

NURSING STUDENT REPORT
For
KENT COUNTY HOSPITAL WOMEN'S CARE UNIT (3 West)
Initial Newborn Assessment

NEWBORN'S NAME: _____ MOTHER'S NAME _____

Vital Signs: Time: _____ T _____ P _____ R _____

DIRECTIONS: FOR EACH CATEGORY (in bold), CIRCLE/COMPLETE ALL THAT APPLIES.

Newborn Info: ID Bands Placed On _____ LDR Sheet Reviewed _____
EES ointment: given OU _____ confirmed as given in LDR
Vitamin K: given IM in _____ confirmed as given in LDR
Suction bulb in warmer _____ Warmer temp _____ Cord blood sent _____
Glucose test done @ _____ reason _____ result _____
Maternal GBS: negative _____ positive _____ maternal meds given _____
Maternal Hep B status: negative _____ positive _____

Physical Assessment:

Activity: Active _____ Quiet _____ Lethargic _____ Jittery _____
Muscle Tone: Normal _____ Arching _____ Flaccid _____ Spastic _____ Tremors _____
Cry: Strong _____ Lusty _____ Weak _____ High-pitched _____
Head: Symmetrical _____ Flat fontanels _____ Molding noted _____ Forceps marks _____
Eyes symmetrical _____ Ear position normal _____ Nose patent _____ Lips/gums/palate intact _____
Abnormal findings _____
Chest/Abd: Chest symmetrical _____ Clavicles smooth/intact _____ Pulse regular _____
Abdomen WNL _____ # cord vessels _____ Abnormalities _____
Reflexes: **Moro:** present _____ not present _____ **Grasps:** equal _____ unequal _____
Suck: present _____ not present _____ Swallow noted _____
Skin color: Pink mec-stained _____ pale _____ ruddy _____ mottled _____ dusky _____ other _____
Jaundice: present _____ not present _____ amt: _____
Acrocyanosis: hands _____ feet _____ hands & feet _____
Skin texture: moist _____ dry _____ peeling _____ cracked _____
Skin findings: petechiae _____ milia _____ rash _____
ecchymosis _____ Mongolian spot _____ other _____
Genitalia: **Male:** Proper meatal opening at tip _____ variance _____
Testes palpable _____ left _____ right _____ both _____
Scrotum ecchymotic: yes _____ no _____ **Scrotal edema:** none _____ mild _____ moderate _____ large _____
Female: **Labial edema:** none _____ mild _____ moderate _____ large _____
Ecchymosis: none _____ mild _____ moderate _____ large _____
Respiratory: **Grunting:** none _____ intermittent _____ continuous _____
Flaring: none _____ mild _____ moderate _____ severe _____
Retractions: none _____ subcostal _____ intercostal _____ supraclavicular _____
Breath sounds: Clear _____ Variance: _____
Cardiac: **Cap refill:** < 2 sec _____ > 2 sec _____ **Murmur:** absent _____ present _____
Student Signature _____