

## DISCHARGE FROM NEONATAL UNIT

### Supporting information

This guideline has been prepared with reference to the following:

American Academy of Pediatrics Committee on Fetus and Newborn. Hospital discharge of the high-risk neonate. *Pediatrics* 2008;122:1119-26

<http://pediatrics.aappublications.org/content/122/5/1119.full>

#### **What factors increase the likelihood of parents keeping their follow-up appointments?**

In a 2020 study from New York, an anonymous surveys of families who presented for their initial follow up appointment, 95% indicated that bedside education played the most important role in appointment attendance (Brachio, 2020).

A retrospective observational cohort study (Nehra, 2009) found that children of older mothers were more likely to attend follow-up. Factors which significantly improved compliance with follow-up care were patient contact after discharge (compliant: 65% vs. non-compliant: 35%) and early intervention referral (compliant: 64% vs. non-compliant: 36%). Factors which significantly hindered compliance were maternal drug use during pregnancy (compliant: 11.8% vs. non-compliant: 88%), and patient transfer to outside NICUs [(transferred out: compliant: 3 (10.3%), non-compliant 25 (89.3%)].

Brachio SS, Farkouh-Karoleski C, Abreu A et al. Improving Neonatal Follow-up: A Quality Improvement Study Analyzing In-hospital Interventions and Long-term Show Rates. *Pediatr Qual Saf.* 2020;5:e363  
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7870232/>

Nehra V, Pici M, Visintainer P, et al. Indicators of compliance for developmental follow-up of infants discharged from a regional NICU. *J Perinat Med* 2009;37:677-81  
<http://edoc.hu-berlin.de/oa/degruyter/jpm.2009.135.pdf>

**Evidence Level: IV**

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