



Queensland
Government

Neonatal Seizure and
Neurological Observation Chart

Facility: _____

Birth Details		Blood Gas (cord/first hour)		Appgars	Other Information/Risk Factors/Therapeutic Hypothermia	
Date: _____ / _____ / _____		Arterial	Venous	1 minute:	Is Sarnat scoring indicated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Time (24hr): _____ : _____		pH:	pH:	5 minutes:	Is therapeutic hypothermia indicated? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/> SVB <input type="checkbox"/> Forceps		pO ₂ :	pO ₂ :			
<input type="checkbox"/> Vacuum extraction		pCO ₂ :	pCO ₂ :			
<input type="checkbox"/> Caesarean		BE:	BE:	10 minutes:		
Indication: _____		Lactate:	Lactate:			

(Affix identification label here)

URN: _____

Family name: _____

Given name(s): _____

Address: _____

Date of birth: _____ Sex: ☐ M ☐ F ☐ I

State			Spontaneous movements and response to stimuli		Abnormal movements	Tone and posture	Autonomic alteration	Fontanelle tension	Pupils (mm) and reaction to light			Additional information	
AL	Alert		N	Normal	A	Automatism	H	Heart rate	N	Normal (soft)	+ Reacts to light 8mm ● - No reaction 7mm ● S Sluggish 6mm ● C Closed eyes 5mm ● 4mm ● 3mm ● 2mm ● 1mm ●	• Refer to QCG guideline <i>Neonatal seizures</i> • For medication information refer to QCG NeoMedQ. • Note plan of care, response to treatment and other relevant information.	
AW	Awake		D	Decreased	F	Flaccid	S	Sunken	S	Sunken			
S	Sleeping		W	Withdrawal to stimuli	H	Hypertonic	BP	Blood pressure	T	Tense			
I	Irritable		NR	No spontaneous movement/response to stimuli	HO	Hypotonic	• Increase/decrease	B	Bulging	B			Bulging
J	Jittery		S	Stops with restraint or modified posture	C	Clonic	• Recurrent rhythmic/jerky	B	Breathing				
L	Lethargic				M	Myoclonic	• Pattern change						
C	Coma				• Apnoea								
				T	Tonic	• Cyanosis	GIT	Gastrointestinal					
					• Sustained increased muscle contraction	S	Sudomotor	• Salivation					
					J	Jittery	• Sweating	V	Vasomotor				
					• Rapid, oscillatory tremor			• Pallor/flushing					
					E	Epileptic spasm	T	Thermoregulation					
					• Sustained flexion			• Unstable					
					P	Provoked							
Date	Time (24hr)	State	Spontaneous movements and response to stimuli		Abnormal movements <i>Note body parts and side(s)</i>	Tone and posture	Autonomic alteration <i>(describe changes)</i>	Fontanelle tension	Pupils (mm) and reaction to light		Comments/seizure duration/medication type and response	Initials	
			L	R					L	R			
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