

Post-Natal Daily Neonatal Check list

Department of Paediatrics, Kalafong hospital

Date:		DOB:		Day of life:		Gest Age:		Birth weight:		Male		Female	
Name:				Mom's Age:		P G A		NVD C/S		Contraception:			

History / Observations	Normal		Abnormal		Action	Examination	Normal		Abnormal		Action
Mom's health while pregnant	Good		*DM, other:		*Sonar / Clinic	Colour	Pink		Blue, Pale, Plethoric, Jaundice*		Bili, CRP
Mom's age	Not learner or AMA		AMA with little milk* Learner *		Clinic	Temperature	Normal		Cold / Hot		KMC
Pregnancy	Single		Multiple: Twins / Triplets		Sonar	Hydration / oedema	Well hydrated	None	Dehydrated	Present	Consult
PROM / Presentation	No	Vertex	Yes	*Breech	*Sonar	Head Shape	Normal, Caput only		Bruising, Cephalhaematoma		Bili
Special investigations:	Rh+	RPR -	Rh-	RPR +	Bili / Rx	CNS	Good tone, flexed		Hypotonic, lethargic, jittery		BI sugar
VCT / Last Tested	VCT -	<3 months	VCT +	>3 months *	Retest	Reflexes: Moro / Suck	Present		Weak, absent, asymmetrical		Consult
Viral Load / Birth PCR	LDL	Taken	Raised	Not taken	Refer / Take	CVS: Auscultate, pulses	N heart sounds, N pulses		Murmur heard absent pulses		Sonar
+Mom on Rx / Baby on NVP	Yes	Yes	No	No	Start Rx	Resp	Resp rate <60 / no distress		Resp rate >60, grunt, apnoea		Admit
Birth weight / Gest age	>2,5kg	>37w	<2,5kg *	<37w *	Clinic / Dietician	Abd	Soft not distended, tender, mass		Distended / tender / mass		Consult
Breastfeeding /Breastmilk	Well	Yes, enough	Struggling	Not enough	Dietician	Vomiting	None or possetting		Yes / milk / bile coloured		Consult
Assessment:	Problems:					Umbilicus	Clean & dry		Wet, smelly, redness, bleeding		Consult
Healthy baby						Eyes	Red reflex present, no discharge		Absent red reflex, Conjunctivitis		Refer, Rx
No Clinical problems						Dysmorphisms	Absent		Present:		Consult
Investigations:	(Sonar, Bili, CRP, blood glucose)					Genitalia	Normal female / male		Abnormal female / male		Consult
						Extremities	Normal		Extra digits, club feet*		Orth refer
Management:	Await mom D/C / D/C home/ Keep in ward for:					Urine / Stool	Passed urine / stool		No urine / stool passed		Check BF

Date :															
Examination:	Normal	Abnormal	Normal	Abnormal	Normal	Abnormal	Normal	Abnormal	Normal	Abnormal	Normal	Abnormal	Normal	Abnormal	
Breastfeeding	Yes	Struggling													
Breastmilk supply	Good	Not enough													
Urine	Passed Urine	No													
Stool	Passed Stool	No													
Colour	Pink	Blue, Pale, Jaundice													
Hydration	Well hydrated	Dehydrated													
Oedema	None	Present													
CNS	Good tone, flexed	Hypotonic, lethargic													
CVS	N sounds, no murmurs	Murmur heard													
Resp	RR <60 / no distress	RR >60, grunt, apnoea													
Abd	Soft not distended / tender	Distended and/or tender													
Vomiting	None or possetting	Yes / milk / bile coloured													
Umbilicus	Clean & dry	Wet, smelly, redness													
Eyes	No discharge	Conjunctivitis													
Follow-up Criteria in Ward 4 Tuesday Clinic:		Assessment:													
AMA & DM with little / no milk, Learners <18yr; LBW		Investigation:													
F/U date:															
Book in diary in ward 4. Discuss patients with Dietician.		Management:													

Sonar should be booked as out-patient (if not urgent). Mom to go to OPD2 @ 7:00 to get patient file → Sonar → POPD. Hip sonars: Refer to Orthopaedics if Harcke 4 and 5. Harcke 1-3 (hips normal).

*BF = Breastfeeding; DM= Diabetes Mellitus - clinic if little milk; AMA = advanced maternal age with little milk, Learner = < 18 year; RTHC = Road to health chart; LBW = low birth weight