

## NEWBORN NURSERY PRESENTATION EXAMPLE:

Baby ( Boy / Girl) \_\_\_\_\_ (Last Name) \_\_\_\_\_  
Born on (Date) \_\_\_\_\_ at \_\_\_\_\_ (Time) \_\_\_\_\_  
Estimated gestational age (EGA) was \_\_\_\_\_ weeks by dates and \_\_\_\_\_ weeks by exam  
Birth weight was \_\_\_\_\_ grams

### Maternal Information

Mom is a \_\_\_\_\_ year old G (Number of pregnancies) P (Term, Preterm, Abortions, Living)  
Blood type \_\_\_\_\_  
Prenatal Labs (Rubella, Hepatitis B, RPR / VDRL, HIV, GC, Chlamydia) (Positive or Negative) \_\_\_\_\_  
Group B Strep (GBS) (Positive or Negative) (If GBS +, was she treated and when?) \_\_\_\_\_  
Prenatal care began on (Date) at \_\_\_\_\_ weeks gestation and the mother had \_\_\_\_\_ visits

### Labor and Delivery Information

Type of delivery \_\_\_\_\_  
If C-Section, what was the indication? \_\_\_\_\_ (Repeat, failure to progress, etc)  
(Artificial / Spontaneous) rupture of membranes at \_\_\_\_\_ (Time) \_\_\_\_\_  
Fluid was \_\_\_\_\_ (Clear / Meconium-Stained)  
Baby was \_\_\_\_\_ (Bulb suctioned / Given PPD/Given blow-by oxygen / NG suctioned / ET suctioned)  
Complications during resuscitation of the baby?  
Apgar scores were \_\_\_\_\_ at 1 minute with points off for (Color, heart rate, respiratory effort, reflex irritability, muscle tone) and \_\_\_\_\_ at 5 minutes with points off for \_\_\_\_\_

### Exam

Weight (grams), Length (cm), and Head Circumference (cm) and give percentiles for each, vital sign (temp, pulse, resp. rate - give ranges for each, initial BP)  
Physical Exam (note pertinent positives)

### Ins and Outs

Baby is (Breast / Bottle) feeding (How often, how long on each breast, is baby latching on, does baby have good suction, problems? / Which formula, how often, how much, problems?)  
Voids (include time of first void of life, and number of voids in past 24 hours)  
Stools (include time of first stool of life, and number of stools in past 24 hours)

**Other Information:** Hct, RPR (date done), Labs, including Accu checks?  
Vitamin K  
Erythromycin  
Jaundice (particularly if an ABO set-up)  
Cultures?  
Is circumcision desired? If so, has consent form been signed?  
Hepatitis B received?  
Metabolic screen / PKU done?  
Hearing screen?  
Type of follow-up (where / when)