BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 7 D (M)
Dr. VIJAYANAND JAMALPURI

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NEWBORN MONITORING FORM

Date of Birth	: 25/3/26	New Born Screening	:
Time of Birth	: 10:47pm	TFT	:
Mode of Delivery	:	OAE	:
Birth Weight	: 950 gms	Mother's Blood Group	: otve
Head Circumference	: 34 cm	Baby's Blood Group	: otve
Length	: 50cm	Anomaly Scan	:
Red Reflex	:	Vaccination	: BCG, Hexavalent, Rotatea

Prevenar, RSV 50mg given on 3/6/26 Cui - Don on 2/6/26

Date	Weight (w.w)	Type of Feed	Quantity	Temperature	Signature
1/6/26	1.611kg	EBM	25ml	98.1°F	[signature]
2/6/26	1.648kg	EBM	25ml	97.2°F	[signature]
3/6/26	1.676kg.	EBM	37ml	97.9°F	[signature]

Date	Time	Investigation	Result	Order No.	Signature
3/6/26	6am	GRBS	85 mg/dl	—	[illegible]

Rainbow Children's Hospital

BirthRight Rainbow

Rainbow Children's Hospital - Banjara Hills

8-2-120/103/1,2,3,4 and 5,Road No: 2, Banjara Hills, Telangana, Hyderabad, INDIA Banjara Hills ,Hyderabad ,Telangana, India ,500034.
TEL NO :+91-40-4466 5555
WEB : https://rainbowhospitals.in

ADMISSION SHEET

Registration Details :

Admission No : IP5-00171644 **Admit Date** : 25-Mar-2026 **Admit Time** : 11:37 PM **UHID** : BAH-00652011

Patient Details :

Patient Name	: Baby Of SRI VIDYA VANGALA	**Age**	: 0 D
Guardian	: Mr SHIV CHARAN YEDAVALLI	**DOB**	: 25-03-2026 11:18 PM
Gender	: Male	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H NO MIG 178/1, KARTHIK RESIDENCY, BALAJI NAGAR Kukatpally Hyderabad Telangana INDIA 500072	**Phone No**	: 8019663771/ 9908254067
		E-mail	: NOMAIL@GMAIL.COM

Admission Details :

Bed Type : NICU **Bed No** : NICU 254 **Ward Name** : 2F-NICU 2

Room No : NICU 254 **Admission Type** : First Visit

Contact Details :

Name : Mr SHIV CHARAN YEDAVALLI **Relationship** : Father

Contact Address : H NO MIG 178/1, KARTHIK RESIDENCY, BALAJI NAGAR Kukatpally Hyderabad Telangana INDIA 500072 **Phone No** : 8019663771 / 9908254067

Signature

Doctor Details :

Doctor Name : Dr. VIJAYANAND JAMALPURI **Specialisation** : NEONATAL INTENSIVE CARE

Referral Doctor : Self **Phone No** :

Co-Consultant :

Payment Details :

Deposit Amount : 0.00

Payment Mode : Cash **Payor Name** : SELFPAY

(2)

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ACTIVITY RECORD FOR BILLING

BAH-00652011 IPS-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
Dr. VIJAYANAND JAMALPURI

Name :_____ _____

UHID No. : __ _____Consultant: _____ Dept : _____

Date of Admission: _____ _____Date of Discharge : _____ Time: _____

Room / Bed No : _____Ward : _____ Suggested Billable bed type : _____

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	K.V prasad	07/05/2026	09596212	Pooja. C.
2	K.V prasad	28/5/2026	9631497	Pooja. C.
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
14/5/26	RBS	26048898	
15/5/26	NP2, TFT, ~~GRBS~~ FreeT4	26049198	
15/5/26	VBG, RBS	26049197	
17/5/26	RBS	26049990	
18/5/26	RBS	26050197	
19/5/26	RBS	26050730	
21/5	RBS	26051576	
22/5	RBS		
25/5	NP-2	26053091	
25/5	RBS	26053090	
25/5	GAS	26053090	
25/5	irradiation	26053219	
27/5	RBS	26053747	
29/5	RBS	26054492	
30/5	RBS	26054888	
1/5/26	NP2, TSH, FT4	26055438	
1/5/26	RBS		

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
5/5/26	Inv Monitor	25/4/26		9526582	
	CPAP	25/4/26		9578169	
	Oxygen.	25/4/26		9578169	
6/5/26	Inv Monitor	25/4/26		9526582	
	CPAP	25/4/26	12:30pm 13/5/26	9578169	
	Oxygen	25/4/26		9578169	
13/5/26	HFNC	13/5/26 12:30pm		9606728	
14/5/26	Inv. Monitor	25/4/26		9526582	
14/5/26	Oxygen	25/4/26		9578169	
14/5/26	HFNC	13/5/26 @ 12:30pm		9606728	
15/5/26	Inv. Monitor	25/4/26		9526582	
15/5/26	Oxygen	25/4/26		9578169	
15/5/26	HFNC	13/5/26 @ 12:30pm		9606728	
21/5/26	Inv. monitor	25/4/26		9526582	
	oxygen	25/4/26		9578169	
	HFNC	13/5/26		9606728	
22/5/26	Inv monitor	25/4/26		9526582	
	oxygen	25/4/26		9578169	
	HFNC	13/5/26		9606728	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
1/5/2026	ROP Screening	1	0959621	[illegible]
28/5/26	ROP Screening	1	9631496	[illegible]

ANY OTHER INFORMATION

.....

.....

.....

.....

.....

.....

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : B/O SRI VIDYA Age : ..... Father's Name : Shiva chare Age : —

Date of Birth : 25/3/26 Date of Admission : 25/3/26 UHID No.: BAH - 0065201

NICU Consultant : Dr. vijayanand Referring Consultant : —

Transferring Unit : ☐ OT ☐ Labour Room ☐ ER ☐ Ward

Transported ? ☐ Yes ☐ No - If yes : ☐ Long (> 30 kms) ☐ Short (< 30 kms)

BIRTH INFORMATION

Name : B/O SRI VIDYA

Gender : ☑ M ☐ F Blood Group : O+ve

Date of Birth : 25/3/26 Time of Birth : 10:47 PM

Place of Birth : BANJARA

Mother's Blood Group : O+ve.

Birth Weight (gms) : ~~975gms~~ 950gms Length (cms) : .....

OFC (cms) : .....

Estimated Gesth Age : 26+4

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 31yrs Ht : ..... Wt : ..... BMI : ..... Married Life : ..... LMP : 14/9/25 EDD : 27/6/26.

Conception : Spontaneous or with Rx. : IVF Conception

Booked at what GA. : ..... AN Steroids Drugs / Doses : Inj Betnesol 12mg, 3PM → 24/3, 3AM → 25/3

Last Scans Details : 5/3/26 → 640gms, Dopplers → (N)

TT Immunization and Iron / Folic Acid : Inj mgsoy, maintenance

MATERNAL RISK FACTORS

Age : ☐ <18 yrs ☐ > 35yrs

Consanguinity : ☐ Yes ☐ No

If yes, degree of consanguinity : ☐ 1 ☐ 2 ☐ 3

H/o PIH (after 20 weeks) / PE

How many Drugs / Doses / Since how long : —

H/o value of recent BP recording, proteinuria, edema, oliguria, any investigations (LFT, platelet count) : .....

IUGR - when detected : .....

Doppler (Increased Resistence / ADEF / REDF / Redistrbution in MCA) / Ductus Venosus : .....

AFI : (N)

H/o GDM/ pre GDM/ on diet or insulin

Controlled or not, recent values, HbA1 values : —

Compliance with Rx : .....

Scans : LGA, TIFFA , Fetal Echo : .....

H/o Hypothyriodism : when diagnosed ? Medication? (+)

Any other Chronic Medical Problems, when detected drugs ? Cerclage insitu (+)

(Anemia, SLE, Jaundice, CHD, Heart Disease)

Infection : H/O, Fever

(☐ Malaria ☐ UTI ☐ TORCH ☐ TB ☐ HIV ☐ HBV)

UTI : when : ..... Any culture : .....

PPROM : Duration : — ☐ Uterine Tenderness ☐ Foul Smelling Liquor ☐ HVS (if taken) - Results : .....

Medication during Pregnancy : ..... Duration : .....

25-03-2026 0 Y 0 M 0 D 15 H (M)
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PAST OBSTETRIC HISTORY

G : 5 P : ..... A : 1 L : 3

Sl. No.	Age	GA wks	B. W	Gender	Significant	Details
1)	Ruptured left tubal Ectopic					
2)	2022 / Spontaneous miscarriage @ 6 weeks.					
3)	Rt tubal Ectopic / medically managed					
4)	Rt tubal Ectopic					

PERINATAL HISTORY

Treating Obstetrician : ..... Hospital : ..... ☐ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig) Preterm Onset of labour & bleeding PV

Second stage (> 2 hours after dilation)

LSCS : ☐ Elective ☑ Emergency Indication : .....

Specify the reason : .....

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☐ Normal ☐ Suspicious ☐ Pathological

MSL : .....

Resuscitaion : ☑ Yes ☐ No

Cord ABG : .....

Placenta : (weight, surface, No. of cotyledons, calcifications, malformations, clots etc : .....

NEONATAL RESCUSTITION DETAILS

APGAR SCORE

Gestational Age : ..... Weeks : .....

SIGN	0	1	2
COLOUR	Blue or Pale	Acrocyanotic	Completely Pink
HEART RATE	Absent	< 100 Minutes	> Minutes
REFLEX IRRITABILITY	No Response	Grimace	Cry or Active Withdrawal
MUSCLE TONE	Limp	Some Flexion	Active Motion
RESPIRATION	Absent	Weak Cry; Hypoventilation	Good, Crying

1 Minute	5 Minutes	10 Minutes
5	8	

TOTAL

Resuscitation			
Minutes	1	5	10
Oxygen			
PPV / NCPAP			
ETT			
Chest Compressions			
Epinephrine			

Comments :

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :

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History of Present Illness:

EQUIPMENT CHECKED

↓

Em. LSCS

↓

Received in Plastic wrap

↓

Poor efforts, HR<100

↓

PPV started.

↓

2min HR - 72, SPO_2 - 56%

↓

PPV continued → PPV for 4mins

↓

HR - 136/min, SPO_2 - 84%, Poor Efforts.

↓

Intubated with 2.5 size ET

↓

Shifted to NICU.

25/6 FIO_2 - 65%

↓

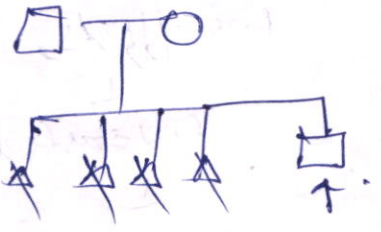
30/6, FIO_2 - 30%

Investigation details in previous Hospital :

Feeding History :

Past History :

Family History :



Socio Economic History :

Upper - middle class.

GENERAL EXAMINATION ON ADMISSION

General Disposition :

Vigorous.

VITALS : Temperature : 36.2°C HR : 145/min RR : - NIBP : - CFT : 3 sec

Color of the extremities : Acrocyanotic + pink

Jaundice : - Pallor : - SpO2 : -

Anthropometry : Birth Weight : 950gm Length : HC : Present Weight :

Ponderal Index : AGA : SGA : LGA :

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HEAD TO TOE EXAMINATION

HEAD :	Fontanelles : Sutures Shape / Moulding : Edema / Bruising : Size - (H.C.) :	N
Facies : (Any Facial Dysmorphism)		NO
NECK and CLAVICLES :	Range of Motion : Asymmetry : Masses :	N
EYES :	Symmetry : Red Reflex : Discharge :	needs to be checked
EARS, NOSE MOUTH and THROAT :	Ear set / Shape : Periauricular Pits / Tags : Nasal shape / Patency : Palate : Gums : Lips : Tongue :	N
THORAX and BREASTS :	Shape of Thorax : Position of Nipples and Number :	N
ABDOMEN and UMBILICUS :	Shape : Organomegaly : Bowel Sounds : Umbilical Stump : Discharge :	2A+1V
GENITILIA :	Labia / Hymen : Testicles/penis : Anus :	
HERNIAL ORIFICES		free
TRUNK and SPINE :		
SKIN LESIONS :		
EXTREMETIES :	Fingers / Toes : Arms / Legs : Deformities : Mobility : Hip Joint Examination :	N

SYSTEMIC EXAMINATION

Respiratory System :

Breathing Pattern : ☐ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress : RR : ..... SCR / ICR / See - Saw breating : .....

Scoring of respiratory distress if present (Silverman or Downe's) : .....

Mention if baby is on : ☐ Hood box ☐ CPAP ☑ Ventilator

Settings : .....

Spo2 : 95% Auscultation : BAEG Breath Sounds : N Added Sounds : .....

Cardiovascular System :

HR : 136/min BP : ..... Precordial Activity : .....

Femoral Pulses : ..... Murmurs : (-)

Other Peripheral Pulses : ..... Signs of Cardiac Failure : .....

Abdomen :

Shape : N Hernia orifice : free

Palpation : ..... Anal Patency : .....

Palpable masses : ..... Umbilical Cord : 2A+W

Abdominal girth : ..... First urine passed : .....

Meconium passed : .....

Nervous System : Higher intellectual functions (Sensorium) : .....

State of wakefulness : AAA

Prechtle Score : .....

Nerves :

.....

.....

.....

Motor System :

Passive Tone : AAA

Active Tone : .....

Neonatal Reflexes : .....

Grasp : ☐ Palmar ☐ Plantar ☐ Sucking ☐ Rooting ☐ Crossed adductor : .....

Moro's : ..... DTR : .....

ATNR : ..... Skull and Spine : .....

Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
Dr. VIJAYANAND JAMALPURI

Any Congenital Anomalies : .....

Diagnosis : EPT | ELBW | RDS | Suspected sepsis | Difficult transition

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature : .....

Name : RAM

Date & Time : 26/3/26.

Consultant :

Signature : Dr. VIJAYANAND JAMALPURI

Name : Dr. VIJAYANAND Reg. No: 40582 JAMALPURI

Date & Time : 26/03/26

PLEASE FILL UP THE FOLLOWING DETAILS

1. Name of the referring Doctor : .....
2. Name of te referring Hospital : .....
   Address : .....
   Contact Numbers : .....
3. Contact Details of the referring Doctor : .....
   Mobile No. : ..... E-mail ID : .....
4. Name of the Doctor in Rainbow Team : .....
   ..... on whose name the patient is being referred.

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AT THE TIME OF TRANSFER TO THE WARD

Final Diagnosis : .....

Present Issues : .....

Vital : ☐ HR : ..... ☐ RR : ..... ☐ BP : ..... ☐ SPO2 : ..... Weight : .....

Any Oxygen requirement : .....

Systemic : .....

Medications : .....

Plan during ward follow up :

Feeding Plan at the time of shifting : .....

Screenings done during NICU Stay :

NSG : .....

Hearing Screen : .....

ROP : .....

TFT : .....

NP2 : .....

plan

→ Continue SIPPU + UG

→ Target SPO2 90-95%

→ TV - 60cc/kg/day
10% D + Ca3 + Arg/kg

→ Gas Obhrly

→ GRBS Obhrly

→ Target MBP ≥ 28 ± 2mmHg

→ I/O chart Obhrly

→ Inj Caffeine Citrate 20mg/kg

→ EBM 1ml Obhrly

→ Blood Cls.

→ CBP, PT, APH

→ Inj Piptaz

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 3 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: 66 Day of Life: 65 PMA: 35+5

Term ☐ Preterm ☑ Gestation: 26+4 Corrected Gestational Age: ..... Today's Weight: 1.547 (T24gm)

Problems

	S.No.	Current	Past Problems
Overview	1.	EPT / ELBW	
	2.	RDS / Evolving CLD	
	3.	Apnea of prematurity	
	4.	Anemia	
	5.	Hypothyroidism	
	6.	Plagiocephaly	

Clinical Assessment

On RA
No brady, desat.
Taken day paladay well.
~15-20mins
PA-soft.

HR-146/min
SpO_2-100%
RR-48/min
ROP - B/E zone 2 ant stage I no plus

Medications Used

3% NaCl
Ossopan-D
Vit D_3
Olofer XT
Levothyroxine

Plan of Care:

1. TV=170ml/kg/day → 22ml Q2H + 1gm fortification
2. (RW) Full paladay
3. cont KMC
4. ROP in 2weeks
5. (RW) TFT.

Doctor's Name (Hand over given): Dr Aishwarya
Signature: [signature]
Date & Time: 29/5/26 8:30am

Doctor's Name (Hand over taken): Dr. Poojitha
Signature: [signature]
Date & Time: 29/5/26 9am.

Docu. No. : RCHBH/FRM / CLINICAL / 290(26)

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/5/26 9:30 AM		Seen by Dr Vijayanand
		Plans
		- full paladai feeds.
		- continue KMC
		- TFT: TSH, Free T4, NP2 } on Monday
		Dr. [signature]
		Dr. VIJAYANAND JAMALPURI Reg. No. [illegible]
29/5/26 2PM	Afternoon Rounds	
	on room air	Plan
	no brady / desat	(1) TV = 170ml/kg/day
	tolerating feed - paladay	22ml Q2H full paladay
	PA - 50ft	(2) cont KMC
	HR - 144/min	(3) Monday - NP2 TSH + FT4
	SpO2 - 95%	
	RR - 35/min	(4) ROP in 2 weeks
		Dr Abhayya

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/5/26 @ 5pm	-	Seen by Dr. Vijayanand. 1) TV = 170ml/kg/day. 22ml 2nd hrly. Full paladay. 2) Continue KMC 3) Labs as planned. Noted by Soa 29/5/26 @5PM Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: 67 Day of Life: 66 PMA: 35+6

Term ☐ Preterm ☑ Gestation: 26+4 Corrected Gestational Age: ..... Today's Weight: 1.567 ↑20gm

Overview

S.No.	Problems: Current	Past Problems
1.	EPT / ELBW	
2.	RDS / Evolving CLD	
3.	Apnea of prematurity	
4.	Anemia	
5.	Hypothyroidism	
6.	Plagiocephaly	

Clinical Assessment

on RA
taken paladay well - full day & night
PA soft.

HR - 140/min
RR - 48/min
SpO_2 - 99%

Medications Used

OSSopan-D
vitD3
Orofer XT
Levothyroxine

Plan of Care:

(1) TV = 170 ml/kg/day → 22 ml Q2H full paladay
(2) monday - NP_2 + TSH + ETT
(3) ROP in 2 weeks
(4) RW crib care.

Doctor's Name (Hand over given): Dr Ashwary
Signature:
Date & Time: 30/5/26

Doctor's Name (Hand over taken): Dr N. Pavithra
Signature: N. Pavithra
Date & Time: 30/5/26. 10:20am

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/05/26 1020hr		plan
		(1) Crib care
		(2). Full palade
		(3). Review shift out on Monday.
		(4). NP2, Free T4, TFT } Monday.
30/5/26 1pm	Afternoon rounds	
	on room air	plan
	ongoing KMC	1. Continue TV - 170 ml/kg/day 22 ml @ 2H full palladary feeds
	Desaturation while giving KMC - self pump.	2. Crib care
	vitals: SpO2 - 98%. HR - 144/min RR - 48/min	3. KMC, OMS, NVS continue
		4. Labs as planned
	PA - no distension, soft	
		5. Shift to room on monday plan
	urine (2)	
	stool (1).	6. Monitor vitals
		7. Rop in 2 weeks. Dr. N. Prabhakar

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/5 @ 2:51pm		seen by Dr. vijayanand sir
		→ full pallada feed
		→ cribcare
		Dr. manilla
31/5 @ 7:20AM		seen by Dr. pratyusha sir
		→ cribcare
		→ NP2, FT4, TFT] monday
		→ shift to room monday
		Dr. manilla

Noted by Sir. Shivani

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Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 2 M 5 D
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: 68 Day of Life: 67 PMA: 36

Term ☐ Preterm ☑ Gestation: 26 +4 Corrected Gestational Age: ..... Today's Weight: 1.602 ↑35gm

Problems

	S.No.	Current	Past Problems
Overview	1.	EPT / ELBW	
	2.	RDS - ~~[illegible]~~ CLD grade I	
	3.	Apnea of prematurity	
	4.	Anemia	
	5.	Hypothyroidism	
	6.	Plagiocephaly.	

Clinical Assessment

on RA.
Taken paladay well.
PA - soft.

HR - 150/min
RR - 45/min
SpO_2 - 99%.

Medications Used

Ossopan - D
vit D_3.
Onofer XT
Levothyroxine

Plan of Care:

(1) TV = 170 ml/kg/day → 23 ml 92H + fortification full paladay
(2) Monday - NP_2 + TSH + fT_4.
(3) ROP in 2 weeks
(4) Crib care. (5) shift to room on Monday

Doctor's Name (Hand over given): Dr Abhiwarya
Signature: [signature]
Date & Time: 31/5/26

Doctor's Name (Hand over taken): [signature]
Signature: [signature]
Date & Time: 31/5/26

Docu. No. : RCHBH/FRM / CLINICAL / 290 (26)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/5/26		
9:00PM		
		Plan
	- accepting feeds well.	- continue full Paladar feeds.
		- NP2, TSH, Free T4 } T/M.
		Noted by Navelin 31/5/26

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01/06/2026

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: 69. Day of Life: 68 PMA: 36+1 wk

Term ☐ Preterm ☑ Gestation: 26+4. Corrected Gestational Age: Today's Weight: 1.611 (↑9

weekly - 166 gms

Problems

S.No.	Current	Past Problems
1.	EPT / ELBW.	
2.	RDS - CLD - grade I	
3.	Apnea of prematurity	
4.	Anemia	
5.	Hypothyroidism	
6.	Plagiocephaly	

Overview

Clinical Assessment

- on Room air
=> Taking full palodas feeds well
- hemodynamically stable
=> Urine output - .99 ml (2.5 cc/kg/day)

HR. - 135/min
SpO_2 - 98% CRT

Medications Used

- Ossopan-D
Vit D3
Orofer XT
Levothyroxine

Plan of Care: => TV - 170 ml/kg/day = 23 ml Q2H + 1g MMF each feed palodas
=> ROP - is 2to on - 15/06/2026
- crib care / shift to room.
- Trace TSH / FT4

Doctor's Name (Hand over given): Dr. Pavani
Signature: Pavani
Date & Time: 1/6/26

Doctor's Name (Hand over taken): Dr. Amit
Signature: Dr Amit
Date & Time: 1/6/26

Docu. No. : RCHBH/FRM / CLINICAL / 290 (26)

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26		Seen by Dr. Vijayanand
10:00 AM		Plan
		- crib care
		- Shift out today
		- weekly review
		- Discharge summary } before shifting
		- parents life support }
		- Vaccination } after shifting to room
		- AABR }
		Noted by 1/6/26

Dr. VIJAYANAND KAMALPURI
Reg. No. 40526

BAH-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26 1 pm	NUTRITION ROUNDS	
	Max weight = 1.611 kg - 130 cc/kg/day = 273 cc/day - MMF - 1g - each feed - 12 scoops/day	
	Cal. Prot Ca^{+2} PO_4^{-2} Fe Vit D	
EBM. 67/1.1/35/15/0.2. per 100cal	182. 3. 95 40 0.5	
MMF. 3.89/0.27/5.99/1.36/0.09/0.1 per 1g	46.6 3.24 72. 16 1.08 48	
~~OSSOPAN-D~~	100 44 160	
Vit D_3	800.	
ORSLR XT	4mg	
	228.6 6.24 267 100 5.5 960+48	
Pervskd	141. 3.8 165 62. 3.4 ~~576~~ 650	
	Ca:PO_4 = 2.6:1	To add Adolphos Calcium

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26 2pm	Shifting Note	
	On RA.	
	Hemodynamically stable	
	Accepting paladay feed.	
	Vitals - Stable	Plan
	→	TV - 170cc/kg/day 25ml/2nd hely full paladay feed flb burping
	→	AABR today
	→	BLS training
	→	BCG, Rotateq, Hexaxim ~~toda~~ tomorrow/today. Next day. Prevenar, RSV-50mg
	Pooja →	Monitor vitals
		Noted by [signature] 1/6/26.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	2/6/26	Seen by Dr Vijayanand
	8:45 Am	
		Plan:
	wt - 1.648 kgs [↑37 gms)	- TV - 180 ml/kg/day ↓ 37 ml 3rd hrly full paladai feeds.
		- BCG, Hexaxim, Rotateq } Today
		- Prevenar RSV Vaccine } Tomorrow
		- AABR today
		- Life Support training today.
		noted by Jyothi (9010532)

Dr. VIJAYANAND JAMALPURI
Regd No: 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26 4PM	Afternoon Notes	
	taking full paraday well	Plan
	self ventilating on RA	(1) HABR now
	vitally stable	(2) Prevenar] 4/m
	~~AP~~ PA-soft	RSV
	U | ✓	(3) BLS training
	S | —	(4) TV = 180 ml/kg/day
		37ml @ 3H
	BCG, Rotatec, Hexaxim ✓	

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

noted by JAMALPURI
(90/0532)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 9 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/6/26. 8am.	Morning Round.	
	On RA.	
	Hemodynamically stable.	Plan.
	Vitals - stable.	→ TV - 180cc/kg/day 37ml/3rd hely paladay feed.
	T.wt - 1676g (↑ 28g).	
	passed urine & stool	→ AABR today.
	P/A soft.	⇒ ~~BLS traini~~
		→ Prevenar } today. RSV-50mg / done on 3/6/26
	BLS training done. BCG, Rotateq, Hexaxim given	→ R/V discharge.
		→ Monitor vitals
	Poojitha.	
		3/6/26 AABR - Hearing Assessment Right - responses are present - PASS Left - responses are absent - REFER Adv: Review after 10 days

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
@ 3/6/26 9:30am.		Seen by Dr - Vijayanand
		→ AABR today
		→ Peevenar, RIV - IVmp today
		→ Regular feeding
		→ R/v discharge T/m
		→ Discuss Thyroid tests with Dr. Leena
		→ Crocin drops SOS
		Dr. VIJAYANAND 'AMALPURI' Reg. no. 40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 8 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/4/26	B/O Srividya	By Dr. VS,
	- we will extubate the baby to Niv - There is 1/3 chance of Reintubation - we will continue feeds - cycle - The prematurity & Infections made the respiratory component - Compromise. - we are continuing antibiotics - we will check weight today.	
	Sneha Resident	Lily (mother)

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 2 M 8 D
Dr. VIJAYANAND JAMALPURI

VJSir

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/11/26 10:30 am	B/c Srividya	[illegible]
	· Stable on ventilator	
	on ~~constant~~ feeds, ryclical.	
	· ventilator may need 3-4 days.	

Docu. No. : RCHBH /FRM / CLINICAL / 088

(P.T.O)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 8 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/4/26	B/O Sri Vidya	
	Extubated yday. to NIV ō mask	
	Had mild resp listress - for which pressures were increased	
	Xray clear, mild decrecrutement	
	Antibiotic stopped today	
	To increase gradually to full feeds	
	~~[illegible]~~ Bilirubin in gas is 11 mg/dl	
	for which we are starting SSPT. [signature]	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 8 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/4/26 @ 10:30 am	B/o Srividya	By Dr. VJ
	- Baby on ventilator.	
	- we have decreased Settings.	
	- We have ROP - test today	
	- the Secretions are decreasing trend	
	Sneha Resident	(mother)

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 2 M 9 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/04/2026	B/O — Sri vidya	
	(x) plan for extubation today.	
	(x) Baby is otherwise ~~basis~~ maintaining BP, tolerating feeds	
	(x) having secretions (+)	
	(x) We are waiting for cultures, so far no growth	
	Rupinder	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 9 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	B/o Srividya By	
	⊙ Baby is better on Ventilator	
	Secretions are bit better	
	Yesterday - little abdomen distension	
	Today Abdomen - better.	
	ROP - has little changes → Review in 1wk.	
	Infusion feeds we are continuing	
	Dr.	
	Sneha resident	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	19/4/26 B/O. Srividya	
	- Currently on ventilator.	
	- given CPAP transfusion.	
	- planning to start feeds as per protocol.	
	- planning to start nebulisations today.	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

B/o Srividya.

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/3/26		
	- KMC - tostart	
	- Wtgain percent	
	- Blood tests Thursday	
	- Plan of Thyroid Repeat testing after 7 days	
	- On Bubble CPAP.	
	1 Wtgain @ CPAP + HFNC. by 1-2 days.	

Docu. No. : RCHBH /FRM / CLINICAL / 088

(P.T.O)

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/3/26	B/o. Sri Vidya	
	→ Further reduced support of CPAP → Episodes of desat (+) → Hold kmc for the day, to restart in the evening if no desat. → Causes for apneas explained. → Weight gain constantly present.	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/3/26	B/O Sri Vidya	
	→ Persistent apneas yesterday. → NO infection detected → Hb of 7.3 detected → Requires blood transfusion & given yesterday → Currently on NIV. → Needs weight gain, further, to improve pulm. maturity.	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

EAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 2 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 34 **PMA:** 31+1

Term ☐ **Preterm** ☑ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPT / ELBW	
2.	LRTI / Pneumonia - CPAP.	Hyponatremia.
3.	Apnea of prematurity	
4.	Anemia requiring transfusion	
5.		
6.		

Today's Weight : 0.970 ↑ 20gm wt gain.

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☑ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP 15 PEEP 6 VG ..... Rate ..... Fio2 21% Oxygen : ..... L/min

Last CXR : ..... Spo2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

No Desat / Brady / Apnea.

CARDIO VASCULAR SYSTEM

Plan of Care :

Spo2 - 98%.
HR - 150/min
RR - 40/min
BP - 52/37 (42)

CNS

Neurological Examination : .....

Sedation N.A.

Last Neurosonogram : ..... Any Seizures No

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output : 3.7 ml/kg/hr Stools (4)

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

no distension.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days	
1.	Tigecycline	D6/D7	Cuj-Caffeine
2.			Glycerine
3.	Colistin	D7/D8	Neb c̄ 3% Nacl
			Colistin

Plan of Treatment :

1. Continue CPAP c̄ mask
2. TV - 160 ml/kg/day → 13 ml @ 2 Hourly + fortification + 3% Nacl (Cyclical feed → Bolus feeds) (On feeds)
3. Gas - alternate day
4. RBS-OD.
5. Continue antibiotics for 1 more day.
6. Positioning — Lt lateral / Rt lateral / Supine | 4 hours
7. Review Blood tests next week.

Doctor's Name (Handover given) : N. Prathibha

Signature : N.P.D

Date & Time: 28/4/26.

Doctor's Name (Handover taken) : Y. Sneha

Signature : Sneha

Date & Time: 28/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/4/26	31+1	Cls Pg 13ml 2ml NP2 on 30th Antibiotics e plan Noted By Koushik 28/4/26.
28/4/26 3:50pm	Afternoon Baby on CPAP @ mark 6cm - HR - 158 SPO2 = 96 RR = 38 P/A - soft Noted by Koushik at 3:50pm	Adv To contin CPAP @ 6cm ē mark - TV - 160 cc/k/day. - 13ml 2hours. + 3% NaCl on feeds. - Gas - alternate day - positioning as advised - R/V Blood tests next week Rupjal

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/04/26 4:30 pm		Seen by Dr. PR 1) Continue CPAP PEEP - 6. Sneha
	Noted by Koushik at 4.30 pm.	
29/4/2026 @ 1:43 PM	Night Round.	Plan
	Resp: Baby on CPAP PEEP-6 with mask. ⊙ ~~No~~ tachycardia Intermittent Intermittent desaturation ⊙ Intermittent tachypnea (+) Vitals HR - 153/min RR = 61/min SPO_2 = 97% BP = 61/40(46) P/A = Soft, mild distension No aspirates	1) Cont CPAP with PEEP - 6 Target SPO_2 90-95% 2) TV = 160cc/kg/day Bmb 2nd hrly +3% NaCl + fortificate OG feed 3) Gas - alternate day 4) NP_2 on 30th/4/2026 Sneha
	Noted by [illegible] at 1:43pm	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 1 M 2 D
Dr. VIJAYANAND JAMALPURI

29/04/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 35 **PMA:** 31+2

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPT/ELBW	Hyponatraemia
2.	~~URTI~~ / pneumonia	
3.	Apnea of prematurity	
4.	Anaemia requiring	
5.	transfusions	
6.		

Today's Weight : 985 ↑15g

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... on cPAP - PEEP - 6 c Mask

No bradycardia, apnea on bradypnea

Intermittent Tachypnea, SCR (+), FCR (+)

SpO_2 - maintaining 90-95%

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - ~~HR~~ 170

SpO_2 - 98%

RR - 60/min

BP =

CNS

Neurological Examination : Cry, Tone, activity — (N)

Sedation ..... / (NO)

Last Neurosonogram : (P) Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - soft, tolerating feeds

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Tigecycline	7/7
2.		
3.	Colistin —	8/8

Plan of Treatment :

- Continue CPAP ē mask @ 6cm. SPO_2 90-95%.
- IV - 160cc/kg/day - 13ml - 2nd hourly. +3% Nacl + fortification On feed.
- GAS - alternate day.
- NP_2 - on — 30th/4/2025.
- Plan to stop antibiotic after 10 days dose.
- ROP - Thursday (7/4)

Doctor's Name (Handover given): .....

Signature : Rupanjali

Date & Time: 29/04/26

Doctor's Name (Handover taken) : Dr Aishwarya

Signature :

Date & Time: 29/4/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/4/26 @ 9:20 am		Seen by Dr. Prathyush
		1) Stop antibiotics after todays dose.
		2) TV = 160ml/kg/day
		13ml 2nd hrly + fortification + 3% NaCl.
		3) NP_2 on TFT, free Tu } 30/4/2026 (T/m
		~~Change to~~
		4) ROP T/m.
		5) Gas - twice weekly
29/4/26 1PM	Afternoon Rounds	
	on CPAP c̄ mask.	Plan
	PEEP - 6cm, FiO_2 - 21%.	① cont CPAP
	HR - 164/min	② TV = 160ml/kg/day
	SpO_2 - 100%.	13ml Q2H + fortification + 3% NaCl
	RR - 47/min	
	Min SCR (+)	③ t/m - NP_2 TFT + fT_4.
	tolerating feeds	④ ROP t/m
	PA - soft, non distended.	⑤ Gas twice weekly
		ARBS OD
		⑥ Stop Abx after today dose

Sneha

Dr. Abhinavi

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/4/26 9PM	Night Rounds	
	on CPAP 6cm / 21%	Plan
	HR – 175/min	① cont CPAP mask
	RR – 34/min	6cm
	SpO_2 – 93%	FiO_2 to target
	No brady / desat.	SpO_2 90–95%
		② TV = 160ml/kg/day
	tolerating full feeds	13ml 5%H +
	PA – soft	3% NaCl +
	stools passed	0.5gm fortification
		③ t/m – NP_2
		TFT + FT_4
		④ ROP t/m
		⑤ Gas twice weekly
		GRBSOD

Noted by
Pgnej
010085
at 9pm

Docu. No. : RCHBH /FRM / CLINICAL / 088

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RESULT SHEET

Date	15/5/26	25/5/26	1/6/26			
Time	@ 8 AM	@	6 AM			
Hb	9.5	7.8	10.6			
PCV	30.6	25.8	32.2			
RBC	3.26	2.75	3.63			
WBC	14.52	18	9.98			
N/L	36.9/41.8	46.0/41.4	26.5/49.3			
Platelets	423	334	296			
CRP						
ESR						
PCT						
RBS						
Na	135	137	135			
K	4.3	4.9	3.8			
Cl	111	110	109			
Ca/Mg	9.7/	9.3	10.2			
Phosphate	3.5	3.6	3.3			
Urea						
Creatinine						
ALP	443	951	975			
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						
	Free T_4 = 1.29					
	T_3 - 164.2					
	T_4 - 10.44					
	TSH - 6.19					

Culture and Sensitivities : .....

.....

.....

.....

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

.....

(ECG, Contrast Studies etc.,) : .....

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MEDICATION RECONCILIATION FORM

Drug Allergies: ..... ☐ Not known any Drug Allergies

Medication Reconciliation will be done at the time of admission and also whenever there is change in the treating team or shifting from one unit to another unit.
(Example: at the time of admission shifting from ICU to Ward, or Ward to ICUs)

Shifting From: ..... Shifted to: .....

S.No	MEDICATION NAME (GENERIC NAME CAPITAL LETTERS)	DOSE (mg, mcg)	ROUTE (PO, NG, SC, IV)	FREQUENCY	LAST DOSE Date / Time	ON ADMISSION / SHIFTING
1	SYR. OSSOPAN D	1.5ml	P.O	8 6 H		☑C ☐DC
2	OROFER XT DROPS	0.4ml	P.O	OD		☑C ☐DC
3	VITAMIN D3 DROPS	1ml	P.O	OD		☑C ☐DC
4	3% NACL	1ml	P.O	each feed		☑C ☐DC
5	T. LEVOTHYROXINE	15mcg	P.O	OD		☑C ☐DC
6	FORTIFICATION	1g sachet in each feed	P.O	each feed		☑C ☐DC
7						☐C ☐DC
8						☐C ☐DC
9						☐C ☐DC
10						☐C ☐DC

** C- Continue, DC - Discontinue*

MEDICATION HISTORY RECORDED / VERIFIED BY

Doctor Name & Signature : Dr. Nagesh

Date & Time : 01/06/26 05:45 pm

Nurse Name & Signature: .....

Date & Time : .....

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DRUG CHART

Date of Admission: 25/3/26 Drug Allergies: ..... ☐ 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 ..... Signa

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 0 H (M)
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REGULAR PRESCRIPTIONS

Weight. 950gms. Ward. NICU

DRUG : INJ CAFFEINE CITRATE

Dose	Route	Frequency	Start Date
5mg	IV	OD	26/3/26

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:
5mg/kg/day

VERIFIED

change to oral Inshu 8/4

Date→ Time	26/3	27/3	28/3	29/3	30/3	31/3	1/4	2/4	3/4	4/4	5/4	6/4	7/4	8/4
6AM	X													
Daily Doctor's Endorsement by a Sign														

DRUG : INJ PIPERACILLIN TAZOBACTAM

Dose	Route	Frequency	Start Date
95mg	IV	BD	26/3/26

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:
100mg/kg/dose

changed

Date→ Time	26/3
6PM	
Daily Doctor's Endorsement by a Sign	

DRUG : INJ FLUCONAZOLE

Dose	Route	Frequency	Start Date
5.7mg	IV	Twice weekly	26/3

Name & Signature of the Doctor Starting the Drugs:
Dr Ashwanyk

Additional Instructions:
6mg/kg/dose

order changed

Date→ Time	26/3
2PM	
Daily Doctor's Endorsement by a Sign	

DRUG : Inj MEROPENEM

Dose	Route	Frequency	Start Date
38mg	IV	BD	06/3/26

Name & Signature of the Doctor Starting the Drugs:
Dr NILESH

Additional Instructions:
40mg/kg/dose IV BD.

VERIFIED

Date→ Time	26/3	27/3	28/3	29/3	30/3	31/3	1/4
6AM	X						
6PM							
Daily Doctor's Endorsement by a Sign							

STOP 1/4

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Sheet No: (1) **REGULAR PRESCRIPTIONS** Weight 950gr Ward N

DRUG : INJ COLISTIN

Dose	Route	Frequency	Start Dt.
38,000IU	IV	TID	26/3

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: @40,000 IV

Daily Doctor's Endorsement by a Sign

Date / Time	26/3	27/3	28/3
6 Am	X		
2 PM	X		
10 PM			

STOP

DRUG : INJ FLUCONAZOLE

Dose	Route	Frequency	Start Dt.
9.5mg	IV	48hrly	26/3

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: @10mg/kg/dose (treatment dose)

Daily Doctor's Endorsement by a Sign

Date / Time	28/3	29/3	30/3
2 PM	X		
	X		

STOP 30/3/26

DRUG : GLYCERINE SUPPOSITORY

Dose	Route	Frequency	Start Dt.
	P/R	BD	29/3

Name & Signature of the Doctor Starting the Drugs: Rani Saraswathi

Additional Instructions: 0.2ml + 0.2ml NS

Daily Doctor's Endorsement by a Sign

Date / Time	29/3
6 am	X
6 pm	

changed dose & Freqn Sneha 29/3

DRUG : GLYCERINE SUPPOSITORY

Dose	Route	Frequency	Start Dt.
	P/R	TID	29/3

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: 0.3ml + 0.3ml NS

Daily Doctor's Endorsement by a Sign

Date / Time	29/3	30/3	1/4	2/4	3/4	4/4	5/4	6/4	7/4	8/4	9/4	10/4	11/4
6 AM	X												
2 PM	X												
10 PM													

VERIFIED BY

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Sheet No: (2) **REGULAR PRESCRIPTIONS** Weight 3.950 Ward NICU

DRUG : FLUCONAZOLE

Dose	Route	Frequency	Start Dt.
5-7mg/kg	PRC	Twice Weekly	30/3

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: 6mg/kg/dose

Daily Doctor's Endorsement by a Sign

Date/Time: 30/3 31/3 1/4 2/4 3/4 4/4 5/4 6/4 7/4 8/4 9/4 10/4 11/4 12/4 13/4 14/4 15/4 16/4

STOP Sneha 8/4/26

VERIFIED

DRUG : SYP. CAFFEINE CITRATE

Dose	Route	Frequency	Start Dt.
(0.2ml=4.8mg)	PO	OD	9/4.

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: (1ml=20mg) 5mg/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 9/4 10/4 11/4 12/4 13/4 14/4 15/4 16/4 17/4 18/4 19/4 20/4 21/4 22/4 23/4 24/4 25/4

Changed to IV Sneha 16/4

VERIFIED

DRUG : MMF FORTIFICATION

Dose	Route	Frequency	Start Dt.
0.5g.	PO/G	each feed	9/4/26

Name & Signature of the Doctor Starting the Drugs: Dr. Umesh.

Additional Instructions: 0.5g in each feed.

Daily Doctor's Endorsement by a Sign

Date/Time: 9/4 10/4 11/4 12/4 13/4 14/4 15/4 16/4 17/4 18/4 19/4 20/4 21/4 22/4 23/4 24/4 25/4

HOLD

DRUG : GLYCERINE SUPPOS (TOPICS)

Dose	Route	Frequency	Start Dt.
	PR	TID	12/4

Name & Signature of the Doctor Starting the Drugs: Dr. Anusha

Additional Instructions: 0.3ml to 0.3ml NS

Daily Doctor's Endorsement by a Sign

Date/Time: 12/4 13/4 14/4 15/4 16/4 17/4 18/4 19/4 20/4 21/4 22/4 23/4 24/4 25/4

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(3)

Sheet No: (3)

REGULAR PRESCRIPTIONS

Weight 0.950 Ward .....

DRUG : OSSOPAN-D SYD

Dose	Route	Frequency	Start Dt.
1ml	PO	TID	13/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: (5ml = 125mg 80mg/kg/day of elemental calcium

Date/Time	13/4	14/4	15/4	16/4	17/4	18/4	19/4	20/4	21/4	22/4	23/4	24/4	25/4	26/4
6am		Aecha	Aecha	Dais		Hold	Hold	HOLD	Hold	Lavy	Dais Lavy	Deika		
2pm	Dais	Dais			HOLD		HOLD	HOLD	Hema	Hema	Hema	Hema	Hema	Lavy
10pm	Aecha	Aecha		Abin vidya		vidya	Hold	Hold	Lavy	Dais	Deika Lavy			
Daily Doctor's Endorsement by a Sign			Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha				Sneha	

DRUG : VITAMIN-D3 DROPS

Dose	Route	Frequency	Start Dt.
1ml	PO	OD	13/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: 1ml = 800 IU

Date/Time	13/4	14/4	15/4	16/4	17/4	18/4	19/4	20/4	21/4	22/4	23/4	24/4	25/4	26/4
6pm	Dais	Dais			HOLD		HOLD	HOLD	Hema	Hema	Hema	Hema	Hema	Lavy
Daily Doctor's Endorsement by a Sign			Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha

DRUG : 3% NaCl

Dose	Route	Frequency	Start Dt.
1ml	PO	each feed	14/4

Name & Signature of the Doctor Starting the Drugs: Dr. Aishwarya

Additional Instructions: 6mmol/kg/day

Date/Time	14/4	15/4	16/4	17/4	18/4	19/4	20/4	21/4
	✓	✓	✓	Hold	H	H	H	
	✓	✓	✓		O	O	O	
	✓	✓	✓		L	L	L	
	✓	✓	✓		D	D	D	
Daily Doctor's Endorsement by a Sign		Sneha		Sneha	Sneha	Sneha	Sneha	Sneha

STOP Sneha 21/4/26

DRUG : DROFER XT DROPS

Dose	Route	Frequency	Start Dt.
0.3ml	PO	OD	14/4

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: @3mg/kg/day 1ml = 10mg

Date/Time	14/4	15/4	16/4	17/4	18/4	19/4	20/4	21/4	22/4	23/4	24/4	25/4	26/4	27/4	28/4
6pm	Dais			HOLD	H O L D	H O L D	H O L D	H O L D	H O L D	Hema	Hema	Hema	Hema		
Daily Doctor's Endorsement by a Sign		Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha				Sneha			

Signature

VERIFIED BY : Name

Docu. No. : RCHBH /FRM / CLINICAL / 108

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Sheet No: 4

REGULAR PRESCRIPTIONS

Weight ..... Ward .....

DRUG : Inj. Piperacillin-Tazobactam

Dose	Route	Frequency	Start Dt.
93mg	IV	BD	15/4/26

Name & Signature of the Doctor Starting the Drugs: IV-Pentrish

Additional Instructions: 100mg/kg/dose

Daily Doctor's Endorsement by a Sign

Date/Time: 15/4

DRUG : Inj. PIPERACILLIN + TAZOBACTAM

Dose	Route	Frequency	Start Dt.
95mg	IV	BD	15/4/26

Name & Signature of the Doctor Starting the Drugs: Dr. Aneeha

Additional Instructions: 100mg/kg/dose

Daily Doctor's Endorsement by a Sign

Date/Time: 15/4 16/4

6 Am X Change

6 pm Change

FALL 16/4/26

DRUG : INJ CAFFIENE

Dose	Route	Frequency	Start Dt.
4.8mg	IV	OD	16/4

Name & Signature of the Doctor Starting the Drugs: Dr. Aishwarya

Additional Instructions: 20mg/kg/dose
1ml = 20mg

Daily Doctor's Endorsement by a Sign

Date/Time: 16/4 17/4/26 18/4 19/4 20/4 21/4 22/4 23/4 24/4 25/4 26/4 27/4 28/4 29/4

6am Abin Abin vidya Abin vidya Abin vidya Abin vidya Niru vidya Lacey Lacey Danika Lacey Gurgaon Tripal Tripal Abin Abin

DRUG : INJ MEROPENEM

Dose	Route	Frequency	Start Dt.
40mg	IV	TID	16/4/26

Name & Signature of the Doctor Starting the Drugs: FALL

Additional Instructions: 40mg/kg/dose

Daily Doctor's Endorsement by a Sign

Date/Time: 16/4/26 17/4/26 18/4/26 19/4/26 20/4/26 21/4/26

6pm X Abin vidya Abin vidya Abin vidya Abin vidya Niru vidya

2pm X Diff Diff Diff Diff

10pm vidya Abin vidya Abin vidya Abin vidya Niru vidya

Rus Rus Rus Rus Rus

STOP 21/4/26

Abin

Sugmita

Sugmita

VERIFIED BY Nam

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Sheet No: (5)

REGULAR PRESCRIPTIONS

Weight 964 g Ward .....

DRUG : 3% NaCl nebulisation

Dose	Route	Frequency	Start Dt.
	Neb	BD	19/4

Name & Signature of the Doctor Starting the Drugs: Dr Aneesha

Additional Instructions: 3ml @ 3% NS

Date / Time	19/4	20/4	21/4	22/4	23/4	24/4	25/4	26/4	27/4	28/4	29/4	30/4	1/5	2/5
10am	Diffi	Diffi	Hema	Hema	Hema	Hema	Hema	Lavy	Kowlik	Kowlik	Kowlik	Agnes	Agnes	Agnes
10pm	Abin vidya	Abin vidya	Lavy	Lavy	Lavy	Lavy	Lavy	Agnes	Agnes	Agnes	Agnes	Agnes	Agnes	Agnes
Daily Doctor's Endorsement by a Sign	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	N.Pa	N.Pa					

DRUG : NEB - COLISTIN

Dose	Route	Frequency	Start Dt.
40,400 IU	Neb	TID	21/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: 40,000 IU/kg/dose

Date / Time	21/4
6am	X
2pm (3pm)	Hema
10pm	
Daily Doctor's Endorsement by a Sign	Sneha

Swarthe

DRUG : INJ MEROPENEM

Dose	Route	Frequency	Start Dt.
40mg	IV	8H	21/4

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: @40 mg/kg/dose

Date / Time	21/4	22/4
6am	X	Lavy
2pm	Hema	Hema
10pm	Lavy	
Daily Doctor's Endorsement by a Sign	Sneha	Sneha

STOP
Sneha
22/4/26

DRUG : INJ COLISTIN

Dose	Route	Frequency	Start Dt.
40,000 IU	IV	8H	21/4

Name & Signature of the Doctor Starting the Drugs: Aishwarya

Additional Instructions: @40,000 IU/kg/dose

Date / Time	21/4	22/4	23/4	24/4	25/4	26/4	27/4	28/4	29/4
6am	X	Lavy	Dark Lavy	Dark Lavy	Dark	Dark	Dark	Agnes	Agnes
2pm	Hema	Hema	Hema	Hema	Hema	Lavy	Kowlik	Kowlik	Kowlik
10pm	Lavy	Lavy	Lavy	Lavy	Lavy	Agnes	Agnes	Agnes	Agnes
Daily Doctor's Endorsement by a Sign	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha	Sneha		

STOP
30/4/26

(P.T.O)

Docu. No. : RCHBH /FRM / CLINICAL / 108

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Sheet No: (6)

REGULAR PRESCRIPTIONS

Weight 0.960 Ward .....

DRUG : NEB COLISTIN

Dose	Route	Frequency	Start Dt.
40,000 IU	Neb	Q8H	21/8

Name & Signature of the Doctor Starting the Drugs: Dr Abhiwarya

Additional Instructions: @ 40,000 IU/kg/dose

Date / Time	21/8	22/4	23/4	24/4	25/4	26/4	27/4	28/4	29/4	30/4
6am	X									
2pm	X									
10pm										

STOP 30/4/26 Rupjyoti

Daily Doctor's Endorsement by a Sign

DRUG : FORTIFICATION PLUS

Dose	Route	Frequency	Start Dt.
	PO	each cycle	22/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: (1 Sachet = 1g) 1½ Sachet each cycle

Date / Time	22/4	23/4	24/4	25/4	26/4	27/4	28/4	29
7am	X							
7am	X							
7pm								
7pm								

change in frequency 29/4/26

Daily Doctor's Endorsement by a Sign

DRUG : INJ. TIGECYCLINE

Dose	Route	Frequency	Start Dt.
1.5mg ~~0.15mg~~	IV	BD	22/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: 1 vial = 50mg
1.5mg/kg/dose
1 vial + 5.3mb 5% D (1mb = 10mg) take 0.15ml of reconstituted + 2mb 5% D
Give over 30-60min

Rewritten due to overwriting
Sneha
22/4.

Daily Doctor's Endorsement by a Sign

DRUG : INJ. TIGECYLINE

Dose	Route	Frequency	Start Dt.
1.5mg	IV	BD	22/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: 1 vial = 50mg
1.5mg/kg/dose
1 vial + 5.3mb 5% D (1ml = 10mg) take 0.15ml of reconstit + 2mb 5% D
Give over 30-60min

Date / Time	22/4	24/4	25/4	26/4	27/4	28/4	29/4
10am							
10pm							

STOP 30/4/26 Dr Abhiwarya

Daily Doctor's Endorsement by a Sign

VERIFIED

VERIFIED

VERIFIED

Docu. No. : ...

...M / CLINICAL / 108

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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(7)

Sheet No: (7)

REGULAR PRESCRIPTIONS

Weight 0.964 Ward .....

DRUG : 3% NaCl

Dose	Route	Frequency	Start Dt.
2ml	ORAL	Each cycle	23/4/26

Name & Signature of the Doctor Starting the Drugs: FAL2

Additional Instructions: 4mEq/kg/day

Date / Time	23/4	24/4	25/4	26/4	27/4	28/4	29/4
10am	X	Devika	Susan	Trigunmeer	Trigunmeer	Trigunmeer	Agnes
7am	X	Devika	Susan	Trigunmeer	Trigunmeer	Trigunmeer	Agnes
1pm	Hema	Hema	Hema	Lavya	Kavitha	Kavitha	
7pm	Hema	Hema	Hema	Lavya	Kavitha	Kavitha	

change of frequency
Sneha
29/4/26

Daily Doctor's Endorsement by a Sign: 0 0 Snel N.P.R N.P.R Snel

DRUG : DOMEPERIDONE SUS

Dose	Route	Frequency	Start Dt.
2ml	PO	TID	24/4/26

Name & Signature of the Doctor Starting the Drugs: FAL2

Additional Instructions: 0.2mg/kg/dose

Date / Time	24/4	25/4	26/4	27/4	28/4	29/4	30/4	1/5	2/5	3/5	4/5	5/5	6/5	7/5	8/5
6am	X	Trigunmeer	Trigunmeer	Trigunmeer	Agnes	Agnes	Agnes	Agnes	Agnes	Sarma Meshak	Aleena	Aleena			
2pm	Hema	Hema	Lavya	Kavitha	Kavitha	Kavitha	Prabhu	Nandini	Nandini	Nandini	Nandini	Nandini			
10pm	Susan	Trigunmeer	Trigunmeer	Trigunmeer	Agnes	Agnes	Agnes	Agnes	Agnes	Sarma Meshak	Aleena	Aleena			

Daily Doctor's Endorsement by a Sign: Snel Snel N.P.R N.P.R 0 0 0 0 N.P.R N.P.R 2 2 N.P.R

DRUG : VITAMIN-D3 DROPS

Dose	Route	Frequency	Start Dt.
1ml	PO	OD	27/4

Name & Signature of the Doctor Starting the Drugs: N. Pratrisha

Additional Instructions: 1ml = 800IU.

Date / Time	27/4	28/4	29/4	30/4	1/5	2/5	3/5	4/5	5/5	6/5	7/5	8/5	9/5	10/5
6pm	Kavitha	Kavitha	Kavitha	Asvanthi	Asvanthi	Nandini	Keerthi	Nandini	Nandini	Nandini			Shiva	

Daily Doctor's Endorsement by a Sign: 0 0 0 0 0 0 N.P.R N.P.R 2 N.P.R N.P.R 0 0

DRUG : OSSOPAN-D SYRUP

Dose	Route	Frequency	Start Dt.
1ml	PO	TID	27/4

Name & Signature of the Doctor Starting the Drugs: N. Pratrisha.

Additional Instructions: (5ml = 125mg) 80mg/kg/day of Elemental Calcium.

Date / Time	27/4	28/4	29/4	30/4	1/5	2/5	3/5	4/5	5/5	6/5	7/5	8/5	9/5
6am	Kavitha	Agnes	Agnes	Agnes	Agnes	Agnes	Sarma Meshak	Aleena	Aleena				Nandini
2pm	Kavitha	Kavitha	Kavitha	Asvanthi	Asvanthi	Nandini	Keerthi	Nandini	Nandini	Nandini			
10pm	Agnes	Agnes	Agnes	Agnes	Agnes	Sarma Meshak	Aleena	Aleena	Aleena			Nandini	

Daily Doctor's Endorsement by a Sign: 0 0 0 0 0 N.P.R N.P.R 2 2 N.P.R 2

Close chart

VERIFIED

Docu. No. : RCHBH /FRM / CLINICAL / 108

(P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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Sheet No: 8 **REGULAR PRESCRIPTIONS** Weight 0.964 Ward NICU

DRUG : GLYCERINE SUPPOSITORY

Dose	Route	Frequency	Start Dt.
	PR	TID	27/4

Name & Signature of the Doctor Starting the Drugs: N. Prathisha

Additional Instructions: 0.3ml TO 0.3ml NS

Daily Doctor's Endorsement by a Sign

Date/Time: 27/4 28/4 29/4 30/4 1/5 2/5 3/5 4/5 5/5 6/5 7/5 8/5 9/5

VERIFIED Soumya

DRUG : FORTIFICATION.

Dose	Route	Frequency	Start Dt.
0.5g	PO	each feed	29/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: (0.5g) each feed

Daily Doctor's Endorsement by a Sign

Date/Time: 29/4 30/4 1/5 2/5 3/5 4/5 5/5 6/5 7/5 8/5 9/5

VERIFIED Soumya

DRUG : 3% NaCl

Dose	Route	Frequency	Start Dt.
0.6ml	PO	each feed	29/4

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: 4meq/kg/day.

Daily Doctor's Endorsement by a Sign

Date/Time: 29/4 30/4 1/5 2/5 3/5 4/5 5/5 6/5 7/5 8/5 9/5 10/5 11/5 12/5

VERIFIED Soumya

DRUG : INJ CAFFEINE

Dose	Route	Frequency	Start Dt.
4.9mg	PO	OD	16/4

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: @ 5mg/kg/dose
1ml = 20mg

Daily Doctor's Endorsement by a Sign

Date/Time: 30/4 1/5 2/5 3/5 4/5 5/5 6/5 7/5 8/5 9/5 10/5 11/5 12/5

Stopped on 5/5

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 1 M 4 D
Dr. VIJAYANAND JAMALPURI

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Sheet No: .....

REGULAR PRESCRIPTIONS

Weight ..1.1 kg Ward .....

DRUG : Syp CAFFEINE CITRATE

Dose	Route	Frequency	Start Dt.
0.25ml	Oral	OD	30/4

Name & Signature of the Doctor Starting the Drugs: Rupanjali

Additional Instructions:
1 ml = 20 mg
@ 5 mg/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 30/4 1/5 2/5 3/5 4/5 5/5 6/5 7/5 8/5 9/5 10/5 11/5 12/5 13/5

SEE NEXT PAGE

VERIFIED

DRUG : TAB. LEVOTHYROXINE

Dose	Route	Frequency	Start Dt.
10mcg	PO+1	OD	2/5

Name & Signature of the Doctor Starting the Drugs: Sneha

Additional Instructions: (1 tab = 12.5 mcg)
10mcg/kg/day
1 tab + 3 ml DW ⇒ Give 2.4 ml of it Before feed

Daily Doctor's Endorsement by a Sign

Date/Time: 2/5 3/5 4/5 5/5 6/5 7/5 8/5 9/5 10/5 11/5 12/5 13/5 14/5

VERIFIED

DRUG : 3% NACL

Dose	Route	Frequency	Start Dt.
	NEB	BD	04/5

Name & Signature of the Doctor Starting the Drugs: N. Pedrisha

Additional Instructions:
3 ml + 3% NS

Daily Doctor's Endorsement by a Sign

Date/Time: 4/5 5/5 6/5 7/5 8/5 9/5

Stop. 9/5/26. Prophylaxis -

VERIFIED

DRUG : OROFER XT DROPS

Dose	Route	Frequency	Start Dt.
0.35ml	PO	OD	4/5

Name & Signature of the Doctor Starting the Drugs: N. Pedrisha

Additional Instructions:
(1 ml = 10 mg)
3 mg/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 4/5 5/5 6/5 7/5 8/5 9/5 10/5 11/5

Docu. No. : RCHBH /FRM / CLINICAL / 108

(P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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REGULAR PRESCRIPTIONS

Weight 10.1 Ward NB

DRUG : DOMSTAL SUSPENSION

Dose	Route	Frequency	Start Dt.
0.2ml	PO	OBH	24/4

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: 0.2mg/kg/dose

Daily Doctor's Endorsement by a Sign

Date/Time: 10/5 11/5 12/5 13/5 14/5 15/5 16/5 17/5 18/5 19/5 20/5 21/5 22/5 23/4/25

DRUG : OSSOPAN-D SYRUP

Dose	Route	Frequency	Start Dt.
1ml	PO	OD	7/4

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: 5ml = 125mg Ca^{2+} 0.83mg/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 10/5 11/5 12/5 13/5 14/5 15/5 16/5 17/5 18/5 19/5

DRUG : VITAMIN-D3 drops

Dose	Route	Frequency	Start Dt.
1ml	Po	OD	10/5/24

Name & Signature of the Doctor Starting the Drugs: Dr Ramya

Additional Instructions: 1ml = 800 IU.

Daily Doctor's Endorsement by a Sign

Date/Time: 10/5 11/5 12/5 13/5 14/5 15/5 16/5 17/5 18/5 19/5 20/5 21/5 22/5 23/5

DRUG : OROFER XT DROPS

Dose	Route	Frequency	Start Dt.
0.4ml	PO	OD	11/5

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: 1ml = 10mg 3mg/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 11/5 12/5 13/5 14/5 15/5 16/5 17/5 18/5 19/5 20/5 21/5 22/5 23/5

VERIFIED VERIFIED VERIFIED VERIFIED

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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Sheet No: .....

REGULAR PRESCRIPTIONS

Weight 1.0 Ward N2

DRUG : Syr. CAFFEINE CITRATE

Dose	Route	Frequency	Start Dt.
6.5mg (0.3ml)	P/O	once daily	14/5

Name & Signature of the Doctor Starting the Drugs: Dr. Aneesha

Additional Instructions: 5mg/kg/day

Date/Time	14/5	15/5	16/5	17/5	18/5	19/5	20/5	21/5	22/5	23/5	24/5	25/5	26/5	27/5
6am	[illegible]	[illegible]	Poojitha	[illegible]	[illegible]	Megha	[illegible]	[illegible]	[illegible]	Poojitha	[illegible]	Poojitha	[illegible]	

Daily Doctor's Endorsement by a Sign

DRUG : Oral 3% NaCl

Dose	Route	Frequency	Start Dt.
0.9ml	P/O	each feed	13/5

Name & Signature of the Doctor Starting the Drugs: Dr. Aneesha

Additional Instructions: 4mcg/kg/day

Date/Time	13/5	14/5	15/5	16/5	17/5	18/5	19	20/5	21/5	22/5	23/5	24/5	25/5	26/5
	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	Hold	Hold
	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		
	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		
	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	Hold	✓
	✓	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓		✓

Daily Doctor's Endorsement by a Sign

DRUG : TAB LEVOTHYROXINE

Dose	Route	Frequency	Start Dt.
10mcg			

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions: 10mcg/kg/day

Daily Doctor's Endorsement by a Sign

DRUG : T. LEVOTHYROXINE

Route	Frequency	Start Dt.
PO	OD	16/5/26

Name & Signature of the Doctor Starting the Drugs: [illegible]

Additional Instructions: (1tab = 25mcg) [illegible]/day

1tab + 5ml D.water ⇒ 1ml = 5mcg ⇒ [illegible]

Daily Doctor's Endorsement by a Sign

Date/Time	18/5	19/5	20/5	21/5	22/5	23/5	24/5	25/5	26/5	27/5	28/5	29/5
6am	[illegible]	[illegible]	Megha	[illegible]	[illegible]	Poojitha	[illegible]	Poojitha	Poojitha	[illegible]	[illegible]	

Signature

(P.T.O)

/FRM / CLINICAL / 108

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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Sheet N .....

REGULAR PRESCRIPTIONS

Weight 1.25 Ward N2

DRUG : MMF NEOLACT.

Dose	Route	Frequency	Start Dt.
	PO	Each feed	18/5/26

Name & Signature of the Doctor Starting the Drugs: Dr. Ramya

Additional Instructions: FORTIFICATION
0.5gm sachet in each feed.

Date / Time	18/5	19/5	20/5
	✓	✓	✓
	✓	✓	✓
	✓	✓	✓
	✓	✓	✓
	✓	✓	
	✓	✓	
	✓	✓	
	✓	✓	

Daily Doctor's Endorsement by a Sign

DRUG : MMF Fortification

Dose	Route	Frequency	Start Dt.
0.5g	PO	each feed	20/5/26.

Name & Signature of the Doctor Starting the Drugs: Dr. Vinuta.

Additional Instructions: 0.5g sachet in each feed.

Date / Time	20/5	21/5
	✓	✓
	✓	✓
	✓	
	✓	
	✓	
	✓	
	✓	

Chase
order
Dr Anusha.

Daily Doctor's Endorsement by a Sign

DRUG : MMF fortification

Dose	Route	Frequency	Start Dt.
	P/O	each feed	21/5

Name & Signature of the Doctor Starting the Drugs: Dr. Anusha

Additional Instructions: 1g sachet in each feed

Date / Time	21/5	22/5
	✓	✓
	✓	✓
	✓	
	✓	
	✓	
	✓	
	✓	

Stop
Dr Poojitha

...'s Endorsement by a Sign

...ATION

...y	Start Dt.
	...1/5/26.

Date / Time	22/5	23/5	24/5	25	26/5	27/5	28/5	29/5	30/5	31/5	1/6
	✓	✓	✓	✓		✓	✓	✓	✓	✓	✓
	✓	✓	✓			✓	✓	✓	✓	✓	✓
	✓	✓	✓	Hold	HOLD	✓	✓	✓	✓	✓	✓
	✓	✓	✓			✓	✓	✓	✓	✓	
	✓	✓	✓			✓	✓	✓	✓	✓	
	✓	✓	✓			✓	✓	✓	✓	✓	
	✓	✓	✓		✓	✓	✓	✓	✓	✓	
	✓	✓	✓		✓	✓	✓	✓	✓	✓	

...y a Sign

30/5 31/5

Pre 3ml of it
Pre feed

L / 108

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
Dr. VIJAYANAND JAMALPURI

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Sheet No: .....

REGULAR PRESCRIPTIONS

Weight 1.495 kg Ward .....

DRUG : Syp. OSSOPAN – D

Dose	Route	Frequency	Start Dt.
1ml	PO	Q6H	23/5/26

Name & Signature of the Doctor Starting the Drugs: Dr. Poojitha

Additional Instructions: 5 ml = 125 mg
83 mg/kg/day

Daily Doctor's Endorsement by a Sign

Date / Time	23/5	24/5	25/5
6am	[signature]	Poojitha	Sona
12pm	[signature]	Alpha	
6pm	[signature]	Alpha	Hold
12am	Poojitha	Sona	

Changed Dose

DRUG : SYP OSSOPAN – D

Dose	Route	Frequency	Start Dt.
1.5ml	PO	Q6H	26/5

Name & Signature of the Doctor Starting the Drugs: Dr Abhiwarya

Additional Instructions: 5ml = 125mg Ca2+
100mg/kg/day

Daily Doctor's Endorsement by a Sign

Date / Time	26/5	27/5	28/5	29/5	30/5	31/5	1/6	2/6	3/6
12am	Hold	Poojitha	[signature]	[signature]	[signature]	[signature]	[signature]	[signature]	[signature]
6am	Hold	[signature]	Poojitha	[signature]	[signature]	[signature]	[signature]	[signature]	[signature]
12pm	[signature]	Haja	Sona	Sona	Megha	Sona	[signature]	[signature]	
6pm	[signature]	Haja	Sona	Sona	Megha	Sona	[signature]	[signature]	

DRUG : OROFER XT DROPS

Dose	Route	Frequency	Start Dt.
0.4ml	PO	OD	11/5

Name & Signature of the Doctor Starting the Drugs: Dr. Aishwarya

Additional Instructions: @ 3mg/kg/dose
1ml = 10mg

Daily Doctor's Endorsement by a Sign

Date / Time	26/5	27/5	28/5	29/5	30/5	31/5	1/6	2/5
6pm	Haja	Haja	Sona	Sona	Megha	Sona	[signature]	[signature]

DRUG : VITAMIN D3 DROPS

Dose	Route	Frequency	Start Dt.
1ml	PO	OD	10/5

Name & Signature of the Doctor Starting the Drugs: Dr Abhiwarya

Additional Instructions: 1ml = 800 IU

Daily Doctor's Endorsement by a Sign

Date / Time	26/5	27/5	28/5	29/5	30/5	31/5	1/6	2/6
6pm	Haja	Haja	Sona	Sona	Megha	Sona	[signature]	[signature]

VERIFIED

Docu. No. : RCHBH /FRM / CLINICAL / 108 (P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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VERIFIED

Sheet No: .....

REGULAR PRESCRIPTIONS

Weight .....

Ward .....

DRUG : Oral 3% NaCl

Dose	Route	Frequency	Start Dt.
1ml	PO	6 hrly Feed	22/5/26

Name & Signature of the Doctor Starting the Drugs: Dr Pooja

Additional Instructions: 4meq/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 22/5 23/5 24/5 25/5 31/5 1/6 2/6 3/6

DRUG : T. LEVOTHYROXINE

Dose	Route	Frequency	Start Dt.
15mcg	PO	OD	16/5

Name & Signature of the Doctor Starting the Drugs: Dr Aishwarya

Additional Instructions: 2-11mcg/kg/day
1tab = 25mg → 1tab + 5ml DW (1ml = 5mg) → give 2nd before feed
DO NOT GIVE WITH OSSOPAN-D

Daily Doctor's Endorsement by a Sign

Date/Time: 2/6 3/6

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date/Time

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date/Time

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

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

Weight. 0.950g Ward. N2

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

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

Signature .....

VERIFIED BY : Name .....

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
[illegible]/3/26	1AM	INJ CAFFEINE CITRATE	20mg/kg	UVC	[signature]	1.5Am Priyanka
26/3/26	1Am	SURVANTA	4ml/kg	ET	[signature]	1.10Am Priyanka
26/3/26	1Am	VITAMINK	1mg	UVC	[signature]	1.10Am Priyanka
26/3/26	9:30am	N8BOLUS ~~5ml/kg~~	5mL/kg	UVC	[signature]	Priyanka 9.35Am
26/3/26	3pm	Inj GCSF 300mcg/1ml, take of that take 0.2ml (10mcg) + 0.8ml 5%D as infusion over 1/2 hour (30 min)	10mcg 0.1ml + 0.5ml 5%D	UVC	[signature]	Priyanka 3.10Pm
27/3/26	7pm	FFP	15ml/kg	UVC	Rupanjali	7.30Pm Priyanka
27/3/26	2:40pm	LRBC	30min @20ml/kg	UVC	Rupanjali	2.40Pm Priyanka
31/3/26	5pm	Inj Caffeine	Over 4 hours 10mg/kg	PICC	[signature]	5.15Pm [signature]

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 0 H (M)
Dr. VIJAYANAND JAMALPURI

I.V. FLUIDS CHART

Weight. 0.95 Ward. Ng

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
26/3/26	1Am	TV-60cc/kg/day 10%D + Ca3+A2	UVC	1.6ml/hr	[signature]	Vidya / [signature]	27/3/26	[signature]	[signature] / [signature]
26/3/26	7:20Am	Inj Adrenaling 1.5mg/kg + 50ml of 5%D	UVC	0.1ml/hr	[signature]	Vidya / [signature]	27/3/26	[signature]	[signature] / [signature]
26/3/26	2Am	Inj Hep-NS 1.5ml + 48.5ml ½ NS	UVC	0.2ml/hr	[signature]	Vidya / [signature]	27/3/26	[signature]	[signature] / Sushma
26/3/26	2Am	Inj Hep-NS 1.5ml + 48.5 ½ N/S	UAC	0.2ml/hr	[signature]	Vidya / [signature]	27/3/26	[signature]	[signature] / Sushma
27/3/26	6pm	TV = 90mL/kg/d 10% TPN.	UVC	0.5ml/hr	Sneha	Vidya / Sushma	28/3	[signature]	[signature] / Sushma
27/3/26	6pm	Inj. Hep NS 1.5ml + 48.5ml ½ NS	UVC	0.2ml/hr	Sneha	Vidya / Sushma	28/3	[signature]	[signature] / Deevana
27/3/26	6pm	Inj. Hep NS 1.5mL + 48.5ml ½ NS	UAC	0.2ml/hr	Sneha	Vidya / Sushma	28/3	[signature]	[signature] / Deetha
27/3/26	6pm	Inj. Adrenaline 1.5mg/kg in 50ml 5%D	UVC	0.3ml/hr	Sneha	Vidya / Sushma	28/3	[signature]	[signature] / Deevana
27/3/26	6pm	TV = 30mL/kg 15% ISOP	UVC	1.2ml/hr	Sneha	Vidya / S	28/3	[signature]	[signature] / Vidya
27/3/26	7pm	TV @ 100ml/kg per day 10% TPN	UVC		Anemo	[signature]	28/3	[signature]	[signature] / Vidya

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

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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(3)

I.V. FLUID CHART

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.
26/4/26	2AM	Inj DEXMEDETOMEDINE 0.5ml + 49.5ml 5% Dextrose	IV	0.2 ml/hr	[signature]	Mausumi / [signature]	27/4/26	N.P.	[signature] / [signature]
27/4/26	8pm	Inj. DEXMEDETOMEDINE 0.5ml + 49.5ml 5% Dextrose	IV	0.2 ml/hr	N.P.	[signature] / [signature]	28/4/26	N.P.	[signature] / [signature]
6/5/26	4am	INJ 10% ISO-P + 3ml/kg CALCIUM GLUCONATE	IV	5.9ml/hr	[signature]	[signature]	7/5/26	[signature]	[signature] / [signature]
25/5/26	8pm	(TV- 150ml/kg/DAY) TV-150ml/kg/day ↓ 10% ISO-P	IV	8.0 ml	[signature]	[signature] / [signature]	26/5	[signature]	[signature] / [signature]

Docu. No. : RCHBH / FRM / CLINICAL / 182

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
Dr. VIJAYANAND JAMALPURI

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STAT / ONCE ONLY DRUGS

Name: BO - Sri vidya vangala

Weight: 0.950 kgs

Sheet No: 1

DATE	TIME	MEDICATION	DOSAGE & OTHER INSTRUCTIONS	ROUTE	SIGNATURE Doctor	Nurse-1	Nurse-2
		~~VANCOMYCIN~~					
5/4/26	8am	~~INJ~~ KCl 1mEq/kg	1 over 6 hrs	IV	[signature]	Dippi	[signature]
8/4/26	1pm	Inj. VANCOMYCIN	10mg/kg	PICC	[signature]	[signature]	[signature]
15/4/26	9am	SYP. CAFFEINE CITRATE	10 mg/kg	PO	[signature]	[signature]	[signature]
15/4/26	8am	INJ CAFFIENE	5mg/kg	IV	[signature]	Sushi	[signature]
19/4/26	6am	LRBC	20mb/kg	IV	[signature]	Diff	Vijay
~~20/4/26~~				Over 4 hrs			
20/4/26	10:30am	Inj CAFFIENE	10 mg/kg	I.V	[signature]	Diff	[signature]
21/4/26	9Am	ARENALINE	0.5ml/kg	NEB	[signature]	Hema	[signature]
22/4/26	10pm	INJ. TIGECYCLINE	3mg/kg	IV	[signature]	[signature]	Hema
			Vial = 50mg + 5.3mb 5% D				
			(1mb = 10mg)				
			Take 0.3mb.				
			+ 3mb 5% D				
			Give over 30min				
		~~INJ. TIGECYCLINE~~					
23/4/2026	5pm	Inj PARACETAMOL	15mg (15mg/kg)	IV	[signature]	Hema	[signature]
25/4/26	10Am	INJ. CAFFEINE CITRATE	10mg/kg	IV	[signature]	Hema	[signature]
6/5/26	11:30PM	INJ CAFFEINE CITRATE	10mg/kg	IV	[signature]	[signature]	11:30pm
6/5/26	11:45pm	LRBC	20ml/kg	IV OVER 4 HOURS	[signature]	[signature]	11:45pm

Docu. No. : RCHBH /FRM / CLINICAL / 136

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 29 D (M)
Dr. VIJAYANAND JAMALPURI

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STAT / ONCE ONLY DRUGS

Name: ..... Weight: 1.4 kgs

Sheet No: .....

DATE	TIME	MEDICATION	DOSAGE & OTHER INSTRUCTIONS	ROUTE	SIGNATURE		
					Doctor	Nurse-1	Nurse-2
25/5/26	12:30pm	LRBC	20ml/kg over 4 hours	IV		Alphonsa	Mary
25/5/26	10am	Inj. LASIX	0.5mg/kg	IV		Poojitha	Mary

Docu. No. : RCHBH /FRM / CLINICAL / 136

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

c. No. : RCH / FRM / CLINICAL / 124

01/6/26

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

Pratiksha Rainbow Children's Hospital
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31/6/26

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8pm	10pm	12Am	2am	4am	6am
Doctor/Nurse/Family Concern?	Am	Pm	Pm	Pm	Pm	Pm.						
Temperature (F)	35.4°C	36.5°C	36.4°C	36.4°C	36.5°C	36.4°C	* 36.6°C	* 98.5°C	* 98.3°C	* 98.5°C	* 98.6°C	* 98.3°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	75 (59) 50	73 (8) 42	Hue	67 (40) 41								
Note: BP does not score in early warning scoring												
Heart Rate (Number)	146	154	162	146	144	143	145	146	139	142	156	129
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	35	43	40	34	44	55	39	42	59	33	41	53
Resp Distress Mod/ Severe None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	96%	96%	95%	94%	96%	99%	99	8	95	97	96	96
Conscious Level Normal Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Temperature scale: 104, 103, 102, 101, 100, 99, 98, 97, 96, 95, 94

Heart Rate (bpm) and Blood Pressure (mmHg) *: 190, 180, 170, 160, 150, 140, 130, 120, 110, 100, 90, 80, 70, 60, 50

Note: BP does not score in early warning scoring

Resp. Rate (bpm) (Over 1 Minute) *: 70, 60, 50, 40, 30, 20, 10

Resp Rate (Number): 35, 43, 40, 34, 44, 55, 39, 42, 59, 33, 41, 53

Receiving O_2(l/min) O_2Saturations (%): 96%, 96%, 95%, 94%, 96%, 99%, 99, 8, 95, 97, 96, 96

ACTIONS		
NB: Scores 3 should be recorded overleaf	Score 1	: Continue normal observation by staff nurse
	Score 2	: Shift in charge nurse to be informed and continue hourly observations
	Score 3	: Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
	Score 4	: Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
	Score 5 & 6	: Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 2 D (M)
Dr. VIJAYANAND JAMALPURI

c. No. : RCHBH / FRM / CLINICAL / 124

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

Pratiksha Rainbow Children's Hospital
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6pm	10pm	2am	6Am
Doctor/Nurse/Family Concern?	Dr	Dr	Dr	Dr	Dr				

Temperature (F) — 104 / 103 / 102 / 101 / 100 / 99 / 98 / 97 / 96 / 95 / 94

Heart Rate (bpm) and Blood Pressure (mmHg) * — 190 / 180 / 170 / 160 / 150 / 140 / 130 / 120 / 110 / 100 / 90 / 80 / 70 / 60 / 50

Note: BP does not score in early warning scoring

Crib Case

Heart Rate (Number)	139	142	149	150	134	147 bpm	125 bpm	136 bpm	126 bpm

Resp. Rate (bpm) (Over 1 Minute) * — 70 / 60 / 50 / 40 / 30 / 20 / 10

Resp Rate (Number)						40 bpm	36 bpm	40 bpm	36 bpm
Resp Distress (Mod/ Severe / None / Mild)	N	N	N	N	N				
Receiving O_2 (l/min) O_2 Saturations (%)	99%	98%	99%	COOL	99%	RA	99%	99%	99%
Conscious Level (Normal / Altered)									
GCS *	C	C	C	C	C	(V)	(V)	(V)	(V)
TOTAL SCORE Number of shaded boxes	0	1	1	1	1	2	0	0	0
Pain Score	0	1	1	1	1		0	0	0
Observer's Initials									

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
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* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			**Record Time of Review and Plan**		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
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A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

H-00652011 IP5-00171644
D/O Of SRI VIDYA VANGALA
03-2026 0 Y 2 M 7 D (M)
VIJAYANAND JAMALPURI

Doc. No. : RCHBH / FRM / CLINICAL / 124 2/6/2026

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

Pratiksha Rainbow Children's Hospital
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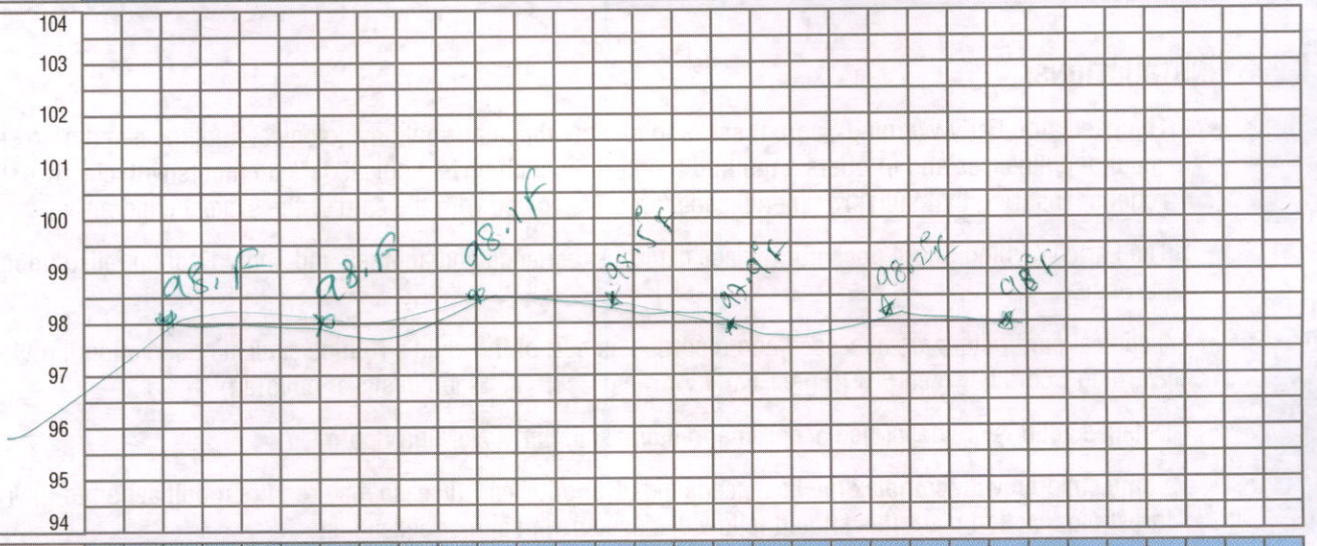
EARLY WARNING SCORE: CHILDREN'S UNIT

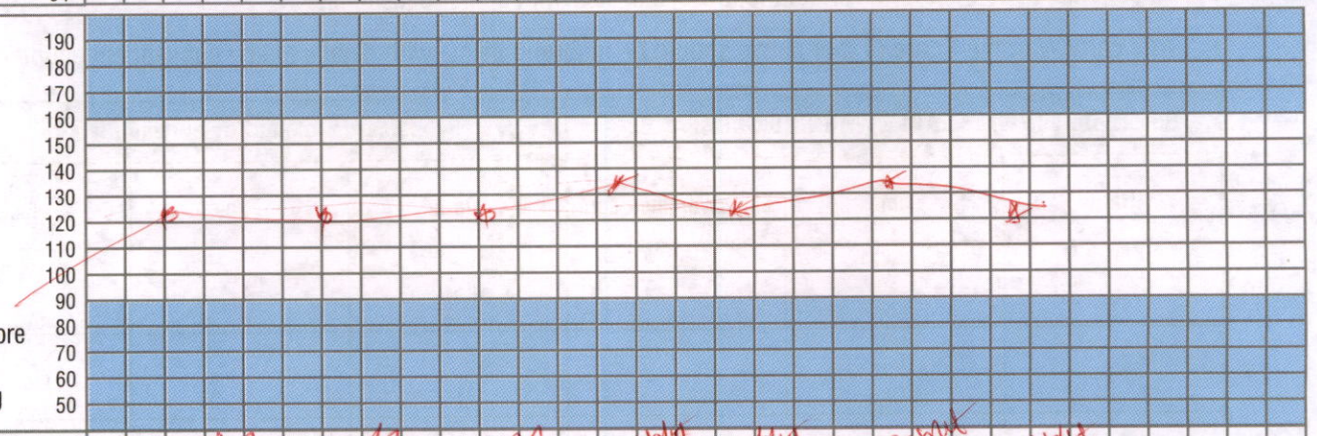
Date: ..... Time:	10AM	12pm	5pm	8pm	10pm	2 AM	6am
Doctor/Nurse/Family Concern?							

Temperature (F)



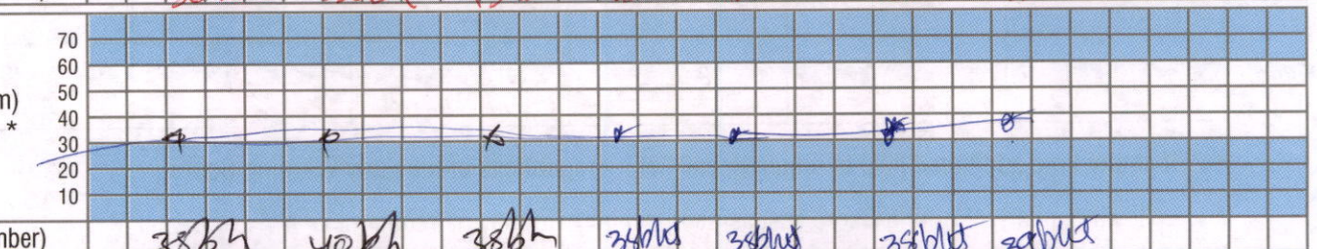
Heart Rate (bpm) and Blood Pressure (mmHg) *

Note: BP does not score in early warning scoring



Heart Rate (Number)	150 bpm	135 bpm	150 bpm	136 bpm	128 bpm	132 bpm	126 bpm

Resp. Rate (bpm) (Over 1 Minute) *



Resp Rate (Number)	38 bpm	40 bpm	38 bpm	36 bpm	36 bpm	36 bpm	36 bpm
Resp Distress: None / Mild | Mod/ Severe							
Receiving O_2 (l/min)							
O_2 Saturations (%)	99%	99%	99%	99%	100%	99%	100%
Conscious Level: Normal | Altered							
GCS *							
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	0
Observer's Initials	A	A	A	A	A	A	A

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
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Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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Record Details when EARLY WARNING SCORE > 3			**Record Time of Review and Plan**		
Date	Time	Early Warning Score	Date	Time	Name

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S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
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H-00652011 IP5-00171644
by Of SRI VIDYA VANGALA
03-2026 0 Y 2 M 7 D (M)
VIJAYANAND JAMALPURI

3/6/26

Doc. No. : RCHBH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

Pratiksha Rainbow Children's Hospital
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	10 AM	2 PM	5 PM
Doctor/Nurse/Family Concern?			

Temperature (F) — 104 / 103 / 102 / 101 / 100 / 99 / 98 / 97 / 96 / 95 / 94

Heart Rate (bpm) and Blood Pressure (mmHg) * — 190 / 180 / 170 / 160 / 150 / 140 / 130 / 120 / 110 / 100 / 90 / 80 / 70 / 60 / 50

Note: BP does not score in early warning scoring

Heart Rate (Number)	130 bpm.	138 bpm	138 bpm

Resp. Rate (bpm) (Over 1 Minute) * — 70 / 60 / 50 / 40 / 30 / 20 / 10

Resp Rate (Number)	36 bpm	36 bpm	36 bpm

Resp Distress	Mod/ Severe / None / Mild		
Receiving O_2(l/min) O_2Saturations (%)	100 %	99 %	98 %
Conscious Level	Normal / Altered		
GCS *	(N)	(N)	(N)
TOTAL SCORE Number of shaded boxes	0	0	0
Pain Score	0	0	0
Observer's Initials			

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
	Score 2 : Shift in charge nurse to be informed and continue hourly observations
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Record Details when EARLY WARNING SCORE >3			**Record Time of Review and Plan**		
Date	Time	Early Warning Score	Date	Time	Name

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The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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FLUID CHART

Sheet No. : ② 30/5/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – N.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am	EBM	22ml				Passed			6ml		
	10:00 am										0	
	11:00 am	EBM	22ml				—			7ml		
	12:00 pm											
	01:00 pm	EBM	22ml				—			10ml		
Total Intake :						**Total Output :**						
	02:00 pm						Passed			7ml		
	03:00 pm	EBM	22ml									
	04:00 pm						—			8ml		
	05:00 pm	EBM	22ml								0	
	06:00 pm						Passed			9ml		
	07:00 pm	EBM	22ml									
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM	22ml				passed			8ml		SJ
	10:00 pm										0	
	11:00 pm	EBM	22ml				passed			11ml		SJ
	12:00 am											
	01:00 am	EBM	22ml				not passed			12ml		
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	EBM	22ml				passed			10ml		SJ
	04:00 am										0	
	05:00 am	EBM	22ml				passed			9ml		SJ
	06:00 am											
	07:00 am	EBM	22ml				—			6ml		
Total Intake : 264 ml						**Total Output :** 103 ml						

Total 24 hrs. Intake	176cc/kg/day

Total 24 hrs. Output	2.5cc/kg/day

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FLUID CHART

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Sheet No. : 2

IV :
TF :
Bat :

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

		Intake				Output						
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am	EBM	22ml				Passed			10ml	0	
	10:00 am											
	11:00 am	EBM	22ml				—			6ml	0	
	12:00 pm											
	01:00 pm	EBM	22ml				Passed			8ml	0	
Total Intake :						Total Output :						
	02:00 pm											
	03:00 pm	EBM+MMFEX	22ml				—			10ml	0	
	04:00 pm											
	05:00 pm	EBM+MMFEX	22ml			0	Passed			10ml	0	
	06:00 pm											
	07:00 pm	EBM+MMFEX	22ml				—			8ml	0	
Total Intake :						Total Output :						
	08:00 pm											
	09:00 pm	EBM+	22ml				passed			10ml		
	10:00 pm											
	11:00 pm	EBM+PBM	22ml				—					
	12:00 am									11ml		
	01:00 am	EBM+PBM	22ml				passed					
Total Intake :						Total Output :						
	02:00 am											
	03:00 am	EBM+PBM	22ml				passed			10ml		
	04:00 am											
	05:00 am	EBM+PBM	22ml							9ml		
	06:00 am											
	07:00 am	EBM+PBM	22ml							7ml		
Total Intake :		264 ml				Total Output :				99ml		

Total 24 hrs. Intake	165cc/kg/day	Total 24 hrs. Output	2.5cc/kg/hr

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 2 D (M)
Dr. VIJAYANAND JAMALPURI

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FLUID CHART

Sheet No. : (3)

1/6/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – N.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am									1ml		
	09:00 am	EBM	25ml								NA	
	10:00 am						passed			2ml		
	11:00 am	EBM	25ml									
	12:00 pm									9ml		
	01:00 pm	EBM	25ml									
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	EBM	25ml							1ml		
	04:00 pm										NA	
	05:00 pm	EBM	25ml				passed			6ml		
	06:00 pm											
	07:00 pm	EBM	25ml									
Total Intake :						**Total Output :** U: 3 ml						
	08:00 pm											
	09:00 pm	EBM	25ml									
	10:00 pm											
	11:00 pm	EBM	25ml								NA	
	12:00 am											
	01:00 am	EBM	25ml									
Total Intake :						**Total Output :** U: 2 m: 2						
	02:00 am											
	03:00 am	EBM	25ml									
	04:00 am										NA	
	05:00 am	EBM	25ml									
	06:00 am											
	07:00 am	EBM	25ml									
Total Intake :		Taken				**Total Output :** U: 1 m: 1						

Total 24 hrs. Intake		Total 24 hrs. Output	U: 9 m: 5

H-00652011 IP5-00171644
by Of SRI VIDYA VANGALA
03-2026 0 Y 2 M 7 D (M)
VIJAYANAND JAMALPURI

FLUID CHART

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Sheet No. : (4) 2/6/26

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – N.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am										1	Jyothi
	09:00 am	EBM	25ml								NO	Jyothi
	10:00 am						✓			✓	IV	Jyothi
	11:00 am	EBM	25ml								canula	Jyothi
	12:00 pm										↑	Jyothi
	01:00 pm	EBM	25ml				—			—		Jyothi
Total Intake :			75 ml			**Total Output :**				U – 1		M – 1
	02:00 pm											Jyothi
	03:00 pm	EBM	25ml									Jyothi
	04:00 pm						—			—	NO	Jyothi
	05:00 pm	EBM	25ml								IV	Jyothi
	06:00 pm										canula	Jyothi
	07:00 pm	EBM	25ml				—			—	↑	Jyothi
Total Intake :			75 ml			**Total Output :**				U – 2		M – 2
	08:00 pm	EBM	37ml				✓			✓	1	Jyothi
	09:00 pm	EBM	37ml								NO	Jyothi
	10:00 pm										IV	Jyothi
	11:00 pm	EBM	37ml				✓			✓	canula	Jyothi
	12:00 am										↑	Jyothi
	01:00 am											Jyothi
Total Intake :			74 ml			**Total Output :**				U – 2		M – 2
	02:00 am	EBM	37ml				✓			✓	1	Jyothi
	03:00 am										NO	Jyothi
	04:00 am	EBM	37ml				✓			✓	IV	Jyothi
	05:00 am										canula	Jyothi
	06:00 am						✓			✓	↑	Jyothi
	07:00 am	EBM	37ml									Jyothi
Total Intake :			111 ml			**Total Output :**				U – 3		M – 3

Total 24 hrs. Intake	EBM-330 ml	Total 24 hrs. Output	U – 8 M – 9

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BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 25/5/26 Time: 3:5 pm

Blood Group of the Patient: O+ positive Blood Group on the Blood Bag: O+ ve

Blood Bank Issue No: BAH26-01244 Date of Collection: 23/5/2026 Date of Expiry: 04/07/2026

Date & Time of Starting Transfusion: 25/5/26 @ 3:5pm Planned duration of Transfusion: 4 hrs

Check for Correct Unit: ☑ Correct Patient: ☑

Blood products cross checked by: Nurse 1: Blessy Nurse 2: Alphonsa

Before starting transfusion vitals: Temp: 98.6°f HR 139 b/m RR: 37 b/m BP: 60/40 (47) SpO2 98%

PLEASE MONITOR THE FOLLOWING:

Date	Time	HR	Temperature	Blood Pressure	SpO_2	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
25/5/26	15 Min	134	36.5°C	57/44 (28)	100%	NA	NA	NA	NA
"	15 Min	135	36.4°C	62/30 (41)	95%	NA	NA	NA	NA
"	30 Min	143	36.5°C	57/29 39	91%	NA	NA	NA	NA
"	30 Min	155	36.3°C	60/53 59	95%	NA	NA	NA	NA
"	30 Min	147	36.5°C	60/40 (47)	97%	NA	NA	NA	NA
"	1 Hr	128	36.4°C	61/33 (43)	99%	NA	NA	NA	NA
"	1 Hr	139	36.5°C	62/35 (44)	100%	NA	NA	NA	NA

Comments: No any complication during transfusion

Name of the Incharge-Nurse: Silpa M.C Name of the Nurse: Alphonsa

Signature of the Incharge-Nurse: Silpa M.C Signature of the Nurse: Alphonsa

Date & Time: 25/5/26 : 7pm Date & Time: 25/5/26 @ 2:20pm

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2,
Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

LR-LEUCO REDU... BLOOD CELLS IP PEDIA-1

Qty. 40 ml. Prepared from Whole human blood collected in 63 ml. of C.P.D./ SAGM Solution.

Dr. Ramya

O

Rh Positive

HIV I & II/ HBsAG/ HCV - Non reactive
VDRL - Non reactive
MP - Negative
NAT(HIV I & II/ HBsAG/ HCV) reactive

Unit No.: BAH26-01244
Blood Group: O Rh Positive
Collection Date: 23/May/202...
Expiry Date: 04/Jul/2026

1) Administer Without Warming. 2) Shake Gently Before Us...
Add Any Medication. 4) Check Blood Group on Label & R...
Group an...
With Filt...
There is ...
Appropr...
Antibodi...

rad-sure™ irradiation indicator
DATE: 25526
OPERATOR:
IRRADIATED
2027-09-11
25 Gy INDICATOR
LOT 038640GX25

Issue Label / CrossMatching Report

Patient : **B/O. SRI VIDYA VANGALA**
Patient's Blood Group :O Rh Positive
Hosp/Dr :Rainbow Childrens Hospital,Dr. VIJAYANAND J
UHID No.: BAH-00652011 Wd-Bed No.:

Product : LR-PRBC Pedia-1
Blood Group : O Rh Positive
Unit No.: **BAH26-01244**
XMatching Report:Compatible
X-matched by: R.RAMESH

Issue Dt : 25/May/2026
Colln. Dt :23/May/2026
Exp. Dt :04/Jul/2026
Issued By : Premalatha

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

Resving - 3:5
issue - 2:15

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CONSENT FOR BLOOD TRANSFUSION

Name: Blo Sri Vidya Vangala Age: D60 Gender: Male ☑ Female ☐

UHID.No : BAH -00 65 2011 Date: 25/5/26

Type of Blood Product:

☐ Fresh Frozen Plasma	☒ Packed Red Blood Cells	☐ Random Donor Platelets
☐ Cryoprecipitate	☐ Single Donor Platelet	☐ Whole Blood
☐ Albumin	☐ Red Blood Cell	☐ Others LR BC

..... hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that .....

PRBC

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):

Signature: Shiv Charan Y.

Name: Shiv Charan Yedavalli

Date & Time 25/5/26 @10:30am

Doctor (Who is talking the consent)

Signature:

Name: Dr Aishwarya

Date & Time 25/5/26 @10:30am

Witness

Signature: Alphonsa

Name: Alphonsa

Date & Time 25/5/26 @10:30 am

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రక్త మార్పిడి కొరకు అంగీకార పత్రము

రోగి పేరు: ..... వయస్సు: ..... లింగము ☐ పురుషుడు ☐ స్త్రీ

UHID. సంఖ్య : ..... తేదీ: .....

రక్త ఉత్పత్తి రకాలు:

☐ తాజా ఘనీభవించిన ప్లాస్మా ☐ ప్యాక్ చేయబడిన ఎర్ర రక్త కణాలు ☐ Random Donor Platelets

☐ క్రయోప్రెసిపిటేట్ ☐ ఒకే ధాత ప్లేటిలెట్స్ ☐ Whole Blood

☐ మొత్తం రక్తం ☐ ఎర్ర రక్త కణం ☐ ఇతరులు.....

నేను ..... ఇందు మూలముగా రెయిన్బో ఆసుపత్రిలో అడ్మిట్ అయి ఉన్నపుడు పూర్తి చికిత్సలో భాగంగా నాకు గాని/ నా రోగికి గాని రక్తమార్పిడికై/ రక్త రక్త ఉత్పత్తుల మార్పిడికి అంగీకారం తెలుపుతున్నాను. దాత రక్తాన్ని హెచ్ ఐ వి యాంటీ బడీస్, హైపటైటీస్ బి సర్ఫేస్ యాంటిజన్, హైపటైటీస్ యాంటిబడీస్, మలేరియా మరియు సిఫ్లిస్ లక్షణాలు లేవని పరీక్షించి బడినది అని వివరించడమైనది. రక్త పరీక్ష నిర్ణిత కాల పరిమితి లో జరిగినప్పటికి పరీక్షలో కనబడని అనేక ఇతర ఇన్ఫెక్షన్ ద్వారా అతి అరుదుగా ఇన్ఫెక్షన్లు సోక వచ్చునని కూడా తెలియపరచడమైనది. ఏదైన రక్త ఉత్పత్తుల మార్పిడికి సంబంధించిన ప్రతిచర్యలు సోకే ప్రమాదం వుందని, ప్రసరణ వ్యవస్థలో అదనపు ద్రవం మొదలగు అరుదైనది పర్యవసానాలు తెలెత్తవచ్చు అని నేను అర్థం చేసుకున్నాను.

ఈ ప్రక్రియకు ప్రత్యామ్నాయం గురించి డాక్టర్ నాకు వివరించారు .....

.....

పైన పేర్కొన్న అన్ని ప్రమాదాలు, ప్రయోజనాలు మరియు ప్రత్యామ్నాయాలు నాకు / నా రోగికి చికిత్స చేస్తున్న డాక్టర్ ద్వారా నాకు వివరించబడ్డాయి. చికిత్స చేస్తున్న సమయంలో అన్ని రకముల రక్తమార్పిడులకు (మొత్తం రక్తం / లేదా రక్త ఉత్పతులు ప్యాక్ చేయబడిన ఎర్ర రక్త కణాలు, ఎర్ర రక్త కణాలు, ప్లేట్ లెట్స్, ఫ్రెష్ ఫ్రోజెన్ ప్లాస్మా, క్రయోప్రెసిపిటేట్ మొదలైనవి) నా అంగీకారము తెలుపుతున్నాను. నాకు పూర్తిగా అర్థమగు భాషలో నాకు నా రోగికి వివరించారు మరియు నేను దానిని సమ్మతిస్తున్నాను

సహాయకుడు(అటెండెంట్)

సంతకము .....

పేరు .....

తేదీ మరియు సమయము .....

సాక్షి

సంతకం .....

పేరు .....

తేదీ మరియు సమయము .....

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము .....

పేరు .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
Dr. VIJAYANAND JAMALPURI

MISSION
ENSIVE CARE UNIT

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Name: B/o Sri vidya vangala Age: NB Gender: Male ☑ Female ☐

UHID.No : BAH-00652011 Date: 26/3/26

I Shiv Charan S/o, D/o, W/o wife Vidya Vangala hereby declare that our patient Mr. / Ms B/o Sri Vidya Vangala who is related to me as Son is getting admitted in the Neonatal Intensive Care Unit of Rainbow Children's Hospital on 25/3/2026.

he doctors have explained to me in a language understood by me that my child has following health related issues :

(Expt / ExLBW / RDS)
Extreme Preterm / Extere Low birth weight / Respiratory distress.

The doctors have clearly explained to me that my patient B/o Sri Vidya during his / her stay in the Neonatal Intensive Care Unit may undergo various medical and surgical procedures like airway management, mechanical ventilation, Umbilical Artery Catheter, Umbilical Vein and Arterial Lines, Peripherally Inserted Central Catheter Line and arterial line placements, chest drain, or peritoneal drain insertion etc.

I have been told by the doctors that while performing such procedures I will be informed and a separate consent for this procedure shall be taken. However, in case of any life threatening emergency if the time is not available for taking informed consent it is implied that I give consent for various invasive procedure to save the life of my child.

I understand that a sick child in Neonatal Intensive Care Unit has life threatening medical conditions.

I understand that when a child is sick in the Neonatal Intensive Care Unit with multiple medical and surgical procedures performed upon him/her, there are inherent risks due to these high risk procedures, and high risk medications, in the form of infections, bleeding, air leaks, skin and other tissue damage etc.

I give my consent to the team of doctors to go ahead and admit the child B/o : Sri Vidya in the Neonatal Intensive Care Unit fully understanding the associated risk, benefits and alternatives involved from various procedures, high risk medications and infections in the Neonatal Intensive Care Unit and treat him/her with all necessary means.

The doctors have explained to me in the language best understood to me.

Patient Attendant :

Signature : [signature]

Name : Shiv Charan

Relationship with Patient: Father

Date & Time : 25/03/26. 11:18pm

Witness :

Signature : [signature]

Name : Priyanka

Date & Time : 25/3/26 11:18 pm

Doctor (who is taking the consent) :

Signature : [signature]

Name : PAR

Date & Time : 26/3/26 @ 11:18pm

Docu. No. : RCHBH /FRM / CLINICAL / 012

నవజాత శిశువుల ఇంటెన్సివ్ కేర్ యూనిట్ (ఎన్.ఐ.సి.యు) సమ్మతి పత్రం

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రోగి పేరు ..... వయస్సు ..... లింగం పు స్త్రీ

యు.హెచ్.ఐ.డి .....

నేను ..... చి .....

అనే బాలుడు / బాలిక యొక్క చికిత్స మేరకు రేయిన్బో చిల్డ్రన్ ఆసుపత్రి లోని నవజాత శిశువుల ఇంటెన్సివ్ కేర్ యూనిట్లో తేదీ .....

..... నాడు పూర్తి సమ్మతితో చేర్చితిని. మా బాలుడి / బాలికలో. ఈ క్రింద తెలిపిన ఆరోగ్య సమస్యల గురించి వైద్య నిపు ణుడు నాకు అర్థమగు భాషలో వివరించితిరి.

నవజాత శిశువుల ఇంటెన్సివ్ కేర్ యూనిట్ లో మా పాప /బాబుకు వైద్య పరంగా అవసరమగు అన్ని రకాల చికిత్స విధానాలకు మ ప్రక్రియలను (ఉదా కృత్రిమ శ్వాస వెంటిలేటర్, ధమని మార్గం, సింట్రల్ లైన్ చెస్ట్ డ్రెయిన్, పెరిటోనియల్ డ్రెయిన్ ఇంనర్షన్ వంటి ప్రక్రియ డాక్టరు గారు నాకు అర్థమగు భాషలో వివరించారు.

అటువంటి ప్రక్రియలు చేస్తున్నప్పుడు నాకు సమాచారం ఇవ్వబడుతుందని మరియు దీనికి ప్రత్యేక సమ్మతి ఉంటుందని వైద్యులు నాకు చెప్పారు.

ఏదేమైనప్పటికీ, పైన తెలుపబడిన శస్త్ర ప్రక్రియలు చేసేముందు సమ్మతి తీసుకునే వీలు లేని చో ఏదైనా ప్రాణాంతక అత్యవసర పరిస్థితులు ఏర్పడినప్పుడు మా బాలుడు / బాలికను కాపాడుటకు అవసరమైన వైద్య శస్త్ర ప్రక్రియలు మా సమ్మతి లేకుండానే చేయవచ్చని నేను సమ్మతిస్తున్నాను.

ఆరోగ్య సమస్యలతో బాధపడుతున్న మా బాలుడికి / బాలికకు రుగ్మతలచే ప్రాణహాని కలుగవచ్చిన నాకు వైద్యుడు అర్థమగు భాషలో వివరించితిరి

మా బాలుడు / బాలిక నవజాత శిశువు ఇంటెన్సివ్ కేర్ యూనిట్ లో ఉన్నప్పుడు ఎన్నో విధాల వైద్య మరియు శస్త్ర ప్రక్రియలు ఇంకా వివిధ చికిత్స విధానాలు అవసరం పడతాయని మరియు వాటివల్ల దుష్పరిణామాలు కలగవచ్చని అర్థం చేసుకున్నాను. ఆ పరిణామాలు ఎటు అనగా నష్టాలు మరియు అధిక-ప్రమాదకరమైన మందుల రూపంలో అంటువ్యాధులు, రక్తస్రావం, శ్వాసపరమైన సమస్యలు , చర్మం మరియు కణజాల నష్టం మొదలైనవి కలగవచ్చు.

మా బాలుడిని/బాలికను అడ్మిట్ చేయుటకు మరియు ఎన్. ఐ. సి.యు. లో ఉన్నప్పుడు జరుగు చికిత్స విధానాలు మరియు శస్త్ర ప్రక్రియలు వలన కలిగే అపాయాలను నేను అంగీకరిస్తున్నాను. మా పేషంట్ ను తగిన విధంగా చికిత్స చేయడానికి వైద్యునికి నాపూర్తి అంగీకారం తెలియజేస్తున్నాను. వైద్యుడు నాకు అర్థమగు భాషలో అంతా వివరించారు.

మా బాలుడు / బాలిక ..... ను ఇన్టెన్సివ్ కేర్ యూనిట్ (ఎన్.ఐ.సి.యు) లో చేర్చుకొని అవసరమయ్యే వైద్యం చేయుటకు నేను వైద్య బృందానికి నా సమ్మతి ధృవపరుస్తున్నాను.

సహాయకుడు(అటెండెంట్)

సంతకము .....

పేరు .....

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము .....

పేరు .....

సాక్షి

సంతకము .....

పేరు .....

తేదీ మరియు సమయము .....

CONSENT FOR DONOR BREAST MILK

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Patient Name : B/o Srividya Age : 0 Gender : ☑ Male ☐ Female

UHID No: 652011 Department : NICU,T Date : 28/03/2026

I Mr / Mrs. : Shiv Charan aged : 2 days ~~years~~, hereby declare that I have admitted my ☑ son / ☐ daughter in the Neonatal Intensive Care Unit of Rainbow Children's Hospital, Hyderabad on 25/03/2026 I hereby give consent for Donor Breast Milk for my child. Doctors have explained me about the Donor Breast Milk feeding benefits, risks, alternatives in the language I best understand.

Patient Attendant :

Signature : Shiv Charan Y

Name : Shiv Charan

Relationship with Patient : Father

Date & Time : 28/3/26 @ 10cm

Witness :

Signature :

Name : Attendant

Date & Time : 28/3/26 @ 10cm

Doctor (who is taking the consent) :

Signature :

Name : Dr Ashwarya

Date & Time : 28/3/26 @ 10cm.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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CROSS CONSULTATION FORM

Doctor Name : DR. Leena Priyambada Date : 16/5/2026 Time : 6:30PM

Diagnosis : .....

Hospital : Rainbow Children Hospital Banjara Hills

Referred for : ☒ Opinion ☐ Co-Management ☐ Transfer of care

Type of Referral :
☐ Emergency
☐ Urgent
☒ ~~Non~~ Urgent

Reason for Referral : If for concurrent care specify the particular need, especially in the absence of a second diagnosis:

Hypothyroidism of Prematurity.

Signature:

Findings and Recommendations :

→ TSH - 6, T_4 - 10, f T_4 - 1.29 on 7.3 µg/kg/day.
→ NO feed intolerance.

Plan:
- Increase dose to
T. THYROXINE 15 µg/day (= 11 µg/kg/day).
- Repeat free T_4, TSH after 2 weeks.

Leena.

16/5/26
6.30p.

Consultant :
Name : LEENA PRIYAMBADA. Signature : ..... Date & Time : 16/5/26 @ 6:30PM

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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CONSENT FOR BLOOD TRANSFUSION

Name: B/o Sri vidya vangala Age: D23 Gender: Male ☒ Female ☐

UHID.No : BAH-00652011 Date: 18/4/26

Type of Blood Product:

☐ Fresh Frozen Plasma	☑ Packed Red Blood Cells (LRBC.)	☐ Random Donor Platelets
☐ Cryoprecipitate	☐ Single Donor Platelet	☐ Whole Blood
☐ Albumin	☐ Red Blood Cell	☐ Others LRBC

I Mr. Shiv Charan hereby give my consent for whole blood transfusion or the blood components as part of treatment of myself / my patient while being admitted at Rainbow Hospital. I have been explained all the known risks of transfusion reactions. I have also been explained that the donor blood has been screened for Human Immuno-deficiency Virus antibodies, Hepatitis B surface antigen, Hepatitis C antibodies, Malaria and Syphilis. I have also been explained that transfusion transmitted infections occur even with screened blood, especially if it is in. The "window period" and also due to various other infections which have not been screened for. I also understand that any blood components transfusions carries risk of transfusion associated reactions, fluid overload etc. which are generally rare. The same risks apply for multiple transfusions too.

The doctor have explained to me about the alternative for this procedure that PRBC

All the above-mentioned risk, benefits and alternatives have been explained to me by the doctor treating me / my patient in the language that I fully understand and I accept the same and give my consent for all transfusions (the whole blood / or blood components Packed Red Blood Cells, Red Blood Cell, Platelets, Fresh Frozen Plasma, Cryoprecipitate etc.) to me / my Patient during he present hospital stay and treatment.

Patient (Or Patient Relative / Guardian):

Signature: Shiv Charan Y

Name: Mr. Shiv charan

Date & Time 18/4/26 @ 11pm

Doctor (Who is talking the consent)

Signature: Sneha

Name: Y. Sneha

Date & Time 18/4/26 @ 11pm

Witness

Signature:

Name: vidya

Date & Time 18/4/26 11 PM

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రక్త మార్పిడి కొరకు అంగీకార పత్రము

రోగి పేరు: ..... వయస్సు: ..... లింగము ☐ పురుషుడు ☐ స్త్రీ

UHID. సంఖ్య : ..... తేదీ: .....

రక్త ఉత్పత్తి రకాలు:

☐ తాజా ఘనీభవించిన ప్లాస్మా ☐ ప్యాక్ చేయబడిన ఎర్ర రక్త కణాలు ☐ Random Donor Platelets

☐ క్రయోప్రెసిపిటేట్ ☐ ఒకే ధాత ప్లేటిలెట్స్ ☐ Whole Blood

☐ మొత్తం రక్తం ☐ ...ణం ☐ ఇతరులు.....

నేను ....ున్నో ఆసుపత్రిలో అడ్మిట్ అయి

ఉన్నపుడు పూర్తి చికిత్... మార్పిడికి అంగీకారం తెలుపుతున్నాను.

దాత రక్తాన్ని హెచ్ ఐ ... బడీస్, మలేరియా మరియు సిప్లిస్

లక్షణాలు లేవని పరీక్షి... గినప్పటికి పరీక్షలో కనబడని అనేక

ఇతర ఇన్ఫెక్షన్ ద్వారా ... న రక్త ఉత్పత్తుల మార్పిడికి సంబంధించిన

ప్రతిచర్యలు సోకే ప్రమ... వసానాలు తెలెత్తవచ్చు అని నేను అర్థం

చేసుకున్నాను.

ఈ ప్రక్రియకు ప్రత్యావ... .....

.....

పైన పేర్కొన్న అన్ని ప్రమ... త్స చేస్తున్న డాక్టర్ ద్వారా నాకు

వివరించబడ్డాయి. చికిత్... లేదా రక్త ఉత్పతులు ప్యాక్ చేయబడిన

ఎర్ర రక్త కణాలు, ఎర్ర రక్త... ా అంగీకారము తెలుపుతున్నాను.

నాకు పూర్తిగా అర్థమగు ... ను

సహాయకుడు(అటెండెంట్)

సంతకము ....కం .....

పేరు ....ఎయి .....

తేదీ మరియు సమయము ..... తేదీ మరియు సమయము .....

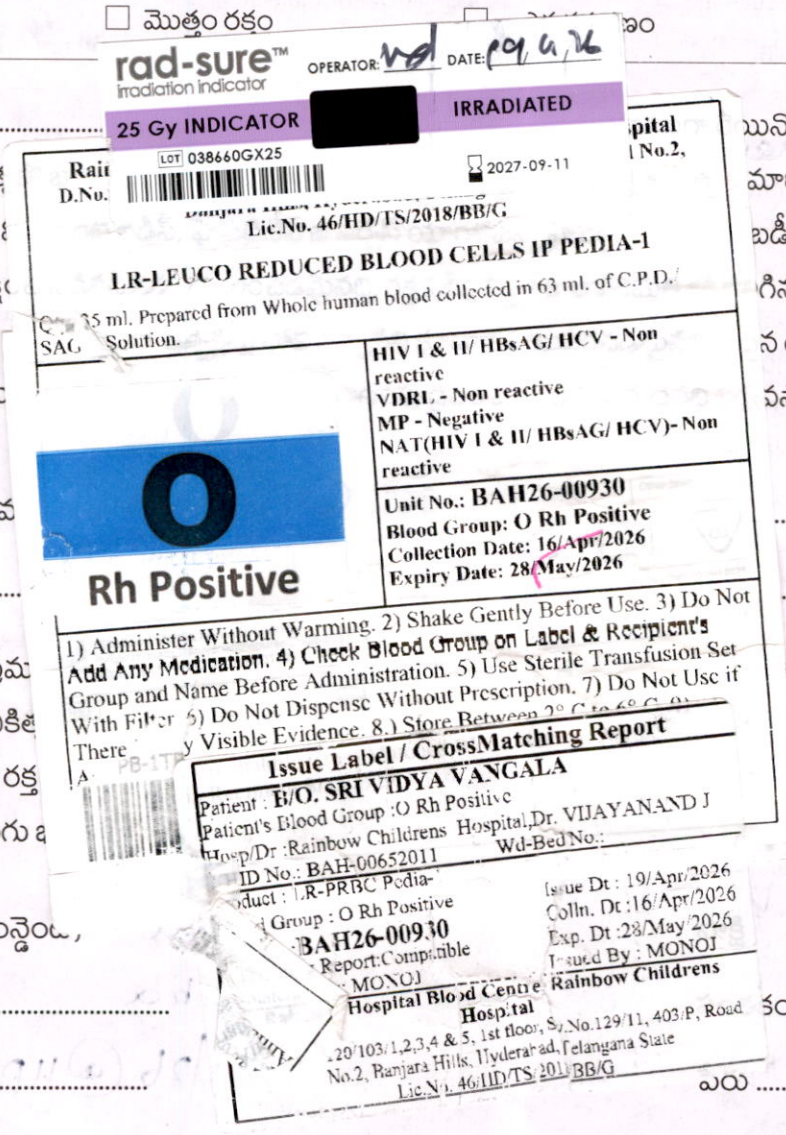
వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము .....

పేరు .....

rad-sure™ irradiation indicator OPERATOR: [redacted] DATE: 19/4/26

25 Gy INDICATOR [redacted] IRRADIATED



LOT 038660GX25 2027-09-11

Rai... D.No. ... pital ... No.2,

Lic.No. 46/HD/TS/2018/BB/G

LR-LEUCO REDUCED BLOOD CELLS IP PEDIA-1

... 35 ml. Prepared from Whole human blood collected in 63 ml. of C.P.D./ SAG ... Solution.

HIV I & II/ HBsAG/ HCV - Non reactive
VDRL - Non reactive
MP - Negative
NAT(HIV I & II/ HBsAG/ HCV)- Non reactive

O Rh Positive

Unit No.: BAH26-00930
Blood Group: O Rh Positive
Collection Date: 16/Apr/2026
Expiry Date: 28/May/2026

1) Administer Without Warming. 2) Shake Gently Before Use. 3) Do Not Add Any Medication. 4) Check Blood Group on Label & Recipient's Group and Name Before Administration. 5) Use Sterile Transfusion Set With Filter 6) Do Not Dispense Without Prescription. 7) Do Not Use if There ... Visible Evidence. 8.) Store Between 2° C to 6° C ...

Issue Label / CrossMatching Report

Patient : B/O. SRI VIDYA VANGALA
Patient's Blood Group :O Rh Positive
Hosp/Dr :Rainbow Childrens Hospital,Dr. VIJAYANAND J
ID No.: BAH-00652011 Wd-Bed No.:
...duct : LR-PRBC Pedia-
...d Group : O Rh Positive
...BAH26-00930
... Report:Compatible
... MONOJ
Issue Dt : 19/Apr/2026
Colln. Dt :16/Apr/2026
Exp. Dt :28/May/2026
Issued By : MONOJ

Hospital Blood Centre Rainbow Childrens Hospital
120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

Doc. No. : RCHBH/ FRM / CLINICAL / 014

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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CONSENT FOR SPECIAL SEDATION

Patient Name: B/o Sri Vidya Gender ☐ Male ☐ Female

UHID No: 652011 Department: NICU Date: 22/4/26

I Srividya S/D/W/O Shiv charan

Here by give consent for procedure for my patient : B/o Srividya

The doctors have explained to me in language known to me the details of sedation as follows:

- Type of Sedation : Fentanyl
- Possible complications from the procedure of sedation:
  chest wall rigidity

The doctors have explained to me about the benefits, risk, alternative of the procedure.

I have understood the matter mentioned above in language known to me and give consent for administering sedation for procedure.

Patient Attendant :

Signature :

Name : Srividya Vangala

Relationship with Patient: Mother

Date & Time : 22/4/26 10:15AM

Witness :

Signature :

Name : Lavanya

Date & Time : 22/4/26 10:15AM

Doctor (who is taking the consent) :

Signature :

Name : Dr. Mamatha

Date & Time : 22/4/26 @10:15

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ప్రత్యేక మత్తు కోసం సమ్మతి

రోగి పేరు : ..... వయస్సు ..... లింగం పు ☐ స్త్రీ ☐

యు.హెచ్.ఐ.డి. .....విభాగము .....

తేదీ .....

నేను ..... కుమారుడు / కుమార్తె / భార్య .....

..... అను విధానంకై పూర్తి అంగీకారం తెలుపుతున్నాను.

వైద్యులు నాకు తెలిసిన భాషలో మత్తుమందు వివరాలను ఈ క్రింది విధంగా వివరించారు:

- సెడేషన్ రకం .....
- మత్తు ప్రక్రియ నుండి తలెత్తు సమస్యలు:

.....

.....

ప్రక్రియ యొక్క ప్రయోజనాలు, ప్రమాదం, ప్రత్యామ్నాయం గురించి వైద్యులు నాకు వివరించారు.

నేను పైన పేర్కొన్న విషయాన్ని నాకు తెలిసిన భాషలో అర్థం చేసుకున్నాను మరియు మత్తుమందు ఇవ్వడానికి సమ్మతిని ఇచ్చాను.

సహాయకుడు(అటెండెంట్)

సంతకము .....

పేరు .....

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము .....

పేరు .....

సాక్షి

సంతకము .....

పేరు .....

తేదీ మరియు సమయము .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

Rainbow® Children's Hospital
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CONSENT FOR SPECIAL PROCEDURES

Patient Name : S/o Srividya Gender: ☐ Male ☐ Female

UHID No : 652011 Department : NICU Date : 22/4/26

I Srividya S / D / W / O Shiv charan

Here by give consent for procedure of : Dr. Mamatha

For my patient, Named : B/o Srividya

The doctors have clearly explained to me that the procedure has following possible complications:

bradycardia / desaturation

The doctor have explained to me about the alternatives, risks and benefits for this procedure that :

I have understood the matter mentioned above in language known to me and give consent for the procedure.

Name of the Doctor performing the procedure: Dr mamatha

Patient Attendant :

Signature :

Name : Srividya Vangala

Relationship with Patient: Mother

Date & Time : 22/4/26 10:15 AM

Witness :

Signature :

Name : Lavanya

Date & Time : 22/4/26 10:15 AM

Doctor (who is taking the consent) :

Signature :

Name : Dr. Mamatha

Date & Time : 22/4/26 10:15 AM

ప్రత్యేక విధానాలకు సమ్మతి

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రోగి పేరు ..... లింగం ☐ పురుషుడు ☐ స్త్రీ

యు.హెచ్.ఐ.డి ..... విభాగం ..... తేదీ .....

నేను ..... S/D/W/O .....

ప్రత్యేక విధానాలకు సమ్మతి ఇవ్వడం ద్వారా .....

నా రోగికి, పేరు : .....

ఈ ప్రక్రియ కోసం ప్రత్యామ్నాయాలు, నష్టాలు మరియు ప్రయోజనాలు గురించి డాక్టర్ నాకు తెలిసిన భాషలో వివరించా

.....

.....

.....

నాకు తెలిసిన భాషలో పైన పేర్కొన్న విషయాన్ని నేను అర్థం చేసుకున్నాను మరియు ప్రక్రియకు సమ్మతిని తెలియజేస్తున్నాను.

ప్రక్రియ చేస్తున్న వైద్యుని పేరు : .....

సహాయకుడు(అటెండెంట్)

సంతకము .....

పేరు .....

వైద్యుడు (ఎవరైతే సమ్మతి తీసుకుంటున్నారో)

సంతకము .....

పేరు .....

సాక్షి

సంతకము .....

పేరు .....

తేదీ మరియు సమయము .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 19/4/26 Time: 6:45am

Blood Group of the Patient: O+ve Blood Group on the Blood Bag: O+ve

Blood Bank Issue No: BA486-0093.0 Date of Collection: 16/4/26 Date of Expiry: 28/5/26

Date & Time of Starting Transfusion: 6:45am Planned duration of Transfusion: 4hrs

Check for Correct Unit: ☐ Correct Patient: ☐

Blood products cross checked by: Nurse 1: Dr. Sneha Nurse 2: Sis - Vidya

Before starting transfusion vitals: Temp: 98.6°F HR 145b/m RR: 38b/m BP: 79/39 (48) SpO2 97%

PLEASE MONITOR THE FOLLOWING:

Date	Time	HR	Temperature	Blood Pressure	SpO_2	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
19/4/26	15 Min	162	98.6°f	71/37(50)	93%	NA	NA	NA	NA
,,	15 Min	168	98.8°f	60/35(45)	92%	NA	NA	NA	NA
,,	30 Min	162	98.7°f	58/38(43)	94%	NA	NA	NA	NA
,,	30 Min	160	98.8°f	65/39(55)	92%	NA	NA	NA	NA
,,	30 Min	155	98.8°f	69/37(49)	96%	NA	NA	NA	NA
,,	1 Hr	156	98.8°f	63/31(41)	95%	NA	NA	NA	NA
,,	1 Hr	148	98.8°F	75/46(56)	97%	NA	NA	NA	NA

Comments: No any complication during transfusion

Name of the Incharge-Nurse: Athiramal pns Name of the Nurse: Diffi

Signature of the Incharge-Nurse: Athira Signature of the Nurse:

Date & Time: 19/04/26 10am. Date & Time: 19/4/26 @10am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 9 D (M)
Dr. VIJAYANAND JAMALPURI

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BLOOD PRODUCTS TRANSFUSION MONITORING FORM

Date: 7/5/26 Time: 2:04 AM

Blood Group of the Patient: O +ve Blood Group on the Blood Bag: O +ve

Blood Bank Issue No: ..... Date of Collection: 7/5/26 Date of Expiry: .....

Date & Time of Starting Transfusion: 7/5/26 @ 2:04 AM Planned duration of Transfusion: .....

Check for Correct Unit: ☑ Correct Patient: ☑

Blood products cross checked by: Nurse 1: Archa Nurse 2: Hajira

Before starting transfusion vitals: Temp: 36.6°C HR 146 RR: 43 BP: 64/37 (47) SpO2 96%

PLEASE MONITOR THE FOLLOWING:

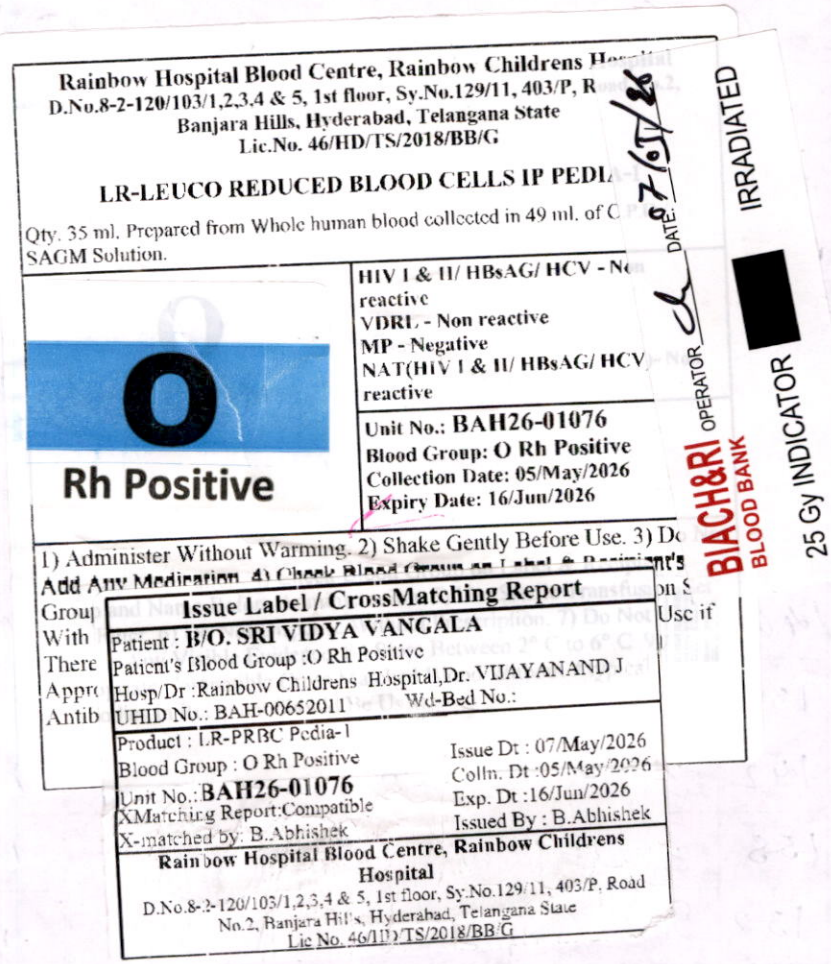
Date	Time	HR	Temperature	Blood Pressure	SpO_2	Any Rash	Any Rigors	Any Breathlessness	Any Other Problem
2:15am	15 Min	146	36.7°C	72/43 (56)	95%	NA	NA	NA	NA
2:30am	15 Min	139	36.5°C	63/45 (58)	96%	NA	NA	NA	NA
3:00am	30 Min	142	36.6°C	71/48 (59)	97%	NA	NA	NA	NA
3:30am	30 Min	158	36.5°C	64/36 (47)	99%	NA	NA	NA	NA
4:00am	30 Min	132	36.5°C	83/46 (62)	98%	NA	NA	NA	NA
5:00am	1 Hr	147	36.6°C	61/43 (49)	100%	NA	NA	NA	NA
6:00am	1 Hr	152	36.5°C	62/46 (55)	99%	NA	NA	NA	NA

Comments: No any complications during transfusion

Name of the Incharge-Nurse: ..... Name of the Nurse: Archa

Signature of the Incharge-Nurse: ..... Signature of the Nurse: .....

Date & Time: ..... Date & Time: 7/5/26



Rainbow Hospital Blood Centre, Rainbow Childrens Ho
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, R
Banjara Hills, Hyderabad, Telangana State
Lic.No. 46/HD/TS/2018/BB/G

LR-LEUCO REDUCED BLOOD CELLS IP PEDI

Qty. 35 ml. Prepared from Whole human blood collected in 49 ml. of C
SAGM Solution.

O

Rh Positive

HIV I & II/ HBsAG/ HCV - No
reactive
VDRL - Non reactive
MP - Negative
NAT(HIV I & II/ HBsAG/ HCV
reactive

Unit No.: BAH26-01076
Blood Group: O Rh Positive
Collection Date: 05/May/2026
Expiry Date: 16/Jun/2026

DATE: 07/05/26 OPERATOR

BIACH&RI BLOOD BANK

IRRADIATED

25 Gy INDICATOR

1) Administer Without Warming. 2) Shake Gently Before Use. 3) Do
Add Any Medication. 4) Check Blood Group on Label & Recipient's
Group
With
There
Appro
Antib
on S
Use if

Issue Label / CrossMatching Report

Patient : B/O. SRI VIDYA VANGALA
Patient's Blood Group :O Rh Positive
Hosp/Dr :Rainbow Childrens Hospital,Dr. VIJAYANAND J
UHID No.: BAH-00652011 Wd-Bed No.:

Product : LR-PRBC Pedia-1
Blood Group : O Rh Positive
Unit No.:BAH26-01076
XMatching Report:Compatible
X-matched by: B.Abhishek

Issue Dt : 07/May/2026
Colln. Dt :05/May/2026
Exp. Dt :16/Jun/2026
Issued By : B.Abhishek

Rainbow Hospital Blood Centre, Rainbow Childrens Hospital
D.No.8-2-120/103/1,2,3,4 & 5, 1st floor, Sy.No.129/11, 403/P, Road No.2, Banjara Hills, Hyderabad, Telangana State
Lic No. 46/HD/TS/2018/BB/G

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
Dr. VIJAYANAND JAMALPURI

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RESULT SHEET

(1)

Date	25/3/26	26/3	27/3/26	28/3/26	28/3/26	30/3/26
Time	11:59pm	18:28	6:50pm	5:32 Am	2pm	7am
Hb	16	15.5	10.9			13.7
PCV	49.1	48.5	35.1			42.4
RBC	4.17	4.11	2.90			4.04
WBC	3.23	8440	15,300			14.76
N/L	15.8/77.1	49/33	70.4/12.3			45/26
Platelets	185	1.67	1.39			136
CRP		57		27		7.0
ESR						
PCT						
RBS						
Na		132*		137		136
K		5.5		6.0		4.2
Cl		112		116		116
Ca/Mg		7.7				9.5/
Phosphate						
Urea		57				107
Creatinine		1.0				1.0
ALP						
GPT						
GOT						
Bill/Conj		5.6 <0.1 5.5		4.7 0.1 4.6		DSPT 10.9 0.1 10.8
Protein						
S.Albumin						
S.Globulin						
A/G Ratio						
Uric Acid						
S.Amylase						
Sr.Lipase						
Blood Lactate						
S.Cholesterol						
PT/INR	19/1.4		36.1/2.9		18/1.3	
APTT	60		62		43	
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 : .....

.....

.....

.....

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

Others (ECG, Contrast Studies etc.,) : .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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RESULT SHEET

Date	31/3/26	2/4/26	3/4/26	05/4/26	07/4/26	14/4/26
Time	6am	6:48am	10am	8:30pm	6am	7am
Hb			14.6			10.6
PCV			45.5			32.9
RBC			4.44			3.37
WBC			23.47			17.95
N/L			65/28			67.8/22.1
Platelets			333			619
CRP			5			
ESR						
PCT						
RBS						
Na	138	138	136	135		128
K		4.9	5.0	4.0		3.8
Cl		112	113	112		100
Ca/Mg			10.9			4.3
Phosphate						
Urea			80			
Creatinine			0.9		376	433
ALP						
SGPT						
SGOT						
T.Bill/Conj	5.4 / 0.1 / 5.3	6.8 / 0.1 / 6.7	8.1 / 0.1 / 8.0	8.8 / 0.1 / 8.7	4.5 / 0.1 / 4.4	7.7 / 0.1 / 7.6
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						
					7/04/26	
				T3 → 78.36		
				T4 → 6.06		
				TSH → 8.50		

Culture and Sensitivities : .....

.....

.....

.....

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

Others (ECG, Contrast Studies etc.,) : .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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RESULT SHEET

Date	15/4/26	17/4/26	18/4/26	23/4/26	30/4/26	6/5/26
Time	8pm			6:30am	5:30 am	5.49 pm
Hb	11.4		8.5	10.5	9.3	7.1
PCV	34.0		26.3	32.6	28.2	22.0
RBC	3.60		2.74	3.62	3.24	2.52
WBC	17.37		16.87	15.45	20.08	10.69
N/L	61.1/28.5		48.1/31.2	45.8/34.6	61/27.0	45.7/27.8
Platelets	692		5.53	584	192	189
CRP	8	5	8	5.0	5.9	5.0
ESR						
PCT						
RBS						
Na		739		132	135	137
K		4.0		5.1	3.8	3.3
Cl		108		102	114	112
Ca/Mg		9.7/1.8		9.9	9.5	8.4
Phosphate				5.0	6.0	4.1
Urea						
Creatinine						
ALP				324	359	361
SGPT						
SGOT						
T.Bill/Conj		7.4 / 0.1 / 7.3		6.4 / 0.1 / 6.3		
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	2/5					
Time						
CUE - Alb						
CUE - Sugar						
CUE - Ketones						
CUE - PUS Cells						
CUE - RBC Cells						
CUE						
Stool Pus Cell						
OVA / Cyst						
Occult Blood						
Free T4	0.797					
T3	79.59					
T4	6.32					
TSH	7.84					

Culture and Sensitivities : .....

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.....

.....

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

Others (ECG, Contrast Studies etc.,) : .....

BAH-00652011 IP5-0(171644
Baby Of SRI VIDYA VANGAL/
25-03-2026 0 Y 0 M 2 [(M)
Dr. VIJAYANAND JAMALPUR

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ACTIVITY RECORD FOR BILLING

Name :_____

UHID No. : _____ IP No : _____Consultant: _____ Dept : _____

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

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
30/8/26	NP,	26031852	
30/8/26	ABG RBS	26031851	
30/3/26	ABG, RBS		
31/3/26	SBR	26032290	
	ABG, RBS	26032289	
31/3/26	VBG, RBS		
1/4/26	VBG, RBS		
2/4/26	VBG, RBS	26033247	
2/4/26	NSG	26501643	
03/4/26	SBR, S/E	26034365	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
30/3/26	Inv. Monitore	25/3/26		9526582	
	Giraffe incubator	28/3/26		9532758	
	Ventilatore.	25/3/26		9526582	
	syr. pump ①	25/3/26		9526582	m
	syr. pump ②	26/3/26		9526599	
	syr. pump ③	26/3/26		9526586	
	DSPT	30/3/26 11am		9534282	
31	Inv. Monitor	25/3/26		9526582	
	Gi. Incubator.	28/3/26		9532758	
	Ventilator	25/3/26	31/3/26 @	9526582	
	Syringe pump ①				
	Syringe pump ②	26/3/26		9526599	
	Syringe pump ③				
	DSPT	30/3/26 @11am		9534282	
1/3	Inv. Monitor	25/3/26		9526582	
	Gi. Incubator	28/3/26		9532758	
	Ventilator	25/3/26	31/3/26 @10:30pm	9526582	
	Syringe. Pump ①				
	Syringe. Pump ②	26/3/26		9526599	
	Syringe. Pump ③				
	SSPT	31/3/26 @8am		9536061	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
31/3/26	PICC Line	1	9536066	
5/4/26	TPN	1		

ANY OTHER INFORMATION

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M6D (M)
Dr. VIJAYANAND JAMALPURI

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ACTIVITY RECORD FOR BILLING

Name :_____

UHID No. : _____ IP No : _____Consultant: _____ Dept : _____

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

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
1/4/26	RBS / ABG	26032681	
	Chest-x-ray	265 - 016667	
1/4/26	VBG, RBS	26032895	
2/4/26	SBP. S/E.		
2/4/26	VBG. RBS.		
03/04/26	VBG. RBS.	26033713.	
03/04	NP1	BA26033459	
	RBS.	BA2603371	
04/04	RBS. VBG.	26033825	
05/04	RBS. VBG.	26034266	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
1/4/26	C-PAP	31/3/26 @10:30pm		9536450	
	Oxygen			9536588	
	SSPT	31/3/26 1pm		9536061	
2/4/26	C-pump	31/3/26 @ 10:30pm		9536450	
	oxygen			9536588	
	SSPT	31/3/26. 1pm	2/4/26 5:00pm	9536061	
3/4/26	C-pump.	31/3/26.		9536450	
	oxygen.	31/3/26		9536588	
3/04	SSPT	3/04 @ 9am		9541136	
04/04	C-pump.	31/3/26		9536450	
	oxygen.	31/3/26		9536588	
	SSPT	30/04 9am		9541136	
05/04	C. Ventilator,	29/3/26			
	Syringe	3/04/26			
	oxygen	1/4/26			
	C-pump.	1/4/26			

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
8	TPN	1	9537686	
3/04	TPN →	0	541134	

ANY OTHER INFORMATION

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

5

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ACTIVITY RECORD FOR BILLING

Name : B/o Saf vidya vangala

UHID No. : 00852011 IP No : 00171644 Consultant: Dr. V.J Dept : NICU

Date of Admission: 25/3/26 Time : - Date of Discharge : _____ Time: _____

Room / Bed No : _____ Ward : _____ Suggested Billable bed type : _____

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1				
2				
3				
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INVESTIGATIONS

Date	Investigations	Order No.	Signature
18/4/26	CBP, CRP	26039440	Dippi
"	VBG, RBS	26039125	Dippi
"	Blood c/s	26039471	Vidya
19/4/26	VBG, RBS	26039558	Vidya
"	VBG, RBS	26039760	Dippi
20/4/26	VBG, RBS	26039873	Vidya
"	CXR	265-020068	Vidya
"	VBG, RBS	26040190	Dippi
21/4/26	VBG, RBS	26040329	Vidya
21/4/26	020295 CXR	020295	Vidya
21/4/26	Blood cls	26040373	Hemalatha
22/4/26	VBG, RBS	26040716	Lavya
22/4/26	X-ray	265020482	Lavya
22/4/26	VBG, RBS	26040754	Lavya
22/4/26	VBG	26041065	Hema

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
19/4/26	Inv. monitor	25/3/26 @ 11:37 pm		9526582	
"	ventilator	16/4/26 @8pm		9563482	
"	Gr. Incubator	28/3/26 @ 10pm		9532758	vidya
"	Syr pump	16/4/26 @10pm		9563482	
20/4/26	Inv monitor	25/3/26 11:37pm		9526582	
"	Ventilator	16/4/26 @8pm	20/4/26 @5pm	9563482	
"	Gr. Incubator	28/3/26 @ 10pm	20/4/26	9532758	Vidya
"	Syp pump	16/4/26 @ 10pm		9563482	
21/4/26	Inv monitor	25/3/26 11:37pm		9526582	
"	Gr. Incubator	28/3/26 @ 10pm		9532758	Vidya
"	Syp pump	16/4/26 @10pm		9563482	
"	C-PAP	20/4/26 @ 5pm		9570238	
"	oxygen	20/4/26 @ 5pm		9570238	vidya
21/4/26	SSPT	21/4/26 11AM		9571122	[illegible]
22/4/26	Inv. monitor	25/3/26 11:37pm		9526582	
	Gr. Incubator	28/3/26 @10pm		9532758	
	syr. pump	16/4/26 @10pm		9563482	Lavanya
	C-PAP	20/4/26 @5pm	22/4/26 @1am	9570238	
	SSPT	21/4/26 @11am		9570238	
	ventilator	22/4/26 @1am		9571903	Lavanya

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
19/4/26	Blood Transfusion	(1)	9567918	
"	Nebulization	(1)	9567474	
20/4/26	Nebulization	(1)	9569387	
19/4/26	Nebulization	(1)	9569784	
20/4/26	Nebulization	(1)	9569784	
21/4/26	Nebulization	(2)	9571121	
21/4/26	Nebulization	(2)	9571870	
22/4/26	Nebulization	(2)	9572955	Hemalatha

ANY OTHER INFORMATION

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Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

(A)

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BirthRight BY RAINBOW HOSPITALS
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ACTIVITY RECORD FOR BILLING

Name : Sri vidya vangala

UHID No. : 00652011 IP No : 00171644 Consultant: Dr. V.J Dept : NICU

Date of Admission: 25/3/24 Time : - Date of Discharge : - Time: -

Room / Bed No : - Ward : - Suggested Billable bed type : -

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	Dr. kvprasad	16/04/2026	9562163.	poojith. C.
2				
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
12/4/26	NBG, RNS	26036767	
13/4/26	RBS	26037046	Archa
14/4/26	RBS, VBG	26037438	Archa
14/4/26	NP2, SBR		Archa
15/4/26	RBS	26037842	
15/4/26	VBG (2), CBP, CRP	2603	
15/4/26	Blood culture	2603	
15/4/26	CBP, CRP	26038854	
16/4/26	RBS, GAS	26038445	
16/4/26	x-ray	265-019423	
16/4/26	Neurosonogram	265-019486	
16/4/26	VBG		
16/4/26	chest x-ray	019562	
11	VBG	26038662	vidya
17/4/26	VBG, RBS	26038662	
17/4/26	ERP, SE, Calcium, magnesium	26038663	
11	USG	R265-019649	
11	SBR	26038766	
11	CXR	R265-019569	
11	VBG, RBS	26038983	
11	ET Culture	26038982	VR
11	Urine, CMV, PCR	26039023	VR
18/4/26	VBG, RBS	26039125	VR

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
12/4/26	Inv- monitor.			9526582	
	CPAP	01-04-26		9536456	
	O_2	01-04-26		9536588	
	G. incubator	29-3-26		9532758	
13/4/26	Inv Monitor			9526582	
	CPAP	1/4/26		9536456	
	O_2	1/4/26		9536588	
	G. incubator	29/3/26		9532758	
16/4/26	Inv monitor				
	Cpap.	1/4/26		9526582	
	O_2			9532752	
	Incubator	29/3/26			
17/4/26	Inv. monitor	25/3/26		9526582	
"	ventilator	16/4/26 @ 8pm		9563482	
"	Incubator	28/3/26 @ 10pm		9532758	vidya
"	Syr. pump	16/4/26 @ 8pm		9563482	
"	Syr. pump	16/4/26 10pm		9563482	
17/4/26	SS.PT	16/4/26 @ 11pm	17/4/26 @ 11pm	9568836	
18/4/26	Inv. monitor	25/3/26		9526582	
"	ventilator	16/4/26		9563482	
"	Incubator	28/3/26		9532758	vidya
"	Syr. pump — (1)	16/4/26		9563482	
"	Syr. pump — (2)	16/4/26		9563482	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
16/4/26	ROP Screening	(1)	9562162.	POOJA.K.
16/4/26	ET Intubation	(1)	9563317	NP
"	Conscious. sedation	(1)	9563317	NP

ANY OTHER INFORMATION

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Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 10 D (M)
Dr. VIJAYANAND JAMALPURI

3

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ACTIVITY RECORD FOR BILLING

Name :_____

UHID No. : _____ IP No : _____Consultant: _____ Dept : _____

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

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
06/4/26	VBG, RBS	26034504	
07/4/26	VBG, RBS	26034960	
07/4/26	Ca+, SBR, ALP, PSA	26034911	
07/4/26	TPT		
09/4/26	VBG, RBS	26035682	
10/4/26	RBS, VBG	26036041	
11/4/26	4RBS	26036384	
12/4/26	VBG, RM	26036	
13/4/26	6RBS	26037046	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
06/4	INV MONITOR			9526582	
	SYR PUMP			9526582	
	SYR PUMP			9526599	
	SYR PUMP			9526586	
	G. INCUBATOR			9534281	
	CPAP			9536450	
	OXYGEN			9536588	
06/4	SSPT	06/4/20 10pm	07/4/20 12AM	9542735	
06/4	INV MONITOR			9526582	
	SYR PUMP			9526582	
	SYR PUMP			9526596	
	SYR PUMP			9526576	
	G. INCUBATOR			9534281	
	CPAP			9536450	
	OXYGEN			9536588	
	SSPT				
11/4/20	INV. MONITOR.			9526582	
	G. INCUBATOR			9526582	
	CPAP			9536450	
	O2				

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature

ANY OTHER INFORMATION

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Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 2 D (M)
Dr. VIJAYANAND JAMALPURI

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ACTIVITY RECORD FOR BILLING

Name : (1) _____

UHID No. : _____ IP No : _____ Consultant: _____ Dept : _____

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

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	Lvpracad	30/4/2026	09585421	pooja.K.
2				
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
28/4	RBS, VBG	260433148	
29/4	RBS	260433341	
30/4	NP_2, Free T4, TFT	26043158	
30/4	RBS	26043757	
9/5/26	RBS	26044096	
2/5/26	RBS	26044607	
3/5/26	RBS	26044851	
4/5/26	RBS	26045166	
	VBG		
5/5/20	RBS		
6/5/26	RBS		
9/5/26	VBG, RBS	26047079	
10/5/26	VBG, RBS	26047454	
11/5/26	VBG RBS		
12/5/26	VBG RBS		

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
25/4	Inv. monitor	25/3/26		9526582	
	oxygen	25/4/26		9578169	
	CPAP	25/4/26		9578169	Agnes
	Syringe pump	26/4/26		9579442	
	G. Incubator	29/3/26		9532758	
29/4	Inv. monitor	25/3/26		9526582	
	CPAP	25/4/26		9578169	
	oxygen	25/4/26		9578169	Agnes
	Syringe pump	26/4/26	29/4/26 8pm	9579442	
	G. Incubator	29/3/26		9532758	
30/4	Inv. monitor	25/3/26		9526582	
	CPAP	25/4/26		9578169	
	oxygen	25/4/26		9578169	Agnes
	G. Incubator	29/3/26	30/4/26	9532758	
1/5	Inv. monitor	25/3/26		9526582	
	CPAP	25/4/26		9578169	Agnes
	oxygen.	25/4/26		9578169	
2/5	Inv. monitor	25/3/26		9526582	
	CPAP	25/4/26		9578169	
	oxygen.	25/4/26		9578169	
4/5	Inv. Monitor	25/4/26		9526583	
	CPAP	25/4/26		9578169	
	Oxygen	25/4/26		9578168	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
27/4/26	Nebulisation (10pm)	(2)	9581609	Agnes
28/4/26	Nebulisation (6Pm)	(1)	9581609	Agnes
28/4/26				
28/4/26	Nebulisation (10pm)	(2)	9584778	Agnes
29/4/26	Nebulisation (6Pm)	(1)	9584778	Agnes
29/4/26	Nebulisation 2pm	(2)	9584778	Agnes
29/4/26	Nebulisation (10pm)	(2)	9584778	Agnes.
30/4/26	Nebulisation (6Pm)	(1)	9584778	Agnes
30/4/26	ROP screening	(1)	9585420	POOJA
30/4/26	Nebulisation (10pm)	(1)	9586354	Agnes

ANY OTHER INFORMATION

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Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

6

Rainbow® Children's Hospital
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ACTIVITY RECORD FOR BILLING

Name : B/O Sri Vidya.

UHID No. : _____ IP No : _____ Consultant: _____ Dept : _____

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

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
23/4/26	Np_2, CRP, SBR	26041214	J Devika
	VBG, RBS	26041213	
23/4/26	VBG	26041519	Hemalatha
24/4	VBG, RBS	26041639	Devika
24/4	VBG	26041909	Hema
25/4/26	VBG, RBS	26042027	Priyanka
25/4/26	X Ray	265-021047	Priya
25/4/26	VBG	26042318	Hemalatha
26/4/26	VBG, RBS	260 42397	Priyanka
27/4/26	RBS	26042559	Priyanka

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
23/4/26	Inv. Monitor	25/3/26		952658	
	Giraffe - Incubator	29/3/26		9532758	
	Syringpump - (1)	17/4/26		9563482	Devika
	Ventilator	22/4/26		9571902	
24/4/	Inv. Monitor	25/3/26		952658 2	
	Giraffe - Incubator	29/3/26		9532758	
	Syringpump - (1)	17/4/26		9563482	Devika
	Ventilator	22/4/26		9571902	
25/4/26	Invasive monitor	25/3/26		9526582	
	Giraffee Incubator	29/3/26		9532758	
	Syringe Pump	17/4/26	24/4/26	9563482	Priyanka
	Ventillator	22/4/26	25/4/26 @10.30Am	9571902	
25/4/26	CPAP	25/4/26 @10.30Am		9578170	(4)
	oxygen	11		11	
26/4/26	Invasive monitor	25/3/26		9526582	
	Giraffee Incubator	29/3/26		9532758	
	CPAP	25/4/26		9568170	Priyanka
	oxygen	10:30Am			
	syr. pump			9579442	Lavanya
27/4/26	Invasive monitor	25/3/26		9526582	
	Giraffee Incubator	29/3/26		9532758	
	CPAP	25/4/26		5960170	Priyan
	Oxygen	10:30Am			
	Syringe pump	26/4/26		9579442	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
24/4/26	Nebulisa	3	9575417	Devika
23/4	Nebulization	2	9576021	Hemalatha
24/4	Nebulization	2	9576022	Hemalatha
25/4/26	Nebulization	3	9578467	Priyanka
25/4/26	Nebulization	2	9578166	Hemalatha
26/4/26	Nebulization	5	9578840	Priyanka
26/4/26	Nebulization	3	9579585	Lavanya
27/4/26	Nebulization	3	9579882	Priyanka

ANY OTHER INFORMATION

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
Dr. VIJAYANAND JAMALPURI

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ACTIVITY RECORD FOR BILLING

Name : Blo Sai Vidya Vangala (1)

UHID No. : 622011 IP No : 00171644 Consultant: Dr. V.J Dept : NICU-1

Date of Admission: 25/3/26 Time : 1 Date of Discharge : - Time: -

Room / Bed No : _____ Ward : - Suggested Billable bed type : -

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
25/3/26	Chest x-ray	265-015595	
25/3/26	VBG, RBS	26030288	
25/3/26	PT/APTT, Blood Grouping.	26030289	
25/3/26	Blood C/S, CBP.	26030289	
26/3/26	VBG, RBS	26030357	
26/3/26	Chest x-ray	265-015730	
26/3/26	ABG, RBS	26030614	
26/3/26	NPI	26030615.	
26/3/26	ABG. RBS	26030657	
27/3/26	PT/APTT	26030740	
27/3/26	ABG. RBS	26030739	
27/3/26	CBP	26030754	
27/2/26	VBG, GRBS	26030903	
	RBS		
28/3/26	S/E, SBR; CRP	26031158	
28/3/26	ABG, RBS	26031157	
28/3/26	PTINR	26031344	
28/3/26	ABG, RBS	26031345	
29/3	VBG, RBS	26031626	
29/3	VBG, RBS.	26031626	
29/3	ABG, RBS		
30/3	VBG, RBS	26032180	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
25/3/26	Inv. Monitore				
25/3/26	Ventilatore.	25/3/26 @ 11:37pm		9526582	m
25/3/26	syr. pump ①				
26/3/26	Inv. Monitore				
26/3/26	Ventilatore	25/3/26 @11:37pm		9526582	m
26/3/26	syr. pump ①				
26/3/26	syr. pump ②	26/3/26 @ 12pm		9526599	vidya
26/3/26	syr. pump ③			9526586	
27/3/26	Inv. Monitore.				
27/3/26	Ventilatore.	25/3/26 @11:37pm		9526582	m
27/3/26	syr. Pump ①				
27/3/26	syr. Pump ②	26/3/26 @ 12pm		9526599	m
27/3/26	syr. pump ③			9526586	
27/3/26	BSPT	26/3/26 @ 7pm	27/3/26 @ 7pm	9527826	m
28/3/26	Inv. moniter	25/3/26 11:37pm		9526582	
	ventilator				
	Syringe pump ①	26/3 12pm		9526599	
	" ②			9526586	
	" ③				
29/3	Inv. moniter	25/3/26 11:37pm		9526582	
	ventilator				
	Syringe pump ①	26/3 12pm		9526599	
	②				

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
26/3/26	Conscious Sedation	(1)	9526604	
26/3/26	E.T Intubation	(1)	9526604	
26/3/26	UAC	(1)	9526604	(M) 2
26/3/26	UVC.	(1)	9526604	
26/3/26	TPN	(1)	9529106	
27/3/26	Blood Transfusion	(1)	9529107	VP
30/3/26	TPN	(1)	9534240	2.

ANY OTHER INFORMATION

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Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
Dr. VIJAYANAND JAMALPURI

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I.V. FLUID CHART

(1)

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.
28/3/26	7pm	Inj Hep N/S 1.5ml + 48.5ml 1/2 NS	UVC	0.2ml			29/3		
28/3/26	7pm	Inj Hep - N/S 1.5ml + 48.5 ml 1/2 NS	UAC	0.2ml			29/3		
28/3/26	7pm	TV - 20ml/kg 15% Iso-P	UVC	0.8ml			29/3		
28/3/26	7pm	~~TV - 130 ml/Kg~~ TV - 110 ml/Kg 10% TPN	UVC	4.2ml			29/3		
28/3/26	7pm	Inj FENTANYL 2ml + 8ml N/S	UVC	0.2ml			29/3		
29/3	7pm	Inj Hep - NS 1.5ml + 48.5 ml 1/2 NS	UAC	0.2ml			30/3		
29/3	7pm	Inj Hep - NS 1.5ml + 48.5 ml 1/2 NS	UVC	0.2ml			30/3		
29/3	7pm	TV - 140 cc/kg/D 10% TPN @ 120cc/kg/day	UVC	1.5ml			30/3		
29/3	7pm	TV - 140 cc/kg/day 15% Iso-P @ 20cc/kg/day	UVC	0.8ml			30/3		
29/3	7pm	Inj Fentanyl 2ml + 8ml N/S	UVC	0.3ml			30/3		

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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Your Right to a Safe Delivery

I.V. FLUID CHART

2

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.
30/3	5pm	INJ HEP NS 1.5ml 48.5 ml 1/2 NS	UAC		[signature]	[signature]	[signature]		[signature]
30/3	5pm	INJ HEP NS 1.5ml 48.5ml 1/2 NS	UVC		[signature]	[signature]	[signature]		[signature]
30/3	5pm	15% ISO-P @ 20ml/kg	UVC		[signature]	[signature]	[signature]		[signature]
30/3	5pm	TV = 160ml/kg/day 10% TPN	UVC		[signature]	[signature]	[signature]		[signature]
30/3	5pm	INJ FENTANYL 2ml + 8ml NS	UVC		[signature]	[signature]	[signature]		[signature]
31/3		~~Inj Hep - N/S 48.5ml + 1/2~~							[signature]
31/3		Inj Hep - NS 1.5ml + 48.5ml 1/2 NS	UAC			[signature]	1/4	[signature]	[signature]
31/3		Inj Hep - NS 1.5ml + 48.5ml 1/2	Picc			[signature]	1/4	[signature]	[signature]
31/3		TV - 160cc/kg/d 140cc/kg/day TPN 20cc/kg 10% ISO					01/4	[signature]	[signature]
01/4/26		10% TPN TV - 170cc/kg/day 30cc/kg/day 15% ISO-P 140cc/kg/day 10% TPN + feeds	UVC		[signature]		[signature]	[signature]	[signature]

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M6D (M)
Dr. VIJAYANAND JAMALPURI

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

I.V. FLUID CHART

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.
1/4/26		Inj. HEP-NS 1.5ml + 48.5ml ½ NS	UAC	0.2ml					
1/4/26		Inj. HEP-NS 1.5ml + 48.5ml ½ NS	PICC	0.2ml					
~~1/4/26~~		~~Inj. Fentanyl 2ml + 8ml NS~~	UVC	~~0.2ml~~					
2/4/26		Inj Hep NS 1.5ml + 48.5ml ½ NS	UAC	0.2ml					
2/4/26		Inj Hep NS 1.5ml + 48.5ml ½ NS	PICC	0.2ml					
~~2/4/26~~		~~Inj FENTANYL 2ml + 8ml NS~~	UVC	0.2ml					
2/4/26		10% TPN TV = 170ml/kg/d	UVC						
2/4/26		Inj Hep-NS 1.5ml + 48.5ml 1/2 NS	UAC						
3/4/26		Inj Hep-NS 1.5ml + 48.5ml 1/2 NS	Picc						
~~3/4/26~~ 3/4/26		~~TV - 170 cc/kg~~ TV - 170 cc/kg/day 10% TPN	PICC						

Docu. No. : RCHBH / FRM / CLINICAL / 182

Rate adjust & feeds.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

(1)

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

I.V. FLUID CHART

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.
4/4/26	8am	Inj° Hep - NS 1.5 ml + 48.5 ml	Picc	0.2ml		Dippi	5/4		Vidya
4/4/26	8am	Inj° Hep - NS 1.5ml + 48.5ml	UAC	0.2ml		Dippi	5/4		Vidya
4/4/26	8am	TV - 180 cc/kg/day 10% TPN	Picc	3ml		Dippi	5/4		Vidya
5/4/26	8am	Inj Hep - NS 1.5ml + 48.5 ml	Picc	0.2ml		Dippi	7/4		Vidya
5/4/26	8am	Inj Hep - NS 1.5ml + 48.5	UAC	0.2ml		Dippi	7/4		Vidya
5/4/26	8am	TV - 180 cc/kg/day 10% TPN Rate adjust ē feeds	Picc	3.5ml			7/4		Vidya
6/4/26	8am	TV = 180ml/kg/d 10% TPN.	Picc	0.2ml	Sneha	Dippi	7/4		Vidya
6/4/26	8am	Inj. Hep - NS 1.5ml + 48.5ml ½ NS	Picc	0.2ml	Sneha	Dippi	7/4		Vidya
6/4/26	8am	Inj. Hep NS 1.5ml + 48.5ml ½ NS	UAC	0.2ml	Sneha		7/4		Vidya
7/4/26	8am	Inj. Hep NS 1.5ml + 48.5ml ½ NS	Picc	0.2ml/h	Sneha	Dippi	7/4/26	Sneha	Vidya

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

(2)

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

I.V. FLUID CHART

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.
16/4/26	8:48 pm	TV – 160 cc/kg/d 10% ISO-P	I.V	2.4 ml/hr			17/4/26	Sneh	vidya
16/4/26	10pm	Inj Fentanyl 2ml + 8ml N/S	I.V	0.2 ml		vidya	17/4/26	Sneh	vidya
17/4/26	9pm	TV = 150cc/kg/d. 10% ISO-P	IV	2.4	Sneh	vidya	18/4/26	Sneh	
17/4/26	9pm	Inj. fentanyl. 2ml + 8ml NS	IV	0.2 ml	Sneh	vidya	18/4/26	Sneh	vidya
18/4/26	10pm	TV = 150ml/kg/d 10% ISO-P	IV	5.3ml	Sneh		19/4/26	Sneh	
19/4/26	8PM	TV = 150ml/kg/d 10% ISO-P	IV	4ml	Sneh	Hema	20/4/26	Sneh	Hema
20/4/26	8PM	TV = 150ml/kg/day 10% ISO-P	IV	3ml	Sneh	Hema	21/4/26	Sneh	Hema Devika
21/4/26	1PM	TV = 150ml/kg/day 10% ISO-P	IV	1.2ml	Sneh	Hema	22/4		Hema Devika
21/4/26	10PM	Inj FENTANYL 2ml + 8ml NS	IV	0.2		Hema	22/4		Hema Devika
22/4/26	1PM	Inj - FENTANYL 2ml + 8ml NS	IV	0.2ml	Sneh	Hema Devika	22/4		Devika

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
Dr. VIJAYANAND JAMALPURI

24/5/26 (1)

Doc. No. : RCHBH / FRM / CLINICAL / 124

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6	8
Doctor/Nurse/Family Concern?	am	am	PM										
Temperature (F)	36.5°C	36.5°C	36.5°C	36.5°C	36.4°C	36.4°C	36.5°C	36.4°C	36.4°C	36.5°C	36.4°C	36.4°C	
Heart Rate (bpm) and Blood Pressure (mmHg) *	168 (46) 34	162 (49) 41	158 (46) 39	155 (CW) 32	160 (CW) 31	171 (CW) 41	153 (58) 34	159 (43) 29	153 (37) 29	149 (43) 24	162 (46) 36	157 (48) 44	
Note: BP does not score in early warning scoring													
Heart Rate (Number)	152	138	162	162	162	153	142	166	156	159	174	134	
Resp. Rate (bpm) (Over 1 Minute) *													
Resp Rate (Number)	42	45	52	48	43	46	42	[illegible]	49	38	44	48	
Resp Distress: Mod/ Severe / None / Mild													
Receiving O_2(l/min) O_2Saturations (%)	?	95%	88%	94	96	97		97%	99%	99%	100%	98%	
Conscious Level: Normal / Altered													
GCS *	C	C	C	C	C	C		C	C	C	C	C	
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1		1	1	1	1	1	
Pain Score	0	0	0	0	0	0		0	0	0	0	0	
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]		[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
	Score 2 : Shift in charge nurse to be informed and continue hourly observations
	Score 3 : Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
	Score 4 : Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
	Score 5 & 6 : Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			**Record Time of Review and Plan**		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 29 D (M)
Dr. VIJAYANAND JAMALPURI

25/5/26

Docu.No. : RCHBH/ FRM / CLINICAL / 127

TEENAGE (12 + years)
Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date : ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor / Nurse / Family Concern?	AM	AM	PM	PM	PM	PM	PM	PM	AM	AM	AM	AM
Temperature (F)	36.5°C	36.4°C	36.4°C	36.6°C	36.1°C	36.5°C	36.6°C	36.6°C	36.6°C	36.6°C	36.6°C	36.6°C
Heart Rate (bpm)	62	57	60	69	60	61	82	73	74	76	89	68
and Blood Pressure (mmHg) *	(41) 30	(39) 29	(55) 53	(39) 54	(47) 40	(43) 33	33 53	37 57	37 50	60 53	71 63	41 30
Heart Rate (Number)	134	143	155	147	128	139	165	118	159	123	119	135
Resp. Rate (bpm) (Over 1 Minute)	42	35	43	45	43	35	36	37	44	35	45	40
Resp Rate (Number)												
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	91%	95%	97%	95%	100%	95%	99%	98%	97%	98%	99%	100%
Conscious Level: Normal / Altered												
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	1
Pain Score	1	1	1	1	1	1	1	1	1	1	1	1
Observer's Initials												

ACTIONS

NB: Scores 3 should be recorded overleaf

Score 1	: Continue normal observation by staff nurse
Score 2	: Shift in charge nurse to be informed and continue hourly observations
Score 3	: Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
Score 4	: Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
Score 5 & 6	: Shift in charge AND PICU fellow or PICU consultant to be informed.

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-0065201 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

26/5/26
Doc. No. : RCH / FRM / CLINICAL / 124

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	am	am	pm	pm	pm	pm						
Temperature (F)	36.6°C	36.6°C	36.6°C	36.5°C	36.4°C	36.6°C	36.5°C	36.5°C	36.7°C	36.5°C	36.6°C	37.7°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	57 / 40	51 / 42	77 / 63	72 / 65	79 / 51	81 / 42	63 / 42	66 / 48	61 / 41	54 / 44	56 / 38	67 / 54
Heart Rate (Number)	159	134	155	135	146	166	150	142	156	134	155	142
Resp. Rate (bpm) (1 Minute) *	41	46	52	41	46	52	31	46	39	40	50	45
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2 (l/min) O_2 Saturations (%)	95%	97%	95%	97%	96%	95%				93%		90%
Conscious Level: Normal / Altered	N	N	N	N	N	N	90%	99%		N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0		
Observer's Initials												

ACTIONS

NB: Scores 3 should be recorded overleaf

Score 1	:	Continue normal observation by staff nurse
Score 2	:	Shift in charge nurse to be informed and continue hourly observations
Score 3	:	Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
Score 4	:	Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
Score 5 & 6	:	Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
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- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
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BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

27/5/26

Doc. No. : RCHBH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	am	am	pm	pm	pm	pm	PM	PM	AM	AM	AM	AM
Temperature (F)	36.5°C	36.4°C	36.5°C	36.4°C	36.5°C	36.7°C	36.6°C	36.6°C	36.6°C	36.7°C	36.6°C	36.7°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	57 / 35 / 48	62 / 39 / 47	65 / 17 / -C	69 / 45 / 53	59 / 44 / 48	54 / 30 / 38	60 / 30 / 46	62 / 31 / 41	62 / 53 / 41	66 / 30 / 43	65 / 35 / 46	57 / 39 / 45
Note: BP does not score in early warning scoring												
Heart Rate (Number)	140	147	167	186	153	143	154	145	148	151	157	133
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	50	45	47	38	45	38	49	44	46	53	41	42
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	97%	98%	93%	90%	95%	92%	99	98	97	99	99	98
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	N	N	N	N	N	N	N	N	N	N	N	N
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	RN	RN	RN	RN	RN	RN

ACTIONS NB: Scores 3 should be recorded overleaf	
Score 1	: Continue normal observation by staff nurse
Score 2	: Shift in charge nurse to be informed and continue hourly observations
Score 3	: Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
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Patient Sticker

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Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

28/5/26

Doc. No. : RCH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	Am	Am	Pm	Pm	Pm	Pm	Pm					
Temperature (F)	36.5°C	36.4°C	36.5°C	36.4°C	36.5°C	36.4°C	36.5°C	36.4°C	36.5°C	36.5°C	36.4°C	36.6°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	51 (29) 25	65 (49) 40	53 (39) 32	55 (28) 27	63 (36) 26	59 (31) 28	62 (41) 41	64 (38) 26	64 (45) 34	64 (42) 30	64 (50) 56	90 (60) 74
Note: BP does not score in early warning scoring												
Heart Rate (Number)	141	107	140	135	147	160	139	153	155	188	150	168
Resp. Rate (bpm) ver 1 Minute) *												
Resp Rate (Number)	39	33	43	37	56	40	44	61	53	38	43	40
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2 (l/min) O_2 Saturations (%)	94%	96%	94%	98%	98%	98%	99	98	96%	98%	91%	96%
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials												

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
	Score 2 : Shift in charge nurse to be informed and continue hourly observations
	Score 3 : Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
	Score 4 : Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
	Score 5 & 6 : Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00652011
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 2 D
Dr. VIJAYANAND JAMALPURI (M)
IP5-00171644

Doc. No.: BCH/EFM/CLINICAL/124 29/5/26

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

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

BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6	
							pm	pm	Am	Am	Am	Am	
Doctor/Nurse/Family Concern?													
Temperature (F)	36.4°C	36.5°C	36.4°C	36.5°C	36.5°C	36.4°C	36.5°C	36.4°C	36.5°C	36.4°C	36.5°C		
Heart Rate (bpm) and Blood Pressure (mmHg) *	68 (48) 37	64 (51) 45	(44)	5		64 (44) 33	79 (45) 30	73 (44) 33	60 (50) 32	63 (50) 41	57 (44) 37		
Note: BP does not score in early warning scoring													
Heart Rate (Number)	143	149	157	145	158	154	146	146	147	159	157		
Resp. Rate (bpm) (Over 1 Minute) *													
Resp Rate (Number)	51	48	35	46	37	50	42	43	36	44	37		
Resp Distress: Mod/ Severe / None / Mild													
Receiving O_2 (l/min) O_2 Saturations (%)	97%	95%	90%	96%	98%	98%	95%	97%	96%	95%	98%		
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N		
GCS *													
TOTAL SCORE													
Number of shaded boxes	0	0	0	1	0	0	0	0	0	0	0		
Pain Score	0	0	0	0	0	0	0	0	0	0	0		
Observer's Initials													

ACTIONS

3: Scores 3 should be recorded overleaf

Score 1	: Continue normal observation by staff nurse
Score 2	: Shift in charge nurse to be informed and continue hourly observations
Score 3	: Shift in charge AND ER doctor/Floor Registrar to see and half hourly to hourly Observation to continue.
Score 4	: Shift in charge AND treating consultant(till 8 PM) or On call night duty consultant to see
Score 5 & 6	: Shift incharge and PICU /NICU fellow or PICU/NICU consultant to be informed

* NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min, then irrespective of rest of the score, the Nurse MUST inform the PICU team.

Patient Sticker

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

- If at any time additional help is required, call help – regardless of the Early Warning Score!
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The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. *given O2/ analgesia, stopped the infusion), OR* I am not sure what the problem is but child (X) is deteriorating, OR *I don't know what's wrong but I am really worried.*
R	***RECOMMENDATION :*** *I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)*

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 2 D (M)
Dr. VIJAYANAND JAMALPURI

30/5/26

. No. : RCH / FRM / CLINICAL / 124

INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS — Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	Am	Am	Pm	Pm	Pm	Pm	pm	pm	Am	Am	Am	Am
Temperature (F)	*36.6°C	*36.6°C	*36.6°C	*36.6°C	*36.6°C	*36.6°C	*36.5°C	*36.6°C	*36.5°C	*36.6°C	*36.7°C	*36.6°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	23 (49) 33	67 (47) 38	( )	68 (30) 27	69 (41) 28	64 (48) 41	77 (68) 54	74 (52) 40	75 (54) 52	76 (45) 33	72 (48) 35	72 (62) 57
Heart Rate (Number)	148	165	161	158	162	151	150	154	149	152	160	156
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	47	33	40	37	49	35	68	48	41	46	42	42
Resp Distress — Mod/ Severe / None / Mild												
Receiving O_2 (l/min) O_2 Saturations (%)	95%	92%	93%	93%	93%	98%	95%	93%	93%	94%	94%	93%
Conscious Level — Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Temperature (F): 104, 103, 102, 101, 100, 99, 98, 97, 96, 95, 94

Heart Rate (bpm) and Blood Pressure (mmHg) *: 190, 180, 170, 160, 150, 140, 130, 120, 110, 100, 90, 80, 70, 60, 50

Note: BP does not score in early warning scoring

Resp. Rate (bpm) (Over 1 Minute) *: 70, 60, 50, 40, 30, 20, 10

ACTIONS	
Score 1	: Continue normal observation by staff nurse
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NB: Scores 3 should be recorded overleaf

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Patient Sticker

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

BirthRight BY RAINBOW HOSPITALS
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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
Dr. VIJAYANAND JAMALPURI

24/5/26 ①

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

FLUID CHART

TV - 770 ml/kg/day
TF - 18 ml
Bw. 1.4 kg

Sheet No. : .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Intake: Route: Mouth	Intake: Route: I.V	Intake: Route: N.G	Output: NG	Output: Diarrhoea	Output: ~~Vomit~~	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am											
	09:00 am	EBM mmf+3/NS			22ml		Passed	NNS done		8 ml		
	10:00 am										NA	SR
	11:00 am	EBM mmf+3/NS			22ml							
	12:00 pm											
	01:00 pm	mmf+3/NS EBM			22 ml		passed			10ml		
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	EBM+3/NS mmf			22ml		Passed			11 ml		
	04:00 pm											
	05:00 pm	EBM+3/NS + mmf			22ml					7ml	NA	SR
	06:00 pm											
	07:00 pm	EBM+3/NS mmf			22ml		passed			10 ml		
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM+3/NS MME			22 ml		—			8ml	1	
	10:00 pm											
	11:00 pm	EBM+3/NS MME			22ml		Passed			8ml	0	
	12:00 am											
	01:00 am	EBM+3/NS MME			22ml		—			6ml	1	
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	EBM+3/NS MME			22 ml		—			10ml	1	
	04:00 am											
	05:00 am	EBM+3/NS MME			22ml		Passed			8ml		
	06:00 am										0	
	07:00 am	EBM+3/NS MME			22ml		—			10ml	1	
Total Intake :		264				**Total Output :**				100ml		

Total 24 hrs. Intake	188 cc/kg/day	Total 24 hrs. Output	2.9 cc/kg/day.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
Dr. VIJAYANAND JAMALPURI

FLUID CHART

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

BirthR
BY RAINBOW
Your Right to a S

Sheet No. : 25/5/26

TV : 170 cc/kg/day
TF : 22 ml
Bw - 1.4 kg

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

84

Date	Time	Intake: Nature of Fluid	Intake: Route: Mouth	Intake: Route: I.V	Intake: Route: OG	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	S N
	08:00 am	~~EBM + mmf + 3% NS~~										
	09:00 am	EBM			22ml		Passed			10ml		
	10:00 am	~~EBM~~										
	11:00 am	EBM			22		Passed			7ml		
	12:00 pm											
	01:00 pm	N										
Total Intake :				130cc		Total Output : 17ml						
	02:00 pm	P	20cc/gt LPBC	10% 75 OP ~~130cc~~	8.7ml							
	03:00 pm		4:30	~~8.7ml~~	17.4		Passed			10 ml		
	04:00 pm	O	7ml	7.5ml								
	05:00 pm		7ml	7.5ml			Passed			8ml		
	06:00 pm	N	7ml	7.5ml								
	07:00 pm		7ml	7.5ml								
Total Intake :			28ml			Total Output : 18ml						
	08:00 pm	P		7.5ml								
	09:00 pm			7.5ml						8ml		
	10:00 pm	O		7.5ml								
	11:00 pm	EBM		4ml	7ml							
	12:00 am			4ml						7ml		
	01:00 am	EBM		4ml	7ml							
Total Intake :						Total Output :						
	02:00 am			4ml								
	03:00 am	EBM		stop	22ml					10ml	0	Ry
	04:00 am											
	05:00 am	EBM		stop	22ml					7ml	0	Ry
	06:00 am											
	07:00 am	EBM			22ml					8ml	0	Ry
Total Intake :		220				Total Output : 75ml						

52.5

Total 24 hrs. Intake	157 cc/kg/day	Total 24 hrs. Output	2.2 cc/kg/day

Docu. No. : RCHBH/FRM/CLINICAL/092

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 29 D (M)
Dr. VIJAYANAND JAMALPURI

26/5/26

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

FLUID CHART

TV = 170cc/kg/day.
Bwt = ~~2000~~ 1.517 grm
TF = 20ml

Sheet No. : .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – NG	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	NG							
	08:00 am											
	09:00 am	EBM		(NNS 10 mins)	20ml		Not passed	Nil	Nil	8ml	0	
	10:00 am											
	11:00 am	EBM 20min	20ml				Not passed	Nil	Nil	10ml	0	
	12:00 pm											
	01:00 pm	EBM			22ml							
Total Intake :						**Total Output :** 18						
	02:00 pm											
	03:00 pm	EBM			22ml		passed	Nil		10ml		
	04:00 pm											
	05:00 pm	EBM			22ml					12ml	0	
	06:00 pm											
	07:00 pm	EBM			22ml		passed			8ml		
Total Intake :						**Total Output :** 30						
	08:00 pm											
	09:00 pm	EBM+ MMF			22ml		passed			10ml		
	10:00 pm										0	
	11:00 pm	EBM+ MMF			22ml		passed			7ml		
	12:00 am											
	01:00 am	EBM+ MMF			22ml		—			10ml		
Total Intake :						**Total Output :** 27						
	02:00 am											
	03:00 am	EBM+ MMF			22ml		passed			7ml		
	04:00 am											
	05:00 am	EBM+ MMF			22ml		—			7ml	0	
	06:00 am											
	07:00 am	EBM+ MMF			22ml		passed			6ml		
Total Intake :					264	**Total Output :** 20						

Total 24 hrs. Intake	176 cc/kg/day.	Total 24 hrs. Output	2.6 cc/kg/day.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

FLUID CHART

Rainbow® Children's Hospital — It takes a lot to treat the little.
BirthRight BY RAINBOW HOSPITALS — Your Right to a Safe Delivery

Sheet No. : .....

27/5/26.

TV =
Bwt =
TF =

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – NG	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	NG							
	08:00 am			OMS								
	09:00 am	EBM+MMF+3%.NaCl		✓	22ml		passed	–	–	12 ml	0	
	10:00 am											
	11:00 am	EBM+MMF+3%.NaCl		✓	22ml		passed			8ml	0	
	12:00 pm											
	01:00 pm	EBM+MMF+3%.NaCl	22ml	✓						10ml	0	
Total Intake :						**Total Output :** 30ml						
	02:00 pm											
	03:00 pm	EBM+MMF 3%.NaCl	22ml	✓			passed			12ml		
	04:00 pm											
	05:00 pm	EBM+MMF 3%.NaCl	22ml	✓			passed	–		6ml	0	
	06:00 pm											
	07:00 pm	EBM+MMF 3%.NaCl	22ml	✓			Passed	–		13ml		
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM+MMF 3%.NS		✓	22ml		passed			10ml		
	10:00 pm											
	11:00 pm	EBM+MMF 3%.NS		✓	22ml					7ml		
	12:00 am											
	01:00 am	EBM+MMF 3%.NS		✓	22ml		passed			10ml		
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	EBM+MMF 3%.NS		–	22ml		passed			8ml		
	04:00 am											
	05:00 am	EBM+MMF 3%.NS		–	22ml		Passed			7ml	0	
	06:00 am											
	07:00 am	EBM+MMF 3%.NS		–	22ml					8ml		
Total Intake :		264				**Total Output :**	111					

Total 24 hrs. Intake	176cc/kg/day	Total 24 hrs. Output	3:083 cc/kg/hr

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

28/5/26

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FLUID CHART

Sheet No. : .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – I.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am											
	09:00 am	EBM+ NS MMF 3%	22 ml				–			8 ml	1	
	10:00 am											
	11:00 am	EBM+ NS MMF 3%	23 ml				Passed			10 ml	0	
	12:00 pm											
	01:00 pm	EBM+ NS 3% MMF	23 ml				–			6 ml	1	
Total Intake : 68 ml						**Total Output :** 24 ml						
	02:00 pm											
	03:00 pm	EBM 3% NS + MMF	22 ml				Passed			8 ml	1	
	04:00 pm											
	05:00 pm	EBM+ 3% NS + MMF	22 ml				+			9 ml	0	
	06:00 pm											
	07:00 pm	EBM+ 3% NS + MMF	22 ml				Passed			10 ml	1	
Total Intake : 66 ml						**Total Output :** 27 ml						
	08:00 pm											
	09:00 pm	EBM+ 3% NACL	~~22 ml~~		22 ml		Passed			10 ml	1	
	10:00 pm											bhy
	11:00 pm	EBM+ 3% NACL	0		22 ml		-			8 ml	0	
	12:00 am											
	01:00 am	EBM+ NACL			22 ml		passed			8 ml	1	
Total Intake : 66 ml						**Total Output :** 26 ml						
	02:00 am											
	03:00 am	EBM+ 3% NACL			22 ml		–			8 ml	1	
	04:00 am											
	05:00 am	EBM+ MMF			22 ml		–			9 ml	0	
	06:00 am											
	07:00 am	EBM+ MMF.			22 ml		passed			7 ml	1	
Total Intake : 266 ml						**Total Output :** 101 ml						

Total 24 hrs. Intake	180 cc/kg/day.

Total 24 hrs. Output	2.8 cc/kg/day

BAH-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
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FLUID CHART

29/5/26

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Sheet No. : .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

		Intake				Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine		
			Mouth	NNS	N.G							
	08:00 am											
	09:00 am	EBM+MMF +3% NS	22 ml	(NNS) 10 ml			passed			8 ml	/	
	10:00 am											
	11:00 am	EBM+MMF +3% NS	22 ml				–			7 ml	0	
	12:00 pm											
	01:00 pm	EBM+MMF +3% NS	22 ml				passed			8 ml	/	
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	EBM+MMF +3% NS	22 ml				–			10 ml	/	
	04:00 pm											
	05:00 pm	EBM+MMF +3% NS	22 ml				–			8 ml	0	
	06:00 pm											
	07:00 pm	EBM+MMF +3% NS	22 ml				passed			6 ml	/	
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM+MMF 3% NS	22 ml				passed			7 ml	/	
	10:00 pm											
	11:00 pm	EBM+MMF 3% NS	22 ml				passed			10 ml	0	
	12:00 am											
	01:00 am	EBM+MMF 3% NS	22 ml				–			9 ml	/	
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	EBM+MMF 3%	22 ml				passed			6 ml	/ 0	
	04:00 am											
	05:00 am	EBM+MMF 3%	22 ml				passed			9 ml	/	
	06:00 am											
	07:00 am	EBM+MMF 3% NS	22 ml				–			7 ml		
Total Intake :		264 ml				**Total Output :**				93 ml		

Total 24 hrs. Intake	176 cal/kg/day	Total 24 hrs. Output	2.5 cc/kg/day

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Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : (1) Day of Life : 10 hour **PMA:**

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age:

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW / RDS /	
2.	difficult transiti	
3.		
4.		
5.		
6.		

Today's Weight : B.W- 950 gr

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent :

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio..... Oxygen : ..... L/min

Last CXR : ..... Spo:.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Baby on SIPPV + VG mode

VT delivering 5.5 - 6 ml · VG = set 5 ml

ET tube = 2.5 mm · PIP = 22

~~fixation~~ = PEEP = 6 cm.

Rat = 50.

CARDIO VASCULAR SYSTEM

Plan of Care :

BP ⇒ was less than MBP ⇒ · Inj ADR - started @ 0.2 → @ 0.1 now.

· U/O

· 1° S - given

CNS

Neurological Examination : .....

..... Sedation.....

Last Neurosonogram : Screening USG Any Seizures.....

neurological assessment (N).

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output : 2.1cc ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Inj Piptaz	D1	UVC] 1
	2.			UAC]
	3.			Tubing I

Plan of Treatment :

⇒ Continue current ventilation

⇒ TV - 60cc/kg/day - 10% D + Cal @ 3 ml/kg/day
Aminovan - 2gm/kg

⇒ Mouth care c̄ EBM

= GAS / GRBS | 6 - 8 hrs hours

= Continue ~~in~~ antibiotic, caffeine - citrate

⇒ R/V NSG - today

⇒ W/F apnea, brady, desat

Doctor's Name (Handover given) : .....(P).....

Signature : .....Rupnjab.....

Date & Time: .....26/03/20.....

Doctor's Name (Handover taken) : .....

Signature : .....

Date & Time: .....

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Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
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(1)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/03/26 12:00am		Been by Dr VJ
	Expt / ELBW /	
	RDS / difficult	Cont SIPPV + [illegible]
	Risk of ~~d~~ sepsis	Gas - 6 - 8 hours
		+ GRBS — SOS if needed
		- MBP → 25-30
	~~New~~	Target
		— TV - 60cc/kg/day
		- R/V fentanyl
		- Sonalogical assessment
		- I/O - Chart 6 hours
		- Mouth care c̄ EBM
		If available
		1ml - 2 hours
		Blood c/s
		• Blood sugar
		• PT/APTT
		• Inj Piperacillin + Tazobactam
		- Inj caffeine citrate

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12:45 am	Neurological Assessment → NO Obvious bleed	
	SURFACTANT NOTES	
26/3/26 1Am	Under Sterile Aseptic Condition, baby was given Surfanta @ 4ml/kg, through ET, under 3 Aliquots, baby remained stable	
		Plan → Gas @ 6 Am → Chest X Ray @ 6Am
26/3/26	UVC & UAC Notes under sterile aseptic conditions, UAC was Placed & fixed at 14cms, confirmed by backflow ⊕ & radiologically, UVC was Placed & fixed @ 8cms, confirmed by backflow & radiologically	Plan → Connect to Ventilator

EAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
Dr. VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

(3)

Date & Time	Progress Notes	Doctor's Order

BP centiles

	95th	50th	25th	5th
- SBP	60	44	36	
- DBP	35	27	23	
- MBP	43	33	27	

BP centiles

	5th	25th	50th	95th
SBP	27	36	44	60
DBP	18	23	27	35
MBP	21	27	33	43

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/3/2026 @ 9:30 am	E 950 g EPT/ELBW.	Seen by Dr. VS
		1) Cont current vent SIPPV 18/6. Rate - 55/min.
	U/O = 2.1 ml/kg/hr	
	+4.1	2) Cardiovascular assesment.
	Neurological Assesment } Normal.	
		3) Target MBP. 25-30 mmHg ~~28-32 mmHg~~
		4) NS Bolus - 5 ml/kg
		5) Ho chart 4th hrly
		6) Cont piptaz
		7) minimal handling
		8) Strict aseptic
		9) TV = 60 ml/kg/day. Iml 2nd hrly
noted by vidya 26/3/26 @ 9:30 am		10) NP, 2 evening PT, INR aPTT

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

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Date & Time	Progress Notes	Doctor's Order
26/3/26 1pm		S/B Dr Nilesh / Dr Sowmya
	Extreme PT / ELBW / RDS / suspected sepsis	Plan
	- One dose of ~~[illegible]~~ Suevanta gm @ 2HOL	1) TV => ↑ 80 ml/kg/day (wt/t) (including drugs, infusion) feeds 1ml Q2H TV @ 60 ml/kg/day
	↓	
	on SIPPV - 17/6 RR: 55 FiO2: 25-30%	2) SIPPV - 17/6, RR: 55 FiO2: 25-30%
	↓	
	MAP => 8.5-9.	2nd dose of surfactant ↳ to review
	- Metabolic acidosis: BE => -9.7, PH: 7.22	
	↓	3) Gas => now
	5 ml/kg bolus gm	
	U/O: 2-8 ml/kg/hour	4) Target MBP => 25-30 mm Hg
	Balance: +0.8 ml	
	IBP: 36/22 (27) ~ 25th centile	5) Continue piptaz fluconazole (prophylaxis)
		stress asepsis minimal handling
		6) NPI PT, INR APTT / evening

Noted by
vidya
021143
26/3/26
@ 1 pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/3/2026 2pm	On SIPPV. PIP-17, PEEP-6	PEEP: 6 → 5
	Rate-55	plan: Rate: 55 → 50
	MAP-9, FiO2-30%	1) Repeat CXR
	IBP-38/24 (on Adre-0.3 mcg)	2) Target MBP: 27 ± 2
	TLC-3230 Leucopenia	Wean if MBP > 33
	ANC-516. Shock	3) 1 dose GCSF.
	Skin mot 8 edematous.	4) Next gas @ 3pm FBS
	3pm gas: 7.25/36/47/-10.6/15.9	send NP1 @ 5:30pm
	Lac-3.4	5) TV-60 ml/kg for now.
	xray showing 10 space expansion	6) change to Meropenem
	Tubular heart	
		Noted by vidya 26/3/26 @ 2pm
		S/B Dr prathyusha
26/3/26	On SIPPV → 17/5	1) SIPPV → ↓PIP-16
	VT → 26 ml/kg	PEEP 5
		Target VG-5 ml/kg
	last Gas => BE => -10.6	cut ET tube
	PH: 7.25	
	ANC: 516	2) continue Meropenem
	(Given GCSF)	
	On Meropenem	3) NP1 @ 6pm
		4) neurological assessment in the night
		Noted by vidya 26/3/26 @ 3pm

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Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D0H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

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Date & Time	Progress Notes	Doctor's Order
		(5) 1 TV - 70 ml 1 ml/day
		(6) Target MBP ~ 25 mm [illegible]
		(7) Pull out UVC by 0.5 cm UAC by 1 cm
		(8) Gas [illegible]
		(9) constant [illegible] feeds 1 ml 3rd hrly Deformed
		Noted by vidya 021143 26/3/26 @ 8 pm
26/3/26	C/S/B Dr- Nilesh	
	CRP - 51 WBC - 8440 } improvement N - 49	Plan (1) DSPT (2) start inj colistin & inj fluconazole - ~~[illegible]~~ - treatment dose
	SBR - 5-6	
		Noted by vidya (021143) 26/3/26 @ 7:40 pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
~~26~~ 27/3/26	Night rounds	
12:15 AM		seen by Dr PR
	- on SIPPV, 18/5cm.	Plan:
	Rate - 50	
	Last gas - 7.16/42.4/51.5	- ↑ PIP to 19;
	Lac - ↑ to 5.9	
	Base - -12.2	- w/H feeds.
	SpO_2 - 93%	- To add 20ml/kg
	PR - 164/min	15 ~~10~~% Iso-p
	BP - 42/21 (29)	
		- change Adrenaline to
	Bruising (+) in (R) inguinal	Double dilution (3mg/kg)
	region	
	Redness (+) in (R) cubital	- TV - 80ml/kg/day
	fossa.	
		~~Adrenaline~~ 23ml/kg infusion; 10.5ml/kg medication
→ ↓ sedation - fentanyl 2mcg	Rest 48ml/kg	
→ adrenaline		
infusion ongoing	28ml/kg 10% TPN (GIR = 1.94)	20ml/kg 15 ~~10~~% Iso-p (GIR = ~~1.38~~ 2 mg)
~~0.4~~ 0.4mcg		
	Total GIR = ~~3.32~~ 3.9 mg/kg/min	

Notified By Mousumi 27/3/26 @ 8am

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	2D Echo (bedside) – (N)	– Maximum Adrenaline infusion till 0.6 mcg/kg.
	Contractility (N)	↓
	TR (+) PR (+)	– If not maintaining then to add Nor Adrenaline
	Mild PAH ~30	
	TAPSE – 5	– next gas @ 6AM – Send PT-INR
	Mild RV dysfunction	
	PDA (+) BD shunt (1.8 – 1.9 mm)	– Target BP around 25th centile – 27 ± 2
	PFO (+) BD shunt	– Official 2D Echo t/m.
	IVC congested.	
	NSG screening – (N)	Notified by Mousumi 26/3/26 @ 8AM
	↓SSPT (SBR – 5.6)	Dr Ashwini

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 33 HOL **PMA:** .....

Term ☐ **Preterm** ☐ Gestation : ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	
2.	RDS - 1 dose of surfactant - MV	
3.	Suspected sepsis	
4.	NNJ	
5.	Hypotension	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....FiO_2.....Oxygen : .....L/min

Last CXR : ..... SpO_2: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... on SIPPV

FiO_2 - 25% ↓

19/5 ↓

RR - 50/min

- Added 1st 15% ISOF due to ↑ Base excess in last gas

↳ To d/v settings after today's morning gas

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO_2 - 95%

PR - 154/min

BP - 53/28 (37)

- on fentanyl infusion
- on Adrenaline infusion.
- w/H feeds over night (due to less total volume)

- precordial activity (P)

CNS

Neurological Examination : - Bruise over Rt. thigh (P),

.....Sedation.....

Last Neurosonogram : .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :2.8..... ml/kg/hr Stools : Not passed

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... TV - 80 ml/kg/day .....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

P/A - soft,

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Meropenem	D2
2.	Colistin	D2
3.	Fluconazole	

UAC, UVC } Day 1

Plan of Treatment :

- Continue current ventilation, if PIP requiring >20, RW VG.
- Target SpO_2 - 90 to 95%
- TV - 80 ml/kg/day.
  - 28 ml/kg — 10% TPN
  - 22 ml/kg — Infusions
  - 20 ml/kg +5% ISO-P — 10.5 ml/kg medication
- Gas 8th hourly
- RBS 8th hourly
- I/O charting 6th hourly
- Continue DSPT for 24 hours,
- 2DEcho today,
- Feed ml 3rd hourly
- Target MBP - 27 ± 2 mmHg.
- Trace PT, INR report,

Doctor's Name (Handover given) : Def

Signature : Def

Date & Time: 27/3/26

Doctor's Name (Handover taken) : Y. Sneha

Signature : Sneha

Date & Time: 27/3/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0Y0M0D15H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	27/3/26	c/s	by Dr. PR
	7:15 AM	
		plan:
	pH - 7.15 | 43.5.	↑ RR to 55
	Base - 12.4	- Send CBP now
	Lac - 4.9	& if Hb < 12 to transfuse
		- ~~↑ 15%~~ Add 30 ml/kg of 15%. ISO-P.
		- ABG do next gas after 4 hours.
		Advised
	27/3/26 9:40 am seen by Dr.	
	EPT / ~~ELBW~~	Plan cont SIPPV
	RDS	(1) T Rate - 60
	Neutropenia	PEEP - 5
	Probable sepsis	~~PIP~~ - 18
	Metabolic acidosis	change to Vg ~~4~~ ml/kg.
	Hypotension	(2) Next gas @ 11 AM & 9 PM
	Hb - 15 → 10	(3) MBP 25 ± 2. target.
	PC - 1.39	(4) If ~~BP~~ > 35 MBP, wean Adrenaline
	WBC -	
	APTT -	

noted by vidya 27/3/26 @ 9:40 AM

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25-03-2026 0 Y 0 M 0 D 15 H (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		(5) NSG ~~Am~~ today
	UAC	(6) Meticulous skin
	UVC | D_1	care
	tubings	(7) Mouth care c̄ EBM
		(8) TV = 90ml/kg/day
	PA - Full but soft.	calculate GIR
		& decide if 151 & 50 - 1
	CVS - No gallop rhythm; S_1S_2 heard	needs to be
	RS - chest clear.	changed. to 10%.
		(9) Give FFP.
		(10) cont antimicrobials
		(11) feeds - 1ml Q2H
		ONLY EBM
		(12) cont DSPT
		(13) SBR c̄ evening gas
		(14) LRBC now
		Noted by
		vidya
		021143
		27/3/26
		@9:40 Am

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/3/26 @1:30pm	Afternoon Rounds	
	Resp:	Plan
	Baby on SIPPV+VG	
	VG @ 4mL/kg (3.8mL)	1) Cont SIPPV+VG
	PIP = 17/18, PEEP - 5	VG - 4mL/kg
	Rate - 60/min	Target SPO2 90-95%
	MAP = 7.5 - 8.5	
	leak - 0%	2) Gas - Now & 6th hrly
	Ti = 0.30	GRBS - 6th hrly
	↓	3) TV = 90mL/kg/day
	No desaturations.	10% TPN 80mL/kg 15% ISO-P ⊖ LRBC FFP
	Cardiac - Intermittent	
	tachycardia	
	Pallor ⊕	4) mouth care with EBM
	LRBC planned	
	FFP - done	5) LRBC over 4 hrs
	on Ionotropes - Adrenaline	post transfusion aftr 2hrs
	0.15 µg/kg/min	Blood gas + SBR
	HR = 158/min	Keep NPO
	BP = 43/21 (29)	
	SPO2 = 94%	6) Cont DSPT.
	Neuro = NSG - (N)	7) meticulous Skin care
	⊙ Active	
	on fentanyl.	8) SBR + Blood gas - evening

Noted by
vidya (021143)
27/3/26
@ 1:30 PM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	P/A = Soft, No distension	9) I/o charting 6th hrly
	NG-asp - Nib.	
	Stool - Not passed	10) w/f - RD, desaturation Ab. d. distn
	U/O = 4.5 mL/kg/hr + 5.5 mL.	
	Last GRBS - 123 mg/dl	11) Cont- antimicrobials Sneha
27/3/2026		Plan
	Gas: 7.19/48.6/39.8/ 16.3/-8.9	Ventilator.
	Lac - 2.7.	TVG 4mL/kg → 4.5mL/kg (4.3mL)
	Gas - K+ - 6.6	Rate = 60/min
	FFP - done.	PIP = 20/20.
		Target MBP 21-27mmHg
		Wean Adrenaline if MBP > 35 mmHg
		Start LRBC transfusion Sneha
		Noted by vidya 0211143 27/3/26 @ 3pm

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 15 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/3/26 @ 7pm		1) Cont - Current Ventilation VG - 4.5 ml/kg 2) Wean adrenaline if MBP > 35m 3) Gas & GRBS 6th hrly. 4) ~~NP, with~~ CRP, SBR, S/E - T/m mrng
		noted by vidya 02 11 43 27/3/26 @ 4pm Sneha
27-3-2026 7:40pm DOL-2 (45 HOL)	GDIW DO - Vijay Nand Sir GSI By Anonima Baby on SIPPV + VG mode (VT @ 4.5 ml/kg) HR = 160/min CRT < 3sec SPO_2 = 91% UO = 7 ml/kg/hr	fresh issue of ↑ UO > 7.1 ml/kg/hr in last 6 Hours RBS - 131 mg/dl plan 1) ~~Continue~~ ↑ TV @ 100 ml/kg/Day 2) To increase volume TV to 110 ml/kg/Day

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25-03-2026 0 Y 0 M 0 D 22 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		after 11:00 pm
	iii)	~~Replace UO above 4ml/kg/Hour by N/S every 6 Hourly~~
	iv)	strict I/O charting
	v)	Gas at 8:40 pm
	v)	Gas & GRBS 6th hourly
	* vi)	TV @ 110ml/kg/Day after 11 pm
		[signature]
28/3/2026 @ 12pm	Night Rounds	
	Resp	Plan
	Baby on ventilator SIPPV + VG.	1) Continue SIPPV + VG
	VG = 4.5mL/kg (4.3ml)	VG = 4.5mL/kg
	Rate 60 → 55/min.	Target SPO_2 90 - 95%
	PEEP - ~~6cm~~ 5cm.	2) TV = 100mL/kg/day
	PIP = 21/22	15% ISO-P 20mL/kg/d; 10% TPN Rest
	⊙ No desaturation	
	No Bradycardia	

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	last Gas:	3) Strict I/O monitoring 6th hrly
	7.23 / 37.9 / 45.7 / -10.7	
	PO_2 = 56.7.	
		4) Start feeds with only EBM.
	Vitals HR - 161/min	
	RR = 60/min	
	SPO_2 = 93%.	5) Gas } 6th hrly
	BP = 44/25 (35)	GRBS } (next at 5am)
	P/A - Soft	6) CRP, SBR, S/E - at 5am to send.
	Non distended	
	Aspirate - Nil.	
	Stool - passed.	7) Target MBP 25-30mmHg
	U/O = 4.9 cc/kg/hr	8) w/f - vitals
	+ 14 ml.	Brady, desat
	1 CRBC transfusion	monitor electrolytes,
	1 FFP done.	metab cacidosis
	GRBS 131 mg/dl	Noted by
		Supriya
	Stopped adrenaline	28/3/26
	8pm.	12:30 Am

Docu. No. : RCHBH /FRM / CLINICAL / 088

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 58HOL **PMA:** ~~26~~ - 27 wks

Term ☐ **Preterm** ☐ Gestation : 26+4 wks Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	
2.	RDS - 1 dose of Surfactant	
3.	Suspected Sepsis	
4.	NNJ	
5.	Hypotension	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : ..... Spo2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Baby on SIPPV + VG mode
VG 4.5 mL/kg = 4.3 mL
Rate - 55/min
PEEP - 5 cm
PIP - 17-19/22

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 153/min
RR - 55/min
SpO2 - 93%
BP - 50/26 (36)

- 1 RBC done
- 1 FFP done
- Stopped adrenaline

CNS

Neurological Examination : .....

Sedation Fentanyl

Last Neurosonogram : Normal. Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... O/D =

.....

GRBS -

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

P/A - soft, NO distension

Stool not passed

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Meropenem	D_3
2.	Colistin	D_3
3.	fluconazole	

Caffeine citrate.

UAC, UVC } D_2

tubing, Incubator } D_2

Plan of Treatment :

1) Continue current ventilation
   Target SpO_2 90-95%.
2) TV = 110ml/kg/day { feeds 1ml 2nd hrly EBM - OG feed
   20ml/kg - 15% ISOTP
   Rest - 10% TPN
3) Gas } 8th hrly
   GRBS }
4) Trace - CRP, SBR, S/E reports
5) I/O charting 6th hrly
6) meticulous Skin Care. ongoing
7) Oral mouth care with EBM DSPT
8) Target MBP 25-30mmHg
9) monitor vitals
   R/V on adding Glycerine.

Doctor's Name (Handover given) : Y. Sneha

Signature : Sneha

Date & Time: 28/3/2026

Doctor's Name (Handover taken) : Dr Aishwarya

Signature :

Date & Time: 28/3/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/03/26 10:00 am		Seen by Dr. VJ
		- Cont SIPPV + VG
		- Gas - 6 - 8 hands + GRBS
		- If gas is improving
		→ R/V SIMV + PS
	Turmy - full + soft	
	Tubing - D2	→ MBP target 25-30
	UAC / UVC] D2	
		- I/O chart - 6th hand
	Incubator - D2	
	Skin bruises (+)	→ TV (↑) 120 cc/kg/day
	Skin oedema (+)	
		- Fentanyl to continue
		- R/V extubation by mondar.
		- R/V Phototherapy.
		- Feeds -
		2 ml - 2 hands Only EBM/DBM
		↓
		- Trace - Blood - C/S of 48h.
		→ If No growth → Stop Colistin

Noted by
(1) Sandamma
28/3/26
10:30 am

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 0 D 22 H (M)
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GRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/03/26 Continuation		- Monitor Bilirubin + S/E in gas
		- PT/APTT ē next Gas.
		- NP1 Monday
		Rupmjnt
		TPM
		A3 Na3 K1 Ca3 L2
28/3/26 3PM	Seen by Dr VJ	
		Plan
		① cont current ventilation wean as tolerated
	Blood c/s - NGX 48hrs	② Gas 98-Q12H
		③ MBP target 27 ±2
		④ TV = 130 ml/kg/day (RW) based I/O.
		⑤ cont fentanyl.
		⑥ Feeds - 2ml Q2H constant.
		⑦ stop colistin
		⑧ NP1 on monday.

Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Dr Ashwaya

Noted by Dewdamant 28/3/26 9:30pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/03/26 6PM	Evening ~~Afternoon~~ Rounds.	
	on SIPPV + Vg (4.5ml)	
	PEEP - 5	Plan
	PIP - 16	(1) cont same
	FiO_2 - 24%	settings
	Rate - 35/min	(2) TV = 140ml/kg/day
		2ml Q2H constant; 20ml/kg 15% 150-P; Rest 10% TPN
	tolerating min feeds.	
	PA - soft, non distended.	
		(3) cras Q8-12H
	HR - 146/min	(4) NP, monday
	SpO_2 - 92%	(5) MBP target 25-30
	BP - 47/27 (35)	(6) Trace final c/s t/m & (RV) fluconazole.
	I/O - 53.4/80 (-26.6)	Noted by development 28/3/26 6:3 pm
	U/O - 6.8	

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/3 @ 2:30 PM	Night rounds	
		plan
	v → baby on SIPPV mode	
	UG (4.5ml/kg)	→ continue SIPPV mode
	PEEP-5	target SpO_2 90-95
	rate-50	
	FiO_2-23%	→ TV-140ml/kg/day
		20ml 75% Isop
	gas-7.28/35.8/-8.9/	rest - 10% TPN
	/7.3	feed - 2ml 2 hourly
		Constant
	c → HR-158bpm	
	BP-55/30 (39)	
	U/O-3.6ml/kg/hr	→ NP1-Monday
	P/A- soft,	→ monitor vitals
	tolerating feed	
		[signature]

BAH-00652011 IP5-0017164
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 2 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : D3 ..... PMA : 27+1 w ks

Term ☐ Preterm ☑ Gestation : 26+4 ..... Corrected Gestational Age : .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ ELBW	
2.	RDS - 1 dose surfactant - MV	
3.	suspected sepsis	
4.	NNJ	
5.	Hypotension	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation: SIMV ☐ A/C ☑ VG ☐ HFOV ☐ INO ☐ PPM ☐

Ventilator Settings : PIP 20/16 PEEP 5 VG 4.5-4 adults Rate 50 FiO_2 ..... Oxygen ..... L/min

Last CXR : ..... SPO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG 7.28 / 35.9 / -8.7 / 17.4

Change over the Last 24 Hours .....

CARDIO VASCULAR SYSTEM

Plan of Care : Continue SIPPV mode

CNS

Neurological Examination : .....

..... Sedation ..... [illegible]

Last Neurosonogram : ..... (N) ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain ..... Head Circumference .....

Input ...../(+/-) ..... Output : ..... ml/k/d Urine Output 5.7kg/hr – 13ml ml/kg/hr Stools .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr .....

Feeding : EBM ☐ Formula ☐ Donor BM ☐ Volume ..... Frequency .....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories : .....

Abdominal Examination : soft, tolerating feeds

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis Screen : .....

Blood Culture ☐ Urine Culture ☐ ET Culture ☐ Fungal Culture ☐ LP ☐ CSF : .....

Antibiotic	Sl No.	Drugs	Days	Caffeine Gibase
	1.	Meropenam		
	2.	~~Colistin~~	D4	UAC / UVC] D3
	3.	fluconazole	(P)	tubing / Incubator] D3

Plan of Treatment : ① continue current ventilation
target SpO2 – 90 – 95%.

② TV – 140ml/kg/day – 10% TPN
20ml/kg – 15% ISOP
feed – 25ml / 2hourly Rh – TSL feed
Rh – T TV

③ NPI – monday

④ Flo charting 6hourly

⑤ gas / RBS] TID → Rh – BD

Doctor's Name (Handover given) Dr. Manitha Doctor's Name (Handover taken) Sneha

Signature : [signature] Signature : [signature]

Date & Time : 29/3/26 Date & Time : 29/3/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/3 10:20am	Blood Culture NO growth after 72 h	Stopeding colistin as planned Rupanjali
29/3/26 @ 11:30pm.		Seen by Dr. Nilesh 1) Cont SIPPV + VG VG Cont at 4.5mb/kg 2) TV = 140mb/kg/day feeds ↑ 0.5mb ~~/kg/day~~ BD 3) Cardiac assesment T/m. 4) NP1 - Monday 5) R/V ↑ TV - night
	ECHO: PDA - small restrient 1.2mm. PDA gradient - 29/10. PFO. mildly dilated LA. (not related to PDA) La/Ao ratio < 1.5	Noted by Devendarmoh 29/3/26 10pm Sneha

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25-03-2026 0 Y 0 M 3 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/3/2026 @ 6pm	Evening Rounds	
	Resp: SIPPV + VG	Plan.
	VG = 4mb/kg	
	PIP = 12/20	1) Cont. current ventila
	PEEP - 5.	VG - 4mb/kg
	RR - 50/min Ti = 0.30	Target SPO_2 90-95%.
	⇓ FiO_2 = 24%	
	Gas:	2) TV = 140mb/kg/day
	7.25 / 45.6 / 73.0	2.5mb 2nd hrly feeds ↓ ↑0.5mb BD; 20mb/kg 15% ISO-P; Rest 10% TPN
	18.6 / -6.4.	
	lac - 1.1.	
	⇓	
	Gas ~~tsb~~ Bilirub = 10.5	
	SCR (+)	
	Cardiac	
	HR = 153/min	3) NP1 - with Gas } Tomorrow
	SPO_2 = 94%	
	BP = 56/27.(38)	
	Not on ionotropes	4) Ilo charting 6th hrly
	Small PDA.	
		5) Gas - BD
	Neuro - Normal.	GRBS - BD / SOS
	⇓	
	Per abdomen - Soft	6) W/f - Brady, desat
	No aspirates	Hypotension
	Icterus (+)	aspirates

Noted by dewdamd 29/3/26 6:30pm

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31-3-2026		
1:30 AM		
	On (SIMV + VG)	
	(4.5 ml/kg)	
	HR = 159/min	
	SpO_2 = 96% on 21% FiO_2	
		plan
		1) stop fentanyl infusion
		2) ↓ RR to 30/min
		3) feeds 4 ml to continue
		4) gas & GRBS → 12th hourly
		5) SBR TM
		6) Extubation TM
		Noted by Anwar
		Vishnu Priya
		019011
		31/3/26 @ 1:30 AM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

B-H-00152011 IP5-0117644
Baby Of SRI VIDYA VANGALA
25-03-2022 0 Y 0 M 8 D (in)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 26 ..... PMA: 27 + 3

Term ☐ Preterm ☐ Gestation : 26 + 4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	hypotension - needin
2.	RDS - 1°S	Ionotrapes
3.	Suspected Sepsis	
4.	NNJ, Anaemia	
5.	[illegible]	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio_2.....Oxygen : .....L/min

Last CXR : .....Spo_2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours - on SIMV + VG (4.5 ml)
↓
plan to extubate today.

→ Last Gas : 6am ~~7.2~~ / ~~50~~ / ~~1~~ - ~~7.2~~ / ~~17.6~~

CARDIO VASCULAR SYSTEM

Plan of Care :

- No hypotension
  - HR = 154
  - RR = 50
  - SPO_2 = 90%

Last SBR in gas - 6.2.
S. Bill = 5.4

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : N .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:..... U/O 3.5cc/kg/hr

Balance +92.6ml

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Stool - passed

P/A - soft -

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Inj Meropenam	(D6)	- Inj Caffeine
	2.	Inj Fluconazole	(P)	- Glycerin
	3.			

Plan of Treatment :

- Continue current venti → R/V for extubation in Round
- TV - 160ml/kg/day - ~~20ml/kg - 15% ISO-P~~ 10% TPN
  R/V fluid 20ml/kg - 15% ISO-P.
  feeds → 4ml - 2hourly constant feed.
  (50.5ml/kg/day)
- Continue phatatherapy → ~~R/V SSPT in Rounds~~
  Cont DSPT.
- W/F apnea, brady, desat, hypotension
- Gas GRBS 6-8 hours → ~~R/V~~

SBR=5.4

Doctor's Name (Handover given) : (P)

Signature : Rupnjali

Date & Time: ~~21~~ 31/03/26

Doctor's Name (Handover taken) : Sneha

Signature : Y Sneha

Date & Time: 31/3/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/3/2026 @ 9:45am		Seen by Dr-VJ.
		1) Aim to extubate to CPAP. PEEP-6.5. ↓
		2) SOS - NIV.
		3) Caffeine loading before extubation.
		4) Picc line before extubation.
		5) TV = 160ml/kg/day → fuds ↓ ↑5ml 2nd hrly; 20ml/kg 15% JSO P
		6) I/O charting 6th hrly
		7) Meropenem Total 7 days
		8) Give meropenem evening dose & remove UVC after Picc line

Noted By Nirupama 01276

Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/3/2026 @ 3pm	Picc line Notes.	
	Baby under Strict aseptic precautions Picc line placed in left forearm. Initial fixation at 10.5cm. After position Confirmation on chest x-ray Picc line fixed at 11.5cm by pushing in 1cm	
	Vitals HR = 149/min. SPO_2 - 93%. BP = 51/25(35) Dr. Sneha. Dr. Sharat.	1) Strict ANTT to follow 2) Cont. Fluconazole prophylaxis
		Sneha
~~31/3/26~~	~~Extubation Notes~~	
31/3/26 @ 4:54pm	Rounds	Seen by Dr. VJ. 1) Good Suction ↓ once Suction done Plan extubation to CPAP 2) NPO 3) R/v feeds in evening

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	~~Evening Notes.~~	
		4) Remove UVC after dose of meropenem
	Extubation Notes	
	Under sterile aseptic conditions, After suctioning, baby was extubated to NW.	
	*	Plan
		→ Start NW, 18/6 RR-40
		→ Gas @ 12 AM
11:00pm		→ Keep NPO till 02 AM
	• Under aseptic precaution, UVC removed @	
	• tip seen	
	• No bleeding	
		Rupnigali For Dr. Faiz

Dr. VIJAYANAND JAMALPURI Reg. No: 40826

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Seen by DENL	
31/3/26		NIGHT ROUNDS
	On NIV	Plan
	18/6	
	RR-40	→ On NIV
	ti-0.4 secs	18/6, RR-40/m
		→ Gas after 2 hours @ 12AM
	HR-172	
	SPO2-98°	
	BP-49/23/35	→ Decide on feeds after Gas
	Humidity → 80%	
		→ TV-150 cc/kg/day
		130 cc/kg/day TPN 3ml/kg 10% 150
		→ Restart with 3ml.
		↑ 1ml each feed, till 5ml
		→ Chest X-ray @ 6AM/SOS.
		w/f for collapse.
		→ 65% Humidity each day
		Noted by Vishnupriya 01904 31/3/26

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00052011 IP5-00171544
Baby Of Sri VIDYA VANGALA
25-03-2026 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 07 ..... **PMA:** .....

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Expt / ELBW	
2.	RDS – 1° S	
3.	@ MV → CPAP	
4.	NNJ	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO_2..... Oxygen : ..... L/min

Last CXR : ..... SpO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours Extubated to ~~CPA~~ NIV

~~Baby was extubated from~~

Setting PIP = 18, PEEP = 6, Ti = 0.41
FiO_2 = 30%

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 170/min
SPO_2 = 98%
RR = ~~60~~ 50/min

– Baby tolerated the extubation well

post extulation gas
7.26 | 40.5 | -7.9 | 17.6

CNS

Neurological Examination : N

..... Sedation .....

Last Neurosonogram : ..... Any Seizures NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days	
1.	Inj Meropenem	(D7)	Inj Caffeine
2.			Glycerin
3.			

UAC - D6
PICC - 1

Plan of Treatment :

- Continue NIV
- Gas - morning
  GRBS
- TV - 160 cc/kg/day < 140 cc/kg/day - 10% TPN; 5 ml constant feed - 2 hours; 20 cc/kg/day - 15% ISO-P
- W/F Apnea, brady, desat
- CXR - (M) 6am
- Continue DSPT → R/V SBR

Doctor's Name (Handover given) : .....

Signature : Ruparjini

Date & Time: 3 1/4/26

Doctor's Name (Handover taken) : .....

Signature : .....

Date & Time: 1/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/26 10:00am		Seen by Dr. VJ
	FPT / EI BW / RBS.	✓ Continue - NIV
		Wean as tolerated
		⇒ Blood gas - BD. GRBS.
		⇒ NSG - T/M
	Tummy - Soft.	
	- Pulse easy to feel	⇒ Moniter for skin injury.
	- Murmur. → 2/6	
		⇒ 2D ECHO TODAY
		⇒ Feed 6 ml 2 hrly Corelac
		TV - 170 cc / kg / day.
		30 cc / kg / day → 140 cc / kg + Feeds
		15% Isc - P + 10% TP
		S/E, SBR - T/M
		- Last day Inj. Meropenem
		Repeat.

Dr. VIJAYANAND JAMALPURI Reg. No: 40529

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 3 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/4/26 1:45 PM	Afternoon rounds	
	- On NIV, FiO2 - 25%, 18/6,	Plan:
	- No Brady,	- Continue NIV
	- No Desaturations	- IV - 170ml/kg/day
Issues	- 2 episodes of vomitings (Curdky)	6ml constant feeds & 30ml/kg 10% Isop
	- Intermittent hypertension (P)	Rest is 10% TPN
	SpO2 - 94% PR - 134/min BP - 69/36 (47)	- Gas, RBS } BD
	P/A - Soft,	- I/O chartly 6th hourly
		- Serum Electrolytes, SBP } TDM
	- Urine - passed	- 2D Echo today
	- stool - passed	- Plan to stop Meropenam after today's night dose

Noted by Nursing

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		- NSG T/M
		Ant
1/4/26 @ 2:53 PM		seen by NJSir
		→ continue N/V -
	P/A - soft mildly distended.	→ cardiac assessment today
		→ NSG - T/M
		→ SE, SBR } T/M
		gas, RBS] BD
	Notes By Nirupama 012767	Dr. Manu Dr. VIJAYANAND JAMALPURI Reg. No: 40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/4/26 7:16pm	Night rounds. 4s/B Dr. Sowmya	
	Baby on NIV	
	FiO_2 - 25%	
	Rate - 35 18/6.	plan
	Gas - PH - 7.34	NIV - FiO_2 - 25% → 30%!
	lac - 6.6	Rate - 30
	Base - 10.3	18/6 → 17/6.
	Bil - 7.4 mg/dl	
		- SPT ε covering of Eyes/ genitalia
	P/A - soft, no distension	
	Aspirates - ~1ml milk	- NSG - T/m
	peripheries - warm.	S.E } T/m -
	stool - passed.	SBR
		- Gas, RBS - BD.
	2D Echo - PDA	- I/o charting @ 6th hourly.
	Noted By Nirupa Opa	N. Pathrikar
		Plan - if clinical change
		Noted By Sravani @ 8pm 2/4/26

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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MENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : DOL-8. **PMA:** 27+5

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.		
2.	EXPT/ ELBW	
3.	RDS - 1°S	
4.	MR - CPAP	
5.	NNJ.	
6.		

Today's Weight : -

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

on NIV

FiO_2 - 28.1.

Pinsp-16. PEEP- 6, Rate - 30/min.

4o 2 Semi vomitings - 1ml milk aspirates (B).

CARDIO VASCULAR SYSTEM

Plan of Care :

Continue current ventilation

SpO_2 - 98.1.

HR - 149/min

BP - 60/33 (43).

CNS

Neurological Examination : (N) NO.

.....Sedation.....

Last Neurosonogram : .....Any Seizures..... NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : Parsed.

IV Fluids - Type of IVF : ..... @ ..... ml / hr 4.9 cc/kg/day

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency: Infant 6 hours

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

Soft, loopy abdomen.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Inj- caffeine
Glycerine -

tubing - D7
CPAP - reddies
UAC - D7
PICC - D2.

Plan of Treatment :

- Continue NW - FiO_2 - 26%, Prosp - 16, PEEP - 6
  Rate - 30/min
- TV - 170 ml/kg/day - 6 ml Constant feeds.
  30 ml/kg 10% 150 p.
  Rest in 10% TPN
- Gas, RBS } BD
- NSG - today
- Trace S.E, SBR Reports
- SSPT - covering of Eyes/genitalia till Evening (7pm).
- I/O charting 6th hourly

Doctor's Name (Handover given) : N. Prathish

Signature : N-Pr

Date & Time: 02/04/26

Doctor's Name (Handover taken) : .....

Signature : .....

Date & Time: .....

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/4 @ 7:51 AM		seen by VTSir
	EPT/ ELBW/	
	RDS	→ continue CP NIV
	PDA	16/6
	establishing	R/V - CPAP in the
	feeding	evening
	O/E	→ IV - 170 cc/kg/d any
	P/A - Distended	6 ml/hr - constant
	soft	feed
	② vomiting small	→ monitor BP
	yesterday morning	→ I/O chart 6 hourly
	2 ml milk	
	aspirate.	→ Trace blood report
		→ monitor vital
		→ Drug chart
		fluid chart
		→ GRBS] BD
		gas

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

Noted By/Dr. Sravan Dr. Manitha
@ 2/04/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/4/26 @ 12:30pm	Afternoon Rounds.	
	Baby on NIV with mask PIP = 16 PEEP-6. Ti = 0.40. FiO_2 = 25%. Rate - 30/min	Plan. 1) Cont. NIV PIP-16 PEEP-6. Target SpO_2 90-95%.
	No Bradycardia / desaturation No aspirate SBR = 115.6 (not in phototherapy range)	2) R/v on changing to CPAP in the evening
	Vitals HR = 188/min Baby Temp 37.2 manual Temp: 99.9°F	3) TV = 170ml) Kg / day 6ml/hr Constant feed Rest 10% TPN 4) monitor BP 5) I/o charting 6th hrly
	RR = 60/min SpO_2 = 96%.	6) Gas / GRBS } BD 7) Monitor vitals
	P/A = Soft. • No distension No aspirates.	8) Recheck temp in 1/2 hour.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/4/26 3:00pm		Seen by Dr. PR
		⇒ change to CPAP @ 6cm.
		⇒ If fever spike ↓ CBP, CRP ↓ ~~Consider antibiotics~~ Rungin
		Needed by [signature] 019653.
2/4/2026 @ 9:30pm		By Dr. N B
		If further tachycardia ↓ Send CBP, CRP
		[signature]

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/4/26 @ 12:15am	Night Rounds	
	Baby on CPAP. PEEP-6 with mask. FiO_2 - 25%.	Plan 1) Cont CPAP - PEEP - 6. if RD - (SOS) NIV. Target SPO_2 90-95%.
	No desaturation No Bradycardia. Intermittent tachycardia when Baby is irritable & crying.	2) TV = 170ml/kg/day 6ml 2nd hrly Rest 10% TPN
	Baseline HR = 165/min Tachycardia : upto 175/min	3) W/f apnea, Brady desat
	Vitals HR = 168/min RR = 50/min mild SCR (+). BP = 71/37(48)	4) I/O charting 6th hrly
	P/A - Soft mild edustension	5) If fever Spike / persistent tachycardia >180/min consider B/cl & and antibiotic
		Sneha
		NB Sravani @ 12:15am

UHID-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
DOB-03-2026 0 Y 0 M 6 D (M)
VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 9. **PMA:** 27+6

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT | ELBW	
2.	RDS - 1° Surf	
3.	MV - NIV - CPAP	
4.	NNJ	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☑ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: 7.34 \| 37.2 \| 51.4 \| 20.1 \| -5.2 (a c-1

Change over the Last 24 Hours on CPAP - PEEP - 6.

FiO2 - 25%.

No desaturation

Intermittent tachycardia upto 170/min

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 168/min

RR = 50/min

SpO2 - 98%.

BP = 63/34 (45)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : Normal Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:..... N/O 4.2cc/kg/d

GRBS 92mg/dl

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - soft

mild distension.

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

Inj. caffeine.

Glycerine

Tubing - D8

UAC - D8

PICC - D3

Plan of Treatment :

1) Cont. CPAP PEEP-6, Target SPO_2 90-95%

2) TV = 170mb/kg/day - 6mb 2nd hrly

Rest 10% TPN, 20mb/kg 10% ISOP

3) Gas, RBS - BD

4) I/o charting 6th hrly.

5) w/f - Brady, desaturation.

6) w/f fever spike, tachycardia.

clinic

Doctor's Name (Handover given) : Y. Sneha

Signature : Sneha

Date & Time: 3/4/26

Doctor's Name (Handover taken) : [signature]

Signature : Rupanjal

Date & Time: 3/4/26

B-H-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2023 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/4/26 8:01 am		Seen by Dr VJ
		✓ Cont CPAP
	- Temp spikes 2 episodes 99.9; 99.4	✓ ~~Bgas~~ Blood gas - OD & SOS
	- No vomiting, aspirate	✓ Start SSPT
	Stool plassed - Full	✓ Feed 7 - 7ml - 2hourly
	- Tumy - Soft	Constant
		✓ - Mouth care c̄ EBM
	Tubing - D8 UAC - D8 Pice - D3	✓ NP1 - today. TRACE (R) & inform
	- Grade - 1 CPAP injury	- Monitor clinical signs of sepsis.
		Rupanjal
		Noted by Sravani @ 8am 03/04/26.

Dr. VIJAYANAND JAMALPURI
Reg. No: 40529

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Afternoon Rounds	
3/4/26		
1:30pm	Fever spikes → No.	Plan
	on CPAP → 6	
	no desat, brads	→ Continue CPAP → 6
	P/A - Soft, distended	→ Target SPO_2 90-95%
	Stools → No	
	Aspirates → Nil	→ TV = 170ml/kg/day
		7ml Q2hrly on constant
	HR - 167/min	Rest 10% TPN
	SPO_2 - 95%	
	BP - 65/39/48	→ Gas OD
	U.O	GRBS BD
	GRBS.	
		→ Continue SSPT
	Under SSPT	
		→ w/f fever spikes,
		tachycardia, clinical
		signs of sepsis
		→ Stochast obtained
		→ monitor vitals

NB
Swetha
012824
@
1.30pm.

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 6 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		TPN
		- $L_1 A_2 Na_4 K_0 P_{0.4}$
		MVI, celcen.
		Case seen by Dr Nilesh
3/4/26 2:00pm	Grade - 2 CPAP injury	- Change to CPAP ⊂ Ram's -
		- ↑ flow. 7 L/min.
3/4/26 7:20pm		Seen by Dr. VJ
		Plan:
		- continue CPAP - 6 ⊂ RAM'S
P/A - soft		- w/f clinical signs of sepsis, fever spikes,
		- Trace peripheral smear

NB
Swetha*
012824
@ 7.20 pm.

BAH-00652011 IP5[illegible]171[illegible]
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/4/26 9:20 AM	EPT / ELBW / RDS /	Seen by VJ Sri
	Feed intolerance	① cont CPAP
		6cm
		flow 8l/min
	No fever spikes	② gas UD
		③ TV = 180ml/kg/day
	on examination -	8ml Q2H (FF = 15ml)
	no increased precordial	constant feeds
	activity	④ I/O Q8H
	tummy soft	⑤ GRBS BD
		⑥ ~~[illegible]~~
	Tubings D9.	
	UAC D9	
	PICC D4.	
	Dr Abhinya	Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 10 **PMA:** ~~29~~ 28wks

Term ☐ **Preterm** ☐ Gestation : 26+4wks Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	
2.	RDS - 1° Surfactant	
3.	MV - NIV - CPAP	
4.	NNJ	
5.		
6.		

Today's Weight : B.wt = 0.950 ⇒ Not checked

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Baby on CPAP with Rams
PEEP-6
FiO_2 - 25%.
No Bradycardia
No desaturation

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 162/min
SpO_2 = 93%
BP = 52/35 (MR)
No further fever spike

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : Normal Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... U/O = 2.8cc/kg/hr

+67.4mb

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Inj. Caffeine
	2.			Glycerine Tubing - D9
	3.			UAC - D9
				PICC - D4

Plan of Treatment :

1) Cont CPAP with Rams PEEP-6
Target SPO_2 90-95%, flow 8 l/min

2) Gas - OD
GRBS - BD

3) TV = 170mb/kg/day
7mb 2nd hrly OG constant
10% TPN

4) w/f fever spikes, Tachycardia
clinical sign of seps

5) I/O charting 6th hrly

6) monitor vitals

Doctor's Name (Handover given) : Y. Sneha

Signature : Sneha

Date & Time: 4/4/26

Doctor's Name (Handover taken) : Rupayah

Signature : .....

Date & Time: 4/4/26

BAH-00852011 IP5-11171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/4/26 @ 12:20am	Afternoon Rounds	
	Baby on CPAP with Rams	Plan
	PEEP - 6.	1) Cont CPAP PEEP-6 with Rams
	flow = 8L/min	Target SPO_2 90 - 95%
	⊙ No Bradycardia / desaturation	2) TV = 170mL/kg/day
	No aspiration.	8mL 2nd hrly
	No vomiting	OG feeds Constant.
	feeding @ 8mL 2nd hrly	Rest 10% TPN (TF = 15mL)
	vitals HR = 164/min	3) w/f - fever spikes clinical signs of sepsis
	RR = 50/min	
	mild UCR (+)	
	No tachypnea	
	Baby - Pink.	4) I/O charting 8th hrly
	SPO_2 - 95%	5) Gas - OD
	BP - 65/31 (43)	GRBS - BD
	P/A - soft.	6) w/f - apnea, Brady desaturation
	looking loopy	
		Sneha

Noted By Keerthi

BAH-00852011 IP5011171944
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 6 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/4/26 @3:10pm		Seen by Dr. VJ
		1) CPAP to continue
		2) ↑ feeds 1ml 12th hrly
		~~3) SBR, Sr. elec, TFT.~~ To
		3) monitor SBR, Sr. elec in the gas
		4) Gas OD GRBS BD
		Sneha
		Noted By Kowshik

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 10 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	NIGHT	ROUNDS
4/4/26		Plan
	On CPAP → 6	
11PM		→ continue CPAP → 6
	No breads, desat	
		→ TV - 120ml/kg/day
	P/A → soft,	8ml Q 2hrs OG. (Constant)
	tolerating feeds	Rest 10% TPN
	Hx 163	→ monitor for fever
	SPO2 - 98%	spikes
		→ Flochart 06hrs
		→ Cas OD
		GRBS BD
		tf (FAOO)
		noted By
		Dageshi
		69990

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 10 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/4/26 9PM	Night Rounds	
	On CPAP 6cm/28%	
	HR - 165/min	Plan
	RR - 66/min	(1) cont CPAP-6
	SpO_2 - 94%	(2) TV = 180ml/kg/day
		14ml Q2H
	PA - soft, non distended	(3) consider supp t/m
	tolerating full OG feeds	(4) (Rx) PICC line removal t/m
		(5) Gas/OD
		GRBS

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 14 **PMA:** 28+4

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / EUBW	NNJ.
2.	RDS - 1° surf	
3.	MV → NIV → CPAP	
4.		
5.		
6.		

Today's Weight : 860 gm (↓ 10g) Bt wt = 950gm.

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... CPAP 6cm / 21%
tolerating well
No brady desat
Min SCR (+)

CARDIO VASCULAR SYSTEM

Plan of Care : HR-163/min
SpO2 98-95%.
RR - 54/min
BP - 44/40 (48)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : (N) .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : 173.1 / (+/-) 78 Output : +95 ml/k/d Urine Output 3.4 ml/kg/hr Stools : + +

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 14ml Frequency: Q2H.

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination: Soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

7/4 - T3 - 78.36

T4 - 6.06

TSH - 8.50

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days	
1.	Fluconazole (P)		Inj Caffiene
2.			Glycerine Supp.
3.			PICC D8
			Tubing D3

Plan of Treatment :

1. cont CPAP 6cm / FiO_2 to target SpO_2 90-95%.
2. TV = 180ml/kg/day → 14ml Q2H full OG. (full feed)
3. (RW) PICC line removal today
4. Gas OD
   GRBS OD
5. consider suppliments today.

Doctor's Name (Handover given) : Dr Abhishwarya

Signature : [signature]

Date & Time: 8/4/26

Doctor's Name (Handover taken) : Sneha

Signature : [signature]

Date & Time: 8/4/26.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/4/26 @10AM	EPT / ELBW RDS	Seen by Dr. Vijayanand 1) Cont CPAP . PEEP-6 . 2) Blood gas alternate day . 3) Start KMC . 4) Remove Picc after vancomycin dose . 5) R/v fortification T/m 6) Nutritional assessment T/m Sneha . noted by Dau @10am
8/4/2026 @2pm	Afternoon Rounds Baby on CPAP PEEP-6 No Bradycardia / desaturations Tolerating full feeds well Abdomen - Soft.	Plan 1) Cont CPAP - PEEP - 6 Target SPO2 90-95% 2) TV = 180ml/kg/day 14ml 2nd hrly full OG feeds 3) Start KMC.

Dr. VIJAYANAND JAMALPURI Reg. No: 405/25

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
Continue	Vitals HR = 162/min RR = 67/min SPO_2 - 98% BP = 69/42 (50)	4) Blood gas alternate day GRBS-OD 5) R/v for fortification Tomorrow
	P/A - soft. No aspirates Stool passed Urine output (+)	6) I/o charting 6th hrly 7) Nutrition assesment T/m.
		8) W/f - apnea, Bradycard 9) Start KMC
		noted by Davis @ 1pm Sneha
8/4/26 @ 3:25pm.	Picc line Removal Notes.	
	Under aseptic precautions Picc line removed tip Noted. No Bleeding Vitals Stable through	
	1 epi of Bradycardia with desaturation required ↑ FIO_2. upto 50%. Settled ↓ FIO_2 to 25%.	Sneha

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

(68)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/4/2026 16:00pm		Seen by Dr Vijayanand
		- Cont CPAP, PEEP-6
		- Blood gas - alt day and SOS
		- Full feeds
		- W/F apnea, brady desat
		noted by Dais @ 4pm
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526 Rupjal.
8/4/26	NIGHT ROUNDS	
	on CPAP-6	Plan
	No brady desat	→ Continue CPAP-6
	P/A → Soft, tolerating feeds	→ Continue on feeds ordinary
	HR-156/-	
	RR-48/-	→ Blood Gas → Alt/day
	SpO_2-95%	
		→ GROSS OD
	No BMC Given	
		→ P/V fortification T/m
		noted by Sushmita 8/4/26 at 9pm
		[signature]

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/4/26 20:41		S/B Dr. Nilesh
		- Cont CPAP - 6 cm
		- Gas - alt day
		noted by [illegible] 8/4/26 at 20:41 pm Rupnya

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 17 ..... PMA: ~~28+~~ 29

Term ☐ Preterm ☑ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Ext Pt / ELBW	Coagulopathy
2.	RDS → MV - 1° surfactant →	leucopenia
3.	NIV - CPAP	
4.	NNJ	
5.		
6.		

Today's Weight : 0.920 (↑29 gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fi_2..... Oxygen : ..... L/min

Last CXR : ..... Spo_2: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

On CPAP → ~~6.5~~ 7.0.

2 times brady, desat → self Pickup ↓ Changed to CPAP → 7

HR - 163/-

RR - 58/-

SPO_2 95%

BV - 59/41/48

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination : .....

Sedation NO

Last Neurosonogram : (N) ..... Any Seizures NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

P/t → softy tolerating feeds

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Fortification
Syrup caffeine
Glycerin

Plan of Treatment :

Plan

→ Continue CPAP 17

→ target SPO2 90-95%

→ TV - 180ml/kg/day 1 ml Q2hrs OG + Fortification

→ Same

→ I/O chart obtaining

→ Gas Alt/day

→ GRBS OD

Doctor's Name (Handover given) : FAIZ

Signature : .....

Date & Time: 11/4/26

Doctor's Name (Handover taken) : Rupanjali

Signature : .....

Date & Time: 11/4/2026

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/4/2026 9:53 am		Seen by Dr VJ
		- cont CPAP - 7
		- cont SSPT X 24h
		- Blood gas alt dar
		- Monitor Bilirubin in blood gas.
		- R/V KMC T/M.
		R/V caffein next week
		Rupojal.
11/4/2026 12	Afternoon	Adv
	- on CPAP - 7 cm	- Check temp → inform
	- No Apnaic episode since morning	- W/F full tachycardia. apnea, brady
	- currently	- continue CPAP - 7
	HR - 137 /min	- TV - 180 cc / kg / dar
	SPO2 = ~~99~~ 96%	14 ml - 2 hourly OG + fortified
	RR = 40 /min.	- continue SSPT x 24h
	• Baby tachycardia	- Gas alt dar
	Not active	- GRBS - OD
	• Temp = 99.8	
	BP = 65/51 (mmHg)	

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

Dr. Rupojal
Rupojal

Noted By
Nirupama
012767

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/04/26 15:14 pm	persistent tachycardia Temp - 99.9 B	Plan - R/V CBP CRP Blood c/s Rupri
		Seen by Dr. VJ
11/4/26 3:30pm		Plan - continue CPAP, PEEP - 7 - If further ↑ RD, apnea / Brady ↓ Change to CPAP c̄ Mask. - If further for clinical Signs of sepsis R/V CBP, CRP, Blood c/s Dr. Anusha

Noted By Nirupama 012767

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	11/4/26 Night rounds	
	10:40pm	seen by Dr. Nilesh
		Plan:
	- One episode of small vomiting yellow,	- continue CPAP, PEEP-7
		- continue full OG feeds
		- w/f apnoea, Brady, Desaturation
	- No Brady,	
	- No Desaturation	- If any signs of clinical sepsis ↓ R/V to send CBP, CRP, Blood cls.
	Temp - 99.1°F at 7:00pm	
	P/A - soft No distension	- If further vomitings ↓ R/V & withhold MMF
		Noted by [signature] 01347 11/4/26 10:40pm

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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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

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

17/4/26

Rainbow® Children's Hospital
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 23 PMA: 29+5

Term ☐ Preterm ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPt / EBW.	Hyponatremia.
2.	RDS – MV – NIV – CPAP – NIV	
3.	MV	
4.	Apnea of prematurity	
5.	Suspected Sepsis	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On PTV+VTV (5ml/kg)

HR-151/m PIP-20/22

RR-38/m PEEP-6

SPO2-98% RR-40/m

BP-63/41/52 H-6.32

CARDIO VASCULAR SYSTEM

Plan of Care :

Baby was on NIV → Had ↑ FiO2 requirement, had ↑ PCO2 65 → Baby intubated

CNS

Neurological Examination : .....

Sedation Fentanyl

Last Neurosonogram : (N) Any Seizures NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

P/A → soft, distended NPO.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Meropenem	D2	Inj Caffeine
	2.			currently NPO
	3.			Glycerine

Plan of Treatment :

→ Continue current mode of ventilation

→ Target SPO2 90-95%

→ TV - 1 bolt/kg/day 10% Isop NPO.

→ Bloods as Planned alongwith Gas

→ No chart Obtain

→ Gas, GRBS } BD

→ Meticulous Asepsis

→ Monitor vitals

Doctor's Name (Handover given) : FAIZ

Signature : [signature]

Date & Time: 17/4/26

Doctor's Name (Handover taken) : Y Sneha

Signature : Sneha

Date & Time: 17/4/26.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/4/26 7:20 AM		Seen by Dr VJ
	Extreme Preterm/ ELBW RDS/ Evolving CLD Suspected Sepsis.	→ Continue Current ventilation
		→ Blood Gas BP & Sos
	Pulses → Normal volume. Precordium → Moving All limbs	→ Blood ~~Suga~~ Sugar with Blood Gas & Sos.
	Abdomen → Soft, distended.	→ Continue Pentanyl
		→ Continue Glycerine Suppository
		→ Target MBP → 32-36 mmHg
		→ TV-150cc/kg/day.
		~~x~~ → X-Ray Abdomen today
		x → USG Abdomen today
		→ R/V feeds after X-Ray Abdomen.

Noted by Vidya 021143 2-20pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/4/26	Continued.	
7:34 Am		→ SBR → ask in same sample
		→ Trace blood c/s
		Noted by vidya 021143 17/4/26 @7:34am
17/4/26 @12:45pm		Discussed with Dr. VJ Sir
	Chest & Abdomen x-ray ↓ Bowel loops (N)	1) Start Cyclical feeds 3ml/hr < 4hr on, 2hr off
	USG-abdomen-(N)	2) Cont SSPT with eyes & genitalia covered for 24 hours.
		Sneha
		Noted by Diffi 17/4/26 @12:45pm

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/4/2026 @ 1:30pm.	Afternoon Rounds	
		Plan
	Baby on ventilator. PTV + VG mode	1) Cont. Current Ventilator. Target SPO_2 90-95%.
	VG = 5ml/kg	
	PIP = 21/22.	2) TV = 150ml/kg/day
	PEEP = 5	3ml/hr 10% ISO-P
	RR = 40/min.	4hr on
	Ti = 0.32	2hr off
		cyclical infusion feeds
	⊙ Thick ET Secretions (+)	
	chest x-ray =	3) Target MBP 32-36mmH
	last gas:	4) Blood Gas } BD and
	7.45/37/49.6/25.9/1.7	GRBS } SOS
	lac = 1.9	
	Cardiac:	5) Trace B/C/S - final
	No tachycardia	
	No Hypotension	6) I/O charting 6th h
	Vitals HR = 152/min	
	RR = 45/min	7) SSPT with eyes &
	SPO_2 - 99%,	genetilia covered for
	BP = 61/34(43)	24hrs.
	P/A - Soft	8) Monitor vitals
	Non distended	9) Send ETC/S in next Suction
	B/C/S - No growth - 24hrs	Snehan

Noted by Dipp 017039 @ 1:30pm

BAH-00652011 IPS-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/4/26 @ 2:50 PM		Seen by Dr. VJ 1) Continue Current Ventilation 2) Blood gas BD & SOS 3) feeds 3ml/hr ↑ 4hrly 2hrly ↓ if tolerating ↑ 1ml each cycle. 4) Urine for CMV PCR quantitative. Sneha Noted by Dr. VIJAYANAND JAMALPURI Reg. No. 40526 17/4/26 @ 3pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/4 @9:37pm	Night rounds	
	D23 / 26+4wkel 960gm	
	U → baby on PTV mode	
	VG (5ml/kg)	plan
	rate - 40 → 35	
	PMAX - 22/21	→ ↓VG (4.5ml/kg)
	FiO_2 - 25%	continue PTV-mode
		Target SpO_2 - 90-95%
	gas - 7.41/44/3.2/26.9	→ TV - 150ml/kg/day
		feed - 4 ml/hr (4 hrs on 2 hrs off)
	C → HR - 149bpm	
	BP - 52/33 (39)	↑ 1ml each cycle
	O/O - 2.9ml/kg/hr	
	NO ionotropes	→ SSPT x 24hrs
		→ urine CMV] Trace
	P/A - NO distension	ETCS
		→ gas - BD
		GRBS
		→ monitor vitals
		Noted by [signature]
		vidya 021143
		17/4/26 @9:40pm

BAH-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

18/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 24 PMA: 29+6 wks

Term ☐ Preterm ☑ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	RDS - MV - NIV - CPAP
2.	~~RDS~~	
3.	Apnea of prematurity	
4.	CMV	
5.	Suspected sepsis	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP 23/20 PEEP 5 VG 5→4.5 Rate 40→35 Fio ..... Oxygen : ..... L/min

Last CXR : ..... Spo: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: 7.27/59.3/0.8/24.3

Change over the Last 24 Hours ..... Hb - 8.7

CARDIO VASCULAR SYSTEM

Plan of Care : continue current ventilation

CNS

Neurological Examination : .....

Sedation ..... fentan → stop

Last Neurosonogram : (N) Any Seizures NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... NO obvious distension

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Meropenam	D_3
2.		
3.	–	

INJ LAFFEINE
glycerine
3% NAcl
orofer XT

Osso pan-D
vit D_3
Tubing - D_{12}
Peri kon - D1

Plan of Treatment : ① continue current venti / target SpO_2 - 90-95%

② TV - 160ml kg/dg - 10% ISOP
feed - 6ml/hr < 4hr on / 2hr off.

③ Gas, GRBS - BD / SOS

④ I/O charting 6th hrly

⑤ TO trace B/cls, ETcls.

⑥ Trace urine CMV PCR.
Monitor vitals

Doctor's Name (Handover given) : ~~Y. Sneha~~ Dr. Mamtha

Signature : ~~Sneha~~

Date & Time: 18/4/26

Doctor's Name (Handover taken) : Dr. Sneha

Signature : Y. Sneha

Date & Time: 18/4/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/4/26 @ 9:30am		Seen by Dr. VJ
	EXPT/ELBW/RDS Evolving (LCD)	1) continue Current vent RR 35 → 40. VG = 4.5mL/kg
	Resp: PIP = 22/23. VG = 4.5mL/kg	2) Blood gas - BD.
	P/A - soft.	3) Trace - Blood c/s ET c/s.
		4) R/V for full feeds in the evening
		5) R/V - antibiotics
		6) ET - Suction
		7) I/O chart 8th hrly
		8) Drug chart fluid chart
		9) Trace urine CMV PCR
		Noted by Diff 017039 18/4/26 @ 9:50 am Sneha

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/4/26 @ 1:00pm	Afternoon Rounds	
	Baby on Ventilator. PTV + VG	Plan
	VG = 4.5mL/kg	1) Cont. Current ventilation
	PIP = 20/23, PEEP - 5	Target SPO_2 90 - 95%
	Ti = 0.32, Rate - 40/min.	
	FiO_2 - 23%.	2) TV = 150mL/kg/day
	↓	feeds 10% ISO-P.
	Last Gas:	
	7.27 / 59.3 / 45.1 / 24.3 / 0.8	7mL/hr
	Lac - 1.2	4hr on, 2hr off
		↑ 1mL feeds
	Cardiac No tachycardia	each cycle
	No desaturation	
	No Hypotension	3) Trace - final B/c/s
	HR = 149/min	ET c/s report
	RR = 39/min.	Trace wine CMV PCR.
	SPO_2 - 92%.	4) Blood Gas } BD & (SOS)
	BP = 71/30 (45)	GRBS
	Neuro - Normal.	5) I/O charting 6th hrly
	Abdomen - Soft, mild distension	6) R/V on antibiotic
	Not passed.	after c/s
	on ~~6mL~~ 7mL/hr	7). Monitor vitals.
	4hr on, 2hr off	

Noted by Diffy 017039 18/4/26 @1 pm

Sneha

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

BAH-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/4/26 @ 2.20pm		Seen by Dr. VJ 1) Cont Current ventilator 2) Blood gas - BD 3) ET Suction as Needed 4) Feeds ↑ 1ml each cycle 5) T/m - CBP. Sneha Noted by Dipti 017039 @ 2.30pm Dr. VIJAYANAND JAMALPURI Reg. No: 40526 ~~To~~ Send ~~CBP~~ ~~CRP~~ B/C/S. Noted by Dipti 017039 @ 7pm Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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(iii)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/4/2026 @ 9:30pm	Night Rounds	
	Resp:	Plan
	Baby on Ventilator	1) Continue current
	PTV + VTV.	Ventilation
	VG = 4.5mb/kg	Target SPO_2 90-95%.
	PIP = upto 20/23	
	PEEP - 5.0	2) TV = 150mb/kg/day
	Rate - 40/min.	8mb/hr 4hr on 2hr off; Rest 10% ISO-D
	FiO_2 - 23%.	
	↓	
	Thick ET Secretions (+)	
	Copious.	3) ↑ 1mb each cycle
	Last Blood gas:	(TF = 9mb/hr)
	7.29/58.5/42.7/24.8/	
	1.4	3) Trace - final B/c/s
	Lac - 2.1.	Trace → 2nd B/c/s
	Cardiac:	FT c/s
	No tachycardia.	4) R/v on LRBC
	No Hypotension.	transfusion
	HR = 155/min.	
	RR = 53/min	5) Blood gas } BD & SOS
	SPO_2 = 97%.	GRBS }
	BP = 72/33(47)	6) R/v on antibiotic
		after c/s.
	P/A - Soft	7) I/o charting
	feed - 8mb/hr.	8) w/f apnea, Brady,
	V/O = 3.1cc/kg/hr	desaturation
	+36.9ml	

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/4/26 @ 10am		1 RBC transfusion at 6am Keep things Ready. Donot Give feeds Keep NPO from 4am. Noted by vidya 021143 18/4/26 @ 10am Sneha

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
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25-03-2026 0 Y 0 M 23 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 11 **PMA:** 28+1

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age:.....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT, ELBW	
2.	RDS 1° S	
3.	MV – NIV – CPAP	
4.	NNJ	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....SpO_2:.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Baby on CPAP c
Ram's peep – 6, FiO2 to target
SPO_2 90–95%.

NO brady, desat

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 144
SPO_2 = 97-1.
BP = 61/27 (40)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : .....Any Seizures..... NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

- Stools passed
- U/O 4.2cc / kg / day

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Inj Fluconazole	(P)
2.		
3.		

- Inj Caffeine citrate
- Glycerin suppositary
- P

Picc line Dc - Day 1 tubing

Plan of Treatment :

- Plan to cont. CPAP → 6 cm
- TV - 170 cc / kg / day - 9 ml - 2 hours OG feeds.
  Rest 10% TPN
  (Increase feed 1 ml 12 hourly).
- Gas - OD
  GRBS - BD
- W/F fever, clinical instability
- I/O charts

Doctor's Name (Handover given) : (P)

Signature : Rupojna

Date & Time: .....

Doctor's Name (Handover taken) : N. Ru

Signature : N. Ru

Date & Time: 25/11/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 10 D (M)
Dr. VIJAYANAND JAMALPURI

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...ESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by DWS
5/4/26		
7:27 AM		→ Continue CPAP
		→ 1mEq/kg of KCl.
	No vomit	
	minimal aspirate	→ S/E } in evening. SBR }
	O/E	→ GRBS BD.
	P/A → 30ft	
		→ Feed 1/ml 2 hrs
	P/C line → Day 6.	
	Tubing → Day 1	→ TV - 180 cc/kg/day
		(PAIZ)
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
		Noted by Sravani @ 8am 5/04/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 10 D (M)
Dr. VIJAYANAND JAMALPURI

S/o Sri Vidya. (5)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
5/4/26	Afternoon Rounds	
5pm	DOL-11 / 26+4 → 28+1 /	
		Plan:
	On CPAP	
	6cm, FiO_2 = 23%. 1)	→ Continue CPAP
		PEEP - 6, FiO_2 = 23%.
	Vitals: SpO_2 - 95%.	
	HR - 159/min 2)	TV - 180 ml/kg/day.
	BP - 72/33 (47).	10ml @ 2 Hourly
	RR - -	↑ 1ml @ 12 Hourly
	Temp - 36.5°C. 3)	Rest 10% TPN.
		Gas - on
	S/E: P/A - soft, no distension	
	NG aspirates - Nil 4)	4RBS - BD
	Stool - green - (3).	
	Urine - passed. 5)	S. Electrolytes, SBR } Trace reports
	6)	Investigations of Kr. Correction given
		N. Ramakrishna
		Noted By Dageshwari 09990

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 10 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
5/4/26 11pm.	Night Rounds S/B Dr. Nikesh Sir DOL = 11/26+4 days. Sr. Bili = 8.8 (0.1) 8.7.	Plans: • Continue CPAP PEEP 7, FiO_2 = 28% • TN = 180ml/kg/day. Target feed = 14ml. Now 10ml/2nd hrly 11ml BD. GRBS, Cues – OD SSP1 to continue • Monitor vitals. Dr. Ramya Noted By Doctor's

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

Rainbow® Children's Hospital
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

6/4/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 12 **PMA :** 28+2.

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age : .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT1 ELBW.	
2.	RDS - 1°S	
3.	MV - NIV - CPAP	
4.	NNJ.	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day of Vent : .....

Mode of Ventilation : HFNC ☑ CPAP ☐ Conventional Ventilation: SIMV ☐ A/C ☐ VG ☐ HFOV ☐ INO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP 7 VG..... Rate..... Fio_2 28% Oxygen..... L/min

Last CXR : ..... SPO_2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG

Change over the Last 24 Hours .....

No Desaturation, Bradycardia.

Retraction Present — PEEP 6 → 7

CARDIO VASCULAR SYSTEM

Plan of Care :

Sp 3 - 95.1.

HR - 161/min

BP - 63/30 (47)

CNS

Neurological Examination : .....

Sedation NO

Last Neurosonogram : ..... Any Seizures NO.

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain ..... Head Circumference .....

Input ...../(+/-)..... Output : ..... ml/k/d Urine Output 3.3 ml/kg/hr Stools Passed.

IV Fluids - Type of IVF : ..... @ ..... ml / hr .....

Feeding : EBM ☐ Formula ☐ Donor BM ☐ Volume ..... Frequency .....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories : .....

Abdominal Examination : Soft.

NG aspirates - NIL.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

tcBil = 6.7

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis Screen : .....

Blood Culture ☐ Urine Culture ☐ ET Culture ☐ Fungal Culture ☐ LP ☐ CSF : .....

Antibiotic	Sl No.	Drugs	Days	
	1.	Inj. fluconazole	(P)	Inj caffeine citrate
	2.			Glycerine suppository.
	3.			Piccline - D7
				Day 2 tubing.
				UAC - D11

Plan of Treatment :

1. Continue CPAP. PEEP-7 FiO2-23%
2. TV - 180 ml/kg/day. Target feed - 14 ml.
   now - 1 ml @ 2 Hourly ↑ 1 ml BD.
3. GRBS - OD
   Gas - OD
4. SSPT to continue. (started at 10 pm yesterday)
5. Monitor vitals.

Doctor's Name (Handover given) N. Deathosh

Signature : N.M

Date & Time : 06/04/26.

Doctor's Name (Handover taken) [signature]

Signature : [signature]

Date & Time : .....

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Stool - passed	7) Target MBP 27-33mmHg Accept upto 22mmHg Noted by [illegible] 29/3/26 [illegible]
29/3/26 @ 9:30pm	Night Rounds	Seen by Dr. Nilesh.
	Baby on Ventilator Current Selling SIPPV + VG → SIMV + VG VG @ 4.5mL/kg PIP = 15/20. PEEP - 5 ⇓ last gas 7.25/45.6/73/18.6/-6.4 on feeds 2.5mL 2nd h Abdomen - full No distension Vitals HR = 172/min SPO2 = 98% BP = 45/20 (30) Not on wnotro	1) Current ventilation to Continue Target SPO2 90-95%. 2) Wean Rales 3) Tv = 140mL/kg/day ↓ ↑ Tv = 150mL/kg/d. T/m mrng ↓ ↑ feeds = 0.5mL BD 4) NP1 - T/m 5) I/o charting 6th hr ↓ if more Neg Balance ↑ Volume then.

Noted by [illegible] 30/3/26 @ 8pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 3 D
Dr. VIJAYANAND JAMALPURI

(28)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	GRBS - 104mg/dl	Target MBP 27-33mmhg
	U/O = 5.4mL/kg/h	W/f - Brady, desat
	-20mL	
		Sneha

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : D5 PMA : 27+2

Term ☐ Preterm ☐ Gestation : 26+4 Corrected Gestational Age : .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	
2.	RDS - 1 dose Surfactant - MV	
3.	Suspected Sepsis.	
4.	NNJ	
5.	Hypotension.	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation: SIMV ☐ A/C ☐ VG ☐ HFOV ☐ INO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio_2..... Oxygen..... L/min

Last CXR : ..... SPO_2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG

Change over the Last 24 Hours ..... SIPPV+VG → SIMV+VG

VG = 4.5ml/kg

Rate - 40

PIP - 14/22, PEEP - 5

CARDIO VASCULAR SYSTEM

Plan of Care : HR = 164/m MAP - 7.

SPO_2 - 95%

BP = 43/20 (29)

CNS

Neurological Examination : .....

Sedation Fentanyl

Last Neurosonogram : N Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain ..... Head Circumference .....

Input ...../(+/-)..... Output : ..... ml/k/d Urine Output ..... ml/kg/hr Stools .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr .....

Feeding : EBM ☐ Formula ☐ Donor BM ☐ Volume ..... Frequency .....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories : .....

Abdominal Examination : GRBS - 120mg/dl . U/O = 3.1cc/kg/hr - 5.2m

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A soft tolerating well

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis Screen : .....

Blood Culture ☐ Urine Culture ☐ ET Culture ☐ Fungal Culture ☐ LP ☐ CSF : .....

Antibiotic	Sl No.	Drugs	Days
	1.	Meropenem	D_5
	2.	fluconazole	(P)
	3.		

Caffeine citrate

UAC, UVC } D4

Tubing

Incision

Plan of Treatment :

1) Cont. current Ventilation
   Target SpO_2 90-95%
2) TV = 140mb/kg/day < 20mb/kg - 15% ISO-P; 120mb/kg - 10% TPN + 3mb 2nd hrly feed
   ↑ 0.5mb BD
3) Trace - NP,
4) I/O charting 6th hrly
5) Gas - BD
6) GRBS - BD / SOS
7) w/f Brady, desat

Doctor's Name (Handover given) Y. Sneha

Signature : [signature]

Date & Time : 30/3/26

Doctor's Name (Handover taken) Dr Aishwarya

Signature : [signature]

Date & Time : 30/3/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/3/26 9AM.	seen by Dr VJ	
		Plan
		- Continue current ventilation
	Icterus ⊕	- plan for extubation in next 24hours
		- BG - 8-12 hourly Blood sugar.
	Tubing / UAC / UVC | D4	- 'DSPT' - NOW.
	- Incubator → D4.	- Feed 4ml / 2hourly constant
		- I/O - 6th hourly. Chartirr.
		- TV - 160 cc / kg / day.
		- Inj Fluconazole (P) in line
		- Drug chart & fluid chart
		- R/V picc line T/H

Dr. VIJAYANAND JAMALPURI
Reg. No. 40526
Noted By
Nirupama
D/2767

Rupjit

Docu. No. : RCHBH /FRM / CLINICAL / 088

(P.T.O)

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

(29)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/3/26 1PM	Afternoon Notes	
	On SIMV TVg (4.5ml/kg)	
	PIP - 20/16	Plan
	PEEP-5	(1) cont same venti setting
	rate - 50/min	(2) TV = 160ml/kg/day
	SiO_2 - 24%	20ml/kg 15%-150-P; 4ml Q2H constant on feeds (50cc); Rest 10% TPN
	HR-165/min	
	SPO_2 - 97%	
	RR-54/min	
		(3) Gas / GRBS Q8-12H
	tolerating feeds	
	PA-soft, non distended.	(4) cont DSPT
	stools passed.	(5) RW PICC line t/m
		(6) plan extubation t/m.
	1 DSPT	
	(SBR - 10.9)	
	I/O - 27.5/22 (+5.5)	
	U/O - 3.8mlch	
	temp - 36.5	
	86% humidity	
	GRBS - 120mg/dl.	

Dr Abhinaya
Noted By
Rhimpana
0121767

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/03/26	Evening WB	Plan
1530hr	~~~~~	(1). SIMV
		EVG
		↓ Rate 35/min
	Urine - 3.8 ml/kg/day.	(2). Arm for Extubation tomorrow
		(3). R/v Fentanyl in the night
		(4). I/O chart.
		(5) IV Fluids 100ml/kg/day
		(6). Blood gas 6 to 8hr & Blood Sugar
		(7) ~~E~~ ~~SE~~ SBR T/M
		(8). Feeds 5ml/2hr
		Noted By Nirupama 012767
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 3 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/3/26 11PM	Night Round	
	on SIMV+VG (4.0ml/kg)	
	PIP - 22/15	Plan
	PEEP - 5cm	① Cont same vents
	rate - 35/min	② TV = 160ml/kg/day
	FiO_2 - 23%.	20ml/kg 50ml/kg Rest
		157-150-P feeds 107-TPN
	HR - 166/min	
	SpO_2 - 98%.	③ Feeds - 4ml constant
	RR - 53/min	④ ~~Q2H~~ ON EBM
	BP - 42/24 (32)	4 day ~~Q8~~ - Q8H
	(~50th/~25th/~50th)	CVRBS
		⑤ SBR c/m
	Temp - 36.9	⑥ Fentanyl to stop
	Humidity - 81%.	& plan extubation
	CVRBS 113 (~~70~~ TPN	c/m.
	on CVR of +157.150-P)	Noted by
	→ 4.4 + 2.1 = 6.5	Vishnupriya
		01901
	tolerating 4ml constant feed	30/3/26 @11pm
	PA - soft, non distended.	
	passed stools	
	Cvas → 7.208/44.9/17.2/	
	-8.2/.1.1	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/4/2026		CSBDr VJ.
		(1) CT CPAP PEEP-6
		(2) Gas OD
	Pre Ulne - 1/6 CPAP injury	(3) Place CAP, CT SSPT.
		(4) TP N to day (cast 2 days).
		Note by Deeva 019642
6/4/2026 @ 12:30pm	Afternoon Rounds	Plan
	Baby on CPAP PEEP-7.	1) Cont CPAP - PEEP-7.
	flow - 7L/min	Target SPO2 90-95%.
	on Rams Cannula.	⊙ Keep -> Rams Cannula.
	FiO2 - 25%.	properly
	ongoing SSPT.	
	mild SCR (+)	2) TV = 180mL/kg/day
	No Bradycardia /	12mL - 2nd hrly
	1 desaturation epi	full OG feeds
	-> Vitals	↑1mL BD (TF=14mL)
	HR = 159/min	Rest 10% TPN
	RR = 40/min	
	SpO2 - 97%.	3) GRBS - OD
		Gas - OD
	P/A - Soft	
	No distension	4) SSPT, to continue

Dr. VIJAYANAND JAMALPURI Reg. No: 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

(5)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		5) I/o charting 6th brly
		6) w/f - RD abd. distense Brady, desaturation
		Noteby Deeva 01a6u2 Sneha
6/4/26 @ 3pm		Seen by Dr. VJ
		1) Cont - CPAP
		2) Blood Gas OD
		3) SBR, Ca^{+2}, PO_4^{-2}, ALP } T/m (R/v to check TFT)
		4) Tml BD
		5) R/v to Remove UAC, T/m
	Noteby Deeva 01a6u2	Dr. VIJAYANAND JAMALPURI Reg. No: 40526 Sneha

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/4/26 @ 8:30 PM	Night Rounds	Plan
	Baby on CPAP. PEEP-7, Rams Cannula FiO_2 = 24%.	1) Cont CPAP. PEEP-7. Target SPO_2 90-95%.
	No Bradycardia, No desaturation. ⇒ No Resp. distress	2) TV = 180 mL/kg/day 12 mL 2nd hrly OG feeds. (↑/mL BD) Rest 10% TPN
	ongoing phototherapy Tolerating feeds well	3) SBR, Sr. Ca^{+2}, PO_4^{-2}, ALP, T.F.T., Blood gas } T/m.
	Vitals HR = 167/min RR = 40/min SPO_2 = 94%. BP = 60/30(40)	4) ~~w/f = RD~~, T/o charting 6th hrly
	P/A = Soft. Tolerating feeds No distension	5) w/f = RD, Abd. distem Brady, desat.
		6) R/v to remove UAC T/m. ~~Blood gas~~

Noted By Kaushik
Sneha

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/24/26 @11:45pm		Seen by Dr. pratin
		1) Nasal Suction.
		2) ↓ CPAP PEEP - 6.
		3) Attach ECG leads
		Sneha
		Noted by Kowsi

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

7/4

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 13 ..... **PMA:** 28+3

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	NNJ
2.	RDS - 1° Surfactant.	
3.	MV - NIV - CPAP	
4.		
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio_2..... Oxygen : ..... L/min

Last CXR : ..... Spo_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Baby on CPAP PEEP-6.
Target SPO_2 90-95
No Bradycardia
No desaturation

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 156/min
RR = 53/min
SPO_2 = 93%
BP = 64/30 (43)

Tolerating feeds well

CNS

Neurological Examination : .....

..... Sedation .....

Last Neurosonogram : N ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... U/O

GRBS -

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft, No distension

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Fluconazole	(P)	Inj. Caffeine citrate
	2.			Glycerine Supposity
	3.			Piccline - D7
				Tubing - D2
				UAC - D12

Plan of Treatment :

1) Cont. CPAP PEEP-6
Target SpO_2 90-95%.

2) TV = 180 ml/kg/day - 13 ml 2nd hrly
full OG feed (TF = 14 ml)
Rest 10% TPN

3) Trace - SBR, Ca^{+2}, PO_4^{-2}, ALP, TFT

4) I/O chaiting 6th hrly

5) R/V to remove UAC today

6) w/f - RD, abd. disten, Brady, do

Doctor's Name (Handover given) : Y. Sneha

Signature : Sneha

Date & Time: 7/4/26

Doctor's Name (Handover taken) : PAIZ

Signature : [signature]

Date & Time: 7/4/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 11 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr VJ
7/4/26		
		Plan
9:25AM	EXPT/EBW/RDS	
		→ ~~Change to HFNC~~
		~~5~~ ~~6~~ lt/min Continue CPAP
	D7 → PICCline	→ Blood Gas OD
	UAD - D13	
	Tubing → D2	→ Trace thyroid
		→ R/V Kmc T/m
		→ Remove ~~Arterial~~ UAC line
		→ R/V PICCline T/m.
	noted by Davis @ 9:30am	→ Drugchart Fluidchart
		(FALS)

Dr. VIJAYANAND JAMALPURI
Reg. No. 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Afternoon Rounds	
7/4/26		
		Plan
1:45pm	On CPAP → 6	
	No bradys, desat	→ Continue CPAP → 6
	P/A → soft, tolerating feeds	→ Target SPO2 90-95%
	HR - 163/min	→ TV - 180ml/kg/day
	RR - 59/min	14ml 02 hrs OG
	SPO2 - 93%	
		→ Tire thyroid profile
		→ Bochar/Obhely
		→ Blood Gas OD
		→ R/V PICC line T/m.
	noted by Davis @ 1:45pm	
7/4/26		Seen by PRVJ
3:36pm		→ Continue CPAP → 6
		→ R/V PICC line T/m
	noted by Davis	→ R/V KMC, fortification T/m

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

Rainbow® Children's Hospital
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 15 ..... **PMA:** 2 28+5

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Extreme preterm	NNJ
2.	ELBN	
3.	RDS	
4.		
5.		
6.		

Today's Weight : 0.869 (↑ 9gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo2: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours On CPAP c̄ Ram's 6cm

- ~~No brady, desat, Apnea~~

One episode brady - self sickness

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 153 • No tachycardia
SPO_2 = 99% • wide pulse pressure
RR = 50 • hyperdynamic precardium

CNS

Neurological Examination : .....

Sedation .....

Last Neurosonogram : N ..... Any Seizures NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

- Full feeds
- Feeds tolerating, abd - soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture☐ ET culture☐ Fungal Culture☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Syp caffeine
Glycirine.

Plan of Treatment :

- Continue CPAP - @ 6cm - far
- TV - 180 cc / kg / dar - 14 ml - 2hourly
  full OH - 2hourly
- Blood gas - alt - day
- GRBS - OD
- R/V to start KMC
- R/V to add fortification
- W/F Brady, ~~desat~~ desat, apnea

Doctor's Name (Handover given) : .....

Signature : Rupinjal

Date & Time: 9/4/26.

Doctor's Name (Handover taken) : Dr. Aishwarya

Signature : .....

Date & Time: 9/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/4/26 9:51 am		Seen by Dr. VJ
		- cont CPAP
		- Blood gas - alt dar
		- Start KMC now.
		- Start fortical
		(A) fortification 0.5g
		1 sachet - 14ml/2hour.
		- "MONITOR SBR in GAS"
		Dr. VIJAYANAND JAMALPURI Reg. No. 10626
9/4/26 12PM	Afternoon Rounds	
	on CPAP 6cm / 30%.	Plan
	1 e/o desat, no brady.	(1) cont CPAP 6cm
	SpO_2 - 93%.	FiO_2 to target SpO_2
	RR - 42/min	90-95%.
	HR - 170/min	(2) TV = 180ml/kg day
	Tolerating full feeds	14ml Q2H OG
	PA - soft, non distended.	+ 0.5gm fortification
		(3) KMC from t/m.
		(4) w/f further desat
	Parents req. to do KMC	ep.
	from t/m.	

Notified by Nirmpal 012760

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 12 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/4/26	CB/B Dr-VS	
		Adv
	1 Episode of Bradycardia	① continue CPAP @ 6cm
	↓	
	self picking.	② full of feeds
		③ KMC
9/4/26 4:35pm	on 180ml/kg/day	
	c̄ MMF fortification	Plan
		1) review adding
	Tachycardia - 180-190/min	Ossopan D
	Baseline HR - 160-170/min	Vitamin D3
	Temp - 37.8°C	
	incubator temp: 36.7°C	2) Change temperature probe ↓ monitor temp
	perfusion - good	
	peripheries - warm	
	Activity - good	
		3) Inform if persistent tachycardia / [illegible] fever
		[signature] Dr Sushma

Dr VIJAYANAND JAMALPURI
Reg. No. 40526

Noted By Sushma

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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GRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/4 @ 2:59 AM	Night rounds	
		Plan
	baby hemodynamically	
		Continue CPAP-6
	stable on CPAP-6	Target SpO_2 90-95%
	FiO_2 - 2%	→ TL - 180 ml/kg/day
		14 ml 2 hourly
	C → HR - 161 bpm	+ 0.5 gm fortification
	Bp - 65/49 (54)	
	U/O - 4.4 ml/kg/h	→ KMC - TLM
	P/A - tolerating feeds	→ monitor labs
		Dr. Manilla
		Noted By Nirupama 012767

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 15 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 16 ..... **PMA:** 28+6

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Extreme Preterm	NNJ
2.	ELBW	
3.	RDS	
4.		
5.		
6.		

Today's Weight : 891 gms (22 gms ↑)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fi_2..... Oxygen : ..... L/min

Last CXR : ..... Spo_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On HFAP 96.

HR - 163/min

RR - 48/min

SPO_2 - 93%

BP - 68/44/53

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination : .....

..... Sedation No

Last Neurosonogram : ..... Any Seizures No

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... P/A Soft .....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			MMF fortification
	2.			Syrup caffeine
	3.			Glycerine

Plan of Treatment :

Plan

→ continue CPAP 6

→ target SPO2 90-95%

→ IV-180 cc/kg/day 1 ml Q2 hrly + 0.5 gm fortification

→ R/V lame

→ monitor vitals

Doctor's Name (Handover given) : FAIZ

Signature : .....

Date & Time: 10/4/26.

Doctor's Name (Handover taken) : .....

Signature : .....

Date & Time: .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by PL VJ
10/4/26		
9:38 AM		→ Continue CPAP 6-7
	Tubings → Day 5	→ Flow 8 lt/min
		→ Full Enteral feeds.
		→ KMC from today
		H (FAIR)
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
		N.B sushi.
10/4/26 1:15 PM	Afternoon Rounds	
		Plan
	on CPAP 6	→ continue CPAP 6, flow 8 lt/m
	1 episode of desat → self Pickup	
	Retractions	→ continue 1 ml orally OH. fortification.
	P/A → soft, tolerating feeds	
	KMC → 1½ hrs	→ KMC
	HR - 154/m	
	RR - 59/m	→ Gas Alt/day
	SPO2 - 95%	→ GFBS OP
		H (FAIR)

Noted by Nirupama 012767

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/4/26		Seen by DRVJ
3pm		→ continue CPAP → 6
		→ Full Enteral Feeds
		H/FAOD
	NIGHT ROUNDS	I/S/B Dr Sarat
		Plan
8pm	On CPAP → 6	
	2 episode of bradycardia desat	→ ↑ CPAP to 6.5
	P/A → Soft, tolerating feeds	→ Target SPO2 90-95%
		→ Continue 1 unit O2 hrs or + Fortification
	HR - 162/-	
	RR - 38/-	
	SPO2 - 95%	→ Gas Alt/day
		→ GRBS OD
		H/FAOD
		noted by Aiswarya 10/4/26 @ 8pm

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

12/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 18 **PMA:** 29

Term ☐ **Preterm** ☑ Gestation : 26+4 Corrected Gestational Age:.....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPT / ELBW	leucopenia
2.	RDS → MV → 1 dose surfactant	Coagulopathy
3.	NIV – CPAP	
4.	NNJ	
5.		
6.		

Today's Weight : 945 g (↑ 25 g)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

– on CPAP, PEEP – 7

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO_2 – 97%.
PR – 168 / min
RR – 42 / min

– one episode of vomiting (small) at 7:00 pm yesterday.

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : ..... (N) .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... TV-180ml/kg/day

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A-soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Fortification
	2.			Syr. caffeine
	3.			Glycerine

Plan of Treatment :

- Continue CPAP, PEEP-7
- TV-180ml/kg/day
  ↓
  14ml 2nd hourly full OG feeds + Fortification
- Gas Alternate day
- RBS OD
- If any clinical signs of sepsis plan to send CBP, CRP, Blood cls
- Continue SSPT for 24 hours
- w/f apnoea, Bradycardia

Doctor's Name (Handover given) : Anesha

Signature : Anesh

Date & Time: 12/4/26

Doctor's Name (Handover taken) : Rupinya

Signature : Rupi

Date & Time: 12/4/26

8:10 am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

(80)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/04/26 9:30am		Seen by Dr VJ
		Continue CPAP 7cm, flow - 8L
		Blood - glass alt day
		SSPT continue x 24h then - stop
		R/V KMC
		Next prick SBR
		Rupanjali
		Noted By Nirupama 012767 @ 10am
12/04/26 12:23 pm	Afternoon	Adv
	Baby on CPAP 7cm flow - 8	- Continue CPAP - 7cm
	∘ HR = 155	- SSPT to be catapped (24h completed
	∘ SPO_2 = 99%	- ~~R/V~~ KMC to Continue
	No brady, desat	∘ Plan to send SBR on next prick.
		Rupanjali
		Noted By Nirupama 012767

Reg. No: 40526

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

(8)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/4/26	Night	Adv
8:00pm		(*) continue CPAP @ 7cm
	- On CPAP - 7cm	
	- No brady, desat tachy	(*) TV - 180cc/kg/day 14ml - 2hourly
	- No fever	+ fortification - full OH feeds
	- Feeds tolerated	
	- P/A - soft	⇒ Blood gas - alt day
	-	⇒ GRBS - OD
	• HR - 162	⇒ Next prick - SBR
	• RR = 39	
	• SPO_2 = 92%	Rupriya
		Noted By Nirupama 012767
13/4/26		Seen by DR PR
12:40 Am		→ Set appropriate temp.
		noted by Aseha 010653 13/4/26.

EAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 15 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 19 ✓ PMA: 29+1

Term ☐ Preterm ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Extreme preterm / ELBW	Leucopenia
2.	RDS → B (MV - NIV - CPAP)	Coagulopathy
3.		
4.	NNS	
5.		
6.		

Today's Weight : ✓ 923g (↓ 22g) Wkly wt = 154g

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : ..... Spo2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

Baby stable on CPAP-7cm
& RAM's
Humidifier Temp = 36.9 / NO nasal interface injury.

CARDIO VASCULAR SYSTEM

Plan of Care : (-) Tachypnea (+) / Recession of Intercostal muscle (+)

HR = 155
RR = 50
SPO_2 = ~~90-98~~ 95%. @ 95%

CNS

Neurological Examination : Activity (+)

Sedation NO

Last Neurosonogram : N Any Seizures N/O

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....
Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....
IV Fluids - Type of IVF : ..... @ ..... ml / hr
Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....
TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....
Abdominal Examination:.....
.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft Feeds tolerated

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....
Sepsis screen:.....
Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Plan of Treatment :

- Continue CPAP 7 cm H_2O RAM - SpO_2 90-95% target
- TV - 180 cc / kg / day → 14 ml + 2 hours + fortification - 2 hours.
- GRBS - OD, Blood gas - on alt day.
- SBR - Next Prick
- *KMC to continue.
- R/V Supplements addition weekly review.

R

Doctor's Name (Handover given) : @
Signature : Rupanjali
Date & Time: 13/4/26

Doctor's Name (Handover taken) : Y. Sneha
Signature : Sneha
Date & Time: 13/4/26 @ 8:10 am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/4/2026 @ 9:40 am	Nutrition Rounds	950g
	TV = 180 cc/kg/day	14mL 2nd hrly wkly wt
	Kcal Pro Ca P Fe Vit D	
	EBM - 168ml 112.5 1.84 58.8 25.2 0.33 -	
	(67 | 1.1 | 35 | 15	
	0.2 | -)	
	Fortifical 46.68 8.24 70.8 16.32 1.08 -	
	(3.89 | 0.27 | 5.9 |	
	1.36 | 0.09 | 0.1)	
	Obsopan (3ml 75 83 - 120	
	Vit D_3 (1mL)	800
	159.18 5.08 ~~129.6~~ 204.6 ~~41.52~~ 74.52 1.41 ~~920~~	
	167.55 5.34 ~~136.4~~ 215.3 ~~43.7~~ 78.44 1.48 968.4	
	Anthropometry	
	26+4 950g +0.02	
	29+1 923g -2.23	DOL = 19
	HC - 25cm -1.31	26+4 → 29+1
	Lt = 36cm -0.92	Wkly wt. gain 54g

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/4/2026 @10 am	EXPT/ ELBW RDS	Seen by Dr. VJ
		1) Cont CPAP PEEP-7. flow 8L/min
		2) Cont KMC
		3) Add Ossopan-D with Vit D
		4) NP2 } Tomorrow SBR }
		5) T/m - Review to add Irondrops.
		noted by Dr. VJ 13/04/26 @10am
		Sneha resident
13/4/2026 @11:40 am	Rounds	Plan
	Resp: Baby on CPAP - PEEP - 7 flow - 8L/min ① Intermittent desaturation ② requiring FiO_2 upto 30%	1) Cont CPAP PEEP-7 flow 8L/min Target SPO, 90-95%

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	KMC - 1 epi - desatura No Bradycardia Tolerating feeds well added supplements	2) TV = 180ml/kg/day 14ml 2nd hrly + fortification.
	vitals HR = ~~161~~ 157/min RR = 66/min SPO_2 - 94% BP = 63/48 (53).	3) NP_2 SBR Blood gas } Tomorrow
		4) GRBS - OD.
	P/A - soft mild distension	5) KMC to Continue
	Stool - passed Urine : passed	6) To Review Iron drops to Start Tomorrow.
		7) I/O charting 6th hrly
		8) W/f - Apnea, Brady, desaturation
	noted by Davis 13/04/26 @ 12pm	
13/4/26 3pm		Sneha
	CSB Dr. V.J.	
	stable on CPAP	✓ continue CPAP. ✓ labs as planned T/M.
		noted by Davis 13/04/26 @ 3pm

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/4/26 12:30am	Night Rounds	Seen by Dr. Nilesh
	Intermittent Desat (+), ~~Bradey~~ + episodes (+)	Plan:
	On CPAP - 7,	• Change to CPAP - mask
	~~Bat~~ Tolerating feeds well	• ~~Prone nursing~~
	On 0.5gm MMF	• Prone nursing
	No vomitings	↓
		If further desat episodes then change to CPAP mask
		• noted by Archa 14/04/26 @ 12:30am
		Dr Ramp

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 20 ..... **PMA:** 29+2

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPT / ELBW	leucopenia
2.	RDS → MV-NIV	Coagulopathy
3.	-CPAP	
4.	NNJ	
5.		
6.		

Today's Weight : 0.932 (↑9gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☑ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : 7 L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On CPAP - PEEP-7

Brady (+), ~70 Desaturation (+) ~70 - self pump (1).

Rams not in position

no Brady / no Apnea

CARDIO VASCULAR SYSTEM

Plan of Care :

Spo2 - 96%.
HR - 149/min
RR - 40/min.

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : .....Any Seizures..... No.

Docu. No. : RCHBH /FRM / CLINICAL / 131 (P.T.O.)

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : 168 / (+/-) 74 Output : 94 ml/k/d Urine Output : 3.2 ml/kg/hr Stools (3)

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:.....

No Distension.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Syp-caffeine, fortification
	2.			Glycerine suppository
	3.			~~[illegible]~~ Ossopan-D
				Vitamin D3 Tobings: Dg.

Plan of Treatment :

1. Continue CPAP PEEP-7
2. NP2. SBR. Bloodgas - send now
3. RBS-OD
4. KMC-Continue.
5. (RH) Iron.
6. I/O charting 6th hourly
7. TV = 180ml/kg/day
   14ml Q2H + 0.5g fortification

Doctor's Name (Handover given) : N. Prabhakar

Signature : N.Pra

Date & Time: 14/4/26.

Doctor's Name (Handover taken) : Dr Ashwarya

Signature: [signature]

Date & Time: 14/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/4/26 10AM	Seen by Dr. Vijayanand.	
	VPT/VLBW/RDS	Plan ① cont CPAP 7cm. ② Gas twice weekly ③ Xray now ④ Add 1ml 3% NaCl in each feed. ⑤ Start oral Fe supplements.
	Dq tubings Dq incubator.	
	Dr Ashwini	noted by Dais 14/04/26 @10am
14/4/26 @1.10pm	Afternoon Rounds	Plan
	Baby on CPAP-PEEP 7 flow-8L/min	1) Continue CPAP PEEP-7 Target SpO_2 90-95% flow-8L/min
	- NO-Bradycardia - No desaturation - ongoing KMC Tolerating feeds well	2) w/f - apnea, Brady, desaturation
	Vitals HR = 145/min RR = 62/min SpO_2 = 97% BP = 61/39(47)	3) TV = 180ml/kg/day 14ml 2nd hrly + 0.5g fortification + 3% NaCl (1ml each feed)

Dr. VIJAYANAND JAMALPURI Reg. No. 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	P/A - Soft non distended	4) KMC to continue
	Stool - passed	5) Blood gas - twice wkly RBS - OD
		6) T/O charting 6th hrly
		7) Cont - Supplements noted by Dr Daisy 14/04/26 @ 1:30pm Sneha
14/4/26 @ 3:10pm		Seen by Dr. VS
		1) Cont. CPAP PEEP-7 Flow 8 l/min
		2) ROP This thursday
		3) Bloods gas-twice wkly noted by Dr Daisy 14/04/26 @ 3:15pm Sneha

Dr. VIJAYANAND JAMALPURI

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/4/26 @ 9:00pm	Night Rounds	
		Plan
	Baby on CPAP PEEP-7 flow = 8L/min.	1) Cont CPAP PEEP-7. flow - 8L/min Target SPO_2 90-95%.
	No Bradycardia Intermittent desaturation requiring FiO_2 upto 30-33%.	2) Tv = 180mL/kg/day 14mL 2nd hrly + 0.5g fortification + 3% NaCl.
	Vitals HR = 157/min. RR = 65/min. SPO_2 = 94%. BP = 69/39 (48).	3) KMC to Continue
	Intermittent tachycardia ⊙ while Baby - moving.	4) Blood gas - twice weekly GRBS - OD.
	P/A - soft. tolerating feeds well	5) I/O charting - 6th hrly.
		6) w/f - apnea, Bradycardia desaturation

Noted by Archa 019653 14/4/26

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 17 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 21. **PMA:** 29+~~3~~4.

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Extreme preterm/ELBW.	leucopenia
2.	RDS - PMV - NIV - CPAP.	Coagulopathy.
3.	NNJ	
4.		
5.		
6.		

Today's Weight : 953 (↑219).

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....SpO_2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Baby on CPAP PEEP-7

Intermittent desaturations requiring FiO_2 upto 33%.

CARDIO VASCULAR SYSTEM

Plan of Care :

Vitals
HR - 154/min
RR - 45/min
SpO_2 - 96%.
BP - 67/47 (51)

3 epi of Bradycardia req. Stimulation

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : N .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

PKA - Soft

non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Syp - Caffeine
fortification
ossopan - D
Vitamin - D
Olofer XT

Tubing
Dg
Incubator - D2

Plan of Treatment :

1) Cont CPAP PEEP-7, flow - 8l/min
Target SPO2 90-95%.

2) TV = 180ml/kg/day - 14ml 2nd hrly + 0.5g fortific + 3% NaCl.

3) KMC to continue

3) Blood gas - twice weekly
GRBS - OD

4) I/O chalting 6th hrly

5) w/f - apnea, Brady, desat

Doctor's Name (Handover given) : Y. Sneha

Signature : Sneha

Date & Time: 15/4/26

Doctor's Name (Handover taken) : Dr A. Shweenya

Signature :

Date & Time: 15/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/4/26 @7:30am	Baby had Continuous Bradycardia with desaturation HR upto 60/min Not picking on Stimulation ↓	→ changed from CPAP to NIV. NIV = 18/6 Rate = 30 Ti = 0.4. FiO_2 = 25%. ↓ Blood gas after 1hour. Sneha
@8:45am	Repeated Episodes of Brady, desatural Requiring Stimulation on NIV	changed to NIV 17/6 with mask Rate 1 loading dose of Caffeine 10mg/kg Sneha

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/4/26 @ 9:14		Seen by Dr-VJ Sir
	EXPT/EIBW.	1) Continue NIV.
	RDS	
	Increasing Respiratory Support.	2) Nasal, Oral Care regularly.
	O/E:	
	Active	3) Blood gas - BD (Today)
	moving all limbs vigorously.	
	CRT = 2-3 sec.	4) Watch for Signs of Infection.
		5) Reasses - Temperature & peripheries in half-hour.
		6) Repeat Gas in 2 hours
		Sneha.
15/4/26 12:30PM	~~seen by Dr Aishwarya~~ Afternoon Notes	
	on NN 17/6	
	Rate - 40/min	
	FiO2 - 21%.	
	1 c/o bradypnea + desaturations during gavage.	
	No bradycardia, temp - 36.5	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/4/26 continuation	Currently – RR – 50/min SpO_2 – 98%. HR – 174/min Temp – 36.7°C.	Plan ① cont NIV 17/6 FiO_2 to target SpO_2 90–95%.
		② Monitor baby temperature
		③ Nasal & oral care regularly
	tolerating full OG feeds PA – soft, non distended.	④ Blood gas BD – today
		⑤ SOS plan labs in case of further episodes
	Mask & compressing nose – ? obstruction	⑥ TV = 180ml/kg/day 14ml @2H OG feeds EBM / OBM + 0.5gm fortifier
		⑦ change mask to 1 size bigger (M)
	cxrs – 7.3/48.2/21.4 – 2.1/3.3	⑧ I/O @6H.
	noted	⑨ Hold KMC today.
15/4/26 4:30PM		Seen by Dr. Vijayanand
		plans – continue NIV 17/6
		– send CBP, CRP, Blood cels now
		– start Antibiotic – PIPTAZ

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

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Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 20 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		- Inj · caffeine (10mg/kg) stat dose
		Noted by anwarthy 607/65 05/4/26 Anesh
15/4/26 10:30PM	Night Rounds	
	on NIV - 18/6	
	SpO_2 - 25%	Plan
	rate - 40 Fi - 0.4	(1) cont NIV 18/6
		FiO_2 to target
	HR - 155/min	SpO_2 90 - 95%
	SpO_2 - 97%	(2) TV = 180ml/kg/day
	RR - 43/min	14ml Q2H OG feed
	Min / CR (+)	EBM / DBM
	Had 1 e/o bradypnea +	(3) Gas + GRBS now
	desaturation now.	(4) Nasal & oral care
	No bradycardia	(5) I/O Q6H
	color (N)	(6) Monitor temperature
	PP - WE	(7) Ensure adequate
	CRT < 3sec	ventilation.
	BP - 62/38 (45)	(8) cont Abx

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	CRP - 8	
	CBP (N).	
	PA - soft, non distended.	
	tolerating feeds.	
	Incubator changed.	
	Temp - 36.3°C.	Dr Ashwaya
16/4/26 7:20AM.	seen by Dr. vijayanand	
	wt = 964 gm. ↑11gms	
	EPT / ELBW	
	RDS - MV - NIV - CPAP - NIV	
	NNJ.	
	on NIV 18/6 FiO_2 - 28%.	Plan
		① cont NIV. 20/6 monitor. FiO_2 to target SpO_2 90-95%.
		② Inj caffiene maintenance
		③ TV = 180ml/kg/day 15ml Q2H.
	Dr Ashwaya	Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 22. PMA: 29+5

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age:.....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	NNJ
2.	RDS - MV - NIV - CPAP - NIV	leucopenia
3.		coagulopathy
4.		Susp sepsis
5.		
6.		

Today's Weight : 964 gm (T 11 gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... NIV – 20/6 cm T_i – 0.4
rate – 40/min FiO_2 – 30%.

Baby had multiple E/O bradypnea + desaturation
10 + 5 mg/kg IV caffeine given.
Support escalated to NIV by mask

CARDIO VASCULAR SYSTEM

Plan of Care : Temp instability ⊕ → septic screen negative
→ Incubator changed

Leak ⊕ → chin strap placed

HR – 163/min
SpO_2 – 92%.
RR – 56/min.

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : (N) .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 14ml Frequency: Q2H

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination: soft, non distended.

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

CRP-8 WBC - 17,370

Hb-11.4 61 28

PC-6.92

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Inj PIPTAZ D2.	
2.		
3.		

Inj Caffeine
Ossopan-D
Vitamin D
Oroper XT
Fortification

Tubing D10
Incubator D1
IV cannula D1

Plan of Treatment :

(1) cont NIV 20/6cm, Ti-0.4, rate-40
FiO2 to tayct SpO_2 90-95%.

(2) TV=180ml/kg/day → 10ml Q2H Orfeed
+0.3gm fortification +3% NaCl

(3) Temp monitoring
w/t distress/bradypnea/desaturations

(4) Ensure adequate ventilations

(5) Gas BD
CRBS OD

(6) HOLD RML

Doctor's Name (Handover given) : Dr Aishwarya

Signature :

Date & Time: 16/4/26 8AM.

Doctor's Name (Handover taken) : Y. Sneha

Signature : Sneha

Date & Time: 16/4/26 8:15am

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/4/26 @ 10.30 11am		Discussed with Dr. Prathyusha
	Recurrent desaturation NO Bradycardia	1) To do chest x-ray PA view
		2) Neurological assessment 3) Cardiac assessment Today
		4) RIV to send S/E, Calcium
		noted by Sushma 16/4/26 @ 2.10pm Sneha
16/4/2026 @ 2:40pm	Afternoon Rounds	Plan
	Baby on NIV with mask PIP - 20, PEEP - 7. Rate - 40 Ti = 0.45 FiO_2 = 30%. Intermittent episodes of desaturation No Bradycardia Changed ventilator. (4) episodes of desaturation	1) Cont NIV with mask PIP - 20, PEEP - 7. Rate - 40. Ti = 0.45 FiO_2 = 30%. Target SPO_2 90-95%. 2) w/f - apnea, Brady, desaturation Abd. destension noted by vidya 16/4/26 @ 2:40pm

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Vitals HR = 168/min RR = 34/min. SPO$_2$ = 95%. BP = 62/40(47)	3) Gras-BD GRBS-OD. 4) Hold KMC
	P/A = Soft distended on full feeds.	5) Temperature monitoring
	O/O = 4.1cc/kg/hr +2ml.	6) TV - 180ml/kg/day 15ml 2nd hrly full OG feeds + 0.5g fortification + 3% Nacl
	Stool - passed No vomitings	7) No chatting 6th hrly.
	NSG - Normal.	8) Strict asepsis w/f clinical signs of deterioration inform SO's
		Noted by Sushma 16/4/26 @ 1pm

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/04/26 3:00pm		– Seen by VJ Sir.
		Continue NIV I mark
		Blood gas OD & SOS.
	Tummy – distended but soft	– Continue Piperacillin + Parabactam.
	Periphery warm moving all limbs	– CRP, SIE, Ca^{+2}, Mg^{+2} along blood gas – T/M
		– Meticulous asepsis minimal handling.
		noted by sushma 16/4/26 3pm 021022 Rupinjali
16/4/26 8pm	Abdomen – distended Engorged veins	C/S/B → Dear
		→ TV – 160 cc/lb/day 12hr 02hrs OG
	multiple desat ⊕	→ Gas SOS El T/m
		→ Labs as Planned.
		→ NG decompression orders Prefed
		→ Gas Now

Dr. VIJAYANAND JAMALPURI Reg. No. 40526

noted by sushma 16/4/26 @ 8pm

Docu. No. : RCHBH /FRM / CLINICAL / 088

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8:30pm		Plan
	PH - 7.24	
	PiO_2 - 64.6	→ Intubate the baby
	Persistent desaturations	
	FiO_2 → 45%	
		→ TV - 160cc/kg/day
	SpO_2 - ~~88~~% 88%	100cc/kg/day feeds; 60cc/kg/day IV fluids
		→ Chest X-ray after 1hr
16/4/26 8:30pm	INTUBATION NOTES	
	Under sterile aseptic conditions, baby was intubated with 3 size ET tube & fixed at 7.1 cm entry checked bilaterally (+)	
	Pmax - 22	→ Chest X-ray @ 9:30pm
	PEEP 6 VG → 5ml/kg	
	Rate - 50	→ Gas @ 10:30pm
		[signature]
		Noted by vidya 021143 16/4/26 @ 8:30 pm

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Adv
16/04/26 9.00pm	Sr Na+ in GAS 144	→ Withhold 3% NaCl
		→ CRP, S/E, Ca+, Hg+2 with Gas — T/M
		noted by vidya 021143 16/4/26 eqan
		Rupini

BP centiles

	5th centile	25th	50th	95th
SBP	42	49	56	73
DBP	20	27	34	51
MBP	27	34	41	58

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/4/26	NIGHT	ROUNDS
		Plan
11PM	On PTV + VG	
	5ml/kg	→ Continue PTV + VG
	20/22	
	PEEP - 6	→ target SPO2 90-95%
	RR - 40/min	
	fi - 0.32	→ TV - 160cc/kg/day
		10% Isop
	P/A → soft - firm	NPO
	Stools - Passed	
	Aspirates - N.L	→ PIV to start feeds in morning
	HR - 146/m	
	RR - 43/m	→ CRP
	SPO2 - 98%	S/E, Ca+2, mg+2 } 7pm
	BP - 65/29/43	Gas
	thick secretions (+)	→ Gas } BD
		GRBS
		→ Dochart obtain
		→ monitor
		vitals
		Sd/- (Rao)
		noted by vidya (021143) 16/4/26 @ 11 PM

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

19/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 25 **PMA:** 30wks

Term ☐ **Preterm** ☑ Gestation : 26+4 Corrected Gestational Age:.....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	
2.	Apnea of Prematurity NV.	
3.	Suspected Sepsis	
4.	Anemia requiring transfusion	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

Baby on Ventilator
PTV + VG (4.5ml/kg)
PIP = 19-20/23, PEEP = 5
Ti = 0.82, RR - 40/min

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 167/min
RR = 53/min
SpO_2 - 96%
BP = 84/49(62)

Ongoing LRBC transfusion
Requiring frequent Suctioning

CNS

Neurological Examination : .....

Sedation NO.

Last Neurosonogram : N Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency: GRBS

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... U/O

..... Balance

Stool- passed.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft, Non distended

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

	Sl.No.	Drugs	Days
Antibiotic	1.	Meropenem	D4
	2.		
	3.		

Inj - Caffeine
Glycerine
Hold all Supplements
(vit D_3, Ossopan-D, Olofer-XT, 3% NaCl)

Plan of Treatment :

1) Continue Current ventilation, Target SpO_2 90-95%.
2) TV: 150ml/kg/day ← 20ml/kg LRBC
   ← 30ml/kg 10% FFP
3) Gas; GRBS BD/SOS
4) I/O charting 6th hrly
5) To Trace CTCLs, final BICLs, 2nd BICL
   Trace urine CMV PCR repeat
6) TW/F- vitals
7) Regular ET Suctioning

Doctor's Name (Handover given) : Y. Sneha
Signature : Sneha
Date & Time: 19/4/2026

Doctor's Name (Handover taken) : Amrit
Signature : Amrit
Date & Time: 19/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	19/4/26 11:00am	Seen by Dr VJ
		Plan:
	CVS - No precordial activity. P/A - Soft,	- change to SIMV + PS, PS-10, VG+
		- CXR Tomorrow
	Tubings - Day 13, Cannula - Day 1 2 Day 2	- Blood Gas at 4:00pm next
		- NPO for now.
		- To start feeding as per Protocol. - TV - 15ml/kg/day - Trace Blood cls., ET aspirate sensitive, - Hold all supplements and fortification. - Feeding - 2ml/hr → in first cycle ↓ 4ml/hr → next cycle ↓ 6ml/hr → next cycle ↓ 8ml/hr → next cycle - positioning → 6hrs each.

Dr. VIJAYANAND JAMALPURI
Reg. No. 40526

Noted by Dipti 017039 19/4/26 @ 11 am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		— Add 3% NaCl nebulisation BD. Anuda
19/4/26	Afternoon rounds	
4:00PM		
	— on SIMV + PS + VG (10) (4.5 mills)	Plan:
	FiO_2 - 23%,	— continue current ventilation.
	22/15,	— ↓ RR from 40 to 35.
	PEEP - 5,	— TV - 150ml/kg/day
	RR - 40 → 35	↓
		Start feeds
Post transfusion	Last gas - 7.38/47.2/53.3/	2ml/hr — 4hrs on, 2hrs off } 1st cycle
	Lac - 1.4,	↓
	RBS - 102mg/dl	To every
	SpO_2 - 96%	↑ 4ml/hr → in next cycle
	PR - 150/min	↓
	RR - 45/min	↑ 6ml/hr → in next cycle
		↓
	P/A - soft,	↑ 8ml/hr → in next cycle
	— No aspirates	
	— No vomitings	— Hold all supplements
	Urine output - 3.8ml/kg/hr	
	stool - passed	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		- CXR T/M mng
	ET c/s - No growth so far (verbal)	- I/O. Charting 6th hourly -
	Repeat Blood c/s - no growth so far (verbal)	- w/H all supplements for 24 hours.
	Urine CMV - not detected.	- Positioning - 4 hrs each Rt. up, Lt. up supine Anuglo
		Noted by vidya 19/4/26 @ 11pm
19/4/26 11PM	Night Rounds	Seen by Dr. Sarat
	on SIMV +PS +VG 22/15 PS-10 FiO_2-23% RR-35	plan -
	Received LRBC	
	Gas done - (N) - restarted feed.	
	currently - 4ml/m cycle.	
	PA - soft, non distended	
	NG asp - 2ml milk.	
	Thick yellow ET secretion (+)	
	Intermittent desat when secretions build up.	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 23 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	HR-167/min	Plan
	SpO2-100%	(1) cont same
	RR-31	ventilation
		(2) TVF 150ml/kg/day
	U/O-3.2mkh	including 2RBC
	I/O-70/41 (+29)	4ml/hr [4hr on
		[2hr off
	Active baby	12ml next cycle.
	moves all 4limbs	(3) hold all supplements
	Alert & looking around	(4) chest xray 7/m
		(5) ~~Tract~~ Final ~~XET~~ c/s
	Reddness & tenderness	~~blood c/s~~
	around foot (2) cannula.	~~CMV PCR~~
		(6) Positioning - Supine
		~~[illegible]~~
		left up & rt up
		4hrs each.
		(7) I/O GOH
		(8) Gas BD
		GRBS BD
		(9) Remove leg cannula
		Noted by
		Vidya
		021193
		20/4/26
		@ 1Am

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

20/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 26 PMA: 30+1

Term ☐ Preterm ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	RDS -
2.	Apnoea of Prematurity	
3.	Suspected sepsis	
4.	Anemia	
5.	Hyponatremia	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fi_2..... Oxygen : ..... L/min

Last CXR : ..... Spo_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

- on SIMV + PS + VG (4.5 ml/kg) (10)

- Thick ET secretions (P)

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO_2 - 99%
PR - 159/min
RR - 40/min
BP - 63/38 (49)

Urine CMV PCR - not detected
ET c/s - No growth (verbal)
Repeat Blood c/s - No growth (verbal)

CNS

Neurological Examination : .....

Sedation NO

Last Neurosonogram : (N) Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....
Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools Passed
IV Fluids - Type of IVF : ..... @ ..... ml / hr
Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....
TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....
Abdominal Examination:.....
..... NO aspirates .....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS
.....
..... P/A - Soft .....
.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....
Sepsis screen:.....
Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Meropenem	D5
2.		
3.		

Inj. caffeine 3% NaCl neb.
Glycerine
Vit D3
Ossopan-D
Orofer-XT, 3% NaCl } Hold

Plan of Treatment :

- Continue current ventilation
- Target SpO_2 - 90 to 95%.
- TV - 150 ml/kg/day
  ↓
  8 ml/hr < 4 hrs on / 2 hrs off
- R/v to ↑ feeds (TF = 9 ml)
- Blood Gas } BD
- RBS
- I/o charting 6th hourly
- Trace final Blood cls, ET cls.
- Trace CXR films
- positioning 4 hrs — Rt. UP / Lt. UP / Supine.
- Hold all supplements for 24 hrs.

Doctor's Name (Handover given) : Aneesha
Signature : Aneesh
Date & Time: 2014/12/16

Doctor's Name (Handover taken) : .....
Signature : .....
Date & Time: .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/4/26 @ 3.38 pm		Seen by Dr. VJ
		- Extubate to NIV
	- EPT / FIBW / RDS / Evolving CLD / Suspected sepsis	→ Rate - 30/min Ti - 0.1 PIP = 17 PEEP = 6
	- CMV - not detected - Blood c/s 24h - No growth.	
		⇒ Suction before extubation
		→ Blood gas - 2h post extubation
		⇒ CXR - 'SOS'
		⇒ Contd NPO till post extubation 2h.
		⇒ Weekly reviews
		⇒ Trace ET culture Blood culture
		⇒ Review antibiotic
		⇒ Inj Caffeine - @ 10mg pre-extubation

Dr. VIJAYANAND JAMALPURI
Reg. No:

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Nutrition	
	8ml – 128ml	
	hourly/16 hours	
	No.	

EBM –	Cal	Pro	Ca^{+2}	PO_4	Fe	Vit-D
	85.76	1.4	45	19.2	0.25	-
Ossopan -D			100	44		160
Orafer					3m	
Vit -D						800
	85.76	1.4	145	63.2	3.2	960
				(2.2:1)		

(P.T.O)

MALPURI
40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 23 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/04/2026 1:30pm	After noon	~~Soon~~ . plan
		. Review extubation in afternoon round
	Rest	
	On PSV mode	
		- R/v antibiotic,
	PIP - 12	
	PEEP = 5	- R/v fortification & supplements
	Ti max = 0.45	
	FiO2 = 25	
	RR = 25	- W/F Vitals & infan sos.
	Baby effort	
	. Rate = 50/min	Rupin
	PIP = 12 ? Apneaic spells	
	PEEP = 5.6	
	VTE = 3-5 ml	
	MAP - 6.6-7.	
	(7) ~~A~~ Baby ~~s~~ active	
	not on any sedation.	
	(7) Breathing	
	Chest rise adequate	
	~~Cir~~ Circulation	
	(*) No ionotropes	
	~~BF~~ B HR = 136	
	SPO2 = 100	
	BP = 61/37	
	U/O = 1.33 (46).	

cc/kg/nam. Cultures < ET, Blood] so far ~~Sa~~ no growth

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/4/26 3:00pm		Seen by Dr. VJ
		Extubate → NIV
		to
4PM	Extubation notes	
	Under sterile aseptic conditions Proper Suctioning was done, ET tube → Mouth. Baby was extubated to NIV	
		Plan
		→ Connect to NIV 18/6 RR-40/min
		→ To do Gas @ 6:30PM
		→ Chest X Ray (SOS)
		★ (FAIR)
		Nalod Diff 017039 20/4/26 @ 4:30pm

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	NIGHT	ROUNDS
20/4/26		
		Plan
7:30 pm	Extubated to NCV	
	⇓	→ Continue NCV
	On NCV → 18/6.	
	RR-40.	→ To start feeds 3ml/hr → 4hrs on, 2hrs off
	Last	
	Post Extubation Gas.	→ TV 150cc/kg/day.
	7.36/52.3/4.3/26.8	Rest 10% 150
	P/A → soft currently NPO	→ Chest X Ray (SOS)
		→ To chest Obtain
	HR-128/min	
	RR-42/min	→ R/V to ↑ feeds.
	SPO2 - 95%	
		→ Positioning as Planned
		→ Monitor vitals
		⇓ (PALV)
		Noted by Diff 017039 20/4/26 @ 7:30 pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/4/26 9:50 pm	C/S/B → Dr NL	
		Plan
	Extubated to NIV	
	18/6	→ Continue NIV
	RR-40	
	RO_2 - 23/m	→ Gas } 4 RBS } T/m
	HR-152/m	
	RR-43/m	→ TV - 150cc/kg/day
	SPO_2 98%	6ml/hr → 4 hrs → 2hrs off
		↑ 2ml Alt/cycle
		→ Chest x Ray (SOS)
		→ Trace blood c/s.
		Y (FAC2)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

21/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 27 PMA: 30+2

Term ☐ Preterm ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	ExPt / ELBW	
2.	Apnea of Prematurity	
3.	Suspected sepsis	
4.	Anemia	
5.	Hyponatremia	
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio..... Oxygen : ..... L/min

Last CXR : ..... Spo: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... Extubated to NIV on NIV overnight 18/6. RR-40/min

HR-136/min
RR-38/min
SPO2-95%

morning 5AM desats SCD ↑ NIV → PIP → 20 ↓ maintains After/hr to PIP → 19.

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination : .....

Sedation..... No

Last Neurosonogram : ..... N ..... Any Seizures..... No

Docu. No. : RCHBH /FRM / CLINICAL / 131 (P.T.O.)

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:..... P/A → Soft, tolerating feed
stools → passed

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Meropenem	D5	Inj Caffeine
	2.			Glycerine
	3.			Neb 3% Nal

Plan of Treatment :

→ Continue NIV 19/6 RR-40

→ Target SPO2 90-95%

→ TV-150cc/cs/day, 6ml → 4hrs on
→ 2hrs off
↑ 2ml alternate cycle

→ Positioning → Rt up
→ Lt up
Supine } 4hrs each

→ Trace cultures

→ Gas
GRBs } BD

→ Stochast obtab

R/V → Supplements

Doctor's Name (Handover given) : AAU

Signature : [signature]

Date & Time: 21/4/20

Doctor's Name (Handover taken) : Dr Aishwarya

Signature : [signature]

Date & Time: 21/4/20

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/4/26		Seen by PRVT
10:22AM		→ Continue NW
	weight → 959gms	
		→ Blood Gas OD.
		→ Sept to start
		→ TV - 160ml/kg/day
		TF = 10ml.
		↑ 2ml Alternate cycle
		→ To stop Antibiotic
		→ ↑ P CEP to 7 19/7
		→ ROP on Tue 23/4/26.
		→ Drug chart
		→ Restart supplements
		→ change tubings today.
		→ change incubator T/m
		(FAIZ) Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Noted by Hemalatha 0166 99 21/4/26 @10.30AM

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

D25

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/4/2026 @ 1:40pm	Afternoon Rounds	
	Ventilation :	Plan
	Baby on NIV with mask	1) Cont current ventilation Target SPO2 90-95%
	PIP-19, PEEP-7.	
	Rate-40/min, Ti=0.40	
	⊙ FiO2-23%.	2) TV = 16oml/kg/day
	↓	↓ ↓
	Resp-distress (+)	8ml/hr 100% IBOM
	mild SCR (+)	4hr on
	ICR (+)	2hr off
	ongoing phototherapy	↓
		12ml alt feed
	feeding Cycle - off	(TF=10ml/hr)
	P/A - distended Soft.	
	~~u/o~~ & 6ml/hr-4hr on 2hr off	3) ~~R/v on 3% Nacl~~, fortification after full feed
		4) Start - absopan-D vit D3
	Vitals HR = 148/min	
	RR = 35/min.	5) R/v on antibiotics
	SPO2 = 92%.	ETCls - positive
	BP = 69/42 (51)	
	Post. feeding = Distress (+)	6) ROP on Thursday
		7) change Incubator - T/m
		8) SSPT for 24hrs

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		9) I/O charting 6th hrly.
		10) Gas } BD GRBS }
		11) Positioning { Rt up, Lt up, Supine } 4hrs each
		Noted by Hemalatha (016699) 21/4/26 @12PM
21/4/26 @ 2:42pm		Seen by Dr. VJ.
		1) ↓ PIP = 18/7. Decrease PIP as tolerable. Continue NIV.
	P/A - Soft.	2) Start Colistin Nebulisation. ↓
		3) Discuss with Dr. Iyer Sir.
		4) Fortification R/v T/m
		5) w/f clinical signs of Sepsis
		Note by Hemalatha 016699 21/4/26 @3PM

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4.05pm	Baby had 1 episode of	
	Brady cardia,	After discussing c̄ DV.VJ sir
	Desaturation	plan
	along c̄ Abdominal distension	Send Blood cls
	~~Requir~~ Requiring ↑ FiO_2	Start Inj Meropenam
	cleaning of secretion	Inj colistin
	OG Aspiration	Restart feeds in next cycle once abdominal distem ↓ and distress ↓
	Noted by Hemalatha 016699 21/4/26 @ 4.15pm	
	Night rounds	
21/4 @ 9.37pm	D27 / 26+4 / → 950gm /	Plan
	V → baby on NIV	
	18/7	+ continue NIV
	rate - 40	Target SpO_2 90-95
	FiO_2 - 25%	
	1 episode of brady / desat	→ TV - 160ml/kg/day
	C → HR - 163bpm	feed 8ml/hr
	Bp - 57/29 (34)	
	U/O - 1.7ml/kg/hr	next cycle 10ml/hr 4hrs on
	P/A - Distended	+ RW 2hr off
	soft	fortification - Thus

Docu. No. : RCHBH /FRM / CLINICAL / 088

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Baby Of SRI VIDYA VANGALA
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/4 @ 7:45pm	ET Us - Micro to Laffer	ROP - thursday.
		gas - OD
		GRBS - OD
		→ monitor vitals
		Dr. Manitas
	Noted by Hemalatha (016699) 21/4/26 @ 8pm	
21/4 @ 9:15pm		seen by NB Mam
		→ plu - feed to increase only if abdomen is soft
		Dr. Manitas
		Noted by [illegible] 21/4/26 4:20pm

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Baby Of SRI VIDYA VANGALA
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/4/26 12:50 am	HR = 180/min RR = 65/min SPO_2 = 78-82% on NIV. RS: B/L AE(+), SCR(+), ICR(+) Crespi(+) Suprasternal retract(+) NG aspirate = 1ml greenish aspirate Nasal & oral suction was done but resp. distress not decreased, it worsened. Baby became dull & cyanosed. INTUBATION NOTES Under aseptic conditions, intubation was done & ET tube 3" was inserted @ 7 @ lower lip. Procedure was uneventful. Baby was taken on PIV mode with PEEP = 6, PIP = 16, FiO_2 = 50%, Ti = 0.35, RR = 30	Plan: • To do Intubation & taken on PIV mode Dr Ramya
	HR = 166/min RR = 42/min SPO_2 = 100% on PIV mode Noted by Dr Ramya 22/4/26 @ 1am	Plan: • To do CXR now • Start Fentanyl infusion • Change warmer now • Monitor vitals strictly. Dr. Ramya

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25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : D28 **PMA:** 30+2wks

Term ☐ **Preterm** ☑ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT ELBW	
2.	Apnea of prematurity	
3.	Suspected sepsis	
4.	Anemia	
5.	Hyponatremia	
6.	VAP- ?Acinetobacter	

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☑ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP 18 PEEP 6 VG ..... Rate 35 Fio2 35 Oxygen : ..... L/min

Last CXR : yesterday Spo2 : .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: 7.29/67/5.9/28.3

Change over the Last 24 Hours .....

VAP- ?acinetobacter - taken blood CS
started meso/colistin

CARDIO VASCULAR SYSTEM

Plan of Care : Continues current ventilation

CNS

Neurological Examination : .....

Sedation — .....

Last Neurosonogram : (N) Any Seizures — .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:..... soft. Mild distension
stool- passed

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Meropenam	D6	Inj caffiene
	2.	Colistin	- D9	glycerine
	3.			neb T - 3% NACl
				Colistin

Plan of Treatment :

① continue PTV - mode - 18/6
monitor UTE / leak
target SPO2 - 90-95%.

② TV - 160ml/kg/day - 10ml/hr - 4hrs on
2hr off

③ Positioning - (R) up
(L) up
supine
4hrs each

④ gas - BD
RBS - OD

⑤ ROP - thursday.

⑥ Ilo charting 6hourly

Doctor's Name (Handover given) : Dr. Mamatha. R

Signature : [signature]

Date & Time: Dr. Mamtha. R

Doctor's Name (Handover taken) : [signature]

Signature : Rupanjali

Date & Time: 22/04/24

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/04/26 9:10 am		Seen by Dr VJ
		- continue PTV + VG
		- Blood gas - BD (accept PH 7.25 PCO_2 upto 60
		- 4 hourly position.
		- 3% NaCl + colistine Nebs
		- NP_2 CRP SBR T/M GAS
		- Cont SSPT X 24 hours
		- Restart Fortification 19 1½ sact Rupanjali in one cycle.

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

Noted by Hemalatha 22/4/26 @ 9.20 AM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/4/2026 @ 2.20pm	Afternoon Rounds	Plan
	Ventilator :	
	Resp: Baby on ventilator. PTV + VG mode	1) Continue Conventional ventilation
	VG = 4.5mL/kg (4.4mL)	Target SPO_2 90-95%
	PIP = 18/22	
	PEEP - 6	
	Rate = 35/min	2) TV = 160mL/kg/day
	FiO_2 - 21%	10mL/hr (4hr on / 2hr off)
	↓↓	+
	① Positioning = (bt) up.	Fortification 1½ Sachet (1g)
	② ET Secretions (+)	each cycle.
	No Brady/desaturation	
	T Temp = 99.2°F	3) NP, CRP, SBR, Blood gas — T/m
	Vitals : HR = 161/min	
	RR = 65/min	
	SPO_2 = 97%	4) Blood gas BD
	BP = 64/44 (51)	GRBS - OD
		Accept PCO_2 upto 60 if PH > 7.25
	P/A - Soft, midday	
	No aspirates	
	Full cyclical feeds	5) I/O charting 6th hrly
	U/B = 3.8cc/kg/hr	
	Stool passed	Sneha

Noted by Hemalatha 22/4/26 @ 2.40pm

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/4/26 5.30pm		Seen by DST
		① Continue current ventilation
		② Blood gas BD / SOS
		③ EBM - mouth care
		④ Continue feed - cycled 160ml/kg/day
		⑤ Continue ~~Meropenem~~ colistin
		Add Tigecyclin
		Stop Meropenem
		⑥ NP2 LRP SBR | T/M
		Dr Sowmya

Noted by
Hemalatha
016699
22/4/26
@5.40PM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/4/26 @ 8:45pm	Night Rounds	
	Ventilator	Plan
	PTV + VG (4.5mL/kg)	
	PIP = 15-18/22	1) Cont Current
	PEEP - 6	Ventilation
	Rate = 35/min	Target SPO_2 90-95%
	Ti = 0.35 FiO_2 - 23%	
	MAP = 8.5, leak - 14%	2) TV = 160mL/kg/dr
	⇓	↓
	• mild SCR (+)	10mL/hr
	• peri - warm, pink	4hr on
		2hr off
	Fever Spike - 100.2°F	+
	in evening	fortification (1 1/2 Sachet
	No w settled	each cycle
	Vitals HR = 166/min	
	RR = 39/min	3) NP_2
	SPO_2 = 95%	CRP, SBR } T/m
	BP = 59/37 (44)	Blood gas
	P/A - Soft	4) Gas - BD, GRBS - OD
	Non distension	Accept PCO_2 upto ~~6mL~~ 60mmHg
		if PH > 7.25
	U/O = 3.6 mL/kg/hr	
	+ 37.4ml	5) Ilochailing 6th
		6) W/f - Brady, dis at

Noted by Dewdamant 22/4/26 9pm

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

23/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : D29 **PMA:** 30+3 wks

Term ☐ **Preterm** ☐ Gestation : 26+4 wks Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	
2.	Apnea of Prematurity	
3.	Suspected Sepsis	
4.	Anemia	
5.	Hyponatremia,	
6.	~~VAP & Acinetobacter~~ (Colba resistant)	

Today's Weight : LPI

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio2..... Oxygen : ..... L/min

Last CXR : ..... Spo2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

Baby on PTV + VG mode
VG = 4.5 ml/kg
• PIP = 18/22, PEEP = 6
• FiO2 - 25-28% upto
• MAP = 8, leak = 10%
RR - 35/min

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 172/min
SpO2 - 92-1
BP = 62/39 (48)
RR - 40/min

CNS

Neurological Examination : .....

Sedation.....

Last Neurosonogram : ..... (N) , Any Seizures.....

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	P/A → soft, distended	→ Gas BD
	Stools passed	GRBS OD
	one episode of vomit	
		→ Positioning as planned
	HR - 152/min	
	RR - 41/min	→ Stochastic Ohrlg
	SPO2 - 97%	
	BP - 71/55/60	→ monitor vital
		[signature]
	Noted by Hemalatha 96699 23/4/26 @1.40pm	
23/4/26 3:30 pm		C/S/B → DRUT
	Abdomen → full, soft	
		→ continue current ventilation
		→ wean as tolerated
		→ Blood Gas BR
		→ continue infusion feeds.
	Noted by Hemalatha 23/4/26 @3.40pm	[signature] (FAC2)

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/4/2026 4pm	Tachycardic - HR - 200/min Temp - 100°F Has VAP 2 episode of vomiting	Plan 1) Give IV PCM 2) If further fever spikes send repeat blood c/s 3) If distension/vomiting ↓ cyclical feeds to 8ml/hr. ↓ fortification 1½ → 1 [signature]
	Noted by Hemalatha 016699 23/4/26 @ 4-10pm	
23/4/26 10:00pm	Night rounds	
	- on SIMV + PS + VG. (4.5ml/kg) FiO_2 - 25%, 16/22, PEEP 6, RR - 35/min PS - 12	Plan: - Continue current ventilation

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 25 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		- IV - 160 ml/kg/day
	SPO_2 - 96%	↓
	PR - 167/min	10 ml/hr - 4 hrs on
	RR - 35/min	2 hrs off
	BP - 58/33 (41)	+ 3% NaCl in each cycle
		+ 1 1/2 MMF
	P/A - distended, soft,	- w/f vomitings
	stools - passed	↓
	urine - 2.9 ml/kg/hr	if further vomitings plan to withhold MMF.
	- Issues - 2 episodes of small vomitings	- w/f abdomen distension
		- CXR c̄ abdomen SOS
		- Blood gas BD
		- RBS OD
		Ancesh
		Noted by Devudamma. K 017243 23/4/26 10:30 pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

24/4/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 30 **PMA:** 30+4 weeks

Term ☐ **Preterm** ☐ Gestation : 26+4 weeks Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	LRTI - Carbapenam resistant Acinetobacter.
2.	Apnoea of prematurity	
3.	Suspected sepsis	
4.	Anemia	
5.	Hyponatremia	
6.	LRTI	

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

- on simv + PS + VG (4.5 ml/kg)

FiO_2 - 25%, 17/22,

RR - 35/min, PEEP - 6, leak - 5%,

- tpmf to start in

CARDIO VASCULAR SYSTEM

Plan of Care :

RR - 35/min,

SpO_2 - 96%

PR - 151/min

RR - 35/min

- 3 episodes of small vomiting.

- 1 episode of fever spike [100.6°F]

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : .....Any Seizures.....

- Rop done yesterday.

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output : 4.1 ml/kg/hr Stools : pound

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft, Distended

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Tigecycline	D3/D7	Inj. caffeine
	2.	Collistin	D4/D7	Glycerine
	3.			neb < 3% NaCl, collistin

Plan of Treatment :

- continue current ventilation
- Target SpO2 90 to 95%.
- TV - 160 ml/kg/day → 10 ml/hr < 4 hrs on, 2 hrs off
- Blood gas BD
- RBS OD
- positioning < Rt. Up, Lt. Up, Supine } 4 hours each
- I/o charting 6th hourly
- w/f ap. Brady, Desat
- CXR c̄ abdomen SOS -

Doctor's Name (Handover given) : Anesha

Signature : Anesha

Date & Time: 24/4/26

Doctor's Name (Handover taken) : Sneha

Signature : Y. Sneha

Date & Time: 24/4/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/~~26~~/26 @ 9:30am		Plan
	Respirator.	
	on ventilator.	1) Continue Current Ventilation
	⊙ SIMV + VG + PS (12)	R/v to ↓ Rates.
	VG = 4 → 4.5mL/kg.	Target SPO_2 90-95%.
	PIP = 18-20/22.	
	PEEP - 6., FIO_2 - 21%.	2) Tv = 160mL/kg/day
	Rate - 35/min	↓ ↓
	MAP = 8.5, leak = variable	10mL/hr ✗
	upto = 20%.	4hr on
		2hr off.
	last gas:	1½ for life
	7.41/45/37.2/27.2/3.9.	3% NaCl
	lac = 0.9.	
	elec = 138/4.4/108	3) Recheck BP
	ica^{+2} = 1.38.	
		4) I/O charting 6th hr
	1 fever Spike - 100.6	
	1 dose PCM.	5) W/f - Brady desaturation.
	Intermittent tachycardia	
	No Hypotension	
	↓	6) R/v on chest x-ray
	⊙ vitals ⊙ HR = 168/min.	
	⊙ RR = 85/min	
	SPO_2 - 95%.	
	BP = 61/38	
	B/c/s - 24hr No growth (45)	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 0 M 28 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	GRBS - 99mg/dl	
	U/O = 4.1cc/kg/hr	
	+76ml	
	P/A - Soft	
	Small milky vomitus	
	Sepisodes.	
	Stool - passed	
		Noted by Hemalatha 016697 24/4/26 @9.40am
29/04/26		Seen by Dr VJ
10:10 pm	Pmax - 20 Rate - 30	• Continue current ventilation
		+ PIP max = 20 Rate = 30
	D3 = tubing	
	- Tumy = soft	- B Aim to extubate by 48h.
		- CXR - T/M
		- Positioning 4 hours as planner
		-
		Punjab
	Noted by Hemalatha 24/4/26 @ 10.20am	

Docu. No. : RCHBH /FRM / CLINICAL / 088

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/4/26 @ 1PM	**Rounds**	**Plan**
	Respiratory: Baby on Ventilator. SIMV + PS + VG VG = 4.5ml/kg PS - 12 PIP = 16-18/20. PEEP - 6 Rate - 30. FiO_2 21-25%.	1) Continue Current Ventilation Target SpO_2 90-95%. Accept PCO_2 upto 60mmHg if PH > 7.25 ↓ Aim for extubation by 48hours.
	⊙ Intermittent tachycardia ⊕ ⊙ No desaturation. No Bradycardia No vomitings.	2) Chest X-ray Tomorrow. 3) Blood gas - BD RBS - OD.
	Vitals: HR = 160/min SpO_2 = 93%. RR = 30/min ~~SPO_2 = 6~~ BP = 64/36(45)	4) positioning { Rt up, Lt up, supine } 4hrs each 5) T/o chesting 6th hrly. 6) W/f - Brady desat 7) Trace - B/C/S
	P/A - Soft ~~Non~~ mild distended Stool - passed No vomitings	8) Temperature monitoring Sneha

Noted by Hemalatha 016849 24/4/26 @ 1.30PM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/4/26 @ 3:15pm		Seen by Dr. VJ
		1) Cont. Current ventilation
		2) Oral Suction followed by ET Suction
	Tummy - Soft	
		3) change NG tube
		4) Start Domeperidone Susp 0.2ml / TID
		5) Blood gas - BD
		6) Tomorrow chest X-ray
	Noted by Hemalatha 016699 24/4/26 @ 3.30pm	Sneha

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	NIGHT ROUNDS	
24/2/26		CS/B → ~~Drainage~~
		Plan
8pm	on SIMV + PS + VG	
	PS → 12	→ Continue current
	VG → 4.5ml/kg	ventilation
	Pmax - 18/20	
	PEEP - 6.	→ R/v Extubation T/m
	RR - 30.	
		→ chest xray T/m
	P/A → soft,	
	1 episode of vomit	→ Gas BP
	Stools - Passed	GRBS OD
	HR 155/m	→ Position → Rt up
	Un - 54/m	Lt up } 4 hrs each
	SPO2 - 95%	Supine
		→ TV - 160cc/kg/day
		10ml/hr → 4 hrs
		cs 2hrs off
		→ Take blood cls
		→ Monitor vital
		[signature]
		Noted by
		Sis Priyanka
		24/5/26 8pm

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 31 **PMA:** 30+5

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age:.....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	~~ELBW~~ ELBW	
2.	Apnea of Prematurity	
3.	Suspected sepsis	
4.	Anemia	
5.	Hyponatremia	
6.	URTI - pneumonia - CRABS	

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On SIMV + PSTVG

PS-12

VG-4.5ml/kg

PEEP-6

HR-166 RR-30

RR-56/- PIP- 18/20

SPO2-95%

BP-55/38/45

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination : .....

Sedation..... NO

Last Neurosonogram : ..... (N) Any Seizures..... NO

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

P/A → soft, distended

Episode of vomit Stools → Passed

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Tigecycline	D4/D7	Inj Caffeine
	2.	Collistin	D5/D7	Glycerine
	3.			Neb → 3% Nacl → collistin

Plan of Treatment :

→ Continue current ventilation

→ Target spor 90-98%

→ TV - 16 cc/kg/day → 10 ml/hr → 4 hrs on → 2 hrs off

→ Chest X-Ray today

→ P/V extubation

→ Gas BD

GRBS OD

→ D/O chart of flaky

→ Positioning as Planned

→ Trace blood c/s

Doctor's Name (Handover given) : [illegible]

Signature : [illegible]

Date & Time: 25/4/26

Doctor's Name (Handover taken) : Y. Sneha

Signature : Sneha

Date & Time: 25/4/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/4/26 @9am		Seen by Dr. VJ
	Extreme PT / ELBW. RDS	1) Extubate the baby to NIV. after proper Suction with mask. 18/6, RR-30, Ti=0.4.
	P/A - 8 gm	2) 10mg/kg - Caffeine dose
		3) Keep NPO for extubation
		4) Post extubation - Blood Gas
	Noted by Hemalatha 25/4/26 @9.20am	Sneha
25/4/2026 @10:30am	Extubation Notes.	
	After proper Suctioning of ET tube. Baby was extubated with mask	taken on NIV.
	PIP-18, PEEP-6	1) Respiratory care
	Rate-30.	
	Ti=0.4.	2) Clear oral Secretion oral mouth care.
	FiO_2-30%.	
	Vitals:	3) Feeds to start after 1hour at 11:30pm
	HR=172/min	4) Gas after 2 hours
	RR=41/min	Sneha
	Noted by Hemalatha 25/4/26 @ 11.40AM	

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	SpO_2 = 94%	
	BP = ~~54/47(50)~~ 65/43(53)	
25/4/2026 @11:00am	P/A - soft	
	Nutrition Calculation (9649)	
	TV = 160ml/kg/day	
	160ml Kcal Pro Ca P Fe VitD	
	67/1.1/35/15 (CBM) 107.2 1.76 56 24 0.32 —	
	/0.2/-	
	Fortical ~~(1/2)~~ (6) 23.34 1.62 35.94 8.16 0.54 —	
	(3.89/0.27/5.99/	
	1.36/0.09/<0.1)	
	Osopan-D = 3ml 75 33 120	
	(15/55/200mg)	
	Vit D = 1ml 800IU	
	Oloper XT = 0.3ml 3mg ~~800IU~~	
	130.54 3.38 110.94 65.16 3.86 920IU	
	Per kg 135.97 3.52g 115.5 67.87 4mg/kg 958IU	
	Sneha	

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/4/26 @1:30pm	Afternoon	Notes
	Baby Extubated to NIV with mask	Plan
	PIP-18, PEEP-6, RR-30	1) Continue NIV with mask
	Ti = 0.4, FiO_2 - 28%	Target SPO_2 90-95%
	↓	Taper FiO_2 as per target
	Oral Secretions - plenty	
	ongoing cyclical feeds	2) Plan - Blood gas at 1:30pm
	No vomiting	
	Abdomen - mild distension	3) Tv = 160ml/kg/day
	soft	↓ cyclical feeds ↓ supplem
	Vitals	10ml/hr < 4hr on, 2hr off
	HR = 173/min	
	RR = 37/min	
	SPO_2 = 96%	4) R/v to Increase
	BP = ~~6~~ 70/55(60)	ossopan - D
	U/Q - Stool - passed	5) Gas - BD
		GRBS - OD
	~~Tig~~ Tigecycline (D_3)	6) I/o charting 6th hrly
	Colistin (D_4)	
		7) Accept PCO_2 upto 60mmHg if PH > 7.25
		8) Trace B/c/s
		9) Positioning < Rt up, Lt up, Supine } 4hrly

Noted by Hemalatha 016699 25/4/26 @1.50pm

Sneha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/4/26 @4.25pm		Seen by Dr. VS
		1) Continue NIV
		2) Blood gas - OD
		3) Fluids infusion feeds
		4) Regular oral Suction
		5) Chest x-ray (AP)
	Noted by Hemalatha (016699) 25/4/26 @4.35pm	Sneha

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/4 @9:28pm	Night round	
	31 days / 26+4 → 30+5 wks /	
	V → baby on NIV	Plan
	18/6 rate-30	
	FiO_2	→ continue NIV - 18/6
	No brady / decals	Target SpO_2 - 90-95%
	C → HR - 190 bpm / crying	→ TV - 160 ml/kg/day
	Bp - 93/82 (80)	cyclical feed - 10 ml/hr
	U/O - 3.6 ml/kg/hr	4 hrs 2 hr off
	P/A no obvious distension	→ gas - OD
		→ GRBS - OD
		→ positioning - (R) UP / (L) UP / 4 hrs supine
		→ monitor vitals
		R Dr. Manoj
		Noted by Sis Priyanka 25/4/26 9:30pm

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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25-03-2026 0 Y 0 M 28 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 32 **PMA:** 30+6

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT ELBW	Anemia
2.	LRTI - pneumonia - CPAP	
3.	Apnea of Prematurity	
4.	Hypotension	
5.		
6.		

Today's Weight :

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP 17 PEEP 6 VG ..... Rate 30 Fio2 ..... Oxygen : ..... L/min

Last CXR : ..... Spo2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours .....

extubated to NIV

CARDIO VASCULAR SYSTEM

Plan of Care : Continue NIV

CNS

Neurological Examination : .....

Sedation –

Last Neurosonogram : (N) Any Seizures –

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... No distention tolerating feeds

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	Tigecycline - D5/7		in coffiene demand
	2.	Colistin - A6/7		glycerine
	3.			neb - 3% NACl
				colistin

Plan of Treatment :

① continue NIV - 17/6
target SpO_2 - 90-95%.

② TV - 160ml/kg/day - 10ml/hr - cyclical feed
└ 4hr - On
2hr - Off

③ CBG - OD
RBS - OD

④ positioning - (R) UP
(L) UP
supine | 4 hours

⑤ accept PCO_2 - upto 60 mmHg if PH > 7.25

Doctor's Name (Handover given) : Dr. Mallika

Signature : .....

Date & Time: 26/4/26

Doctor's Name (Handover taken) : .....

Signature : .....

Date & Time: .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
Dr. VIJAYANAND JAMALPURI

(150)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/4 @ 8:37AM		seen by Dr. Vijayanand MASK - NIV - 15	6 rate - 30 continue IV antibiotics CBG - blood gas alternate day. continue nebulisation prn Noted by 26/4/26 @9AM
26/4/2026 @ 3:43pm	Afternoon Rounds Baby on NIV with mask PIP - 15, PEEP - 6 Rate = 30/min FiO_2 = 23% Ti = 0.40 No Bradycardia No desaturation	Plan- 1) Continue NIV with mask. PIP - 15, PEEP - 6 Target SPO_2 90-95% 2) TV = 160ml/kg/day 10ml/hr - 4hr on, 2hr off cyclical feed

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 28 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Very mild SCR (+) on (1st) lateral position	3) Blood gas - alternate day GRBS - OD
	Post cyclical feed Abdomen - mild distent No vomitings	4) Positioning Rt up Lt up } 4 hourly Supine
	Vitals HR = 153/min RR = 50/min SPO_2 = 100% BP = 71/40 (51)	5) Accept PCO_2 upto 60 if PH > 7.25
	P/A - soft 0-3 ml light Yellow aspirates No vomitings	6) I/o charting 6th hrly 7) Continue - IV Antibiot Nebulisation
	U/o = 3.4 ml/kg/hr + 21.2 ml.	8) Watch for - Resp distress Apnea, Brady, desat

Sneha

Noted by Jawaf 22985 26/4/26 @4pm

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25-03-2026 0 Y 0 M 29 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/4/26. @8:30pm	Night Rounds	
	Resp:	Plan
	Baby on NIV with mask.	1) Continue NIV with mask current Setting
	PIP = 15, PEEP-6, Rate-30, FiO_2 - 23%.	Target SPO_2 90-95%.
	No Bradycardia / desaturation	2) TV = 160mL/kg/day 10mL/hr 4hr on 2hr off.
	No very minimal ICR (+)	+ fortification + 3% NaCl.
	Vitals HR = 154/min	
	RR = 45/min.	3) Positioning Rt, lt up, Supine } 4th hrly each
	SPO_2 = 94%.	
	BP = 70/29 (42)	
		4) Accept PCO_2 upto 60. if PH > 7.25
	P/A = Soft, mild distension.	
	ongoing feeding cycle.	5) I/O charting 6th hrly
	No vomiting	6) Blood gas - alternate day GRBS - OD
	No aspirates. (0.8mL light Yellow-mrng)	
		7) Continue IV antibiotic Nebulisation
		8) w/f - Apnea, Brady, desat, Abd. distension

Noted by SIS, 11/4/26

Sneha

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25-03-2026 0 Y 0 M 29 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 83 **PMA:** 31wks

Term ☐ **Preterm** ☑ Gestation : 26+4da Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	Hyponatremia
2.	LRTI-Pneumonia-CPAP	
3.	Apnea of Prematurity	
4.	Anemia requiring transfusion	
5.		
6.		

Today's Weight : 950g (↑59)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

Baby on NIV
PIP 15, PEEP-6, TI=0.40,
RR-30/min

CARDIO VASCULAR SYSTEM

Plan of Care :

HR=150/min
RR=43/min
SpO2-97
BP=66/38(44)
FiO2-22%.
NO Bradycardia
No desaturation
Intermittent mild ICR-SCR

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : Normal .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft, mild distension

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture☐ ET culture☐ Fungal Culture☐ LP ☐ CSF :.....

	Sl.No.	Drugs	Days	
Antibiotic	1.	Tigecycline	D5/D7	Inj-caffein
	2.	Colistin		Glycerin
	3.		D6/D8	Neb - 3% NaCl
				colistin

Plan of Treatment :

1) Continue NIV: 15/6, Rate = 30/m
Target SpO_2 90-95%.
2) TV = 6ml/kg/day = 10ml/hr (4hr on / 2hr off)
3) Review on 3% NaCl. + fortification + 3% NaCl
4) Positioning Rt up / Lt up / Supine } 4th hrly care
5) Accept PCO_2 upto 60mmHg if PH > 7.25
6) No charting 6th hrly
7) Blood gas - alternate day, GRBS - OD
8) w/f Apnea, Brady, desaturation

Doctor's Name (Handover given) : Y. Sneha
Signature : Sneha
Date & Time: 27/4/26

Doctor's Name (Handover taken) : .....
Signature : Rupinder
Date & Time: 27/4/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 29 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/04/26 10:00 am		Seen by VY
		— ~~NIV~~ → C
		Change to CPAP
		— Blood gas alt day
		— Continue antibiotic another two days.
		— Weekly review.
		Prajnali
27/4/26 1:50pm	Afternoon round	
	33 Dol / 26+4 → 31.	Plan
	on CPAP — 15/6.	1) Continue CPAP - PIP-15, PEEP-6
	No Desat / Brady	2) TV-160 ml/kg/day + 10 ml/hr → 4 hrs on + fortification + 3% NaCl → 2 hours off
	on cyclical feeds.	of feeds.
Vitals:	Spo2 - 96%.	3) Gas - alternate day
	HR - 129/min	4) RBS-OD
	RR - 34/min	5). Monitor vitals.
	BP - 68/38 (49)	6) Continue antibiotics for 2 days
	- Stool, urine → passed	
	- P/A — mild distension.	
	- NG aspirates - Nil	

(N. Prabhakar)
Nated BD Kousha
27/04/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes		Doctor's Order			
27/04/26	weekly review		wt - 0.950 kg			
	TV - 152 ml.					
	Cal	Plot	Ca^{+2}	PO_4^-	Iron	Vit-D
- EBM 67/1.1/35 15/0.2/-	101.8	1.6	53.2	22.8	0.3	-
- Fortification 6 gm 3.89/0.27/5.9 1.36/0.09/0.1	23.3	1.62	35.4	8.16	0.54	0.6
- Vitamin-D3 1ml/800IU	-	-	-	-	-	800
- OROfer XT 0.3ml	-	-	-	-	3	-
- Osropan-D 3ml	-	-	75	33	-	120.
Total →	125.1	3.22	163.6	63.96	3.84	920.6
Per kg →	131.6	3.38	172.2	67.3	4	970
weekly wtgain → 26+4 → 31 wks.			Ca^{+2} : PO_4 ratio ⇒ 2.5 : 1			
HC 26 cm.						
Length 36 cm						

N. Prathibha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/04/26 3 pm.		seen by Dr. VJ Sir
		1) Continue CPAP.
		If stable ↓
		think about prongs CPAP.
		after 2 days.
		2) Tomorrow 30 hrs feeds. plan
		3) Antibiotics for 2 more days.
		4) Blood tests next week
		5) gas ~~[illegible]~~ alternate days.
		6) RBS-OD.
		Noted By Koushik 27/04/26
27/4/26 9 pm.	Night rounds	
	D33 / 26+4 → 31	Plan
	On CPAP ē mark	
	PIP - 15, PEEP-6.	1. Continue CPAP ē mark
	No Desat / Brady / Apnea.	PEEP-6, PIP-15
		2. Review blood tests - next week
Vitals:	SpO_2 - 99%	
	HR - 166/min	3. Gas - tomorrow ~~[illegible]~~ alternate day
	RR - 34/min	
		4. RBS-OD
	P/A - Soft, no distension.	5. TV - 160 ml/kg/day. ~~[illegible]~~
	U/O - 3.3 ml/kg/hr	+ fortification + 3% NCCL.
	Stool - (2) passed.	10 ml/hr ← 4 hrs on, 2 hrs off
	NG aspirates - Nil.	

Noted by Agnel 04/05 at 9 pm

N. Prathibha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/4/26		Seen by Dr. Nilesh
12:45AM		
	NIV → CPAP today.	Plan.
	– No distress.	– Continue CPAP
	– Tolerating cyclical feeds.	– To start boles feeds from Tommorrow 13ml 2nd hrly from 7:00AM
		Anuf
		Noted by Agnes 019085 at 12.45AM.

Docu. No. : RCHBH /FRM / CLINICAL / 088

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/4/26 10:50pm	Night Round.	
	On CPAP c̄ Ram's PEEP - 7	Plan.
	No beady/desat.	→ Continue CPAP c̄ Ram's PEEP 7.
	Vitals. HR - 124/min RR - 40/min Spo2 - 97%. BP - 52/35(41)	→ TV - 160cc/kg/day 13ml/2nd hrly + fortification + 3% Nall. (OG)
	P/A - Soft.	→ w/f beady/desat
		→ I/O charting 6th hrly
		→ Monitor vitals.
	Noted by Agnel 010085 at 10.50pm	Bopally

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/04/26 9:25 am.		Seen by Dr Pratyush Sir
		Shift c̄ Ram's @ 7 peep by evening after ROP.
		- Stop Colistin - Nebs.
		- ASK CRP in same sample.
		- Oral caffeine.
		- Trace TFT & FT4
		Rm
30/4/26	Afternoon	Plan
	- Baby withstood ROP examination well	(1) To shift to RAM's c̄ PEEP 7cm by Evening
	- No brady, No desat.	(2.) TV - 160 ml /kg/ day. 13 ml @ 2h + 3% NaCl + fortification (All EBM)
	- Current vitals HR = 142 SPO_2 = 100 RR = 30	(3) To Trace TFT & FT4
	ROP 32 week B/E Zone - P vessels few tortuous No stage, No plus	(4) W/F apnea, brady desat
	CRP = 5.9	Rmjal

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... soft, non distended.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.	colistin Neb		vit D_3 (800IO)
	2.	3% NaCl Neb		Ossopan-D @ @80mkday Ca.
	3.			Domstal @ 0.2mkdose.
		Incubator - D		Glycerine supp
				3% NaCl @ 4meq/kg/day
				1mg caffiene @ 5mkdose.

Plan of Treatment :

1. cont CPAP mask 6cm, FiO_2 to target SpO_2 90-95%.
2. TV=160ml/kg/day → 13ml Q2H + 3% NaCl + Fortification
3. Gas twice weekly
4. Trace NP_2 & TFT
5. consider oral caffiene
6. ROP today
7. change Incubator

Doctor's Name (Handover given) : Dr. Ashwarya

Signature : .....

Date & Time: 30/4/26

Doctor's Name (Handover taken) : .....

Signature : Rupanjali

Date & Time: 30/4/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
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30/4

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 36 ..... **PMA:** .....

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: 31+3 .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	Hyponatremia
2.	Pneumonia	
3.	Apnea of prematurity	
4.	Anemia	
5.		
6.		

Today's Weight : 1.005 ↑20gm.

RESPIRATORY SYSTEM

Ventilatory Support : ☑ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... on CPAP 6cm, 23% FiO_2 by mask

no brady/desat

Antibiotics Stopped - Tigecycline D7/7

Colistin D8/8

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - 163/min

SpO_2 - 97%.

RR - 28/min

No desat/BS

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : ..... (N) .....Any Seizures.....

(P.T.O.)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 5 D (M)
Dr. VIJAYANAND JAMALPURI

1/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 37 ..... PMA: .....

Term ☐ Preterm ☐ Gestation : 26+4 ..... Corrected Gestational Age: 31+3 .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ECBW	Hyperatremia
2.	Pneumonia	
3.	Apnea of prematurity	
4.	Anemia	
5.		
6.		

Today's Weight : 1.020 ↑ 15gms

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On CPAP c̄ Rain's, PEEP - 7
No beady / desat
Intermittent tachypnea

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 172/min
RR - 52/min.
SpO_2 - 94%.
BP - 62/34(42)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:..... Soft, non distended.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Colistin Neb.	
2.	3% NaCl Neb.	
3.		

Inf D3
Ossopan D.
Domstal.
Glycerine
3% NaCl.

Plan of Treatment :

- Continue CPAP - 7 cm H2O
- Target SpO2 90-95%
- IV - 160cc/kg/day ⇒ 13ml/2nd hrly + 3% NaCl + fortification
- Gas - twice weekly.
  RBS - OD.
- I/O charting 6th hrly
- Monitor vitals.

Doctor's Name (Handover given) : Roopashree

Signature : .....

Date & Time: 2/5/26 8am

Doctor's Name (Handover taken) : Rupanjali

Signature : .....

Date & Time: 1/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/5/26 9:53 AM		C/S/B → Dr PR
		→ Continue CPAP-22
		→ change to CPAP 6 T/m
		→ Remove IV Line
		→ Cling wrap.
		→ TV - 170cc/kg/day 15ml Q2hrly
		(FA 12)
1/5/26 12:00 am	Afternoon	Plan
	- On CPAP - 7 c Ram's	- TV - ~~160cc~~ 170 / kg / day 15ml - 2 hourly - EBM + fortification
	- No brady - desat	
	HR - 136	
	SPO_2 - 100	- W/F apnea, brady desat
	RR - 44	
		- R/V for KMC.
	Noted by Dinathy	Ranjan

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		[signature]
		PEEP 6
1/5/25 8:50pm	Night 1	plan
	- On bubble CPAP @ ~~[illegible]~~ 6peep c̄ Ram's	To continue CPAP - @ 6peep in RAM"
	- No brady, No desat	- TV - 170cc/kg/day 15ml - 2hours
	- Feeds tolerated	+ fortification + 3% nacl
	- Enthermic	
	HR - 163 SPO_2 - 100 RR - 37	- W/F apnea, brady desat
	P/A - soft	Rupjal

Noted By
Agnel
01/05/25
at 8.50pm.

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 5 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 38 **PMA:** 31+4

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Extreme PT / ELBW	UAD - Acinetobacter (carb resis)
2.	RDS → Evolving CLD	
3.	~~VAP~~ → ~~Sepsis~~ AEN	
4.	Apnea of prematurity	
5.	Anaemia.	
6.		

Today's Weight : 1.055 ↑ 95gm

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On bubble CPAP - 6cm @ RAM's

- No Brady, desat events

- Minimal tachypnea / SCR

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - 130
SPO2 - 100
BP = 67/35

CNS

Neurological Examination : ..... (N) .....

Sedation ..... / (No)

Last Neurosonogram : ..... (N) ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☑ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☒ No - If yes, details : .....Calories:.....

Abdominal Examination:..... P/A - soft

feeds - tolerated

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			- Ossopan-D
	2.			- Vit-D3
	3.			- Domstal
				- Glycerin
				- 3% nacl

Plan of Treatment :

- Continue CPAP @ 6cm target SPO2 90-95%
- TV - 170 cc / kg / day — 15 ml - 2 hours EBM + fortification + 3% nacl. full OG.
- R/V for KMC
- GRBS - OD
- GAS - Lalice weekly (Last gas - 1/5/2020)
- R/V to restart Orofer - XT Drop
- N/F apnea, brady, desat

Doctor's Name (Handover given) : .....

Signature : Rupanjali

Date & Time: 2/5/20

Doctor's Name (Handover taken) : N. Prathan

Signature : N.Pz

Date & Time: 2/5/20

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/5/26		Seen by Dr. Prathyusa
		1) Cont CPAP PEEP-6
		2) Start levothyroxine discuss with Dr. Leena mam (10 µg/kg)
		3) Gas - twice weekly
		4) KMC from tomorrow
		Sneha
		Noted by Nandini 2/5/26.
2/5/26 4 PM	Afternoon Rounds	U/S/B DGPR
	On CPAP→6	→ Continue CPAP→6
	1 episode of bradi	
	P/A→ Soft, tolerating feeds	→ To check fluid/bier temp.
		→ Continue levothyroxine
	HR-134/-	
	RR-45/min	→ GRBS OD

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

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Date & Time	Progress Notes	Doctor's Order
	SPO2 - 98%	
	BP → 65/38/48	→ Gas - twice weekly
		→ KMC from t/m
		→ Monitor vitals
		[illegible]
2/5/26 10:40pm		
		Seen by Dr. Pradyumna Sir
		Plan:
		✓ Continue CPAP - 6.
		✓ Monitor vitals, Distress
		↓
		If distress ↑se ↑se CPAP to 7
		Noted By Meghe 3/5/26
		→ Nat

Dr. Reg

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/5/26 6 am	DOL-39 | 26+4 → 31+5	
	Extreme preterm / ELBW	
	RDS → Evolving CLD	Plan
	Apnea of prematurity	
	Anemia.	1. Continue CPAP- PEEP-6
	VAP - Acinetobacter. (Carb resist)	
On CPAP_PEEP-6		2. TV - 170cc/kg/day
Today wt: 1,095 (43 gm ↑)		@ 15ml @ 2 Hour EBM.
		+ fortification + 3% NaCl.
	No Desat / Brady / Apnea.	full OG feeds
		3. KMC to start
	SPO2 - 96%.	
	HR - 137/min	4. GRBS-OD
	RR - 39/min	
	BP - 67/42 (51).	5. Gas - twice weekly
	urine / stool / passed.	6. Monitor for RD. If increases ↑ PEEP-7.
		N. Prathishy.

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA (M)
25-03-2026 0 Y 1 M 1 D
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

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Date & Time	Progress Notes	Doctor's Order
3/5 @ 6:11 AM		Seen by Dr. Pratyush
	TWT - 1.098 ↑ 45g.	
		→ continue CPAP-6
		→ KMC to start today
		→ Noted By Megha 3/5/26
3/5/26 5:50pm	Afternoon Round	
	on CPAP - PEEP 6	Plan
	No bradyl desat	
		→ Continue CPAP-6
	Vitals	
	HR - 159/min	→ TV - 170cc/kg/day
	RR - 34/min	15ml/2nd hely EBM
	SpO2 - 100%	+ fortification + 3% NaCl.
	P/A - soft	→ Start KMC
		→ Gas twice weekly
		GRBS - QD

Noted By Hoshini

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/5/26	Night Round	
	on CPAP-6.	
	No brady/desat	Plan.
	Tolerating feed.	→ Continue CPAP-6.
		→ TV-170cc/kg/day.
	Vitals- stable.	15ml/2nd hrly.
		+ fortification + 3% NaCl
	P/A- soft	
		→ ~~LP~~ Monitor vitals
		Poopthe
		Noted By Kousaiah 03/05/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : ~~39~~ 40 **PMA:** 31+5

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPT / ELBW.	VAP – Acinetobacter.
2.	RDS → Evolving CLD	
3.	Apnea of prematurity	
4.	Anemia.	
5.		
6.		

Today's Weight : 1122g (↑24g)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : ..... Spo2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On Bubble CPAP – 6.
No brady/desat.

CARDIO VASCULAR SYSTEM

Plan of Care : HR – 126/min.
RR – 45/min
SpO_2 – 100%.
BP – 64/33(44)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : ..... (N) .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... TV – 170cc/kg/day

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A – soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Osropan – D
	2.			wt D3.
	3.			Domstal.
				Glycerine.
				3% NaCl.

Plan of Treatment :

- Continue CPAP-6, Target SpO2 90-95%.
- TV – 170cc/kg/day ⇒ 15ml/2nd hely EBM + fortification + 3% NaCl.
- ~~Cont~~ Start KMC today.
- I/O charting 6th hely.
- Gas – twice weekly. GRBS – OD.
- w/f bradyl desat

Doctor's Name (Handover given) : Porpitha

Signature : .....

Date & Time: 4/5/26 7am

Doctor's Name (Handover taken) : Sneha

Signature : Y. Sneha

Date & Time: 4/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/5/26 @ 8.30 am		Seen by Dr. Prathyush 1) Start KMC today. 2) ↓ PEEP to 5. 3) Cling wrap 4) Nutritional assessment : Sneha

Noted by
Navalpur
4/5/26
@ 10am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes		Doctor's Order			
04/05/26			TV = 189 ml		Mass wt: 1112 gm	
	Cal	Prot	Cat 2	Pos	Iron	Vit-D
- EBM. 67/1.1/35 15/0.2/-	127	2	66	28.3	0.28	
- fortification (6.5g x12) 3.89/0.27/5.99 1.36/0.09/4	47	3.24	72	16.3	1	48
- Vit-D3 1ml.	-	-	-	-	-	800
- oro/ex XT 0.3ml	-	-	-	-	3	-
- ossopan D 3ml (125/55/200)	-	-	75	33	-	120.
Total	174	5.24	213	77.6	4.38	968
Per kg -	156	4.7	192	70	4	870

Cat 2 : pos - 2.7 : 1

26+4 → 31+6.

950gm → 1.112 kg (162gm weekly wt gain)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/5/26 1PM	Afternoon rounds	
	On CPAP PEEP-5	→ CPAP - PEEP-5 continue.
		continue → TV - 170cc/kg/day
	No Desat/ Brady/Apnea	15ml @ 2H OG feeds
		+ fortification + 3% Neck.
	SpO_2 - 95%	
	HR - 167/min	→ KMC
	RR - 32/min	
	pA - no distension, soft	→ cling wrap.
	on EBM + fortification.	→ Flo charting 6th hourly
		→ Gas - Twice in a week
		→ GRBS-OD.
		→ To repeat TFT after 2 weeks. (N. Prathishan)

Noted
Nadu
4/5/26

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Night Round	
5/5/26		
8AM	on CPAP 5cm Rams	Plan
	bubble	(1) cont. CPAP Rams bubble
	HR-151/min	5cm c̄ FiO_2 to
	RR-39/min	target SpO_2 90-95%
	SpO_2-100%	(2) TV=170ml/kg/day
		15ml @ 2H +
	Active	on feeds +
	Euthermic	fortification + 3% Nacl
		(3) gas twice weekly
	PA-soft, non distended	GRBS OD
	tolerating feeds	(4) IFT after 2 weeks.
		(5) cont KMC.

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 9 D (M)
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6/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 41 ..... **PMA:** 32

Term ☐ **Preterm** ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	VAP - acinetobacter
2.	RDS - Evolving CLD	
3.	Apnea of prematurity	
4.	Anemia	
5.	Congenital hypothyroidism	
6.		

Today's Weight : 1132g (↑20g)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fi_2.....Oxygen : .....L/min

Last CXR : .....Spo_2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On bubble CPAP I rany
5cm / 21%
No brady / desat

HR - 132/min
SpO_2 - 100 %
RR - 33/min

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : ..... N .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☑ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : ..... ++

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 15ml Frequency: Q2H

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Ossopan-D
	2.			vit D_3
	3.			Domstal
				Glycerine.
				3% NaCl.

Plan of Treatment :

1. cont bubble CPAP c̄ Rams @ 5cm → FiO_2 to target SpO_2 90 - 95%.
2. TV = 170 ml/kg/day
   15ml Q2H OG feeds + fortification + 3% NaCl.
3. Gas twice weekly
   GRBS 8D
4. cont KMC
5. cling wrap
6. TFT after 2 weeks

Doctor's Name (Handover given) : Dr Ashwaly

Signature : .....

Date & Time: 5/5/26

Doctor's Name (Handover taken) : Rupanjali

Signature : .....

Date & Time: 5/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 7 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
5/5/26 9:15am		Seen by Dr-Pratyush → Continue CPAP c̄ Rams PEEP – 4 Change to HFNC – T/m → NP2 on Thursday → GRBS alt day Gas – twice weekly. Boopathi. Noted by Nandini 5/5/26
5/5/26 12:00Am	Night rounds – on CPAP, PEEP – 4, FiO2 – 21% SpO2 – 97%. PR – 164/min RR – 40/min. Noted by Archu 5/5/26	Plan: – continue CPAP. – continue full OG feeds. – NP2 on Thursday. – W/f ↑ distress. Anil

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 42. PMA: 32+1

Term ☐ Preterm ☐ Gestation : 26+4. Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW.	VAP – Acinetobacter
2.	RDS – evolving CLD	
3.	Apnea of prematurity	
4.	Anemia.	
5.	Congenital hypothyroidism	
6.		

Today's Weight : 1175g (↑ 43g)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio..... Oxygen : ..... L/min

Last CXR : ..... SpO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours on Bubble CPAP c̄ Ram's 4cm.
1 ~~No~~ brady/desat c̄ self pick up.

CARDIO VASCULAR SYSTEM

Plan of Care : HR – 143/min.
RR – 44/min
SpO_2 – 100%.
BP – 58/35 (44)

CNS

Neurological Examination : .....

..... Sedation .....

Last Neurosonogram : (N) ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:.....

Abdominal Examination:.....

TV - 170cc/kg/day.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft.

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Neopan - D
Vit D3.
Domstal.
Glycerine.
3% NaCl.

Plan of Treatment :

- ~~Cont~~ Change to HFNC - 6 lit today.
- TV - 170cc/kg/day ⇒ 17 ml/2nd hrly + fortification + 3% NaCl.
- NPO - TOMORROW
- gas - twice weekly
- FBS/RBS - alternate day

Doctor's Name (Handover given) : .....

Signature : .....

Date & Time: .....

Doctor's Name (Handover taken) : Dr. Manilha

Signature : .....

Date & Time: 6/5/20

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 9 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/5/26 9:20am		Seen by Dr. Pratyush
		→ Continue CPAP today PEEP-4.
		→ NP2 tomorrow.
		→ R/v change to HFNC tomorrow.
		→ Gas - twice weekly GRBS - alt. day.
		K.M.C - 6-8 hours
		Poorpths
		Noted by Nandini 6/5/26 @ 9:30am
		→ keep prone - nursing
		→ R/v - CBP CRP

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/5/26 3:15pm	Afternoon Round	
	on CPAP - PEEP - 4. multiple episodes of desat c̄ self pick up.	
	Vitals.	Plan.
	HR - 160/min	→ Continue CPAP - 4
	RR - 49/min.	
	SpO_2 - 92%.	→ TV - 170 cc/kg/day. 17ml/2nd hely + fortification + 3% NaCl OG feed.
	BP - 68/42 (51)	
	P/A - Soft.	
		→ NPZ tomorrow.
		→ R/V CRP. R/V HFNC - T/M
		→ ROP tomorrow.
		→ W/f brady / desat
		→ Nasal & oral suctioning
	Noted by Nandan 6/5/26	Bopitha

BAH-00652011 IP5-00171644
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25-03-2026 0 Y 1 M 9 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/5/26	C/S/D Dr. Pratyush	
		Plan
		① Continue PEEP @ 5
		② Nasal/oral suctioning
		[signature]
7:00 pm	In view of Recurrent desaturations and Bradycardia	
	↓	
	↑ PEEP to 6	
		Plan (as discussed & Dr. Pratyush)
		① send
		Blood gas
		CRP — NOW
		NP_2
		② R/V CXR . SOS
		[signature]
		C/S Ry
		CXR new
		To transfer IP
		Hb 28.5
	Noted by Nandini 6/5/26	[signature]

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	~~PRBC~~ Transfusion	
	Please Transfuse	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

7/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 43 **PMA:** 32+2

Term ☐ **Preterm** ☐ Gestation : 26+4 wk Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ ELBW	Acinetobacter VAP
2.	RDS - Evolving BPD	
3.	Apnea of Prematurity	
4.	Anemia	
5.	Congenital Hypothyroidism	
6.		

Today's Weight : 1.196 (↑24gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours - 1 episode of prolonged Apnea Requiring Bag and mask ventilation
- kept on NIV, RAM, CBP, CRP, NP2 sent
- Hb: 7.1 gm/dl → PRBC transfusion given
- CRP: 5

CARDIO VASCULAR SYSTEM

Plan of Care :

NIV mask

On NIV
- PIP 18
- PEEP 6
- Rate 25
- FiO2 40

→ SpO2: 95
HR: 137
BP: 60/36 (44)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... • Tv: 160ml/kg/day

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

PA: Soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

- Osso Pan-D
- Vit D3
- Dermstar
- Glycerine
- 3% NaCl
- Levo thyroxine

Plan of Treatment :

Adv

1. Continue NIV
2. Tv: 160ml/kg/day →
3. Gas - in the Morning ~~at~~ at 6 AM
4. w/f desaturations / Apneas / Brady cardia
5. RW nutrition calculation i/v/o sr PO_4 - 4.1 ↓
6. I/O charting
7. ~~w/f~~

Doctor's Name (Handover given) : .....

Signature : S.garal

Date & Time: 7/5/26

Doctor's Name (Handover taken) : Dr Aishwarya

Signature : .....

Date & Time: 7/5/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/5/26	seen by Dr Prabyush	Rx ① NIV 16/6 rate 35 ② Taper gradually over day & change to CPAP by night.
31/5/26. 2:20pm	Afternoon Round.	
	On NIV - 16/6. No beady desat.	Plan → Continue current ventilation 16 → 15
	Feed restarted - baby is tolerating feed.	→ TV - 170cc/kg/day 17 ml/2nd hly + ~~fortification @ 3%~~ No fortification
	Vitals HR - 141/min RR - 49/min SpO2 - 98% BP - 60/45 (50)	→ Taper NIV gradually R/V CPAP in the night. → Gas, RBS - OD → W/f beady desat → Hold supplements till 12am.
	P/A - Soft.	

Prabyush

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
~~7/5~~ 6/5 05:11pm		Seen by Dr. Nikesh
		→ NIV - 18/5
		rate - 35
		wean rates
		→ CBG - OD
		→ full oq feeds
		→ .N - 170ml/kg/day
		Dr. Manikya
7/5/26 10pm.	Night Rounds	
		Seen by Dr. Vineela mam
	No bradycardia	
	Baby on NIV - RR = 35	Plan:
	PIP = 18	• Continue NIV for now, FiO_2 = 25%.
	PEEP = 6.	
	FiO_2 = 27%	• ~~SpO2 stable wean off to CPAP in the morning~~
	No vomitings	
	Tolerating feeds well.	• Continue TV = 170ml/kg/day,
	HR = 148/min	17ml/2nd hrly.
	RR = 53/min	• R/V CXR - TIM & CPAP weaning Plan
	SpO2 = 94% on NIV.	• R/V fortification
		• TIM - CBG

Dr. Ramya

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

8/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 44 ..... **PMA:** 32+3.

Term ☐ **Preterm** ☑ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	Acinetobacter VAP.
2.	RDS - Evolving CLD	
3.	Apnea of prematurity.	
4.	Anemia	
5.	Cong. Hypothyroidism	
6.		

Today's Weight : 1.184 (12 gm weight loss)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On NIV → PIP = 18; PEEP = 6; FiO_2 = 24%, RR = 35/min

1 brady episode (+) self pickup

Desat upto 85%.

CARDIO VASCULAR SYSTEM

Plan of Care :

HR = 125/min
RR = 35/min
SPO_2 = 95%. - 99% on FiO_2 = 24%.
BP = 60/37 (46) mmHg.

U/O –
S/O –
KMC – Not done

CNS

Neurological Examination : CTA fair

Last Neurosonogram : .....Sedation..... NO.

.....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....
Input :..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....
IV Fluids - Type of IVF : ..... @ ..... ml / hr
Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....
TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....
Abdominal Examination:.....
.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS
.....
.....
.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....
Sepsis screen:.....
Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Domstal
Vit D3
Ossopan-D
Glycerine
MMF 0.5gm
3% NaCl

Caffeine
Levothyroxine
3% NaCl - NEB
Brufen XT

Plan of Treatment :

- Continue NIV with same settings (Target SpO2 - 90-95%)
- Continue TV = 170ml/kg/day (full OG) 17ml/2nd hrly + 1 sachet MMF + 3% NaCl (0.5gm)
- W/F desat, apneas, bredy.
- I/O Charting - Q6H
- R/V - CXR, fortification PRN.
- Monitor vitals.

Doctor's Name (Handover given) : Dr. Ramya
Signature : .....
Date & Time: 8/5/26; 8am

Doctor's Name (Handover taken) : Roopitha
Signature : .....
Date & Time: 8/5/26

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
08/05/26 9:30 am.		Ass Rny
		↓ w/v settings - 16/6.
		→ change to CPAP by Evening
		→ cling wrap
	Afternoon Round	
8/5/26 4pm	on NIV.	C/S/B → Dr Pratyush Change to.
	Vitals - stable.	→ CPAP → 6
	No brady / desat	→ Continue CPAP 6
		→ TV - 170 ml/kg/day 17ml/2nd hely. + 1 sachet MMF (0.5g) 3% NaCl
		→ w/f brady, desat

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/5/26 5PM	Seen by Dr. Vijayananad	Plan
		① cont CPAP 6cm.
		② Remove 1 IV line
8/5/26. 8:30pm	Night Round	
	Baby is currently on CPAP-6.	
	C̄ mask.	Plan.
	No beady/desat.	→ Continue CPAP-6.
	Vitals.	→ TV - 170cc/kg/day
	HR - 136/min.	17ml/2nd hely +
	RR - 52/min	0.5g fortification
	SpO2 - 96%.	+ 3% NaCl.
	BP - 61/38 (45)	
		→ Continue KMC.
	P/A - Soft.	
		→ Cling wrap.
		→ w/f beady/desat
		→ Monitor vitals.
		[signature]

Docu. No. : RCHBH /FRM / CLINICAL / 088

(P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 12 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/5/26 10:30pm		Seen by Dr. Peatyush
		→ Give Trial of CPAP c̄ Rain's PEEP 7 cm T/M morning.
		Noted by Nandini 8/5/26 @ 11pm
		Plu →

Docu. No. : RCHBH /FRM / CLINICAL / 088

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

9/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 45 ..... PMA: ~~32+4~~ 33wks -

Term ☐ Preterm ☐ Gestation : 26+4. ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	Aciretobacter VAP
2.	RDS - evolving CLD.	
3.	Apnea of prematurity	
4.	Anemia.	
5.	Cong. hypothyroidism	
6.		

Today's Weight : 1196g (↑12g)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio_2..... Oxygen : ..... L/min

Last CXR : ..... Spo_2: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... on CPAP - 6cm c̄ mask

No beady / desat

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 133/min
RR - 42/min
SpO_2 - 94%
BP - 66/37 (34)

CNS

Neurological Examination : .....

..... Sedation.....

Last Neurosonogram : ..... Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

TV - 170cc/kg/day.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A - Soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Domstal. Caffeine
	2.			Vit D3. Thyroxine
	3.			Ossopen D 3% NaCl Neb.
				Glycerine. Oropel XT
				Fortification.
				3% NaCl.

Plan of Treatment :

- Continue CPAP - 6 ō mask
  Target SpO2 90-95%.
- TV - 170cc/kg/day ⇒ 17ml/2nd hely + 0.5g fortification. + 3% NaCl.
- Continue KMC
- I/O charting 6th hely.
- Gas, RBS - OD
- ~~R/V Gas + Wice weekly~~.
- R/V Glycerine & 3% NaCl Neb.
- w/f brady/desat

Doctor's Name (Handover given) : Poorpthi

Signature : [signature]

Date & Time: 9/5/26 8am

Doctor's Name (Handover taken) : Dr Abhinaya

Signature : [signature]

Date & Time: 9/5/26 9AM

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 12 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/5/26 8:30am		Seen by Dr. Vijayanand → On CPAP c̄ Rain's PEEP - 7 Flow - 8lt → ~~Co~~ Start KMC today. → Stop glycerine & b/l - Nall Dr Jyothi
9/5 @ 12:30pm		Noted by Srilatha 9/5/26 Rlo - ↑ ossopan → TFT - next prick Dr Manoj

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/5/26 1PM	Afternoon Notes	
	On CPAP Rams 7cm.	Plan
	HR-145/min	① cont CPAP Rams
	SpO2-90%.	② TV = 170ml/kg/day
	RR-31/min	17ml @2H
	No distress.	+0.5gm fortification
		+3% RICE
	tolerating feeds	③ KMC to be started
	PA - Soft	④ I/O @6H
	Stools passed.	⑤ Gas / RBS / OD.
	No Abx.	⑥ RD gas.
		⑦ RW TFT
	NP 2 yday - Na-137	↑ ossopan.
	Ca-8.4	
	PO4-4.1	
	ALP-361	
		Noted by Srilatha 9/5/26
9/5/26 @3.20		Seen by Dr. vijayanand
		1) Cont. CPAP - PEEP 7. flow 8L/min -
		2) ↑ossopan D:-
		3) TFT next print.
		Sneha

Noted by Srilatha

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/5/26 1AM	Night Notes	
	on CPAP 7cm by rams	Ran
	HR - 139/min	(1) cont CPAP 7cm
	SpO_2 - 99%	(2) TV = 170 ml/kg/day
	RR - 46/min	(3) GDS / GRBS / OD
	tolerating full feeds	(4) TFT next prick.
	PA - soft, non distended	
	Passed stools.	
		Dr Vijay
10/5/26 @1am		Seen by Dr. Nilesh.
		1) Cont CPAP PEEP - 7. Target SPO_2 90-98
		2) TV = 170 ml/kg/day
		w/f apnea, Brady desat
		Snehi
	Noted	
	Nandini 10/5/26 @1am	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

10/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 46 **PMA:** 33+1

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	Acinetobacter VAP
2.	RDS - evolving CLD	
3.	Apnea of prematurity	
4.	Anemia	
5.	congenital hypothyroid.	
6.		

Today's Weight : 1.234 (1238gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio2..... Oxygen : ..... L/min

Last CXR : ..... SpO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... CPAP mask → Rams.
tolerated well
No bradycardia
CPAP 7cm 24/1.

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - 133/min
SpO_2 - 94-1.
RR - 41/min
BP - 66/39(49)

CNS

Neurological Examination : .....

..... Sedation .....

Last Neurosonogram : (N) Any Seizures .....

CURBS - 95.

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output : B.C ml/kg/hr Stools : t.

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 17ml Frequency: Q2H

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination: soft, non distended.

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : !

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Domstal
Vit D3
Ossopan D
~~Erythromycin~~
Fortification

3% NaCl.
Orofer XT.
Thyroxine
caffeine.

Plan of Treatment :

① cont CPAP 7cm C rams
target SpO2 90-95%.

② TV = 170ml/kg/day + 18ml Q2H + 0.5gm fortification + 3% NaCl.

③ cont KMC

④ ABGs
RBS | OD

⑤ TFT result prick.

Doctor's Name (Handover given) : Dr Abhinaya

Signature :

Date & Time: 10/5/26

Doctor's Name (Handover taken) : Poojitha

Signature :

Date & Time: 10/5/26 9am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/5/26 8 AM.	seen by Dr. Vijayanand	① Cont CPAP 7cm ② KMC ③ Remove IV line
	Dr Abhinaya	Noted by Archa 019653 10/5/26.
10/5/26 5:45 PM	Afternoon rounds PMA: 33+1 On CPAP PF-EP-7 No Desat/Brady/Apnea SpO_2 - 94% HR - 164/min RR - 36/min BP - 69/36 (44) P/A - no distension soft	Plan 1. continue CPAP - 7cm. target SpO_2 (90-95%) 2. TV - 170ml/kg/day 18ml @ 2H + 0.5gm fortification + 3% NaCl 3. KMC - continue 4. GCS - OD RBS - OD 5. TFT next prick 6. I/O monitoring @ 6th hourly Review NP2 TFT midweek Dr. N. Prathibha

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
Washe 18m	Night Sounds	
	on CPAP	Plan
	No New Issues	1. Continue CPAP
	No Desat / Bradey	PEEP-7
	SpO_2 - 95%	2. Continue
	HR - 140/min	18 ml C 2H + fortification +
	RR - 31/min	3% NaCl
		3. KMC continue
	P/A - no distension	
		4. Gas - OD
		RBS
		5. TFT next prick
		6. monitor Ile
		N. Reathi Sunny
		VOC

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

11/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 47 **PMA:** 33+2

Term ☐ **Preterm** ☐ Gestation : 26+4. Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXPT/ELBW	
2.	RDS - Evolving CLD	VAP- Acinetobacter
3.	Apnea of prematurity	
4.	Anemia	
5.	Congenital hypothyroid	
6.	evolving CLD.	

Today's Weight : 1262 (28 Gms wt gain)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☑ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP 7 VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... No Desaturations.

No Bradycardia

No Apnea.

CARDIO VASCULAR SYSTEM

Plan of Care :

Continue CPAP.

Reviewed. CPAP PEEP- 6 cms.

CNS

Neurological Examination : .....

Sedation —

Last Neurosonogram : .....Any Seizures —

KMC - 3 hours.

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain: 28 gm. Head Circumference:

Input : ..... / (+/-) ..... Output : ..... ml/k/d Urine Output : 3-5 ml/kg/hr Stools : (6)

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 18 ml Frequency: @ 2H

TPN : ☐ Yes ☐ No - If yes, details : ..... Calories:

Abdominal Examination:

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

Soft non distended

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis :

Sepsis screen:

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :

Antibiotic	Sl.No.	Drugs	Days
	1.		
	2.		
	3.		

Damstal. 3% NaCl
Vit - D3 enfer XT
essepdu-D Thyroxine
fortification Caffeine

Plan of Treatment :

1. Continue CPAP. PEEP - 7, FiO2 - 23 (target spO2 90-95%)
2. TV - 170 ml/kg/day → 18 ml @ 2H + 0.5g fortification + 3% NaCl (4 meq/kg/day)
3. GCS - OD
4. GRBS - OD.
5. KMC - Continue
6. IO monitoring

Review NPL
TFT

Doctor's Name (Handover given) : N. Reathish
Signature : N.R.
Date & Time: 11/5/26.

Doctor's Name (Handover taken) : Dr Adhwaya
Signature :
Date & Time: 11/5/26

BAH-00652011 IPS-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

(7)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/8/26 11 AM.	seen by Dr. Vijayanand	① CPAP 6cm ② weekly once gas ③ weekly review. ④ NBst prick TFT.
	Dr Abhinaya.	
	Noted by Nandini 11/8/26	
11/8/26 3PM.		Plan ① cont CPAP ② Gas weekly once ③ Next prick TFT ④ weekly review
	Dr Abhi	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/5/26 4PM	Afternoon Note	
	on CPAP 6 cm /2L·1.	Plan
	HR-170/min	① cont CPAP 6cms
	SpO_2 - 98·1.	② TV = 170 ml/kg/day
	RR - 40/min	18 ml 6th Oafeeds
	No distress	EBM/DBM.
	No bredy/desat	+ 0·5gm fortification
		+ 3% NaCl.
	tolerating full feeds	③ Cras weekly once
	PA - soft, non distendd	④ URBS ON
	Passed stools	⑤ next prick, TFT.
	weekly review	
①	ROP - 7/5/26 DOL 43	→ Rv after 2 weeks 21/5/26
	B/E No vessel zone 2A	
	No stage/plus	
②	Last NP_2 - 6/5/26	→ transfusion given on 6/5
	Hb - 7·1 ; Na - 137.	→ 3+ NaCl @ 4 meq
	Ca - 8·4 ; PO_4 - 4·1	→ ossopan D @ 83 mk/day
	ALP 350 → 361	→ Oropen XT @ 3 mk/day
		→ Vit D_3 800 IU/day
③	Last TFT - 21/5/26.	→ on levothyroxine @ 10 mcg/kg/day
	FT_4 - 0·77	
	TSH 7·84.	→ Next prick - TFT.

12/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 48 ..... PMA: 33 + 3 day

Term ☐ Preterm ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	Extreme pre-term / ELBW	VAP - Acinatobacter
2.	RDS → Evolving CLD	
3.	Apnea prematurity	
4.	Congenital hypothyroidism	
5.		
6.		

Today's Weight : 1.286 (↑ 24 gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO_2..... Oxygen : ..... L/min

Last CXR : ..... SpO_2: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

On CPAP @ 6cm FiO_2 requirement 21-25%

few episodes of desat ē ~~self pick~~

CARDIO VASCULAR SYSTEM

Plan of Care :
HR - 152
SPO_2 - 97%
BP = 70/51(55)
RR: 40/mo.

CNS

Neurological Examination : .....

N ..... Sedation ..... / NO

Last Neurosonogram : ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	Supplements
	1.			Ossopan-D
	2.			Orafer XT
	3.			Vit-D3
				3% neat fortification

Syp Caffeine Citrate.

Tab Levo thyroxine

Plan of Treatment :

- Continue CPAP — @ 6cm → FiO2 to target SPO2 90-95%
- TV - 170 cc/kg/day - 18 ml - 2 hourly + 0.5 gr. fortification ~~+3% neat~~
- GRBS - OD, ~~gas - OD~~, GAS - ONCE weekly
- KMC to continue.
- Next prick TFT
- N/F apnea, brady heat

Doctor's Name (Handover given) : [signature]

Signature : Rupjali

Date & Time: 12/5/26

Doctor's Name (Handover taken) : [signature]

Signature : Dr Aishwarya

Date & Time: 12/5/26

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 14 D (M)
Dr. VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
(4)	Last NSG - 16/4/26 - DOL22 (N)	→ next NSG
(5)	Last 2D ECHO - 1/4/26 DOL7 Restrictive PDA 1.2mm L→R LA:Ao 1.24.	
(6)	Last Xray - 6/5/26.	

Nutrition

TV = 170ml/kg/day = 214ml.

0.5g sachet/feed = 12 sachet

	Cal	Prt	Ca^{2+}	PO_4	Fe	Vit D
EBM	143.3	2.35	74.9	32.1	0.48	-
MMF	46.5	3.24	71.76	16.3	0.96	-
OSOpan-D	-	-	100	44	-	160
Vit D3	-	-	-	-	-	800
Orofer	-	-	-	-	4mg	-
TOTAL	189.9	6.59	246.6	92.42	5.38	960
TOTAL/kg	150	5.2	195.4	73.2	4.2	760

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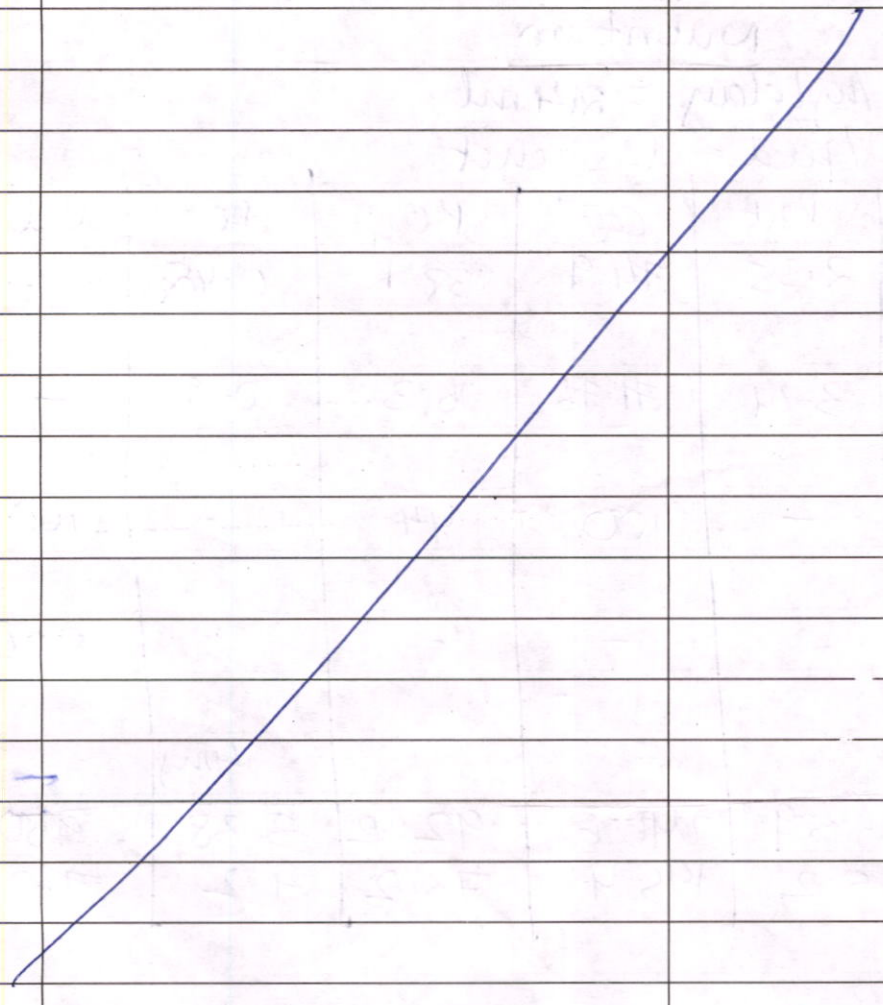
PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/05/26		Seen by Dr Nilesh
		- Cont CPAP
		- Full feeds
		- Next prick TFT,
		Ruj



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25-03-2026 0 Y 1 M 16 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/26	seen by Dr. Vijayanand	
		Plan
		① cont CPAP
		② weekly once gas
	Tubings Dt.	③ NP_2 + TFT + fT_4
		c̄ gas on 15/5
		(Friday)
		[signature]
12/5 @ 3:55pm		seen by Dr. Vijayanand
		→ continue CPAP
		→ NP_2 + TFT + FT_4
		c̄ gas on 15/5
		(friday)
		→ weekly once gas
		[signature]

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/8/26 4:30pm	Afternoon Round	
		Plan.
	on CPAP - 6.	
	No beady/desat.	→ Continue CPAP c̄ Kan's Target SpO_2 90-95%.
	Vitals stable.	
		→ TV - 170 cc/kg/day 18ml/2nd hrly + fortification OG feed.
	P/A - soft.	
		→ weekly once gas.
		→ Send NP_2, TFT, fT4 on Friday.
		→ w/f beady/desat.
		→ Monitor vitals.
		Hand over given by Dr. Poojithe.
		Handover taken by Dr. Faiz
		noted by Amrathy

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/5/26 8:30pm	Night round	
	→ On CPAP c̄ Rams PEEP-6, FiO2-21%	
	No bradyl desat	Plan
	Vitals: HR - 144/min RR - 42/min SpO2 - 100% BP - 55/27 (38)	→ Continue CPAP c̄ Ram's Target SpO2 90-95%
		→ TV - 170cc/kg/day 18ml/2nd hrly + fortification.
	P/A - Soft	
		→ Blood gas - once weekly
		→ Send NP2, TFT, FT4 on Friday.
		→ Monitor vitals
		Properties noted by Amarthy

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

13/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 49. **PMA:** 33+4 wks

Term ☐ **Preterm** ☐ Gestation : 26+4. Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EXT PT / ELBW	VAP- Acinetobacter
2.	RDS → Evolving CLD	
3.	Apnea of prematurity	
4.	Congenital hypothyroidism	
5.		
6.		

Today's Weight : 1.274 (↓12gms)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio2..... Oxygen : ..... L/min

Last CXR : ..... SpO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: on CPAP 6cm, FiO_2 - 23%

Change over the Last 24 Hours..... No beady / desat

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 140/min.
RR - 49/min.
SpO_2 - 93%.
BP - 56/26 (37)

CNS

Neurological Examination : .....

..... Sedation - .....

Last Neurosonogram : (N) Any Seizures - .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... • TV – 170cc/kg/day

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

P/A – soft

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Osropan D Orofer XT Cit-D 3. ~~[illegible]~~. fortification Syp. Caffeine T. Levo thyroxine
	2.			
	3.			

Plan of Treatment :

- Continue CPAP – 6cm, Target SpO_2 90-95%
- TV – 170cc/kg/day → 18ml/2nd hely + fortification 0.5g
- Gas – once weekly
  RBS – OD
- Continue KMC.
- Send NP_2, TFT, fT_4 – on Friday.
- I/O charting 6th hely
- w/f beady/desat

Doctor's Name (Handover given) : Poojitha

Signature : .....

Date & Time: 13/5/26, 7am

Doctor's Name (Handover taken) : Dr Aishwarya

Signature : .....

Date & Time: 13/5/26 8AM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	13/5/26	Seen by Dr. Vijayanand
	10:00AM	
		Plan:-
		- Change to HFNC - 6l/min
		- Blood gas weekly once
		- Continue KMC
		- Send NP 2, TFT, free Ty, Blood gas on friday
	Tubings - day 7,	
		- TV - 175 ml/kg/day
		↓
		19ml 2nd hrly full OG feeds + 0.5g MMF
		- Drug chart orders. Anusha
13/5/26 1PM	Afternoon Rounds	
	on CPAP → HFNC 6l/min	
	tolerating well so far	
	HR - 153/min	
	SpO2 - 97%.	
	RR - 39/min	
	BP - ~~85~~ 65/34(44)	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/26 1PM	— cont.	Plan
	tolerating feeds	① cont HFNC 6l/min
	PA - soft	SpO_2 to target
	passing stools	SpO_2 90-95%
	No vomit	② TV = 175ml/kg/day
		19ml Q2H
		+ 0.5gm fortification
		③ gas weekly once
		④ CRBS OD
		⑤ NP_2
		TFT
		ET_4
		$\bar{c}$ gas
		on Friday
		Dr Ashwyn
		Noted by Nandini 13/5/26 1:20pm
13/5/26 4:10pm		
	— Stable on HFNC 6 lit/min	
	— KMC given	
	— Tolerating full OG feeds	Noted by Nandini 13/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/5/26 @ 11:30pm	Night Rounds	
	HFNC = 6L/min NO Bradycardia No desaturation ↓ NO Respiratory distress Vitals HR = 156/min RR = 41/min SPO_2 = 93% P/A - Soft No vomit	1) Cont - HFNC - 6L/min Target SPO_2 90-95% 2) TV = 175mL/kg/day 19mL 2nd hrly + 0.5g fortification 3) Gas - weekly once 4) GRBS - OD 5) NP_2, TFT, FTU, Gas } on Friday 6) I/O charting 6th h 7) w/f apnea, Brady, desat Sneha

Noted By Moosyma 13/5/26 @ 11:30pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 18 D (M)
Dr. VIJAYANAND JAMALPURI

14/5

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 50 ..... PMA: 33+5

Term ☐ Preterm ☐ Gestation : 26+4 ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / EVBW	VAP - Acinetobacter
2.	RDS → Evolving CLD	
3.	Apnea of prematurity	
4.	congenital hypothyroidism	
5.		
6.		

Today's Weight : 1.297kg (↑23gms)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio_2..... Oxygen : ..... L/min

Last CXR : ..... Spo_2: .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

CPAP → HFNC 6l/min
tolerating well
No brady/desat

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - 148/min
SpO_2 - 92%
RR - 43/min

CNS

Neurological Examination : .....

..... Sedation.....

Last Neurosonogram : (N) ..... Any Seizures.....

Docu. No. : RCHBH /FRM / CLINICAL / 131

(P.T.O.)

GRBS –

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : ✓

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 19ml Frequency: 92H

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Ossopan-D T.Thyroxine
	2.			Orofer XT
	3.			Vit D_3
				Fortification tubing – D8
				Syp caffiene

Plan of Treatment :

(1) cont HFNC 6l/min

(2) TV = 175ml/kg/day → 19ml 92H + 0.5g fortificat

(3) gas weekly once

GRBS OD

(4) Friday – NP_2, TFT, ET4 } c̄ gas.

(5) I/O 90H

Doctor's Name (Handover given) : Dr Aishwarya

Signature:

Date & Time: 14/5/26

Doctor's Name (Handover taken) : Dr. [illegible]

Signature :

Date & Time: 14/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/5 @ 10 AM		seen by Dr. Vijayanand Sir
		Plan
		→ ↓ HFNC-5Lit
		→ NP2, TFT + freeT4 } tomorrow
		→
		Dr. Manilla
14/5/26	~~Afternoon~~ Afternoon Round	
	On HFNC - 5Lit No desat/beady Ongoing KMC.	Plan
		→ Continue HFNC-5Lit
	Vitals HR - 170/min. RR - 42/min SpO2 - 92% BP - 71/35 (47%)	→ TV - 175cc/kg/day 19ml/2nd hely. 0.5g fortification
		→ Continue KMC
	P/A - Soft.	→ Send NP2, TFT free T4 - Tomorrow
		→ Monitor vitals

notified BM Nurse 14/5/26

Poopali

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 18 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/5/26 1:30pm	on HFNC-5L/min. self dimitting Des.	seen by Dr. Vijayanand Jam
14/5/26 11:10pm	Night Rounds	Seen by Dr. Nilesh
	50 days / 26+4 → 33+5 wks PMA / 1.297kg (↑23gms)	
	B.wt - 950gm.	
	On HFNC 5lt, FiO_2 = 21%.	Plan:
	Desct episodes upto 85% SpO_2.	• Continue HFNC 5lt/min, FiO_2 = 22%.
	[EBM / DBM] - full OG feeds. No desct / bredy during feeds.	• Continue TV = 175 ml/kg/day, 19ml / Q2H + MMF 0.5gm full sachet + 3% Nacl.
	HR = 166/min	• W/F desct, bredy, tachy, distress
	RR = 45/min	• Send → NP_2, TFT, Free T4 } Tomorrow @ 6am
	SPO_2 = 93% on HFNC	• Monitor vitals
		• I/O charting Q6H
		Dr. Ramya

Noted By [illegible] 15/5/26 @ 11pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

15/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 51 ..... **PMA:** 33+6

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / ELBW	VAP - Acinetobacter
2.	RDS → Evolving CLD	
3.	Apnea of Prematurity	
4.	Congenital Hypothyroidism.	
5.		
6.		

Today's Weight : 1.321 kg (↑24 gms)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO_2..... Oxygen : ..... L/min

Last CXR : ..... SpO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... On HFNC 5 lt, FiO_2 = 21%
NO brady desat → 1 episode upto 85% SpO_2 @ night
Tolerating OG feeds well [EBM - 8, DBM - 4]
full OG feeds.

CARDIO VASCULAR SYSTEM

Plan of Care : HR = 154/min
RR = 44/min
SpO_2 = 95% on HFNC
U/O = 3.2 ml/kg/hr
S/O = 7 times

CNS

Neurological Examination : ..... } CTA fair
..... Sedation ..... } NO
Last Neurosonogram : ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

PA : soft, not distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Tab Levothyroxin (10 mcg / kg/day)
	2.			Domstel. Ossopan-D
	3.			Vit D3.
				Orofer X 7.
				Caffeine
				3% NaCl (4 mEq) Tubigs - 9 Day.

Plan of Treatment :

- Continue HFNC flow 5 lt, FiO_2 = 21%. (Target SPO_2 - 90-95%)
- Continue TV = 175 ml/kg/day, 19 ml Q2H + MMF 0.5 gm full sachet + 3% NaCl.
- W/F brady, desat, tachy, distress
- I/O charting Q6H
- Monitor vitals.
- Trace - NP_2, TFT, free T4. - Now
-

Doctor's Name (Handover given) : Dr. Ramya

Signature : [signature]

Date & Time: 15/5/26

Doctor's Name (Handover taken) : Dr. Aurf

Signature : Dr. Aurf

Date & Time: 15/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 18 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/5/26 10 Am		Seen by Dr Vijayanand
		① Continue HFNC - 5 lit/min
		② continue KMC OMS NNS
		③ Trace Fin, TFT
		Dr Sowmya
15/5/26 1:00 pm	Afternoon rounds	Noted by Nandini 15/5/26
	- on HFNC - 5 lit/min	Plan:
	- one episode of Brady, Desaturation during KMC (Next flexed)	- continue HFNC - 5 lit/min - TV - 175 ml/kg/day ↓ Full OG feeds (19 ml 2nd hrly)
	SpO_2 - 96% PR - 164/min RR - 30/min	- R/V Thyroid reports in rounds. - RBS OD
	KMC given for 3 hours	- ~~w/f~~ - continue KMC, OMS, NNS
	Noted by Nandini	

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 18 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/5/26 3PM	seen by Dr. vijayanand	Plan ① cont HFNC ② cont KMC. ③ Discuss TFT & endocrinologist Dr Abhinaya
15/5/26 9:30pm	on HFNC - 5L/min FiO_2 - 21 - 25%. HR - 161 RR = 54/min SPO_2 = 98% No brady desat	Handovers taken by Dr. Punith Adv - continue HFNC - 5L/min. - TV - 175 ml/kg/dy 19 ml - 2 hourly MMF (¼ 0.5g) full sachet + 3% nacl - Continue KMC - Plan to discuss TFT & endocrinologist Punjab

Rn Sri Vidya,

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/5/26 10:03am	Seen by Dr. Vijayanand	
		Plan
		① ↓HFNC 4l/min
	Tubing D_0	② gas weekly once
		③ discuss TFT c̄ endocrinologist.
		④ cont KMC.
		Dr Ashwaya
16/5/26 12PM	Afternoon Rounds	
	on HFNC 4l/min	Plan
	tolerating well.	① cont HFNC 4l/min
	HR-169/min	② TV = 175ml/kg/day
	SpO_2-94%	20ml Q2H
	RR-60/min	+ 0.5gm fortification
	KMC ongoing now	+ 3% NaCl
		③ I/O Q6H
	tolerating feeds	④ Discuss TFT c̄
	PA-soft, non distended	endocrinologist.
	Passed stools	
	No vomiting	noted by [illegible] 16/5/26 01 8pm
		Dr Ashwaya

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 20 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/5/26 8.15pm	Night Round	
	On HFNC - 4lt No beady / desat	Plan.
		→ Continue HFNC - 4lt
	Endocrinology opinion taken. Hiked T-Thyroxine 15ug/day.	→ TV - 175cc/kg/day 20ml/2nd hrly fortification + 3% NaCl
	Vitals - Stable.	→ Continue EMC
	P/A - Soft	→ Monitor vitals
		→ Blood gas - once weekly
		Postpaly

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 21 D (M)
Dr. VIJAYANAND JAMALPURI

17/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : ..... **PMA:**.....

Term ☐ **Preterm** ☐ Gestation : ..... Corrected Gestational Age:.....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW.	VAP – acinetobacter.
2.	RDS → evolving CLD	
3.	Apnea of prematurity.	
4.	Congenital hypothyroidism	
5.		
6.		

Today's Weight : 1.362 (1728m)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo$_2$.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... on HFNC – 4lpt

No beady / desat.

Increased dose of Levothyroxine.

CARDIO VASCULAR SYSTEM

Plan of Care : HR – 146/min

RR – 49/min.

SpO$_2$ – 96%.

BP – 61/34 (43)

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : (N) .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:..... P/A – soft – .....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

T. Levothyroxine. 3% NaCl.
Domstal. Ossopan-D
Ult D3.
Orofer XT
Caffeine. Tubings D1

Plan of Treatment :

- Continue HFNC – Gut
  Target SpO2 90 – 95%.
- TV – 175cc/kg/day.
  20ml/2nd hely + 0.5g fortification
  + 3% NaCl
- Continue KMC.
- Blood gas – once weekly.
- RBS – OD
- Continue KMC.

Doctor's Name (Handover given) : Poojithe

Signature : .....

Date & Time: 17/5/26

Doctor's Name (Handover taken) : Dr Aishwarya

Signature : .....

Date & Time: 17/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 21 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/5/26 8am		Seen by Dr Vijayanand
		(1) Continue HFNC-4lt/min
		(2) KMC
		Dr Vijayanand
17/5/26 5PM	Evening Notes	
	on HFNC 4lt/min	Plan
	HR - 147/min	(1) cont HFNC 5lt/min
	RR - 38/min	(2) TV - 175ml/kg/day
	SpO_2 - 95%	20ml Q2H
	no distress.	+ 0.5gm fortification
		+ 3% NaCl
	PA soft	(3) cont KMC
	tolerating OG	(4) gas once weekly
	passed stools	(5) RBS OD
	No vomiting.	
		Dr Abhinaya

IAH-00652011 IP5-00171644
laby Of SRI VIDYA VANGALA
5-03-2026 0 Y 1 M 21 D (M)
r. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/5/26 2AM	Night Note	
	stable on HFNC 4l/min	Rap
	No brady / desat	① cont HFNC 4l/min
	HR - 165/min	② cont 20ml 6/2H feeds
	RR - 51/min	③ cont KMC
	SpO_2 - 99%.	④ gas weekly once
	tolerating feeds	⑤ GRBS OD
	PA - 5 Oft.	

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 21 D (M)
Dr. VIJAYANAND JAMALPURI

16/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : ..... **PMA:** 34 wks

Term ☐ **Preterm** ☐ Gestation : 26+4 wks ..... Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW.	VAP - Acinetobacter
2.	RDS → evolving CLD.	
3.	Apnea of prematurity	
4.	Congenital hypothyroidism	
5.		
6.		

Today's Weight : 1360g (↑39g).

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... FiO..... Oxygen : ..... L/min

Last CXR : ..... SpO_2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... on HFNC - 5Lit

No brady/desat

CARDIO VASCULAR SYSTEM

Plan of Care : HR - 158/min. U/O - 2.6cc/kg/hr

RR - 42/min

SpO_2 - 94%.

BP - 57/42 (46)

CNS

Neurological Examination : .....

..... Sedation .....

Last Neurosonogram : (N) ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....
Input :..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....
IV Fluids - Type of IVF : ..... @ ..... ml / hr
Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....
TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....
Abdominal Examination:.....
P/A – Soft

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....
Sepsis screen:.....
Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

T. Levothyroxine 3% NaCl (4meq)
Domstal. Orsopan-D
Lut D3
Orofer XT Tubings D10.
Caffeine

Plan of Treatment :

- Continue HFNC 5Lt, FiO2 – 21%.
- TV – 175cc/kg/day ⇒ 20ml/2nd hrly + 0.5g. fortification + 3% NaCl.
- I/O charting 6th hrly
- Continue KMC.
- Discuss TFT with endocrinologist
- Monitor vitals

Doctor's Name (Handover given) : Poojitha
Signature :
Date & Time: 16/5/26 8:30am

Doctor's Name (Handover taken) : Dr Aishwarya
Signature :
Date & Time: 16/5/26

Patient Sticker

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 54. **PMA:** 34+1

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT / EUBN	VAP - acinetobacter.
2.	RDS → EVOLVING CLD	
3.	Apnea of prematurity	
4.	Hypothyroidism of prematurity	
5.		
6.		

Today's Weight : 1·355 (d 12gm.)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC☑ CPAP☐ Conventional Ventilation : SIMV☐ A/C☐ VG☐ HFOV☐ iNO☐ PPM☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2:.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... HFNC 4l/min

..... No brady/desat

.....

..... HR - 168/min

SpO2 98/min

SpO2 - RR - 50/min

CARDIO VASCULAR SYSTEM

Plan of Care :

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : N .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☑ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output : 3.3 ml/kg/hr Stools : ✓✓

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 20ml Frequency: 2H

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination: soft, non distended

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

last NP2 - 15/5/26

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : Blood gas - 15/5/26

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			T. levothyroxine 3% NaCl
	2.			Domstal Ossopan-D
	3.			vit D3
				Orofer XT
				Caffiene tubing D2

Plan of Treatment :

1. cont HFNC 4l/min
2. TV = 175ml/kg/day → 20ml 2H + 0.5gm fortification + 3% NaCl
3. cont KMC
4. Blood gas once weekly
5. RBS OD
6. w/c distress
7. weekly review

Doctor's Name (Handover given) : Dr Abhinaya

Signature :

Date & Time: 18/5/26 8AM

Doctor's Name (Handover taken) : Dr Aneef

Signature :

Date & Time: 18/5/26

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 21 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/5/26 9.50 am		Seen by Dr. Vijayanand
	→	HFNC - 3 lt
	→	TV - 185 cc/kg/ 21 ml/2nd hely, OG.
	Tubings - D2.	
	→	Weekly review
	→	KMC, NNS continue.
	→	~~Tubi~~ Review warmer change.
	Prajitha	

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 21 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/5/26 2:15pm	Afternoon Round.	
	On HFNC - 3Lt No bradyl desat	Plan.
	Vitals HR - 142/min. RR - 53/min SpO2 - 100%. BP - 72/39 (50)	→ Continue HFNC - 3Lt Target SpO2 90-95%. → TV - 185cc/kg/day 24ml/2nd hrly + 0.5g fortification. OG feed.
	P/A - Soft, non-distended.	→ Gas - Once weekly. GRBS - OD.
		→ Monitor vitals -
		→ Nutrition rounds
18/05/26 3:20 pm	• Stable on 3L/min HFNC. • Tolerating full tube feeds.	Poopthe

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 22 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/05/26 11:50pm	Night Rounds	seen by Dr. Nilesh
		PG
	on HFNC-3L	continue HFNC-3L. (Target SPO2 90-95%.)
	No Desat / Brads / Apnea	TV - 185 ml/kg/day 2 ml @ 2H + 0.5g fortification on feeds
	Vitals: SPO2 - 96%, HR - 143/min, RR - 43/min	CBG
		Gas - weekly once
	plot - soft, no distension	GRBS - OD
	SCR ⊕	I/o charity 6th hourly
	tachypnoea ⊕.	Dr. Nilesh
		Noted by Srinivas 18/5/26

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

)0652011 IP5-00171644
Of SRI VIDYA VANGALA
2026 0 Y 1 M 23 D (M)
JAYANAND JAMALPURI

19/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 55 **PMA:** 34+2

Term ☐ **Preterm** ☑ Gestation : 26+4. Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ ELBW	
2.	RDS → Evolving CLD	
3.	Apnea of	
4.		
5.		
6.		

Today's Weight : (1.366) 11 gm wt gain.

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☑ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : 3 L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

Desat ~ 60
Brady ~ 80) 2 times requiring stimulation.
(Requirement of fio2 upto 30%) during that time.

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO_2 - 93%.
HR - 156/min
RR - 40/min
BP - 67/49 (57).

CNS

Neurological Examination : .....

Sedation — .....

Last Neurosonogram : ..... Any Seizures — .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output : 3.5 ml/kg/hr Stools : (3)

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

no distension

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			T-Leuothyroxin
	2.			Domstal
	3.			vit-D3
				orofer XT
				caffeine

Plan of Treatment :

1. Continue HFNC - 3L Target SpO_2 (90-95%)
2. TV - 185 cc/kg/day - 21ml @ 2H + 0.5gm fortification on feeds
3. CBG - weekly once
4. GRBS-VD.
5. I/O charting 6th hourly.
6. Monitor vitals.

Doctor's Name (Handover given) : N. Pratishan

Signature : N. P.

Date & Time: 19/05/26.

Doctor's Name (Handover taken) : Prajitha

Signature : .....

Date & Time: .....

B/o Sri Vidya

H-00652011 IP5-00171644
by Of SRI VIDYA VANGALA
03-2026 0 Y 1 M 23 D (M)
VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/5/26 9:40am.		Seen by Dr. Vijayanand.
	→	Continue HFNC - 3 lit
	→	Weekly review today
	Tubings - Day 3.	
	→	Continue KMC, OMS.
	→	Start NNS today.
		noted by mamo.

Docu. No. : RCHBH /FRM / CLINICAL / 088

(P.T.O)

H-00652011 IP5-00171644
y Of SRI VIDYA VANGALA
13-2026 0 Y 1 M 23 D (M)
VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/5/26 2:30pm	Afternoon Round	
	on HFNC - 3Lt.	
	No brady/~~desat~~	
	desat on KMC - self pick up	Plan -
	Vitals	
	HR - 148/min	→ Continue HFNC - 3Lt
	RR - 49/min	
	SpO2 - 100%	→ TV - 185 cc/kg/day
	BP - 79/41 (55)	21ml/2nd hely
		+ 0.5g fortification
	P/A - soft	full O4 feed
		→ Continue KMC, OMS.
		→ Start NNS tomorrow
		→ I/O charting 6th hely
		→ Monitor vitals.
		noted by Maniya. [signature]

I-00652011 IP5-00171644
y Of SRI VIDYA VANGALA
3-2026 0 Y 1 M 23 D (M)
VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/5/26 4am.	Nutrition Round	
	Max. wt - 1367g.	
	IV - 185ml/kg/day ⇒ 253ml.	
	Fortification - 0.5g ⇒ 0.5g. 12 sachets	
	Orsopan-D - 4ml.,	D3 - 1ml, Orofer - 0.4ml.
	Cal Pro Ca	PO4 Fe D3.
EBM (67|1.1|35|1.5|0.2)	169.5 2.78 88.5	37.9 0.5 -
MMF - x12 (3.84|0.12|2.83|2.17|0.03|410)	46 1.44 33.9	26. 0.36 48.
Orsopan-D (125|55|200)	100	44 - 160.
Lit D.		800.
Orofer XT	- -	- 4 -
	285.5 4.22 222.4	107.9 4.86 1008
	157.6 3.08 162.6	78.9 3.5 737
		2:1

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3-2026 0 Y 1 M 23 D (M)
/IJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	→ Last NP2 - 15/5/26.	
	→ Last IFT	
20/05/26 745 Am.	MORNING	plan
	Ward Round	
	Day 56 $26^{+4} \rightarrow 34^{+4}$.	(1). HFNC ↓ 2L/min
	• Extreme PT	
	• ELBW	(2). Blood gas - SOS only
	• Evolving CLD	~~One~~ cued
	- HFNC 3L/min	(3). 190ml/kg/day
	- Tolerating Enteral feeds	(4). KMC + NNS + OMS
	- Weight ⇒ ↑248 (1.390)	(5). DRUG CHART
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
	Noted by Anmidha 606208 20/5 at 8pm	

Docu. No. : RCHBH /FRM / CLINICAL / 088

-00652011 IP5-00171644
Pa / Of SRI VIDYA VANGALA
3-2026 0 Y 1 M 23 D (M)
IJAYANAND JAMALPURI

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NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/5/26 2:48pm	Afternoon Round.	
	On HFNC - 2lt No bradyl desat.	
	Vitals HR - 135/min. RR - 51/min. SpO2 - 100%. BP - 66/34 (46)	Plan. → Continue HFNC - 2lt → TV - 190cc/kg/day 22 ml/2nd hely, full OG feed.
	P/A - soft.	→ Continue KMC OMS NNS.
		→ Monitor vitals.
		→ I/O charting 6th hely.
		Prophy
	Noted by Anuradha 606208	

00652011 IP5-00171644
Of SRI VIDYA VANGALA
-2026 0 Y 1 M 23 D (M)
IJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/5/26 7pm	Night Round	
	on HFNC - 2lt	
	No beady/desat	Plan
	Vitals	→ Continue HFNC - 2lt
	HR - 176/min	Target SpO2 90-95%
	RR - 42/min	
	SpO2 - 96%	→ TV - 190cc/kg/day
	BP - 63/37 (46)	22ml/2nd hely
		full OG feed
	P/A - soft	
		→ Continue KMC
		OMS
		NNS
		→ Monitor vitals
		Poopitty

Noted by
Amrutha
AD 606208
20/5
at 8pm

Patient Sticker

21/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 57 **PMA:** 34+4

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	GPT/ELBW	VAP - Acinetobacter
2.	RDS → Evolving CLD	
3.	Apnoea of prematurity	
4.	Hypothyroidism	
5.		
6.		

Today's Weight : 1.417 (↑27gms)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio.....Oxygen : .....L/min

Last CXR : .....Spo;.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

.....

.....

.....

CARDIO VASCULAR SYSTEM

Plan of Care :

on HFNC - 2 litres

FiO_2 - 21%

SpO_2 - 96%,

PR - 156/min

RR - 50/min

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : N .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : .....

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

.....

P/A - Soft

.....

.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture☐ ET culture☐ Fungal Culture☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Tab. Levothyroxine Orfer - XT

Caffeine

3% NaCl

Domstal

Ossopan-D

Vit D3

Tubex -

Plan of Treatment :

- Continue HFNC - 2 lpm
  [Rly to ↓ HFNC]
- Target SpO_2 - 90 to 100%.
- TV - 170 ml/kg/day → 22 ml feed 2nd hrly
  + 1g MMF + 3% NaCl
- Blood gas weekly once & SOS
- RBS OD
- Continue KMC, NNS, OMS

Doctor's Name (Handover given) : .....

Signature : .....

Date & Time: 21/5/25

Doctor's Name (Handover taken) Dr. Aishwarya

Signature : .....

Date & Time: 21/5/25

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/5/26 9:40AM	seen by Dr. Vijayanand.	Plan
		① cont HFNC 2l/min
		② blood gas SOS
		③ KMC
	tubings D_5	OMS cont
		NNS
		④ NP_2 on monday
	Dr. Abhinya	noted by Anuradha 606298 21/5/26 at 9:30 AM
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
21/5/26 1PM	Afternoon Round	
	on HFNC 2l/min	Plan
	No bready/desat	① cont HFNC 2l/min
	KMC ongoing	② TV = 170ml/kg/day
	HR-159/min	22ml Q2H + 1gm MMF
	RR-44/min	+ 3% NaCl
	SpO_2-97%.	③ blood gas SOS
	Tolerating OG feeds	CRBSOD
	No vomiting	④ cont KMC, OMS, NNS
	Passed stool.	⑤ NP_2 on monday
		28/5/26.
	Dr. Abhinya	

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/5/26 9PM	Night Note	
	on HFNC 2l/min	Plan
	No brady/desat	① cont HFNC 2l/min
	HR-160/min	② TV=170ml/kg/day
	SpO_2 - 99%	22ml Q2H
	RR - 42/min	+ 1gm MMF
	tolerating feeds	+ 3% NaCl
	PA - soft	③ Gas weekly once & SOS
		④ cont KMC
		NNS
		OMS
		⑤ NP_2 on monday 25/5/26
		⑥ Gas GKBSOD
	Dr Abhaya	

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D
Dr. VIJAYANAND JAMALPURI (M)

22/5

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : ..... Day of Life : 58 **PMA:** 34+5

Term ☐ **Preterm** ☐ Gestation : 26+4 Corrected Gestational Age: .....

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	EPT/ELBW	HAP- Acinetobacter.
2.	RDS + Evolving CLD	
3.	Apnea of prematurity	
4.	Hypothyroidism	
5.		
6.		

Today's Weight : 1.470 (↑53gm)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent : .....

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio2..... Oxygen : ..... L/min

Last CXR : ..... SpO2 .....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours..... HFNC 2l/min

..... No brady/desat

..... KM CL

.....

.....

CARDIO VASCULAR SYSTEM

Plan of Care :

HR - 180/min
SpO_2 - 100%.
RR - 51/min

Neurological Examination : ..... Active baby, good tone, alert.

..... Sedation ☐

Last Neurosonogram : ☐ ..... Any Seizures .....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : ++

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume: 22ml Frequency: Q2H

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination: soft, non distended.

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.		
2.		
3.		

Levothyroxine Caffrene.
3% NaCl
Domestal
Ossopan - D
Vit D3
Oropen XT
Tubings D6
NO IV.

Plan of Treatment :

① cont HFNC 2l/min, target SpO_2 90-95%.
(RN) to ↓
MBP - 50±5
GRBS - 60-120.
U/O - 1-3ml/kg.

② TV = 170ml/kg/day
22ml Q2H + 1gm MMF
+3% NaCl

③ Gas weekly once.

④ RBS OD

⑤ ~~[illegible]~~ NP_2 on monday c̄ gas

⑥ cont KMC, OMS, NNJ

Doctor's Name (Handover given) : Dr. Aishwarya

Signature : .....

Date & Time: 22/5/26

Doctor's Name (Han

Signature : .....

Date & Time: .....

CNS

CARDIO

Docu. No. : P

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/5/26 10am		Seen by Dr. Vijayanand
		→ HFNC - 1 lit
	Tubings Day 6.	→ NP_2 c̄ gas on Monday
		→ ROP next thursday.
		→ Drug chart.
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
22/5/26	Afternoon Round.	
	On HFNC - 1 lit	Plan -
	Ongoing KMC	→ Continue HFNC - 1 lit
	No brady / desat.	Target SpO_2 90-95%.
	Vitals	→ TV - 17 cc/kg/day
	HR - 161/min.	22 ml/2nd hly
	RR - 52/min.	+ 1g fortification
	SpO_2 - 97%.	
	BP - 69/49 (52)	→ NP_2, blood gas - monday
	P/A - Soft	→ Continue KMC
		OMS
		NNS
		→ Monitor vitals
		Pogelly

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/5 @ 1pm		~~Rv - TFT - 7 NP2 monday~~
		Dr. Manilla
22/5 @ 3pm		seen by Dr. Vijayanand Sir
		→ continue HFNC - Kin
		→ bloods as planned
		Dr. Manilla
	~~Night~~	Added by author 019653

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/5/26 11:10pm	Night Events	Seen by Dr. [illegible]
	on HFNC-2L	
	pro Desat/No Bradys	- continue HFNC
	SpO_2 - 93%	- continue O.G feeds
	HR - 159/min	
	RR - 41/min	- Lass as planned.
	BP - 87/37 (48).	
	KMC - 2H	- KMC continue
		Dr. [illegible]

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Docu. No. : RCHBH /FRM / CLINICAL / 088

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
Dr. VIJAYANAND JAMALPURI

23/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : 59 Day of Life : 59 **PMA:** 34+6.

Term ☐ **Preterm** ☑ Gestation : 28+4 Corrected Gestational Age:

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	ExPT/ ELBW	CAP- Acinetobacter
2.	ROS – Evolving CLD.	
3.	Apnea of prematurity	
4.	Hypothyroidism.	
5.		
6.		

Today's Weight : 1.445 (25gm WTloss)

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent :

Mode of Ventilation : HFNC ☑ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP..... PEEP..... VG..... Rate..... Fio..... Oxygen : 1 L/min

Last CXR : Spo:

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG:

Change over the Last 24 Hours 25% → 22% → 21%

No Bradycardia/ No Desaturation/ No Apnea

CARDIO VASCULAR SYSTEM

Plan of Care :

Continue HFNC 2LPM

CNS

Neurological Examination :

Sedation –

Last Neurosonogram : Any Seizures

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....

Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : (5)

IV Fluids - Type of IVF : ..... @ ..... ml / hr

Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....

TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....

Abdominal Examination:.....

No Distension

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS

EBM

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....

Sepsis screen:.....

Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic	Sl.No.	Drugs	Days	
	1.			Levothyroxine Caffeine
	2.			3% NaCl
	3.			Domstal
				ess Dpam-D
				Vit-D3 Tubings-D7
				ezofer XT

Plan of Treatment :

1). Review - low flow.

2) TV - 170 ml/kg/day 20 ml @ 2H + 1gm + 3% NaCl fortification

3) Lab as planned

4) Blood gas weekly once

5) RBS-OD

6) KMC, OMS, NNJ continue

Doctor's Name (Handover given) : N. Pearlshe

Signature : N.Pr

Date & Time: 23/5/26 @ 6am

Doctor's Name (Handover taken) : Aarb

Signature : Aarb

Date & Time: 23/5/26 @ 9:30am

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/5/26		seen by Dr. Vijayanand
9:30 Am		Plan
		✓ – Trial off low flow.
		✓ NP2 } Blood gas } on monday.
		✓ Continue KMC, NNS, OMS.
		✓ Rewrite Ossopan-D Write-
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
23/5/26. 2pm	Afternoon Round	
	on minilow flow 0.1 lit No desat / brady. Intermittent tachypnea	Plan
		✓ → Continue minilow flow
		✓ → TV – 170ml/kg/day 20ml/2nd hely. + 1g fortification
	Vitals: HR – 166/min. RR – 62/min. SpO2 – 100%. BP – 61/31 (42)	✓ → NP2 } Blood gas } Monday.
	P/A – soft.	✓ → Continue KMC, OMS, NNS.
		✓ → w/f brady/desat

Docu. No.: RCHBH /FRM / CLINICAL / 088

Poppling

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
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...RESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/5/26 3pm		Seen by Dr. Vijayanand
		→ Continue low flow and wean as tolerated
		→ NP2 on monday
		Noted by [signature] 23/5/26 @ 8:30pm
24/5/26 8:30AM		Seen by Dr. Vijayanand
		Plans
		- wean low flow as tolerated.
		- continue TV - 170ml/kg/day
		- NP2 T/m monday.
		- continue OMS, NNS/OMS

Dr. VIJAYANAND JAMALPURI
Reg. No. 40526
Noted by Alphonsa 24/5/26 9:00

BAH-00652011 Sticker
Baby Of SRI VIDYA VANGALA IP5-00171644
25-03-2026 0 Y 1 M 27 D
Dr. VIJAYANAND JAMALPURI (M)

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24/5/26

...IENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 60 PMA: 35 weeks

Term ☐ Preterm ☐ Gestation: 26+4 Corrected Gestational Age: ..... Today's Weight: 1.486 (↑41gm)

Problems

S.No.	Current	Past Problems
1.	EPT / ELBW	VAP - Acinetobacter
2.	RDS - Evolving CLD	
3.	Apnoea of prematurity	
4.	Hypothyroidism	
5.		
6.		

Overview

Clinical Assessment

- on mini low flow,

SpO_2 - 96%
PR - 153/min
RR - 35/min

Medications Used

Levothyroxine
Caffeine
3% NaCl
Domstal
Ossopan-D
Vit D3
Order-XT

Plan of Care:
- wean off low flow as tolerated
- TV - 170 ml/kg/day
  ↓
  20 ml 2nd hrly + 1 gm MMF + 3% NaCl
- RBSOD
- continue LMC, NNS, OMS
- NP2 & T/M;

Doctor's Name (Hand over given): [signature]
Signature: [signature]
Date & Time: 24/5/26 @ 8:15

Doctor's Name (Hand over taken): Dr Aishwarya
Signature: [signature]
Date & Time: 24/5/26 @ 9:10a

Docu. No. : RCHBH/FRM / CLINICAL / 290 (26)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 27 D (M)
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GRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
24/5/26 3PM	Afternoon Round	
	on low flow.	Plan
	No desat (bradg.	
		→ Continue low flow
	Details: – stable	wean as tolerated
	P/A – soft.	→ TV – 130cc/kg/day
		10.20ml/2nd hrly
		full OG feed
		→ Continue LMC
		ORS
		→ Send NP2 } T/m
		Bloodgas
		→ Monitor lestab
		Noted by
		Prophylaxis Prophylaxis 24/5/26 3:30PM
25/5/26 12:10AM		C/S/B → Dr Nilesh
	1 episode of brads, desat	
		→ Continue low flow
		→ NP2 } T/m
		Gas
		→ Continue OG feed

Noted by Sona 25/5/26 @ [illegible]

Docu. No. : RCHBH/FRM / CLINICAL / 088 (26)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 29 D (M)
Dr. VIJAYANAND JAMALPURI

25/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 61 PMA: 35+1 wks

Term ☐ Preterm ☐ Gestation: 26+4. Corrected Gestational Age: ..... Today's Weight: 1.495 (↑9gm)

Problems

S.No.	Current	Past Problems
1.	~~EPT/ELB~~ EPT/ELBW.	
2.	RDS – 2 volving CLD	
3.	Apnoea of prematurity	
4.	hypothyroidism	
5.		
6.		

Overview

Clinical Assessment

– On mini low flow,
– 2 to 3 episodes of Brady, Desaturation
SpO_2 – 98%
PR – 144/min
RR – 38/min
Hb – 7.2g

Medications Used

3% NaCl
caffeine
Domstal
Ossopan-D
Vit D3
Orofer-XT
Levothyroxine

Plan of Care:

– Plan RBC transfusion today
– Plan new cannula for RBC transfusion
– Trace NP_2 full report.
– TV – 150 ml/kg/day → 10% 750 p
– weekly review

Doctor's Name (Hand over given): Self
Signature: Dr Anubha
Date & Time: 25/5/26 @ 8am

Doctor's Name (Hand over taken): [signature]
Signature: Dr Abhinavya
Date & Time: 25/5/26 8:30am

Docu. No. : RCHBH/FRM / CLINICAL / 290

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/5/26 9:22am		Seen by Dr. Vijayanand
	→	Plan:
	Hb - 7.2.	
		- Continue mini low flow
		- NPO for RBC transfusion
		- TV - 150ml/kg/day ↓ 10% ISO-P
		- To give RBC transfusion
		- weekly review.
		- Trace NPS full report.
		Dr. Anesh
		- w/H all supplements.
		Noted by A/phonsa 02085 25/5/26 @ 10am Dr. VIJAYANAND JAMALPURI Reg. No: 40524

Docu. No. : RCHBH/FRM / CLINICAL / 088 (26)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
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RESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Nutrition calculation

25/5/26

1:40pm

Highest wt – 1.495
Feed → 20ml 2nd holy → 240ml
fortificat → 12MMF
ossopan-D → 4ml ⇒ 100mg ca, 44mg pou, 160 IU pou
[1ml = 25mg ca, 11mg pou 40IU]

weekly
↑140gm

orfe → 4mg
vit D3 → 800 IU

	cal	pro	ca	pou	fe	vit D
EBM [67/1.1/35/15/0.2/–]	161cal	2.6g	84mg	36mg	0.48mg	–
MMF [3.84/0.12/2.83/2.17/0.03/–]	46	1.4g	33mg	26mg	0.36mg	48IU
ossop-	–		100mg	44mg		160IU
orfer	–	–	–	–	4mg	–
vit D3	–					800IU
	207cal	4g	217mg	106mg	4.84mg	960IU
Reqd	139	2.6g	145mg	70mg	3.2mg	644IU 674IU

53:1 2:1

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Afternoon Rounds	
28/5/26 2:30PM		
	on low flow 0.03l/min	Plan
	HR - 188/min	(1) cont low flow as
	RR - 37/min	needed
	SpO_2 - 99%	(2) TVF 150 ml/kg/day
		10% 150 - P
	NPO for transfusion	during transfusion
	PA - soft	(3) CRBS as planned
		(4) Feeding as per
	Hb - 7.8 WBC - 18K	transfusion protocol.
	Ca - 9.3 PC - 3.34l	(5) ROP this week.
	PO_4 - 3.6	
	ALP - 951	
28/5/26.	weekly review	
(1)	TFT (15/5) - ET_4 - 1.29	→ ↑ thyroxine 10-311 mcg/kg
	TSH - 6.19	
	T_4 - 10.44.	
	↑	
(2)	ROP (14/5) - vessels zone A	→ c/o in 2 weeks
	no stage no plus	28/5
(3)	NSG - 16/4 - DOL 22 - (10)	Noted by P Phonsa 25/5/26 @ 2:45pm

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 62 PMA: 35+2 wks

Term ☐ Preterm ☐ Gestation: 26+4 Corrected Gestational Age: ..... Today's Weight: 1577 (↑22g)

Overview

Problems		
S.No.	Current	Past Problems
1.	EPT / ELBW	
2.	RDS - evolving CLD	
3.	Apnea of prematurity	
4.	Anemia of prematurity	
5.	Hypothyroidism	
6.		

Clinical Assessment

on minilow flow 0.03Lit/min. No brady/desat.
URBC transfused yesterday.
HR - 138/min BP - 65/40 (47)
RR - 52/min
SpO2 - 96% O/O -

Medications Used

3% NaCl
Hold oral meds & fortification till 1PM today

Plan of Care: TV - 170cc/kg/day → 21ml/2nd daily full OG feed
Hold fortification
Continue CMC, ONS,
Monitor vitals
w/f brady/desat

Doctor's Name (Hand over given): Dr. Pooja
Signature:
Date & Time: 26/5/26 9am

Doctor's Name (Hand over taken): Dr. Anusha
Signature:
Date & Time: 26/5/26, 10:00am

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/5/26. 9:51am		Seen by Dr. Vijayanand
		→ Continue mini low flow mean as tolerated
		→
		→ Try 1 paladay feed under supervision
		→ Continue KMC
	Poopths	Noted by Hafiza (607462) 26/5/26 @ 9:51am Dr. VIJAYANAND JAMALPURI Reg. No: 40526
	Afternoon rounds	
26/5/26 1:15pm		
		Plans
	- accepted 1 paladai feeds well.	- To start mini low flow SOS
	- No Bradycardia	
	- No desaturation.	- TV - 170 ml/kg/day
		↓
		22 ml 2nd hrly
		↓
		1 paladai + Rest OG feeds

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	SpO2 - 96%	- Continue KMC
	PR - 125/min	NNS
	RR - 37/min	OMS
	- weaned off to room air	- RBS OD
		- w/f Apnoea,
		- ROP this week
		Dr Amit
		Noted by Hajra 60/1162
		26/5/26 @ 1:15pm
	Handover given by Dr Anusha.	
26/5/26 8:40pm		Handover taken by Dr. N. Prathibha
	DOL-62 / 26+4 - 13572	plan
	on Room air.	
		1. Cowflow sos.
		(Target spo2 90-100%)
	No Beauty Card / Desaturation	
	No Apnea	2. N - 170 ml/kg/day
		22 ml @ 2H → Ipalladar + Rest OG feeds
	SpO2 - 98%	
	HR - 162/min	3. KMC, OMS, NNS } continue
	RR - 33/min.	
	on OG feeds	
	Target spo2 90-100%	4. ROP - thursday (28/05/26)
	Ipalladar feed given	5. RBS-OD
		6. Monitor vitals
	~~[illegible]~~	

Docu. No. : RCHBH /FRM / CLINICAL / 088

Dr. N. Prathibha
N. Prathibha

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 26 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

27/5/26.

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 63. PMA: 35+3 wks.

Term ☐ Preterm ☐ Gestation: 26+4 wks. Corrected Gestational Age: ..... Today's Weight: 1534g (↑17g)

Problems

S.No.	Current	Past Problems
1.	EPT/ELBW	
2.	RDS- evolving CLD	
3.	Apnea of prematurity	
4.	Anemia	
5.	Hypothyroidism	
6.		

Overview

Clinical Assessment

on RA.
No brady/desat.
Accepted 1 paladay feed.

HR - 150/min.
RR - 48/min
SpO_2 - 94%.
BP - 67/34 (39)
U/O - 2.6cc/kg/hr.

Stools - passed.

Medications Used

3% NaCl.
Caffeine,
Ossopan-D
Vit D_3
Orofer XT

Levothyroxine.

Plan of Care:

Low flow 80s
TV - 170cc/kg/day ⇒ 22ml/2nd hdy + 1g fortification
Remove IV line
ROP - tomorrow
Monitor vitals

Dress baby.

Doctor's Name (Hand over given): Dr. Pogulthe
Signature: [signature]
Date & Time: 27/5/26 8am.

Doctor's Name (Hand over taken): Dr. Aishwarya
Signature: [signature]
Date & Time: 27/5/26 @ 8am

Docu. No.: RCHBH / FRM / CLINICAL / 290

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
15-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: ..... **PMA:** .....

Term ☐ **Preterm** ☐ Gestation: ..... Corrected Gestational Age:..... Today's Weight: .....

Overview	**Problems**		
	S.No.	**Current**	**Past Problems**
	1.		
	2.		
	3.		
	4.		
	5.		
	6.		
Clinical Assessment			
Medications Used			
Plan of Care:			

Doctor's Name (Hand over given): .....

Signature: .....

Date & Time: .....

Doctor's Name (Hand over taken): .....

Signature: .....

Date & Time: .....

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/5/26 11AM	seen by Dr. Vijayanad	Plan ① 3-4 paladay ② KMC ③ Stop caffeine ④ monitor vitals. Noted by Hafsa @11am 26/5/26 Dr Ashwini
27/5/26 1PM	Afternoon Rounds on room air KMC ongoing · HR - 100/min SpO2 - 93% RR - 49/min tolerating oral feeds. to start paladay trial now PA - soft.	Plan ① TV = 170ml/kg/day 22ml q3H + 1gm fortification ② continue KMC NNS ONS ③ Dress the baby ④ ROP f/m. Noted by Hafsa 26/5/26 @1pm Dr Ashwini

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

28/5/26

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: 65 Day of Life: 64 PMA: 35+4

Term ☐ Preterm ☐ Gestation: 26+4 Corrected Gestational Age: Today's Weight: 1.523 + 11gm

Problems

	S.No.	Current	Past Problems
Overview	1.	EPT / ELBW	
	2.	RDS / Evolving CLD	
	3.	Apnea of prematurity	
	4.	Anemia	
	5.	Hypothyroidism.	
	6.	Plagiocephaly	

Clinical Assessment

on RA
No brady / desat.
taken 4 paladay well.
~20 mins
PA - soft

HR - 170/min
SpO_2 - 93%
RR - 49/min

Medications Used

3% NaCl. Levothyroxine
ossopan-D
vit D_3
orofer XT.

Plan of Care:

1. TV = 170 ml/kg/day + 22 ml Q2H + 1gm fortification
2. ROP today
3. RW day paladay.

Doctor's Name (Hand over given): Dr Ashwarya
Signature:
Date & Time: 28/5/26

Doctor's Name (Hand over taken): Dr. Anuk
Signature:
Date & Time: 28/5/26

Docu. No. : RCHBH/FRM / CLINICAL / 290

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 2 M 1 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/05/26 9.35 AM	MORNING	plan
	Ward rounds	
		① Day palada & Night OG.
	• Self ventilating room air	② TV 180 ml/kg/day 23 ml/2h.
	• Taking palada feeds	③ KMC
	• Weight ↓ 11 g	④ Monitor for Brady, desat & Apnoeas.
28/5/26 12 PM	Afternoon Rounds	
	self ventilating on RA	Plan
	no brady / desat	① cont day paladay + night OG
	HR - 135/min	
	SpO_2 - 92%	② TV = 170 ml/kg/day 22 ml 2H + 1 gm fortification
	RR - 37/min	
	tolerating paladay well	③ ROP today
	PA - soft.	④ cont KMC

Dr. Abhinaya

Noted by Sona 28/5/26 @ 12 PM

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Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/2026 1pm	plagiocephaly (+)	Plan c' prone positioning.
28/5/26 3PM	Seen by Dr. Vijayanand	Plan (+) cont day paladay
		Dr. Abhya. Noted by Sona 28/5/26 @ 3 pm.

Docu. No. : RCHBH /FRM / CLINICAL / 088

(P.T.O)

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 1 M 30 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Counselling notes.

Date & Time	Progress Notes	Doctor's Order
12/04/26	B/O Srividya	
	(✓) We are almost nearing birth wt continue CPAP —	
	(✓) Start KMC today.	
	Ranjali	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 20 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/04/26	B/O sri vidya	
	(*) On CPAP - 7 cm	
	(*) On phaharthrapy	
	(*) We will review KMC T/M	
	Punjabi	[signature]

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00852011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 15 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/4/24	B/O Srividya - Baby Critical - We will start KMC today. - Nature of disease & prognosis explained to Fr. Punjab Anusha Resident	Shin Chacko.Y

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	B/O Srinidya	
8/4/26	• Baby is doing good.	
	• Full feeds reached.	
	• KMC to start	
	Supjnl.	
		Shin Charan. Y

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 16 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/4/26	B/o Srividya	
		By Dr. V J
	→ On CPAP 26	
	→ Removing UAC today	
	→ will Remove PICC line T/w	
	→ KMC will R/V.	
		Shin Charan. Y.
	Sneha Resident	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2 1/4/26	B/O Srividya	
	(*) Baby is ~~better~~ extubated NIV	
	(*) We will see 2D echo	
	(*) we'll plan NSG - T/M	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/4/26	B/O Srividya By Dr. VJ → Baby is Stable on cPAP. → we will reach feeds feeds by 3-4 days	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/03/26	B/O Srividya	
	• Ventilator wise good	
	• BP now stabilised	
	• We are intending to increase milk	
	- Jaundice up S/ days	
	- We will see.	Blood c/s → no. slap same antibiotic

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

Patient

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/26	B/o Sri. Vidya Baby is on ventilator with same Setting Baby - Hemoglobin is 10.2 for which LRBC transfusion Skin Bruises are present we will do → NSG (Brain Sca ~~Meta~~ Acid level are increasing White Cell counts are level Infection risk is high. clearance	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00652011 IP5-00171644
Baby Of SRI VIDYA VANGALA
25-03-2026 0 Y 0 M 3 D (M)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/3/26	B/O srividya 26 weeker, 950gm, male. Explained regarding problems of prematurity Currently on mechanical ventilator. surfactant given. Hypotension → on inj adrenaline currently NSG ~~SAS~~ is normal Minimal enteral nutrition started. Umbilical lines secured. Shri Charan Y	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/04/26	B/O Srividya	
	(*) Baby was fatigued → so on intubated	
	(*) No infection as of now	
	(*) Mother has been asked to go Dairy feed	
	(*) We will review Feeding after xray / USG.	Shiv Charan Y
	Punjab	

Patient Sticker

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/4/26	B/o Sai Vidya Multiple e/o bradycardia & desaturation upgraded support to NIV	Shri Charan Y

Patient Sticker

PROGRESS NOTES AND DOCTOR

Date & Time	Progress Notes	Doctor

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Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/4/26	B/o Srividya Multiple e/o bradycardia & desaturation upgraded support to NIV	Shri Charan Y

Patient Sticker

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BY RA…
Your Right to a Safe B…

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order