**Newborn Information**

48. **Newborn Medical Record Number:**

54. **Abnormal Conditions of the Newborn** (Check all that apply)

- Assisted ventilation required immediately following delivery
- Assisted ventilation required for more than six hours
- NICU admission
- Newborn given surfactant replacement therapy
- Antibiotics received by the newborn for suspected neonatal sepsis
- Seizure or serious neurologic dysfunction
- Significant birth injury in skeletal fracture(s), peripheral nerve injury, and/or soft tissue/solid organ hemorrhage requiring intervention
- None of the above

55. **Congenital Anomalies of the Newborn** (Check all that apply)

- Anencephaly
- Meningomyelocele/Spiina bifida
- Cyanotic congenital heart disease
- Congenital diaphragmatic hernia
- Omphalocele
- Gastroschisis
- Limb reduction defect (excluding congenital amputation and dwarfing syndromes)
- Cleft Lip with or without Cleft Palate
- Cleft Palate alone
- Down Syndrome
- Karyotype confirmed
- Karyotype pending
- Suspected chromosomal disorder
- Karyotype confirmed
- Karyotype pending
- Hypospadias
- None of the anomalies listed above

56. **Was Infant transferred within 24 hours of delivery?**

- Yes  
- No

57. **Is Infant living at time of report?**

- Yes  
- No

58. **Is Infant being breastfed?**

- Yes  
- No