

Appendix 2. Sample NICU I-PASS Electronic Handoff Document

STABLE/WATCHER/UNSTABLE		<i>Reason for admission/brief HPI</i>			Daytime Action Plan:	On Call Action Plan:	Situational Awareness & Contingency Plan:	Dosing weight:									
Name: DOB: DOA: Hospital: GA: BW: MRN: DOL: AGA: Active Diagnoses:		Resp: CV: FEN/GI: ID: Heme: Neuro: Ophtho: Metabolic/Endocrine: <table border="1"> <tr> <th>NBS</th> <th>Date</th> <th>Result</th> </tr> <tr> <td>Initial</td> <td></td> <td></td> </tr> <tr> <td>28 day</td> <td></td> <td></td> </tr> </table> Healthcare Maintenance: Other:			NBS	Date	Result	Initial			28 day						Access: Medications Consults: Weekly Lab Schedule: Emergency Family Contact:
NBS	Date	Result															
Initial																	
28 day																	
Resolved Diagnoses: CODE STATUS:																	