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 : IP5-00173845 **Admit Date** : 14-May-2026 **Admit Time** : 11:05 PM **UHID** : BAH-00656316

Patient Details :

Patient Name	: Baby Of PENDYALA LAKSHMI MOUNICA	**Age**	: 0 D
Guardian	: Mr DINESH SUNKARA	**DOB**	: 14-05-2026 08:36 PM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H NO 286, GREEN PARK COLONY, ROAD NO 5, NEAR SAMA NARSHIMHA REDDY GARDEN, CHAMPA PET, Kothapet Hyderabad Telangana INDIA 500035	**Phone No**	: 9063267758/ 9642187799
		E-mail	: CHOUDARY7799@GMAIL.COM

Admission Details :

Bed Type : NICU **Bed No** : NICU 242 **Ward Name** : 2F-NICU 1

Room No : NICU 242 **Admission Type** : First Visit

Contact Details :

Name : Mr DINESH SUNKARA **Relationship** : Father

Contact Address : H NO 286, GREEN PARK COLONY, ROAD NO 5, NEAR SAMA NARSHIMHA REDDY GARDEN, CHAMPA PET, Kothapet Hyderabad Telangana INDIA 500035 **Phone No** : 9063267758 / 9642187799

Signature

Doctor Details :

Doctor Name : Dr. NALINIKANTA PANIGRAHY **Specialisation** : NEONATAL INTENSIVE CARE

Referral Doctor : Self **Phone No** :

Co-Consultant :

Payment Details :

Payment Mode : Cash **Deposit Amount** : 0.00

Payor Name : NIVA BUPA HEALTH INSURANCE COMPANY LTD

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0Y0M0D3H (F)
Dr. NALINIKANTA PANIGRAHY

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ADMISSION CRITERIA – NICU

Admission / Transfer from:

☐ Emergency ☐ Outpatient (OPD) ☐ Ward ☑ Operation Theater ☐ Others: .....

Tick (✓) any of the following criteria requiring admission / transfer to NICU

Prematurity and Low Birth Weight Babies:

- ☑ Respiratory Distress
- ☐ Congenital Heart Disease
- ☐ Suspected or CONFIRMED SEPTICAEMIA
- ☐ Suspected or Diagnosed Meningitis
- ☐ UTI
- ☐ Septic Arthritis or Osteomyelitis
- ☐ Congenital Infections (Varicella, Pneumonia)
- ☐ Acquired Viral Illness
- ☐ Hyperbilirubinemia
- ☐ Severe Dehydration
- ☐ Bleeding Manifestations
- ☐ Neonatal Seizures
- ☐ Birth Asphyxia
- ☐ Surgical Problems
- ☐ Suspected Metabolic Disorders
- ☐ Dysmorphic Features
- ☐ Congenital Serious Cutaneous Disorder

Major Surgical Problems:

- ☐ Congenital Hydrocephalus
- ☐ Neural Tube Defects
- ☐ Choanal Atresia
- ☐ Trachea- Esophageal Fistula
- ☐ Esophageal Atresia
- ☐ Congenital Diaphragmatic Hernias
- ☐ Eventration of Diaphragm
- ☐ Congenital Cystic Adenomatoid Malformation
- ☐ Intestinal Atresias
- ☐ Gastric Volvulus
- ☐ Cleft lip or Cleft Palate
- ☐ Ompalecele / Gastrochiasis
- ☐ Anorectal Malformations
- ☐ Gross Hydrouretero Nephrosis
- ☐ Posterior Urethral Valves
- ☐ Congenital Tumors
- ☐ Cystic Hygromas

Criteria for shifting inborn babies from wards to NICU:

- ☐ Any Baby with Lethargy, Poor Feeding, Gross Weight Loss and Dehydration
- ☐ Any Baby with Severe Jaundice Requiring Exchange Transfusion
- ☐ Any Baby with Blood Sugar Abnormalities (Hypo or Hyperglycaemia)
- ☐ Any Baby with Temperature Instability
- ☐ Any Baby with Signs of Sepsis
- ☐ Any Baby with Seizures
- ☐ Out Born Babies: (Including Walk in Patients to the Emergency Room / Neonatal Transports)

ignature of the Doctor: .....

ne of the Doctor: N. Preethika

& Time: 15/5/26 11:30am

lo. : RCHBH /FRM / CLINICAL / 206

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 0 D 3 H (F)
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DISCHARGE CRITERIA – NICU

Discharge to:

☐ HDU / Step down ICU ☐ Ward ☐ Outside Facility ☐ Others: .....

Tick (✓) any of the following criteria requiring discharge / transfer from NICU

- ☐ The clinical status of the patient no longer warrants constant medical and nursing monitoring or specialized services originally required.
- ☐ Preterm baby once attained weight of >1.5kgs and crossing the PMA of >35 weeks of gestation.
- ☐ Preterm babies maintaining normal temperatures (36.5-37.5°c) in room temperature.
- ☐ All preterm, low birth weight babies and babies who had critical course in the NICU

Signature of the Doctor: .....

Name of the Doctor : .....

Date & Time: .....

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
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NEWBORN MONITORING FORM

Date of Birth	: 19/5/26	New Born Screening	:
Time of Birth	: 8:36 pm	TFT	:
Mode of Delivery	: LSCS	OAE	:
Birth Weight	: 1.300 gm	Mother's Blood Group	: A+ve
Head Circumference	:	Baby's Blood Group	: A+ve
Length	:	Anomaly Scan	:
Red Reflex	:	Vaccination	: OPV, BCG, RSV 50mg given on 10/6/26 given Mamata

Date	Weight	Type of Feed	Quantity	Temperature	Signature
9/6/26	1.471 kg	EBM			Soma
9/6/26	1.459 kg (weight)	EBM	23ml	98.0°F	Kalyani
10/6/26	1.773	EBM	20ml	98.1F	Shinshu (1.464 kg checked)
11/6/26	1.508	EBM	20ml	98.5F	Shinshu

INVESTIGATIONS

Date	Investigations	Order No.	Signature
5/6/26	RBS	26056809	[illegible]
6/6/26	GRBS	26057116	Rf
7/6/26	GRBS	26057464	Sf
8/6/26	NP2	26057706	Gowri
8/6/26	RBS	26057705	Gowri
9/6/26	RBS	26057705	Gowri
10/6/26	AABR	26081825	Annamma

MEDICAL EQUIPMENT (WARD & ICU)

Date	Name of Equipment	Connecting Time	Disconnecting Time	Order No.	Signature
6/5/26	Inv. monitor	14/5/26 @4:30pm		9609076	
7/6/26	Inv. monitor	14/5/26 @4:30pm		9609076	

PROCEDURE

Date	Procedure	Quantity	Order No.	Signature

ANY OTHER INFORMATION

.....

.....

.....

.....

.....

.....

Date : Time : Prepared By :

Staff Nurse	Shift / Ward	Billing Assistant	Billing Supervisor

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0Y0M0D3H (F)
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NEONATAL IN-PATIENT MEDICAL RECORD

ADMISSION INFORMATION

Mother's Name : Pendyala Laxmi 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 Pendyala Lakshmi mother

Gender : ☐M ☐F Blood Group : A +ve

Date of Birth : 14/5 Time of Birth : 8:36 pm

Place of Birth : RBH-F

Mother's Blood Group : A +ve

Birth Weight (gms) : 1300 gm Length (cms) : 37 cm

OFC (cms) : 27 cm

Estimated Gesth Age : 32+4 wks

Current Obstetric History : (Booked / Unbooked Case)

Maternal Age : 32 yrs Ht : ..... Wt : ..... BMI: ..... Married Life : ..... LMP : ..... EDD : 5/7/26

Conception : Spontaneous or with Rx. : IVF conception 10 days back (2) dose given

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

Last Scans Details : 16/4 - breech / 1059 gm (N) fetal doppler AFI - 15.6 cm today - REDF / cerebral redistribution Guidance

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 severe PE

How many Drugs / Doses / Since how long : .....

on Labetalol / Nicardia

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 : doppler ab (N) - 2nd ly

AFI : 15.6 cm

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? On thyroxine

Any other Chronic Medical Problems, when detected drugs ? .....

(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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Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

PAST OBSTETRIC HISTORY

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

Sr. No.	Age	GA wks	B.W	Gender	Significant	Details
1	Primi					

PERINATAL HISTORY

Treating Obstetrician : Dr. Bhargavi ..... Hospital : ..... ☐ Inborn ☐ Outborn

Duration of Labour

First stage (> 18 hours sig) CSCS

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 Cac - 2.6

Cord ABG : 7.38/50/16/-2.5/19.7

Placenta : (weight, surface, No. of cotyledons, calcifications, malformations, clots etc : .....

NEONATAL RESCUSTITION DETAILS

APGAR SCORE

Gestational Age : 32 ..... 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	
1	2	
1	1	
1	1	
6	8	

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)		0
Lowest Temp (oF)	> 96 (0)	96-95 (8)	< 95 (15)		0
Pao2 / Fio2 (mmHg%)	> 2.49 (0)	1-2.49 (5)	0.3-0.99 (15)	< 0.3 (28)	0
Lowest Serum PH	> = 7.2 (0)	7.1-7.19 (7)	< 7.1 (16)		0
Multiple Seizures	No (0)	Yes (19)			0
U. Output (ml / kg / hr)	> = 1 (0)	0. 1-0.9 (5)	<0.1 (18)		-
Apgar Score	> = 7 (0)	< 7 (18)			0
Brith Weight	> = 1kg (0)	750 - 999 (10)	< 750 (17)		0
SGA	> 3rd percentile (0)	< 3rd (12)			12
				Total	

POSTNATAL / HISTORY OF PRESENT ILLNESS

Chief Complaints :

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

mod PT
crying
tone - (N)

↓

received under plastic hood
~~O2~~ CPAP - started

↓

HR - 136 bpm
SpO2 - 90 % @ 3 mins
grunting
chest retraction

↓

shifted to NICU in ~~O2~~ CPAP - 6

Investigation details in previous Hospital :

— nil —

Feeding History :

— nil —

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Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 13 D (F)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	5/6/26	Seen by drnalinikanta
		→ 9 paladi feeds Today
		Rest BF feed
		→ NP, TFT (R/V) with next prick
		→ Kmc 6-8hrs.
		Noted by Lavanya
5/6/26 4pm	Afternoon rounds	
	Baby on Room air maintaining well	Plan
	No BD/ no desaturation	1. TV = 180cc/kg/day
	No Vomiting	↓
	SPO2 : 99% on RA	21ml B_2H + 1tmf in 2ml (21 ml now, 4ml next feed)
	PR: 156/min	
	RR: 49/min	2. Kmc (6-8hrs)
	BP: 56/41 (49) mmHg	Oms } to continue
	CRT 2 secs	NVS
	Tolerating paladi feeds well	3. CBBS OD
		4. NP, TFT (R/V) Next prick
		Noted by Lavanya 5/6/26 @4pm

Docu. No. : RCHBH/FRM / CLINICAL / 088 (26)

-00656316 IP5-00173845
/ Of PENDYALA LAKSHMI
5-2026 0 Y 0 M 28 D
ALINIKANTA PANIGRAHY (F)

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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	2			
5	In-patient Medical record	1			
6	Doctors progress sheets	12			
7	Nursing plan of care and handover sheets	6+2			
8	Consultation sheet	1			
9	General consent for treatment				
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~~ Milk	1			
19	Consent for Radiological Investigations				
20	Consent for HIV test				
21	Anaestesia notes (Pre Anaesthesia& post)				
22	Neonatal Admission/Delivery/Physical Exam	2			
23	Medication Reconciliation	1			
24	Emergency Triage record				
25	Pre operative check list				
26	Surgical safety checklist				
27	Operation Theatre notes				
28	Nurses clinical Presentation	2			
29	TPR & BP chart	6			
30	Intake and Out take chart (fluid chart)	4			
31	Drug chart (Regular Prescription)	1			
32	Investigation Values (result sheet)	2			
33	Nebulization chart				
34	Nutritional review chart				
35	Intensive care unit (ICU Charts)				
36	Consent for Admission in PICU / NICU	1+1			
37	The Humpty dumpty scale	3			
38	Braden Q Scale	2			
39	Bed side check list	1			
40	PICU bed formula Dilution feeds				
41	Gastro monitoring chart				
42	Rch ED doctors note				
43	BP Monitoring chart				
44	RBS monitoring chart	1			
	13.5.26	1			
	Total No. of Pages	57			

Doc. No. : RCHBH/ FRM / GENERAL / 126

Signature and Date : 11/6/26

(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

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 16 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
5/6/26 @ 5.10pm	Seen by Dr. Nilesh	
	Taking paladay feeds in 15-20min with Spilling.	1) Continue 9paladay Rest OG feeds (1am-5am feeds)
		2) NP2 TFT, freeTy } Next prick of monday.
		3) Set Temp at 36.7°C
		4) GRBS-OD
		Sneha.
		Noted by Lavanya 5/6/26 @ 5:10PM

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Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 16 D (F)
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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 21 D (F)
Dr. NALINIKANTA PANIGRAHY

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: .... Day of Life: 23 PMA: 35+6

Term ☐ Preterm ☐ Gestation: 32+5 Corrected Gestational Age: .... Today's Weight: 1.427 ↑41gms

Overview	Problems		
	S.No.	**Current**	**Past Problems**
	1.	ModPt/VLBW	RDS → CPAP → HFNC → Low flow
	2.		NNJ
	3.		Feed intolerance
	4.		
	5.		
	6.		

Clinical Assessment

On RA, stable
Took 9 paladay feeds, spitout ⊕
KMC → 8hrs

HR – 157/m
RR – 51/m
SpO_2 – 95%
BP → 50/31/42.
Warmer → D9

Medications Used

Oslofer 3mg/kg/day
HMF
⊕ Ossopan D

Plan of Care:
→ TV – 180ml/kg/day → 21ml q2hly +HMF, (25ml +HMF, give 4ml, feed 4ml in next feed)
→ KMC, OMS, NNS.
→ PIV 4 12 paladay feed.
→ Q RBS OD
→ Doctor to buy
→ R/V NB, TFT on monday
Target SpO_2 90-100%
GRBS → 60-150mg/dl
U.O → 1 ml/kg/hr

Doctor's Name (Hand over given): PAS

Signature: [signature]

Date & Time: 6/6/26.

Doctor's Name (Hand over taken): ....

Signature: ....

Date & Time: ....

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 13 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
6/6/26		Seen by Dr. Nalinikanta Full paladai Crib care Shift out T/m plan Continue KMC. Vaccination including RSV. Monday - AABR - NBS - MP2.
6/6/26 2.30 pm.	Dr. NALINIKANTA PANIGRAHY Reg. No. TSMC/FMR/03605 6/6/26 10.41 AM Afternoon Rounds Baby on room air hemodynamically stable. NO - RD - accepting paladai feeds - EBM/cfw 21ml 2nd/hly (TV-180 cc/kg/day) - NO vomitings - Shift outside	Plan → TV - 180 cc/kg/day - full paladai - 21ml/2nd/hly - Continue KMC. - Crib care → plan to shift T/m → Vaccination include RSV after shift out

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI (F)
14-05-2026 0 Y 0 M 16 D
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		→ monday - NP2 / NBS / ~~AABR~~
		- kmc / OMS / NNS.
		- I/O charting 6th hrly
		- URBS - OD
		Paton.
		Noted by Lavanya 6/6/26 @ 3:pm.
6/6/26	Night rounds	Plan
	Baby on room air hemodynamically stable - NO RD / vomits - accepting palada feeds well	- TV - 180 ml/kg/day full paladai - 21 ml/2
		- KMC - 6-8 hrly
		→ NP2 / NBS / ~~AABR~~ - monday
		- Vaccination include RSV after shift out.
		Paton

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 21 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 24 PMA: 36 4/7

Term ☐ Preterm ☐ Gestation: 32 1/5 Corrected Gestational Age:..... Today's Weight: .....

Overview

S.No.	Problems – Current	Past Problems
1.	mod preterm / VLBW	RDS → CPAP → HFNC → low flow RA
2.		
3.		NNJ.
4.		feed intolerance
5.		
6.		

Clinical Assessment

on room air
hemodynamically stable
accepting full palatal feeds receiving.
KMC - 7 hrs
HR - 150/min
RR - 50/min
SpO2 - 98% c RA

Medications Used

Orofer
HMF
Ossopan-D

Plan of Care:

- TV - 180cc/kg/day - full palatal feeds -
- Plan to shift out today
- continue KMC.
- Vaccination & NBS/AABR. / NP2 - on Monday
- vaccination after shift out.

Doctor's Name (Hand over given): Pavan

Signature: Pavan

Date & Time: 24/6/26.

Doctor's Name (Hand over taken): .....

Signature: .....

Date & Time: .....

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		Seen by Dr. Nilesh Sir
	24d / 32+5 → 36wks	
	T 11gm	→ Shift to room today
		→ ~~25ml~~ 21ml / 2hrly (25ml + HMF → all total next feed)
		→ AABR, NPZ, NBS } Today
		→ Check wt forward today / Dr. Nandhu
		Noted by Jeevanani

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 18 D
Dr. NALINIKANTA PANIGRAHY (F)

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/6/25 11:30 AM	~~SHIFTING~~ NOTES	
	modPT/VLBW.	Plan
	on RA maintaining sats	→ IV-180ml/kg/day 21ml 2hrly
	Taking feeds well	25ml + HMF, rest kml in next feed.
	HR-167/min	
	SpO2-97%	→ BCG, OPV, RSV today
	weight-1.438 (↑11gm)	→ Hep B T/m.
		→ AABR, NBS, NP2 } T/M
		→ Temp (Axillary 2hrly)
		→ vitals documentation 2hrly
		→ w/f desat, RD⊕, while feeding.
	Noted by Jeevamani 7/6/25 @ 11:30 Am.	→ 1ml → 6 glass OMS
		→ 10 sheet 2hrly
		→ ROP 2S OD.
		[signature]

BAH-00656316 IPS-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
7/6/26 4PM	Afternoon Rounds	
	Baby hemodynamically stable on air	
	No apnea / desaturations	
	Tolerating feeds well 21ml 2hrly	
	KMC ongoing, comfortable	
	O/E - HR - 140/min	
	RR - 52/m	
	SPO_2 - 96%	
		c/o
		1) TV - 180 cc/kg/day
		21 ml 2hrly
		(25 ml EBM + 1 sachet HMF,
		Give 21 ml, rest in fridge, don't boil)
		2) Shift to T/M
		3) BCG, OPV, RSV after shifting
		AABR T/M
		Hep B day after tomorrow
		NBS, NP2 T/M
		4) CRBS OD
		5) KMC to continue any afternoon 6-8hrs
		6) I/O charting 8AM
		7) W/T apnea, desaturations, desaturations,
		Noted by Jeevamani 7/6/26 @ 4pm

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 25 PMA: 36+1 Week

Term ☐ Preterm ☐ Gestation: 32+5 Corrected Gestational Age: ..... Today's Weight: 1.453 (↑ 15gm)

Problems Week wt gain = 209

Overview

S.No.	Current	Past Problems
1.	Moderate Pre-term / VLBW	· RDS → CPAP → HFNC
2.	Feeder & grower	· Low flow → R/A
3.		
4.		· NNJ
5.		· Feed intolerence.
6.		

Clinical Assessment

- On room air
- Accepting all palada ē EBM + plus fortification ē HMF — Tolerating
- KME done
- Vitals - stable
- Euthermic

ⓘ NBS - sent

Medications Used

Drop Orofer — KT
Ossopan — D
HMF
Plan

- plan to shift to room today.

Plan of Care:

- 180 cc / kg / day → 23ml - 2hourly (Mix 1 HMF in 25ml → give 23ml from it)
- Vaccination
- AABR
- after shifting to room
- ↓ Ossopan — D 5drp @ 50mg / kg / day ⇒ 1ml / TID
- N/F vitals & Infant sos.

Doctor's Name (Hand over given): .....

Signature: .....

Date & Time: 8/6/26

Doctor's Name (Hand over taken): .....

Signature: .....

Date & Time: .....

PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	Weekly Weight gain = 209 gm	
	HC = 28.5	
	Length = 40 cm	
		S/B - on Nalin
8/6/26		
		- Stop Ossopan-D
		- BCG, OPV, RSV - today
		- Hep-B T/M
		- AABR - T/M
	Dr. NALINIKANTA PANIGRAHY Reg. No: TSMC/FMR/03605	Rupigal
		- ASK for FT4 TSH in same sample.
		Rain.

BAH-00656316 IPS-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/6/26	Nutritional	
	TV= 180 cc/kg/day	max wt → 1.45 kg
	23 w Q2H → 276 ml	
	Hmf → 11 sachets	
	Cal Pro	Calcium PO_4^{-2} Iron $MgSO_4$
	EBM 184.2 3	96.2 41.2 0.55 0
	67/1.1/35/15/0.2	
	Hmf 37 0.3	173.8 87 3.3 1452
	3.37/0.27/15.8/7.9	
	0.3/132	
	Orofer x7	4
	221.2 6	270 128.2 7.85 1452
	152.5 / 4.13 / 186.2 / 88.4 / 5.04 / 1001	
		2.1:1

1.347

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
8/6/26 4pm	Afternoon rounds Baby on Room air Hemodynamically stable with crib care No RD/No desaturation Accepting and tolerating feeds well No vomiting/no distension SpO_2: 97%. PR: 151/min RR: ~~46~~/min Passed urine & stool	Plan 1. TV = 180 cc/kg/day ↓ ~~2.5ml 2.5H~~ 23ml 2H IHmfin + 25ml EBM f/u paladi feeds 2) Trace NBS free Ty TSH Crib care 3) Shift to Room 4) vaccination BCG, OPV, RV today Hepatitis B (TIm) 5) ABR tomorrow
4:20pm Free Ty TSH NBS (N)		Noted by Sona 8/6/26 4pm Jay Sai

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

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DAILY ASSESSMENT AND HANDOVER SHEET OF NICU (NON-VENTILATED)

Day in NICU: ..... Day of Life: 26 PMA: 36+2 week

Term ☐ Preterm ☐ Gestation: 32+5 week Corrected Gestational Age: ..... Today's Weight: 1.438kg (↑11gm)

Problems

S.No.	Current	Past Problems
1.	moderate prl VLBW	RDS CPAP → HFNC → low flow → RA
2.	Feeder & grower	NNJ
3.		feed intolerance
4.		
5.		
6.		

Clinical Assessment

Baby on Room air
NO RD/NO desaturation
NO vomiting
Tolerating feed well
Passed urine & stool

RBS: 87mg/dl
KMC - 2hrs

SpO_2: 98%
PR: 139/m
RR: 46/m
CRT < 3sec

Medications Used

→ Orofer xT
→ Hmf

Plan of Care:

1) Tv=180 cc/kg/day → 23ml $@_2$ H + 1 Hmf in 25ml EBM
full paladi feeding
2) KMC to continue
3) OMS
4) Shift to Room
5) vaccination BCG, ~~Hepatitis B~~ RSV, OPV → Today
Hepatitis B (11m)
6) AABR
7) W/F RD/ Hypothermia

9/6/26

Doctor's Name (Hand over given): Supanjali
Signature:
Date & Time: 9/6/26

Doctor's Name (Hand over taken): Sai
Signature:
Date & Time: 9/6/26

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
10/06/26 8am	Morning Rounds	
	Moderate Preterm (32+5 wks)	Plan
	VLBW (1.3 kg) / RDS / NNJ	
	feed intolerance / slow establishment of feeds	1) TV - 180 cc/kg/day 23 ml 2hrly c HMF (1 HMF in 25 ml EBM) full palladai
	→ Day 27 32+5 → 36+3 wks	
	Baby hemodynamically stable on room air	
	No distress/apnea overnight	2) Recheck weight
	Tolerating feeds 23 ml 2hrly, no vomiting	3) Vaccination c BCG, RSV (50mg) OPV today
	Monitor temperature c Rooms	+ Hep B vaccination I/m/stat 11/06/26
	→ Today's weight - 1.773 kg	4) AABR today
	└ Rechecked weight → 1.464 kg (↑ 28 gm)	5) KMC, OMS to continue
	O/E - HR - 146/min	6) W/F hypothermia, distress
	RR - 48/min	
	SPO_2 - 99%	7) Temperature & SPO_2 monitoring Q6H
	NBS TSH fT4 / (D).	
	10/6/26 (signature)	(signature)

Docu. No. : RCHBH/FRM / CLINICAL / 088 (26)

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
		10/6/26 AABR- Hearing Assessment Bilateral responses are present Bilateral Pass 10/6/26. N. B Annamma a0103323 2PM
11/06/26 10AM	Morning Rounds Moderate preterm (32+5 wks) VLBW (1.3 kg) RDS HMD feed intolerance Slow establishing of feeds. ⇒ Day 28, 32+5 → 36+4 wks. Baby hemodynamically stable on room air. Baby warm / Icterus + (TCB 7.2) No apnea / desaturations overnight. Tolerating Pallaflo feeds 28ml/2hly No vomiting. ⇒ Today's weight – 1.508 kg (↑44 gm)	o/n 1) TV - 180 cc/kg/day 28 ml 2hly @ HMF Pallaflo (1 HMF in 25 ml EBM) 2) Hep B vaccination today ↳ HOLD 3) Temperature & SpO2 monitoring 6th 4) KMC, OMS to continue 5) BLS training 6) R/v Discharge today

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

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PROGRESS NOTES AND DOCTOR'S ORDER

Date & Time	Progress Notes	Doctor's Order
	o/E, HR - 146/m	
	RR - 46/m	
	SPO2 - 98%.	
	A/BS	
	TSH, fT4 (N)	
	AABR	
	Vacc^n ~ BCG, RSV, OPV - done	
10/6/26 11:45AM.		c/d/w Dr. Nalinikanth
		- Hep B Vaccination on follow up
		- BLS training & Discharge today

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

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 16 D (F)
Dr. NALINIKANTA PANIGRAHY

(2)

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RESULT SHEET

Date	11/6/26	8/6/26				
Time	4 Am	7:40AM				
Hb	13.9	12.3				
PCV	41.2	37.6				
RBC	3.62	3.32				
WBC	12.06	9.07				
N/L	36.3/48.2	32.6/54.0				
Platelets	455	631				
CRP						
ESR						
PCT						
RBS						
Na	134	133				
K	(6.3).	5.5				
Cl	106	104				
Ca/Mg	11.6/	10.9				
Phosphate	6.5	7.2				
Urea						
Creatinine						
ALP	343	294				
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						
8/6/26						
TSH → 6.73						
free T4 → 1.53						

Culture and Sensitivities : NBS → 17 OHP 3.6
G6PD 4.7
Galactose 3.2
Biotinidase 34.3
(N)

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

Others (ECG, Contrast Studies etc.,) : .....

BAI-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0Y0M0D4H (F)
Dr. NALINIKANTA PANIGRAHY

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RESULT SHEET

Date	14/5/26	15/5/26	15/5/26	18/5/26	18/5/26	21/5/26
Time	@11:30pm		@8:30pm		6pm	2pm
Hb	15.5		18.4			17.8
PCV	47.5		49.2			52
RBC	3.74		4.27			4.54
WBC	4.73		12.12			8.63
N/L	58.1/30.2		56.1/34.7			33/48
Platelets	258		202			365
CRP			5		5.0	
ESR						
[redacted]T						
RBS						
Na		140	141		138	
K		6.1	5.1		5.7	
Cl		113	114		108	
Ca/Mg						
Phosphate						
Urea			42			
Creatinine			1.1			
ALP						
SGPT						
SGOT						
T.Bill/Conj			5.5 < 0.1 / 5.4	14.5 → 0.2 / 143	8.6 → 0.7 / 79	12.9 → 0.1 / 12.8
[redacted]Protein						
S.Albumin						
S.Globulin						
A/G Ratio						
Uric Acid						
S.Amylase						
Sr.Lipase						
Blood Lactate						
S.Cholesterol						
PT/INR	23/1.8					
APTT	55					
CSF Protein / Sugar						
Cells						
N/L						

Date	21/05/26 -					
Time						
CUE - Alb						
CUE - Sugar						
CUE - Ketones						
CUE - PUS Cells						
CUE - RBC Cells						
CUE						
Stool Pus Cell						
OVA / Cyst						
Occult Blood						
TB	188.4					
TG	15.16					
TSH	11.72					

Culture and Sensitivities : .....

.....

.....

.....

Radiology : USG : .....

X-Ray : .....

ECHO : .....

CT : .....

MRI .....

Others (ECG, Contrast Studies etc.,) : .....

BAH-00656316 IPS-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0Y0M0D3H (F)
Dr. NALINIKANTA PANIGRAHY

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RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
14/5/26	@ 9pm	@61mg/dl	—	
15/5/26	@ 4AM	82mg/dl	10% Dex	
15/5/26	10AM	85 mg/dl	10% Dex	
15/5/26	@ 8pm	85mg/dl	10% Dex	
16/5/26	@ 2am	69mg/dl	10% Dex	
16/5/26	@ 8 Am	85mg/dl	10% Dex	
16/5/26	@6pm	98 mg/dl	10% DSOP	
17/5/26	6am	62 mg/dl	10% DSOP	
17/5/26	6pm	65 mg/dl	10% DSOP	
18/5/26	2:40 Am	88mg/dl	10% DSOP	
19/5/26	6 PM	77 mg/dl	feed + 10% DSOP	
20/5/26	5pm	136mg/dl	Feed + 10% DSOP	
21/5/26	6AM	91mg/dl	Feed + 10% DSOP	
22/5/26	6AM	75mg/dl	Feed + 10% DSOP	
24/5/26	6AM	85mg/dl	Full Feed	
25/5/26	6AM	76 mg/dl	Full Feed	
26/5/26	6AM	96mg/dl	Full Feed	
27/5/26	6AM	108mg/dl	Full feed	
28/5/26	6AM	82mg/dl	Full feed	
29/5/26	6Am	98 mg/dl	Full feed	
30/5/26	6am	132mg/dl	Full feed	
31/5/26	6Am	74mg/dl	Full feed	
1/6/26	6Am	99mg/dL	Full feed	
2/6/26	6Am	131mg/dL	Full feed	
3/6/26	6Am	99mg/dL	Full feed	
4/6/26	6am	67 mg/dl	full feed	
5/6/26	6am	77mg/dl	full feed	
6/6/26	6 AM	98 mg/dL	full feed	

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NALINIKANTA PANIGRAHY

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RBS CHART

Date	Time	RBS (mg/dl)	IVF %	Signature
7/6/26	6 Am	93mg dl	full feeds	Sf
8/6/26	6 Am	92 mg dl	full feed	Gowri
9/6/26	6 Am	87 mg/dl	full feed	Gowri

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NALINIKANTA PANIGRAHY

B/o pendyala Lakshmi Mounika

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DRUG CHART

Date of Admission: ..... Drug Allergies: NKA ☐ Not known any Drug Allergies

FOR THE SAFETY OF THE PATIENT

GENERAL - Ensure that all patient details are entered above. ONLY A DOCTOR SHALL WRITE MEDICATION ORDERS.

DOCTOR
- Please use only approved abbreviations (refer to Hospital's approved list of abbreviations).
- Use approved pharmaceutical names, BLOCK LETTERS, metric dosage. English instructions.
- Any changes in drug therapy must be ordered by a NEW PRESCRIPTION. Do not alter existing instructions.
- Discontinue a drug by drawing a line *I* through it and a similar line through subsequent recording panels.
- The date and time of stopping the drug along with the doctors name and sign must be mentioned.
- Only one chart should be in use at any one time. When the chart is full, a new supplement can be kept within this drug sheet folder.

NURSES
- Nurses must follow strictly the FIVE RIGHTS before administration of medication.
  1) Right Patient 2) Right Drug 3) Right Dosage 4) Right Route 5) Right Time
- AVOID TAKING VERBAL ORDERS. NO VERBAL ORDERS FOR HIGH RISK/HIGH ALERT MEDICINES (EXCEPT FIRST DOSE OF EPINEPHRINE DURING CPR). Follow Hospitals's Verbal Order Policy.

SOS / PRN (As Required Medication)

DRUG :				Date / Time
Dose	Route	Frequency	Start Date	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions:				

DRUG :				Date / Time
Dose	Route	Frequency	Start Date	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions:				

DRUG :				Date / Time
Dose	Route	Frequency	Start Date	
Doctor's Signature		Valid Period	Pharm.	
Additional Instructions:				

VERIFIED BY : Name

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NALINIKANTA PANIGRAHY

REGULAR PRESCRIPTIONS

Weight. 1.300 Kg Ward. NICU

VERIFIED

DRUG : INJ CAFFEINE CITRATE

Dose	Route	Frequency	Start Date
7 mg	I.V	OD	15/5

Name & Signature of the Doctor Starting the Drugs: Rupanjali

Additional Instructions: 5 mg / kg / dose

Daily Doctor's Endorsement by a Sign

Date / Time	15/5	16/5	17/5	18/5	19/5
	10 mg/kg/bolus				

Dose changed
STOP
Sneha
20/5/26

VERIFIED

DRUG : INJ CAFFEINE CITRATE

Dose	Route	Frequency	Start Date
9.75 mg	I.V	OD	15/5

Name & Signature of the Doctor Starting the Drugs: Rupanjali

Additional Instructions: 7.5 mg / kg / day

Daily Doctor's Endorsement by a Sign

Date / Time	20/5	21/5	22/5
	6am		

STOP
Sneha
22/5/26

VERIFIED

DRUG : ORAL CAFFEINE CITRATE

Dose	Route	Frequency	Start Date
10 mg	PO	OD	23/5

Name & Signature of the Doctor Starting the Drugs: N. Pratibha

Additional Instructions: 7.5 mg/kg/day

Daily Doctor's Endorsement by a Sign

Date / Time	23/5	24/5	25/5	26/5
	6AM			

Stop
Pratibha
(26/5/26)

VERIFIED

DRUG : HMF SAUFEET

Dose	Route	Frequency	Start Date
	PO	Every feed	22/5

Name & Signature of the Doctor Starting the Drugs: N. Pratibha

Additional Instructions: HMF + 30 ml EBM
Give 15 ml Saulfeet, next feed give another 15 ml.

Daily Doctor's Endorsement by a Sign

Date / Time	22/5	23/5	24/5	25/5	26/5	27/5	28/5	29/5

changed.

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y Of PENDYALA LAKSHMI
5-2026 0Y0M0D3H (F)
NALINIKANTA PANIGRAHY

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Sheet No: .....

REGULAR PRESCRIPTIONS

Weight 1.3/kg. Ward .....

DRUG : Syrup OSSOPAN-D

Dose	Route	Frequency	Start Dt.
2ml	PO	8H	28/05

Name & Signature of the Doctor Starting the Drugs: N. Prathibha.

Additional Instructions: 150mg/kg/day (Ca+2) of elemental calcium

Daily Doctor's Endorsement by a Sign

Date/Time: 28/5 6pm 8pm 10pm

Re written order @ Rupanjali 29/5/26.

DRUG : Syp OSSOPAN-D

Dose	Route	Frequency	Start Dt.
2.6ml	PO	8Hhourly	28/05

Name & Signature of the Doctor Starting the Drugs: Rupanjali

Additional Instructions: 150mg/kg/day of elemental Calcium

Daily Doctor's Endorsement by a Sign

Date/Time: 28/5 29/5 30/5 31/5 1/6 2/6 3/6 4/6 5/6 6/6 7/6 8/6

6am 8pm 10pm

changed dose 3/6/26

DRUG : HMF SACHET

Dose	Route	Frequency	Start Dt.
-	PO	Each feed	29/05

Name & Signature of the Doctor Starting the Drugs: N. Prathibha.

Additional Instructions: 1 HMF + 25ml EBM. → give 20ml, Remaining 5ml keep in fridge, use it for next feed, don't boil.

Daily Doctor's Endorsement by a Sign

Date/Time: 29/5 30/5 31/5 1/6 2/6 3/6 4/6 5/6 6/6 7/6 8/6 9/6

DRUG : DROFEN XT

Dose	Route	Frequency	Start Dt.
2ml	P/O	OD	4/6/26

Name & Signature of the Doctor Starting the Drugs: FAIZA

Additional Instructions: 3mg/kg/day

Daily Doctor's Endorsement by a Sign

Date/Time: 4/6 5/6 6/6 7/6 8/6

6 pm

Change dose 8/6

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NALINIKANTA PANIGRAHY

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Sheet No: ..... **REGULAR PRESCRIPTIONS** Weight ..... Ward .....

DRUG : ~~Syp OSTOPAN-D~~

Dose	Route	Frequency	Start Dt.
1 ml	P/O	TID	8/6/26

Name & Signature of the Doctor Starting the Drugs: Rupanjali

Additional Instructions: 50 mg / kg / day

Daily Doctor's Endorsement by a Sign

Date / Time 8/6

Stop 8/6/26 Rupanjali

DRUG : ORofER x7

Dose	Route	Frequency	Start Dt.
0.4ml	P/O	Q24H	8/6

Name & Signature of the Doctor Starting the Drugs: Sai

Additional Instructions: 3mg/kg/1 day 1ml = 10mg

Daily Doctor's Endorsement by a Sign

Date / Time 8/6 9/6 10/6

6PM Sai 5PM Sai

Journal (V)

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date / Time

DRUG :

Dose	Route	Frequency	Start Dt.

Name & Signature of the Doctor Starting the Drugs:

Additional Instructions:

Daily Doctor's Endorsement by a Sign

Date / Time

VERIFIED BY : Name

VERIFIED BY : Name

Docu. No. : RCHBH /FRM / CLINICAL / 108

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 10 D (F)
Dr. NALINIKANTA PANIGRAHY

Weight. 1.3kg Ward. N(2)

DRUG :		Date▸ Time		Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.
			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route	Start Date		Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

VARIABLE DOSE		Date▸ Time		Nurse Sig.		Nurse Sig.		Nurse Sig.		Nurse Sig.
DRUG :			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Route	Start Date		Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Name & Signature of the Doctor			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	
Additional Instructions:			Dose		Dose		Dose		Dose	
			Dr. Sign.		Dr. Sign.		Dr. Sign.		Dr. Sign.	

STAT / ONCE ONLY DRUGS

Date	Time	Medication	Dosage & Other Instructions	Route	Signature	Nurses
14/5/26	10 PM	Inj. CAFFEINE CITRATE	20mg/kg	IV	N.PM	

Baby Of PENDYALA LAKSHMI
14-05-2026 0Y0M0D3H (F)
Dr. NALINIKANTA PANIGRAHY

I.V. FLUIDS CHART

Weight. 1.3 Ward. NICU

Date	Time	Composition of I.V. Fluid (If infusion, mention ml./hr = Mcg/kg/min. etc)	Route	Flow Rate ml/hr	Doctor Sign	Nurse Sign	Date of Stopping	Doctor Sign	Nurse Sign
14/5/26	10pm	TV - 80 ml/kg/day 10% Dextrose + 3ml/kg Calcium gluconate	IV	2.6ml	N.P2		15/5/26	N.P2	
15/5/26		TV - 60 ml/kg/day 10% Dextrose + 3ml/kg Calcium gluconate	IV	2.5 ml	N.P2		Stop 15/5/26		
15/5/26	10:30pm	TV - 80 cc/kg/day 10% D + 3 ml/kg Calcium gluconate	I.V	2.3ml/h			16/05		
16/5/26	8am	TV - 40cc/kg/day 10% D + Ca3	IV	2.9ml			17/5		
17/5/26	2pm	TV=120ml/kg/day 10% ISO-P + 3ml/kg Ca. gluconate 2g/kg-Aminovein	IV	2ml			18/5		
18/5/26	2pm	TV - 140ml/kg/day 10% ISOP + 2gm/kg Aminovein	IV	3ml/h			19/5		
19/5/26	2pm	TV = 140ml/kg/day 10% ISOP + 2gm/kg Aminovein	IV	3ml			20/5		
20/5/26									

VERIFIED BY : Name ..... Signature .....

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 13 D (F)
Dr. NALINIKANTA PANIGRAHY

Doc. 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:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	AM	AM	PM	PM	PM	PM	PM	PM	AM	AM	AM	AM
Temperature (F)	36.5°C	36.6°C			36.6°C		36.6°C	36.6°C	36.6°C	36.7°C	36.7°C	36.7°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	62 (41) 28	71 (58) 51	K M C	K M C	45 (84) 28	K M C	62 (47) 40	61 (44) 35	58 (41) 32	58 (35) 23	57 (43) 36	59 (44) 35
Heart Rate (Number)	155	151	152	147	147	144	154	152	151	165	160	135
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	35	43	39	45	33	31	50	37	42	41	34	35
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	97%	98%	94%	99%	99%	98%	99%	98%	98%	95%	97%	97%
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	0	0	0	0	0	0	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP	PP

Note: BP does not score in early warning scoring

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

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Patient Sticker

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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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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)

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14-05-2026 0 Y 0 M 13 D (F)
Dr. NALINIKANTA PANIGRAHY

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

06/6/26.

INFANT (<1 year)

Children's Observation & Early Warning Scoring Chart

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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time:	8	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	Am	Am	pm	pm	pm	pm	pm	pm	Am	Am	Am	Am
Temperature (F)	*36.5°C	*36.5°C	*36.4°C	*36.5°C	*36.6°C	*36.6°C	*36.6°C	*36.7°C	*36.8°C	*36.8°C	*36.8°C	*36.8°C
Heart Rate (bpm) and Blood Pressure (mmHg) *	57 (90) 32	K M C	K M C	V	Crib Care	Crib Care	Crib Care					
Heart Rate (Number)	145	150	153	152	132	126	139	140	189	156	134	
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	39	41	35									
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	99%	98%	99%	96%	92%	98%	99%	100%	99%	100%	99%	
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	
GCS *	C	C	C	C	C	C	C	C	C	C	C	
TOTAL SCORE Number of shaded boxes	0	0	0	1	1	1	1	1	1	1	1	
Pain Score	0	0	0	0	0	0	0	0	0	0	0	
Observer's Initials	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	[illegible]	

ACTIONS NB: Scores 3 should be recorded overleaf	
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Patient Sticker

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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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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-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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

7/6/26

Date: 7/6/26 Time:	8 am	10	12	2	4	6	8	10	12	2	4	6
Doctor/Nurse/Family Concern?	am	am	pm	pm	pm	pm	pm	pm	pm	am	am	am
Temperature (F)	*96.4°C	*96.5°C	*96.4°C	*95.5°C	*98.2°C	*97.5°C	98.4°F	94.5°F	98.5°F	98.1°F		
Heart Rate (bpm) and Blood Pressure (mmHg) *	crib care.											
Heart Rate (Number)	142	150	132	142	132	142	145	135	135	146	180	165
Resp. Rate (bpm) (Over 1 Minute) *												
Resp Rate (Number)	(62)	(54)	(92)	(68)	(52)	(48)	(45)	(60)	(65)	(54)	(52)	(61)
Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	92%	96%	98%	92%	92%	96%	99%	96%	99%	99%	95%	100%
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	C	C	C	C	C	C	C	C	C	C	C	C
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	0
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials												

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CHILDREN'S OBSERVATION and EARLY WARNING SCORING TOOL

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INFANT (<1 year)
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EARLY WARNING SCORE: CHILDREN'S UNIT

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

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

98.4°F	98.2°F	98.6°F	98.6°F	98.8°F	98.8°F	98.4°F	98.5°F	97.3°F	98.7°F	97.5°F	98.5°F	98.7°F

Heart Rate (bpm) and Blood Pressure (mmHg) * — 190 / 180 / 170 / 160 / 150 / 140 / 130 / 120 / 110 / 100 / 90 / 80 / 70 / 60 / 50

Clinical case

Note: BP does not score in early warning scoring

Heart Rate (Number)	156	129	144	130	131	133	137	140	152	135	145	156

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

Resp Rate (Number)						140						

Resp Distress: Mod/ Severe / None / Mild												
Receiving O_2(l/min) O_2Saturations (%)	100%	100%	95%	98%	98%	94%	95%	98%	97%	96%	97%	96%
Conscious Level: Normal / Altered	N	N	N	N	N	N	N	N	N	N	N	N
GCS *	15	15	15	15	15	15	15	15	15	15	15	15
TOTAL SCORE Number of shaded boxes	1	1	1	1	1	1	1	1	1	1	1	1
Pain Score	0	0	0	0	0	0	0	0	0	0	0	0
Observer's Initials												

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EARLY WARNING SCORE: CHILDREN'S UNIT

Date: ..... Time: 8 | 10 | 12 | 2 | 4 | 6 | 8 | 10pm | 2AM | 6AM

Doctor/Nurse/Family Concern? Am | Am | Pm | Pm | Pm | Pm | Pm

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

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

CSB case

Heart Rate (Number)	154	153	141	139	136b/m	130bpm	140b/m	135b/m

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

70 / 60 / 50 / 40 / 30 / 20 / 10

Resp Rate (Number)					40b/m	40bpm	40b/m	40b/m

Resp Distress: Mod/ Severe / None / Mild								
Receiving O_2(l/min) O_2Saturations (%)	98%	99%	98%	97%	97%	99%	99%	99%
Conscious Level: Normal / Altered	N	N	N	N	N			
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	0	0
Pain Score	0	0	0	0	0	0	0	0
Observer's Initials								

ACTIONS

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Score 1	:	Continue normal observation by staff nurse
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- 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-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

Doc. 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: ..../05/26 Time:	10AM	2PM	6PM	10PM	2AM	6AM
Doctor/Nurse/Family Concern?						

Temperature (F)

	10AM	2PM	6PM	10PM	2AM	6AM
104						
103						
102						
101						
100						
99	98.7	98.6	98.5	98.1	98.3	98.5
98						
97						
96						
95						
94						

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

Note: BP does not score in early warning scoring

	10AM	2PM	6PM	10PM	2AM	6AM
190						
180						
170						
160						
150						
140						
130						
120						
110						
100						
90						
80						
70						
60						
50						
Heart Rate (Number)	145b/m	140b/m	130b/m	140b/m	135b/m	

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

	10AM	2PM	6PM	10PM	2AM	6AM
70						
60						
50						
40						
30						
20						
10						
Resp Rate (Number)	40b/m	40b/m	40b/m	40b/m	40b/m	
Resp Distress: Mod/ Severe / None / Mild						
Receiving O_2(l/min) O_2Saturations (%)	100%	97%	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	
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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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:

- 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.
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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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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-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

Doc. 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	
Resp Distress: None / Mild	
Receiving O_2(l/min)	
O_2Saturations (%)	
Conscious Level: Normal	
Conscious Level: 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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	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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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-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
4-05-2026 0 Y 0 M 18 D (F)
Dr. NALINIKANTA PANIGRAHY

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FLUID CHART

Sheet No. : 4/6/26

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
	08:00 am											
	09:00 am	EBM +TPN+	21ml	10 min			—			10 ml		
	10:00 am											
	11:00 am	EBM +TPN+	21ml	15 min			Not passed			8 ml		
	12:00 pm											
	01:00 pm	EBM +TPN+	21ml	20 min						—		
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	EBM +TPN+	21ml	10 min			Not passed			13 ml		
	04:00 pm											
	05:00 pm	EBM +TPN+	21ml	8 min						8 ml		
	06:00 pm						—					
	07:00 pm	EBM +TPN+	21ml	13 ml			—			—		
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM +TPN+	21ml	8 ml			passed			10 ml		
	10:00 pm											
	11:00 pm	EBM +TPN+	21ml	11 ml						6 ml		
	12:00 am											
	01:00 am	EBM +TPN+	21ml	10 ml			passed			bl		
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	EBM +TPN+		21ml						6ml		
	04:00 am											
	05:00 am	EBM +TPN+		21ml			passed			8ml		
	06:00 am											
	07:00 am	EBM +TPN+		21ml						7ml		
Total Intake :		252 ml				**Total Output :**				84ml		

Total 24 hrs. Intake	193.8cc/kg/day	Total 24 hrs. Output	2.6cc/kg/hr

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 21 D (F)
Dr. NALINIKANTA PANIGRAHY

FLUID CHART

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

Sheet No. : .....

5/6/26

TV - 180 cc/kg/day
TF - 21 ml
B. wt - 1.3 kgs

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	O.G							
	08:00 am											
	09:00 am	EBM	21ml				–			9ml		
	10:00 am						small Passed				0	
	11:00 am	EBM	21ml							11ml		
	12:00 pm											
	01:00 pm	EBM	21ml				–			8ml		
Total Intake :						**Total Output :**						
	02:00 pm											
	03:00 pm	EBM	21ml	NNS			–			10ml		
	04:00 pm						small Passed				0	
	05:00 pm	EBM	21ml							9ml		
	06:00 pm											
	07:00 pm	EBM	21ml				–			7ml		
Total Intake :						**Total Output :**						
	08:00 pm											
	09:00 pm	EBM+HMF	21 Ml				Not passed			10 Ml		
	10:00 pm							NA				
	11:00 pm	EBM+HMF	21 Ml				–				0	
	12:00 am									14 Ml		
	01:00 am	EBM+HMF			21 Ml		Not passed					
Total Intake :						**Total Output :**						
	02:00 am											
	03:00 am	EBM+HMF			21 Ml		–			11 Ml		
	04:00 am							NA				
	05:00 am	EBM+HMF			21 Ml		Passed				0	
	06:00 am									12 Ml		
	07:00 am	EBM+HMF	21 Ml				Passed					
Total Intake : 252 Ml						**Total Output :** 101 Ml						

Total 24 hrs. Intake	193 cc/kg/day	Total 24 hrs. Output	3.2 cc/kg/hour.

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 21 D (F)
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BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

FLUID CHART

TV = 180 cc/kg/day
TF = 21 ml
B.wt = 1.4 kgs

Sheet No. : .....

6/06/26

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
	08:00 am											
	09:00 am	EBM	2ml				–			9ml		
	10:00 am										0	
	11:00 am	EBM	2ml				Small passed			10ml		
	12:00 pm							–				
	01:00 pm	EBM	2ml				–			8ml		
Total Intake :						**Total Output :** 27						
	02:00 pm											
	03:00 pm	EBM	2ml				–			9ml		
	04:00 pm											
	05:00 pm	EBM	2ml				passed			8ml	1	
	06:00 pm											
	07:00 pm	EBM	2ml				–			7ml		
Total Intake :						**Total Output :** 24						
	08:00 pm											
	09:00 pm	EBM	2ml				passed			9ml		
	10:00 pm											
	11:00 pm	EBM	2ml				passed			10ml	0	
	12:00 am											
	01:00 am	EBM	2ml				passed			6ml		
Total Intake :						**Total Output :** 25ml						
	02:00 am											
	03:00 am	EBM	2ml				passed			7ml		
	04:00 am										0	
	05:00 am	EBM	2ml				passed			6ml		
	06:00 am											
	07:00 am	EBM	2ml				–			9ml		
Total Intake :		252ml				**Total Output :**	22ml	95ml				

Total 24 hrs. Intake	180 cc/kg/day	Total 24 hrs. Output	2.9 cc/kg/day

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 14 D (F)
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FLUID CHART

Rainbow® Children's Hospital
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BirthRight™ BY RAINBOW HOSPITALS
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Sheet No. : ..... 7/6/26.

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							
	08:00 am									8m		
	09:00 am	EBM+ HMF	21ml				—			8ml		
	10:00 am										0	
	11:00 am	EBM+ HMF	21ml				passed			9ml		
	12:00 pm											
	01:00 pm	EBM+ HMF	21ml				—			8ml		
Total Intake : 63 ml						Total Output : 25						
	02:00 pm											
	03:00 pm	EBM+ HMF	21ml				—			8ml		
	04:00 pm											
	05:00 pm	EBM+ HMF	21ml				—			7ml	0	
	06:00 pm											
	07:00 pm	EBM+ HMF	21ml				—			6ml		
Total Intake : 63 ml						Total Output : 21ml						
	08:00 pm											
	09:00 pm	EBM HMF	21ml				—			8ml		
	10:00 pm											
	11:00 pm	EBM HMF	21ml				—			10ml	0	
	12:00 am											
	01:00 am	EBM HMF	21ml				—			11ml		
Total Intake : 63ml						Total Output : 29ml						
	02:00 am											
	03:00 am	EBM HMF	21M				—			8ml		
	04:00 am											
	05:00 am	EBM HMF	21ml				—			10ml		
	06:00 am											
	07:00 am	EBM HMF	21ml				—			9ml		
Total Intake : 63ml						Total Output : 27						

Total 24 hrs. Intake	173cc/kg/day	Total 24 hrs. Output	1.6 cc/kg/day

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

8/6/26

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BirthRight™ BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

FLUID CHART

Sheet No. : .....

1. All measurements in ml.
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		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	EBM+ HMF			21ml		-			8ml	0	
	10:00 am											
	11:00 am	EBM HMF			21ml		Passed			6ml	0	
	12:00 pm											
	01:00 pm	EBM+ HMF			21ml		-			8ml	0	
Total Intake : 63ml						Total Output : 22ml						
	02:00 pm											
	03:00 pm	EBM+ HMF			21ml		-			16ml	0	
	04:00 pm											
	05:00 pm	EBM+ HMF			23ml		-			8ml	0	
	06:00 pm											
	07:00 pm	EBM+ HMF			23ml		Passed			12ml	0	
Total Intake : 67ml						Total Output : 30ml						
	08:00 pm											
	09:00 pm	EBM HMF			23ml		passed			13ml	0	
	10:00 pm											
	11:00 pm	EBM HMF			23ml		passed			14ml	0	Gauri
	12:00 am											
	01:00 am	EBM HMF			23ml					13ml	0	
Total Intake : 69ml						Total Output : 40ml						
	02:00 am											
	03:00 am	EBM HMF			23ml		Not passed			10ml	0	
	04:00 am											
	05:00 am	EBM HMF			23ml		Not passed			11ml	0	
	06:00 am											
	07:00 am	EBM HMF			23ml					12ml	0	
Total Intake : 69ml						Total Output : 33ml						

Total 24 hrs. Intake	178 cc/kg/day	Total 24 hrs. Output	3.5 cc/kg/day

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

9/6/26

FLUID CHART

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

BirthRight BY RAINBOW HOSPITALS
Your Right to a Safe Delivery

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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
9/6												
	08:00 am											
	09:00 am	EBM+HMF	23 ml				—			6 ml	—	
	10:00 am											
	11:00 am	EBM+HMF	23 ml				-			10 ml	—	
	12:00 pm											
	01:00 pm	EBM+HMF	23 ml				Passed			8 ml	—	
Total Intake :						**Total Output :**						
9/6	02:00 pm	EBM+HMF	23 ml				-			10 ml	—	
	03:00 pm						|					
	04:00 pm						|			✓		
	05:00 pm	EBM+HMF	23 ml				NP				NA	Vidyam
	06:00 pm						|					
	07:00 pm						|					
Total Intake :						**Total Output :**	M-0			M-2		
	08:00 pm	EBM	20 ml				|					
	09:00 pm						|					
	10:00 pm	EBM	20 ml				|			✓		
	11:00 pm						NP				NA	slimish
	12:00 am	EBM	20 ml				|			✓		
	01:00 am						|					
Total Intake :						**Total Output :**				M-0 U-2		
	02:00 am	EBM	20 ml				|					
	03:00 am						|					
	04:00 am	EBM	20 ml				|			✓		
	05:00 am						NP				NA	slimish
	06:00 am	EBM	20 ml				|			✓		
	07:00 am						|					
Total Intake :						**Total Output :**				M-0 U-2		

Total 24 hrs. Intake	EBM 236 ml Jerkem.	Total 24 hrs. Output	M-1 U-8

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

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
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FLUID CHART

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3. 24 hrs. total to be entered in the kardex in RED.

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
20/6/26												
	08:00 am	EBM	20ml									
	09:00 am											
	10:00 am	EBM	20ml									
	11:00 am											
	12:00 pm	EBM	20ml									
	01:00 pm											
Total Intake :							M-D			**Total Output :** U-3		
20/6	02:00 pm	EBM	20ml									
	03:00 pm											
	04:00 pm	EBM	23ml									
	05:00 pm											
	06:00 pm	EBM	23ml									
	07:00 pm	EBM	23ml									
Total Intake :							M-0			**Total Output :** U-2		
	08:00 pm	EBM	25ml									
	09:00 pm											
	10:00 pm	EBM	25ml									
	11:00 pm											
	12:00 am	EBM	25ml									
	01:00 am											
Total Intake :										**Total Output :** M-0U-3		
	02:00 am	EBM	25ml									
	03:00 am											
	04:00 am	EBM	25ml									
	05:00 am											
	06:00 am	EBM	25ml									
	07:00 am											
Total Intake :										**Total Output :** M-0 U-3		

Total 24 hrs. Intake	EBM 283ml	Total 24 hrs. Output	M-0U-11

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

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 24 D (F)
Dr. NALINIKANTA PANIGRAHY

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Your Right to a Safe Delivery

FLUID CHART

Sheet No. : 11/6/26

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.

		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**	

H-00656316 IP5-00173845
by Of PENDYALA LAKSHMI
05-2026 0 Y 0 M 28 D (F)
NALINIKANTA PANIGRAHY

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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.

		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**	

H-00656316 IP5-00173845
by Of PENDYALA LAKSHMI
05-2026 0 Y 0 M 28 D (F)
NALINIKANTA PANIGRAHY

FLUID CHART

Rainbow® Children's Hospital
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BirthRight™ BY RAINBOW HOSPITALS
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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.

		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**	

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 : IP5-00173845 **Admit Date** : 14-May-2026 **Admit Time** : 11:05 PM **UHID** : BAH-00656316

Patient Details :

Patient Name	: Baby Of PENDYALA LAKSHMI MOUNICA	**Age**	: 0 D
Guardian	: Mr DINESH SUNKARA	**DOB**	: 14-05-2026 08:36 PM
Gender	: Female	**Religion**	:
Occupation	:	**Martial Status**	: Single
Address (H)	: H NO 286, GREEN PARK COLONY, ROAD NO 5, NEAR SAMA NARSHIMHA REDDY GARDEN, CHAMPA PET, Kothapet Hyderabad Telangana INDIA 500035	**Phone No**	: 9063267758/ 9642187799
		E-mail	: CHOUDARY7799@GMAIL.COM

Admission Details :

Bed Type : NICU **Bed No** : NICU 242 **Ward Name** : 2F-NICU 1

Room No : NICU 242 **Admission Type** : First Visit

Contact Details :

Name : Mr DINESH SUNKARA **Relationship** : Father

Contact Address : H NO 286, GREEN PARK COLONY, ROAD NO 5, NEAR SAMA NARSHIMHA REDDY GARDEN, CHAMPA PET, Kothapet Hyderabad Telangana INDIA 500035 **Phone No** : 9063267758 / 9642187799

Signature

Doctor Details :

Doctor Name : Dr. NALINIKANTA PANIGRAHY **Specialisation** : NEONATAL INTENSIVE CARE

Referral Doctor : Self **Phone No** :

Co-Consultant :

Payment Details :

Payment Mode : Cash **Deposit Amount** : 0.00

Payor Name : NIVA BUPA HEALTH INSURANCE COMPANY LTD

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0Y0M0D3H (F)
Dr. NALINIKANTA PANIGRAHY

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ADMISSION CRITERIA – NICU

Admission / Transfer from:

☐ Emergency ☐ Outpatient (OPD) ☐ Ward ☑ Operation Theater ☐ Others: .....

Tick (✓) any of the following criteria requiring admission / transfer to NICU

Prematurity and Low Birth Weight Babies:

- ☑ Respiratory Distress
- ☐ Congenital Heart Disease
- ☐ Suspected or CONFIRMED SEPTICAEMIA
- ☐ Suspected or Diagnosed Meningitis
- ☐ UTI
- ☐ Septic Arthritis or Osteomyelitis
- ☐ Congenital Infections (Varicella, Pneumonia)
- ☐ Acquired Viral Illness
- ☐ Hyperbilirubinemia
- ☐ Severe Dehydration
- ☐ Bleeding Manifestations
- ☐ Neonatal Seizures
- ☐ Birth Asphyxia
- ☐ Surgical Problems
- ☐ Suspected Metabolic Disorders
- ☐ Dysmorphic Features
- ☐ Congenital Serious Cutaneous Disorder

Major Surgical Problems:

- ☐ Congenital Hydrocephalus
- ☐ Neural Tube Defects
- ☐ Choanal Atresia
- ☐ Trachea- Esophageal Fistula
- ☐ Esophageal Atresia
- ☐ Congenital Diaphragmatic Hernias
- ☐ Eventration of Diaphragm
- ☐ Congenital Cystic Adenomatoid Malformation
- ☐ Intestinal Atresias
- ☐ Gastric Volvulus
- ☐ Cleft lip or Cleft Palate
- ☐ Ompalecele / Gastrochiasis
- ☐ Anorectal Malformations
- ☐ Gross Hydrouretero Nephrosis
- ☐ Posterior Urethral Valves
- ☐ Congenital Tumors
- ☐ Cystic Hygromas

Criteria for shifting inborn babies from wards to NICU:

- ☐ Any Baby with Lethargy, Poor Feeding, Gross Weight Loss and Dehydration
- ☐ Any Baby with Severe Jaundice Requiring Exchange Transfusion
- ☐ Any Baby with Blood Sugar Abnormalities (Hypo or Hyperglycaemia)
- ☐ Any Baby with Temperature Instability
- ☐ Any Baby with Signs of Sepsis
- ☐ Any Baby with Seizures
- ☐ Out Born Babies: (Including Walk in Patients to the Emergency Room / Neonatal Transports)

ignature of the Doctor: .....

ne of the Doctor: N. Prasanna

& Time: 15/5/26 11:30am

lo. : RCHBH /FRM / CLINICAL / 206

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 0 D 3 H (F)
Dr. NALINIKANTA PANIGRAHY

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DISCHARGE CRITERIA – NICU

Discharge to:

☐ HDU / Step down ICU ☐ Ward ☐ Outside Facility ☐ Others: .....

Tick (✓) any of the following criteria requiring discharge / transfer from NICU

- ☐ The clinical status of the patient no longer warrants constant medical and nursing monitoring or specialized services originally required.
- ☐ Preterm baby once attained weight of >1.5kgs and crossing the PMA of >35 weeks of gestation.
- ☐ Preterm babies maintaining normal temperatures (36.5-37.5°c) in room temperature.
- ☐ All preterm, low birth weight babies and babies who had critical course in the NICU

Signature of the Doctor: .....

Name of the Doctor : .....

Date & Time: .....

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 26 D (F)
Dr. NALINIKANTA PANIGRAHY

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NEWBORN MONITORING FORM

Date of Birth	: 19/5/26		New Born Screening	:	
Time of Birth	: 8:35 pm.		TFT	:	
Mode of Delivery	: LSCS		OAE	:	
Birth Weight	: 1.300gm		Mother's Blood Group	: A +ve	
Head Circumference	:		Baby's Blood Group	: A +ve	
Length	:		Anomaly Scan	:	
Red Reflex	:		Vaccination	OPV, BCG, RSV-50mg given on 10/6, given Mamatha	

Date	Weight	Type of Feed	Quantity	Temperature	Signature
9/6/26	1.471 kg (ward wt)	EBM			Sona
9/6/26	1.459 kg	EBM	23ml	98.0°F	Kalyani
10/6/26	1.773	EBM	20ml	98.1F	Shirisha (1.464 kg rechecked)
11/6/26	1.508	EBM	20ml	98.5F	Shirisha

Docu. No. : RCHBH /FRM / CLINICAL / 132

(P.T.O)

Date	Time	Investigation	Result	Order No.	Signature

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ACTIVITY RECORD FOR BILLING

BAH-00656316 IP5-00173845
Baby Of PENDYALA LAKSHMI
14-05-2026 0 Y 0 M 21 D (F)
Dr. NALINIKANTA PANIGRAHY

Name :_____

UHID No. : _____ Consultant: _____ Dept : _____

Date of Admission: _____ Time : _____ Date of Discharge : _____ Time: _____

Room / Bed No : _____ Ward : _____ Suggested Billable bed type : _____

WARD TRANSFERS

Date	Time	From	To	Signature of Nurse

Cross Consultation Visit

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

INVESTIGATIONS

Date	Investigations	Order No.	Signature
5/6/26	RBS	26056809	
6/6/26	GRBS	26057116	
7/6/26	GRBS	26057464	
8/6/26	NP2	26057706	Gowri
8/6/26	RBS	26057705	Gowri
9/6/26	RBS	26057705	Gowri
10/6/26	AABR	26081825	Annamma