

Patient surveillance master data form – NEO-KISS

webKessID:	<input type="text"/>	Patient ID:	<input type="text"/>	Patient name:	<input type="text"/>		
Transfer?:	<input type="radio"/> no	<input type="radio"/> yes	<input type="text"/> h postnatal	Multiple births:	<input type="radio"/> yes	Total:	<input type="text"/>
					<input type="radio"/> no		
Birthweight:	<input type="text"/>						
g							
Gestational age:	<input type="text"/>	(w+d)	CRIB-Score:	<input type="text"/>			
Sex:	<input type="radio"/> male	<input type="radio"/> female	Type of delivery	<input type="radio"/> C-section	<input type="radio"/> vaginal	<input type="radio"/> Emergency c-section	
End of surveillance			Reason:	<input type="radio"/> 1800g achieved			
Date:	<input type="text"/>			<input type="radio"/> Transfer/discharge			
				<input type="radio"/> death			
Patient days:	<input type="text"/>		Intubation days:	<input type="text"/>			
CVC days:	<input type="text"/>		CPAP days:	<input type="text"/>			
PVC days:	<input type="text"/>		Antibiotics days:	<input type="text"/>			
Comments:	<input type="text"/>						