ACTIVITY RECORD FOR BILLING

HANDS OF CARE

CASH / CREDIT

Reg. No. :	I.P.No. : 11	Corporate :	
Name of Patient : Mr. B. Ranjith Kumar		Age : 34 y	Sex : M
Consultant : Dr. B. Krishna Prithvi		Category :	
Date of Admission : 11/01/24	Time : 5.57 PM	Room / Bed No. :	
Date of Discharge :	Time :	Total Days of Stay :	
Anaesthetist : Dr.		Anaesthesia / General / Spinal	
Diagnosis :			
Surgery :			

ACTIVITY CARD UPDATED ON

DOCTOR'S VISITS

Doctor's Name / Date	11/1/24	12/1/24	13/1	14/1	15/1
Dr. B. Krishna prithvi	✓	✓	✓	✓	✓
Dr. Anil kumar sir	✓		✓		
Dr. Sanjith kumar sir			✓		
Dr. Vamsi krishna				✓	

MEDICAL EQUIPMENT

VENTILATOR

Date	Time of Start	Time of Stop	Date	Total/Hrs. Days

MONITOR

Date	Time of Start	Time of Stop	Date	Total/Hrs. Days
11/1/24	8:30 PM	8 Am.	12/1/24	

SYRINGE PUMP

Date	Time of Start	Time of Stop	Date	Total/Hrs. Days

INFUSION PUMP

Date	Time of Start	Time of Stop	Date	Total/Hrs. Days

OXYGEN

Date	Time of Start	Time of Stop	Date	Total/Hrs. Days	Remarks

WATER BED ☐ AIR BED ☐

Date	Time of Start	Time of Stop	Date	Total/Hrs. Days

PULSE OXYMETER

No.fo. Time				

GRBS

Date																		Total
Morning																		
Evening																		
Night																		

PHYSIOTHERAPY

Date											Total
No. of times											

DRESSING : ☐ MINOR ☐MEDIUM ☐MAJOR ☐SPECIAL

Date											Total
No. of times											

NEBULISATION

Date																		Total
Morning																		
Evening																		
Night																		

INVESTIGATIONS

Date	Investigation
11/1/24	Urin protein, Creatine, Ratio,
12/1/24	Platelet count, Sr. Sodium
13/1/24	LC, CBP, platelet count S. Electrolyte
3/1/24	SGOT, SGPT, procalcitonin,
14/1/24	CBC, Sr. Sodium, CRP

Date	Investigation

RADIOLOGY INVESTIGATIONS

Date	Investigation
12/1/24	HRCT Chest (Out Side)
13/1/23	2D Echo

Date	Investigation

PROCEDURES

Procedure	No.of Times	Procedure	No.of Times
Intubation		Tracheostomy	
Ryle's Tube		Steam Inhalation	
Lumbar Puncture		ICD	
Cut Down		Fundus Evaluation	
Catheterisation		Pleural Taping	
Central Line		Suture Removal	
Defibrillator		Enema	
Suction			

BED TRANSFER

Date	From	To	Type of Accommodation	Time
11/1/24	Emg	to	Gen Ward	6:30 pm

DIET

Name of Ward Secretary :

EMP. No. :

Name of Staff Nurse : Lakshmi Kumari

EMP. No. : 0051