

## Checklist for Neonatal Transport

### Things to do while waiting for the transport team to arrive:

- Blood cultures
- Administer antibiotics
- Blood sugars
- Maintain neutro-thermal environment under radiant warmer on servo control
- Assess for oxygenation and acid-base status (see guide)
  - The stable infant has:
    - Patent airway and adequate ventilation
    - Pink skin and lips
    - Heart rate of 120-160 bpm
    - Axillary temperature 36.5-37°C (97.7-98.6°F) Rectal 37°C (98.6°F)
    - Metabolic problems corrected
    - Special problems managed
  - Assisted ventilation may be required when respiratory distress occurs with any of the following:
    - Bradycardia (heart rate less than 100/minute)
    - PaCO<sub>2</sub> greater than 65 mmHg
    - Central cyanosis in 100% oxygen
    - Persistent apnea
    - PaO<sub>2</sub> less than 50 mmHg in 100% oxygen
- pictures for mom

### What to Have Ready when the Neonatal Transport Team Arrives:

The following should be ready to send with the transport team or appropriately FAXED to NICU ASAP:

- 6-8 inches of umbilical cord be left attached to baby if possible
- Complete copy of infant's chart with completed physician history and physical, physical exam, nursing documentation, and vital signs
  - resuscitation procedures performed
  - urine output,
  - passage of stools,
  - vitamin K administration,
  - eye prophylaxis,
  - hepatitis vaccine,
  - other medication administration
- All blood tests performed in nursery
- Laboratory tests
- All X-rays
- Copy of maternal record including complete maternal history and labor and delivery records
- The following may be kept for a week at the referring hospital lab
  - Maternal blood specimen (5-7 mL clotted)
  - Placenta if it has not been sent to pathology.
  - Cord blood specimen