

ANC-00003716 IP28-00004600  
Baby KUSHVITHA.C  
29-08-2022 3 Y 11 M 19 D (F)  
Dr. KRITHIKA P



### DISCHARGE TRACKING SHEET

UHID : 5716 FLOOR: P1W CONSULTANT NAME: DR. Krithika

ACTIVITY	IN TIME	OUT TIME	REMARKS	<To be filled by Admin>
Activity Sheet updated by Nursing	9:20 Am	10 Am.		
Activity Sheet updated by Pharmacy	18/6/25 at 10:50 Am	18/6/25 at 10:58 am.	Prisys	

# ACTIVITY RECORD FOR BILLING



Name: ..... ANC-00003716 IP28-00004600  
 Baby KUSHVITHA.C  
 29-06-2022 3 Y 11 M 19 D (F)  
 Dr. KRITHIKA P  
 UHID No: ..... Consultant: ..... Dept: *PKLV*  
 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
<i>12/6/26</i>	<i>10:55 AM</i>	<i>RPS HUSK/PC</i>	<i>PKLV (NICU)</i>	<i>P-1018620</i>

## CROSS CONSULTATION VISIT

	Doctor Name	Date	Order No.	Signature
1.	<i>Dr. Padma Balma</i>	<i>12/6/26</i>	<i>51008</i>	<i>AS</i>
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				



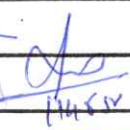






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**PROGRESS NOTES AND DOCTOR'S ORDER**

Date & Time	Progress Notes	Doctor's Order
17/6/2022 11am	S/O Dr Sameera / Dr Purnima	
	→ unprovoked seizures ↓ evaluation requiring levetiracetam & fosphenytoin	
	ole HRG: 120/min PRG: 28/min RS: NRBS PIA: 8/11	
VSG-②	MS: localising pain	
	Post-ictal state	
	no meningeal sign Pupils equal & reacting	
	GCS: E3 V3 M4 -	
	Plan: To start levetiracetam & fosphenytoin → Padma's opinion	
	HRG & EEG today Pankh could.	<p style="text-align: right;">               Dr. Purnima         </p>
17/6/2022 5:10pm	C/O Dr. Harsha Vs	
	UNPROVOKED SEIZURES ↓ EVALUATION	
	child shifted from MRI no further seizure episodes vitals stable.	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Vitals :- HR-123/min RR-26/min T-98.6F. SpO2-99% @ RA	
	S/E	
	CX - B/L PERL ⊕	
	RS - B/L AE ⊕ no added sound	
	CM - S1 S2 ⊕ no murmur	
	P/A - Soft,	
	<u>Adm</u>	
	- continue the same	
	To do EEG	
	after 4 hours start liquid (9pm)	Dr. Hamza vs 96066
17/6/2026	CL/B DR. Hamza vs	
8-30 AM		
	UNPROVOKED SEIZURE ↓ EVALUATION	
	NO further seizure episode	
	no other complaints	
	O/S - Good	
	Wine output - adequate	
	O/E Alert, active	no pallor
	A term	GLS - 15/15
	Hydration - Good	



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<p>+++ / ++                      CRT &lt; 3 sec</p>	
	<p>S/E</p>	<p>Vitals - Hr - 122 / min                      RR - 20 / min                      T - 98.6 F                      SpO2 - 99% @ 2m                      BP - 84 / 52 (55)</p>
	<p>CNS - B/L PERAL (+)                      Tone - (N)                      Reflexes - 5/5                      Plantar - Flexion                      NO neurocutaneous markers; NO meningeal irritat</p>	
	<p>RS - B/L AE (+) no added sound                      CX - S1 S2 (+) no murmur                      P/A - soft, non-tender                      NO Hepato splenomegaly</p>	
	<p><u>Advice</u></p>	<p>V.S. L                      Dr. Hemika V S                      96066</p>
	<p>1) Plan to change Syrup leipill (Ime/ironp) 2.2ml - 0.2ml                      (20mg/kg/dose) p/b <del>18/6/2026</del> (Dommon morning 8am)                      18/6/2026</p>	
	<p>2) Plan to Taper IV fluids → STOP IV Fluids                      (discont with Dr. Saravanan) 9pm</p>	
	<p>3) collect MRI report / EEG report</p>	
	<p>Rest continue the same.</p>	
		<p>V.S. L                      Dr. Hemika V S                      96066</p>



## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/06/2022 7:30 AM	C/S/B Dr. Harsha K	
	unprovoked seizure disorder	
	no further seizure episode	
	no febrile spikes	
	no other C/O	
	PI - cont	Vidol
	No. adequate	Ch - 119
	ole	as - 22 h
	alert, a/cn, a/fwk	T - 98.6
	Hydroc - med	SpO2 - 99% @ room
	+ titration	Sp - 95% @ (leg)
	S/E Con - BU PEARL @	
	Done - @	
	depl. hct. @	
	P/L - Flu	
	Pur 5/5 5/5	
	no seizure since / no surgical intx	
	cn	
	M	
	P/A @	
		Adm
	V - 5/10	Co. also the
	V - 5/10	collected nasal swab X Ses
	V - 5/10	step

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## PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/09/2026 4:15 PM		
	C/S/B <u>Dr. Sujanya / Dr. Samene</u>	
	Case of unprovoked seizures - status epilepticus	
	F - oral feeds	
	R - RR - 26/min, SpO <sub>2</sub> - 95% LCA Bk ACP, Chest clear no retractions	
	on room air	
	I - Not on Antibiotics	
	C - HR - 108/min, CRT < 1 sec, TTT 1st BT - 104/50 mmHg peripheries warm, pulses well felt	

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29-06-2022 3 Y 11 M 19 D (F)

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# PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	N - 116 - 12.1	
	M - 111	
	K - soft	
	N - Bilateral pupils equally reactive to light Tte - normal w/ Attention in sensor.	
	on syp lenopil (@ 40mg / 1/day)	
	on syp phenytoin (@ 5mg / 1/day)	
		plan
		- To change all Antiepileptics to oral
		- plan to discharge today as required
	Parents have been counselled about the risk of seizures and have been educated about the first aid.	<i>[Signature]</i>

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## RESULT SHEET

Date	17/6/26				
Time					
Hb	12.1				
PCV <del>PCV</del> PCV	34.2				
RBC	4.12				
WBC	11,650				
N/L	(N= 85/6=12)				
Platelets	2.44 lakhs				
CRP					
ESR					
PCT					
RBS					
Na	139				
K	4.3				
Cl	109.				
Ca/Mg					
Phosphate	1ca 1.09				
Urea	25.				
Creatinine	0.24				
ALP	1100 26.				
SGPT					
SGOT					
T.Bill/Conj	0.4/0.2				
T.Protein					
S.Albumin					
S.Globulin					
A/G Ratio					
Uric Acid					
S.Amylase					
Sr.Lipase					
Blood Lactate					
S.Cholesterol					
PT/INR	17.8/1.27				
APTT	25.0				
CSF Protein / Sugar					
Cells					
N/L					





## DRUG CHART

Date of Admission: 17/6/22 Drug Allergies: nil  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 ..... Signature .....



REGULAR PRESCRIPTIONS

Weight 17.157 Ward PICU

<b>DRUG :</b> <u>INJ. LEVIPIL</u>				Date Time	<u>17/6</u>																
Dose	Route	Frequency	Start Date																		
<u>20mg</u>	<u>IV</u>	<u>12<sup>th</sup> hly</u>	<u>17/6/26</u>	<u>9 AM</u>	<u>X</u>																
Name & Signature of the Doctor Starting the Drugs: <u>Purnima 114309</u>																					
Additional Instructions: <u>(4mg/4/day)</u>																					
Daily Doctor's Endorsement by a Sign																					
<b>DRUG :</b> <u>INJ. FOSPRENYTOIN</u>				Date Time	<u>17/6</u>																
Dose	Route	Frequency	Start Date																		
<u>45mg</u>	<u>IV</u>	<u>12<sup>th</sup> hly</u>	<u>17/6/26</u>	<u>10 AM</u>	<u>X</u>																
Name & Signature of the Doctor Starting the Drugs: <u>Purnima 114309</u>																					
Additional Instructions: <u>(8mg/4/day)</u>																					
Daily Doctor's Endorsement by a Sign																					
<b>DRUG :</b> <u>INJ. PANTOP</u>				Date Time	<u>17/6</u>	<u>18/6</u>	<u>18/6</u>														
Dose	Route	Frequency	Start Date																		
<u>10mg</u>	<u>IV</u>	<u>OD</u>	<u>17/6/26</u>	<u>11 AM</u>	<u>X</u>																
Name & Signature of the Doctor Starting the Drugs: <u>Purnima 114309</u>																					
Additional Instructions:																					
Daily Doctor's Endorsement by a Sign																					
<b>DRUG :</b> <u>SYRUP LEVIPIL</u>				Date Time	<u>18/6</u>																
Dose	Route	Frequency	Start Date																		
<u>2-2ml</u>	<u>P/O</u>	<u>BD</u>	<u>18/6/2026</u>	<u>8 AM</u>	<u>X</u>																
Name & Signature of the Doctor Starting the Drugs: <u>V.S. HANSA 96066</u>																					
Additional Instructions: <u>2mg/kg/dose (1ml/100mg)</u>																					
Daily Doctor's Endorsement by a Sign																					



Sheet No: 2

**REGULAR PRESCRIPTIONS**

Weight 11.1g Ward PW

<b>DRUG :</b> <u>SYP · EPTOIN (PHENYTOIN)</u>				<b>Date</b>																	
<u>(30mg/5ml)</u>				<b>Time</b>	<u>8:10</u>																
<b>Dose</b>	<b>Route</b>	<b>Frequency</b>	<b>Start Dt.</b>																		
<u>4.5ml</u>	<u>PO</u>	<u>BD</u>	<u>18/6/21</u>																		
<b>Name &amp; Signature of the Doctor Starting the Drugs:</b>																					
<u>DR. SURENENA</u>																					
<b>Additional Instructions:</b>																					
<u>(5mg/kg/day)</u>																					
<b>Daily Doctor's Endorsement by a Sign</b>																					
<b>DRUG :</b>				<b>Date</b>																	
				<b>Time</b>																	
<b>Dose</b>	<b>Route</b>	<b>Frequency</b>	<b>Start Dt.</b>																		
<b>Name &amp; Signature of the Doctor Starting the Drugs:</b>																					
<b>Additional Instructions:</b>																					
<b>Daily Doctor's Endorsement by a Sign</b>																					
<b>DRUG :</b>				<b>Date</b>																	
				<b>Time</b>																	
<b>Dose</b>	<b>Route</b>	<b>Frequency</b>	<b>Start Dt.</b>																		
<b>Name &amp; Signature of the Doctor Starting the Drugs:</b>																					
<b>Additional Instructions:</b>																					
<b>Daily Doctor's Endorsement by a Sign</b>																					
<b>DRUG :</b>				<b>Date</b>																	
				<b>Time</b>																	
<b>Dose</b>	<b>Route</b>	<b>Frequency</b>	<b>Start Dt.</b>																		
<b>Name &amp; Signature of the Doctor Starting the Drugs:</b>																					
<b>Additional Instructions:</b>																					
<b>Daily Doctor's Endorsement by a Sign</b>																					

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



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

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

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
17/6/26	8:30 AM	Taj Medazolan	0.5mg	IV	[Signature]	[Signature]
17/6/26	8:30 AM	Taj Ketamin	5mg	IV	[Signature]	[Signature]
17/6/26	2:30 P	Syp. Paracetamol	6ml	PO	[Signature]	[Signature]
17/6/26	5:30 PM	Syp. Paracetamol	6ml	PO	[Signature]	[Signature]

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

