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: .....

SNC-00030250 IP24-00008978
Mrs MADHUSMITA SAHOO
03-07-1986 40 Y 0 M 19 D (F)
Dr. SURA PUSHPALATHA

UHID No: .....

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
22/7/26	6 pm	RR	Moved OT	[signature] 60-74-40
22/7/26	9PM	OT	RR	[signature] 60-74-40
23/7/26	11.30AM	RR	Ward	[signature] DHUSM

CROSS CONSULTATION VISIT

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
22/7/26	Blood Reservation	8384	
22/7/26	Biopsy Lungs	9279	
23/7/26	CBC	9294	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
22/7/26	Lap Equipment	6.30 PM	6.50 PM	8445	
22/7/26	ligasure	7.00 pm	8.00 pm	Not raised to be follow (demo set)	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
22/7/26	IV Placement	01 ✓	8398 ✓	
22/7/26	catheterisation	01 ✓	8450 ✓	

ANY OTHER INFORMATION:

IN TIME : 6.00pm OUT TIME: 9.00 pm

SURGERY : Diagnostic Laparoscopic And TAH C B/L Salphigectomy

SURGEON : Dr. SURAPUSHPALATHA / Dr. ARUNVICTOR.

ANESTHETIST: Dr. NAVEEN.

ANESTHESIA : V G.A.

DURATION : 3hrs

Date: ..... Time: ..... Prepared By: .....

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
	Ramya. IC 0189464		

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SURGERY DETAILS

Date : 22/07/2026

Patient Name: MRS. MADHUSMITA SAHOO Date of Birth: ..... Age: 40Yrs

Gender: Female Ward : RR UHID No.: SNC-00030250

Date of Surgery: 22/07/2026 ☐ OT -1 ☑ OT -2 ☐ OT -3 ☐ OT -4 ☐ OBG OT-1 ☐ OBG OT-2

Name of the Surgery : Diagnostic Laparoscopic Ē TAH ĒB/L Salphigectomy

Time in : 6.00 PM Time Out : 9.00 PM

		NAME	AMOUNT
1.	Surgeon	DR. SURAPUSAPALTHA/DR. ARUNVICTOR	
2.	Anaesthetist	: DR. NAVEEN	
3.	Assistant Surgeon	: DR. YUVARANI	
4.	OT Technician	: TECH. SARAN	
5.	Circulating Nurse	: S/N MANIGANDAN	
6.	Assistant Nurse	: S/N RAAVANI	

Special Equipment:
☑ Laparascopy (6.30 pm to 6.50 p.m) ☐ Broncoscope ☑ Harmonic (Ligasure 7.00 p.m to 8.00 pm) ☐ Morcelator (Not required to be follow (Demo set))
☐ C-ARM ☐ Cystoscopy ☐ Versa Point ☐ Liver Cusa
☐ Neuro Cusa ☐ Others .....

Signature of the Surgeon

U. Mayganden 02130
Signature of Circulating Nurse

Order No: 8455 Order by: 0145

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

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CONSUMABLES OF OT

Circulating staff : Manikandan Technician : Saran Date : 22/07/2026 Time : 6.00 P.M. to 9 PM

Anaesthesia Disposables	Qty Issued	Qty Used	Surgical Disposables	Qty Issued	Qty Used	Disposables (Baby Side)	Qty Issued	Qty Used
ET tube (3.0 CUFFED)		01	Major Pack, Hysterp pack		01+01	Inj Vit.K		
LMA			Sutures 1. 2347		03	Cord Clamp		
ECG leads : A / P / N		03	1. 4242		01	Suction Catheter		
HME filter : A / P / N			1. 1326		01	Feeding Tube		
Syringes : 10 cc		01				Vaccum Suction Set		
05 cc		02	Gloves 6½ (P.F) IPF		01+5	Surgical Gloves		
02 cc		04	6 (P.F)		02	Gauze Pack		
01 cc			6 (S.F), 6½ (S.F)		01+02	Syringe 1ml / 2ml		
Cautery plate A / P / N		01	Surgical blade 22, 11		01+01	Surgical Blade # 20		
IV set			NG tube			Koochies (S)		
RL		02	Cautery pencil		01	OPEN CIRCUIT (ADULT)		01
NS : 10ml / 100ml / 500ml / 1000ml		05	Koochies					
INJ. BROXAMOL		02	Ointments					
INJ. ANEMEPARA		01	Suction Catheter			OXYHEM MASK (ADULT)		01
Fentanyl (ALREADY RAISED)		01	Cap, Mask					
Morphine			Gauze Pack		03			
Ketamine			Mop Pack		02	R/o Gauze		01
Propofol		02	Steristrip			3mm SKIN		02
Rocuronium			Underpad		01	LOX Jelly		01
Glycopyrolate		01	Draw sheet					
Myopyrolate		01	Abgel		01			
Ondansetron		01	Foleys catheter "14"		01			
Pencan 25g/ Spinal Needle 22			Urobag Uoometer		02			
Bupivacaine 0.25% (2ML) ANAMOL		01	Chest Drainage Catheter					
Bupivacaine 0.25%(Heavy)			Romodrain bag					
Antibiotics			Bandage					
INJ DEXA		01	Tegaderm 8582		03			
Suppositories			Ioban					
Anamol : 80mg / 250mg / 170 mg			Double J Stent					
Supridol : 100mg (5mg)		01	Vaccum Suction set		02			
Justin : 12.5 mg / 25mg / 100mg			Plastic Bed Sheet		02			
Tab. Misoprost : 200mg			Betadine Solution					
VERMOLENE (1000MG)		01	Microshield					
INJ ARTAS L		01	Cotton Balls					
20ML SYRINGE		01	Latex Gloves					
D WATER		05	Ramdione Scrub					
			Saral					

Surgeon Anaesthesiologist Nurse OT Technician

Order No. : 8455 Ordered by :

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Investigations	
	13/7/26	
	Hb - 10.7gm/.	Blood
	PCV - 33	Grouping typing - B +ve.
	TSH = 1.61	
	Urea - 11	HCV
	Creat 0.8	HBsAg NR.
	S. uric acid 4.5	HIV I/II
	Na - 142	
	K - 4.7	PT - 12
	Cl - 108	INR 1.09.
	T.bil - 0.6	
	OT/PT 22/10	USG :- (3/[illegible]. 9/6/2026).
	FBS - 85	uterus - 10x10cm
	TC - 5160	subserosal anterior wall
	Plt 1.82	degenerative fibroid.
	HbA1c - 4.4	ET - 6.2mm
22/7/26 2:15pm	4.)R	Dr VANDANA
		[illegible]
	Pt comfortable.	1) [illegible] at 5PM
		2) IVF 1 ORL
	no fresh c/o.	@ 100ml/hr
		3) Consent to be
		taken.

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

[illegible] 22/7/26

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	S/B Dr. Ambuvizhaval	
22/7/26		
9pm	TAH c B/L Salpingectomy; done / POD	
	O/E: Afebrile	
	[illegible]	
	[illegible]	- NPO
TB		- IVF
PR: 80/min	[illegible]	- TO C87
BP: 110/70mm	PA: soft	
	Dressing clean	[illegible]
	Hb normal	
U/O clear		
Adeq		
To do: CBC tomorrow morning @ 7am		
	S/B Dr. Ambuvizhavi	
23/7/26		
6.30am.	No complaints	
POD 1	O/E Afebrile	- NPO.
	[illegible]	- IVF [illegible]
	Normal	- TOCM
TB	[illegible]	
PR: 80/min		[illegible]
BP: 110/70m	PA: soft	
U/O clear	Dressing clean	
Adeq		

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

Shift toward

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NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/7/2026. 9 AM.	S/b Dr. Vidhyalakshmi	
	PT reviewed.	
	O/E: C/fair afebrile.	Adv
	Tp PR: 80/ BP: 110/70 mmHg	
	PPPD PA - soft	- Liquid diet
	BS sluggish.	- IVF @100ml/h
I/2900ml O/2060ml	LSCS scar (+) soakage (+).	- CAD / I/O chart
	L/E no abnormal discharge PV.	- follow drug chart
		- vitals monitoring
Not passed flatus		- Ambulation from 3pm.
		- w/f wound dressing
	Shift to ward	- Infoam SOS.
23/7/26 4:30pm	G/ B. PRIYADARSHINI	
	GC fair	Plan
	no fresh c/o	① follow drug chart.
BP 100/60mmHg		② Liquid Diet.
HR - 90/min	flatus not passed.	③ IVF to continue
	- urine clear + Adequate.	④ Physiotherapist opinion

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/07/26	Obs Dr Suvarani	
9pm	s/p TAH c B/L salpingectomy POD-1	
		Rp
T: N	O/E: Pt is fair, afebrile	Ambulation
BP - 100/60	no pallor, no pe	Liquid diet
mm Hg	CVS/ RS - NAD	BP/ PR monitoring
PR - 76/min	P/A - Soft; BS+	Follow drug chart
SpO2 - 100%	no wound soakage	Physiotherapist (w)
		Inform (SOS)
not passed		
flatus		
	If flatus passed → semi solid	
	diet	
	on Buprenorphine patch	
	Hb - 9 g/dl	14132
	PCV - 26	
	Plt - 2 lakh	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/7/26 2:30pm	c/b	Dr. VANDANA
	Post TAH c B/L salpingectomy.	
	POD - 2.	
	BP - 104/70mmHg CVS, Resp, U3 } NAD	
	PR - 84/min	
	Afebrile.	
	P/A -	1) Follow Drug chart.
	Dressing intact	2) vitals monitoring
	no soakage.	3) Soft Diet.
		4) Mobilise well
	P/V clear	
	→ Discharge	5) planning of discharge
	Catheter removed.	6) ... S/D
	Pt voided.	tomorrow
	no fresh c/o	
	1st ... given	
		1) ... to ward.

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	S/b Dr. [illegible]	
24/7/26 8.20pm	No complaints	
P-[illegible]	O/E cutaneous	
	[illegible]	- [illegible]
76	Nopain/PE	[illegible]
PR: [illegible]	CS/NM	- vitals charts
[illegible]	[illegible]	- T [illegible]
	[illegible]	
		[illegible]
	C/D/W Dr. Sura. P.	
27/07/24 8AM	45/B Dr. VANDANA	
	Post TAH c B/L salpingectomy	
	POD - 3	
BP - 112/74mmHg		
PR - 82/min	GC fair	t/f
Afebrile	Resp / NAD	
	CVS	1) Vgt Diet
	P/A	2) Plenty of
	Dressing intact	fluids
	mild soakage (+)	3) Continue Drug
		chart
	Stools not passed	4) Plan D/D
	voiding freely	today.
	well mobilized.	
		S/D

Pushpalatha [illegible]

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OPERATION NOTES

Dr Arun Nair

Surgeon : Dr. Sura pushpalatha /	Asst. Surgeon : Dr. Yuvarani
Anesthetist : Dr. Nareen	OT Nurse : S/N. Bhavani
Pre-Operative Diagnosis: AUB- Fibroid.	
Surgical Procedure : Dx lap Total abdominal Hysterectomy & B/L salphipectomy	

Weight : 49 kg	Date : 22/07/2026	Start Time : 6PM	End Time : 9PM

Post Operative Diagnosis: ↓SAP ↓GA, patient in low lithotomy position
ports painted and draped. A 10 mm supra umbilical comera
Peri-Operative Complications: port made. Pneumoperitoneum created uterus seen.
1) Uterus appears N 16 wk size intramural
Operation Notes: Multiple fibroid seen - largest ~~Submucosal~~ fibroid
Findings: in the fundus measuring 10x8 cm.
2) B/L Tubes and ovaries visualised appears normal.
Two working ports made on the right side of the abdomen.
(5 mm)
As the uterus size is bulky, intra operatively round ligament
Procedure Notes: were unable to visualise.
After getting informed & written consent from patient's
attender; surgen converted to abdominal Hysterectomy.
A supra umbilical pfannenstiel incision made. Incision deepened
Abdomen opened in layers. Uterus along with fibroid externalised.
TAH proceeded by clamping and cutting B/L round ligament
and B/L ~~Tubes~~ cut using hand ligature. TAH proceeded by
clamping and cutting & ligating B/L Uterine vessels & B/L cardinal ligament

Amount of Blood Loss: 200 ml	Blood Transfused (in ML)

Name and Number of Surgical Specimen sent for examination:
Uterus & cervix (Fibroid) sent for HPE.

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POST-SURGICAL CARE PLAN FORM

Post-Operative Monitoring Parameters /Frequency:

- B/L uterosacral clamped and cut using ligasure
- Uterus + B/L tubes along with cervix (include fibroid) removed from vaginal vault. vault closed c 1 vicryl.

Wound Care:

- specimen removed abdominally sent for HPE.
- Hemostasis achieved

Drain /Special Lines/Catheters:

pad and instrument count verified. Abdomen wound closed ~~vaginal toilet~~ in layers. Peritoneum closed c 1'0 chromic catgut. Rectus sheath closed c 1 vicryl. Skin closed c

Special Patient Positioning and Requirements: 3·0 monocryl. sterile dressing done. no undue bleeding PV. vaginal Toilette done.

Nutritional Instructions:

Rx NPO x 6 hrs
NF 2 @ RL } @ 100 ml/hr
2 @ NS
1 @ DNS

When to Start Mobilization:

6 MDT instructions

Special Referrals:

BP/PR monitor
(B1) Inj Supacef 1.5 g IV BD

The new order for all required medications documented in the doctor order/medication sheet:

☐ Yes ☐ No

Inj Pan 40 mg IV OD

Any Other Post-Operative Care Needed including Required Follow Up

Inj Para 1g IV TDS

Name of the Surgeon: Dr. [illegible] / Dr. Sura pushpalatha

Signature of the Surgeon: [signature]

Date & Time: 22/07/2026 9pm

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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)	SIGNATURE
		Admission Notes	
28/7/26	12.00 pm	Mrs. Madhusmita Sahoo 40 yrs / Female	
		$P_2 L_2$ Pre. NVD ST note done.	
		Complaints heavy menstrual bleeding	
		mass in lower abdomen, now Plan	
		for Fibroid uterus for TLH,	60
		Pt vital signs are stable &	
		Recorded, Pt Preparation done	
		IV line Patten, Pt on liquide	
		diet, No npo still now,	
	12:15 pm	Enema given at 2:15 pm,	
		Pt passed stool, IV fluid	
28/7/26	3 pm	RL 100 ml/hr on flow, Pt not	60
		shifted to ward, Pt on Recovery	
		Only Pt vital signs are stable	
		IV line Patten, IV fluid RL	
		100 ml/hr on flow, Pt get	60
		sleep now. Pt on NPO from 3 pm	
	5 pm	Inj. Pan 40 mg IV given, Inj. omeset	
		4 mg IV given, Inj. Supacef 1.5 g IV	
		given, Pt vital signs are stable	
		& Recorded, IV line Patten,	
		IV fluid RL 100 ml/hr on flow.	60
	5.55 pm	Pt shifted to OT	
		OT Notes	
		Patient Two Identification	
	6-00 pm	Done. To all team members	

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		Patient & confirm. & all Team members (i)s in Done consent / Procedure checked and verified.	
20/07/2016	6.30 pm	patient prodeures TLH / Under GA. patient position Lithotomy Timout done. Uterine Op. procedure converted to open. Hysterectomy & Attender confirmed & Dr. Suraj pushpalatha Mam. Time out done. Specimen sent to Histopathology Mop counts and Instruments counts checked verified.	
21/07/2016	9.00pm	patient shifted to recovery all Records and Reports Post op order. Op file — 1 Op file — 1 Hand over given to recovery staff.	
		U. Mary 21/7/16	

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		Night duty Received on 22/7	
22/7	8pm	pt details handing over taken to Evening duty staff pt vitals are He stable procedure ongoing OT inside. →	
		Received Note	
22/7	9pm	pt Received OT to PR at 9 pm pt vitals are He stable BP-101/60 mm/hg, pulse 60 bpm, spo2 100% IVF NS 100 ml/hr ongoing urine out put clear →	
		Re-Assessment Note.	
22/7/26	10 pm	pt Re-Assessment done vitals are stable. Bupinjeric Batches given, Inj. Diclofenac given, pt in NPO, follow the post-Op Orders. Biopsy sended to Lab, report to be follow, IVF-100 ml/hr ongoing →	
22/7/26	11PM	urine output 50ml desired, Informed to Dr. Naveen sir, continue the IVF-100 ml/hr ongoing. If leaction occurs inform immediately, Order carried out →	
23/7/26	12 AM	pt sleeping well, IVF-100 ml/hr ongoing, urine output clear. desired, →	

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		Continous Notes.	
23/7	3AM	pt Npo break finished No any other complication vitals are stable Bp- 110/70 mm/hg, pulse 64 bpm, spo2 100% IVF NS 160 ml/hr ongoing output clear pt Injection paracetamol 1gm	
	4AM	IV given →	
		Inj pan 40 mg iv given	
	5AM	Inj - supasef 1.5g iv given	
23/7/26	6AM	Morning care given to the pt. CBC sample sended to Lab. IVF - 100 ml/hr ongoing. No any other complaints. ← →	
	7AM	CBC report awaited.	
	8AM	pt details are Handover given to Morning Duty Staffs. →	
	8am	Morning duty Notes 23/7/26 pt details hand over taken from night duty staff. pt conscious & oriented. pt Vital's are Stable. The vital checked & monitored. IVF 100ml/hr ongoing. urine out put clear. I/O chart maintained. pt provide comfortable bed position. pt are Stable. → ?	

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☐ Drug Allergies .....

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
23/7	11 Am	Re Assessment Pt vital's are Stable. The vital checked & monitored urine output clear I/o chart maintained. Pt for clear liquid diet IVF 100ml/hrs ongoing. Pt provide comfortable bed position. Pt are Stable. ——→ Pt dressing done Pt condition for. DR. Sura pushpalathea mam. Pt Shifted to RR+0 Ward Pt details hand over given to ward Steff. ——→ Received notes.	7607628 7607628
23/7/26	12.30pm	Pt Received RR to ward at 12.30 pm. Pt vitals are the Stable. BP: 103/65 mmHg, SpO2: 99%, HR: 72 bpm, IVF RL on going. 100ml/hr. Iry. Parga given. ——	0107
	1.30pm	RO assessment done. Vitals are Stable. ——	0105A
	2.00pm	Pt details are Handover. given to Evening duty —— SN.	0105A

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☐ Drug Allergies .... Evening duty 23/7

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
23/07	2.00	Pt details Hand over, taken from morning duty S/N	Jany
	2.30	Vitals checking done.	Jay
	4pm	Pt Silence Pattern / VIP Score 0 C/o no any other complain IV fluid on flow	
	5pm	patient was walking no any other complain	
	6pm	Re-assessment done vitals once stable → Flo chart monitoring	[illegible]
	8 Pm	~~Baby~~ patient details handing over to night duty Staff →	[illegible]
		night duty 23/7	
	8pm	patient hand over taken from evening patient vitals checked patient on liquid diet → patient IV line (+)	
	10pm	CBD (+) → patient no othe complaints	[illegible]

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030250 IP24-00008
Mrs MADHUSMITA SAHOO
03-07-1986 40 Y 0 M 21 D
Dr. SURA PUSHPALATHA

NURSES NOTES

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

☐ Drug Allergies .....

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
	12Am	urine output well	
		patient kept well.	
		patient IVF inflow	
	5Am	IV medicines given	Asst Nurses
	7Am	patient I/O Chart maintained	
	8Am	hand over given to morning duty	
		Morning duty 24/7/26	
	2Am	Pt details handing over from Night duty SIN	
	10Am	Pt vital stble Pt conscious and oriented Pt no any other complaints Pt I/O chart maintained.	Nurse Asst
	11Am	Dr. Sura Prema Nan rounds done. Advised to catheter removed. and soft diet given. Pt vital stble Pt conscious and oriented.	Nurse Asst.
	1Pm	Pt urine Passed Pt VS Stble Flochart maintain	Nurse Asst.
	2Pm	Pt hand over given evening duty SIN	Asst Nurse

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030250 IP24-00008978
Mrs MADHUSMITA SAHOO
03-07-1986 40 Y 0 M 21 D (F)
Dr. SURA PUSHPALATHA

NURSES NOTES

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☐ Drug Allergies .....

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Evening duty 25/7/26	
25/7	2pm	pt taken over from morning duty s/w pt is conscious & oriented. pt vitals stable, recorded & monitoring	
	3pm	s/b Dr. vandhana mam Advised to plan Inj Fcm 1gm. and pt shift to recovery. pt handing over to recovery staff	
	4.20pm	Received Notes	
24/7	4.20 pm	Pt Received from RR Pt vitals are stable Inj. Fcm 1g in 200ml NS Started No Allergy and No Other complaints Pt consious pt Active	
		Re Assessment	
24/7	5.30 pm	Pt vitals are stable monitoring The vitals maintained I/O chart Provided position pt shifted to ward as per doctor order	

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