



4801

Neonatal
Resuscitation

Treatment Protocol

Last Reviewed: **October 4, 2022**Last Revised: **July 1, 2023**

BLS Patient Management

ALS Patient Management

APGAR	0	1	2
Appearance	Blue	Pink Core / Blue Extremities	Pink
Pulse	Absent	Slow	Fast
Grimace	Absent	Weak	Strong
Activity	Absent	Weak	Strong
Respirations	Absent	Weak	Strong

- Dry, stimulate and swaddle in a dry receiving blanket and head cover then place with the mother as clinically indicated
- Assess using the APGAR scoring system. Based on APGAR scores, presentation, and clinical assessment
 - Suction secretions from mouth and nose
 - Monitor SpO₂ while attached to the right upper extremity (a preductal location)
 - Provide blow-by oxygen
 - Assist ventilations with PPV and supplemental oxygen
 - Organize the resuscitation team and perform High Performance (HP) CPR according to current REMSA training and standards with a 3:1 compression ratio
 - Ensure High Performance (HP) CPR by utilizing assigned roles and tasks during resuscitation (i.e., Pit Crew CPR)
 - Emphasize correct hand placement, compression depth (hard) and rate (fast) with complete chest recoil
 - Minimize interruption of chest compressions
 - Avoid hyperventilation

- Establish, maintain, and ensure peripheral IV and/or IO access for emergency stabilization

Consider the need for additional sites as clinically indicated

- **When required, ensure HP CPR is being performed according to current REMSA training and standards** Attach, interpret, and continuously monitor EtCO₂. If EtCO₂ is less than 10 mmHg, attempt to improve CPR quality

- **For neonatal resuscitation**

INITIAL AND REPEAT ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).

Dextrose 5 mL / kg (10% solution) IV/IO bolus or drip. For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

INITIAL AND REPEAT ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).

Epinephrine 0.01 mg / kg (0.1 mg / mL concentration) IV/IO. For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

INITIAL AND REPEAT ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).

Naloxone 0.1 mg / kg IV/IO/IM/IN. For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

INITIAL AND REPEAT ADMINISTRATIONS REQUIRE A BASE HOSPITAL ORDER (BHO).

Sodium Bicarbonate 1 mEq / kg IV/IO push. For assistance with accurate dosing, refer to the REMSA PMDR or REMSA app.

DISCONTINUING RESUSCITATION OF A PEDIATRIC PATIENT REQUIRES A BASE HOSPITAL PHYSICIAN ORDER (BHPO).