

# OB/NICU Deliveries

Patient Name \_\_\_\_\_

DATE \_\_\_\_\_

Gestational Age \_\_\_\_\_

Mode of Delivery  Vaginal C/S  routine  urgent  emergent

FHR Tracing  I  II  III

ON CALL Neo:

Level I: low risk for resuscitation  
NICU RN & RT\*

Level II: high risk for resuscitation  
NICU RN, RT and **MD**\*

Level III: complex resuscitation  
2+ NICU RN, RT, and **MD**\*

- 35-36 weeks GA
- < 2kg
- Breech C/S
- Maternal meds: opiates/ SSRI/ Mg/ etc.
- Maternal exposure to illicit drugs (+U tox on admission)
- Presence of meconium
- No prenatal care
- Multiples

NICU MD  
available



\* Can be modified at neonatologist discretion

- < 35 weeks GA
- Category III FHR tracing
- Vacuum/ forceps delivery
- Vaginal breech
- Urgent or Emergent C/S
- Hydrops with minimal fluid
- Mother under general anesthesia
- Placenta previa
- Placental abruption
- Placenta percreta/ increta/ accreta
- Shoulder dystocia
- Cardiac dysrhythmia (tachyarrhythmia, bradycardia, heart block, etc.)
- Eclampsia

NICU MD  
required



\* Can be modified at neonatologist discretion

- 2 RNs & 2RTs **required** for <25 weeks GA unless staffing shortage
- 2 RNs & 2 RTs recommended for 25<sup>0</sup> - 27<sup>6</sup> weeks GA
- Hydrops with projected need for tapping
- Multiple congenital defects
- Projected severe/ compromised/ lethal outcome



Antenatal  
huddle  
advised



PHYSICIAN HUDDLE CHECKLIST

\* Can be modified at neonatologist discretion