

ANC-00016518 IP28-00004650
Baby Of SWETHA S
25-06-2026 0 Y 0 M 3 D (M)
Dr. SHOBANA RAJENDRAN



Rainbow
Children's
Hospital

BirthRight
BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

DISCHARGE TRACKING SHEET

UHID : ANC - 16518 FLOOR: Niw CONSULTANT NAME: DR. Shobana ,

ACTIVITY	IN TIME	OUT TIME	REMARKS	<To be filled by Admin>
Activity Sheet updated by Nursing	10.45 am.		Vybalu les ony	
Activity Sheet updated by Pharmacy			Far Far	

ACTIVITY RECORD FOR BILLING

Name: Baby Of SWETHA S 25-06-2026 0 Y 0 M 0 D 17 H (M)
 UHID No: Dr. SHOBANA RAJENDRAN
 Date of Admission: 25/6/26 Time: 10:30 Date of Discharge: 28/6/26 Time: 10:30
 Room / Bed No: 289 Ward: 188 Suggested Billable bed type: 188

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
25/6/26	@ 4:51 pm	mother came home hospital	RCH (Anna naya)	<u>[Signature]</u>

CROSS CONSULTATION VISIT

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

[illegible][illegible]

MEDICAL EQUIPMENT (WARD & ICU)

[illegible]

[illegible]

Date: 29/6/20

Time: 1 hr

Prepared By:

Staff Nurse

Shift / Ward

Billing Assistant

Billing Supervisor



NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : MRS SWETHA Age : 25 Father's Name : _____ Age : _____
 Date of Birth : 25/6/26 Date of Admission : 25/6/26 UHID No. : _____
 NICU Consultant : Dr. SHOBANA Referring Consultant : _____

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

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

BIRTH INFORMATION

Name : B/o SWETHA Mother's Blood Group : O POSITIVE
 Gender : ☐ M ☐ F Blood Group : _____ Birth Weight (gms) : 2.84 Length (cms) : _____
 Date of Birth : 25/6/26 Time of Birth : 7:26am OFC (cms) : _____
 Place of Birth : Mother's care hospital Estimated Gesth Age : 39 weeks

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 25 Ht : _____ Wt : _____ BMI : _____ Married Life : _____ LMP 23/9/25 EDD : 30/6/26

Conception : Spontaneous or with Rx : _____

Booked at what GA : _____ AN Steroids Drugs / Doses : _____

Last Scans Details : 8/6 - 32W4 36W+4d TRUO-292+422

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 Resistance / ADEF / REDF /

Redistribution in MCA) / Ductus Venosus : _____

AFI : _____

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

Controlled or not, recent values, HbA1 values : _____

Compliance with Rx : _____

Scans : LGA, TIFFA, Fetal Echo : _____

H/o Hypothyroidism : when diagnosed ? Medication?

On 7. LEVOTHYROXINE 75mg.

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

P: A: L:

Sl. No.	Age	GA wks	B. W	Gender	Significant	Details
	primigravida					

PERINATAL HISTORY

Treating Obstetrician : Hospital : Mother's care ☐ 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 : <u>thin ms2</u> Resuscitation : ☐ Yes ☐ No Cord ABG : Placenta : (weight, surface, No. of cotyledons, calcifications, malformations, clots etc :
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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

TOTAL

8/10 9/10

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

Comments :

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :



nicot after birth.
delivered @ mother's care
hospital

↓
developed distension in
form of tachypnea, minimal
S.C.

↓
started on @ 2L/min

1/2/20 distension baby referred
to NICU for further
management

Investigation details in previous Hospital :

Feeding History :

ANC-00010516 IPZ8-00004030
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Dr. SHOBANA RAJENDRAN



Family History :

Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition :

VITALS : Temperature : HR : 160/min RR : 85/min NIBP : CFT :

Color of the extremities : Pink

Jaundice : Pallor : SpO2 :

Anthropometry : Birth Weight : 2.83 kgs Length : HC : Present Weight : 2.82 kgs

Ponderal Index : AGA : SGA : LGA :



HEAD TO TOE EXAMINATION

HEAD :	Fontanelles : ☒ Sutures : ☒ Shape / Moulding : ☒ Edema / Bruising : ☒ Size - (H.C.) : ☒
Facies : (Any Facial Dysmorphism)	
NECK and CLAVICLES :	Range of Motion : ☒ Asymmetry : ☒ Masses : ☒
EYES :	Symmetry : ☒ Red Reflex : ☒ To be checked. Discharge : ☒
EARS, NOSE MOUTH and THROAT :	Ear set / Shape : ☒ Periauricular Pits / Tags : ☒ Nasal shape / Patency : ☒ Palate : ☒ Gums : ☒ Lips : ☒ Tongue : ☒
THORAX and BREASTS :	Shape of Thorax : ☒ Position of Nipples and Number : ☒
ABDOMEN and UMBILICUS :	Shape : ☒ Organomegaly : ☒ Bowel Sounds : ☒ Umbilical Stump : 20 A 10 V Discharge : ☒
GENITALIA :	Labia / Hymen : ☒ Testicles / penis : ☒ Anus : Patent
HERNIAL ORIFICES	
TRUNK and SPINE :	
SKIN LESIONS :	
EXTREMITIES :	Fingers / Toes : ☒ Arms / Legs : ☒ Deformities : ☒ Mobility : ☒ Hip Joint Examination : ☒

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SYSTEMIC EXAMINATION

Respiratory System :

Breathing Pattern : ☐ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress : RR : 85/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 : On HFNC ASLO 602.

Spo2 : 97.202 Auscultation : B/LAS (4) Breath Sounds : Added Sounds :

Cardiovascular System :

HR : 160/min BP : Precordial Activity :

Femoral Pulses : ++ Murmurs : Nil

Other Peripheral Pulses : Signs of Cardiac Failure :

Abdomen :

Shape : (N) Hernia orifice :

Palpation : soft Anal Patency : Patent

Palpable masses : Umbilical Cord :

Abdominal girth : First urine passed : Passed

Meconium passed : Meconium stain (4)

Nervous System : Higher intellectual functions (Sensorium) :

State of wakefulness :

Prechtle Score :

Nerves :

Motor System :

Passive Tone : (N)

Active Tone :

Neonatal Reflexes :

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

Moro's : DTR :

ATNR : Skull and Spine :



Any Congenital Anomalies :

Diagnosis :

Twin (34+1) | NVD / BOY | Thin MSL / RDS.

FOOT PRINTS

Left Side :

Right Side :

Resident Doctor :

Signature :

Name :

Date & Time :

Consultant :

Signature :

Name :

Date & Time :

PLEASE FILL UP THE FOLLOWING DETAILS

1. Name of the referring Doctor :
2. Name of the referring Hospital :
Address :
Contact Numbers :
3. Contact Details of the referring Doctor :
Mobile No. : E-mail ID :
4. Name of the Doctor in Rainbow Team :

..... on whose name the patient is being referred.



AT THE TIME OF TRANSFER TO THE WARD

Final Diagnosis :

Present Issues :

Vital : ☐ HR : ☐ RR : ☐ BP : ☐ SP02 : Weight :

Any Oxygen requirement :

Systemic :

Medications :

Plan during ward follow up :

Feeding Plan at the time of shifting :

Screenings done during NICU Stay :

NSG :

Hearing Screen :

ROP :

TFT :

NP2 :



CROSS CONSULTATION FORM

Doctor Name: Dr. Giridhar Date: 27/6/26 Time: 1230pm
Diagnosis: LP7 / RDS

Hospital: RCH (Anna nagar)

Type of Referral :

☐ Emergency

☒ Urgent

☐ Non Urgent

Referred for: ☐ Opinion ☒ Co-Management ☐ Transfer of care

Reason for Referral: If for concurrent care specify the particular need, especially in the absence of a second diagnosis:

Signature: _____

Findings and Recommendations :

IVC collapsed - can ↑ fluids

PFO L→R shut

Mild TR. TR gradient 23 mm Hg.

No PAH.

Good bi ventricular systolic fn. FS-329

① Aortic arch. EF-649.

No PDA.

All pulmonary veins to LA.

Plan
1. ↑ fluids

Imp:- Structurally Normal heart
Good bi ventricular systolic fn.
IVC collapsed.

Consultant :

Name: Dr. Giridhar Signature: [Signature] Date & Time: 27/6/26

OBSTETRIC CONSULTATION FORM

Doctor's Name: _____ Date: _____ Time: _____

Diagnosis: _____

Hospital: _____

Referral for: ☐ Opinion ☐ Co-Management

Reason for Referral: _____

Need, special: _____

Findings and Recommendations:

Consultant: _____

Name: _____ Signature: _____ Date & Time: _____

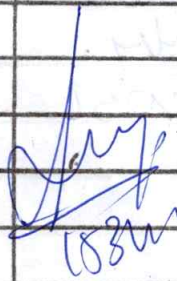


PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	SIR Dr. Shobana	
①	HFNC - 5L 2/02	
②	To start ventura feeds 15 ml.	
26/6/26 9:15 AM	C/S/B & discharge.	
	Δ - Term / NVD / male / thin MSF (V) / RDS.	
	BWt - 2.4	BWt - 2.8 kg
		TWt - 2.8 kg
	RS - pink, B&P NO added sounds	
	RR - 84/min ten posteriorly.	
	On HFNC FiO ₂ - 35% flow 5L.	
	(26/6) RR - 84 - 88 bpm. Unresponsive	
	not happy.	
	CVS: pink peripheral warm	
	pulse well felt	
	S/S NO urine	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	HN-153. BP-63/41	
	not on noninvasive support	
	CNS- AP at lower	
	cyt-average	
	none	
	no seizures / icu	
	not on ABP	
	P/A: soft BS ⊕	
	Bowel opened	
	On 20 ml feeds (83ml/kg/day)	
	P/B- U/O - 1.9ml/kg/hr	
	not on IVP	
	Serum: NOT R	
	not on ABP	
		
		
	153hr	



(3)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	CNS - plan Benzo	
	P/A - ↑ 25ml every 30ml.	
	To start SSR.	
	To do CBC, CRP, to do blood glt. if not seen	
	<i>[Signature]</i>	
	<u>8/B.D. Raghu</u>	
27/6/26 9:30am	Term (39 weeks) / Boy / MSc / DOL - 48 hrs.	RDS / B-cof = 2.85 ? MAS W P-cof = 2.88 kg
	RS - pink, B/C @ @, clear	
	RR = 78/min, ICRG	
	CRP = 8-9 spaco, <i>[illegible]</i> matter, mild <i>[illegible]</i>	
	EC HFAx. 54/30/1	
	CNS - pink, ppel. @ velen, CRT < 350	
	HR = 135/min, BP = 73/62(66) cuff	
	S/S @ No meent.	ECAD - <i>[illegible]</i> No Biologs
	CNS = AP, C/T/A = AGA	
	No febr / Seizures	(P.T. - 8)



(C)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/6/25 9:30am	P/A, soft, no distention. on 30ml/kg 2H feed (~ 125ml/kg/ds) Bowels opened 6 times. F/E = U.O = 2.09 ml/kg/h. No IVF Sepsis = NOTI, CRP = 58. Tc = 15000 N69C24 Pct = 2 lach on (D2) PIPIT2	<i>[Signature]</i> 12/6/25
28/6/25 9am	<u>S/B Dr. Raghav</u> Term (39 weeks) / Boy / Misc / RDS / ? 2 hrs / B.wt = 2.8 kg DOL = 72 hrs T.wt = 2.24 kg (166g) Rs - pink, B/C AE @, clear. RP = 70/min, TCR @ on NC 2/min, SpO₂ = 94% Cos - pink, ppul @ ven. CAT = 32. HR = 160/min, BP = 66/45 (53) cuff. S/S₂ @, No murmur. Cas - AF, C/TA = AGA No jerk. No ASDs.	<i>[Signature]</i> p-r-r

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/6/26 9.30am	PIA = 80% , no distention on 80ml/62H feeds. (no 125ml/kg/day) Bowels opened 3 times.	
	F/E = 4.0 = 2.24 ul/kg/day No IUF	
	Sepru = NOTI , CRP = 58 Bed cl.	
	(13) PIPITAZ	<i>[Signature]</i> 112182
28/6/26 11am	<u>S/B Dr. Thirugob</u>	
	CRP, fT₄, TSH, RP₂	
28/6/26 9.30am	<u>S/B Dr. Malini</u>	
	RS - On nasal cannula ↓ IL BAE+, clean PCR+	
	RR - 70 to 80/min SpO₂ - 99%	
	Circ - pink, perfusion good CRT = 2 sec LFT, no murmur	
	HR - 165/min, BP - 61/36/44	

Date & Time	Progress Notes	Doctor's Order
	P/A - soft, no distension not tolerating paladai feeds On 30ml @ 2lt	
	CNS - AF- Cep & actus good	
	Sepr - On 1/2 penta; Mood c/s - so far no growth	
	To do CRP U-2 fT ₄ , TSH	
		 11/280

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0 Y 0 M 2 D

(M)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/6/26 10am	S/B Dr. Shobana	
	- Remove OG	Full Palate today.
	- Stop O ₂ .	
	- Rpt C-X-R now.	
	- Trm 'D'	
	- Supine / prone	
	↳ better.	
	- Stop Abx.	
29/6/26 10am	S/B Dr. Purnima C	
	Term / boy / MSL / RDS / 2 MAS	
	(39w6)	
	DOL- 96 hrs	but = 2-8 hrs
		Tut = 2-980 hrs
	RS on NC O ₂	c 0.4 L/min ✓ C-X-R-now
	Variable Tachypnea	
	RR- 60-98/min	; SpO ₂ = 79.5-100
	B/L breath sounds (+)	
	field Jer (+)	
	central retraction (+)	

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Baby Of St
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0Y0M3D

(M)

25-06-2026
Dr. SHOBANA RAJENDRAN



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<u>CVS</u>: Warm, Pink PPHF; HR = 142/min BP - 8/5-50 mmHg S2 (+) / M (-)	
	<u>CNS</u>: AF = 2 beats 4T/A - no duals no pain / seizures	✓ RR = 20
	<u>P/A</u>: left on feeds 3rd & 2nd hly (Palodai) no ICP Yp - ✓ stool - ✓	
	seps - Abx stopped (3 days Abx given)	- CRP - 58 → 9 (↓) - bldys - 5 mg
	<u>Plan</u>: CxR new. Puente 11/4/01	

Patient Sticker



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PROGRESS NOTES AND DOCTOR'S ORDER

[illegible]

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

[illegible]

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Sheet No: ①

REGULAR PRESCRIPTIONS

Weight 2.8 kg Ward N1C0

DRUG : <u>INJ PIPERACILLIN</u>				Date
				Time
Dose	Route	Frequency	Start Dt.	
280 mg	IV	Q12H	26/6	12 AM
Name & Signature of the Doctor Starting the Drugs:				
<u>153412</u>				
Additional Instructions:				
<u>(100mg/17/dose)</u>				
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				

Signature

VERIFIED BY : Name

Patient Sticker

Sheet No:

REGULAR PRESCRIPTIONS

Weight Ward

VERIFIED BY : Name Signature

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:																			
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