

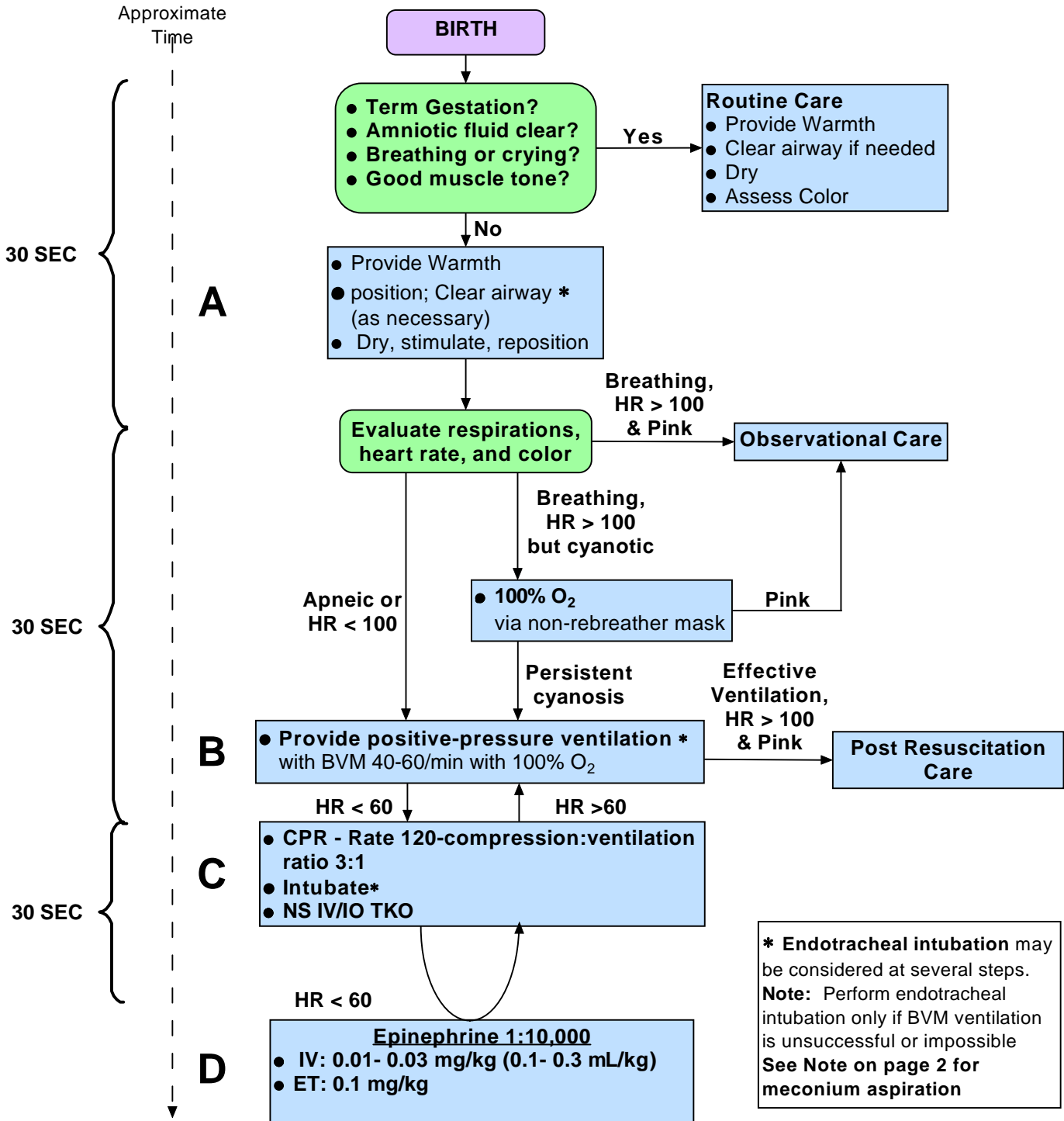
# SIERRA-SACRAMENTO VALLEY EMS AGENCY

## ALS PROTOCOL - MEDICAL EMERGENCY

**PEDIATRIC**  
**REFERENCE NO. P-2**

### SUBJECT: NEONATAL RESUSCITATION

This protocol applies to all infants up to and including 28 days old.



Effective Date: 02/01/07  
Next Review Date: 09/09  
Approved by:

Date last reviewed revised: 09/06  
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**SUBJECT: NEONATAL RESUSCITATION**

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***Clearing the airway of meconium:***

If the amniotic fluid contains meconium **and** the infant has absent or depressed respirations, decreased muscle tone, or heart rate < 100 bpm do not stimulate or ventilate infant until meconium is cleared from the airway, proceed as follows:

**1. If suction capability of 80 mm Hg or less:**

Perform direct laryngoscopy immediately after birth for suctioning of the hypo pharynx and intubation/suction of the trachea. Accomplish tracheal suctioning by applying suction directly to the endotracheal tube (utilizing meconium aspirator), as it is withdrawn from the airway. Repeat intubation and suctioning until little additional meconium is recovered or until the heart rate indicates that resuscitation must proceed without delay.

**2. Suction capability 100 mm Hg or more:**

Use bulb syringe and, if necessary, a suction catheter to thoroughly suction meconium from nose, mouth and oropharynx. A laryngoscope blade may be inserted to assist in visualization of the oropharynx during suction. Intubation may be necessary for respiratory depression.

Ventilate infant at 40 to 60 breaths per minute (visualize rise in chest). Use a neonatal resuscitator bag with oxygen reservoir apparatus.