Neonatal Resuscitation

Summary This Guideline provides contemporary evidence-based guidance to standardise the practice of neonatal resuscitation in alignment with contemporary international consensus by endorsing the Australian and New Zealand Committee on Resuscitation (ANZCOR) guidelines for use in NSW. Publication of this resource will support improved neonatal outcomes, through prevention of adverse long-term neurodevelopmental sequelae and mortality associated with perinatal asphyxia.

Document type Guideline

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Policy manual Not applicable

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Functional group Clinical/Patient Services - Baby and Child, Critical Care, Maternity, Medical Treatment, Nursing and Midwifery

Applies to Local Health Districts, Specialty Network Governed Statutory Health Corporations, Government Medical Officers, Community Health Centres, Public Hospitals

Distributed to Public Health System, Divisions of General Practice, Government Medical Officers, NSW Ambulance Service, Private Hospitals and Day Procedure Centres, Health Associations Unions, Tertiary Education Institutes

Audience All NSW Health Maternity Managers and Clinicians;Maternity and Neonatal Clinical Staff;All Clinical Staff in NSW Health Maternity Services

NSW Health

Guideline

Neonatal Resuscitation

Guideline Summary

This Guideline aims to optimise, facilitate and standardise neonatal resuscitation by endorsing the Australian and New Zealand Committee on Resuscitation (ANZCOR) Guidelines - Section 13: Newborn Resuscitation guidelines for use in NSW. It applies to all clinicians who care for babies in NSW Health maternity and neonatal services.

Key Principles

The term 'neonatal' or 'neonate(s)' refers to all babies less than 28 days corrected age. This includes the 'newborn' or 'newborn infant' in the first minutes to hours following birth.

The use of the ANZCOR Guidelines - Section 13: Newborn Resuscitation applies to neonates only in their birth episode of care, including those in the acute newborn period and those admitted to neonatal units.

Section 13: Newborn Resuscitation includes:

- *Introduction to Resuscitation of the Newborn*
- *Planning for Newborn Resuscitation and Identification of the Newborn at Risk*
- *Assessment of the Newborn*
- *Airway Management and Mask Ventilation of the Newborn*
- *Tracheal Intubation and Ventilation of the Newborn*
- *Chest Compressions during Resuscitation of the Newborn*
- *Medication or Fluids for the Resuscitation of the Newborn*
- *The Resuscitation of the Newborn in Special Circumstances*
- *After the Resuscitation of a Newborn*
- *Ethical Issues in Resuscitation of the Newborn*

Education and training requirements

All health professionals who attend births or provide direct care to neonates in their birth episode of care, must be trained in newborn basic life support available via My Health Learning. This education and training is mandatory for maternity clinicians and recommended for Clinical Emergency Response System (CERS) response teams and clinicians working in neonatal services.

Newborn basic life support training, education and assessment for NSW Health clinicians consists of:

- A practical assessment to be completed annually.

- Online training to be completed every 5 years.

Staff trained in newborn advanced life support must be in attendance for all high-risk births.

Local Health Districts are responsible for the education and training needs for clinicians.

Resuscitation equipment

A list of recommended equipment and checking processes for resuscitation set-up must be available in all environments where neonates are born and receive care, see the NSW Health Neonatal Resuscitation Equipment Checklist.

Resuscitation preparation

Neonates should be assessed for the need for basic and advanced life support and receive care using the Newborn Life Support Algorithm.

Preparation for a high-risk birth requires communication between health professionals providing care of the woman and those responsible for the neonatal care. This must include any factors that may affect resuscitation preparedness and management of the neonate, including maternal conditions, antenatal diagnoses and assessments of fetal wellbeing. Clinical handover must occur in line with the NSW Health Policy Directive *Clinical Handover* [PD2019_060].

Escalation of care

Perform paired cord blood gas sampling whenever active interventions are required during resuscitation (for example, positive pressure ventilation or cardiopulmonary resuscitation).

Where there is any concern about the fetal or neonatal condition, clinicians are to escalate via local CERS in line with the NSW Health Policy Directive *Recognition and management of patients who are deteriorating* [PD2020_018].

Documentation

Documentation of newborn transition and neonatal resuscitation interventions and response to treatment must occur during and following the event. The NSW Health Neonatal Resuscitation Record is designed to support documentation and monitor the safety and quality of care.

Supporting parents and families

Consideration must be given to the support of and communication with the parent(s)/family whilst resuscitation is occurring. Information must be provided to parent(s) and families in a way that enables them to understand what is happening and participate in decision making when appropriate. Communication should be tailored to their particular circumstances such as language and cultural background, and level of understanding.

Clinicians are to ensure the parent(s)/family are provided appropriate support and an opportunity to debrief following the event.

Compassionate end of life care

In the event resuscitative efforts fail to achieve return of spontaneous circulation, open and compassionate end of life care conversations must occur with appropriate clinical team members and the parent(s)/family. The family's preferences, values and circumstances must be respected throughout. End of life care must be provided in a way that is focused on the baby's best interest, comfort and dignity, cultural needs and on support of the parent(s)/family.

Revision History

Version	Approved By	Amendment Notes
GL2025_003 April-2025	Secretary	This Guideline endorses the Australian and New Zealand Committee on Resuscitation (ANZCOR) Guidelines - Section 13: Newborn Resuscitation guidelines for use in NSW.
GL2018_016 June-2018	Deputy Secretary – Strategy and Resources	Guideline replaces PD2008_027 Maternity – Clinical Care and Resuscitation of the Newborn Infant Updated advice from Australian and New Zealand Committee on Resuscitation Mandatory newborn resuscitation education and training.
PD2008_027 May 2008	Director General	Replaces PD2005_242 Children – Clinical care/Resuscitation/Newly Born infant – AHS Development of Policy/Procedures.
PD2005_242 January 2005	Director General	Replaces Framework for Area Health services to develop policy and procedures related to clinical care and resuscitation of newly born infant.
February 2002 Circular No 2002/30	Acting Director - General New	New.