

FPQC Golden Hour Part I QI Baseline Data Collection Sheet

(Complete for those who have birth GA \leq 30 6/7 wks OR BW \leq 1500 g AND survived to NICU admission)

Birth weight (whole number)	grams	Gestational age (mark data source)	weeks days <input type="checkbox"/> best clinical/obstetric estimate <input type="checkbox"/> 1st trimester U/S <input type="checkbox"/> 2nd trimester U/S
Delivery type	<input type="checkbox"/> vaginal <input type="checkbox"/> C-section	Delayed cord clamping after delivery (30-60 seconds)	<input type="checkbox"/> yes 1st Hct: _____ % <input type="checkbox"/> no (one decimal) <input type="checkbox"/> unknown
Date of birth (MM/DD/YY)	/ /	Time of birth	: (military time)
Apgar score at 5 minutes		Time of NICU admission	: (military time)
Resuscitation required any chest compressions	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> unknown	Resuscitation required ET or IV epinephrine	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> unknown
Pre-delivery DR preparation: (check all that apply)	<input type="checkbox"/> Delivery team briefing prior to anticipated delivery <input type="checkbox"/> Equipment check prior to delivery <input type="checkbox"/> Radiant warmer turned to 100% heat prior to delivery		
Method of temperature regulation used (check all that apply)	<input type="checkbox"/> Attention paid to ambient room temperature <input type="checkbox"/> Chemical warming mattress activated prior to delivery <input type="checkbox"/> Hat applied to baby's head within 2 minutes of life <input type="checkbox"/> Polyethylene wrap applied to baby within 2 minutes of life Other / Comments:		
Temperature on NICU admission	°C OR °F <input type="checkbox"/> axillary <input type="checkbox"/> rectal <input type="checkbox"/> other:		
Monitoring supplemental oxygen use (whole numbers)	Pulse ox probe on RUE & connected to oximeter w/in 2 min of life: <input type="checkbox"/> yes <input type="checkbox"/> no Pre-ductal oxygen saturation at 10 minutes of life: % FiO2 at 10 minutes of life: %		
DR team roles (check all that apply)	Team leader: <input type="checkbox"/> yes <input type="checkbox"/> no Circulation: <input type="checkbox"/> yes <input type="checkbox"/> no Airway: <input type="checkbox"/> yes <input type="checkbox"/> no Scribe: <input type="checkbox"/> yes <input type="checkbox"/> no Other:		
Timing of DR debriefing	<input type="checkbox"/> within 4 hours of resuscitation <input type="checkbox"/> after 4 hours of resuscitation <input type="checkbox"/> no debriefing		
Name 1-3 opportunities for improvement discussed in debriefing:	1) 2) 3)		

Other comments:

All data collected in this document strictly is for quality improvement purposes only and is not part of the baby's medical record.

The grey colored areas on this sheet do not require collection.

Optional questions that can be added to a hospital's form:

Respiratory support on transport to NICU	<input type="checkbox"/> Intubation w/PPV or mechanical ventilation <input type="checkbox"/> CPAP <input type="checkbox"/> Free flow oxygen <input type="checkbox"/> Room air
Time of surfactant administration	: (military time) <input type="checkbox"/> in DR <input type="checkbox"/> in NICU
Time IV access obtained	: (military time)
Time of IV dextrose administration	: (military time)
Time to completion of initial stabilization	: (military time) <input type="checkbox"/> IV access obtained <input type="checkbox"/> IV fluids initiated <input type="checkbox"/> X-rays obtained (check all that apply)

FPQC Golden Hour Part I QI Data Collection Definitions

Study ID# is a 3-digit number which begins with 001 & numbers the enrolled neonates consecutively. On site log record infant's hospital # (or identifying number next to the corresponding Study ID#).

Birth weight is the first weight recorded as birth weight in grams.

Gestational age: Record in weeks & days (e.g. 30 wks & 0 days). If only weeks of gestation are known, provide that (e.g. 30 wks). Use the "Best Obstetrical Estimate" from the prenatal record and not ones based on later ultrasounds. If there is a discrepancy about gestational age, choose the estimate based on the earliest ultrasounds before 20 weeks (e.g. 1st trimester U/S, 2nd trimester U/S, best clinical/obstetric estimate). Do not provide a range for gestational age (e.g. 29-30 wks).

Delivery type includes vaginal or C-section deliveries.

Delayed cord clamping is defined as clamping the umbilical cord for 30-60 seconds after delivery. Indicate if the Obstetrician performs delayed cord clamping.

Date of birth is collected as 2-digit month/day/year (e.g. 09/12/13).

Apgar score at 5 minutes as documented by delivery team.

Delivery team briefing prior to anticipated delivery includes reviewing patient history and delivery plans.

Equipment check includes the availability and functioning of the following – laryngoscope & ET tubes, suction functioning & catheters, pulse oximeter & probe, oxygen functioning.

Respiratory support on transport to NICU means the type of support the baby requires when leaving the DR.

Temperature on NICU admission is the first temperature taken on NICU admission & w/in 1 hour of birth documented in Celsius or Fahrenheit. Specify how the temperature was taken (e.g. axillary, rectal, other).

Preductal oxygen saturation at 10 minutes of life as measured on the infant's right upper extremity

Exclusive DR team roles should include a minimum of 4 roles (team leader, airway, circulation, scribe).

Opportunities for improvement discussed in debriefing should include brief and meaningful assessment of communication, coordination, and teamwork.

Family receiving an update on baby's status should involve the medical team discussing the baby's status and addressing any parental concerns/questions.

Optional questions that can be added to a hospital's form: Includes documentation not required for FPQC, but hospital may choose to report this data.

Time of surfactant administration (if w/in 2 hours of life) indicates when surfactant instillation started and location (i.e. DR or NICU) where it was administered.

Time IV access (e.g. PIV, UAC, UVC) obtained and confirmed w/blood return (not radiologic confirmation).

Completion of initial stabilization is documented in military time. State time when initial care measures for infant have been accomplished including all of the following: IV access obtained, IV fluids initiated, radiographic studies obtained.



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