



**Tennessee Initiative for Perinatal Quality Care**  
**Late Preterm Infant Project**  
**Discharge Readiness Checklist**

Activity	Date Verified / Initials	Additional Comments
<b>Age &amp; Stability</b>		
Newborn is at least 48 hours of age		
Stable vital signs for at least 24 hours – in an open crib with appropriate clothing and swaddling		
<b>Feeding</b>		
Successful feeding for at least 24 hours prior to discharge.		
If breastfeeding, <ul style="list-style-type: none"> <li>- A formal assessment by a lactation specialist has been performed at least twice before discharge</li> <li>- Prescription provided for breast pump, if indicated</li> </ul>		
Provide a detailed feeding plan for after discharge.		
Evaluate parents'/caregiver's understanding of home feeding plan.		
If supplementation will be provided, recommended volumes understood.		
Weight loss < 10 % since birth		
<b>Elimination</b>		
No significant emesis		
Adequate voiding prior to discharge.		
Parents/Caregivers have been educated on how many wet diapers to expect each day. <ul style="list-style-type: none"> <li>● 3 wet diapers by day 2</li> <li>● 4 wet diapers by day 4</li> <li>● 6 wet diapers per day by day 6 and thereafter.</li> </ul>		
At least 1 stool/24 hours. <ul style="list-style-type: none"> <li>● By day 3, expect 3 stools per day</li> <li>● By day 4, expect 4 stools per day</li> </ul>		



<ul style="list-style-type: none"> <li>By day 6, expect 6 stools per day and thereafter.</li> </ul>		
<b>Jaundice &amp; Bilirubin Monitoring</b>		
Transcutaneous or serum bilirubin obtained and plotted on hour specific nomogram.		
Recommendation for outpatient follow up provider visit and any recommended follow up bilirubin levels were incorporated into follow up after discharge plan.		
<b>Circumcision (If Applicable)</b>		
If circumcision is performed, assess for bleeding for at least 2 hours.		
Document parents'/caregiver's understanding of the post-circumcision care.		
<b>Infection Monitoring</b>		
No clinical signs of infection – recommendations from the EOS Calculator were incorporated into newborn's care.		
<b>Routine Newborn Screening</b>		
Newborn metabolic screen obtained after 24 hours of age		
Hearing screening completed and results included on discharge paperwork		
Critical Congenital Heart Disease (CCHD) completed per state requirements and results included on discharge paperwork.		
Car seat test completed and results included on discharge summary, if indicated		
Hepatitis B vaccine administered and included in the discharge paperwork.		
RSV Immunization, if indicated		
<b>General Parental/Caregiver Education on Newborn Care</b>		
Bathing and diaper changing		
Cleaning and caring of the umbilicus		
Value of skin-to-skin holding		



Need for increased clothing to keep warm when not skin-to-skin		
<b>Developmental Care</b>		
Explain the differences between corrected gestational age and chronologic age		
Discuss the importance of close monitoring for corrected gestational age developmental milestones by primary care provider.		
Discuss the signs/behavioral cues of stress and overstimulation: <ul style="list-style-type: none"> <li>● Finger/toe splaying</li> <li>● Twitches or startles</li> <li>● Arching or limpness</li> <li>● Facial grimace</li> <li>● Irregular breathing</li> <li>● Gaze aversion</li> <li>● Crying</li> </ul>		
<b>Discharge Education</b>		
Safe sleep, including tummy time		
Avoidance of secondhand smoke		
When to call the provider after discharge		
<b>Follow-Up Planning</b>		
Follow up provider appointment made for 1-3 days after discharge (including the recommendations for bilirubin follow up).		
Copy of discharge summary sent to the follow up provider.		
Copy of discharge summary provided to parents/caregiver.		

Parent/Caregiver Signature & Date: \_\_\_\_\_

Nurse Signature & Date: \_\_\_\_\_

Nurse Signature & Date: \_\_\_\_\_

Nurse Signature & Date: \_\_\_\_\_