



# Neonatal Developmental Follow-up Referral Guide

HOPE Developmental Follow-up Clinic  
(Healthy Outcomes: Post-ICU Engagement).

Developmental surveillance and evaluation for high-risk infants and toddlers following NICU/CICU hospitalization with a history of prematurity, congenital heart disease and underlying medical complexities. HOPE Clinic serves high-risk patients until 2 years of age.



## Clinic Goals

- Early identification of developmental delays
- Ongoing developmental surveillance
- Coordination with early intervention and specialty services
- Support for families during early childhood and development

## Services Provided

### The clinic provides:

- Standardized development assessment
  - Bayley Scales of Infant and Toddler Development
  - The Capute Scales
  - MCHAT-R screener

- Neuromotor evaluation
  - Hammersmith Infant Neurological Examination
- Growth and nutrition monitoring
- Family education and anticipatory guidance for high-risk infants
- Referrals to Early Intervention and community resources
- Coordination with pediatric subspecialists

## Typical Appointment Timing

- Visits are typically scheduled at 6m, 12m, 18m and 2y.
- Visits are scheduled using the patient's corrected/adjusted age until the 2-year visit.



## HOPE Clinic Locations

### Appleton Clinic

2575 E. Evergreen Dr.  
Appleton, WI 54913

### Ashwaubenon Clinic

2550 S. Ashland Ave.  
Ashwaubenon, WI 54304

### Milwaukee Campus

8915 W. Connell Ct.  
Milwaukee, WI 53226

# Inclusion Criteria for High-Risk Infant Follow-up at Children's Wisconsin

HOPE Clinic: traditional high-risk infant follow-up, under the Neonatology service line

## External Referral Criteria

- Birth weight <1500 grams
- Gestational age <32 weeks
- Requiring oxygen for  $\geq$  28 days of hospital stay
- Patients requiring exchange transfusion
- Prolonged and/or severe symptomatic hypoglycemia requiring significant medical intervention (i.e., diazoxide, solcarb)
- Infants with complex congenital heart disease requiring surgery (within the first year of life)
- Infants placed on extracorporeal membrane oxygenation (ECMO)
- Severe congenital or acquired infections (i.e., severe medical necrotizing enterocolitis, severe sepsis, DIC or shock)
- Infants requiring significant surgical intervention
  - Congenital diaphragmatic hernia
  - Tracheoesophageal fistulas
  - Gastroschisis/Omphaloceles
  - Necrotizing Enterocolitis
  - Tracheostomy
- Infants with intrauterine drug exposure
- Requiring gastrostomy tube for severe feeding dysfunction
- Any other infant with a complicated NICU/CICU course requiring >3 months of hospitalization, at the discretion of the medical team
- History of observed clinical or EEG seizure activity
- Intracranial/Intraventricular hemorrhage (grade 3-4)
- White matter injury, including periventricular leukomalacia
- Hydrocephalus (acquired or congenital)
- Clinical history of/or physical exam findings consistent with hypoxic-ischemic encephalopathy (with or without cooling)
- Congenital structural central nervous system abnormalities
- Cerebral infarction or stroke
- CNS infections that result in severe meningitis or encephalitis

## How to Refer

- Internal provider using EPIC — place **Ambulatory Referral to Neonatology**
- External Provider — CHW NEONATAL DEVELOPMENTAL FOLLOW UP CLINICS in Epic or contact HOPE Clinic nurse coordinator at (414) 266-6898
- Providers cannot refer directly to DREAM Clinic. Referral should be made to outpatient Neurology and HOPE Clinic for neurodevelopmental testing until 2 years of age.

## Scheduling

- For both internal and external referrals — HOPE Clinic Nurse Coordinator will contact family to schedule first visit
- HOPE Clinic appointments **cannot** be scheduled through Children's Wisconsin Central Scheduling. Phone: (414) 266-6898 Fax: (414) 266-6979

If you have any questions or concerns, please contact your physician liaison:

[childrenswi.org/medical-professionals/contact](https://childrenswi.org/medical-professionals/contact)