History
- Due date and gestational age
- Multiple gestation (twins, etc.)
- Meconium
- Delivery difficulties
- Congenital disease
- Medications (maternal)
- Maternal risk factors (substance abuse, smoking)

Signs and Symptoms
- Just born
- Uncut umbilical cord
- Respiratory distress
- Peripheral cyanosis or mottling (normal)
- Central cyanosis or mottling (abnormal)
- Altered level of responsiveness
- Bradycardia

Differential
- Airway failure (secretions, respiratory drive)
- Infection
- Maternal medication effect
- Hypovolemia
- Hypoglycemia
- Congenital heart disease
- Hypothermia

Contra Costa County Emergency Medical Services
Newly Born

AT ANY TIME
Return of spontaneous circulation
Go to Post Resuscitation TG

Term gestation?
Breathing or crying?
Good muscle tone?

Yes
- Provide warmth/dry infant
- Clear airway if necessary
- Monitor and reassess

No
- Warm, dry, and stimulate
- Clear airway if necessary
- Monitor and reassess

Heart rate > 100
- Warm, dry, and stimulate
- Clear airway if necessary
- Monitor and reassess

Heart rate < 100 or
Labored breathing or persistent cyanosis
- Supplemental oxygen
- BVM ventilations
  if repeating cycle, take correction action by changing BVM position or technique.
- Maintain warmth
- Cardiac monitor

Heart rate < 60
- Supplemental oxygen
- BVM ventilations
  if repeating cycle, take correction action by changing BVM position or technique.
- Maintain warmth
- Begin chest compressions 3:1 ratio
- Cardiac monitor
- IV/IO procedure
- Epinephrine 1:10,000 IV/IO
  every 3-5 minutes as needed
  Use Pediatape and refer to dosing guide
- Normal saline bolus
  Use Pediatape and refer to dosing guide

Notify receiving facility.
Contact Base Hospital for medical direction

Effective Jan. 2019

Treatment Guideline P08
Page 1 of 2
Pearls

- Most newborns requiring resuscitation will respond to ventilation/BVM, compressions, or Epinephrine. If not responding, consider hypovolemia, pneumothorax, or hypoglycemia (< 40mg/dl).
- Transport mother WITH infant whenever possible.
- Do not place hot packs directly on baby’s skin as it may cause severe burns.
- Common pediatric terms used to describe children are defined as:
  - Newly born are ≤ 24 hours old
  - Neonates are ≤ 28 days old
  - Infants are ≤ 1 year old
- Term gestation, strong cry/breathing and with good muscle tone generally will need no resuscitation.
- Most important vital signs in the newly born are respirations/respiratory effort and heart rate.
- Place baby skin-to-skin on mother.
- It is extremely important to keep an infant warm.
- Maternal sedation or narcotics will sedate an infant.
- Naloxone is no longer recommended for use in the newly born who may be sedated from maternal medications.