

# DISCHARGE

## DECISION TO DISCHARGE

- Responsibility of consultant in charge of unit
- Medical and nursing staff to agree discharge date with parents or persons with parental responsibility
- Nursing team perform majority of discharge requirements

## DISCHARGE CHECKLIST

Where appropriate, the following must be achieved before discharge:

### Parental competencies

- Administration of medications when required
- Baby cares (e.g. nappy changes, top and tailing, bathing etc)
- Feeding
- Nasogastric tube feeding where necessary

### Parent education (according to local practice)

- In addition to above, it is best practice to offer parents education on:
  - basic infant resuscitation (practical demonstration)
  - respiratory syncytial virus (give BLISS leaflet)
  - immunisations, if not already received (give national leaflet)

### Communication

- If local practice, complete red book and give to parents
- Give parents copy of discharge summary and time to ask questions after they have read it
- Inform:
  - health visitor (HV) of discharge
  - community midwife if baby <10 days old
  - GP
  - community neonatal or paediatric team as required locally

### Procedures/investigations check

- Newborn blood spot taken (6 days)
- Newborn blood spot repeated at 36 weeks corrected age or due date
- Inform community team of need to repeat newborn blood spot if required
- When immunisation (2, 3 and 4 month) not complete in preterm infants, inform GP and health visitor
- Arrange appointment for BCG vaccination if required – see **BCG immunisation** guideline
- Complete audiology screening
- Where required, confirm ophthalmology appointment date – see **Retinopathy of prematurity (ROP) screening** guideline

### General

- Check home and discharge addresses and confirm name of GP with parents
- Complete admission book entries
- Ensure breast pump returned

### Medical team

- Complete discharge summary by date of discharge
- Complete MANNERS dataset by date of discharge
- Answer parents' questions after they have read summary
- Ensure all follow-up appointments made (see below)
- Perform discharge examination and record

### Follow-up appointments

- Ensure these are written on discharge summary and in red book
- Likely appointments could include:

- neonatal/paediatric consultant out-patients
- ophthalmology screening
- audiology referral
- cranial ultrasound
- brain MR scan
- physiotherapy
- dietitian
- community paediatrician
- child development centre
- BCG immunisation or palivizumab
- open access to children's wards
- planned future admission (e.g. for immunizations)
- planned future review for blood taking, wound review
- tertiary consultant out-patients