



EMS Quarterly Training **Neonatal Resuscitation**

Materials:

- Infant BVM
- OB Kit
- Infant Manikin
- Meds
 - ALS : Epinephrine, D10
- IV Pump

DISPATCH

Location: You are riding A7XX, dispatched to a single-family house for an OB call.

Weather: Cold winter evening 23:15



Upon entry into the bedroom, a mid-30s female is sitting on the bed in extreme distress. She is holding a newly born baby. The umbilical cord has been cut and tied with shoelaces.

SCENE SIZE UP

1. Scene safety	The scene is safe.
2. BSI	Gloves/surgical mask
3. # of PTs	2 Patients
4. MOI/NOI	Nature of illness
5. Additional resources?	ALS is dispatched, manpower and additional ALS unit

Question: What items will you take with you from the ambulance as you go to meet the patient?

PRIMARY ASSESSMENT BABY

1. Appearance	Blue all over
2. Pulse	80
3. Grimace	Some avoidance
4. Activity	Some Flexion
5. Respirations	Slow irregular
6. Total APGAR	4

This is a extremely sick child in need of immediate resuscitation. Follow the inverted pyramid of the [“Universal Algorhythm for the Newly Born for BLS” Protocol](#)

Immediate Expected actions

Dry, Warm Position, Stimulate – Aggressively dry and warm the patient for 30 seconds. Newly born babies are susceptible to hypothermia. Stimulate the child by tapping the toes.

Re-check the patient's pulse, either at the brachial artery or at the recently cut umbilical cord.

If the newborn's heart rate is above 100 beats per minute, continue drying, warming, and stimulating the infant. When appropriate, and if the mother is stable enough to safely hold and care for the baby, place the infant with her.

*If the newborn's heart rate is below 100 beats per minute, begin ventilations with a **BVM using room air** at a rate of 40–60 breaths per minute. **Provide these ventilations without supplemental oxygen for the first 60 seconds.** After 30 seconds of effective BVM ventilation, reassess the heart rate.*

Re-check the patient's pulse after 30 seconds of BVM ventilation. If the heart rate remains between 60 and 100 beats per minute, continue BVM ventilations with room air until you reach the one-minute mark, then add oxygen. If the heart rate is below 60 beats per minute and chest compressions are initiated, connect supplemental oxygen at that time.

AED NOT INDICATED FOR NEWLY BORN

ALS administer [epinephrine per protocol](#)

ALS Consider checking blood glucose and administering [D10 per protocol IV Pump Guide D10](#)

PRIMARY ASSESSMENT Mom

1. General Impression: As you approach the patient, you see that he appears conscious, alert, and breathing with increased difficulty.

2. Level of consciousness	Alert, visibly agitated
3. Airway	Open,
4. Breathing	Labored, shallow, Able to speak in 4-5 word sentences
5. Circulation	Weak, rapid radial pulse, skin is pale, her night gown is visible blood soaked
6. P.O.T. (Priority, O2, Transport)	P1, <u>O2 is needed</u> , consider transport to the closest perinatal hospital

SECONDARY ASSESSMENT

1. Signs/Symptoms	Explosive tearing delivery of baby with major blood loss
2. Allergies	seasonal allergies
3. Medications	Prenatal vitamins
4. Past/Pertinent medical hx	2 pregnancies (gravida), 1 previous birth (para), no expected complications
5. Last oral intake	Small dinner at around 1800
6. Events leading to 911 call	Sudden abdominal pain, contractions with explosive delivery
7. Onset	Sudden
8. Provocation	Movement after delivery
9. Quality	Sharp pain across entire abdomen
10. Radiation	None
11. Severity	Currently 10/10
12. Time	Delivery was approximately 5 minutes ago
13. What have you done?	called 911

DCAP-BTLS for focused physical exam (positive findings): Guarding pain across abdomen, continuous vaginal bleeding

Baseline V/S:

1. BP	86/56
2. HR	158
3. RR	22

4. Lung sounds	Clear
5. SpO2	88%
6. Pupils	PEARL
7. Blood glucose	134mg/dl

TREATMENT

1. Oxygen via NRB or BVM if needed
2. Follow the [Obstetrical/Gynecological Emergencies: Vaginal Bleeding Protocol](#)
 - a. Monitor bleeding
 - b. Elevate patient's feet
 - c. Consider uterine massage
3. ALS administer 20mL/kg fluid bolus [IV Pump Guide LR Bolus](#)
4. ALS Consider [TXA](#)
5. Consider an EMSDO for [Whole Blood Administration](#)