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Queensland Government

Nomogram: Jaundice Management

For baby less than 35 weeks gestation, less than 1000g birth weight

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| | Facility: | |
| 1 | racility. | |

| Comments: | | | | (Affix identification label here) | | | | | | | | |
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| | | | | URN: | | | | | | | | |
| | | | | Family name: | | | | | | | | |
| | | | | Given name(s): | | | | | | | | |
| Time of birth (24hr): | DCT: | Baby's blood group: | Mother's blood group: | Address: | | | | | | | | |
| : | | | | Date of birth: | Sex: | М | F | | | | | |

- 1. In the presence of risk factors (sepsis, haemolysis, acidosis or asphyxia) use the lower line.
- 2. If baby is greater than 12 hours old with total serum bilirubin (TSB) 1-50 micromol/L below the line, repeat the TSB within 6-24 hours.
- 3. Babies under phototherapy:
 - a. Consider measuring the TSB 4-6 hourly until the rise of serum bilirubin is known to be controlled, then measure TSB 12-24 hourly.
 - b. If the TSB is greater than 50 micromol/L below line, stop phototherapy and recheck in 12-24 hours.
- 4. If baby presents with TSB above threshold and the TSB is not expected to be below the threshold after 6 hours of intensive phototherapy, an exchange transfusion is indicated.
- 5. If there are signs of bilirubin encephalopathy an immediate exchange transfusion is recommended.

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