Newborn Triage Algorithm

- **MOMB/LDR RN evaluates baby**
  - Is baby blue, not breathing, or not responsive?
    - no
    - Baby fits into a protocol?
      - no
        - Concerns?
          - Emergent**
            - Notify MOMB/LDR Charge RN
          - no
  - yes
    - see Diagnosis-Specific Algorithm (Hypoglycemia, PSE, IAI)
    - SeeDefinitionsSlide
    - Call pediatric provider (MOMB nurse to notify provider)
    - If no response in 30min (minimum 2 calls)
      - RN calls NICU consult then enters RLs
    - If further evaluation needed
      - Pediatric provider calls **213-8600** for NICU Consult
      - NNP or MD
    - Urgent**
      - Call code APGAR
      - RN & RT & NNP & MD

- **Emergent**
  - APGAR Team Triage
    - Stablenumbers
      - **Ongoing concerns**
        - NICU monitoring
      - Stablenumbers
        - MOMB care
    - Unstablenumbers
      - NNP or MD
        - NICU to notify Provider of admission to NICU

- **Continue Routine NB Care**
  - no
  - Emergent** per MOMB/LDR Charge RN?
    - yes
      - APGAR Team Triage
    - no
      - Notify MOMB/LDR Charge RN

Updated 11/14/2019

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**Definitions**

<table>
<thead>
<tr>
<th>URGENT</th>
<th>EMERGENT</th>
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<tbody>
<tr>
<td>• Jitteriness</td>
<td>• Respiratory Distress</td>
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<tr>
<td>• Persistent Non-bilious emesis</td>
<td>• Hypoxia</td>
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<tr>
<td>• Petechiae</td>
<td>• Hypoglycemia outside of the protocol (no risk factors or &gt;24hrs old)</td>
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<td>• Fever (&gt;100.4 Rectal) or Asymptomatic Elevated Temperature</td>
<td>• Seizure-like activity</td>
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<tr>
<td>• Persistent Tachycardia (&lt; 200 bpm)</td>
<td>• Lethargy</td>
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<tr>
<td>• Anomalies causing immediate impairment or need for urgent intervention</td>
<td>• Hypothermia</td>
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<tr>
<td></td>
<td>• Bilious Emesis</td>
</tr>
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<td></td>
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