

- Birth weight is appropriate for gestational age (AGA).
- Physical examination was normal.
- Vital signs are within normal range and stable for the 12 hours preceding discharge.
- Infant has urinated and passed at least one stool.
- Infant has completed at least two successful feedings.
- Clinical significance of jaundice, if present, has been determined and appropriate management or follow-up plans put in place.
- Appropriate maternal and infant blood tests have been performed.
- Appropriate neonatal immunizations have been administered.
- Newborn hearing screening has been completed per hospital protocol and state regulations.
- Family, environmental, and social risk factors have been assessed.
- Documentation is in place that the mother has received usual infant care training and has demonstrated competency.
- Support persons are available to assist mother and her infant after discharge.
- Continuing medical care is planned, including that infants discharged sooner than 48 hours be examined within 48 hours of discharge from the hospital.

Data from American Academy of Pediatrics, Committee on Fetus and Newborn: Hospital stay for healthy term newborns, *Pediatrics* 125(2):405–409, 2010.

Although some mothers and newborns may be safely discharged within 12 to 24 hours without detriment to their health, others require a longer stay. Follow-up home care within days (or even hours after discharge when minor problems are anticipated) appears to be the emerging trend in an effort to curtail hospital