

ANC-00016333 IP28-00004598
Baby Of JAYASANKARI P
16-06-2026 0 Y 0 M 1 D (F)
Dr. SHOBANA RAJENDRAN

ht
ALS
16/07

DISCHARGE TRACKING SHEET



DR:

CONSULTANT NAME: DR.

ACTIVITY	IN TIME	OUT TIME	REMARKS	<To be filled by Admin>
Activity Sheet updated by Nursing	12:00 PM	12:00 PM	[Signature]	
Activity Sheet updated by Pharmacy		6:50 AM	[Signature]	

ACTIVITY RECORD FOR BILLING



Name:

UHID No: ANC-00016333 IP28-00004598
 Baby Of JAYASANKARI P Consultant: Dept:

Date of Admission: 16-06-2026 0 Y 0 M 0 D 13 H (F)
 Dr. SHOBANA RAJENDRAN Date of Discharge: Time:



Room / Bed No: Suggested Billable bed type:

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse
17/6/26	LAm	LDR	in floor	RR

CROSS CONSULTATION VISIT

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

ANC-00018333 IP28-00004598
 Baby Of JAYASANKARI P
 16-06-2026 0 Y 0 M 0 D 13 H (F)
 Dr. SHOBANA RAJENDRAN



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
17/6 9am	S/S <u>Dr. Shobana</u>	
	DBF To do DCT	
<u>17/6/26</u>	S/S <u>Dr. Malini</u>	
	Term 39+4 wks NVD Rh Negative pregnancy	
	DOL - 10 hrs	Birth wt - 2.68 kg
	Urine ✓	today wt - 2.68 kg
	Meconium ✓	MBA → B -ve
	O/E Baby pink	BBG → B +ve
	normothesmic	
	metals stable	
	C/S - S/S +	
	RS - BAEF	
	P/A - RH	
	C/S - A.F. →	
	Hb - 18	activity good
	T-Bils - 3.3	
	DCT - negative	

ANC-00016333 IP28-00004598
 Baby Of JAYASANKARI P
 16-06-2026 0 Y 0 M 0 D 15 H (F)
 Dr. SHOBANA RAJENDRAN



PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
17/6/26 8PM	S/B Dr Malini	
	Baby Feed	
	No new issues	
	On DRF + FF Obtaining - Obtaining m/l.	
	o/p: Adequate (5 hours)	
	Mucous: Adequate	
	o/p: Cony + Activity (N)	
	PPWF	
	s/e: NAD.	
18/6 9:15am	S/B Dr Malini	
	Term / 39+4 weeks / NVD / Rh negative	
	DCL - 36hr	Birth wt - 2.68kg
	Ulene ✓	today wt - 2.5kg
	Mecorin ✓	6.7% ↓
	TCB - 11.6.	
	o/p Baby pink	
	Icteric - chest.	
	vital stable	



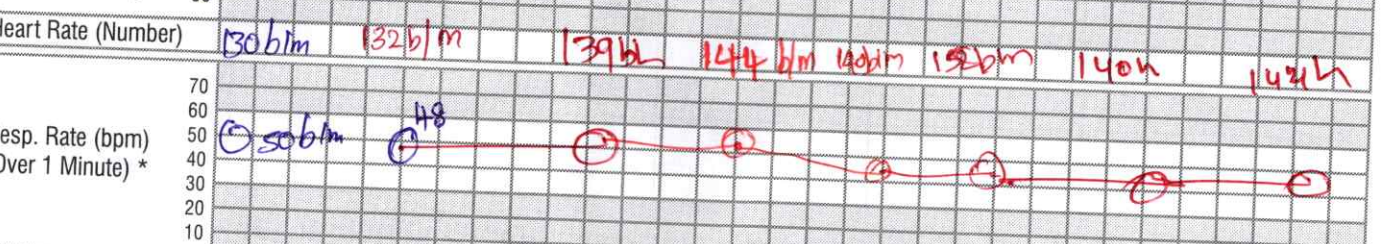
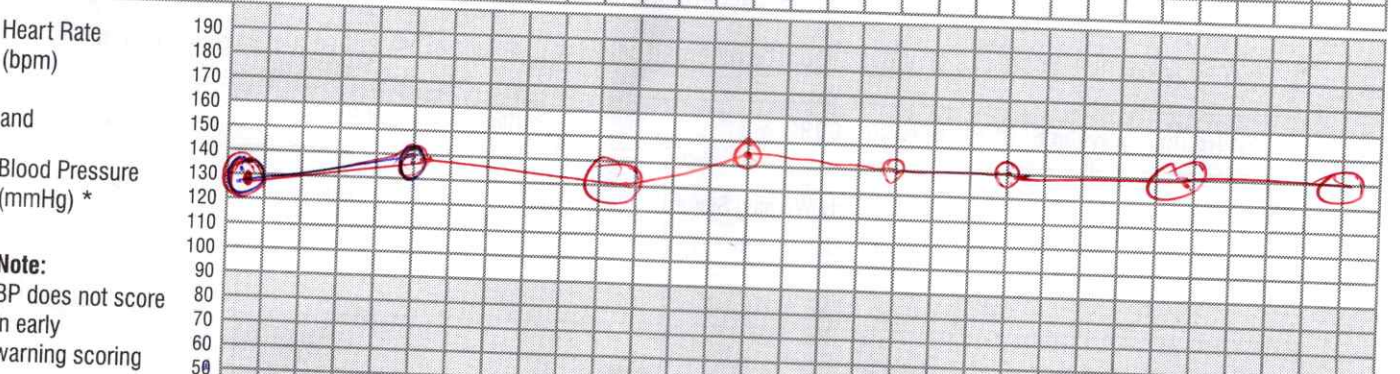
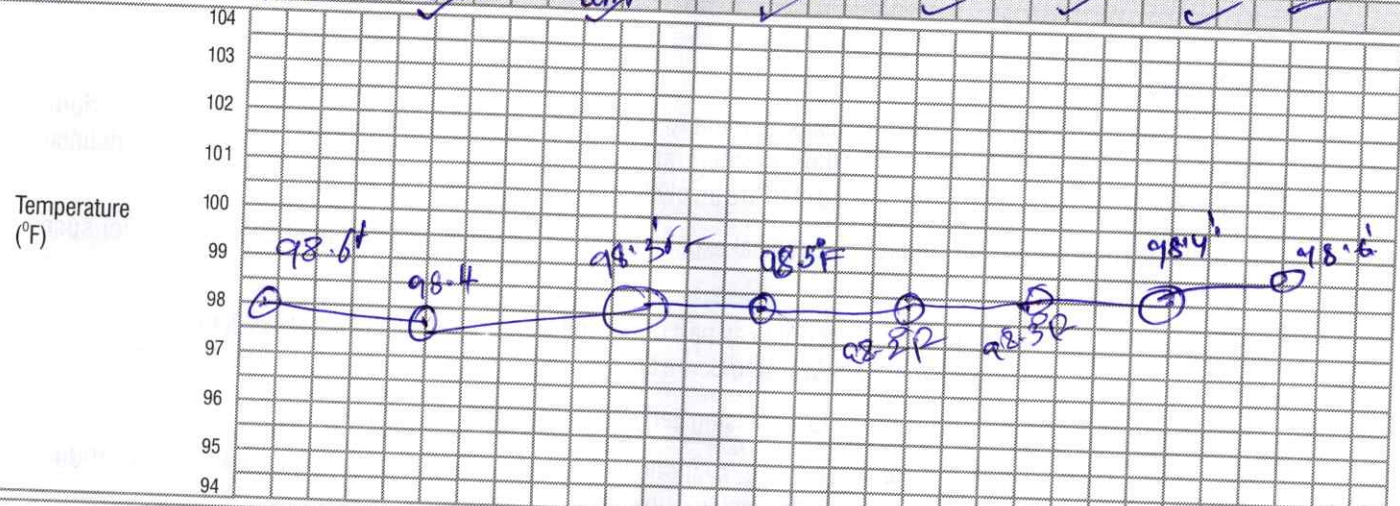
INFANT (<1 year)
Children's Observation & Early Warning Scoring Chart



EARLY WARNING SCORE: CHILDREN'S UNIT

Date: 17/6/20 Time: 2 4 8 12PM 4PM 8PM 12N 2N

Doctor/Nurse/Family Concern? Am am am ✓ ✓ ✓ ✓ ✓



Heart Rate (Number) 130b/m 132b/m 139b/m 144b/m 140b/m 152b/m 140b/m 142b/m

Resp Rate (Number) ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓

Resp Mod/ Severe Distress None / Mild ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓

Receiving O₂ (l/min) 0 0 0 0 0 0 0 0

O₂ Saturations (%) 100% 100% 99% 98% 99% 100% 99% 98%

Conscious Level Normal Altered ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓

GCS * ✓ 15/15 15/15 15/15 15/15 15/15 15/15 15/15

TOTAL SCORE
 Number of shaded boxes 1/5 0/1 0/1 0/1 0/1 0/1 0/1 0/1
 Pain Score 0/10 0/10 0/10 0/10 0/10 0/10 0/10 0/10
 Observer's Initials RR KR RR RR RR RR RR RR

* 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.
- 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)

Patient Sticker

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FLUID CHART

Sheet No. : 1

- 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	Nature of Fluid	Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse
			Mouth	I.V	N.G	NG	Diarrhoea	Vomit	Drainage	Urine		
	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	DBF										PR
Total Intake :			DBF - 1			Total Output :						PR
	02:00 am											
	03:00 am	DBF										
	04:00 am											
	05:00 am	DBF										PR
	06:00 am											PR
	07:00 am	pm										PR
Total Intake :			DM 3HM			Total Output :						PR
Total 24 hrs. Intake			DM 4 times			Total 24 hrs. Output						
						M-2						
						U-2						
						M-2						



FLUID CHART

Sheet No. : 17/01/26 (2)

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

Date		Intake			Output					IV Site Thrombophlebitis Score	Sign. Nurse	
Date	Time	Nature of Fluid	Route		NG	Diarrhoea	Vomit	Drainage	Urine			
			Mouth	I.V	N.G							
17/01/26	08:00 am											
	09:00 am	B							✓			
	10:00 am	DBF										
	11:00 am											
	12:00 pm											
	01:00 pm	DBF							✓			
Total Intake :			2 times - DBF			Total Output :					2 times - U	
	02:00 pm											
	03:00 pm	DBF	✓				✓		✓			
	04:00 pm											
	05:00 pm	DBF	✓									
	06:00 pm						✓					
	07:00 pm	DBF	✓						✓			
Total Intake :			DBF 3 times			M - 2 times					Total Output : U - 2 times	
	08:00 pm											
	09:00 pm	Dm	✓				✓		✓			
	10:00 pm											
	11:00 pm	Dm	✓				✓					
	12:00 am											
	01:00 am	Dm	✓						✓			
Total Intake :			3 times			M - 2					Total Output : U - 2	
	02:00 am	Dm	✓									
	03:00 am											
	04:00 am	Dm	✓									
	05:00 am											
	06:00 am	Dm	✓				✓		✓			
	07:00 am											
Total Intake :			3 times			M - 1					Total Output : U - 2	
Total 24 hrs. Intake		Dm 11 times										
Total 24 hrs. Output		U - 8 M - 5 times										

