

Flowchart for Newborn Life Support 2

Delivery from a mother with suspected or confirmed 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 has suspected or confirmed COVID-19. Please visit resus.org.uk for guidance on delivery from a mother who is COVID-19 negative or asymptomatic and not suspected, 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)



Flowchart 2: Delivery from mother with suspected/confirmed COVID-19

Standard reasons for neonatal team attendance (COVID-19 is not an indication on its own). Consider team member vaccination status and COVID-19 risk profile.

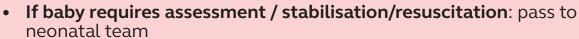


- If possible neonatal team in adjacent room, otherwise in same room as mum
- Minimum number required in team, back up available
- Team members in full gown, gloves, FFP3 mask (or equivalent) & eye protection. A mother having a caesarean section is more likely to have aerosol generating procedures or a general anaesthetic

If baby is well at birth: no neonatal team involvement



Delayed cord clamping should be considered



- Assessment & stabilisation / resuscitation as per NLS 2021 algorithm
- Discard wet towel safely
- If advanced resuscitation requires extra members, they should also wear full gown, gloves, FFP3 mask (or equivalent), hat & eye protection



- If NNU admission not needed: return baby to mother for skin to skin and breast feeding if mother is well enough
- Consider fluid resistant surgical mask for mother
- If NNU admission needed: transfer in incubator to designated area in NNU
- Safe doffing of PPE by Neonatal team