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 : IP5-00174299 **Admit Date** : 25-May-2026 **Admit Time** : 02:24 PM **UHID** : BAH-00657239

Patient Details :

Patient Name	: Baby Of HARSHKA RAVI	**Age**	: 0 D
Guardian	: MR. ZEESHAN NAWAZ	**DOB**	: 25-05-2026 12:01 PM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H.NO- VILLA B,AMRUTHA VALLEY,ROAD NO-12 Banjara Hills Hyderabad Telangana INDIA 500034	**Phone No**	: 9867821230
		E-mail	: zeeshann50@gmail.com

Admission Details :

Bed Type : BASINET **Bed No** : CRDL-BC-DC-419-1 **Ward Name** : 4F-BIRTHING CENTRE

Room No : CRDL-BC-DC-419-1 **Admission Type** : First Visit

Contact Details :

Name : MR. ZEESHAN NAWAZ **Relationship** : Father

Contact Address : H.NO- VILLA B,AMRUTHA VALLEY,ROAD NO-12 Banjara Hills Hyderabad Telangana INDIA 500034 **Phone No** : 9182046026 / 9867821230

Signature

Doctor Details :

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

Payment Details :

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

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Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 5 H (F)
Dr. VIJAYANAND JAMALPURI

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NEWBORN MONITORING FORM

(Not willing

Date of Birth : 25/5/26
Time of Birth : 12:04 PM
Mode of Delivery : EL-LSCS
Birth Weight : 2.859
Head Circumference : 35cm
Length : 49cm
Red Reflex : .....

New Born Screening : Weak
TFT : .....
OAE : .....
Mother's Blood Group : A positive
Baby's Blood Group : Above
Anomaly Scan : .....
Vaccination : OPV1 BCG, Hep-B given at 9 25/5/26

Date	Weight	Type of Feed	Quantity	Temperature	Signature
25/5/26.	2.859	DBG Good	Good	98.2F	Sandeya
26/5/26	ward wt 2.785kg	DBF	Good	97.8F	Divya
26/5/26	2.764kg	DBF	Good	97.5°F	Divya
27/5/26	2.619kg	DBF	Good	97.9°F	Divya
28/5/26	2.690	DBF	Good	98.0F	Shirisha

Date	Time	Investigation	Result	Order No.	Signature
25/5	2.49pm	Blood group		26053264	[signature]
28/5/26					
29/5/26	10.30 AM	DAE		9629038	[signature]

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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Harshika Rani Age : 35Y.6M 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 Harshika Rani

Gender : ☐M ☑F Blood Group : .....

Date of Birth : 25/5/26 Time of Birth : 12:01PM

Place of Birth : RH, Sanjay

Mother's Blood Group : A positive

Birth Weight (gms) : 2859 Length (cms) : 50cms.

OFC (cms) : 33cm

Estimated Gesth Age : 38 +6

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : ..... Ht : ..... Wt : ..... BMI: ..... Married Life : ..... LMP : 22/8/25 EDD : 2/6/26

Conception : Spontaneous or with Rx. : .....

Booked at what GA. : 6 weeks. AN Steroids Drugs / Doses : .....

Last Scans Details : 8/5/26 - 35+6, Breech, 2549gm, AC-13, AFI-14.3cm, Placenta-Posterior, Doppler-N, TIFFA-N, WTCon-N, HS-Low risk.

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 ? Allergic H/o with Dicloferac-received IV iron @ 32 weeks.

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

Infection : H/O, Fever

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

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

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

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

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PAST OBSTETRIC HISTORY

..3.. P: ..2.. A: ..... L: ..2..

Sl. No.	Age	GA wks	B.W	Gender	Significant	Details
1	2020, FT		LSCS,	Female, 3kg	(V/O + PROM - NPOL)	
2	2022, FT		LSCS,	Female, 5kg.		
3	↑ result pregnancy				ectopic	

PERINATAL HISTORY

Treating Obstetrician : Dr. Jinendra Singh Hospital : ☐ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig) Prev. LSCS

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
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	1	2
2	2	2
2	2	2
2	2	2
2	2	2
9/10	9/10	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)		
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 : G3P2L2 / 38+6 / Previous 2 LSCS / Anemia Corrected for Elective LSCS + Tubectomy

History of Present Illness:

equipment check done

↓

Baby delivered by Forceps

↓

cried immediately after birth

↓

Received into preheated radiantwarmer

↓

Delayed cord clamping done

Inj vit-K 1mg IM given

↓

Baby stable

shifting to mother side

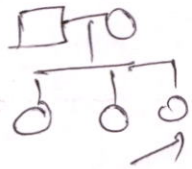
Investigation details in previous Hospital :

Feeding History :

Breastfeeding given within 30 min of life

Past H

Family History :



Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition :

Activity - good

VITALS : Temperature : 36.5°F HR : 148/min RR : 46/min NIBP : ..... CFT : < 2sec

Color of the extremities : Acrocyanosis → pink

Jaundice : ..... Pallor : ..... SpO2 : 98% on RA

ANTHROPOMETRY: Birth Weight : 2859 gm. Length : ..... HC : ..... Present Weight : .....

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

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HEAD TO TOE EXAMINATION

HEAD :
Fontanelles :
Sutures
Shape / Moulding : AF-N, at level
Edema / Bruising : flat
Size - (H.C.) :

FACIES : (Any Facial Dysmorphism) — No facial dysmorphism

NECK and CLAVICLES :
Range of Motion :
Asymmetry :
Masses : N

EYES :
Symmetry :
Red Reflex : — To be checked
Discharge :

EARS, NOSE MOUTH and THROAT :
Ear set / Shape :
Periauricular Pits / Tags :
Nasal shape / Patency :
Palate :
Gums :
Lips :
Tongue : N

THORAX and BREASTS :
Shape of Thorax :
Position of Nipples and Number : N

ABDOMEN and UMBILICUS :
Shape :
Organomegaly :
Bowel Sounds :
Umbilical Stump : — 2V A+ cord present
Discharge :

GENITILIA :
Labia / Hymen :
Testicles/penis : N female External genitalia present
Anus : present

HERNIAL ORIFICES — Nil

TRUNK and SPINE : N

SKIN LESIONS : —

EXTREMETIES :
Fingers / Toes : 5 fingers N
Deformities : 5 toes N
Hip Joint Examination :
Arms / Legs :
Mobility :

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SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : ☐ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress: RR: 46/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: 98% RA Auscultation: S1 S2 Heard Breath Sounds: Bilateral Added Sounds: .....

CARDIOVASCULAR SYSTEM :

HR : 145/min BP : .....

Femoral Pulses : Bilat

Other Peripheral Pulses : .....

Precordial Activity : (N)

Murmurs : -

Signs of Cardiac Failure : .....

ABDOMEN:

Shape : .....

Palpation : .....

Palpable masses : (N)

Abdominal girth : .....

Hernia orifice : Free

Anal Patency : Patent

Umbilical Cord : 2v.o + 2w (P)

First urine passed : not passed

Meconium passed : .....

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) : .....

State of wakefulness : .....

Prechtle Score : .....

Nerves : 4TLA good

.....

MOTOR SYSTEM:

Passive Tone : .....

Active Tone : .....

Neonatal Reflexes : .....

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

Moro's : ..... DTR : .....

ATNR : ..... Skull and Spine : .....

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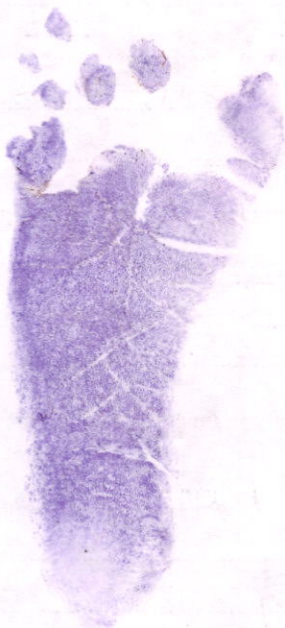
Any Congenital Anomalies : .....

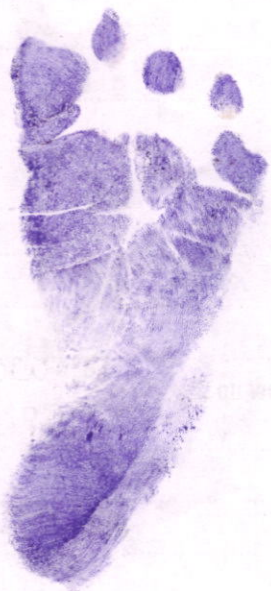
Diagnosis : Term/ Eh-2SCS / AGA .

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature : .....

Name : Dr. N. Preethisha

Date & Time : 25/5/26, 12:20pm

Consultant :

Signature : .....

Name : Dr. Vijayanand

Date & Time : 25/5/26 3:23pm

DR. VIJAYANAND JAMALPURI
Registration No: 40526

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. OBF 2-3 hourly for burping for 30 mins
3. BCG, OPV, Hep-B today
4. send cord blood for blood grouping & typing
5. SBR, NBS, ~~OAE~~ at 48 HRS
6. Monitor Vitals

Feeding Plan at the time of shifting : 1:24pm to 1:47pm

Screenings done during NICU Stay : 7. W/F Feeding difficulties, RD, hypothermia,
8. clinical assessment of Jaundice at 24 Hrs.

NSG : .....

Hearing Screen : .....

ROP : .....

TFT : .....

NP2 : .....

Doctor Signature (Handover Given): N Reetish Doctor Signature (Handover Taken): .....

Doctor Name: N. Reetish Doctor Name: .....

Date & Time: 25/5/26, 12:16pm 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	4			
3	Nursing Initial assessment	1			
4	Patient Transfer form	1			
5	In-patient Medical record	2			
6	Doctors progress sheets	1			
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)	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	3			
30	Intake and Out take chart (fluid chart)	2			
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	1			
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				
43	BP Monitoring chart				
44	RBS monitoring chart				
		1			
	Total No. of Pages	22			

Signature and Date :

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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B/o Harshika Ravi

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
25/5/26 3:23pm	2HOL.	Seen by Dr. vijayand Plan
	— on DBF	1) Regular Feeds
	— Roomair	2- BCG, OPV, Hep-B today
		3. clinical assmt at 24HOL
		DR. VIJAYANAND JAMALPURI Registration No: 40526 Dr. N. Pratibha
26/5/26 9am.	21HOL | LSCS | AGA.	
A+	Wt 8-2-859.	
A+	1Day wt - 2-767.	Plan
	92gm wt loss.	
vaccinated		1) Regular feeds
Urine stool passed		2. Clinical assesment of jaundice at 24HOL
	On DBF.	3. monitor wt/ab.
		Dr. N. Pratibha

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr. Vijayanand sir
26/5/26	22 Hrs	
@ 10 am		1. Results Ready)
		2. Jaundice assessment at 24 hrs
	Urine passed.	
	(Bowel) Stool passed	
		Dr. N Retesh (Neonatology)
		DR. VIJAYANAND JAMALPURI Registration No: 40528
		Noted by Satya 9.30 am
26/5/26 10 AM	Lactation Notes.	
	Lactation Counselling Refused.	
	This is 3rd baby Gs	
	Mother is confident feeding well (Mother)	
	(Nurse)	

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Date & Time	Progress Notes	Doctor's Order
26/5/26	seen by DNB Resident	
2:30pm.	26 HOL / 2SCS / 2.859	seen by Dr. Vijayanand sir
	AF 3846	plan
	AF 2.767 kg (92gm weight loss)	
		1. Continue Regular feeding.
Vaccinated.		
	on Direct feeds	2. Labs as planned.
	on room air.	SBR, NBS Tomorrow 12pm
		3. OAE - Tomorrow.
		4. Vitals monitoring
		Dr. N. Preethi
		N. Preethi
		Dr. VIJAYANAND JAMALPURI Reg. No. 40526
		N.B. Reddy 27/5/26

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OGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/5/26	Seen by Dr. Bharath (Resident)	
7:35Am	44 HoL/ 38+6/ 2.859 Kg/ El. LSCS/	
		Plan-
M / A+	Bt.wt - 2859 gm	- Continue DBF 4hrs regular
B / A+	Today. wt - 2619 gm	Burping & 3 hrly
	240gm	- Warmth care
		- SBR, NBS, OAE } @ 4 & 10 L (12pm)
	urine, motion } Passed	- Monitor vitals & Inform SOS
		Bharath
		Noted by Dr. Satya @ 2.40pm 27/5/26
		27/5/26
		OAE - Newborn hearing Screening
		Bilateral responses are present
		Bilateral Pass
		27/5/26

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/5/26	Seen by Dr. Vijayanand	
3:15 PM		Plan-
		- Discharged now (can be)
	SBR - 10.6	- ~~F/F Mother~~
		- Continue Regular feeding.
		-
		Dr. VIJAYANAND JAMALPURI Reg. No. 40526
28/5/26	Seen by Dr. Bharath (Resident)	
7:35 AM	68 HO2 | 38+6 | 2.859 kg | E1.2SCS	
		Plan-
		- Continue Direct breast feeding f/b burping every 2-3 hourly
M | A+	SBR - 10.6 @ 48 HO2	- Warmth Care
B | A+		- Watch for feeding difficulties
	Bt-wt. 2859 gm	- Monitor vitals and Inform SOS.
	Today wt - 2690	
	169 gm (5.9%)	
	Urine - 8 times	
	Stools - 7 times	
		Bharath
28/5/26		Plan-
8:20 AM	↑ 71 gms	- Regular ~~feeding~~ feeding
		- Feeding assessment
	TCBR - 9.1	- Discharge
		- Flu saturday

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

(P.T.O)

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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.Bill/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-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 5 H (F)
Dr. VIJAYANAND JAMALPURI

MULTI-DISCIPLINARY PLAN OF CARE FORM

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

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Your Right to a Safe Delivery

Diagnosis: _____

Date Time	Discipline	Type	Patient Needs / Problem List	Goal	Plan / Intervention	Signature	Team Verification
25/5/26 03pm	☐ Medical ☑ Nursing ☐ Others:	☑ Initial ☐ Modified ☐ Per-Op ☐ Post Op	DBF	Burping	Warm care	Menika	☑ Nursing ☐ Others:
	☐ Medical ☐ Nursing ☐ Others:	☐ Initial ☐ Modified ☐ Per-Op ☐ Post Op					☐ 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:

INTERDISCIPLINARY PATIENT / FAMILY EDUCATION RECORD

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Part - I,

Patient's / Learner Language : .....Patient / Learner Literacy : ☐ Read ☐ Write ☐ Spea ☐ No Healthcare Literacy : ☐ Yes ☐ No

Identified Education Needs :

1. Diagnosis
2. Treatment and Care Plan
3. Pain Management
4. Informed Consent
5. Medication / Trerapy (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 Indentified	Information Taught	Use codes from the list in part III					Comments	Designation / Signature
				Person Taught	Learning Barries	Teaching Tools	Mechanism/s to overcome barrier/s	Understanding		
25/5	3pm.	4	Infection Control measures	pt	4	D	1	1	NA	Mounika

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 Barries
2. Physical Impairment
3. Emotional Barries
4. Language Barrier
5. Educational Level
6. Desire / Motivate to Learn
7. Impaired Thought Process / Cognitive limitations
8. Responsibilities at Home
9. Cultural Difference
10. Financial Difficulties
11. Beliefs and Values
12. Impaired Vision / or Hearing
13. Cultural / Religion Practice
14. Others (Specify) .....

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-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 5 H (F)
Dr. VIJAYANAND JAMALPURI

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.

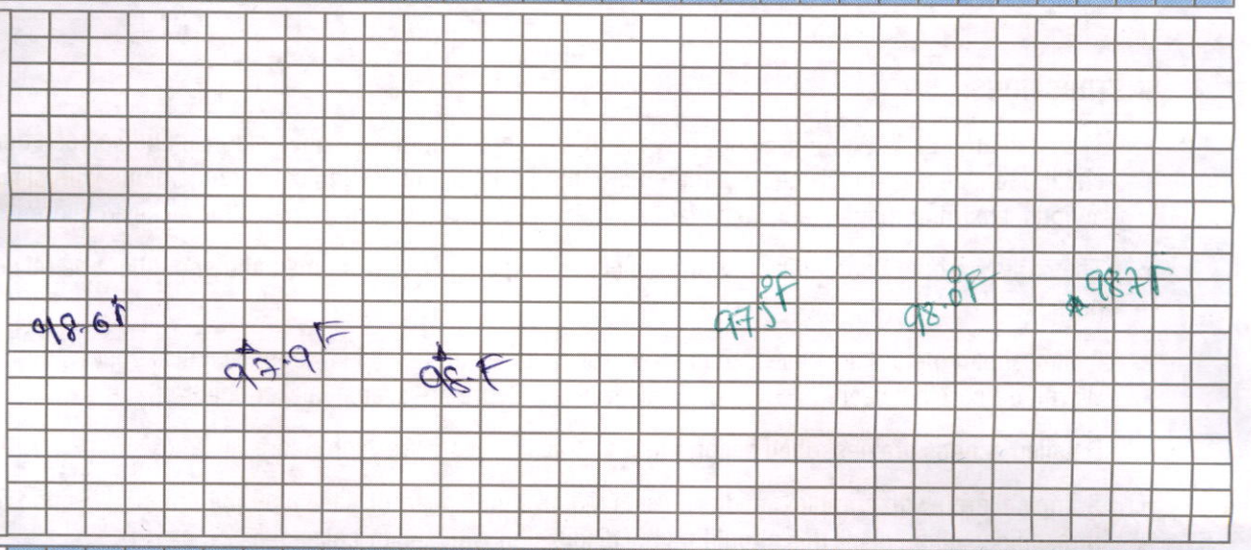
BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 25/5 Time: 6pm 3pm 7pm 10pm 2am 6am

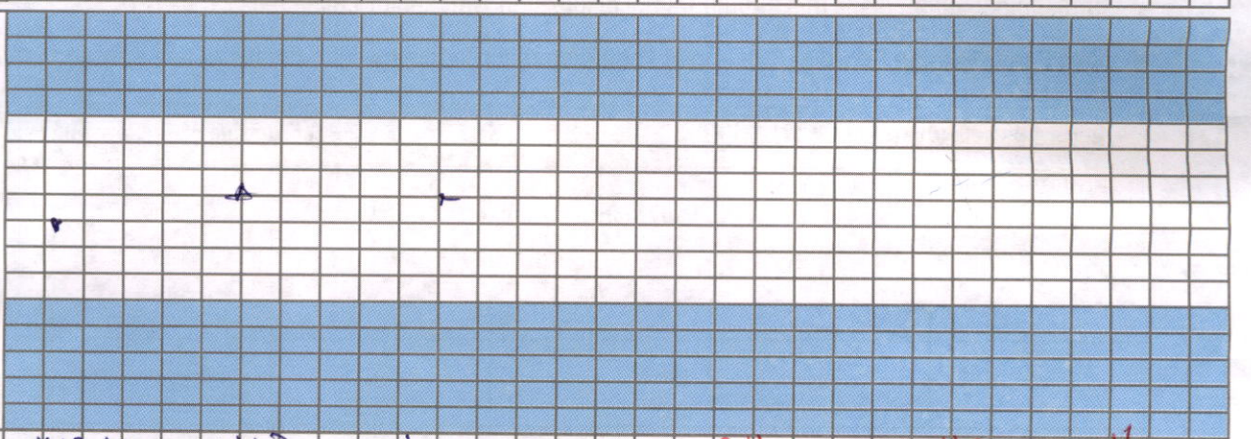
Doctor/Nurse/Family Concern?

Temperature (F)



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

Note: BP does not score in early warning scoring



Heart Rate (Number) 142 bpm 142 142 120 bpm 120 bpm 115 bpm

Resp. Rate (bpm) (Over 1 Minute) *

Resp Rate (Number) 43 bpm 42 49 40 bpm 40 bpm 40 bpm

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

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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Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

INSTRUCTIONS:

- The paediatric Early Warning Score i) seeks to identify the abnormal physiological finding seen during serious childhood illnesses and ii) offers a method to interpret such physiological derangements with clearly defined actions, ensuring that suitably experienced staff are involved with the care of the sickest children.
- 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!
- 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-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 11 H (F)
Dr. VIJAYANAND JAMALPURI

Patie ...RM / 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: 26.5.26 Time: 11 am | 5 PM | 9 pm | 3 am | 6 am

Doctor/Nurse/Family Concern?

Temperature (°F)

104 103 102 101 100 99 98 97 96 95 94

11 am: 97.9°F | 5 PM: 98.6°F | 9 pm: 97.8°F | 3 am: 97.0°F | 6 am: 98.0°F

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): 129 bt/m | 141 bt/m | 125 bt/m | 130 bt/m | 120 bt/m

Resp. Rate (bpm) (Over 1 Minute) *

70 60 50 40 30 20 10

Resp Rate (Number): 39 br/m | 40 br/m | 41 br/m | 40 br/m | 41 br/m

Resp Distress	Mod/ Severe / None / Mild				
Receiving O_2 (l/min)					
O_2 Saturations (%)		99 %	99 %	100 %	99 %	100 %
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	2	0	0	0
Observer's Initials						

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

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

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Your Right to a Safe Delivery

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

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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-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-03-2026 0 Y 0 M 0 D 5 H (F)
Dr. VIJAYANAND JAMALPURI

No. : RCHBH / FRM / CLINICAL / 124

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

Pratiksha Rainbow Children's Hospital
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 27/5/26 Time: 11AM 3PM 7PM 12AM 4AM 7AM

Doctor/Nurse/Family Concern?

Temperature (°F): 104 103 102 101 100 99 98 97 96 95 94
98.1F 97.9F 98.1 98.5 98.0F 98.1F

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): 139bpm 140bpm 139bpm 135bpm 140bpm

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

Resp Rate (Number): 40b/m 39b/m 40b/m 39b/m 40b/m

Resp Distress: Mod/ Severe | None / Mild

Receiving O_2(l/min) O_2Saturations (%): 99% 100% 99% 99% 99%

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

NB: Scores 3 should be escalated quickly

Score 1 : Continue normal observation by Staff

Score 2 : Shift in charge Nurse to be informed

Patient Sticker

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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

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(X), I am calling about (child X)

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respiratory infection). They have had (X operation/

mins). Their last set of observations

BAH-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 5 H (F)
Dr. VIJAYANAND JAMALPURI

No. : RCHBH / FRM / CLINICAL / 124

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

Pratiksha Rainbow Children's Hospital
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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 27/5/26 Time:	11AM	3PM	7PM	12AM	4AM	8AM
Doctor/Nurse/Family Concern?						
Temperature (F)	98.1F	97.9F	98.1	98.5	98.0F	98.1F
Heart Rate (bpm) and Blood Pressure (mmHg) * **Note:** BP does not score in early warning scoring						
Heart Rate (Number)	139/m	140/m	139/m	135/m	140/m	130 b/m
Resp. Rate (bpm) (Over 1 Minute) *						
Resp Rate (Number)	40b/m	39b/m	40b/m	39b/m	40b/m	40b/m
Resp Distress: Mod/ Severe / None / Mild						
Receiving O_2 (l/min) O_2 Saturations (%)	99%	100%	99%	99%	100%	99%
Conscious Level: Normal / Altered						
GCS *	15/15	15/15	15/15	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0
Observer's Initials	S	S	S	S	S	S

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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Your Right to a Safe Delivery

CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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BAH-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 5 H (F)
Dr. VIJAYANAND JAMALPURI

No. : 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.

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) *
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)

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

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.
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Your Right to a Safe Delivery

'S OBSERVATION
WARNING SCORING TOOL

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ning Score does not replace clinical experience and acumen and should not be relied upon for such

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

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m (name), a nurse on ward (X). I am calling about (child X)
I am calling because I am concerned that ... (e.g. BP is low/high, pulse is XXX, is XX, Early Warning Score is XX)
ND : Child (X) was admitted on (XX date) with (e.g. respiratory infection). They have had (X operation/ nvestigation). Child (X)'s condition has changed in the last (XX mins). Their last set of observations The child's normal condition is ... (e.g. alert/ drowsy/ confused, pain free)
T : I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am at the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
DATION : I need you to ... come to see the child in the next (XX mins) AND I s there anything I need to eantime ? (e.g. stop the fluid/ repeat observation)

BAH-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0Y0M0D5H (F)
Dr. VIJAYANAND JAMALPURI

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

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
			Mouth	I.V	N.G							
	08:00 am											
	09:00 am											
	10:00 am											
24/5	11:00 am						1			1	NO	Nurse
	12:00 pm						NP			NA	IV	Nurse
	01:00 pm		DBF				1			passed	Cannula	Nurse
Total Intake : Taken						**Total Output :** Not passed						
	02:00 pm						1			1	1	Nurse
	03:00 pm		DBF				1			1	1	Nurse
	04:00 pm						1				No	Nurse
25/5	05:00 pm						NP			NP	IV	Nurse
	06:00 pm		DBF				1			1	Cannula	Nurse
	07:00 pm		DBF				1			1	1	Nurse
Total Intake : Taken						**Total Output :** Not passed						
	08:00 pm										1	
	09:00 pm		DBF				✓			✓	1	
	10:00 pm										NA	
25/5	11:00 pm									✓	1	Nurse
	12:00 am		DBF								1	
	01:00 am										1	
Total Intake :						**Total Output :** m–				u–		
	02:00 am						1				1	
	03:00 am		DBF				1				1	
	04:00 am						NP				1	
26/5	05:00 am						1			✓	NA	Nurse
	06:00 am		DBF				1			✓	1	
	07:00 am						1				1	
Total Intake :						**Total Output :** m–				u–		

Total 24 hrs. Intake		Total 24 hrs. Output	m–1 u–4

BAH-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 11 H (F)
Dr. VIJAYANAND JAMALPURI

FLUID CHART

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

Sheet No. : .....

1. All measurements in ml. 26/5/26
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						
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G							
26/5	08:00 am		DBF									
	09:00 am						✓			✓		
	10:00 am		DBF								NA	Satya
	11:00 am											
	12:00 pm		DBF									
	01:00 pm											
Total Intake :						**Total Output :** M – 1 U –						
26/5	02:00 pm		DBF				✓					
	03:00 pm									✓		
	04:00 pm		DBF								NA	Satya
	05:00 pm											
	06:00 pm		DBF				✓			✓		
	07:00 pm											
Total Intake :						**Total Output :** U – 2 M 2						
26/5	08:00 pm											
	09:00 pm		DBF				✓					
	10:00 pm									✓		
	11:00 pm		DBF								NA	Diya
	12:00 am						✓					
	01:00 am											
Total Intake :						**Total Output :** m – 2 U – 1						
27/5	02:00 am		DBF									
	03:00 am											
	04:00 am						✓			✓		
	05:00 am		DBF								NA	Diya
	06:00 am											
	07:00 am											
Total Intake :						**Total Output :** m – 1 U – 1						

Total 24 hrs. Intake		Total 24 hrs. Output	m – 6 U – 5

BAH-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 11 H (F)
Dr. VIJAYANAND JAMALPURI

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

BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

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
27/5/26												
	08:00 am		DBF									
	09:00 am									✓	NA	
	10:00 am		DBF									Satya
	11:00 am						✓					
	12:00 pm		DBF							✓		
	01:00 pm											
Total Intake :						**Total Output :** N-1 U-2						
	02:00 pm											
	03:00 pm		DBF							✓	NA	
	04:00 pm											Satya
	05:00 pm		DBF				✓					
	06:00 pm									✓		
	07:00 pm		DBF									
Total Intake :						**Total Output :** N-1 U-2						
	08:00 pm		DBF									
	09:00 pm						✓			✓		
	10:00 pm		DBF								NA	
	11:00 pm											Shiny
	12:00 am		DBF				✓			✓		
	01:00 am											
Total Intake :						**Total Output :** N-2 U-2						
	02:00 am		DBF									
	03:00 am						✓			✓		
	04:00 am		DBF								NA	
	05:00 am						✓			✓		Shiny
	06:00 am		DBF									
	07:00 am						✓					
Total Intake :						**Total Output :** N-3 U-2						

Total 24 hrs. Intake		Total 24 hrs. Output	N-7 U-8

BAH-00657239 IP5-00174299
Baby Of HARSHKA RAVI
25-05-2026 0 Y 0 M 0 D 11 H (F)
Dr. VIJAYANAND JAMALPURI

FLUID CHART

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

BirthRight™ BY RAINBOW HOSPITALS
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						
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			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**	