



Medical care & clinical practice



Prevention, detection, documentation, and treatment of retinopathy of prematurity (ROP)

Screening programmes for detection, documentation and treatment of **sight threatening retinopathy of prematurity (ROP)** in all units caring for very preterm infants, as well as preventive measures such as control of oxygen supplementation and promotion of optimal nutrition are established.



Neonatal jaundice

All newborn infants are **assessed for neonatal jaundice** with the aim of implementing effective prevention of severe hyperbilirubinaemia.



Management of persistent pulmonary hypertension of the newborn infant (PPHN)

Management of newborn infants with **persistent pulmonary hypertension (PPHN)** in a specialised centre improves mortality and morbidity.



Prevention of vitamin K deficiency bleeding (VKDB) at birth

Prophylactic supplementation with **vitamin K** for all infants is given to prevent vitamin K deficiency bleeding (VKDB).



Postnatal support of transition and resuscitation

Support of postnatal transition to extrauterine life is based on internationally consented guidelines, which are based on scientific evidence, and is performed in an appropriate structured and equipped environment by trained personnel.



Prevention of Bronchopulmonary Dysplasia (BPD)

Bronchopulmonary Dysplasia (BPD) is prevented using evidence-based strategies including avoiding mechanical ventilation, minimally invasive administration of **exogenous surfactant**, **volume targeted ventilation** and **early caffeine**, and administration of systemic steroids in infants still requiring ventilation during their 2nd postnatal week.



Management of suspected early-onset neonatal sepsis (EONS)

Newborn infants with suspected **early-onset infection** receive prompt **diagnosis and effective treatment of sepsis** while avoiding overuse of antibiotics.



Hypoglycaemia in at risk term infants

Measures are taken to identify, prevent, and manage **hypoglycaemia** in newborn infants who are at risk for impaired metabolic adaptation, including those with growth restriction, maternal diabetes, asphyxia, maternal beta-blocker medication.



Postnatal management of newborn infants with hypoxic ischaemic encephalopathy (HIE)

Newborn infants who have suffered from severe **hypoxic-ischaemia** receive **early evaluation and appropriate postnatal management** including therapeutic hypothermia and monitoring.



Management of Respiratory Distress Syndrome

Newborn infants at risk of **Respiratory Distress Syndrome (RDS)** receive appropriate perinatal care including place of delivery, **antenatal corticosteroids**, guidance around optimal strategies for delivery room stabilisation, and ongoing respiratory support.



Neurological monitoring in the high-risk infant: Clinical neurological evaluation, near-infrared spectroscopy, EEG and aEEG, ultrasound and MRI scanning (4 different standards).

In order to improve evaluation and outcomes of newborn infants at risk of **brain injury**, **management includes neurological monitoring** using a structured, age-appropriate neurological assessment and a range of devices to evaluate brain haemodynamics, oxygen transport, brain function, and imaging, as well as long-term follow-up of neuro-motor function as required.

