

Pediatric EPD Checklist

QUESTION?	YES?	NO?
Full term delivery??	?	?
EOS Score =1, and no maternal fever =100.4 during the labor/delivery??	?	?
Has had at least 1 void and 1 stool??	?	?
Has had 2 successful feedings (either breast or formula)??	?	?
Weight loss = 5%??	?	?
Temperature and vital signs normal in the past 12 hours??	?	?
Normal physical exam, or minor abnormality that doesn't require further hospitalization??	?	?
If on glucose protocol, has had 5 glucose checks, with the last 3 glucose checks =46? ?	?	?
No bleeding at circumcision site within the past 2 hours??	?	?
The following has all been given: Vit K, eye ointment, Hepatitis B vaccine (with consent)??	?	?
No social concerns??	?	?
Outpatient pediatrician identified and plan for follow-up made??	?	?
Currently not on phototherapy??	?	?
If Coombs+, 24 hr bilirubin at the Low or Low Intermediate Risk Zone??	?	?
Not a NICU transfer s/p CPAP??	?	?

Obstetric Protocols for Early Postpartum Discharge (EPD): NSVD Checklist



QUESTION	YES	NO
Preterm delivery <37 weeks ?		
Chorioamnionitis or fever >100.4 at any time during hospitalization ?		
Any blood pressures =140/90 ?		
Estimated blood loss >500 mL ?		
Perineum / Uterine / Breast examination abnormal ?		
Any requirement for IV medication for pain control ?		
Any issues with Voiding / Ambulating / Tolerating regular diet ?		
If GDM – Was antenatal glucose control with insulin or oral hypoglycemic medication ?		
History of chronic hypertension, pre-gestational diabetes, or significant medical history ?		
Ever required BP medication or magnesium sulfate ?		
Hemoglobin <9 g/mL ?		
Pre-pregnancy BMI >40 kg/m ² ?		

IF ANY OF THE ABOVE RESPONSES ARE YES, IT IS POSSIBLE THAT THE PATIENT MAY NOT BE A CANDIDATE FOR DISCHARGE AT 24 HOURS POST NSVD, AND FURTHER EVALUATION AND INDIVIDUALIZATION IS WARRANTED. THESE QUESTIONS ARE MEANT AS GUIDELINES ONLY, AND ARE NOT MEANT TO REPLACE SOUND CLINICAL JUDGMENT BY ATTENDING PHYSICIAN.

Obstetric Protocols for Early Postpartum Discharge (EPD): Primary C-Section Checklist



QUESTION	YES	NO
Preterm delivery <37 weeks ?		
Chorioamnionitis or fever >100.4 at any time during hospitalization ?		
Any blood pressures =140/90 ?		
Estimated blood loss >1000 mL ?		
Skin Incision /Perineum / Uterine / Breast examination abnormal ?		
Any continued requirements for IV medication for pain control ?		
Any issues with Voiding / Ambulating / Passing Flatus / Tolerating regular diet ?		
If GDM – Was antenatal glucose control with insulin or oral hypoglycemic medication ?		
History of chronic hypertension, pre-gestational diabetes, or significant medical history ?		
Ever required BP medication or magnesium sulfate ?		
Hemoglobin <8 g/mL / WBC count >14,000 / Platelet count <100,000 ?		
Pre-pregnancy BMI >40 kg/m ² ?		

IF ANY OF THE ABOVE RESPONSES ARE YES, IT IS POSSIBLE THAT THE PATIENT MAY NOT BE A CANDIDATE FOR DISCHARGE AT 48 HOURS POST C-SECTION, AND FURTHER EVALUATION AND INDIVIDUALIZATION IS WARRANTED. THESE QUESTIONS ARE MEANT AS GUIDELINES ONLY, AND ARE NOT MEANT TO REPLACE SOUND CLINICAL JUDGMENT BY ATTENDING PHYSICIAN.