

Name: \_\_\_\_\_ Parents' Names: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_



**Medications**

- Parents Learning
- Parents Ready \_\_\_\_

**When to Call the Dr.**

- Parents Learning
- Parents Ready \_\_\_\_

**Car Seat Safety**

- Parents Learning
- Parents Ready \_\_\_\_

**Discharge Videos**

- Shaken Baby
- CPR \_\_\_\_

**Home Setting**

- Parents Learning
- Parents Ready \_\_\_\_

**Safe Sleep**

- Parents Learning
- Parents Ready \_\_\_\_

**Home Feeding Prep**

- Parents Learning
- Parents Ready \_\_\_\_

**Circ Care**

- N/A
- Parents Learning
- Parents Ready \_\_\_\_

**Milk Prep**

- Parents Learning
- Parents Ready \_\_\_\_

**Swaddle Bath**

- Parents Learning
- Parents Ready \_\_\_\_

**Bulb Suction**

- Parents Learning
- Parents Ready \_\_\_\_

**Home Bottle**

- Parents Learning
- Parents Ready \_\_\_\_

**My Basic Care**

**Taking Temperature**

- Parents Learning
- Parents Ready \_\_\_\_

**Sponge Bath**

- Parents Learning
- Parents Ready \_\_\_\_

**Infant Driven Feeding**

- Parents Learning
- Parents Ready \_\_\_\_

**Bottle Feeding**

- Parents Learning
- Parents Ready \_\_\_\_

**Diapering**

- Parents Learning
- Parents Ready \_\_\_\_

**Breast Feeding**

- Parents Learning
- Parents Ready \_\_\_\_

**Swaddle**

- Parents Learning
- Parents Ready \_\_\_\_

**Breast Pump/Milk Storage**

- Parents Learning
- Parents Ready \_\_\_\_

**Non-Nutritive Suck**

- Parents Learning
- Parents Ready \_\_\_\_

**Comforting Me**

**Calm/Soothe**

- Parents Learning
- Parents Ready \_\_\_\_

**Baby Cues**

- Parents Learning
- Parents Ready \_\_\_\_

**Mouth Care**

- Parents Learning
- Parents Ready \_\_\_\_

**Holding**

- Parents Learning
- Parents Ready \_\_\_\_

**Welcome Videos**

- Welcome to NICU
- Power to Pump \_\_\_\_

**Kangaroo Care**

- Parents Learning
- Parents Ready \_\_\_\_



**Newborn Screen**

- Initial
- Repeat or NA
- 28 Day or NA

**Immunizations**

- Complete
- Declined

**Hearing Screen**

- Passed
- Follow Up Needed

**Eye Exam**

- Complete or NA
- Follow Up Needed

**Circumcision**

- N/A
- Requested
- Complete

**Car Seat**

- Parents Have
- Passed Test
- Test not indicated

**Misc Resources**

- WIC/Insurance
- Early Intervention
- Developmental Follow-up Clinic

**Home Readiness**

- Pediatrician Identified
- Appointment

**Medicines**

- Purchased
- Teaching Complete

**Equipment**

- Received
- N/A

**Breast Pump**

- Received
- N/A

