

NEONATAL PERINATAL MORBIDITY AND MORTALITY MEETING RECORD

Division	Urgent and Planned Care		Attendees:
Specialty	Obstetrics, Neonatology and Midwifery		Brearey, Newby, Saladi, Jayaram, Gibbs, Al-Wahab, Doctor U
Date Of Meeting	11th Feb 2016		Chang, Fielding, Vikram, Jiraskova, Lo plus obstetric and midwifery team
Period of assessment	June 2015 and Nov 15 -Jan 16		

Case sheet No	Summary of case	Discussion and learning from case	Record of care and note keeping satisfactory?	What was the <u>action</u> taken (if applicable)
Child C Date of death 14 th Jun 15	30/40 severe IUGR REDF, oligohydramnios. Arrested and died on day ^{PD} PM: 1a Widespread hypoxic ischaemic damage to heart 1b Immaturity of lung 1c Severe maternal vascular under perfusion	I&S in Mum. I&S I&S and taking LMW heparin. Sudden collapse ?cause Observations prior to arrest stable Delay in getting baptised	Yes	Revised baptism procedure. Also discussed at neonatal review: UVC fixation needs standardising. Iv ranitidine use in preterms
I&S Alive and well	<div style="text-align: center; font-size: 48px; font-weight: bold;">I&S</div> Baby discharged and doing well.	Good neonatal practice.	Yes	Learning points re severe haemolytic disease: Do not wait for Bili to reach transfusion line before acting if severe disease is obvious (not relevant to this

				case). Do not stop monitoring FBC until Hb is clearly stabilised and rising.
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