

ADMISSION SHEET

Registration Details :



Admission No : IP5-00176163 Admit Date : 09-Jul-2026 Admit Time : 04:04 PM UHID : BAH-00661134

Patient Details :

Patient Name : Baby Of POTHULA AKSHITHA Age : 0 D
Guardian : Mr PRADEEP KUMAR KOTTAPALLY DOB : 09-07-2026 03:33 PM
Gender : Female Religion :
Occupation : Martial Status : Single
Address (H) : DOOR NO - 1408, AW2, NEBULAAVAS , Phone No : 8125082873/ 6305586410
Bachupally Hyderabad Telangana INDIA 500090 E-mail : NOMAIL@GMAIL.COM

Admission Details :

Bed Type : BASINET Bed No : CRDL-SW-414-1 Ward Name : 4F-BIRTHING CENTRE
Room No : CRDL-SW-414-1 Admission Type : First Visit

Contact Details :

Name : Mr PRADEEP KUMAR KOTTAPALLY Relationship : Father
Contact Address : DOOR NO - 1408, AW2, NEBULAAVAS , Phone No : 8125082873 / 6305586410
Bachupally Hyderabad Telangana INDIA 500090

Signature

Doctor Details :

Doctor Name : Dr. ANNAPOORNA TADAVARTHY Specialisation : NEONATOLOGY
Referral Doctor : Self Phone No :
Co-Consultant :

Payment Details :

Payment Mode : Cash Deposit Amount : 0.00
Payor Name : SELF PAY

[illegible]



NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Pothula Akshitha Age : 21y 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 Pothula Akshitha Mother's Blood Group : O positive
Gender : ☒ M ☐ F Blood Group : O+ Birth Weight (gms) : 2.26.8kg Length (cms) :
Date of Birth : 9/17/26 Time of Birth : 03:33 pm OFC (cms) :
Place of Birth : RCH Bangalore Estimated Gesth Age : 38 weeks

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 21y Ht : Wt : BMI : Married Life : LMP : 10/10/25 EDD : 17/7/26

Conception : Spontaneous or with Rx :

Booked at what GA : 7+1 wks 3 GA AN Steroids Drugs / Doses :

Last Scans Details : 24/6/25 - S.L.W. - 36 cm cephalic, Heterozygous,
AFI - 11 cm EFW - 2127 (3-1) FGR Stage 1 Doppler (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 Resistance / ADEF / REDF / Redistribution in MCA) / Ductus Venosus : AFI :	<u>Early onset FGR from 21+5 wks</u> H/o GDM/ pre GDM/ on diet or insulin Controlled or not, recent values, HbA1 values : Compliance with Rx : Scans : LGA, TIFFA , Fetal Echo : <u>TIFFA (N)</u> , <u>NIPS - low risk</u> H/o Hypothyroidism : when diagnosed ? Medication? <u>NT - 14mm</u> Any other Chronic Medical Problems, when detected drugs ? <u>Family + RCH Syndrome in Husband's Sister-in-law</u> (Anemia, SLE, Jaundice, CHD, Heart Disease) Infection : H/O, Fever (☐ Malaria ☐ UTI ☐ TORCH ☐ TB ☐ HIV ☐ HBV) <u>(No significant varicella detected in couple screening)</u> UTI : when : Any culture :
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PPROM: Duration : ☐ Uterine Tenderness ☐ Foul Smelling Liquor ☐ HVS (if taken) - Results :

Medication during Pregnancy : Duration :



PAST OBSTETRIC HISTORY

Sum P: A: L:

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

PERINATAL HISTORY

Treating Obstetrician : Dr. Prathyusha Reddy Hospital : BCH Banjara ☒ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig)

Second stage (> 2 hours after dilation)

LSCS : ☐ Elective ☒ Emergency Indication : NPOL

Specify the reason :

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☒ Normal ☐ Suspicious ☐ Pathological

MSL :

Resuscitation : ☐ Yes ☐ No

Cord ABG :

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

NEONATAL RESCUSTITATION 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
<u>1</u>		
<u>2</u>		
<u>8/10</u>	<u>9/10</u>	

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

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints : Primigravida / 38 wks for POL.

Genetic evaluation done w/o family history of Rett syndrome (Sister-in-law's daughter)
Couple screening done ~~only~~ No significant variants previously detected variants not detected in couple
Current genetic evidence are reported in non phenotypic related genes -
Hence no prenatal testing advised for present pregnancy.
You are analyzed in repetitive space and their status is provided in non phenotypic related genes



History of

Baby delivered by Em. LSC

↓
cried soon after birth, Dec fine

↓
Routine care given

↓
1g vit K 0.5 ml IM given

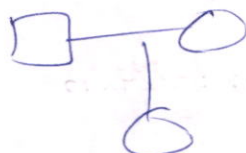
↓
Shifted to mother's side

Investigation details in previous Hospital :

Feeding History :



Family History :



Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition :

Pink, warm

VITALS : Temperature : 36.5°C HR : 142/min RR : 46/min NIBP : CFT : 3 sec

Color of the extremities : Accrocyanosis → Pink

Jaundice : Pallor : SpO2 : 95%

ANTHROPOMETRY: Birth Weight : 2.268 kg Length : HC : Present Weight :

Ponderal Index : AGA : SGA : LGA :



HEAD TO TOE EXAMINATION

HEAD :

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

AF flat (N) Caput (I)

FACIES :

(Any Facial
 Dysmorphism)

No dysmorphism

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 palate

THORAX and BREASTS :

Shape of Thorax :
 Position of Nipples and Number :

(N)

ABDOMEN and UMBILICUS :

Shape :
 Organomegaly :
 Bowel Sounds :
 Umbilical Stump :
 Discharge :

2A + 1 vein

GENITALIA :

Labia / Hymen :
 Testicles/penis :
 Anus :

Female external genitalia

HERNIAL ORIFICES

(N)

TRUNK and SPINE :

(N)

SKIN LESIONS :

Ni

EXTREMITIES :

Fingers / Toes :

Deformities :

Hip Joint Examination :

Arms / Legs :

Mobility :

Palpation (N)



SYSTEMIC EXAMINATION

Breathing Pattern : ☒ Regular ☐ Periodic ☐ Shallow ☐ Gasping

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

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

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

Settings :

SpO₂: Auscultation: Breath Sounds: Added Sounds:

CARDIOVASCULAR SYSTEM :

HR : 142/min BP :

Femoral Pulses : (No checked)

Other Peripheral Pulses :

Precordial Activity : (N)

Murmurs : N.I.

Signs of Cardiac Failure :

ABDOMEN:

Shape : (N)

Palpation :

Palpable masses :

Abdominal girth :

Hernia orifice : (N)

Anal Patency : (N) Patent

Umbilical Cord : 2A + 1 ven

First urine passed :

Meconium passed :

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) :

State of wakefulness : (crying) (N)

Prechtle Score :

Nerves :

MOTOR SYSTEM:

Passive Tone : (N)

Active Tone :

Neonatal Reflexes :

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

Moro's : DTR :

ATNR : Skull and Spine :

EFFICIENCY CHECK LIST OF CASE SHEET

Sl.No.	List of Records	No. of Pages	Legibility	Completeness	Remarks
1	Admission sheet	1			
2	Discharge Summary	1 + 1			
3	Nursing Initial assessment	1			
4	Patient Transfer form	1			
5	In-patient Medical record	3			
6	Doctors progress sheets	3			
7	Nursing plan of care and handover sheets	3			
8	Consultation sheet	1			
9	General consent for treatment				
10	Consent for Surgery				
11	Consent for blood transfusion				
12	Consent for chemotherapy				
13	Consent for high risk				
14	Consent for Restraint				
15	LAMA consent				
16	Consent for special procedure / Sedation				
17	Consent for Formula feed				
18	Consent for MTP				
19	Consent for Radiological Investigations				
20	Consent for HIV test				
21	Anaesthesia notes (Pre Anaesthesia & post)	1			
22	Neonatal Admission/Delivery/Physical Exam				
23	Medication Reconciliation				
24	Emergency Triage record				
25	Pre operative check list				
26	Surgical safety checklist				
27	Operation Theatre notes				
28	Nurses clinical Presentation				
29	TPR & BP chart	2			
30	Intake and Out take chart (fluid chart)				
31	Drug chart (Regular Prescription)				
32	Investigation Values (result sheet)				
33	Nebulization chart				
34	Nutritional review chart				
35	Intensive care unit (ICU Charts)				
36	Consent for Admission in PICU / NICU				
37	The Humpty dumpty scale	1			
38	Braden Q Scale				
39	Bed side check list				
40	PICU bed formula Dilution feeds				
41	Gastro monitoring chart				
42	Rch ED doctors note	8			
43	BP Monitoring chart				
44	RBS monitoring chart				
Total No. of Pages		28			

ERROR LOG

LOCATION : OT / Birthing Centre / BirthRight Premium / 3rd Floor (Zone A,B,C) / NICU / PICU /
2nd Floor Ward / Oncology / 1st Floor Wards.

OBSERVATION :

DATE :

SIGNATURE OF MRD INCHARGE / EXECUTIVE

BAH-00661134 IP5-00176163
 Baby O1 POTHULA AKSHITHA
 08-07-2026 0 Y 0 M 0 D 9 H (F)
 Dr. ANNAPOORNA TADAVARTHY

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

BirthRight™
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/7	<u>Lactation notes:</u>	
10:30am	- Lemi - Well formed breast and nipples - colostrum seen - Suck not active, sleeping at the breast after few sucks	
	<u>Advice:</u>	
	- Direct breast feeding - Aim for deep latch as demonstrated - Make baby suck for 15-20 min on each side - Demand feeding not exceeding 2-2 1/2 hours	
		<i>[Signature]</i>
10/7/26 4:45pm	CS/B Resident	
	25 HCL / Fch / Em LSCS / SGA / 2268 / Relt Sp Family H/O	
	Baby on room air	<u>Plan</u>
	m/o+ B/o+	1. DBF 2nd hly Hb sup
	m/v v/-	2. SBR NBS } T/m 3:30pm OAE }
	Euglycemic - 11mg/dl @ 24HOL	
	cup	
	Tone } good feeding	3. Warm care
	activity } well	4. GRBS as scheduled
		5. Monitor (SOS) vitals
		sohle

BAH-00661134
 Baby OI POTHULA AKSHITHA
 09-07-2026
 Dr. ANNAPOORNA TADAVARTHY (F)
 0 Y 0 M 0 D 9 H

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6p	1/5/8 or Anap.	1) SBR NBS 11/7/26.
		2
		Dr. Tadavarthi Annapoorna Reg. No: 53054
		11/2/26
		OAE - New born hearing screen
		Referral responses are sent
		Referral Pass
		<i>[Signature]</i>



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
11/7/26 9:20am	C/S/B Resident	
	42+10CL FCH 2m LSCS SGA 2268g 7/Hb Relt So	
	$\begin{array}{r} m 0^+ \\ B 0^+ \end{array}$	$\begin{array}{r} U \checkmark 6 \\ m \checkmark 10 \end{array}$
		Plan
		① DBF 2nd huly
	Baby on room air	Hb bumping
	Temp → 2119g → 6.5% ↓	② SBR } Today
	excessive cry @ night	NBS } 3:00pm
	Euthemic - pink	③ warm care
	Euglycemic - 69mg/dl	④ CRBS as scheduled
	my tone } good	⑤ monitor vitals
	activity }	
	peripheries warm.	
	ERT 13sec	<u>soluble</u>
11/7 10am	<u>Lactation notes:</u>	
	- Suck improved.	
	- continue direct breast feeding	
	with deep latch.	
	- To feed in sitting position only	
	- counselled about expessing milk	
	if baby is continuously sleeping	
	at the breast	<u>Shy Sequey</u>



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Your Right to a Safe Delivery

V

Dr. Tadavarthy Annapoorna
Reg. No: 53054 /

Patient Sticker

PROGRESS NOTES AND DOCTOR'S ORDER

[illegible]

BAH-00661134 IP5-00176163
Baby Of POTHULA AKSHITHA
09-07-2026 0 Y 0 M 0 D 2 H (F)
Dr. ANNAPOORNA TADAVARTHY



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NURSING DEPARTMENT NEWBORN - NURSING ASSESSMENT FORM

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

Baby's Name:

Mother's Name: P. Akshitha

Date of Birth: 9/2/20

Time of Birth: 2:33 PM

Gender: ☐ Male ☒ Female

Birth Weight: 2.268 Kgs

HC: 32cm cm

Length: 45cm cm

Meconium in Liquor: ☐ Yes ☒ No

Cried at Birth: ☐ Yes ☐ No

Term / Pre-term / Post-term:

Resuscitated: ☐ Yes ☒ No

Blood Group: Mother: O+ve Baby:

Feeding: ☒ Breast Feeding

☐ Formula

☐ Both

First Feed Time: 4:15 PM

AFFIX MOTHER'S
IDENTIFICATION LABEL

Mode of Delivery: ☐ Normal

☒ LSCS - Emergency/ Elective

☐ Instrumental

☐ AVD

Indication:

Physical Assessment of New Born:

Temp: 37.2 °C HR: 142 /Min RR: 40 /Min BP: SpO₂: 100%

Pain Score: 0 (Follow N Pass)

Fall Risk Assessment: ☐ Yes ☒ No Score: 6 (Fill the Humpty Dumpty Sheet)

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

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

Findings:

General Appearance: Posture: ☒ Well-Flexed ☐ Asymmetry

Skin: ☒ Pink ☐ Meconium Stain ☐ Others, Specify:

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

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

Routine Care Provided: Yes / No

Capillary Blood Glucose Monitoring Done: Yes / No

Neonatal Screening Done: Yes / No

1. Nutritional Screening: Feeding Problem Yes / No

2. Functional Screening: Musculoskeletal Congenital Abnormality Yes / No

3. Socio History: Siblings Yes / No

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

Newborn Screening Discussed: Yes / No

Nurse Name: P. Reddy

Signature: [Signature]

Date & Time: 9/2/20 5 PM

FLUID CHART

Sheet No. : 0

9.7.26

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

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
	08:00 am											
	09:00 am											
	10:00 am											
	11:00 am											
	12:00 pm											
	01:00 pm											
Total Intake :						Total Output :						
	02:00 pm											
	03:00 pm											
	04:00 pm	DBM										
	05:00 pm											
	06:00 pm											
	07:00 pm	DBM										
Total Intake :						Total Output :						
	08:00 pm											
	09:00 pm	DBF										
	10:00 pm											
	11:00 pm	DBF										
	12:00 am											
	01:00 am	DBF										
Total Intake : Taken						Total Output : m - 1 u - 6						
	02:00 am											
	03:00 am	DBF										
	04:00 am											
	05:00 am	DBF										
	06:00 am											
	07:00 am	DBF										
Total Intake : Taken						Total Output : m - 1 u - 6						
Total 24 hrs. Intake			taken									
Total 24 hrs. Output			m - 1 u - 1									

FLUID CHART

Sheet No. : 2

10/7/26

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

		Intake				Output					IV Site Thrombo- phlebitis Score	Sign. Nurse	
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine			
			Mouth	I.V	N.G								
10/7/26	08:00 am										1	Latha	
	09:00 am	DBF									NO		
	10:00 am						✓			✓	IV		
	11:00 am	DBF											
	12:00 pm												
	01:00 pm	DBF											
Total Intake : Taken						Total Output : U-1 M-1							
10/7/26	02:00 pm										1	maite	
	03:00 pm	DBF									NO		
	04:00 pm						✓				IV		
	05:00 pm	DBF											
	06:00 pm						✓			✓			
	07:00 pm	DBF											
Total Intake : Taken						Total Output : M-2 U-1							
10/7/26	08:00 pm										1	Latha	
	09:00 pm	DBF					✓						
	10:00 pm										NO		
	11:00 pm	DBF					✓				IV		
	12:00 am												
	01:00 am	DBF					✓						
Total Intake : Taken						Total Output : U-2 M-3							
11/7/26	02:00 am										1	Latha	
	03:00 am	DBF					✓						
	04:00 am						✓				NO		
	05:00 am	DBF					✓				IV		
	06:00 am									✓			
	07:00 am	DBF					✓						
Total Intake : Taken						Total Output : U-2 M-4							
Total 24 hrs. Intake		Taken											
Total 24 hrs. Output		U-6 M-10											



FLUID CHART

Sheet No. : (3)

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

Date	Time	Nature of Fluid	Intake			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine			
	08:00 am												
	09:00 am	DBF					✓				✓		Supri No iv (Supri) Supri
	10:00 am												
	11:00 am	DBF											
	12:00 pm						✓			✓			
	01:00 pm	DBF											
Total Intake :						Total Output : u-2 m-2							
	02:00 pm	DBF											
	03:00 pm												
	04:00 pm												
	05:00 pm												
	06:00 pm												
	07:00 pm												
Total Intake :						Total Output :							
	08:00 pm												
	09:00 pm												
	10:00 pm												
	11:00 pm												
	12:00 am												
	01:00 am												
Total Intake :						Total Output :							
	02:00 am												
	03:00 am												
	04:00 am												
	05:00 am												
	06:00 am												
	07:00 am												
Total Intake :						Total Output :							

Total 24 hrs. Intake

Total 24 hrs. Output

Patient Sticker

FLUID CHART

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

BirthRight
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Your Right to a Safe Delivery

Sheet No. :

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3. 24 hrs. total to be entered in the kardex in RED.

		Intake				Output					IV Site Thrombo- phlebitis Score	Sign. Nurse
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine		
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am											
	10:00 am											
	11:00 am											
	12:00 pm											
	01:00 pm											
Total Intake :						Total Output :						
	02:00 pm											
	03:00 pm											
	04:00 pm											
	05:00 pm											
	06:00 pm											
	07:00 pm											
Total Intake :						Total Output :						
	08:00 pm											
	09:00 pm											
	10:00 pm											
	11:00 pm											
	12:00 am											
	01:00 am											
Total Intake :						Total Output :						
	02:00 am											
	03:00 am											
	04:00 am											
	05:00 am											
	06:00 am											
	07:00 am											
Total Intake :						Total Output :						
Total 24 hrs. Intake						Total 24 hrs. Output						