

ANC-00011196 IP28-00004616
Mrs SARANYA A
08-07-1994 31 Y 11 M 12 D (F)
Dr. NANDINI L



Rainbow
Children's
Hospital
It takes a lot to be born here.

BirthRight
BY RAINBOW HOSPITALS
Your fight to a Safe Delivery

DISCHARGE TRACKING SHEET

UHID :

FLOOR:

CONSULTANT NAME: DR.

ACTIVITY	IN TIME	OUT TIME	REMARKS	<To be filled by Admin>
Activity Sheet updated by Nursing				
Activity Sheet updated by Pharmacy	9:10	9:15	Jou	

ACTIVITY RECORD FOR BILLING

ANC-00011196 IP28-00004616
 Nam Mrs SARANYA A
 08-07-1994 31 Y 11 M 11 D (F)
 Dr. NANDINI L



No: Consultant: Dr. Nandini L Dept: 04
 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
19/6/26	5:20 PM	LDR	MF floor	[Signature]
20/6/26	9:45 AM	M11	LDR	[Signature]
20/6/26	1:10 PM	PRE-OP	OT - II	[Signature]
20/6/26	3:15 PM	OT - II	POST-OP	[Signature]
20/6/26	9:30 PM	post-op	MF floor	[Signature]

CROSS CONSULTATION VISIT

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

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
19/6/26	Iv placement	1	1467	[Signature]
"	CTG	3	4578	[Signature]
19/6/26	Foley Inducation (Catheter)	1	1454	[Signature]
20/6/26	CTG	②	4586	[Signature]
20/6/26	CTG	①	4591	[Signature]
20/6/26	CTG	2	4607	PNUR
20/6/26	CTG	2	4607	PNUR
20/6/26	Catheterization	1	151454	PNUR
20/6/26	Pne Anesthesia	1	151630	PNUR
22/6/26	Nutritional Assessment	1		Shift

ANY OTHER INFORMATION:

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Date: Time:

Prepared By: Sugad hini
01/7/26

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
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ANC-00011196 IP28-00004616
Mrs SARANYA A
08-07-1994 31 Y 11 M 12 D (F)
Dr. NANDINI L



SURGERY DETAILS

Date : 20/06/26
Patient Name: Mrs. Saranya A Date of Birth: 08/07/1994 Age: 31Y/F
Gender: FEMALE Ward: DPE-OP UHID No.: 11196/4616
Date of Surgery: 20/06/26 OT-1 OT-2 OT-3 OT-4 OBG OT-1 OBG OT-2
Name of the Surgery: Emergency LSCS

Time In : 2.00pm Time Out : 3.15pm

	NAME	AMOUNT
1. Surgeon	DR. Nandini L	
2. Anaesthetist	DR. Mahalakshmi / Dr. Karthiga	
3. Assistant Surgeon	DR. Pavithra	
4. OT Technician	MR. Sumitha / Ms. Abi	
5. Circulating Nurse	S/N Puthavathy	
6. Assistant Nurse	S/N Koushik	

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

Signature of the Surgeon: *[Handwritten Signature]*

Signature of Circulating Nurse: *[Handwritten Signature]*

Order No: 11196

Order by: *[Handwritten Signature]*

SURGERY DETAILS

Patient Name: Mrs. Elizabeth M. Mwangi Date of Birth: 15/08/1975
 Gender: Female Ward: 100
 Date of Surgery: 20/08/2024 Time: 08:00 AM
 Name of the Surgery: Excisional biopsy of the breast lump
 Time in hours: _____

Surgeon: Dr. James M. Mwangi
 Anesthetist: Dr. Peter M. Mwangi
 Chief of Theatre: Dr. Peter M. Mwangi
 Assistant Surgeon: _____
 Assistant Anesthetist: _____
 Assistant Chief of Theatre: _____

- Special Equipment:
- Laparoscope
 - C-ARM
 - Endoscopes
 - Stethoscope
 - Suction

Signature of the Surgeon: _____
 Date: _____



CONSUMABLES OF OT

2.00 PM to 3:15 PM

Circulating staff: Sri Puspavathy Technician: Rishi/Sumith Date: 20/6/20 Time: 3:15 PM

Anaesthesia Disposables	Qty		Surgical Disposables	Qty		Disposables (Baby Side)	Qty	
	Issued	Used		Issued	Used		Issued	Used
ET tube			Major Pack LSCS		01	Inj Vit.K		01
LMA			Sutures 2347-1		03	Cord Clamp		01
ECG leads (A/P/N)		03	4242-1		01	Suction Catheter		
HME filter : A/P/N			1326-1		01	Feeding Tube (6F)		01
Syringes : 10 cc		01				Vaccum Suction Set		
05 cc		02	Gloves 6 1/2 PF		04	Surgical Gloves		
02 cc		01	7 1/2 PF		01	Gauze Pack		
01 cc		01	6 P.F		01	Syringe 1ml / 2ml		
Cautery plate (A/P/N)		01	Surgical blade 22(S)		01	Surgical Blade # 20		
IV set		01	NG tube		-	Koochies (S)		
RL		03	Cautery pencil		01	Titanium Au		
NS : 10ml / 100ml / 500ml / 1000ml			Koochies		-	Evotacin 50		01
			Ointments		-	Emerald syn (5ml)		01
			Suction Catheter		-	Spinal needle 25(K)		01
Fentanyl			Cap, Mask		-	Anaevin Heavy		01
Morphine			Gauze Pack		03	Buprenorphine		01
Ketamine			Mop Pack		03	Mem		01
Propofol			Steristrip		-	Mexalam		01
Rocuronium			Underpad		02	D-water		02
Glycopyrolate			Draw sheet		-	Nasal prongs (Nas)		01
Myopyrolate			Abgel		-	LIN Gange		03
Ondansetron			Foleys catheter		-	Mannitol Solu Drop		01
Pencan 25g/ Spinal Needle 22			Urobag		-			
Bupivacaine 0.25%			Chest Drainage Catheter		-			
Bupivacaine 0.25%(Heavy)			Romodrain bag		-			
Antibiotics			Bandage		-			
			Tegaderm		-			
Suppositories			Ioban		-			
Anamol : 80mg / 250mg / 170 mg			Double J Stent		-			
Supridol : 100mg			Vaccum Suction set		01			
Justin : 12.5 mg / 25mg / 100mg		01	Plastic Bed Sheet		02			
Tab. Misoprost : 200mg			Betadine Solution		02			
Bioxamic		01	Microshield		-			
Amnepar		01	Cotton Balls		-			
			Latex Gloves		15			
			Ramdione Scrub		-			
			Saral		-			

Dr. Nandini L
Surgeon

Dr. Rishi/Sumith
Anaesthesiologist

Kausik
Nurse

C. C. Arora
OT Technician

Order No. : Ordered by :



RAINBOW CHILDREN'S MEDICARE LIMITED

Rainbow Children's Hospital - Anna Nagar

Old Survey No.230/7A part, Town Survey No.8, Pillaiyar Koil Street,
Thirmangalam Anna Nagar West Chennai Tamil Nadu INDIA 600040
Tel No : 044-69289928

VAT TIN :

CIN :

DL NO :

Registered Office: 8-2-120/103/1, Survey No.403, Road No.2, Banjara Hills, Hyderabad 500034,
Telangana.

INPATIENT ISSUES AGAINST ORDERS



IP No IP28-00004616 Ward 5F-PRE/POST
Patient Name Mrs SARANYA A Bed Name LDR 501
Age/Sex 31 Y 11 M 12 D / Female Order No 28-0000151664
Date 20/06/2026 18:13 Prescription No PRIP28-0071293
Payor MEDI ASSIST INSURANCE TPA PVT LTD Dispensed Date 20/06/2026 18:14
UHID ANC-00011196

S.No	Item Name	Manufacture Name	Schedule	Batch No	Exp Date	Iss QTY	Unitprice	Net Amount
1	AMNEPARA 100ML GLASS BOTTLE		H	L0016006	12/27	1	787.00	787.00
2	ANAWIN HEAVY 5 MG INJ 4 ML	NEON LABORATORIES LTD	H	KP1713925	12/27	1	31.47	31.47
3	BIOXAMIC 500 MG INJ	Biocare Pharmaceuticals	H	C3BIO004	01/28	1	73.23	73.23
4	BUPRIGESIC INJ AMP 0.3 MG 1 ML	Neon Laboratories Ltd	H	45120	11/28	1	31.10	31.10
5	DSYRINGE 10ML (NIPRO)	NIPRO	GENERAL	026C30K60	02/31	1	28.13	28.13
6	DSYRINGE 1ML (BD)	BECTON DICKINSON (BD)	GENERAL	6043348	01/31	1	24.00	24.00
7	DSYRINGE 5ML.(NIPRO)	NIPRO	GENERAL	26C13K17	02/31	2	21.56	43.12
8	DSYRINGE EMERALD 5ML BP (BD)	BECTON DICKINSON (BD)		5184562	06/30	1	12.19	12.19
9	DSYRINGS 2.5ML(NIPRO)	NIPRO	GENERAL	026A21K64	12/30	2	10.31	20.62
10	D WATER 10 ML AMPULE	Aculife Health Care Pvt.Ltd(Nirlif	H	2254585	11/28	2	2.58	5.16
11	E.C.G ELECTRODES (ADULT)	JMS	GENERAL	15326S08G000	04/28	3	32.34	97.02
12	EVATOCIN (OXYTOCIN) INJ 5 IU 1 ML	Neon Laboratories Ltd	H	091690	02/28	7	18.90	132.30
13	INFANT FEEDING TUBE-6	ROMSONS	GENERAL	G24J010995	09/29	1	64.00	64.00
14	INTRAFLOW (AUTO STOP) ROMSONS	ROMSONS		K26B010515	01/31	1	525.00	525.00
15	MEM INJ 0.2 MG 1 ML	NEON LABORATORIES LTD	H	039256	05/27	1	15.90	15.90
16	Menadione Sod Bisul 1 ml	HINDUSTAN LABS		0075	12/27	1	28.92	28.92
17	MEZOLAM INJ 5 MG 5 ML	Neon Laboratories Ltd	H1	V304623	11/27	1	31.55	31.55
18	PREGELLED SURGICAL PLATES(ADULT)	Erbee	GENERAL	02510172407	10/27	1	1,275.00	1,275.00
19	RL 500 ML CLOSED SYSTEM	Fresenius Kabi India Pvt Ltd		1C261733	02/29	3	69.39	208.17
20	SPINAL NEEDLE 25G 90MM WHITACARE	BECTON DICKINSON (BD)		2512026	11/30	1	448.50	448.50
Total :							3,531.07	3,882.38

for RAINBOW CHILDREN'S MEDICARE LIMITED

Receiver Name

Authorized Signature

Pharmacist Name : RISHI S



RAINBOW CHILDREN'S MEDICARE LIMITED

Rainbow Children's Hospital - Anna Nagar

Old Survey No.230/7A part, Town Survey No.8, Pillaiyar Koil Street,
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Tel No : 044-69289928

VAT TIN :

CIN :

DL NO :

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Telangana.

INPATIENT ISSUES AGAINST ORDERS



IP No	IP28-00004616	Ward	5F-PRE/POST
Patient Name	Mrs SARANYA A	Bed Name	LDR 501
Age/Sex	31 Y 11 M 12 D / Female	Order No	28-0000151663
Date	20/06/2026 18:13	Prescription No	PRIP28-0071292
Payor	MEDI ASSIST INSURANCE TPA PVT LTD	Dispensed Date	20/06/2026 18:13
UHID	ANC-00011196		

S.No	Item Name	Manufacture Name	Schedule	Batch No	Exp Date	Iss QTY	Unitprice	Net Amount
1	CAUTERY PENCIL (ADVANCE)	The Advanced cadiomed	GENERAL	250303004	03/28	1	1,188.00	1,188.00
2	DISPOSABLE APRONS STERILE XL	Mediblu		PARCH1010526	04/29	2	100.00	200.00
3	GAUZE 7.5X7.5 12 PLY (5 NOS)	Bapuji Surgicals	GENERAL	M2641119	04/30	3	100.00	300.00
4	GAUZ SWAB 10 X 10 CM 12PLY 5S X-RAY	Bapuji Surgicals	GENERAL	20260416	03/29	1	105.00	105.00
5	GAUZ SWAB 10 X 10 CM 12PLY 5S X-RAY	Bapuji Surgicals	GENERAL	20260514	04/29	2	140.00	280.00
6	JUSTIN SUPPOSITORIES 100 MG 5 S	Neon Laboratories Ltd	H	BLNP274053	11/28	1	18.74	18.74
7	KLICK CLAMP	ROMSONS		0G25I040080	08/30	1	39.00	39.00
8	LSCS DRAPE PACK	Mediblu	H	0LSCSRCH1010526	04/29	1	2,250.00	2,250.00
9	MONOCRYL 3-0 NW 1326	ETHICON SUTURES-J&J	C1	T5116	09/30	1	997.00	997.00
10	MOPS 30X30 8PLY 5S X-RAY	DATT MEDI PRODUCTS	H	20260408	04/29	3	850.00	2,550.00
11	POVINANZ SOLUTION 10% 100 ML		H	N01060177	02/28	2	100.31	200.62
12	SGLOVE # 6.5 (POWDER FREE)	ANSEL		2603019005	03/29	5	128.00	640.00
13	SGLOVE # 6 (POWDER FREE)	ANSEL		260300701T	03/29	1	128.00	128.00
14	SGLOVE # 7.5 POWDER FREE	ANSEL	GENERAL	26010031T	01/29	1	117.00	117.00
15	SURGICAL BLADE 22	Surgeon	GENERAL	051125	10/30	1	7.67	7.67
16	TRUGUT CHROMIC CATGUT SN4242	Sutures India		A260109S	01/31	1	223.00	223.00
17	UNDERPADS CARE 60 X 90 (FRIENDS)			G26A010694	12/40	2	205.00	410.00
18	VACCUME SUCTION SET	ROMSONS	GENERAL	0K26B010638	01/31	1	739.00	739.00
19	VICRYL PLUS 1 VP - (2347)	ETHICON SUTURES-J&J	C1	0T5063	08/30	3	951.00	2,853.00
Total :							8,386.72	13,246.03

for RAINBOW CHILDREN'S MEDICARE LIMITED

Receiver Name

Authorized Signature

Pharmacist Name : RISHI S



CAESAREAN SECTION OPERATIVE NOTES

Surgeon's Name: <i>Dr. Nandhini</i>	Date of Delivery: <i>20/6/2026</i>
Assistant Surgeon: <i>Dr. Paritha</i>	Time of Delivery: <i>2:26 p.m.</i>
Anaesthetist's Name: <i>Dr. Mahalakshmi</i>	Gender of Baby: <i>BOY</i>
Type of Anaesthesia: <i>Spinal</i>	Weight of Baby: <i>2.800 kg</i>
Neonatologist: <i>Dr. Thinesh</i>	AGPAR Score: <i>8/10, 9/10</i>
Scrub Nurse: <i>S/N Kowshik</i>	NICU Admission: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Pre-Operative Diagnosis: *G2A1/39⁺⁶ weeks / short stature for IOL*

Elective Emergency Indication: *Short stature / Mobile Head*
Failed Induction

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: *Reactive*

If there was a delay give the reasons:

Surgical Procedure: *Emergency LSCS.*

Post Operative Diagnosis: *PILIA*

Peri-Operative Complications:

Amount of Blood Loss:	Blood Transfused (in ML):
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Name and Number of Surgical Specimen sent for examination:

Mrs. Saranya 31 y/F

ADMISSION SHEET FOR OBSTETRICS

Presenting Complaints

31 yr old
G2A1, ~~primigravida~~ / GA - 39+5 wks /
admitted for induction of labour; PFM well.

LMP: 14/9/2025

EDD: 21/6/2026

Corrected EDD:

GA: 39+5 wks.

Obstetric Formula: ~~Primigravida~~

Menstrual History: Regular: Yes No

Obstetric History: G1 - Missed abortion at 6 wks.

Obstetric Examination

G2 - Spontaneous conception;
PP.

Fundal Height: Term

Present Pregnancy Record:

Ut. Activity: Relaxed Mild Mod Severe

Liquor: Adequate Oligo Poly

PP: Cephalic Breech Others _____

Head Fifths Palpable: _____

RISK FACTORS:

Short stature

FHS: Normal Tachy Brady Absent

Per Speculum Examination

Draining: Present Absent Bleeding

Colour of Liquor: Clear Meconium Blood Stained

Vaginal Examination

Cervix: Long Partially effaced Effaced

Os: Closed _____ Dilated _____
external os admits tip of finger

Membranes: Present Absent

Liquor: Clear Meconium Blood Stained

Presenting Part: Vertex Breech Others

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

Pelvis: Adequate Doubtful

Height: 164.5 cm

Weight: 53.8 kg

Allergies: NIL

Breast: Normal Abnormal

General Examination: G fair

Consciousness: Alert Pallor: (-)

Icterus: (-) Edema: (-)

Temp: (N) PR: 86/min

BP: 130/72 mmHg DTR:

CVS: RS

Liver/Spleen: Urine Output:

DIAGNOSIS

G2A1 / GA - 39+5 wks / Short stature / for
induction of labour



<p>Family History:</p> <p>NIL</p>	<p>Surgical History:</p> <p>NIL</p>
<p>Medical History:</p> <p>NIL</p>	<p>Medication History:</p> <p>NIL</p>
<p>Plan of Care:</p> <ul style="list-style-type: none"> - Admit - Prepare parts - CTA monitoring - Induction of labour with Foley - Secure IV line - To send CBC, Coagulation profile - To reserve 10PRBC <p><u>4/2/26 (Anomaly scan)</u> SCF ~ 20 + 3 w no gross anomalies, plac - anterior</p> <p><u>28/5/26</u> - SCF ~ 36 + 4 wks, plac - anterior, breech, AFI - 15.8 EFW - 2.68kg.</p> <p>FTS - low risk.</p>	<p>Investigations:</p> <p>Blood group - A +ve <u>26/5/26</u> - Hb - 11.5 gm/dl</p> <p><u>19/6/26</u> HB - 11.8 Plt - 1.66 PT - 14.6 APTT - 27 INR - 1.03</p> <p>ECG Normal Echo</p> <p><u>4/6/2026</u> - SCF ~ 37 wks + 4 days Cephalic AFI - 14.6 Plac - anterior</p> <p><u>10/12/25</u> - SCF ~ 12 + 3 wks, NT - 1.62 mm</p>

Doctor Name: Dr. Sivasarupa
 Signature: [Signature]
 Date & Time: 19/6/26 at 2:15 pm

Consultant Name: Dr. L. Nandini
 Signature: [Signature]
 Date & Time: 19/6/26 at 2:15 pm


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 Mrs SARANYA A 31 Y 11 M 11 D (F)
 08-07-1994
 Dr. NANDINI L



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

BirthRight™
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/6/26		
3:20 pm		S/B Dr. L. Nandini (OA)
	Patient was reviewed, no complaints vitals stable.	
CTA reactive		
	O/E - Afebrile, no pallor	
	P/A - Uterus ~ term, relaxed, cephalic, FH good.	
	P/V - Cervix 2 cm long external os admits tip of finger.	
	22 G ↓ASP, foley inserted intracervically and bulb ^ inflated with 40 cc of distilled water.	Adv:-
		- CTA after 1hr.  12/10/1

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 Mrs SARANYA A
 08-07-1994 31 Y 11 M 11 D (F)
 Dr. NANDINI L



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/6/26 8:30 pm	c/s/B-Dr. Mohana pt examined Able to PFM well	
NST - Reactive (24:30 pm)	O/E: Hydration fair, Afebrile No pallor, no pedal edema S/E CVS) NS	
	P/A ut \approx term Relaxed FH \oplus good	<u>Advice</u> - NST 4 th hourly - Hourly FH - W/A Contractions
	 19/6/26	
20/6/26 7:00 am	c/s/B- Dr. Mohana pt examined Able to PFM well \downarrow SAP, Foley's expelled P/A ut \approx term 20/10"/10" FH \oplus good	
CTG - Reactive	P/V \approx 25% effaced, 1-2cm dilated vx at -3 station, show \oplus membranes \oplus	<u>Advice</u> - 10 RL @ maintenance
	 19/6/26	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/6/26		S/B <u>Dr. Parithea</u>
8:50 a.m		Pt. Reviewed
	<u>vitals stable</u>	No mild pain abd on & off
		P/A - uterus term
		mild acting (1-9/10-15"/10')
		Cephalic
		FHR - good
		<u>Adv.</u>
		- CTG
		- ARST 4th hourly.
		- FHR monitoring.
		- w/F Contractions
		<u>Adv.</u>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>20/6/26</u>		S/B <u>Dr. Nandhini</u>
		S/B <u>Dr. Parthaa</u>
<u>12 pm</u>		PT. Reviewed.
		w/o mild pain on 2 off.
		P/A - uterus mild acting
	<u>CTA - Reactive</u>	1-2 / 10-15 / 10'
		Cephalic
		FHR - good.
		<u>Adv</u>
		- plan Emergency LSCS
		i/v/o Short Stature / Failed Induction
		Mobile Head /
		Non - progress of Labour.
		<u>Dani</u>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>20/6/26</u>		S/B: <u>Dr. Parithea</u>
<u>8 P.m</u>		Pt - Reviewed.
	BP = 128 / 80 mmHg	Constituting - 2 episodes.
	Pulse = 54/min	P/A - at. Contracted.
	Urine output - 100ml/hr	Dressing dry.
	Pt can be shifted to ward.	d/c - B WNL
		<u>Adv</u>
		- To follow post op orders.
		<u>Adv</u>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/6/26 9pm	<p>ds/b- Dr. Mohana</p> <p>POP #0</p>	<p>pt. sciered</p>
<p>BP-10/8</p> <p>PR-67/min</p> <p>SPO₂-99%</p> <p>output-100ml.</p>	<p>O/E: Hydration fair, Afchml</p> <p>no pallor, no PE</p> <p>S/E CVS) WAP</p> <p>KS</p>	
	<p>P/A ut well contracted.</p> <p>dressings @ dry</p>	
	<p>UE BWNL</p>	<p>Adv</p> <p>- sips of water f/b</p> <p>liquid diet.</p> <p>- CBD tomorrow after orders</p>
		<p>16/02</p>

ANC-00011196 IP28-00004616
 Mrs SARANYA A
 08-07-1994 31 Y 11 M 13 D (F)



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/6/2026		S/B Dr. Sivasarupa
8 AM		
(POD - 1)		Patient reviewed vitals stable, passed flatus.
T - (N)		O/E - Afebrile, no pallor
BP - 118/70 mm Hg		P/A - Soft, uterus well contracted
PR - 72/mt		dressing dry, BS (+)
Output - 1710ml; clear urine.		L/E - Bleeding PV WNL
		Advise -
		- DBF.
		- Ambulation.
		after CBD removal
		- Inform SOB

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 Dr. NANDINI L



RESULT SHEET

Date	Blood group - A+ve			
Time				
Hb	26/5/26 - 11.5 gm/dl			
PCV				
RBC				
WBC	- 12.5			
N/L				
Platelets	- 192			
CRP				
ESR				
PCT				
RBS				
Na				
K				
Cl				
Ca/Mg				
Phosphate				
Urea				
Creatinine				
ALP				
SGPT				
SGOT				
T.Bill/Conj				
T.Protein				
S.Albumin				
S.Globulin				
A/G Ratio				
Uric Acid				
S.Amylase				
Sr.Lipase				
Blood Lactate				
S.Cholesterol				
PT/INR				
APTT				
CSF Protein / Sugar				
Cells				
N/L				

Date						
Time						
CUE - Alb						
CUE - Sugar						
CUE - Ketones						
CUE - PUS Cells						
CUE - RBC Cells						
CUE						
Stool Pus Cell						
OVA / Cyst						
Occult Blood						

Culture and Sensitivities :

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Radiology : USG :

 X-Ray :

 ECHO :

 CT :

 MRI :

 Others (ECG, Contrast Studies etc.) :

ANC-00011196
 Mrs SARANYA A
 08-07-1994
 Dr. NANDINI L

IP28-00004616
 31 Y 11 M 11 D (F)



DRUG CHART

Date of Admission: 19/6/20 Drug Allergies: None 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



REGULAR PRESCRIPTIONS

Weight. 53kg Ward. CDR

DRUG : <u>INJ. SUPACEF</u>				Date Time	<u>20/6</u>	<u>21/6</u>	<u>22/6</u>
Dose	Route	Frequency	Start Date	<u>11:30</u>	<u>11</u>	<u>11</u>	
<u>1.5gm</u>	<u>IV</u>	<u>107</u>		<u>pm</u>	<u>am</u>	<u>am</u>	
Name & Signature of the Doctor Starting the Drugs: <u>Dr. Nandini L</u>							
Additional Instructions:							
Daily Doctor's Endorsement by a Sign							

DRUG : <u>INJ. PAN</u>				Date Time	<u>20/6</u>	<u>21/6</u>	<u>22/6</u>
Dose	Route	Frequency	Start Date	<u>11:30</u>	<u>6</u>	<u>6</u>	
<u>Long</u>	<u>IV</u>	<u>107</u>		<u>pm</u>	<u>am</u>	<u>am</u>	
Name & Signature of the Doctor Starting the Drugs: <u>Dr. Nandini L</u>							
Additional Instructions:							
Daily Doctor's Endorsement by a Sign							

DRUG : <u>INJ. PARACETAMOL</u>				Date Time	<u>20/6</u>	<u>21/6</u>	<u>22/6</u>
Dose	Route	Frequency	Start Date	<u>9</u>	<u>8</u>	<u>8</u>	
<u>1gm</u>	<u>IV</u>	<u>1-1-1</u>		<u>pm</u>	<u>am</u>	<u>am</u>	
Name & Signature of the Doctor Starting the Drugs: <u>Dr. Nandini L</u>							
Additional Instructions:							
Daily Doctor's Endorsement by a Sign							

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

Patient Sticker



Sheet No:

REGULAR PRESCRIPTIONS

Weight Ward

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

Signature
VERIFIED BY : Name



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

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

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
20/6/26	11:00am	INJ. SUPACEF	0.1ml.	Intradermal	[Signature]	[Nurses]
20/6/26	11:30am	INJ. SUPACEF	1.5gm	IV	[Signature]	[Nurses]
20/6/26	1:15pm	INJ. PAN	40mg	IV	[Signature]	[Nurses]
20/6/26	1:15pm	INJ. GMSCT	4mg	IV	[Signature]	[Nurses]
20/6/26	2:30pm	Hy-METHERGINE	0.2mg	IV	[Signature]	[Nurses]
20/6/26	3:10pm	JUSTIN SUPPOSITORY	100mg	P/R	[Signature]	[Nurses]
20/6/26	5pm	INJ. GMSCT	4mg	P/R	[Signature]	[Nurses]

Signature
VERIFIED BY: Name



I.V. FLUIDS CHART

Weight 53kg Ward CR

Signature
VERIFIED BY: Name

Date	Time	Composition of I.V. Fluid (If infusion, mention ml/hr = Mcg/kg/min. etc)	Route	Flow Rate ml/hr	Doctor Sign	Nurse Sign	Date of Stopping	Doctor Sign	Nurse Sign
20/6/14	7:30 AM	RL	IV	100ml	[Signature]	SS 01/07/14	11:30 am	[Signature]	Pranav 607207
20/6	11:30 AM	RL	T	100ml	[Signature]	[Signature]	11:30 am		Pranav 607207
20/6	2:20 PM to 3:15 PM	IVF 20 RL	iv	over the	Maha	[Signature]	20/6/14		[Signature]
20/6	2:00 PM to 3:15 PM	10 RL + 20mls Synto	iv	@ 125 ml/hr	Maha	[Signature]	20/6/14		[Signature]
20/6/14	5:30 PM	10 RL	iv	100ml	[Signature]	[Signature]	20/6/14 11:30 PM		[Signature]
20/6/14	11:30 AM	10 NS	iv	100ml	[Signature]	SS 01/07/14	21/6/14 1 PM		[Signature]
20/6/14	7 AM	10 RL	iv	100ml	[Signature]	SS 01/07/14			
21/6/14	1:30 AM	10 DNS	iv	100ml	[Signature]	SS 01/07/14	21/6/14		[Signature]
		10 RL	iv	100ml	[Signature]				