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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

ACTIVITY RECORD FOR BILLING

Name :_____

BAH-00682135
Baby BOGA KEERTHI IP5-00176609
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

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
19/7/26	5:30 Pm	ER	140	

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1	Dr. Sushma Reddy	20/7/26	71258	Aparanjitha
2				
3				
4				
5				
6				
7				
8				
9				
10				

INVESTIGATIONS

Date	Investigations	Order No.	Signature
19/7/26	RP, CRP, Lipase	2477	Sravs
	PT/APTT/INR		
	Blood AS -		
20/7/26	USG Abdomen	036059	Appu
20/7/26	PTAPPT/INR and / Dengueigm	250965	Sharf
20/7/21	Blood group / DCT	- 250915	Sheej
21/7	INR	2502	
21/7	24 hrs Urinary Copper	063215	
22/7	INR	86421	

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
19/7	infusion pamp	6pm		260352	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
19/7/22	IV placement	(2)	U301	Chandan
2022	RTA	(1)	712140	APPU

ANY OTHER INFORMATION

(1) USG Abdomen

Date : 22/7/22 Time : 10 AM Prepared By : Chandan

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
Chandan	GW II		

Rainbow Children's Hospital

BirthRight by 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 : IP5-00176609 **Admit Date** : 19-Jul-2026 **Admit Time** : 04:43 PM **UHID** : BAH-00662135

Patient Details :

Patient Name	: Baby BOGA KEERTHI	**Age**	: 12 Y 8 M 24 D
Guardian	: Mr BOGA SURENDAR	**DOB**	: 25-10-2013
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H NO -2-2-68, WEEKLY BAZAR , Jagtial Telangana INDIA 505327	**Phone No**	: 9032789596/ 9390125195
		E-mail	: NOMAIL@GMAIL.COM

Admission Details :

Bed Type : GENERAL WARD **Bed No** : GW 140 **Ward Name** : 1F-GENERAL WARD II

Room No : GW 140 **Admission Type** : First Visit

Contact Details :

Name : Mr BOGA SURENDAR **Relationship** : Father

Contact Address : H NO -2-2-68, WEEKLY BAZAR , Jagtial Telangana INDIA 505327 **Phone No** : 9032789596 / 9390125195

Signature

Doctor Details :

Doctor Name : Dr. Prashant Bachina **Specialisation** : PEDIATRIC GASTROENTEROLOGY AND HEPATOLOGY

Referral Doctor : SELF **Phone No** :

Co-Consultant : Dr. M N V POUSHYA SAI

Payment Details :

Payment Mode : Cash **Deposit Amount** : 0.00

Payor Name : STAR HEALTH AND ALLIED INSURANCE CO LTD

Patient Sticker

Boya Veeraiah
BAH-0066135
140.

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

DEFICIENCY CHECK LIST OF CASE SHEET

Sl.No.	List of Records	No. of Pages	Legibility	Completeness	Remarks
1	Admission sheet	1			
2	Discharge Summary	2			
3	Nursing Initial assessment	1			
4	Patient Transfer form	1			
5	In-patient Medical record	1			
6	Doctors progress sheets	3			
7	Nursing plan of care and handover sheets	6			
8	Consultation sheet	1			
9	General consent for treatment	1			
10	Consent for Surgery				
11	Consent for blood transfusion				
12	Consent for chemotherapy				
13	Consent for high risk				
14	Consent for Restraint				
15	LAMA consent				
16	Consent for special procedure / Sedation				
17	Consent for Formula feed				
18	Consent for MTP				
19	Consent for Radiological Investigations				
20	Consent for HIV test				
21	Anaestesia notes (Pre Anaesthesia& post)				
22	Neonatal Admission/Delivery/Physical Exam				
23	Medication Reconciliation	1			
24	Emergency Triage record	1			
25	Pre operative check list				
26	Surgical safety checklist				
27	Operation Theatre notes				
28	Nurses clinical Presentation				
29	TPR & BP chart	92			
30	Intake and Out take chart (fluid chart)				
31	Drug chart (Regular Prescription)	1			
32	Investigation Values (result sheet)	1			
33	Nebulization chart				
34	Nutritional review chart	1			
35	Intensive care unit (ICU Charts)				
36	Consent for Admission in PICU / NICU				
37	The Humpty dumpty scale	1			
38	Braden Q Scale	1			
39	~~Bed side~~ check list Thermometer	1			
40	PICU bed formula Dilution feeds				
41	Gastro monitoring chart	1			
42	Rch ED doctors note				
43	BP Monitoring chart				
44	RBS monitoring chart				
	~~Extra~~	4			
	Total No. of Pages	54			

Doc. No. : RCHBH/ FRM / GENERAL / 126

Signature and Date : Saee 22/7/16

(P.T.O)

ERROR LOG

LOCATION : OT / Birthing Centre / BirthRight Premium / 3rd Floor (Zone A,B,C) / NICU / PICU / 2nd Floor Ward / Oncology / 1st Floor Wards.

OBSERVATION :

DATE :

SIGNATURE OF MRD INCHARGE / EXECUTIVE

Rainbow®
Children's
Hospital

It takes a lot to treat the little.

PEDIATRIC IN-PATIENT MEDICAL RECORD

Patient Name: keerthi

UHID ID:

Department:

Consultant:

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

Pediatric Multiorgan History & Physical Examination

Name : _____ Age/Sex 13yr/F

Information given by: _____ Relationship _____

Chief Presenting Complaints & Duration (Chronologically)

Pain abdomen (∴ 3days)
Vomiting (∴ 2days)
Fever (∴ 2days).

History of present illness :

- Pain abdomen over periumbilical region, non radiating, relieved on passing stool, aggravated during and after food (solids & liquids).
- vomiting, after each feed, non projetile, non bilious, vomitus contain food.
- fever intermittent relieved on medication, 101 - 100 → 101°F, NOT associated c rash, chills
  Occurred after endoscopy
- Hard stool, passed 1 stool / 2days, Apply pressure while passing for > 2 stools, Non blood stained stools
  Taken Inj Ceftriaxone for 2 days.

N/H/o Black colored stool, Pale stools,

12/7
CBP - Hb - 10.4
WBC - 6290
N/L - 77/17
Pl - 73,000
Sr. creatinine - 0.6
Blood urea - 12.1

TBil/DC < 1.3 / 0.4 / 0.9 (on)
SGPT - 45
SGOT - 99
ALP - 872
S. Albumin - 2.8.

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Sachina

Pediatric Multiorgan History & Physical Examination

Past History : (Including details of any previous investigation or treatment)

IBH: USG abdomen → Coarse echotexture, Abnormal flow in (Rt) hepatic vein & hypoplastic middle & Lt hepatic veins - ? Hepatic venous outflow obstruction - Rlo Budd-chiari syndrome, moderate splenomegaly

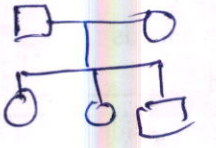
OPH: CECT abdomen → mild hepatosplenomegaly, multiple dilated perisplenic collaterals noted, likely - Non cirrhotic portal fibrosis - No thrombus in portal vein, splenic vein, SMV & IVC

IBH - Upper GI endoscopy → No varices

? GERD / Dyspepsia / Abdominal pain.

- No similar complaint in the past
- Hlo peptic ulcer in paternal Grandfather.

Birth & Neonatal History:



Birth & Socio Economic History:

About Father :

About Mother :

Any additional Information :

Developmental History :

According to age

Immunization History :

TT1 date

(P.T.O.)

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

Pediatric Multiorgan History & Physical Examination

Anthropometry :

Head Circum (cms)_____(Centile _____) Height (cms):_____(Centile)_____)

Weight (kgs)) 42.7kg (Centile _____)

On Examination :

Temperature : 97.2°F Pulse Rate : 64/min B.P. 107/53(77) SPO2 99% on RA

Resp.rate and type of breathing : 20/min

Rash –

Lymphadenopathy –

Oedema : –

Allergies (if any):

Respiratory System :

Inspection (any s/o distress) :

Air entry & breath sounds : BAE (+)

Any addes sounds : Clear

Relevant data from outside (Chest X-Ray, ABG,etc.,)

Cardiovascular System :

Inspection of procordium :

Heart Sounds : S1S2 (+)

Any murmur :

Relevant data from outside (Chest X-Ray, ECG, ECHO, etc.,) :

Per Abdomen :

Inspection No scars, no distension

Palpation : Splenomegaly – 3-3.5cm from LCM., non tender.

Ausculation : Bowel sounds (+)

Spine : External Genitelia :

Relevant data from outside (CT, USG etc.,)

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

Pediatric Multiorgan History & Physical Examination

Central Nervous System :

Level of Consciousness : AVPU/GCS score : 15/15

Cranial Nerves : N

Motor System:

Nutriton :

Tone: Power

Co-ordinator : N

Posture :

Involuntary Movements :

Reflexes :

DTR **Superficials:**

Plantars

Sensory System : N

Bladder / Bowel :

Clinical Summary & Diagnostic:

Para abdomen evaluation
(Budd-Chiari Syndrome).

(P.T.O.)

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

Pediatric Multiorgan History & Physical Examination

Preventive aspects of the treatment: Complications

Desired goals of the treatment : Hemodynamic stab

Planned Labs:

- ~~CBC~~, CRP, RP, Blood cult
- ~~Serum amylase~~, Sr. Lipase
- PT/INR/APTT
- Extra plain, EDTA
- USG abdomen thm mony

Planned Management

- Inj Cefotaxime
- Inj Buscopan
- Inj Pantop
- IVF DNS.
- TO decide on CLEXANE after rounds.

Signature of the Doctor: Ply

Name of the Doctor: Dr Ramkumar S

Date & Time: 19/7/26

Signature of the Consultant:

DR. PRASHANT BACHINA
Registration No: 11816

Name of the Consultant:

Date & Time:

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

Rainbow® Children's Hospital
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
20/07/26 10AM	C/S/B - Dr. Prashant B. Acute Pain abdomen & evaluation / Liver failure	Plan -
	H/o Wilson's /	1) Drug as per chart.
	O/E - Conscious / Active low Hemodynamic stable	2) IV fluids as advised.
	Chest - clear.	3) USG Abdomen - Dr. Nitin comment on liver cholestasis, Hepatic & portal vein Acute.
	P/A - Soft; No distension Spleen - Grade 2 - Soft to firm	4) Opthal examination - for KF Ring.
	No pallor, clubbing No lymphadenopathy.	~~5) 24 hr Urinary copper -~~
	No bleeding manifestations	6) Inj Vit-K stat. → Repeat INR T/m
	Oral cavity - (N).	7) Syp. Lactulose, 1
	ICUC:- 1) Coagulopathy	8) NAC infusion - P/v
	2) Hypoalbuminemia.	9) Pipbos / Flucnagole
	3) Thrombocytopenia.	
	4) Fever / Pain.	

DR. PRASHANT BACHINA
Registration No: 11816

DR. PRASHANT BACHINA
Registration No: 11816

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

Rainbow Children's Hospital
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
20/07/26 10AM	Acute pain abdomen / coagulopathy / Thrombocytopenia / Hypersplenism	
		Plan
	No fever since admission	
	Stools - morning passed	1) To send PT APTT INR now.
	Activity - Good.	
	U/O - adequate	send dengue NS1, IgM in old sample.
	Colour urine - yellow.	
		2) R/v Zinc.
	No Bleeding manifestation	
	No Edema	3) R/v on NAC - based on INR
	O/E - Hemodynamically stable.	
		4) Drugs as per chart
	spleen - firm	
	Chest - clear	5) GRBS - 12th hrly.
	BP =	
		6) T. cyclopam (SOS).
		7) Monitor sensorium & Bleeding manifestation
	9) INR / CBP / Electrolyte Tmr morning 6AM	
		8) IV fluids - 50% MF.

Dr. Kush
Dr. Kr

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

5.10pm

Rainbow® Children's Hospital
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
20/1/16 5pm	S/b Gastro team ALF. ? Wilsons'	Plan:
	- no further fever	① Send 24 hr urinary copper
	- no vomiting	② To start chelation after collecting urine.
	- no abdominal pain	
	O/E Alert	③ Send DCT, Blood INR. groupings.
	chest: clear	
	P/A: soft.	④ Start NAC infusion
	NSM ↑	⑤ Monitor sensorium. Watch for hematemesis / Melena.
repeat		⑥ Monitor vitals Q 4th.
		repeat
		Dr. Hema.

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI (F)
25-10-2013 12 Y 8 M 24 D
Dr. Prashant Bachina

Rainbow® Children's Hospital
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
21/07/26 10AM	c/s/B - GastroTeam Liverfailure - ? Wilson's.	Plan 1) Stop IV fluids.
	No fever. c/o cough (+) stools - twice - hardstools. Urine output - good., yellowish No Bleeding manifestations. oral intake - good.	2) Syp. levocetrizine. 3) Drug allergy chart. 4) Lactulose to increase dose.
	o/e - Hemodynamically stable. Chest - clear P/A - Soft, No tenderness. CNS - NAD	5) To collect 24hr urinary copper & send. 6) Trace B/C/L. 7) NAC infusion - to stop after completion of infusion 8) monitor for BP - 2 4th hrly seizures / Bleeding manifestations.
	9) INR @ 2PM extra 5 DTA sample preserve. 10) IR/V - adding Zinc	11) To c/o copper diet

DR. PRASHANT BACHINA Registration No: 11316
DR. PRASHANT BACHINA Registration No: 11316

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/7/26 4:30pm	S/B Gastro team • no fever • no bleeding • mild cough. O/E: Alert chest: clear P/A: soft HSM ⊕	Plan: ① Send 24 hr urinary copper ② Start zinc and Trientine after collecting urine. ③ Monitor vitals 2 4th ④ INR + Extra EDTA sample (5ml) 4 T/m 6 am.
22/07/26	INR: 1.5	

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI (F)
25-10-2013 12 Y 8 M 25 D
Dr. Prashant Bachina

Rainbow® Children's Hospital
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
26/07/20 10AM	C/S/B - Gastro Team	
	Acute Liver failure.	Plan
	No fever	1) Drugs as per chart
	cough +	
	Stools - Passed	2) Monitor BP,
	U/O - adequate	sensorium
	O/E - Hemodynamic stable	3) Trace 24 hr urinary
	Chest - clear	copper.
	B/C/S - 48 hr Negative	4) (D) ↓ Udiliv, Lactulose, Zinc, Trientine. Pantop. / Amoxyclav.
		5) R/V 3 days c̄ INR / LFT / CBC

DR. PRASHANT BACHINA Registration No: 11816

DR. PRASHANT BACHINA Registration No: 11816

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

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

12th hourly
9 RBS

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

GASTRO MONITORING FORM

Date	Time	Daily Weight	Abdominal Girth	RBS	Total Intake	Urine Output	No. of Motions	Signature
20/07	7:00pm	NA	—	121mg/dl	—	—	—	Shaily
21/7	7Am	NA	—	101mg/dl	—	—	—	Divya.
21/7	7pm	NA	—	107mg/dl	—	—	—	Chandana
22/7	7.45Am	NA		98mg/dl				Merlin

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

CROSS CONSULTATION FORM

Doctor Name : Dr. Sushma Reddy Date : 20/7/26 Time : 9am

Diagnosis :

Hospital :

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:

Signature:

Findings and Recommendations :

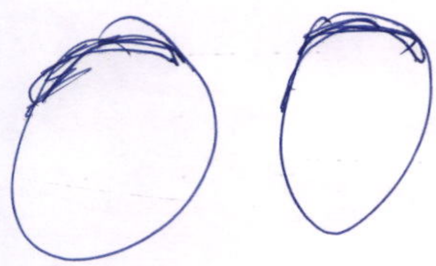
Thanks for referral

O/E

Va : 6/6

Ab : [illegible]

Both eyes Kforing +ve



Both eyes Kforing +ve

R/v SOS

Consultant :

Name : Sushma Reddy Signature : Date & Time : 20/7/26 2pm

Doc. No. : RCHBH / FRM / CLINICAL / 049

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

RESULT SHEET

Date	19/7	20/7/26				
Time	7PM	5PM				
Hb	10.2					
PCV	31.6					
RBC	3.7					
WBC	5200					
N/L	58/33					
Platelets	77000					
CRP	18					
ESR						
PCT						
RBS						
Na	134					
K	4.1					
Cl	104					
Ca/Mg	8.2/					
Phosphate	3.9					
Urea	21					
Creatinine	0.4					
ALP	164 ↓					
SGPT	73					
SGOT	137					
T.Bill/Conj	2.2/0.6					
T.Protein	5.4					
S.Albumin	2.6					
S.Globulin	2.8					
A/G Ratio						
Uric Acid	1.5					
S.Amylase	64					
Sr.Lipase	202					
Blood Lactate						
S.Cholesterol	78					
PT/INR	28/2.2	19/1.5 ↓	1.5	18/1.4 ↓		
APTT	56	44		36		
CSF Protein / Sugar						
Cells						
N/L						

IVF VITH

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 : DCT - Negative.

Dengue - NS1 & Negative

IgM

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

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

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Sachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

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: ER Shifted to: ward

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	Inj Ceftriaxone	iv	4pm	BD	18/7	☐ C ☐ DC
2						☐ C ☐ DC
3						☐ C ☐ DC
4						☐ C ☐ DC
5						☐ C ☐ DC
6						☐ 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 Remeka

Date & Time : 19/7/26

Nurse Name & Signature: Lee Smitha

Date & Time : 19/7/26 @ 5:14 Pm

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

DRUG CHART

Date of Admission: 19/7/26 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 : Inj BUSCOPAN				Date / Time
Dose	Route	Frequency	Start Date	
20mg	iv	SOS	19/7	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions: If Pain (max -3times)				

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:				

Signature .....

VERIFIED BY : Name .....

BAH-00882135 IPS-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

REGULAR PRESCRIPTIONS

Weight. 42.7 Ward. ....

DRUG: Inj CEFOTAXIME				Date / Time: 19/7, 20/7
Dose	Route	Frequency	Start Date	
2gms	iv	TID	19/7	6AM
Name & Signature of the Doctor Starting the Drugs: [signature]				2pm
Additional Instructions:				10pm / 8pm
Daily Doctor's Endorsement by a Sign				

20/07/26

DRUG: Inj PANTOPRAZOLE				Date / Time: 19/7, 20/7, 21/7, 22/7
Dose	Route	Frequency	Start Date	
40mg	iv	OD	19/7	
Name & Signature of the Doctor Starting the Drugs: [signature]				6AM / 6pm
Additional Instructions:				
Daily Doctor's Endorsement by a Sign				

DRUG: Inj ONDANSETRON				Date / Time: 19/7, 20/7, 21/7, 22/7
Dose	Route	Frequency	Start Date	
8mg	iv	TID	19/7	6AM
Name & Signature of the Doctor Starting the Drugs: [signature]				2pm
Additional Instructions:				10pm / 6pm
Daily Doctor's Endorsement by a Sign				

DRUG: SYP. LACTULOSE				Date / Time: 20/7
Dose	Route	Frequency	Start Date	
15ml	PO	TID	20/7	6AM
Name & Signature of the Doctor Starting the Drugs: Dr. Kumar				2pm / 11AM
Additional Instructions:				10pm
Daily Doctor's Endorsement by a Sign				

Dr. Kumar 20/07/26

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

Sheet No: ....

REGULAR PRESCRIPTIONS

Weight .... Ward ....

DRUG : INJ PIPTAZ.

Dose	Route	Frequency	Start Dt.
4gm	IV	TID	20/7

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

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date ▸ Time	20/7	21/7	22/7
6AM	X	prai Divya Sneha Mena	
2pm	Daj	Daj	
3pm			
10pm	prai Divya Sneha Mena		

DRUG : INJ. FLUCONAZOLE.

Dose	Route	Frequency	Start Dt.
400mg	IV	OD	20/7

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

Additional Instructions: @ 8mg/kg.

Daily Doctor's Endorsement by a Sign

Date ▸ Time	20/7	21/7
6pm	Daj	6:30pm
4pm		[illegible]

DRUG : Inj vitamin K.

Dose	Route	Frequency	Start Dt.
10mg	IV	OD	20/7.

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

Additional Instructions: from 21/07/26, for 2days

Daily Doctor's Endorsement by a Sign

Date ▸ Time	21/7	20/07
10 AM	Daj	

DRUG : SYP LACTULOSE.

Dose	Route	Frequency	Start Dt.
10ml	PO	TID	20/7

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

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date ▸ Time	20/7	21/7	22/7
6AM	X	prai Divya Sneha Mena	
2PM	Daj	14ABHU	
10pm	prai Divya Sneha Mena		

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

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

Sheet No: .....

REGULAR PRESCRIPTIONS

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

DRUG : T. LEVOCETRIZINE

Dose	Route	Frequency	Start Dt.
5mg	PO	OD	21/7

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

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date/Time 21/7

10 AM ✓

DRUG : T. ~~SYP~~ ZINC

Dose	Route	Frequency	Start Dt.
50mg	PO	BD	21/7

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

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date/Time 21/7

10 AM ✓

2pm

10 pm Sushma nurse

DRUG : T-TRIENTINE

Dose	Route	Frequency	Start Dt.
1tab	PO	TID	21/7

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

Additional Instructions:

1 tab = 333mg

Daily Doctor's Endorsement by a Sign

Date/Time

DRUG : ~~Syp. RELENI PLUS~~

Dose	Route	Frequency	Start Dt.
5ml	PO	BD	21/7

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

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date/Time

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

Dr. Prashant Bachina

IPS-00176609

Weight. 42·1 Ward. .....

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.	

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
20/07	10:30 AM	Inj Vit K	10 mg	IV		Pushpa Sailaja

Dr. Prashant Bachina

IP5-00176609

BAH-00862135

I.V. FLUIDS CHART

Weight. ...1.2...7kg Ward. .....

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
19/7	6PM	2UF DNS	i.v	70		PIVIV Secured	20/7		
20/7	11AM	DNS (60/.)	IV	45		PIVIV Secured	20/7		
20/7	4PM	DNS	IV	40ml			21/7		
20/7	11P	NAC infusion 21ml + 3ml NS	I.V	1ml/hr			21/7		

Signature .....

VERIFIED BY : Name .....

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 26 D (F)
Dr. Prashant Bachina

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

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

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 : 2/12/13 Time: 6Am

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): 65bpm

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

Resp Rate (Number): 19bpm

Resp Distress	Mod/ Severe / None / Mild
Receiving O_2 (l/min) O_2 Saturations (%)	99%
Conscious Level	Normal / Altered
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.
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.

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

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

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

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 : 21/7/26

Time:	6am	10AM	2pm	6pm	10pm	2Am	6am
Doctor / Nurse / Family Concern?							
Temperature (°F) (104–94)	97.4F	98.4F	98.2F	98.1	96.4F	98F	
Heart Rate (bpm) and Blood Pressure (mmHg) * (190–50)	103/72 (82)	112/78 (88)	107/67 (79)	105/57 (69)	107/56 (72)	105/88 (72)	
Heart Rate (Number)	89b/m	92b/m	86b/m	111b/m	73b/m	64b/m	
Resp. Rate (bpm) (Over 1 Minute) (70–10)							
Resp Rate (Number)	28b/m	26b/m	24b/m	26b/m	20b/m	18b/m	
Resp Distress: Mod/ Severe							
Resp Distress: None / Mild							
Receiving O_2 (l/min)							
O_2 Saturations (%)	98%	99%	99%	100%	100%	100%	
Conscious Level: Normal							
Conscious Level: Altered							
GCS *	15/15	15/15	15/15	15/15	15/15	15/15	
TOTAL SCORE Number of shaded boxes	1	1	1	0	0	0	
Pain Score	0	0	0	0	0	0	
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	

Note: BP does not score in early warning scoring

ACTIONS

NB: Scores 3 should be recorded overleaf

Score	Action
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

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-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

. No. : RCHBH/ FRM / CLINICAL / 127

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

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 : ...20/7..... Time:

	6am	10pm	1pm	6pm	10pm	2am
Doctor / Nurse / Family Concern?						
Temperature (°F)	97.9°F	98.6°F	98.6°F	97.7°F	98.2°F	97.8°F
Heart Rate (bpm) and Blood Pressure (mmHg) *	183 (55) 42	101 (70) 56	105 (72) 60	113 (79) 66	113 (54) 68	109 (69) 62
Heart Rate (Number)	82 b/m	78 b/m	96 b/m	101 b/m		
Resp. Rate (bpm) (Over 1 Minute)		*				
Resp Rate (Number)	28 b/m	33 b/m	22 b/m	20 b/m	28	28
Resp Distress: Mod/ Severe / None / Mild						
Receiving O_2 (l/min) O_2 Saturations (%)	98%	100%	98%	99%	97%	98%
Conscious Level: Normal / Altered						
GCS *	15/15	15/14	15/15	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1
Pain Score	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 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

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-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

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

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

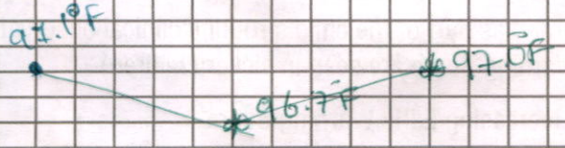
Rainbow® Children's Hospital
It takes a lot to treat the little.

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

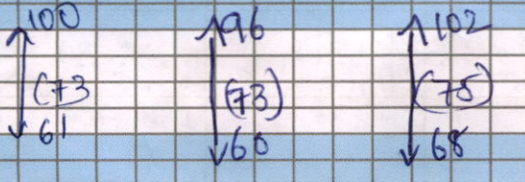
Date : 19/07/26 Time:	6p30pm	10pm	2am
Doctor / Nurse / Family Concern?			

Temperature (°F)



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

Note: BP does not score in early warning scoring



Heart Rate (Number)	68bpm	64b/m	78b/m

Resp. Rate (bpm) (Over 1 Minute)

Resp Rate (Number)	26bpm	26b/m	26b/m
Resp Distress: Mod/ Severe / None / Mild			
Receiving O_2(l/min) O_2Saturations (%)	99%	100%	99%
Conscious Level: Normal / Altered			
GCS *	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	1	1
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
	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

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-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

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 – 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											
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm											
	04:00 pm				ER							
19/07	05:00 pm											
	06:00 pm	DNS	–	70ml	|	|	NAD			0	Sravs
	07:00 pm	|	–	70ml						✓	0	
Total Intake :						**Total Output :**						
	08:00 pm	|		70ml				✓		✓	0	
	09:00 pm			70ml			|		|		0	Rut
	10:00 pm	DNS	chapathi water	70ml							0	
19/7	11:00 pm			–			NP				0	
	12:00 am	|		–			|		|		0	Rut
	01:00 am			70ml							0	
Total Intake :						**Total Output :**						
	02:00 am	|		70ml						✓	0	
	03:00 am			70ml			|	|	|		0	Rut
	04:00 am	DNS		70ml							0	
20/7	05:00 am			70ml			NP				0	
	06:00 am	|		–			|		|	✓	0	Rut
	07:00 am			70ml							0	
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		Total 24 hrs. Output	

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 24 D (F)
Dr. Prashant Bachina

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. : .....

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							
20/7	08:00 am		Bby	40ml			✓				0	
	09:00 am		+two	40ml						✓	0	Dhairy
	10:00 am	DNS		40ml							0	Dhairy
	11:00 am				NA					✓	0	
	12:00 pm			40ml							0	Dhairy
	01:00 pm			40ml							0	
Total Intake :						Total Output :						
20/7	02:00 pm		Pbby	40ml						✓	0	Dhairy
	03:00 pm		+two	40ml			✓				0	
	04:00 pm	DNS		40ml			NA			✓	0	Dhairy
	05:00 pm			40ml	NA						0	
	06:00 pm			–						✓	0	Dha
	07:00 pm			40ml							0	
Total Intake :						Total Output :						
20/7	08:00 pm	✓		40ml							0	
	09:00 pm			40ml							0	
	10:00 pm	DNS		40ml			✓			✓	0	Dhy
	11:00 pm			40ml							0	
	12:00 am	✓		40ml							0	
	01:00 am			40ml						✓	0	
Total Intake :						Total Output :						
21/7	02:00 am	✓		40ml							0	
	03:00 am			40ml							0	
	04:00 am	DNS		40ml			✓			✓	0	Dhy
	05:00 am			40ml							0	
	06:00 am	✓		40ml								
	07:00 am			40ml						✓	0	
Total Intake :						Total Output :						

Total 24 hrs. Intake		Total 24 hrs. Output	

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

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.

		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							
21/2	08:00 am	→		40ml+1ml			1			✓	0	
	09:00 am			40+1ml							0	Anup
	10:00 am	DNS		40+1ml			NO				0	
	11:00 am	Nacl infusion		40+1ml						✓	0	
	12:00 pm	↓		~~1ml~~			1				1	Anup
	01:00 pm			~~1ml~~							0	
Total Intake :						**Total Output :**						
21/2	02:00 pm						1				0	Chand
	03:00 pm										0	
	04:00 pm	NO					2P			✓	0	Chand
	05:00 pm	EVF									0	
	06:00 pm						1			✓	0	Chand
	07:00 pm	↓									0	
Total Intake :						**Total Output :**						
2/3	08:00 pm	→	Rice								0	Meelis
	09:00 pm									✓	0	
	10:00 pm	NO					NP				0	
	11:00 pm	IVF									0	
	12:00 am						1				0	Meelis
	01:00 am	↓									0	
Total Intake :						**Total Output :**						
22/3	02:00 am	→									0	
	03:00 am										0	Meelis
	04:00 am	NO					NP				0	
	05:00 am	IVF									0	
	06:00 am						1			✓	0	Meelis
	07:00 am	↓									0	
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		Total 24 hrs. Output	

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

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. : .....

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											
	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	

BAH-00662135 IP5-00176609
Baby BOGA KEERTHI
25-10-2013 12 Y 8 M 25 D (F)
Dr. Prashant Bachina

140

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

NUTRITIONAL HEALTH ASSESSMENT - GIRLS

Date: 20/7/20 Time: 9:30 Am

Weight: 42.7kgs Centile: >25th

Height: 154 cms Centile: >25th

Inference: well child

RDA: — Calories: 1750kcals/d Protein: 31g/d

Diet Recommendations: Normal diet

Re-Assesment: Avoid spicy, chilled and outside foods

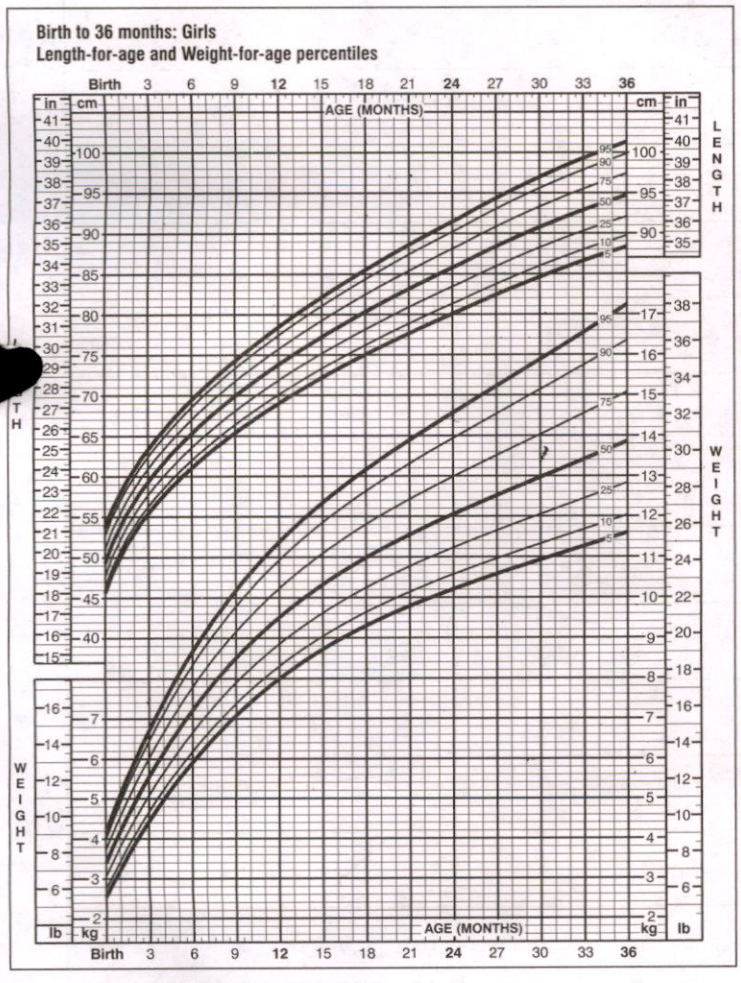
Food Allergies: NO Veg/Non-veg veg

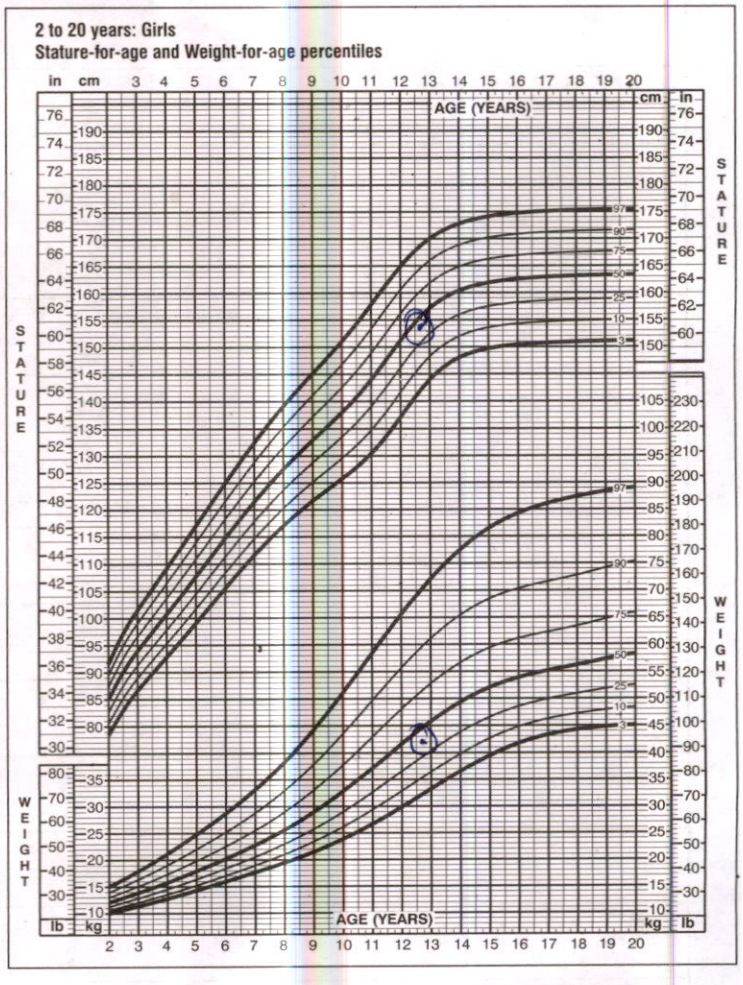
Diagnosis: Pain in abdomen ? Evaluation. R/o welsonia

Nutritional Intervention - ☐ Oral ☐ Enteral ☐ Parenteral

Patient's Signature:

GROWTH CHART (GIRLS)





Dietician's Name Dietician's Signature

Docu. No. : RCHBH / FRM / CLINICAL / 161

(P.T.O.)

Daily Notes:

22/7/26
10am child is stable. oral intake is good.
continue c normal diet — Nikitha.

22/7/26
10AM Child is stable Oral intake is Better
Continue c Normal diet. — Nikitha