Health Assessment of the Newborn

Concept: The newborn requires through skilled observation to ensure a satisfactory adjustment to extra uterine life. Physical assessment of newborn after delivery can be divided into-

- Initial assessment by using APGAR score
- Transitional assessment
- Gestational age assessment
- Behavioral assessment
- Systemic physical assessment

Definition of health assessment: Health assessment is a plan of care that identifies the specific needs of the client & how those will be addressed by the healthcare system

A. Initial assessment by using APGAR scoring system:

The APGA score is taken at 1 minute & again at 5 minutes after birth. It requires immediate & careful observation of the heart rate, respiration, muscle tone, reflex response & color of the infant.

APGAR scoring system: by using APGAR scoring system we can assess newborn after birth

	Clinical feature /criteria	Score - 0	Score – 1	Score - 2
A =	Appearance	Blue / pale	Body pink, limb blue	Pink all over
P =	Pulse/ heart rate	Nil/ absent	Slow (below 100) or < 100/minute	More than 100
G =	Grimace/ reflex response	Nil/ absent	Grimace/ feeble cry	Cry / sneezing
A=	Activity & muscle	Flaccid	Some flexion limb	Active movement
R=	Respiration	Nil	Slow, irregular	Good & spontaneous
	Total score = 10	0-3	4-6	7 – 10

a. <u>Diagnostic utility:</u>

- 7-10: Mild or no respiratory depression
- 4 6: Moderate respiratory depression
- 0-3: Severe respiratory depression
- b. Prognostic utility:
 - 7 10: Prognosis is very good
 - 4 6: Prognosis is moderate
 - 0-3: Prognosis is in grave condition

c. <u>Therapeutic utility:</u>

- 7-10: No measure is required
- 4-6: Oxygenation with umbo bag & mask
- 0-3: Endotracheal intubation & intermitted positive pressure ventilation
- Q. Write down the physical assessment of a newborn?
- Q. Mention the top to toe physical examination of a newborn
- Q. How will you assess the newborn after birth?

Q. Explain the physical examination of newborn after birth

Examination of a newborn baby:

- 1. **Overall impression:** Face, trunk, limbs & activity to gain a general impression.
- 2. Skin colour: The baby is pink & assessment of the degree of any jaundice.
- 3. Measurement:
 - Birth weight
 - Occipito- frontal circumference (OFC)
 - Length (if possible)
- 4. **Head:** Look & feel the fontanel's, suture & check for any trauma e.g. cephalhaematoma, caput succedaneum, superficial injuries etc.
- 5. **Eyes:** Look discharge, inflammation, cataract
- 6. Mouth: Look for cleft lip or palate.
- 7. Upper limbs: Check for evidence of brachial palsy & extra digits.
- 8. Chest: Check breathing pattern.
- 9. Heart: Listen to the heart for murmurs
- 10. Abdomen: Any distension, palpation of liver, spleen & kidneys. Any other mass
- 11. **Umbilicus:** Cleanliness. Any sign of infection (redness, discharge, bad smell)
- 12. **Genitalia:** Normal male or female. If female, small amount of mucus discharge with a few spots of blood may be seen. This is normal if male observe usually both testes in scrotal sac & scrotum is normal
- 13. Anus: Presence, patency & correct position.
- 14. Femoral pulses: Feel
- 15. **Spine:** Look & feel normal.
- 16. **Neurology:** is the baby heaving normally? Check moro & sucking reflexes. If any abnormality found, refer the baby to paediatrician or health care facility.

Q. Briefly discuss about assessment of gestational age.

Assessment of gestational age:

- The main assessment of gestational age can be carried out using approximate estimates of fetal development.
- It is important to assess whether the baby is average for gestational age (AGA), small for gestational age (SGA), & large for gestational age (LGA)
- Assessment of gestational age should be performed carefully, because neonates of particular gestational age have particular & special problems. Therefore the early detection of problems & maturity of the neonates is usual guide for approximate management & better prognosis of neonate.

Q. Briefly discuss about the behavioral assessment.

Behavioral assessment:

- At first the baby doesn't distinguish night from day & spend day & night sleeping, waking, crying, feeding & sleeping again throughout the 24 hrs, but sleeping most of the time.
- By this time is 4 or 5 weeks old he is usually sleeping longer at night & more wakeful in the day time; up to this time & he usually requires night feed.
- The baby will develop an organized pattern of sleep by the age of 16 weeks.