## **FORM B: DAILY INTAKE MONITORING RECORD**

**Objective:** To record the quantity and frequency of feeding of the baby admitted in the KMC unit in 24 hours (8 AM - 8 AM), so as to compare the total quantity to the total feeding requirement. To be filled by nurse on duty in the KMC

Day: Tuesday Hospital Reg. No.: 4562 Date (dd/mm/yyyy): 11/04/2020

Mother Name : Renu Baby age(in days): 3 days Total feeding requirement for the

day: \_\_\_\_\_

	Time of			eeding (fil	method and l in where a	l measur pplicable	rement e)			S	uppleme	nts Re	eceive	d	Nurse Signature
S.No.		eding Direct Expressed Mixed Feeding (in 1	ıg (in ml	n ml) Other:* IV Type				(name and dose)							
	( From, to)	feeding (in min)	(EBF) (in ml)	EBF	Formula	Other	Net	In ml/hr	In drop/min	Vit D3	Calcium	нмғ	Iron	Other	
1	1:00 PM														
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															

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Day: Tuesday Hospital Reg. No.: 4562 Date (dd/mm/yyyy): 13/04/2020

Mother Name: Renu Baby age(in days): 3 days Total feeding requirement for the

day:

	Time of		F		method and l in where a					Supplements Received					Nurse Signature
S.No.		Direct breast	Expressed breast feed	N	Mixed Feedin	g (in ml	)	Other:*	IV Type		(name a	name and dose)			Signature
	(110111, 00)	feeding (in min)	(EBF) (in ml)	EBF	Formula	Other	Net	In ml/hr	In drop/min	Vit D3	Calcium	нмғ	Iron	Other	Signature
1	1:00 PM														
2															
3															
4															
5															
6															

7								
8								
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Day: Tuesday Hospital Reg. No.: 4562 Date (dd/mm/yyyy): 14/04/2020

Mother Name : Renu Baby age(in days): 3 days Total feeding requirement for the

day: \_\_\_\_\_

	Time of		F	eeding (fil	method and l in where a	measur pplicable	ement			S	Nurse				
S.No.	feeding	Direct breast	Expressed breast feed	Mixed Feeding (in ml) Other:* IV Type						Supplements Received (name and dose)					Signature
	(11011, 10)	feeding (in min)	(EBF) (in ml)	EBF	Formula	Other	Net	In ml/hr	In drop/min	Vit D3	Calcium	нмғ	Iron	Other	
1	8:00 AM														
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															