

# Post neonatal infant (28-364 days) death template

The Council defines a post neonatal infant death as that occurring within one year of birth but does not include perinatal deaths (i.e. 28–364 days).

This checklist should be completed within 28 days of the death or as specified by the CCOPMM:

1. for any death occurring in the wards or emergency department of the health service [sections 39-40 of the Public Health and Wellbeing Act 2008 (PHWB Act)]. These reports should be completed automatically, without a request from CCOPMM.
2. for deaths occurring outside the health service, but where the deceased received care or services prior to death at the health service (section 47 of the PHWB Act), A request from CCOPMM will be sent for these reports, as your hospital may not be aware of the death.

\* Required

## Reporting individual details

1. First name \*

2. Surname \*

3. Health service \*

4. Position \*

5. Phone number \*

6. Email address \*

## Infant details

7. Infant given names \*

8. Infant surname \*

9. Infant's address \*

10. Infant Date of birth \*



Format: M/d/yyyy

11. Infant Date of death \*



Format: M/d/yyyy

12. Place (hospital) of birth \*

13. UR number (hospital of birth) if known

14. Hospital of treatment UR number \*

15. Indigenous status of deceased \*

- Aboriginal
- Torres Strait Islander
- Both Aboriginal and Torres Strait Islander
- Non-indigenous
- Unknown

16. Child or family known to children protection – including referral at the time of this child's death \*

- Yes
- No
- Unknown

17. GP name \*

18. GP address \*

19. Place of death \*

20. UR number (if hospital is place of death)

21. Consultant's name \*

## Maternal Details

22. Maternal Given name \*

23. Maternal Surname \*

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