**SKILL: NEONAT AL RESUSCITATION**

**LEARNER NAME: DATE: / /**

*\*\*Learner expected to introduce him/herself and ask for consent at all times*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No** | **PERFORMANCE** | **Possible Points** | **Points Obtained** | **Competent** | **Omitted** |
|  | *Assessment (perform simultaneously if possible)* |  |  |  |  |
|  | Evaluate heart rate (umbilical / brachial artery palpation, or auscultate heart sounds) |  |  |  |  |
|  | Evaluate respiratory rate |  |  |  |  |
|  | Evaluate SpO2 (probe on right upper limb) |  |  |  |  |
|  | Depending on findings, progress to **A, B** or **C** |  |  |  |  |
|  | *If breathing, HR > 100/min, Sats < 90% or cyanotic* |  |  |  |  |
|  | Administer low-flow blow-by oxygen |  |  |  |  |
|  | After 30 seconds, re-evaluate HR, RR, and SpO2 |  |  |  |  |
|  | If Sats / colour improved, remove O2 & monitor |  |  |  |  |
|  | If Sats *still* < 90% or cyanotic, progress to **B** |  |  |  |  |
|  | *If apnoeic or HR < 100/min* |  |  |  |  |
|  | Begin positive pressure ventilation |  |  |  |  |
|  | Rate of 1 ventilation every 2 seconds |  |  |  |  |
|  | Squeeze bag just enough to cause chest rise |  |  |  |  |
|  | After 30 seconds, re-evaluate HR, RR, and SpO2 |  |  |  |  |
|  | If breathing, HR > 100/min, but Sats < 90% or cyanotic, progress to **A** |  |  |  |  |
|  | If still apnoeic with HR > 60/min, repeat **B** |  |  |  |  |
|  | If HR < 60/min, progress to **C** |  |  |  |  |
|  | *If* ***pulseless*** *or HR < 60/min* |  |  |  |  |
|  | *Begin CPR* |  |  |  |  |
|  | Correct finger placement:  **1 rescuer**: 2 fingers in middle of chest, just below  the inter-mammary line  **2 rescuers**: 2 thumbs-encircling hands (thumbs  in middle of chest, just below the inter- mammary line) |  |  |  |  |
|  | Ratio of 3 compressions : 1 ventilation |  |  |  |  |
|  | Compression rate of approximately 120/min |  |  |  |  |
|  | Adequate depth (at least 1/3 diameter of chest) |  |  |  |  |
|  | Allow complete chest recoil |  |  |  |  |
|  | Minimizes interruptions (less than 10 seconds  per) |  |  |  |  |
|  | Perform umbilical cannulation (2nd or 3rd rescuer) |  |  |  |  |
|  | After 30 seconds, re-evaluate HR, RR, and SpO2 |  |  |  |  |
|  | If breathing, HR > 100/min, but Sats < 90% or cyanotic, progress to **A** |  |  |  |  |
|  | If apnoeic with HR > 60/min, progress to **B** |  |  |  |  |
|  | If still pulseless or HR < 60/min, progress to **D** |  |  |  |  |
|  | *If pulseless/HR < 60/min after 30 sec of CPR* |  |  |  |  |
|  | Continue CPR at ratio of 3:1 |  |  |  |  |
|  | Administer 0.01mg/kg adrenaline as a 1:10,000 solution (0.1ml per kg) |  |  |  |  |
|  | Follow with a 1ml flush of normal saline |  |  |  |  |
|  | After 30 seconds, re-evaluate HR, RR, and SpO2 |  |  |  |  |
|  | If breathing, HR > 100/min, but Sats < 90% or cyanotic, progress to **A** |  |  |  |  |
|  | If apnoeic with HR > 60/min, progress to **B** |  |  |  |  |
|  | If still pulseless or HR < 60/min, continue CPR, re- evaluating every 30 seconds & repeating adrenaline every 3-5 minutes |  |  |  |  |
|  | Intubation may be performed to improve PPV |  |  |  |  |
|  | Rescuers performing compressions should switch every 2 minutes |  |  |  |  |

References:

* PHECC

**Overall assessment of learner’s performance:**

**NOT YET COMPETENT**

**COMPETENT**

Assessor Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Qualification: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Comments\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_