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 : IP5-00174608 **Admit Date** : 01-Jun-2026 **Admit Time** : 04:09 PM **UHID** : BAH-00657830

Patient Details :

Patient Name	: Baby Of HASNA KUWAR	**Age**	: 0 D
Guardian	: Mr VIMAL SINGH MANGSINGH RAJPUT	**DOB**	: 01-06-2026 03:31 PM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: Rajput Nivas 14-3-106 Arya samaj, goshamahal Hyderabad , Gosha Mahal Hyderabad Telangana INDIA 500012	**Phone No**	: 9586169846/ 7674008387
		E-mail	: hansurajput24@gmail.com

Admission Details :

Bed Type : BASINET **Bed No** : CRDL-SW-415-1 **Ward Name** : 4F-BIRTHING CENTRE

Room No : CRDL-SW-415-1 **Admission Type** : First Visit

Contact Details :

Name : Mr VIMAL SINGH MANGSINGH RAJPUT **Relationship** : Father

Contact Address : Rajput Nivas 14-3-106 Arya samaj,goshamahal Hyderabad , Gosha Mahal Hyderabad Telangana INDIA 500012 **Phone No** : 9586169846 / 7674008387

Signature

Doctor Details :

Doctor Name : Dr. NITASHA BAGGA **Specialisation** : NEONATOLOGY

Referral Doctor : Self **Phone No** :

Co-Consultant :

Payment Details :

Deposit Amount : 0.00

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

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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
Dr. NITASHA BAGGA

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NEWBORN MONITORING FORM

Date of Birth : 1/06/26
Time of Birth : 9:31pm
Mode of Delivery : Gem-LSCS
Birth Weight : 3.042
Head Circumference : 34cm
Length : 50cm
Red Reflex : .....

New Born Screening : Hasna
TFT : .....
OAE : .....
Mother's Blood Group : B+ve.
Baby's Blood Group : .....
Anomaly Scan : .....
Vaccination : BCG, OPV, Hep B

Dr Ajay 2/6/26

Date	Weight	Type of Feed	Quantity	Temperature	Signature
1/6/26	3.042	DBM	-	36.6°C	Sharath
2/6/26	2.958kg	DBF	-	98.0°F	Puja
3/6/26	2.924kgs	DBF	—	98.1°F	

Date	Time	Investigation	Result	Order No.	Signature
7/6/26.	5:30pm	Blood grouping		26055782	[illegible]
3/6/26	1 PM	SBR		26056283	[illegible]
3/6/26	2pm	NBS			[illegible]

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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Haena Kumar Age : 29. Father's Name : ..... Age : .....

Date of Birth : ..... Date of Admission : ..... UHID No.: .....

NICU Consultant : ..... 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 - Haena Kumar

Gender : ☐M ☐F Blood Group : .....

Date of Birth : 1/6/26 Time of Birth : 3:31pm

Place of Birth : RCH, BH

Mother's Blood Group : B+ve

Birth Weight (gms) : 3042g Length (cms) : 50 CM

OFC (cms) : 17 C-34 CM

Estimated Gesth Age : 38 + 4 wks

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 29y. Ht : 148 cm Wt : 81 BMI: ..... Married Life : ..... LMP : 3/9/25 EDD 10/6/26

Conception : Spontaneous or with Rx. : Ovulation Induced

Booked at what GA. : 31 + 6 wks AN Steroids Drugs / Doses : .....

Last Scans Details : 36+6 wk, cephalic, 2780 gm, AFI - 8.7 cm. doppler - (N), TIFFA (N), NT - (N)

TT Immunization and Iron / Folic Acid : .....

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 : .....

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 ? .....

(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 : .....

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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
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PAST OBSTETRIC HISTORY

G : 2 P : 0 A : 1 L : 0

Sl. No.	Age	GA wks	B.W	Gender	Significant	Details
G1	8wks				missed miscarriage.	
G2	present pregnancy.					

PERINATAL HISTORY

Treating Obstetrician : Dr Kirti Hospital : Reth-R ☑ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig)

Second stage (> 2 hours after dilation)

LSCS : ☐ Elective ☑ Emergency Indication : NPOL

Specify the reason :

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☐ Normal ☐ Suspicious ☐ Pathological

MSL : 3

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
1	2	
2	2	
2	2	
2	2	
2	2	
9	10	

TOTAL

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

Snapee II Score

					Score
Mean BP (mmHg)	> 30 (0)	20-29 (9)	< 20 (19)		
Lowest Temp (oF)	> 96 (0)	96-95 (8)	< 95 (15)		
Pao2 / Fio2 (mmHg%)	> 2.49 (0)	1-2.49 (5)	0.3-0.99 (15)	< 0.3 (28)	
Lowest Serum PH	> = 7.2 (0)	7.1-7.19 (7)	< 7.1 (16)		
Multiple Seizures	No (0)	Yes (19)			
U. Output (ml / kg / hr)	> = 1 (0)	0. 1-0.9 (5)	<0.1 (18)		
Apgar Score	> = 7 (0)	< 7 (18)			
Brith Weight	> = 1kg (0)	750 - 999 (10)	< 750 (17)		
SGA	> 3rd percentile (0)	< 3rd (12)			
				Total	

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :

Patient Sticker

BAH-00057830
Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
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History of Present Illness:

Equipment check done.
↓
Baby delivered via Emergency LSCS
↓
Cried immediately after birth
↓
delayed cord clamping done.
Cord cut. ~ 60sec.
↓
Routine care given
Inj Vit K 1 mg IM stat
↓
Shifted to mother side

Investigation details in previous Hospital :

Feeding History :

Past History :

Family History :

Socio Economic History :

Upper middle class

GENERAL EXAMINATION ON ADMISSION

General Disposition :

VITALS : Temperature : 36.5°C HR : 150/min RR : 56/min NIBP : CFT : <3sec

Color of the extremities : Acrocyanosis → pink

Jaundice : (-) Pallor : (-) SpO2 : 99% c RA

ANTHROPOMETRY: Birth Weight : 3042g Length : HC : Present Weight :

Ponderal Index : AGA : ✓ SGA : LGA :

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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
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HEAD TO TOE EXAMINATION

HEAD :	Fontanelles : Sutures Shape / Moulding : Edema / Bruising : Size - (H.C.) :	AF at level - NO moulding no caput
FACIES : (Any Facial Dysmorphism)		NO facial dysmorphism
NECK and CLAVICLES :	Range of Motion : Asymmetry : Masses :	(N.)
EYES :	Symmetry : Red Reflex : — Discharge :	to be checked
EARS, NOSE MOUTH and THROAT :	Ear set / Shape : Periauricular Pits / Tags : Nasal shape / Patency : Palate : Gums : Lips : Tongue :	(N.) NO cleft / tags
THORAX and BREASTS :	Shape of Thorax : Position of Nipples and Number :	(N.)
ABDOMEN and UMBILICUS :	Shape : Organomegaly : Bowel Sounds : Umbilical Stump : Discharge :	(N.)
GENITILIA :	Labia / Hymen : Testicles/penis : Anus :	(N) external female genetalia anal opening ↓
HERNIAL ORIFICES		– free.
TRUNK and SPINE :		– (N.)
SKIN LESIONS :		none.
EXTREMETIES :	Fingers / Toes : Deformities : Hip Joint Examination : Arms / Legs : Mobility :	(N)

SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : ☑ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress: RR: 55/min 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 : room air

SpO_2: 99% c↓RA. Auscultation: BLAE(+) Breath Sounds: Added Sounds:

CARDIOVASCULAR SYSTEM :

HR : 150/min BP :

Femoral Pulses : well felt.

Other Peripheral Pulses :

Precordial Activity :

Murmurs : (-)

Signs of Cardiac Failure : (-)

ABDOMEN:

Shape : (N.)

Palpation :

Palpable masses : (-)

Abdominal girth :

Hernia orifice : free.

Anal Patency : Patent

Umbilical Cord : 2 artery / 1 Vein.

First urine passed : not passed

Meconium passed : not passed

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) :

State of wakefulness : awake.

Prechtle Score :

Nerves : cry (+ve) / tone / activity - good.

MOTOR SYSTEM:

Passive Tone : good

Active Tone : good (N)

Neonatal Reflexes : Moro's (+)

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

Moro's : Present / Complete DTR :

ATNR : Skull and Spine :

Patient Sticker

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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
Dr. NITASHA BAGGA

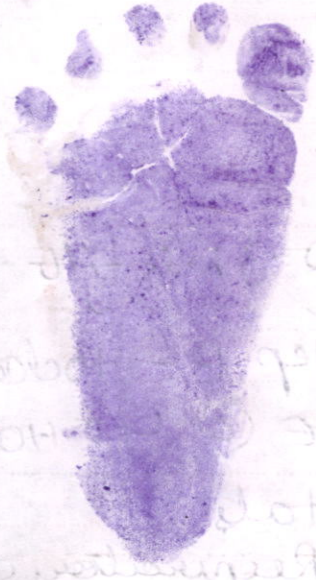
Any Congenital Anomalies .....

3.042.

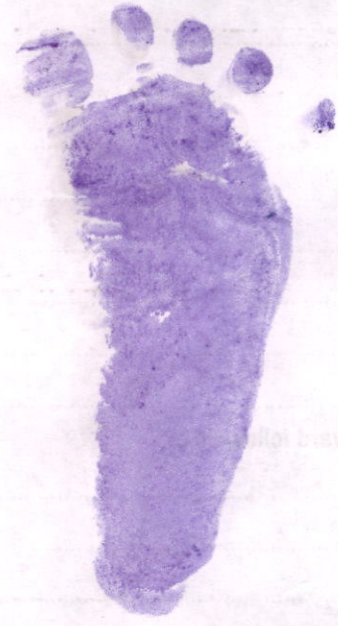
Diagnosis : Term / Female / AGA / Emesis (NPO) / G_2 A_1 – no maternal risk factors

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature : Pavani V.

Name : Pavani V

Date & Time : 01/6/26

Consultant :

Signature :

Name :

DR. NITASHA BAGGA
Registration No: 66260

Date & Time :

PLEASE FILL UP THE FOLLOWING DETAILS

1. Name of the referring Doctor : .....
2. Name of the 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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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
Dr. NITASHA BAGGA

AT THE TIME OF TRANSFER TO THE WARD

Final Diagnosis : .....

.....

.....

Neonatal condition at the time of Transfer: .....

.....

.....

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

Any Oxygen requirement : .....

Systemic : .....

.....

Medications : .....

.....

.....

.....

.....

.....

Plan during ward follow up :

.....

.....

.....

.....

.....

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

.....

.....

Adv

- Warm care.
- DBF - every 2-3 hrly - ↓ Hb - burping
- BCG / OPV / Hep-B - today
- SIBR / NBS / OAE @ 48 HOL
- Monitor vitals
- Watching for Respiratory distress / hypothermia
- clinical jaundice assessment 2nd 24HOL
- 3:45 Pm - 4 Pm - Track baby blood group

Screenings done during NICU Stay :

NSG : .....

Hearing Screen : .....

ROP : .....

TFT : .....

NP2 : .....

Doctor Signature (Handover Given): Pavani. V

Doctor Name: Pavani. V

Date & Time: 01/06/26

Doctor Signature (Handover Taken): .....

Doctor Name: .....

Date & Time: .....

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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
Dr. NITASHA BAGGA

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26 7.40am	Seen by Resident Dr Ayushma	
	I/7 HOL/ 38+4 wks/ 3042gm/ Emergency LSCS / G2 P0A1 L0 Fch. NPL	
M/ B+ve / B/ B+ve		
	Bt wt - 3042gm Today wt - 2948 94gms (2.7%)	Plan • Cont. DBF - every 2 hourly
	Urine passed - 4 times Meconium - 3 times	• BCG, OPV, HepB] Today
	Euthermic pink Peripheries warm Vital stable	• SBOR, NBS, OAE] 48 HOL
	Spine (N) AF open No facial dysmorphism Sensorium (A)	• Clinical assessment of jaundice - 24 HOL • Vitals monitoring (@3hrly) • Formula feeds thrice 10.30pm - 10ml, 3am, 7am] 15ml
	Formula feed given → 10.30 pm 3am	

DR. NITASHA BAGGA
Registration No: 66260

BAH-00657830 IP5-00174608
Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 7 H (F)
Dr. NITASHA BAGGA

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26 9 Am	Lactation care plan:	
	- Primi - colostrum likely observed. - well formed breast. - Left side nipple not everted. - Baby is able to suck with nipple shield.	
	Advice: - Direct breast feeding. - To feed every nipple shield for today. - To feed en biking position from post feed. - Make baby suck for 15-20 min on each side.	

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Baby Of HASNA KUWAR
01-06-2026 0Y0M0D7H (F)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26 4:30 pm	C/S/B Resident R Ayushma	
M/BF B/BF	TCBR – 7.4.	Plan → • Cont DBF → 2hourly
U/✓ S/✓		• SBR, NBS, OAE] 48HOL (7/m)
	Euthermic Pink peripheries warm Stable vitals	• vitals monitoring • ~~DCT to be done~~
3/6/26	Seen by Resident (Dr Ayushma)	
	41 HOL / 38 + 4 wks / 3042gm / Emergency LSCS / NVD / 47 PoA+ve	Plan
	Bt. wt – 3042gm Yest wt – 2948 Today wt – 2924 118gm (↓3.8%)	• Cont DBF 2hourly • SBR, NBS, OAE] 48HOL → Today 3pm (1pm) • Vitals monitoring • Plan D/C after If SBR < 12
M/BF B/BF		
U/6 time S/2 time	Euthermic Pink Peripheries warm Vital stable	• F/V 2 days DR. NITASHA BAGGA Registration No: 66260 Noted by Labour SBR → 10.9

(P.T.O)

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Baby Of HASNA KUWAR
01-06-2026 0Y0M0D9H (F)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		3/6/26 OAE - New born hearing screening. Bilateral responses are present. Bilateral Pass 3/6/26.
3/6 9.30am	Lactation care given; - Do not give long gap inbetween the feeds. - Always ~~Brst~~ 1st. - Make baby suck for 15 - 20 mins on each side	

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Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
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MULTI-DISCIPLINARY PLAN OF CARE FORM

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Diagnosis: New Born Baby Care

Date Time	Discipline	Type	Patient Needs / Problem List	Goal	Plan / Intervention	Signature	Team Verification
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Nursing ☐ Others:
1/6/26 5pm	☐ Medical ☑ Nursing ☐ Others:	☑ Initial ☐ Modified ☐ Per-Op ☐ Post Op	DBM and Burping	TO initiate Feeding	Established Feeding	Shrf	☐ Medical ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Medical ☐ Nursing ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Medical ☐ Nursing ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Medical ☐ Nursing ☐ Others:

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INTERDISCIPLINARY PATIENT / FAMILY EDUCATION RECORD

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Part - I.

Patient's / Learner Language: ..... Patient / Learner Literacy: ☐ Read ☐ Write ☐ Speak Willingness to Learn: ☐ Yes ☐ No Healthcare Literacy: ☐ Yes ☐ No

Identified Education Needs:

1. Diagnosis
2. Treatment and Care Plan
3. Pain Management
4. Informed Consent
5. Medication / Therapy (safety, effects/ side effect, interactions)
6. Discharge Medication
7. Infection Control Measures
8. Diagnostic Test / Procedures
9. Nutrition / Diet
10. Fall Risk Education
11. Safe use of Medical Equipment / Implantable Devices Safety
12. Patient's / Family Rights
13. Risk / Safety
14. Activity / Exercise
15. Social & Rehabilitation Needs
16. Special Discharge / Follow-up Education / Coping Skills
17. Others .....

Part - II

Date	Time	Need Identified	Information Taught	Use codes from the list in part III					Comments	Designation / Signature
				Person Taught	Learning Barriers	Teaching Tools	Mechanism/s to overcome barrier/s	Understanding		
1/6/26	5pm	1	Infection control measure	F, M	1	D	1	1		

Part - III: CODES

Who was taught: **PT:** Patient **F:** Father **M:** Mother **S:** Spouse **Sn:** Son **D:** Daughter **C** Caregiver **O:** Other (Specify) .....

Learning Barriers:

1. No Learning Barriers
2. Physical Impairment
3. Emotional Barriers
4. Language Barrier
5. Educational Level
6. Desire / Motivate to Learn
7. Impaired Thought Process/Cognitive limitations
8. Responsibilities at Home
9. Cultural Differences
10. Financial Difficulties
11. Beliefs and Values
12. Impaired Vision/ or Hearing
13. Cultural/Religion Practice
14. Others (Specify .....

Teaching Tools Used: **A:** Audio **D:** Demonstration **V:** Video **O:** Oral **P:** Printed

Mechanism/s to overcome barrier/s:

1. None
2. Obtain translator
3. Reassurance & Support
4. Teach Family / Others
5. Respect values & beliefs
6. Respect Cultural / Religion Preference
7. Other, Specify .....

Understanding: 1. Verbalizes Understanding 2. Demonstrates Understanding 3. Needs Review

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NURSING DEPARTMENT
NEWBORN - NURSING ASSESSMENT FORM

(Select and 'tick mark'[✓] the boxes as applicable)

Baby's Name: ..... Mother's Name: Mrs. Hasna.

Date of Birth: 1/6/26 Time of Birth: 3:31 pm Gender: ☐ Male ☑ Female

Birth Weight: 3.042 Kgs HC: 34 cm Lenght: 50 cm

Meconium in Liquor: ☐ Yes ☑ No Cried at Birth: ☐ Yes ☐ No

Term / Pre-term / Post-term: Term

Resuscitated: ☐ Yes ☑ No Blood Group: Mother: B+ve Baby: .....

Feeding: ☑ Breast Feeding ☐ Formula ☐ Both First Feed Time: 3:45pm - 4pm

AFFIX MOTHER'S IDENTIFICATION LABEL

Mode of Delivery: ☐ Normal ☑ LSCS - Emergency/ Elective ☐ Instrumental ☐ AVD

Indication: .....

Physical Assessment of New Born:

Temp: 36.6 °C HR: 148 /Min RR: 40 /Min BP: - SpO2: 100

Pain Score: ..... (Follow N Pass)

Fall Risk Assessment: ☑ **Yes** ☐ **No** **Score:** ..... (Fill the Humpty Dumpty Sheet)

Risk in Pressure Sore : ☑ Yes ☐ No (Braden Q Score) (Fill the Braden Q Sheet)

Behaviour Status on admission: ☐ Sleeping ☐ Crying ☑ Calm ☐ Drowsy

Findings:

General Appearance: Posture : ☑ Well-Flexed ☐ Asymmetry

Skin: ☑ Pink ☐ Meconium Stain ☐ Others, Specify: .....

Nursing Management: (Please strike through If not applicable e.g. Yes /~~No~~)

Vitamin K 1 mg I.M Administered: Yes / No

Routine Care Provided: Yes / No

Capillary Blood Glucose Monitoring Done: Yes / ~~No~~

Neonatal Screening Done: Yes / No

1. Nutritional Screening: Feeding Problem Yes / No
2. Functional Screening: Musculoskeletal Congenital Abnormality Yes / No
3. Socio History: Siblings Yes / No

All information obtained from ☑ Mother ☐ Father ☐ Other Family Member

Newborn Screening Discussed: Yes / No

Nurse Name: ..... Signature: ..... Date &Time: 1/6/26 15pm

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01-06-2026 0 Y 0 M 0 D 2 H (F)
Dr. NITASHA BAGGA

No. : RCHBH / FRM / CLINICAL / 124
01/06/2026

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

Pratiksha Rainbow Children's Hospital
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Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ...../...../..... Time:	4pm	7pm	10 PM	2 AM	6 AM
Doctor/Nurse/Family Concern?					
Temperature (F)	98.6°F	97.1°F	98.0°F	98.1°F	97.9°F
Heart Rate (bpm) and Blood Pressure (mmHg) *					
Note: BP does not score in early warning scoring					
Heart Rate (Number)	148/m	140/m	142/m	140/m	135/m
Resp. Rate (bpm) (Over 1 Minute) *					
Resp Rate (Number)	48/m	48/m	38/m	36/m	40/m
Resp Distress: Mod/ Severe / None / Mild			N	N	N
Receiving O_2 (l/min) O_2 Saturations (%)	99%	99%	100%	99%	100%
Conscious Level: Normal / Altered			N	N	N
GCS *			15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	0	0	0	0
Pain Score					
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

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

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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-00657830 IP5-00174608
Baby Of HASNA KUWAR
01-05-2026 0 Y 0 M 0 D 7 H (F)
Dr. NITASHA BAGGA

2/6/26

. 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:	10am	2am	6pm	10 pm	2 am	6 am
Doctor/Nurse/Family Concern?						
Temperature (F)	98.3F	98.1F	98.3F	98.2F	98.4F	97.9F
Heart Rate (bpm) and Blood Pressure (mmHg) *						
Heart Rate (Number)	136b/m	140b/m	136b/m	134b/m	136b/m	144b/m
Resp. Rate (bpm) (Over 1 Minute) *						
Resp Rate (Number)	42b/m	40b/m	42b/m	40b/m	42b/m	38b/m
Resp Distress: Mod/ Severe / None / Mild	N	N	N	N	N	N
Receiving O_2(l/min) O_2Saturations (%)	98%	100%	99%	99%	100%	98%
Conscious Level: Normal / Altered	N	N	N	N	N	N
GCS *	15/15	15/15	15/15	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	0	0	0	1	1
Pain Score	0	0	0	0	0	0
Observer's Initials						

NB: Scores 3 should be recorded overleaf

ACTIONS	
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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* 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!
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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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BAH-00657830 IP5-00174608
Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 9 H (F)
Dr. NITASHA BAGGA

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

3/6/26

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
Doctor/Nurse/Family Concern?	
Temperature (F) 104 103 102 101 100 99 98 97 96 95 94	*98.3F
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)	147bpm
Resp. Rate (bpm) over 1 Minute) * 70 60 50 40 30 20 10	*
Resp Rate (Number)	36bpm
Resp Distress: Mod/ Severe / None / Mild	N
Receiving O_2 (l/min) O_2 Saturations (%)	98%
Conscious Level: Normal / Altered	N
GCS *	15/15
TOTAL SCORE Number of shaded boxes	0
Pain Score	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.
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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-00657830 IP5-00174608
Baby Of HASNA KUWAR
01-06-2026 0 Y 0 M 0 D 2 H (F)
Dr. NITASHA BAGGA

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Your Right to a Safe Delivery

FLUID CHART

Sheet No. : 1 01/6/26

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
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am											
	10:00 am											
	11:00 am											
	12:00 pm											
	01:00 pm				ng							
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm											
1/6	04:00 pm		DBm				1			1	1	
	05:00 pm										NO	
	06:00 pm						np			np	IV	Sley
	07:00 pm		DBm				1			1	1	
Total Intake :		Taken				**Total Output :**	not passed					
	08:00 pm		DBF									Sweety
	09:00 pm										NO	Sweety
01/6	10:00 pm		1								IV	
	11:00 pm		FF 1oml				✓			✓		Sweety
	12:00 am										Canula	
	01:00 am									✓		Sweety
Total Intake :		Taken				**Total Output :**	VE 9			M= 1		
	02:00 am	f.f	15ml				✓					Sweety
	03:00 am										NO	Sweety
	04:00 am										IV	
2/6	05:00 am	f.f	15ml				✓			✓		Sweety
	06:00 am										Canula	Sweety
	07:00 am									✓		
Total Intake :		30ml				**Total Output :**	VE 2			M= 2		

Total 24 hrs. Intake	40ml	Total 24 hrs. Output	VE 4 M= 3

BAH-00657830 IP5-00174608
Baby Of HASNA KUWAR
01-06-2025 0 Y 0 M 0 D 7 H (F)
Dr. NITASHA BAGGA

FLUID CHART

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Your Right to a Safe Delivery

Sheet No. : 2

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				Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine		
			Mouth	I.V	N.G							
											1	Labtg
	08:00 am											Labtg
	09:00 am		FF 30ml							✓	NO IV	Labtg
	10:00 am						✓					Labtg
	11:00 am											Labtg
	12:00 pm		DBF								1	Labtg
	01:00 pm		FF 30ml									Labtg
Total Intake :						**Total Output :** U-1 M-/						
	02:00 pm										1	Labtg
	03:00 pm		FF 25ml									Labtg
	04:00 pm						✓			✓	NO IV	Labtg
	05:00 pm		DBF							✓		Labtg
	06:00 pm		FF								1	Labtg
	07:00 pm		25ml									Labtg
Total Intake :						**Total Output :** U-2 M-1						
	08:00 pm						1				1	
	09:00 pm	f.f	30ml							✓		Sathe
	10:00 pm						NP				NO IV	
	11:00 pm									✓		
	12:00 am	DBF					1				1	Sk
	01:00 am											
Total Intake :		Taken				**Total Output :** M-0 U-2						
	02:00 am						1				1	
	03:00 am	f.f	25ml									Sath
	04:00 am										NO	
	05:00 am						NP			✓	W	
	06:00 am	f.f	30ml				1				1	Sath
	07:00 am											
Total Intake :		Taken				**Total Output :** M-0 U-1						

Total 24 hrs. Intake	Taken	Total 24 hrs. Output	M-2 U-6

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Baby Of HASNA KUWAR
01-05-2026 0 Y 0 M 0 D 9 H (F)
Dr. NITASHA BAGGA

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FLUID CHART

Sheet No. : .....

1. All measurements in ml.
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Date	Time	Intake				Output						
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G							
	08:00 am										1	Latta
	09:00 am		OBF				✓			✓		
	10:00 am										NO IV	Latta
	11:00 am		FF 30ml/H							✓		
	12:00 pm						✓				1	Latta
	01:00 pm		FF 30ml									
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm											
	04:00 pm											
	05:00 pm											
	06:00 pm											
	07:00 pm											
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm											
	10:00 pm											
	11:00 pm											
	12:00 am											
	01:00 am											
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am											
	04:00 am											
	05:00 am											
	06:00 am											
	07:00 am											
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		Total 24 hrs. Output	

Patient Sticker

FLUID CHART

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Sheet No. : .....

1. All measurements in ml.
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		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											
	10:00 am											
	11:00 am											
	12:00 pm											
	01:00 pm											
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm											
	04:00 pm											
	05:00 pm											
	06:00 pm											
	07:00 pm											
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm											
	10:00 pm											
	11:00 pm											
	12:00 am											
	01:00 am											
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am											
	04:00 am											
	05:00 am											
	06:00 am											
	07:00 am											
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		**Total 24 hrs. Output**	