

FDH-00029269 IP25-00020411  
Mrs SPANDANA BUKKA  
26-08-1997 28 Y 8 M 17 D (F)  
Dr. SAHITYA SAMMIDI



### SURGERY DETAILS

Date : 13/5/26

Patient Name: Mrs. Spandana Date of Birth: 26-08-1997 Age: 28y

Gender: Female Ward: OT UHID No.: FDH-00029269

Date of Surgery: 13/5/26  OT-1  OT-2  OT-3  OT-4  OBG OT-1  OBG OT-2

Name of the Surgery : Elective USG

Time in : 9:30 Am

Time Out : 10:35 Am

	NAME	AMOUNT
1. Surgeon	Dr. Sahitya	
2. Anaesthetist	Dr. Usha	
3. Assistant Surgeon	Dr. S. Suletha	
4. OT Technician	Br. Suresh	
5. Circulating Nurse	Sr. Vaithale	
6. Assistant Nurse	Br. Hanu	

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

Signature of the Surgeon: *Sahitya*

Signature of Circulating Nurse: *Vaithale*

Order No: 574978/979

Order by: *Panavally*



1/2/5/

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SPINAL  
**CONSUMABLES OF OT**

Circulating staff : ..... Technician : SUBHASINI Date : 13/05/26 Time : .....

Anaesthesia Disposables	Qty		Surgical Disposables	Qty		Disposables (Baby Side)	Qty	
	Issued	Used		Issued	Used		Issued	Used
ET tube			Major Pack <u>LSCS</u>	01		Inj Vit.K		01
LMA			Sutures <u>2342</u>	03		Cord Clamp		01
ECG leads : A/P/N		03	<u>2262</u>	01		Suction Catheter		01
HME filter : A/P/N			<u>1326</u>	01		Feeding Tube		
Syringes : 10 cc		04				Vaccum Suction Set		01
05 cc		03	Gloves <u>6 1/2 + 7</u>	04	01	Surgical Gloves <u>6 1/2</u>		03
02 cc		04	<u>6 1/2 + 6 1/2</u>	02		Gauze Pack <u>1x5</u>		02
01 cc						Syringe 1ml / 2ml		01
Cautery plate : A/P/N		01	Surgical blade <u># 22</u>	02		Surgical Blade # 20		01
IV set			NG tube			Koochies (S)		
RL		02	Cautery pencil	01		<u>Ram's</u>		01
NS : 10ml / 100ml / 500ml / 1000ml		01	Koochies					
<u>COROPMIG</u>		01	Ointments					
<u>ADROGLARE</u>		01	Suction Catheter					
Fentanyl <u>TEMICAR</u>		01	Cap, Mask					
Morphine <u>BLAN</u>			Gauze Pack <u>1x5</u>	04		<u>Baby side</u>		
Ketamine <u>BOXAMIL</u>		02	Mop Pack <u>1x5</u>	03				
Propofol <u>RILVALOL</u>		01	Steri-strip <u>one</u>	01		<u>59490</u>		
Rocuronium			Underpad	02				
Glycopyrolate			Draw sheet					
Myopyrolate			Abgel	01		<u>Dispo Aproval</u>		04
Ondansetron			Foleys catheter					
Pencan 25g / Spinal Needle 22		01	Urobag			<u>Miso 200mg</u>		03
Bupivacaine 0.25%			Chest Drainage Catheter					
Bupivacaine 0.25%(Heavy)		01	Romodrain bag					
Antibiotics			Bandage					
			Tegaderm					
Suppositories			loban					
Anamol : 80mg / 250mg / 170 mg			Double J Stent					
Supridol : 100mg		01	Vaccum Suction set	01				
Justin : 12.5 mg / 25mg / 100mg		01	Plastic Bed Sheet					
Tab. Misoprost : 200mg			Betadine Solution <u>100ml</u>	02				
			Microshield					
			Cotton Balls					
			Latex Gloves	10				
			Ramdione Scrub					
			Saral					

Surgeon

Anaesthesiologist DR. USHA

Nurse

OT Technician Asp

Order No. : 574842 (TGCH)

Ordered by : .....

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

2498 (NSG)

*[Handwritten signature]*

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**DISCHARGE SUMMARY**

Name	Mrs SPANDANA BUKKA	UHID	FDH-00029269
Father/Guardian	Mr SANDEEP KUMAR	Age/Gender	28 Y 8 M 17 D/ Female
Address	1-1, Hyder Basti, Hyderabad, Telangana, INDIA, 500003		
IP No	IP25-00020411	Admission Date	12-05-2026
Ref Doctor	SELF		
Discharge Date	15.05.2026		

**Consultant:**

**Dr. Sahitya Bammidi**

**MBBS,DGO,DNB,FIAOG,FMAS,FCG(USA)**

Senior Consultant-Obstetrician and Gynaecologist

Laparoscopic and Aesthetic Surgeon

Reg. No: 64696

**Diagnosis: PRIMIGRAVIDA AT 33+2 WEEKS GESTATION WITH**

**1. OI CONCEPTION**

**2. FETAL SINGLE UMBILICAL ARTERY**

**3. FGR WITH DOPPLER CHANGES (ABSENT EDF+MCA REDISTRIBUTION)**

**4. FOR STEROID COVERAGE + NEUROPROTECTION FOR ELECTIVE LSCS.**

ELECTIVE LSCS DONE, IN VIEW OF FGR WITH ABNORMAL DOPPLER, DELIVERED A LIVE MALE BABY AT 09:45 AM, WEIGHT 1.507 KGS ON 13.05.2026.

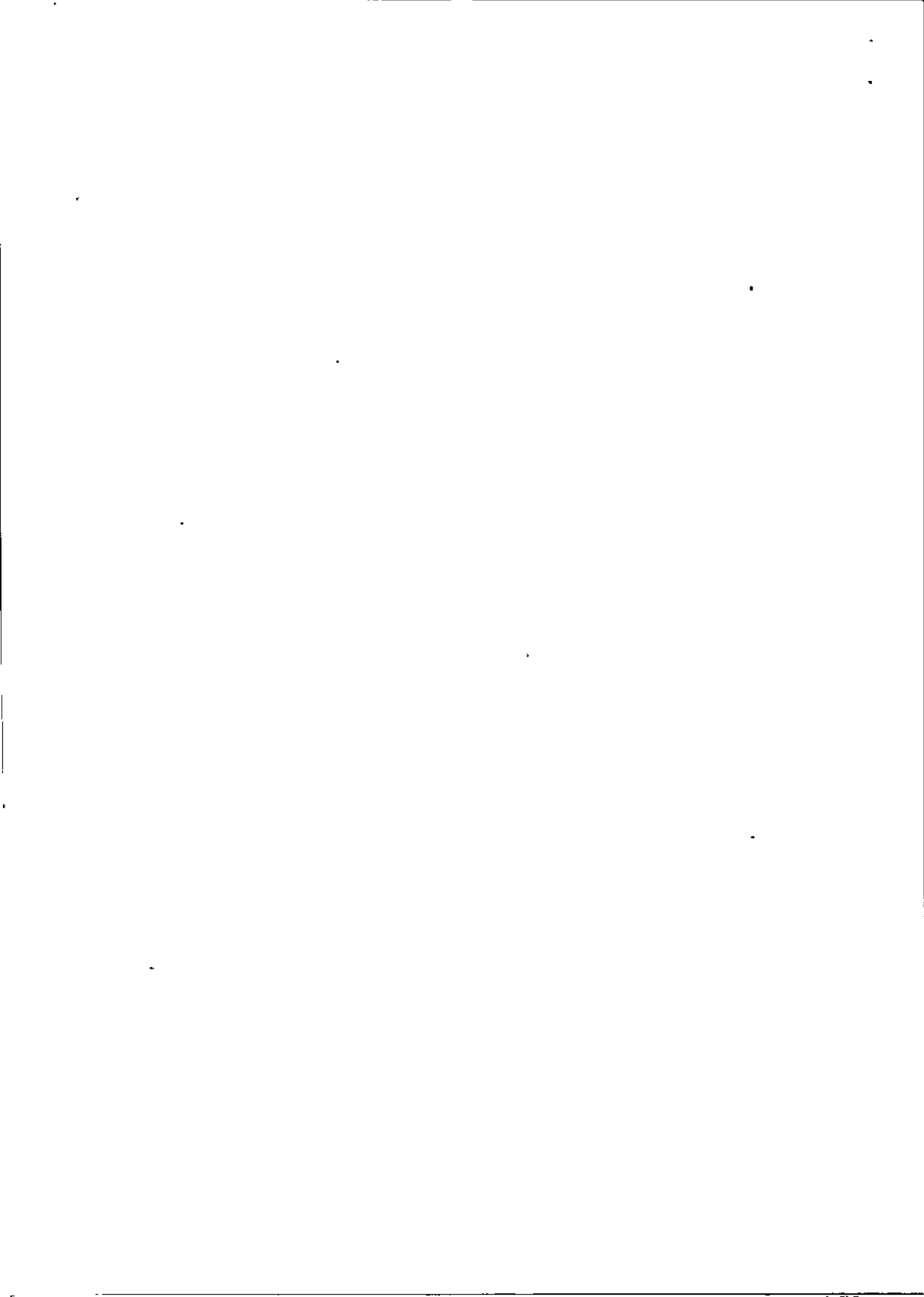
**History:**

LMP: 19.09.2025

Obstetric formula: Primigravida

EDD: 28.06.2026

Gestation at admission: 33+2 weeks



Name	Mrs SPANDANA BUKKA	UHID	FDH-00029209
IP No	IP25-00020411	Admission Date	12-05-2026

### Obstetric History:

G1 - Present pregnancy OI conception.

Medical History: K/c/o PCOS, used on Tab. Glycomet 500mg BD till 11 weeks.

Family History : Father- HTN + Hypothyroid

Surgical History: Nil

Allergies : Nil

### Antenatal Details:

Mrs. SPANDANA BUKKA was booked to Rainbow hospital at 4+4 weeks of gestation. She had regular antenatal checkups and investigations as advised. NT & FTS at 12+3 weeks normal, Increased resistance in uterine artery, started on Tab. Ecospirin 150mg, Risk of PE 1 in 33. TIFFA at 20+1 weeks - Single umbilical artery, SGA at 30+2 weeks - EFW 9%, AC 2% with doppler changes. Fetal echo normal. USG done at 30+2 weeks showed SGA with Efw-9%, AC(2%). USG done on 12.05.2026 showed at 33+2 weeks, cephalic, placenta left lateral high, AFI 17.4cm, Doppler - Umbilical artery shows absent end diastolic flow, MCA redistribution with DV normal. EFW 1501 grams (3%), AC <1% at 32+2 weeks. She was admitted at 33+2 weeks for EL.LSCS.

**Investigations:** Enclosed.

Blood group & Typing - "B" Rh positive.

### Management: Course in hospital:

On admission her vitals were stable, CTG done and was reactive. 2 doses of steroid coverage done with Inj. Betamethasone 12 hours apart and Inj.MgSO4 loading and maintenance dose was given for neuroprotection. Neonatal counselling done.

She was prepared for elective C- section on 13.05.2026 with indwelling Foley's catheter and IV canula under aseptic conditions. Written informed



Name	Mrs SPANDANA BUKKA	UHID	FDH-00029269
IP No	IP25-00020411	Admission Date	12-05-2026

consent for surgery taken. Preanesthetic check up done. Anesthetic premedication (IV Pantop and Perinorm) given. Antibiotic prophylaxis with Inj. Taxim 1 gm IV given. Patient shifted to theatre.

### Surgery Notes:

Under spinal anesthesia she was painted and draped as per hospital protocol. Abdomen opened in layers. The parietal and visceral peritoneum carefully opened after identifying the urachus. Bladder was reflected. A Lower segment curvilinear incision given on the uterus. Baby delivered. Cord clamped and cut and cord blood collected for blood grouping and Rh typing. Baby handed over to pediatrician. Placenta delivered with controlled cord traction. Antibiotic prophylaxis with Inj. Taxim 1 gm IV given. Uterus closed in layers. Hemostasis secured. Instruments and swab count checked. Rectus sheath closed. Skin closed with subcuticular sutures. Wound dressing done. Vagina cleaned with Betadine solution after expelling clots. Misoprostol 600 mcg given per rectum as prophylaxis against Postpartum hemorrhage. Patient was shifted out of theatre to post operative recovery room.

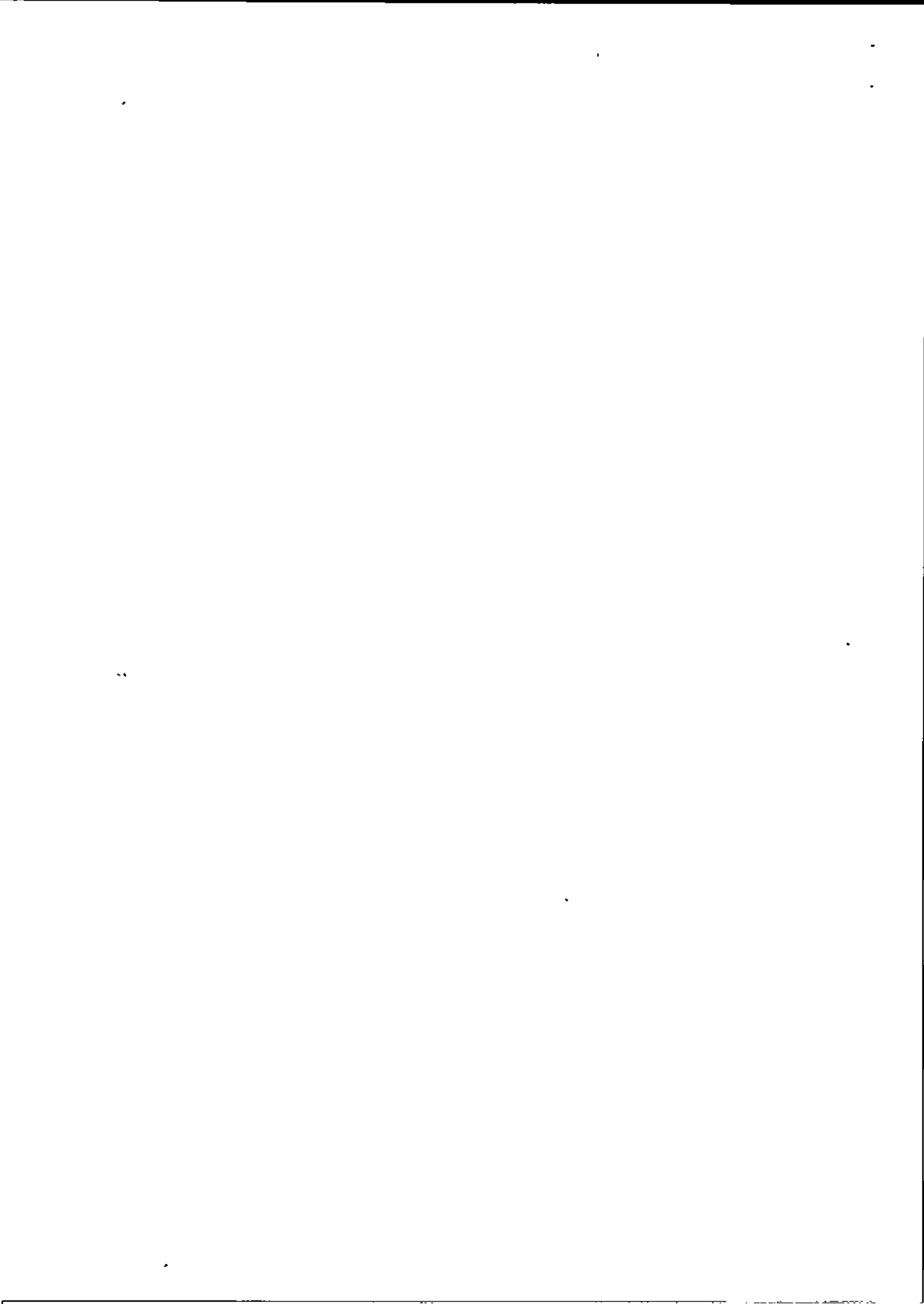
- \* **2 Loops of cord tight around the neck.**
- \* **Broad uterine fundus seen.**
- \* **Placenta adherent to right lateral wall.**
- \* **Manual removed of placenta done, sent for HPE.**

### Delivery Details:

Date : 13.05.2026  
 Time of Delivery: 09:45 AM  
 Type of Delivery: Elective LSCS  
 Indication : FGR with Abnormal dopplers  
 Analgesia : Spinal

### Baby Details:

Date : 13.05.2026  
 Time : 09:45 AM



Name	Mrs SPANDANA BUKKA	UHID	IPDH-00029249
IP No	IP25-00020411	Admission Date	12-05-2026

Sex : Male  
 Weight : 1.507 Kgs  
 Apgar : **8/9, 9/10???**  
 Gestational Age: 33+2 weeks  
 NICU Admission: Yes

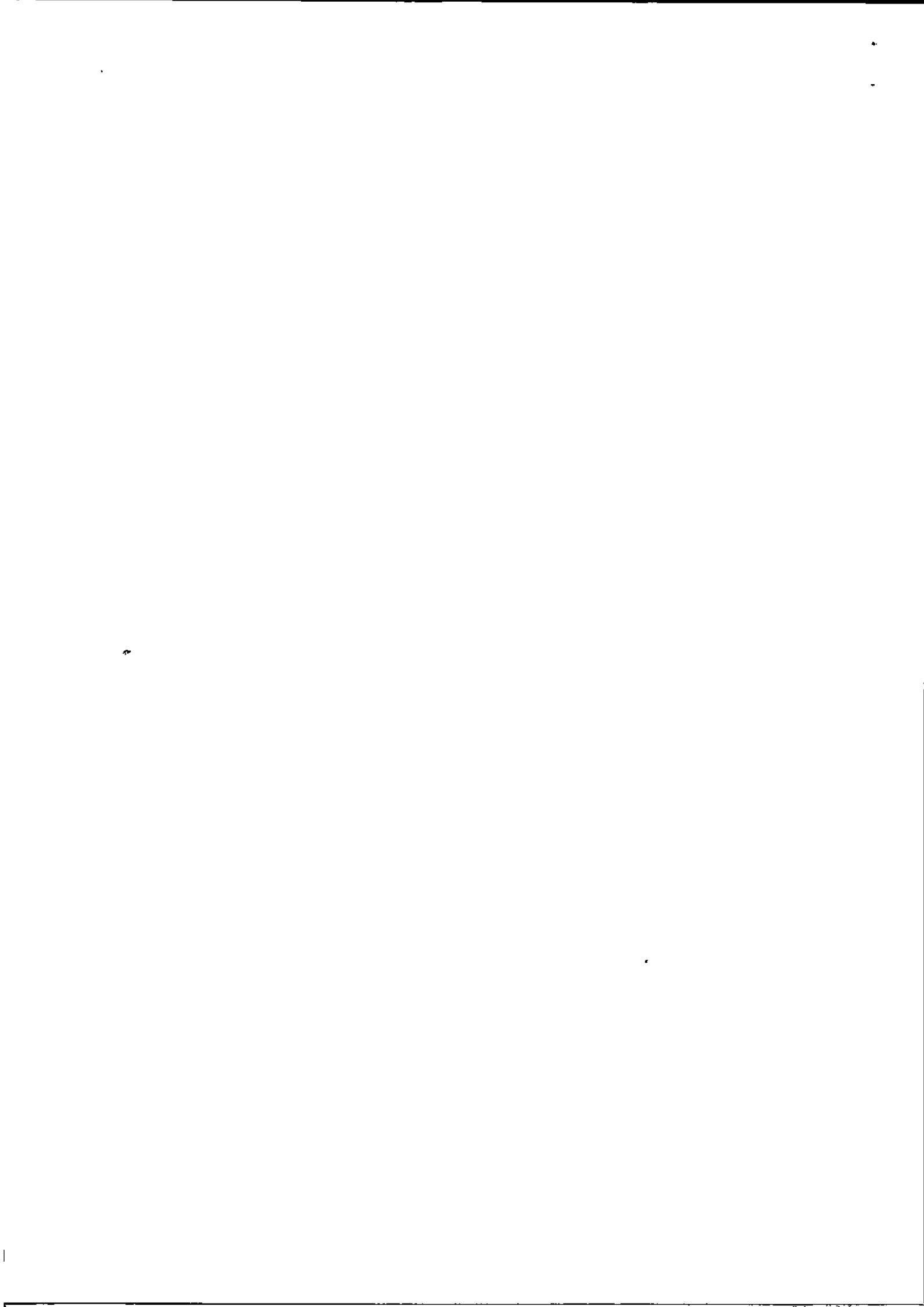
**Post-Operative Notes:** She was closely monitored. Her vital signs remained stable. Uterus was well retracted with no postpartum hemorrhage. Breast feeding initiated. She was shifted to room. Her postoperative period following that was uneventful. On second postoperative day dressing was changed. On inspection wound was healthy. Her general condition was satisfactory and she was found to be fit for discharge. Wound care and medications were explained to patient supplemented by written information. She was given the postpartum book for further reference.

#### Advice:

1. Tab. Taxim O 200mg twice daily till 19.05.2026 (9am-9pm) after food.
2. Tab. Calpol (Paracetamol 500mg) 2 tablets thrice daily till 19.05.2026 (8am-2pm-10pm) after food.
3. Tab. Pantodac (Pantoprazole - 40mg) 1 tablet twice daily till 19.05.2026 (7am-7pm) before food.
4. Tab. Livogen (Elemental Iron - 50mg, folic acid 1.5mg) once daily (7am) for three months before breakfast.
5. Tab. Shelcal (Elemental Calcium 500mg, vitamin D3 250 IU) once daily (2pm) till breast feeding after food.
6. Nebasulf Powder for local application.

We urge all of you to read the postpartum book thoroughly. It contains useful advice and will clear most of your doubts.

Review with Dr. Vinodha Vunnam (Lactation Consultant) after one week on 20.05.2026 with prior appointment.



Name	Mrs SPANDANA BUKKA	UHID	DH-00029269
IP No	IP25-00020411	Admission Date	12-05-2026

Review with **Dr. SAHITYA BAMMIDI**, after one week on 20.05.2026 at postnatal clinic with prior appointment (**Review consultation will be charged**).

### For Women Who Have Had a Cesarean Section

#### Care of the wound:

- 1.You can bath and shower.
- 2.The wound can get wet during a bath or shower. Dry it thoroughly and gently by dabbing with a gauze piece. Do not rub the wound.
- 3.This gauze piece needs to be discarded after one use.
- 4.Prior to touching the wound clean hands thoroughly with Microshield solution and allow them to air dry or use disposable paper napkins.
- 5.Apply Nebasulf or Neomycin dusting powder on the wound after it is dry.
- 6.Do not touch the wound with unwashed hands.

The content of the patient discharge summary, medication, food & drug interaction, care to be provided at home, nutrition, when and how to obtain emergency care etc also have been explained by doctor ..... in a language that I can understand and I acknowledge.



Patient/ Attender

In case of emergency like bleeding, fever [please refer to postpartum book for further details - Chapter II page 6] kindly contact 8121039515 at Financial District just dial one toll free number - 18002122.

You can also take appointments at any time by going online to our website **www.rainbowhospitals.in**



Name	Mrs SPANDANA BUKKA	UHID	DH-00029269
IP No	IP25-00020411	Admission Date	12-05-2026

Registrar/Resident/C.M.O

Dr. SAHITYA BAMMIDI  
MBBD DGO DNB , FIAOG , FMAS  
64696



ADMISSION SHEET



Registration Details :

Admission No : IP25-00020411      Admit Date : 12-May-2026      Admit Time : 04:50 PM      UHID : FDH-00029269

Patient Details :

Patient Name : Mrs SPANDANA BUKKA      Age : 28 Y 8 M 16 D  
Guardian : Mr SANDEEP KUMAR      DOB : 26-08-1997  
Gender : Female      Religion :  
Occupation :      Martial Status : Married  
Address (H) : 1-1 Hyder Basti Hyderabad Telangana INDIA      Phone No : 7207403917/  
500003      E-mail :

Admission Details :

Bed Type : MICU      Bed No : MICU-03      Ward Name : 4F -MICU  
Room No : MICU-03      Admission Type : First Visit

Contact Details :

Name : Mr SANDEEP KUMAR      Relationship : Husband  
Contact Address :      Phone No : / 9856649336

*Sandeep Kumar Bukka*  
Signature

Doctor Details :

Doctor Name : Dr. SAHITYA BAMMIDI      Specialisation : OBSTETRICS AND GYNECOLOGY  
Referral Doctor : SELF      Phone No :  
Co-Consultant :

Payment Details :

Payment Mode : Cash      Deposit Amount : 0.00  
Payor Name : MEDI ASSIST INSURANCE TPA PVT LTD



### ACTIVITY RECORD FOR BILLING

FDH-00029269 IP25-00020411

Mrs SPANDANA BUKKA

Na 26-08-1997 28 Y 8 M 16 D (F)


Dr. SAHITYA BAMMIDI

UH  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
13/05/26	9 AM	MICU	OT	Naboni
13/5/26	10:50 pm	OT	MICU	Vatshala
13/5/26	4:01 pm	MICU	ward	nging
15/5/26	12:05 PM	ward	billing	

### Cross Consultation Visit

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

# INVESTIGATIONS

Date	Investigations	Order No.	Sign
12/5/26	GRBS 112mg/dl 4:40 PM	7029 •	Majid
y	NST - ①	5483 •	Majid
y	NST - ②	5484 •	Majid
y	CBP, PT APTT	7027 •	Majid
12/5/26	NST - ③	5517 •	Majid
12/5/26	NST - ④	5518 •	Santhosh
12/5/26	NST - ⑤	5519 •	
13/5/26	NST - ⑥	5520 •	
13/5/26	NST - ⑦	5521 •	
13/5/26	NST - ⑧	5522 •	
y	NST - ⑨	5523 •	
13/5/26	Plasenta (sample) (NPE)	17099 •	
"	NST - ⑩	5573 •	Ankita
"	NST - ⑪	5574 •	
"	NST - ⑫	5575 •	
	C.C. by Ankita @ 2pm		13/5/26
14/5/26	NHA	5398 •	Suna
	<del>C.C. by Suna</del>		
	<del>15/5/26</del>		





**ESTIMATION SLIP**

320

Date : 2/3/2026 UHID / IP No. : FDH-00029269 SI No. 3421  
 Name of Patient : Mrs. Spandana Bukka Age: 28Y Gender: Female  
 Father's / Husband's Name : Mrs. Sandeep Kumar Corporate / Occupation : Sales/Service  
 Address : Jellapur. Phone : 7207403917 Email : \_\_\_\_\_  
 Procedure / Plan : Delivery Single, Primi EDD/Dos: June  
 MODE OF PAYMENT :  SELF  TPA : Aditya Birla/MA  GIPSA : \_\_\_\_\_ OTHER \_\_\_\_\_  
 TARIFF INFORMATION : Dr Sahitya

Particulars	Package Amounts (Rs.)	
	Normal Delivery	LSCS
Room Category		
Multi Shared Ward		
Shared Ward		
<u>Twin Shared Ward</u> →	89,100	99,000
<u>Private Room</u> →	99,000	1,10,000
Super Deluxe Room		
Suite Room		
Package includes (Package starts from the time of admission)	Room Rent, Nursing Charges, Doctors Fee, Surgeon's Fee and Labour Ward Charges	Room Rent, Nursing Charges, Doctors Fee, Surgeon's Fee, Anesthetist's Fees and OT Charges
	Length of Stay for : <u>2 days / 48 hrs</u>	Length of Stay for : <u>3 days / 72 hrs</u>
	Pharmacy up to <u>9000</u>	Pharmacy up to <u>12000</u>
	Investigations up to <u>2500 → CBP/NSI</u>	Investigations up to <u>3000</u>
Others		

Neonatologist Charges :  Covered  Not Covered Epidural / Entonox :  Covered  Not Covered

Initial Minimum Deposit : Mother = 10K, Baby = 20K → 10K extra → SBR/NBS  
↳ Not incl

**REMARKS :**

- Room eligibility is purely subject to TPA approval and the Package / Room Tariff starts from the time of admission. The estimated amount may change according to duration of stay, medical condition, investigations, pharmacy and any other procedure.
- Proportionate difference of bill amount is applicable in case the patient opts for a category higher than the TPA approved, which has to be paid by the patient and may not be reimbursed by the TPA at later stage.
- Total baby charges are extra which include admission, pharmacy, vaccinations, investigations, disposables, consumables, equipments, speciality consultations, etc. Neonatologist = 10K Healthy 30-35K
- In Case the patient gets discharged earlier than the packages permitted days, no refund of any type is applicable and if the length of stay is beyond the package permitted, additional payment is applicable for which kindly contact the Financial Counselling desk between 9am to 6pm 1st → RBS BG, UAE Not cover
- For Non-medicals, Disposables, Consumables, Taxes, Kiwi Cup charges, Implants, Tubectomy charges, HIV/HbsAg, Anti-D, Medical Records, Double Occupancy and Registration Charges, etc. credit cannot be exchanged. These items are not payable to us as per Insurance company norms.
- Difference if any between the final bill amount and amount permitted/approved by TPA or total bill amount in case of denial from TPA has to be paid by the patient. In case of denial, cash tariff would be applicable. (22-25K) → Non Medicals as per a case
- Two attendants are permitted with patients in SDLX, DLX and PVT rooms and only one attendant is permitted in the rest of the categories of rooms and no attendant is permitted in ICU's
- Tariffs are subject to revision
- Kindly check your billing status on day to day basis at IP Billing Department.
- Additional Charges on package are applicable for Non-working hours and Non-working days (sundays and public holidays)

**DECLARATION**

I Sandeep Kumar Pabba have attended the Financial counseling desk and understood the expected costs and other conditions applicable. In case the TPA / Insurance Company rejects the claim for whatsoever reasons at any point of time I promise to settle the hospital bill with the hospital without any ambiguity.

Signature of the Client: Sandeep Kumar Pabba  
 Signature Relationship: \_\_\_\_\_  
 Signature of the financial Counselor: [Signature]

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ESTIMATE

Formals  
200000

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FORM-232323

Mrs. S. S. S. S. S.

Mrs. S. S. S. S. S.

FORM-232323

Mrs. S. S. S. S. S.

Mrs. S. S. S. S. S.

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Dr. S. S. S. S. S.

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Health  
20-22K

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FDH-00029269 IP25-00020411

Mrs SPANDANA BUKKA  
26-08-1997 28 Y 8 M 17 D (F)  
Dr. SAHITYA SAMMIDI



## CAESAREAN SECTION OPERATIVE NOTES

Surgeon's Name: <u>Dr. Sahitya</u>	Date of Delivery: <u>13/5/26</u>
Assistant Surgeon: <u>Dr. Swetha</u>	Time of Delivery: <u>9:45 AM</u>
Anaesthetist's Name: <u>Dr. Usha</u>	Gender of Baby: <u>Male</u>
Type of Anaesthesia: <u>Sp</u>	Weight of Baby: <u>1.507</u>
Neonatologist: <u>Dr. Sravanthi</u>	AGPAR Score:
Scrub Nurse: <u>Br. Hanumanth.</u>	NICU Admission: <input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No

### Pre-Operative Diagnosis:

Elective       Emergency

Indication: FCR & Abn doppler

### 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: .....      Knief to rectus: .....

CTG Description: Non-Reassuring

If there was a delay give the reasons: .....

### Surgical Procedure:

ELECTIVE CS

### Post Operative Diagnosis:

PILU & POD-0 q 21. hrs

Peri-Operative Complications: 1) 2 loops of cord tight around the neck (+)

2) Broad <sup>uterine</sup> fundus seen; Placenta adherent to right lateral wall;

manual removal of placenta done; sent for MPE

Amount of Blood Loss: None

Blood Transfused (in ML):

### Name and Number of Surgical Specimen sent for examination:

Placenta along membranes

**Examination Findings when Appropriate:**

Presentation:  Cephalic  Breech  Other ..... Cervical Dilatation: ..... cm  
 5th Palpable: ..... Fetal Position: .....  
 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  Inverted T  J Incision  
 Previous Scar:  Intact  Thinned out  Ruptured  No Scar  
 Incision Through Placenta:  Yes  No  
 Delivery of head:  Manual  Forceps  
 Liquor:  Clear  Meconium:  I  II  III  Blood  Offensive  Not Offensive  
 Delivery of Placenta:  Manual  CCT .....  Complete  Incomplete  Piecemeal  
 Cord Appearance: ..... *thin, long* ..... Cord around the neck  Yes  No  
 Appearance of placenta: ..... *(N)* ..... Cavity explored  Yes  No  
 Uterus, tubes and ovaries:  Normal  Not Normal Sterilization:  Yes  No

Uterine Closure:  One Layer  Two Layers ..... *No. 1 VICOREL* ..... Suture  
 Peritoneal Closure:  Pelvic  Abdominal  None ..... *No. 1 VICOREL* ..... Suture  
 Sheath Closure: ..... *No. 1 VICOREL* ..... Suture  
 Fat Closure:  Yes  No ..... *No. 3 MONOCRYL* ..... Suture  
 Skin Closure:  Subcuticular  Mattress ..... *No. 3 MONOCRYL* ..... Suture

Vaginal Evacuated  Yes  No  
 Drain:  Yes  No  Remove in ..... days  Await instructions  
 Catheter:  Yes  No  Remove in ..... *1* ..... days  Await instructions  
 Swap & Instruments count correct?  Yes  No  Post-op Antibiotics  Yes  No  
 Intra-Operative Antibiotics Cover:  Yes  No  Thromboprophylaxis  Yes  No


Post-Operative Notes: .....  
 1. NBM x 4hrs  
 2. IVF as per AXON  
 3. FOLLOW DRUG CHART  
 4. MONITOR VITALS  
 5. STRICT DO CHARTING  
 6. WATCH FOR BLEEDING

Doctor Name: *D. SANKAR* Doctor Signature: *D. SANKAR*

Date & Time: *13/05/2015 ; 10 AM*

# PATIENT TRANSFER FORM



Patient Name & UHID No.  FDH-00029269      IP25-00020411 Mrs SPANDANA BUKKA 28-08-1997      28 Y 8 M 17 D (F) Dr. SAHITYA BAMMIDI 	Date & Time of Admission	Date & Time of Transfer Order 13/5/26 @ 10:50 AM
	Transfer Ordered by  Dr. Usha	Reason for Transfer  Post OP care
From Unit  OT	To Unit  MICU	Information to Attendant Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Number of Sheets in Clinical File  25	Number of Imaging Films  OP-1	Personal belongings including clinical documents. If any handed over to attendant Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, what ?

Medications / Consumables / Surgicals / Hand over

Sl.No.	Item Name	Quantity
1.		
2.		
3.	/	/
4.		
5.		

Shifting Summary / Notes Written by Doctor :    Yes       No

Name & Signature of Person who is Transferring  Vaishale	Name of Person Ordered Transfer  Dr. Usha
--	---

Patient & Clinical Records Received by :  
 Subhashini  
 Date & Time of Patient Received : 10:45 am 13/5/26

If the transfer order time & Completion time is more than 30 minutes, please tick the reason mentioned below :

- Unavailable Bed                     
  Nurse not Available                     
  Available Bed not ready

1145 2 01

1145 2 01

1145 2 01

1145 2 01

1145 2 01

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1145 2 01

1145 2 01



# PATIENT TRANSFER FORM

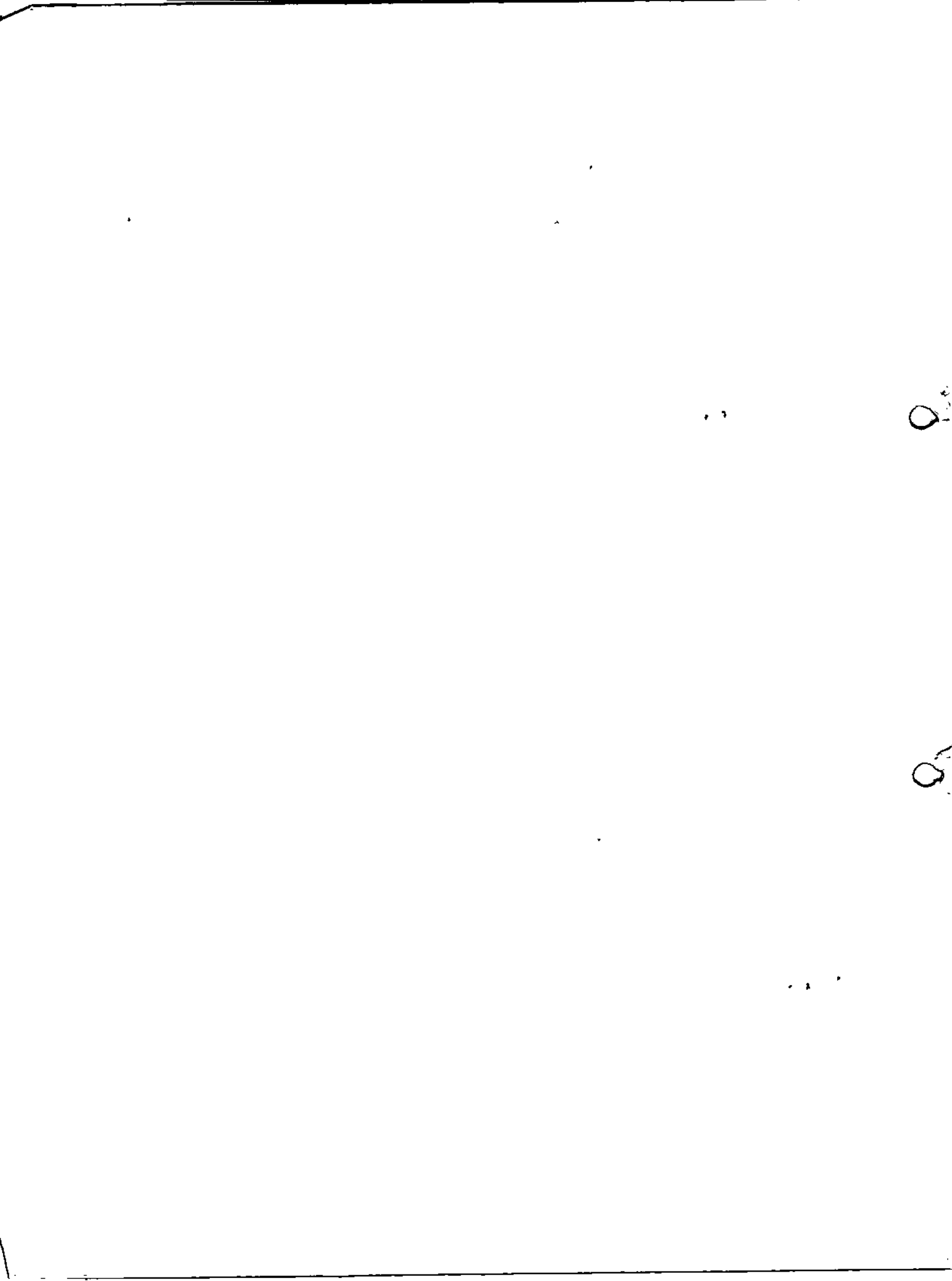
Patient Name & UHID No. FDH-00029269 IP25-00020411 Mrs SPANDANA BUKKA 28-08-1997 28 Y 8 M 17 D (F) Dr. SAHITYA BAMMIDI 		Date & Time of Admission 13/5/26 @ 4:30	Date & Time of Transfer Order 13/5/26 @ 4:36
		Transfer Ordered by Hastin Dr. Poo	Reason for Transfer <del>Obstruction.</del> BLSC.
From Unit MICU	To Unit ICU	Information to Attendant Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Number of Sheets in Clinical File 25	Number of Imaging Films .	Personal belongings including clinical documents. If any handed over to attendant Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, what ?	
Medications / Consumables / Surgicals / Hand over			
Sl.No.	Item Name	Quantity	
1.	NS		
2.			
3.			
4.			
5.			
Shifting Summary / Notes Written by Doctor : Yes <input type="checkbox"/> No <input type="checkbox"/>			
Name & Signature of Person who is Transferring Dr. Hastin Sr. Gooj		Name of Person Ordered Transfer Dr. Hastin	
Patient & Clinical Records Received by : June 13/5/26 @ 4:30 PM			
Date & Time of Patient Received :			

If the transfer order time & Completion time is more than 30 minutes, please tick the reason mentioned below :

Unavailable Bed

Nurse not Available

Available Bed not ready



# PATIENT TRANSFER FORM

FDH-00029269 IP25-00020411  
Mrs SPANDANA BUKKA  
28-08-1997 28 Y 8 M 16 D (F)  
Dr. SAHITYA BAMMIDI



Date & Time of Admission <i>12/5/26</i>	Date & Time of Transfer Order <i>13/5/26 @ 9 AM</i>	
Treating Consultant Name	Transfer Ordered by <i>1</i>	Reason for Transfer <i>Em 2-JC</i>
From Unit <i>MW</i>	To Unit <i>01</i>	Information to Attendant Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Number of Sheets in Clinical File	Number of Imaging Films	Personal belongings including clinical documents. If any handed over to attendant Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, what ?

Medications / Consumables / Surgicals / Hand over

Sl.No.	Item Name	Quantity
1.	<i>Inj- Pentop 4mg</i>	<i>(1)</i>
2.	<i>Inj- paracetamol 10mg</i>	<i>(1)</i>
3.	<i>Inj- Taxon 1gm</i>	<i>(1)</i>
4.		
5.		

Shifting Summary / Notes Written by Doctor : Yes  No

Name & Signature of Person who is Transferring <i>Neha</i>	Name of Person Ordered Transfer <i>Dr Javita</i>
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Patient & Clinical Records Received by :

Date & Time of Patient Received :

If the transfer order time & Completion time is more than 30 minutes, please tick the reason mentioned below :

- Unavailable Bed     
  Nurse not Available     
  Available Bed not ready

Q.

Q.



# IP ADMISSION SHEET FOR OBSTETRICS

## Presenting Complaints

admitted for steroid coverage & neuroprotection

LMP: 19/9/25

EDD:

Corrected EDD: 28/6/26

GA: 33<sup>+2</sup> wks

Obstetric Formula: primigravida

Menstrual History: Regular:  Yes  No

## Obstetric History:

G<sub>1</sub> - P.P, OI conception

## Obstetric Examination

Fundal Height: 32 wks

Ut. Activity:  Relaxed  Mild  Mod  Severe

Liquor:  Adequate  Oligo  Poly

PP:  Cephalic  Breech  Others \_\_\_\_\_

## Present Pregnancy Record:

Booked at 4<sup>th</sup> wks

NT & FTS @ 12<sup>th</sup> wks - (N), ↑ resistance in uterine artery; started on T. Enoximin 150mg

Head Fifths Palpable: \_\_\_\_\_

## RISK FACTORS:

Risk of PE 1 in 33.

FHS:  Normal  Tachy  Brady  Absent

OI conception

fetal echo - (N)

Doppler changes

TIFFA @ 20<sup>th</sup> wks - single umbilical artery

SGA @ 30<sup>th</sup> wks - CFW - 9% AC - 2%

## Per Speculum Examination ND

Draining:  Present  Absent  Bleeding

Colour of Liquor:  Clear  Meconium  Blood Stained

## Vaginal Examination ND

Cervix:  Long  Partially effaced  Effaced

Os: Closed \_\_\_\_\_ Dilated \_\_\_\_\_

Membranes:  Present  Absent

Liquor:  Clear  Meconium  Blood Stained

Presenting Part:  Vertex  Breech  Others

Sutton:  -3  -2  -1  0  +1  +2

Pelvis:  Adequate  Doubtful

Height: 157 cm

Weight: 81.6 kg

Allergies: Nil

Breast:  Normal  Abnormal

## General Examination:

Consciousness: Pallor: -

Icterus: - Edema: -

Temp: 97.3 F PR: 88 bpm

BP: 114/80 mmHg DTR:

CVS: RS

Liver/Spleen: Urine Output:

## DIAGNOSIS

E FGR

primigravida at 33<sup>+2</sup> wks GA = fetal SUA, = Doppler changes (AEDF = MCAR) for steroid coverage and neuroprotection for EL-UGS.



<p>Family History:                  F-HTN, Hypothyroidism.</p>	<p>Surgical History:                  NIL.</p>
<p>Medical History:                  K/O PCOS.</p>	<p>Medication History:                  Used T-Glycomet 500mg BD if/O PLOS                  till 11 wks.</p>
<p>Plan of Care:                  Admission                  Informed consent                  part preparation                  Secure IV cannula                  NST 2<sup>nd</sup> wly                  Ij. Betnasol 12mg x 12hrs apart / 1M                  Ij. MgSO<sub>4</sub> 4gm IV slow flb                  18m/hr                  Foley catheterisation                  Send CBP, PT, APTT, INR                  PAC</p>	<p>Investigations:                  B/G/T - B<sup>+</sup>VE.                  Viral markers - NR.                  CBP - Hb -                  WBC -                  Plt -                  USG (12/5/16): SCUF @ 33<sup>+2</sup> wks,                  cephalic, placenta - left lateral high,                  AFI - 17.4cm,                  Doppler - umbilical artery shows AEDF                  MCA redistribution                  DV normal                  EFW - 1501g (31), AC - 217.                  @ 32<sup>+2</sup> wks</p>

Doctor Name: ..... Dr. Anshu .....  
 Signature: ..... *AS* .....  
 Date & Time: ..... 12/5/20, 4pm .....

Consultant Name: ..... Dr. Sahitya .....  
 Signature: .....  
 Date & Time: .....



**PROGRESS NOTES AND DOCTOR'S ORDER**

Date & Time	Progress Notes	Doctor's Order
12/5/26	primi 2 35 <sup>+</sup> wks 2 fetal	SUA 2 FGR 2
2:00pm	Doppler changes (AEDF 2 MCA P) for steroid course & neuroprotection for CI. US	steroid
		Adv
	C.c fair	1. soft diet
	Afebrile	2. NBM from 12 AM
	BP = 100/70mmHg	3. NGX asclanted
	PR = 86bpm	4. NST 2 <sup>nd</sup> hourly
	SpO <sub>2</sub> = 100% @ RA	5. 2 <sup>nd</sup> dose steroid
	PIA = ut 32 wks	inj. Betnesol 12mg at 4:40 AM
	relaxed, FHS @ 140bpm	6. continue MgSO <sub>4</sub> infusion 1gm/hr
<u>NST reactive</u>		7. (M) Bp, PR, SpO <sub>2</sub> , U.O strictly RR,
<u>restarted cervical dose</u>		8. PAC Hb done
		9. Z. nurolex suppository 2 tabs PR at bedtime
		10. CI. US Timmons
		11. WCC, CBP, PT, APTT, INR reports.
		Pregnancy
13/5/26		
12:00 AM	C.c fair	Adv
	Afebrile	1 - NBM
	BP = 100/70mmHg	2. NST 2 <sup>nd</sup> hourly
	PR = 86bpm	3. 2 <sup>nd</sup> dex 12mg Betnesol at 12mg 4:40 AM
	SpO <sub>2</sub> = 100% @ RA	4. continue MgSO <sub>4</sub> infusion 1gm/hr
	PIA = ut 32 wks, relaxed	5. (M) Bp, PR, SpO <sub>2</sub> , U.O, RR, strictly
<u>NST reactive</u>		6. Indexam 808
<u>Trace Investigations</u>	FHS @ 146bpm	Pregnancy

FDH-00029269 IP25-00020411  
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 28-08-1997 28 Y 8 M 17 D (F)  
 Dr. SAMITYA SAMMIDI



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/26 8am	Primigravida 33 <sup>+</sup> wky GA - Single Umb. artery - EGR - Doppler changes (AEDF + MCA redistribution)	
	NO complaints	<u>Ro</u>
	O/E, Pt is clear, afebrile	
	PR - 78bpm	1) Follow preprocedures
	BP - 110/70	2) vital monitoring
	RR - 18 SpO <sub>2</sub> - 98%	3) Drugs as cleared
	H/L - S/S, ⊕ BAE ⊕	4) w/f ↓ pfm
Adv	P/A - uterine 32wks, Relaxed	5) NST monitoring
NST	Cephalic	6) Inform SD
↓ Equibalance	FHS ⊕	7) Continue mgso <sub>4</sub> infusion.
	+ Neonatal counselling done	
	+ steroid coverage done	
		<u>Adv</u>
13/5/26	<u>POD-0</u>	1) NBM x 4hrs
10:30Am	Ce pt de	2) INF as per AXON
	Afebrile	3) FOLLOW DRUG WATCH
	PR 92bpm	4) MONITOR VITALS
	BP - 100/60 mmHg	5) STRICT I/O WATCH
	SpO <sub>2</sub> 97% RA	6) w/ Active bleed,
	PA ut(⊕) well	7) Inform,
	O/E BWM	
	Uo 300ml (cler)	<u>axn</u>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/15 2:30pm	<p>POD-0            GC-fair            Afebrile            PR- 88 bpm            BP- 114/74 mmHg            P/A- Urtic            P/V- NAB</p>	<p>- Adv            - Allow sips of water            - liquid diet            - soft diet at 6:30pm            - Drugs as charted            - w/f active b/w            - In bed ambulation            - (M) vitals Inform SOS            - foleys removal at 6AM t/m</p>
	<p>Baby in NICU            Shift to Room</p>	
13/5/15 7pm	<p>cls/B Dr Sahitya            GC fair            Afebrile            PR- 78 bpm            BP- 113/79 mmHg            SpO<sub>2</sub> - 98% on RA            P/A- ut(+) well            P/V - NAB</p>	<p>Adv            1) soft diet            2) Plenty of oral fluids            3) Drugs as charted            4) In bed ambulation            5) W/F BPV, I/O            6) foleys removal t/m @ 6am            7) T. Dulcolax 2 tabs P/R               t/m after breakfast            8) Monitor vitals            9) Inform SOS            10) 20mg ZONAC P/R @ 10pm</p>





## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/5	S/S. <u>Dr. Vinodha (LC)(PT)</u>	
	Breastfeeding counselling given	A
14/5 2:30pm	<u>POD-I</u> acjan ajeht	<u>Adv</u> - @ diet
begins	SP - 110 / 80 mmHg M - 80 bpm	- plenty of oral fluids - deep as charted
M ✓	SpO <sub>2</sub> 97% / O <sub>2</sub> A RA - UAW	- w/ BLV
	M - NMS	- ambulation / ESR
		- @ diet
		- Infusions
14/5 8pm	<u>POD-I</u> acjan	<u>Adv</u>
begins	ajeht SP - 107 / 80 mmHg M - 80 bpm	- @ diet - plenty of oral fluids
	SpO <sub>2</sub> - 97% / O <sub>2</sub> A	- deep as charted
M ✓	RA - UAW	- w/ BLV
	M - NMS	- ambulation / ESR
		- @ diet - Infusions



320

FDH-00029269 IP25-00020411  
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26-08-1997 28 Y 8 M 17 D (F)  
Dr. SAHITYA BAMMIDI



# NUTRITIONAL ASSESSMENT FOR OBSTETRICS PATIENTS

Date: 14/10/20 Time: 9:30

Origin: Duehig Height: 157 Weight: 81.6 BMI:  ~ 26 kg/m<sup>2</sup>  
 ~ 28 kg/m<sup>2</sup>  
 ~ 30 kg/m<sup>2</sup>

Food Allergies: Horshanket, Brazil

Diagnosis: primi at 33.2 weeks for steroid course to be

Type of Diet:  Liquid  Soft  Normal  Diabetic  
 Vegetarian  Non-Vegetarian  Vegan

Diet Advised:

Liquid Diet – ORS/ Coconut Water / Butter Milk / Barley Water / Soups

Normal Diet – Rice, Rotis, Dal and Soft Cooked Vegetables and Curd

Soft Diet – Soft Rice, Dal and Vegetable Curries Soft Cooked, Curd

Diabetic Diet – Brown Rice / Oats/ Dahlia/ Rotis, Dal and Vegetables and Curd (Avoid Roots / Tubers)

Patient's / Attendant's

Signature: B. Spandana

Name: Spandana

Date & Time: 14/10/20 9:30

Dietician's

Signature: [Signature]

Name: [Name]

Date & Time: 14/10/20 9:12



FDH-00029269 IP25-00020411  
 Mrs SPANDANA BUKKA  
 26-08-1997 28 Y 8 M 16 D (F)  
 Dr. SAHITYA BAMMIDI



Sheet No: ..... **REGULAR PRESCRIPTIONS** Dept.....Ward.....

<b>DRUG :</b> T. CEFIXIME				Date Time	15/5															
Dose	Route	Frequency	Start Dt.																	
200mg	PO	BP	14/5	6am																
Name & Signature of the Doctor Starting the Drugs:				ndya																
Additional Instructions:				6pm																
<b>Daily Doctor's Endorsement by a Sign</b>																				

<b>DRUG :</b> G. PANTO PRIVOL				Date Time	15/5															
Dose	Route	Frequency	Start Dt.																	
400mg	PO	OD	14/5	6am																
Name & Signature of the Doctor Starting the Drugs:				ndya																
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				

<b>DRUG :</b>				Date Time																
Dose	Route	Frequency	Start Dt.																	
Name & Signature of the Doctor Starting the Drugs:																				
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				

<b>DRUG :</b>				Date Time																
Dose	Route	Frequency	Start Dt.																	
Name & Signature of the Doctor Starting the Drugs:																				
Additional Instructions:																				
<b>Daily Doctor's Endorsement by a Sign</b>																				

VERIFIED

Signature  
VERIFIED BY : Name





# DRUG CHART

Date of Admission: 12/5/26 Drug Allergies:  Not known any Drug Allergies

## FOR THE SAFETY OF THE PATIENT

- GENERAL** - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.
- DOCTOR** - Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).  
 - Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.  
 - Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.  
 - Discontinue a drug by drawing a line **I** through it and a similar line through subsequent recording panels.  
 - The date and time of stopping the drug along with the doctors name and sign must be mentioned.  
 - Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.
- NURSES** - Nurses must follow strictly the FIVE RIGHTS before administration of medication.  
 1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time  
 - AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

## SOS / PRN (As Required Medication)

DRUG :				Date Time
Dose	Route	Frequency	Start Date	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions:				

DRUG :				Date Time
Dose	Route	Frequency	Start Date	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions:				

DRUG :				Date Time
Dose	Route	Frequency	Start Date	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions:				

VERIFIED BY: Name



VARIABLE DOSE		Date Time	Nurse Sig.	Nurse Sig.	Nurse Sig.	Nurse Sig.
DRUG :		Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	
Route	Start Date	Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	
Name & Signature of the Doctor		Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	
Additional Instructions:		Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	

VARIABLE DOSE		Date Time	Nurse Sig.	Nurse Sig.	Nurse Sig.	Nurse Sig.
DRUG :		Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	
Route	Start Date	Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	
Name & Signature of the Doctor		Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	
Additional Instructions:		Dose	Dose	Dose	Dose	
		Dr. Sign.	Dr. Sign.	Dr. Sign.	Dr. Sign.	

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
12/5/26	4:40pm	Inj BETAMETHASONE	12mg	IM	AK	Naresh
12/5/26	5pm.	Inj. MgSO4	4g $\approx$ 1000mg MS.	slow IV	AK	Naresh
13/5/26	8:30AM	INS-CEFOTAXIME	1gm	IV	ngj	Naresh
13/5/26	8:30AM	INS-PANTOPRAZOLE	40mg	IV	ngj	Naresh
13/5/26	8:30AM	INS-METOCLOPRAMIDE	10mg	IV	ngj	Naresh
13/5	9.50 AM	INS-ARBETOCIN	100ug	IV	AK	Naresh
13/5	10.35 AM	SUPP-TRAMADOL	100mg	P/R	AK	Naresh
13/5	10.35 AM	SUPP-DICLOFENAC	100mg	P/R	AK	Naresh
13/5/26	11:30 pm	Inj. PCM	1gm	IV		Naresh

VERIFIED BY: Name..... Signature.....

