**PHYSICIAN'S RECORD OF NEWBORN INFANT**

<table>
<thead>
<tr>
<th>PART OF THE MEDICAL RECORD</th>
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</thead>
<tbody>
<tr>
<td><strong>IMPRESSION AT ADMISSION:</strong></td>
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**BIRTH:**

<table>
<thead>
<tr>
<th>MONTH</th>
<th>DAY</th>
<th>YEAR</th>
<th>Milit. TIME</th>
<th>WEIGHT</th>
<th>LENGTH</th>
<th>HEAD CIR.</th>
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<td>LBS</td>
<td>OZ</td>
<td>INCHES</td>
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<td>INCHES</td>
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</tbody>
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* CODE each item as follows:
- **O** = No Abnormality
- **X** = Abnormality (describe abnormal findings objectively)

1. **GENERAL APPEARANCE**  
   (Maturity, Activity, Tone, Cry, Color, Nutrition, Edema)

2. **SKIN**  
   (Icterus, Rashes, Hematoma)

3. **HEAD, NECK**  
   (Molding, Caput, Craniotabes, Cephalohematoma)

4. **EYES**  
   (Abnormalities, Conjunctiva, Red Reflex)

5. **EARS, NOSE & THROAT**  
   (Lips, Gums, Palate)

6. **THORAX**  
   (Including Breast Hypertrophy)

7. **LUNGS**

8. **HEART**  
   (Including Femoral Pulse)

9. **ABDOMEN**  
   (Including Umbilicus)

10. **GENITALIA**  
    (Testes, Circumcision, Meatus, Discharge)

11. **ANUS**

12. **TRUNK & SPINE**

13. **EXTREMITIES**  
    (Including Clavicles & Abduction of Hip Joints)

14. **REFLEXES**  
    (Moro, Grasp, Sucking, Swallowing)

**WHITE - Medical Records**

**CANARY - Physician's Copy**