

# Initial assessment and interventions in NLS

Inflation, Ventilation Start resuscitation

Ask for help

Inflation, Ventilation Support transition

Stimulation,

Start continuous

continuous monitoring

observation Regular

Reassess

Consider

monitoring

Breathing: absent HR: < 60 min<sup>-1</sup> Stimulation: no response Tone: floppy

Breathing: inadequate HR: 60-100 min<sup>-1</sup> Stimulation:

reduced response Tone: reduced Unsuccessful

Incomplete

transition<sup>a</sup>

transition

**GUIDELINES** ELIBOPEAN RESUSCITATION COLUNCII



# WITH AN INCREASED RISK **Antepartum factors**

#### **Fetal**

- · Intrauterine growth restriction
- < 37 weeks gestation
- · Multiple pregnancies
- · Serious congenital abnormality
- · Oligo and polyhydroamnios

#### Maternal

- Infection
- · Gestational diabetes
- · Pregnancy-induced hypertension
- Pre-eclampsia
- · High BMI
- · Short stature
- · Preterm lack of antenatal steroids

## **Intrapartum factors**

- · Evidence of fetal compromise
- · Meconium stained amniotic fluid
- · Birth by vaginal breech
- Forceps or vacuum delivery
- · Significant bleeding
- · C-section before 39 weeks
- · Emergency C-section
- · General anaesthesia
- · Out of hospital birth

# **OVERVIEW OF AIRWAY OPENING TECHNIQUES**

- · No intention of hierarchy or sequence
- · Range of available possibilities
- Competency and training essential · Each technique has indications/
- limitations

**Position** ± jaw thrust

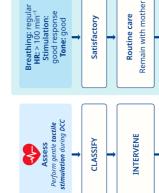
Reposition ± jaw thrust

Two-person method

Suction under direct vision

### Use of an airway device:

- Supraglottic
- airway
- Nasopharyngeal airway
- Oropharyngeal airway
- Tracheal tube



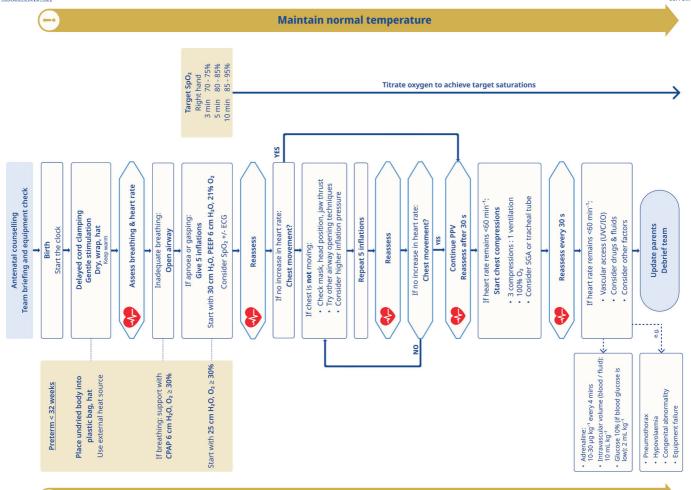


SCAN FOR MORE HELPFUL MATERIALS



# **NEONATAL LIFE SUPPORT ALGORITHM**





Is more help needed?