

Newborn Examination Competencies

Nurse Midwifery Specialty Track

The Ohio State University

Student _____ Date _____

Faculty _____

COMPONENT	Not yet Acceptable	Needs Improvement	Satisfactory
1. Reviews Newborn and Maternal Charts For Pertinent Information-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Uses Appropriate Techniques for Performing Physical Exam Including:			
a. Gentleness-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Asepsis-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Thermal regulation-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Performs Complete Physical Exam on Newborn, Including:			
a. General appearance-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b. Contour, proportions, and posture-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c. Skin-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d. Head-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMPONENT		Not yet Acceptable	Needs Improvement	Satisfactory
e.	Eyes-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
f.	Ears-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
g.	Nose-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
h.	Mouth and Pharynx -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
i.	Neck-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
j.	Thorax-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
k.	Lungs-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
l.	Heart-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
m.	Back-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
n.	Abdomen-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
o.	Male/Female genitalia-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
p.	Anus-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
q.	Extremities-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
r.	Neurologic evaluation -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
s.	Gestational age assessment -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4.	Obtains Measurements:			
a.	Head circumference -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b.	Chest circumference-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c.	Length-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

COMPONENT	Not yet	Needs	Satisfactory
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		Acceptable	Improvement	
5.	Assesses Reflexes:			
	a. Moro-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Rooting-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Sucking-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Stepping-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. Truck incurvation -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Palmar and Plantar grasp-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	Explains Exam Findings and Teaches About Newborn Characteristics to Mother/Father Appropriately -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Records Findings Accurately Using Appropriate Forms-----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

