Record And Demographic Details

Unique ID  
(hospital ID)[data clerk ID][0001]  
(Use format [hosp id][record id])

Hospital ID  
○ A  
○ B  
○ C  
○ D

Data entry person ID  
○ A  
○ B  
○ C  
○ D

Patient number (IP No.)  
__________________________________  
(e.g. 01)

Today's date  
__________________________________

*Obtain this information from the admission record*

Date of admission  
__________________________________  
((for empty date type 1915-01-01))

Date of birth  
__________________________________  
((for empty date type 1915-01-01))

Age documented?  
○ Yes  ○ No

Age less than 24 hours?  
○ Yes  ○ No

Age (days)  
__________________________________  
(Enter age in days.)

Sex  
○ Male  ○ Female  ○ Unknown/missing

Referred IN from another facility?  
○ Yes, from another facility  
○ Yes, from home  
○ No, inborn/not born before admission (BBA=no)  
○ Empty
<table>
<thead>
<tr>
<th>Facility referred from not on lookup list?</th>
<th>Not on list</th>
</tr>
</thead>
<tbody>
<tr>
<td>Specify facility not on lookup list</td>
<td></td>
</tr>
<tr>
<td>Residency: Location</td>
<td></td>
</tr>
<tr>
<td>--------------------</td>
<td></td>
</tr>
<tr>
<td>(this can be the location of the mother)</td>
<td></td>
</tr>
</tbody>
</table>

- Bahati
- Dandora
- Eastleigh north
- Eastleigh south
- Embakasi
- Githurai
- Highridge
- Huruma
- Kabete
- Kahawa
- Kamiti
- Kamukunji
- Kangemi
- Karen
- Kariobangi
- Kariobangi south
- Kariokor
- Kasarani
- Katani
- Kawangware
- Kayole
- Kenyatta/golf course
- Kiambaa
- Kiambaa s/area
- Kibera
- Kihara
- Kilimani
- Kinoo
- Kitenkela
- Kitisuru
- Koma rock
- Korogocho
- Laini saba
- Langata
- Lavington
- Lukenya
- Makadara
- Makongeni
- Maringo
- Mathare
- Mugumoini
- Mukuru kwa njenga
- Mukuru nyayo
- Mutuini
- Nairobi west
- Ngara
- Ngong
- Njiru
- Nkaimoronya
- Nyathuna
- Oloolua
- Ongata rongai
- Parklands
- Pumwani
- Riruta
- Roysambu
- Ruai
- Ruaka
- Ruara
- Ruiru
- Sera ngombe
- Settled area
- Starehe
- Umoja
- Uthiru/ruthimitu
- Viwanda
- Waitakha
- Empty
- Viwandani
Location not on look up list?

Specify location not on look up list

○ Not on list

______________________________
Residency: Sub-location

(this can be the sub-location of the mother)
- Viwandani (ind. Area)
- Golf course
- Woodley
- Nairobi west
- Langata
- Kibera
- Mugumoini
- Empty
- Kia maiko
- Mabatini
- Mlango kubwa
- City centre
- Gatina
- Kirigu
- Ngando
- Dandora A
- Dandora B
- Mowlem
- Kayole
- Komarock
- Imara daima
- Upper parklands
- Mukuru kwa njenga
- Maili saba
- Njiru
- Savannah
- Ngundu
- Githurai
- Kamuthi
- Kahawa west/Juja K
- Kiwanja
- Kongo soweto
- Mwiki
- Gitathuru
- Baba dogo
- Nyayo
- Nyayo highrise
- Garden
- Njathaini
- Mathare 4A
- Mathare North
- Utalii
- Lenana
- Lindi
- Makina
- Silanga
- Laini saba
- Hardy
- Bomas
- South C
- Gatwikira
- Olympic
- Ofafa maringo
- Hazina
- Landi mawe
- Airbase
- California
- Gikomba
- Gorofani/Bondeni
- Gichagi
- Mountain View
- Maziwa
- Spring Valley

Sub-location not on look up list?

- Not on list
Specify sub-location not on look up list
**History Taken At Admission**

*Obtain this information from the clinical admission notes ONLY*

<table>
<thead>
<tr>
<th><strong>Gestation at birth (weeks)</strong></th>
<th>(No. of whole weeks. If empty enter -1)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Is Apgar score documented?</strong></td>
<td>☐ Yes  ☐ No</td>
</tr>
<tr>
<td><strong>Apgar 5 minute</strong></td>
<td>☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ Empty</td>
</tr>
<tr>
<td><strong>Apgar 10 minute</strong></td>
<td>☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10 ☐ Empty</td>
</tr>
<tr>
<td><strong>Birth weight (in kg)</strong></td>
<td>(in kilograms. Only enter in kg or g, not both. If empty enter -1)</td>
</tr>
<tr>
<td><strong>Birth weight (in g)</strong></td>
<td>(in grams. Only enter in kg or g, not both. If empty enter -1)</td>
</tr>
<tr>
<td><strong>Admission weight (in kg)</strong></td>
<td>(in kilograms. Only enter in kg or g, not both. If empty enter -1)</td>
</tr>
<tr>
<td><strong>Admission weight (in g)</strong></td>
<td>(in grams. Only enter in kg or g, not both. If empty enter -1)</td>
</tr>
<tr>
<td><strong>Mode of delivery</strong></td>
<td>☐ Spontaneous vaginal (SVD) ☐ Assisted vaginal (Includes Forceps, Vacuum) ☐ Breech ☐ Caesarean section (C/S) ☐ Empty</td>
</tr>
</tbody>
</table>
**Newborn resuscitation previously performed**
- Yes
- No
- Not recorded/empty

**HIV status**
- Not exposed
-Exposed
- Not recorded/empty

*check mother's details too*

**Length of illness (days)**
- ((Duration for longest presenting complaint, enter -1 if unrecorded))

---

**Assessment**

*Make sure that you enter information about HISTORY and not assessment*

<table>
<thead>
<tr>
<th>Condition</th>
<th>Yes</th>
<th>No</th>
<th>Empty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prolonged ROM (&gt;18 hours)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Fever</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Difficulty breathing</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Diarrhoea</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Severe vomiting (vomits everything)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Difficulty feeding/breastfeeding</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Convulsions</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Partial/focal fits</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Apnoea</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
Examination At Admission

*Obtain this information from the clinical admission notes ONLY*

Vital signs

Temperature (degrees Celsius) (in degrees celsius to one decimal place e.g. 37.0 (enter -1 if empty))

Respiratory rate/Resp Rate/RR (per minute) (indicate per minute (enter -1 if empty))

Pulse value/Heart rate/HR (per minute) (indicate per minute (enter -1 if empty))

Oxygen saturation documented

- Yes
- No

Oxygen saturation (%)

Airway and Breathing

Cry

- Normal
- Weak
- Hoarse
- Empty

Indrawing

- none/mild
- severe
- sternum
- Empty

Breathing

<table>
<thead>
<tr>
<th>Stridor</th>
<th>Yes</th>
<th>No</th>
<th>Not recorded/empty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Central Cyanosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grunting</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air entry bilateral</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Crackles/crepitations</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Circulation

<table>
<thead>
<tr>
<th>Femoral pulse</th>
<th>Normal</th>
<th>Weak</th>
<th>Empty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capillary Refill Time (CRT)</td>
<td>X-indeterminate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------</td>
<td>-----------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 second or less</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2 seconds</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>3 seconds</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>4 seconds</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>5 seconds</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>6 seconds or more</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Not recorded/empty</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Murmur</th>
<th>Yes</th>
<th>No</th>
<th>Empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Pallor/Anaemia</th>
<th>none</th>
<th>yes, but not classified</th>
<th>yes, +(mild/moderate)</th>
<th>yes, +++(severe)</th>
<th>empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Skin cold up to</th>
<th>Hand</th>
<th>Elbow</th>
<th>Shoulder</th>
<th>No cold</th>
<th>Empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Disability</th>
<th>Yes</th>
<th>No</th>
<th>Not recorded/empty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Can suck/breastfeed</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Stiff neck</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Bulging fontanelle</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Irritable</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Reduced movement/floppy</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Umbilicus</th>
<th>Clean</th>
<th>Local pus</th>
<th>Pus + red skin</th>
<th>Empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>General Examination</th>
<th>Bruising</th>
<th>Rash</th>
<th>Pustules</th>
<th>Normal</th>
<th>Empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Jaundice (Yellowness of eyes)</th>
<th>none(0)</th>
<th>yes, but not classified</th>
<th>yes, +(mild/moderate)</th>
<th>yes, +++(severe)</th>
<th>empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Size for gestational age</th>
<th>Normal</th>
<th>SGA/wasted/small</th>
<th>LGA/large</th>
<th>Empty</th>
</tr>
</thead>
</table>
Abnormalities

- Skull
- Limbs / spine
- Palate / face
- Genitals / anus
- Dysmorphic
- Gastrointestinal
- Other
- None
- Empty

(check all that apply)

Other abnormality, please specify

Skin pinch (seconds)

- 0 sec/immediate
- 1-2 sec
- >2 sec
- empty
**Investigations At Admission**

*Obtain this information from the clinical admission notes ONLY*

<table>
<thead>
<tr>
<th>Test Ordered</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bilirubin test ordered</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lumbar puncture (LP) test ordered</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Admission Diagnoses

*Obtain this information from the clinical admission notes ONLY*

<table>
<thead>
<tr>
<th>Clear primary admission diagnosis?</th>
<th>Yes</th>
<th>No</th>
<th>Empty/No diagnosis</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Select 'Empty' if no diagnosis is available)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary admission diagnosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Accompanying other twin</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ AKI</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Admitted due to mother’s condition</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Admitted for observation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Albinism</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ BA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Birth trauma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Brachial plexus Injury</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Burns</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Caput Succedaneum</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Cephalohaematoma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Cerebral palsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Chest malformation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ CBBA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Chorioamnitis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Cleft palate</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ CHD</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ CTEV</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Cysts</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Dehydration</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Poor feeding</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ DIB</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Distended abdomen</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ EONs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Epispadia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Erb’s palsy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Extra digit on hand</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Facial oedema</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Febrile convulsions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Frothing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Gastrointestinal bleeding</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Grunting respiration</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Haematoma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Hepatitis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Hypersecretion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Hypoglycaemia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Hypospadia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Hypothermia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ HIE</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Imperforate anus</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Infection exposure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ IURG</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ neonatal jaundice,NNJ</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Jointed penis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Left eye medial strabismus</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Leg hyperextension in delivery</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Lipoma</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ LA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Large for gestational age,LGA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ MA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ MBA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Cesarean section,CS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Mother has no breast milk</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Mothers drug abuse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Nasal blockage/Blocked nostrils</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ NEC, NEC</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Neonatal Anaemia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Neonatal convulsions</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ NM</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ NNS,EONS,</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ NNT</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ NRDS,RDS, Respiratory Distress Syndrome</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Paraphimosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Phimosis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Pneumonia</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Pneumonitis/pulmonitis</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Polycythaemia Vera</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Poor apgar score</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Postdatism</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>○ Premature</td>
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Primary admission diagnosis not listed?

○ Not on list

Specify primary admission diagnosis not listed

__________________________________

(Specify diagnosis)
Admission diagnosis 1

- Accompanying other twin
- AKI
- Admitted due to mother’s condition
- Admitted for observation
- Albinism
- BA
- Birth trauma
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- Postdatism
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Renal failure
Rhesus incompatibility
Risk of sepsis /infection
Scrotal swelling
Septic Pustules
Septic Shock
Sero-reactive mother/Sero exposed
Severe Birth asphyxia
STI
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Shoulder dystocia
Skin rashes
SGA
Soft tissue injury
Spina Bifida
Spinal dysraphism
Squint
Swollen face due to pubis presentation
Swollen forehead
Thigh mass
Twin delivery
Umbilical hernia
Undescended testes
Admission diagnosis 2

- Accompanying other twin
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- Admitted due to mother's condition
- Admitted for observation
- Albinism
- BA
- Birth trauma
- Brachial plexus Injury
- Burns
- Caput Succedaneum
- Cephalohaematoma
- Cerebral palsy
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Swollen forehead
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Undescended testes
Admission diagnosis 3

- Accompanying other twin
- AKI
- Admitted due to mother's condition
- Admitted for observation
- Albinism
- BA
- Birth trauma
- Brachial plexus Injury
- Burns
- Caput Succedaneum
- Cephalo-haematoma
- Cerebral palsy
- Chest malformation
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Undescended testes

Specify any other admission diagnoses

(Specify diagnoses, separating each by :)

Other admission diagnoses

○ Yes  ○ No
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Specify any other admission diagnoses

(Specify diagnoses, separating each by :)

- LBW
- preterm
- PEM
- Renal failure
- Rhesus incompatibility
- Risk of sepsis /infection
- Scrotal swelling
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- Septic Shock
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- Squint
- Swollen face due to pubis presentation
- Swollen forehead
- Thigh mass
- Twin delivery
- Umbilical hernia
- Undescended testes
**Drug Treatment Prescribed At Admission**

*Obtain this information from the clinical admission notes/treatment sheet ONLY*

Is there a treatment sheet in the file?  
○ Yes  ○ No  
(CHECK AND ASCERTAIN BEFORE YOU SELECT "NO")

### Antibiotics

Benzyl/Crystalline Penicillin (Xpen) prescribed?  
○ Yes  ○ No

**Route**
○ I.M  ○ I.V  ○ empty

**Dose**

(Amount prescribed per dose (enter -1 if not recorded))

**Units of dose**  
○ IU  ○ mg  ○ MU (megaunit)  ○ Empty

**Frequency**
○ OD/once a day/24hrly  
○ BD/twice a day/12hrly  
○ TID/TDS/three times a day/8hrly  
○ QID/4 times a day/6hrly  
○ STAT  
○ Empty

Gentamicin prescribed?  
○ Yes  ○ No

**Route**
○ I.M  ○ I.V  ○ empty

**Dose**

((enter -1 if not recorded))

**Units of dose**  
○ mg  ○ Empty

**Frequency**
○ Once per day/once daily (OD)  
○ 12 hourly  
○ 8 hourly  
○ 6 hourly  
○ Empty

### Additional treatment

Additional drugs prescribed during admission  
○ Yes  ○ No
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<td>□ Bactroban cream</td>
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<td>□ Brufen</td>
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<td>□ Candid B mouthwash</td>
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Kacin
Keftaz
Lanomycin
Lasix
Lefrusid
Levamisole
Lotrimin
Metacycline
Methyldopa
Metronidazole
Micort-HC
Mixavit syrup
Multivitamins
Mupirocin cream
Mycostatin
Neotack
Neurontin
Nevimune
Nevir
Nevirapine
Nevivir
No Rash cream
Norphyl
Nutracort
Nystatin suspension
Panadol
Paracetamol
Pediamycin
Pedsol
Phenetron
Phenobarb
Phenobarbital
Phylocontin
Piriton
Prednisone
Prednizen
Qualaquin
Quinine
Ranferon
Ranitidine
Reducid
Salbutamol
Saline nasal drops
Solvazinc, Solvazine
Sulbut
Sulfatrim
Tazid
Terramycine
Tetracycline eye ointment
Trivagizole
Truphylline
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<td>Folate</td>
</tr>
<tr>
<td>Folic acid</td>
</tr>
<tr>
<td>Fortum</td>
</tr>
<tr>
<td>Fraclox</td>
</tr>
<tr>
<td>Fungistine</td>
</tr>
<tr>
<td>Furosemide</td>
</tr>
<tr>
<td>Fusid</td>
</tr>
<tr>
<td>Gabapentin</td>
</tr>
<tr>
<td>Gabatin</td>
</tr>
<tr>
<td>Gabix</td>
</tr>
<tr>
<td>Hexadrol</td>
</tr>
<tr>
<td>Hydrocortisone cream</td>
</tr>
<tr>
<td>Ibuprofen</td>
</tr>
<tr>
<td>Iron supplements</td>
</tr>
<tr>
<td>Supplements</td>
</tr>
</tbody>
</table>
Kacin
Keftaz
Lanomycin
Lasix
Lefrusid
Levamisole
Lotrimin
Metacycline
Methyldopa
Metronidazole
Micort-HC
Mixavit syrup
Multivitamins
Mupirocin cream
Mycostatin
Neotack
Neurontin
Nevimune
Nevir
Nevirapine
Nevirol
No Rash cream
Norphyl
Nutracort
Nycostat
Nystatin suspension
Panadol
Paracetamol
Pediamycin
Pedsol
Phenetron
Phenobarb
Phenobarbital
Phylocontin
Piriton
Prednisone
Prednizone
Qualaquin
Quinine
Ranferon
Ranitidine
Reducid
Salbutamol
Saline nasal drops
Solvazinc, Solvazinc
Sulbut
Sulfatrim
Tazid
Terramycine
Tetracycline eye ointment
Trivagizole
Truphylline
Ultac
Valium
Ventolin
Viramune
Vitamin B9
Vitamin K
Zantac
Zeefee
Zinc oxide
Zinc sulphate
Zincate, Zincate
Other drugs 3

- Adol
- Ala-scalp
- Albendazole
- Albenza
- Aldomet
- Amifer
- Amikacin
- Amikin
- Aminophyline
- Amodiaquine
- Amoxicillin/Clavulanate potassium
- Ampicillin/Cloxacillin
- Ampiclo dawa
- Ampiclox
- Antiseptic Baths
- Artemether/lumefantrine
- Augmentin
- Axylin
- Bactrim
- Bactroban cream
- Bestum
- Brufen
- Calpol
- Candid B mouthwash
- Ceftazidine
- Chlorphenamine
- Cincifran
- Cipro
- Ciprofloxacin
- Coartem
- Comaquin
- Cortril ointment
- Cortrimazole
- Cotrimoxazole
- Cough syrup
- Dawaflox
- Dawastin
- Decadron
- Desenex
- Dexamethasone
- Dexasone
- Diastat
- Diazepam
- Diodex
- Efferalgan
- Epigard
- Epinil
- Ergamisole
- Erythrocin
- Erythromycin
- Fefol
- Flagyl
- Flavoquin
- Floxapen
- Fluclox
- Flucloxacillin
- Folate
- Folic acid
- Fortum
- Fraclox
- Fungistin
- Furosemide
- Fusid
- Gabapentin
- Gabatin
- Gabix
- Hexadrol
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- Ibuprofen
- Iron supplements
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Valium
Ventolin
Viramune
Vitamin B9
Vitamin K
Zantac
Zeefee
Zinc oxide
Zinc sulphate
Zincate, Zincate
<table>
<thead>
<tr>
<th>Other additional drugs, please specify</th>
<th>(Specify drugs, separating each by :)</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Receiving ARV prophylaxis?</th>
<th>Yes</th>
<th>No</th>
<th>Not recorded/empty</th>
</tr>
</thead>
</table>

*Checking the whole file*

<table>
<thead>
<tr>
<th>Diazepam prescribed at any time during inpatient care?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>
Supportive Care Prescribed At Admission

**Oxygen prescribed at admission for first 24 hours**

<table>
<thead>
<tr>
<th>Oxygen ordered?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Route of oxygen administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nasal Catheter</td>
</tr>
<tr>
<td>Nasal prongs</td>
</tr>
<tr>
<td>Nasal (with no indication of type)</td>
</tr>
<tr>
<td>Simple mask</td>
</tr>
<tr>
<td>Mask with a reservoir</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Not recorded/empty</td>
</tr>
</tbody>
</table>

**Feeds prescribed at admission for first 24 hours**

<table>
<thead>
<tr>
<th>Feeds prescribed at admission?</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Type of feeds prescribed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expressed Breast Milk (EBM)</td>
</tr>
<tr>
<td>Neonatal formula</td>
</tr>
<tr>
<td>Cow's milk</td>
</tr>
<tr>
<td>Mixed feeding</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Empty</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Time to start feeds (after admission)</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt; 1 hr</td>
</tr>
<tr>
<td>1-2 hrs</td>
</tr>
<tr>
<td>&gt;2hrs</td>
</tr>
<tr>
<td>Empty</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Feeding route prescribed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nasogastric tube</td>
</tr>
<tr>
<td>Cup and spoon</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Empty</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Feed Volume (ml)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(total volume in mls per feed (enter -1 if empty))</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Frequency of administration</th>
</tr>
</thead>
<tbody>
<tr>
<td>hrly</td>
</tr>
<tr>
<td>2hrly</td>
</tr>
<tr>
<td>3hrly</td>
</tr>
<tr>
<td>4hrly</td>
</tr>
<tr>
<td>5hrly</td>
</tr>
<tr>
<td>6hrly</td>
</tr>
<tr>
<td>Empty</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Duration of feed prescribed (hours)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(enter -1 if empty)</td>
</tr>
</tbody>
</table>
### Fluids prescribed at admission for first 24 hours

<table>
<thead>
<tr>
<th>Fluids prescribed at admission using intravenous (I.V) route?</th>
<th>☐ Yes ☐ No</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>IV fluids prescribed</th>
<th>Half strength darrow (HSD)</th>
<th>Half strength darrow with 5% DW</th>
<th>10% DW (D10W)</th>
<th>Normal Saline (NS)</th>
<th>Ringers Lactate/Hartmanns (RL)</th>
<th>5% DW (D5W)</th>
<th>Other</th>
<th>Empty</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Volume of IV fluids (ml)</th>
<th>(enter -1 if empty)</th>
</tr>
</thead>
</table>
# Follow Up Monitoring

*Clinical review AFTER admission (look through the entire file for this information)*

<table>
<thead>
<tr>
<th>Evidence of further clinical review</th>
<th>☐ Yes</th>
<th>☐ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of first clinical review after admission</td>
<td></td>
<td>(if empty enter 1915-01-01)</td>
</tr>
</tbody>
</table>

## MONITORING

<table>
<thead>
<tr>
<th>Vital signs chart present and filled?</th>
<th>☐ Yes</th>
<th>☐ No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of days for which vital signs chart is filled</td>
<td></td>
<td>((days))</td>
</tr>
<tr>
<td>Vital signs monitored in the first 48 hours after admission?</td>
<td>☐ Yes</td>
<td>☐ No</td>
</tr>
<tr>
<td>Number of times temperature recorded in the first 48 hours after admission</td>
<td>☐ 0</td>
<td>☐ 1</td>
</tr>
<tr>
<td>Number of times respiratory rate recorded in first 48 hours of admission</td>
<td>☐ 1</td>
<td>☐ 2</td>
</tr>
<tr>
<td>Question</td>
<td>Options</td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------------------------------------</td>
<td>-------------</td>
<td></td>
</tr>
<tr>
<td>Number of times heart rate recorded in first 48 hours of admission</td>
<td>1, 2, 3, 4, 5, 6, 7, 8, 9, 10, &gt;10, Empty (If length of stay was less than 48 hours, note total number of times heart rate was recorded)</td>
<td></td>
</tr>
<tr>
<td>Feeding monitoring chart available and filled?</td>
<td>Yes, No</td>
<td></td>
</tr>
<tr>
<td>Duration for which feeding chart is filled (hours)</td>
<td>(hours)</td>
<td></td>
</tr>
<tr>
<td>Number of times feeding recorded as given during the period of monitoring (i.e. timeframe above)</td>
<td>1, 2, 3, 4, 5, 6, 7, 8, 9, 10, &gt;10, Empty</td>
<td></td>
</tr>
<tr>
<td>Fluid chart available with evidence of monitoring?</td>
<td>Yes, No</td>
<td></td>
</tr>
<tr>
<td>Duration for which fluid chart is filled (hours)</td>
<td>(hours)</td>
<td></td>
</tr>
<tr>
<td>Number of times fluids recorded as checked during the period of monitoring (i.e. timeframe above)</td>
<td>1, 2, 3, 4, 5, 6, 7, 8, 9, 10, &gt;10, Empty</td>
<td></td>
</tr>
<tr>
<td>Evidence of monitoring baby’s weight?</td>
<td>Yes, No</td>
<td></td>
</tr>
</tbody>
</table>
**Discharge Information**

*Clinical review during discharge (this should be on a discharge summary sheet but look through the entire file for this information)*

Date of discharge/death

((for empty date type 1915-01-01))

Outcome of discharge

- Alive
- Dead
- Referred
- Absconded
- Empty

Referred to where (name of facility)?

- Kenyatta national hospital
- Aga khan hospital
- Mbagathi District hospital
- Nairobi Hospital
- Mama Lucy Kibaki hospital
- Nairobi west hospital
- Pumwani maternity Hospital
- The Karen Hospital
- Mater Hospital
- Radiant Pangani Hospital
- St Francis Com Hospital
- Mp Shah Hospital
- Nairobi Women's Hospital (Hurlingham)
- Nairobi Women's Hospital (Adams)
- Alliance Medical Centre
- Ruaraka Uhai Neema Hospital
- Avenue Hospital
- Coptic Hospital
- Gertrudes children's Hospital
- Guru Nanak Hospital
- Langata Hospital
- Maria immaculate health centre
- Mother and Child hospital
- Nairobi East Hospital
- Nairobi South Hospital
- Skyhill Medical Centre
- Afwan Medical Clinic
- Meridian Equator Hospital
- Metropolitan Hospital
- South B Hospital Limited
- Family care medical centre
- Komarock Modern Medical Care
- Marura Nursing Home
- St Mary's Mission Hospital
- Al-Amin Nursing Home
- Ladnan Hospital
- Empty

Facility referred to not on lookup list?

- Not on list

Specify facility/location not on lookup list

Discharge weight (in kg)

(in kilograms. Only enter in kg or g, not both. If empty enter -1)
Discharge weight (in g) ________________________________________________
(in grams. Only enter in kg or g, not both. If empty enter -1)

Discharge diagnosis

Clear primary discharge diagnosis?

○ Yes  ○ No  ○ Empty/No diagnosis
(Select ‘Empty’ if no diagnosis is available)
Primary discharge diagnosis

- Accompanying other twin
- AKI
- Admitted due to mother's condition
- Admitted for observation
- Albinism
- BA
- Birth trauma
- Brachial plexus Injury
- Burns
- Caput Succedaneum
- Cephalohaematoma
- Cerebral palsy
- Chest malformation
- CBBA
- Chorioamnitis
- Cleft palate
- CHD
- CTEV
- Cysts
- Dehydration
- Poor feeding
- DIB
- Distended abdomen
- EONs
- Epispadia
- Erb's palsy
- Extra digit on hand
- Facial oedema
- Febrile convulsions
- Frothing
- Gastrointestinal bleeding
- Grunting respiration
- Haematoma
- Hepatitis
- Hypersecretion
- Hypoglycaemia
- Hypospadia
- Hypothermia
- HIE
- Imperforate anus
- Infection exposure
- IURG
- neonatal jaundice,NNJ
- Jointed penis
- Left eye medial strabismus
- Leg hyperextension in delivery
- Lipoma
- LA
- Large for gestational age,LGA
- MA
- MBA
- Cesarean section,CS
- Mother has no breast milk
- Mothers drug abuse
- Nasal blockage/Blocked nostrils
- NEC, NEC
- Neonatal Anaemia
- Neonatal convulsions
- NM
- NNS,EONS,
- NNT
- NRDS,RDS, Respiratory Distress Syndrome
- Paraphimosis
- Phimosis
- Pneumonia
- Pneumonitis/pulmonitis
- Polycythemia Vera
- Poor apgar score
- Postdatism
- Premature
Primary discharge diagnosis not listed?

○ Not on list

Specify primary discharge diagnosis not listed

(Specify diagnosis)
Discharge diagnosis 1

- Accompanying other twin
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- Polycythaemia Vera
- Poor apgar score
- Postdatism
- Premature
- LBW
- preterm
- PEM
- Renal failure
- Rhesus incompatibility
- Risk of sepsis /infection
- Scrotal swelling
- Septic Pustules
- Septic Shock
- Sero-reactive mother/Sero exposed
- Severe Birth asphyxia
- STI
- Shock
- Shoulder dislocation
- Shoulder dystocia
- Skin rashes
- SGA
- Soft tissue injury
- Spina Bifida
- Spinal dysraphism
- Squint
- Swollen face due to pubis presentation
- Swollen forehead
- Thigh mass
- Twin delivery
- Umbilical hernia
- Undescended testes
Discharge diagnosis 2

- Accompanying other twin
- AKI
- Admitted due to mother's condition
- Admitted for observation
- Albinism
- BA
- Birth trauma
- Brachial plexus Injury
- Burns
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- Chest malformation
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- Cleft palate
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- Poor apgar score
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- Premature
LBW
preterm
PEM
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Septic Pustules
Septic Shock
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STI
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Swollen forehead
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Twin delivery
Umbilical hernia
Undescended testes
Discharge diagnosis 3

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- Pneumonia
- Pneumonitis/pulmonitis
- Polycythemia Vera
- Poor apgar score
- Postdatism
- Premature
Specify any other discharge diagnosis

(Specify diagnosis, separated by :)

Other discharge diagnosis

○ Yes  ○ No
Other discharge diagnosis 1

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- Admitted for observation
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- Burns
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Swollen forehead
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Umbilical hernia
Undescended testes
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- Cephalohaematoma
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- Chest malformation
- CBBA
- Chorioamnitis
- Cryptorchidism
- Cleft palate
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- Poor apgar score
- Postdatism
- Premature
Specify any other discharge diagnosis

(Specify diagnoses, separating each by :)