

<b>KEY</b>													
PR - Parent Request		HG - Help Given		NI - Nurse's Initials									
					PR	HG	NI	DATE					
<b>INTRO TO MOTHER-BABY</b>									<b>BABY CARE</b>				
hand washing									bath/cord care				
flow sheets									stools/urine				
visitors									positioning				
no smoking policy									crying/comfort				
classes/videos available									infant states/cues				
<b>GENERAL</b>									jaundice/TSB screen				
diet									newborn screen				
exercise/rest									sick baby/temperature				
return of menses									rashes				
<b>BREASTS</b>									check up				
nipple care									<b>BABY-BREASTFEEDING</b>				
engorgement									milk production/ejection				
sore nipples									latching-on				
breast infection									feeding positions (mom/baby)				
<b>PERINEAL AREA</b>									feeding frequency				
peri - care/sitz bath									hand expression/pump				
involution/lochia									storage of milk				
afterpains									assessing milk supply				
hemorrhoids									assessing infant intake				
<b>CESAREAN BIRTH</b>									<b>BABY-FORMULA FEEDING</b>				
before surgery									for formula feeding see				
after surgery - comfort									formula feeding resource				
after surgery - infant care									<b>BABY AT HOME</b>				
after surgery - incision care									siblings				
<b>ADJUSTMENT TO PARENTHOOD</b>									developmental milestones				
relations - infant									immunizations				
relations - spouse/partner									home safety/safe sleep				
relations - family/friends									car seats				
intercourse/family planning									post natal resources				
feelings/fatigue									<b>PREMATURE BABY/SICK BABY</b>				
return to work									incubator				
<b>ADJUSTMENT TO SINGLE PARENTHOOD</b>									feeding - breast/bottle/tube				
relations - infant									I/V				
relations - partner/family									developmental milestones				
adoption									going home				
finding help									<b>TWINS/MULTIPLES</b>				
<b>GOING HOME – MOTHER AND BABY</b>									managing infant care				
return visit to Primary Care Provider									developmental milestones				
contacting PHN									breastfeeding				
applicable local agencies									help/support				
INITIALS		SIGNATURE /STATUS/PRINT NAME			INITIALS		SIGNATURE /STATUS/PRINT NAME						

