

Criteria Led Discharge

Baby's Name and DOB: _____

Baby's CHI or Hospital Number: _____

Date of Admission: _____

Criteria for discharge (please tick all that apply):

- Observations currently within normal parameters (heart rate, respiratory rate, temperature)
- Breathing unassisted in room air for ≥ 6 hours
- Normal blood sugar
 - ≥ 2 for term infant in first 48 hours after birth
 - ≥ 2.6 for term infant after 48 hours of age
 - ≥ 2.5 for 35 or 36 week infant

Has had 2 good feeds

Other (please specify criteria):

Signed _____

(Must be a middle grader or consultant)

This baby achieved all of the above selected criteria at (time and date): _____
and there are no new concerns with the baby.

Baby's pre-ductal sats _____ and post-ductal sats _____ as measured on Masimo Rad G monitor. (Must be green pathway)

Time antibiotics due handed over to Tier 1 medical staff (if appropriate): _____

Signed _____

(Must be a middle grader, team leader or SCBU co-ordinator)

The baby must be discharged to PNW with a discharge letter completed. The baby should complete minimum 24 hours NEWS unless an alternative plan is made by the PNW consultant.