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 : IP5-00173960 **Admit Date** : 18-May-2026 **Admit Time** : 10:40 AM **UHID** : BAH-00656553

Patient Details :

Patient Name : Baby Of PALLAVI VISWANADH
Guardian : Mr RAVI CHANDRA MUSTI
Gender : Female
Occupation :
Address (H) : P.NO.1-115/C-502, FORTUNE TOWERS, BESIDE IOL PETEROL PUMP, Madhapur Hyderabad Telangana INDIA 500081

Age : 0 D
DOB : 18-05-2026 09:49 AM
Religion :
Martial Status : Single
Phone No : 9618124261/ 9987857897
E-mail : RAVI.MUSTI@GMAIL.COM

Admission Details :

Bed Type : BASINET **Bed No** : CRDL-SW-417-1 **Ward Name** : 4F-BIRTHING CENTRE
Room No : CRDL-SW-417-1 **Admission Type** : First Visit

Contact Details :

Name : Mr RAVI CHANDRA MUSTI
Contact Address : P.NO.1-115/C-502, FORTUNE TOWERS, BESIDE IOL PETEROL PUMP, Madhapur Hyderabad Telangana INDIA 500081

Relationship : Father
Phone No : 9618124261 / 9987857897

Signature

Doctor Details :

Doctor Name : Dr. NITASHA BAGGA
Referral Doctor : Self
Co-Consultant :

Specialisation : NEONATOLOGY
Phone No :

Payment Details :

Payment Mode : Cash

Deposit Amount : 0.00
Payor Name : SELFPAY

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NITASHA BAGGA

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NEWBORN MONITORING FORM

(Grand mother writing)

Date of Birth : 18/5/26
Time of Birth : 9:49 AM
Mode of Delivery : EL-LSCS
Birth Weight : 2.494
Head Circumference : 32cm
Length : 50cm
Red Reflex : present/Ⓝ

New Born Screening : Mrs. H. Sudha
TFT :
OAE :
Mother's Blood Group : B+ve
Baby's Blood Group :
Anomaly Scan :
Vaccination : OPV, BCG, Hep-B done on Dt -18/5/26 By Sis. Preethi

Date	Weight	Type of Feed	Quantity	Temperature	Signature
18/5/26	2.494	DBF	,	97.8 F	Karuna
18/5/26	2.485 (warmed wt)	DBF		98.0° F	Divya
19/5/26	2.399 kgs	DBF	—	98.1° F	Revathi
20/5/26	2.220 kgs	DBF	—	98.5 F	Annamma

Date	Time	Investigation	Result	Order No.	Signature
18/5	10:20 Am	Blood group		26050392	Kanna
18/5	10:20 Am	GRBS	60 mg/dl	26050461	Kanna
18/5	1pm	GRBS	59 mg/dl		Kanna
18/5/26	4:30 pm	GRBS	91 mg/dL		Divya
19/5/26	11:30 pm	GRBS 12 hrly	76 mg/dl	26050631	Revathi
19/5/26	11:20AM	(Mother Refused to check GRBS)			
		(informed to Dr. Bharat. He said leave it)			
19/5/26	9:30pm	(mother refused to check GRBS)			
		informed to Dr. Rupanjali.			
20/5/26	9am	SBR			Satya
20/5/26	12pm	NBS		BA2605127З	[illegible]

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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 Pallavi Vishwanadh

Gender : ☐M ☑F Blood Group : ....

Date of Birth : 18/5/26 Time of Birth : 9:49 AM.

Place of Birth : RCH, BH

Mother's Blood Group : B +ve

Birth Weight (gms) : 2494 gms. Length (cms) : ....

OFC (cms) : ....

Estimated Gesth Age : 37+5

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 33y8m Ht : 158 cm Wt : 79.8 kg BMI: .... Married Life : .... LMP : 27/8/25 EDD : 3/6/26

Conception : Spontaneous or with Rx. : Spontaneous.

Booked at what GA. : Booked @ Mumbai, Reff - @ 35+3. AN Steroids Drugs / Doses : ....

Last Scans Details : 16/4/26 : 33+1 wks / 2052 gm / Cephalic / AFI = 13 cm / Placenta - Ant / upper mid segment / Doppler - Ⓝ

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

MATERNAL RISK FACTORS

Age : ☐ <18 yrs ☐ > 35yrs

MTHFR Mutation

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) : ....

....

... - when detected : ....

...reased Resistence / ADEF / REDF /

...MCA) / Ductus Venosus : ....

....

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 ? ....

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

Infection : H/O, Fever

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

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

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

...cy : .... Duration : ....

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Dr. NITASHA BAGGA

PAST OBSTETRIC HISTORY

G : 3 P : 1 A : 1 L : 1

Sl. No.	Age	GA wks	B.W	Gender	Significant	Details
1.)	2022 - Spont miscarriage @ 5wks					
2.)	2024 - Spont concep / 2.3kg / 36+6 / Male / FGR / NICU for 5 days ilo Cong. pneumonia c pneumothorax & CPAP					
3)	Present pregnancy.					

PERINATAL HISTORY

Treating Obstetrician : .... Hospital : RCH, BH ☑ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig)

Second stage (> 2 hours after dilation)

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

Specify the reason : ....

Augmentation of Labour : ☐ Induced ☐ Assisted Vaginal

CTG : ☐ Normal ☐ Suspicious ☐ Pathological

MSL : ....

Resuscitaion : ☐ Yes ☐ No

Cord ABG : ....

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

NEONATAL RESCUSTITION DETAILS

APGAR SCORE

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

SIGN	0	1	2	1 Minute	5 Minutes	10 Minutes
COLOUR	Blue or Pale	Acrocyanotic	Completely Pink	1	1	
HEART RATE	Absent	< 100 Minutes	> Minutes	2	2	
REFLEX IRRITABILITY	No Response	Grimace	Cry or Active Withdrawal	2	2	
MUSCLE TONE	Limp	Some Flexion	Active Motion	2	2	
RESPIRATION	Absent	Weak Cry; Hypoventilation	Good, Crying	2	2	
			TOTAL	9/10	9/10	

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

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints : G3P1L1A1 c 37+5 wks | Cervical stitch insitu | Prior c LSCS c [illegible]

[illegible] admitted for Elective LSCS.

Patient Sticker

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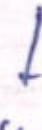
History of Present Illness: equipment checkdone

Baby delivered by LSCS

Baby CIAB.

Baby dried, secretions cleared

Delayed cord clamp. done, cut given (2A 1 vein noted)



Inj vit k given (1mg IM)

Baby stable

Shifted to mother side

Investigation details in previous Hospital :

—

Feeding History :

IUGR ...

Doppler (Incr...

Redistrbution in M...

AFI : ....

—

PPROM: Duration : ....

Medication during Pregnan...

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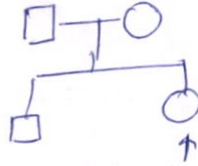
Patient S

Past History :

—

Family History :



Socio Economic History :

Upper middle class.

GENERAL EXAMINATION ON ADMISSION

General Disposition :

—

VITALS : Temperature : 97.7°F HR : 168/min RR : 52/min NIBP : .... CFT : ....

Color of the extremities : Acrocyanosis → Pink

Jaundice : .... Pallor : .... SpO2 : ....

ANTHROPOMETRY: Birth Weight : 2494 gms Length : .... HC : .... Present Weight : ....

Ponderal Index : .... AGA : .... SGA : .... LGA :

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HEAD TO TOE EXAMINATION

Section	Item	Finding
HEAD :	Fontanelles : Sutures Shape / Moulding : Edema / Bruising : Size - (H.C.) :	(N)
FACIES : (Any Facial Dysmorphism)		No facial dysmorphism
NECK and CLAVICLES :	Range of Motion : Asymmetry : Masses :	(N)
EYES :	Symmetry :	
	Red Reflex :	→ Not checked
	Discharge :	
EARS, NOSE MOUTH and THROAT :	Ear set / Shape : Periauricular Pits / Tags : Nasal shape / Patency : Palate : Gums : Lips : Tongue :	(N)
THORAX and BREASTS :	Shape of Thorax : Position of Nipples and Number :	(N)
ABDOMEN and UMBILICUS :	Shape : Organomegaly : Bowel Sounds :	(N)
	Umbilical Stump :	– 2A + 1vein
	Discharge :	
GENITILIA :	Labia / Hymen : Testicles/penis :	Female 'Ext genitalia noted
	Anus :	Patent
HERNIAL ORIFICES		Free
TRUNK and SPINE :		(N)
SKIN LESIONS :		(N)
EXTREMETIES :	Fingers / Toes : Deformities : Hip Joint Examination :	(N)
	Arms / Legs : Mobility :	(N)

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SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : ☑ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress: RR: 52/min SCR / ICR / See - Saw breating :

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

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

Settings :

SpO_2: 95% on RA Auscultation: S1S2 (+) Breath Sounds: B/L AE (+) Added Sounds:

CARDIOVASCULAR SYSTEM :

HR : 168/min BP :

Femoral Pulses : (N)

Other Peripheral Pulses : (N)

Precordial Activity : (N)

Murmurs : Nil

Signs of Cardiac Failure : (Nil)

ABDOMEN:

Shape : (N)

Palpation : (N)

Palpable masses : (N)

Abdominal girth : (N)

Hernia orifice : Free

Anal Patency : Patent

Umbilical Cord : 2A + 1 vein

First urine passed : Not yet

Meconium passed : Not yet

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) : CTA fair

State of wakefulness : CTA fair

Prechtle Score : CTA fair

Nerves : CTA fair

MOTOR SYSTEM:

Passive Tone : (N)

Active Tone : (N)

Neonatal Reflexes : (N)

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

Moro's : (N)

ATNR : (N)

DTR : (N)

Skull and Spine : (N)

Patient Sticker	BAH-00656553 IP5-00173960 Baby Of PALLAVI VISWANADH 18-05-2026 0 Y 0 M 0 D 3 H (F) Dr. NITASHA BAGGA

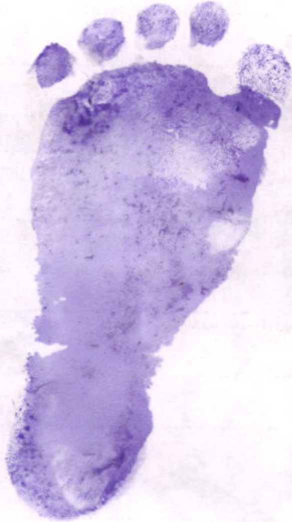
Any Congenital Anomalies : ....

Diagnosis : 37 + 5 / FT / Female / 2.494 kg / LSCS i/v/o previous LSCS / CIAB / SGA.

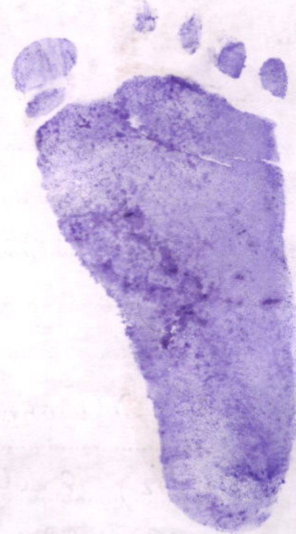
Mother - MTHFR mutation.

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature : Ramya

Name : Dr. RAMYA

Date & Time : 18/5/26

Consultant :

Signature :

Name :

Date & Time DR. NITASHA BAGGA
Registration No: 66260

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 :

Systemic :

Medications :

Plan during ward follow up :

1.) Warm care
2.) Exclusive breast feeding + Burping @ 2-3rd hrly.
3.) OPV, BCG, Hep B @ today
4) NBS, SBR, OAE @ 48HOL
5) Blood grouping from cord blood - Send now
6) Clinical assessment of jaundice @ 12, 24 HOL
7) Glucose monitoring @ 0, 3, 6, 12, 18, 24, 36, 48, 72 HOL (Prefeed) ; Inform if < 50mg/dl
8) W/F feeding difficulties, hypoglycemia, resp. distress.

Feeding Plan at the time of shifting :

first feeding time 10:10 Am to 10:25 Am

Screenings done during NICU Stay :

NSG :

Hearing Screen :

ROP :

TFT :

NP2 :

Doctor Signature (Handover Given): Dr. Ramya

Doctor Signature (Handover Taken):

Doctor Name: Dr. RAMYA

Doctor Name:

Date & Time: 18/5/26 ; 10:15am

Date & Time:

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DEFICIENCY CHECK LIST OF CASE SHEET

Sl.No.	List of Records	No. of Pages	Legibility	Completeness	Remarks
1	Admission sheet	1			
2	Discharge Summary +Plan	1+1			
3	Nursing Initial assessment	1			
4	Patient Transfer form	1			
5	In-patient Medical record				
6	Doctors progress sheets	3			
7	Nursing plan of care and handover sheets	4			
8	Consultation sheet				
9	General consent for treatment	1			
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	Anaestesia notes (Pre Anaesthesia& post)				
22	Neonatal Admission/Delivery/Physical Exam	1			
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	3			
30	Intake and Out take chart (fluid chart)				
31	Drug chart (Regular Prescription)	2			
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				
38	Braden Q Scale	1			
39	Bed side check list				
40	PICU bed formula Dilution feeds				
41	Gastro monitoring chart				
42	Rch ED doctors note Others	8			
43	BP Monitoring chart				
44	RBS monitoring chart				
		28			
	Total No. of Pages				

Signature and Date : 20/5/26

Doc. No. : RCHBH/ FRM / GENERAL / 126

(P.T.O)

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

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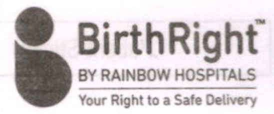

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
18/5/26	Seen by Resident	
11:40 Am	2 HOL/37+5/2494 gms	(LBW)/SGA/CIAB/El-LSCS (Prev. LSCS)
	Mother - MTHFR mutation	Fch
		Plan:-
	Bt-wt - 2494 grams	- Continue direct breast feeding f/b burping every 2-3 hrly
M/B+ B		- Warmth care
	Urine, motion } not passed.	- ✓BCG ✓OPV ✓HepB } Today
	Baby - euthermic, pink	- Trace Baby blood group.
	Peripheries - warm	- Clinical assessment of
	CFT/A - Good	Jaundice @ 24 HoL
	Hemodynamically stable	- GRBS monitoring as advised
	AF at level.	3, 6, 12, 24, 36, 48, [illegible] HoL
		Inform if <50mg/dl
		- w/f feeding difficulties, hypoglycemia, resp-distress
		- Monitor vitals and Inform SOS
		- SBR, NBS, OAE } 48 HoL
		Bharath

DR. NITASHA BAGGA
Registration No: 66260

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
18/5/26. 3-30pm	Lactation notes.	
	Lactation counseling done position shown practically Colostrum as seen Baby is Latching well feed on demand frequently deep Latch more than 20-25min each side. (Adv) DBF	
	Nalini	
18/5/26 4:30PM	Seen by Resident 7 HOL | 37+5 | 2494gm | LBW) SGA | CIAB | El-LSCS (Prev. LSCS)	
		Plan:-
	Bt.wt - 2494gm	- Continue DBF flb. burping every 2-3 hrly.
M | B+ B | O+		- Warmth care
	GRBS - 60, 59, 91 mg/dl.	- Clinical assessment of jaundice @ 24 HOL
	urine, stools - passed.	- GRBS monitoring as advised 12, 24, 36, 48 HOL inform if <50
	Baby - euthermic pink	
	Peripheries - warm	
	CTIA - Good	- w/f feeding difficulties, distress hypoglycemia
	Hemodynamically stable	- SBR, NBS } 48 HOL
		- OAE after 48HOL
	Red reflex (N)	- Monitor vitals & Inform SOS
		Bharath
		NB. Divya

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/5/26	Seen by Resident	
7:40AM	22 Hol / 37+5 / 2494gm / LBW / SGA / CIAB / El. LSCS (prev. LSCS)	
	Bt. wt - 2494gm	Plan:-
M B+ / B O+	Today. wt - 2399 gm	
	95gm (3.8%)	- Continue DBF Ab burping every 2-3 hourly
	Urine - 8 times	- Warmth care
	motion - 4 times	- Clinical assessment of Jaundice @ 24 Hol
	GRBS @ 12 Hol - 76 mg/dl.	- GRBS monitoring as advised 24, 36, 48 Hol.
	Baby - euthermic, pink	- w/f feeding difficulties,
	Peripheries warm	hypoglycemia, distress
	C/T/A - Good	- SBR } T/m 10AM
	Hemodynamically stable	NBS }
		- OAE T/m after 48 Hol (10Am)
	Accepting feeds well.	- Monitor vitals and Inform SOS.
		Bharath
		Noted by Rarathi 9/10/23
	DR. NITASHA BAGGA Registration No: 68260	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
19/5/26	Seen by Dr. Bharath (Resident)	
4:15PM	28 HOL/37+5/2494gm/BW/SGA/CIAB/El. LSCS (i/v/o Prev. LSCS)	
		Plan:-
M/B: B+ / O+	Bt.wt - 2494gms	- Continue OBF f/b burping every 2-3 hourly
	urine - 8 times, motion - 4 times } since birth	- Warmth Care
		- GRBS monitoring as advised 36, 48 HOL
	O/E:-	- W/f feeding difficulties hypoglycemia
	Baby - euthermic, pink	
	d T/A - Good.	- SBR, NBS, OAE } @ 10Am T/m
	Peripheries - warm	
	Hemodynamically stable	- Monitor vitals and Inform SOS.
		Bharath

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/5/26 7:49 AM	Seen by	Dr. Bharath (Resident)
	46 HOL/37+5/2494gm	/LBW/SGA/CIAB/El. LSCS
		Plan:-
	Bt.wt - 2494gm	- Continue DBF f/b burping every 2-3 hourly
M B+ / B O+	Yest.wt - 2399gm	
	Today.wt - 2220gm (↓10.9%)	- Warmth care
	↓ 179gm	- SBR, NBS, EGRBS } @ 48 HOL ~~10AM~~ Now
	urine - 4 times	- OAE today after 10 AM
	motion - 9 times	- w/f feeding difficulties, distress
		- Monitor vitals and Inform SOS
		- Recheck weight evening
		Bharath
		DR. NITASHA BAGGA Registration No: 63260
		- Measured feeds (EBM+FF) 20 ml q 2hrly (or) 30 ml q 3hrly

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 2 D (F)
Dr. NITASHA BAGGA

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/5/26 11 AM	Seen by Resident (Dr. Bharath)	
		Plan
	SBR-12.2	- Discharge now
		- F/U Friday morning
		Bharath
		20/5/26
		OAE - New born hearing screening Bilateral responses are present Bilateral Pass
		[signature] 20/5/26
20/5/26 11:30am	Lactation notes.	
	Good milk production is there feed demands with deep latch More than 20-25 min each side. (Advise) DBF + EBM with spoon or cup. no Bottle.	
	[signature]	

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 0 D 20 H (F)
Dr. NITASHA BAGGA

Rainbow® Children's Hospital
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RESULT SHEET

Date						
Time						
Hb						
PCV						
RBC						
WBC						
N/L						
Platelets						
CRP						
ESR						
PCT						
RBS						
Na						
K						
Cl						
Ca/Mg						
Phosphate						
Urea						
Creatinine						
ALP						
SGPT						
SGOT						
T.Bili/Conj						
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.,) : ....

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
1?-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NITASHA BAGGA

HBH / 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
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 18.5.26 Time:	11Am	1pm	6Am	10 pm	7 pm
Doctor/Nurse/Family Concern?					
Temperature (°F) (scale 104–94)	37°c	98°f	97.8°F	98.1°F	98.2°F
Heart Rate (bpm) and Blood Pressure (mmHg) * (scale 190–50)	140	140			
Heart Rate (Number)	140	140 b/m	130 b/m	125 b/m	139 b/m
Resp. Rate (bpm) (Over 1 Minute) * (scale 70–10)	40	40			
Resp Rate (Number)	40	40	40 b/m	40 b/m	40 b/m
Resp Distress — Mod/ Severe					
Resp Distress — None / Mild	—	—			
Receiving O_2 (l/min)					
O_2 Saturations (%)	—	—	99%	97%	98%
Conscious Level — Normal					
Conscious Level — Altered					
GCS *					15/15
TOTAL SCORE Number of shaded boxes		0	0	0	0
Pain Score	0	0	0	0	0
Observer's Initials		[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
	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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- The Early Warning Score does not replace clinical experience and acumen and should not be relied upon for such purpose.
- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- Any Early Warning Score of 3 or above should be recorded below with details of any subsequent action initiated

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

- If at any time additional help is required, call help – regardless of the Early Warning Score!
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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-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 0 D 20 H (F)
Dr. NITASHA BAGGA

RCHBH / 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.
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EARLY WARNING SCORE: CHILDREN'S UNIT

19/5/26

Parameter	Obs 1	Obs 2	Obs 3	Obs 4
Date: .... Time:	11 AM	6pm	11 Am	6am
Doctor/Nurse/Family Concern?				
Temperature (°F) (104–94)	98.6°F	98.5°F	98.7°F	99.0°F
Heart Rate (bpm) and Blood Pressure (mmHg) * (190–50)	122			
Heart Rate (Number)	122 b/m	120b/m	145 b/m	138 b/m
Resp. Rate (bpm) (Over 1 Minute) * (70–10)				
Resp Rate (Number)	39 b/m	40b/m	40b/m	40 b/m
Resp Distress — Mod/ Severe / None / Mild				
Receiving O_2 (l/min)				
O_2 Saturations (%)	99%	99%	100%	100%
Conscious Level — Normal / Altered				
GCS *	15	15/15	15/14	15/14
TOTAL SCORE Number of shaded boxes	0	0	0	0
Pain Score	0	0	0	0
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]

Note: BP does not score in early warning scoring

ACTIONS	Score	Action
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

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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.
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BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH (F)
18-05-2025 0 Y 0 M 2 D
Dr. NITASHA BAGGA

BH / 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

.Y WARNING SCORE: CHILDREN'S UNIT

Date: .... Time:	10 am
Doctor/Nurse/Family Concern?	
Temperature (F) 104 / 103 / 102 / 101 / 100 / 99 / 98 / 97 / 96 / 95 / 94	97.4°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)	134 bt/m
Resp. Rate (bpm) (Over 1 Minute) * 70 / 60 / 50 / 40 / 30 / 20 / 10	
Resp Rate (Number)	49
Resp Distress — Mod/ Severe	
Resp Distress — None / Mild	
Receiving O_2(l/min)	
O_2Saturations (%)	99 %
Conscious Level — Normal	
Conscious Level — Altered	
GCS *	15/15
TOTAL SCORE Number of shaded boxes	0
Pain Score	0
Observer's Initials	[illegible]

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 ho[urly Observation to continue.]
Score 3	:	Shift in charge AND ER doctor/Floor Registrar to see
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Score 5 & 6	:	Shift incharge and PICU /NICU fellow or PICU/NICU consulta[nt]

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Patient Sticker

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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I	**IDENTITY:** I am (nam a nurse o rd (X). I am calling about (child X)
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Baby Of PALLAVI VISWANADH (F)
18-05-2026 0 Y 0 M 2 D
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H / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Parameter	Scale / Option
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) *	190
	180
	170
	160
	150
	140
	130
	120
	110
	100
Note: BP does not score *in early* warning scoring	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	Action
Score 1	: Continue normal observation by staff nurse
Score 2	: Shift in charge nurse to be informed [illegible]
Score 3	: Shift in charge AND ER doctor/Floor Registrar informed and continue [illegible]
Score 4	: Shift in charge AND treating [illegible]
Score 5 & 6	: Shift incharge and PICU /NICU fellow or [illegible]

NB: If GCS is below 12 or the Oxygen requirement is >3 Lit./min. , then irrespective [illegible]

Patient Sticker

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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[illegible] I am (name), a nurse on ward (X). I am calling about (child X)
[illegible] because I am concerned that ... (e.g. BP is low/high, pulse is XXX, [illegible] Early Warning Score is XX)
[illegible] ted on (XX date) with (e.g. respiratory infection). They have had (X operation/ [illegible]) in the last (XX mins). Their last set of observations [illegible] condition has changed [illegible] alert/ drowsy/ confused, pain free)
[illegible] (e.g. given O2/ analgesia, stopped the infusion), OR I am [illegible] I don't know what's wrong but I am really worried.
[illegible] next (XX mins) AND Is there anything I need to [illegible]

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Baby Of PALLAVI VISWANADH (F)
18-05-2025 0 Y 0 M 2 D
Dr. NITASHA BAGGA

P... H / FRM / CLINICAL / 124

INFANT (<1 year)

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BirthRight BY RAINBOW HOSPITALS — Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Parameter	Scale
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) *	190
	180
	170
	160
	150
	140
	130
	120
	110
	100
Note: BP does not score in early warning scoring	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_2 Saturations (%)	
Conscious Level	Normal
	Altered
GCS *	
TOTAL SCORE *Number of shaded boxes*	
Pain Score	
Observer's Initials	

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

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Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NITASHA BAGGA

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Your Right to a Safe Delivery

FLUID CHART

Sheet No. : 1

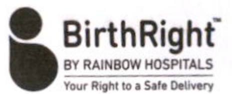
18/5/26

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	Intake				Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine		
			Mouth	I.V	N.G							
18/5	08:00 am											
	09:00 am											
	10:00 am		DBF								0	karuna
	11:00 am										0	karuna
	12:00 pm						Np			Np	0	karuna
	01:00 pm		DBF								0	karuna
Total Intake : taken						Total Output : U-1						
18/5	02:00 pm										NA	Divya
	03:00 pm		DBF				✓			✓		
	04:00 pm											
	05:00 pm											
	06:00 pm		DBF							✓		
	07:00 pm											
Total Intake :						Total Output : M-1 U-2						
18/5	08:00 pm		DBF				✓				NA	Revathi
	09:00 pm									✓		
	10:00 pm		DBR									
	11:00 pm									✓		
	12:00 am		DBR									
	01:00 am									✓		
Total Intake :						Total Output : U2 M2						
19/5	02:00 am		DBR				✓				NA	Revathi
	03:00 am									✓		
	04:00 am		DBR									
	05:00 am									✓		
	06:00 am		DBR				✓					
	07:00 am									✓		
Total Intake :						Total Output : U2 M=						

Total 24 hrs. Intake	orally taking	Total 24 hrs. Output	U= 8, M= 4

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 0 D 20 H (F)
Dr. NITASHA BAGGA



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

Date	Time	Nature of Fluid	Intake Route: Mouth	I.V	N.G	Output: NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
19/5/26	08:00 am											
	09:00 am		DBM				Not pass			Not pass	NA	Sousha
	10:00 am											
	11:00 am		DBM									
	12:00 pm											
	01:00 pm											
Total Intake :							**Total Output :** M-0			U-0		
19/5/26	02:00 pm											
	03:00 pm		DBM				✓					
	04:00 pm									NP	NA	[illegible]
	05:00 pm						✓					
	06:00 pm		DBM				✓					
	07:00 pm		DBM									
Total Intake :							**Total Output :** M-3			U-0		
	08:00 pm											
	09:00 pm		DBM				✓					
	10:00 pm						✓			✓	NA	Annama
	11:00 pm						✓					
	12:00 am		DBM				✓			✓		
	01:00 am											
Total Intake :							**Total Output :** M-4			U-2		
	02:00 am		DBM									
	03:00 am									✓	NA	[illegible]
	04:00 am		DBM				✓					
	05:00 am											
	06:00 am		DBM				✓			✓		
	07:00 am											
Total Intake :							**Total Output :** M-2			U-2		

Total 24 hrs. Intake	

Total 24 hrs. Output	M-9 U-4

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

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 0 D 20 H (F)
Dr. NITASHA BAGGA

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				Output					IV Site Thrombo-phlebitis Score	Sign. Nurse
		Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine		
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am						—			—		
	10:00 am		DBF								NA	Satya
	11:00 am	FF	30ml									
	12:00 pm											
	01:00 pm											
Total Intake :						Total Output : M - 1 U - 1						
	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	

BAH-00656553 IP5-00173960
Baby Of PALLAVI VISWANADH
18-05-2026 0 Y 0 M 2 D
Dr. NITASHA BAGGA (F)

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.
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	