

Delivery Room Management and Intubation Guidelines for Infants ≤ 32 weeks

Stacie Bennett 5-11-17

1. Follow NRP guidelines for initial steps resuscitation
2. Place pulse oximetry probe on infant's right hand.
3. Start at 30% oxygen and titrate to achieve NRP target saturation.
4. Start CPAP on all infants at 5cmH₂O and increase up to 8cmH₂O for increased WOB or FiO₂
5. Intubate for:
 1. HR<100 or hemodynamic instability, CO₂ >65, prolonged apnea, severe distress, FiO₂>50% to maintain saturations per oxygen guidelines
- 6. If the patient is hemodynamically stable consider transfer to NICU PRIOR to INTUBATION for premedication**
7. All ELBW infants intubated in the first 48 hours of life should receive at least one dose of surfactant promptly after intubation.
8. INSURE (intubate, give surfactant, extubate to CPAP) may be an alternative until more data from randomized trials are available.
9. Start caffeine immediately upon admission to NICU for all infants ≤ 30 weeks

Delivery Room Guidelines for Infants ≥ 33 -36 weeks

Stacie Bennett 5-11-17

1. Follow NRP guidelines for initial steps resuscitation
2. Place pulse oximetry probe on infant's right hand.
3. Start at 21% oxygen and titrate to achieve target saturation.
4. For Resp distress start CPAP at 5cmH₂O and increase up to 8cmH₂O for increased WOB or FiO₂
5. Intubate for:
 - HR < 100 or hemodynamic instability, PCO₂ > 65,
 - Apnea or severe distress
 - FiO₂ > 50% to maintain saturations per oxygen guidelines
7. Consider surfactant after intubation.

References

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