| Value Community Community Community Extension Family name: Given name(s): Address: Date of birth: Sex: M F | Queensland (Affix identification label here) | | | | | | |
|--|--|----------|--|---|-----------------------------|--|--|
| Neonatal Clinical Pathway Community Extension | | | | URN: | | | |
| Given name(s): Address: Paclility: | No an atal Olimical Dathway | | | Family name: | | | |
| Address: Date of birth: Sex: M F 1 | | | • | Given name(s): | | | |
| Facility: | Community Extension | | | . , | | | |
| Tick to indicate care attended to. Rule out if not applicable. Record and sign all variances in progress notes. Proceeding according to discharge plan | - "" | | | | | | |
| Category First Sirth method: Vaginal Assisted birth LSCS | Facility: | | | Date of birth: | Sex: M F I | | |
| Review | Tick to indicate of | care | attended to. Rule out if not applicable. Recor | d and sign all variances in progress notes. | 8 → Key ▲ Midwife / Nursing | | |
| Proceeding according to discharge plan | <u> </u> | H. | - | birth LSCS | | | |
| Baby Observations Baby's age: | Review | | | | | | |
| Seaby Observations Seasy | | | | | | | |
| Skillottic Ski | | | Birth weight: g Today's we | eight:g Weight change: | g | | |
| Baby's age: Weeks Clear Discharge Tear duct massage EBM Swab taken | • | • | Skin colour: Normal Jaundice | ☐ Birthmark ☐ SBR taken | | | |
| Umbilicus: Clear and dry Moist Cord detached Offensive Swabs collected | | | | • – – | | | |
| Groin and buttocks: Pink and dry Excoriated Bleeding Other: | Baby's age: | | | | I | | |
| Groin and buttocks: Pink and dry Excorated Bleeding Other: | wooka | | | | | | |
| Nutrition A Breast feeds per day: | weeks | | Groin and buttocks: Pink and dry | Excoriated Bleeding Other: | | | |
| Artificial feeds per day: - Artificial feeds per day: - Breastfeed observed: | days | | Behaviour: Alert Sleepy Jitt | tery | | | |
| Breastfeed observed: | Nutrition | A | Breast feeds per day: | | | | |
| Comments | | | Artificial feeds per day:/ EE | BM Amount offered: | | | |
| Comments | | | Breastfeed observed: Full assist | Partial assist Optimal positioning and | d attachment | | |
| Number of wet nappies per day: Pale Dark Odour Urates Bowels: Appropriate for age Number of bowel motions per day: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles Comments: Milestones: Hearing: Hearing: SIDS / safe sleeping / temp Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | Elimination | A | | | | | |
| Bowels: Appropriate for age Number of bowel motions per day: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles Comments: | | | | <i>y</i> : | | | |
| Number of bowel motions per day: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles Comments: - Milestones: Hearing: Hearing: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Milestones: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Milestones: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Milestones: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Milestones: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Normal feeding: Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Normal feeding patterns | Pale Dark Odour Urates | | | | | | |
| Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles Comments: - Milestones: - Hearing: Education Sticky Transitional Mustard Yellow with curds Yellow and soft Pebbles - Milestones: - Hearing: - SIDS / safe sleeping / temp - Settling techniques / tired signs / normal sleep cycles - Normal feeding patterns | | | | Nov. | | | |
| Comments: Development up to 6 weeks Hearing: Hearing: SIDS / safe sleeping / temp Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | | | | | nd soft Pebbles | | |
| Development up to 6 weeks - Hearing: Hearing: Bducation SIDS / safe sleeping / temp - Settling techniques / tired signs / normal sleep cycles - Normal feeding patterns | | | Comments: | | _ | | |
| Hearing: Hearing: SIDS / safe sleeping / temp Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | Development | A | | | | | |
| Education SIDS / safe sleeping / temp Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | up to 6 weeks | | • Milestones: | | | | |
| Education SIDS / safe sleeping / temp Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | | | | | | | |
| Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | | | • Hearing: | | | | |
| Settling techniques / tired signs / normal sleep cycles Normal feeding patterns | Education | A | | | | | |
| • Normal feeding patterns | Education | | SIDS / safe sleeping / temp | | i i | | |
| | | | Settling techniques / tired signs / norm | nal sleep cycles | | | |
| Midwife Comments: | | | Normal feeding patterns | | | | |
| | Midwife Comm | ents | s: | | | | |
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| Print name: Designation: Signature: Date: | | | | | | | |

| | Queensland Government |
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Neonatal Clinical Pathway Community Extension

| (Affix identification label here) | | | | | | | |
|-----------------------------------|--|------|---|---|--|--|--|
| URN: | | | | | | | |
| Family name: | | | | | | | |
| Given name(s): | | | | | | | |
| Address: | | | | | | | |
| Date of birth: | | Sex: | M | F | | | |

| | | | Date o | f birth: | Sex: | M F | | | | |
|---|-------------|--|--|-------------------------------------|---|---------|--|--|--|--|
| Tick to indicate care attended to. Rule out if not applicable. Record and sign all variances in progress notes. | | | | | | | | | | |
| Category | <u>8</u> —∗ | | | | | | | | | |
| Review | • | Today's date:// | | | | | | | | |
| | | Proceeding according to discharge plan | | | | | | | | |
| | | Birth weight: g Today's weight: g Weight change: g | | | | | | | | |
| Baby Observations | A | Skin colour: Normal Jaundice Birthmark SBR taken | | | | | | | | |
| Observations | | • Eyes: Clear Discharge Tea | • Eyes: Clear Discharge Tear duct massage EBM Swab taken | | | | | | | |
| Baby's age: | | | Comments: | | | | | | | |
| | | Umbilicus: | Umbilicus: Clear and dry Moist Cord detached Offensive Swabs collected | | | | | | | |
| weeks | | Groin and buttocks: Pink and dry | Excor | iated Bleeding Other: | | | | | | |
| days | | Behaviour: Alert Sleepy Jit | tery | | | | | | | |
| Nutrition | • | Breast feeds per day: | | | | | | | | |
| | | Artificial feeds per day:/ Eli | 3M Am | ount offered: | | | | | | |
| | | • ☐ Breastfeed observed: ○ Full assist | ○ Par | tial assist Optimal positioning and | attachme | nt | | | | |
| Elimination | A | Urine: | | | | | | | | |
| | | Number of wet nappies per da | | | | | | | | |
| | | Pale Dark Odour Bowels: Appropriate for age | Urat | es | | | | | | |
| | | Number of bowel motions per | day: | | | | | | | |
| | | | | Yellow with curds Yellow and | d soft | Pebbles | | | | |
| | | Comments: | | | | | | | | |
| Development up to 6 weeks | A | • Milestones: | | | | | | | | |
| | | | | | | | | | | |
| | | Hearing: | | | | | | | | |
| - 1 0 | | | | | | | | | | |
| Education | | SIDS / safe sleeping / temp | | | | | | | | |
| | | • Settling techniques / tired signs / normal sleep cycles | | | | | | | | |
| | | • Normal feeding patterns | | | | | | | | |
| Midwife Comm | ents | S: | | | | | | | | |
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| Print name: | | Designation: | | Signature: | | Date: | | | | |