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Field Treatment

1. Assist delivery, checking neck for cord.
2. Basic airway/suction mouth, then nostrils
3. Clamp and cut cord
4. Stimulate by vigorously drying newborn with towel
5. Wrap in thermal blanket or dry towel and keep warm
6. Oxygen/assist respirations with bag-valve-mask prn. Treat by NEONATAL RESUSCITATION **P3** guideline prn

Note: ① ② ③

PULSE GREATER THAN 60	*PULSE LESS THAN 60*
7. Reassess respirations and pulses frequently	7. Bag-valve-mask ventilation for 30 seconds ③
8. If pulse 60-100 and not rising, bag-valve-mask ventilation for 30 seconds ④ ③	8. Check pulses
9. Check pulses	9. If pulse remains < 60 and NOT RISING, begin chest compressions at 120/min ④

Special Considerations

① Fetal viability should be based on signs of life, i.e. Ref. No. 814, and not gestational age.

② If amniotic sac intact, pinch and twist the membrane to rupture and remove fetus.

③ If BVM used “squeeze-release-release” technique.

④ Maintain a 3:1 compression/ ventilation ration.