

## NICU Admission Flow Chart for the Extremely Preterm Infant

	RN	RT	MD/LIP
Pre-Admission	<p>Pre-heat room to 77° F and close room door at least 15 minutes prior to admit</p> <p>Prepare bedspace using Checklist, taking in to account whether infant arriving on Omnibed versus transporter</p>	<p>Confirm set up of mask/bag with appropriate flow, FiO<sub>2</sub> and PEEP at bedside</p> <p>Set up ventilator for volume guarantee; prep for bubble CPAP to arrive with infant</p> <p>Ensure suction and suction catheters available and functioning</p>	<p>Place Extremely Preterm Admission Orders on Pended Baby* (excluding weight based medications)</p> <p>Set up for UVC/ UAC placement in room, including lines pre-flushed and sterile field covered with sterile drape</p> <p>Page radiology technologist to alert to pending ELBW patient</p>
DR Team Alert	<p>Calculate IVF rates</p> <p><b>Gather for admission</b></p>	<p>Pull and warm surfactant if intubated</p> <p>Prep MAC catheter with Surfactant if intubated</p> <p><b>Gather for admission</b></p>	<p>If intubated, text page Rad Tech at 11184 with message "ELBW Stat CXR Neighborhood _ Room _"</p> <p>Input orders for weight based medications, including caffeine if on CPAP</p> <p>Calculate anticipated depth of insertion of umbilical lines</p> <p><b>Gather for admission</b></p>
Admission	<p>1. Add water to Omnibed humidity tank. Connect EKG arm leads and pulse oximeter to room monitor</p> <p>3. Place PIV, start D5W @100ml/kg/day</p> <p>5. Once umbilical line confirmation, initiate starter PN and prime <b>NEW</b> bag of D5W and initiate infusion via UVC (using 2 person technique to maintain TF 100 ml/kg/day)</p> <p>Initiate 1/2 NaAcetate +0.5unit/ml heparin if UAC in place</p> <p>6. Close Omnibed, humidify per protocol (Goal by 60 minutes of life – follow Voalte timer)</p> <p>7. Once Omnibed at goal humidity, take infant out of polyethelene bag, obtain length and head circumference</p>	<p>1. Switch from NeoPuff to ventilator or bCPAP from tank to wall blender</p> <p>2. CXR for ETT placement followed by immediate instillation of surfactant unless adjustment of ETT needed</p> <p>3) Document minutes of life surfactant instillation initiated.</p>	<p>4. Once PIV in, place umbilical lines, keeping infant inside polyethelene bag with velcro closed except for umbilicus. Draw blood for labs. X-ray confirmation of line placement</p> <p>Update parents and obtain consents for DHM, blood transfusion, and MA HiWay</p>