

**MEHLVILLE FIRE PROTECTION DISTRICT  
EMERGENCY MEDICAL SERVICES  
GUIDELINES FOR PREHOSPITAL EMERGENCY CARE**

**SUBJECT: 1000.03  
PEDIATRICS:  
NEWBORN EMERGENCIES**

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- In all situations, minimize heat loss:
  - Dry the newborn well.
  - Increase environmental temperature.
  - Fill two sterile gloves with above-body-temperature (100-104 degree) water and place next to newborn if possible.
  - Wrap the infant in a blanket. Cover the head with a cap if available.
  
- Suction infant:
  1. During delivery, suction mouth and oropharynx first, then nose on perineum, before delivery of shoulders.
  2. If meconium is present at birth, suction the mouth and oropharynx first, then the nose, gently, but as completely as possible, prior to ventilating.
  3. Monitor heart rate. Cease suctioning if heart rate <80 (monitor apical pulse with stethoscope).
  
- Provide physical stimulation if respirations are present but depressed. Suction and position for optimal airway. **Do not** hyperextend the neck.
  
- Assist ventilation if respirations are absent, minimal or heart rate <80. Suction and position for optimal airway. **Do not** hyperextend the neck. May use a pediatric mask or pocket mask with supplemental high flow oxygen. **Do not** use positive pressure oxygen valve.
  
- Perform chest compressions if apical heart rate is <80/minute despite assisted/adequate ventilation.
  
- **Transport early.** Contact a medical control physician as soon as possible after birth.
  
- Attempt to maintain body temperature and assure optimal ventilation and oxygenation.

**STANDARD PRECAUTIONS MUST BE OBSERVED.**