Discharge/Transfer Letter



Neonatal Unit Groote Schuur Hospital 021-404-6069

Baby of: Folder Number: DOB: Gender: female Apgars (1min): 7 Apgars (5min): 9 Birth Weight: 900 weeks and 2 days	ale Mothers Age: Mode Of Delivery: Vaginal Head Circumference: 23.8 Gestational Age: 27
Problem list	
• ELBW	• HIE and info from question 3 above
• Extremely Premature (27 weeks and 2 days)	• Neonatal jaundice – from question 1 above
• RVDe if RVD+ from additional birth details above. PCR Result	• Sepsis from question 4 above
 RDS requiring surfactant (from VON) CLD NEC+ 	• Fetal Medicine Unit (info from 5 above)
	• Abnormal Head Ultrasound (info from 7 above)
	• Chromosomes done (info from 6 above)
Ventilation (from question 2 above). Include day of life of starting and number of days and diagnosis	• Vaccine done (info from 8 above)
Notes:	
Date of Discharge/Transfer:	
Meds:	
Feeds:	
Follow up appointments:	
Done by: Dr	