SUNY DOWNSTATE NURSERY GUIDE

Morning Workflow

- 1. Go to NS42 (4th floor) to take sign out at 6:45 AM
- 2. Go to NS32 (3rd floor) Workroom and log in into the computer with your Net ID
- 3. Log in into Healthbridge
- 4. On healthbridge look for today's weight and weight loss percentage (open NS34 list, click on patient, go to flowsheet, click on body measurements)
- 5. To review lab results, click on "Results" tab on healthbridge. Always review lab results yourself to ensure error prevention
- 6. Open Perinatal Intellispace desktop access: <u>http://obtvweb.downstate.edu/</u>
- Before logging in you can select smaller view of screen
- User: LEE, STANLEY (All CAPS)
- Password: 1012
- 7. Select patient on upper tab, go to I/O and manually count feeds (breastfeeds and/or formula feeds), wet diapers and bowel movements
- 8. To exit intellispace go to the right upper corner and the x bottom will appear
- You can access the sign out document through a shared word document called 'NS32 Nursery Sign- Out'. Ask one of your colleagues to share it or use the following link. If using the link you may need to select sign in with a different user -> Enter downstate username and password .

https://sunydmc-

my.sharepoint.com/:w:/g/personal/kisha_lafleur_downstate_edu/EbCNMbwzBQxKsEvpf 1FgJcABG_z0M3NGbBe5g8UwO9GD7Q?email=Hala.Salih%40downstate.edu&e=4%3 ACmjzs3&at=9

- 10. You will use the sign out to update today's weight, percentage of weight loss, feeds, formula vs breast fed status, wet diapers, bowel movements, new lab results
- 11. Examine babies
- 12. To write notes use nursery templates found on Downstate peds website
- 13. Type progress notes
- Progress Notes:
 - a) Enter document > Neonatal Progress Note
 - b) Subjective: Copy from template
 - c) Enter your physical exam.
 - d) Lines/Devices: Click no for all the boxes.
 - e) Assessment/Plan; Problem 1: Newborn/plan from note template
 - f) Add other problems as required (eg, Infant of diabetic mother, LGA, SGA, etc.)
 - g) Choose a co-signer and save your note.
- 14. Discharge Rounds There is currently no standard time for the discharge rounds with nursing, OB, and peds. Usually they take place around 10 A.M. Make sure to ask the NS31 Head Nurse on the timing and whether they take place while you will be rotating at the UHB Nursery. The discharge rounds / huddle usually takes place at NS31 nurses station and they are brief, lasting 5-10 minutes depending on the patients load. t The goal of these rounds is

to identify and address issues that may hold up or prevent discharge (e.g for the newborns hearing screen / CCHD, consultation by subspecialties, Social worker clearance) Participants will include the postpartum OB intern/s, L&D senior (when available), postpartum OB attending, pediatric/family medicine interns, pediatric attending, postpartum charge nurse, and any available postpartum nurses.

Topics to be discussed on discharge rounds

- Patients to be discharged for the day any medical hold on mother or baby? If so, what are the barriers to discharge – can they be expedited and when is the estimated discharge?
- Discuss any social issues that may potentially delay discharge and act early (i.e follow up with social work/psych/ACS etc)
- Identify infants requiring circumcision so they can be done at least a day prior to discharge whenever possible
- Any other concerns or issues regarding patient care.
- 15. Follow up appointment: there is a clerk in the nursery front desk, let clerk know about appointments needed and write the baby's information in the appointment book. If clerk is not available, call appointment line to schedule appointment. For Suite D appointments call 2978. Always have a follow up appointment scheduled (Suite D OR ask the parents to arrange appointment with their personal doctor) before discharging a newborn.

Admission

- 1. Residents will be informed by a nurse or/and be paged about the new baby. Baby will appear on NS34 list on healthbridge
- 2. Add patient to Nursery signout
- 3. To review maternal information: Go to the NS32 list on healthbridge and review maternal lab results (write down dates of lab results), OB admission note for maternal PMH and pregnancy complications, OB delivery note for delivery details). If maternal labs are not found on healthbridge review mother's paper chart at L&D or check for scanned documents on alpha docs on healthbridge
- 4. Add information to Sign Out .There is a template that you can copy each time you have a new admission.
- 5. Go to L&D and examine the baby (no later than 2 hours from birth time).

Be proactive : If mother is not in pain and you can discuss with her , ask about intention to breastfeed the baby , whether she is on any medication that may affect breastfeeding , if she has a pediatrician for the baby , if it is a boy whether they want circumcision .and their pharmacy.

- 6. Order admission orders following steps below:
 - Click on Orders and search for Admission order set (newborn)
 - Fill in the following:
 - Admitting attending name
 - Admission diagnosis/Health issue: Liveborn infant born by vaginal delivery (code Z38.00) or Liveborn infant born via c-section (code Z38.01)> save to order.
 - Specify patient risk factors: "Newborn" (free text)

- Services provided: "routine care" (free text).
- Estimated LOS- 2 days for vaginal delivery, 3 days for c-section.
- Add time and date for NBS (ordered as Metabolic Screen Neonatal) , Bili T&D and G6PD orders:
 - Collection date: 30 HOL
 - Collection priority/time: Routine
 - Label printer: N31b
 - Nursing instructions: "Please collect the sample on [date] at [time]"
 - Only select breast milk for infant feeding unless contraindicated

DO NOT PUT ORDER FOR FORMULA UNLESS SUPPLEMENTATION BECOMES NECESSARY. IF THIS IS THE CASE, AFTER PUTTING FORMULA ORDER (found as house formula on order search tab) WRITE AN EVENT NOTE EXPLAINING REASON FOR FORMULA SUPPLEMENTATION

- 7. Admission note:
 - Write your admission note using the admission template on a word doc/sticky note.
 - Enter document> Neonatal Admission Note H&P
 - Fill in the following (only):
 - a) Reason for admission: Newborn
 - b) History of present illness: go to Generic HPI, under Additional HPI enter your admission note
 - c) Past medical, surgical and family history: Select Family history, search for "no family history of sudden death" (code Z78.9)- check "mother".
 - d) Physical exam: fill in your physical.
 - e) Ballard: enter your ballard score
 - f) Assessment and plan: Problem 1: Newborn Assessment/plan- enter the assessment part from your sticky template.
 - g) Choose co-signer and save your note.

Discharging a Baby

- 1. Information to collect prior to discharge:
- Pre and post ductal saturation and results of hearing screen (Open baby's chart on Intellispace -> Discharge -> Screening -> CHD screening)
- Bilirubin value and how many hours of life, risk zone for hyperbilirubinemia
- Mom's pediatrician of preference (Downstate Suite D vs Outside pediatrician) and preferred pharmacy
- Date of Hep B vaccination
- Newborn screening number (look for pink card in baby's paper chart)
- Baby blood type
- 2. Discharge Note:
- Enter document > General Discharge Summary
- Enter discharge date, admitting and discharging attending.
- Patient condition at discharge: "stable"
- Primary Discharge diagnosis: Same as admission
- Is patient participating in clinic trial: "no"

- Copy hospital course from templates and fill in required info. Add date baby received Hepatitis B vaccine, if baby underwent circumcision, and if mom needed a CXR.
- Copy Physical Exam from templates and modify as needed.
- Does the patient currently have diagnosis of Pneumonia?: No
- Was Pneumococcal vaccination status addressed?: yes
- Was Influenza vaccination status addressed?: yes
- Was patient diagnosed with Venous Thromboembolism/ Pulmonary Embolism during this admission?: No
- Was patient diagnosed with a Stroke or CVA during this admission: No
- Smoking Status:: never smoked
- BP Screening: Normal
- BMI Screening (Normal Parameters: Age 18 years and older BMI => 18.5 and < 25kg/m2.): Normal
- Copy diet instructions from template.
- Click on the scales of justice and complete discharge medication reconciliation.
- Click on the Rx button -> Enter mom's pharmacy (name + zip code is usually best) -> Create new Rx -> Enter "poly" and look for Poly-Vi-Sol. Prescribe 1 drop daily x30 days. Give mom 3-5 refills. 30mL total. Assign attending and click eSubmit.
- Problem: Newborn, copy instructions from template into instructions section. (add other problems and instructions as needed)
- Enter follow-up appointment information.
- I-Stop: No.
- Choose a co-signer and save your note.
- Print two copies of this note and place it in the baby's chart (black binder).
- 3. Discharge Instructions:
- Enter Document > Discharge instructions
- Ensure correct admission/discharge date.
- Save note. DO NOT ASSIGN CO-SIGNER.
- 4. Discharge Order:
- Enter order > Request by "other" > Enter attending > "discharge" > Health Issues (same as discharge dx) > discharged to home > OK.

IF MOTHER DESIRES CIRCUMCISION:

- There is an order called, "Cleared for circumcision". Place the order when an infant is cleared for circumcision (find criteria in the Well baby Nursery Handbook). This does NOT apply to infants in the NICU.
- Circumcision order set- There is similarly a circumcision order set now live. It includes the option to choose injectable lidocaine for those OBs who use it, ask nurse which one is required.
- Once the BB is circumcised remember to use the template for circumcised boy in the discharge instructions and send bacitracin ointment to the pharmacy.

WHAT TO DO IF BABY FAILS HEARING SCREEN:

- Failed once: Repeat hearing screen.
- Failed twice: Send the urine CMV culture and make an Audiology appointment at 718-270-3976. add the baby's information to the ID spreadsheet (CMV study form: Hearing Screening and cCMV Prospective Study.xlsx). The ID people will follow up with the patients if there is anything abnormal with the results.
- If urine cannot be collected or parents cannot wait further for urine collection discuss with attending and consider buccal swab for CMV culture / PCR.
 Keep track of the samples sent for CMV culture. If abnormal inform the parents and arrange appointment with Pediatric Infectious Diseases (the excel does not work).

G6PD

- G6PD has to be send at 30 HOL along with NBS.
- Make sure that you make a list with the names of the babies discharged to follow up G6PD results. Once available and abnormal inform parents / PCP, inform your attending and put a phone note in Healthbridge indicating that the results were communicated to the newborn's family and the PCP.

SIGN OUT

- Update the name of the attending on call at night and his cell / pager number before signing out to the night team.

-Keep short list at the first page of your sign out with (A) the names/ MRN of the babies for who the G6PD is pending , (B) Names / MRN of babies with CMV results pending (C)Other labs /tests you need to follow up.

- Do not delete the tables of the discharged babies. Keep them at the end of the current babies, under the date of discharge and the discharging attending's name.

Scheduling a Pediatric Urology Appointment at Kings County Hospital

- Click on the Prescription Writer icon on the Health Bridge EMR and free-text "Pediatric urology appointment within 4 weeks." Write "1" under Quantity and "each" under Quantity UOM. You can leave the rest blank and click on "Review and Submit." Click: OK on the pop-up alert.
- Under the submit method, choose "Print." Choose the printer name "Subbps03/CPOPD2" and click OK. Preferably do it from the computers in the NS42 chart room (4" floor) as the nursery computers might not accept the printer.
- Collect the paper prescription from the printer located in the NS42 chart room (4th Floor). Write your name and NPI number, and sign it.
- 4. Fax the paper prescription to 347-671-8407 OR email it to <u>kchreferraloffice@nychhc.org</u>. While emailing, attach a photocopy of the paper prescription (front and back). Confirm the address and contact number with the parent as the KCH referral office will call them with the schedule and send a letter to their house with the information.
- 5. Email format:

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- 6. Call KCH referral office at 718-245-3255 to confirm the appointment.
- 7. Keep the paper prescription in the baby's chart to be given to the parent before discharge.

Scheduling a Hip Ultrasound Appointment at Kings County Hospital

 Click on the Prescription Writer icon and on the Health Bridge EMR and free-text "Hip Ultrusound in 4-6 weeks." Write "1" under Quantity and "each" under Quantity UOM. You can leave the rest blank and click on "Review and Submit." Click OK on the pop-up alert.



2. Under the submit method, choose "Print" and click on the printer name ""ubbps03'CPOPD2" and click OK-



- Collect the paper prescription from the printer located in the NS42 chart room (4th Floor). Write your name and NPI number, and sign it.
- 4. Fax the paper prescription to 347-671-8407 OR email it to kchreferraloffice@nychhc.org. While emailing, attach a photocopy of the paper prescription (front and back). Confirm the address and contact number with the parent as the KCH referral office will call the parent with the schedule and send a letter to their house with the information.

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This is [Name], a pediatric is	address from SUNY Downsteen / KCIL
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