





GOVERNMENT OF MEGHALAYA  
HEALTH & FAMILY WELFARE DEPARTMENT

BF Initiation within 1 Hour of Birth:

Yes

No

8. Delivery Note:

9. Any Complications:

10. Immunisation given to Baby at Birth:

11. Patient's Condition at the Time of Discharge:

12. Condition of the Baby at the Time of Discharge:

13. Treatment Given:

Treatment for Mother	Treatment for Baby

14. Instructions for Follow-Up:

15. Additional Notes for DAMA/LAMA Cases (if applicable):



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16. Name of the Medical Officer/Attending Physician: \_\_\_\_\_

17. Signature of the Medical Officer/Physician: \_\_\_\_\_

18. Date: \_\_\_\_\_