

NEW BORN ASSESSMENT CASE PRESENTATION

PRESENTER

DR.AKELLO EUNICE

JHO SRRH

case



case

MOTHER

neonate

- Name: B/o A.B

- Age: 2days
- Date of birth: 14/5/2025
- Age at assessment: birth to 48hrs
- Gestational age: 32weeks
- Mode of delivery: SVD
- APGAR score: 6 at 1mins 9 5mins

- Age: 22

- Parity: p1+2
- ANC: 4, 1 in first trimester
- Investigation: HIV, syphilis -ve B+ no scan
- Medication: iron, folic dewormed, fansida
- Infection, malaria, UTI
- Complication, foul smelling pv discharge for 1month
- Birth history: spontaneous, membrane, 30mins prior to delivery, weak cry

APGAR SCORE

parameters	Score 1min		Score 5min	
Appearance	1	Pink body, blue extremities	2	Completely pink
Pulse	2	>100bpm	2	>100bpm
Grimace	1	Minimal grimace on stimulation	2	Cries on stimulation
Activity	1	Some flexion of limbs	1	Some flexion of limbs
Respiration	1	Slow irregular	2	Good and regular
Total	6	Moderate depression	9	Good condition, response to resuscitation
Action		Gentle stimulation Supplemental oxygen Transfer to NICU for close monitoring		Continue monitoring in NICU.

vitals

Parameters	values	remarks
Heart rate	150bpm	normal
Respiratory rate	50bpm	No signs of respiratory distress
temperature	36.8	Maintain in radiant warmer
Spo2	96%	stable
weight	1.585kg	Low birth weight
Head circumference	29cm	Normal for gestation age
length	42cm	Normal for gestation age
Chest circumference	27cm	Normal for gestation age

BALLARD SCORE

Muscular maturity

• Posture	3
• Square window	0
• Arm recoil	4
• Popliteal angle	4
• Scarf sign	3
• Heal to ear	4
• Total	18

Grand total 25=34wks

Physical maturity

• Skin	1
• Lanugo	-1
• Planter surface	3
• Breast	2
• Eye/ear	2
• Genital	0
• Total	7

gestational age.

By dates 32wks by u/s not done

by exam 34wks

Head to toe examination

Head	No moulding, anterior fontanelle soft and flat, no swelling
eyes	Closed intermittently, reacts to light, no discharge
ears	Pinna soft and folded, no discharge
nose	Patent,
mouth	Intact palate, tongue normal, poor suckling
neck	No swelling or mass
chest	Equal movement, Bilateral equal air entry, heart sound 1& 2 normal, no added sound
abdomen	Normal fullness soft, umbilical stump clean & fresh, anus patent
genitourinary	Prominent labia minors, whitish pv ^{leucorrhoea} discharge
extremities	Spontaneous movement, reduced tone, no deformities or birth defects
skin	Pink, no vernix caseosa, lanugo, rash or skin lesions
neurological	Moro, rooting, grasping, suck reflex present but weak

Investigation

RBS: normal range

Summary

- ~~Prematurity(32weeks)~~
- low birth weight(1.585kg)
 - feeding via NGT
- good postnatal transition with improving tone and reflexes
 - Condition: stable

Plan

- Continue NGT feeding with EBM
- Monitor vitals
- Maintain body temperature
- Educate mother on kangaroo and feeding
- Prophylactic antibiotics
- Caffeine daily.

At 48 hrs

No major concerns

Plan: remove NGT, EBF, attachment, KMC monitor for 24 hours, plan for D/C.

At 72hrs, unremarkable, d/c, home on grovit \$hemofot

TCA 1 month