

## Antenatal Prevention

- ✓ Administer **2 doses of antenatal steroids** for pregnancies at risk of preterm birth (24-34 weeks gestation)
- ✓ Magnesium Sulfate for IVH prevention
- ✓ Close monitoring of maternal blood pressure and placental function
- ✓ Conduct a **team pre-brief** before delivery, including:
  - Assigning roles (RN, intubating provider, medication admin, respiratory care, backup personnel)
  - Reviewing thermoregulation practices (plastic wrap, increased delivery room temp)
- ✓ Ensure delivery room is **prepared for stabilization**
  - Ensure delivery room is warm and all supplies are readily available

## Golden Hour

- ✓ **Thermoregulation:**
  - Use plastic wrap, humidity, and early isolette closure
  - Maintain appropriate room temperature
- ✓ **Early stabilization:**
  - Place **lines** and start **fluids** within 60 minutes
  - Consider a dedicated provider for line placement in the NICU
- ✓ **Glycemic control:**
  - Start dextrose with protein to prevent hypoglycemia
- ✓ **Cardiorespiratory support:**
  - Maintain stable BP and avoid fluctuations: monitor for signs of hypotension beyond BP
  - Use gentle ventilation to reduce risk of lung injury: consider high frequency ventilation
- ✓ **Reduce IVH risk:**
  - Handle infant minimally
  - Keep head **midline** and body neutral



## First 96 Hours: IVH Prevention Strategies

### Midline Protocols

- ✓ Keep head **midline** to promote cerebral venous drainage
- ✓ **Tilt incubator mattress** 10°-30°
- ✓ **Minimize handling and suctioning**
- ✓ Avoid **rapid flushes** and **quick blood withdrawals**
- ✓ Provide **pain and stress relief** (swaddling, non-nutritive sucking, comfort measures)
- ✓ No **bathing or weighing** during this time
- ✓ Encourage **kangaroo care** as per unit guidelines
- ✓ Control **noise and light** (use isolette covers, window blinds, reduce unnecessary talking)
- ✓ Designate a **staff member for infant support** during interventions

### Head Ultrasound Protocol

- ✓ Perform **initial ultrasound** on **DOL 7** unless needed for decision-making earlier
- ✓ Repeat on **DOL 14** or sooner if there's a **major drop in hematocrit** or clinical concern
- ✓ Often repeated again around **30 days of life**
- ✓ Avoid routine ultrasounds on **DOL 1 or 2** unless clinically indicated

### Care Time Guidelines

- ✓ Use **cue-based care** and allow **extensive rest** between cares
- ✓ Perform **4-handed care** with two caregivers at all times
- ✓ Train **volunteers** to assist when parents are unavailable
- ✓ No **leg lifts** for diaper changes; use **specialized mattresses** to reposition instead
- ✓ **Slow medication/fluid boluses** to prevent rapid BP fluctuations
- ✓ Use **closed blood draw systems** and slow pulsating flush techniques
- ✓ Maintain **thermoregulation** (keep linen dry, avoid unnecessary incubator opening)
- ✓ Start **humidity for infants <30 weeks** or per protocol
- ✓ Encourage **early, frequent, and prolonged kangaroo care**

### Kangaroo Care Recommendations

- ✓ Promote **early, frequent, and prolonged** skin-to-skin contact
- ✓ Use **two-person transfers** for safety
- ✓ Provide **education and support** to increase family confidence
- ✓ Ensure **minimal limitations** on frequency of kangaroo care sessions

