

ACTIVITY RECORD FOR BILLING

Name: aby S/O G. ANUSHA 3-06-2026 0 Y 0 M 0 D 5 H (M) R. JARJAPU KIREETI
 UHID No: IP-00060488 3-06-2026 0 Y 0 M 0 D 5 H (M) R. JARJAPU KIREETI
 Date of Admission: 3-06-2026 Time: 0 Y 0 M 0 D 5 H (M) Date of Discharge: 3-06-2026 Time: 0 Y 0 M 0 D 5 H (M)
 Room / Bed No: 3-06-2026 Ward: 0 Y 0 M 0 D 5 H (M) Suggested Billable bed type: R. JARJAPU KIREETI

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1.	Dr. MOHD ABDUL KHAIR	26/6/26	3094812	<u>Smily</u>
2.	Dr. MURTAZA Iqbal	22/6/26	309585	<u>Dr</u>
3.	Cross check done by Prasanna on 28/6/26			
4.	Dr. Mohd Abdul Wahid	29/06/26	3095706	<u>E</u>
5.				
6.				
7.				
8.				
9.				
10.				

MEDICAL EQUIPMENT (WARD & ICU)

[illegible]

INVESTIGATIONS

Date	Investigations	Order No.	Sign
26/6	CBP, B/G	26021523	Irravani
26/6	WBG, RBS	26021524	
26/6	X-ray	26010178	
26/6	B/C/S	26021525	
26/6	RBS	26021542	
26/6	NSG.	26010215	Shaf
26/6	RBS	26021618	Shaf
26/6	RBS.		
27/6	RBS	26021661	Shaf
27/6	RBS -	26021662	
	DRP.		
27/6/26	CBP, CRP, S.E, SBR, Calcium, urea, creatinine.	26021657	Shaf
27/6	2DCHG	26010223	Shaf
27/6	RBS	26021713	
	RBS	26021748	
28/6	RBS	26021768	Shaf
28/6	RBS	26021767	
28/6	RBS	26021800	
	Cross check done by Prasanna on 28/6/26		
29/6	S/G, SBR	26021819	✓
	RBS	26021820	✓

cross check by chitra 29/6/26

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
26/6	Dr. pmt	(1)	3094678	[Signature]
27/6	IV placement	(1)	3095304	[Signature]
28/6	IV Placement	(1)	3095516	[Signature]
Cross check done by Prasanna on 28/6/20				

ANY OTHER INFORMATION

Date :

Time :

Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

IP-00060488

aby B/O G.ANUSHA

3-06-2026

0Y0M0D10H (M)

r. JARJAPU KIREETI

Age :



0. :

[illegible]



RBS

NEBULISATION CHART

Date	Time	Drug	Nurse	Parents Signature
26/6	00.00	RBS - 1 AM - 1 AM RBS - 82 mg/dl	Sh	26021524
	1.00	7 AM - RBS - 98 mg/dl	Sh	26021542
	2.00	1 PM - RBS - 120 mg/dl	Sh	
	3.00	7 PM - RBS - 118 mg/dl	Sh	26021618
27/6/26	4.00	1 AM - RBS - 101 mg/dl	Sh	26021661
27/6/26	5.00	7 AM - RBS - 91 mg/dl	Sh	26021662
27/6/26	6.00	1 PM RBS 90 mg/dl	Sh	26021713
	7.00	7 PM - RBS - 126 mg/dl	Sh	26021748
28/6/26	8.00	1 AM - RBS - 101 mg/dl	Sh	26021768
28/6/26	9.00	7 AM - RBS - 90 mg/dl	Sh	26021767
28/6/26	10.00	7 PM RBS - 113 mg/dl	Akhila	26021800
	11.00	Cross check done by Prasanna on 28/6/26		
29/6	12.00	7 AM RBS - 74 mg/dl	Sh	26021820
29/6	13.00	7 PM RBS - 115 mg/dl		26021912
30/6	14.00	7 AM RBS - 84 mg/dl	Shankar	26021942
1/7/26	15.00	7 AM RBS - 93 mg/dl	Rajeshwari	26022039
2/7/26	16.00	7 AM RBS - 99 mg/dl	Chitra	26022136
	17.00	Cross check done by Chitra on 2/7/26		
3/7/26	18.00	7 AM RBS - 104	Rekha	26022267
2/7/26	19.00	7 AM RBS - 76	Rekha	26022346
	20.00			
	21.00	Cross checking Done by Maia on 3/7/26 11 AM		
	22.00			
	23.00			

ADMISSION SHEET
Registration Details :

Admission No : IP-00060488

Admit Date : 26-Jun-2026

Admit Time : 01:23 AM **UHID** : VIH-00206261

Patient Details :
Patient Name : Baby B/O G.ANUSHA

Age : 0 D

Guardian : Mr G.BHANU

DOB : 26-06-2026 12:32 PM

Gender : Male

Religion :

Occupation :

Martial Status :

Address (H) : OLAXMAPUR,MEDCHAL,MALKAGIRI Shamirpet
Hyderabad Telangana INDIA 500078

Phone No : 9573380866

E-mail : NA@GMAIL.COM

Admission Details :
Bed Type : NICU

Bed No : NICU 249

Ward Name : N 2F-NICU I

Room No : NICU 249

Admission Type : First Visit

Contact Details :
Name : Mr G.BHANU

Relationship : Father

Contact Address : OLAXMAPUR,MEDCHAL,MALKAGIRI
Shamirpet Hyderabad Telangana INDIA 500078

Phone No : 9573380866 / 9848217986


Signature
Doctor Details :
Doctor Name : Dr. JARJAPU KIREETI

Specialisation : NICU

Referral Doctor : DR.MADHUMITA ANIRUDDHA GITAY

Phone No :

Co-Consultant :

Payment Details :
Payment Mode : Cash

Deposit Amount : 0.00

Payor Name : SELFPAY



NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Mrs G. Anusha Age : 20 yrs Father's Name : _____ Age : _____
 Date of Birth : 13-5-2006 Date of Admission : 25/6/26 UHID No.: _____
 NICU Consultant : Dr. Kireeti Sir Referring Consultant : Dr. Madhumita
 Transferring Unit : ☐ OT ☒ Labour Room ☐ ER ☐ Ward
 Transported ? ☐ Yes ☒ No - If yes : ☐ Long (> 30 kms) ☐ Short (< 30 kms)

BIRTH INFORMATION

Name : B/O Anusha Mother's Blood Group : AB Positive
 Gender : ☒ M ☐ F Blood Group : _____ Birth Weight (gms) : 1.274 Kg Length (cms) : _____
 Date of Birth : 26/6/26 Time of Birth : 12:32 AM OFC (cms) : _____
 Place of Birth : RCH, VKP. Estimated Gesth Age : 25+6 weeks

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 20 yrs Ht : 157 Wt : 50 BMI : _____ Married Life : 1 1/2 yrs LMP : 18/10/25 EDD : 24/7/26
 Conception : Spontaneous or with Rx : Spn.
 Booked at what GA : unbooked to RCH, Previous - Lincam Hospital Gujarat
 Last Scans Details : (25/6/26) => SLIUS, (29th week), cephalic, PL- Post, US,
 TT Immunization and Iron / Folic Acid : given

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 Resistance / ADEF / REDF / _____)

Redistribution in MCA) / Ductus Venosus : _____

AFI : 4-5 cm (Sev olig)

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 Hypothyroidism : 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 : _____



PAST OBSTETRIC HISTORY

..... 2 P: 0 A: 1 L: 0

Sl. No.	Age	GA wks	B. W	Gender	Significant	Details
G1	12 weeks / 5m		miscarriage		June 2025 / Sirekha Adip Kompally.	
G2	PP, Spontaneous		Conception.			

PERINATAL HISTORY

Treating Obstetrician : Dr. Madhumita Hospital : RCH, VKP ☒ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig)

Second stage (> 2 hours after dilation)

LSCS : ☐ Elective ☐ Emergency Indication :

Specify the reason :

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☒ Normal ☐ Suspicious ☐ Pathological

MSL :

Resuscitation : ☐ 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

TOTAL

1 Minute	5 Minutes	10 Minutes
1	2	2
2	2	2
2	2	2
1	2	2
2	2	2
8/10	10/10	10/10

Resuscitation

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

Snappee II 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)		
Birth Weight	> = 1kg (0)	750 - 999 (10)	< 750 (17)	
SGA	> 3rd percentile (0)	< 3rd (12)		

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :



Baby was delivered via NVD in Vertex presentation
with single loop of cord around Neck.

Moderate PT / 3576 wgs / 1.274 Kg / SGA / 1m / male / NVD / CIAB

Baby cried immediately after birth.

HR 710/min, Baby was pink.

OC done for 1 min.

Baby Received in prewarmed
linen cloth.

Investigation details in previous Hospital :

umbilical cord clamped & cut
under aseptic conditions
by Nt K green.

Feeding History :

Past History :

Family History :

Socio Economic History :



GENERAL EXAMINATION ON ADMISSION

General Disposition :

C/1/A (N)

VITALS : Temperature : Euthermic HR : 168/min RR : 50/min NIBP : — CFT : Left

Color of the extremities : Pink

Jaundice : — Pallor : — SpO2 : 96% RA

Anthropometry : Birth Weight : 1.274 Kg Length : — HC : — Present Weight : 1.274 Kg

Ponderal Index : — AGA : X SGA : ✓ LGA : X

HEAD TO TOE EXAMINATION

HEAD :
Fontanelles :
Sutures :
Shape / Moulding :
Edema / Bruising :
Size - (H.C.) :

(N)

Facies :
(Any Facial
Dysmorphism)

— No facial dysmorphism

NECK and
CLAVICLES :

Range of Motion :
Asymmetry :
Masses :

(N)

EYES :

Symmetry :
Red Reflex :
Discharge :

→ not done

EARS, NOSE
MOUTH and
THROAT :

Ear set / Shape :
Periauricular Pits / Tags :
Nasal shape / Patency :
Palate :
Gums :
Lips :
Tongue :

No cleft lip (N) palate



THORAX and BREASTS : Shape of Thorax : /N
 Position of Nipples and Number : /N

ABDOMEN and UMBILICUS : Shape :
 Organomegaly :
 Bowel Sounds :
 Umbilical Stump : → 2A, IV.
 Discharge :

GENITILIA : Labia / Hymen :
 Testicles/penis : → B/L testis palpable (Hypospadias ⊕),
 Anus :

HERNIAL ORIFICES

TRUNK and SPINE : /N

SKIN LESIONS :

EXTREMITIES : Fingers / Toes : /N
 Deformities : /N
 Hip Joint Examination :
 Arms / Legs : /N
 Mobility : /N

SYSTEMIC EXAMINATION

Respiratory System :

Breathing Pattern : ☒ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress : RR : 50/min SCR / ICR / See - Saw breathing : —

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

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

Settings : —

SpO₂ : 96% RA Auscultation : BAE ⊕ Breath Sounds : chest clear Added Sounds : —

Cardiovascular System :

HR : 120/min BP : — Precordial Activity : —

Femoral Pulses : / well felt Murmurs : / ⊕

Other Peripheral Pulses : — Signs of Cardiac Failure : —

Abdomen :

Shape : — Hernia orifice : — ⊕

Palpation : — Anal Patency : — ⊕

Palpable masses : — Umbilical Cord : — 2A, IV

Abdominal girth : — First urine passed : — ⊕

Meconium passed : — ⊕



Il functions (Sensorium) :

State of wakefulness :

Prechtl Score :

Nerves : C/TIA @.

Motor System :

Passive Tone :

Active Tone :

Neonatal Reflexes :

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

Moro's : R/L Complete symmetrical DTR :

ATNR : Skull and Spine :

Any Congenital Anomalies : NO Hypoplasia

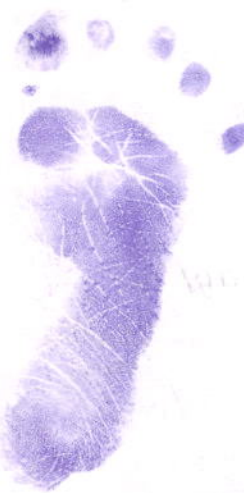
Diagnosis : MDR / 35+6 wks / 1.274 Kg / SGA / 1m / NYD / CIAB.

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature : D. Vishal

Name : D. Vishal

Date & Time : 26/6/26 @ 1.30 AM

Consultant :

Signature : J. Kireet

Name : Kireet

Date & Time : 26/6/26



☐ Friend

Will patient require transportation arrangements to go home: ☐ Yes ☐ No ☐ NA

Will Physiotherapy require at home: ☐ Yes ☐ No ☐ NA

Is home medical equipment anticipated: ☐ Yes ☐ No ☐ NA

Is home oxygen therapy anticipated: ☐ Yes ☐ No ☐ NA

Breastfeeding ☐ Yes ☐ No ☐ NA

Formula Feed ☐ Yes ☐ No ☐ NA

Are dressing needs at home anticipated: ☐ Yes ☐ No ☐ NA

Any other needs anticipated: ☐ Yes ☐ No If Yes Specify

Feeding Plan at the time of shifting :

Screenings done during NICU Stay :

NSG :

Hearing Screen :

ROP :

TFT :

NP2 :

Discharge Details:

Neonatal Condition at Discharge:



☐ Breastfeeding Exclusively

☐ Breastfeeding and Formula Feeding

☐ Formula Feeding

Vitamin K given: ☐ Yes ☐ No

Vaccinations given ☐ BCG ☐ Hepatitis B ☐ Others:

Neonatal Screen Taken: ☐ Yes ☐ No, parents advised to have Neonatal Screen at National screening

program center on:/...../.....

Hearing Test: ☐ Yes ☐ No

Jaundice: ☐ NIL ☐ Slight ☐ Moderate

Passed Urine: ☐ Yes ☐ No

Passed Meconium: ☐ Yes ☐ No

Weight at discharge:

Appointment was given for follow-up at OPD: ☐ Yes ☐ No

Date of Discharge:/...../.....

Discharge to ☐ Home ☐ Other:

Against Medical Advice: ☐ Yes ☐ No

Referred to another hospital: ☐ Yes ☐ No

Discharge Medications: ☐ Yes ☐ No

Details:

Final Diagnosis:

TV- 80ml/Kg/day -10% Dexcon

CXR, ABG, Blood group, GFR study (Prepared),
Blood culture

Aminoverin - 2g/Kg/day.

Monitor NPT at 24 hrs of life

Monitor Vitals.

Doctor Signature:

Doctor Name:

Date & Time:

Noted by
Sr. Sravani

26/6/26 @ 1 AM

VIH-00206281

IP-00060488

Baby B/O G.ANUSHA

28-06-2026

0 Y 0 M 0 D 10 H (M)

Dr. JARJAPU KIREETI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/6/26 8 AM	FHOL/DOL1 / MPS (35+6wks) /- 1.274Ks / SGA / IUGR / MVD / CARS. E Hypoglycemia Issues - ANA	
	T-Wt - 1.274Ks	Normothermic
	Mo - 30/20	CVS - SPS @
	U/O 1ml/kg/hr	CNI - T/APR AGA
	Mo - Not passed	PS - BAEC @
	APBS. 98mg/dl	PA 1 - 6H, NT
	<u>Plan</u>	
	Target SpO ₂ 90-96%, mAP >35.	
	GTOS 6th hrly Prefed	
	CAR/ABH SOS.	
	TV - 80ml/Kg/day. - 10% 2008. 10x hour	
	2g/Kg/day Aminoacids	
	Plan to start feeds.	
	Monitor Vitals.	
	NPI 1/2 → 7/2	
	Inform SOS	
	Plan - 2me 92H feeds. (80ml/200ml) (Plan 28H)	
	(Constant)	
	→ NSG	
	→ caffeine - (adding dose)	
	→ USG abdomen - Day 4	

Noted by
shirley

J. Kireeti
(P.T.O.)

28/6/26

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<u>Perineal Inspect</u> = 2.1. (symmetrical WGR). depth - 39 cm. HC - 29 cm. CC -	
	<u>CAN scan</u>	
	Head - 3 Cheek - 2. neck & chin - 2 arm & elbow - 2. legs - 2. chest - 3 Buttocks - 2 Back - 2 Abdomen - 3 <u>21</u>	DE - sacral dimple (1.5 cm from anal orifice). no assoc. skin markers.
	<u>Plan</u> USG abdomen day 4 + spine	
Am	easy ven stable CIT/A good CBT C dec PV (N)	
	<u>Adv</u> CST	
		Noted by Shirley



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/10/22 5PM	⇒ At ⇒ Baby received ⇒ 2D Echo - NO PDA ⇒ Tokvaug field w/N ⇒ Anal stimulation done → Skool Pass ✓ CRA } good TV } good CRT - C3SE	ADD - TV - 100N/kg/day - 3ml Q2A (↑ 1ml Q5H) - USG Abdomen Monday - RR C60 - do EEG
(handwritten mark)		Noted by Shirley



(9)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/6/26 8 am	SG 604/02/MPR (35+6) / 36 ⁺ PMA 1.274/27/SGA/Sum 2042 NVD/CABJ/Hypospadias.	
	<u>Resus:</u> nil	
	WT = 1.227 (↓ 20g).	Normothermic
	QV = 123/90	on RA
	V/O = 3cc/kg/day.	Crust BAE ⊕
	S/O = 3 times.	CNI - TIAIR AGA
	CABJ = 90.	CUS - PIS ⊕
		DIA - 1st 85 ⊕
<u>note</u>	target SpO ₂ 790 MAP > 26	
	IV - 120 cc/kg/day → 2g IV Amivarin	
	Or feeds - bleached sm ↑ 1ml 1st	
	Caffeine	Q4H
	Ure ABG - Monday	
	CABJ - 1st 1st feed.	
	trace S/Us.	
	→ SBR / S-E / ITA	
Dr. Shrin	noted by Rekha 28/6/26 @ 12.28 PM.	
		J. Creet, Kireeti 28/6/26

IP-00060488

aby B/O G.ANUSHA

3-06-2026 0 Y 0 M 0 D 10 H (M)

r. JARJAPU KIREETI



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Hospital**
It takes a lot to treat the little.



BirthRight™
BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

Date & Time	Progress Notes	Doctor's Order
28/6/26 pm	Baby km. tolerates feeds well Passing urine & stool Regularly. Child Active	<u>All</u> - SE, SOB, Hm, UR, ABD, - CRT
		By Vishal Note by Akhile 28/6/26 @ 7 PM



4

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/6/26 7AM	Day 4 / MPS (35+6 wks) → 36+2 wks PMA / 1.274 Kg / SGA / Symmetric IUGR NVD / CIAH / Hypopandasis / Sacral dimple - / NPHB.	
	Issues - Nil.	
	Wt - 1.18 (240gms).	Normothermic.
	2/0 - 145/115	SV @ RA
	U/O - 254 ml / 15 hr	Chest BAE ⊕.
	d/o - 8 hr	CNS - T/A/R AGA
	GrBS - 74 mg/dL	CNV - SBR ⊕.
		P/A - Soft BS ⊕.
	<u>Advice</u>	
	Target SpO ₂ >90, MAP >36.	
	TV - 140 ml / Kg / day → 2g / Kg / day / Amniocentesis.	
	CA feeds - 11ml x 2hrly (71ml x 4 th hrly). (T.F = 15ml x 2hrly).	
	Caffeine.	
	★ USG Abdomen today.	
	GrBS - BD (Prepnd).	
	Trace SBR, SE.	
	Trace Blood CS.	
	- DSPT	
	→ Add Hmf sachets - lactodex Hmf	
	→ Head endotracheal	
	Rate by	J. Kireet Kireet
	Akhila	29/6/26
	29/6/26	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/6/26 9AM	Day 5 / mPR (35 to 36 wks) → 36 to 37 wks PMA / 1.294 kg / 54A / Symmetrical IUGR / NVD / CIA / Hypospadias / sacral dimple / NVD.	
	Issues - Nil.	
	Twt - 1.24 kg (160 gms)	Normal Muc
	S/O - 178 / 120 ml	SV @ RA
	U/O - 3.8 ml / kg / hr.	Chst DVT @.
	S/O - 5 times	CNS - TIA / R NVD
	CRP - 84 mg / dl.	CNS S.A @.
		P/A - soft, B @.
	Adm: -	
	Target SPO ₂ > 90 / MAP > 36.	
	TV 150 ml / kg / day	
	CG feeds - 15 ml x 7 hrs.	
	Caffeine	
	Vib Abd - (N).	
	CRP - (Refed).	
	Send SBR after rounds.	Send SBR
	Lactox Hms	TFT
	Head and elevation	now
	Vitamin B drops	
	→ Caffeine ^{clayet} oral	
	→ put clothes	
	→ KMC	

J. Kireeti
 Kireeti

30/6/26 (P.T.O)

Noted by
 umey
 30/6/26

IP-00060488

26-06-2026

0Y0M2D

(M)

Dr. JARJAPU KIREETI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
80/6/76 9pm	Baby seen. tolerably feeds well oral caffeine BBK Vit D3 drops. Passing urine & stool.	 Dr. Shah,

VIH-00206261

IP-00060488

Baby B/O G.ANUSHA

26-06-2026

0 Y 0 M 2 D

(M)

Dr. JARJAPU KIREETI



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/26 9am	Day 6 / MPT (35+6wks) → 36+4wks pMA / 1.274Kgs / 54A / Symmetry C IVGR / NVD / CIAB / Hypospadias / Sacral dimple / NNAB.	
	Issues:- nil.	
	T-Wt = 1.27 (↑ 30gms)	Normothermic.
	U/O - 180/129.	SV @ RA
	U/O 4-2ml/Kg/hr.	Chest BAC@.
	S/O 4-6ml/6times.	CNS - T/A/R AUA
	GRPS: 93mg/dL	CUS - S, S ⊕.
		P/A - Soft, BS ⊕.
	<u>Advice:-</u>	
	Target SpO ₂ ≥ 90, MAP ≥ 36.	
	TV - 180 ml/Kg/day.	
	On feeds - 16ml x 2hrly.	
	oral Caffeine	
	GRD 10D	
	Lactdex HMF	
	Vit B12 drops, start Zincovit.	
	Note by Dr. J. P. K. S. 17/26 @ 11:30 PM	
	Dr. Samuel K. 17/26 @ 1:30 PM	
	Dr. J. P. K. S. 17/26 @ 1:30 PM	

VIH-00206261

Baby B/O G. ANUSHA

IP-00060488

26-06-2026

0 Y 0 M 2 D

(M)

Dr. JARJAPU KIREETI



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...GRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/7/26 9 AM	D7 / MPT (35 + 6 wks) → 36 + 5 wks PMAF 1.274 kg / SGA Symmetric IUGR / NVD / CMAF hypoplasia / sacral dimple / NAIH issues - Excessive crying Diaper rash (+)	
	Wt - 1.30 kg (↑ 30 gm) SpO - 100% 12s ml U/O - 4 cef / 10 ml SpO - 5 min. GRBs -	O/E - Normochemic on RA C/T/A - Good Ces - SIS (+) R/S - RAE (+) D/A - 10p Diaper rash (+)
	<u>Plan</u> - Target SpO > 90 - ref - Target MAP > 36 - T_v - 160 cef / day - OG feeds - 17ml 17ml q 4h (T₀ oral feeds) - Oral caffeine - lacto dex HMF - vit D₃ drops - add ascorbit - SpO charting, vitals monitoring	
	Noted by	J. Kireeti

IP-00060488

26-06-2026

0Y0M3D

(M)

Dr. JARJAPU KIREETI



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Date & Time	Progress Notes	Doctor's Order
9/28/20 6PM	tolerating feeds well - oral Passing loose stool Regularly. Child Active Vitality stable Abdomen soft	D-Usual

VIH-00206261 IP-00060488

Baby B/O G.ANUSHA

26-06-2026 0 Y 0 M 3 D

Dr. JARJAPU KIREETI



(M)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/7/26 6 AM	D&I MPT (35+6 wks) → 36+6 wks PMA / 1.27 kg / 50 cm synclitic IUGR / NVD / CTAB / hydrops fetalis / serial dimple / NVD	
	ISSUES: none	
	T.Wt - 1.331 kg (↑ 30g)	o/e - Normoethermia
	TLO - 288 / 220 ml	on RL
	U/O - 3.8 cc/kg/day	CTA - Good
	S/O - 56 ml	CUS - S.S. ⊕
	CRIB: 109 mg/dL	RLS - BAC ⊕
		PA - SOFT
		Diaper rock ⊕
	T/len:	
	- Target SpO ₂ → 90%	
	- Target MAP > 36	
	- IV - 140 cc/kg/day	
	oral demand feeds:	
	- oral coffee	
	- Lachodex BPR	
	- vit D ₃ drops	
	- Zincovit	
	- TLO charting, vitals monitoring	
	→ Involve parents in feeding	
	→ KMC	
	→ Stop Ceftriaxone	
		Noted by Jherly 3/7/26



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
4/7/26 8 AM	Day 9 / MPT (35+6wks) → 37wks PMA / 1.274Ks / SGA / Symmetric IUGR NVD / CIAB / Hypospadias / Sacral dimple / NNTB.	
	Issues:- nil	
	Wt - 1.37K (1409ms)	Normothermic.
	I/O - 330/102	SV @ RA.
	U/O - 3.1ml/kg/h	C/T/A - good
	S/O - 8 times.	Chest - BACD.
	GRBs - 76mg/dL	CNS - S/S ⊕.
		P/A - soft
	<u>Advice:-</u>	
	Target SpO ₂ > 90%, MAP > 37	
	IV - 100 ml/Ks/day.	
	oral demand feeds.	
	oral Caffeine.	
	Lactodex HMF	
	MT D₃ drops , Zmout drops.	
	KMC.	
	Shift to Room	
	No charting, Vitals monitoring	
	- KMC, DOR, BLS training	
	→ Cribcare.	
Dr. J. Kireeti	Noted by S. Pandey 4/7/26	J. Kireeti Kireeti 4/7/26



NURSES ASSESSMENT CHART

I.P. No

Date: 01/07/26 Diagnosis: Weight: Chart No.: 7

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7	
COLOUR CODE	200																									
	210																									
RED - PULSE	200																									
BLACK - RESP	105	190	160	167	140	144	124	118	139	124	175	159	135	126	125	184	148	152	131	131	134	156	168	140	187	199
GREEN - TEMP	104	180																								
BLUE - NIBP	103	170																								
	102	160																								
	101	150	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	
A- ALERT	100	140																								
V-VOICE	99	130																								
P-PAIN	98	120																								
U-UNRESPONSIVE	97	110	56	46	48	64	53	64	59	54	44	44	52	46	39	44	43	20	16	58	74	30	71	80	41	38
	96	100																								
VERBAL	95	90																								
5-ORIENTED	80																									
4-CONFUSED	70																									
3-IN APPROPRIATE WORDS	60																									
2-INCOMPREHENSIBLE SOUND	50																									
1-NONE	40																									
	35	81	61	66	62	93	81	65	70	99	92	80	80	40	85	63	71	43	75	71	71	71	65	66		
MOTOR	30	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
6-OBEYS	28																									
5-LOCALISES PAIN	26	62	63	55	32	60	62	59	58	76	76	64	42	58	62	54	55	59	62	52	50	52	53	54		
4-WITHDRAWS	24	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	
3-FLECTION	22																									
2-EXTENSION	20	93	45	50	45	54	52	39	49	64	67	55	57	51	53	49	50	45	56	21	39	41	50	42		
1-NONE	18																									
	16																									
	14																									
	12																									
	10																									
O2																										
SPO2		99	98	98	96	93	98	99	97	99	97	97	99	95	90	99	96	95	96	99	99	98	97	97	100	
RBS		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
SUCTION		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
PHYSIOTHERAPY		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AVPU		A	D	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	

Signature of the Nurse :

Morning Shift :

Evening Shift : Moheswari

Night Shift : Rekha

11/7/26
 @ 8:00

21/7/26
 @

Ref No. F/INPR/19

Patient Name :

I.P. No

Date : 21/7/26 Diagnosis : PT. 35+6 weeks. Weight : 1.30kg. Chart No. : E

NURSES ASSESSMENT CHART

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Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210	73	145	131	140	141	141	140	143	202	132	151	125	129	142	130	134	132	141	124	173	152	138	136	147
RED - PULSE	200																								
BLACK - RESP	105																								
GREEN - TEMP	104																								
BLUE - NIBP	103																								
	102																								
	101																								
A- ALERT	100																								
V-VOICE	99																								
P-PAIN	98																								
U-UNRESPONSIVE	97																								
	96																								
VERBAL	95																								
5-ORIENTED	80																								
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60																								
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40																								
	35																								
MOTOR	30																								
6-OBEYS	28																								
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24																								
3-FLECTION	22																								
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
O2																									
SPO2																									
RBS																									
SUCTION																									
PHYSIOTHERAPY																									
AVPU																									

Signature of the Nurse : Shuly

Morning Shift : 21/7/26 @ 2pm.

Evening Shift : 21/7/26 @ 8PM

Night Shift : 21/7/26 @ 10pm.

NURSES ASSESSMENT CHART

Date : 31/7/26 Diagnosis : 35+6w Weight : 1.83kg Chart No. : 9

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210																								
RED - PULSE	200	135	144	137	147	145	161	158	135	149	146	165	140	137	145	131	140	142	155	146	153	143	132	151	140
BLACK - RESP	105	190																							
GREEN - TEMP	104	180																							
BLUE - NIBP	103	170																							
	102	160																							
	101	150																							
A- ALERT	100	140																							
V-VOICE	99	130	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6	98.6
P-PAIN	98	120																							
U-UNRESPONSIVE	97	110																							
	96	100																							
VERBAL	95	90																							
5-ORIENTED	80	65	85	82	39	57	55	45	59	30	31	65	55	62	47	68	35	48	37	40	57	35	48	59	62
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60																								
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40		63	66	63	75	58	56	60	46	74	74	64	71	70	65	69	74	74	66	71	81	70	63	74
	35																								
MOTOR	30																								
6-OBEYS	28		50	47	46	66	52	52	51	50	58	59	50	66	53	53	52	59	56	51	51	60	50	44	53
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24																								
3-FLECTION	22		44	35	36	60	40	49	49	41	50	50	43	55	44	47	44	51	47	43	40	47	40	35	40
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
O2																									
SPO2		95	94	94	94	100	95	97	95	94	95	99	97	99	95	97	99	99	100	98	100	99	100	96	96
RBS		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
SUCTION		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
PHYSIOTHERAPY		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AVPU		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A

Signature of the Nurse : Sherry

Morning Shift : Sy
 31/7/26
 @ 2pm

Evening Shift : Maheswar
 31/7/26
 @ 8pm

Night Shift : Pooja
 31/7/26
 @ 2AM

NURSES ASSESSMENT CHART

Date: 4/7/26 Diagnosis: 35/6 weeks Weight: 1.37 Chart No.: 10

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210																								
RED - PULSE	200	135	129	130	151	138	147																		
BLACK - RESP	105																								
GREEN - TEMP	104																								
BLUE - NIBP	103																								
	102																								
	101																								
A- ALERT	100																								
V-VOICE	99																								
P-PAIN	98																								
U-UNRESPONSIVE	97																								
	96																								
VERBAL	95																								
5-ORIENTED	80																								
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60																								
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40																								
	35																								
MOTOR	30																								
6-OBEYS	28																								
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24																								
3-FLECTION	22																								
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
O2																									
SPO2																									
RBS																									
SUCTION																									
PHYSIOTHERAPY																									
AVPU																									

Signature of the Nurse: _____

Morning Shift: _____
 Evening Shift: _____
 Night Shift: _____

Signature of the Nurse: _____

Signature of the Nurse: _____



FLUID CHART

Sheet No. : 16

01/07/26

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

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
	08:00 am	EBM			25 ml					10 ml	0	Akhil 11/12/26 @ 2 PM
	09:00 am										0	
	10:00 am	EBM			15 ml					10 ml	0	
	11:00 am										0	
	12:00 pm	EBM			15 ml					10 ml	0	
	01:00 pm										0	
Total Intake : 46 ml						Total Output : 40 ml						
	02:00 pm	EBM			15 ml					10 ml	0	Akhil 11/12/26 @ 8 PM
	03:00 pm										0	
	04:00 pm	EBM			16 ml					10 ml	0	
	05:00 pm										0	
	06:00 pm	EBM			16 ml						0	
	07:00 pm										0	
Total Intake : 48 ml						Total Output : 20 ml						
	08:00 pm	EBM			16 ml					20 ml	0	Akhil 11/12/26 @ 8 AM
	09:00 pm										0	
	10:00 pm	EBM			16 ml					10 ml	0	
	11:00 pm										0	
	12:00 am	EBM			16 ml						0	
	01:00 am										0	
Total Intake : 48 ml						Total Output : 30 ml						
	02:00 am	EBM			16 ml					15 ml	0	Akhil 11/12/26 @ 11 AM
	03:00 am										0	
	04:00 am	EBM			16 ml					10 ml	0	
	05:00 am										0	
	06:00 am	EBM			16 ml					10 ml	0	
	07:00 am										0	
Total Intake : 48 ml = 190 ml						Total Output : 35 ml = 125 ml						
Total 24 hrs. Intake		146.1 cc/kg/day										
Total 24 hrs. Output		4.0 cc/kg/day										

FLUID CHART

Sheet No. : 2

21/7/26.

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

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	NG	Diarrhoea	Vomit	Drainage	Urine			
2/7	08:00 am	EBM			16ml				15ml			
	09:00 am											
	10:00 am	EBM	25ml		17ml							
	11:00 am					✓			10ml			
	12:00 pm	EBM	25ml									
	01:00 pm											
Total Intake : 58 ml.			Total Output : 25 ml.									
	02:00 pm	EBM	25ml									
	03:00 pm											
	04:00 pm	EBM	28ml			✓			15ml			
	05:00 pm											
	06:00 pm	EBM	25ml			✓			15ml			
	07:00 pm											
Total Intake : 78 ml			Total Output : 30 ml									
	08:00 pm	EBM	25ml						10ml			
	09:00 pm											
	10:00 pm	EBM	20ml			✓			12ml			
	11:00 pm											
	12:00 am	EBM	25ml			✓			10ml			
	01:00 am											
Total Intake : 40 ml.			Total Output : 32									
	02:00 am	EBM	30ml						10ml			
	03:00 am											
	04:00 am	EBM	25ml						15ml			
	05:00 am											
	06:00 am	EBM	25ml						10ml			
	07:00 am											
Total Intake : 288			Total Output : 35 2/22ml									

Total 24 hrs. Intake

216.5 cc/kg/day

Total 24 hrs. Output

3.2 cc/kg/day



FLUID CHART

Sheet No. : 8

3/7/26

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	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
<u>3/7/26</u>	08:00 am	EBM	35ml				✓			15ml	0	shmy 3/7/26 @ 2pm
	09:00 am										0	
	10:00 am	EBM	25ml								0	
	11:00 am						✓			10ml	0	
	12:00 pm										0	
	01:00 pm	EBM	30ml								0	
Total Intake :			60 ml.			Total Output : 25 ml.						
	02:00 pm										0	shmy 3/7/26 @ 2pm
	03:00 pm	EBM	30 ml				✓			15ml	0	
	04:00 pm										0	
	05:00 pm	EBM	35 ml				✓			10ml	0	
	06:00 pm										0	
	07:00 pm	EBM	30ml								0	
Total Intake :			95 ml			Total Output : 25						
	08:00 pm						✓			15		shmy 3/7/26 @ 8pm
	09:00 pm	EBM	25ml								0	
	10:00 pm											
	11:00 pm	EBM	25				✓			10		
	12:00 am											
	01:00 am	EBM	30									
Total Intake :			80 ml			Total Output : 25						
	02:00 am											shmy 3/7/26 @ 8pm
	03:00 am	EBM	25ml				✓			10ml		
	04:00 am											
	05:00 am	EBM	30ml							15ml		
	06:00 am						✓					
	07:00 am	EBM	20ml									
Total Intake :			330 ml			Total Output : 27 102						

Total 24 hrs. Intake

240.8 cckg/day

Total 24 hrs. Output

3.1 cckg/day

FLUID CHART

Sheet No. : 9

4/7/26

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

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine			
	08:00 am	Bm 25					✓			15ml	0		
	09:00 am									0	0		
	10:00 am	Bm 25ml								0	0		
	11:00 am									0	0		
	12:00 pm	Bm 30ml					✓			20ml	0		
	01:00 pm									0	0		
Total Intake : 80ml						Total Output : 35ml							
	02:00 pm									0	0		
	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										



DRUG CHART

Date of Admission: Drug Allergies: ☐ Not known any Drug Allergies

FOR THE SAFETY OF THE PATIENT

- GENERAL** - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.
- DOCTOR** - Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).
 - Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.
 - Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.
 - Discontinue a drug by drawing a line **I** through it and a similar line through subsequent recording panels.
 - The date and time of stopping the drug along with the doctors name and sign must be mentioned.
 - Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.
- NURSES** - Nurses must follow strictly the FIVE RIGHTS before administration of medication.
 1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time
 - AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES
 (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

SOS / PRN (As Required Medication)

DRUG :				Date Time															
Dose	Route	Frequency	Start Date																
Doctor's Signature		Valid Period	Pharm.																
Additional Instructions:																			

DRUG :				Date Time															
Dose	Route	Frequency	Start Date																
Doctor's Signature		Valid Period	Pharm.																
Additional Instructions:																			

DRUG :				Date Time															
Dose	Route	Frequency	Start Date																
Doctor's Signature		Valid Period	Pharm.																
Additional Instructions:																			



REGULAR PRESCRIPTIONS

Weight.1.21kg, Ward.NICU....

DRUG : INS CAFFEINE

Date/Time: 27/6, 28/6, 29/6, 30/6

Dose	Route	Frequency	Start Date
6.5 MG	IV	ONCE DAILY	27/6/26

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

Additional Instructions: 5mg / kg / Dose

Daily Doctor's Endorsement by a Sign: *[Signature]*

DRUG : LACTODEX HMF

Date/Time: 29/6, 30/6, 1/7/26, 2/7, 3/7, 4/7

Dose	Route	Frequency	Start Date
1 Sachet	OG	EACH FEED	29/6

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

Additional Instructions: 1 Sachet in 25 ML EBN / DBH

Daily Doctor's Endorsement by a Sign: *[Signature]*

DRUG : Vitamin D3 drops

Date/Time: 30/6, 1/7/26

Dose	Route	Frequency	Start Date
0.5ml	OG.	ONCE DAILY	30/6.

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

Additional Instructions: 4000/day.

Daily Doctor's Endorsement by a Sign: *[Signature]*

DRUG : Oral Caffeine.

Date/Time: 30/6, 1/7/26

Dose	Route	Frequency	Start Date
6.5mg	IV	ONCE DAILY	30/6.

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

Additional Instructions: 5mg / kg / Dose

Daily Doctor's Endorsement by a Sign: *[Signature]*

Patient Name :



I.P. No.

Sheet No.

Wards

Weight (kg)

1.27 kg

.....JLAR PRESCRIPTIONS

DRUG : ZINCO VIT DROP				Date	1/7	2/7	3/7	4/7											
				Time	1/7	2/7	3/7	4/7											
Dose	Route	Frequency	Start Dt.																
0.5ml	PO	2 nd to 1/7	1/7																
Name & Signature of the Doctor starting the Drugs:				6 POD 1/7 2/7 3/7 4/7															
Additional Instructions:				POD 1/7 2/7 3/7 4/7															
Daily Doctor's Endorsement by a Sign.																			

DRUG : PROCTO GARD				Date	1/7	2/7	3/7	4/7											
				Time	1/7	2/7	3/7	4/7											
Dose	Route	Frequency	Start Dt.																
LA		12 th to 1/7	1/7																
Name & Signature of the Doctor starting the Drugs:				6 POD 1/7 2/7 3/7 4/7															
Additional Instructions:				POD 1/7 2/7 3/7 4/7															
Daily Doctor's Endorsement by a Sign.																			

DRUG : oral Caffeine				Date	3/7														
				Time	3/7														
Dose	Route	Frequency	Start Dt.																
6.5mg	PO	ONCE DAILY	3/7																
Name & Signature of the Doctor starting the Drugs:				6 POD 1/7 2/7 3/7 4/7															
Additional Instructions:				POD 1/7 2/7 3/7 4/7															
Daily Doctor's Endorsement by a Sign.																			

DRUG :				Date															
				Time															
Dose	Route	Frequency	Start Dt.																
Name & Signature of the Doctor starting the Drugs:																			
Additional Instructions:																			
Daily Doctor's Endorsement by a Sign.																			

Patient Name :	I.P. No.	Sheet No.	Wards	Weight (kg)
----------------	----------	-----------	-------	-------------

REGULAR PRESCRIPTIONS

DRUG :				Date Time																
Dose	Route	Frequency	Start Dt.																	
Name & Signature of the Doctor starting the Drugs:																				
Additional Instructions:																				
Daily Doctor's Endorsement by a Sign.																				

DRUG :				Date Time																
Dose	Route	Frequency	Start Dt.																	
Name & Signature of the Doctor starting the Drugs:																				
Additional Instructions:																				
Daily Doctor's Endorsement by a Sign.																				

DRUG :				Date Time																
Dose	Route	Frequency	Start Dt.																	
Name & Signature of the Doctor starting the Drugs:																				
Additional Instructions:																				
Daily Doctor's Endorsement by a Sign.																				

DRUG :				Date Time																
Dose	Route	Frequency	Start Dt.																	
Name & Signature of the Doctor starting the Drugs:																				
Additional Instructions:																				
Daily Doctor's Endorsement by a Sign.																				

A standard linear barcode consisting of vertical black bars of varying widths on a white background.

VERIFIED BY, Name Signature

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.

[illegible]



I.V. FLUIDS CHART

Weight. 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
26/6	1 AM	IV-80ml/Ks/day 10 x Dextrose	IV	3.2	[Signature]	[Signature] Haritha	27/6 12pm	[Signature]	[Signature] [Signature]
26/6	1 AM	Ig Ammonia vein 2g/Ks/day	IV	1ml	[Signature]	[Signature] [Signature]	27/6	[Signature]	[Signature] [Signature]
27/6	12pm	IV-100 ml/Ks/day 10% Dextrose	IV	3.8	[Signature]	[Signature] umg	28/6	[Signature]	[Signature] [Signature]
27/6	2 PM	Ig Ammonia vein 3g/Ks/day	IV		[Signature]	[Signature] [Signature]	28/6	[Signature]	[Signature] [Signature]
28/6	1 PM	IV-120ml/Ks/day. 10% D50P.	IV	2.3	[Signature]	[Signature] [Signature]	29/6	[Signature]	[Signature] [Signature]
28/6	2 PM	Ig Ammonia vein 2g/Ks/day	IV	1ml	[Signature]	[Signature] [Signature]	29/6 @ 2.30 pm	[Signature]	[Signature] [Signature]
29/6	1 PM	IV-140ml/Ks/day 10% D50P	IV		[Signature]	[Signature] [Signature]	30/6 @ 2pm	[Signature]	[Signature] [Signature]

Signature

VERIFIED BY : Name

Ref No. F/INPR/1 VIH-00206261 IP-00080488
 Patient Name : Baby B/O G.ANUSHA
 28-06-2026 0 Y 0 M 0 D 10 H (M)
 Dr. JARJAPU KIREETI

I.P. No 26/6
 Date : 26/6



NURSES ASSESSMENT CHART

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

BirthRight
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

Diagnosis : Weight : 1.274 Chart No. : 1

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210																								
RED - PULSE	200																		142	148	165	160	125	116	128
BLACK - RESP	105																								
GREEN - TEMP	104																								
BLUE - NIBP	103																								
	102																								
	101																								
A- ALERT	100																		98.6	98.6	98.6	98.6	98.6	98.6	98.6
V-VOICE	99																								
P-PAIN	98																								
U-UNRESPONSIVE	97																								
	96																								
VERBAL	95																								
5-ORIENTED	80																		40	38	37	40	28	54	54
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60																								
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40																								
	35																								
MOTOR	30																								
6-OBEYS	28																								
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24																								
3-FLECTION	22																								
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
Q2																									
SPO2																									
RBS																									
SUCTION																									
PHYSIOTHERAPY																									
AVPU																									

Signature of the Nurse :

Morning Shift :

Evening Shift :

Night Shift :

26/6
 @8pm

Ref No. F/INPR/H-00206261 IP-00060488
aby B/O G.ANUSHA
1-06-2026 0 Y 0 M 0 D 10 H (M)

Patient Name : JARJAPU KIREETI

I.P. No

Date : 26-6-26 Diagnosis : PT - 35th Wks Weight : 1.27 kg Chart No. : 2

NURSES ASSESSMENT CHART

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Your Right to a Safe Delivery

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7	
COLOUR CODE	200																									
	210																									
RED - PULSE	200	119	121	128	134	112	110	113	132	125	107	151	118	120	121	111	117	113	105	114	112	131	106	108	109	
BLACK - RESP	105	190																								
GREEN - TEMP	104	180																								
BLUE - NIBP	103	170																								
	102	160																								
	101	150																								
A- ALERT	100	140																								
V-VOICE	99	130	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	36.5	
P-PAIN	98	120																								
U-UNRESPONSIVE	97	110																								
	96	100																								
VERBAL	95	90	41	39	45	32	30	47	51	38	34	35	37	51	40	64	58	50	37	43	38	40	37	36	37	44
5-ORIENTED	80																									
4-CONFUSED	70																									
3-IN APPROPRIATE WORDS	60	60	60	75	62	128	76	61	64	66	64	72	66	68	80	65	66	66	64	66	56	71	73	80	66	
2-INCOMPREHENSIBLE SOUND	50																									
1-NONE	40																									
	35	40	40	60	50	95	61	47	47	45	54	57	35	54	63	44	47	51	47	52	41	63	63	65	55	
MOTOR	30																									
6-OBEYS	28																									
5-LOCALISES PAIN	26	30	50	52	44	68	54	41	39	34	48	45	47	47	53	34	37	45	39	44	36	54	57	53	59	
4-WITHDRAWS	24																									
3-FLECTION	22																									
2-EXTENSION	20																									
1-NONE	18																									
12345678	16																									
	14																									
	12																									
	10																									
O2																										
SPO2		98	98	90	98	99	99	97	96	94	92	94	92	94	95	95	95	96	99	98	97	97	96	96	95	
RBS		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
SUCTION		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
PHYSIOTHERAPY		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
AVPU		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	

Signature of the Nurse : *Shruti*

Morning Shift : *Shruti*

Evening Shift : *Shruti*

Night Shift : *Shruti*

Ref No. F/INPR/19

Patient Name :

I.P. No

H-00206261

aby B/O G.ANUSHA

IP-00060488

i-06-2026

0 Y 0 M 0 D 6 H (M)

r. JARJAPU KIREETI



NURSES ASSESSMENT CHART

Rainbow Children's Hospital
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Date : 27/6/26 Diagnosis : PT 35 + 6 w Weight : 1.29 (1600) Chart No. : 32

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210																								
RED - PULSE	200	116	104	109	129	123	143	125	117	118	113	127	113	110	127	111	120	135	112	117	128	105	129	126	134
BLACK - RESP	105																								
GREEN - TEMP	104																								
BLUE - NIBP	103																								
	102																								
	101																								
A- ALERT	100																								
V-VOICE	99																								
P-PAIN	98																								
U-UNRESPONSIVE	97																								
	96																								
VERBAL	95																								
5-ORIENTED	80	45	38	37	37	40	38	40	40	36	44	40	37	50	44	40	61	53	41	54	39	52	41	40	45
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60	66	71	73	71	71	66	59	74	56	77	77	75	79	73	73	60	68	76	82	78	80	86	71	80
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40																								
	35																								
MOTOR	30	56	57	63	58	58	54	45	59	45	65	66	53	60	61	64	47	53	66	64	66	62	61	55	63
6-OBEYS	28																								
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24	51	50	59	51	51	48	37	47	42	55	61	51	56	53	60	38	45	56	57	61	53	51	45	54
3-FLECTION	22																								
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
O2																									
SPO2		96	96	96	95	97	97	96	97	98	98	97	97	98	98	94	94	94	97	95	96	96	96	97	98
RBS		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
SUCTION		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
PHYSIOTHERAPY		-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
AVPU		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A

Signature of the Nurse :

Morning Shift : Bhavani

Evening Shift : Shobha

Night Shift : Maheshwari

27/6/26
2m27/6/26
@ 8pm28/6/26
@ 8AM

Ref No. 5400000

H-00206261 IP-00060488
 Patient: Baby B/O G.ANUSHA
 DOB: 06-2026 0 Y 0 M 0 D 6 H (M)
 I.P. No. JARJAPU KIREETI

Date: 

NURSES ASSESSMENT CHART

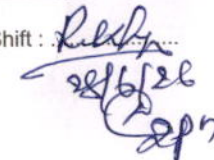

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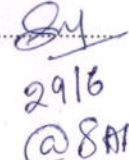
PS Weight: 1.22 kg Chart No: 4

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7	
COLOUR CODE	200																									
	210	122	139	122	120	130	117	117	120	112	117	113	129	120	122	124	162	134	120	115	127	111	124	130	131	
RED - PULSE	200																									
BLACK - RESP	105	190																								
GREEN - TEMP	104	180																								
BLUE - NIBP	103	170																								
	102	160																								
	101	150																								
A-ALERT	100	140																								
V-VOICE	99	130	118	6	98	6	98	6	98	6	98	6	98	6	98	6	98	6	98	6	98	6	98	6	98	
P-PAIN	98	120																								
U-UNRESPONSIVE	97	110																								
	96	100																								
VERBAL	95	90	44	45	39	56	43	44	35	48	57	52	59	58	62	60	41	44	114	58	50	41	73	60	44	47
5-ORIENTED	80																									
4-CONFUSED	70																									
3-IN APPROPRIATE WORDS	60																									
2-INCOMPREHENSIBLE SOUND	50																									
1-NONE	40																									
	35																									
MOTOR	30																									
6-OBEYS	28																									
5-LOCALISES PAIN	26	85	82	73	80	79	78	91	25	26	20	66	28	92	71	79	71	78	70	68	60	61	77	70	80	
4-WITHDRAWS	24																									
3-FLECTION	22																									
2-EXTENSION	20	69	41	56	64	6	60	70	60	62	85	47	65	60	52	60	58	60	55	53	50	50	59	57	63	
1-NONE	18																									
	16																									
	14	69	65	165	65	51	66	51	54	58	38	39	49	41	48	50	48	42	43	38	41	40	54	40		
	12																									
	10																									
O2																										
SPO2		92	94	98	94	98	98	98	93	97	98	97	98	97	98	99	97	98	98	96	97	97	96	98	95	
RBS																										
SUCTION																										
PHYSIOTHERAPY																										
AVPU		A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	

Signature of the Nurse :

Morning Shift : 

Evening Shift : Akhila

Night Shift : 

28/6/26
 @8pm

29/6
 @8AM

VIH-00206261 IP-00060488

Baby B/O G.ANUSHA

26-06-2026 0 Y 0 M 2 D (M)

Ref No. F/INPR/

Dr. JARJAPU KIREETI

Patient Name :



I.P. No

Date : 29/6/26 Diagnosis : PT Weight : 1.18 (4014g) Chart No. : 5

NURSES ASSESSMENT CHART



Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210	117	129	123	134	125	143	139	126	123	128	120	121	120	138	148	146	150	132	122	148	146	142	130	131
RED - PULSE	200																								
BLACK - RESP	105																								
GREEN - TEMP	104																								
BLUE - NIBP	103																								
	102																								
	101																								
A- ALERT	100																								
V-VOICE	99																								
P-PAIN	98																								
U-UNRESPONSIVE	97																								
	96																								
VERBAL	95																								
5-ORIENTED	80																								
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60																								
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40																								
	35																								
MOTOR	30																								
6-OBEYS	28																								
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24																								
3-FLECTION	22																								
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
Q2																									
SPO2																									
RBS																									
SUCTION																									
PHYSIOTHERAPY																									
AVPU																									

Signature of the Nurse : Akhila

Morning Shift : Akhila

29/6/26 @ 2PM

Evening Shift : Uma

29/6/26 @ 8PM

Night Shift : Rekha

30/6/26 @ 8PM

NURSES ASSESSMENT CHART

U.F. NO

Date : 30/6/26 Diagnosis : PT Weight : Chart No. : 6

Guide	Time	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	1	2	3	4	5	6	7
COLOUR CODE	200																								
	210	134	128	145	149	123	124	130	141	132	134	130	131	141	138	140	132	131	137	108	132	142	144	149	148
RED - PULSE	200																								
BLACK - RESP	105																								
GREEN - TEMP	104																								
BLUE - NIBP	103																								
	102																								
	101																								
A- ALERT	100																								
V-VOICE	99																								
P-PAIN	98																								
U-UNRESPONSIVE	97																								
	96																								
VERBAL	95																								
5-ORIENTED	80																								
4-CONFUSED	70																								
3-IN APPROPRIATE WORDS	60																								
2-INCOMPREHENSIBLE SOUND	50																								
1-NONE	40																								
	35																								
MOTOR	30																								
6-OBEYS	28																								
5-LOCALISES PAIN	26																								
4-WITHDRAWS	24																								
3-FLECTION	22																								
2-EXTENSION	20																								
1-NONE	18																								
	16																								
	14																								
	12																								
	10																								
O2																									
SPO2																									
RBS																									
SUCTION																									
PHYSIOTHERAPY																									
AVPU																									

Signature of the Nurse : Umey

Morning Shift : Umey

30/6/26
@ 2PM

Evening Shift : Mohanwar

30/6/26
@ 8PM

Night Shift : Rekha

30/6/26
@ 8PM

H-00206261 IP-00060488
 Baby B/O G. ANUSHA
 3-06-2026 0 Y 0 M 0 D 10 H (M)
 R. JARJAPU KIREETI



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FLUID CHART

B.Wt: 10.274

Sheet No. : ①

26/6/26

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

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
	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			3.2	1ml					0		
Total Intake :						Total Output :						
	02:00 am			3.2	1ml					0		
	03:00 am			3.2	1ml				10ml	0		
	04:00 am			3.2	1ml					0		
	05:00 am			3.2	1ml					0		
	06:00 am			3.2	1ml				10ml	0		
	07:00 am			3.2	1ml					0		
Total Intake : 29.4 ml						Total Output :						

Total 24 hrs. Intake

79 cc/kg/Day

Total 24 hrs. Output

1.0 cc/kg 1Hr.



FLUID CHART

Sheet No. : 2

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

		Intake				Output					IV Site Thrombo- phlebitis Score	Sign. Nurse	
Date	Time	Nature of Fluid	Amount	Route	NG	Diarrhoea	Vomit	Drainage	Urine				
24/01/2024			Mouth	I.V	N.G								
	08:00 am		1 ml	3.2							0		
	09:00 am		1 ml	3.2							0		
	10:00 am		1 ml	3.2					15 ml		0		
	11:00 am		1 ml	3.2							0		
	12:00 pm		1 ml	3.2					8 ml		0		
	01:00 pm		1 ml	3.2							0		
Total Intake : 29.4 ml.						Total Output : 23 ml.							
	02:00 pm		1 ml	3.2							0		
	03:00 pm		1 ml	3.2							0		
	04:00 pm	ERM	1 ml	2.2	2 ml				19 ml		0		
	05:00 pm		1 ml	2.2							0		
	06:00 pm	DBM	1 ml	2.2	2 ml						0		
	07:00 pm		1 ml	2.2							0		
Total Intake : 25.2 ml.						Total Output : 19 ml.							
	08:00 pm	DBM	1 ml	2.2	2 ml					10 ml	0		
	09:00 pm		1 ml	2.2							0		
	10:00 pm	DBM	1 ml	2.2	2 ml						0		
	11:00 pm		1 ml	2.2							0		
	12:00 am	DBM	1 ml	2.2	2 ml					10 ml	0		
	01:00 am		1 ml	2.2							0		
Total Intake : 25.2 ml						Total Output : 20 ml							
	02:00 am	DBM	1 ml	2.2	2 ml						0		
	03:00 am		1 ml	2.2							0		
	04:00 am	DBM	1 ml	2.2	2 ml					10 ml	0		
	05:00 am		1 ml	2.2							0		
	06:00 am	DBM	1 ml	2.2	2 ml					10 ml	0		
	07:00 am		1 ml	2.2							0		
Total Intake : 25.2 ml						Total Output : 20 ml							

Sherry
 27/6/26
 @ 8pm.

Nahem
 27/6/26
 @ 8pm

Total 24 hrs. Intake : 105 ml
 4.3 ccl/kg/day

Total 24 hrs. Output : 82 ml
 2.6 ccl/kg/hour



FLUID CHART

Sheet No. : 3

22/6/24

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

		Intake				Output					IV Site Thrombo- phlebitis Score	Sign. Nurse
Date	Time	Nature of Fluid	Route	NG	Diarrhoea	Vomit	Drainage	Urine				
		<i>10% dext</i> Mouth	I.V	N.G								
	08:00 am	1ml	2.2							0		
	09:00 am	1ml	2.2							0		
	10:00 am	1ml	2.2					15ml		0		
	11:00 am	1ml	2.2							0		
	12:00 pm	1ml	3.8					10ml		0		
	01:00 pm	1ml	3.8							0		
Total Intake : 26.4 ml				Total Output : 20ml								
	02:00 pm	1ml	2.8							0		
	03:00 pm	1ml	2.8					10ml		0		
	04:00 pm	1ml	2.8							0		
	05:00 pm	1ml	2.8							0		
	06:00 pm	1ml	2.8					10ml		0		
	07:00 pm	1ml	2.8							0		
Total Intake : 31.8 ml				Total Output : 20ml								
	08:00 pm	1ml	2.8							0		
	09:00 pm	1ml	2.8							0		
	10:00 pm	1ml	2.3					10ml		0		
	11:00 pm	1ml	2.3							0		
	12:00 am	1ml	2.3					10ml		0		
	01:00 am	1ml	2.3							0		
Total Intake : 33.8 ml				Total Output : 20ml								
	02:00 am	1ml	2.3							0		
	03:00 am	1ml	2.3							0		
	04:00 am	1ml	2.3					15ml		0		
	05:00 am	1ml	2.3							0		
	06:00 am	1ml	1.8					10ml		0		
	07:00 am	1ml	1.8							0		
Total Intake : 31.8 ml				Total Output : 20ml								

Total 24 hrs. Intake

123.8 ml
 5.15 cc/kg/day

Total 24 hrs. Output

90 ml
 3.0 cc/kg/day



FLUID CHART

Sheet No. :

28/6/26

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	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
			Route	NG	Diarrhoea	Vomit	Drainage	Urine					
			Mouth	I.V	O.G								
28/6	08:00 am	DBM	1ml	1.8	5 ml						0	28/6 2pm.	
	09:00 am		1ml	1.8						0			
	10:00 am	DBM	1ml	1.8	5 ml				15 ml	0			
	11:00 am		1ml	1.8						0			
	12:00 pm	DBM	1ml	1.8	5 ml				10 ml	0			
	01:00 pm		1ml	1.8						0			
Total Intake : 3.0 ml			Total Output : 25 ml										
	02:00 pm	EBM	1ml	2.3	6 ml					15 ml	0	Alchile 28/6/26 @ 8 pm	
	03:00 pm		1ml	2.3						0			
	04:00 pm	EBM	1ml	2.3	6 ml				10 ml	0			
	05:00 pm		1ml	2.3						0			
	06:00 pm	EBM	1ml	1.8	2 ml				5 ml	0			
	07:00 pm		1ml	1.8						0			
Total Intake : 3.0 ml			Total Output : 25 ml										
	08:00 pm	EBM	1ml	1.8	2 ml						0	29/6 @ 8 AM	
	09:00 pm		1ml	1.8					10 ml	0			
	10:00 pm	EBM	1ml	1.8	8 ml					0			
	11:00 pm		1ml	1.8						0			
	12:00 am	EBM	1ml	1.6	8 ml				20 ml	0			
	01:00 am		1ml	1.6						0			
Total Intake : 10.0 ml / 39.2 ml			Total Output : 30 ml										
	02:00 am	EBM	1ml	1.5	9 ml						0		
	03:00 am		1ml	1.5					25 ml	0			
	04:00 am	EBM	1ml	1.5	9 ml					0			
	05:00 am		1ml	1 ml						0			
	06:00 am	EBM	1ml	1.0 ml	10 ml				10 ml	0			
	07:00 am		1ml	1.0 ml						0			
Total Intake : 28.0 ml / 37 ml / 145 ml			Total Output : 35 ml / 115 ml										
Total 24 hrs. Intake			7.7 cc / kg / day			Total 24 hrs. Output			2.54 cc / kg / hr				

FLUID CHART

Sheet No. : 4

29/6/26

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.

		Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine	
			Mouth	I.V	N.G						
	08:00 am	DBM		1.0	10ml						0
	09:00 am			1.0							0
	10:00 am	DBM		1.9	11ml		✓			20ml	0
	11:00 am			1.9							0
	12:00 pm	EBM		1.9	11ml					10ml	0
	01:00 pm			1.9							0
Total Intake : 41.6					Total Output : 30ml						
	02:00 pm	EBM		1.4	12ml						0
	03:00 pm			1.4							0
	04:00 pm	EBM		1.4	12ml		✓			15ml	0
	05:00 pm			1.4							0
	06:00 pm	EBM		1ml	13ml		✓			10ml	0
	07:00 pm			1ml							0
Total Intake : 44.6					Total Output : 25ml						
	08:00 pm	EBM		1ml	13ml						0
	09:00 pm			1ml							0
	10:00 pm	EBM		1ml	14ml		✓			15ml	0
	11:00 pm			1ml							0
	12:00 am	EBM		1ml	14ml					15ml	0
	01:00 am			1ml							0
Total Intake : 47					Total Output : 30ml						
	02:00 am	EBM		1.5	15		✓			10ml	0
	03:00 am										0
	04:00 am	EBM			15ml					15ml	0
	05:00 am										0
	06:00 am	EBM			15					10ml	0
	07:00 am										0
Total Intake : 45ml ⇒ 178.2					Total Output : 35ml ⇒ 120ml						

Total 24 hrs. Intake

140.3 cc/kg/day

Total 24 hrs. Output

9.9 cc/kg/day

FLUID CHART

Sheet No. : 5

30/6/26

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	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
	08:00 am	GBM			15 ml						0	4mg 30/6/26 @ 2PM
	09:00 am									0		
	10:00 am	EBM			15ml		✓		15ml	0		
	11:00 am									0		
	12:00 pm	EBM			15ml		✓			0		
	01:00 pm								10ml	0		
Total Intake :			45ml			Total Output :			25ml			
	02:00 pm	EBM			15ml				10ml	0	Nabha 30/6/26 @ 6PM	
	03:00 pm									0		
	04:00 pm	EBM			15ml		✓		10ml	0		
	05:00 pm									0		
	06:00 pm	EBM			15ml				12ml	0		
	07:00 pm									0		
Total Intake :			45ml			Total Output :			32			
30/6	08:00 pm	EBM			15ml		✓		10ml	0	Relish 30/6/26 @ 7PM	
	09:00 pm									0		
	10:00 pm	GBM			15ml				10ml	0		
	11:00 pm									0		
	12:00 am	GBM			15ml				15	0		
	01:00 am									0		
Total Intake :			45ml			Total Output :			35			
30/6/26	02:00 am	EBM			15ml		✓		10	0	Relish 30/6/26 @ 7PM	
	03:00 am									0		
	04:00 am	EBM			15ml				12ml	0		
	05:00 am									0		
	06:00 am	GBM			15ml		✓		15	0		
	07:00 am									0		
Total Intake :			45ml = 180ml			Total Output :			37ml → 129			
Total 24 hrs. Intake		14.1 cc/kg/dy.										
Total 24 hrs. Output		4.2 cc/kg/dy										