

APPROVED: Signature On File in EMS Office
 Executive Director

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 Medical Director

EFFECTIVE DATE 7/01/2011
 SUPERSEDES: _____
 REVISED: _____
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NEWBORN RESUSCITATION

- I. AUTHORITY: Health and Safety Code, Division 2.5, California Code of Regulations, Title 22, Division 9
- II. PURPOSE: To serve as the treatment standard for EMTs and Paramedics within their scope of practice.
- III. PROTOCOL:

STANDING ORDERS	
ASSESS	CAB
SUCTION	Open airway. Suction mouth and nasopharynx with bulb syringe
WARM	Dry and keep warm with thermal blanket or dry towel. Stimulate by drying vigorously, including the head and back. If not already performed: clamp and cut cord.
ASSESS	Evaluate breathing and heart rate. Perform APGAR score at 1 and 5 minutes after delivery if time allows. Do not delay resuscitative measures to score patient.
HEART RATE greater than 100	
ASSESS COLOR	If peripheral cyanosis is present: administer 100% oxygen via blow-by or mask.
REASSESS	Heart rate and respirations every 60 seconds while enroute.
HEART RATE 80 – 100	
OXYGEN	100% via mask.
STIMULATE	
REASSESS	If heart rate remains less than 100 after 30 seconds of oxygen and stimulation, begin assisted ventilation with 100% oxygen via bag-valve mask at 40 breaths per minute.
REASSESS	Heart rate and respirations every 60 seconds while enroute.
HEART RATE 60 – 80	
OXYGEN	Assist ventilations with 100% oxygen via bag-valve mask at 40 breaths per minute.
CPR	If no increase in heart rate following ventilations, start compressions at 120 per minute. If patient's heart rate is increasing, continue ventilations without compressions for an additional 15 - 30 seconds.
SECURE AIRWAY/ INTUBATE	If compressions and ventilations fail to increase patients heart rate. Ventilate with 100% oxygen via BVM using the simplest effective method. A BLS airway with objective evidence of good ventilation and oxygenation is adequate and acceptable. Consider intubation only if unable to establish adequate ventilation and oxygenation using a BVM. Refer to General Procedures 554.00
IV/IO	TKO
EPINEPHRINE	0.01 mg/kg of 1:10,000, if heart rate fails to increase above 80.

REASSESS

Heart rate and respirations every 60 seconds while enroute.

STANDING ORDERS CONTINUED**HEART RATE less than 60****OXYGEN**

Assist ventilations with 100% oxygen via bag-valve mask at 40 breaths per minute.

CPR

120 compressions per minute.

SECURE AIRWAY

If compressions and ventilations fail to increase patients heart rate. Ventilate with 100% oxygen via BVM using the simplest effective method. A BLS airway with objective evidence of good ventilation and oxygenation is adequate and acceptable. Consider intubation - only if unable to establish adequate ventilation and oxygenation using a BVM. Refer to General Procedures Protocol 554.00

IV/IO

TKO

EPINEPHRINE

0.01 mg/kg of 1:10,000 IV/IO, if heart rate fails to increase above 80.

REASSESS

Heart rate and respirations every 60 seconds while enroute.

ALGORITHM CHART FOLLOWS

NEWBORN RESUSCITATION ALGORITHM SUMMARY

