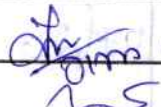


1

ACTIVITY RECORD FOR BILLING

Name: SNC-00030833 IP24-00008843
Baby Of SWAPNA .K
08-07-2026 0 Y 0 M 2 D (M)
UHID No: Dr. MONISHA R
Date of Ac: Date of Discharge: Time:
Room / Bed No: Ward: Suggested Billable bed type:

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
6/7/2026	@ 12pm	OT	NICU	
23/7/26	2PM	NICU	3rd Floor	

CROSS CONSULTATION VISIT

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
6/7/26 12pm	CBE, Blood Ck, grouping	8331 ✓	Jh 01/26
7/7/26 3AM	RBS (POCT) ✓	8359 ✓	(u)
7/7/26 9AM	CRP, urea, Creatinine electrolytes ✓	8380 ✓	} Don't oh
7/7/26	RBS (POCT) ✓	8395 ✓	
7/7/26	RBS (POCT) ✓	8396 ✓	
7/7/26 9AM	RBS (POCT) ✓	8405 ✓	0
7/7/26 3AM	RBS (POCT) ✓	8405 ✓	10
8/7/26 9AM	RBS (POCT) ✓	8443 ✓	Don't
8/7/26	TCB (8442) ✓	8442 ✓	Don't
7/7/26	RBS (POCT)		Don't
8/7/26	RBS (POCT) ✓	8464 ✓	Don't 01/26
9/7/26 @ 1AM	RBS (POCT) ✓	8466 ✓	Don't 01/26
9/7/26 9AM	RBS (POCT) ✓	8495 ✓	Don't
9/7/26 11:30AM	SBR, CRP ✓	8498 ✓	Don't
9/7/26 9AM	RBS (POCT) ✓	8550 ✓	ae
	<u>Radiology</u>		
6/7/26 12pm	X-ray chest ✓	4418 ✓	Jh 01/26
6/7/26 4pm	X-ray ✓	4426 ✓	or
13/7 12pm	X-ray chest ✓	4602 ✓	Jh 01/26
18/7	X-ray chest ✓	4761 ✓	LS

MEDICAL EQUIPMENT (WARD & ICU)

[illegible]

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature
6/7/26	IV line placement	① ✓	6546 ✓	<i>[Signature]</i>
6/7/26	E.T Intubation	① ✓	6547 ✓	<i>[Signature]</i>
7/07/26	SU Placement	① ✓	4842 ✓	<i>[Signature]</i>
7/07/26	IV placement	① ✓	5821 ✓	<i>[Signature]</i>
14/2/26	IV placement	① ✓	6519 ✓	<i>[Signature]</i>
18/2/26	IV Placement	① ✓	7589 ✓	<i>[Signature]</i>
21/2/26	IV placement	① ✓	8185 ✓	<i>[Signature]</i>

ANY OTHER INFORMATION:

Date: Time: Prepared By:

Staff Nurse	Shift / Ward <i>Nice</i>	Billing Assistant	Billing Supervisor
-------------	-----------------------------	-------------------	--------------------

ACTIVITY RECORD FOR BILLING

2

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Your Right to a Safe Delivery

SNC-00030833 IP24-00008843

Name: Baby Of SWAPNA .K
08-07-2026 0 Y 0 M 1 D (M)

Dr. MONISHA R

UHID No: Consultant: Dept:

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

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

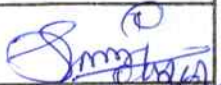
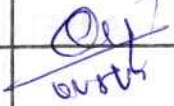
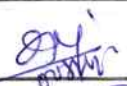
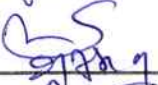
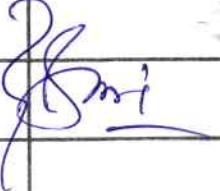
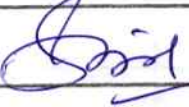
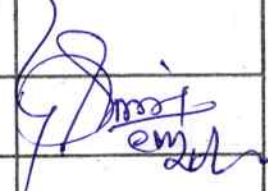
WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

CROSS CONSULTATION VISIT

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
12/07/26	TCB (POCT) ✓	8699 ✓	
13/7/26	RBS (POCT) ✓	8742 ✓	
13/7/26	RBS (POCT) ✓	8762 ✓	
14/7/26	CBE, CRP, Nat, cat, } ALP, PO4 ✓	8768 ✓	
14/7/26	VBG (POCT) ✓	8769 ✓	
15/7/26	RBS (POCT) ✓	8799 ✓	
16/7/26	RBS (POCT) ✓	8851 ✓	
17/7/26 8am	CBE, CRP ✓	8922 ✓	
18/7/26 130pm	Urine R/E ✓	9028 ✓	
18/7/26 3:30pm	Respiratory Biome ✓	9039 ✓	
18/7/26	VBG ✓	9050 ✓	
18/7/26	RBS ✓	9050 ✓	
19/07/26	Biol Ue in sensitivity ✓	9067 ✓	
19/7/26	procalcitonin ✓	9067 ✓	
19/07/26	KOH stain for fungal elements ✓	9043 ✓	
19/07/26	NS CT ✓	4768 ✓	
19/7/26	USG Abdomen ✓	4768 ✓	

MEDICAL EQUIPMENT (WARD & ICU)

[illegible]

PROCEDURE

[illegible]

ANY OTHER INFORMATION:

Date: 23/2/26 Time: 2pm

Prepared By:

Staff Nurse

f Nurse

Shift / Ward

MICH
~~Lamy & Co~~
 Boston

Billing Assistant

Billing Supervisor



1

Date & Time	Progress Notes	Doctor's Order
	C/S/B - Dr. Ananthi	
<u>6/7</u>		
12:30 PM	PT (31+5) AGA LSCS CIAB Male 1.376 kg	
	Mother :- uncontrolled G- HTN on Labetalol & Nifedipine + HELLP Synd (partial)	
	Baby shifted to NICU du/o Resp distress & PT	
	○ IE - Active Pink PPWP HR - 138/min PR - 66/min ICR ⊕ intermittent grunting ⊕ SE - WNC	
	Adm - CXR - IVF TFR @ 80ml/kg - CBC, VBG INS. Calcium 28mg .lv	



(2)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	VBG - PH-7.28 PCO ₂ -44.4 HCO ₃ -20 Lac - 1.7	
	CXR - B/L Retrocardiac opacity. - RDS.	
	CPAP 6/80 RR- 66-68/min. intermittent grunting spo ₂ - 93-97%	
	Adv - Plan surfactant adm	
16/7/22 6:17 7:30pm	Surfactant Adm under strict aseptic precaution Baby was intubated @ 3F ET @ 2.5ml/kg adm @ 2.5ml/kg in 3-4 aliquots.	
	Vitals RR- 140/min PR- on MV (set RR40)	
16/7/22	MV RR PEEP FiO ₂ spo ₂ - 97 SIMV-VC 40 5 30%	

Adv

SNC-00030833

IP24-00008843

Baby Of SWAPNA.K

08-07-2026

OYOMOD3H (M)

Dr. MONISHA R



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/27/26	S/B Consultant	
	31+5 wks	
	1376g	Em. GCS i/v/o maternal HELLP
		ANS last done 7 days back.
	① RDS: CPAP 6/40%.	
	↓	
	CXR S/o	2hr. Surfactant gm Cried @ birth
	RDS.	7hr. ↓ DROPPAP
		Simv + v c
		↓
		Extubated @ 5° of life.
		↓
		CPAP 6/25.
	② Hemodynamic stable.	
	Caffeine loaded	
	Neuro. ②	
	On IVF @ 80ml/kg/day	
	+ Trophic feeds	



Date & Time	Progress Notes	Doctor's Order
	On i.v ppter	<u>Plan</u>
	①	CPAP 6/25 Vitals monitoring
	②	Tropur feeds Int 2wly
	③	CBG 6th wly.
	④	Sf monitoring.
	Response 9/6/22	



3

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/7/26	C/S/B-	Dr. Anag.
8:00 PM.	△: PT (31 ¹⁵)	uncontrolled
9:00 AM	AGA / LSCS / male	GHTN + Perial HELP syndrome
	on Right up position.	
	→ Baby Intubated @ 4:30 PM	
	on CPAP 6/25.	
	Maintaining SpO ₂ 95 > 95%.	
	PR: 50-52/min.	
	CA Inj. Caffeine loading dose given.	
	Sepsis → on Inj. Piptar.	(Blood C/S sent)
	Nutrition → DUF	10% D 4ml/hr.
		TFF @ 80 ml/kg/day.
CBC	Circulation.	
↓		HR: 144/min.
		BP 55/35 (41).
		HR 144/min.
		CRS < 3 sec.
	CBC → 134 mg/dl	
	@ 8:00 PM.	
		Plan:
		1) Vitals monitoring
		2) W/F Desat/resp
		3) Inj. Piptar.
		4) Inj. Caffeine
		5) I/O chart.

(6 Neg)
on Anag

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Baby Of SWAPNA.K

08-07-2026

Dr. MONISHA R

OYOMODTH (M)



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/7	C/S/B - Dr. Ananthi	
10am	23 HOL	PMA - 31+6
	PT(31+5) / A GA / LSCS / Male	
	consent	
	RDS (Post surgical)	
	V/Q - on CPAP 6/25	
	PR - 56-58/min	
	SpO ₂ - 96-97%	
	PPWP	
	BP > 5th centile	
	Sepsis! - on IVS. PIPRAZ. D ₂	
	Blood c/s awaited.	
	Nutrition:- Feeds 1m/2hrly.	
	+ TFR 80ml/kg/day.	
	50gml. (IVF - 4.1ml/hr)	
	1.326kg	
	Urine - 2ml/kg/hr	
	Stool 2 times	
	CBG - 115 mg/dL	
	O/E - Active	
	pink	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	PPWP	
	Vitals (N)	
	CPT < 3secs	
	S/E - WNC	
	C/T/A - good	
	<u>Adv</u>	
	- vitals monitoring	
	- 2ml/2hrly .	cont IVF
	- Glycerine Enema stat.	
	after stool	↑ feed to 2ml/2hrly
	- INS caffeine . 7mg	
	- ↑ TFR at 2pm	100ml/Kg/day
	if Feeds	↑ 3ml/2hrly reached
		↓
		include TFR
	- Electrolytes	urea / creat / CRP
	Next IV line	
	- start Aminoven	1g / Kg / day
		(0.5ml/hr)



Date & Time	Progress Notes	Doctor's Order
7/7/26	S/B Consultant	
31+5 wks.	/ LSCs /	Maternal HELLP syndrome (Em. 28cs)
1376 D2		
1326g	① Respiratory : RDS (post surfactant)	
1-50g	Stable on CPAP 6/25	
	Stable	
	RR: 55-60/min	
	No apnoeas	
	SpO ₂ : 98-99%	
	② Feeds: Started on 2ml 2mly feeds	
	Tolerating	
	BS ⊕	
	P/A soft	
	③ Hemodynamics stable	
	on i-v piperaz	
	CBGs (N).	

SNC-00030833
Baby Of SWAPNA.K
08-07-2026
Dr. MONISHA R
IP24-00008843
0 Y 0 M 0 D 17 H (M)

7

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LESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		<u>Plan</u>
	CRP: 8	① Tapu FiO ₂ 23% → 21% PEEP 6 → 5
	Urea 19	
	Creat 0.9	Continue S/21 CPAP
	Na+ 140	② CBA 6 th day
		③ Ammonia @ 1g/kg/day
	0.5 ml/kg ←	
	TPR to 100 ml/kg/day	④ Feeds
		10 p.D 5 1 ml/kg
	⑤ Monitor for feed intolerance	2 ml
	Vomiting	4 feeds ↓
	greenish aspirate	4 ml
	AA > 2cm	4 feeds ↓
		6 ml
	⑥ TCB home nursing	3 ml/kg
	If monitoring	4 feeds ↓
		8 ml
		Continue
		3 ml/kg
	⑦ Caffeine maintenance	

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

SNC-00030833
Baby Of SWAPNA.K
08-07-2026
Dr. MONISHA R

IP24-00008843

0Y0M1D (M)



9

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/7/26 9AM	D3. Δ - 31 ⁺ 5 weeks / LSCS / Maternal HELLP syndrome B.W - 1376 P.W - 1326 P.W - 1282 (44 gms) Stable on CPAP Amines $\rightarrow$ 6.8% Vitals: RR - 54/min SPO ₂ - 96% HR - 134/min No apneas	Dr. SHANMUGATHA RDS (post surfactant) 5 pcp 21% FiO ₂
	② Feeds $\rightarrow$ 2ml/kg @ 2 Hrs $\sim$ 72ml (52ml/kg/day) Fluids $\rightarrow$ 3ml/hr (10% D) $\sim$ 72ml (52ml/kg/day) Amines $\rightarrow$ 0.5ml/hr $\sim$ 12ml (19ml/kg/day) 5.4 (H) 6.4 (C) TV $\sim$ 113ml/kg/day	
	③ Hemodynamics stable Cann - 2ml/kg/hr Blood - 5 times Plan	
Dr. Inf: Piptaz (D3) Inf: Ceftriaxone		1) TLC today 2) CBC @ 6 Hrs 3) Continue CPAP 4) Glycemi STAT 5) Continue. Give feeds until
Signature 156		6) Ammonia @ 1.5 g/kg/day baby passed



16

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/7/26	- +V - 130 ml / day - tsa - Q8Hly Position: RU - 4 hr LU - 2 hr Pnau - 4 hr - Check TCB in the morning.	
8/8/26	<u>S/B Consultant</u> <u>31+5 weeks</u> / RDS (post surfactant) <u>32+1 PMA</u> WT 1282g (-44g) ① Respiratory: Stable on CPAP 5/21 No dissem / apnoeas on caffeine -	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	② Feeds:	Following feeds Reached 50 ml/kg/day
	<u>Plan</u>	
	AA @ 1.5 g/kg/day → 0.8 ml/hr	
	130 ml/kg/day	<u>IVF</u> <u>Feeds</u>
	= 169 ml	3 ml/hr 8 6 ml
	AA = 20 ml	↓ 4 feeds
	Deys = 6 ml	↓ 8 ml
	<u>140 ml</u>	↓ 4 feeds
		↓ 10 ml
	③ Watch for feed intolerance	↓ 4 feeds
	④ Continue i.v. pipraz	↓ 12 ml
	⑤ CBh 8m hily	↓ 4 feeds
	⑥ Follow Bld c/s	↓ 1 ml/hr 14 ml
	Next i.v line } SBR	↓ 4 feeds
	Change } CRP	↓ 16 ml
		Stop



12

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/7	c/SIR - Dr. Aarthi	
8pm	31+51 RDS (Post Surfactant) Maf	
	V/Q :- CPAP 5/21 RR- 52/min SpO ₂ - 97% PPWP - INJ. Caffeine	
	Feeding :-	Feeds 8ml/2hrly. + IVF 2ml/hr + AV @ 1.5g/kg/day
	Desaturated, adrenal	Euglycemic urine ✓ stool ✓
	Sepsis :-	On INJ. PIPTAZ Blood c/s awaited
		OLE - Active Pink PPWP Icterus (+) Vitals (+)
	Adv	SLE - WNL
	- cont Feeds	CLIA good
	- Monitor vitals	



(13)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
9/7/26 9AM	C/S/B	Dr. SHANMUGESWARAN
	Δ - DA / 31 ⁺ 5 weeks / RDS (post surfactant) / NNA	
	B.W - 1376	
	Y.W - 1282	32 ⁺ 2 PMA
	T.Wt - 1243	
	(↓ 39 gm) ① Respiratory - on CPAP 5	
	can loss > 96%.	21%.
	No distress / apnea	
	CBG - 136 mg/dl on caffeine	HR - 140/min RR - 53/min SpO ₂ - 97%.
	② Feeds → 12 ml Q2Hly ~ 104 ml/kg/day	
	IVF ~ 2 ml/hr ~ 35 ml/kg/day	
	Aminocorn ② 0.8 ml/hr ~ 19.9 ml/kg/day	
	(1.5 ml/kg/day)	
	TV ~ 153 ml/kg/day	
	Blowd gts	
	sterile	
	Urine → 2.5 ml/kg/hr	
	Stool → 3 times	
	③ NNA → TCB → 11-9 → on DSPT	
	since 10PM yesterday	
	On Piplay (D4)	Plan
	On Caffeine	
	Shanmugan	
	13/7/26	

- 1) Plan to hike feeds
- 2) Continue DSPT
- 3) Trace blood C/S
- 4) CBG Q 8H



1A

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/7/26 9 AM	C/S/3 DR. SHAMYOUNGIM	
	Δ - Ds-7 / 31+5 weeks / RDS (post surfactant) / NNH	
	B.W - 1376 PMA - 32+3	
	V.W - 1243 ① Respiratory	
	P.W - 1261 On RA since yesterday	
	(↑ 18gms) No distress / opnea	
	Am Sat → 8.3% - on caffeine	
	Vitals: HR - 143/min	
	RR - 54/min	
	SpO ₂ - 98%	
	② Feeds → 16 ml @ 2 Hrs (140 ml/kg/day)	
	③ Hemodynamics stable	
	Urine - 2.8 ml/kg/hr	
	Stool - 4 times	
	On: ④ NNH: on phototherapy since 10 PM of 8/7/26	
	Respirate racket	
	Inf. Piptag (stopped)	
	Inf. Gzzenic.	
	Plan	
	1) Plan to take feeds	
	2) Monitor vitals	
	3) Stop Iv. Apn	
	4) TV → 160 ml/kg/day (18 ml)	
	5) Start HMF today	
	6)	



15

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/7/26	S/B Consultant	
	Very preterm / 31 ¹⁵ wks / RDS (post surfactant)	
	PmA: 32 ⁺³	Wt: 1261g (118g)
	①. Respiratory :: On Room air since yesterday No distress / apnoea on caffeine maintenance	RR: 55-58/mnt SpO2: 99-100%
	② Feeds: Reached full feeds Tolerating well on 140ml/kg/day	
	③. NNH: ↓ DSPT TUB: 11.9 x 24°	
	Hemodynamically stable	
	off Abx on probiotics	Plan ① feeds: 18ml 2hly Try paladai feeds



Date & Time	Progress Notes	Doctor's Order
	② Add Kmc 1g sachet to 25ml m ③ Kmc NNS ④ Remove i.v line tomorrow. ⑤ off PT	
	P. Pinto 86482	



17

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/7	C/S/B- Dr. Anuthi	
6pm	31+5 RDS (POS + surfactant).	
	V/Q :- On room air.	
	PE - 50/min.	
	SpO ₂ - 98%.	
	On caffeine.	
	PPWP	
	PR - 140/min.	
	PR	
	seps feeds :- 18ml / 2hrly.	
	OG + Paladai	
	tolerating foods	
	urine ✓	
	stool ✓	
	Hemodynamics ⊕	
	O/E - Active.	
	pink.	
	PPWP	
	Vitals stable.	
	S/E - WNL.	
	CIT/A - good	
	Adv	
	- try paladai	
	- Monitor vitals	



18



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/7/26 9am	q/c/B DR. SHANMUKHIA D6 / 31 st week / RDS (Post surfactant) / NNH	
B.W - 1376	PMA - 32 st 4	
Y.W - 1261		
T.W - 1283 (125gms) (↑ 2gms) Cum → 8.2g	① Respiratory. Baby on room air NO distress/apnea on caffeine maintenance	
	Vitals: RR - 57/min SpO ₂ - 99%	
	② Feeds: 18ml Q2Hly (On feeds) (156ml/kg/day)	± HNF
	③ NNH: off DSPT since yesterday 11AM (TCD 11-9)	
	Hemodynamically stable	
By Apn Resp Caffeine Relaxant	amin - 2.5ml/kg/hr Plan Stool - 3 times	
	R. Shanmukh 108630	1) HUC/NNS 2) Monitor Vitals 3) Check Taz Pobdis feeds



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/7/26	S/B Consultant	
	D6 / 31 ⁺⁵ wks / RDS (post surfactant)	
1263g (same)	32 ⁺⁴ PMA	
	Stable in Room air on caffeine	
	On full feeds @ 150ml/kg/day +HMF	
	Trying oral feeds	
		<u>Plan</u>
	To give	① Feeds 20ml 2mly 10ml paladai 10ml OH
	KMC NNS	② oral caffeine → stop on 13/7/26
	P. Nanda 86982	③ HMF 1g sachet to 25ml EBM.
		A-2 drops 0.5ml OD
		Vit D drops (1/800IU) 0.5ml OD
		Syp calcimax - P 1.5ml BD



20

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/06/2026	S/B Dr. Pravi Raghav	
7 PM	Growing PT (31 kg)	
	Day 6 (PMA - 32 wk)	
		B. wt - 1376 gm T. wt - 1263 gm
	Baby cry/fno/active	(Cummulative 82% loss?)
	good.	
<u>vitals</u>		<u>Respiratory</u>
HR - 180/min		- Baby on room air
PR - 56/min		RP - 56/min, no apnea
SpO ₂ - 96% JRA		no desaturation
Temp - 36.5°C		SpO ₂ ⇒ 96% JRA
	<u>Feeds</u>	oral caffer
	⇒	20mL @ 2 nd hr
off antibiotics		10mL Pabedol +
		10mL OG
		HMF ⇒ 1gm to 25mc FBM
		<u>Rx</u>
		→ <u>vital</u> monitoring
		→ <u>to</u> feeds 10mL Pabedol
		10mC
		→ supplements <u>for</u>

14



(21)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/06/2026	SB Dr. Ravi Raghav	
SAM	Very PT (31+5) / AGA / LSCS / MACE / ADS (Post surgical)	Maternal HELLP syndrome / UNH
	Growing PT	
	Day 7 (PMA $\Rightarrow$ 32+5)	
Vitals	HR - 156/min	B.Wt $\Rightarrow$ 1376 gm
	RR - 55/min	X.Wt $\Rightarrow$ 1263 gm
	SpO ₂ - 99% VRA	T.Wt $\Rightarrow$ 1280 gm
	Temp - 38.5°C	17 gm ↑
	BP - 66/48 (54) mmHg	
	1) Respiratory $\Rightarrow$ Baby on room air	RA - 55/min, SpO ₂ - 99% VRA
		No apnea / No desaturation
		on caffeine OD (Plan to stop on 13/7/26)
	2) feeds $\Rightarrow$ 180mc/kg/day $\Rightarrow$ 20mc Q2h	(10mc OG + 10mc - Pabdal)
	KMC / NNS $\rightarrow$	HMF $\Rightarrow$ 12 to 25mc EBM
	Urine - 2.4mc/kg/hr	
	Stool - 3 times	
	No vomiting / No distension	
	3) supplements $\Rightarrow$ A-2 drops 0.5mc OD	
		Vit-D 0.5mc OD
		Sp. CALCEMAX - P 1.5mc BP
		Rosinate OD



22

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		<u>Rs.</u> → MONITOR VITALS - KMC/NNS to continue - feed $\geq 20\text{ml}$ 10ml - Paladar 10ml - OG - Supplements to continue - Please stop caffeine (13/7/26)
	<u>R. Monish</u> <u>469m</u>	
12/7/26 8PM	c/s/s Dr. SHANMUGAN	145248
	△ - 31+5 weeks / AUA / LSCS / Male / ROS / RNL Baby on room air <u>Vitals</u> HR - 148/min RR - 58/min SpO₂ - 98% Feeds → 20ml Q2Hly (excludes Paladar) urine - passed stool - passed <u>Supplements</u> <u>Plan</u> 1) monitor vitals 2) continue supplements	
	<u>R. Shanmugan</u> <u>1506m</u>	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
12/1/26	S/B Consultant	
	31 ⁺⁵ wks / RDS (post surfactant) / Growing pattern	
	D8	
	32 ⁺⁶ pMA	
	WT 1305g (125g)	
	① Respiratory: op O ₂ x 2 days In room air RR: 55-60/mt occasional desats ① Spontaneously picks up SpO ₂ : 95-96%.	
	on caffeine maintenance	
	② Activity ②	
	③ Hemodynamics: stable	
	Started SSPs yesterday ↓ (TcS: 11) made op x12°	Plan
		① Respiratory monitor if freq. desats.
		Start NPO ₂ 0.8 L/mt



Date & Time	Progress Notes	Doctor's Order
		(2) Continue caffeine
		(3) OA feeds 20ml 2hly
		(4) CBA BD
	R. Mento 96982	



25

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
13/7	C/S 13 - Dr. Anurag	
11am	31+5 AAA LSCS male PDS NNN	
	current issues :- Had c/o desats & Intermittent tachycardia	
	V/G: O ₂ via NP 1L/min restarted NO desats SPO ₂ - 98-99% PR - 168/min (intermittent HR - 170-180/min) (Baseline - 156/min) On caffeine	
	sepsis off IV Antibiotics	
	Nutrition - on OG feeds 20ml/2hrly. urine - 2.3ml/kg/hr stool - 5 times wt 25gm ↑ (1.305)	
	O/E - Active RR - 60/min PR - 162/min PP w.p. S/E - WNL	

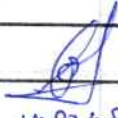


PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	<u>Adv</u> - CXR - Monitor vitals	
1/20/16	1/20/16 8² <u>SB Dr. David Rogal</u> Vox PT (3HS) / AGX / LSCC / MACE / RDS / NNH. Day 8, PMA (32+6) <u>Vitals now,</u> HR - 158/min RR - 38 - 60/min SpO₂ - 99% ↓ 1 L of O₂ BP - 56/44 (48) mmHg Urine - 2 fl oz Stool - 3 fl oz	B. wt - 1376 X. wt - 1280 T. wt - 1305 <u>(158) N</u>
	Issue ⇒ Baby had occasional desaturation / ⇒ tachycardia	
	started up 200% / min now baby on 100% / min no desaturation RR - 60/min, minimal apnea HR - 158/min To continue oral caffeine	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	OG feed $\Rightarrow$ 20ml / q2nd hly (180ml / kg/day) OG - 3 times S feed - 2 times	
	Supplements $\Rightarrow$ A - Zolaps 0.5ml (o) VIT-D 0.5ml (o) SYP. EXCOTMAX-P 1.5ml BD RESCUMATE o)	
		Rx - Respiratory monitoring - W/t desaturation/apnoea - OG feed 20ml q2nd hly - To continue syp. & supplements. - vitals monitoring
		 148248



29

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	O/E - Active	
	PPWP	
	Euthymic	
	PR - 168/min	
	PR - 58/min	
	SpO ₂ - 100%	
	S/E - WNC	
	CTIA - Good	
	<u>Adv</u>	
	- Monitor vitals	
	- W/f tachycardia / feed intolerance / tachypnea	
	- VBG - PH - 7.40 -	BE - -0.3
	HCO ₃ - 23.8	
	LO ₂ - 39.9	
	Lact - 1.7	
	- Only OG feeds	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
14/7/26	S/O Consultant	
	34+5 wks / RDS (post surfactant)	
	Dg	
	33 wks PMA.	
1325g (120g)	① Respiratory: mild tachypnoea O ₂ req since yesterday	
	H/o URI in father	No retractions.
	on NPO @ 24mt	
	Seems seen well	
	Absent ②	
	Tolerating feeds	
	Hemodynamically stable.	
	on capric	Plan:
	a Remmon	① Continue O ₂
	R. Monks 96982	② Resp-monitoring
		③ O ₂ feed 20ml 2hly + HMF



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		(4) . CBA OD
		(5) To collect blood work
	R. Monish 26/9/22	
4/7/26 4:30 AM	Δ: 31 ⁺ 5 / AqM / RDG (post Surfactant)	C/S/B - Dr. Anas
		PMA → 33wk.
		Can Baby Reviewed.
	V/A: On O ₂ nasal prongs 0.6 litre.	
	SpO ₂ 98%.	A
	RR → 52/min.	
	WOB - (A).	
	Circulation :	BP: 68/46 (63)
	Ca ⁺ → 11.5	trr tr
	Prothrombin → 5.8	act 23sec
	CBG → 92 mg/dl	Phosphorus inc
	@ 12 AM.	HR: 154/min.
	Nutrition :	on O ₂ feed 20ml / 2nd hly
		(EBM + NMP)
		To be early feeds.
	S/E :	Plan
		1) Continue Supplement
		2) O ₂ feeds (EBM + NMP)
		20ml / 2nd hly
		3) 0.6 litre nasal prong.
		4) continue vitals monitoring

32

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/7 9am	31+5	c/s/B - Dr. Ananthu
		1 PDS (post surfactant).
		1 Urinal
	DIO	33+1 PAND.
	V/Q:	On O ₂ 0.4 L/min.
		RR - 58-60/min.
		SpO ₂ - 99%.
		HR - 162/min.
		Intermittent tachycardia,
		[170-180/min].
		BP - 71/46 (54).
		On oral caffeine.
	sepsis:-	1/10 tachycardia
		& intermittent desats
	sepsis screen	&
	Blood gas	done
	yesterday	- (N).
	Nutrition:-	On @ feeds
		20ml/2hrly
		urine - 2.0ml/kg/hr.
		stool - 3 times.
	B.Wt -	1.376 Kg
	T.Wt -	1.357 Kg

(32gm a).



33

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	CBG - 101mg/dL.	
	On: A-Z / vit D / calcimaxp / Rescinate.	
	O/E - Active.	
	PPWD.	
	Wt 11.5 kg	
	PR - 162/min.	
	RR - 58/min.	
	SpO ₂ - 99%.	
	S/E - WNL	
	CT/A - good	
	- <u>Ady</u>	
	- w/f tachycardia.	
	- Resp Bifid	
	- cont 20ml/2hrly.	
	- Nasoclean N/D. Q4hrly.	
	- w/f fever spikes.	

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Baby Of SWAPNA.K

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
15/7/26	S/O Consultant	
	31+5 weeks	c/o RDS (post surfactant)
	Dio / 33+1 PMA	
	① Respiratory : New onset	
		Tachycardia } x 2 days
		Tachypnoea }
1357g	? viral	on NPO ₂ @ 0.4L/mt
132g	Septic screen: Negative	RR: 55-60/mt
		SpO ₂ 98-99%
	② Full feeds @ 150ml/kg/day	
	Tolerating well	
	Hemodynamics : Stable	
	except for intermittent	
	tachycardia	
	on capnium	
	metre	

35



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Date & Time	Progress Notes	Doctor's Order
16/1/26.	S/B Dr. Imran	/for RACS
9:45 AM		
(D11)	81W + 5D / RDS (post surfactant).	
	B3+2 PMA.	B.Wt - 1.376 kg T.Wt - 1.400 kg <u>+ 23 gram</u>
	Baby on NPO2 @ 0.4 L/min. (Tidal O ₂)	
	RR - 57/min	
	SpO ₂ → 99.1. on 0.4 L/min.	
	HR - 155/min.	
	Feeds → on feeds 20ml Q2H + HMR.	
	Intermittent tachycardia (P). emesis & Shub → Parox (5) times. Parox	
		Plan. - Supplement (continued) - RESCUMATE. - A-2 drops. - SYP Caffeine. - HT - D Drops. - SYP. Calcimax P
	127228. (for Imran)	



38

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
16/12/26	37+5 weeks	8/12 Consultant
	33+2 PMA	RDS (post surfactant) / Gravely pretreated / severe viral pneumonia
1400 g (743g)	① Respiratory : on NPO ₂ @ 0.4 L/min	
	Had 1 low grade fever spike yesterday	
	RR: 55-60/min	
	SpO ₂ : 97-98%	
	Septic Screen: Negative	
	On full OA feeds accepting well	
	Erythema	Plan
		① Trial of O ₂
		② Vitals & temp. monitor



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		③ OG feeds 20ml 2hrly LHM =
	R. M. 9/10/20 96982	④ Continue supplements Capair @ <u>8mg/kg/day</u>
16/7 6pm	C/S/R - Dr. Ananthi 3'th WIC PMA. / PDS Recent viral pneumonia. V/O:- On NPO @ O ₂ off trial given today RR - 58/min SpO ₂ - 98% Sepsis - Neg Nutrition:- On OG feeds Accepting well. urine ✓ stool ✓ Sug/glycemic.	O ₂ restarted 10 to desat @ 0.4L

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Date & Time	Progress Notes	Doctor's Order
	O/E - Active, pink, PPWD vitals stable,	
	S/E - WNL, C/A - good	
	<u>Adm</u> - Monitor vitals	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/7/26 10 AM	C/S/S DR. SHANMUGARATHNAM	
	D12 / 31 ⁺ weeks / PMA → 32 ⁺ weeks / RDS (past surfactant) / growing PT / Viral pneumonia	
	B.W - 1376 T.W - 1440 (↑ 40 gm)	
	① Respiratory	On NP-O ₂ @ 0.4 L/min ↑ fever spike @ 4 PM yesterday (100.5°F) RR - 55-60 / min SpO ₂ - 96-98% On coughing 8 wet/kg/day
	② On full 06 feeds 20ml Q2Hly (166 ml/kg/day)	
	③ Septic screen - negative urine - 3-4 ml/kg/hr stool - 2 times	Place
	Rx Resonate sachet A - 2 drops Vitamin D drops Spp. Calcimac-P Nasaclear drops Spp. Cough	1) Continue 06 feeds + HMF 2) Continue supplements 3) Monitor vitals & fever spikes
	off O ₂ trial R. Shanmuganathan Add Zoniceon - bms 0.8 ml OD	R. Shanmuganathan 96/4/26



43

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/7/27	S/B Dr. Pannan.	
8:30 AM	Day 13 / 3/15 / PMA $\rightarrow$ 32+4 / RDS (Past Surfactant) / (Cranial Preterm) / ? Viral Pneumonia. One fever spike yesterday at 7pm (99°F). Resp: on RA SpO ₂ $\rightarrow$ 96%. Feeds: OG Feeds 20ml Q2H Enter mittens tachycardia.	B.Wt - 1376 grams. Y.Wt - 1440 grams T.Wt - 1508
Vitals		1 68 grams.
HR $\rightarrow$ 180/min. IHR $\rightarrow$ 180/min.		
RR $\rightarrow$ 57/min.		
SpO ₂ $\rightarrow$ 96% on RA.		Urine - (2-4) ml/kg/hr.
Chs $\rightarrow$ Tone/Activity Good.		Stool - 4 times passed.
1 fever spike yesterday		
Alveodynamics Stable.		
SpO ₂ since yesterday		
SpO ₂ 96% - 97% RA		
Plan		
To send Resp. Profile		
Continue OG feeds & supplements.		
Vitals monitoring.		

R. Pannan
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45

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/7/26 9PM	CLS/B Dr. SHANMUKHA	
	Day 13 / 31 st weeks / PMA - 33 st 4 weeks / RDS (post surfactant) / growing preterm / Viral pneumonia	
	① <u>Respiratory</u> . Baby on 1 Lit/min NP-O ₂ . RR - 14 / min RR - 65 / min SPO ₂ - 97-99% on 12 / min O ₂	
	② <u>Feeds</u> . on 18 ml q4hrly OA feeds cumm. - Atinum stool - 2 Once passed	
		<u>Plan</u> 1) Continue Nasal prongs O ₂ 2) Monitor vitals 3) Do trace Resp. Bifore 4) Monitor vitals 5) Continue supplements

R. Shanmukha
 18/07/26



(46)

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/7 9am	o/s/B - Dr. Aauthi D 14 131+5 PMA - 33+4 ? Viral. V/A:- On O₂ 12/min RR - 56/min PR - 153/min SpO₂ - 98% on caffeine Had 1 s/o fever spike at 4 am today Resp Biofire - Neg Sepsis - off IV Antibiotics Nutrition - 18ml 2hrly of feeds urine - 2.4ml/Kg/hr stool - 4 times if. Wt - 1.50g (289gm) on oral Supplement Rescunato A - 2 Vit D Calci max Naso clear Drop.	

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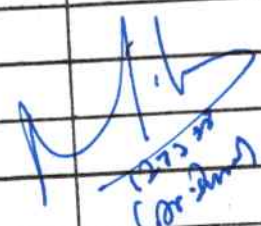


18

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/7/26	S/B Dr. Poon. / Dr. Bharath.	
9pm	PMR 32+4.	
	DI4 / 31+5w / RDS / Growing PT ? viral pneumonia.	
	Resp: on O ₂ 1L/min. RR → 55/min PR → 158/min. SpO ₂ → 97%. on caffeine. no fever spike.	
	Sept: 2v Antibiotics → 2g. PIPRAZ 15mg IV q2 - 2g Amikacin 10mg IV qd.	
	Nutrition: 18ml q2h OG feed.	
	ent - 3.9 ml / 1hr Stuh - 3 times.	- oral supplements - Resunals - A-Z. - vitD - Calibar P - Nandear drops
		

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/7 9am	CLSR - Dr. Anithi PMA - 33+5 D15 31+5 PDS Growing PT 2 LONGS 2 Vival	
	V/Q :- On O₂ 1 L/min RR - 54/min PPWP PR - 160/min BP > 5th centile	
	Sepsis :- 1/10 dull activity & low grade fever spikes IV Antibiotics started INT: PIPIDAZ D2 INS: AMIKA urine - no fungal elements ProCal - 0.21 Blood c/s - awaited	
	Nutrition :- on OG feeds 18 ml/2 hrs urine - 2.4 ml/kg/hr stool - 4 times wt - 1.584 C 80 gm ↑ on Rescurate / vit D / A - 2 / Cdcimax P	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/7/26 09:00PM	S/B Dr. Pavi Prasad	
	Day 15/31+5 / RDS / Growing PT / 2 concs / 7 vial	
	V/Q => Baby on auto flow @ 1L/min RR - 54/min HR - 169/min BP - 62/31 (40) mm Hg SpO ₂ - 99% on 100% O ₂ on oral caffeine	
	Sepsis - IV antibiotics	
		Inj. PIPRO 2 Inj. AMIKACIN) D ₂
	Septic screen - negative, urine - fungal - no elements Blood CS - awaited. USG - (N)	
	Nutrition - on 0.1 feeds => 1 gm/kg, 2.5 gm/kg Urine - 2.5 gm/kg stool - 2 times	
	Supplements	
	RR - vit - 1) RR - X - 2	- Vitals monitor - Pabchi/OG => 1 gm/kg 2.5 gm/kg
	Calcimax - 1 Rescumedo oral caffeine	- wff desferal - To continue Inj. PIPRO 2 Inj. AMIKACIN

[Signature]



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/07/2026	S/P Dr. Pravi Rogul:	
08:00 AM	31+5 / MACE / RDS (Post surfactant) / Viral pneumonia / ? LON	
	Day 16 / PMA - 34 wks.	
	① <u>Respiration</u> => Baby on continuous face flow O ₂ @ 14/min RR - 56/min HR - 160/min. SpO ₂ - 99% ↓ I/L of face flow. BP - 63/31 (G1)	
	② <u>Sepsis</u> => Inj. PIPID 2 Inj. AMIKACIN (P3) HR - 160/min, BP - 63/31 (G1) (5th - 50th centile)	
	③ <u>feed</u> => B.wt - 1376 gm X.wt - 1384 gm T.wt - 1607 gm (23 gm ↑)	on 18ml (OG / Paladri) urine - 2 ml / kg / day stool - 5 times
	<u>Supplements</u> A-Z drops vit-D drops Sp. calcimex-P Sp. caffeine Resumate.	Rx - OG + Paladri => 18ml and hb - To continue Inj. PIPID 2 Inj. AMIKACIN - Supplements to continue - Vitals monitoring (off O ₂ trial)

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63

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
21/1/24	C/S/S Dr. SHANMUGAN	
6 PM	Δ - 31+5 weeks / M / EOS (post surfactant) Viral Pneumonia / EOS (D/G) / PMA - 34 weeks	
	① <u>Respiration</u> : Bag on Room air soon No desaturation	
	Vitals : HR - 150-160/min SpO ₂ - 97-99% RR - 50-60/min	
	② <u>Feeds</u> : 18 ml Q2Hly OA feeds	
	③ <u>Sepsis</u> : On IV Piptaz. In Amikacin.	
	On <u>Supplements</u> : urine - 2.2 ml/kg/hr stool - once	Plan
		1) Monitor vitals
		2) Continue feeds
		3) Continue supplements
		+ IV Abx
	R. Shanmugan 15563	



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/7/26.	S/B	Dr. Daman
(D17)	31+5 / RDS / Growing PT / 2 Room / 2 Ward	
	Resp. → Baby on RA.	
	SpO2 → 99%.	B.Wt - 1.376 kg.
		T.Wt - 1.627
	Spis → D. PIPTAZ	Y.Wt - 1.627
	D. AMIKACIN (D4)	120gms.
	Feeds → OC feeds 10ml/24.	
	on Supplements:	
	Umi. - 2.1ml/kg/hr.	
	Shol. - 4 times.	
		Plan
		- Plan to Shift
		- To train Paladai feed for mother
		- Mother (handy)
		- Vitals Monitoring
		(D4) - D. PIPTAZ
		(D4) - D. AMIKACIN

M.I.
 12328
 (Dr. Daman)

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Baby Of SWAPNA.K

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
22/7	C/S/B - Dr. Ananthi	
6pm	31+5 M RDS (post surfactant) / viral pneumonia LOS	
	PMA - 34 +1	D17
	V/Q. On room air.	
	HR - 156/min	
	SpO ₂ - 98%	
	RR - 58/min	
	20.	
	feeds - Paladai 18ml / 2hrly.	
	urine ✓	
	stool ✓	
	On supplements	
	Sepsis! - INJ. PIPRAZ. AS	
	INJ. AMIKA	
	O/E - Active	
	Pink	
	PPWT	
	HR - 150-170/min	
	RR - 58/min SpO ₂ - 98%	
	WNL C/A good	
	- vital monitoring	
	cont IV Antibiotics	



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/7/26 9AM	C/S R DR. SHANMUGARATHNAM	
(Dx)	31+5 weeks / RDS / HAI / RDS (post surfactant) Vital Pneumonia (40s) PMA - 34+2 weeks	
	① <u>Respiration</u> : Baby on Doonan x 48 Hours	
N.W - 1.627 kg	NO desaturation	
F.W - 1.619 kg	<u>Vitals</u> : SpO ₂ - 97-99% HR - 145/min RR - 55-58/min	
	② <u>Feeds</u> : On paladar feeds 20ml 2x/day (147 ml/kg/day)	
	Urine - 2.3 ml/kg/hr Stool - 16 times	
	<u>Rx</u> : Inj. Piptaz (DA) / 5 → STOP Inj. Amikacin (DA) / 5 Syp. Cozmoie Nasoclear drops Resumate A - 2 drops Vitamin D3 drops Syp. Coz Calceum P.	<u>Plan</u> 1) Monitor vitals 2) Continue feeds 3) Shift to ward today 4) Draw Blood C/S & decide 2. Sharadulla 1800 on Inj. Piptaz Stop piptaz after today's dose

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Baby Of SWAPNA.K

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/7/26	8/2 consultant	
	31 ⁺ 5 wks	RDS / Growing preterm / viral pneumonia
D 7	34 ⁺ 1 PMA.	
	WT: 1619g	Room air x 2 days.
		No tachypnoea / desats
		SpO ₂ 98-100%.
		RR: 50-55/min
	On caffeine maintenance.	
	no fever episodes last 2 days	
	Hemodynamics Stable.	
	On full oral feeds.	Plan
	On Dy piptaz tanikaeni	① Paladar feeds Some 2 only. + HMF (1g) to 25ml Ecm
	Shift to mother side today & vitals monitoring	② Continue A-Z Resunate Vit D. Calimax P caffeine
Vaccines (B16, OPV)	R. J. G. 26/9/26	③ ROP screen tomorrow.
on 25/7/26		④ Stop Abx.

SNC-00030833

IP24-00008843

Baby Of SWAPNA.K

08-07-2026

0 Y 0 M 16 D

(M)

Dr. MONISHA R



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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
23/7/26	8/13 Dr. Imran.	
9pm	34 weeks / Ros / Surgeon /	
(D18)	Widal Pneumonia	
	PMA - 34 + 2 weeks.	
	on room Dr.	
	SpO ₂ → 98%.	
	HR → 139/min	
	KP → 54/min.	
	O/E. CH/CLM - head	
	SLB m - SLB	
	PL - mes	
	PL - Leg	
	Plan.	
	- vitals Monitoring	
	- Continue feeds.	
	- On Supplement	
	- ROP Surgery tomorrow.	
	- Pediatric feed	
	20ml R24 + HMF	
	(1g) no 25ml EBM.	
	M. I. h.	
	12/7/26.	
	(Dr. Imran)	



PROGRESS NOTES AND DOCTOR'S ORDER

[illegible]



PROGRESS NOTES AND DOCTOR'S ORDER

25/7/26
 9:45 PM

Date & Time	Progress Notes	Doctor's Order
	C/S - Do and	
	31 ⁺ 5 EOS viral pneumonia LOS	
	PMA → 30 ⁺ 4	
	Baby active	
	on paladar feeds and 2 nd help	
	tolerating feeds	
	passing urine & stools adequately	
	vital stable	
	C/S:	
		C/S 1A - good
		AE @ level
		HR 100
		CRT 2 sec
		PRt
		phosphorus okay
	S/O: NAD	
		Plan
		1) paladar feed → nursing
		2) vitals monitoring
		3) Supplements as per order



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/7	C/S/R- Dr. Anitha	
10am	31 st / R DS / M / viral pneumonia / LOS	
	DMA - 34 th 4.	
	Baby is active.	
	on Paladai feeds	
	20ml / 2hrly	
	urine ✓	
	stool ✓	
	O/E - Active	
	PR - 138/min	
	RR - 50/min	
	SpO ₂ - 98%	
	S/E - WNL	
	C/T/A - good	
	Adv	
	- Monitor vitals	
	- Supplement to continue	

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/7/26 9 AM	C/S/D DR. SHANMUGESWARA	
(B22)	31 st weeks / RDS / Male / Viral Pneumonia / LOS (PHA - 31 st 6 weeks)	
	B.W - 1370 Baby on paladai feeds 20ml Q2Hly Y.W - 1651 + DRF. TW - 1666. (TV ~ 145 ml (8/day)	
	(T 15 gms) Following feeds	
	On. Vitals.	
	Vit D HR - 138/min	
	A to Z RR - 48/min	
	Calcimax P SPO ₂ - 98%	
	Forquon	
	Syrup Caffeine	Admin - 2 times Stool - 4 times
2	Vaccines ✓	
	OAE? to be	1) Ask about caffeine
	ABIS done	2) Monitor vitals
	ROP - tomorrow	
		Dr. Shanmugaswara
		T/S prelu for
		& G4 TSH
		inflv

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

[illegible]

IP24-00008843

08-07-2026

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(M)

Dr. MONISHA R



NURSES NOTES

(USE BALL POINT PEN ONLY)

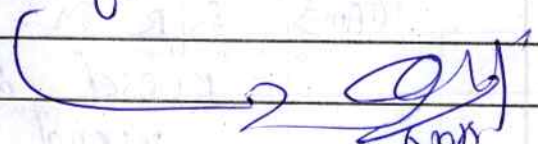


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☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Delivered notes
6/7/20	11:28am	- Baby delivered on 6/7/20 @ 11:28am - Baby baby CPAP given. - cord clamped. vit to given. - Distress & prematurity. - Baby shifted to New & Prematurity. - Baby on chrp. saturation not maintain
	1pm	- Intubate & given apnoeic 4.5ml. - gives.
	3pm	- Baby on cpa mode. Extra bail. - No any other complaints. - Baby maintain vitals.
	6	- IV line secured. samples sent.
	6pm	- x-ray done. - Baby kept down given to the night duty staff
		

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



②

NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

Night Notes 6/7/26

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
6/7/26	8PM	Hand over taken from Morning staff @ CPAP 25X6. NO Desat, Brady
	9PM	Vitals checked stable
	10AM	Dr. Anas & Dr. SRAVANTHI MAM room continue same, IVF-4.1ml/hr.
	12AM	^{Ins Pitya gm} Examine the Baby, No issue. @
	3AM	Feeding given 1ml tolerat, 123. Stool Passed
	5AM	Baby Bath given, weight checked.
	6AM	Feeding given 1ml.
	8AM	Hand over give to Morning staff
		Rt upper Position 1ml - 2ml/hr feed RBS - 6th hr
		<u>DAY Duty report 7/07/26</u>
7/07/26	8AM	Baby hand over taken from night staff. Vitals signs checked & recorded. Baby supported
		CPAP 23/6 IVF-10% DEXT 4.1ml/hr flow. COREUM is pink
	10AM	S/B Dr. monisha room Advice to feed 2ml / hr + 23M 02 HR
		Blood sample IN cannula Insert

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030833
Baby Of SWAPNA.K
08-07-2026
Dr. MONISHA R
0 Y 0 M 0 D 17 H (M)
IP24-00008843

NURSES NOTES
(USE BALL POINT PEN ONLY)

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- ☐ No Known Allergies
☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	12pm	Thermoregulation is maintained SpO2 maintained Feeding 2ml/FF Q 2HR motion Passed — <i>Smr</i>
	2pm	vitals signs checked & recorded Feeding 2ml/FF Q 2HR with. Color is pink. Intuitively happy <i>Smr</i>
	4pm	Thermoregulation is maintained CPAP - 2/5 PP checked & recorded <i>Smr</i>
	6pm	vitals signs checked & recorded IN - Aminoclon 0.5ml prn flow <i>Smr</i>
	8pm	Hand over to next duty staff <i>Smr</i>
Night Notes 7/7/26.		
7/7/26	8PM	Hand over taken from evening staff
	9PM	Vitals Sign checked, stable CPAP 2/5.
	10PM	Feeding 2ml/FF 4ml tolerance Stool Passed. IVF 4ml/1hr Aminoclon - 0.5ml/hr
	12 AM	Baby is being well, no issue <i>W</i>
	1 AM	Inj PIP by green <i>W</i>
	3 AM	RBS checked, stable.
	5 AM	Baby Bath given weight checked. , clean baby area No issn.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



9

NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	7 AM	Feeding tolerated, No issue maintain full.
	8 AM	Had over give to Mornin. Staff u in
		Morning duty 1- 8/7/26.
	8 AM	Baby depicts handing over taken from night duty staff. Baby is c- pap good hourly. NG. FF given. and vitals checked. is stable. only.
	9 AM	Given FF bolus. TCPR checked. Head 5.4 mgt. S chest 6.4 mgt. And informed to the Doctor. checked the vital signs baby is stable and no others. Akash
	10 AM	checked the vital signs baby. is stable and no special. off
	11 AM	given the FF feed as per the instruction given by the doctor. Akash off

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES (USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	4pm	vitals signs checked in record SpO2 maintained. feed 6ml/FF DHR unev. motion passed — <i>Sm</i>
	2pm	Baby details taken over
		Evening duty - 8/7/26
	2pm	Baby details taken over from morning duty staff. Baby vitals are stable. Baby is on CPAP support of FiO ₂ - 21%, PEEP - 5, IVF 10% D 3ml/hr inflow. Feed 6ml 2nd hrly FF. Urine passed. — <i>Waj 02650</i>
	3pm	FF 8ml given as per order. baby tolerates the feed, no vomiting IVF reduced to 2ml/hr. No other complaints — <i>Waj 02650</i>
	5pm	FF 8ml given as per order. baby tolerates feed. no vomiting, position changed — <i>Waj 02650</i>
	6pm	TCB checked Head 10.9 mg/dl and chest 11.9 mg/dl, informed to Dr. Arthi vitals are checked and recorded — <i>Waj 02650</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030833

Baby Of SWAPNA.K

08-07-2026

Dr. MONISHA R

IP24-00008843

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NURSES NOTES

(USE BALL POINT PEN ONLY)

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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
8/7/26	7pm	27 ACO apnea and Desaturations.
	8pm	Handed over given to next duty staff. <i>Oh omms</i>
8/8/26	8PM	<i>night duty notes - 8/8/26</i> Baby hand over taken from the evening duty staff. Baby is on CPAP. Fio2 - 21%, PRPP - 5.
	9PM	Feed given 8ml via GH tube. Baby tolerating the feed. no any Complaints. DSEP ongoing
	10PM	Baby vitals are checked and Recorded. vitals are stable.
	11PM	Feed given 10ml via GH tube. Baby tolerating the feed. no any Complaints. Oral Piritaz 140 mg given As Per As drug Chart order.
9/8/26	1AM	<i>Ass - 136 mg/dl</i>
	3AM	Feed given 10ml via GH tube. Baby tolerating the feed. no any Complaints.
	5AM	Morning Care given
	8AM	Baby hand over given to the morning duty staff.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



(12)

NURSES NOTES (USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
9/07/26		<u>Morning + evening notes 9/07/26</u>
	8AM	Baby hand over taken from night duty staff. Vitals signs checked & recorded. Baby supported C-Pap 24/5 CO2 is fine. INF -10% DEXT 2ml/min flow. IN- Aminoren 0.8ml on flow. <i>Smita</i>
	9AM	Vitals signs checked & recorded. Feed 12ml/FF Q2HR LUNEN <i>Smita</i>
	11AM	SLR Dr. monisha mam advise to discontinue 1 sachet p/o OD. IN- Antibiotic today last stop. CR4 BD Feed 16ml/FF Q2HR INF STOP. IN- Aminoren STOP <i>Smita</i>
	1PM	Feed 14ml/FF Q2HR LUNEN SpO2 maintained activity is good <i>Smita</i>
	3PM	thermoregulation is maintained. Feed 14ml/FF Q2HR OUT LUNEN <i>Smita</i>
	5PM	Vitals signs checked & recorded. Feed 14ml/FF Q2HR LUNEN. CO2 is fine. activity is good <i>Smita</i>
	7PM	Feed 14ml/FF Q2HR LUNEN. SpO2 maintained. CO2 is fine <i>Smita</i>
	8PM	hand over to night duty staff <i>Smita</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

13

NURSES NOTES (USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		<u>Night Duty - 9/7/26.</u>
9/7/26	8PM	Hand over taken from Mornig Staff. RA, Vitals stable, No issue.
	9PM	Feeding 16ml. 10ml/kg given per mac
	10PM	xx. Anas sir round continue same.
	12 AM	Examine the baby, stable. No iss
	3 AM	Feeding 16ml, urine, stool Passed
	5 AM	Baby Bath given, weight check
	7 AM	Feeding tolerated, No iss
	8 AM	Hand over give to Mornig staff
		143
10/7/2026		<u>Mornig Duty</u>
	8pm	→ Taken Over the baby from night duty staff Baby is on Room air → Vitals are stable. → Colour pink. activity is good Cried well → Feeds 16ml gm ^o Vib On → Cries now was → Dr. Jai passed → Administered Flo Chlor

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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NURSES NOTES

(USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
10/7/2026		Seen by Dr. Monisha
		Advice :
		* Feeds 18ml Q 2 H
		* Try Paladar feeds
		* Add AMF 1gm
		* Give NIALS
		* Remove Dr Lin Ammonium
		* Stop phototherapy
		2) Phototherapy stopped
		3) Feeds taken well.
		4) One day gain
		5) Vitals stable
	2pm	6) Handed over to new duty staff
10/07		<u>Evening duty report on 10/07/26</u>
	2pm	Baby hand over taken from morning duty staff. Vitals signs checked & recorded. Baby feed 18ml EBM + P.N + FF Q 2 HR UREN.
		COLOM is PMU. Sms 07/26
	3pm	Baby feed 18ml EBM + P.N Q 2 HR UREN. COLOM is PMU.
		activity is good. Sms 07/26

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030833

IP24-00008843

Baby Of SWAPNA.K

08-07-2026

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(M)

Dr. MONISHA R



NURSES NOTES

(USE BALL POINT PEN ONLY)

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☐ No Known Drug Allergies☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	5pm	Thermoregulation is maintained SPO2 maintained. Feed 18ml/ORT + Pauadri CUREV. activity a good.
	7pm	vitals signs checked & recorded SPO2 maintained. Feed 18ml/ORT P.V + Pauadri & 2HR CUREV.
	8pm	hand over to next duty staff
10/7/26	8pm	NIGHT DUTY REPORT ON 10/7/26. - Baby handover taken from Evening duty staff, vitals monitored and recorded. Feed is EBM + PNT FF - 18 ml @ 2hrly.
	9pm	- Feed given 18ml Pn ORT feed. EBM, Baby tolerating feed well
	10pm	Baby vitals are checked & Recorded - vitals are stable
11/7/26	1AM	Feed given 18ml via ORT tube Baby tolerating the feed. NO any complaints
	3AM	Checked NIBP IV Line pattern vit Score 0

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



16

NURSES NOTES (USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Continue Notes
	5.00 AM	Morning Care given maintained S/O chart
	8 AM	Feed given - in Oer - 20ml quantity. Baby tolerating feed, baby Handling Over given to Morning duty staff - <i>[Signature]</i>
	11/7/2026	Morning + Evening Duty
	8 AM	⇒ Taken Over the baby from night duty Staff. Baby's on Room air ⇒ Colour Pink. activity is good. Cared well
	9 AM	⇒ Abdomen Soft. No distention. ⇒ IV line patent.
	10 AM	⇒ Feeds 18ml given and tolerated. No vomiting ⇒ Maintained S/O Chart <i>[Signature]</i> ⇒ All BP monitored.
	12 PM	Baby vitals are monitored & recorded <i>[Signature]</i>
	1 PM	Baby is active & alert (Cry well) <i>[Signature]</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	3pm.	oral supplements are given as per orders.
	4pm.	20ml EBH+HMF feed are given via palladi and OG tube feeding.
	5pm.	Thermoregulation is maintained. maintain 36
		- EMC started
	7pm	- no any other complaints - monitor vitals
		- Feed given as per doctors order.
	8pm	Handover given to the night duty staff.
		<i>[Signature]</i> Sotab
		<u>Night Duty Notes 11/7/26</u>
11/7/26	8PM	Handover taken from Evening staff vitals checked, stable, Rt
	9pm	Feeding Done tolerated No ism.
	12m	Examine the baby, baby well
	3Am	Feeding done tolerated well, urine Motion Passed.
	5Am	Baby Bath given, weight checked cleaned the baby care.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



(18)

NURSES NOTES

(USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	7Am	Feeding given tolerated, Vitals Maintain well.
	8Am	Hand over given morning staff (u) 143.
12/7		<u>morning duty report 12/7/26</u>
	8Am	Baby hand over taken from night duty Staff vitals signs checked & recorded feed 20ml EBM + P.N. @ 2HR when.
	9Am	Baby feed 20ml EBM @ 2HR Paucalori 10ml + put 20ml when
	11Am	thermoregulation is maintained SpO2 maintained and fully blood S/B Dr. monisha mam advice to Paucalori Day demand TCB to be check.
	1pm	vitals signs checked & recorded feed 20ml EBM @ 2HR when. 100ml is same.
	2pm	hand over to next duty staff

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

19

NURSES NOTES (USE BALL POINT PEN ONLY)

- ☐ No Known Drug Allergies
☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Evening duty notes on 12/07/26
12/07	2pm	Hand over taken from morning duty staff Baby in RA. SpO ₂ maintained in RA SpO ₂ - 95 to 97%. RR is 54 to 56 bpm O ₂ tube kept in position. Mr
	3pm	Baby vitals are monitored & recorded Baby vitals stable. No fresh complaints. Q 2H 20ml EBM + Prenan ^{HMF} (or) prenan formulae feed are given. 20ml feed < 10ml palladi 10ml O ₂ Tube
	4pm	A to Z drops 0.5ml given and. Vit D ₃ drops 0.5ml given
		NI BP and ILO are monitored & recorded.
	5pm	Baby is active & alert (cnywell).
		KMC Started by mother at 5:15pm. NNS given by mother.
	7pm	KMC finished. No complaints.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

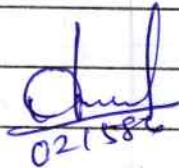
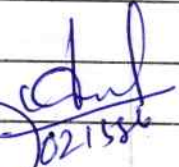
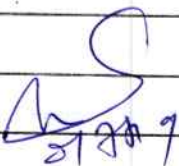
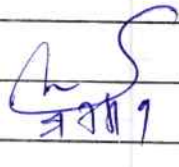
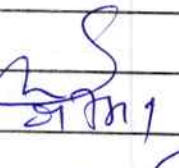
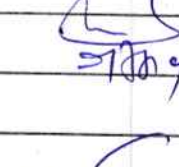
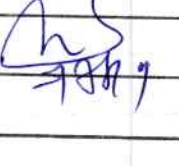


20

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
12/7		Reassessment done: Baby vitals stable. no fresh complaints. of any apnea, desat.	 021586
	8pm	Hand over given to the next duty staff • Tmw mother can handle	 021586
12/2/26	8PM	Night duty notes - 12/7/26 Baby hand over taken from the evening duty staff. Baby is on room air.	
	9PM	Feed given 20ml via abt tube 10ml via paledai. Baby tolerating the feed. No any Complaints.	 21/8/26
13/2/26	12AM	Baby vitals are checked and recorded. Vitals are stable. No any Complaints.	 21/8/26
	1AM	Baby is on under SSP T.	
	3AM	Feed given 20ml via abt tube. Baby tolerating the feed.	 21/8/26
	4AM	Morning Care given.	
	6AM	Maintained SpO2 chart.	 21/8/26
	8AM	Baby hand over given to the morning duty staff.	
		- Mother can handle from today	 21/8/26

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
13/7/26		<u>Morning Duty</u>	
	8am	⇒ Taken Over the baby from night duty staff. Baby's on Room air ⇒ Colours pink. activity is good Cried well. ⇒ Abdomen Soft. No distention. ⇒ Desaturation & Tachycardia present. ⇒ Seen by Dr. Monisha Adve * Respiratory Monitoring * Start APO_2 0.8 liter * DO DO Blood gas, CRP, CBC Ala^+, Ca^+, PO_4, ALP after Observation. * Continue Caffein * On feeds some GFI. * CBu BD. ⇒ Feeds given via NG. taken well and tolerated.	Im 01/7/26 Im 01/7/26

Docu. No. : RCH /FRM / CLINICAL / 089



22

NURSES NOTES

- ☐ No Known Drug Allergies
- ☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
12/07		<u>Evening duty report 13/07/26</u>	
	8pm	Baby hand over taken from morning duty staff. Vitals signs checked & recorded. Baby feed 20ml ERM + P.N Q 2 HR. UREN. COLOM is fine.	Smr
	3pm	thermoregulation is maintained. SPO2 maintained. Feed 20ml ERM + P.N Q 2 HR. UREN.	Smr
	5pm	vitals signs checked & recorded. 20ml P.N Q 2 HR. UREN. COLOM is fine.	Smr
	7pm	Feed 20ml P.N Q 2 HR. UREN. COLOM is fine.	Smr
	8pm	hand over to next duty staff.	Smr
		<u>night duty notes - 13/07/26</u>	
13/07/26	8pm	Baby hand over taken from the evening duty staff. Baby is on O2. 1lit/min on flow. FiO2 - 21%.	AS
	9pm	Feed given 20ml via oral tube. Baby tolerating the feed. no any complaints.	AS
	10pm	Baby vitals are checked and recorded. vitals are stable.	AS

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



23

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
14/7/26	2AM	Continue notes Feed given 20ml via or tube. Baby tolerating the feed. No any complaints	[Signature]
	3AM	Morning Care given	[Signature]
	5AM	Maintained sfo chart Baby is on nasal prongs of support. FiO_2 - 21%, Flow - 1lit/min on flow.	[Signature]
	9AM	Syr. Calcimax p-1.5 ml given AS per AS drug chart order	[Signature]
	8AM	Baby hand over given to the morning duty staff	[Signature]
		morning duty.	
14/7/26	8AM	- Baby hand over taken from the night duty staff - Baby is on $NP O_2$ FiO_2 - 21 O_2 lit/min - Feed 20ml EBW + BMF given - Feed tolerate. - No any other complaints	
	9AM	- Baby has disat. - Informed to Dr. Monisha. Man. advised to do sample	[Signature]

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

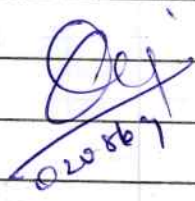
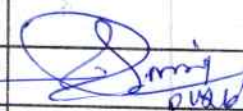


29

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
10am		- Iv line secured sample sent	
11am		- Pr. Monisha ran rounds • O ₂ litre. Nasal prongs. Afc • Feed 20ml via OG. • No lmc, NNS.	 02/08/26
12pm		• Feed given Feed tolerate - saturation maintained - no any other complaints • monitor vitals.	 02/08/26
1pm		• maintain stc. • Feed tolerate. No vomiting • No Apnea	
2pm		- Handover given to the evening duty staff	 02/08/26
14/07		<u>Evening duty report 14/07/26</u>	
2pm		Baby hand over taken from morning duty staff vitals signs checked in Rew-sled. Baby feed 20ml/FRM+P.N & 24-R LMFN.	 02/08/26
3pm		vitals signs checked in recorded	

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



25
NURSES NOTES

— No known drug allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		SPO2 maintained. Feed 20ml/BRM+P.N & 2HR CUREN.	
		COLOR is pink	<i>[Signature]</i>
	5pm	thermoregulation is maintained Feed 20ml/BRM+P.N & 2HR CUREN	
		COLOR is pink	<i>[Signature]</i>
	7pm	vitals signs checked & recorded SPO2 maintained feed	
		20ml/BRM+P.N & 2HR CUREN	<i>[Signature]</i>
	8pm	hand over to next duty staff	<i>[Signature]</i>
night duty Notes - 19/7/20			
19/7/20	8PM	Baby hand over taken from the evening duty staff Baby is on O2 support - 0.6l/min flow via NP.	<i>[Signature]</i> 8/7/20
	9PM	Feed given 20ml via OG tube Baby tolerating the feed no any complaints	
19/7/20	1AM	Baby vitals are checked and recorded	<i>[Signature]</i> 8/7/20
		IV Line Pattern NP score 0.	
		Checked NIBP	
	3AM	Feed given 20ml via OG tube. Baby tolerating the feed no any complaints	<i>[Signature]</i> 8/7/20

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



26

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Continue notes	
	5AM	Morning Care given	
	6AM	Maintained s/o chart	
	8AM	Baby Hand over given to the Morning duty staff	
		- Feed 20ml B/H	
		- CBG BD	
		- Continue supplements	
15/7/2026		Morning Duty	
	8AM	→ Taken Over the baby from night duty staff. Baby is on O ₂ Support Oculiten via NP	
		→ Colour pink abdomen	
		Soft. No distention. Activity is good. Cried well	
		→ Urine passed	
		→ Feeds (Bm + PM) 20ml given via OR.	
		→ Feeds tolerated. No Vomiting	
		→ IV line Patent	
		→ Tachy cardiac & P.	
		→ All BP monitored	
		→ Maintained Intake and output Chart	

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



27 **NURSES NOTES**

☒ NO Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
15/07/26	11:00	→ sleep by Dr. Monisha Advice: * On feeds 20ml Q4 1/2 HMF * Continue Oral Supplements. * NO Send viral panel after discussion to the parents * Continue Oral supplements. * Alacortan Alacort drops Q4 * position Change Q4 * Chest physio. → Due medication given as per Chart.	
15/07/26		<u>Evening duty report 15/07/26</u> 2pm → Baby hand over taken from morning duty staff. vitals signs checkedly reassessed Baby supported on OAL on flow. activity is good 4pm → vitals signs checkedly reassessed. SpO2 maintained Feed 20ml FBM + P.N Q2HR Lumen. Lumen is fine 5pm → thermoregulation is maintained SpO2 maintained Feed 20ml FBM + P.N Q2HR Lumen	<i>[Signature]</i> <i>[Signature]</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



(28)

NURSES NOTES



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
	7pm	vitals signs checked by recolled feed 20ml / EFFERBIPAN 22HR curv.	<i>[Signature]</i>
15/8/26	8PM	NIGHT DUTY NOTES - 15/8/26 Baby hand over taken from the Evening duty staff. Baby is on O ₂ Support 0.1 lit/min.	<i>[Signature]</i>
	9PM	Feed given 20ml GRT via on tube baby tolerating the feed	<i>[Signature]</i>
16/8/26	12AM	Baby vitals are checked and recorded	<i>[Signature]</i>
		RBS - 99 mg/dl	<i>[Signature]</i>
	1PM	Feed given 20ml GRT Baby tolerating the feed	<i>[Signature]</i>
	3PM	Dr Line pattern WP score 0. Baby is on O ₂ Support 0.1 lit/min on flow.	<i>[Signature]</i>
	5PM	Morning Care given	<i>[Signature]</i>
	6AM	maintained to chart	<i>[Signature]</i>
	8AM	Baby hand over given to the morning duty staff	<i>[Signature]</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



29
NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
16/7/2026		Morning Duty	
	8AM	=> Taken Over the baby from night duty staff Baby's on O ₂ Support Ocu lifer via N/P.	<i>[Signature]</i> 0mm
		2) Colour pink. Activity is good. Cried well	
		=> Abdomen Soft. No distention.	
		2) NIBP monitored	
		=> Tachycardia Q & R	
		2) R/L in Patient	
		=> Baby passed clear	<i>[Signature]</i> 0mm
	12pm	2) Feeds 20 ml gr. via nas	
		To chart maintain vital signs stable with O ₂ Support	
	2pm =>	vitals signs checked by recorded. SpO ₂ maintained.	<i>[Signature]</i> 0mm
	3pm =>	Feed 20ml (B.M + P.N) Q 2 HR LUNEN. Colour is pink	<i>[Signature]</i> 0mm
	4pm =>	thermoregulation is maintained Feed 20ml (B.M + P.N) Q 2 HR LUNEN. activity is good	<i>[Signature]</i> 0mm
	7pm =>	vitals signs checked by recorded Feed 20ml + B.M + P.N Q 2 HR	<i>[Signature]</i> 0mm
	8pm =>	Hand over to next duty	<i>[Signature]</i> 0mm

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
16/7/26		Night duty :-	
8:10pm		⇒ Baby details taken over from evening evening duty staff. Baby is conscious and activity is good. vitals are checked and recorded. Baby is on O ₂ support of 0.4 litres via NP. IV line present, Patency is good. Feed 20ml EBM + PN. 2nd hly. Mild tachycardia present. I/O chart monitored.	Dr. Jyotsna
10pm.		Feed 20ml EBM + NMF given as per order. No vomiting baby tolerate feed.	Dr. Jyotsna
12Am.		17/7/26 (Friday). Baby is conscious and activity is good. vitals are checked and recorded. Baby is sleeping well. feed 20ml given as per order.	Dr. Jyotsna
2Am.		Baby is on O ₂ support of 0.4 lt via NP, SpO ₂ - 98%, Feed 20ml given as per order. No further complaints.	Dr. Jyotsna

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

- ☐
- Drug Allergies

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



32

NURSES NOTES

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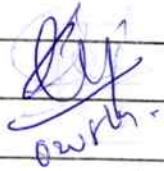
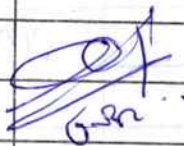
☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Morning duty 17/7/26	
	2Am.	Baby details handing over from Night duty SW Baby conscious and alert. Baby	True 015754
	10Am	vital stable. O2 92% on going Baby color pink. Baby motion relaxed. Baby activity good. Baby feed. 20ml/hr on going. Baby abdomen soft. Baby. I.V line patent. Baby. no any other complaints	True 015154 True 015154.
	11Am	DR. Monisha Nam seen the Advised to Tom Hirs checked also HR. Throat means Tom checked Iron tube started. otherwise continue same as started.	True 015154
	1pm.	Baby vitals stable Baby O2 92% Room air Baby feeding given. No chart maind. →	True 015154
	2pm	Baby 20 chart maind Baby details handing over given to Evening duty SW	True 015154

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Evening duty note	
17/12/24	2pm	- Baby is on RP. - Hand over taken from the morning duty. - Feed 20ml Quotry + HNF.	
	3pm	- Feed tolerate well. - no vomiting - no any other complaints. - Feed tolerate. - vitals are stable.	 Dr. Smith
	4pm	- No fever spike. - no any other complaints. - Feed given. - no issues.	
	8pm	- Fever spikes present. - Informed to Registrar Doctor. - Drops Paracetamol given.	 Dr. Smith
	1:17pm	- Handover given to the night duty	 Dr. Smith

Docu. No. : RCH /FRM / CLINICAL / 089



(34)
NURSES NOTES

— NO KNOWN Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Night duty Notes (17/07/26)	
17/7	8 pm	Baby hand over taken from evening duty staff. Baby is on RA. SpO ₂ maintained RA. SpO ₂ - 95 to 99%. RR - 56 to 58 bpm.	<i>[Signature]</i> 021556
		Q2 H. 20ml EBH + Prevacid feed are given via Nby tube. Baby feed tolerate well.	
		All BP are monitored & recorded.	
18/7	12 pm	Baby is active & alert (cry well).	<i>[Signature]</i> 021556
	3 am	20ml EBH + PNI feed are given	
	5 am	Baby care are given weight are checked & recorded. Diapers changed urine & stool passed.	
	Gen	IBD chart monitored & recorded	
	Tax	Reassessment done	
	San	Hand over given to the Next duty staff	<i>[Signature]</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



25

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
18/7		Morning & Evening Duty	
	8am	- Taken Over the baby from night duty staff - Baby's on Room air - Abdomen Soft - no distention - Colic pink activity is good. Cried well - Out kept in position - feeds some given via Out	
		- Seen by Dr. Monisha Advise: * Do Send Resp. Biofuel after Discussion of the parents. * Continue Out feeds & oral Supplements * Vitals monitoring * Do Send Urine Routine. * Check Manual Temperature Q 4 H -> Tachycardia.	
		Evening shift notes	
	2pm	Baby details taken from morning shift staff, on room air OG feeds Q 2 H some PE Sachet getting	

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



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- ☐
- Drug Allergies

Docu. No. : RCH /FRM / CLINICAL / 089

SNC-00030833

IP24-00008843

Baby Of SWAPNA.K

06-07-2026

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(M)

Dr. MONISHA R



37

NURSES NOTES

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☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Night duty Notes (18/07/26)	
	8pm.	Baby details hand over taken from evening duty	
	9pm	Baby on O ₂ Support - 1 L/min Feed 10ml given Feed tolerate well. No vomiting	<i>[Signature]</i>
	12pm	- Informed to Dr. monisha nam. - advised to give 18ml O ₂ try. Temperature did body check - Feed tolerate 18ml O ₂ try	
19/7/26	2am	- no vomiting - Feed 18ml O ₂ try. - Stool passed. - Baby is active well. - no any other complaints	<i>[Signature]</i>
	4am	- monitor vitals.	
	6am	- maintain I/O - morning care given. Shower bath - Feed 20ml given. - Feed tolerate. No vomiting. - Hand over given to the morning duty staff.	<i>[Signature]</i>
			<i>[Signature]</i>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



38

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
19/07/26		morning duty notes 19/07/26	
	8AM	Baby hand over Eileen Baby stable, vitals are checked & recorded, in low patterned, 100% oxygen feed given. Ca + hml 18ml in Ob.	
	9am		
	11am	Baby passed urine and stools, feed given in Ob. 2 hourly 18 ml.	
	1pm	vitals are checked & recorded feed given, EBM + PN - 18ml Ob.	
	2pm	Hand over given to Evening duty staff.	Suf
	3pm	Evening duty Report - Baby hand over taken from morning duty staff, Baby vitals are stable, in low patterned, O2 - 100% oxygen feed given Ca + hml.	Suf
	3pm	Baby feed given Ca + hml. EF - 18 ml EBM + PN, Baby tolerating feeds, 80% body temperature checked and recorded	Suf

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



39
NURSES NOTES

☐ NO Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
	5pm.	Baby vitals are checked and recorded Baby is stable, temperature checked & Monitored. Baby passed Urine, Feed BR given BR+PN - 18 ml, Baby tolerating feeds. Medicine given as per order →	<i>[Signature]</i>
	7pm.	Feed given BR+PN, Baby tolerating feeds, Syn. calceimax. 1.5 ml given as per order →	<i>[Signature]</i>
	8pm.	Blood culture Reports are awaited Handover given to Night study Staff →	<i>[Signature]</i>
19/7/26	8pm	Night duty Note:- Baby details hand over from evening duty Baby vitals are stable In line patient O2 sat. on flow	<i>[Signature]</i>
	9pm	Baby Feeding 2 hours given FT 18ml [BR+PN] Baby tolerating Feeds temperature checked and recorded	

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



- ☐ No Known Drug Allergies
☐ Drug Allergies

NURSES NOTES

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
19/7/26	10pm	Baby vitals are checked and recorded. Baby is stable. Temperature checked, monitored. Baby pulled into room. Feed given. Baby tolerating feed. Moderate green stool noted.	
	11pm	Feed tolerance - no fever spike.	
20/7	4am	Feed given orally. No any other complaints. Monitor vitals. Maintain stable.	
	6am	Morning care given.	
	8am	Handover given to morning duty staff.	
	8am	Handover given to morning duty staff.	
	9am	Hand over taken from Night Duty staff, Vitals are checked & recorded, temperature checked & documented. Feed given & on duty room in CR, Baby tolerating feeds.	

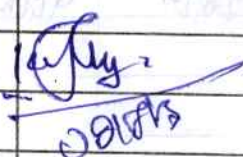
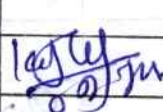
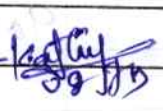
NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
	11am	Baby passed urine & stools, O ₂ on flow & line, On feed Given - 10 ml - EBM + PN, Baby tolerating feeds.	
	1am.	Baby General Condition observed Vitals checked, O ₂ feed given 10 ml EBM + PN, Baby tolerating feed.	
	3pm	Baby passed urine & stools, Feed 10ml O ₂ and by given, Baby tolerating feed	
	5pm	Vitals checked & Reassessed, vitals are stable, Baby passed urine. O ₂ & line in freeflow, Dr line patterned, Spx. tonophrenic with loud, Feed EBM + PN - 10ml given.	
	7pm.	Baby feed given EBM + PN 10ml in O ₂ , Baby tolerating feeds, O ₂ free flow in line.	
	8pm	Hand over given to Night duty Staff.	

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



42
NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
20/7/26		<u>Night duty notes on (20/7/26).</u>	
	8pm	Hand over taken from evening duty staff.	
		Baby on room air spg. maintained on room air.	
	9pm	O ₂ feed tube kept in position. 2hrs 19ml feed are given. Baby feed tolerate well. No complaints of vomiting & distaste.	
	10pm	Baby vitals are monitored & recorded. Baby vitals stable.	
21/7/26		No any fresh complaints.	
	12Am	NIBP are monitored & Recorded. Baby is active & alert. (any well).	
	3:00am	Baby care are given. I/o. Chart monitored recorded. Baby weight checked.	
	7:00am	Requestant done.	
	8:00am	Hand over given to the Rest duty staff.	

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES

☐ NO KNOWN Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Morning duty	
4/7	8am	Handover taken from the night duty staff	
	9am	Baby is on O ₂ . Dr. Monisha mom sounds - • trial off O ₂ , advice to - • Don't try paladai • Keep on OH feed.	
	11am	• ON RA • Feed coml O ₂ try • Feed tolerate well • No vomiting	
	12pm	• oral medicines given. • No any other complains -	
	2pm	• Baby is stable. • monitor vitals - Handover given to the evening duty staff	
		• Bld c/s so far no growth	oom

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



44

NURSES NOTES

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
		Evening duty 21/7/26	
	2pm	Baby details handing over to morning duty S/N	me 015184
	4pm	Baby vital stable Baby was pink Baby is alert. Baby RA. SpO2 maintained. Baby feeding EBM Abt tube given. Baby was feeding. tolerate well. Baby no any other complaints Baby vital stable.	me 015154
	6pm	Baby active well. Baby no chart maintained. Baby monitor vital signs Baby alert Baby reaction given. Baby Position changed Baby no chart maintained. Baby details handing over to Night duty S/N	me 015184
	8pm		me 015184
		Night duty - 21/7/26	
	8.10pm	Baby details taken over from night duty staff, Baby is conscious and activity	me 015184

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

NURSES NOTES

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)	SIGNATURE
<u>Cont</u>		is good, vitals are checked and recorded. Feed. 18ml EBM+PN 2nd boly. IV line present, Pattery is good. Oral supplements are given as per order. Intake and output chart monitored.	<u>Deep Joshi</u>
	9Pm	Feed 18ml EBM + PN given through OG, baby tolerates the feed.	<u>Deep Joshi</u>
	11Pm	Vitals signs checked by Resoaled. feed 18ml EBM+PN 02HR Urine.	<u>Deep Joshi</u>
	12Am	IN- PIP TAZ DV BD Urine haemoregulation is maintained no temperature anomaly is good.	<u>Deep Joshi</u>
	4Am	Vitals signs checked by Resoaled. feed 18ml EBM+PN 02HR Urine. colour is pink. BP checked by Resoaled.	<u>Deep Joshi</u>
	6Am	Baby weight in BP checked by Resoaled. colour is pink feed 18ml EBM+PN 02HR Urine	<u>Deep Joshi</u>
	8Am	Baby details handed over to morning duty staff	<u>Deep Joshi</u>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030833

IP24-00008843

Baby Of SWAPNA.K

08-07-2026

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Dr. MONISHA R



NURSES NOTES

(USE BALL POINT PEN ONLY)

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☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		<i>Morning + Evening duty on (22/07/25)</i>
	9am	Baby Handover taken from Night Duty staff, vitals checked & recorded. Feed FBM + PM 18 ml (2 and 14) IV line patterned, Baby tolerating feeds <i>leafy 20/7/25</i>
	11am	Baby passed urine & stooly Feed FBM + PM 18 ml (2 and 14) Baby tolerating feeds <i>leafy 20/7/25</i>
	1pm	Baby vitals are checked and recorded, vitals are stable. Baby passed urine, Baby handled by Mother feed tried 18ml in paladin FBM + PM by mother <i>leafy 20/7/25</i>
	3pm	Hand over given to Evening duty staff, Baby General condition assessed vitals checked & recorded, Baby is stable <i>leafy 20/7/25</i>
	3pm	Feed FBM + PM - 18 ml in paladin given, IV line patterned, Baby tolerating feeds <i>leafy 20/7/25</i>
	5pm	Baby is active & alert. (Crywell)
		No any fresh complaints of vomit & distat.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

NURSES NOTES
 (USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	7pm.	Reassessment done Baby in RA Baby vitals stable. No complaints. Antibiotic continue.
	8pm.	Hand over given to the next duty staff.
22/7/26	8pm	<i>Night duty (22/7/26)</i> Baby hand over taken by night duty. Baby is active cry. Tone is also good. Baby feed 180 ml EBM + PN @ 2hrs. IV lines present patency is good. Oral Supplement are given as per drug order. Intake and output monitored.
	9pm:	Baby feed 18 ml EBM + PN Given - through pda der. Baby tolerate the feed.
	10pm:	Naso clear NID drop Given as per drug chart order.

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

SNC-00030833

Baby Of SWAPNA.K

08-07-2026

Dr. MONISHA R

IP24-00008843

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48 NURSES NOTES

(USE BALL POINT PEN ONLY)

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☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
22/7/26	11pm	Baby feed 18ml EBMT PN Cricen through paladar. Baby tolerated the feed. Sig: pip toy 150 mg Cricen as per drug chart - Jy 021605
23/7/26	1AM	Baby feed 18ml EBMT PN Cricen through paladar. Baby tolerated the feed. Baby vitals are check and recorded - Jy 021605
	2AM	Nasollear drop Cricen as per drug chart - Jy 021605
	3AM	Baby feed 18ml EBMT PN Cricen through paladar. Baby tolerated the feed.
	5AM	Baby feed 18ml EBMT PN Cricen through paladar. Baby tolerated. Bp checked and recorded. - Jy 021605
	7AM	Baby feed 18ml EBMT PN Cricen through paladar. Baby tolerated the feed. - Jy 021605
	8AM	Baby hand over to morning nurse - Jy 021605

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



49

NURSES NOTES

(USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
23/7/26	8 am	Morning & Evening duty - 23/7/26 Baby hand over taken from the night duty Staff Baby is on Room air
	9 am	Baby vitals are checked and recorded vitals are stable - <i>AS</i>
	10 am	Feed given 20ml B2H via Paladei. Baby tolerating the feed. No any Complaints
	11 am	Dr. monisha man Advice Shift Baby to Mother side Today with vitals monitoring given 20ml B2H via Paladei. Continue Supplements. Stop Antibiotics - <i>AS</i> vaccines BCG, OPV on 25/7/26. ROP screen Tomorrow -
	12 PM	Feed given 20ml via Paladei. Baby tolerating the feed. No any Complaints Baby shifted to the Mother side Baby hand over - <i>AS</i>
	3 PM	Baby hand over given to the 3rd shift Staff <i>AS</i> Baby details hand over taken from Nurse staff please.
	5 pm	Baby is on Continuous monitor Baby passed urine & motion

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



50

NURSES NOTES

(USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	7pm	Baby Umbilical Cord is healthy. no any Infection or any smell. Baby is on continuous monitor
	8pm	Hand over given to evening duty staff nurse → <i>Mud</i> <i>6/2/26</i>
		night duty notes (23/7/26)
23/7/26	8pm	Baby hand over taken by night duty: Baby is Active, cry, Tone is also good. Baby is feed 20 ml FBM + prn. 2nd day: Input and output maintain <i>Dr 23/26</i>
	10pm	Baby feed 20 ml FBM + prn 2nd day: Urine through padam Baby is tolerated feeds. <i>Dr 23/26</i>
24/7/26	12pm	Baby feed 20 ml FBM + prn 2nd day Urine through padam Baby is tolerated feeds. <i>Dr 24/26</i>
	2AM	Baby feed 20 ml FBM + prn 2nd day Urine through padam Baby is tolerated feeds. <i>Dr 24/26</i>
	4AM	Baby feed 20 ml FBM + prn 2nd day Urine through padam Baby is tolerated feeds. <i>Dr 24/26</i>

NOTE: DO NOT WRITE OUTSIDE THE MARGINS



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NURSES NOTES

(USE BALL POINT PEN ONLY)

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

BirthRight™
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
24/7/26	6 AM:	Baby feed 20 ml BBM + PN 2nd try Cried through paladar Baby feed is tolerated feed - <i>Monisha</i> Baby weight & BP checked.
	8 AM:	Baby feed 20 ml BBM + PN 2nd try Cried through paladar Baby is tolerated feed. Baby hand over to morning duty - <i>Monisha</i>
		<i>Morning duty 27/7/26</i>
	2 AM	Baby details handing over from night. Baby vital stable Baby. <i>Push</i> conscious and oriented Baby no any other complaints <i>Monisha</i>
	9:15 AM	SIB Or Ravi Sir Advise on come Feeding
	11:30 AM	SIB Or. monishamam come feeding <i>Q</i> <i>05/26</i>
	1 PM	Baby come monitor Baby side no any other new complaints

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502

NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
24/7	2pm	Hand over given evening duty SW
		Evening duty notes on 24/07/26.
24/7	2pm	Hand over taken from morning duty staff Baby is on RA in Mother side. SpO2 is 97% IV line patented & No phlebitis.
	3pm	Q 2H 20ml EBMT Prenatal HMF feed are given via palladi.
		Baby feed tolerate well, no vomit & distend.
		Oral Nutritional supplements ongoing in every feeds.
	5pm	Baby is active & alert (cry well). No any fresh complaints.
	6pm	Baby vitals are monitored & recorded.
	7pm	Q 4H Temp are monitored. I/O chart are monitored & recorded.
		Reassessment done.
		Baby vitals stable, no complaints.
		I/O closed.
	8pm	Hand over given to the next duty staff

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NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
25/7	2am	Morning duty 25/7/26
		Patient details handed over taken from Night duty sh
		Baby is conscious and oriented
	9am	Vitals core stable
	10am	SB Dr. Monisha advised to do vaccine BCG and opv. → given. — Subh GPTM
	11am	IV Line removed.
		Baby taking EBM well. Bio chart maintained
	1pm	Vitals core stable
		Plan discharge
		Baby Jackson EBM 20ml
	2pm	Handover given to Evening duty sh — Subh GPTM

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NURSES NOTES (USE BALL POINT PEN ONLY)



☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Evening duty on 25/7/26
25/7	2pm	Baby details taken over from the morning duty staff
		Baby was conscious and oriented
		vitals are stable → <u>okay</u>
	3pm	Baby had hrs once
		feed to brate no vomiting
		oral Supplement take as per drug chart
	5pm	Re-assessment done vitals
		are stable & record
	7pm	2lo Chart monitoring
		Baby had hrs hrs once feed
		to brate no vomiting → <u>okay</u>
	8pm	Baby details handing over
		to night duty staff → <u>okay</u>
		Night Duty 25/7
	8pm	Baby hand over
		taken from evening duty
		Baby conscious and
		oriented →
		Baby vitals stable
		Baby taken hrs m
		2nd hr →

Double check

NOTE : DO NOT WRITE OUTSIDE THE MARGINS



NURSES NOTES (USE BALL POINT PEN ONLY)

☐ NO KNOWN Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		tuesday ROP plan
	10:30 PM	Baby Dr. Anas Sir
		Seen the baby →
		continue the same
	5 AM	Baby urine passed
	7 AM	Baby PLO chart maintained →
	8 AM	hand over given to morning duty
		Morning duty 26/7/26
	8 AM	Baby hand over taken from night duty Sir
		PTNS checked 6 RECORDED
		EBM 221 Siten 03F
		PLO chart main ten
	9 AM	S/O Dr. Parthi mam Advice
		urine feeding
		medication
	12 PM	oral medication given
		Baby still no any other new complaints
		Baby oral medication given
	2 PM	PT hand over Siten evening duty Sir

Uchale 02/07/26

015 PM

015 PM

015 PM

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NURSES NOTES

(USE BALL POINT PEN ONLY)

☐ No Known Drug Allergies

☐ Drug Allergies

DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
		Evening duty on 26/7/26
26/7	2pm	Baby details taken over from the morning duty staff
		Baby was Conscious and Oriented
		Vitals are checked & record → <i>[Signature]</i> 02/13
	3pm	Baby had DBP to take no vomiting
		Plt Soft no any other Complaints
	5pm	Re-assessment done vitals → <i>[Signature]</i> 02/13
	6pm	are stable & record
		Baby slept well no any other Complaints
		Plt Chart monitoring
	8pm	Baby details handing over to night duty staff → <i>[Signature]</i> 02/13
		Night duty 26/7.
	8pm	Baby hand over
		Taken from evening duty
		Baby conscious and oriented →
	9pm	Baby vitals stable
		Baby taken endruy
		BBM 25ml →
		Baby urine passed <i>[Signature]</i> 02/13

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NURSES NOTES
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DATE	TIME	(ALL ENTRIES MUST BE SIGNED, DATED AND TIMED)
	10 ^{PM}	Baby kept well
		Baby on continues
		monitoring →
		Baby no other
		complaints →
	2 ^{AM}	Baby Urine / motion
		passed →
	3 ^{AM}	53ml 20ml given
	5 ^{PM}	Pls Chart maintain
	6 ^{AM}	morning Routine care
		done →
	8 ^{AM}	hand over given
		to morning duty

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- [illegible]

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