

**Midwives Postnatal Handover to Warkworth Birthing Centre:**  
**Please fax to WWBC 094258209 or send with hospital discharge notes.**

**Informed consents given:**

Vitamin K oral/IM.	Sign:
Guthrie Test.	Sign:
Feeding method(circle) Breast / Artificial	Sign:

**Standing orders for medications please:**

sign:.....

**Standard Care Plan for postnatal cares please:**

sign:.....

**Any Deviations from the standard Care Plan:**

Problem/Issues:

Plan:

Goal:

Problem/Issues:	Plan:	Goal: