/o fever. from 21, 22, 23 past 2 days	
	max (Temp 104°F)	
	associated with chills & rigors.	
	H/o vomiting and poor oral intake	
	→ H/o increased frequency of urine.	
	H/o UTI 2 weeks. had fever, vomiting,	
	and a frequency of micturition.	
	Consulted outside,	
	had pyuria on urine routine and.	
	urine's s/o no growth.	
	was treated with oral cefixime for	
	10 days	
	H/o straining stool +	
	Now As per Now, In ER brought 2 above complaints	
	urine's routine - plenty	
	of pus	
	urine's - sent, usg abdomen → Lt Kidney	

74 x 35 mm

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	lt kidney → mildly enlarged in size and show increased echotexture & significant wall thickening. No Hydronephrosis or Calculi. <u>Impression</u> - left Pyelonephritis.	
<u>21/6/26</u>	Hb = 10.0, platelet count = 2.67L TC = 14,350, N = 63% CRP = 29 Creatinine = 0.38 Dengue NSAg = negative.	
	Both H/o - Term, NVD, 2.9kg, CIAO.	
	Antenatal Scan → 22 wks had intracardiac echogenicity & B/L Renal peliectasis.	
	⇒ Repeat Scan 29 wks was normal. No intracardiac echogenicity. Both kidney	
	→ Days of life - Echo was normal. normal.	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/6/2026 6.05 PM	S.B - Dr. Dirakar A - UTI + (L) Prolongation; Fever Spike (4); Oral Improving Uo - Adequate S/E - Cough abtly active CRTs; no/w trans perspr S - Cx - SST (+) R - RAT (+) PA - SAT CNS - Tongue (+) Vital Signs; Cine G _r - E. coli 1 lak / CFU Sensitive to Jy. PIPRAZ Resistant to Jy. Gentamicin	Plann = PD Change to Jy. PIPRAZ ✓ Ig IV Q8HR NS - vital monitor - encourage oral D my

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/06/2025	SB Dr. Pavi Bagul	
9 AM	Δ: (E) Pyelonephritis	
	favor spikes (E)	
	vitals stable, (HR/RR), CRT < 3 sec	
	peripheries warm	
	SLE: VS - S, S, (E), no murmurs	
	RS - BAEF, clear	
	PA - soft, BS (E)	
	CVS - Tono (E)	
24/06/25		
11:00 a.m	SB Dr. Saravathi	
	do. Swelling of face	
	fever spikes +	
	o/e - as - Encephal	
	Ceng - BAEF	
	PA - soft	
	distension +	
BP - 70/58		
	26/09	
	uric acid - 10.540 μmol	
	pep tag - sensitive	
		Plan
		1. Inj Paracetamol 150mg q.v
		SOS / 6 hourly
		Input / output chart

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Date & Time	Progress Notes	Doctor's Order
25/06/26	S/B Do-Pravi Rogal	
9AM	Δ: ② Protonophore (E-rod UTI) fever spikes (+) vital stable (HR/RR), CRT < 3 sec, peripheries warm	A.W.P - 10 T.W.P - 11 C.R.O. output ⇒ 8 ES-5
to inform on hold pick	S/E: RVC - S, S, S, normal, normal, RS - BAE, does, PA - soft, BSE, mild distended CNS - Tono - (N) :	Rn - To continue Inj: PIPIN 2 1gm IV @ 8 AM



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/6/25 5:00pm.	Sl'd Dr. Bravanthi	
→ 105 CFU	lt pyelonephritis /	
Recd	Recurrent UTI	
Sensitive to inj. Dptaz & Mecopenam	Forer spikes + ↓ shivering.	
on inj Dptaz		
	Plw Dr. Naresh Kumar.	
	Pediatric nephrologist	
	→ step up to inj Mecopenam.	
	→ Catheterisation.	
		<i>[Signature]</i> 15/13/16
	Plan to do urine routine urine spot PCR.	
	Next pack	CRP, LBC, Reserve S. Cholesterol & LFT, RP2



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/6/24 6.00pm	Dr. Dnalku 1 - (L) Pyelonephritis / Recurrent UTI. Fever spike (+). of c. 1 hr time looking certain look m Dr. Dnalku Vital signs	Plan - To Cxw Jng. Myeloperoxidase - of c. 1 hr time after Vital signs 2 12



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/6 9am	C/S/B - Dr. Aarthi (L) - Pyelonephritis / UTI (E-coli) Fever spikes (P). Oral intake fair Wt loss (N). O/E - Active. PPWP. Mild periorbital edema. Vitals (N). S/E - WNL. <u>Adv</u> - Plan to catheterize if fever $> 101^{\circ}F$. - Cont Meropenem.	

Date & Time	Progress Notes	Doctor's Order
1/6/20 3:30 PM	Q/S/N - Dr. Arnold Δ: 'UTE U/O → 5.6 ml/kg/hr vitals stable <i>[Signature]</i> 1/6/20 Dr. Arnold	Q/S/N - Baby reviewed - no fever spikes - feeding and fluids. Q/E - Alert / Active / Afebrile HR / RR CRT < 3 sec M S/E: NAD. <u>Adm</u> ① Eng. Discharge ② E/O checked ③ V. Lib Monitoring

Date & Time	Progress Notes	Doctor's Order
28 Feb 2026	SE	Dr. Divakar
9:00 am	4 - (1) Pyelonephritis UTI PE - (10L) No further fever Tolerating oral med CPO - adequate AFE - mild, alert & active no periorbital edema CXR / normal normal SE - PA - soft; normal Other system - (2) Vital signs	Plan - - Give IV antibiotics - Encourage oral - Vital monitoring



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/6/26 a:20p.m	S/B Dr Bravanthi 1yr 1m / F / OTD	
	Recurrent UTI / Left Pyelonephritis / Some dehydration.	
	Well, Systemic exam - (N)	
	<u>Plan</u>	
	① Tab Jintore Janazel 15mg DT	
	1 tab — 0 — 0	
	(1/2 an hr before food)	1 week.
	② Symp Ofloxacin Levofloxacin (5ml / 125mg)	
	4ml — 0 — 4ml	
		1 week.



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	③ Symp Dupalac o — o — sml x 2 weeks.	
	④ Naooclear nasal drops 1 drop each nostril 3 to 4 times daily (so)	
	Plan to get Dr. Naresh (Pediatric nephrologist) opinion today	
	Review after 5 days in OPD. 40/6/26 evening	
		<u>h</u> 15/4/26

NURSES NOTES (USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		<u>Received Notes: on 22/6/26.</u>
<u>22/6/26</u>	1pm	⇒ Baby details handover taken from ER duty S/N. → <u>M. bors44</u> ⇒ while receiving the baby conscious & active good. → <u>M. bors44</u> ⇒ vitals reassessment done are checked & Recorded. ⇒ Temp: 99.6°F. ⇒ DVF ⇒ DNS @ 35ml/hr - on flow connected → <u>ALY bors44</u>
	2pm.	Baby details handing over given to Evening duty staff → <u>Sushmita bors44</u>
<u>22/6</u>	<u>2pm</u>	<u>Evening duty on 22/6/26</u>
		Patient details handover taken from Morning duty S/N Pt. is active and alert. 3pm vitals are checked & recorded. 3:30pm Temp - 99.9°F. Advised to give sparging → Given → <u>Suba bors44</u> 4:30pm Reassessment Done. Temp - 101.2°F.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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Baby THANYA

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
22/6	4pm	Temp - 101.2°F - Inj. Para 15mg given I/O chart maintained
	5pm	Reassessment Done Temp - 100.3°F vitals are stable — Suba 6/25/25
6pm		SLB Dr. Sravanthi Parental complaints of Baby getting one episodes of vomiting. Mam advised to give Inj. Enoxet 2mg IV - Given Due medications are — Suba 6/25/25 given as per order
	7pm	I/O chart maintained vitals are stable
	8pm	Handing over given to Night duty SLN — Suba 6/25/25
	8:30pm	Temp - 101.3°F Inj. Para 15mg given

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
22/6/26		Night duty on 22/6/26
	2pm	Baby details taken over from evening duty. P/m Baby was conscious and oriented. IV line patent. D/F DNS 35ml/hr on flow. D/o chest monitor. → m/o 01/7/26
	9:30pm	checking vital signs and recording. vital in stable. D/o chest monitor. → m/o 01/7/26
23/6/26	12:20AM	Baby body Temp: 99.3°F Topical sponge given.
	12:50AM	Baby body Temp: 100.4°F Dug! paracetamol (15mg) given as per doctor order. → m/o 01/7/26
	1:30AM	Reassessment notes Reassessment notes down. Baby body Temp: 100°F
	3AM	Baby comfortable sleeping. → m/o 01/7/26 Baby scrub no complaint.
	5:40AM	Baby body Temp: 100.3°F Dug! paracetamol (15mg) given. → m/o 01/7/26
	6:30AM	Reassessment notes Reassessment notes down. Baby body Temp: 98.6°F → m/o 01/7/26 Baby D/o chest monitor.

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☐ No Known Drug Allergies☐ Drug Allergies .Docu. No. : RCH /FRM / CLINICAL / 089



NURSES NOTES

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☐ No Known Drug Allergies☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
13/6/2022	2pm	Evening duty Patient hand over taken from morning duty staff - Patient is conscious and Oriented. vital sign are checked and recorded Maintain I/O chart
	5pm	S/B Dr. Dinkaran in no advice to changed the Antibiotic and. no need for Dr. narash nephrologist (o). to followed by OPD
	7pm	pt I/O chart maintain.
	8pm	pt handling over to night duty staff.

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NURSES NOTES

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☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
23/6/26		Night duty on 23/6/26
	8pm	Baby details taken on the from evening duty. Baby was conscious and oriented. In lin pattern. No chart menfai. → Sign 11/96
	9pm	checking vital signs and Recording. vital in stable and Recording. No chart menfai.
	10pm	Baby body Temp: 100.4°F Antipain (150mg) given as per doctor order. → Sign 11/10/11
	11pm	Reassessment Notes Reassessment notes down. Baby body Temp: 99°F Topical sponge given.
24/6/26	12Am	Baby comfortable sleeping. No other complaint. → Sign 11/11/11
	1Am	Baby vital is stable and Recording.
	3Am	Baby comfortable sleeping. Baby body Temp Normal.
	2:30Am	Baby was sneezing. To checking Temp: 99.3°F. In lin sneezing So removed.
	2:45Am	Baby body Temp: 100.4°F To informed Dr. Ramanan is advised

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Baby THANYA

11-05-2025

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NURSES NOTES

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☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
24/6	3:45AM	To secured pr line and now to given Symp 2.5ml (3ml) as per doctor order. → <u>mis</u> <u>OT 1/1/16</u>
	4AM	Reassessment notes Reassessment notes given. Baby body Temp: 99°F → <u>mis</u> <u>OT 1/1/16</u> Baby was comfortable.
	4:30AM	New pr line secured & ex ventilation ① Side hand. → <u>mis</u> <u>OT 1/1/16</u>
	6AM	Do chart neuter.
	8AM	Baby details handing over given to morning duty S/N. → <u>mis</u> <u>OT 1/1/16</u>
		morning duty 24/6/25
24/6	8AM	Baby details is handover taken from night duty staff. Baby is active & alert. → <u>Jeyasri</u> <u>020620</u>
	9AM	T-99.1°F Baby is vitality stable.
	10:30AM	Reassessment is done T-101.1°F Informed to Dr. Ravi Baghel Sir, Sir advised Symp 2.5ml to give, given to the baby. → <u>Jeyasri</u> <u>020620</u>

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NURSES NOTES (USE BALL POINT PEN ONLY)

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		continued notes 24/6/26
24/6	11AM	Dr. sravanthi mom after seen the baby Baby vomiting 1 episode. that time Sup. # So mom advised to give Dylam 15mg Dr up Dylam 15mg given to the baby T=101.9°F S Jayasri
	12pm	Reassessment is done T=100.4°F Baby is active alert Dr fire patient S Jayasri
	1pm	Reassessment is done T=98.2°F Baby is vitally stable.
	2pm	Baby details is handover given to the evening duty staff S Jayasri
		Evening duty 24/6/26
	2pm	Baby taken over from morning duty S/N.
	4pm	Baby vitals stable monitored & monitoring n/af/ol/bu
		S/B Dr. sravanthi mom no advised continue the same.
	5pm	Baby handover taken from 11th floor staff. n/af/ol/bu

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Baby is conscious & oriented vitals are checked vitals are Stable.
	6:45pm	Temp - 100°F → Eng para 100 mg IV given and also baby had. Shivering. Baby passed → sushmitha motion small amount 3 times born
	8pm	Reassessment done. Temp - 101°F Tepid sponging given. Baby details handing over given to Night duty staff —→ sushm born
		/

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11-05-2025

Dr. BRAVANTHI KOSURI



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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Night duty [24/6/26]
26/6/26	8pm	PT hand over taken from evening duty staffs. PT is conscious and Oriented.
	9pm	Check vital sign & record Reassessment Temp - 99.8° → G. Visi OT 23/5/26
		Due Medicine given.
		sy P: - Domphalac withhold in night.
		Dr. Sravanthi mam phone call OK!
	11pm	Maintain & Lo chart.
		Iv line Portus - NO
		Swelling → G. Visi OT 23/5/26
	12:45pm	Temp - 99.9° Aug! Para - 150mg Iv given. → G. Visi OT 23/5/26
	2am	Reassessment done. Temp - 99.8°
		Maintain & Lo chart.
		NO Other complaints.
	6am	Due Medicine given.
	8am	Hand over given to morning duty staffs → G. Visi OT 23/5/26

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11-05-2028

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NURSES NOTES

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		morning ^{evening} duty 25/6/26
25/6	8 AM	Baby details is handover taken from night duty staff Baby is active up alert — P Jayasri 0204460
	8:40 AM	T = 101.6°F Syp. Paracetamol 2.5ml given to the baby as per drug chart Informed to Dr. Raviraghul sir. — P Jayasri 0204460
	10 AM	Reassessment Done Temp — 98.1°F
	11 AM	IV Antibiotics given to the baby Dr line patent — P Jayasri 0204460
		Dr. Sravathi mam came and seen the baby Advised continue IV Antibiotics for 2 days. — P Jayasri 0204460
	1 PM	IV chart is maintained no further complaints
	2 PM	Baby details is handover given to the evening duty staff P Jayasri 0204460 Continue Notes
	3:40 PM	Temp — 98.6°F — Advised to give Sponging — Suba 0204460
	4:30 PM	Temp — 101.3°F → Inj. paracetamol Given. 2.5ml

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- ☐
- Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
25/6	5pm	S/B Dr. Sravanthi . Advised to stop Inj. piptaz to start Inj. Meropenem 440mg IV and If line out remove IV line, secure new IV cannul and take CRP+CBC Reserve → S. Cholesterol, LFT, Rpt Inj. Meropenem 440mg . 0.5mg test dose given → No reaction then full dose given. — S
	5:30pm	Temp. Reassessment done — Temp. 100.3°F
	6:20pm	IV cannula is swelling IV line removed.
	7pm	New IV line secured and Samples are collected — Sub IV Antibiotic given. — Sub
	8pm	Also Chart maintained Pending ques given to Night duty staff — Sub

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NURSES NOTES
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☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		<u>Night duty on 25/6/26 :-</u>
<u>25/6/26</u>		
	8pm	=> Baby details handover taken from evening duty S/N. -> <u>AH</u> 607844
		=> While receiving the Baby conscious & active good. -> <u>M</u> 607844
	9pm	=> vitals are checked & Recorded. => Baby on soft diet. => Iiv line patterned. -> <u>AH</u> 607844
	10pm	Due medicine given. No other complaints
	11pm	PI slept well. -> <u>Givisi</u>
	2AM	Temp - 102.5°F SYP: Ibuprofen 2.5ml Oral given
	3AM	Reassessment done - Temp - °F Due medicine given. Maintain SLO chart. No other complaints.
	6AM	Due Medicine given -> <u>Givisi</u> 012357
	8AM	Today wt = 11.35 Kg. Hand over given to Morning duty staffs -> <u>Givisi</u> 012357

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NURSES NOTES

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
26/6		<u>morning duty on 26/6/25</u>
	8am	Baby details taken over the from night duty s/n. Baby was Caucasian and oriented. In his pattern. Tf on's stop. No chest heave/fn.
	9am	checking vital signs and Recording vital in stable. → sushmitha borat
		Due medication are given as per doctors order. Baby: taking oral fluids. → sushmitha borat.
	12:30pm	Baby vitals are checked & Recorded. Temp - 99.6°F → Tepid sponging given Reassessment done.
	1pm	Temp - 100.9°F → Dry. Parva 150mg iv given. → sushmitha borat. Reassessment done T - 98.9°F
	2pm	Baby details handing over given to Evening duty Staff → sushmitha borat.

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- ☐
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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
26/6	2pm	Evening duty on 26/6/66.
		Patient details handed over taken from morning duty S/m
		Pl. is conscious and orientated
		vitals are checked and recorded.
	3pm	IV Line is present. — Sub 60
		Baby had a soft diarr.
	5:00pm	Re-assessment done vitals are stable
		Se record —————> Stency 02/06/66
	5:30pm	Dr. Praanithiam seen by baby advice to continue the same
		Vitals are stable.
	6pm	2b chart maintained.
		No any other complaints — Sub 60
	8pm	Handing over prior to Night duty S/m
		— Sub 60

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☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		<i>night duty</i>
<i>26/6/26</i>	<i>8pm</i>	Pt hand over taken from evening duty staffs. Pt is conscious and oriented.
	<i>9pm</i>	check vital sign & record. maintain & lo chart → <i>Gilvisi</i>
	<i>10pm</i>	syp: Duphalac - 5ml oral given. No other complaints.
	<i>11pm</i>	Baby slept well. no complaints → <i>Gilvisi</i>
		Due medicine given. <i>012m</i>
	<i>12:30am</i>	check vital sign. Temp-100.9 F. <i>By: Para & V given. Informed to Dr. Sravanthi mam.</i>
	<i>1:30am</i>	Reassessment done. Temp-98.5 F. Maintain & lo chart.
	<i>5am</i>	check vital sign & record. maintain & lo chart → <i>Gilvisi</i>
	<i>8am</i>	Hand over given to morning duty staffs → <i>Gilvisi</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

(F)



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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)
27/6		<u>Morning duty on 27/6/26</u>
	2AM	Baby details taken on the from night duty s/n. Baby was conscious and oriented. Dr. Lin patient. Do chart new fee. → <u>Wing 196</u>
	9AM	checking vital signs and recording. vital is stable.
	9.10AM	Dr. Sravanti's room rounds done. to continue same treatment. → <u>Wing 196</u>
	10am	Medication was given as per doctor order.
	11am	There is no any complaint in Baby side.
	1pm	vital signs are checked and recorded. <u>Ref 64734</u>
		Maintain I/O chart.
	2pm	Hand over given to evening duty staff <u>Ref 64734</u>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

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Dr. SRAVANTHI KOSURI



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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)
		night duty (04/6/2021)
	8pm	PT hand over taken from evening duty staffs. PT is conscious and oriented.
	9pm	check vital sign & record. Maintain I/O chart. —————> G. Visi Dose medicine given. 01/23/21 now 20 line pattern. One plain sample preserve in lab Dr. suavanthi mam advice.
	1Am	PT sleep well. No other complaints —————> G. Visi 01/23/21
	3Am	Maintain I/O chart.
	5Am	check vital sign & record.
	6Am	Dose medicine given
	8Am	Hand over given to morning duty staffs —————> G. Visi 01/23/21

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(USE BALL POINT PEN ONLY)

- ☐ Drug Allergies .

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

(USE BALL POINT PEN ONLY)

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Night duty (28/6/26)
	8pm	Pt hand over taken from evening duty. Pt is conscious and oriented.
	9pm	Check vital sign & record → G. V. S. / 12/26
	11pm	Due Medication given. Maintain Plo Chart. IV line Patter no swelling → G. V. S. / 12/26
	1Am	Check vital sign & record. Maintain Plo Chart. Pt slept well.
	5Am	Check vital sign & record.
	7Am	Maintain Plo Chart. Due Medication given → G. V. S. / 12/26
	8pm	Hand over given to morning duty. Starts → G. V. S. / 12/26

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

Patient Sticker



(USE BALL POINT PEN ONLY)

- ☐ Drug Allergies

(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)

Morning duty on 29/6/26

29/6	2Aen	Baby details taken over from the night duty staff
		Baby was conscious and active
		Good vitals stable
		→ Dr. Jayanthi seen by baby
	10AM	advice to discharge today
		file send to billing dept

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