

NEONATAL PERINATAL MORBIDITY AND MORTALITY MEETING RECORD

Division	Urgent and Planned Care		Attendees:
Specialty	Obstetrics, Neonatology and Midwifery		Brearey, Newby, Doctor V Saladi, Jayaram, Soni, Newton, Nurse T
Date Of Meeting	10 th Sep 2015		plus obstetric and midwifery team
Period of assessment	June and Aug 2015		

Case sheet No	Summary of case	Discussion and learning from case	Record of care and note keeping satisfactory?	What was the action taken (if applicable)
Date of death I&S 28/08/15	<div style="text-align: center; font-size: 48pt; font-weight: bold;">I&S</div>	Neonatal management seemed appropriate and timely. Benefit of having cooling mattress in an LNU. Discussed broadening of criteria for cooling babies.	Yes	NA
Child D 22/06/15	37 ⁺¹ prelabour and preterm rupture of membranes. Induced. Dusky episode at PD of age. Abnormal obs on PN ward. Admitted to NNU at PD of age. Desaturation on arrival. Ventilated for a brief period overnight. Raised lactate,	2 risk factors for sepsis (NICE) Apnoea at 12 min might have precipitated admission to NNU. Abnormal obs noted and admission for screen and antibiotics at 3.5 hrs. Initial improvement. PM result: likely diagnosis of congenital	Yes	Doctor ZA discussed with new doctors starting in August particularly in respect to sepsis guidance. Importance of