

## **CIRCULAR**

<b>File No</b>	A 27476
<b>Circular No</b>	97/38
<b>Issued</b>	4 April 1997
<b>Contact</b>	Michael Hills (02) 9391 9492

### **GUIDELINES FOR FACILITIES FOR THE STABILISATION OF NEWBORNS PRIOR TO TRANSPORT**

This circular is issued to assist NSW hospitals using a medical retrieval team to transfer a neonate for special or intensive care. It sets out the resources that are required for the safe and efficient stabilisation of neonates in this situation. These resources are only required at those hospitals which offer obstetric services at role delineation Level 2 or above.

These guidelines are designed to assist referring hospitals by facilitating the combined team formed by the referring hospital's staff and the NSW Neonatal and Paediatric Emergency Transport Service (NETS) to stabilise and prepare patients for transport. The guidelines were developed by the Emergency Transport Working Group and the Level 2 District Hospital Committee of the NSW Perinatal Services Network in consultation with hospitals that refer neonates to NETS for transportation.

#### **Background**

The NETS has encountered difficulties at some hospitals in relation to access, space limitations, communication and physical facilities in the area normally used for stabilising infants prior to emergency transportation. These guidelines are intended to overcome those difficulties.

#### **Compliance**

It is acknowledged that not all hospitals will be able to immediately provide the physical space specified in this circular. Hospitals are advised that if there is currently no suitable space within the neonatal nursery, alternative resuscitation areas can be provided in a labour ward or emergency room environment. However when a hospital is being refurbished or rebuilt the requirements listed in this circular should be followed and reference made to the functional space requirements contained in the current 'Health Building Guideline - Obstetric Unit - Baby Spaces - Ventilated'.

Distribute in accordance with circular list(s):

A 34	B	C 33	D	E
F	G	H	I	J 31
K	L	M	N	P

73 Miller Street North Sydney NSW 2060  
Locked Mail Bag 961 North Sydney 2059  
Telephone (02) 391 9000 Facsimile (02) 391 9101

Where specific essential equipment items listed below are not available at present, provision should be made to include these items in forward planning cycles at the appropriate time.

### **Access to mother**

After resuscitation and prior to transport, it should be possible for the NETS Infant Transport System (transport module) to be wheeled to the mother's bedside. Sufficient room is needed for the mother to see her baby from her bed.

### **Further Information**

Inquiries regarding this circular can be directed to either the Statewide Services Development Branch on 02 9391 9492 or the NSW Perinatal Services Network on 02 9351 7741.

### **Requirements**

These are listed as "Essential" and "Desirable" elements to identify priority areas.

#### **A) Essential requirements:**

Physical requirements for pre-transport stabilisation area for NETS are as follows:

- 1.1 An area or room located in the nursery, labour ward or emergency room (in order of preference) that can be made available when required.
- 1.2 An open resuscitation trolley or open-care infant care unit with:
  - Integrated overhead lighting
  - Variable radiant heat source
  - Swing-away overhead module for mobile x-ray access
- 1.3 It must be possible for an ambulance stretcher (550mm x 2000mm) to enter the area easily, without obstruction and be positioned adjacent to or at right angles to the open-care unit or resuscitation trolley (whichever is used).
- 1.4 Working space to accommodate a convection incubator, resuscitation trolley, procedure trolley, mobile x-ray machine, mobile intensive care transport system, from 2 to 5 staff and two parents. The area required for a single sick patient sufficient to accommodate this equipment is approximately 15m<sup>2</sup>.
- 1.5 Panel Fixtures (preferred elevation approximately 1300mm):
  - Oxygen x 2 (reticulated preferred).
  - Source of medical grade air x 2:
    - (reticulated preferred - cylinder supply will suffice in some locations)

Suction x 2:

One outlet should be regulated for low or controlled suction.

- 1.6 Power outlets:  
Body protected general power outlets (GPO's) x 2 for NETS use, in addition to those used by referring hospital equipment. A minimum of 8 is recommended ( for equipment including: incubator, heater, ventilator, humidifier, two pumps, oximeter/O<sub>2</sub> monitor, ECG monitor, x-ray machine, etc.)
- 1.7 Wash sink, soap dispenser, paper towel.
- 1.8 Waste receptacle. Large capacity with either removable lid or no lid. (*Positioned close to resuscitation area*).
- 1.9 Sharps disposal container  
(*Positioned close to resuscitation area*).
- 1.10 A telephone within the resuscitation area and adjacent to the patient, available at time of the retrieval, from which direct calls can be made to and from the NETS team from the time of call-out until stabilisation is complete and the NETS team has departed. Direct access to outside numbers without calling switchboard is required.

**B) Desirable equipment:**

Additional physical requirements for pre-transport stabilisation area for NETS are as follows:

- 2.1 A procedure trolley (minimum dimensions 900mm x 450mm).
- 2.2 A procedure light (anglepoise type).
- 2.3 Counter, benchtop or bed (minimum area 550mm x 1200mm) for additional treatment equipment.
- 2.4 X - ray viewing board.
- 2.5 The telephone handset listed in 1.10 to be:  
  
capable of one key dial to the NETSLINE (ie it has a number store facility); within arm's reach of staff treating the patient - ( eg wall mounting behind and to the right of the open care system trolley); a hands-free capacity or cordless phone.

Michael Reid  
**Director-General**