

Patient data:

Hospital: _____

Day of admission: _____

Study: _____

Place of birth: _____

Time of birth: _____

Birth weight in g: _____

GA: ____ / ____ SSW HC: ____ cm

male female inborn outborn

Temperature on arrival at birth clinic _____ °C

Temperature at admission NICU/PICU : _____ °C

Pregnancy complications:

no yes unknown

Delivery:

SVD cephalic SVD breech
 instrumental elective CS
 emergency CS secondary CS

Risk for neonatal infection:

no yes unknown

Mother GBS positive?

no yes unknown

Mother GBS positive antibiotics given?

no yes unknown

PROM(>18hrs)

no yes unknown

Delivery complications

none unknown
 head entrapment placental abruption
 prolapsed cord ruptured uterus
 shoulder dystocia path. CTG
 other, please specify _____

Clinical details at birth and resuscitation

Apgar score at 1,5 and 10 min ____/____/____

Resuscitated > 10 min no yes

Umbilical arterial pH _____

Worst bloodgas results within 60 min after birth, including umbilical gases:

capillary arterial venous

pH ____ BE deficit ____ Lactate (mmol/l) ____

Lactate if not within 60 min, at ____ hrs of life

Congenital malformations apparent at birth

Neurological details on admission

Sarnat stage ____ at ____ hrs of life

Thompson score ____ at ____ hrs of life

Decision on cooling

Does the infant fulfil the criteria for cooling?

no yes

If no, please go to page 4

Type of cooling: passive active

Age in hrs after birth when cooling was started ____

Age in hrs after birth when cooling temperature (<=34°C) was reached _____

Type of temperature measurement:

rectal esophageal bladder

Cooling day 1 details

Was temperature <33°C during day 1?
 no yes unknown

Was temperature >34°C during day 1?
 no yes unknown

Conditions noted during these 24hrs:

- none hypotension
- invasive ventilation coagulopathy
- non invasive ventilation low flow
- seizure clinical seizure subclinical
- MRI MRS
- cUS aEEG
- sedation opiates
- antiepileptica

lowest blood glucose (mmol/l) _____

highest blood glucose (mmol/l) _____

Sarnat stage _____ at _____ hrs of life

Thompson score _____ at _____ hrs of life

Sarnat	Stage 1 alert	Stage 2 Lethargic	Stage 3 stuporous
Level of consciousness			
Neuromusc. Control			
Muscle tone	Normal	Mild hypotonia	Flaccid
Posture	Mild dist. flexion	Strong dist. flexion	Decerebr.
Stretch reflexes	↑	↑	↓, absent
Segment. myoclonus	Present	Present	Absent
Complex Reflexes			
Suck	Weak	Weak or absent	Absent
Moro	Strong	Weak	Absent
Oculovestibular	Normal	Weak	Weak
Tonic neck	Slight	Strong	Absent
Autonomic function			
Pupils	Mydriasis	Miosis	Variable
Heart Rate	Tachycardia	Bradycardia	Variable
Salivary secretions	Sparse	Profuse	Variable
GI Motility	Normal or ↓	↑; diarrhoe	Variable
Seizures	None	Common	Uncommon

omit day 1 (treatment stopped)

Cooling day 2 details

Was temperature <33°C during day 2?
 no yes unknown

Was temperature >34°C during day 2?
 no yes unknown

Conditions noted during these 24hrs:

- none hypotension
- invasive ventilation coagulopathy
- non invasive ventilation low flow
- seizure clinical seizure subclinical
- MRI MRS
- cUS aEEG
- sedation opiates
- antiepileptica

lowest blood glucose (mmol/l) _____

highest blood glucose (mmol/l) _____

Sarnat stage _____ at _____ hrs of life

Thompson score _____ at _____ hrs of life

Encephalopathy Thompson Score				
Sign	0	1	2	3
Tone	Normal	Hyper	Hypo	Flaccid
LOC	Normal	Hyper-alert stare	Lethargic	Comatose
Fits	None	Infrequent <3/day	Frequent >2/day	
Posture	Normal	Fisting, cycling	Strong distal flexion	Decerebrate
Moro	Normal	Partial	Absent	
Grasp	Normal	Poor	Absent	
Suck	Normal	Poor	Absent/bites	
Respiration	Normal	Hyper-ventilation	Brief apnoea	Apnoeic
Fontanelle	Normal	Full, not tense	Tense	

omit day 2 (treatment stopped)

Cooling day 3 details

Was temperature <33°C during day 3?

- no yes unknown

Was temperature >34°C during day 3?

- no yes unknown

Conditions noted during these 24hrs:

- none hypotension
- invasive ventilation low flow
- non invasive ventilation coagulopathy
- seizure clinical seizure subclinical
- MRI MRS
- cUS aEEG
- sedation opiates
- antiepileptica

lowest blood glucose (mmol/l) _____

highest blood glucose (mmol/l) _____

Sarnat stage _____ at _____ hrs of life

Thompson score _____ at _____ hrs of life

Sarnat	Stage 1	Stage 2	Stage 3
Level of consciousness	alert	Lethargic	stuporous
Neuromusc. Control			
Muscle tone	Normal	Mild hypotonia	Flaccid
Posture	Mild dist. flexion	Strong dist. flexion	Decerebr.
Stretch reflexes	↑	↑	↓, absent
Segment. myoclonus	Present	Present	Absent
Complex Reflexes			
Suck	Weak	Weak or absent	Absent
Moro	Strong	Weak	Absent
Oculovestibular	Normal	Weak	Weak
Tonic neck	Slight	Strong	Absent
Autonomic function			
Pupils	Mydriasis	Miosis	Variable
Heart Rate	Tachycardia	Bradycardia	Variable
Salivary secretions	Sparse	Profuse	Variable
GI Motility	Normal or ↓	↑; diarrhoe	Variable
Seizures	None	Common	Uncommon

omit day 3 (treatment stopped)

omit day 4 (treatment stopped)

Cooling day 4 details

Conditions noted during these 24hrs:

- none hypotension
- invasive ventilation low flow
- non invasive ventilation coagulopathy
- seizure clinical seizure subclinical
- MRI MRS
- cUS aEEG
- sedation opiates
- antiepileptica

lowest blood glucose (mmol/l) _____

highest blood glucose (mmol/l) _____

Sarnat stage _____ at _____ hrs of life

Thompson score _____ at _____ hrs of lif

Encephalopathy Thompson Score				
Sign	0	1	2	3
Tone	Normal	Hyper	Hypo	Flaccid
LOC	Normal	Hyper-alert stare	Lethargic	Comatose
Fits	None	Infrequent <3/day	Frequent >2/day	
Posture	Normal	Fisting, cycling	Strong distal flexion	Decerebrate
Moro	Normal	Partial	Absent	
Grasp	Normal	Poor	Absent	
Suck	Normal	Poor	Absent/bites	
Respiration	Normal	Hyper-ventilation	Brief apnoea	Apnoeic
Fontanelle	Normal	Full, not tense	Tense	

Rewarming details:

After how many hrs of cooling was rewarming started? _____

After how many hrs of cooling was temperature >=36.0°C reached? _____

Temperature >37.7°C during rewarming period?

- no yes unknown

Temperature < 33 °C during rewarming period?

- no yes unknown

Cooling details

If not cooled, reason for not cooling:

If cooling was stopped earlier than 72 h,
please explain why:

Diagnosis during hospitalization:

- none
- pulmonary hypertension
- major cerebral anomaly
- pneumonia
- meconium aspiration syndrome
- other, please specify

Sepsis no yes unknown

If yes, please give day of onset _____

and pathogen _____

Was subcutaneous fat necrosis diagnosed during
hospitalization?

- no yes unknown

Comments to diagnoses during hospitalization:

Neurological details at discharge:

Neurological examination normal?

- no yes unknown

EEG after cooling? no yes unknown

cUS after cooling? no yes unknown

MRI after cooling? no yes unknown

Day of MRI: _____

FU planned? no yes unknown

FU month after birth _____

Outcome:

Day of discharge/transfer: _____

Discharge to:

- home
- died
- other hospital _____

Weight at discharge (g): _____

IV/AI number: _____

Comments (for all items):
