PRINTER: Cut sheet on dotted line exactly (at 75)

Date/ Time	Notes	Signed*

Affix additional free text sheets here, and number them 10.1, 10.2 etc

Name

Unit No

Special features

Type of birth	Gestation	Apgars	Birth weight	Birth weight centile
		/1 /5 /10		

Key points requiring special postnatal follow-up (e.g congenital anomaly, poor feeding)

Baby's blood group (if known)

Meconium stained liquor ☐ Medications

Additional information in mother's notes ☐

Parents' page

This page is for you to write any questions or concerns that you wish to discuss with your midwife.

*** Signatures must be listed on page 20 for identification**

Name

Unit No