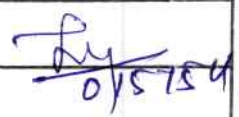


ACTIVITY RECORD FOR BILLING

Name: **SNC-00031092** **IP24-00008926**
Baby TRIWYN CHRISTYNE
 UHID No: **14-11-2023** **0 Y 8 M 2 D** (M) Consultant: Dept:
Dr. APARNA G
 Date of Admission:  Date of Discharge: Time:
 Room / Bed No: Ward: Suggested Billable bed type:

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
10/7/23	3:20pm	ER	ward	

CROSS CONSULTATION VISIT

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

[illegible]

Date _____

Name of Equipment

Connecting Time

Disconnecting
Time

Order No.

Signature

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2/11/20

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
16/7/26	Neb $\bar{c} O_2$	2	256918 ✓	<i>[Signature]</i>
17/7/26	Neb $\bar{c} O_2$	4	7071 ✓	<i>[Signature]</i>
17/7/26	Neb τO_2	3	7321 ✓	<i>[Signature]</i>
18/7/26	Neb $\bar{c} O_2$	4	7434	<i>[Signature]</i>
18/7/26	Neb $\bar{c} O_2$	1		<i>[Signature]</i>

Neb - 14

ANY OTHER INFORMATION:

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Date: 18/7/26 Time: 11 AM Prepared By: Visithra.G

Staff Nurse <i>S/N. Visithra.G</i> 012359	Shift / Ward <i>Ramya.LC</i> 0189164	Billing Assistant	Billing Supervisor
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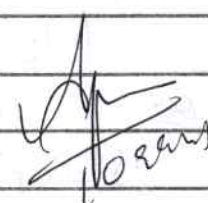
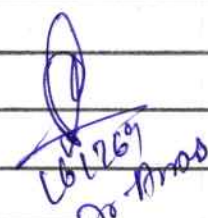
PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/11/25	S/B Dr Aparna G	
5pm	No fever	Alc Bronchiolitis / Respiratory distress
or	Sleeping	NP O ₂ @ 2 L/min
	Apleat	
	RR - 120/min	Avoid bottle feeding
	RR - 36/min	
	WOB Mild ↑	Continue w/c.
	As AOE, wheezing	
	C/S h/o Nausea	
	Done @	
		Dr. [Signature] 16/11/25
16/11/25	S/B Dr Aparna G	
	Alc. Bronchiolitis / Respiratory distress	
	No fever	
	or	Continue w/c.
	Sleeping /	
	Apleat	
	RR - 112/min	
	RR - 29/min	
	WOB Mild ↑	

Dr. [Signature]
16/11/25



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	M AB30 - blushy + tame (D)	Continue nebulization 
4/7/26 7:40 AM	O/S/B - Dr. Ross S1 Acute Bronchiolitis / respirating distress - On Room Air - maintaining SpO2 - no fever spikes cool intake for	
	Vitals: RR: 28 / min SpO2: 98% RA HR: 85 / min Temp: 97.6 F	O/S: Alert / Active / afebrile HR / H CRP < 32 COPD -> (Improved) Mild retractions Noisy breathing Mild Tachypnea
		Plan 1) Continue Neb 2) cc / f distress 3) vitals monitoring



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/11/25 6pm	sls A feels pulmonary on room air no distress no desat. fever @ oral - Improving	
18/11/25	o/e acute alert no distress no dehydration	
	SLE PLAN Plan Tlc Nebul no distress.	 1200H.
18/11/25 10am	sls A April A/c Bronchitis cough + V Pb ✓ on Albut Acton / Aprax Vitality HR: 100b/min RR: 28b/min Wt 15 @ no ARVC or allergy +	Discharge 1200H Discharge 1st AD Nesocet

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

[illegible]



NURSES NOTES

(USE BALL POINT PEN ONLY)

☒ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
16/7/26	5pm	C/H/O Taken by Jany .
		- Child came to ward from ER
		- Child sleeping , No Fever , Afebrile.
		RR - 36/mt
		HR - 120/mt
		- work of breathing ↑
		- plan to start O ₂ & Nebb as per order.
		Jany
		02/1397
16/7/26	7pm	<u>Reassessment Notes</u>
		- Child Refused to keep O ₂
		- Irritable
		- NOB ↑
		- Informed to Dr Astri Han Jany
	8pm	Hand over given to night duty staff
		02/1397
		02/134

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
16/7/26		<u>Night duty on 16/7/26</u>
	8pm	Baby details taken on the from evening duty s/nr. Baby was conscious and Oriented. O2 22 l/min np going. but baby not cooperative. No chest movement. → <u>min off 10/10/26</u>
	9pm	checking vital signs and Recording. Fast breathing is there Not willing oxygen. To informed Doctor
	9.30pm	Dr. Aparna Mann rounds down to continue oxygen and to continue Nebulization. → <u>min off 10/10/26</u>
	10pm	To connect the oxygen but baby Not cooperative. → <u>min off 10/10/26</u>
	11pm	To checking vital signs SpO2 - 98% in RA HR - 120 /min RR - 24 /min So parents asking if Need for oxygen, To informed Dr. Pothu Mann advised okay if needed time to connect the oxygen. → <u>min off 10/10/26</u>
17/7/26	1am	Baby comfortable sleeping. Baby vital is stable and Recording. → <u>min off 10/10/26</u>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES (USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
17/11		Contin notes
	4AM	Baby comfortable sleeping.
	5AM	Baby vital in stable and recording. → into 0171016
	6AM	Baby 20 chart monitor.
	8am	Baby detail's handing over given to morning duty s/n. → into 0171016
		morning + evening duty on 17/11/25
17/11/25	8AM	Baby details taken over from the night duty staff. → Jancy
		Baby vitals are stable & record. → Jancy 0171016
	9AM	Dr. Aparna nam seen by baby advice to continue O2 & record.
	11AM	Baby active good slept well record. → Jancy 0171016
	1PM	Re-assessment done vitals are stable & record.
		Pls Chart monitoring. → Jancy 0171016
	3pm	Nebulization given to the baby. Baby slept well.
		Jeyson

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

NURSES NOTES

(USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Continued notes 17/11/26
	5pm	vital signs is checked up recorded. Baby is vitally stable. No further complaints
	8pm	Baby details is handover given to the night duty staff
		<u>Night duty on 17/11/26</u>
17/11	8pm	Baby details taken over from evening duty staff. Baby was conscious and oriented. D/C clear monitor.
	9pm	clear vital signs and recording. vital in stable. Baby comfortable sleeping. Baby said no complaint
18/11	1am	Baby vital in stable and recording.
	6am	Baby D/C clear monitor
	8pm	Baby details handing over given to morning duty staff

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

- ☐
- Drug Allergies

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

Patient Sticker



(USE BALL POINT PEN ONLY)

- ☐ Drug Allergies

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