during stabilization at birth improves temperature in preterm infants. *Pediatrics*. 2010;125(6):e1427–e1432.

Ten VS, Matsiukevich D. Room air or 100% oxygen for resuscitation of infants with prenatal depression. *Curr Opin Pediatr*. 2009;21(2):188–193.

Vento M, Escobar J, Cernada M, et al. The use and misuse of oxygen during the neonatal period. *Clin Perinatol*. 2012;39(1):165–176.

*Adapted from the Quality and Safety Education for Nurses (QSEN) Institute.

Quality Patient Outcomes

Meconium Aspiration Syndrome

- Room air oxygen saturation ≥90%
- Maintains arterial/venous pH ≥7.35

TABLE 8-6

Respiratory Complications

Description	Clinical Manifestations	Therapeutic Management	Nursing Care Management
Meconium Aspiration Syndrome			
Aspiration of amniotic fluid containing meconium into fetal or newborn trachea in utero or at first breath	Meconium stained at birth Tachypnea Hypoxia Acidemia Hyperventilation (early) Hypoventilation (later)	Suction hypopharynx after delivery. Infants who are vigorous with strong, stable respiratory effort, good muscle tone, and heart rate >100 beats/min should not undergo tracheal suctioning but should be closely monitored. Infants who demonstrate poor respiratory effort, low heart rate, and poor tone should be rapidly intubated, suctioned appropriately, and resuscitated according to clinical status after suctioning.	See Respiratory Distress Syndrome, Nursing Care Management earlier in the chapter.