# NEWBORN BABY ASSESSMENT GUIDE

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| **Introduction** | |
| **1**. Wash your hands and don PPE if appropriate | |
| **2**. Introduce yourself to the patient including your name and role | |
| **3**. Confirm the patient's name and date of birth | |
| **4.** Briefly explain what the examination will involve using patient-friendly language | |
| **5**. Gain consent to proceed with the examination | |
| **6**. Adequately expose the child for the assessment | |
| **7**. Encourage the parent(s) to ask questions during the check and to participate where appropriate | |
| **History** | |
| **8**. Take a brief history of the pregnancy and the delivery (e.g. mechanism of delivery, complications) | |
| **Weight** | |
| **9**. Measure the infant's weight and plot on a weight chart | |
| **General inspection** | |
| **10**. Inspect the infant for clinical signs suggestive of pathology (e.g. pallor, cyanosis, jaundice) | |
| **Tone** | |
| **11**. Assess tone by gently moving the newborn's limbs passively and observing the newborn when they're picked up | |
| **Head** | |
| **12**. Measure the infant's head circumference and record it in the baby's notes | |
| **13**. Inspect the shape of the head and note any abnormalities | |
| **14**. Palpate the anterior fontanelle: note if it feels flat (normal), sunken or bulging | |
| **Skin** | |
| **15.** Inspect the skin for colour abnormalities (e.g. pallor, jaundice), bruising/lacerations and birthmarks | |
| **Face** | |
| **16**. Inspect the face for dysmorphic features, asymmetry, trauma and nasal abnormalities | |
| **Eyes** | |
| **17**. Inspect the eyes for abnormalities (position, shape, erythema, discharge) | |
| **18**. Assess the fundal reflex in each eye | |
| **Ears** | |
| **19.** Inspect the pinna: note any asymmetry, skin tags, pits or the presence of accessory auricles | |
| **Mouth and palate** | |
| **20**. Look for clefts of the hard or soft palate and inspect the tongue for ankyloglossia | |
| **Neck and clavicles** | |
| **21**. Inspect the neck for abnormalities (shortened length, lumps, clavicular fracture) | |
| **Upper limbs** | |
| **22.** Inspect the upper limbs for abnormalities (e.g. asymmetry, missing fingers, single palmar crease) | |
| **23**. Palpate and compare the brachial pulse in each upper limb | |

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| **Chest** | |
| **24**. Inspect the chest for abnormalities and assess the infant's respiratory rate and work of breathing | |
| **25.** Auscultate the lungs | |
| **26**. Auscultate the heart | |
| **27**. Assess pulse oximetry | |
| **Abdomen** | |
| **28**. Inspect the abdomen for abnormalities (e.g. hernias, cord stump infection) | |
| **29**. Palpate the abdomen to assess for organomegaly | |
| **Genitalia** | |
| **30**. Inspect the genitalia and note any abnormalities (position of the urethral meatus, testicular swelling, absent testicle, fused labia) | |
| **Lower limbs** | |
| **31**. Inspect the lower limbs for abnormalities (e.g. asymmetry, oedema, ankle deformities, missing digits) | |
| **32**. Assess tone in both lower limbs | |
| **33**. Assess movement in both lower limbs | |
| **34**. Assess the range of knee joint movement | |
| **35**. Palpate and compare femoral pulses | |
| **36**. Perform Barlow's test | |
| **37**. Perform Ortolani's test | |
| **Back and spine** | |
| **38**. Inspect the back and spine for abnormalities (e.g. scoliosis, hair tufts, naevi, sacral pits) | |
| **Anus** | |
| **39**. Inspect the anus for patency | |
| **Reflexes** | |
| **40**. Assess a selection of newborn reflexes (e.g. palmar grasp, rooting, Moro reflexes) | |
| **To complete the examination…** | |
| **41**. Explain to the parent(s) that the examination is now finished and offer to dress the baby | |
| **42**. Share the results of the assessment with the parents, explaining the reason for any referrals you feel are required | |
| **43**. Check if the parents have any further questions | |
| **44**. Thank the parents for their time | |
| **45**. Dispose of PPE appropriately and wash your hands | |
| **46**. Summarise your findings | |
| **47.** Document your findings and suggest further investigations/referrals | |