

ACTIVITY RECORD FOR BILLING

Name : _____

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

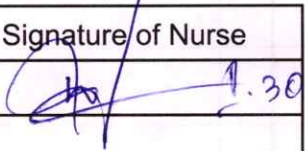
Date of Admission: _____ Time : _____ Discharge : _____ Time: _____

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

KOH-00308740 IP2-00056450
Baby Of K PRASHANTHI
30-05-2026 0 Y 0 M 4 D (M)
Dr. V VAMSI KRISHNA



WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
3/6/26	1.29pm	ER	40	 1.30pm.

Cross Consultation Visit

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



**PEDIATRIC IN-PATIENT
MEDICAL RECORD**

KOH-00308740 IP2-00056450
Baby Of K PRASHANTHI (M)
30-05-2026 0 Y 0 M 4 D
Dr. V VAMSI KRISHNA



Patient Name : Baby of K PRASHANTHI

Patient ID# : _____

Consultant : DR. VAMSI

Final Diagnosis : NNT

Pediatric Multiorgan History & Physical Examination

Name : Baby of K PRA SHANTHI Age/Sex 4 days

Informant Mother Reliability Fair

Chief Presenting Complaints & Duration (Chronologically):

yellowish discoloration of skin,
present.

History of present illness :

yellowish discoloration of skin present.

no cry
tone | good.
activity

accepting feeds well
passing urine/stool - (✓)

B +ve / o +ve.

B.wt - 3420.
T.wt - 3.30 kg
P.wt - 3196.
3.5% wt/loss

Pediatric Multiorgan History & Physical Examination

Anthropometry

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

Weight (kgs) 3.35kg (Centile _____)

On Examination :

Temperature : 98.1° F Pulse Rate: 136/min Description _____

B.P. _____ SPO2 97% at _____

Resp. rate and type of breathing : regular, N, feeble

Rash _____

Lymphadenopathy } NO.

Oedema : _____

Respiratory system :

Inspection (any s/o distress) : N

Air entry & breath sounds : BLUE A, NO added sounds

Any addes sounds : _____

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

Cardiovasclular System :

Inspection of procordium : N

Heart Sounds : S1 S2 (+)

Any murmur : _____

Relevant date from outside (Chest X-Ray, ECG, ECHO, Etc..) _____

Per Abdomen :

Inspection N

Palpation : soft, non tender

Auscultation : _____

Spine: _____ External Genitalia : _____

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

Pediatric Multiorgan History & Physical Examination

Central Nervous System :

Level of Consciousness : AVPU/GCS Score : _____

Cranial Nerves : _____

Motor System :

Nutrition : _____

Tone : _____ Power _____

Co-ordinator : _____

Posture : _____

Involuntary Movements : _____

Reflexes :



Afe level.

DTR

Superficials :

Plantars _____

Sensory System :

Bladder / Bowel : _____

Clinical Summary & Diagnostic :

NNT

Pediatric Multiorgan History & Physical Examination

Preventive aspects of the treatment :

Desired goals of the treatment :

Planned Labs :

TCS - 15.1.
SRR Tm - 8am.
Lactation consultation.

Planned Management :

- 1) Warmth care
- 2) DSPT of eyes & genitalia covered.
- 3) DBF flb burping 2nd hly
- 4) vitamin D3 drop 0.5ml OD
- 5) SRR Tm - 8am.
- 6) Lactation consultation.
- 7) Monitor vitals.

Noted by
Ujjwala 3/6/26

Please fill up the following details

1. Name of the Referring Doctor : _____
2. Name of the Referring Hospital : _____
(Including the name of City)
3. Contact number of the Referring Doctor : _____
(Preferring Mobile #)
4. Name of the doctor in Rainbow Team _____ on
whose name the patient is being referred

Doctor's Signature Name all Date 3/6/26 Time 1:00pm

KOH-00308740 IP2-00056450
 Baby Of K PRASHANTHI (M)
 30-05-2026 0 Y 0 M 4 D
 Dr. V VAMSI KRISHNA



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/6/26	S/B. N. Vamur	
9am	NMS	
	Euthermic	
Bare/O+ve	warm	
	accepting DBF well	
	ClT/A - good	Adm
	vitals stable	Nasum Case
	↓ DSP7	- The DPT
	C/W	
	R / ⊕	- Trace SBR
	P/A	
	Noted by Anjali	4/06/26 @ 10:38AM

NURSING ASSESSMENT SHEET IN EMERGENCY ROOM

Ref.No. : F/ER/NUR/

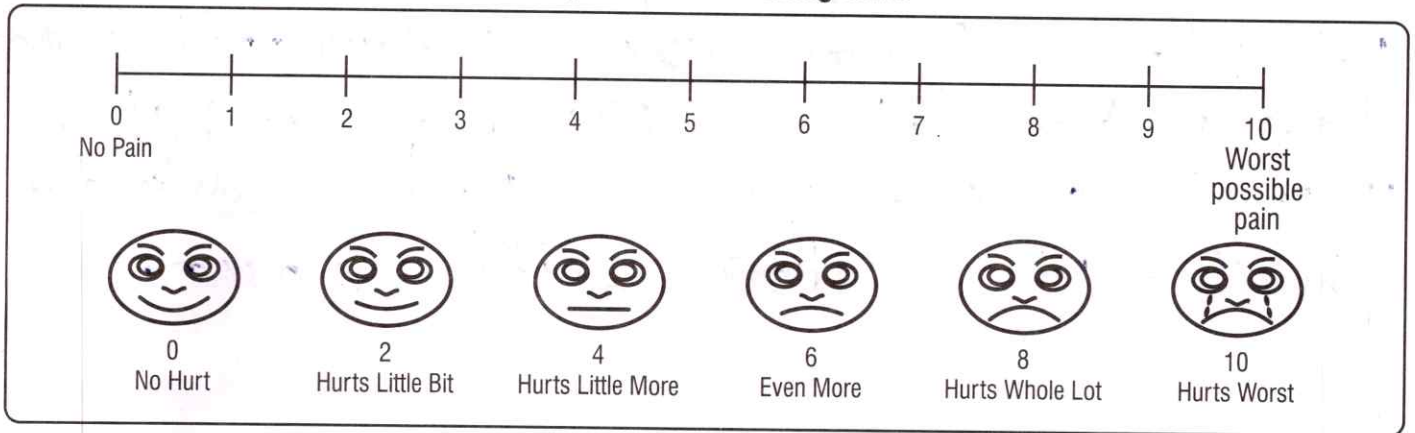
Name : KOH-00308740 IP2-00056450
Age : Baby Of K PRASHANTHI
30-05-2026 0 Y 0 M 4 D (M)] F
IP No.: Dr. V VAMSI KRISHNA
UHID : 

Date : 3/6/26 Time of arrival : 12:35 pm

VITALS : Temperature : 98.10F HR : 136b/m SP02 :

BP : - RR : 40br/m Height : Weight : 3.30 kg

PAIN ASSESSMENT - ABOVE 5 YEARS
Wong - Baker Pain Rating Scale



Do you have pain now : Yes No, If yes location of pain :

Pain Score :

Plan of action if score > 5 :

PAIN ASSESSMENT FOR CHILDREN < 5 YEARS AGE

CATEGORY	SCORING		
	0	1	2
Face	No particular expression or smile	Occasional grimace or frown withdraw disinterested	Frequent to constant quivering chin, clenched jaw
Legs	Normal position or relaxed	Uneasy, restless, tense	Kicking, or legs brawn up
Activity	Laying quietly normal position, moves easily	Squirming shifting back and forth tense	Arched, right or jerking
Cry	No cry (awake or asleep)	Moans or whimpers Occasional complaint	Crying steadily, screams of sobs, frequent complaints
Consolability	Content, relaxed	Reassured by occasional touching hugging or being talked to, distractible	Difficult to console or comfor


Investigation sent	Time	Result Collected	Result to be collected

Nursing Notes: Patient came to ER to do (yellowish discoloration skin & eyes). Doctor assess the child vitals are check & record it. @ TAB test done & its 15.1mg/dl as per op basis. Doctor advice for Phototherapy. Patient shifted to room.

DISCHARGED FROM EMERGENCY ROOM TO :

- Ward
- OT
- HOME
- DAMA
- Died
- PICU
- NICU
- MICU
- Labour Room

Nurse Signature: 

Nurse Name: 

Date: 3/6/26 Time: 12:50 pm

KOH-00308740 IP2-00056450
 Baby Of K PRASHANTHI
 30-05-2026 0 Y 0 M 4 D (M)
 Dr. V VAMSI KRISHNA



RESULT SHEET

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

BirthRight[™]
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

Date	4/6/26					
Time						
Hb						
PCV						
RBC						
WBC						
N/L						
Platelets						
CRP						
ESR						
PCT						
RBS						
Na						
K						
Cl						
Ca/Mg						
Phosphate						
Urea						
Creatinine						
ALP						
SGPT						
SGOT						
T.Bill/Conj	9.5 ^{0.92} 9.3					
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						



.Pulse Rate : Normal Rate by Age (beats/minute) Reference:PALS Guidelines, 2015

Age	Awake Rate	Sleeping Rate	
Neonate(<28days)	100-205	90-160	
Infant (1 month-1yr)	100-180	90-160	
Toddler (1-2yr)	98-140	80-120	
Preschool (3-5 yr)	80-120	65-100	
School -age (6-11yr)	75-118	58-90	
Adolescent (12-15yr)	60-100	50-90	

Respiratory Rate: Normal Respiratory Rate by Age (breaths/minute) Reference:PALS Guidelines, 2015

Age	Normal Respiratory Rate		
Infant (1 month-1yr)	30-53		
Toddler (1-2yr)	22-37		
Preschool (3-5 yr)	20-28		
School -age (6-11yr)	18-25		
Adolescent (12-15yr)	12-20		

Blood Pressure:Normal Blood Pressure by Age (mm/hg) Reference:PALS Guidelines, 2015

Age	Systolic Pressure	Diastolic Pressure	Systolic Hypo tension
Birth	39-59	16-76	<40-50
Birth	60-76	31-45	<50
Neonate(<28days)	67-84	35-53	<60
Infant (1 month-1yr)	72-104	37-56	<70
Toddler (1-2yr)	86-106	42-63	<70 + (age in years x 2)
Preschool (3-5 yr)	89-112	46-72	<70 + (age in years x 2)
School -age (6-11yr)	97-115	57-76	<70 + (age in years x 2)
Pre-adolescent (10-11y)	102-120	67-80	<90
Adolescent (12-15yr)	110-132	64-83	<90

Temperature :Normal Temperature Range by Method Reference: CPS Position Statement on Temperature Measurement in Pediatrics, 2015

Method	Normal Range (°C)	Normal Range (°F)
Rectal	36.6-38	97.8-100.4 °F
Ear	35.8-38	96.4-100.4 °F
Oral	35.5-37.5	95.9-99.5 °F
Axillary	36.5-37.5	97.7-99.5 °F

3/6/26



VITALS CHART

Date →	Time ↓	Temp	HR	RR	SPO2	Score	Type of Feed	Qty	Urine	Stool	Vomit
	7:00 am										
	8:00 am										
	9:00 am										
	10:00 am										
	11:00 am										
	12:00 pm	98.1°F	136b/m	40b/m	97%		DBM FF				
	1:00 pm								U-0	M-0	V-0
	2:00 pm						DBM+				
	3:00 pm	98.2°F	140	42	99%	9/10	Nonpro excell 30ml				
	4:00 pm								✓	✓	
	5:00 pm						DBM+ Napro 30ml				
	6:00 pm	98.3°F	142	40	100%						
	7:00 pm								U-1	M-1	V-0
	8:00 pm						Nonpro excell 30ml				
	9:00 pm								✓		
	10:00 pm	97.6°F	136	40	99%		DBM				
	11:00 pm										
	12:00 am						DBM				
	1:00 am								✓		
	2:00 am						DBM				
	3:00 am										
	4:00 am						DBM				
	5:00 am										
	6:00 am	98.2°F	140	40	100%		DBM		✓		
									U-2	M-1	V-0
									U-4	M-2	V-0
							Total				

Temperature : 97.5 to 99.5 °F
HR : 120 to 160 per minute
RR : 30 to 60 per minute
SPO2: 93-100%

Feeding Plan..... Nan-Pro

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Your Right to a Safe Delivery

Morning Shift

Clinical Diagnosis _____

Nursing Diagnosis _____

Plan of Care _____

Planned Investigations Procedures _____

Implementation _____

Handed Over by : Name & Signature

Received by : Name & Signature

Evening Shift

Clinical Diagnosis _____

Nursing Diagnosis _____

Plan of Care _____

Planned Investigations Procedures _____

Implementation _____

Handed Over by : Name & Signature

Received by : Name & Signature

Night Shift

Clinical Diagnosis _____

Nursing Diagnosis _____

Plan of Care _____

Planned Investigations Procedures _____

Implementation _____

Handed Over by : Name & Signature

Received by : Name & Signature

NA

NNJ

yellowish discoloration of the skin

- + Assess the baby condition
- + maintain I/O chart
- + provide DSPT

- + assessed the baby condition
- + maintained I/O chart
- + provided DSPT

Sunita

Aajali

NNJ

yellowish discoloration of skin and eyes

- * Assess the General condition of the patient.
- * Monitor vital signs and I/O chart.
- * Administer DSPT as per doctor order.

SBR - T/M - 8am.

- * Assessed the General condition of the patient
- * Monitored vitals and I/O chart.
- * Administer DSPT as per doctor order.

Aajali

Rooja

3/6/26 @ 2pm

4/6/26 @ 8pm