



Surname	
First name	
Date and time of Birth	
Hospital name	
Hospital no.	
NHS number	

If considering Therapeutic Hypothermia, then please complete the form

To be filled by the referring unit	
Criteria A: Infants ≥ 36 completed weeks gestation admitted to the NICU with at least one of the following:	Criteria B: Moderate to severe encephalopathy, consisting of:
Apgar score of ≤ 5 at 10 minutes after birth	<input type="checkbox"/>
Continued need for resuscitation at 10 minutes	<input type="checkbox"/>
Acidosis pH <7 within 60 minutes of birth (cord, arterial, venous, capillary)	<input type="checkbox"/>
Base Deficit ≥ 16 mmol/L within 60 minutes of birth	<input type="checkbox"/>
AND AT LEAST ONE OF	
Altered consciousness: lethargy, stupor, coma	<input type="checkbox"/>
Hypotonia: focal or general hypotonia or flaccid	<input type="checkbox"/>
Absent or weak suck	<input type="checkbox"/>
Clinical seizures	<input type="checkbox"/>
Abnormal reflexes	<input type="checkbox"/>

Criteria C: At least 30 minutes duration of amplitude integrated EEG recording that shows abnormal background aEEG activity or seizures. (see notes below) There must be one of the following:	
Normal Background with some seizure activity	<input type="checkbox"/>
Moderately abnormal activity	<input type="checkbox"/>
Suppressed Activity	<input type="checkbox"/>
Continuous seizure activity	<input type="checkbox"/>
CFM Unavailable	<input type="checkbox"/>

Discuss with Consultant at Local Cooling centre for referral and advice	
Date and Time of discussion	
Discussed with (Name)	
Cooling centre	

Decision to cool (Time)	<input type="checkbox"/> YES	<input type="checkbox"/> NO
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For Transfer and Cot location: **Call EBS on 0207 407 4999**

Pregnancy: Peripartum sentinel events?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Brief description		
Mode of delivery		
Complications at birth		

RESUSCITATION

Spontaneous cry Stimulation Airway manoeuvres Inflation breaths
 Ventilation breaths Intubation CPR Adrenaline
 Time HR >100 Age in minutes First gasp Age in minutes Regular resp' Age in minutes
 APGARs 1 minute 5 minutes 10 minutes 20 minutes

INITIAL NEUROLOGICAL EXAMINATION- please record prior to any sedation/ anticonvulsants administration if possible

Has sedation/ anticonvulsant been given prior to assessment?	No		
	Yes		Write name here

Domain	Stage 1	Stage 2	Stage 3
Seizures	None	Common focal or multifocal seizures	Uncommon (excluding decerebration) or frequent seizures
Consciousness	Normal Hyper alert	Lethargic Decreased activity Irritable to stimuli	Unresponsive to external stimuli
Activity (when awake or aroused)	Active Vigorous	Less than active Not vigorous	No activity whatsoever
Posture	Moving and maintains a number of positions	Distal flexion, complete extension or frog legged	Decerebrate with or without stimulation
Tone	Normal or hypertonic and jittery	Hypotonic either focal or general	Completely flaccid like a ragdoll
Primitive reflexes	Sucks vigorously Normal moro	Weak suck Incomplete moro	Absent suck Absent moro
Autonomic system	Pupils normal size, reactive Heart rate > 100 Normal reparations	Pupils constricted, mm but reactive Heart rate usually <100 Periodic irregular breaths	Pupils fixed and dilated Heart rate inconsistent Completely apnoeic requiring ventilation
Select all that apply	Sarnat Stage	Time of assessment	
Examiner Name/sign/date			

REPEAT NEUROLOGICAL EXAMINATION (BY NTS TEAM)

Anticonvalescent/sedation drug no yes

Domain	Stage 1	Stage 2	Stage 3
Seizures	None	Common focal or multifocal seizures	Uncommon (excluding decerebration) or frequent seizures
Consciousness	Normal Hyper alert	Lethargic Decreased activity Irritable to stimuli	Unresponsive to external stimuli
Activity (when awake or aroused)	Active Vigorous	Less than active Not vigorous	No activity whatsoever
Posture	Moving and maintains a number of positions	Distal flexion, complete extension or frog legged	Decerebrate with or without stimulation
Tone	Normal or hypertonic and jittery	Hypotonic either focal or general	Completely flaccid like a ragdoll
Primitive reflexes	Sucks vigorously Normal moro	Weak suck Incomplete moro	Absent suck Absent moro
Autonomic system	Pupils normal size, reactive Heart rate > 100 Normal reparations	Pupils constricted, mm but reactive Heart rate usually <100 Periodic irregular breaths	Pupils fixed and dilated Heart rate inconsistent Completely apnoeic requiring ventilation
Select all that apply	Sarnat Stage :		Time of assessment
Examiner Name/sign/date			

Temperature Control Checklist	
Continuous rectal temperature monitoring started	<input type="checkbox"/>
Rectal temperature documented every 15 minutes	<input type="checkbox"/>

Passive Cooling (time started) h : m Temperature (at start of cooling) . °C

Active Cooling (time started) h : m Temperature (at start of cooling) . °C

Target temperature achieved (time) h : m Decision time to target temperature(hours)

Clinical management checklist	
Actively manage blood pressure to maintain within normal range	<input type="checkbox"/>
Avoid hyper/hypocarbica	<input type="checkbox"/>
Restrict fluids (40 mls/kg/day) <small>unless clinically indicated</small>	<input type="checkbox"/>
Maintain blood sugar within normal range	<input type="checkbox"/>
Low dose morphine infusion (5 – 10 mcg/kg/hr) when cooling commenced	<input type="checkbox"/>

Parental Communication	
Family members present	<input type="checkbox"/>
Key points from discussion	<input type="checkbox"/>
Parent information leaflet given?	<input type="checkbox"/>
Clinician Names/sign/date/time	<input type="checkbox"/>

TRANSFER

NTS London arrival (Date and time):

Temperature on arrival: ° C

Time NTS commenced cooling:

Temperature at start of NTS cooling: ° C

Temperature at arrival at accepting unit: ° C

Rectal

or

Axilla

Active

or

Passive

Rectal

or

Axilla

Relevant additional information: