oximetry screening for critical congenital heart disease (CCHD) for all newborns (Mahle, Martin, Beekman, et al, 2012). Delayed diagnosis of CCHD can result in morbidity or mortality to infants. Research has demonstrated that adding pulse oximetry, a noninvasive, painless technology, to newborn assessment can detect CCHD. Practitioners are directed to use motion-tolerant pulse oximeters and to screen infants after 24 hours of age to reduce false-positive results. Oxygen saturation must be measured in the right hand and in one foot; a reading of 95% or greater in either extremity with a 3% or less difference between the upper and lower extremities would be a "pass." Infants with saturation of less than 90% need immediate evaluation.

A suggested schedule for monitoring heart rate, respiratory rate, and temperature is on admission to the nursery, once every 30 minutes until the newborn has been stable for 2 hours (American Academy of Pediatrics and American College of Obstetricians and Gynecologists, 2007), and then once every 8 hours until discharge. However, this schedule may vary according to institutional policy. Any change in the infant, such as color, breathing, muscle tone, or behavior, necessitates more frequent monitoring.

General Appearance

Before each body system is assessed, it is important to describe the general posture and behavior of the newborn. The overall appearance yields valuable clues to the infant's physical status.

In full-term neonates, the posture is one of complete flexion as a result of in utero position. Most infants are born in a vertex presentation with the head flexed and the chin resting on the upper chest, the arms flexed with the hands clenched, the legs flexed at the knees and hips, and the feet dorsiflexed. The vertebral column is also flexed. It is important to recognize any deviation from this characteristic fetal position.

The infant's behavior is carefully noted, especially the degree of alertness, drowsiness, and irritability; the latter two factors may reflect common signs of neurologic problems. Some questions to mentally ask when assessing behavior include:

- Is the infant awakened easily by a loud noise?
- Is the infant comforted by rocking, sucking, or cuddling?