

3. Magnesium

Sulphate:

(if <30 weeks)

PRECEPT

MgSO₄

PERIPrem Perinatal Passport



This checklist must be completed for all births <34/40 and must accompany the baby on transfer to NNU

Time of birth: : Type of birth: Time of admission to NNU: : Apgars: @1 @5 @10	Gestation: /40 Birth weight: g	Name: DOB: Hosp No: NHS No: Or patient sticker here
1. Place of Birth: Tertiary unit if <27/40, EFW <800g or multiple pregnancy <28/40	Born in a maternity centre with a NICU?	
	, , ,	
2. Antenatal Steroids:	Dexamethasone / Betamethasone (<34 w Full course (2 doses 12-24hrs apart)? Y / N	
	Date and time of last dose: / /	:

Given? Y / N

Date and time of last dose: __/__:__:

4. Early Breast Milk:

(a)

Antenatal counselling and advice for mother re benefits of EBM and early & frequent expressing? Y / N



Given Early Breast Milk information leaflet? Y / N __/__: __

Hand expressing demonstrated or assisted? Y / N __/__:__:__

Mother helped to express <1hr after delivery? Y / N $__/__/__$: $__$

5. Antibiotic Prophylaxis



Required? Y / N Given? Y / N

Given > 4hrs pre birth? Y / N

6. Optimal Cord Management (OCM):



Time of OCM: _ _: _ _ (minutes and seconds)

Airway & Breathing support during OCM:

Thermal Care interventions during OCM:

If no OCM, reason why:

7. Thermal Care:



Admission Temp: °C

Time taken: _ _ : _ _

8. Respiratory Management:



Volume targeted/volume guided ventilation (if invasively ventilated)? Y / N / NA

9. Caffeine:

(<30 weeks but consider up to 32-34 weeks)



Time of administration (within 6h admission): _ _ : _ _

4. Early Breast Milk: (b)



Date & time Colostrum first available: _ _ / _ _ / _ _ : _ _

Date & time Colostrum given to baby: _ _ / _ _ : _ _ : _ _ :

10. Probiotics:

(<32 weeks or <1.5kg)



Probiotics started with non-nutritive feeds? Y / N / NA

__/__:__

11. Prophylactic Hydrocortisone:

(<28 weeks)



0.5mg/kg BD started on Day 0? Y / N / NA

__/__:__