

## FORM D: DAILY WEIGHT MONITORING FORM

**Objective:** To record the pre-feed weight of the baby admitted in the KMC unit, and compare it with the weight of the previous day and admission weight. To be filled by nurse on duty in the KMC room after weighing.

**Hospital Registration Number:** 1896

**Mother Name:** Savita

**Date of Birth(dd/mm/yyyy):** 13/04/2020

**Birth Weight(in grams):** 2360

| Day | Date<br>(dd/mm/yy) | Time of<br>weighing | Weight of<br>baby<br>without<br>clothes<br>(in<br>grams) | Todays<br>weight-<br>yesterdays<br>weight<br><br>(+, - or<br>unchanged) | Net<br>gain/loss<br>since<br>admission<br>(Todays<br>weight-<br>Admission<br>weight) | Remarks | Nurse<br>Name     | Signature<br>or nurse<br>talking<br>weight |
|-----|--------------------|---------------------|----------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------|-------------------|--------------------------------------------|
| 1   | 13/04/2020         | 6:03 AM             | 2360                                                     |                                                                         |                                                                                      |         | Agrima<br>Gayatri |                                            |
| 2   | 13/04/2020         | 6:03 AM             | 1800                                                     | -560                                                                    | 560 loss                                                                             |         | Agrima<br>Nirmala |                                            |
| 3   | 19/04/2020         | 6:03 AM             | 2140                                                     | +340                                                                    | 220 loss                                                                             |         | Agrima<br>Gayatri |                                            |

**Date of discharge(dd/mm/yy):** N/A **Weight of discharge(in grams):**

**Net gain/loss since admission(in grams)(+/-):**