

Newborn Assessment

Body System	Assessment Skill
Neurological	Assess Reflexes Posture Tone Behavioral Response to Care
Head	Contour Fontanel Degree of Head control Birth trauma?
Respiratory	Normal Respiratory Rate (30 -60 bpm) Retractions? Apnea? Auscultate
Cardiovascular	Apical HR: 100-160 bpm Where is PMI? Murmur?
GI:	Inspect abdomen Auscultate bowel sounds Palpate for tenderness/distention Assess stool if present (color/consistency/odor) Determine last bowel movement

Body System	Assessment Skill
Urinary/Reproductive	First Void____ Urine Output: 1 mL/kg/hr Daily weight Discharge present (Female)
Skin	Jaundice Skin Temperature Assess for variations in skin normal for a newborn. Assess for redness on pressure points Assess for wounds
Musculoskeletal	Range of motion Tone Digits Reflexes
Holistic	Parent needs and teaching Cultural considerations Spiritual support
Newborn Reminders	APGAR: 1 and 5 minutes Normal Temperature 36.5 C-37.5 C