

<b>NEWBORN CARE</b>																																							
STABLE	UNSTABLE																																						
<b>BLS</b>																																							
<ul style="list-style-type: none"> <li>• Universal Protocol #601</li> <li>• Assess vital signs then dry thoroughly and cover head and body to maintain body heat</li> <li>• Position infant on back and suction as needed</li> <li>• Stimulate infant by vigorously rubbing the back or flicking the soles of the feet</li> </ul>	<ul style="list-style-type: none"> <li>• Universal Protocol #601</li> <li>• Respiratory distress – assist with BVM using room air (RA)</li> <li>• HR &lt; 100 BPM – assist with BVM RA 40-60/min</li> <li>• HR &lt; 60 BPM – BVM 100% O<sub>2</sub>, provide chest compressions X 1 minute and reassess</li> </ul>																																						
<b>BLS Optional</b>																																							
Pulse Oximetry – O <sub>2</sub> administration per Airway Management Protocol #602																																							
<b>ALS Standing Orders</b>																																							
<ul style="list-style-type: none"> <li>• None indicated</li> </ul>	<ul style="list-style-type: none"> <li>• ALS resuscitation measures if indicated</li> <li>• Monitor EKG, and pulse oximetry in right upper extremity (preductal O<sub>2</sub> Sat)</li> <li>• Consider oxygen titrated to preductal O<sub>2</sub> Sat</li> <li>• With APGAR &lt; 7 at 5 min check blood sugar level (treat if &lt;40 mg/dL)</li> </ul>																																						
<b>Base Hospital Orders Only</b>																																							
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<ul style="list-style-type: none"> <li>• Asphyxiation/respiratory distress is most common cause of neonatal arrest</li> <li>• Prompt warming, airway management and ventilations are the key to a successful resuscitation</li> <li>• A 3:1 compression-to-ventilation ratio is used for neonatal resuscitation where compromise of gas exchange is nearly always the primary cause of cardiovascular collapse</li> <li>• High-concentrations of oxygen may result in adverse outcomes, particularly in preterm infants</li> <li>• Meconium-stained infants – Routine intubation for tracheal suction is not approved. Suction oropharynx with bulb syringe and provide BLS airway management</li> <li>• Use proper sized equipment based on Broselow tape or equivalent</li> <li>• Determine <b>APGAR at 1 minute, 5 minutes</b>, and after any intervention</li> </ul>																																							
<table border="1"> <thead> <tr> <th>APGAR</th> <th>0 Points</th> <th>1 Point</th> <th>2 Point</th> </tr> </thead> <tbody> <tr> <td>Activity (muscle tone)</td> <td>Absent</td> <td>Arms and legs flexed</td> <td>Active movement</td> </tr> <tr> <td>Pulse</td> <td>Absent</td> <td>Below 100</td> <td>Over 100</td> </tr> <tr> <td>Grimace (reflex excitability)</td> <td>Does not react</td> <td>Makes a grimace</td> <td>Screams, coughs, or sneezes</td> </tr> <tr> <td>Appearance (skin color)</td> <td>Pale, blue</td> <td>Pink trunk with blue extremities</td> <td>Pink skin</td> </tr> <tr> <td>Respiratory Effort</td> <td>Absent</td> <td>Irregular, slow, or weak cry</td> <td>Vigorous cry</td> </tr> </tbody> </table> <p>0-3 Severely depressed 4-6 Moderately depressed 7-10 Excellent condition</p>	APGAR	0 Points	1 Point	2 Point	Activity (muscle tone)	Absent	Arms and legs flexed	Active movement	Pulse	Absent	Below 100	Over 100	Grimace (reflex excitability)	Does not react	Makes a grimace	Screams, coughs, or sneezes	Appearance (skin color)	Pale, blue	Pink trunk with blue extremities	Pink skin	Respiratory Effort	Absent	Irregular, slow, or weak cry	Vigorous cry	<table border="1"> <thead> <tr> <th colspan="2">Normal Preductal O<sub>2</sub> Sat After Birth</th> </tr> </thead> <tbody> <tr> <td>1 min</td> <td>60%-65%</td> </tr> <tr> <td>2 min</td> <td>65%-70%</td> </tr> <tr> <td>3 min</td> <td>70%-75%</td> </tr> <tr> <td>4 min</td> <td>75%-80%</td> </tr> <tr> <td>5 min</td> <td>80%-85%</td> </tr> <tr> <td>10 min</td> <td>85%-95%</td> </tr> </tbody> </table> <pre> graph TD     A[Warming, Drying, Position airway, Stimulation] --&gt; B[Suction, Ventilate with room air, Consider titrating oxygen]     B --&gt; C[Chest Compressions, 100% oxygen]     C --&gt; D[IV/IO, Medications]     </pre>	Normal Preductal O <sub>2</sub> Sat After Birth		1 min	60%-65%	2 min	65%-70%	3 min	70%-75%	4 min	75%-80%	5 min	80%-85%	10 min	85%-95%
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