

ACTIVITY RECORD FOR BILLING

SNC-00030560 IP24-00008776
Baby Of AYSHA BANU S
25-08-2026 0Y0M0D4H (F)
Dr. MONISHA R

Name: ...

UHID No



Consultant:

Dept:

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
25/8/26	7pm	LDR	NICU	<i>[Signature]</i>
29/8/26	12pm	NICU	312	<i>[Signature]</i>

CROSS CONSULTATION VISIT

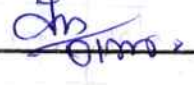
	Doctor Name	Date	Order No.	Signature
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
25/6/26 @	Blood grouping	7789 ✓	[Signature]
	RBS (POCT)	7792 ✓	[Signature]
26/6/26	RBS (POCT)	7792 ✓	[Signature]
26/6/26	CBC, CRP, WBC	7813 ✓	[Signature]
26/6/26	COST Addon for Special test	7814 ✓	[Signature]
26/6/26 am	RBS (POCT) ✓	7815 ✓	[Signature]
26/6/26	Blood culture ✓	7841 ✓	[Signature]
26/6/26 3pm	RBS (POCT) ✓	7844 ✓	[Signature]
26/6/26 @ 4pm	RBS (POCT) ✓	7851 ✓	[Signature]
26/6/26 3am	RBS (POCT) ✓	7851 ✓	[Signature]
26/6/26	VBW ✓	7872 ✓	[Signature]
27/6/26 @ 3pm	RBS (POCT) ✓	7905 ✓	[Signature]
27/6/26 @ 4pm	RBS (POCT) ✓	7906 ✓	[Signature]
27/6/26 2am	RBS (POCT) ✓	7907 ✓	[Signature]
28/6/26	SRK, CRP, RBS ✓	7919 ✓	[Signature]
28/6/26	TCR (POCT) ✓	7957 ✓	[Signature]
29/6/26 11am	CRP ✓	7969	[Signature]
	Radiology		
25/6/26 @ 8:20	X-ray PA view ✓	4124 ✓	[Signature]

[illegible]

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
26/6/26	IV placement	① ✓	2794 ✓	
28/6/26	IV placement	① ✓	3288 ✓	

ANY OTHER INFORMATION:

Date: 29/6/2026 Time: 12:50pm Prepared By: Nanthini

Staff Nurse 	Shift / Ward Ranya, k 018744 	Billing Assistant	Billing Supervisor
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/6/26 9 AM	C/S/D DR. SHANMUGASUNDARAM	
	Δ - 15 HCL / Term (38+5 weeks) / NVD / SGA / Girl / Term MSK	
	Baby on NP-O ₂ @ 1L/min.	
	on OR feeds @ 12 ml 2 Hrs	
M/AT A+		TV - 60 ml/kg/day
	B.W - 2.389 kg	
	T.W - 2.381 kg (↓ 8 gm)	O/E: Mild tachypnoea @ No retractions/grunting
	Vitals:	
	CRP - 93 mg/dl	HR - 130/min
		SpO ₂ - 98-100%
		RR - 60-65/min
		BP - 62/39 (48)
		Urine - 0.6 ml/kg/hr
		Stool - 4 times
		Plan
		1) Monitor vitals
		2) W/B tachypnoea
		3) Stop
		4) OR feeds with OR P. Shanmug 180630
		5) CRP AGHng.
	Q W	Line → CRP, CRP, VBA
		Shr Blood C/S.



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/6/26	S/B Consultant	
	<u>38+5 / NVD / 2-3 kg / SGA / MAS</u>	
	On NPO ₂ @ 1L/mt	
	Intermittent tachypnoea ⊕ 60-70/mt	
	SpO ₂ : 99-100%	
	No retractions	
	Hemodynamics stable	CXR s/o non specific infiltrate ? MAS
	Activity ⊕	
	CBGs ⊕	<u>Plan</u>
		① T/s CBC CRP Blood gas
	R. Monish 96952	② Start Abx piperacillin + amikacin 2 of CRP +
		③ Try paladar feeds + DBF if rates < 60 2 off 0+

SNC-00030580

IP24-00008778

Baby Of AYSHA BANU S

25-08-2026

0 Y 0 M 0 D 17 H (F)

Dr. MONISHA R



(4)

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It takes a lot to treat the little.

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/8/26	S/B Dr. Ravi Rajal	
6:00 AM	Term (38+5) / NVD / SGA / Girl / Thin msc.	
	Baby on room air since 1 PM	
	Vitals	
	HR - 130/min	B.Wt - 2389 gm
	RR - 66/min	F.Wt - 2381 gm
	SpO ₂ - 93-94%	
	BP - 62/41 (45)	
	25/8/26	
	Baby cry few/active - good	
	ORV - 48mc (12hr)	
	1.2mc/kg/hr	
	Cast steel at 7 AM	
	No vomiting, No defecation	
	On PIPAZ & AMIKACIN	
		Rx
		- Restart O ₂ @ 0.6L/min
		- Vitals monitoring
		- IF continue
		INJ. PIPAZ 5
		INJ. AMIKACIN
		- OG feed - 15 mc
		Gandhi
		- CBA, Gandhi

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/6/26 9 AM	U/S/B PR SHANMUKHITHA	
	38 ⁺⁵ weeks / NVD / 2.3 Kgs / SGA / MAS / CONS.	
	On NP-O ₂ @ 0.6 ml/hr since 6 PM yesterday	
	B.W - 2389 gms Intermittent tachypnoea (+)	
	Y.W - 2381 gms SpO ₂ - 95% (+)	
	F.W - 2328 gms (53 gms) HR - 130/min	
	CKG - 89 mg/dl RR - 60/min	
	Hemodynamics stable	
	Cumulative → 2.5%	
	Activity (+)	
MAT B AT	Feeds → 15 ml O ₂ Hely OA feeds (75 ml/bf/day)	
	Urine - 1.9 ml/kg/hr	
	Stool - 2 times	
	On:	Plan
	Inj. Piptaz (D ₂)	1) N/f tachypnoea
	Inj. Amikacin (D ₂)	2) Monitor vitals
		3) CKG ABHely.
		R. Shanmukhitha 15.06.30



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/6/26	AS: Term (38 ⁵)	SGA NRD Thin ASL C/DAB/gent
4:17 AM		St-wt: 2.389 kg
	Abi. Baby examined on RA (off O₂ from 3:00 PM) on OG feed 15 ml Passed meconium a meconium OLB: C/I/A - good AT @ level. WOB - (N) No tachypnea RR → 50/min (on RA) HR → 130/min BP: 92/58 mmHg T_{tr}/T_{re} CR < 3 sec	
	Given Hep-B vaccine	S/E: C/S/S, S, (P) RS: B/L AEB P/A: soft aus: none. (P)
	16/7/26 Dr. Mas.	Advice - w/ Resp. distress - vitals monitoring - OG feed 15 ml @ 2nd hly - Sog. Pipter - Day. Amikacin } D₂ of AB



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/06/26	S.B - Dr. Divakar	
12-50 PM	A - Team (38+5)	SGA rvd MAS.
	<u>Assess:-</u>	
	i) Respirations:-	
	or Room air; SpO ₂ yesterday	
	Maintain Saturation	
	RR - 56-58/min	
	SpO ₂ - 97% @ RA;	
	ii) Feeds: or OG feed @ 80cc/kg/d	
	+ EBM	
	Tolerating well;	
	iii) Sepis:- or In. PIPITAZ & AMIKACIN	
	repeat	
	CRP	39 → 12 mg/dl
	iv) - Baby milk Teleni	Plan:
	CRP and	- Give OG feed @ 100cc/kg/d
	cm / feed	(15-20ml)
	44/16	- Give IV antibiotic
	PA - Soft; no distension	- m/f distress

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GRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/6/26 4:40 PM		C/S B - Dr. Anas
	Δ: term (38 ⁺)	SGA NUD MAS.
	Bt wt: 2.389 kg	
	Pd wt: 2.323 kg	- On Room air
	20 gm gain	- On DBF + Paladai feeds (20ml)
	O/O → 1.7 ml/kg/day	↓ 2 feeds given.
	Stools → 3 times passed.	Tolerating oral feeds.
		no desat / no apnea
		Maintaining saturation
		O/E: C/A - good
		CRAB - (N)
		No Retraction
		++/++
		peripheries warm.
		S/E: RS: B/C AEG
		CUS: S, S@
		PA: soft, no distension.
		CAS: mcm
		On Inf. piptaz + Amikacin D.
		Plan.
		1) DBF + Paladai (EBM + 15-20ml formula)
		2) IV Antibiotics (Piptaz & Amik)
		3) vitals monitoring
		4) w/t distress / warning sign

Shift to Nced.
 (Mother side)
 - 1 dose Antibiotic
 - Repeat CRP.

IP24-00008778

Baby Of AYSHA BANU S

25-06-2026

0Y0M1D

(F)



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[illegible]



NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Baby Receiving Notes:-
25/6/26		Baby delivered mode is NVD. Immident cry at Birth. Alive is female baby. Meconium stained.
		- Resuscitated done
		- Airway Clearance done
		- Inj. Vit k 1mg IM given
		- stomach wash given.
		- Tachypnea present.
		- Informed to Dr. monisha.
		- Observation in NICU.
	7pm	- Baby Shift to NICU.
		- Baby observe in the NICU.
		- vitals are monitoring
	8pm	- RR - 70b/min.
		- Informed to doctor.
	8:30pm	- CBG +engldl
		- X-ray done.
		- O ₂ 1 litre started.
	9pm	- Feed 12ml Ostomy via OG given.
		- feed tolerate well.
	10pm	- No vomiting, stool passed.
	12pm	- Ostomy feed given

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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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)
26/6	8pm	- Feed 12ml O2Hrly.
		- Intermittent tachypnea present
	8pm	- Feed 12ml via O2 given
		- no vomiting
	6pm	- morning care given.
		- Feed given
		- vit checked and recorded
		- Handover given to morning duty staff
		→ <u>Self</u> over.
26/6/26		morning duty report 26/6/26
	8Am→	Baby hand over taken from night duty staff. Vitals signs checked & recorded. O2-1L on flow
		activity is good Baby feed 12ml/FF Q2HR as per.
	10Am→	Vitals signs checked & recorded SPO2 maintained feed 12ml/FF Q2HR as per. activity is good
	11Am→	SLB Dr. monisha mam Advise Blood sample. CBC, CRP, Blood gas
		Try Pampers feed + 160 DRF
		status is good

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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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)
1pm =>		vitals sigas cheerfully reversed of SpO2 maintained; fecal / am / ff Q2HR CURT <i>[Signature]</i>
		Baby in RA @ 1PM. SpO2 maintained in RA level is 97 to 99%. and RR is 54 to 56 bpm. <i>[Signature]</i>
		O2 tube kept in position IV line secured at 1pm patting and no phlebitis. <i>[Signature]</i>
		Baby vitals are monitored & recorded. Baby vitals are stable, no vomit & distat
2pm.		Inj. piptaz 240mg IV given as doctor's order. <i>[Signature]</i>
		Q2H 12ml formula feed are given via O2 tube. Baby feed tolerate well. no vomit & distat.
4pm.		DBF are given by mother <i>[Signature]</i>
6pm.		pre feed RR is 64 bpm. So Dr. Ravi sir give order start O2 - 0.6L. and SpO2 - 97 to 99 maintained in O2.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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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)
	7pm	Reassessment was done Baby is on O ₂ . SpO ₂ maintained on 12 RR is 62bpm Note:- CBG Q6H Vitals monitoring especially (RR) Q2H 12ml FF.
	8pm	Hand over given to the next duty staff
		Night Duty on 26/6/26.
26/6/26	8PM	Hand over taken from evening staff
	9PM	Vitals stable, O ₂ - 0.6 L/min - RR - 58-62bpm
	10PM	Feeding 15ml / 2nd given tolerated
	12AM	Examine the baby, No issue
	2AM	Inf PIP tacy given as per order
	5AM	Baby Bath given weigh check & 50gm.
	6AM	Examine baby, "
	7AM	Feeding 15ml / 2nd given ok given
	8AM	Hand over given to morning staff
		Intermittent tachypnea present. monitor vitals

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



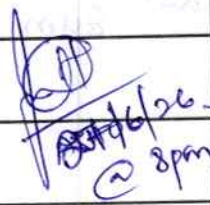
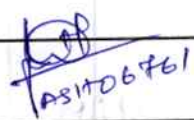
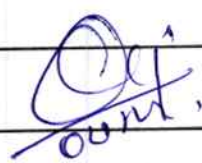
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NURSES NOTES

Date/Time		Signature
27/06/26 @ 8am.	<u>Morning duty notes on 27/06/26</u> Baby details hand over taken from. night duty staff Baby is in O ₂ - 0.6L since yesterday 6:00pm. RR is 68 to 62 bpm. Intermittent Trachypenic (+). ⇒ O ₂ tube kept in position. ⇒ IV line patterned & No phlebitis. NI Bp are monitored & recorded. SpO ₂ maintained in O ₂ Support. level is 97 to 100%.	<u>Amul</u> 021586
9am.	Baby vitals are monitored & recorded. Q 2H 15ml formula feed are given via O ₂ tube. Baby feed tolerate well. No vomiting & distat. Before feed CBG is checked & recorded value is <u>96mg/dl</u> CBG Q 6 H monitoring & recorded.	<u>Amul</u> 021586

[illegible]

NURSES NOTES

Date/Time	Night shift notes (8pm to am)	Signature
8pm	Baby details taken from evening shift staff., while receiving baby on room air, IV antibiotic getting. vitals stable, CBG monitoring. Formula feed given Q2H, CBG + vitals stable.	 ASHOB 26 @ 8pm
9pm	ID chart maintained, FF given. 20ml Q2H, u/m passed. CBG checked, 108 mg/dl.	 ASHOB 6761
	- Feed 15ml orally given	
12AM	- Feed tolerate well.	
	- Stool passed.	
	- Feed tolerate. No vomiting	
2am	- No desat. inj. piper given.	 ASHOB 6761
3am	- No any complaints. Bl checked	
6am	- Morning care given.	
7am	- Feed given.	
8am	- Hardover given to the.	 ASHOB 6761
	morning duty staff.	

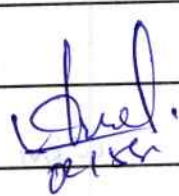
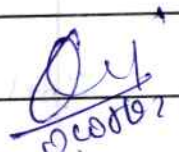
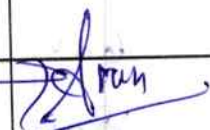


NURSES NOTES

Date/Time	Morning + Even'g duty Notes	Signature
	on 28/06/26	
28/6/26 @ 8am	Baby details hand over taken from Night duty staff	<i>[Signature]</i>
	Baby is in RA, SpO ₂ maintained in RA.	
	⇒ O ₂ tube kept in position.	
	⇒ IV line is patent, no phlebitis	
9AM	⇒ Baby vitals are monitored & recorded. Baby vitals stable.	<i>[Signature]</i>
	no any fresh complaints.	
	⇒ Q2H 20ml EBM + Formula feed are given via O ₂ tube. Baby feed tolerate well. no vomit & distat	<i>[Signature]</i> 02/08/26
10AM	DR Monisha was give orders Through phone taken samples for SBR, CRP NBS. and line secured.	<i>[Signature]</i> 02/08/26



NURSES NOTES

Date/Time		Signature
	Sample are taken and send to lab. report Trace.	
11am.	10ml EBM given remain 5ml FF are given via oxytube. Baby feed tolerate well. no complaints of vomit & distat.	
2pm	- As soon the baby vital stable.	
5pm	- FF 10ml via patadai given - feed tolerate. DAF given.	
7pm	- EBM 10ml given. - Feed tolerate well.	
	- No any other complaint	
8pm	- Hand over given to the night duty staff	



NURSES NOTES

Date/Time		Signature
	Night duty.	
28/06/2026 @ 8pm	- Baby handover taken from the evening duty staff	
10pm	- Baby is on RA	
	- feed 20ml via OG.	
	- Baby vitals are stable.	
	- monitor vitals, maintain IIO chart. DSF (Cocaine).	
12am	- Feed tolerate. No tachypnea.	
	- No vomiting / No Apnea.	
2AM	Inj BiPloy given @ Per order.	
3AM	Feeding 20ml tolerated / Palmar.	
5AM	Baby bath given weigh checked stable 1200gm.	
6AM	Feeding 20ml tolerated.	
8AM	Handover given to Morning staff.	



NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Morning duty notes on 29/06/26.
28/6/26.	8am.	Baby details hand over taken from night duty staff. Baby is on RA. SpO ₂ maintained RA.
	9am.	Baby vitals are monitored & recorded. Baby vitals stable. No fresh complaints.
		Q 2H 20ml EBM or FF are given. Baby feed tolerate well.
		IV line patented & no phlebitis complaints.
		Antibiotics Inj. piptaz & Inj. Amikacin continue to be order.
	10am.	Baby is active & alert (cry well).
	10:30 AM.	DR. Monisha mam came and saw the Baby condition and give orders Baby shift to mother side. and continue the Antibiotic.
	11 AM.	20ml FF are given via palladi. Baby feed tolerate well.
	12 pm.	Baby shifted to 3 rd floor in mother side. Hand over given to the 3 rd floor staff.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



(F)

(USE BALL POINT PEN ONLY)



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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Received Notes. At 1pm.
	1pm	Baby received to nurse to ward.
		At 1pm Baby is active.
	1.30pm	CRP 7 informed to Dr. Anand & Dr. Monica mam
		Advised to plan Discharge today.
		File Send Billing
		2pm Inj. Antibiotic After plan Discharge
		Nityaben.

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