



NEON. DISCHARGE SUMMARY: BASIC

Make four copies: 1 for mother (to be inserted in paed. outpatient file), 1 in inpatient file, 1 stapled to road to health book with percentile chart and 1 in ward discharge file

Family and Maternal Details:

Mother's name:		ID No:		Mothers birth date/ Age:	
Fathers name:		Primary care giver:			
Social history:	(Employment, Grants, electricity, water etc)				
Clinic attendance at:		Gest. at 1 st booking:		No of visits:	
HIV test result:		Viral load:		ARVs commenced:	Y / N
Rx PMTCT only:		Lifelong:		Feeding choice:	
Syphilis Rapid:		RPR:		Titre:	
Antenatal risk factors:					

Baby Details:

Date of Birth:		Date of discharge:		Discharged from:	
Gestation at birth:	wks.	Disch. gestation:	wks.		
Place of Birth:		Mode:		Apgars:	
Birth weight:	g	Birth Length:	cm	Birth COH:	cm
Discharge weight:	g	Disch. Length:	cm	Disch. COH:	cm
Problems and resuscitation at birth:	Apgar <7at 5 mins.? Cord pH:				

Problem List:

Problem	Curr ✓	Investigations and Management	ICD 10 Code
Prematurity:			
Sepsis:			
Jaundice:			
Neonatal encephalopathy:			
Congenital abnormality:			
Other:			

Relevant Investigations: (If not mentioned above)

Management and procedures:

Nutrition:	NPO	days	UVC	days	Feeds on discharge:	
Resp. support:	Nasal Prongs:	days	CPAP	days		
Antimicrobials & duration:						
Other meds:						
HIV	Birth PCR:		Management:			
Jaundice:	Phototherapy:	days	Double phototherapy.	days	Highest TSB:	

Ongoing care required:

Immunizations given:	Birth:		6 weeks:	
Medications: (Include supplements and ARVs)	Medication:		Dose:	Frequency:
Further management:				
Sign:		Print:		MP No.

Follow up: Summary, KMC FU & percentile chart in RTHB? Y / N				
CCG/Clinic Name:		Contact No.		
Clinic	Frequency (Guide)	Date	Place	Mother signs received
PHC	3 days, 6 weeks, 10 weeks			
ARV	3-6 days, 10/14 weeks, monthly			
POPD	1-4 weeks			
KMC	3-6 days; Weekly-2weekly			
Neonatal /High risk	1 month			
ROP				
Audiology				

KMC follow up requirements:

1. Follow up on Day 3 & 7 post discharge at **KMC clinic/POPD** and then 1-2 weekly at PHC until 40 weeks/2500g.
2. Plot weekly weight on attached Preterm Growth Chart.
3. Copy this chart if more space is required for assessments.

Refer for Readmission if:

1. Baby's temperature is less than 36°C or more than 37°C despite effective skin to skin position
2. Baby is not gaining at least 15-20grams/day
3. Baby is not sucking or feeding well. (At least 8 feeds in 24hrs)
4. Baby is lethargic or pale or blue
5. Excessive vomiting or loose stools
6. Baby has fast/noisy breathing, rib/chest in drawing or nasal flaring.

Re-counsel & monitor closely if: Baby did not arrive in KMC position / received less than 20hrs skin to skin position in 24hrs

Assessments Day 3 and 7 Post Discharge KMC clinic /POPD (Hospital)

	Day 3	Day 7
Date:		
Weight: (Gain at least 15-20 grams/day)		
No. of breastfeeds in last 24 hrs:		
Did baby come in skin-to-skin position?		
Duration of skin-to-skin in last 24 hrs:		
Is baby warm? Temperature:		
Is baby pink, active & responsive?		
Fast, noisy breathing, chest indrawing, flaring?		
Skin rash, eye discharge, umbilical cord dry?		
Education given:		
Other Comments/findings/actions:		
Print & sign name:		

Assessments 1-2 weekly -PHC. Complete below if FU in POPD. Use IMCI- 0-2months assessment form if FU in PHC

Date:			
Weight: (Gain at least 15-20 grams/day)			
No. of breastfeeds in last 24 hrs:			
Head circumference & Length			
Did baby come in skin-to-skin position?			
Duration of skin-to-skin in last 24 hrs?			
Is baby warm? Temperature:			
Is baby pink, active & responsive?			
Fast, noisy breathing, chest indrawing, flaring?			
Skin rash, eye discharge and cord dry?			
Other Comments/findings/actions:			
Print & sign name:			

If baby needs readmission:

Date: **Reasons:**

Graduated from KMC:

Date: **Gestation:** **Weight:**

Abbreviations: KMC=Kangaroo mother care; POPD=Paediatric outpatients department; PHC= Primary healthcare clinic; hrs=hours, FU=Follow up