1 PATIENT INFORMATION

1 PATIENT DETAILS

NAME

DOB

AGE

CORRECTED GESTATIONAL AGE

GESTATIONAL AGE AT BIRTH

BIRTH WEIGHT

CURRENT WEIGHT

MRN / PATIENT ID

DATE OF SERVICE

PROVIDER

CREDENTIALS

PARENT / GUARDIAN PRESENT

VISIT TYPE: NEONATOLOGY CONSULTATION / NICU PROGRESS NOTE / NEWBORN FOLLOW-UP / HIGH-RISK INFANT FOLLOW-UP

CARE SETTING: NICU / NEWBORN NURSERY / OUTPATIENT / TELEHEALTH / STEP-DOWN NURSERY

INFORMANT / COLLATERAL SOURCE

REFERRING PROVIDER, IF APPLICABLE

PRIMARY CARE PROVIDER, IF APPLICABLE

CC CHIEF COMPLAINT

2 PRIMARY NEONATAL CONCERN

Primary neonatology-related reason for the visit or encounter — prematurity, respiratory distress, feeding difficulty, jaundice, hypoglycemia, sepsis evaluation, apnea, bradycardia or desaturation events, poor weight gain, congenital anomaly, NICU follow-up, or high-risk newborn follow-up...

S SUBJECTIVE

3 INTERVAL HISTORY & NEONATAL COURSE

3a REASON FOR EVALUATION & BIRTH HISTORY

Reason for Neonatology Evaluation (NICU admission, daily NICU progress, newborn nursery consultation, high-risk infant follow-up, prematurity management, respiratory distress, feeding difficulty, jaundice, hypoglycemia, infection evaluation, growth concern, congenital anomaly, post-discharge follow-up):

Birth History (gestational age, birth weight, delivery method, indication for delivery, Apgar scores, resuscitation required, delayed cord clamping if known, rupture of membranes duration, amniotic fluid findings, maternal fever, chorioamnionitis concern, immediate postnatal course):

Maternal / Pregnancy History (prenatal care, pregnancy complications, maternal infections, diabetes, hypertension, preeclampsia, substance exposure, medications, antenatal steroids, magnesium, antibiotics, GBS status, blood type, serologies, prenatal imaging or genetic testing):

3b INTERVAL SYSTEMS STATUS

Respiratory Status (oxygen requirement, respiratory support, work of breathing, apnea, bradycardia, desaturation events, tachypnea, grunting, nasal flaring, retractions, surfactant use, ventilator history, weaning progress):

Feeding / Nutrition (feeding method, breast milk or formula use, fortification, volume, frequency, route, tolerance, emesis, residuals if used, abdominal distension, stooling, breastfeeding latch, oral feeding endurance, tube feeds, TPN, growth trajectory):

Growth / Weight Trend (current weight, birth weight comparison, daily weight change, weight gain pattern, length and head circumference trends, growth percentile concerns, nutritional adequacy):

Cardiovascular Status (murmur, perfusion, blood pressure concerns, congenital heart disease concern, PDA status, echocardiogram history, need for pressors, cyanosis, hemodynamic instability):

Infectious Concerns (sepsis risk factors, maternal infection risk, fever or hypothermia, blood culture status, antibiotics, clinical signs of infection, lab trends, response to treatment):

Jaundice / Bilirubin History (bilirubin levels, blood type incompatibility, Coombs status, phototherapy use, exchange transfusion concern, stool and urine output, feeding adequacy, risk factors for hyperbilirubinemia):

Glucose / Metabolic Status (hypoglycemia risk factors, glucose trends, interventions, IV fluids, feeding response, electrolyte issues, newborn screen concerns, metabolic disorder evaluation):

Neurologic Status (tone, activity, seizures, abnormal movements, apnea events, head ultrasound findings, hypoxic-ischemic encephalopathy concern, cooling therapy, IVH risk, developmental concerns):

GI / Elimination (stooling, voiding, abdominal distension, emesis, feeding intolerance, NEC concern, reflux symptoms, meconium passage, GI anomaly concerns):

3c FAMILY CONTEXT & PERTINENT NEGATIVES

Family / Social Context (parent involvement, visitation, feeding goals, breastfeeding support, discharge readiness, transportation barriers, social work involvement, home support, caregiver education needs):

Pertinent Negatives (fever, respiratory distress, apnea or bradycardia events, poor feeding, bilious emesis, abdominal distension, decreased urine output, seizure-like activity, lethargy, cyanosis, worsening jaundice):

ROS NEONATAL REVIEW OF SYSTEMS

4 PERTINENT POSITIVES & NEGATIVES

Respiratory distress, tachypnea, apnea, bradycardia, desaturation, cyanosis, or oxygen need	
Feeding difficulty, poor latch, poor endurance, emesis, abdominal distension, or feeding intolerance	
Weight loss, poor weight gain, dehydration concern, or nutrition concerns	
Jaundice, pallor, bruising, petechiae, rash, or skin breakdown	
Fever, hypothermia, lethargy, irritability, or sepsis concern	
Hypoglycemia, electrolyte concerns, abnormal newborn screen, or metabolic concerns	
Abnormal tone, seizures, tremors, abnormal movements, or neurologic concerns	
Decreased urine output, stooling abnormality, delayed meconium passage, or GU concerns	

O OBJECTIVE

5 OBSERVED FINDINGS

V VITALS

TEMPERATURE

HEART RATE

RESPIRATORY RATE

BLOOD PRESSURE

OXYGEN SATURATION

WEIGHT

LENGTH

HEAD CIRCUMFERENCE

WEIGHT CHANGE

GROWTH PERCENTILES, IF AVAILABLE

PAIN / NEONATAL COMFORT SCORE, IF APPLICABLE

5a RESPIRATORY SUPPORT

ROOM AIR / NASAL CANNULA / HFNC / CPAP / NIPPV / MECHANICAL VENTILATION

FIO2

FLOW / PRESSURE SETTINGS

PEEP / PIP / RATE, IF APPLICABLE

RECENT APNEA / BRADYCARDIA / DESATURATION EVENTS

5b NEONATAL PHYSICAL EXAMINATION

General Appearance (activity level, tone, alertness, distress, color, hydration, consolability, overall clinical condition):

Head / Eyes / Ears / Nose / Throat (fontanelle, sutures, molding, caput, cephalohematoma, red reflex if assessed, eye drainage, ear position, nasal patency, palate, oral lesions, suck, mucous membranes):

Neck / Clavicles (range of motion, masses, webbing, clavicle tenderness, crepitus, fracture concern):

Cardiovascular (rate, rhythm, murmurs, pulses, femoral pulses, capillary refill, perfusion, cyanosis, edema, blood pressure concerns):

Pulmonary (respiratory effort, breath sounds, air movement, retractions, grunting, nasal flaring, tachypnea, apnea, crackles, wheezing, stridor, oxygen requirement):

Abdomen (bowel sounds, distension, tenderness, masses, hepatosplenomegaly, umbilical stump, umbilical line status,

abdominal wall defects, feeding intolerance signs):

Genitourinary (external genitalia, testicular descent, hydrocele, hypospadias, diaper rash, urine output, anus patency, stooling status):

Musculoskeletal / Hips (tone, spontaneous movement, limb symmetry, deformities, spine, sacral dimple, hip stability, Ortolani and Barlow findings if assessed, extremity perfusion):

Skin (jaundice, rashes, bruising, petechiae, birthmarks, cyanosis, pallor, mottling, lesions, breakdown, surgical sites, line-related findings):

Neurologic (alertness, tone, suck, Moro, grasp, rooting, reflexes, tremors, jitteriness, seizures, symmetry of movement, age-appropriate findings):

SL NICU / NEWBORN SUPPORT AND LINES

6 CURRENT SUPPORT & DEVICES

RESPIRATORY SUPPORT TYPE AND SETTINGS

IV ACCESS, UVC, UAC, PICC, PERIPHERAL IV, OR CENTRAL LINE STATUS

FEEDING TUBE STATUS

TPN / LIPID USE

PHOTOTHERAPY STATUS

INCUBATOR / RADIANT WARMER / OPEN CRIB

TEMPERATURE STABILITY

MONITORS AND ALARMS

WOUND, SURGICAL SITE, OR OSTOMY STATUS, IF APPLICABLE

FG FEEDING / GROWTH ASSESSMENT

7 NEONATAL NUTRITION & GROWTH

FEEDING ROUTE: PO / NG / OG / G-TUBE / TPN

BREAST MILK, DONOR MILK, FORMULA, OR FORTIFICATION

BREAST MILK, DONOR MILK, FORMULA, OR FORTIFICATION

FEEDING VOLUME AND FREQUENCY

TOTAL FLUIDS

CALORIES PER OUNCE OR KCAL/KG/DAY

FEEDING TOLERANCE

EMESIS OR RESIDUAL CONCERNS

STOOLING AND URINE OUTPUT

BREASTFEEDING LATCH AND TRANSFER

ORAL FEEDING READINESS AND ENDURANCE

WEIGHT GAIN OR LOSS TREND

Nutrition barriers and discharge feeding plan:

DN DEVELOPMENTAL / NEUROBEHAVIORAL ASSESSMENT

8 NEUROBEHAVIORAL STATUS WHEN ASSESSED

Tone and activity; state regulation; response to handling:

Feeding cues; suck, swallow and breathe coordination:

Sleep-wake pattern; parent-infant bonding:

Developmentally supportive care needs; physical, occupational, or speech and feeding therapy involvement:

High-risk infant follow-up needs:

L LABORATORY AND DIAGNOSTIC RESULTS

9 RESULTS REVIEWED OR ORDERED

Laboratory Studies (CBC, blood gas, glucose, electrolytes, bilirubin, CMP, calcium, magnesium, phosphorus, inflammatory markers, blood type, Coombs test, hematocrit, reticulocyte count, medication levels):

Microbiology (blood culture, urine culture, CSF studies, respiratory culture, maternal cultures, MRSA screening, other infectious testing):

Newborn Screening (state newborn screen, hearing screen, congenital heart disease screen, metabolic screen, car seat test, repeat screening needs):

Imaging (chest X-ray, abdominal X-ray, head ultrasound, echocardiogram, renal ultrasound, spinal ultrasound, MRI, other neonatal imaging):

Respiratory / Cardiac Testing (blood gas trends, ventilator data, echocardiogram findings, EKG, oxygen saturation trends, apnea, bradycardia and desaturation event review):

Prior Records Reviewed (delivery records, maternal records, prenatal ultrasound, NICU records, newborn nursery records, discharge summary, outside hospital records, subspecialty notes, medication history):

A ASSESSMENT

10 NEONATOLOGY CLINICAL INTERPRETATION

Primary neonatal diagnosis or working diagnosis. Gestational age and corrected age context. Current respiratory status and support needs. Feeding tolerance, nutrition adequacy, and growth trajectory. Hemodynamic stability and cardiac concerns. Infection risk or current infectious status. Jaundice and bilirubin status and phototherapy need. Glucose and metabolic stability. Neurologic status and developmental risk. Prematurity-related complications or risks. Family and caregiver readiness and discharge barriers. Need for additional testing, respiratory support adjustment, feeding advancement, medication changes, specialist referral, NICU escalation, or discharge planning...

P PLAN

11 NEONATAL MANAGEMENT BY PROBLEM

Respiratory plan (oxygen support, ventilator, CPAP or HFNC settings, weaning plan, blood gas monitoring, apnea and bradycardia monitoring, caffeine therapy, surfactant status, escalation criteria). Feeding and nutrition plan (route, volume advancement, fortification, TPN and lipids, breastfeeding support, lactation consultation, feeding therapy, glucose and growth monitoring). Fluid and electrolyte plan. Infectious disease plan (cultures, antibiotics, sepsis rule-out duration, maternal risk review, lab monitoring, discontinuation or escalation criteria). Jaundice plan (bilirubin monitoring, phototherapy, feeding support, hemolysis evaluation, rebound bilirubin). Cardiovascular plan (murmur evaluation, echo, blood pressure monitoring, PDA management, perfusion monitoring, cardiology referral). Neurologic and developmental plan. Thermoregulation plan. Medication plan (antibiotics, caffeine, vitamins, iron, respiratory medications, pain control, discharge medications). Screening and preventive care plan (newborn screen, hearing screen, CCHD screen, hepatitis B vaccine, RSV prophylaxis if applicable, car seat test, circumcision planning, immunization counseling). Family communication and discharge plan. Patient safety and escalation plan…

F FOLLOW-UP

12 REASSESSMENT PLAN

Follow-up timeframe and purpose (NICU daily reassessment, newborn follow-up, weight check, bilirubin recheck, feeding reassessment, respiratory support review, lab or imaging review, developmental follow-up, specialist follow-up, high-risk infant clinic follow-up):

TB TIME DOCUMENTATION & BILLING

TOTAL TIME SPENT

PARENT / CAREGIVER COUNSELING TIME

CARE COORDINATION TIME

RECORDS REVIEW TIME, IF APPLICABLE

NICU CRITICAL CARE TIME, IF APPLICABLE

PROCEDURE TIME, IF APPLICABLE

E/M LEVEL: NEWBORN CARE / INPATIENT NEONATAL CARE / OUTPATIENT FOLLOW-UP CODE

NICU CRITICAL CARE CODE(S), IF APPLICABLE

PROCEDURE CODE(S), IF APPLICABLE

SCREENING / PREVENTIVE CODE(S), IF APPLICABLE

BASIS FOR BILLING: TIME-BASED / MEDICAL DECISION MAKING / CRITICAL CARE / PROCEDURE-BASED / NEWBORN CARE

PRIMARY NEONATAL DIAGNOSIS CODE + DESCRIPTION

SECONDARY DIAGNOSIS CODE(S), IF APPLICABLE

SO PROVIDER SIGN-OFF

PROVIDER NAME	CREDENTIALS	SPECIALTY: NEONATOLOGY	DATE	TIME