

ADMISSION SHEET

Registration Details :



Admission No : IP5-00174302 Admit Date : 25-May-2026 Admit Time : 02:44 PM UHID : BAH-00657255

Patient Details :

Patient Name	: Baby Of POOJA NANDKUMAR RAJ	Age	: 0 D
Guardian	: Mr AAKULA VINITH	DOB	: 25-05-2026 01:31 PM
Gender	: Female	Religion	:
Occupation	:	Martial Status	: Single
Address (H)	: H.NO.4-3-79/P, FRIENDS COLONY, PUPPALAGUDA Manikonda Hyderabad Telangana INDIA 500089	Phone No	: 9948869029/ 8790855292
		E-mail	: vinithmeister@gmail.com

Admission Details :

Bed Type : BASINET Bed No : CRDL-BC-DC-418-1 Ward Name : 4F-BIRTHING CENTRE
 Room No : CRDL-BC-DC-418-1 Admission Type : First Visit

Contact Details :

Name : Mr AAKULA VINITH Relationship : Father
 Contact Address : H.NO.4-3-79/P, FRIENDS COLONY,
 PUPPALAGUDA Manikonda Hyderabad
 Telangana INDIA 500089 Phone No : 9948869029 / 8790855292

A. Vinith
 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

Date	Time	Investigation	Result	Order No.	Signature
25/5/26	3pm	Blood group	O + ve.	2605326	
25/5/26	2:30pm	RBS	53mg/dl	2605334	
25/5/26	4:30pm	RBS	70mg/dl		
25/5/26	5:50pm (6HOL)	RBS	94mg/dl	2605335	
25/5/26	1:30pm (12HOL)	RBS	75mg/dl	2605340	
26/5/26	1:20pm	S&P	-	9627921	Satya
26/5/26	1:30pm (24HOL)	CRBS	81mg/dl	2605363	Satya
26/5/26	5:30pm	URBS	85mg/dl	2605364	Satya
26/5/26	5:30pm	SBR, s.e.k - chobh mg + ka		2605362	Satya
26/5/26	11:40pm	CRBS	112mg/dl	2605379	
27/5/26	6:00am	CRBS	92mg/dl	2605374	
27/5/26	11AM	TEOAC		9629644	Satya
27/5/26	1:30pm	URBS	89mg/dl	2605393	Satya
27/5/26	1PM	CRBS			
27/5/26	1PM	TCBA	9.9mg/dl	2605368	Satya
27/5/26	4:30pm	S&P		9648623	Satya
27/5/26	1:30pm	SBR, electro - lytes	13.6mg/dl	2605394	Satya
27/5/26	8:30pm	CRBS	92mg/dl	2605409	Shinshu
28/5/26	2am	CRBS	Refused.		Shinshu
28/5/26	12pm	SBR	14.6mg/dl	2605417	Satya
29/5/26	9am	SBR, CBP, OCT, Retic count		2605450	Satya

12HOL

3HOL

7HOL

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 Baby Of POOJA NANDKUMAR RAJ
 25-05-2026 0 Y 0 M 0 D 3 H (F)
 Dr. VIJAYANAND JAMALPURI



NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Pooja Nandkumar Raj 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 Pooja Nandkumar Raj Mother's Blood Group : O Positive
 Gender : M F Blood Group : Birth Weight (gms) : 2733 Length (cms) : 50 cms
 Date of Birth : 25/5/26 Time of Birth : 1:31 PM OFC (cms) : 32 cms
 Place of Birth : RCH, Bangalore Estimated Gesth Age : 37w6

Current Obstetric History : (Booked / Unbooked Case)
 Maternal Age : 29y Ht : Wt : BMI : Married Life : LMP : 1/9/25 EDD : 9/6/25

Conception : Spontaneous or with Rx :
 Booked at what GA : 4th weeks AN Steroids Drugs / Doses :
 Last Scans Details : 18/4/26 - 32w, cephalic, 1-828 kg, Aft 11cm, A-m 24cm
NIFT-A(N) - NT 1.2mm, Placenta - low, TT Immunization and Iron / Folic Acid

MATERNAL RISK FACTORS

Age : <input type="checkbox"/> <18 yrs <input type="checkbox"/> > 35yrs Consanguinity : <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, degree of consanguinity : <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 H/o PIH (after 20 weeks) / PE How many Drugs / Doses / Since how long : H/o value of recent BP recording, proteinuria, edema, oliguria, any investigations (LFT, platelet count) : IUGR - when detected : Doppler (Increased Resistance / ADEF / REDF / Redistribtion in MCA) / Ductus Venosus : AFI :	H/o GDM/ pre GDM/ on diet or insulin <u>28 weeks</u> Controlled or not, recent values, HbA1 values : Compliance with Rx : Scans : LGA, TIFFA , Fetal Echo : H/o Hypothyroidism : when diagnosed ? Medication? Any other Chronic Medical Problems, when detected drugs ? (Anemia, SLE, Jaundice, CHD, Heart Disease) Infection : H/O, Fever (<input type="checkbox"/> Malaria <input type="checkbox"/> UTI <input type="checkbox"/> TORCH <input type="checkbox"/> TB <input type="checkbox"/> HIV <input type="checkbox"/> HBV) UTI : when : Any culture :
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PPROM: Duration : Uterine Tenderness Foul Smelling Liquor HVS (if taken) - Results :
 Medication during Pregnancy : Duration :



PAST OBSTETRIC HISTORY

G: 2 P: 1 A: L: 1

Sl. No.	Age	GA wks	B.W	Gender	Significant	Details
1	2020	Spontaneous		male	3-8 kg	Aune
2	Present					

PERINATAL HISTORY

Treating Obstetrician : Hospital : Inborn Outborn

<p>Duration of Labour</p> <p>First stage (> 18 hours sig)</p> <p>Second stage (> 2 hours after dilation)</p> <p>LSCS : <input type="checkbox"/> Elective <input type="checkbox"/> Emergency Indication :</p> <p>Specify the reason :</p> <p>Augmentation of Labour : <input type="checkbox"/> Induced <input type="checkbox"/> Assisted Vaginal</p>	<p>CTG : <input type="checkbox"/> Normal <input type="checkbox"/> Suspicious <input type="checkbox"/> Pathological</p> <p>MSL :</p> <p>Resuscitaion : <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Cord ABG :</p> <p>Placenta : (weight, surface, No. of cotyledons, calcifications, malformations, clots etc :</p>
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NEONATAL RESCUSTITION DETAILS

APGAR SCORE

Gestational Age : Weeks :

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

1 Minute	5 Minutes	10 Minutes
1	2	
2	2	
2	2	
2	2	
2	2	
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 :

G2P1C1 / 37w / previous LSCS / GOM on diet /
 ↑ umbilical artery resistance EL-LSCS.



History of Present Illness

Equipment checked done

↓

Baby delivered by LSCS

↓

cried immediately after birth

↓

Received into preheated radiant warmer

↓

mouth, nasal secretions clear

↓

Delayed cord clamping done

↓

shifted to mother side

= less monitoring

Investigation details in previous Hospital :

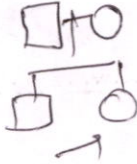
Feeding History :

Breast feeds given within 1 hour of birth

Past



Family History :



Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Disposition :

U/A good

VITALS : Temperature : 36.4 °F HR : 140/min RR : 46/min NIBP : CFT : 2/2

Color of the extremities : acyanosis - none

Jaundice : Pallor : SpO2 : 98.1% RA

ANTHROPOMETRY: Birth Weight : 2733 gm Length : HC : Present Weight :

Ponderal Index : AGA : SGA : LGA :



HEAD TO TOE EXAMINATION

HEAD : Fontanelles : Sutures Shape / Moulding : Edema / Bruising : Size - (H.C.) :	At 2nd level
FACIES : (Any Facial Dysmorphism)	No facial dysmorphism
NECK and CLAVICLES :	Range of Motion : Asymmetry : Masses :
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 :
THORAX and BREASTS :	Shape of Thorax : Position of Nipples and Number :
ABDOMEN and UMBILICUS :	Shape : Organomegaly : Bowel Sounds : Umbilical Stump : 2VA + 2ev ⊕ Discharge :
GENITILIA :	Labia / Hymen : Testicles/penis : Anus :
HERNIAL ORIFICES	All
TRUNK and SPINE :	All
SKIN LESIONS :	All
EXTREMETIES :	Fingers / Toes : Deformities : Hip Joint Examination :



SYSTEMIC EXAMINATION

RESPIRATORY SYSTEM:

Breathing Pattern : Regular Periodic Shallow Gasping

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

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

Mention if baby is on : Hood box CPAP Ventilator

Settings :

SpO₂: 96.1% Auscultation: Breath Sounds: Added Sounds:

CARDIOVASCULAR SYSTEM :

HR : 140/min BP :

Precordial Activity :

Femoral Pulses :

Murmurs :

Other Peripheral Pulses :

Signs of Cardiac Failure :

ABDOMEN:

Shape :

Hernia orifice :

Palpation :

Anal Patency :

Palpable masses :

Umbilical Cord :

Abdominal girth :

First urine passed :

Meconium passed :

NERVOUS SYSTEM:

Higher intellectual functions (Sensorium) :

State of wakefulness :

Prechtle Score :

Nerves :

MOTOR SYSTEM:

Passive Tone :

Active Tone :

Neonatal Reflexes :

Grasp : Palmar Plantar Sucking Rooting Crossed adductor :

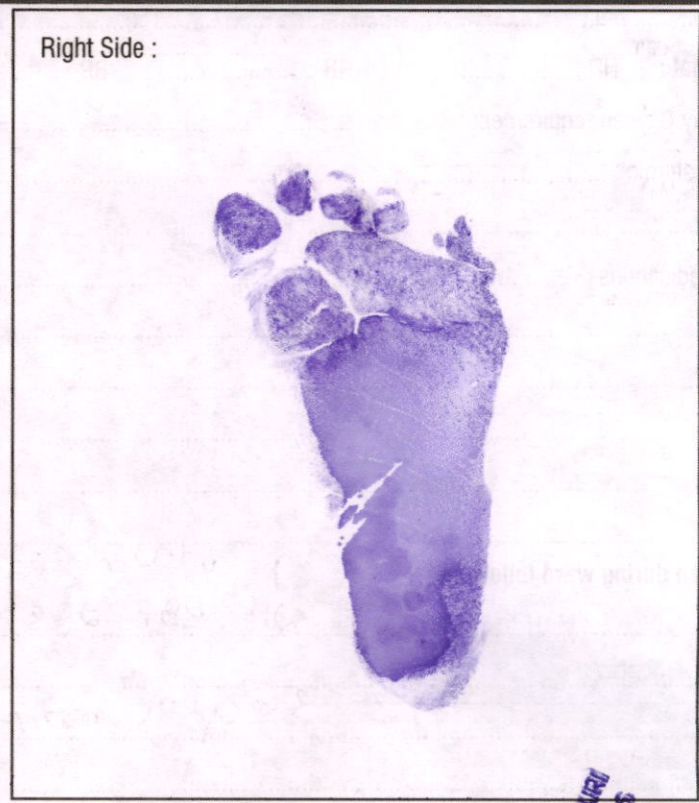
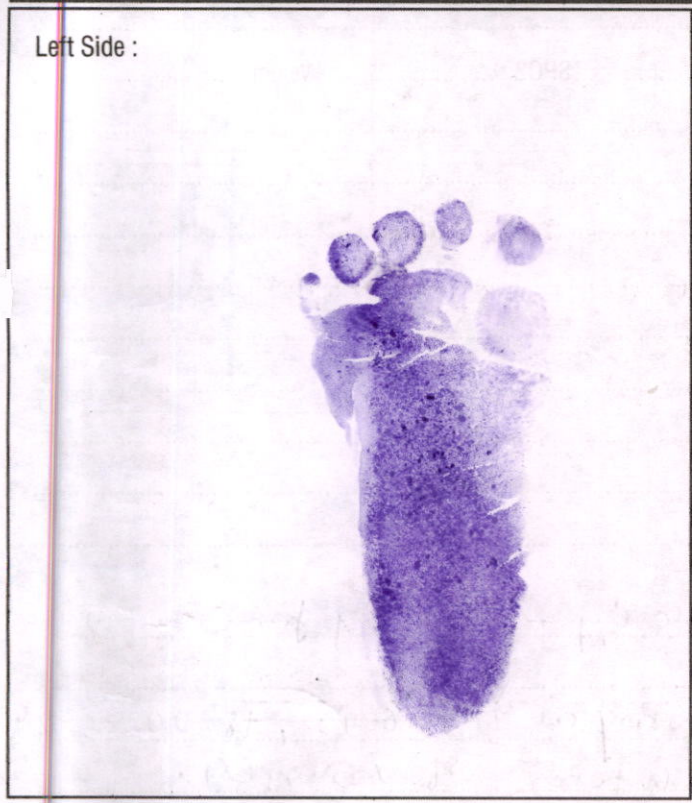
Moro's : DTR :

ATNR : Skull and Spine :



Any Congenital Anomalies :
Diagnosis : Term | EL-HCS | AUA | ydm on Ref

FOOT PRINTS



Resident Doctor :
Signature : N.P.
Name : Dr. N. Prathibha
Date & Time : 25/5/26, 2pm

Consultant :
Signature : [Signature]
Name : Dr. Vijayanand J
Date & Time : 25/5/26 @ 3pm

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.



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. DOB 2-3 hourly for 30 min
- 3. CRBS monitoring at 1, 3, 6, 12, 18, 24, 36, 48 HR
uniform if > 150 mg/dl.
- 4. BCG, OPV, Hep-B today

Feeding Plan at the time of shifting :

1:45 to 2:00 pm 5- SBR, NBS, OFF at 48 HR

Screenings done during NICU Stay :

NSG :

Hearing Screen :

ROP :

TFT :

NP2 :

Doctor Signature (Handover Given): Doctor Signature (Handover Taken):

Doctor Name: Doctor Name:

Date & Time: Date & Time:



25/5/26

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
<u>25/5/26</u>	1. <u>20 HOL</u> / Term / (mature) (GOM on diet)	seen by Dr. Vijayanand
3 pm	on room air	1. continue regular feeds
	on OBF	2. Sugar (CRBS) monitoring as planned,
urine - stool -		3. clinical assessment of jaundice at 24 HR.
		4. SB BCG, AFP, Hep-B today
		Dr. N. Patwari
		N.P.
		DR. VIJAYANAND JAMALPURI Registration No: 40526
		NB Turner
<u>26/5/26</u>	20 HOL / (GOM on diet) / 2.732 kg.	
9 am	7 day wt - 2.635 kg (98 gm wtlon)	play
	RBS-94 → 75.	1. Regular feeds
urine stool	passed.	2. CRBS as planned.
vacinated		3. clinical assessment of jaundice at 24 HR.

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
20/5/26 9:00am	on DSE REF -	plan
	on Direct and formula feeds (supplement)	Feeding assessment - Sugar SRS as planned 6th hourly
under stowel		- clinical assessment of Jandhat 24 Hrs.
	<p style="text-align: center;">DR. VIJAYANAND JAMALPURI Registration No. 40526</p>	<p style="text-align: center;">Dr. N. P. Petrus (N. Petrus)</p> <p style="text-align: center;">DR. VIJAYANAND JAMALPURI Registration No. 40526</p>
26/5/26	Seen by Dr. N. Petrus (DNB Resident)	noted by Satya 9.30 am 60886
1pm - TCAR 9.9 Cutoff 10.5		Ph
		1. SPS Core of eye / Jandhat
		2. Regular feeds continue (N. Petrus) (Dr. N. Petrus)

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 Dr. VIJAYANAND JAMALPURI



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/5/26	Seen by ONB Resident	
2pm	24HOL 40g on diet TCBR @ 24HOL - 9.9 (at 10.5) on room air	Seen by Dr. Vijayanand and plan
	on direct and formula feeds.	1. Continue Regular feeding
	on single surface phototherapy	2. Continue phototherapy
	Urine ✓ Stool ✓	3. CRBS 6th hourly.
	CRBS - 81 mg/dl @ 2pm	4. vitals monitoring
26/5/26		(Dr. N. Prathiba) (Dr. Prathiba)
3pm	Jitteriness++	plan
		1. Continue SPT
	SBR - 10.3	2. SBR CRBS S. Electrolytes Ca ²⁺ Mg ²⁺
	S. Ele = 144/6.6/114 (lysed sample)	3. CRBS 6th hourly
		4. Measured feeds to give 25ml/92H (or) 30ml/93H (80ml/kg/day)
		5) R/O - Direct SBR. S. Elect

Noted at 6.5
3.10.26
1.06.26

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
26/5/26	seen by Resident	
7:15 pm		Plans
	SBR - 10.3	• Continue SSPT E Eyes & genitals covered.
	S-Elect - 144/6.6/114 (lysed	
	NK ^{chick} M- 6 - sample	
		• Continue GRBS 6m hly.
		• Measured feeds - 20ml/Q2H
		(80ml/4/day) 30ml/Q3H
		(formula + EBM) to give
		• R/V to repeat S-Elect, SBR
		after rounds.
		Dr Ranje
		noted by sdyg
		@ 2.15 pm
		26/5/26

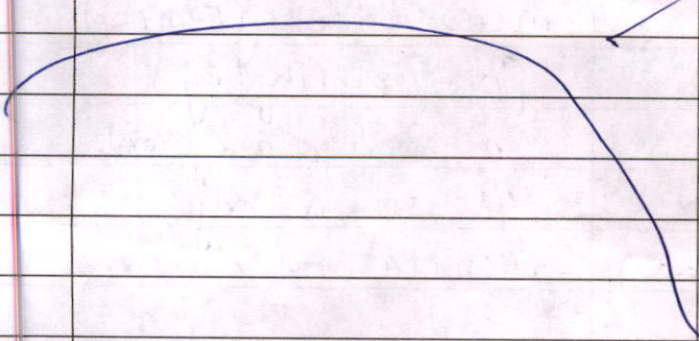


PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
27/5/26	Seen by	Dr. Bharath (Resident)
7:30 AM	42 HOL / 37 + 6 / 2.7331kg	GDM (IOM) / EL-LSCS / CIAB
	Bt. wt - 2.7331kg	Plan -
	Today. wt - 2.631kg	- Continue SSPT eyes and
	+ 102gm (3.7%)	genitals covered.
M / O+		- measured feeds (EBM + FF)
B / O+	GABS - 112, 92	(80ml/kg/day) 20 ml @ 2hrly (oo)
	urine - 5 times	30ml @ 3hrly
	Stools - 4 times	- R/V SBR
		S-electrolytes @ 48 HOL
	↓ SSPT since 1:30pm Yest.	NBS 1:30 PM
		- Monitor vitals and Inform
		SOS.
		Bharath
		noted by sis. Sat @ 7:40 am 27/5/26
		Dr. VIJAYANAND JAMALPURI Reg. No: 40526
		27/5/26
		OAE - New born hearing screening
		Bilateral responses are present
		Bilateral Pass.
		27/5/26



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/26 7:35 AM	Seen by 66 H 0 2 / 37 + 6 / 2.7	Dr. Bharath (Resident) 33 kg / 60 cm (IOM) / EL. LSIS / CIAB
		Plan:-
M/O+ B/O+	Bt. wt - 2.733 kg Today wt - 2.601 <u>132 gm (↓4.8%)</u>	- Continue DSPT to eyes and genitalia covered - Measured feeds (EBM + FF) [100 ml / kg / day]
	Urine - 8 times Stools - 9 times	20-25 ml every 2 hrsly (or) 40-45 ml every 3 hrsly.
	Ongoing DSPT since 4:30 PM Yest <u>SBR - 13-7 @ 48 H 0 2</u>	- R/V SBR in rounds - Monitor vitals and Inform SOS.
		Bharath
28/5/26 8:20 AM	Seen by Dr. Vijayanand	Plan:-
		- SBR 10:30 AM - R/V discharge - Regular feeding - Feeding assessment. Dr. Vijayanand Reg. No: 40526



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Seen by Dr. Bharath (Resident)	
28/5/26 12:30 PM	Discussed with Dr. Vijayanand	
	SBR @ 69HOL-14-6	Plan:- - Continue DSPT & eyes and genitalia covered - SBR, CBP, DCT } T/m after sounds Retz count
		<u>Bharath</u>
28/5/26 4 PM	Seen by Dr. Bharath (Resident) 74HOL 37 t6 2.733 kg Norm (IOM) E1-LSLS (CIAIB)	
		Plan:- - Continue DSPT & eyes and genitalia covered - SBR, CBP, DCT } T/m after sounds Retz count - measured feeds (EBM+FF)
M/O+ B/O+	SBR @ 69HOL-14-6 Today wt - 2.601 kg (↓ 4.8%)	[TV - 120 ml/kg/day] 25-30 ml @ 2hrly (or) 40-45 ml @ 3hrly. - Monitor vitals & Inform SOS. - Proctogard ointment for local application
		<u>Bharath</u>

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
28/5/26 4:50 PM	Seen by Dr. Vijayanand.	Plan
		<ul style="list-style-type: none"> - Regular feeding - Continue DSPT - Proctogard Ointment for Local application - Bloods as planned after rounds.
		<p style="text-align: right;">4:50 noted by Satya @ 4:50 PM</p>
29/5/26	7:45 AM	
	<p>P4) 37.6 2.733 kg (norm) / cc's. Birth weight - 2.733 kg Today's weight - 2.66 (17 gms)</p>	<p style="text-align: center;"><u>Plan</u></p>
	<p>M / OF B / OR</p>	<ul style="list-style-type: none"> → Regular feeding → Continue DSPT. → Eye care → Cervical care
	<p>GIT S / F</p>	<ul style="list-style-type: none"> → SBR, CRP, DCR } Affected rounds. Retic count
	<p>Rashes (+)</p>	<ul style="list-style-type: none"> → TV - 120cc / day 25-30ml Ashby or 40-45ml Ashby → Proctogard ointment

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RESULT SHEET

Date	26/5/26	27/5/26	28/5/26	29/5/26		
Time	7pm	4pm	10am	9AM		
Hb				19.7		
PCV				57.6		
RBC						
WBC						
N/L				42.8/32.0		
Platelets				141		
CRP						
ESR						
PCT						
RBS						
Na	144	140				
K	6.6	6.7				
Cl	114	108				
Ca/Mg	8.6/1.7					
Phosphate						
Urea						
Creatinine						
ALP						
SGPT						
SGOT						
T.Bill/Conj	10.2 ^{0.1} 10.1	13.7 ^{0.1} 13.6	14.6 ^{0.1} 14.5	12.6 ^{0.1} 12.5		
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						

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... RCHBH / FRM / CLINICAL / 124

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

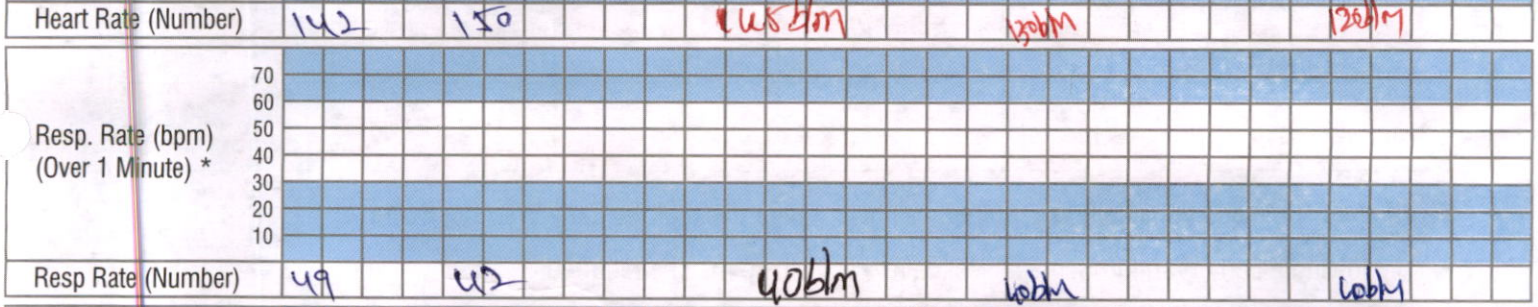
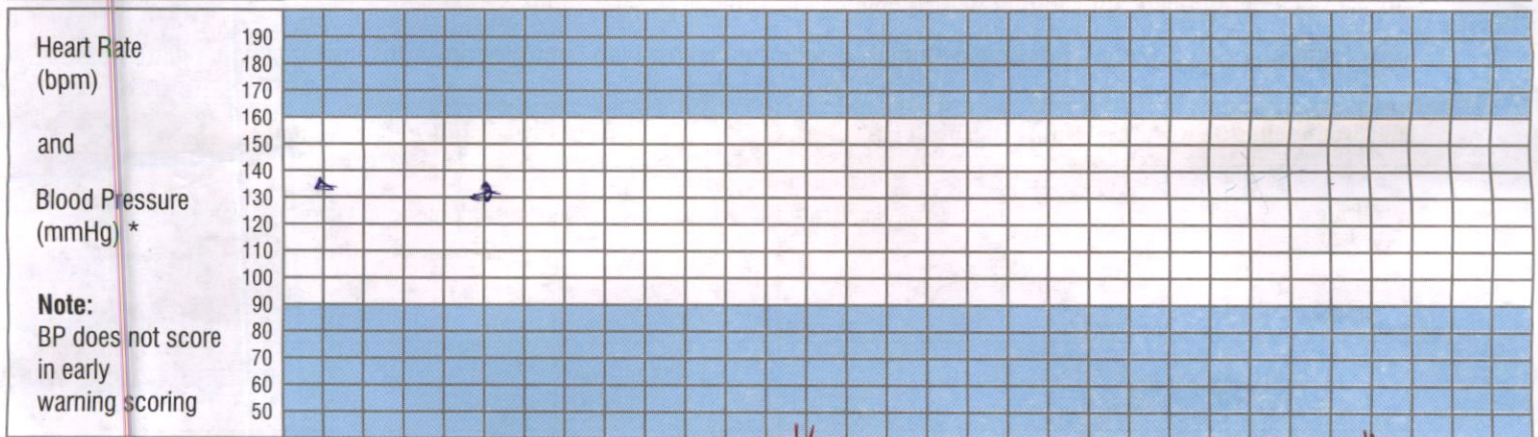
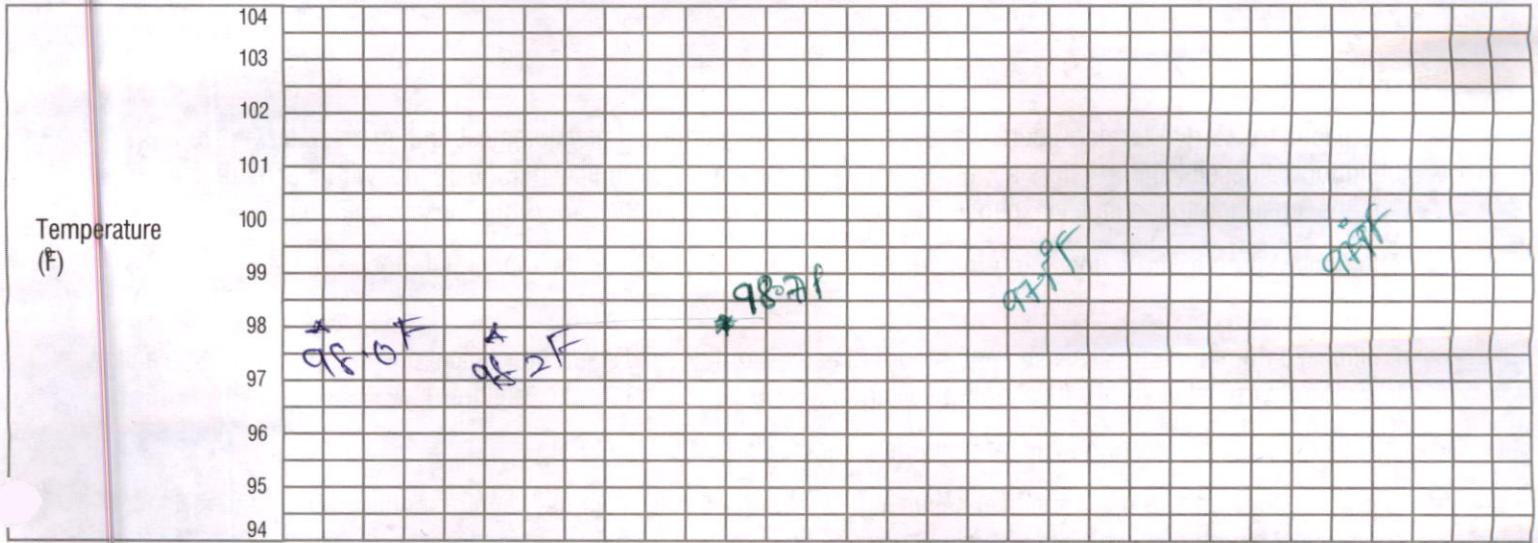
Pratiksha
Rainbow Children's Hospital
 It takes a lot to treat the little.

BirthRight
 BY RAINBOW HOSPITALS
 Your Right to a Safe Delivery

EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 25/5/20 Time: 4 PM 7 PM 10 PM 2 AM 6 AM

Doctor/Nurse/Family Concern?



Resp Distress	Mod/ Severe				
	None / Mild				
Receiving O ₂ (l/min)					
O ₂ Saturations (%)		99%	100%	100%	100%
Conscious Level	Normal				
	Altered				
GCS *					

TOTAL SCORE					
Number of shaded boxes	0	0	0	0	0
Pain Score	0	0	0	0	0
Observer's Initials	DR	1	DR	DR	DR

- ACTIONS**
- 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: Scores 3 should be recorded overleaf
 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.

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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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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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-00657255 IP5-00174302
 Baby Of POOJA NANDKUMAR RAJ
 25-05-2026 0 Y 0 M 0 D 11 H (F)
 Dr. VIJAYANAND JAMALPURI

26/5/26

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: 26/5/26	Time: 11am	5pm	10pm	2am	6am	
Doctor/Nurse/Family Concern?						
Temperature (F)	104					
	103					
	102					
	101					
	100					
	99					
	98	97.9°F	98.3°F	97.8°F	97.8°F	98.0°F
	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)	149 bpm	129 bpm	129 bpm	130 bpm	130 bpm	
Resp. Rate (bpm) (Over 1 Minute) *	70					
	60					
	50					
	40					
	30					
	20					
	10					
	Resp Rate (Number)	40 bpm	39 bpm	40 bpm	41 bpm	40 bpm
	Resp Distress	Mod/ Severe				
		None / Mild				
	Receiving O ₂ (l/min)					
O ₂ Saturations (%)	99%	99%	99%	100%	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

- Score 1 : Continue normal observation by staff nurse
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BAH-00657255 IP5-00174302
 Baby Of POOJA NANDKUMAR RAJ
 25-05-2026 0 Y 0 M 0 D 11 H (F)
 Dr. VIJAYANAND JAMALPURI



RCBHB / FRM / CLINICAL / 124

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

Pratiksha
 Rainbow
 Children's
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 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: 28/5/26 Time: 11 am 6 PM 10 PM 2 AM 6 AM

Doctor/Nurse/Family Concern?

Temperature (F)	104					
	103					
	102					
	101					
	100					
	99					
	98	97.8*	98.0*	98.1*	98.8*	99.2*
	97					
	96					
	94					

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

Heart Rate (Number) 139 bpm 129 bpm 130 bpm 130 bpm 130 bpm

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

Resp Rate (Number) 38 bpm 38 bpm 40 bpm 40 bpm 40 bpm

Resp Mod/ Severe Distress None / Mild

Receiving O₂ (l/min) O₂ Saturations (%) 99% 99% 100% 100% 99%

Conscious Level Normal / Altered

GCS * 15/15 15/15 15/15 15/15 15/16

TOTAL SCORE Number of shaded boxes 0 0 0 0 0

Pain Score 0 0 0 0 0

Observer's Initials

ACTIONS

Score 1	: Continue normal observation by staff nurse
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A	ASSESSMENT : I think the problem is (XXX) and I have ...(e.g. given O2/ analgesia, stopped the infusion), OR I am not sure what the problem is but child (X) is deteriorating, OR I don't know what's wrong but I am really worried.
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BAH-00657255
 Baby Of POOJA NANDKUMAR RAJ
 25-05-2026
 Dr. VIJAYANAND JAMALPURI
 IP5-00174302
 0 Y 0 M 0 D 3 H (F)



FLUID CHART

Sheet No. : ①

25/5/26

- All measurements in ml.
- 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							
25/5	08:00 am											
	09:00 am											
	10:00 am											
	11:00 am											
	12:00 pm											
	01:00 pm		DBF				ND			ND	NO IV	
Total Intake : Taken					Total Output :							
25/5	02:00 pm											
	03:00 pm		DBF									mark
	04:00 pm											mark
	05:00 pm		DBF				NP				No IV	mark
	06:00 pm		DBF									mark
	07:00 pm											mark
Total Intake : Taken					Total Output : Passed							
25/5	08:00 pm											
	09:00 pm		DBF									
	10:00 pm											
	11:00 pm						NP				NA	
	12:00 am		DBF									Diya
	01:00 am											
Total Intake :					Total Output : m-0 u-1							
26/5	02:00 am											
	03:00 am		DBF									
	04:00 am											
	05:00 am		ff 15ml								NA	Diya
	06:00 am		DBF	fecal								
	07:00 am											
Total Intake :					Total Output : m-1 u-1							
Total 24 hrs. Intake		Total 24 hrs. Output										
		m-1 u-3										



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			Output					IV Site Thrombo-phlebitis Score	Sign. Nurse	
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine			
26/5/26	08:00 am	DBF											
	09:00 am	FF-25ml											
	10:00 am						✓			✓	NA	Saty	
	11:00 am	DBF											
	12:00 pm	FF-25ml											
	01:00 pm												
Total Intake :						Total Output : m-1 u-1							
26/5	02:00 pm	DBF											
	03:00 pm	FF-25ml											
	04:00 pm									✓	NA	Saty	
	05:00 pm						✓						
	06:00 pm	DBF											
	07:00 pm	FF-25ml											
Total Intake :						Total Output : m-1 u-1							
26/5	08:00 pm	DBF											
	09:00 pm	FF-20ml								✓			
	10:00 pm						✓						
	11:00 pm	DBF									NA	Diya	
	12:00 am	FF-25ml								✓			
	01:00 am												
Total Intake :						Total Output : m-1 u-2							
27/5	02:00 am	DBF											
	03:00 am	FF-20ml											
	04:00 am						✓			✓			
	05:00 am	DBF									NA	Diya	
	06:00 am	FF-20ml											
	07:00 am												
Total Intake :						Total Output : m-1 u-1							
Total 24 hrs. Intake		165ml			Total 24 hrs. Output		m-4 u-5						

BAH-00657255 IP5-00174302
 Baby Of POOJA NANDKUMAR RAJ
 25-05-2026 0 Y 0 M 0 D 11 H (F)
 Dr. VIJAYANAND JAMALPURI

FLUID CHART



Sheet No. :

27/5/26

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.

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							
27/5/26	08:00 am		DBF								No IV cannula sat	}
	09:00 am	FF	25ml			✓			✓			
	10:00 am											
	11:00 am		DBF									
	12:00 pm		FF+LSM						✓			
	01:00 pm			DBF			✓			✓		
Total Intake :					Total Output : M - 2 U - 2							
27/5	02:00 pm	FF	25ml								NA	}
	03:00 pm					✓						
	04:00 pm	FF							✓			
	05:00 pm		30ml				✓					
	06:00 pm								✓			
	07:00 pm		FF	30ml			✓			✓		
Total Intake :					Total Output : M 3 U - 2							
27/5	08:00 pm										NA	}
	09:00 pm	FF	30ml									
	10:00 pm					✓			✓			
	11:00 pm											
	12:00 am	FF	30ml	FF			✓					
	01:00 am								✓			
Total Intake :					Total Output : M - 2 U - 2							
27/5	02:00 am										NA	}
	03:00 am	FF	30ml	FF								
	04:00 am					✓			✓			
	05:00 am	FF	30ml	FF								
	06:00 am					✓			✓			
	07:00 am								✓			
Total Intake :					Total Output : M - 2 U - 2							

Total 24 hrs. Intake

Total 24 hrs. Output M - 9 U - 8



FLUID CHART

Sheet No. :

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

		Intake				Output					IV Site Thrombophlebitis Score	Sign. Nurse	
Date	Time	Nature of Fluid	Route			NG	Diarrhoea	Vomit	Drainage	Urine			
			Mouth	I.V	N.G								
28/5/24	08:00 am											NA / Divya	
	09:00 am	FF	30ml										
	10:00 am									✓			
	11:00 am	FF	50ml				✓						
	12:00 pm												
	01:00 pm												
Total Intake :						Total Output : M-107							
28/5/24	02:30 pm	FF	10ml				✓			✓		NA / Divya	
	03:00 pm	F											
	04:30 pm												
	05:00 pm	FF	40ml										
	06:00 pm						✓			✓			
	07:00 pm												
Total Intake :						Total Output : M-202							
28/5	08:00 pm	FF	25ml									NA / Divya	
	09:00 pm						✓			✓			
	10:00 pm												
	11:00 pm	FF	35ml										
	12:00 am												
	01:00 am												
Total Intake :						Total Output : M-105							
28/5	02:00 am											NA / Divya	
	03:00 am	FF	30ml										
	04:00 am						✓			✓			
	05:00 am												
	06:00 am	FF	30ml							✓			
	07:00 am												
Total Intake :						Total Output : M-102							

Total 24 hrs. Intake	250 ml
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Total 24 hrs. Output	M-506
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