



नेपाल सरकार
स्वास्थ्य तथा जनसंख्या मन्त्रालय
स्वास्थ्य सेवा विभाग
स्वास्थ्य व्यवस्थापन सूचना प्रणाली

SNCU/ NICU/ KMCU REGISTER

स्वास्थ्य संस्थाको नाम:

प्रदेश:

जिल्ला:

नगर/गाउँपालिका:

वडा नं.:

प्रयोग मिति:

आर्थिक वर्ष:

देखि

सम्म

ICU REGISTER

Month.....

time of delivery	Major Congenital Anomaly	Cause of Admission	Management	Discharge Details		Duration of stay in the hospital	Referred to	Newborn Care Package Provided	Remarks
				Date	Outcome of baby at Discharge				
	24	25	26	27	28	29	30	31	32
Hyperthyroidism 10 Others 11 No complications 12	Neural Tube Defect 1 Other Defect 10 Oro-facial Cleft: Cleft lip/palate 2 (Specify) Talipes Equinovarus- Club Foot 3 Limb Reduction Defect 4 Hypospadias 5 Omphalocele/Exomphalos 6 Gastroschisis 7 Imperforate Anus 8 No 11 Minor Defect (Specify.....) 9 Anomaly detected	Low Birth Weight 1 Congenital Heart Disease 11 IUGR 2 Congenital Anomaly 12 Prematurity/Pre term 3 Meconium Aspiration Syndrome 13 Hypoglycemia 4 Necrotising Enterolitis 14 Hypothermia 5 Pustulosis 15 Hyperbilirubinemia 6 Vitamin K Deficiency Bleeding 16 Neonatal Sepsis 7 Aspiration 17 Premature Rupture of Membrane 8 Seizure 18 Respiratory Distress 9 Neonatal AKI 19 Birth Asphyxia (Peri/Neonatal) 10 Others 20	Alternative Feeding if baby unable to breastfeed (Nasogastric/ Cup Feeding) 1 KMC (Partial or Continuous) 2 Safe Administration of Oxygen 3 Injectable Antibiotics for Neonatal 4 Sepsis as per protocol 5 Management of shock 6 Intravenous fluid 7 Hypoglycemia Management 8 Effective Phototherapy 9	Seizure Management 10 Continuous Positive airway pressure 11 Mechanical/Assisted Ventilation 12 Exchange Transfusion/ Partial transfusion 13 Retinopathy of prematurity screening 14 Hypothermia Management 15 Blood Transfusion 16 Management of Pneumothorax/Chest 17 Tube/Needle Puncture 18 Others 19	DD/MM/YYYY				
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Column 28: 1 Improved, 2 Referred, 3 Died, 4 DOPR/LAMA
Column 31: 1 Package A, 2 Package B, 3 Package A+B, 4 Package A+B+C