Guideline for use of CPAP and High and Low Flow Nasal Cannula in the Special Care Nursery
I. Purpose

The purpose of these guidelines is to establish a framework of optimal management of respiratory care in the Special Care Nursery (SCN, also referred to as Growth and Development Unit).

II. All CPGs will relay on the NICU SCN Nursing Standards of Care. All relevant nursing PPGs are listed below.

III. Respiratory Care in the SCN

Once an infant in the NICU demonstrates clinical stability off the ventilator and on lower level of respiratory support (including bubble CPAP, or nasal cannula), he/she can become a candidate for continued care in SCN if the remainder of SCN admission criteria is met (see NICU SCN Nursing Standards of Care document for detailed criteria). The respiratory support that can be provided to infants in SCN for convalescent care includes: bubble CPAP, high flow nasal cannula, or low flow nasal cannula. If an infant requires ventilated CPAP/NIPPV or mechanical ventilation, support and management should be provided in NICU.

NICU SCN M.2 (monitoring):

NICU SCN T.6 (transferring level of care within NICU SCN)
NICU SCN: B.6 Blood Gas Sampling
https://hospitalpolicies.ellucid.com/documents/view/3195/22432/

NICU SCN O.4 High Flow and Low Flow Oxygen Administration via Nasal Cannula
NICU SCN O.1 Use of Vented OGT with CPAP in the NICU/SCN
Neonatal Skin Care Guidelines

Respiratory policies:
5.5 LFNC
5.6 HFNC
9.3 Bubble CPAP
9.4 Nasal CPAP