

Appendix H: Questionnaire for Health Care Professionals on Care of LBW Babies

For use (By Doctors and Nurses in Health Care Facilities)

(June, 2017 Version)

S.No:.....

Date:

Please complete the information

1. Facility type (colour the box of the most appropriate option)	i. District hospital <input type="checkbox"/> ii. Taluka hospital <input type="checkbox"/> iii. CHC <input type="checkbox"/> iv. Pvt <input type="checkbox"/> v. PHC <input type="checkbox"/>
2. Area of Work	i. Sick Newborn Care Unit (SNCU) <input type="checkbox"/> ii. Newborn Stabilising Unit (NBSU) <input type="checkbox"/> iii. Newborn Intensive Care Unit (NICU) <input type="checkbox"/> iv. Postnatal ward (PN) <input type="checkbox"/> v. Labour Room (LR) <input type="checkbox"/>
3. Name	
4. Age (in years)	
5. Work experience Months <input type="checkbox"/> /Years <input type="checkbox"/>
6. Designation	
7. Highest qualification	i. GNM <input type="checkbox"/> ii. BSc <input type="checkbox"/> iii. MSc <input type="checkbox"/> iv. MBBS <input type="checkbox"/> v. DCH <input type="checkbox"/> vi. MD <input type="checkbox"/>
8. Sex	i. Female ii. Male iii. Other
9. Previous training attended	i. Skilled Birth Attendant (SBA) ii. NSSK (Essential Care of Newborn)
10. Have participated in previous projects	i. Sukshema MNCH project ii. Skills and Drills Project in FRUs

Please write the single best option (either a, b, c, or d) in the “BEFORE” OR “AFTER” COLUMN FOR EACH QUESTION AS INSTRUCTED

BEFORE	QUESTION	AFTER
	1. The single best practical procedure for preventing spread of infection is a. Wearing gloves b. Wearing mask c. Cleaning surfaces d. Washing hands.	
	2. The main causes of neonatal deaths include a. Infection, asphyxia and low birth weight b. Tetanus diarrhea and preterm birth c. Asphyxia, pneumonia and tetanus d. Diarrhea, tetanus and congenital anomalies	
	3. KMC can help to prevent the following problems among LBW babies a. Hypocalcaemia and Hypokalemia b. Convulsion and Jitteriness c. Bleeding disorders and Jaundice d. Hypothermia and infection	
	4. Which of the following practices is best soon after birth of a newborn a. Receiving the baby on mother’s abdomen, drying and keeping the baby in skin to skin contact with the mother. b. Clamping and cutting the cord immediately and placing the baby under an open radiant warmer. c. Preparing an area for bath and checking if all the equipment are in working condition. d. Communicating to the family the sex of the baby and keeping baby with mother.	
	5. It is best to clamp the cord a. Soon after birth of the baby b. Within a minute of birth of the baby c. Between 1-3 minutes after birth of the baby. d. After 3 minutes of the birth of the	
	6. How long should initial skin-to-skin care be provided to all newborn babies? a. At least one hour b. At least two hours c. At least 24 hours. d. Only until the baby’s temperature is normal	

	<p>7. Newborn babies should be assessed every 15 minutes in the first hour of life during skin to skin care for</p> <ol style="list-style-type: none"> White blood cell count, Breathing, and temperature Activity, breathing, colour, and temperature Presence of hiccup, activity, and colour Presence of convulsion, cough, and feeding. 	
	<p>8. Which is the most important reason for weighing all babies as soon as possible after birth?</p> <ol style="list-style-type: none"> Mother and family members often want to know the birth weight Birth weight will help one know how long the baby will feed at each session of breastfeeding. Birth weight can help identify and classify babies who need special care. Birth weight will identify babies who need vitamin K. 	
	<p>9. Which of the following will NOT be used to classify a newborn baby at birth as well or not well?</p> <ol style="list-style-type: none"> Birth weight of newborn Temperature of newborn Type of delivery First clinical examination 	
	<p>10. A term baby with a birth weight of 2400 gms who has a temperature of 35.4 degree C, is breathing 80 breaths per minute, and not feeding. Classify this baby?</p> <ol style="list-style-type: none"> Baby has no problem – Can be managed routinely Baby has some risk for a problem – Needs close observation Baby is unwell – Might require special care Baby unwell – Might require intensive care. 	
	<p>11. Which of the following low birth weight baby's must be referred to a sick newborn care unit (SNCU) from the PHC/CHC or labour room?</p> <ol style="list-style-type: none"> Less than 2500 gms Less than 2000 gms Less than 1800 gms Less than 600 gms 	
	<p>12. Which of the following babies are eligible for KMC?</p> <ol style="list-style-type: none"> All babies more than 2500 grams. All babies less than 2000grams who require phototherapy All babies less than 2500grams with severe respiratory distress All babies less than 2500grams who are well. 	
	<p>13. If a baby's feet are cold but the body is warm the first action to take is to</p> <ol style="list-style-type: none"> Ask the mother to feed the baby Ask the mother to give KMC Ask the mother keep the baby next to her Ask the mother to carry the baby close to her 	
	<p>14. When a mother goes to sleep, the baby can</p> <ol style="list-style-type: none"> Continue to get KMC either with mother or family member 	

	<ul style="list-style-type: none"> b. Not be given KMC as it is dangerous for the baby c. Also be allowed to sleep with the mother d. Be kept as close to the side of the mother as possible 	
	<p>15. Which of the following is the most important monitoring part during KMC?</p> <ul style="list-style-type: none"> a. Check if the baby's head cap, socks, diaper are properly secured and if temperature is maintained. b. Check if the mother's clothing, seating and comfort and baby's temperature. c. Check the activity, breathing, colour and temperature of baby. d. Check if the baby is feeding and comfortable 	
	<p>16. Which is NOT a sign of respiratory distress in a newborn?</p> <ul style="list-style-type: none"> a. Grunting or noisy breathing b. Nasal flaring c. Chest retractions d. Respiratory rate of 50/minute 	
	<p>17. Which of the following is a NOT a danger sign for a newborn baby?</p> <ul style="list-style-type: none"> a. Hypothermia (<35.5 degrees C) b. Not feeding c. Jaundice on 3rd day of life d. Fast breathing with chest indrawing 	
	<p>18. If the baby's limbs feel cold to touch but the body is warm this is a sign of</p> <ul style="list-style-type: none"> a. Severe hypothermia b. Normal temperature c. Fever d. Cold stress 	
	<p>19. When a newborn baby does not cry soon after birth, which of the following shows the initial steps of resuscitation in correct order</p> <ul style="list-style-type: none"> a. Dry the baby, place on skin to skin, stimulate the baby, position b. Suction the mouth and then nose, dry baby, stimulate and position c. Carry the baby by legs (upside down), stimulate, suction and position d. Dry the baby, position, suction, stimulate and reposition 	
	<p>20. A newborn will require bag and mask ventilation when</p> <ul style="list-style-type: none"> a. There is no cry or breathing at birth b. Breathing is more than 30/min c. Baby is cyanosed but breathing after initial steps d. Baby is not breathing or crying after initial steps 	
	<p>21. Which of the following is a sign of good attachment?</p> <ul style="list-style-type: none"> a. Only the tip of the breast in the mouth b. Baby bites down and pulls on the nipple c. Baby's mouth wide open on the breast d. Baby's lower lip is turned inwards. 	

	<p>22. A baby who is adequately fed</p> <ul style="list-style-type: none"> a. Loses not more than 10% of birth weight b. Sleeps comfortably c. Passes urine 6-8 times d. All of the above 	
	<p>23. Decision on pallada feeding for a low birth weight baby will depend on which one of the following factors?</p> <ul style="list-style-type: none"> a. Good suckling and swallowing coordination b. Poor suckling but good swallowing coordination c. Very weak baby d. Baby has no respiratory distress 	
	<p>24. Direct breast feeding is recommended for a LBW baby who is</p> <ul style="list-style-type: none"> a. More than 1800grams with good sucking swallowing coordination b. More than 1800 grams, stable but not sucking well or choking on feeding c. More than 1800 grams and is with fast breathing and chest indrawing d. Less than 1000 grams birth weight and with fast breathing 	
	<p>25. Which of the following is the method of feeding a sick/unwell baby who is 1080gms weight at birth.</p> <ul style="list-style-type: none"> a. IV Fluids b. Tube feeding c. Pallada feeding d. Direct breast feeding. 	
	<p>26. A 1500 grams low birth weight newborn baby requires intravenous fluids in the first day of life. Which one of the below IV fluids must be given?</p> <ul style="list-style-type: none"> a. Normal saline b. Dextrose saline c. 10% dextrose d. Ringer lactate 	
	<p>27. Expressed breast milk can be kept at room temperature in a covered container for up to</p> <ul style="list-style-type: none"> a. 12 hours b. 10 hours c. 6 hours d. 4 hours 	
	<p>28. If a 1600 gm low birth weight baby needs tube feeding the best tube size to be used is</p> <ul style="list-style-type: none"> a. French size 6 b. French size 8 c. French size 10 d. French size 12 	
	<p>29. What must a mother be told about duration of kangaroo mother care (KMC)?</p> <ul style="list-style-type: none"> a. Give KMC for as long as possible 	

	b. Give KMC for 8 hours c. Give KMC for 1 hour each time d. Give KMC whenever possible	
	30. The best way to keep a newborn low birth weight baby warm during transport to a higher center when an incubator is not available includes a. Radiant warmer b. Warm cradle c. Kangaroo mother care d. Bed with drop light over it	

Kangaroo mother care (including skin to skin contact and exclusive breast feeding, along with early discharge) is a method of caring for preterm (PT) babies and low birth weight (LBW) babies. Please answer the following questions about KMC.

31. Did you receive any training on KMC: YES NO

32. If yes where did you receive the training and what was the duration of training?

33. Have you helped mothers to provide KMC for LBW babies YES NO

34. In your opinion, what assistance or support is needed to promote KMC?

i. for nursing staff

ii. for mothers

iii. From the facility

35. What are the possible advantages of KMC?

36. What are the possible disadvantages of KMC?

37. Please give your opinion on the following questions as either YES or NO by colouring appropriate box

	YES	NO
i. Do you encourage mothers in practicing KMC?	<input type="checkbox"/>	<input type="checkbox"/>
ii. Do you always assist the mothers in KMC?	<input type="checkbox"/>	<input type="checkbox"/>
iii. Do you support fathers/ grandparents to give KMC?	<input type="checkbox"/>	<input type="checkbox"/>
iv. Do you give information on KMC to fathers/grandparents?	<input type="checkbox"/>	<input type="checkbox"/>
v. Are you confident to give information on KMC to mothers?	<input type="checkbox"/>	<input type="checkbox"/>
vi. Do you know of the government of India policy on KMC?	<input type="checkbox"/>	<input type="checkbox"/>
a. If yes do you have a copy of the KMC policy in the ward?	<input type="checkbox"/>	<input type="checkbox"/>
b. If yes do the procedures in the facility comply with the policy?	<input type="checkbox"/>	<input type="checkbox"/>
c. If no, why not:		

38. Is KMC practiced in your hospital successfully?

i. If yes, please list 3 reasons

ii. If no, please list 3 reasons

39. Do you have any practical suggestions to make KMC more successful in your facility?

40. Could you please express your opinion on KMC by indicating whether you disagree or agree with the following statements? You could choose from the options strongly agree, agree, unsure, disagree and strongly disagree by colouring the appropriate box (☐) provided for the statements given below

	Strongly disagree	Disagree	Unsure	Agree	Strongly agree
i. Kangaroo mother care promotes bonding with the infant	☐	☐	☐	☐	☐
ii. Kangaroo mother care can increase the mothers' confidence in handling her infant	☐	☐	☐	☐	☐
iii. Kangaroo mother care is a waste of time	☐	☐	☐	☐	☐
iv. Kangaroo mother care should be practiced only for infants less than 2500gms	☐	☐	☐	☐	☐
v. Kangaroo mother care must begin within the first few hours of birth	☐	☐	☐	☐	☐
vi. It is dangerous to give kangaroo mother care when the mother lies down	☐	☐	☐	☐	☐
vii. As a nurse/doctor I am too busy with more important care than to teach a mother about kangaroo mother care	☐	☐	☐	☐	☐
viii. All mothers / fathers must be taught and counselled about KMC	☐	☐	☐	☐	☐
ix. Nurses should be involved in helping mothers initiate and maintain KMC	☐	☐	☐	☐	☐
x. KMC can result in effective breast feeding	☐	☐	☐	☐	☐
xi. A mother needs the support of family members to continue KMC at home	☐	☐	☐	☐	☐
xii. It is best to have a dedicated person to help mothers provide KMC	☐	☐	☐	☐	☐

Thank you for your time