Rainbow® Children's Hospital
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BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery.

ACTIVITY

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

Name: ----- Keerthi

UHID No : -- ---- IP No. ---------- Consultant : Dr Atluri kundana priya Dept : ----------

Date of Admission : 25/7/20 Time : 1:13pm Date of Discharge : ---------- Time: ----------

Room / Bed No : CRR 4W220-1 Ward : NICU Suggested Billable bed type : ----------

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
25/7/20	6:40pm	4W	Room (C21A)	MR

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Sign
25/7	GRBS @ 10:42Am - 86mg/dl	V12602522	
25/7	Blood Grouping.	V12602519	
25/7	GRBS @ 4pm 67 mg/dl	V12602522	
25/7/26	ABG	V12602523	
cw SBA	Checked by Taju 25/7/26 at 5:50 PM		
25/7/26	GRBS @ 10:30pm - 84 mg/dl	26025265	
26/7/26	GRBS @ 4:30am - 67mg/dl	26025266	
26/7/26	GRBS @ 10:53Am - 66 mg/dl	26025330	
26/7/26	GRBS @ 5:30pm - 76mg/dl	26025331	
26/7/26	GRBS @ 11:30pm - 47mg/dl	26025377	
27/7/26	GRBS @ 1Am - 59 mg/dl	26025378	
27/7/26	GRBS @ 2Am - 71 mg/dl	26025379	
27/7/26	GRBS @ 8Am - 61 mg/dl	26025380	
27/7/26	ICB 12.5	26025381	
	SB 12	26025536	
	cross chd by Chet 28/7/26		

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
27/7/26	Dspt.	10:45 AM	28/7/7 10	3110 7123	[signature]

NAME:— P. Hanuma Naga Kuthi
SIGN:— Kuthi
DATE:— 27/07/2026
TIME:— 10:45
Relationship:— Mother

PROCEEDURE

Date	Proceedure	Quantity	Order No.	Signature
28/7/22	TEOAE	①	3106942	
	Cross checked by	Chn 28/7/22		

ANY OTHER INFORMATION

Date : 28/7/22 Time : 1:20pm Prepared By : Chithra

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor
Sis Sumitha	Sis Chithra		

OAE/ hearing screening report

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M1D (F)
Dr. ATLURI KUNDANA PRIYA

Hearing screening was done using TEOAEs

Right ear - Hearing screening results are PASS, indicative of presence of OAEs, suggestive of normal outer hair cell functioning.

Left ear - Hearing screening results are PASS, indicative of presence of OAEs, suggestive of normal outer hair cell functioning.

Recommendation-
Review with Consultant Pediatrician.

S.Rachel
Audiologist

Note: OAE's passed bilaterally indicative of normal outer hair cell functioning in both ears. However it must be noted OAE's just indicate structurally and functionally the middle ear and outer hair cells of the cochlear are normal. It dose not give any indication of the auditory track from the inner hair cells to the auditory cortex. Since OAE test does not asses the exact hearing thresholds a BERA test for threshold estimation is suggested after 3 months for objective confirmation. Hear loss of any degree can be acquired at any stage of life, hence this screening test holds only good for the current date of report.

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

NEW BORN DETAILS

B/O Penmetsa Hanuma

DOB: 25-07-2026 Sex: Female Maternal Blood Group: O+ positive

Time: 10:37 AM Birth Weight: 2.723kg Baby Blood Group: "O" positive

SVD / LSCS: LSCS

Indication: Non-reassuring NST

Diagnosis: Late pre term / LSCS / GA - 36+5wks / B.wt. 2.723kg / AGA / EDM.

Any Maternal Complications: _____

Spo2 Pre ductal Right Upper Limb: 99%

Spo2 Post ductal Left Lower Limb: 99%

Inference : if the value <92 or difference between preductal and post ductal is >3 esclate the situation

Any Specific Remarks: _____ Thyroid Screening: _____ : NBS: _____

Hearing Test (OAE): _____ Red Reflex: _____.

Head Circumference: 33 cms Length: 46 cms

Vaccination: OPV, BCG, HEP-B - 26/7/26 Sabin.

Date	Day of life	Weight	Weight Loss (> 10% Escalate)	Urine	Stool	DBM/FF	TCB/SBR
26/7/26		2.68 ↓43gms		✓	✓	DBM	
27/7/26		2.59 ↓90gms		✓	✓	DBM	TCB: 27/7/26 @ 7:05AM 12.5mg/dl
28/7/26		2.50 ↓90gms		✓	✓	DBM	

DEFICIENCY CHECK LIST OF MEDICAL CASE SHEET

Rainbow Children's Hospital — It takes a lot to treat the little. | BirthRight BY RAINBOW HOSPITALS — Your Right to a Safe Delivery

VIH-00207317 IP-00060861
Patient Name : Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 2 D (F)
Dr. ATLURI KUNDANA PRIYA

IP.No:

Ward:

DOA:

Sl.No	List of Records	No. of Pages	Legibility	Completeness	Remarks
1	Admission Sheet	1	–	–	
2	Discharge Summary	2	–	–	
3	Nursing Initial assessment form	1	–	–	
4	Patient Trasfer Forms	1	–	–	
5	In-patient Medical Record	4	–	–	
6	Doctors Progress Sheets	3	–	–	
7	Nurses Progress notes	3	–	–	
8	Consultation Sheets				
9	General Consent for Treatment	1	–	–	
10	Conset for Surgery				
11	Consent for Blood Transfusion				
12	Consent forChemotherapy				
13	Consent for High Risk				
14	Consent for Restraint				
15	DAMA Consent				
16	Consent for Special Procedure				
17	Consent for Radiological Investigations				
18	Consent for HIV Test				
19	Anaesthesia consent form				
20	Anaesthesia notes(Pre Anaesthesia & Post)				
21	Pre Operative checklist				
22	Surgical safety Checklist				
23	Operation Theatre notes				
24	Nurses Clinical Presentation				
25	TPR & BP chart	4	–	–	
26	Intake and Output chart (fluid Chart)	2	–	–	
27	Drug Chart (Regular prescription)	1	–	–	
28	Daily Investigation sheet				
29	Investigation Values (Result Sheet)	1	–	–	
30	Nebulization Chart				
31	Diabetic chart				
32	Nutritional Review chart				
33	MLC form (in case of MLC)				
34	Patient Educatlon Form				
	Humpty Dumpty Boadun "O"	2	–	–	
	orders.	10	–	–	
		5	–	–	
	Total No. of Pages	41			

Signature and Date : 27/7/26

ERROR LOG

LOCATION: - NICU / PICU / HDU / OT / GENERAL WARD

ICD CODE :-

OBSERVATION: -

DATE :

MRD EXECUTIVE

Rainbow Children's Hospital - Secunderabad
H.No.3-7-222/223,Sy.No.51 to 54,Opp.Karkhana P S,Karkhana Main Road,Kakaguda, Karkhana ,Hyderabad ,Telangana, INDIA ,500009.
TEL NO :040-42462200, Ext 2000,2001,2002
WEB : https://rainbowhospitals.in

ADMISSION SHEET

Registration Details :

Admission No : IP-00060861 **Admit Date** : 25-Jul-2026 **Admit Time** : 01:13 PM **UHID** : VIH-00207317

Patient Details :

Patient Name	: Baby B/O PENMETSA HANUMA NAGA KIRTHI	**Age**	: 0 D
Guardian	: Mr P VENU GOPAL VARMA	**DOB**	: 25-07-2026 10:37 AM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	:
Address (H)	: PLOT NO-302,SRINIVAS NAGAR COLONY Kompally Hyderabad Telangana INDIA 500014	**Phone No**	: 9951353567/ 9912712709
		E-mail	: KEERTHIVARMA7799@GMAIL.COM

Admission Details :

Bed Type : BASINET **Bed No** : CRDL-LW-220-1 **Ward Name** : N 2F-LABOUR WARD

Room No : CRDL-LW-220-1 **Admission Type** : First Visit

Contact Details :

Name : Mr P VENU GOPAL VARMA **Relationship** : Father

Contact Address : PLOT NO-302,SRINIVAS NAGAR COLONY Kompally Hyderabad Telangana INDIA 500014 **Phone No** : 9951353567 / 8919839374

P.V.G.Varma
Signature

Doctor Details :

Doctor Name : Dr. ATLURI KUNDANA PRIYA **Specialisation** : NEONATOLOGY

Referral Doctor : DR.BHAVANA K **Phone No** :

Co-Consultant :

Payment Details :

Deposit Amount : 0.00

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

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 0 D 5 H (F)
Dr. ATLURI KUNDANA PRIYA

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NURSING DEPARTMENT
NEWBORN - NURSING ASSESSMENT FORM

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

Baby's Name: B/o hanuma Naga Mother's Name: B/o hanuma Naga

Date of Birth: 25/7/26 Time of Birth: 10:37:35cc Gender: ☐ Male ☑ Female

Birth Weight: 2'723 Kgs Kgs HC: 36 cm Lenght: 47 cm

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

Term / Pre-term / Post-term: Term late pre term

Resuscitated: ☐ Yes ☑ No Blood Group: Mother: O positive. Baby: —

Feeding: ☑ Breast Feeding ☑ Formula ☐ Both First Feed Time: —

VIH-00131950 IP-00060838
Mrs PENMETSA HANUMA NAGA
28-10-1996 29 Y 8 M 27 D (F)
Dr. BHAVANA K

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

Indication: Emergency LSCS, non reassuring NST, previous LSCS

Physical Assessment of New Born:

Temp: 98.6°F °C HR: 145bt/mt /Min RR: 45bt/min /Min BP: SpO2: 98%

Pain Score: 00 (Follow N Pass)

Fall Risk Assessment: ☑ **Yes** ☐ **No** **Score:** 15 (Fill the Humpty Dumpty Sheet)

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

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

Findings:

General Appearance: Posture : ☑ Well-Flexed ☐ Asymmetry

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

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

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

Routine Care Provided: ~~Yes~~ / No

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

Neonatal Screening Done: Yes / ~~No~~

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

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

Newborn Screening Discussed: Yes / ~~No~~

Nurse Name: Anusha Signature: Date &Time: 25/7/26 @12pm

PATIENT TRANSFER FORM

Rainbow® Children's Hospital
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Patient Name & UHID No.	Date & Time of Admission	Date & Time of Transfer Order
VIH-00207317 IP-00060861 Baby B/O PENMETSA HANUMA 25-07-2026 0 Y 0 M 0 D 5 H (F) Dr. ATLURI KUNDANA PRIYA	25/7/26 @ 1/8/3PM	25/7/26 @ 6:30pm
	Transfer Ordered by Dr. kundana priya	Reason for Transfer observations
From Unit NICU	To Unit Room C217	Information to Attendant Yes ☑ No ☐
Number of Sheets in Clinical File 15	Number of Imaging Films Abg - 1	Personal belongings including clinical documents. If any handed over to attendant Yes ☐ No ☐ If yes, what ?

Medications / Consumables / Surgicals / Hand over

Sl.No.	Item Name	Quantity
1.	Small kuchiees	1
2.		
3.		
4.		
5.		

Shifting Summary / Notes Written by Doctor : Yes ☑ No ☐

Name & Signature of Person who is Transferring	Name of Person Ordered Transfer
Sis Meghna	Dr. Kundana priya

Patient & Clinical Records Received by : Varshini

Date & Time of Patient Received : 25/7/26 @ 7:00 pm

If the transfer order time & Completion time is more than 30 minutes, please tick the reason mentioned below :

☐ Unavailable Bed ☐ Nurse not Available ☐ Available Bed not ready

VIH-00207317 IP-00060861
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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : P. Hanuma Naga Age : 29yr Father's Name : Age :

Date of Birth : 28/10/96. Date of Admission : UHID No.:

NICU Consultant : Dr. Kudana ma'am Referring Consultant : Dr. Bhavana. K.

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

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

BIRTH INFORMATION

Name : B/o Hanuma Priya

Gender : ☐ M ☒ F Blood Group :

Date of Birth : 25/7/26. Time of Birth : 10:37:35 sec

Place of Birth : RCH, VKp.

Mother's Blood Group : O positive

Birth Weight (gms) : 2723gm Length (cms) :

OFC (cms) :

Estimated Gesth Age : 36+5 wk.

Current Obstetric History : (Booked) / Unbooked Case) to RCH

Maternal Age : 29yr Ht : 165cm Wt : 74.7kg BMI : Married Life : 6yr LMP : 28/10/25 EDD : 30/7/26.

Conception : Spontaneous or with Rx. : spontaneous.

Booked at what GA. : since conception AN Steroids Drugs / Doses : taken.

Last Scans Details : 9/7/26 - SLIUF, 34+4wk, cephalic, EFW : 2161gm

TT Immunization and Iron / Folic Acid :

MATERNAL RISK FACTORS

Age : ☐ <18 yrs ☐ > 35yrs

Consanguinity : ☐ Yes ☒ No

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

H/o PIH (after 20 weeks) / PE

How many Drugs / Doses / Since how long : -

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

IUGR - when detected :

Doppler (Increased Resistence / ADEF / REDF / ⓝ

Redistribution in MCA) / Ductus Venosus :

AFI : 12.5cm

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

Controlled or not, recent values, HbA1 values : Pre Gestational DM : conception on Tab metformin 500mg BD

Compliance with Rx : Inj Tresiba 7U (night).

Scans : LGA, TIFFA , Fetal Echo :

H/o Hypothyriodism : when diagnosed ? Medication?

Any other Chronic Medical Problems, when detected drugs ?

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

Infection : H/O, Fever Severe UTI

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

UTI : when @ 29+3 wk. Any culture : -

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

Medication during Pregnancy : Duration :

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

PAST OBSTETRIC HISTORY

G: ..... P: ..... A: ..... L: .....

Sl. No.	Age	GA wks	B. W	Gender	Significant	Details
G1	5yr	FT	3.8 kg	Female	GDM on diet, uneventful.	
G2		1½ mon			MTP, MERPC 2023	

PERINATAL HISTORY

Treating Obstetrician : Dr. Bhavana Hospital : RCH, VKP. ☑ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig) LSCS.

Second stage (> 2 hours after dilation)

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

Specify the reason : non-reassuring NST, previous LSCS

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☐ Normal ☐ Suspicious ☐ Pathological

MSL : .....

Resuscitaion : ☐ Yes ☑ No

Cord ABG : pH : 7.33, pCO_2: 39.3, pO_2: 30, Lac: 2.3. HCO_3: 20.6, BE -4.9.

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

NEONATAL RESCUSTITION DETAILS

APGAR SCORE

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

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

1 Minute	5 Minutes	10 Minutes
1	2	2
2	2	2
2	2	2
2	2	2
2	2	2
TOTAL 9/10.	10/10	10/10.

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

Snapee 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)		
Brith Weight	> = 1kg (0)	750 - 999 (10)	< 750 (17)	
SGA	> 3rd percentile (0)	< 3rd (12)		

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :

Baby delivered via Emergency LSCS in Breech presentation

CIAB

↓

cord clamping done within 30 sec received in prewarmed linen

↓

Baby kept under warmer, dried oronasal suction done tactile stimulation ⊕

↓

cord clamped & cut under aseptic conditions

↓

Inj vit K given & shifted to mother side

↓

Shifted to mother side.

Investigation details in previous Hospital :

Feeding History :

Past History :

Family History :

Socio Economic History :

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 0 D 8 H (F)
Dr. ATLURI KUNDANA PRIYA

GENERAL EXAMINATION ON ADMISSION

General Disposition : c|T|A-good

VITALS : Temperature : ..... HR : 154/min RR : 54/min NIBP : ..... CFT : <2sec

Color of the extremities : pink

Jaundice : - Pallor : - SpO2 : 100% @RA

Anthropometry : Birth Weight : 2.723kg Length : ..... HC : ..... Present Weight : .....

Ponderal Index : ..... (AGA) : ..... SGA : ..... LGA : .....

HEAD TO TOE EXAMINATION

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

Facies : (Any Facial Dysmorphism) no abnormal facies

NECK and CLAVICLES :
Range of Motion :
Asymmetry :
Masses :
} (n)

EYES :
Symmetry : -
Red Reflex : - not done
Discharge : -

EARS, NOSE MOUTH and THROAT :
Ear set / Shape :
Periauricular Pits / Tags :
Nasal shape / Patency :
Palate :
Gums :
Lips :
Tongue :
} normal.

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
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Thorax : -

BREASTS : Position of Nipples and Number : 2

ABDOMEN and UMBILICUS :
Shape :
Organomegaly :
Bowel Sounds : (N)
Umbilical Stump : 2A+1V
Discharge : -

GENITILIA :
Labia / Hymen : ✓
Testicles/penis :
Anus : patent

HERNIAL ORIFICES -

TRUNK and SPINE : -

SKIN LESIONS : -

EXTREMETIES :
Fingers / Toes :
Deformities : (N)
Hip Joint Examination
Arms / Legs :
Mobility :

SYSTEMIC EXAMINATION

Respiratory System :

Breathing Pattern : ☑ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress : RR : 54/min. SCR / ICR / See - Saw breating : -

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

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

Settings :

SpO_2 : 100% @RA Auscultation : BAE (+) Breath Sounds : NVBS (+) Added Sounds : -

Cardiovascular System :

HR : 154/min BP :
Precordial Activity : -
Femoral Pulses : felt
Murmurs : -
Other Peripheral Pulses :
Signs of Cardiac Failure : -

Abdomen :

Shape :
Hernia orifice : -
Palpation : Soft
Anal Patency : (+)
Palpable masses : -
Umbilical Cord : 2A +1V
Abdominal girth :
First urine passed : -
Meconium passed : ✓

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
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...ctual functions (Sensorium) : .....

State of wakefulness : .....

Prechtle Score : .....

Nerves : C|T|A - AGA(+)

.....

Motor System :

Passive Tone : } normal.

Active Tone : }

Neonatal Reflexes : .....

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

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

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

Any Congenital Anomalies : .....

.....

Diagnosis : late Preterm | LICS | GA = 36+5wk | CUAB | B.wt = 2.723kg | AGA | IDM.

.....

FOOT PRINTS

Left Side :

Right Side :

Taken by

Dr. Kundana Priya
Reg.No. TSMC/FMR/97354

Resident Doctor :

Signature : .....

Name : Sumedha

Date & Time : .....

Consultant :

Signature : .....

Name : Dr. KUNDANA

Date & Time : 25/7/26 9pm.

Information given by: ☐ Family ☐ 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:

.....

.....

.....

.....

.....

.....

.....

.....

Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

Feeding: ☐ 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: GRBS @ 10:42 AM = 85 mg/dl.

Final Diagnosis: cord care
warmth care
Breastfeeding 2nd hrly flb burping.
GRBS monitoring 6th hrly
vaccination as per schedule
OAE, VBR, NBS before discharge

Noted by + Azus

Doctor Signature: .....

Doctor Name: .....

Date & Time: .....

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 0 D 8 H (F)
Dr. ATLURI KUNDANA PRIYA

(1)

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
26/7/26 11:30 Am	S/B Resident (HOL - 24; G3 P1 L1 A1)	
	LTPT (36+1 wks) / Em LSCS (non reassuring NST + prev LSCS) / Baby girl / CRAB / B.wt - 2.723 kg / AGA / Infant of GDM mother	
	- No new concerns	Plan
	- Tolerating feeds well	- Cont + Cont same instructions
	U } passing	- NAM + Cord Care
	S }	
	- Wt - 2.68 kg (↓43gm)	- GRBS - 6 th hrly (prefeed) ↓ till 48 HOL (Inform if < 60 mg/dl)
	M } Same	✱ OAE - today ✱
	B }	TCB - b/f d/c
	GRBS > 65 mg/dl	- Monitor vitals
		- Rolo checking
		- Informed
	O/E - Euthermic	
	CVS - S1S2 ⊕	Dr. Kundana Priya Reg.No.APMC/FMR/97354
	RS - NAE ⊕	Dr. KUNDANA
	PA - soft	26/7/26
	C/ALT - good	5pm
	CRT < 3 sec	

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/7/25	S/B Dr kundana	
SPO		plan
	N cby reviewed	- OA c d/w
		- TCA d/w
	No new Concerns	↓
	Electrically feeds well	if > 12 mg/dl
	↓ plan	↓
		start dapt
		- CUS + Cont. same
	Hemodynamically stable	instructions
	@review	noted by sony 27/7/25 @ SAM

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M1D (F)
Dr. ATLURI KUNDANA PRIYA

(2)

Rainbow Children's Hospital
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/7/26: 10:00AM	S/B Resident: Late PT (36+5wks) / Em. LSCS / GDM / CIAB / 2.723kgs	AGA / IOHB / NNHB
	O/E Baby alert, euthermic,	
	vitals - stable	
	CFT A (N), CRT < 3sec.	
T. Wt => 2.59kgs		
	CVS, RS, P/A — (N)	
		Adv:
T. Wt => 12.5 (wtloss => 4.9%)		Start DSPT, OBF + Burping q4h, vitals monitoring, OAE T/D. SBR/NBS (T/M) @
	M/B Jotne, U/M J passed	
		Dr. Kundana Priya Reg.No.APMC/FMR/97354
SBR: 10AM		Dr. KUNDANA 27/7/26 11pm. Noted by sushpla 27/7/26 at 6pm

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 1 D (F)
Dr. ATLURI KUNDANA PRIYA

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27.7.26	Lactation notes (Mrs. Ramyashree)	
	• Experienced Mother	
	• Confidently feeding the baby	
	• Advised to feed the baby every	
	• 2hrs	
	• More skin to skin	
	• f/u in OPD if needed -	
11:30am		
27/7/26 4:00PM	S/B Resident:	
	On DSPT	
	O/E Baby awake,	
	afebrile,	
	vitals - stable	
		Adv:
	CVS	
	RS	→ c/r
	P/A (N)	
		→ CBR / NRS @ 10 Am T/m
	OAE (N)	
For Kundana Priya 27/7/26 5pm		Continue)
		Noted by Sushila 27/7/26 at 6pm

Dr. Kundana Priya APMC/FMR/97334 (stamp)

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 0 D 8 H (F)
Dr. ATLURI KUNDANA PRIYA

(3)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/7/26: 8:20 AM	S/B Dr. Kundana:	
	Late PT (36+5W) / GM-LSCS / GM / C(AB) / 2.723 kg / AGA / 10HM / NNHPB.	
	O/G Baby asleep, euthermic, vitals - stable, c/I/A (N), CRT < 2sec.	
	CVS - S1S2 (+)	
	RS - BAE (+)	
	P/A - Aff	
	Adv: SBR 10AM	
	If < 10 ~ d/s.	Noted by Sayeda 28/7/26 @ 12:30 pm
	Dr. Kundana Priya Reg.No.APMC/FMR/97354	
	Dr. KUNDANA 28/7/26 9AM	

Patient Sticker

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Your Right to a Safe Delivery

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 0 D 5 H (F)
Dr. ATLURI KUNDANA PRIYA

o. : RCH/ FRM / CLINICAL / 124

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

Rainbow® Children's Hospital
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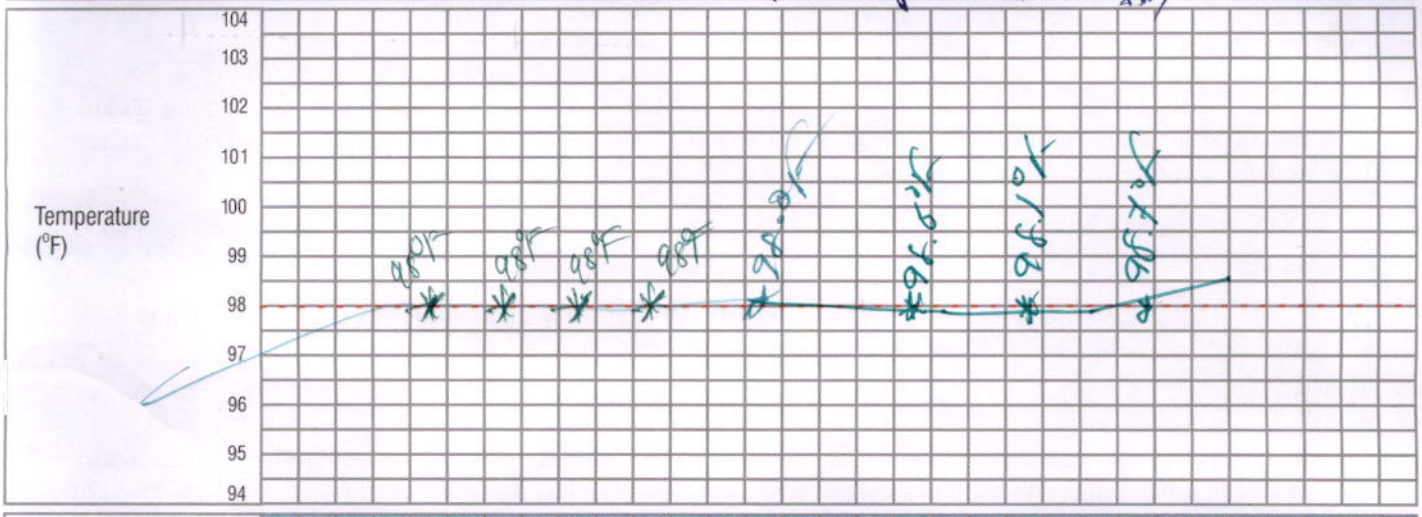
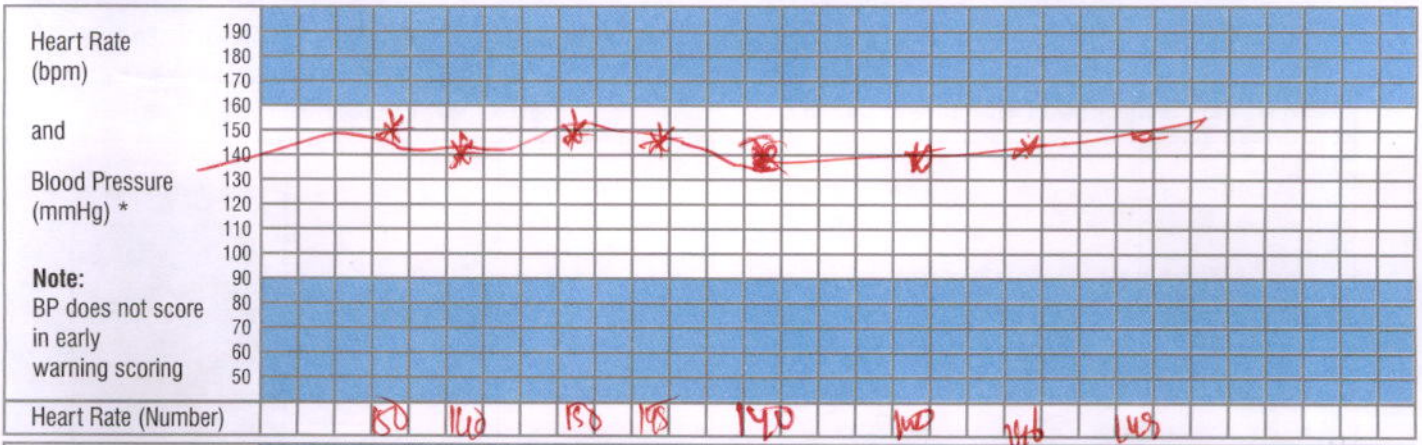
BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 25/7/26 Time: 11 Am | 1 Pm | 3 Pm | 5 Pm | 7 Pm | 11 pm | 4 Am | 8 Am

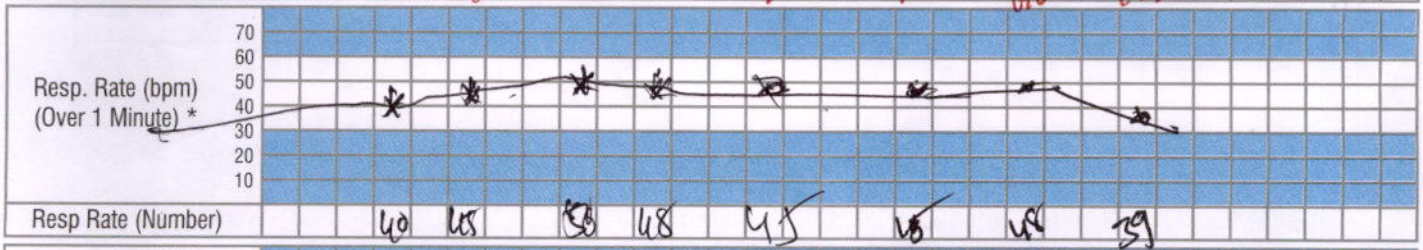
Doctor/Nurse/Family Concern?





Note: BP does not score in early warning scoring

Heart Rate (Number)	150	140	150	145	140	140	140	145



Resp Rate (Number)	40	45	50	48	45	45	48	39
Resp Distress: Mod/ Severe / None / Mild	✓	✓	✓	✓	✓	✓	✓	✓
Receiving O_2 (l/min)								
O_2 Saturations (%)	99	99	99	99	98	98	99	98
Conscious Level: Normal / Altered	✓	✓	✓	✓	✓	✓	✓	✓
GCS *	–	–	–	–	–	–	–	–
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	0	0
Observer's Initials								

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

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

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)

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

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

INFANT (<1 year)
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: 25/7/26 Time:

Doctor/Nurse/Family Concern?	9 AM	12 PM	3 PM	4 PM	7 PM	4 AM	8 AM	7 AM
Temperature (°F)	98.5	98.8	98.2	98.4	98.4	98.2	98.2	98.3
Heart Rate (bpm) and Blood Pressure (mmHg) *								
Heart Rate (Number)	139	145	142	143	146	140	138	137
Resp. Rate (bpm) (Over 1 Minute) *								
Resp Rate (Number)	40	45	46	40 - 42		44	48	39
Resp Distress: Mod/ Severe / None / Mild	✓	✓	✓	✓	✓	✓	✓	✓
Receiving O_2 (l/min) O_2 Saturations (%)	98	99	99	98	98			
Conscious Level: Normal / Altered	NA	NA	NA	NA	NA	✓	✓	✓
GCS *	NA	NA	NA	NA	NA	✓	✓	✓
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	0	0
Observer's Initials								

Note: BP does not score in early warning scoring

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
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ERVATION and EARLY WARNING SCORING TOOL

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Date	Time	Early Warning Score	Date	Time	Name

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VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M1D (F)
Dr. ATLURI KUNDANA PRIYA

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

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

Rainbow® Children's Hospital — It takes a lot to treat the little.
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 27/7/26

Date/Time	9 PM	12 PM	2 PM	5 PM	8 PM	11 PM	3 AM	7 AM
Doctor/Nurse/Family Concern?								
Temperature (°F)	98.2°F	98.3°F	98.6°F	98.6°F	98.6°F	97.9°F	98.3°F	98.2°F
Heart Rate (Number)	141	137	136	144	150	142	139	144
Resp Rate (Number)	39	36	34	49	50	47	44	40
Resp Distress (Mod/Severe / None/Mild)	N	N	N	N	N			
Receiving O_2 (l/min) / O_2 Saturations (%)	99	98	97	15	15	18	15	15
Conscious Level (Normal / Altered)	N	N	N	N	N			
GCS *	N	15	15	15	15	15		
TOTAL SCORE (Number of shaded boxes)	0	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	0	0
Observer's Initials	S	CS	CS	Sa	Pr	k	k	k

Temperature (°F) scale: 104, 103, 102, 101, 100, 99, 98, 97, 96, 95, 94

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

Note: BP does not score in early warning scoring

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

ACTIONS		
NB: Scores 3 should be recorded overleaf	Score 1	: Continue normal observation by staff nurse
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Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 1 D (F)
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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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

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Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 1 D (F)
Dr. ATLURI KUNDANA PRIYA

. : RCH/ FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

Rainbow® Children's Hospital
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BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	10	12
Doctor/Nurse/Family Concern?	Am	Am

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

99.9°F 98.1°F

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)	141	140

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

Resp Rate (Number)	49	41
Resp Distress: Mod/ Severe / None / Mild	N	N
Receiving O_2 (l/min) O_2 Saturations (%)	99	99
Conscious Level: Normal / Altered	N	N
GCS *	N	N
TOTAL SCORE Number of shaded boxes	0	0
Pain Score	0	0
Observer's Initials	S	S

Noted by Dr. Jayesh @ 12.30pm 28/7/26

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
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R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D5H (F)
Dr. ATLURI KUNDANA PRIYA

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Your Right to a Safe Delivery

FLUID CHART

Sheet No. : 0

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							
25/7/26	08:00 am											
	09:00 am											
	10:00 am	DBF										Megha
	11:00 am											25/7/26
	12:00 pm	DBF										2pm
	01:00 pm											
Total Intake :						**Total Output :**						
25/7/26	02:00 pm	DBF								✓		Megha
	03:00 pm											25/7/26
	04:00 pm	DBF										8pm
	05:00 pm	DBF										Crying
	06:00 pm											25/7/26
	07:00 pm	✓					✓			✓		@ 8pm
Total Intake :						**Total Output :**						
25/7/26	08:00 pm	DBF										Sonu
	09:00 pm											26/7/26
	10:00 pm	DBF										@ 8am
	11:00 pm						✓					
	12:00 am	DBF								✓		
	01:00 am											
Total Intake :						**Total Output :**						
26/7/26	02:00 am	DBF										Sonu
	03:00 am						✓					26/7/26
	04:00 am	DBF										@ 8am
	05:00 am											
	06:00 am	DBF					✓			✓		
	07:00 am											
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		Total 24 hrs. Output	Urine – 4 times Stool – 4 times

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

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							
26/7	08:00 am									✓		
	09:00 am	DBF										
	10:00 am											
	11:00 am	DBF					✓					
	12:00 pm											
	01:00 pm	DBF								✓		
Total Intake :						Total Output :						
26/7	02:00 pm											
	03:00 pm											
	04:00 pm	DBF					✓					
	05:00 pm											
	06:00 pm	DBF								✓		
	07:00 pm											
Total Intake :						Total Output :						
26/7	08:00 pm										1	
	09:00 pm	DBF										
	10:00 pm						✓			✓		
	11:00 pm	DBF									6	
	12:00 am									✓		
	01:00 am	DBF									1	
Total Intake :						Total Output :						
27/7	02:00 am										1	
	03:00 am	DBF										
	04:00 am											
	05:00 am	DBF									0	
	06:00 am						✓			✓		
	07:00 am	DBF									1	
Total Intake :						Total Output :						

Total 24 hrs. Intake	1300	Total 24 hrs. Output	Urin – 6 times Stool – 4 times

Docu. No. : RCH /FRM / CLINICAL / 092

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0Y0M0D8H (F)
Dr. ATLURI KUNDANA PRIYA

Rainbow® Children's Hospital
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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							
27/7	08:00 am		DBF							✓		Sumathi 27/7 8PM
	09:00 am											
	10:00 am		DBF								0	
	11:00 am											
	12:00 pm									✓		
	01:00 pm		DBF									
Total Intake :						**Total Output :**						
27/7/26	02:00 pm											
	03:00 pm		DBF									
	04:00 pm									✓	0	Renuka 27/7/26 8PM
	05:00 pm		DBF									
	06:00 pm											
	07:00 pm		DBF									
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm		DBF									
	10:00 pm											
	11:00 pm		DBF							✓	0	Bhanu 27/7/26 10pm
	12:00 am											
	01:00 am		DBF									
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am		DBF									
	04:00 am											
	05:00 am		DBF								0	Bhanu 28/7/26 7am
	06:00 am											
	07:00 am		DBF							✓		
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		Total 24 hrs. Output	

VIH-00207317 IP-00060861
Baby B/O PENMETSA HANUMA
25-07-2026 0 Y 0 M 0 D 8 H (F)
Dr. ATLURI KUNDANA PRIYA

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							
28/7/26	08:00 am		DBF							–		
	09:00 am						–					
	10:00 am		(1)DBF							–		
	11:00 am									–		
	12:00 pm		DBF									
	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 :**						

Noted by Sayeda
28/7/26 @ 12:30 pm

Total 24 hrs. Intake		Total 24 hrs. Output	