BAH-00657527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

Rainbow® Children's Hospital
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NEWBORN MONITORING FORM

willing

Date of Birth : 28/5/2026
Time of Birth : 10:56 pm
Mode of Delivery : Em-LSCS
Birth Wiight : 2.329 kg
Head Circumference : 33cm
Length : 50cm
Red Reex :

New Born Screening : Brother V.A.Y. (Mother)
TFT :
OAE :
Mother's Blood Group : O+ve
Baby's Blood Group : O+ve
Anomaly Scan :
Vaccination : given - 29/5/26 - Durga (BCG, OPV, Hep-B)

Date	Weight	Type of Feed	Quantity	Temperature	Signature
28/5/2026	2.329 kg	DBF	—	98.1F	Swapna
29/5	2.288 kg	DBF	—	98.1F	Swapna
30/5	2.209 kg	DBF		97.6°F	Durga
31/5/26	2.121 kg	OBC	—	97.7F	Always
1/6/26	2.114 kgs	DBF+EBM	15ml	97.0F	Pooja

Date	Time	Investigation	Result	Order No.	Signature
29/5/26	1Am	Blood group		26054406	Swapna
29/5/26	12:30Am	RBS 1st hr	75 mg/dl	26054405	Swapna
29/5/26	2Am	RBS 3rd hr	71 mg/dl	26054408	Swapna
29/5	5Am	RBS 6th hr	71 mg/dl	26054481	Swapna
29/5	12 pm	12th GRBS	56 mg/dl	26054579	Sangeetha
29/5	11Pm	24th GRBS	72 mg/dl	26054834	Durga
30/5/26	11Am	Ultra sound Abdomen		027228.	Pooja
30/05/26.	11 Am	GRBS 36th hr	63 mg/dl	26054928 ~~26054928~~	Sangeetha
30/5/26	10 pm	SBR	10.2 < dl 10.1	26055150	Alekhya
31/5/26	1:35 Am	~~NBS~~		26055164	Alekhya
30/5/26	10 PM	GRBS	85 mg/dl	26055240	Alekhya
31/5/26	11:15Am	SBR	14.6 mg/dl	26055282	[illegible]
31/5/26	12:15 Pm	DSRT	—	9636216	Sangeetha
1/6/26		SBR	12.8 mg/dl	26055500	[illegible]
1/6/26		AABR		9637542	[illegible]

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 : IP5-00174470 **Admit Date** : 29-May-2026 **Admit Time** : 12:19 AM **UHID** : BAH-00657527

Patient Details :

Patient Name	: Baby Of ASHA YOJITHA PRANUTHI VUBA	**Age**	: 0 D
Guardian	: Mr TAPPETA PRUDHVI RAJ	**DOB**	: 28-05-2026 10:56 PM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: FLAT NO 7-2-1077, S R T - 822, 2ND FLOOR. Sanathnagar Hyderabad Telangana INDIA 500018	**Phone No**	: 8333044147/ 7207320723
		E-mail	: prudhvitappeta@gmail.com

Admission Details :

Bed Type : BASINET **Bed No** : CRDL-SW-415-1 **Ward Name** : 4F-BIRTHING CENTRE

Room No : CRDL-SW-415-1 **Admission Type** : First Visit

Contact Details :

Name : Mr TAPPETA PRUDHVI RAJ **Relationship** : Father

Contact Address : FLAT NO 7-2-1077, S R T - 822, 2ND FLOOR. Sanathnagar Hyderabad Telangana INDIA 500018 **Phone No** : 8333044147

T. Prudhvi Raj
Signature

Doctor Details :

Doctor Name : Dr. VIJAYANAND JAMALPURI **Specialisation** : NEONATOLOGY

Referral Doctor : SELF **Phone No** :

Co-Consultant :

Payment Details :

Deposit Amount : 0.00

Payment Mode : Cash **Payor Name** : SELFPAY

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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Mrs. Asha Yojitha Age : 32y Father's Name : ..... Age : .....

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

NICU Consultant : As per Data Referring Consultant : .....

Transferring Unit : ☐ OT ☐ Labour Room ☐ ER ☐ Ward

Transported ? ☐ Yes ☐ No - If yes : ☐ Long (> 30 kms) ☐ Short (< 30 kms)

BIRTH INFORMATION

Name : BID Asha

Gender : ☐M ☒F Blood Group : .....

Date of Birth : 28/05/2 Time of Birth : 10:56 pm

Place of Birth : Rly banjara

Mother's Blood Group : O+ve

Birth Weight (gms) : 2·321 Length (cms) : 50cm

OFC (cms) : 33cms

Estimated Gesth Age : 37+3

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : ..... Ht : ..... Wt : ..... BMI: ..... Married Life : ..... LMP : 10/9/25 EDD : 15/6/26

Conception : Spontaneous or with Rx. : I.V.F conception.

Booked at what GA. : Booked @ 13+4 AN Steroids Drugs / Doses : .....

Last Scans Details : SIZUG 37 weeks, Wt - 2392

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

MATERNAL RISK FACTORS

Age : ☐<18 yrs ☐ > 35yrs 32y

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 : X

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

IUGR - when detected : 33+2 s/o FGR

Doppler (Increased Resistence / ADEF / REDF / Redistrbution in MCA) / Ductus Venosus : ~~Umb A~~

AFI : UAD - Ted Resist Umbilical A.

H/o GDM/ pre GDM/ on diet or insulin

Controlled or not, recent values, HbA1 values : .....

Compliance with Rx : X

Scans : LGA, TIFFA , Fetal Echo : .....

H/o Hypothyriodism : when diagnosed ? Medication? X

Any other Chronic Medical Problems, when detected drugs ? X

(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 : R leaking PV ≈ 20h Duration : * 20h

No mat fever tachycardia.

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PAST OBSTETRIC HISTORY

G : ..... P : ..... A : ..... L : .....

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

PERINATAL HISTORY

Treating Obstetrician : Dr. Shruthi Reddy Dr. Lavanya Hospital : RCH banjara ☒ Inborn ☐ Outborn

Duration of Labour Emg Section in VO NPO

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 : NO

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
TOTAL 9|10	9|10	10|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	0

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints : Prim 37+3 far Emg Sec in VO NPOL

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- Baby delivered by LSCS
- CIAB → Dec done → received under warmer → routine measures Care given.

Inj Vit-K 1mg given

- Shifted to mother side.

Investigation details in previous Hospital :

-

Feeding History :

-

Family History :

Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition :

VITALS : Temperature : 36.5 HR : 156/min RR : 48/n NIBP : - CFT : 2 sec

Color of the extremities : acrocyanosis to pink

Jaundice : ..... Pallor : ..... SpO2 : 95% Pre ductal

ANTHROPOMETRY: Birth Weight : 2324 Length : ..... HC : 33cm Present Weight : .....

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

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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 :

Plan

* DBF if b burping - 2hourly
* DO GRBS — (Post feed)
  - 1 hour of life
  - 3 hours of life
  - 6 HOL
  - 12 HOL
  - 24 HOL
  - 36 HOL
  - 48 HOL

— Document & Inform if < 50 mg/dl

* Hold vaccination till 72 hours
* R/O CBP, CRP @ 12 hours of life.
* R/O Genetic evaluation
* W/F of vitals & inform SOS
* W/F dullness, lethargy & feeding difficulties & inform

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

11:30pm to 11:52pm

Screenings done during NICU Stay :

NSG : .....

Hearing Screen : .....

ROP : .....

TFT : .....

NP2 : .....

Purnadi
28/05/26.
11:30 am

Doctor Signature (Handover Given): .....

Doctor Name: .....

Date & Time: .....

Doctor Signature (Handover Taken): .....

Doctor Name: .....

Date & Time: .....

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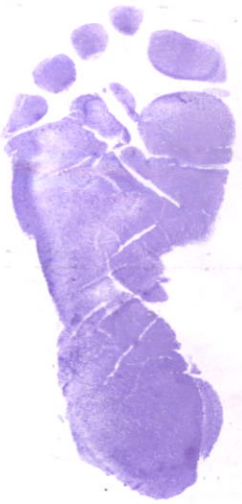
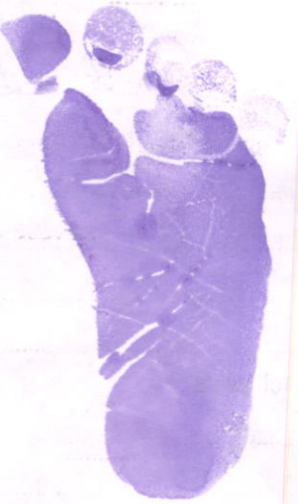
Diagnosis : No Apart from facial anomaly, no other external congenital anomaly
Early Term (37+3) | FGR - 2.324 | LBW | Flat facial profile

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature : Rupjal

Name : Rupjal

Date & Time : 28/05/26

Consultant :

Signature :

Name :

Date & Time :

Dr. VIJAYANAND J
Reg. No. 40576
JAMALPURI

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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SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : ☑ Regular ☐ Periodic ☐ Shallow ☐ Gasping

Mention If baby has Respiratory distress: RR: ..... 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% Auscultation: B/L EAE Breath Sounds: NVS Added Sounds: No

CARDIOVASCULAR SYSTEM :

HR : 150 BP : —

Femoral Pulses : good

Other Peripheral Pulses : .....

Precordial Activity : N

Murmurs : No

Signs of Cardiac Failure : No

ABDOMEN:

Shape : N

Palpation : N

Palpable masses : N

Abdominal girth : .....

Hernia orifice : free

Anal Patency : patent

Umbilical Cord : 2A 1V

First urine passed : No

Meconium passed : No

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) : alert active

State of wakefulness : alert

Prechtle Score : .....

Nerves : NFN No focal neurological deficit

MOTOR SYSTEM:

Passive Tone : good

Active Tone : good

Neonatal Reflexes :

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

Moro's : B/L complete Symmetric DTR : N

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

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HEAD TO TOE EXAMINATION

	Fontanelles :	AF Open
	Sutures	— (N)
	Shape / Moulding :	— Dolicocephaly
	Edema / Bruising :	mild caput verlex
	Size - (H.C.) :	33 cm
FACIES : (Any Facial Dysmorphism)		Flat facial profile, broad forehead
NECK and CLAVICLES :	Range of Motion :	(N)
	Asymmetry :	
	Masses :	
EYES :	Symmetry :	
	Red Reflex :	— Needs to be checked
	Discharge :	
EARS, NOSE MOUTH and THROAT :	Ear set / Shape :	— Low set ears
	Periauricular Pits / Tags :	— NO
	Nasal shape / Patency :	— ? Flat nasal bridge.
	Palate :	— high arched palate
	Gums :	— (N)
	Lips :	(N)
	Tongue :	
THORAX and BREASTS :	Shape of Thorax :	(N)
	Position of Nipples and Number :	
ABDOMEN and UMBILICUS :	Shape :	(N)
	Organomegaly :	
	Bowel Sounds :	
	Umbilical Stump :	2A 1V
	Discharge :	
GENITILIA :	Labia / Hymen :	(N) female genitalia.
	Testicles/penis :	
	Anus :	
HERNIAL ORIFICES		free
TRUNK and SPINE :		(N)
SKIN LESIONS :		(NO)
EXTREMETIES :	Fingers / Toes :	(N)
	Deformities :	
	Hip Joint Examination :	
	Arms / Legs :	(N)
	Mobility :	

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
29/5/26	Seen by Dr. Vijayanand	
8 AM	9 HOL/ Early Term/ 2.8 kg/ SGA	A/ Em-LSCS (NPO 2)
		Plan:-
		- Regular feeding
	O/E	- Feeding assessment
	Looks well	- Sugar monitoring as advised ~~12~~, 24, 36, 48 HOL
	Chest - clear	
	S_1S_2 heard	- clinical assessment of Jaundice @ 24 HOL
	No murmurs	
	No added sounds	- BCG, OPV, Hep-B } Today given 29/5/26
		- SBR, NBS, AABR } 48 HOL
		- NSG, ~~USG Abdomen~~ Abdomen Scanning
		Noted by Sangeetha
		Dr. VIJAYANAND JAMALPURI Reg. No. 40526 Plan:-

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

(P.T.O)

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Date & Time	Progress Notes	Doctor's Order
29/5/26. 9.30pm	Lactation Notes. Lactation Counselling done position shown practically Colostrum as seen Baby is latching well feed ... with deep latch more than 20-25min each side. (Adv) DBF Nalini Nalini	
29/5/26	Seen by Dr. Vijayanand	
M 0+ / B 0+		Plan:- - Regular feeding - ~~TCBR @ 24HOL~~ - * NSG, Abd. screening. - GRBS monitoring as planned. - Clinical assessment of Jaundice @ 24HOL (11PM) noted by Jyothi (20/0552)

Dr. VIJAYANAND JAMALPURI
Reg. No: 40526

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/5/26	Seen by Resident (Dr. Bharath)	
7:45AM	33 HOL / 37+3 / 2.329kg / LBW / SGA / Em. LSCS	
		Plan-
	Bt. wt - 2329	
M / O+	Yest. wt - 2288	- Continue Direct breast
B / O+	Today. wt - 2209	feeding f/b burping
	↓ 79g (↓ 5-7%)	every 2-3 hourly
	Urine - 6 times	- Warmth care
	motion - 4 times	- GRBS monitoring 36, 48 HOL
		- SBR } Today (Term)
		NBS }
		NSG } Today
		Abdomen screening }
		- W/F feeding difficulties,
		dull activity
		- monitor vitals and inform
		SOS.
		noted by Surgeon Bharath
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
30/05/26	Seen by Dr. Bharath (Resident)	
2:35PM	40 HOL/ 37+3/ 2.329 kg/ LBW/ SGA/ Em. 2 SCS	
		Plan:-
		- Continue OBF @ 1b bursping
	Today wt - 2209 gm (↓5.1%)	every 2-3 hourly
m/ O+		- Warmth care
B/ O+		- SBR?
	Urine } Passed.	NBS } 10PM Today
	motion }	& GRBS
		- W/f feeding difficulties,
		dull activity
	NSG } Normal	- Monitor vitals and Inform
	Abd. screening }	SOS
		noted by Sowath Bharath
30/5/26		Plan:-
3.40pm		- regular feeding
		- Labs as planned
	SBR - 10.2 ↓0.1 10.1	

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

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Date & Time	Progress Notes	Doctor's Order
31/5/26	Seen by Dr. Bharath (Resident)	
7:50AM	57 Hol / 37+3 / 2.329 kg / LBW / SGA / EM-LSCS	
		Plan:-
	Bt. wt - 2.329 kg	- Continue DBF & lb burping
M/O+	Yest. wt - 2.209 kg	every 2-3 hourly
B/O+	Today. wt - 2.121 kg	- Warmth care
	88 gm (1.8.9%)	- w/f feeding difficulties and dull activity
	Urine - 8 times	- Monitor vitals and Inform SOS
	motion - 7 times	- R/v discharge Bharath
	SBR - 10.2 < 0.1 / 10.1	
31/5/26	Seen by Dr. Nilesh	
	TCBR - >15	Plan:-
		- Send SBR Now
		- Start SSPT
	SBR - 14.6	- If SBR > 14 Start OSPT
		- R/v SBR T/m after rounds
		- Measured feeds (EBM + FF)
		20ml @ 2hrly (OG)
		30ml @ 3hrly.
		noted by surgeon Bharath

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6/26 8am	c/s/B Resident Dr Syndhuraa	
	80HOL | 37+3 | CBW | SGA | LSCS | CIAB	Adv:
	BW – 2.329kg twt – 2.114kg (↓ 7g) loss – 9.2% from BW	1.) Send SBR at 10 am. 2.) Continue ↓ DSPT till report
M | O+ B | O+	feeds – EBM + DBF c/b – fair	3.) Continue measured feeds 4.) Monitor temperature
	O/E: ↓ DSPT. warm CRT < 2s. AF @ level. chest clear. cord healthy	Akhila
1/6/26 9.30am	Seen By Dr Vijayanand	
	SBR → 12.8 1	o SBR Now o Feeding assessment to be done o ~~ABSER~~ AABER to be done
		Syndhuraa

Noted. Jamalpuri

DR. VIJAYANAND JAMALPURI
Registration No: 40520

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
1/6 10: 30am	Lactation care plan: Observation: - Shallow latch was observed. - Baby is sucking for few minutes and then falling asleep. Advice: - Aim for deep latch as demonstrated on cross cradle hold. - Explained about expressing milk to give as top feed. - Always discard 1st 2ml expressed milk as explained	
01/6/26	AABR - Hearing Assessment Bilateral responses are present Bilateral Normal 1/6/26.	

Patient Sticker

Rainbow® 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

BAH-00657527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

28/5/26

:HBH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 28/5/26 Time: ~~12 AM~~ 12 AM 4 AM 6 AM

Doctor/Nurse/Family Concern?

Temperature (F): 104 103 102 101 100 99 98 97 96 95 94
98.1°F 98.3°F 98.2°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): 130 b/m 135 b/m 140 b/m

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

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

Resp Distress	Mod/ Severe / None / Mild		
Receiving O_2(l/min) O_2Saturations (%)		99+.	98+ -	99+.
Conscious Level	Normal / Altered		
GCS *		(15/15)	(15/15)	(15/15)
TOTAL SCORE Number of shaded boxes		0	0	0
Pain Score		0	0	0
Observer's Initials		e	e	e

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.

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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.
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- 6 clinical parameters are assessed and recorded as part of the child's routine clinical observation, providing a Early Warning Score between 0-6 (Higher Early Warning Score are seen in sicker children)
- Detailed actions are described according to increasing Early Warning Score.
- Some children with complex medical needs e.g. cyanotic heart disease may require modification to their trigger thresholds/ action plan- this should follow discussion with senior colleagues.
- 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.
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BAH-00657527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

29/5/26

:CHBH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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RLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8am	12pm	1:30pm	6pm
Doctor/Nurse/Family Concern?				

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

98°F | 98.2°F | 97.5°F | 98.6°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)	120 b/m	121 b/m	120 b/m	147 b/m

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

70 60 50 40 30 20 10

Resp Rate (Number)	18 b/m	22 b/m	24 b/m	40 b/m
Resp Distress: Mod/ Severe / None / Mild				
Receiving O_2 (l/min) O_2 Saturations (%)	99%	98%	98%	100%
Conscious Level: Normal / Altered				
GCS *	(15/15)	(14/15)	(15/15)	(15/15)
TOTAL SCORE Number of shaded boxes	0	0	0	0
Pain Score	0	0	0	0
Observer's Initials				

ACTIONS	
NB: Scores 3 should be recorded overleaf	Score 1 : Continue normal observation by staff nurse
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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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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 ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

29/5/26

BH / FRM / CLINICAL / 124

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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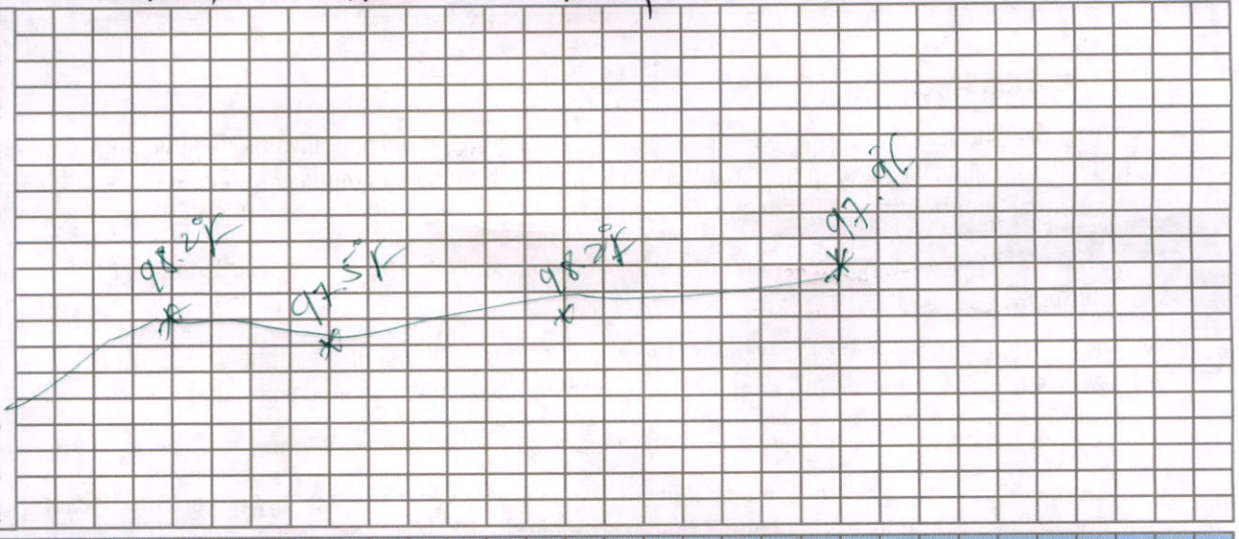
EARLY WARNING SCORE: CHILDREN'S UNIT

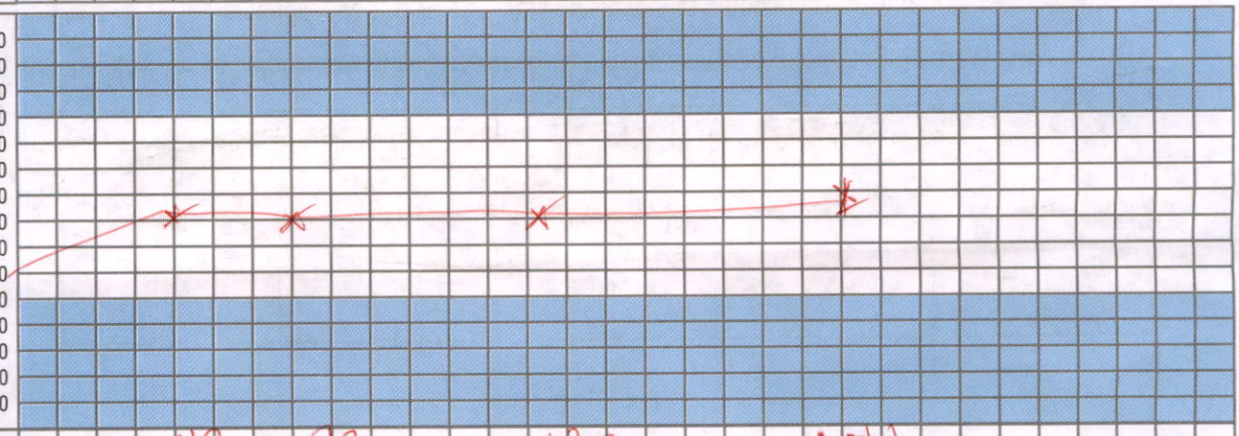
Date: ..... Time:	10 PM	2 AM	6 AM	10 PM
Doctor/Nurse/Family Concern?				

Temperature (F)



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

Note: BP does not score in early warning scoring



Heart Rate (Number)	129 bpm	125 bpm	131 bpm	128 bpm

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

Resp Rate (Number)	38 bpm	38 b/m	90 b/m	36 bpm
Resp Distress: Mod/ Severe / None / Mild				
Receiving O_2 (l/min) O_2 Saturations (%)	99%	98%	99%	100%
Conscious Level: Normal / Altered				
GCS *	15/15	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	0	0	0
Pain Score	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
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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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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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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-00657527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 2 D (F)
Dr. VIJAYANAND JAMALPURI

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

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

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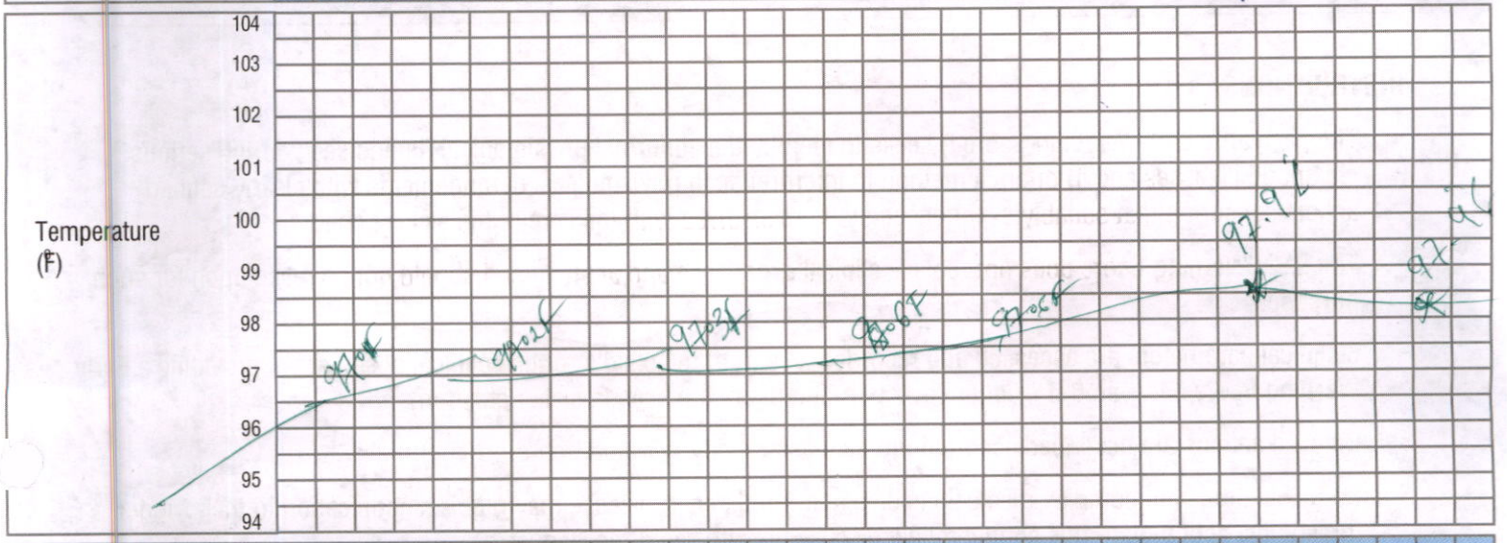
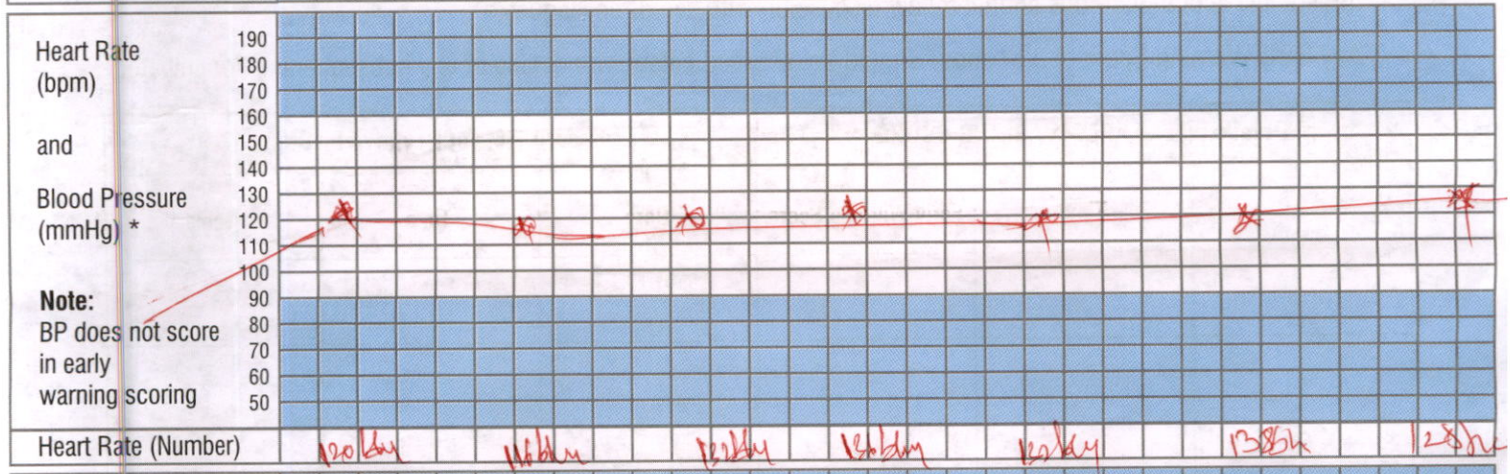
EARLY WARNING SCORE: CHILDREN'S UNIT

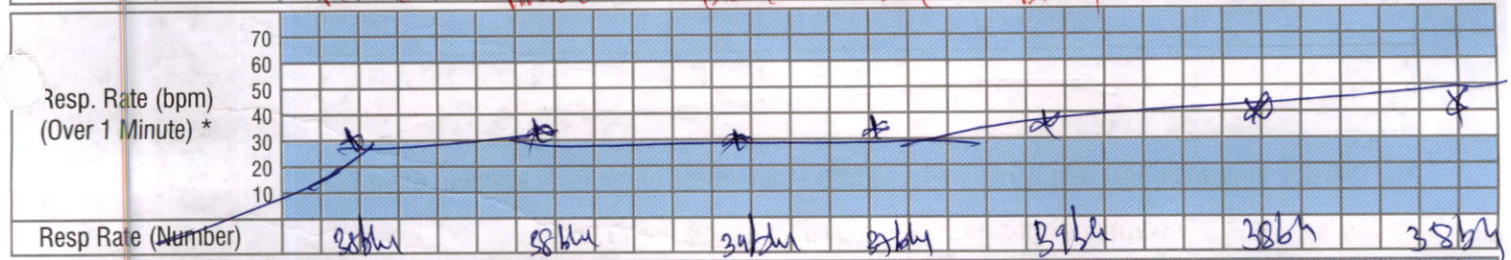
Date: ..... Time: 8am | 10am | 12pm | 2pm | 4pm | 10 pm

Doctor/Nurse/Family Concern?





Heart Rate (Number): 120/min | 116/min | 122/min | 120/min | 120/min | 138/min | 128/min



Resp Rate (Number): 38/min | 38/min | 34/min | 38/min | 38/min | 38/min | 38/min

Resp Distress	Mod/ Severe / None / Mild						
Receiving O_2(l/min) O_2Saturations (%)		99%	98%	99%	99%	99%	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		SJ	SJ	SJ	SJ	SJ	SJ

ACTIONS

NB: Scores 3 should be recorded overleaf

Score 1	: Continue normal observation by staff nurse
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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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IAH-00657527 IPS-00174470
Baby Of ASHA YOJITHA PRANUTHI
18-05-2026 0 Y 0 M 3 D (F)
Dr. VIJAYANAND JAMALPURI

BH / FRM / CLINICAL/ 124

21/5/26

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

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LY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8AM	12AM	4PM	8PM	10pm	2am	6am
Doctor/Nurse/Family Concern?								

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

98.4F 98.6F 99.2F 97.4F 98.0F 97.2F 97.5F

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)	120bpm	122bpm	128bpm	128bpm	132bpm	140bpm	138bpm

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

Resp Rate (Number)	32bpm	28bpm	29bpm	29bpm	40bpm	34bpm	40bpm
Resp Distress: Mod/ Severe / None / Mild							
Receiving O_2 (l/min) O_2 Saturations (%)	99%	98%	99%	99	98%	99%	100%
Conscious Level: Normal / Altered							
GCS *	15/15	15/15	15/15	10/15	15/15	15/15	15/15
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	0
Pain Score	0	0	0	0	0	0	0
Observer's Initials	BY	BY	BY	BY	Y	Y	Y

ACTIONS NB: Scores 3 should be recorded overleaf	
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28-05-2026 0 Y 0 M 0 D 2 H (F)
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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
	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			NA								
	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		DBF				1				1	
	12:00 am						P			1	No PV	Scanpu
29/5	01:00 am		DBF							P		Scanpu
Total Intake :		Taken				**Total Output :**				Not	Passed	
	02:00 am						✓			✓		Scanpu
	03:00 am		DBF								1	Scanpu
	04:00 am										No PV	Scanpu
29/5	05:00 am		DBF				✓					Scanpu
	06:00 am											Scanpu
	07:00 am		DBF									Scanpu
Total Intake :			Taken			**Total Output :**				U-1 m-2		

Total 24 hrs. Intake		Total 24 hrs. Output	U-1 m-2

BAH-00657527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 0 D 2 H (F)
Dr. VIJAYANAND JAMALPURI

FLUID CHART

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Your Right to a Safe Delivery

Sheet No. : (2) 29/5

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						
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine	IV Site Thrombo-phlebitis Score	Sign. Nurse
			Mouth	I.V	N.G						0	
	08:00 am										0	
29/5	09:00 am		DBF				✓			✓	0	
	10:00 am										0	
	11:00 am		DBF								0	
	12:00 pm										0	
	01:00 pm		DBF								0	
Total Intake :			Taken			Total Output :				U-1	M-1	
	02:00 pm											
	03:00 pm		DBF							—	NIL	
	04:00 pm										IV	
	05:00 pm		DBF				✓				Canula	
	06:00 pm											
	07:00 pm		DBF							—		
Total Intake :						Total Output :				U-2	M-1	
	08:00 pm										+	Durga
	09:00 pm		DBF									Durga
	10:00 pm						✓			~	NIL	
	11:00 pm		DBF								IVF	Durga
	12:00 am						✓			✓		Durga
	01:00 am		DBF									Durga
Total Intake :						Total Output :				U-	M-	
	02:00 am											
	03:00 am		DBF									Durga
	04:00 am									✓	NIL	
	05:00 am		DBF				NP				IVF	Durga
	06:00 am											
	07:00 am		DBF									Durga
Total Intake :						Total Output :				U-1	M	

Total 24 hrs. Intake		Total 24 hrs. Output	U-6 M-4

BAH-00057527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0Y0M0D2H (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. : 12 30/5/26

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: 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
29/5/26											0	Sanjee
	08:00 am		DBF							✓	0	Sanjee
	09:00 am						✓			✓	0	Sanjee
	10:00 am		DBF							✓	0	Sanjee
	11:00 am						✓			✓	0	Sanjee
	12:00 pm		DBF				✓				0	Sanjee
	01:00 pm										0	Sanjee
Total Intake :			taken			**Total Output :**					U-4 m-3	
30/5/26	02:00 pm		DBF				✓				0	Sanjee
	03:00 pm									✓	0	Sanjee
	04:00 pm		DBF								0	Sanjee
	05:00 pm						✓			✓	0	Sanjee
	06:00 pm		DBF								0	Sanjee
	07:00 pm										0	Sanjee
Total Intake :			taken			**Total Output :**					U-2 m-2	
	08:00 pm										0	Alekya
	09:00 pm		DBF				✓				0	Alekya
	10:00 pm									✓	0	Alekya
	11:00 pm		DBF								NA	Alekya
	12:00 am										0	Alekya
	01:00 am						✓			✓	0	Alekya
Total Intake :						**Total Output :**	U-2		m-2			
	02:00 am		DBF									Alekya
	03:00 am											Alekya
	04:00 am		DBF									Alekya
	05:00 am										NA	Alekya
	06:00 am						✓			✓	1	Alekya
	07:00 am		DBF									Alekya
Total Intake :						**Total Output :**	U-1		m-1			

hrs. Intake		**Total 24 hrs. Output**	U-9 m-8

BAH-00857527 IP5-00174470
Baby Of ASHA YOJITHA PRANUTHI
28-05-2026 0 Y 0 M 2 D (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. : 31/5/26

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.
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							
31/5	08:00 am											
	09:00 am		DBF								NO	
	10:00 am	NO IV fluid					✓				IV Canula	
	11:00 am		DBF									
	12:00 pm						✓					
	01:00 pm		DBF									
Total Intake :										Total Output : U- 2 m-2		
31/5	02:00 pm											
	03:00 pm		DBF									
	04:00 pm	NO									NO	
	05:00 pm	IV fluid	DBF				✓			✓	IV Canula	
	06:00 pm						✓					
	07:00 pm		DBF									
Total Intake :										Total Output : U-2 m-0		
	08:00 pm											
	09:00 pm		DBF								NO	
	10:00 pm						NP			✓	IV line	
	11:00 pm		DBF									
	12:00 am											
	01:00 am		DBF									
Total Intake :										Total Output : U- 1 m- 0		
	02:00 am		DBF									
	03:00 am		IF 15ml									
	04:00 am						NP					
	05:00 am		DBF									
	06:00 am		Comp									
	07:00 am											
Total Intake :										Total Output : U-5 m=0		

Total 24 hrs. Intake		Total 24 hrs. Output	U-6 m-4

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