

Rainbow Children's Hospitals - Visakhapatnam

Plot No.15, Health City layout, Sy. No. 21 & 27, Part of Chinagadili, GVMC Limits. Govt General Hospital Kda
Vishakhapatnam, Andhra Pradesh, INDIA, 530040.
TEL NO :891-3501601
WEB : https://rainbowhospitals.in

ADMISSION SHEET**Registration Details :**

Admission No : IP22-00023339 Admit Date : 21-Jun-2026 Admit Time : 09:14 AM UHID : HCV-00040954

Patient Details :

Patient Name : Baby B/O JAHNAVI Age : 0 D
Guardian : Mr K NITHIN DOB : 21-06-2026 08:36 AM
Gender : Female Religion :
Occupation : Martial Status :
Address (H) : Yendada Visakhapatnam Andhra Pradesh Phone No : 8977227938
INDIA 530045 E-mail : no@gmail.com

Admission Details :

Bed Type : BASINET Bed No : CRDL-DLX-204-1 Ward Name : 2F-SECOND FLOOR
Room No : CRDL-DLX-204-1 Admission Type : First Visit

Contact Details :

Name : Mr K NITHIN Relationship : Father
Contact Address : Yendada Visakhapatnam Andhra Pradesh Phone No :
INDIA 530045


Signature

Doctor Details :

Doctor Name : Dr. TIRUMALASETTY PARAMESH Specialisation : NEONATOLOGY
Referral Doctor : SELF Phone No :
Co-Consultant :

Payment Details :

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

OPR done on - 21/6/26
vaccination done - 21/6/26 } DR. Balaji
Red Reflex done 21/6/26

ACTIVITY RECORD FOR BILLING



Name:-----

UHID No : sultant : Dept:

Date of Admission : Date of Discharge: Time:

Room / Bed No : Suggested Billable bed type:

HCV-00040954 IP22-00023339
 Baby B/O JAHNAVI
 21-06-2026 0 Y 0 M 0 D 0 H (F)
 Dr. TIRUMALABETTY PARAMESH



WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
21/6/26	12:10pm	nSuu	204	Pavani

Cross Consultation Visit

	Doctors Name	Date	Order No.	Signature
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				



NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Jahnavi Age : 26Y Father's Name : Age :
 Date of Birth : Date of Admission : 21/06/26 I.P. No.:
 NICU Consultant : Dr. Pasameeh 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 Jahnavi Mother's Blood Group : B +ve
 Gender : M F Blood Group : O +ve Birth Weight (gms) : 2799g Length (cms) :
 Date of Birth : 21/06/26 Time of Birth : 8:36AM OFC (cms) :
 Place of Birth : RMH Estimated Gesth Age : 38wk 4 days

Current Obstetric History : (Booked / Unbooked Case) 24/09/25 01/07/26
 Maternal Age : Ht : Wt : BMI : Married Life : LMP : EDD :
 Conception : Spontaneous or with Rx :
 Booked at what GA : AN Steroids Drugs / Doses :
 Last Scans Details : Cephalic, posterior, placenta, AFI: 7.8cm, EFW: 2873g, Doppler (N) TT Immunization and Iron / Folic Acid :

MATERNAL RISK FACTORS

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

HOP1:

Baby cried immediately after birth
Delayed cord clamping done

clean cord cut

Tuj vit K1M given

Shift to mother's side

Investigation details in previous Hospital :

Feeding History :

Past History :

[Faint handwritten notes in the Past History section]

Family History :

[Faint handwritten notes in the Family History section]

Socio Economic History :

GENERAL EXAMINATION ON ADMISSION

General Description :

cry }
reflex } (N)
activity }

VITALS : Temperature : (N) HR : RR : NIBP : CFT :

Colour of the extremities : acrocyanosis (+)

Jaundice : Pallor : SpO2 : 98%

Anthropometry : Birth Weight : 2.7991g Length : HC : Present Weight :

Ponderal Index : AGA : (+) SGA : LGA :

HEAD TO TOE EXAMINATION

HEAD :

Fontanelles :

Sutures

Shape / Moulding :

Edema / Bruising :

Size - (H.C.) :

} AP open, patent

Facies :

(Any Facial
Dysmorphism)

(N)

**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 :

Preauricular 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 : A + IV (+)

Discharge :

GENITALIA :

Labia / Hymen :

~~Testicles/penis :~~

Anus : patent

(N)

HERNIAL ORIFICES

free

TRUNK and SPINE :

(N)

SKIN LESIONS :

nil

EXTREMITIES :

Fingers / Toes :

Arms / Legs :

Deformities :

Mobility :

Hip Joint Examination :

} (N)

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 : 98% Auscultation : Breath Sounds : Added Sounds :

Cardiovascular System :

HR : 160/min BP : Precordial Activity : (N)

Femoral Pulses : (A) Murmurs :

Other Peripheral Pulses : Signs of Cardiac Failure :

Abdomen :

Shape : Hernial orifice :

Palpation : Anal Patency : (✓)

Palpable masses : Umbilical Cord :

Abdominal girth : First urine passed : (✓) Meconium passed : (✓)

Nervous System : Higher intellectual functions (Sensorium) :

State of wakefulness : (N)

Prechtle Score :

Cranial Nerves :

(N)

Motor System :

Passive Tone : (N)

Active Tone :

Neonatal Reflexes :

Grasp : Palmar Plantar Sucking Rooting Crossed adductor :

Moro's : DTR :

ATNR : Skull and Spine :

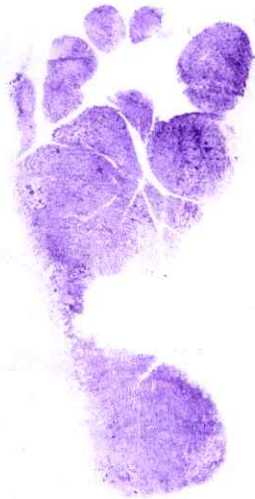
Any Congenital Anomalies :

Diagnosis :

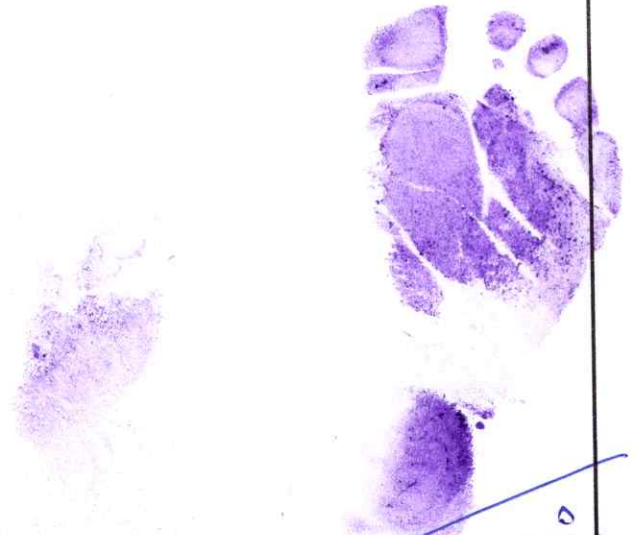
Term / ACHA / Fch / well baby

FOOT PRINTS

Left Side :



Right Side :



Resident Doctor :

Signature :

Name :

Date & Time :

G. Anyana

21/06/26

Consultant :

Signature :

Name :

Date & Time :

noted by Paramel

Paramel

21/6/26

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 patients is being referred.

AT THE TIME OF TRANSFER TO THE WARD

Final Diagnosis :

Present Issues :

Vital : HR : RR : BP : SP02 : Weight :

Any Oxygen requirement :

Systemic :

Medications :

Plan during ward follow up :

plan

1) Ad OB feeds

2) BET, Tu, TSH - cord blood

Feeding Plan at the time of shifting :

3) 4 umb spO₂ @ 24 hrs

4) TSB / NBS @ 48 hrs.

Screenings done during NICU Stay :

NSG :

Hearing Screen :

ROP :

TFT :

NP2 :

Pulse Oxymetry Screen : RL-99% LL-99% RH-100% LH-99%

New Born Screening :

5) vaccination } - today
red reflex }
- noted by Parvati

HCV-00040954 IP22-00023339
Baby B/O JAHNAVI
21-06-2026 0 Y 0 M 0 D 0 H (F)
Dr. TIRUMALABETTY PARAMESH



NURSING DEPARTMENT NEWBORN - NURSING ASSESSMENT FORM

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

Baby's Name: B/o. Jahnavi Mother's Name: Mrs. Jahnavi

Date of Birth: 21/6/26 Time of Birth: 8:36 Am Gender: Male Female

Birth Weight: 2.790 Kgs HC: cm Length: cm

Meconium in Liquor: Yes No Cried at Birth: Yes No

Term / Pre-term / Post-term:

Resuscitated: Yes No Blood Group: Mother: B+ Baby:

Feeding: Breast Feeding Formula Both First Feed Time: 9:10 Am

HCV-00040656 IP22-00023338
Mrs JAHNAVI
12-12-1999 28 Y 6 M 9 D (F)
Dr. NAGA SUDHA LAKSHMI G

Mode of Delivery: Normal LSCS - Emergency/ Elective Instrumental

Indication: maternal Request

Physical Assessment of New Born:

Temp: 36.5 °C HR: 150 /Min RR: 45 /Min BP: SpO₂: 99%

Pain Score: (Follow N Pass)

Fall Risk Assessment: Yes No Score: 10 (Fill the Humpty Dumpty Sheet)

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

Behaviour Status on admission: Sleeping Crying Calm Drowsy

Findings:

General Appearance: Posture: Well-Flexed Asymmetry

Skin: Pink Meconium Stain Others, Specify:

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

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

Routine Care Provided: Yes / No

Capillary Blood Glucose Monitoring Done: Yes / No

Neonatal Screening Done: Yes / No

1. Nutritional Screening: Feeding Problem Yes / No

2. Functional Screening: Musculoskeletal Congenital Abnormality Yes / No

3. Socio History: Siblings Yes / No

All information obtained from Mother Father Other Family Member

Newborn Screening Discussed: Yes / No

Nurse Name: paavi

Signature: [Signature]

Date & Time: 21/6/26 @ 8:45



PROGRESS NOTES

(USE BALL POINT PEN ONLY)

HCV-00040954 IP22-00023339
 Baby B/O JAHNAVI
 21-06-2026 0 Y 0 M 0 D 0 H (F)
 Dr. TIRUMALASETTY PARAMESH M F


DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
		<u>ds/B Dr. Hansika / Dr. Balaji</u>
	<u>21/6/26</u>	
	<u>10pm</u>	
		<u>DSS:</u> TERM / AGA / FGA / well baby (3swk + 4day)
		<ul style="list-style-type: none"> • Con / tone / activity - good • urine / stool / passed. • Feeding → DBF
		<p><u>Advice:</u></p> <ul style="list-style-type: none"> • Ad lib feeds • CCHD screening @ 24hrs of life • TSB / NBS } after 48hrs or life <p><i>BALAJI</i></p>
		<p>Notes by MASS 01/7 @ 10M</p>

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

22/6/26

8AM

24 hr of life

cls/cls Dr. Paramesh / Dr. Balaji

DSIS: TERM / AGA / FGA / well baby
(3wks + 4 days)

Birth wt + 2.799kg
C. wt + 2.679kg

not low + 4.2%

ASA + 6

Baby → 'O' eye
mottles + 'B' eye

• mylonal activity - good

• urine } paired
stool }

• Feeding - DBA

Advice:

• Ad lib feeds

• OSB }
NBS } 1m @ 8AM

• Heavy tear to be done
tear

BALAJI

~~NOTES BY
MAGG~~

PROGRESS NOTES
(USE BALL POINT PEN ONLY)

Ref. No. : F / HW / PGN / INPR / 15

Pat HCV-00040954 IP22-00023339
Baby B/O JAHNAVI
21-06-2026 0Y0M0D6H (F)
Ag Dr. TIRUMALABETTY PARAMESH
I.P. 

DATE	TIME	(SIGN ALL ENTRIES, DATE & TIME OF EACH ENTRY IS COMPULSORY)
22/6/26		S/B On ven / Dn - Yash
	5PM	Term (38+4) / ANA / Ech / well Bakt
		- C/T/A - good
		- Feeding well
		urine / Stool / Respiration
		<u>Adm</u>
		- TSB, NBS @ 7 AM
		8 AM
		- TEQAE to be done
		N.B Naga 5:01 PM
22/6/26	10PM	Dn YASH
		C/T/A Dr Aditya / Dr Surya / Dr Sree
		Care Reviewed,
		c/t/a - good
		feed - DBT
		urine } ✓
		stool } ✓
		<u>Pla</u>
		- TSB, NBS H/m 8am
		- TEQAE H/m

NOTE : DO NOT WRITE OUTSIDE THE MARGINS

~~NOTES BY
MADEH
01m
2:10pm~~

23/6/26

cls/B Dr. paramesh / Dr. Balaji

8AM

DSM: TERM / AAA / FCH / well baby
(38wks + 4 days)

4 hr of life

Birth wt + 2.799kg

C. wt + 2.596kg

wt loss + 7.2%

- cry (tone) / activity - good
- urine / stool / passed
- feeding + DBP

Adverse

• Ad lib feeds

• Trace TB report


BALAJI

N. B. Santhosh

RESULT SHEET

HCV-00040954

IP22-00023339

INPR / 17

Baby B/O JAHNAVI

Patient No:

21-06-2026 0 Y 0 M 0 D 0 H (F)

Age :

Dr. TIRUMALASETTY PARAMESH



I.D. No. :

Date	23/6/26				
Time	9.00 AM				
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	11.0 ^{0.1} _{10.9}				
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					
Doctor's Signature					

Date	21/6/26				
Time					
CUE - Alb					
CUE - Sugar					
CUE - Ketones					
CUE - PUS Cells					
CUE - RBC Cells					
CUE					
Stool Pus Cell					
OVA / Cyst					
Occult Blood					
BGIT	O' positive				
TSH	6.06				
T4	9.6				
Doctor's Signature					

Culture and Sensitivities :

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Radiology : USG :

 X-Ray :

 ECHO :

 CT :

 MRI :

 Others (ECG, Contrast Studies etc.) :