

DEROGATION FROM EMNODN GUIDELINE/MONOGRAPH/SOP

Form to be completed in the exceptional circumstances that the Trust is opting **not** to follow EMNODN approved guidelines/monograph/SOPs.

Details of person completing the form on behalf of the Trust:		
Organisation:		
Title:	First name:	Surname:
Designation:		Email:
Title of document derogating from:		
Rationale for derogation:		
Mitigation for derogation:		
Signature of Neonatal Clinical Lead:		Signature of Director of Nursing or Medical Director:
Date:		Date:

Please email copy to: ngh-tr.emnodn@nhs.net requesting a receipt