

## Neonatal Resuscitation

### Guideline:

Every neonate born at Alaska Native Medical Center will receive prompt and appropriate resuscitative measures to minimize effects of intrapartum stress and/or asphyxia.

### Purpose:

To stimulate respirations and heartbeat of infant depressed at birth.

### EQUIPMENT

Radiant warmer

Warm blankets, 4 minimum

Bulb syringe

Stethoscope (pediatric)

Laryngoscope and blades (0 & 1), working, extra bulbs and batteries available

Delee suction

Neonatal meconium aspirator

Source of 100% oxygen

Anesthesia bag (250-750 ml), with neonatal and premie masks available

T-piece resuscitator device

Oxygen Tubing

Disposable endotracheal tubes: 2.5, 3.0, 3.5, 4.0

Wire stylet

Suction catheters sizes 5, 8, and 10 French

### Procedure:

1. Notify pediatrician and NICU staff of potential for compromised neonate if risk factors are present.
2. Ensure every LDR and neonatal resuscitation room is set up and ready per Neonatal Resuscitation Program (NRP) guidelines.
3. The nursery nurse/postpartum nurse will be notified of impending delivery and will attend.
4. ANMC follows current AAP/AHA NRP guidelines for all resuscitations.
5. If positive pressure ventilation is started, notify the pediatrician and NICU staff to come to the delivery room, if not already in attendance.
6. If chest compressions are started a "Code White: Newborn" will be called to x1111. At that time the newborn crash cart will be brought to the bedside by unit personnel.

Reference: Textbook of Neonatal Resuscitation, 4<sup>th</sup> edition, American Heart Association; American Academy of Pediatrics, 2006

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