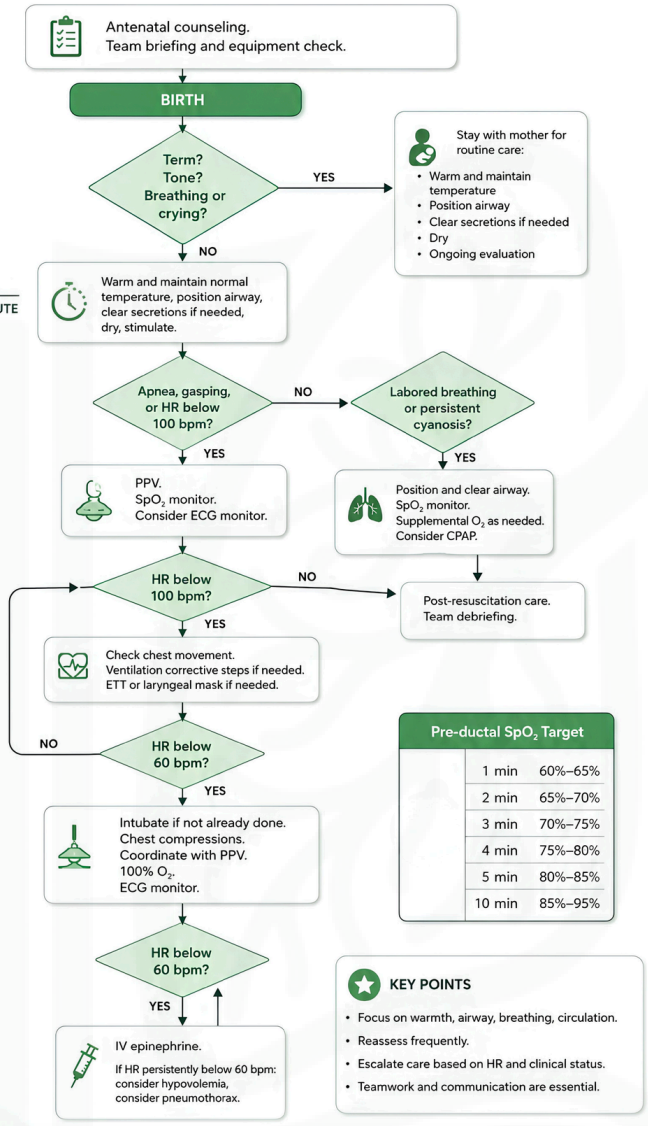
RESPIRATORY REFERENCE

Neonatal Resuscitation Program (NRP)

Goal

Support the newborn's Airway, Breathing, and Circulation (ABC) immediately after birth.

NRP Algorithm



Mr. SOPA

STEP	CORRECTIVE STEPS	ACTIONS
M	Mask adjustment.	Reapply the mask. Consider the 2-hand technique.
	Try PPV and reassess chest movement.	
R	Reposition airway.	Place head neutral or slightly extended.
	Try PPV and reassess chest movement.	
S	Suction mouth and nose.	Use a bulb syringe or suction catheter.
O	Open mouth.	Open the mouth and lift the jaw forward.
	Try PPV and reassess chest movement.	
P	Pressure increase.	Increase pressure in 5 to 10 cm H_2O increments, max 40 cm H_2O.
	Try PPV and reassess chest movement.	
A	Alternative Airway.	Place an endotracheal tube or laryngeal mask.
	Try PPV and assess chest movement and breath sounds.	

NRP Summary

1. Initial Assessment

Ask 3 questions:

- Term?
- Good muscle tone?
- Breathing/Crying?

Yes to all → Routine care (Warm, Dry, Skin-to-skin).
No → Initial steps.

2. Initial Steps (Golden Minute)

- Warm, Dry, Position airway (Sniffing position), Clear secretions only if needed, and Stimulate

→ Reassess HR & Breathing

3. Decision Making

HR ≥100 bpm

- Breathing well → Observe.
- Labored breathing/cyanosis → CPAP ± O_2

HR <100 bpm OR Apnea/Gasping
Start PPV immediately

4. Positive Pressure Ventilation (PPV)

- Start within Golden Minute
- Reassess after 15 sec chest movement
- Reassess HR after 30 sec of effective PPV

If poor chest movement → MR. SOPA

5. Heart Rate Algorithm

HR >100 Continue observation.

HR 60–99 Continue effective PPV.

HR <60

- Intubate if possible.
- 100% O_2
- Start Chest Compressions (3:1)
- ECG if available.

6. Chest Compressions

Start only if:

- HR <60 after 30 sec of effective PPV

Ratio:

- 3 compressions : 1 ventilation
- 90 compressions + 30 breaths = 120 events/min

7. Epinephrine

Indication:

- HR <60 after 60 sec of PPV + Chest Compressions

Preferred route:

- IV (Umbilical Venous Catheter)