

Facility Name: _____

UFI: |__|_|_|_|_|

MODULE 10: REVIEW OF NEONATAL DEATHS

Interviewer Name _____ Date (d/m/y): ____/____/____

INSTRUCTIONS: This form should be completed in each health facility for the last 3 neonatal deaths that occurred in the previous 12 months. A neonatal death is defined as a live birth that dies before reaching the age of 28 days. You will probably identify the neonatal deaths through registers in the maternity, labor and delivery, neonatal care unit, NICU, children's ward or the operating room. Ask for the mother's chart/record and any other helpful information. If there has been no neonatal death in the last year, write NA on row 1 for all 3 cases and do not complete the module. Write the code for the correct answer in the appropriate block (cell).

No.	Question	Response Codes	Case 1	Case 2	Case 3
1	Age of the newborn at death	1. < 24 hours 2. ≥ 24 hours and < 7 days 3. ≥ 7 days and < 28 days			
2	Location of delivery	1. At home with no health worker or TBA present 2. At home with TBA 3. At home with health worker 4. En route to a facility 5. In this facility 6. In other facility: CHPS compound 7. In other facility: health center 8. In other facility: hospital 9. No information			
3	Type of delivery	1. Spontaneous vertex delivery 2. Breech 3. Instrumental vaginal delivery 4. Cesarean 9. No information			
4	Singleton or multiple gestation	1. Singleton 2. Multiple gestation			
5	Gestational age at birth	1. Preterm (<37 weeks) 2. Term (≥37 weeks and <42 weeks) 3. Post term (≥42 weeks) 9. No information			

No.	Question	Response Codes	Case 1	Case 2	Case 3
6	Weight of newborn	a. at birth b. at death <i>(Write in grams; 9999 = no information)</i>	---- ----	---- ----	---- ----
7	Apgar score	a) at 1 minute b) at 5 minutes <i>(Write the score in the space provided; 99 = no information)</i>	--- ---	--- ---	--- ---
8	Complications of the newborn:	Yes No Yes No Yes No			
	a. Asphyxia	1 0 1 0 1 0			
	b. Congenital malformation	1 0 1 0 1 0			
	c. Low birth weight - Preterm	1 0 1 0 1 0			
	d. Low birth weight - Small for gestational age	1 0 1 0 1 0			
	e. Low birth weight – unspecified	1 0 1 0 1 0			
	f. Trauma due to delivery	1 0 1 0 1 0			
	g. Neonatal sepsis	1 0 1 0 1 0			
	h. Meningitis	1 0 1 0 1 0			
	i. Respiratory distress – unspecified	1 0 1 0 1 0			
	j. Respiratory distress – Pneumonia	1 0 1 0 1 0			
	k. Respiratory distress - Meconium aspiration	1 0 1 0 1 0			
	l. Respiratory distress – Cyanosis	1 0 1 0 1 0			
	m. Convulsions	1 0 1 0 1 0			
	n. Jaundice	1 0 1 0 1 0			
	o. Kernicterus	1 0 1 0 1 0			
	p. Fever	1 0 1 0 1 0			
	q. Diarrhea	1 0 1 0 1 0			
	r. Hypoglycemia	1 0 1 0 1 0			
	s. Malaria	1 0 1 0 1 0			
	t. Sick newborn (cause unknown)	1 0 1 0 1 0			
	u. Other (specify in box)				

No.		Case 1		Case 2		Case 3																						
		Yes	No	Yes	No	Yes	No																					
9	Were any of the following interventions performed?																											
	a. Reanimation	1	0	1	0	1	0																					
	b. Suction of fluids	1	0	1	0	1	0																					
	c. Warmed with lamp	1	0	1	0	1	0																					
	d. Warmed with thermal blanket	1	0	1	0	1	0																					
	e. Warmed with hot water	1	0	1	0	1	0																					
	f. Warmed with radiant heater	1	0	1	0	1	0																					
	g. Immediate newborn care	1	0	1	0	1	0																					
	h. Breastfed in the first half hour	1	0	1	0	1	0																					
	i. Put to the breast immediately after birth	1	0	1	0	1	0																					
	j. Care for low birth weight baby	1	0	1	0	1	0																					
	k. Adrenaline used	1	0	1	0	1	0																					
	l. Received oxygen	1	0	1	0	1	0																					
	m. Newborn resuscitation with bag and mask	1	0	1	0	1	0																					
	n. Intubation	1	0	1	0	1	0																					
	o. Heart massage	1	0	1	0	1	0																					
	p. Gave hypertonic glucose (10%)	1	0	1	0	1	0																					
q. Gave sodium bicarbonate at 4.2%	1	0	1	0	1	0																						
r. Feeding tube	1	0	1	0	1	0																						
s. Lumbar puncture	1	0	1	0	1	0																						
t. Antibiotics	1	0	1	0	1	0																						
10	<p>Primary cause of neonatal death</p> <table border="0"> <tr> <td>1. Asphyxia</td> <td>11. Cyanosis</td> </tr> <tr> <td>2. Congenital malformation</td> <td>12. Convulsions</td> </tr> <tr> <td>3. Preterm</td> <td>13. Kernicterus</td> </tr> <tr> <td>4. Small for gestational age</td> <td>14. Fever of unknown cause</td> </tr> <tr> <td>5. Trauma due to delivery</td> <td>15. Diarrhea</td> </tr> <tr> <td>6. Neonatal sepsis</td> <td>16. Hypothermia</td> </tr> <tr> <td>7. Meningitis</td> <td>17. Hyperglycemia</td> </tr> <tr> <td>8. Low birth weight</td> <td>18. Malaria</td> </tr> <tr> <td>9. Pneumonia due to aspiration</td> <td>19. Sick newborn cause unknown</td> </tr> <tr> <td>10. Syndrome of meconium aspiration</td> <td>20. Other (specify by writing in box)</td> </tr> <tr> <td></td> <td>99. No information</td> </tr> </table>	1. Asphyxia	11. Cyanosis	2. Congenital malformation	12. Convulsions	3. Preterm	13. Kernicterus	4. Small for gestational age	14. Fever of unknown cause	5. Trauma due to delivery	15. Diarrhea	6. Neonatal sepsis	16. Hypothermia	7. Meningitis	17. Hyperglycemia	8. Low birth weight	18. Malaria	9. Pneumonia due to aspiration	19. Sick newborn cause unknown	10. Syndrome of meconium aspiration	20. Other (specify by writing in box)		99. No information					
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No.	Information about the mother	Case 1		Case 2		Case 3	
11	Mother's age (in years)						
12	N° of deliveries (including this one)						
13	N° of abortions						
14	N° of stillbirths						
15	N° of live births						
16	N° of antenatal visits in this pregnancy						
17	Was the woman or newborn referred from another facility? 0. No → skip to 19 1. Yes 9. No information → skip to 19						
18	Indication(s) for referral: 1. Mother considered high risk 2. Obstetric complication 3. Fetal distress or other fetal complication 4. Newborn complication 5. Other (specify in box)						
19	Maternal complications and conditions recorded:	Yes	No	Yes	No	Yes	No
	a. Antepartum hemorrhage	1	0	1	0	1	0
	b. Postpartum hemorrhage	1	0	1	0	1	0
	c. Severe pre-eclampsia	1	0	1	0	1	0
	d. Eclampsia	1	0	1	0	1	0
	e. Postpartum infections/sepsis	1	0	1	0	1	0
	f. Premature rupture of membranes (> 24 hrs)	1	0	1	0	1	0
	g. Obstructed labor	1	0	1	0	1	0
	h. Prolonged labor	1	0	1	0	1	0
	i. Cord prolapse	1	0	1	0	1	0
	j. Severe fetal distress	1	0	1	0	1	0
	k. Was referred in due to complications of the newborn	1	0	1	0	1	0
	l. Other (specify and write in cell)	1	0	1	0	1	0
	m. Mother was HIV+	1	0	1	0	1	0
n. Mother tested positive for syphilis	1	0	1	0	1	0	

No.	Information about the mother	Case 1	Case 2	Case 3
20	Survival status of the mother: 1. Alive 2. Died 9. No information			
Comments				