



Government of Nepal  
Ministry of Health and Population  
Family Welfare Division  
Teku, Kathmandu

**MPDSR Tool 6**  
This form will be kept confidential and used only for quality of care improvement and statistical purposes and not for medicolegal purposes

Summary of Hospital Perinatal Death Review Form

Name of facility: \_\_\_\_\_ District: \_\_\_\_\_ Local Level: \_\_\_\_\_

<b>1. Report for:</b>	<b>MM</b>	<b>YY</b>

<b>2. Maternal Deaths:</b>	
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<b>3. Total deliveries:</b>		<b>4. Total Live Births:</b>		<b>5. Total Multiple deliveries:</b>	
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6. Still Births (SB):	Antepartum SB	Intrapartum SB		Total SB
		FHS present when mother admitted	FHS absent when mother admitted	

7. Early Neonatal Deaths (ENND)	ENND ≤1 day	ENND >1 day	Total ENND

<b>8. Total Perinatal deaths (SB + ENND)</b>	
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9. Birth Weight (Grams)	<1000 gms	1000-1500 gms	1501-2499 gms	2500-4000 gms	Not known	Total

10. Gestational Age (weeks)	<28 wks	28-32 wks	33-36 wks	37-41 wks	≥42 wks	Not known	Total

11. Delivered at	This facility	Other facility	Home	On the way	Not known	Total

12. Maternal Age (Yrs)	<20 yrs	20-35 yrs	>35 yrs	Not known	Total

13. Antenatal Care (ANC)	No ANC	Eight ANC as per National Protocol	ANC done but NOT as per National Protocol	Not Known	Total

14. Pregnancy	Single	Multiple	Total

16. Sex of babies	Male	Female	Ambiguous	Total

17. Ethnicity	Dalit	Janajati	Madhesi	Muslim	Brahmin/ Chhetri	Others	Not Known	Total





