Rainbow Children's Hospital
BirthRight by Rainbow

Rainbow Children's Hospital - Banjara Hills

8-2-120/103/1,2,3,4 and 5,Road No: 2, Banjara Hills, Telangana, Hyderabad, INDIA Banjara Hills ,Hyderabad ,Telangana, India ,500034.
TEL NO :+91-40-4466 5555
WEB : https://rainbowhospitals.in

ADMISSION SHEET

Registration Details :

Admission No : IP5-00174428 **Admit Date** : 28-May-2026 **Admit Time** : 08:40 AM **UHID** : BAH-00657445

Patient Details :

Patient Name	: Baby Of SHUBHADA RAMANATHAN	**Age**	: 0 D
Guardian	: Mr NYAYAPATI ANWESH RAMANUJAM	**DOB**	: 28-05-2026 07:10 AM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H NO - 6-3-581, FLAT NO- C 301, KESHAV DALE APARTMENTS, ANAND NAGAR COLONY , ZILLA PARISHAD ROAD, Khairatabad Hyderabad Telangana INDIA 500004	**Phone No**	: 9701807592/ 9949354000
		E-mail	: NOMAIL@GMAIL.COM

Admission Details :

Bed Type : NICU **Bed No** : NICU 244 **Ward Name** : 2F-NICU 1

Room No : NICU 244 **Admission Type** : First Visit

Contact Details :

Name	: Mr NYAYAPATI ANWESH RAMANUJAM	**Relationship**	: Father
Contact Address	: H NO - 6-3-581, FLAT NO- C 301, KESHAV DALE APARTMENTS, ANAND NAGAR COLONY , ZILLA PARISHAD ROAD, Khairatabad Hyderabad Telangana INDIA 500004	**Phone No**	: 9701807592 / 9949354000

Signature

Doctor Details :

Doctor Name	: Dr. VIJAYANAND JAMALPURI	**Specialisation**	: NEONATAL INTENSIVE CARE
Referral Doctor	: Self	**Phone No**	:
Co-Consultant	:		

Payment Details :

		Deposit Amount	: 0.00
Payment Mode	: Cash	**Payor Name**	: SELFPAY

Date	Time	Investigation	Result	Order No.	Signature

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Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 1 D (F)
Dr. VIJAYANAND JAMALPURI

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ACTIVITY RECORD FOR BILLING

Name :_____

UHID No. : _____ IP 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
01/5/26	5:30pm	NICU	3rd floor	Apeglia

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
29/5/26	NPL,	26054765	Vanaja
	VBG, RBS	26054761	
28/5/26	VBG, RBS	26054372	
28/5/26	VBG	26054244	
"	Blood ds	26054146	Hemalatha
"	Blood grouping	26054146	
"	VBG, RBS	26054145	
29/5/26	RBS	26054725	Hemalatha
30/5/26	RBS	26074891	Gowri
30/5/26	NPL	26054911	chw
31/5/26	RBS	26055352	
1/6/26	RBS		
1/6/26	NBS	26055651	Deepika
1/6/26	ECG	26055749	Deepika
1/6/26	SBR	26055582	Deepika
1/6/26	DSPT	9637833	Deepika
2/6/26	CRBS OD	26055879	Revathi
2/6/26	SBR	26055980	Shinil

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
28/5/26	Invasive monitor	11:46 Am		9630997	
28/5/26	Syring pump	11:46 Am		9630997	
28/5/26	CPAP	11:46 Am	29/5/26 @10 AM	9630997	
28/5/26	Oxygen	11:46 Am	11	9630997	
29/5/26	DSPT	29/5/26 @ 2 PM	30/5/26	9633570	Hema
30/5/26	SSPT	30/5/26	30/5/26	9636556	Chan
31/5/26	Inv monitor	28/5/26	1/6/26 6 Am	9630994	chand
	syringe pump	11			
	SSPT	30/5/26 1 pm	31/5/26 @ 1 pm	9636556	
1/6/26	DSPT	1/6/26 @ 2:30 pm	2/6/26 2:20 pm	9637833	meghu
2/6/26	SSPT	2/6/26 2:20 pm		9634594	Satya

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature

ANY OTHER INFORMATION

.....

.....

.....

.....

.....

.....

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : ..... Age : ..... Father's Name : ..... Age : .....

Date of Birth : ..... Date of Admission : ..... UHID No.: .....

NICU Consultant : ..... 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 Shubhada Ramanathan

Gender : ☐M ☑F Blood Group : A(+ve)

Date of Birth : 28/5/26 Time of Birth : 7:10 am

Place of Birth : RCH-B

Mother's Blood Group : A positive.

Birth Weight (gms) : 2.41 kg Length (cms) : .....

OFC (cms) : .....

Estimated Gesth Age : 34+3 wks

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 31y Ht : ..... Wt : ..... BMI: ..... Married Life : ..... LMP : 17/9/25 EDD : 5/7/26.

Conception : Spontaneous or with Rx. : Spontaneous

Booked at what GA. : 12+3 wks. AN Steroids Drugs / Doses : Dose covered

Last Scans Details : 16/5/26 → 32+6 wks | cephalic | 2115g | AFI - 16.1 cm. Dopplers - (N)

TT Immunization and Iron / Folic Acid : .....

MATERNAL RISK FACTORS

Age : ☐<18 yrs ☐ > 35yrs

Consanguinity : ☐ Yes ☐ No

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

H/o PIH (after 20 weeks) / PE

How many Drugs / Doses / Since how long : .....

.....

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

.....

IUGR - when detected : .....

Doppler (Increased Resistence / ADEF / REDF / Redistrbution 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 Hypothyriodism : when diagnosed ? Medication?

.....

Any other Chronic Medical Problems, when detected drugs ? Anti La - antibody weakly positive. 29/11/25

(Anemia, SLE, Jaundice, CHD, Heart Disease) Grandmother; Autoimmune disease

Infection : H/O, Fever

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

UTI : when : ..... Any culture : .....

PPROM: Duration : 27hrs ☐ Uterine Tenderness ☐ Foul Smelling Liquor ☐ HVS (if taken) - Results : .....

Medication during Pregnancy : ..... Duration : .....

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PAST OBSTETRIC HISTORY

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

Sl. No.	Age	GA wks	B.W	Gender	Significant	Details
1	2025	→	4 weeks	→	Spont. miscarriage.	
2.	PP.					

PERINATAL HISTORY

Treating Obstetrician : ..... Hospital : ..... ☐ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig)

Second stage (> 2 hours after dilation)

LSCS : ☐ Elective ☐ Emergency Indication : ..... preterm vaginal delivery

Specify the reason : .....

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☑ Normal ☐ Suspicious ☐ Pathological

MSL : —

Resuscitaion : ☐ Yes ☑ No

Cord ABG : pH – 7.315, pCO2 – 38.4,

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

NEONATAL RESCUSTITION DETAILS

APGAR SCORE

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

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

1 Minute	5 Minutes	10 Minutes
1	2	2
2	2	2
2	2	2
2	2	2
2	2	2
9	10	10

TOTAL

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

Snapee II Score

					Score
Mean BP (mmHg)	> 30 (0)	20-29 (9)	< 20 (19)		0
Lowest Temp (oF)	> 96 (0)	96-95 (8)	< 95 (15)		0
Pao2 / Fio2 (mmHg%)	> 2.49 (0)	1-2.49 (5)	0.3-0.99 (15)	< 0.3 (28)	0
Lowest Serum PH	> = 7.2 (0)	7.1-7.19 (7)	< 7.1 (16)		0
Multiple Seizures	No (0)	Yes (19)			0
U. Output (ml / kg / hr)	> = 1 (0)	0. 1-0.9 (5)	<0.1 (18)		0
Apgar Score	> = 7 (0)	< 7 (18)			0
Brith Weight	> = 1kg (0)	750 - 999 (10)	< 750 (17)		0
SGA	> 3rd percentile (0)	< 3rd (12)			0
				Total	0

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :

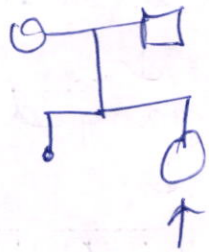
History of Present Illness:

Equipment check done
↓
Baby delivered via NVD.
↓
Baby cried immediately after birth.
↓
Oral & secretions cleared
↓
Cord clamped & cut -2UA, 1UV (+)
↓
Inj. Vit K 1mg IM given
↓
At 5min - Resp. distress (+)
SAS - 7/10.
↓
DR-CPAP initiated
↓
Shifted to NICU.

Investigation details in previous Hospital :

Feeding History :

Family History :



Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition :

Active.

VITALS : Temperature : 36.5 HR : 156 RR : 68 NIBP : CFT : <3 sec

Color of the extremities : acrocyanosis → pink.

Jaundice : Pallor : SpO2 : 97%

ANTHROPOMETRY: Birth Weight : 2410g Length : HC : Present Weight :

Ponderal Index : AGA : ✓ SGA : LGA :

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HEAD TO TOE EXAMINATION

HEAD :	Fontanelles : Sutures Shape / Moulding : Edema / Bruising : Size - (H.C.) :	Caput (+)
FACIES : (Any Facial Dysmorphism)		(N)
NECK and CLAVICLES :	Range of Motion : Asymmetry : Masses :	(N)
EYES :	Symmetry : Red Reflex : Discharge :	To be checked
EARS, NOSE MOUTH and THROAT :	Ear set / Shape : Periauricular Pits / Tags : Nasal shape / Patency : Palate : Gums : Lips : Tongue :	(N) No cleft.
THORAX and BREASTS :	Shape of Thorax : Position of Nipples and Number :	(N)
ABDOMEN and UMBILICUS :	Shape : Organomegaly : Bowel Sounds : Umbilical Stump : Discharge :	(N) 2VA + 1UV (+)
GENITILIA :	Labia / Hymen : Testicles/penis : Anus :	(N) female genitalia noted
HERNIAL ORIFICES		free
TRUNK and SPINE :		(N)
SKIN LESIONS :		No.
EXTREMETIES :	Fingers / Toes : Deformities : Hip Joint Examination :	(N) Arms / Legs : Mobility :

SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : ☐ Regular ☑ Periodic ☐ Shallow ☐ Gasping

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

Scoring of respiratory distress if present (Silverman or Downe's) : 7/10

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

Settings :

SpO_2: 97% Auscultation: BAE(+) Breath Sounds: Added Sounds:

CARDIOVASCULAR SYSTEM :

HR : 154 BP :

Femoral Pulses : B/L equally palpable felt

Other Peripheral Pulses :

Precordial Activity : (N)

Murmurs : No

Signs of Cardiac Failure : NO

ABDOMEN:

Shape : (N)

Palpation : Soft

Palpable masses : No.

Abdominal girth :

Hernia orifice : free

Anal Patency : Patent

Umbilical Cord : 2UA, 1UV(+)

First urine passed : Yes

Meconium passed : Yes No

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) :

State of wakefulness :

Prechtle Score :

Nerves : CTLA - good

MOTOR SYSTEM:

Passive Tone :

Active Tone :

Neonatal Reflexes :

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

Moro's : DTR :

ATNR : Skull and Spine :

Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M0D2H (F)
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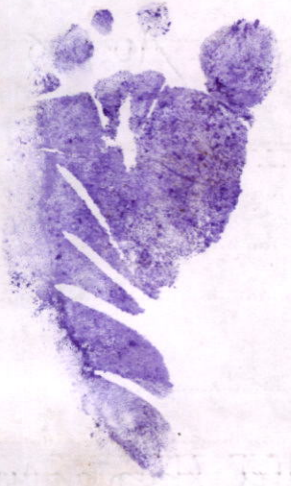
Any Congenital Anomalies : No

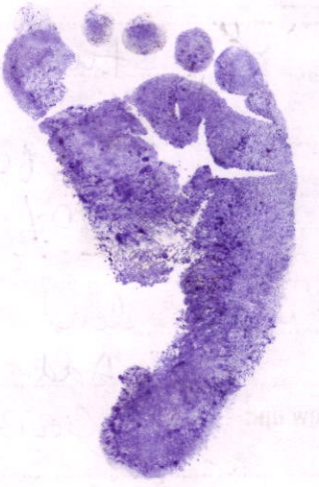
Diagnosis : DOL-1 | Late Preterm 34+3 wks | AGA | ~~NEC~~ Female | RDS,

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature :

Name : Dr. Poojitha

Date & Time : 28/5/26 8am

Consultant :

Signature : Dr. VIJAYANAND JAMALPURI Reg. No. 40526

Name : DR. VIJAYANAND JAMALPURI

Date & Time : 28/5/26 8am

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.

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AT THE TIME OF TRANSFER TO THE WARD

Final Diagnosis : ....

Neonatal condition at the time of Transfer: ....

Vital : HR : .... RR : .... BP : .... SPO2 : .... Weight : ....

Any Oxygen requirement : Plan.

Systemic :

→ Start CPAP, PEEP 7cm, FiO_2 - 25%.

Medications :

→ IV - 60cc/kg/day — 80cc/kg - /10% D
10% Dextrose 30 cc
+ 3ml/kg Ca^{2+}

→ Send Blood culture

→ Add PIPTAZ.

Plan during ward follow up :

→ GRBS - now.

→ Blood gas after 2hrs.

→ 12 lead ECG after stabilization.

→ Chest X-Ray now.

Feeding Plan at the time of shifting : ....

Noted by
Swetha
012824
28/05/26 @
8.50 Am.

Screenings done during NICU Stay :

NSG : ....

Hearing Screen : ....

ROP : ....

TFT : ....

NP2 : ....

Doctor Signature (Handover Given): .... Doctor Signature (Handover Taken): [signature]

Doctor Name: .... Doctor Name: Dr Aishwarya

Date & Time: .... Date & Time: 28/5/20

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①

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/26 9:45AM		Seen by Dr. Vijayanand
	- late preterm, - LWBW - RDS [- PROM [27hrs] - Suspected sepsis	Plan - continue CPAP, ~~PEEP-67~~, ↑ PEEP to 7
	On CPAP, FiO₂ - 28%, PEEP - 6	- TV - 60ml/kg/day ↓ ~~10%~~ Half feeds 30ml/kg/day [9ml 3rd hourly] Half fluids 30ml/kg/day - Blood gas OD.
		- ~~A~~ Repeat blood gas & RBS. in 4 hours at 1:00 pm.
		- NPI @ 24 HOL [T/M morning at 7:00AM]
		- RBS 6th hourly
	Dr. VIJAYANAND JAMALPURI Reg. No: 40526	Noted By K. Bindu 28/5/26 @ 9:50am Dr. Arun

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

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/26 1:30 PM	Afternoon Notes	
	on CPAP 6cm/21%	
	HR-115/min	
	SpO_2-98%	Plan
	RR-70/min	(1) cont CPAP 6cm
	SCR (+) ICR (+)	FiO_2 to target
	repeat gas - 7.368/	SpO_2 90-95%
	43.2/23.4/-0.3/	(2) SOS ↑ PEEP if
	1.8.	distress does not
		settle.
	NG asp - 7ml brownish	(3) TV= 60ml/kg/day
	PA - soft.	10% Dextrose + Ca_3.
	Stools not passed.	(RD) before next feed.
	urine - once.	(4) NP, OG 2HOL
		(5) GRBS Q6H
	on 60ml/kg/day 10%-D.	(6) Trace blood c/s.
	GRBS - 66mg/dl.	
		Noted By K.Bessy 28/5/26 @ 1:40pm
	Temp - 36.4	
	CRT <3sec	
	PP-WF.	
	(N) cry, tone.	Dr Abhinaya
	D1 PIPTAZ.	

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

(P.T.O)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/26 3PM	seen by Dr Vijayanand	
		Plan
		① cont CPAP 6cm.
		② blood gas SOS
		③ NP, t/m
		④ TV = 60ml/kg /day
		½ feed ½ fluid
		RW to ↑ in evening
		⑤ continue antibiotic
		⑥ URBS Q6H.
	Noted By K Bossy 28/5/26 @3:10pm	Dr. VIJAYANAND JAMALPURI Reg. No: 40526
		Dr Abhinavya.
	Night rounds	
29/5/26 12:50AM	- continue CPAP, PEEP - 6	Plan:-
		- continue CPAP,
		- NPO
		Blood gas T/M Morning at 7:00Am
		- RBS 6th hourly

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	SpO2 - 94%	- TV - 60 ml/kg/day
	PR - 137/min	9 ml 3rd hourly / 30 ml/kg fluids
	RR - 35/min	- ↑ feed 2 ml 6th hourly [TF = 18 ml]
		- Trace blood c/s
		Noted by Narayan 29/5/26 - Anf

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18-05-2026 0 Y 0 M 1 D (F)
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29/5/26

DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (VENTILATED PATIENT)

Day in NICU : D2 Day of Life : 24 HOL **PMA:** 34+4

Term ☐ **Preterm** ☑ Gestation : 34+3 Corrected Gestational Age:

OVERVIEW

Problems :

S.No.	Current	Past Problems
1.	late preterm	
2.	LBW	
3.	RDS - CPAP	
4.	PPROM [27 hrs]	
5.	Suspected sepsis	
6.		

Today's Weight : 2.464 (↑52gm).

RESPIRATORY SYSTEM

Ventilatory Support : ☐ Yes ☐ No - Day # of Vent :

Mode of Ventilation : HFNC ☐ CPAP ☐ Conventional Ventilation : SIMV ☐ A/C ☐ VG ☐ HFOV ☐ iNO ☐ PPM ☐

Ventilator Settings : PIP.....PEEP.....VG.....Rate.....Fio2.....Oxygen : .....L/min

Last CXR : .....Spo2.....

ET Secretions : Clear ☐ Thick ☐ Yellow ☐ Last ABG: .....

Change over the Last 24 Hours.....

- on CPAP,
PEEP 6, FiO2 - 22%,

CARDIO VASCULAR SYSTEM

Plan of Care :

SpO_2 - 95%.
PR - 120/min
RR - 35/min

CNS

Neurological Examination : .....

.....Sedation.....

Last Neurosonogram : .....Any Seizures.....

FLUIDS STATUS NUTRITION

☐ NPO ☐ NG Feeds Wt. Gain:..... Head Circumference:.....
Input : ..... / (+/-) .....Output : ..... ml/k/d Urine Output :..... ml/kg/hr Stools : passed
IV Fluids - Type of IVF : ..... @ ..... ml / hr
Feeding: EBM ☐ Formula ☐ Donor BM ☐ Volume:..... Frequency:.....
TPN : ☐ Yes ☐ No - If yes, details : .....Calories:.....
Abdominal Examination:.....
.....

Other Systems : Haematology / Nephrology / Metabolic / Endo / NNJ - PT / OPTH / RICKETS
.....
P/A soft
N.G aasp → 9ml brownish green.
.....

INFECTION

Risk of Sepsis / Suspected Sepsis / Proven Sepsis : .....
Sepsis screen:.....
Blood culture ☐ Urine culture ☐ ET culture ☐ Fungal Culture ☐ LP ☐ CSF :.....

Antibiotic

Sl.No.	Drugs	Days
1.	Inj. PIPTA 2	
2.		
3.		

Plan of Treatment :

- Continue CPAP, PEEP-6
- Target SpO2 - 90 to 95%.
- TV - 8-6 ml/kg/day
  ↓
  13 ml 2nd hrly ~~full~~
  OG feeds + Rest 10% Dextrose
- [↑ Feed 2ml 6th hourly] [TF = 12ml]
- R/V to ↑ Total volume to 80ml/kg/day.
- Blood gas OD
- RBS 12th hourly
- I/O charting 6th hourly
- Trace Blood c/s

Doctor's Name (Handover given) : Dr. Aarti
Signature : Dr. Aarti
Date & Time: 29/5/26

Doctor's Name (Handover taken) : Dr Ashwini
Signature : .....
Date & Time: 29/5/26

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M0D2H (F)
Dr. VIJAYANAND JAMALPURI

(8)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/5/26 9:30AM		Seen by Dr. Vijayanand Plan- - Trial off to CPAP to room air. - TV - 80ml/kg/day ↓ Feed 13ml 3rd hrly [↑ 2ml each feed] [TF = 24ml] 24ml - RBS 12th hourly. Dr. VIJAYANAND JAMALPURI Reg. No: 40526
	Noted by Hemalatha 29/5/26 @9.10AM	

IAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
18-05-2026 0 Y 0 M 1 D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/5/26 1PM	Afternoon Rounds	
	CPAP → room air	Plan
	tolerating well.	① cont RA
	no distress	w/f distress.
	HR - 146/min	② cont DSPT
	SpO_2 - 94%	③ TV = 80ml/kg/day
	RR - 46/min	17ml. FF.
		Q3H OG.
	SBR - 8.4	FF = 24ml.
	↓DSPT.	④ ~~Bloodgas~~
		GRBS BD
	tolerating feeds.	⑤ I/O Q6H.
	PA - soft.	
	Noted by Hemalatha 016699 29/5/26 @1.30pm	Dr. Aishwarya
29/5/26 5PM	seen by Dr. Vijayanand	
		Plan
		① w/f brady/apnea
		② feeds - ↑3ml Q6H
		③ t/m CBP, CRP, SBR — after rounds
	Noted by Hemalatha 29/5/26 @5.30pm	Dr. Aishwarya

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

Docu. No. : RCHBH /FRM / CLINICAL / 088 (P.T.O)

-00657445 IP5-00174428
y Of SHUBHADA RAMANATHAN
5-2026 0 Y 0 M 2 D (F)
VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	seen by Dr Mleb	
29/5/26 11.30PM.	tachypnea (+)	Rou
		(1) cont RA
	No desats.	(2) cont OG feeds
		(3) prone nursing
		Dr Adugs

Docu. No. : RCHBH/FRM / CLINICAL / 088 (26)

H-00657445 IP5-00174428
by Of SHUBHADA RAMANATHAN
05-2026 0 Y 0 M 2 D (F)
VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: D3 Day of Life: 48HOL PMA: 34+5

Term ☐ Preterm ☑ Gestation: 34+3 Corrected Gestational Age: .... Today's Weight: 2.421 ↓42gm

	Problems		
	S.No.	**Current**	**Past Problems**
Overview	1.	Late Preterm / LBW	
	2.	RDS - CPAP - RA.	
	3.	Susp sepsis - PPROM x27hrs	
	4.	NNJ.	
	5.		
	6.		
Clinical Assessment		CPAP → RA Intermittent tachypnea (+) No desats comfortable in prone. PA - soft tolerating full OG feeds	↓DSPT - S.Bil 8.5. HR - 138/min SpO_2 - 100%. RR - 54/min mild SIC (+) euglycemic - IV cannula D3.
Medications Used		Inj Piptaz. D3	

Plan of Care:
① cont ~~CPAP~~ on RA, w/t distress
② TV = 80ml/kg/day → 24ml Q2H OG feeds.
③ ~~Trace~~ send - CBP + CRP + SBR.
④ URBS BD

Doctor's Name (Hand over given): Dr Aishwarya
Signature: [signature]
Date & Time: 20/5/26 8AM.

Doctor's Name (Hand over taken): Dr Pooja
Signature: ....
Date & Time: ....

IAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M1D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/5/26. 10:30am		Seen by Dr. Vijayanand
		→ W/f apnea, brady, desat
		→ Send ⊙ NPI
		→ Try paladay feed 1 feed, if taking well give full paladay
		→ Trace ysh culture report & R/V antibiotics
		→ R/v phototherapy c̄ SBR.
		→ TV – 100cc/kg/day c̄ [illegible] Paladai feeds plan (TF = 30ml)
	Poojitha	

VIJAYANAND JAMALPURI Reg. No. 40526

AH-00657445 IP5-00174428
aby Of SHUBHADA RAMANATHAN
-05-2026 0Y0M2D (F)
. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/5/26 1:30PM	Afternoon rounds DOL-2 Days / 34+5	plan.
	on room air – took paladai feeds well over 20mins.	plan
	vitals : SpO2 - 98% HR - 146/min RR - 46/min	1. IV - 100ml/kg/day 30ml @ 3H. Paladai feeds
	SBR @ 48Hol - 9.9 cutoff - 10.5	
		2. Review antibiotics after 48H blood c/s report
	P/A - no distension soft	DSPT 2 3. SSPT c̄ covering of Eyes/genitalia.
		4) Monitor temp 4th hourly 5) (review) CRBS - OD. (Dr. N. Peetwshu)
30/5 @ 2:57PM		seen by Dr. Vijayalakshmi Sir
		→ full palladai
		→ crib care - Tomorrow
		→ shift to room - Monday

Rs. D. Vanulla

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
31/5/26 2am	Night Rounds	Seen by Dr. Sarath Sir
	On room air NO tachypnea, distress - Full paleda feeds (Preman) +EBM)	Plan: • Full paleda feeds • Crib care T/M • Shift to room - Monday.
		Dr. Ramya
		seen by DR. pratyusha sir
31/5 @ 7:19 AM		→ TTV - 120 alkq/day full paleda feed → crib care → tomorrow → shift to room Dr. Jamalpuri

Patient Sticker

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: D4 Day of Life: D3 **PMA:** 34+6

Term ☐ **Preterm** ☑ Gestation: 34+3 Corrected Gestational Age: .... Today's Weight: 2.434 ↑13gm

Overview

S.No.	Problems: Current	Past Problems
1.	Late PT / LBW	
2.	RDS - CPAP - RA	
3.	Susp sepsis - PPROM x27hrs	
4.	NNJ.	
5.		
6.		

Clinical Assessment

~~CPAP~~ On RA
no distress
↓SSPT.
PA - soft
tolerating full paladay

HR - 135/min
SpO2 - 96%.
RR - 60/min

Medications Used

Plan of Care:

① TV = 120ml/kg/day → 36ml q3H full paladay
② crib care ~~RA~~ ↑RM
③ cont SSPT for 24hrs since starting
④ CRBS OD

Doctor's Name (Hand over given): Dr Aishwarya
Signature: [signature]
Date & Time: 31/5/26

Doctor's Name (Hand over taken): [signature]
Signature: [signature]
Date & Time: 31/5/26

AH-00657445 IP5-00174428
aby Of SHUBHADA RAMANATHAN
8-05-2026 0 Y 0 M 2 D
r. VIJAYANAND JAMALPURI (F)

(9)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	31/5/26	
	2:00pm	Plan:
	- Blood c/s - No growth after 48hrs	- Stop antibiotics
		- Crib care
		- Full paladai feeds.
		- Plan to shift to room 7/cy
		Asif

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
18-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

(105)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: D4 **PMA:** 35 wks.

Term ☐ **Preterm** ☐ Gestation: 34+3 wks Corrected Gestational Age: ..... Today's Weight: 2419 g (↓)

Problems

	S.No.	Current	Past Problems
Overview	1.	Late PT / LBW.	Suspected Sepsis
	2.	RDS – CPAP – RA.	
	3.	NNJ.	
	4.		
	5.		
	6.		

Clinical Assessment

on RA.
Hemodynamically stable.
Accepting paladay feeds well.
HR – 123/min.
RR – 49/min
SpO2 – 98%.
O/O – 1.6cc/kg/hr.
Stools – passed.

Medications Used

Plan of Care:
- Cribcare.
- TV – 140cc/kg/day ⇒ 28ml/2nd hrly full paladay feed, Hb bumping.
- R/v shift out.

Doctor's Name (Hand over given): Dr. Pooja ..... Doctor's Name (Hand over taken): Dr. Preeti .....

Signature: ..... Signature: .....

Date & Time: 2/6/26 9 am ..... Date & Time: 1/6/26 9:30am .....

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 4 D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26. 10:03am		Seen by Dr. Vijayanand
		→ Crib care
		→ Shift out today
		→ AABR vaccination at room
		→ Remove IV line.
		→ NBS } ~~at room.~~
	Poojitha	SBR } today.
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526

Docu. No. : RCHBH/FRM / CLINICAL / 088 (26)

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

(47)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26. 12:45pm	Shifting Note →	
	on RA.	
	Hemodynamically stable.	
		Plan.
	Accepting paladay feeds.	
		→ Shift to room.
		→ TV - 140cc/kg/day. 28ml/2nd daily full paladay feed.
	SBR - 14.5 [cut off. 14]	→ Trace SBR, NBS.
		→ BCG, OPV, Hep B today.
		→ ABR today
		→ Monitor vitals.
	Dr Poojitha	→ Continue DSPT c eyes & genitals covered.

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26		Seen by Dr. Vijayanand
8:45 AM		
		Plan:
		- ↑ IV to 150 ml/kg/day 30 ml Q2H.
		- Vaccination ~~BCG~~ OPV ~~Hep-B~~ } Today
		- ~~SBR~~ / ~~NBS~~ } - ~~AABR~~ = Today
		- Trace NBS
		- SBR at 12:00 pm and trace.
		- R/V Discharge Tomorrow
		Asst

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

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 5 D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
2/6/26 4PM	Afternoon Round	
	SBR - 12.4	Plan
	DSPT → SSPT.	① TV=150ml/kg/day 30ml Q2H.
	Active	② AABR now
	Taking feeds well.	③ Trace NBS.
	PA - soft	④ RW ⓓ 7/m
	S1 S2 ✓	
	euthermic	Dr. Aishwarya.
	vaccination done.	Noted by sis. Sathya @ 4.30pm

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 5 D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/6/26. 7:50am	Morning Round.	
	DOL-6 | Late preterm | RD | NNJ.	
	On RA. Hemodynamically Stable Under SSPT T.wt - 2422g (↑ 18g).	Plan- → Continue SSPT ē eyes & genitals covered
	Vitals - Stable.	→ TV - 150cc/kg/day 30ml 2nd hrly paladay feeds
	Urine & Stool passed.	
	vaccination done.	→ Trace NBS.
		→ AABR today
		→ R/v discharge.
	d Poojitha,	

Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M4D (F)
Dr. VIJAYANAND JAMALPURI

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
3/6/26. 9:40am	Boythe	Seen by Dr. Vijayanand. → Discharge today / tm Friday → ABBR today.

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

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Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 4 D (F)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

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RESULT SHEET

Date	29/5/26	30/5/26	01/06/26	02/06		
Time	7:45pm	11 am.				
Hb	15.5	16.1				
PCV	45.8	48.5				
RBC	4.62	4.91				
WBC	19.68	12.99				
N/L	62.0/26	47/40				
Platelets	294	269				
CRP	5.0	5				
ESR						
PCT						
RBS						
Na	134	139				
K	5.3	4.9				
Cl	101	108				
Ca/Mg	8.2/	9.2				
Phosphate						
Urea	38	34				
Creatinine	1.0	0.9				
ALP						
SGPT						
SGOT						
T.Bill/Conj	8.4 <0.1 8.3	9.9 <0.1 9.8	12.4	12.4		
T.Protein		-				
S.Albumin						
S.Globulin						
A/G Ratio						
Uric Acid						
S.Amylase						
Sr.Lipase						
Blood Lactate						
S.Cholesterol						
PT/INR						
APTT						
CSF Protein / Sugar						
Cells						
N/L						

Date						
Time						
CUE - Alb						
CUE - Sugar						
CUE - Ketones						
CUE - PUS Cells						
CUE - RBC Cells						
CUE						
Stool Pus Cell						
OVA / Cyst						
Occult Blood						

Culture and Sensitivities : .....

.....

.....

.....

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

Others (ECG, Contrast Studies etc.,) : .....

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Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 0 D 2 H (F)
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(V) (V)

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RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
28/5/26	9AM	66 mg/dl	10% Dextrose.	(MC Silpa M.C)
28/5/26	3pm	78 mg/dl	10% Dextrose	[signature]
28/5/26	8pm	61 mg/dl	10% Dextrose	[signature]
29/5/26	8pm	88 mg/dl	10% Dextrose	[signature]
29/5/26	7AM	89 mg/dl	feeds + Dextr	[signature]
30/5/26	6AM	75 mg/dl	Prefeed	Gowri
31/5/26	6AM	112 mg/dl	prefeed	[signature]
1/6/26	6am	88 mg/dl.	pre feed	[signature]
2/6/26	6am	87 mg/dl	full feeds	Preethi
3/6/26	6am	84 mg/dl	Full feeds	Kalyani

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RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature

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DRUG CHART

Date of Admission: 28/5/26 Drug Allergies; NA ☑ Not known any Drug Allergies

FOR THE SAFETY OF THE PATIENT

GENERAL - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.

DOCTOR - Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).
- Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.
- Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.
- Discontinue a drug by drawing a line / through it and a similar line through subsequent recording panels.
- The date and time of stopping the drug along with the doctors name and sign must be mentioned.
- Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.

NURSES - Nurses must follow strictly the FIVE RIGHTS before administration of medication.
1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time
- AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

SOS / PRN (As Required Medication)

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

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

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

VERIFIED BY : Name .... Signature ....

IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M0D2H (F)
Dr. VIJAYANAND JAMALPURI

REGULAR PRESCRIPTIONS

Weight. 2.4 kg Ward. NICU 2

VERIFIED

DRUG :

Dose	Route	Frequency	Start Date

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

DRUG : Inj. PIPERACILLIN TAZOBACTAM

Dose	Route	Frequency	Start Date
240mg	IV	Q12H	28/5/26

Name & Signature of the Doctor Starting the Drugs: Poojitha

Additional Instructions: 100mg/kg/dose.

Date ▸ / Time ▾	28/5	29/5	30/5	31/5
10AM	Swetha	Blessy Hema	Chandra	Sireesha Chandra
10pm	[illegible]	[illegible]	[illegible]	
Daily Doctor's Endorsement by a Sign	[illegible]	[illegible]	[illegible]	[illegible]

Stop
Dr. Sreekha
31/5/26

DRUG :

Dose	Route	Frequency	Start Date

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

DRUG :

Dose	Route	Frequency	Start Date

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

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Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M0D2H (F)
Dr. VIJAYANAND JAMALPURI

Weight. 2.4kg... Ward. ...NICU-2

		Date ▸ / Time ▾		Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.
DRUG :			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route	Start Date		Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

VARIABLE DOSE		Date ▸ / Time ▾		Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.
DRUG :			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route	Start Date		Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

VERIFIED BY : Name .... Signature ....

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses

Baby Of SHUBHADA RAMANATHAN
28-05-2026 0Y0M0D2H (F)
Dr. VIJAYANAND JAMALPURI

I.V. FLUIDS CHART

Weight. 2.4kg Ward. NICU-2

		nposition of I.V. Fluid (If infusion, mention ml./hr = Mcg/kg/min. etc)	Route	Flow Rate ml/hr	Doctor Sign	Nurse Sign	Date of Stopping	Doctor Sign	Nurse Sign
28/5/26	8-00AM	TV - 60ml/kg/day 10% Dextrose 3ml/kg calcium gluconate	IV	6.5ml/hr		silpam sweta	29/5/26		
29/5/26	8AM	TV = 80ml/kg/day 10% Dextrose + 3ml/kg calcium gluconate	IV	3.5ml		sweta	29/5/26		
~~30/5/26~~		~~IV. 100 ml/kg/day~~							

Signature .....

VERIFIED BY : Name .....

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

Rainbow® Children's Hospital
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MULTI-DISCIPLINARY PLAN OF CARE FORM

Diagnosis: preterm / Respiratory Distress

Date Time	Discipline	Type	Patient Needs / Problem List	Goal	Plan / Intervention	Signature	Team Verification
28/5/26	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op	Oxygen support feed start	Oxygen started feed started	prevent infection	[signature]	☐ Nursing ☐ Others:
28/5/26 9:10AM	☐ Medical ☑ Nursing ☐ Others:	☑ Initial ☐ Modified ☐ Per-Op ☐ Post Op	* Warm Care. * CPAP SUPPORT * feed 0, * Fluid management	* warmer care started * R/U surfactant administration effective * CPAP care	* Check vitals & Rec * warmer care started! * CPAP PEEP: 7CM FiO2: 25 to 30%	[signature] Shiparre	☐ Medical ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Medical ☐ Nursing ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Medical ☐ Nursing ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ Medical ☐ Nursing ☐ Others:

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INTERDISCIPLINARY PATIENT / FAMILY EDUCATION RECORD

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Part - I.

Patient's / Learner Language: ..... Patient / Learner Literacy: ☐ Read ☐ Write ☐ Speak Willingness to Learn: ☐ Yes ☐ No Healthcare Literacy: ☐ Yes ☐ No

Identified Education Needs:

1. Diagnosis
2. Treatment and Care Plan
3. Pain Management
4. Informed Consent
5. Medication / Therapy (safety, effects/ side effect, interactions)
6. Discharge Medication
7. Infection Control Measures
8. Diagnostic Test / Procedures
9. Nutrition / Diet
10. Fall Risk Education
11. Safe use of Medical Equipment / Implantable Devices Safety
12. Patient's / Family Rights
13. Risk / Safety
14. Activity / Exercise
15. Social & Rehabilitation Needs
16. Special Discharge / Follow-up Education / Coping Skills
17. Others .....

Part - II

Date	Time	Need Identified	Information Taught	Use codes from the list in part III					Comments	Designation / Signature
				Person Taught	Learning Barriers	Teaching Tools	Mechanism/s to overcome barrier/s	Understanding		
28/5	11:30am	14,9	counselled about importance of expressed milk & its storage	M	14	O	4	2	Good	Seen by lactation consultant

Part - III: CODES

Who was taught: PT: Patient F: Father M: Mother S: Spouse Sn: Son D: Daughter C Caregiver O: Other (Specify) .....

Learning Barriers:

1. No Learning Barriers
2. Physical Impairment
3. Emotional Barriers
4. Language Barrier
5. Educational Level
6. Desire / Motivate to Learn
7. Impaired Thought Process/Cognitive limitations
8. Responsibilities at Home
9. Cultural Differences
10. Financial Difficulties
11. Beliefs and Values
12. Impaired Vision/ or Hearing
13. Cultural/Religion Practice
14. Others (Specify ..... Breast milk .

Teaching Tools Used: A: Audio D: Demonstration V: Video O: Oral P: Printed

Mechanism/s to overcome barrier/s:

1. None
2. Obtain translator
3. Reassurance & Support
4. Teach Family / Others
5. Respect values & beliefs
6. Respect Cultural / Religion Preference
7. Other, Specify .....

Understanding: 1. Verbalizes Understanding 2. Demonstrates Understanding 3. Needs Review

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

30/5/26

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

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

Pratiksha Rainbow Children's Hospital
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BirthRight BY RAINBOW HOSPITALS
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	AM	AM	PM	PM	PM	PM						
Temperature (F)	*36.5°C	*36.5°C	*36.5°C	*36.5°C	*36.5°C	*36.5°C	*36.4°C	*36.5°C	*36.7°C	*36.8°C	*36.5°C	*36.6°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	75 (55) 44	79 (59) 54	61 (44) 56	51 (44) 40	54 (41) 33	50 (39) 32	53 (39) 30	58 (50) 46	50 (39) 34	57 (49) 45	63 (52) 46	57 (44) 38
Note: BP does not score in early warning scoring												
Heart Rate (Number)	-	142	127	132	138	138	142	165	137	157	132	145
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	-	41	36	53	50	-	43	50	-	33	62	48
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2 (l/min) O_2 Saturations (%)	98%	98%	97%	98%	96%	97%	97%	95	96%	99%	97%	
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	
GCS *	C	C	C	C	C	C	C	C	C	C	C	
TOTAL SCORE Number of shaded boxes	1	0	0	0	0	0	1	1	1	1	1	
Pain Score	0	0	0	0	0	0	0	0	0	0	0	
Observer's Initials	S	Ch	Ch	Ch	Ch	Ch	S	S	S	S	S	

ACTIONS

NB: Scores 3 should be recorded overleaf

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

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

Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

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

- If at any time additional help is required, call help – regardless of the Early Warning Score!
- Following a Early Warning Score assessment, senior help may be required

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I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

31/5/26

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

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

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

BirthRight BY RAINBOW HOSPITALS — Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	8 AM	10 AM	12 PM	2 PM	4 PM	6 PM	8 PM	10 PM	12 AM	2 AM	4 AM	6 AM
Doctor/Nurse/Family Concern?												
Temperature (F)	36.5°C	36.5°C	36.5°C	36.5°C		98.4°F	36.6°C	36.8°C	36.6°C	36.6°C	36.6°C	36.5
Heart Rate (bpm) and Blood Pressure (mmHg) *	57/38 (49)	52/34 (40)	62/52 (56)	57/41 (47)	crib care			crib care				
Heart Rate (Number)	[illegible]	150	161	143	138	122	138	132	129	134	129	
Resp. Rate (bpm) (over 1 Minute) *												
Resp Rate (Number)	48	71	–	44	crib care							
Resp Distress — Mod/ Severe												
Resp Distress — None / Mild												
Receiving O_2 (l/min)												
O_2 Saturations (%)	97%	95%	–	97%	100%	98%	98%	99%	99%	100%	100%	
Conscious Level — Normal	N	N	N	N	N	N	N	N	N	N	N	
Conscious Level — Altered												
GCS *	C	C	C	C	C	C	C	C	C	C	C	
TOTAL SCORE — Number of shaded boxes	0	0	0	0	0	0	0	0	0	0	0	
Pain Score	0	0	0	0	0	0	0	0	0	0	0	
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	

Heart rate / BP scale: 190, 180, 170, 160, 150, 140, 130, 120, 110, 100, 90, 80, 70, 60, 50

Note: BP does not score in early warning scoring

Resp. rate scale: 70, 60, 50, 40, 30, 20, 10

Temperature scale: 104, 103, 102, 101, 100, 99, 98, 97, 96, 95, 94

ACTIONS

NB: Scores 3 should be recorded overleaf

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

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Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
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Record Details when EARLY WARNING SCORE > 3			Record Time of Review and Plan		
Date	Time	Early Warning Score	Date	Time	Name

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I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 4 D
Dr. VIJAYANAND JAMALPURI (F)

1/6/25

No. : RCH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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

BirthRight BY RAINBOW HOSPITALS — Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	8 Am	10 Am	12 Pm	2 Pm	4 Pm	6 pm	10 pm	6 am
Doctor/Nurse/Family Concern?								
Temperature (F) (104–94)	crip care	crip care	36.6°C	36.6°C	36.6°C	* 98.1F	* 97.5F	* 97.5F
Heart Rate (bpm) and Blood Pressure (mmHg) * (190–50)								
Heart Rate (Number)	140	144	140	156	150	145 b/m	130 b/m	150 b/m
Resp. Rate (bpm) (Over 1 Minute) * (70–10)								
Resp Rate (Number)								
Resp Distress: Mod/ Severe								
Resp Distress: None / Mild								
Receiving O_2 (l/min)								
O_2 Saturations (%)	98%	98%	98%	100%	98%	99	97%	98%
Conscious Level: Normal	N	N	N	N	N	N		
Conscious Level: Altered								
GCS *	C	C	C	C	C	C	15/15	15/15
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	0	0
Pain Score	0	0	0	0	0	0	0	0
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]

Note: BP does not score in early warning scoring

ACTIONS

NB: Scores 3 should be recorded overleaf

Score 1	: Continue normal observation by staff nurse
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Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

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A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
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Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 5 D (F)
Dr. VIJAYANAND JAMALPURI

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

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

Pratiksha Rainbow Children's Hospital
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Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 7/6/26 Time: 11 am | 5 pm | 10 pm | 2 am | 6 am

Doctor/Nurse/Family Concern?

Temperature (F)
104 103 102 101 100 99 98 97 96 95 94
97.9 | 97.4F | 98.6°F | 97.8°F | 97.7°F

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

Note: BP does not score in early warning scoring

Heart Rate (Number): 135b/m | 148b/m | 136b/m | 132b/m | 130b/m

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

Resp Rate (Number): 40b/m | 40b/m | 40b/m | 42b/m | 40b/m

Resp Distress	Mod/ Severe / None / Mild				
Receiving O_2 (l/min)					
O_2 Saturations (%)	100%	99%	100%	98%	97%
Conscious Level	Normal / Altered				
GCS *	15/15	15/15	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	0	0	0	0
Pain Score	0	0	0	0	0
Observer's Initials					

ACTIONS

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Score 1	: Continue normal observation by staff nurse
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INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:

Doctor/Nurse/Family Concern?

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

Heart Rate (bpm)
and
Blood Pressure (mmHg) *

Note:
BP does not score in early warning scoring

190
180
170
160
150
140
130
120
110
100
90
80
70
60
50

Heart Rate (Number)

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

Resp Rate (Number)

Resp Distress: Mod/ Severe / None / Mild

Receiving O_2(l/min)
O_2Saturations (%)

Conscious Level: Normal / Altered

GCS *

TOTAL SCORE
Number of shaded boxes

Pain Score

Observer's Initials

ACTIONS

NB: Scores 3 should be recorded overleaf

Score 1	: Continue normal observation by staff nurse
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- Following a Early Warning Score assessment, senior help may be required

The SBAR communication tool (situation, background, assessment, recommendations) is a helpful mnemonic that can be used to describe a child's clinical condition to a colleague.

I	**IDENTITY:** I am (name), a nurse on ward (X). I am calling about (child X)
S	**SITUATION :** I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, Temperature is XX, Early Warning Score is XX)
B	**BACK GROUND :** Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ procedure/ investigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations were (XXX). The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
A	**ASSESSMENT :** I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
R	**RECOMMENDATION :** I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to do in the meantime ? (e.g. stop the fluid/ repeat observation)

BAH-00657445 IP5-00174428
Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

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BirthRight™
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FLUID CHART

T.W: —
B.W – 2.421
T.F —

Sheet No. : ....

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

Date	Time	Intake: Nature of Fluid	Route: Mouth	Route: I.V	Route: D.G	Output: NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
	08:00 am											
	09:00 am	Prenan			20ml		passed			6ml	0	[illegible]
	10:00 am											
	11:00 am											
	12:00 pm	EBM + prenan			30ml		passed			10ml		ch
	01:00 pm											
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	EBM + prenan			30ml		passed			12ml	0	ch
	04:00 pm											
	05:00 pm											
	06:00 pm	EBM + prenan			30ml		—			10ml		
	07:00 pm											
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	prenan	30ml		[illegible]		passed			9ml	0	[illegible]
	10:00 pm											
	11:00 pm	[illegible]										
	12:00 am	Prenan	30ml				Passed					
	01:00 am											
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	Prenan	30ml				—			12ml	0	
	04:00 am	Prenan										[illegible]
	05:00 am											
	06:00 am	Prenan	30ml				Passed			10ml		
	07:00 am											
Total Intake :						**Total Output :**						

Total 24 hrs. Intake	147.5cc/kg/day	Total 24 hrs. Output	1.19cc/kg/hr

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TV :
B.wt :
Tf :

FLUID CHART

HC - 32cm
LC - 48cm

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Sheet No. : 31/5/26

TV - 120cc/kg/day
B.wt - 2kg
Tf - 36ml

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – N.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
											1	
	08:00 am											
	09:00 am	~~Prenan NAN~~	36ml				–			10ml	0	
	10:00 am											ch
	11:00 am											
	12:00 pm	EBM	36ml				passed			12ml		
	01:00 pm											
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	~~Ka~~ Prenan	36ml				passed			15ml		
	04:00 pm										0	
	05:00 pm											ch
	06:00 pm	~~EBM P.Blood~~	36ml				–			12ml		
	07:00 pm											
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM	36ml				Passed			12ml	1	
	10:00 pm											
	11:00 pm										0	
	12:00 am	F.F	36ml				–			~~10ml~~		
	01:00 am											
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	~~BF~~	36ml				Paid			11ml	1	
	04:00 am											
	05:00 am										0	
	06:00 am	F.F	36ml				Paid			6ml		
	07:00 am											
Total Intake :						**Total Output :**						

Total 24 hrs. Intake	120 cc/kg/day	Total 24 hrs. Output	1.6 cc/kg/hr

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Baby Of SHUBHADA RAMANATHAN
28-05-2026 0 Y 0 M 4 D (F)
Dr. VIJAYANAND JAMALPURI

FLUID CHART

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Sheet No. : .....

1. All measurements in ml.
2. Add up each column separately. Make additions across the page to obtain 24 hrs. total of intake and output.
3. 24 hrs. total to be entered in the kardex in RED.

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – N.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am	EBM	36ml				Passed			10ml		
	10:00 am											
	11:00 am											
	12:00 pm	FF	36ml				—			9ml		
	01:00 pm											
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	FF	36ml				Passed			10ml		
	04:00 pm											
	05:00 pm	FF	36ml				Passed			10ml		
	06:00 pm											
	07:00 pm	~~EBM~~	~~40ml~~									
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm											
27/6	10:00 pm	EBM + FF	40ml				NB			✓	WD	Swathi
	11:00 pm											
	12:00 am	~~Formula~~ FF+12	30ml							✓		
	01:00 am											
Total Intake :						**Total Output :**						
	02:00 am											
28/6	03:00 am	FF	30ml								WD	Swathi
	04:00 am									✓		
	05:00 am						✓					
	06:00 am	EBM + FF	40ml									
	07:00 am											
Total Intake :						**Total Output :**						

Total 24 hrs. Intake	Orally taken = 292ml	Total 24 hrs. Output	U2 m 2

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

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28-05-2026 0 Y 0 M 4 D
Dr. VIJAYANAND JAMALPURI

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FLUID CHART

Sheet No. : .....

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

Date	Time	Intake: Nature of Fluid	Intake: Route – Mouth	Intake: Route – I.V	Intake: Route – N.G	Output: NG	Output: Diarrhoea	Output: Vomit	Output: Drainage	Output: Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
2/6/26	08:00 am	FF	30ml									
	09:00 am						✓			✓	NA	Shilpa
	10:00 am											
	11:00 am	FF EBM	10ml 25ml									
	12:00 pm									✓		
	01:00 pm	FF EBM	10ml 25ml									
Total Intake :						**Total Output :** M – 1 U – 2						
	02:00 pm											
	03:00 pm	EBM	20ml							✓		
	04:00 pm						✓				NA	Satya
	05:00 pm											
	06:00 pm	EBM	35ml							✓		
	07:00 pm											
Total Intake :						**Total Output :** M – 1 U – 2						
2/6	08:00 pm						✓			✓		
	09:00 pm	FF	40ml									
	10:00 pm						✓			✓		
	11:00 pm	EBM FF	10ml 30ml								NA	Satya Ram
	12:00 am											
	01:00 am	FF	40ml									
Total Intake :						**Total Output :**						
3/6	02:00 am											
	03:00 am	EBM FF	10 ml 30ml									
	04:00 am						✓			✓		
	05:00 am	FF	40ml								NA	Satya Ram
	06:00 am											
	07:00 am	EBM FF	10 ml 30ml				✓			✓		
Total Intake :						**Total Output :**						

Total 24 hrs. Intake		Total 24 hrs. Output	

M : 6 | U : 8