EUROPEAN RESUSCITATION COUNCIL

Newborn Life Support adapted for COVID-19

(Antenatal counselling)
Team briefing and equipment check

COVID-19 **Consider team composition, airborne PPE**
Location of likely resuscitation

Birth - consider delayed cord clamping

Dry the baby
Maintain normal temperature
Start the clock or note the time

COVID-19 **Wet towel may be contaminated**
remove with care

Assess (tone), breathing and heart rate

If gasping or not breathing:
Open the airway
Give 5 inflation breaths

COVID-19 **Consider filter in ventilation circuit**

Re-assess
If no increase in heart rate
look for chest movement

If chest not moving:
Recheck head position
Consider 2-person airway control
and other airway manoeuvres
Repeat inflation breaths
SpO_2 monitoring ± ECG monitoring
Look for a response

If no increase in heart rate
look for chest movement

When the chest is moving
If heart rate is not detectable
or very slow (< 60 min^{-1})
Ventilate for 30 seconds

Re-assess Heart Rate
If < 60 min^{-1} start chest compressions
Co-ordinate compressions with PPV (3:1)

Reassess heart rate every 30 seconds
If heart rate is not detectable
or very slow (< 60 min^{-1})
consider venous access and drugs

COVID-19 **Careful consideration of transfer**
to NNU if required
Incubator, adequate PPE for escort, route

Discuss with parents and debrief team

COVID-19 **Approach to resuscitation is unchanged with suspected/confirmed COVID-19.**

Maintain Temperature

60 s

Acceptable pre-ductal SpO_2

2 min	60 %
3 min	70 %
4 min	80 %
5 min	85 %
10 min	90 %

Increase oxygen
(Guided by oximetry if available)

At All Times Ask: Do You Need Help?

www.erc.edu | info@erc.edu
Published April 2020 by European Resuscitation Council vzw, Emile Vanderveldelaan 35, 2845 Niel, Belgium • Copyright: © European Resuscitation Council vzw