

Newborn Life Support

Primary Care

Intermediate Care

Advanced Care

Critical Care

STORC:

For all obstetric cases STORC available 24/7 via CSPSCC for specialist support from on-call midwife

BIRTH

Dry, warm, stimulate

Assess tone,
breathing and pulse

Adequate breathing/crying?

NO

YES

Initial lung expansion:

- Position head & neck to open airway
- Give 30 seconds of initial inflation breaths (air only)
- Assess breathing and pulse
- Consider SpO₂/monitoring
- Maintain normal temperature
- Note time

Acceptable SpO₂

1 min	60-70%
2 min	65-85%
3 min	79-90%

Pulse

< 60
beats per minute

Pulse

60 – 100
beats per minute

Pulse

> 100 beats per minute
w/ adequate respirations

Commence CPR

Chest Compressions

Oxygen

Reassess every 2 mins

IO Access

Adrenaline

Ventilate

40-60 breaths/min until pulse
>100/min & good breathing

Consider Oxygen

Reassess breathing and pulse
every 30s

Routine Care

Assess pulse, breathing,
colour, muscle tone (APGAR)

Continue care and monitor

Time Critical:

Transport Priority 1 to nearest ED with
paediatric capability

Patient Stable: Transport
via normal road conditions