

Similac NeoSure Discharge Instructions for Patient's Pediatrician

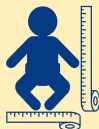
NICU HCP: PROVIDE THIS FORM TO PEDIATRICIAN WITH THE DISCHARGE SUMMARY



SIMILAC NEOSURE IS SPECIALLY DESIGNED TO SUPPORT **DEVELOPMENT AND EXCELLENT GROWTH FOR PRETERM BABIES** THROUGH THE FIRST FULL YEAR OF LIFE

WHEN FED SIMILAC NEOSURE TO **12 MONTHS**, PREMATURE INFANTS SHOWED IMPROVED:

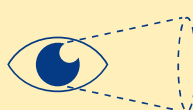
OVERALL GROWTH¹



LEAN BODY MASS^{2,*}



VISUAL DEVELOPMENT^{3,†}



EARLY LANGUAGE DEVELOPMENT^{3,‡}



PATIENT NAME:

DOB:

DISCHARGE DATE:

This patient will be discharged on Similac NeoSure due to:
(Select all that apply)

- Prematurity (early or late preterm) _____ GA
- Very or extremely low birth weight _____ g
- Suboptimal weight gain
- Low phosphorus and/or high alkaline phosphatase
- Other: _____

Patient Nutrition Plan at Time of Discharge:

Baby is fed NeoSure _____ Cal/fl oz. (Mixing instructions can be found on the back of this page)

- Exclusively fed NeoSure OR
- Breast milk-fed and requires _____ (#) of supplemental feedings of NeoSure per day

This patient should stay on NeoSure until: _____



Scan code to view more information on NeoSure and NICU discharge.

This tool should not replace clinical discretion.

* Compared to infants fed a formula without DHA and ARA in a clinical trial with Similac® Special Care and Similac® NeoSure® infant formulas with iron; prior to the addition of lutein.

† Visual acuity measured at 4 and 6 months corrected age and assessed by VEP (visual evoked potential).

‡ Based on a subset of infants in a post hoc analysis.

References: 1. Carver JD, et al. *Pediatrics*. 2001;107(4):683-689. 2. Groh-Wargo S, et al. *Pediatr Res*. 2005;57(5, pt 1):712-718. 3. O'Connor DL, et al. *Pediatrics*. 2001;108(2):359-371.



Similac® NeoSure® Mixing Instructions

Please use these mixing instructions when providing patient the desired caloric density:

Caloric Concentration	Water (fl oz)	Scoops* of NeoSure® Powder (unpacked level scoops)	Approximate Yield (fl oz)
<input type="checkbox"/> 20 Cal/fl oz	4.5	2	5
<input type="checkbox"/> 22 Cal/fl oz (standard)	2	1	2
<input type="checkbox"/> 24 Cal/fl oz	5.5	3	6
<input type="checkbox"/> 26 Cal/fl oz	5	3	6
<input type="checkbox"/> 27 Cal/fl oz	8	5	9
<input type="checkbox"/> 28 Cal/fl oz	3	2	3.5
<input type="checkbox"/> 30 Cal/fl oz	7	5	8

- Abbott Nutrition data on calorically dense feedings is limited. Hypocaloric and hypercaloric formulas should be used under the direction of a health care professional
- 27 Cal/fl oz or more calorically dense formula may not supply enough water for some infants. Hydration status should be monitored and water supplied from other sources if necessary
- For improved tolerance, it is best to increase caloric density slowly, by 2 to 4-Cal/fl oz increments

Before switching to term formula, consider switching to NeoSure 20 Cal/fl oz to provide increased protein and mineral levels compared to term infant formulas.

Additional Notes on Patient Feeding Recommendations:



* Use scoop provided in Similac NeoSure can.

** WIC is a service mark of the US Department of Agriculture, and an abbreviation for the Special Supplemental Nutrition Program for Women, Infants, and Children. No endorsement of any brand or product by the USDA is implied or intended.

† Requires state medical documentation form. State approval is subject to change.