

PROCEDURE FOR: Documentation: Charting by Exception: Assessment Parameters

- POLICY:
1. A progress note will be written whenever a variance from unit-specific assessment parameters (Appendix A) is identified.
 2. More than one related variance may be consolidated into a single progress note.

EQUIPMENT: Progress notes
Flow sheet

PROCEDURE:

ACTION

POINTS OF EMPHASIS

1. Place (*) on the patient's flow sheet when a variance is identified.
2. Write a corresponding progress note.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 2/00

REVISION DATES:

REVIEWED DATES: 12/08

APPENDIX A

Expected Assessment Findings for the Well Newborn

Vital Signs:	Admission axillary temp > 97, then Axillary temp between 97.6° and 98.8°F (unless temperature related to environmental factors). Apical heart rate between 100 and 160 bpm; may be <100 at rest or sleeping. Respiratory rate between 30 and 60 per minute. Mean blood pressure >40mmHG (≥ 38w) > 35 mmHG (35-37 weeks).
Growth Parameters:	Birth weight between 2500 and 4000 grams. Length between 46 and 56 cm (18 to 22 inches). Ofc between 33 and 37 cm.
Physical Assessment Parameters:	
Skin:	Color pink with acrocyanosis during the first 24 hours (most prominent first 6 hours after birth) scattered lanugo, vernix in creases, smooth and intact with superficial cracking of skin of hands and feet; few to no blood vessels visible. Normal variations include milia, Mongolian spots, erythema toxicum, "stork bites" and bruising over presenting part. No jaundice during the first 24 hours.
General Assessment of Body:	Symmetrical appearance. Chest almost circular. Nipples symmetrically placed. 3 to 10 cm breast tissue palpable. Flexed posture with good muscle tone; easy and symmetrical movements that are well modulated.
HEENT:	Fontanels flat and soft. Anterior fontanel <5 cm diameter. Posterior fontanel smaller than anterior and usually fingertip size. Normal variations include molding with overriding sutures and caput succadaneum.
General:	Facies symmetric with features proportionate.
Eyes:	Symmetrical in size and shape with inner canthal distance between 1.5 and 2.5 cm; PERL, no discharge. May have mild eyelid edema. Sclera white to blue-white without hemorrhage.
Ears:	Cartilage is well formed with ready recoil. Pinna is not posteriorly rotated or low set.
Nose:	Septum is midline; nares patent.
Mouth:	Mucous membranes pink and moist. Symmetrical movement of lips. No clefts or lip or palate. Tongue not protuberant. Epstein's pearls is a normal variant. Intact rooting, sucking and gag reflexes.
Neck:	Short and thick without webbing or masses. Head held in midline.
Respiratory:	Symmetrical chest movement. Respirations unlabored. Good and equal air entry throughout lungs. Breath sounds clear without crackles, wheezes, stridor.
Cardiovascular:	Skin warm and dry. Well perfused with CRT<3 seconds. Pulses strong and equal in all extremities. Heart sounds loudest at mid left sternal border. S1 single during first 24 hours. HR regular without murmur or gallop.
Gastrointestinal:	Abdomen soft and rounded. No distention, discoloration or palpable masses. Bowel sounds present. Patent anus. Meconium stool within 24 hours. 3 vessel umbilical cord without odor, bleeding, discharge or erythema.
Genitourinary:	voids within 24 hours of birth. Females: Labia majora cover labia minora. Vaginal orifice open with possible mucoid discharge or "pseudomenses" Male: Urinary meatus centrally located at tip of penis. Testes descended bilaterally; Rugae present in scrotum. Circumcision without excessive bleeding, drainage or odor.
Musculoskeletal:	Symmetrical movements of extremities. No clubbing of feet. Clavicles intact. Joints freely moveable; no hip clicks and symmetrical gluteal folds. All digits present - no syndactyly Palmar creases present; plantar creases cover at least 2/3 of sole. Spine straight and intact.
Neurological:	Active and alert with vigorous cry. Good muscle tone with well flexed posture. Intact Moro, grasp, root, suck, gag, stepping and Babinski reflexes.