Flowchart for Newborn Life Support 1

Delivery from a COVID-19 negative mother, or an asymptomatic mother not suspected to have COVID-19

The purpose of this flowchart is to provide practical, pragmatic advice to anyone providing assessment, stabilisation or resuscitation of newborn babies in the UK during the COVID-19 pandemic.

Newborn life support is very different from adult resuscitation and this guidance is only applicable to newborn babies. It aims to provide evidence based advice where possible (accepting the evidence base is weak) and tries to avoid anxiety based medicine where practical (accepting that clinician safety is vital and the perception of safety is very important).

This flowchart is for delivery from a mother who is COVID-19 negative or asymptomatic and not suspected to have COVID-19. Please visit resus.org.uk for guidance on delivery from a mother with confirmed or suspected COVID-19, as well as other resources.

PPE Terminology

FRSM fluid resistant surgical mask  
FRDG fluid resistant disposable gown  
PPE personal protective equipment  
AGP aerosol generating procedure  
FFP mask filtering face-piece respirator (e.g. FFP3, N95 or equivalent)
Standard reasons for neonatal team attendance

Neonatal team wear plastic apron, gloves, fluid-resistant surgical mask and eye protection

Delayed cord clamping should be considered

If baby is well at birth: no neonatal team involvement
If baby requires assessment / stabilisation / resuscitation pass to the neonatal team who can be in the same room

Assessment & stabilisation / resuscitation as per NLS algorithm
Aerosol generating procedures can safely be done in a fluid resistant surgical mask, plastic apron, gloves and eye protection

If NNU admission not needed: return baby to mother for skin-to-skin and breastfeeding
If NNU admission needed: transfer to NNU following usual local protocols & safe doffing procedures

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