



Electronic copy is controlled under document control procedure. Hard copy is uncontrolled & under responsibility of beholder					
It is allowed ONLY to access and keep this document with who issued, who is responsible and to whom it is applicable.					
Information Security Classification: ☑ Open ☐ Confidential ☐ Sensitive ☐ Secret					

Obstetric and Neonatal Services Inspection Checklist- Final

Name of the Facility: _			
Date of Inspection:	/_	/_	

Ref.	Description	Yes	No	N/A	Remarks		
5	STANDARD ONE: REGISTRATION AND LICENSURE PROCEDURES						
5.4.	The health facility should develop the following						
J.4.	policies and procedure; but not limited to:						
5.4.1.	Patient acceptance criteria						
5.4.2.	Patient assessment and admission						
5.4.3.	Patient education and Informed consent						
5.4.4.	Patient health record						
5.4.5.	Infection control measures and hazardous waste						
3.4.3.	management						
5.4.6.	Incident reporting						
5.4.7.	Patient privacy						
5.4.8.	Medication management						
5.4.9.	Emergency action plan						
5.4.10.	Patient discharge/transfer.						
	Health facilities providing obstetric and neonatal care						
5.5.	shall develop and implement a policy for falls						
	management.						
	The health facility shall ensure it has in place adequate						
5.11.	lighting and utilities, including temperature controls,						
J.11.	water taps, medical gases, sinks and drains, lighting,						
	electrical outlets and communications.						
6	STANDARD TWO: HEALTH FACILITY REQUIREMENT	TS					
6.5.	The Maternity Unit incorporates:						

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	1/8
Checklist- Final	C5.0.01_1 40	_	, 106 22,2024	7.05 22,2027	2,0



6.5.1.	Birthing Unit		
6.5.2.	Inpatient accommodation – Antenatal		
6.5.3.	Inpatient accommodation – Postnatal		
6.5.4.	Nurseries:		
	Well Baby Nursery (WBN) or General Care Nursery		
a.	(GCN)		
b.	Special Care Baby Unit (SCBU) or Special Care		
D.	Nursery (SCN)		
	NICU (Neonatal Intensive Care Unit) - which may be		
c.	co-located with other Intensive Care Units and should		
	be separate from the Maternity Unit.		
6.7.	The maternity unit shall be located and designed to		
0.7.	prohibit non-related traffic through the unit.		
	Labour Deliver Recovery (LDR) rooms may be located		
6.8.	in a separate LDR suite, in close proximity to the		
	caesarean delivery suite.		
	Antenatal (antepartum) rooms shall be single-patient		
6.9.	rooms, and should be at least 3.65 meters wide by		
	3.96 meters deep exclusive toilet rooms, closets,		
	lockers, wardrobes, alcoves, or vestibules.		
6.10.	The LDR or LDRP room should be equipped with the		
	following:		
6.10.1.	Delivery bed		
6.10.2.	Birthing light		
6.10.3.	Medical gas and vacuum system accessible to the		
0.10.5.	mother's delivery area and infant resuscitation		
6.10.4.	Nurse call system		
6.10.5.	Telephone or communication system		
	Sixteen (16) Electric receptacles (8 convenient to		
6.10.6.	head of bed with one on each wall and four (4)		
	convenient to each bassinet with one on each wall).		
6.10.7.	Hand washing station		

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	2/8
Checklist- Final	C1 _ 5.0.01_1 40	_	7 tug 22,2024	7 tug 22,2027	2,0



6.10.8.	Medical and general waste bin			
6.10.9.	Sharps container			
6.11.	A minimum of one caesarean delivery room shall be provided for every obstetrical unit unless direct access for caesarean delivery procedures is provided in surgical operation room.			
6.12.	New-born nursery room (if provided) should contain no more than sixteen (16) infant stations.			
6.13.	Support areas for obstetric unit should consist of the following:			
6.13.1.	Nurse station with dedicated documentation area			
6.13.2.	Secured medication safety zone			
6.13.3.	Nourishment area			
6.13.4.	Clean workroom or clean supply room			
6.13.5.	Soiled workroom or soiled holding room			
6.13.6.	Equipment and supply storage			
6.13.7.	Housekeeping services room			
6.13.8.	Hand washing station (including wall-mounted hand washing soap (non-refillable), sanitizer (non-refillable) and tissue box.			
6.13.9.	Examination/treatment and/or multipurpose diagnostic testing room (if required)			
6.13.10.	Clean linen cabinet			
6.13.11.	Staff changing room / staff resting room			
7	STANDARD THREE: OBSTETRIC SERVICE REQUIREM	MENTS		
7.2.	To provide antenatal care the facility should have the following equipment:			
7.2.1.	Vital signs Monitor			
7.2.2.	Fetoscope			
7.2.3.	Electrocardiogram (ECG)			
7.2.4.	Cardiotocography (CTG)			
7.2.5.	Ultrasonography			

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	3/8
Checklist- Final	CF_9.0.01_F40	_	7 tug 22,2024	7 tug 22,2027	3,0



7.2.6.	Access to laboratory testing		
7.2.7	Emergency crash cart with proper supplies and		
7.2.7.	medication.		
	Level I - Basic care		
	Provide a basic level of care to uncomplicated		
7.13.1.	pregnancies for pregnant women at thirty five (35)		
	weeks of gestation and above.		
	Provide blood bank supplies 24/7, including protocols		
7.13.6.	and capabilities for blood and blood component		
7.13.0.	therapy, in addition having Group O Negative red cells		
	(at least 2 units) available on site for emergency use.		
7.13.7.	Establish formal transfer plans in partnership with a		
7.23.7.	higher-level receiving health facility.		
7.13.10.	The following equipment shall be available in each		
	labour room:		
a.	A labour bed.		
b.	Vital signs monitor and stethoscope		
c.	CTG.		
d.	Access to portable ultrasonography.		
e.	Intravenous solutions and infusion pumps.		
f.	Equipment for inhalation and regional anaesthesia		
1.	such as the following but not limited to:		
	Boyle's apparatus		
	Anesthesia kit		
	Oxygen cylinder and mask		
	Suction unit		
g	Emergency/crash cart with proper supplies and		
g.	medication such as:		
	Defibrillators		
	Suction devices		
	Calcium chloride		
	Sodium chloride		

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection Checklist- Final	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	4/8





	Intubation kits		
	Anesthesia		
h.	Instruments and equipment for normal delivery		
	including but not limited to the following:		
	Forceps (artery, dissecting, sponge)		
	Umbilical Cord Scissors		
	Suction apparatus		
	Equipment for adult resuscitation		
	Equipment for neonatal resuscitation		
	Sphygmanometer, adult and newborn thermometer		
	and newborn weighing machine.		
	The hospital should have educational posters and		
7.13.11.	clear pathways and protocols for major obstetric		
7.13.11.	situations such as shoulder dystocia, Post-Partum		
	Haemorrhage (PPH) and eclamptic seizure.		
	Health facilities providing Level I obstetric care shall		
7.14.8.	provide a Level I. neonatal care services to new-born		
	infants.		
	Level II - Specialty Care		
	Level II obstetric care can provide care to high-risk		
7.15.	pregnancies and for pregnant women at thirty two		
7.13.	(32) gestational weeks and above, unless an		
	emergency medical condition exists.		
	Health facilities providing Level II obstetric care shall		
7.16.	maintain the capabilities of Level I in addition to the		
	below:		
7.16.1.	Capability to perform Computed Tomography (CT)		
7.10.1.	scan and Magnetic Resonance Imaging (MRI).		
	Special equipment and care might be needed to		
	accommodate the services needed for obese women		
7.16.2.	and healthcare professionals should be trained to		
	handle bariatric cases. Suggested equipment for		
	bariatric women includes:		

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection Checklist- Final	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	5/8



a.	Bariatric operating table		
b.	Bariatric profiling bed		
c.	Transfer chair		
d.	Bariatric folding wheelchair		
7.17.5.	Health facilities providing Level II obstetric care shall		
7.17.5.	maintain level II neonatal care units.		
	Level III - Subspecialty Care		
	Level III obstetric care can provide care to more		
7.18.	complex obstetric and foetal cases as well as pregnant		
	women at less than thirty two (32) gestational weeks.		
	Health facilities providing Level III obstetric care shall		
7.19.	maintain the same capabilities of Level II in addition to		
	the below:		
	Provide advanced ultrasonography imaging services		
	for maternal and foetal assessment with minimal of		
7.19.1.	the following probes (convex, 4D convex, endo-cavity,		
	linear, small part linear), including Doppler studies on		
	24/7 basis.		
7.19.2.	Have medical and surgical Intensive Care Units (ICUs).		
	Provide ventilation and ability to stabilize the patient		
7.19.3.	in labour and delivery until transferred safely to ICU		
	when needed.		
7.20.3.	Health facilities providing Level III obstetric care shall		
7.20.5.	maintain level III neonatal care units.		
7.21.	Water birth requirements:		
	The Delivery room will require direct access to a water		
7.21.1.	pool area; this may be integrated within the delivery		
,	room. Make sure to have an easy flow access and		
	circulation around the pool.		
a.	Birth pools can be either permanently installed or		
a.	portable as per the manufacturer's specifications.		

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection Checklist- Final	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	6/8



b. moisture resistance, smooth, has no crevice or seams, and easy to clean. c. Provision of grab rails for patients. d. Easily accessible medical gases including nitrous oxide and oxygen used for pain relief to the pool area. e. The pool should be regularly maintained. f. Routine testing of the hospital water supply should be applied. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1 Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2 The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) Menonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning i. Breast pump machine		Surface should be non-slip, anti-bacterial, nonporous,			
c. Provision of grab rails for patients. d. Easily accessible medical gases including nitrous oxide and oxygen used for pain relief to the pool area. e. The pool should be regularly maintained. f. Routine testing of the hospital water supply should be applied. g. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. 8 STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1 Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	b.	moisture resistance, smooth, has no crevice or seams,			
d. Easily accessible medical gases including nitrous oxide and oxygen used for pain relief to the pool area. e. The pool should be regularly maintained. f. Routine testing of the hospital water supply should be applied. g. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. 8 STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care 8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning		and easy to clean.			
d. and oxygen used for pain relief to the pool area. e. The pool should be regularly maintained. f. Routine testing of the hospital water supply should be applied. g. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. 8 STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: Access to radiology services (CT and MRI) on 24/7 basis. 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	c.	Provision of grab rails for patients.			
e. The pool should be regularly maintained. f. Routine testing of the hospital water supply should be applied. g. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. 8 STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	٦	Easily accessible medical gases including nitrous oxide			
f. Routine testing of the hospital water supply should be applied. g. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. 8 STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable v-rays h. Portable ultrasound scanning	a.	and oxygen used for pain relief to the pool area.			
f. applied. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: Access to radiology services (CT and MRI) on 24/7 basis. 8.15.1. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	e.	The pool should be regularly maintained.			
applied. Consideration should be given to ensure that the pool temperature is controlled at the time of the birth. STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: Access to radiology services (CT and MRI) on 24/7 basis. 8.15.1 The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) Meonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	r	Routine testing of the hospital water supply should be			
8. STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	1.	applied.			
8 STANDARD FOUR: NEONATAL SERVICE REQUIREMENTS To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1 Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	ď	Consideration should be given to ensure that the pool			
8.3. To minimize the risk of infant abduction all areas including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care 8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	g.	temperature is controlled at the time of the birth.			
including new-born nurseries, intrapartum and postnatal should be controlled and part of hospital safety program. Level I - Basic care 8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	8	STANDARD FOUR: NEONATAL SERVICE REQUIREM	ENTS		
8.3. postnatal should be controlled and part of hospital safety program. Level I - Basic care 8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning		To minimize the risk of infant abduction all areas			
postnatal should be controlled and part of hospital safety program. Level I - Basic care 8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	83	including new-born nurseries, intrapartum and			
Level I - Basic care 8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	0.5.	postnatal should be controlled and part of hospital			
8.15. Hospitals providing level II neonatal care shall maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning		safety program.			
8.15 maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning		Level I - Basic care			
maintain the below requirements, in addition to level I: 8.15.1. Access to radiology services (CT and MRI) on 24/7 basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	815	Hospitals providing level II neonatal care shall			
8.15.1. basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	0.13.	maintain the below requirements, in addition to level I:			
basis. 8.15.2. The following range of equipment: a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	8.15.1	Access to radiology services (CT and MRI) on 24/7			
a. Neonatal intensive care incubators b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	0.13.1.	basis.			
b. Neonatal ventilator c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	8.15.2.	The following range of equipment:			
c. Syringe/infusion pumps (0.1 ml/hour) d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	a.	Neonatal intensive care incubators			
d. Neonatal resuscitator along with emergency/crash cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	b.	Neonatal ventilator			
d. cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	c.	Syringe/infusion pumps (0.1 ml/hour)			
cart including proper supplies and medication. e. Blood gas analyser f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	d	Neonatal resuscitator along with emergency/crash			
f. Phototherapy units g. Portable x-rays h. Portable ultrasound scanning	u.	cart including proper supplies and medication.			
g. Portable x-rays h. Portable ultrasound scanning	e.	Blood gas analyser			
h. Portable ultrasound scanning	f.	Phototherapy units			
	g.	Portable x-rays			
i. Breast pump machine	h.	Portable ultrasound scanning			
	i.	Breast pump machine			

Checklist	ID	lssue#	Issue Date	Revision Date	Page#	
Obstetric and Neonatal Services Inspection	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	7/8	
Checklist- Final	Ci _5.0.01_i 40	_	7 tug 22,2024	71ug 22,2027	,,0	



k. Umbilical arterial and venous catheter Neonatal monitors to measure heart rate, respiratory rate, blood pressure, transcutaneous CO2 monitor, oxygen saturation and ambient oxygen n. Portable incubator with ventilator. Level III - Subspecialty intensive care (NICUs) Provide a full range of physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. 8.16.4. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding, Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. 8.17.4. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of the new-born formula.	j.	Oxygen analyser/pulse oximeter		
I. rate, blood pressure, transcutaneous CO2 monitor, oxygen saturation and ambient oxygen n. Portable incubator with ventilator. Level III - Subspecialty intensive care (NICUs) Provide a full range of physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.2. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	k.	Umbilical arterial and venous catheter		
n. Portable incubator with ventilator. Level III - Subspecialty intensive care (NICUs) Provide a full range of physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		Neonatal monitors to measure heart rate, respiratory		
n. Portable incubator with ventilator. Level III - Subspecialty intensive care (NICUs) Provide a full range of physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	l.	rate, blood pressure, transcutaneous CO2 monitor,		
Level III - Subspecialty intensive care (NICUs) Provide a full range of physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		oxygen saturation and ambient oxygen		
8.16.3. Provide a full range of physiologic monitoring equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. 8.16.4. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	n.	Portable incubator with ventilator.		
8.16.3. equipment, laboratory and imaging facilities, nutrition and pharmacy support with pediatric expertise. 8.16.4. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		Level III - Subspecialty intensive care (NICUs)		
and pharmacy support with pediatric expertise. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula 8.17.2. milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. 8.17.4. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		Provide a full range of physiologic monitoring		
8.16.4. Provide hypothermia system (total body cooling) and capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	8.16.3.	equipment, laboratory and imaging facilities, nutrition		
8.16.4. capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. 8.17.3. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		and pharmacy support with pediatric expertise.		
capability to perform cerebral function monitoring. All health facilities shall develop and implement a policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. 8.17.4. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	9167	Provide hypothermia system (total body cooling) and		
8.17. policy for nutritional management aimed to optimize nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. 7. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	0.10.4.	capability to perform cerebral function monitoring.		
8.17. nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		All health facilities shall develop and implement a		
nutrition and prevent malnutrition detailing the following, but not limited: 8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula 8.17.2. milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	Q 17	policy for nutritional management aimed to optimize		
8.17.1. The importance of the breastfeeding. Newborn babies who can start breast milk or formula 8.17.2. milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	0.17.	nutrition and prevent malnutrition detailing the		
Newborn babies who can start breast milk or formula 8.17.2. milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		following, but not limited:		
8.17.2. milk by mouth or through nasogastric (NG)/ orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	8.17.1.	The importance of the breastfeeding.		
orogastric (OG) tube. 8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		Newborn babies who can start breast milk or formula		
8.17.3. Newborn babies who are very small, sick or cannot coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	8.17.2.	milk by mouth or through nasogastric (NG)/		
8.17.3. coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of		orogastric (OG) tube.		
coordinate sucking, breathing, and swallowing. The outsourcing of the parenteral nutrition preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	0172	Newborn babies who are very small, sick or cannot		
8.17.4. preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	0.17.3.	coordinate sucking, breathing, and swallowing.		
preparation and its administration. The preparation (including the required equipment and preparation area), safe storage and handling of	017/	The outsourcing of the parenteral nutrition		
8.17.5. and preparation area), safe storage and handling of	0.17.4.	preparation and its administration.		
		The preparation (including the required equipment		
the new-born formula.	8.17.5.	and preparation area), safe storage and handling of		
		the new-born formula.		

Checklist	ID	lssue#	Issue Date	Revision Date	Page#
Obstetric and Neonatal Services Inspection	CP_9.6.01_F46	1	Aug 22,2024	Aug 22,2027	8/8
Checklist- Final					