

### **expertise, and evidence.**

Integrate evidence into practice by using interventions for newborn stabilization and delivery room resuscitations with room air or low oxygen.

### **Attitudes**

#### **Value the concept of evidence-based practice as integral to determining best clinical practice.**

Appreciate strengths and weakness of evidence for newborn stabilization and delivery room resuscitations with room air or low oxygen.

## **References**

- Dawson JA, Kamlin CO, Wong C, et al. Oxygen saturation and heart rate during delivery room resuscitation of infants <30 weeks' gestation with air or 100% oxygen. *Arch Dis Child Fetal Neonatal Ed.* 2009;94(2):F87–F91.
- Perlman JM, Wyllie J, Kattwinkel J, et al. Part 11: Neonatal resuscitation: 2010 international consensus on cardiopulmonary resuscitation and emergency cardiovascular care science with treatment recommendations. *Circulation.* 2010;122(16 Suppl 2):S516–S538.
- Rabi Y, Chen SY, Yee WH, et al. Relationship between oxygen saturation and the mode of oxygen delivery used in newborn resuscitation. *J Perinatol.* 2009;29(2):101–105.
- Rabi Y, Singhal N, Nettel-Aguirre A. Room-air versus oxygen administration for resuscitation of preterm infants: the ROAR study. *Pediatrics.* 2011;128(2):e374–e381.
- Ramji S, Saugstad OD, Jain A. Current concepts of oxygen therapy in neonates. *Indian J Pediatr.* 2015;82(1):46–52.
- Rook D, Schierbeek H, Vento M, et al. Resuscitation of preterm infants with different inspired oxygen fractions. *J Pediatr.* 2014;164(6):1322–1326.
- Saugstad OD, Ramji S, Soll RF, et al. Resuscitation of newborn infants with 21% or 100% oxygen: an updated systematic review and meta-analysis. *Neonatology.* 2008;94(3):176–182.
- te Pas AB, Lopriore E, Dito I, et al. Humidified and heated air