UNITEONE

Standards We Follow

ICD-10   NABH   NABL

ALL HOSPITAL SERVICES UNDER ONE ROOF

UniteOne: The First Indian HIMS Software Aligned with NABH Standards

UniteOne revolutionizes hospital management by offering a comprehensive, paperless solution that drives better patient care and operational efficiency.

www.UniteOne.in

Short Story

UniteOne stands at the forefront of healthcare innovation as the first Indian software meticulously aligned with the National Accreditation Board for Hospitals & Healthcare Providers (NABH) standards. Designed to seamlessly integrate all aspects of hospital management, UniteOne is a comprehensive platform that enhances efficiency, quality, and patient care in healthcare institutions across India.

Team

AMIT CHAUDHARI
Role: Co-founder, Product Owner
Experience: Over 10 years in IT
Responsibilities: Manages IT teams, delivers high-quality solutions, and is responsible for strategic and expansion decisions.

KAMLESH ANJANKAR
Role: Co-founder, Operations Head
Experience: Over 15+ years
Responsibilities: delivers high-quality solutions, and is responsible for strategic and expansion decisions. sales & marketing management services in health care sectors

SHRIKANT ARDHAPURKAR
Role:Digital Forensic | OWASP Leader | Techno Legal | Fraud Examiner
Experience: Over 10 years
Responsibilities: Provides legal guidance on technology-related issues, drafts and reviews contracts, and advises clients on the legal implications of emerging technologies.

UNITE ONE

USER 300+

PATIENT ENCOUNTER 4 LAC+

INSTALLATION 12+

NO.OF BEDS 350+

Differentiators

- Comprehensive healthcare solutions provider dedicated to delivering end-to-end services.
- Our hospital utilizes Audit Modules to systematically review and improve healthcare practices, ensuring compliance with the highest standards.
- We implement Assessment Tool Modules to evaluate and enhance the effectiveness of clinical processes and patient care.
- Continuous education is supported through our Training Module, designed to keep our healthcare staff up-to-date with the latest best practices.
- The SOPs Modules provide standardized operating procedures, ensuring consistency and quality across all hospital operations.
- Task management is streamlined with our Task Modules, enabling efficient tracking and completion of daily responsibilities
- The Minutes of Meeting Module ensures that discussions and decisions made in various committees are properly recorded and available for future reference.
- Our Mobile Application provides easy access to hospital services, allowing patients and staff to manage appointments, access records, and receive updates on the go.
- SMS Integrations ensure that patients and staff are promptly informed about important notifications, reminders, and alerts via text messaging.
- Very easy to use with an innovative, lucid design offering an enhanced user experience.
- Advanced, scalable, highly secure, and web-based solution.
- Utilizes standardized scoring systems, including NABH.
- Recognized as the trusted solution for healthcare facilities, maintaining a 100% retention rate.

Standards We Follow

ICD-10

NABH ACCREDITED

NABL

UNITE ONE

Software Modules

- Appointments
- Registration
- Billing
- Pharmacy
- OPD & IPD clinical
- Nursing station
- eMRD
- MIS reporting
- SMS management

- Patient queue management
- Duty Roster & Attendance management
- Payroll management
- Store management
- Accounts management/Finance
- OT scheduling
- Laboratory management
- Radiology management
- Device integration

NABH Modules

- Quality Indicator modules
- Audit modules
- Assessment tool modules
- Training module
- SOPs modules
- Task modules

- Documentation module
- Notification's modules
- Minutes of meeting for various
- Committees
- Mobile Application
- SMS integrations

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OPD & IPD Clinical

- Comprehensive Consultations
- Workflow built between doctor requests, diagnostic lab, and billing.
- Single screen IPD (Inpatient Department) details per patient.
- Clinical summary is built based on cases.

OPD & IPD NABH

- Average IPD Waiting Time
- Total No. of OPDs
- Average OPD Waiting Time in Hrs.
- IPD Feedback Form
- OPD Feedback Form

Pharmacy

- Pharmacy module is for managing medicines stock, selling and generating medicine bill
- Patient refill reminders via SMS.
- Nursing indents to pharmacy.

Pharmacy NABH

- Total no of Pharmacy Registration
- Total No. of Item Purchases
- Total No. Of Medication Error
- No. Of Stock Outs

Nursing Station

- A nursing note is a medical note into a medical or health record made by a nurse that can provide an accurate reflection of nursing assessments, changes in patient conditions, care provided and relevant information to support the clinical team to deliver excellent care.

Nursing Station NABH

- Thromboplebitis Rate
- Hematoma Rate
- Bed Score Rate
- Patient Fall Rate
- Accidental Removal of Drains and Lines Rate
- Injury to Patient Rate

Laboratory Management

- The Clinical Pathology section analyzes body fluids and specimens, covering chemistry, microbiology, and molecular studies, essential for accurate diagnosis and patient care.
- Comparing test parameters on different days for pathology department analysis.
- Discreetly manage inventory and bills, visible only to authorized personnel.

Laboratory Management NABH

- Total No. of Test
- Average Total No. of Test
- No. Critical Alerts
- % Redos
- % Reporting of Error

Radiology Management

- Report validation with digital signature.
- Single/multi-report creation.

Radiology Management NABH

- Total no of Radiology Indicator
- Average (TAT Turn around Time)
- No. Critical Alerts
- Average Critical Alerts Time
- % Reporting of Error

Registration

- Queue Management: Manages tokens and queues efficiently.
- Patient Identification: Utilizes barcode stickers, patient cards, and wristbands.
- SMS Events: Automated SMS events for registration.

Billing

- In Smart Hospital, centralized billing allows staff to generate bills for either a single module or multiple treatments under OPD/IPD using a patient's Case ID, simplifying the billing process.

Payroll Management

- To generate payroll, go to Human Resource > Payroll. Select the role, month, and year, then click "Search" to view the staff list and their salary details.

Store Management

- The Inventory Module maintains inventory records like uniforms and bill books, simplifies equipment tracking, and manages item stocks, issuance, and returns.
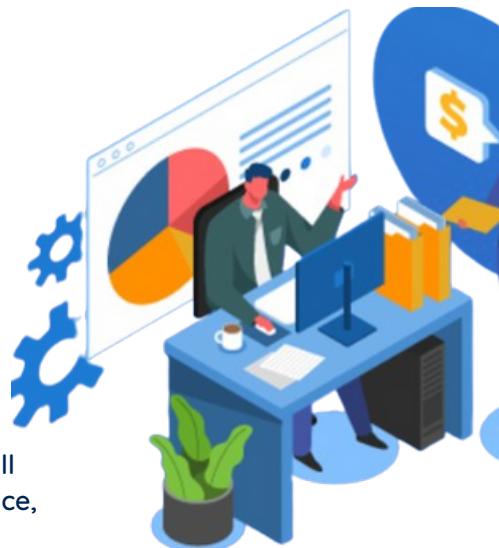
Accounts Management/Finance

- Ledger: Income/expense summary ledger.
- Revenue Reports: Patient category-wise and department-wise revenue reports.
- Bank reconciliation and multi-bank cheque printing.

CRM (Customer Relationship Management)

- Feedback Collection: Collect feedback from patients or their relatives.
- Issue Escalation: Allows for the escalation of issues.
- Questionnaire Configuration: Configure questionnaires and generate reports based on data.

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Duty Roster & Attendance Management

- Leave Management: Manages leave allocation.
- Comp Off & Shift Scheduling: Allows comp off, weekly off, and tour allocations. Schedules duty rotas for all employee types.
- Attendance Tracking: Tracks attendance using biometric IN/OUT times, with automatic mapping of scheduled rota to actual attendance.
- Attendance Tracking: Tracks attendance using biometric IN/OUT times, with automatic mapping of scheduled rota to actual attendance.

OT Scheduling

- Procedure Blocking restricts OT procedures based on availability, Checklist Management ensures all required items are added through a checklist, and Schedule Override enables adjustments for emergencies or priorities.

Insurance Activity

- The TPA module manages third-party administrators for insurance claims, handling processing and benefits. It helps patients secure significant discounts on hospital charges.

eMRD (Electronic Medical Records Department)

- Document Scanning: Scans and attaches additional files to the eMRD.

SMS&WhatsApp Management

- Event-Based SMS: Sends SMS based on specific events.
- Manual SMS & WhatApp: Sends manual SMS to patients or departments, including internal communication through WhatsApp-like groups.
- Web Portal: Tracks SMS consumption via a web portal.

Purchase Management

- Rate Contracts: Manages rate contracts.
- Quotation Comparisons: Compares quotations.
- Requisitions & Orders: Handles purchase requisitions and orders.
- Invoice Conversion: Converts multiple challans to a single invoice.
- GRNs/SRNs: Manages goods received and sent notes.
- Reorder Levels: Sets reorder levels based on sales and consumption trends.
- GRN Register: Maintains a GRN register.

Device Integration

- Barcode Integration: Integrates with barcode systems.
- Biometric Integration: Integrates biometric systems.
- Machine Integration: Semi-automated pathology and full machine integration.
- Tally Integration: Integrates with Tally software.
- Medical Equipment Integration: Integrates with medical equipment.

MIS reports

- MIS Reports: Provides 100+ MIS reports.
- Interactive Dashboards: Offers on-click interactive dashboards for comparative analysis.
- Day-to-Day Activity Widgets: Highlights day-to-day activities.
- Access Control: Controls access for selective viewing of reports.
- Export Options: Provides Excel and PDF formats for detailed and specific viewing of data.

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Patient

+ + +
+ + +
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Patient App/Doctors App/Staff App

Download Android App

ANDROID APP ON
Google play
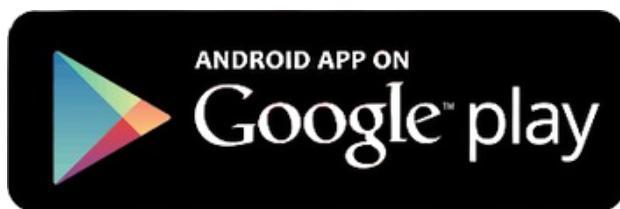
PERFORMANCE OF KEY QUALITY INDICATOR

Sr.No.	INDICATORS	MONTHS	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
1	HOSPITAL UTILIZATION	1. Total No. of Inpatient Days	66	111	110	113	115	94	123	157	158	115	90	17
		2. Total No. of Admissions	52	74	59	59	78	66	79	90	88	61	48	28
		3. Total No. of Discharges	50	74	59	58	75	66	78	89	88	61	47	14
		4. Total No. of DAMA	0	0	0	0	0	0	0	0	0	0	0	0
		5. Total No. of Death	0	0	0	1	0	0	0	0	0	0	0	0
		6. Total No. of MLC	0	0	0	0	0	1	0	0	0	0	0	0
		7. Average Length of stay (in Days)	1.27	1.50	1.86	1.92	1.47	1.42	1.56	1.74	1.80	1.89	1.88	0.61
		8. Total No. of Surgeries	23	30	31	22	48	42	39	39	36	25	20	16
2	INITIAL ASSESSEMENT TIME	Averarge Intial Assessment Time in Hrs.	0.21	0.21	0.22	0.18	0.18	0.19	0.22	0.21	0.19	0.19	0.20	0.19
3	VENTILATOR ASSOCIATED PNEMONIA FORM	1. VAP Rate	0	0	0	0	0	0	0	0	0	0	0	0
		2. Total Ventilator Days	0	0	0	0	0	0	0	0	0	0	0	0
		3. Positive VAP	0	0	0	0	0	0	0	0	0	0	0	0
4	CATHETER ASSOCIATED UNRINARY TRACT INFECTION	1. CAUTI Rate	0	0	0	0	0	0	0	0	0	0	0	0
		2. Total Catheter Days	24.00	29.00	70.00	47.00	55.00	40.00	48.00	0	0	0	0	0
		3. Positive CAUTI	0	0	0	0	0	0	0	0	0	0	0	0
5	CENTRAL LINE ASSOCIATED BLOOD STREAM INFECTION FORM	1. CLABSI Rate	0	0	0	0	0	0	0	0	0	0	0	0
		2. Total Central Line Days	0	0	0	0	0	0	0	0	0	0	0	0
		3. Positive CLABSI	0	0	0	0	0	0	0	0	0	0	0	0
6	SURGICAL SITE INFECTION FORM	1. SSI Rate	0	0	0	0	0	0	0	0	0	0	0	0
		2. Symptoms Of SSI	0	0	0	0	0	0	0	0	0	0	0	0
		3. Positive SSI	0	0	0	0	0	0	0	0	0	0	0	0
7	BED OCCUPANCY FORM	1. Total No. of Patient	52	74	59	59	78	66	79	90	88	61	48	28
		2. Total No. of Discharge/Dama/Death	45	77	60	57	75	69	77	87	83	67	47	16
8	IPD WAITING TIME FORM	Average IPD Waiting Time	0.34	0.28	0.24	0.24	0.23	0.21	0.21	0.20	2.15	0.22	0.24	0.23
9	OPD WAITING TIME FORM	1. Total No. of OPDs	834	744	831	837	786	797	971	945	871	940	779	513
		2. Average OPD Waiting Time in Hrs.	0.27	0.28	0.29	0.37	0.33	0.30	0.31	1.02	0.39	0.31	0.37	0.41
10	NEEDLE PRICK INJURY FORM	1. No. of Operational Exposure / Needle Prick Injury Incidences	0	0	0	0	0	0	0	0	0	0	0	0
		2. Occupational Exposure Rate / Needle Prick Injury Rate	0	0	0	0	0	0	0	0	0	0	0	0
11	SENTINEL EVENT RELATED TO SURGERY AND ANESTHETIA	1. Total Number of surgeries in the month	22	30	29	21	31	59	40	37	33	24	22	8
		2. Total No of anesthetia given in the month	22	30	29	21	31	59	40	37	33	24	22	8
		3. % of Unplanned return to OT	0	3.33	0	0	0	0	0	0	0	0	0	0
		4. % of resceduling of surgeries	0	3.33	0	0	0	0	0	0	0	0	0	12.50
		5. % of cases where procedure followed to prevent adverse events like (WP/WS/WS)	100.00	100.00	100.00	100.00	100.00	100.00	95.00	100.00	100.00	100.00	100.00	100.00
		6. % of cases where planned surgery changed intraoperatively	0	0	0	4.76	0	0	0	0	0	0	0	0
		7. Reexploration Rate	0	0	0	0	0	0	0	0	3.03	0	0	0
		8. % of adverse events related to surgery	0	0	0	0	0	0	0	0	3.03	0	0	0
		9. Total % of PAC done	104.76	103.45	100.00	105.00	100.00	98.31	100.00	102.78	103.13	104.35	100.00	100.00
		10. % of modification in anesthetia plan	0	0	0	0	0	0	0	2.78	0	0	0	0
		11. % of unplanned ventilation following anesthetia	0	0	0	0	0	0	0	0	0	0	0	0
		12. % of anesthetia related mortality rate	0	0	0	0	0	0	0	0	0	0	0	0
		13. % of adverse anesthetia related event	0	0	0	0	0	0	0	0	0	0	0	0
12	BLOOD TRANSFUSION RELATED EVENTS	1. Average Turn around time for Blood	0.00	0.00	0.07	0.22	0.00	0.09	0.00	0.00	0.00	0.00	0.00	0.00
		2. % of blood transfusion reaction	0	0	0	0	0	0	0	0	0	0	0	0
		3. % of Blood Product Wastage	0	0	0	0	0	0	0	0	0	0	0	0
		4. % of Blood Component Usage	1.00	1.00	2.00	5.00	1.00	2.00	1.00	1.00	1.00	1.00	1.00	1.00
13	CARE RELATED EVENTS	1. Thromboplebitis Rate	0	0	9.09	0	0	10.64	0	0	0	0	0	0
		2. Hematoma Rate	0	0	0	0	0	0	0	0	0	0	0	0
		3. Bed Score Rate	15.15	0	0	0	0	21.28	0	0	6.33	0	0	0
		4. Patient Fall Rate	0	0	0	0	0	0	0	0	6.33	0	0	0
		5. Accidental Removal of Drains and Lines Rate	0	0	9.09	0	0	0	0	0	0	0	0	0
		6. Injury to Patient Rate	0	0	0	0	0	0	0	0	0	0	0	0

#	Indicator	Metric												
14	MEDICAL RECORDS INDICATOR FORM	1. % of Missing Records	0	0	0	0	0	0	0	1.15	0	0	0	0
		2. MRD File In order as per MRD checklist	95.56	98.70	96.67	28.07	98.67	100.00	100.00	97.70	100.00	98.51	89.36	100.00
		3. MRD has Discharge Summary	95.56	94.81	75.00	22.81	85.33	85.51	72.73	79.31	83.13	79.10	61.70	56.25
		4. MRD has codification as per ICD	97.78	98.70	96.67	28.07	98.67	97.10	98.70	100.00	100.00	97.01	89.36	100.00
		5. MRD has incomplete or Improper Consent	0	0	0	0	0	0	0	0	0	0	0	0
		6. Medication orders are properly written	97.78	98.70	96.67	26.32	98.67	100.00	98.70	97.70	96.39	98.51	87.23	93.75
		7. Handover Sheet of Doctors are properly filled	97.78	100.00	96.67	28.07	98.67	100.00	100.00	98.85	100.00	98.51	91.49	100.00
		8. Handover Sheet of Nurses are properly filled	97.78	100.00	96.67	28.07	97.33	98.55	100.00	98.85	100.00	98.51	91.49	100.00
		9. The Plan of care is documented with desired outcome and countersigned by clinicians	95.56	100.00	95.00	28.07	98.67	100.00	100.00	98.85	100.00	97.01	91.49	100.00
		10. MRD includes screening for nutritional needs (Nutritional Assessment)	62.22	71.43	65.00	24.56	69.33	65.22	70.13	80.46	81.93	70.15	68.09	62.50
		11. MRD Includes Nursing care plan is documented with outcome at the time of admission	97.78	96.10	65.00	24.56	69.33	65.22	70.13	80.46	81.93	70.15	68.09	62.50
15	HR INDICATOR	1. Employee Absentism Rate	0	0	0	0	0	7.78	9.17	23.33	0	0	0	0
		2. Employee Satisfaction Rate	0	0	0	0	0	7.89	7.13	3.00	0	0	0	0
		3. Employee Griviences rate	0	0	0	0	0	100.00	100.00	100.00	0	0	0	0
		4. Needle Prick Injury Rate	0	0	0	0	0	3.70	25.00	0	0	0	0	0
		5. Occupational Exposure rate	0	0	0	0	0	3.70	25.00	0	0	0	0	0
		6. % of complete HR files	0	0	0	0	0	100.00	100.00	100.00	0	0	0	0
16	EQUIPMENT INDICATOR	1. Equipement Breakdown Time	0	0	0	0	0	0	0	0	0	0	0	0
		2. No. of Equipement under Warranty	0	0	0	0	0	0	0	0	0	0	0	0
		3. No. of Equipement under AMC	0	0	0	0	0	0	0	0	0	0	0	0
		4. % of AMC	0	0	0	0	0	0	0	0	0	0	0	0
17	IPD FEEDBACK FORM	1. Total No. of IPD Patient	45	77	60	57	75	70	77	87	83	67	47	16
		2. Total No. of Patient Who Has Given Feedback	45	74	48	30	62	67	77	87	83	67	47	16
		3. IPD Satisfaction Index	87.33	90.43	74.76	46.49	37.64	87.27	87.98	84.32	75.92	73.88	67.13	77.71
18	OPD FEEDBACK FORM	1. Total No. of OPD Patient	834	744	831	837	786	797	971	945	871	940	779	513
		2. Total No. of Patient Who Has Given Feedback	816	742	831	792	784	779	970	923	860	925	772	473
		3. OPD Satisfaction Index	88.74	89.67	90.33	85.24	90.56	89.01	84.60	78.59	74.81	82.36	82.19	76.91
19	EMERGENCY REGISTER	1. Total No of Emergencies	5	6	3	3	5	4	3	1	4	0	0	0
		2. Average Emergency Arival Time in hrs	0.16	41.89	279.72	0.08	0.10	0.22	0.05	0.00	-7.78	0.00	0.00	0.00
		3. No of Brought Dead	1	0	0	0	0	0	0	0	0	0	0	0
		4. Total No of Return to Emergency Dep	1	0	0	0	0	1	0	0	0	0	0	0
		5. % Return to Emergency Dep within 72hrs	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	100.00	0	0	0
20	ICU REGISTER	1. Total No of Patient Admitted In ICU	2	5	6	4	10	9	7	9	10	3	2	0
		2. Total No of Patient Transfer/Descharge from ICU	1	4	4	4	7	7	6	9	6	4	3	0
		3. Total No of Patient Return to ICU in 48 hrs.	0	0	0	0	0	0	0	0	0	0	0	0
		4. % of Patient Return to ICU in 48 hrs.	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %	0 %
21	LABORATORY INDICATOR	1. Total No. of Test	35	40	16	25	42	26	45	39	24	33	4	1
		2. Average Total No. of Test	45.50	75.50	28.00	37.00	73.00	45.00	88.50	72.83	42.50	43.50	7.50	0.50
		3. No. Critical Alerts	0	0	0	0	0	0	0	0	0	0	0	0
		4. Average Critical Alerts Time	0	0	0	0	0	0	0	0	0	0	0	0
		5. % Redos	0	0	0	0	0	0	0	0	0	0	0	0
		6. % Reporting of Error	0	0	0	0	0	0	0	0	0	0	0	0
		7. % Report Corelating with Clinical Diagnosis	97.14	100.00	100.00	100.00	100.00	100.00	97.78	100.00	100.00	100.00	100.00	100.00
22	PHARMACY REGISTRATION	1. Total no of Pharmacy Registration	3	30	29	31	23	29	31	31	30	31	28	15
		2. Total No. of Item Purchases	49	481	458	432	398	501	737	734	518	436	511	183
		3. Total No. of Sold Items	4201	3092	2453	3400	3364	3568	4117	4178	4107	3727	3074	1509
		4. No. Of Stock Outs	0	0	0	0	0	0	0	0	0	0	0	0
		5. % Of Stock Outs	0	0	0	0	0	0	0	0	0	0	0	0
		6. Total Quantity Received Before Grn	0	0	0	0	0	0	0	0	0	0	0	0
		7. Total No. Of Medication Error	0	0	0	0	0	0	0	0	0	0	0	0
		8. % Of Medication Error	0	0	0	0	0	0	0	0	0	0	0	0
22	PHARMACY REGISTRATION	1. Total no of Pharmacy Registration	3	30	29	31	23	29	31	31	30	31	28	15
		2. Total No. of Item Purchases	49	481	458	432	398	501	737	734	518	436	511	183
		3. Total No. of Sold Items	4201	3092	2453	3400	3364	3568	4117	4178	4107	3727	3074	1509
		4. No. Of Stock Outs	0	0	0	0	0	0	0	0	0	0	0	0
		5. % Of Stock Outs	0	0	0	0	0	0	0	0	0	0	0	0
		6. Total Quantity Received Before Grn	0	0	0	0	0	0	0	0	0	0	0	0
		7. Total No. Of Medication Error	0	0	0	0	0	0	0	0	0	0	0	0
		8. % Of Medication Error	0	0	0	0	0	0	0	0	0	0	0	0
23	RADIOLOGY INDICATOR (IPD)	1. Total no of Radiology Indicator	17	22	22	18	31	14	24	30	23	30	12	8
		2. Average (TAT Turn around Time)	7,260	8,880	12,120	6,780	13,380	4,440	9,960	14,100	8,940	11,880	5,940	2,820
		3. No. Critical Alerts	0	0	0	0	0	0	0	0	2	1	0	0
		4. Average Critical Alerts Time	0	0	0	0	0	0	0	0	-600	-300	0	0
		5. % Redos	0	0	0	0	0	0	0	0	0	0	0	0
		6. % Reporting of Error	0	0	0	0	0	0	0	0	0	0	0	0
		7. % Report Corelating with Clinical Diagnosis	0	0	0	0	0	0	0	0	0	0	0	0

UNITEONE

Hospital Name
सुपरस्पेशालिटी हॉस्पिटल
एण्ड रिसर्च सेंटर
युनिट ऑफ केयर हॉस्पिटल

DISCHARGE SUMMARY

Mrs. NAYANABEN THAKKAR

UHID-1028121

DOB/AGE	:	54 YR / Female
ADDRESS	:	RAMNAGAR GONDIA
MOBILE NO	:	9422832930
CASE ID	:	43646
DISCH. TYPE	:	Normal
DEPARTMENT	:	DOCTOR
ADMISSION DATE	:	19/12/2024 02:51 PM

REG NO.: IPDN2905
WARD INFO : 401 - SUPERDELUX - 4rd Floor
DISCH. CONDITION:: Normal
CONSULTANT :: Dr.SHANTANU PENDSE
DISCHARGE DATE:: 19/12/2024 04:30 PM

FINAL DIAGNOSIS
Ca BREAST (ON CHEMOTHERAPHY) , POST BCS .

PAST HISTORY
K/C/O- Carcinoma of left breast in FEB 2024 .

CHIEF COMPLAINTS
H/O- 5/5/3+ Ca Breast (LEFT) , S/P- BCS .

COMPLETED .

4#AC + 4# PECLITAXEL LRRT TRASTUZUMAB .

+ 2 TRASTUZUMAB

NOR FOR ADJ / MAINT. TRASTUZUMAB

4/13 .

GENERAL EXAMINATION
G.C-MODERATE , CNS-C&O , CVS-S1S2+ , R.S-CLEAR , P/A-SOFT , B.P-110/70mmHG , P-80/min , SPO2 - 98% , R.R-18/MIN .

LOCAL EXAMINATION

SUMMARY
54 YRS LADY OLD K/C/O- Ca BREAST (ON CHEMOTHERAPHY) , POST BCS ADMITTED FOR TARGET THERAPY 5/5/3+ CYCLE OF INJ.TRASTUZUMAB 420 MG. SHE WAS ADMITTED IN MICU 1 BED NO.4 INJ.TRASTUZUMAB 420 MG WAS GIVEN AS PER PROTOCOL. SHE TOLERATED WELL TO GIVEN TREATMENT AND NOW IN HAEMOFDYNAMICALLY STABLE CONDITION SHE IS BEING DISCHARGED .

TREATMENT GIVEN
INJ.AVIL , INJ.TRASTUZUMAB 420 MG WITH 100 ML NS .

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फोन : (०७१८) ३६४४२/४३
मोबाइल : ०९७८५५००६५
ई-मेल : diacare@yahoo.com
(ISO 9001: 2008 certified)

हेकर
सुपरस्पेशलिटी हॉस्पिटल
एण्ड रिसर्च सेंटर
युनिट ऑफ केयर हॉस्पिटल

TREATMENT ADVISED/MEDICATION

SR.	Medicine	Frequency	Dose Duration	Instruction
1	LETROZOLE 2.5 MG Tab	1-0-0	Daily For 1 Month	OD (दिन में एक बार)
2	SHELCAL 500 Tab	0-0-1 (HS)	Daily For 1 Month	OD (दिन में एक बार)

PHYSIOTHERAPY & INSTRUCTIONS
BED REST
AVOID EXERTION

CONDITION ON DISCHARGE
HAEMODYNAMICALLY STABLE .

FOLLOWUP DATE & TIME
16/01/2025 12:30 PM

Doctor Signature
(Prepared by : Medical Officer)

DR. THIMESHWARI MESHRAM

Doctor Signature & Stamp
(Authorized by)

Discharge Instructions

1. In Case of any Emergency please contact the Hospital Emergency Number:91 71822 36442 or visit our emergency department. किसी भी आपात स्थिति में   कृपया अस्पताल आपातकालीन नंबर: +91 71822 36442 पे संपर्क करें या हमारे आपातकालीन विभाग पर जाएं।
2. Declaration by guardian of the patient:Copy of the above -mentioned instructions have been received and understood. Reports,Old papers and documents have been received and verified. मरीज के अभिभावक द्वारा घोषणा: उपर्युक्त निर्देशों की प्रति प्राप्त हुई और समझ गई. रिपोर्ट, पुराने कागजात और दस्तावेज़ प्राप्त हो गए हैं और सत्यापित हो गए हैं

Signature Of Patient   : -----------------------
Name Of Relatives   : -----------------------
Signature Of Relatives : -----------------------
Relation With Patient : -----------------------

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Hospital Name
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युनिट ऑफ केयर हॉस्पिटल

OPD Case Summary

Case ID	:	176551		
Regi. No.	:	161627	**Date**	: 17/08/2024
Patient Name	:	**Mr. Vishwjeet Vijay Ghatge**	**Scheme Name**	:
Complaints	:	C/c Pain & swelling over clavicle right left ------hours days Restricted movements of right left shoulder since ----hours days. Abnormal prominence (+) lateral end of clavicle ROM of left right shoulder H/o Fall ------hours days back in form of ------ H/o RTA -----hours days in form of -----		
Past History	:	NO ANY K/C/O HTN AND DM AND COPD AND IHD		
General Examination	:	Pt is conciousness , co-operative B.P. 120/70 mm of Hg Pulse 84/min		
Systematic Examination	:	NAD		
Local Examination	:	Tenderness (+) over lateral end of clavicle left right Abnormal prominence (+) lateral end of clavicle ROM of left right shoulder painful and rastricted No DNVD		
Provisional Diagnosis	:	FRACTURE LATERAL END CLAVICLE		
Investigation Advice	:			
Final Diagnosis	:	FRACTURE LATERAL END CLAVICLE		
Investigation Done	:			
Treatment Advice	:			
Next Follow up	:			

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NABH

Prescription OPDP50			**Date : 17/08/2024**
OPD ID	OPDN161626	**UHID**	UHID-1124169
Patient Name	Sachin Sambha Chavan (124169)	**Age / Gender**	30 Year / Male
Address	Herekud	**WT : HT :**	
Consultant Doctor	DR SATISHKUMAR PATIL (S) (PIOS1583)	**Phone**	9606678072

Sleep : -

Anorexia : -

Constipations : -

Stress
NO

Pulse
180

BP
120

SpO2
80

S₁S₂
90

Chest
NA

PA
NA

Edema
NA

b/L DPA
NA

h/o Covid
NA

f|h|o
NA

Addications:
Tobacco +
Alcohol - Occasional,
Daily, ++
SMoking - +, ++, 20
bidis/day

K|C|O:
CHEST PAIN since 2 days
associated with Sweating + -, SOB + -, Radiation to arms + -, Exertional SOB + - NYHA class 2'
Exertional angina + -, Pedal edema + -, Giddiness

Finding:
Rosacea
Rosacea (roe-ZAY-she-uh) is a common skin condition that causes blushing or flushing and
visible blood vessels in your face. It may also produce small, pus-filled bumps. These signs
and symptoms may flare up for weeks to months and then go away for a while.

Complaints:
Chest pain since last 4 days
Cough, Cold since last 3 days
Fever with Chills since last 2 days
SOB on exertion since last 5 days

Pathology

Tests

CBC, VDRL TEST - TPHA,

Radiology

Tests	Part Of Investigation
Xray	chest
MRI	Right Brain

Drugs

#	Category	Medicine	Frequency	Duration	Instruction
1	Syrup	Benadryl	1 (ML)	4 times a day	1 Month

Prescription Medications:

#	Category	Medicine	Frequency	Dose Duration	Instruction
1	Cap	ECOSPRIN / AV (75/10)	0-1-0	1 Month	AFTER FOOD
2	TAB	ANGIWELL 2.6mg	8am - 4pm	1 Month	
3	TAB	KORANDIL 5mg	1-0-1	1 Month	
3	TAB	PANROM 40 mg	1-0-0	1 Month	1/2 hr Before food

Special Instructions:
Fluid 1.5 litres/day, Low protein diet

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DR.AMIT CHAUDAHRI
MBBS,D.G.O,D.N.B,FIMCH
Obstetrician,Gynaecologist & Sonologist

OPD Timing:Mor.10 am to 2 pm & Eve.6.30 to 8 pm

UHID	UHID-100:448	**OPD ID**	OPDN1426
Consultant Doctor	DR.NITU SINGH,DGO DNB (HNAN002)	**Date**	2024-10-17 12:38:41 PM
Patient Name	Shila Mitkar (1448)	**Age / Gender**	22 Year / Female
Husband Name		**Age**	
Husband Occupation		**Wife Occupation**	
Husband's Mob.		**Wife Mob.**	N/A
Religion		**Aadhra Card No**	

Chief Complaint:
C/o Cough Cold since 2 days
Associated with Expectoration - White/ Yellow
Not associated with expectoration
Associated with Fever - with chills/ without chills
Associated with sore throat

Examinations
BP: 120/80 mmHg   Wt: 58kg kg   Temp: 97 °C
GC: fair (General Condition)
Pulse: 76/min bpm
Pallor: Nad   Edema test: NO
CUS/RS: Nad

P/A:
P/A:Uterus 38 Weeks
absent
ROA FHS+Regular 100/min
Vertex fixed Uterine contraction Present

P/S:
P/A:Uterus 36 week
ROA FHS+Regular 134/min
 UC++

P/V:
OS closed, partially effeced
Membrance++

Diagnosis:
primi withn lps

Rx

	Medicine	Frequency	Duration	Instruction
1	Augmentin 625 BD	10.00AM-10.00PM	Daily For 2 Days	दिन में दो बार

Follow Up Date: 20/10/2024

Special Instructions
Review after one month for check up

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UHID	UHID-1001448	**OPD ID**	OPDN1426
Consultant Doctor	DR.NITU SINGH,DGO DNB (HNAN002)	**Date**	2024-10-17 12:38:41 PM
Patient Name	Shila Mitkar (1448)	**Age / Gender**	22 Year / Female
Husband Name		**Age**	
Husband Occupation		**Wife Occupation**	
Husband's Mob.		**Wife Mob.**	N/A
Religion		**Aadhra Card No**	

History:
Caesarean Section, Bad obstric history, Intertitity, Cangenital amonlies, Forceep/vaccum, Blood Trims.

Menstrual history
LMP: 01/10/2024　　　　**E.D.D**: 08/07/2025　　　　**E.D.D (corrected by USG)**: 22/10/2024

High Risk Factor: Bad obstric history, Blood Trims.
Any Other: nad

Obstetric History:

	Sex & Age of child	Type of delivery	Immunized	Anomaly/Problem any
1	Primi			
2	g2p1l1 1st male child 1 year	LSCS	done	

Medical History: Nil
Surgical History: TL Done
Family History:
Diabetes.
Any Other: Nad
Allergy: Inj xone
Investigations:
Blood Group Patient: O+
Blood Group Husband:
Hb Electrophoresis by HPLC method: NIL

Test	Date(06/10/2024)	Date()	Date()	Test	Status
Hb%	10gms			HBsAg	Negative
Urine(R)	NAD			HIV	Negative
Sr.TSH	2.3			V.D.R.L	Negative
OGCT	1.9				
Blood-F	2.6				
Sugar-PM	183				

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PIH Profile:

KFT   done

Urine Albumin:

Coagulation
Profile

Sr. Uric Acid

Special Investigation:

Double Marker	:	done
Triple Marker	:	done
Quadriple Marker	:	

Ultrasonography:

Viability Scan	:	
NT Scan	:	DOne
Anamoly Scan	:	
Fetal Echo	:	
Growth Scan	:	

Vaccination:

Inj Tdp 1st dose	:	done on 1/9/2024
Inj Tdp 2 nd dose	:	
Flu shot	:	

Special Instructions:

Review after one month for check up

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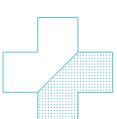
PIOS Medilinks Pvt Ltd Jaysingpur

Bahekar Superspeciality Hospital Gondia

Nandini Multispeciality Hospital Nagpur

Apulki Vairagade Hospital ,Nagpur

Cotton City Multispeciality Hospital, Yavatmal

**Vignaharta Hospital in Akola**

Dr. KS Patil Hospital Akola

Sahara Hospital Akola

Dr.Shoris Dental Clinic Nagpur

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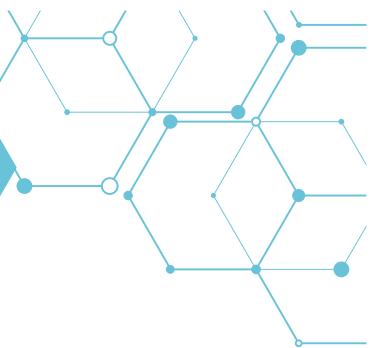
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WE HELP A HOSPITAL MAINTAIN NABH ACCREDITATION AND ENSURE HIGH QUALITY PATIENT CARE.

Thank You
for your trust and support!

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