



# Newborn admission record form uptake



## Problem statement

- Structured admission form is a simple measure to improve newborn individual care through standardized admission process and data quality.
- A clinical audit conducted in June 2019 to assess performance of KNH Newborn unit demonstrated shortcomings in the care of admitted newborns. Low use of NAR form in NBU KNH-at 15%
- One of the problems identified was that admission process data required is deficient of critical information. NAR form (standardized admission process) utilization was at 15%.
- This percentage is likely to prevent effective healthcare planning for sick babies in the unit

## Aim statement

- To increase compliance rate of Documenting/filling the Newborn
- Admission Record form (NAR) from 15% to 50% by June 2019

## Change ideas

- Sensitizing staff on the need to have a standard way of admitting all newborns
  - Registrars, HIO's, DQACNBU and labour ward nurses
- Leadership involvement both in NBU and University of Nairobi
- Improving admission record form tool and coding
- Introduction and adherence of MOH register
- Availing the forms consistently

## Lessons learnt

- Staying focused to the aim and the outcome
- Involve all the frontline staff.
- Make the right things easy to do
- Continuous training & mentorship
- Identifying champions to spear head improvement
- Continues monitoring.
- Management support.

## Previous NAR form

Kenya National Hospital  
Newborn Admission Record  
KNH/NBU/003

Neonate details: Name, Date of Admission, IP No., DOB, Age, Sex, Gestation at birth, ROM, Delivery, Spontaneous breathing, Multiple Delivery, Stimulation, BVM, Appar, Born outside this facility, Referring facility.

Mother's details: Name, Age, Parity, Blood Grp, Rhesus, VDRL, HTCT Status, Mother on ARVs, Diabetes, Hypertension in Pregnancy, APH, Prolonged 2nd Stage, Previous pregnancies, Mother's problems during pregnancy/labour & relevant maternal treatment, Infant's Presenting Problems & any treatment given.

History: Time baby seen, Any other important History and family/social History? (Mother's Occupation, Residence, Preventive Care).

Version August 2019

TICK AS APPROPRIATE  
Newborn Admission Examination

Parameter	Normal	Abnormal	%
Temperature	36-38°C	<36°C or >38°C	
Resp Rate	30-60 /min	>60 /min	
Pulse	120-160 /min	>160 /min	
Head circumf	34-35 cm	>35 cm	
Birth wt	3-4 kg	<3 kg	
Adm. wt	3-4 kg	<3 kg	
Appearance	Well	Sick	
Nutrition	Normal	SGA/wasted	
Odour	Normal	Foul smelling	
Jaundice	None	+	
Fallot	None	+	
Skin	Normal	Bruising, Rash, Pustules	
Cry	Normal	Hoarse, Weak/absent	
Airway	Normal	Stridor, Noisy breathing	
Grunting	None	Audible with stethoscope	
Nasal flaring	None	Marked	
Cyanosis	None	Minimal, Marked	
Chest wall	None/mild	Severe	
Retraction	None	Minimal, Marked	
Intercostal retraction	None	Minimal, Marked	
Chest movement	Equal	Respiratory lag, Reduced R/Lt	
Breath Sounds	Normal	Intercostal retraction, Xiphoid retraction	
Silverman Anderson Score	0-2	3-4	
Pulses present	Radial R/L, Brachial R/L, Femoral R/L, Popliteal R/L, Dorsalis pedis R/L	None	
Skin warm at	Hand	Forearm, Elbow, Shoulder	
Capillary refill	< 2 secs	> 3 secs	
Heart sounds	Normal	Murmur, timing, site, radiation	
Movements	Normal/active	None spontaneous / only if stimulated	
Abnormal movements	None	Jittery, Fitting	
Tone	Normal	Floppy, Stiff	
Suck reflex / feeding	Normal	Absent / unable	
Fontanelle	Normal	Bulging	
Head shape	Normal	Caput, Haematoma, Trauma, Other	
Abdomen	Normal	Distended, Scaphoid, Liver, Spleen	

Version August 2019

## 2019/2020 (up to August) run chart

