

SUBJECT: ASSESSMENT, NEWBORN	REFERENCE #2005
DEPARTMENT: NURSERY	PAGE: 2 OF: 4
APPROVED BY:	EFFECTIVE: REVISED:

PROCEDURE:

- Complete physical and gestational age assessment as soon as possible after delivery. Daily reassessments are documented at least every eight hours or more frequently, as appropriate.
- Arrange for infant to be examined by a pediatrician within 24 hours of birth.
- Provide ongoing assessments each shift.
- Initial assessment should include, but is not limited to:
 - Estimation of gestational age by evaluation of both neuromuscular and physical maturity.
 - Determination of presence of anomalies or previously unsuspected diseases, as well as general status of infant.
- Physical assessment should include evaluation of:
 - Skin and subcutaneous tissue
 - Head, neck and mouth
 - Chest and abdomen
 - Genitalia and anus
 - Extremities, spine and joints
 - Respiratory status; rate and effort
 - Breath sounds
 - Cardiovascular system
- A brief neurologic exam should evaluate:
 - Cry
 - Muscle tone

SUBJECT: EXCHANGE TRANSFUSION TOTAL OR PARTIAL	REFERENCE #3014
	PAGE: 1 OF: 3
DEPARTMENT: NURSERY	EFFECTIVE:
APPROVED BY:	REVISED:

PURPOSE:

To replace abnormal serum or blood components without affecting blood volume.

POLICY:

Informed consent is required from mother or legally responsible person. Physician order is required. Only personnel trained in infant special care shall assist with an exchange transfusion.

EQUIPMENT:

- Disposable exchange transfusion set
- Saline solution for partial exchange
- Disposable blood warming set for total exchange and blood warmer
- Sterile gown, cap, mask and gloves
- Lab slips, label and blood containers
- Blood from blood bank for exchange transfusion
- Betadine solution
- Heat lamp
- Chemstrip/one touch for blood glucose

PROCEDURE:

- Preparing to Perform Exchange:
 - Obtain consent signed by mother/legal guardian.
 - Type and crossmatch blood and bring to unit when ready, notifying physician that he/she can begin the procedure.

SUBJECT: RESUSCITATION OF INFANT	REFERENCE #3025
DEPARTMENT: NURSERY	PAGE: 1
	OF: 3
APPROVED BY:	EFFECTIVE:
	REVISED:

POLICY:

- Appropriate staff and equipment for resuscitation will be provided at all deliveries. In addition to the L&D RN, an RN currently certified in newborn resuscitation will be present at each delivery with the sole responsibility for resuscitation of the newborn.
- A pediatrician trained in infant resuscitation and capable of endotracheal intubation will be present (on request) for cesarean sections and high-risk vaginal deliveries.
- All Maternal Child Health Department personnel will maintain current certification in hospital-approved neonatal resuscitation.

PURPOSE:

- To reduce neonatal morbidity and mortality by the anticipation, prevention, recognition and treatment of asphyxia, hypothermia and acidosis.

EQUIPMENT:

- See Resuscitation of Infant Equipment and Supply List.
- The Nursery Nurse will check equipment prior to each delivery.

PROCEDURE:

- Follow the guidelines on Neonatal Resuscitation of the American Heart Association and American Academy of Pediatrics. Immediately after delivery, when the umbilical cord is cut and clamped:
 - Place infant under preheated radiant warmer;
 - Dry thoroughly, if thick meconium not present;
 - Remove wet linen;
 - Position with head slightly extended or in “sniffing position”;
 - Suction mouth, then nose (suction trachea if meconium present);

SUBJECT: DISCHARGE OF NEWBORN FROM NURSERY	REFERENCE #5004
DEPARTMENT: NURSERY	PAGE: 1 OF: 3
	EFFECTIVE:
APPROVED BY:	REVISED:

PURPOSE:

- To ensure that mother and child leave the hospital in optimal condition.
- To ensure discharge is done per hospital policy and procedure.
- To provide for follow-up care for both mother and child, and to provide entry to community services if needed.
- To instruct mother so that she can safely and confidently care for herself and her baby.
- To ensure that all legal requirements are fulfilled.

POLICY:

- The level of satisfaction and confidence with which the recently delivered mother leaves the hospital environment with her baby is a reflection of the quality of nursing care that she and her infant have received.
- Concern for the welfare of each member of the family will be demonstrated throughout hospitalization and reinforced at the time of discharge. Family teaching is documented by both Postpartum and Nursery personnel.
- Mother and infant are discharged at the same time unless it is not possible due to:
 - Prematurity;
 - Illness of the infant, with transfer to a higher level facility;
 - Illness of the mother;
 - Infant being treated for hyperbilirubinemia via phototherapy;
 - Adoption proceedings;
 - Cases involving legal custody.
- Each of these events require Social Service intervention, special instructions to families or significant others and the completion of appropriate documents.

POSITION DESCRIPTION / PERFORMANCE EVALUATION

Job Title: RN, Nursery

Supervised by: Charge Nurse, Nurse Manager

Prepared by: _____ Date: _____

Approved by: _____ Date: _____

Job Summary: Provides direct patient care in the Nursery setting. Provides assessment and planning for individualized patient care. communicates with physicians about changes in patient's clinical condition including results of diagnostic studies. Responds quickly and accurately to changes in condition or response to treatment. Performs general Nursing duties in all Maternal Child Health departments with adequate supervision. Participates in performance improvement activities.

DUTIES AND RESPONSIBILITIES:

E = Exceeds the Standard

M = Meets the Standard

NI = Needs Improvement

Demonstrates Competency in the Following Areas:

	<u>E</u>	<u>M</u>	<u>NI</u>
Knowledge of medications and their correct administration based on age of the patient and his/her clinical condition.	2	1	0
Ability to assess neonate at delivery and perform neonatal resuscitation.	2	1	0
Ability to perform a head-to-toe assessment on infants and adults and reassessments as per policy.	2	1	0
Ability to formulate an individualized plan of care, revise plan as indicated by the patient's response to treatment and evaluate overall plan daily for effectiveness.	2	1	0
Communicates appropriately and clearly to charge nurse, co-workers and physicians.	2	1	0
Consults other departments as appropriate to provide for an interdisciplinary approach to the patient's needs.	2	1	0
Coordinates and supervises patient care, as necessary.	2	1	0
Demonstrates an ability to assist physicians with procedures in Postpartum and Newborn Nursery.	2	1	0
Demonstrates an ability to be flexible, organized and function under stressful situations.	2	1	0
Treats patients and their families with respect and dignity.	2	1	0
Interacts professionally with patient/family and involves patient/family in the formation of the Plan of Care.	2	1	0
Maintains a good working relationship both within the department and with other departments.	2	1	0
Documentation meets current standards and policies.	2	1	0
Identifies and addresses psychosocial needs of patients and family.	2	1	0
Participates in performance improvement activities.	2	1	0
Manages and operates equipment safely and correctly.	2	1	0
<u>Professional Requirements:</u>	2	1	0
Adheres to dress code, appearance is neat and clean.	2	1	0
Completes annual educational requirements.	2	1	0