

Maintain a Patent Airway

Establishing a patent airway is a primary objective in the delivery room. When the newborn is supine, a neutral neck position (i.e., avoiding neck flexion or hyperextension) is critical to achieving and maintaining a patent airway.

The [American Academy of Pediatrics Task Force on Sudden Infant Death Syndrome \(2011\)](#) recommends the supine position during sleep for healthy newborns. This recommendation is based on the association between sleeping prone and sudden infant death syndrome (see [Chapter 10](#)). Since the initial recommendation in 1992 that all infants be placed in the supine position to sleep, there has been no evidence of an increased number of complications, such as choking or vomiting, when infants are placed in this position ([Krous, Masoumi, Haas, et al, 2007](#); [Malloy, 2002](#)). There has, however, been an increase in the number of infants with cranial asymmetry, particularly unilateral flattening of the occiput ([American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome, 2011](#)). Health care professionals must educate parents on prevention of positional plagiocephaly by encouraging alternate positions when infants are awake ([Laughlin, Luerssen, Dias, et al, 2011](#)).

A bulb syringe is kept near the infant and is used if suctioning is required. If more forceful removal of secretions is required, mechanical suction is used. The use of the properly sized catheter and correct suctioning technique is essential to prevent mucosal damage and edema. Gentle suctioning is necessary to prevent reflex bradycardia, laryngospasm, and cardiac arrhythmias from vagal stimulation. Oropharyngeal suctioning is performed for up to 5 seconds, with sufficient time between each attempt to allow the infant to reoxygenate.

Nursing Alert

To avoid aspiration of amniotic fluid or mucus, clear the pharynx first and then the nasal passages using a bulb syringe: remember, **m**outh before **n**ose. Vital signs are closely monitored, and any indication of respiratory distress is immediately reported.