| DATE DONE  D   M   Y  | DEFERRED PKU, TSH, GALACTOSEMIA TIME:  | - I                                   | RUBAAMII.   |  |              |
|---|--|---------------------------------------|---|--|--------------|
|   | POSITIVE MATERNAL HBsAg STATUS   |                                       |   |  |              |
| -   | ☐ HBIG GIVEN   |                                       | ADDRESS   |  |              |
| -   | HEPATITIS B VACCINE GIVEN  |                                       |   |  |              |
|   | POSITIVE MATERNAL HIV STATUS   |                                       | PHYSICIAN ANDWHE RAME   |  |              |
| -   | OTHER  |                                       | THE SOLD WILLIAM C. D. C. D. C.                                     |  |              |
| 10. D M Y   | PROBLEM LIST   |                                       |   |  | DATE RESOLVE |
|   |  |                                       |   |  | 11           |
|   |  |                                       |   |  | 9 6          |
| 0.0   |  |                                       |   |  |              |
| $D_{\perp}M_{\perp}Y$   | PROGRESS NOTES   |                                       |   |  |              |
|   |  |                                       |   |  |              |
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|   | a Barana   |                                       |   |  |              |
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| 4   |  |                                       |   |  |              |
|   |  |                                       |   |  |              |
| 2   |  |                                       |   |  |              |
| 12. D M Y   | CIRCUMCISION DONE  | ANALGESIA USED:                       |   | SIGNATURE:   |              |
|   | METHOD:  GE EXAMINATION WEIGHT H   | ANALGESIA USED:<br>JEAD CIRCUMFERENCE | 14. STATUS AT DISC  | Comment of the Assessment of the Comment of the Com |              |
|   | METHOD:  GE EXAMINATION WEIGHT H  D M Y  J J J J 9   | entreesan artistens, area extens      |   | Comment of the Assessment of the Comment of the Com |              |
| 3. DISCHARG   | METHOD:  GE EXAMINATION WEIGHT H   | IEAD CIRCUMFERENCE                    |   | Comment of the Assessment of the Comment of the Com |              |
| DATE  | METHOD:  GE EXAMINATION WEIGHT H  D M Y  NORMAL ABNORMAL COMMENT   | IEAD CIRCUMFERENCE                    |   | Comment of the Assessment of the Comment of the Com |              |
| DATE  1. GENERAL  | METHOD:  GE EXAMINATION WEIGHT H  D M Y  I J J 9  NORMAL ABNORMAL COMMENT  | IEAD CIRCUMFERENCE                    |   | HARGE  |              |
| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  GE EXAMINATION WEIGHT H  D M Y  SOUTH STATE OF THE STATE OF T | IEAD CIRCUMFERENCE                    | 14. STATUS AT DISC  | HARGE  |              |
| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  GE EXAMINATION WEIGHT H  D M Y  I I I I I I I I I I I I I I I I I I   | IEAD CIRCUMFERENCE                    | 14. STATUS AT DISC  | HARGE  |              |
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| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  GE EXAMINATION  D M Y  GE EXAMINATION  D MORIMAL ABNORMAL  COMMENT  GE EXAMINATION  G | IEAD CIRCUMFERENCE                    | PROBLEMS REQUIRING FO  FEEDING: BREAST FORMULA  | LLOWUP:  |              |
| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  MET | IEAD CIRCUMFERENCE                    | PROBLEMS REQUIRING FO  FEEDING: BREAST FORMULA  15. DISCHARGED  | HARGE  | (when?)      |
| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  GE EXAMINATION  D M Y  SINCE STANDARD S | IEAD CIRCUMFERENCE                    | PROBLEMS REQUIRING FO  FEEDING: BREAST FORMULA  | LLOWUP:  VIT. D  16. FOLLOW UP BY  | (when?)      |
| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  GE EXAMINATION  D M Y  9  NORMAL ABNORMAL COMMENT   | IEAD CIRCUMFERENCE                    | PROBLEMS REQUIRING FO  FEEDING: BREAST FORMULA  15. DISCHARGED HOME                                     | HARGE  LLOWUP:  VIT. D  16. FOLLOW UP BY  FAMILY PHYSICIAN  MIDWIFE  PEDIATRICIAN  | (when?)      |
| DATE  1. GENERAL  2. SKIN  3. HEAD  | METHOD:  Graph  Graph  Graph  METHOD:  METHOD:  METHOD:  METHOD:  Graph  Graph  Graph  METHOD:  METHOD | IEAD CIRCUMFERENCE                    | PROBLEMS REQUIRING FO  FEEDING: BREAST FORMULA  15. DISCHARGED HOME ADOPTION                            | HARGE  LLOWUP:  16. FOLLOW UP BY  FAMILY PHYSICIAN  MIDWIFE  PEDIATRICIAN  OTHER CONSULTANT  | (when?)      |
| DATE  1. GENERAL  2. SKIN  3. HEAD  4. EENT  5. RESPIRATO  6. CVS  7. ABDOMEN  8. UMBILICAL  9. GENITOREO | METHOD:  Graph  Grap | IEAD CIRCUMFERENCE                    | PROBLEMS REQUIRING FO  FEEDING: BREAST FORMULA  15. DISCHARGED HOME ADOPTION FOSTER HOME OTHER HOSPITAL | HARGE  LLOWUP:  VIT. D  16. FOLLOW UP BY  FAMILY PHYSICIAN  MIDWIFE  PEDIATRICIAN  | E            |