

CASH / CREDIT

|                     |                                |                                |         |                      |           |
|---------------------|--------------------------------|--------------------------------|---------|----------------------|-----------|
| Name of Patient :   | Mr. Pemmanaboina Venkateswarar | Age :                          | 70y     | Sex :                | M         |
| Consultant : Dr.    | Revu. B. V. N. Suman           | Category :                     |         |                      |           |
| Date of Admission : | 4/2/24                         | Time :                         | 7:06 PM | Room / Bed No. :     | NON AC 10 |
| Date of Discharge : | 20/2/24                        | Time :                         |         | Total Days of Stay : |           |
| Anaesthetist : Dr.  | Sandeep                        | Anaesthesia / General / Spinal |         |                      |           |
| Diagnosis :         |                                |                                |         |                      |           |

Surgery: debridement 8/2/24 GPM

## DOCTOR'S VISITS

| Doctor's Name / Date | 7/2 | 8/2 | 9/2 | 10/2 | 11/2 | 12/2 | 13/2 | 14/2 | 15/2 | 16/2 | 17/2 | 18/2 | 19/2 |
|----------------------|-----|-----|-----|------|------|------|------|------|------|------|------|------|------|
| DR. Swamy SIK        |     | ✓   | ✓   | ✓    |      | ✓    | ✓    | ✓    | ✓    | ✓    |      |      | ✓    |
| DR. Krishna Prudhui  |     | ✗   | ✗   | ✗    | ✗    |      |      |      |      | ✗    |      |      |      |

## MEDICAL EQUIPMENT

## MONITOR

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

| Date    | Time of Start | Time of Stop | Date    | Total/Hrs. Days |
|---------|---------------|--------------|---------|-----------------|
| 8/26/24 | 6:00 pm       | 5:10 pm      | 8/27/24 |                 |

**SYRINGE PUMP**

| Date   | Time of Start | Time of Stop | Date   | Total/Hrs. Days |
|--------|---------------|--------------|--------|-----------------|
| 8/2/24 | 1:30pm        | 4:00pm       | 8/2/24 |                 |
| 9/2/24 | 8pm           | 7:00pm       | 9/2/24 |                 |

## 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

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

AIR BED

| PULSE OXYMETER |  |  |  |  |
|----------------|--|--|--|--|
| No.fo. Time    |  |  |  |  |

**GRBS**

[illegible]

**DRESSING :** ☐ MINOR ☐ MEDIUM ☐ MAJOR ☐ SPECIAL

|              |      |       |       |       |       |       |       |  |  |  |       |
|--------------|------|-------|-------|-------|-------|-------|-------|--|--|--|-------|
| Date         | 9/12 | 10/12 | 13/12 | 14/12 | 15/12 | 16/12 | 19/12 |  |  |  | Total |
| No. of times | ✓    | ✓     | 2     | ✓     | 2     | ✓     | ✓     |  |  |  |       |

[illegible]

| Date    | Investigation          |
|---------|------------------------|
| 8/2/24  | urine ketone           |
| 8/2/24  | urine ketone at 6:00pm |
| 9/2/24  | urine ketone at 7am.   |
| 9/2/24  | urine ketone at 1pm    |
| 9/2/24  | urine ketone at 7:30pm |
| 11/2/24 | FBS, PPBS              |
| 15/2/24 | Rassdhuze              |
| 18/2/24 | FBS, PPBS.             |
|         |                        |
|         |                        |

[illegible][illegible][illegible]

| Procedure       | No. of Times | Procedure         | No. of Times |
|-----------------|--------------|-------------------|--------------|
| Intubation      |              | Tracheostomy      |              |
| Ryle's Tube     |              | Steam Inhalation  |              |
| Lumbar Puncture |              | ICD               |              |
| Cut Down        |              | Fundus Evaluation |              |
| Catheterisation | 8/2/24       | Pleural Taping    |              |
| Central Line    |              | Suture Removal    |              |
| Defibrillator   |              | Enema             |              |
| Suction         |              |                   |              |

| Date              | From               | To            | Type of Accommodation | Time              |
|-------------------|--------------------|---------------|-----------------------|-------------------|
| 7/2/24            | CMR                | to            | 103 Room              | 10:45pm           |
| 8/2/24            | <del>CMR</del> 103 | to            | DT                    | 4:10pm            |
| 8/2/24            | OT                 | to            | SLCU                  | 6:00pm            |
| <del>8/2/24</del> | <del>CMR</del>     | <del>to</del> | <del>103</del>        | <del>6:10pm</del> |
| 8/2/24            | SLCU               | to            | 1st floor             | 7:10pm            |
| DIET              |                    |               |                       |                   |
|                   |                    |               |                       |                   |
|                   |                    |               |                       |                   |

Name of Staff Nurse : Sridevi  
EMP. No. : 0041