

Subject: Treatment Guidelines – ALS Personnel
Neonatal Resuscitation

Associated Policies:

- I. Priorities
 - A. Assessment, including vital signs.
 - B. APGAR rating.
 - C. All neonates need to be gently suctioned (mouth first, then nose), dried and kept warm.
 - D. Neonates in full arrest and neonates not initially responding to treatment should be transported without delay Code 3.
 - E. Begin CPR, if heart rate < 80/min., apneic, cyanotic, or APGAR 6 or less.

VITAL SIGNS - normal ranges	
heart rate	respiratory rate
120-190	approx. 40

- II. APGAR SCORE:
 - A. Check APGAR at one (1) minute, five (5) minutes and every five (5) minutes thereafter.

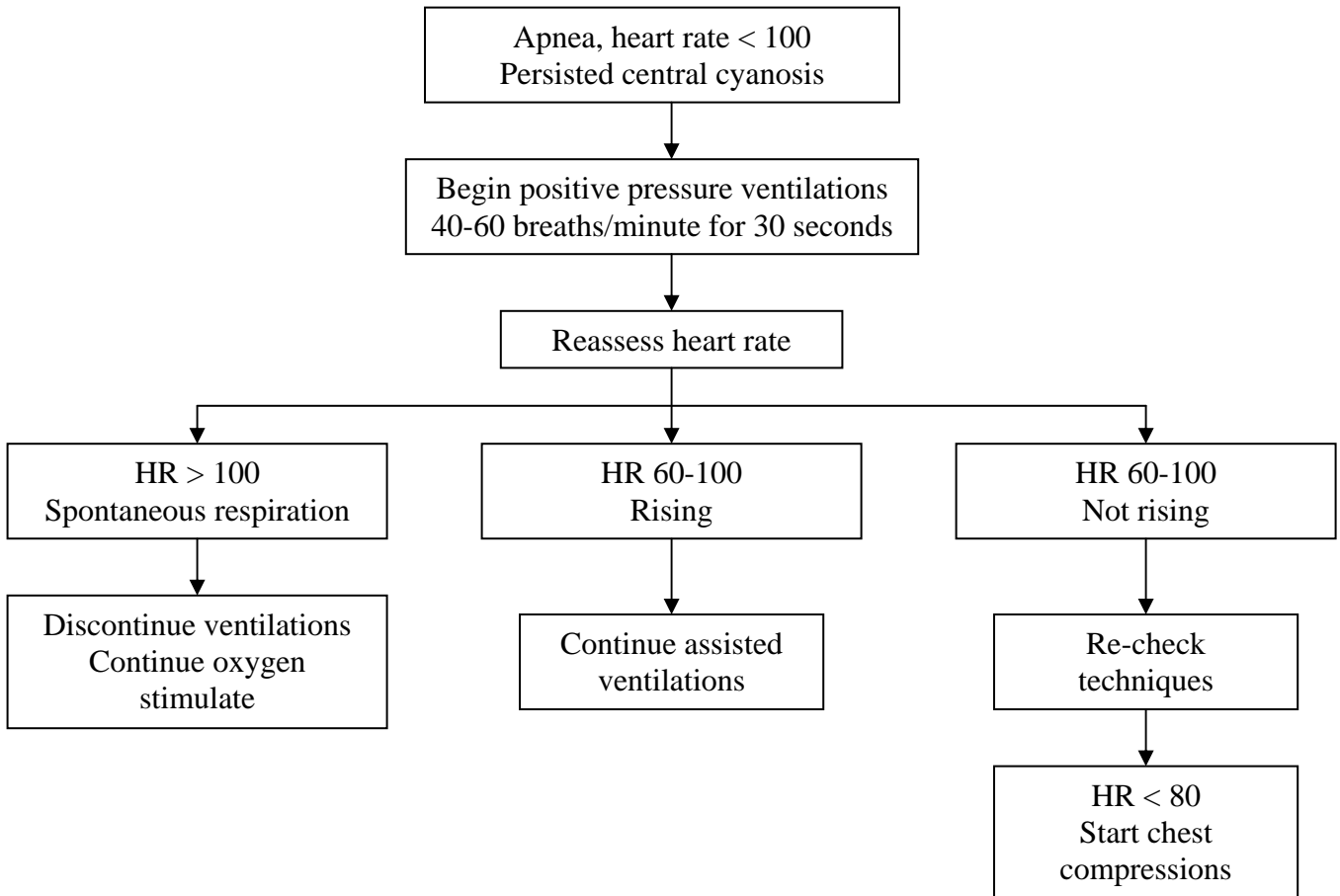
APGAR CHART			
SCORE	0	1	2
Appearance	Blue-Pale	Body pink, Limbs Blue	Pink All Over
Pulse	0	<100	>100
Grimace	No Response	Grimace	Cough, Cry, Sneeze
Activity	Flaccid	Some Flexion	Active Movement
Respiratory Effort	Absent	Slow, Irregular	Strongly Crying

- 1. APGAR 7-10:
 - a. Suction with bulb syringe.
 - b. Keep dry and warm (skin to skin with mother and blanket).
 - c. Transport.
 - d. Contact base hospital.
- 2. APGAR 4-6:
 - a. Consider endotracheal suctioning and intubation.
 - b. Suction with bulb syringe.
 - c. Ventilate 40-60 breaths/minute with 100% Oxygen.
 - d. Monitor (begin cardiac compression, if heart rate < 80).
 - e. Keep dry and warm.
 - f. Transport.
 - g. Contact base hospital.

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3. APGAR 0-3:
 - a. Consider immediate endotracheal intubation and suctioning.
 - b. Support ventilation 40 breaths/minute with 100% Oxygen, or bag and mask endotracheal intubation, if bagging is inadequate (or not yet done).
 - c. Begin cardiac compressions at 100/minute.
 - d. Keep dry and warm.
 - e. Code 3 transport.
 - f. Contact base hospital.

RESUSCITATION SUMMARY



REV. 6/1/12

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Approved: *[Signature]*

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