Neonatal stabilisation for retrieval: Respiratory distress

**Signs of respiratory distress**
- Increased work of breathing
- \( O_2 \) requirement > 30%

Flowchart: F18.18-4-V4-R23

**Signs of CPAP failure**
- \( O_2 \) requirement > 50%
- Increased work of breathing
- Respiratory acidosis–pH < 7.25 or \( PaCO_2 > 60 \) mmHg
- Increasing apnoea and/or bradycardia
- Consider total clinical presentation

**Work of breathing**
- Tachypnoea
- Chest recession (sternal, intercostal, lower costal)
- Nasal flaring
- Audible expiratory grunt

**O2 saturations**
- Target:
  - Preterm 90–95%
  - Term 92–98%
- Measure preductally–right hand

**Contact RSQ**
Commence IPPV
- ETT size and insertion depth–refer to QCG: Neonatal resuscitation
- Pressures:
  - PIP 18–20 cm H2O
  - PEEP 7–8 cm H2O
- \( O_2 \) to maintain oxygen saturations
- Flow: 6–8 L/minute
- IT: 0.3–0.4 seconds
- Rate: 40–60 bpm

**Surfactant**
- Baby with HMD requiring intubation and ventilation from birth
- Up to 24 hours of age
- Continue IPPV

**Signs of CPAP failure**
Yes

**Assess and monitor clinical condition**

**Contact Retrieval Services Queensland for advice or retrieval activation at any time Phone 1300 799 127**

**Flowchart**

\(<\): less than; \(>\): more than; bpm: breaths per minute; \( cm \) H2O: centimetres of water; CPAP: continuous positive airway pressure; ETT: endotracheal tube; HMD: Hyaline membrane disease; IPPV: intermittent positive pressure ventilation; MAP: mean airway pressure; IT: inspiratory time; \( O_2 \): oxygen; \( PaCO_2 \): partial pressure of carbon dioxide; PEEP: positive end expiratory pressure; PIP: peak inspiratory pressure; QCG: Queensland Clinical Guidelines; RSQ: Retrieval Services Queensland