

VON DAY AUDIT
IMPROVING CRITICAL TRANSITIONS AND CLINICAL OUTCOMES FOR EVERY NEWBORN

PART TWO: PATIENT LEVEL DATA FORM

Audit site: Neonatal Intensive Care Unit (NICU) ___ or Neonatal Step-down Unit ___

Audit population: All Infants ___ Subgroup of infants ___

INFANT CHARACTERISTICS

1. **Case Number:** _____ 2. **Gestational age (at birth), weeks:** _____ **days** _____

3. **Infants birth weight in grams:** _____ 4. **Infant's chronological age** _____ **(day(s) of life*)**

*Date of birth counts as calendar day 1

5. **Current respiratory support infant is receiving (select only one):**

- Assisted ventilation via endotracheal tube or tracheostomy (HFV or CMV)
- Continuous Positive Airway Pressure or Noninvasive Ventilation
- High Flow Nasal Cannula (HFNC > 1 liter)
- Oxygen only
- No support

PHYSICAL AND CLINICAL TRANSITIONS

6. **Included transitions [check all that apply. Only the appropriate transitions will appear in your audit]:**

a. For infants ≤ 7 days of age at time of the audit:

a1. Transfer from outside hospital? **[if yes, complete 8A]** Yes No

a2. Born at your facility? **[if yes, complete 8B]** Yes No

b. For infants > 7 days of age at time of the audit? **[if yes, complete 8]** Yes No

c. For infants of any age requiring diagnostic tests or procedures outside of the NICU within 7 days prior to the audit? **[if yes, complete 9]** Yes No

d. For infants of any age requiring surgery outside of the NICU within 7 days prior to the audit? **[if yes, complete 10]** Yes No

e. For infants of any age started on antibiotics within 7 days prior to the audit? **[if yes, complete 11]**
Yes No

f. For infants of any age extubated within 7 days prior to the audit? **[if yes, complete 12]** Yes No

g. For infants of any age started on pharmacological therapy for neonatal abstinence syndrome within 7 days prior to the audit? **[if yes, complete 13]** Yes No

h. For infants requiring discharge planning within 7 days prior to the audit? **[if yes, complete 14]**
Yes No

i. **For all infants cared for in your NICU, complete 15.**

PATIENT SPECIFIC PHYSICAL AND CLINICAL TRANSITIONS

Complete only the sections identified in question 7.

7. For infants \leq 7 days of age at time of the audit:

a. Transfer from outside hospital:

- a1. Is there a separate detailed note in the medical record regarding the transfer of the infant from the outside hospital? Yes No
- a2. Is there specific mention in the medical record, either in the transfer note or in a separate note, of direct communication with the physicians/caregivers within six hours of admission? Yes No
- a3. Is there specific mention in the medical record, either in the transfer note or in a separate note, of direct communication with the family within six hours of admission? Yes No
- a4. Is there specific mention of the time between receiving the transport call, the transport team leaving the hospital and the total time of transfer reflected in the medical record? Yes No

b. Delivery room care:

- b1. Is there a separate delivery room note from the delivery room team? Yes No
- b2. Is there a specific mention in the admission note or other relevant note of post-admission discussions with the mother's caregivers? Yes No
- b3. Is there a specific mention in the admission note or other relevant note of post-admission discussions with the family regarding the status of the infant? Yes No

8. For ALL infants > 7 days of age at time of the audit:

- a. Is an estimated date or week of discharge noted in the medical record? Yes No
- b. Does the chart reflect the specific screening needs required prior to discharge? These may include the need for retinopathy screening, metabolic screening, congenital heart disease screening, screening for congenital hip dysplasia, or immunizations. Yes No
- c. Is there a note addressing the social needs of the family, specifically relating to:
 - c1. Transportation needs? Yes No
 - c2. Food insecurity? Yes No
 - c3. Home environment? Yes No

9. For infants of any age requiring diagnostic tests or procedures outside of the NICU or Special care/stepdown unit within 7 days prior to the audit:

- a. Is there a specific procedure note in the medical record regarding the status of the infant's transfer to and from the diagnostic facility? **[if no, proceed to next transition]** Yes No
- b. Were there any safety concerns noted in the note, including miscommunication with staff, physiological instability during transfer? Yes No
- c. Is there specific mention in the medical record of direct communication with the family regarding successful infant transfer to and from the diagnostic facility? Yes No

10. For infants of any age requiring surgery outside of the NICU or Special care/stepdown unit within 7 days prior to the audit:

- a. Is there a specific procedure note in the medical record regarding the status of the infant's transfer to and from the operating room? **[if no, proceed to next transition]** Yes No
- b. Were there any safety concerns noted in the note, including miscommunication with staff, physiological instability during transfer? Yes No
- c. Is there specific mention in the medical record of direct communication with the family regarding successful infant transfer to and from the operating room? Yes No

11. For infants of any age started on antibiotics within 7 days prior to the audit:

- a. Is there an order in the paper record or in the electronic medical record detailing when the antibiotics will be discontinued? Yes No
- b. Has the infant received greater than 48 hours of systemic antibiotics? **[if yes, answer 12b1; if no, proceed to next transition]** Yes No
- b1. If yes, is there a note in the medical record specifically indicating the rationale for this decision? Yes No
- c. Are the parents aware (by interview at the bedside, from chart notes, or from staff reports) that their infant is on antibiotics? Yes No

12. For infants of any age extubated within 7 days prior to the audit:

- a. Was this a planned extubation? Yes No
- b. If the infant is very low birth weight, was caffeine started per-extubation (immediately before or after extubation?) Yes No
- c. Is there specific mention in the medical record of direct communication with the family regarding the change in the infant's respiratory support? Yes No

13. For infants of any age started on therapy for NAS within 7 days prior to the audit:

- a. Is there specific mention in the medical record of direct communication with the family regarding initiation of treatment for neonatal abstinence syndrome? Yes No

14. For infants requiring discharge planning within 7 days prior to the audit:

- a. Does the chart reflect an assessment of parent readiness for transition to home? Yes No
- b. Has a formal evaluation of home safety been made? Yes No

15. For any infant cared for in your NICU or Special care/stepdown unit on the day of the audit:

- a. Does the infant have a clearly visible sign or placard at the bedside that correctly identifies the physician, advanced practice provider and nurse responsible for care on the day of the audit?
Yes No

- b. Did the bedside nurse attending to the infant receive handoff using a structured communication tools [such as **SBAR** (**S**ituation, **B**ackground, **A**ssessment, **R**ecommendation) or **I-PASS** (**I**llness severity, **P**atient summary, **A**ction list, **S**ituation awareness or contingency planning, **S**ynthesis by receiver)]?
Yes No

- c. Since assuming care of the infant, were there critical issues uncovered that the nurse would have wanted to have been addressed in the handoff? Yes No