8. Consider checking a blood glucose for ongoing resuscitation, maternal history of diabetes, ill appearing or unable to feed
9. Administer 20 mL/kg normal saline IV/IO for signs of shock or post-resuscitative care

Patient Safety Considerations

1. Hypothermia is common in newborns and worsens outcomes of nearly all post-natal complications
   a. Ensure heat retention by drying the infant thoroughly, covering the head, and wrapping the baby in dry cloth
   b. When it does not encumber necessary assessment or required interventions, "kangaroo care" (i.e., placing the infant skin-to-skin directly against mother's chest and wrapping them together) is an effective warming technique
   c. Newborn infants are prone to hypothermia which may lead to hypoglycemia, hypoxia, and lethargy. Aggressive warming techniques should be initiated including drying, swaddling, and warm blankets covering body and head. When available, radiant warmers or other warming adjuncts are suggested for babies who require resuscitation, especially for preterm babies. Check blood glucose and follow Hypoglycemia Guideline as appropriate
2. During transport, neonate should be appropriately secured (e.g., secured to mother with approved neonatal restraint system, car seat or isolette) and mother should be appropriately secured

Notes/Educational Pearls

Key Considerations

1. Approximately 10% of newly born infants require some assistance to begin breathing at birth and 1% require resuscitation to support perfusion
2. Most newborns require only drying, warming, and stimulating to help them transition from fetal respiration to newborn respiration. The resuscitation sequence can be remembered as ***Dry, Warm, and Stimulate – Ventilate – Evaluate – and Resuscitate***

Table 1. Assessments that are used to initiate BMV and chest compressions

		INTERVENTION INDICATED		
		Blow-by Oxygen	**Bag-Mask-Ventilation (BVM)**	**BVM and Chest compressions**
ASSESSMENT	**Heart Rate (BPM)**	> 100	60–100	< 60
	Respiratory Distress/Apnea	No	Yes	
	Central Cyanosis Present	Yes	Yes/No	

3. Deliveries complicated by maternal bleeding (placenta previa, vas previa, or placental abruption) place the infant at risk for hypovolemia secondary to blood loss
4. Low birth weight infants are at high-risk for hypothermia due to heat loss