

# Neonatal transport

# Neonatal transport

- ☯ Transporting sick neonates is not an easy task
- ☯ In utero transport is far more rewarding than the transport of sick neonates after birth
- ☯ Care providers should, therefore, be ready, competent and confident to handle this responsibility

# Constraints in neonatal transport

**A challenge in developing countries**

- ☯ **Scarce and inaccessible facilities**
- ☯ **Lack of organized transport system**
- ☯ **Road links poor or non-existent**
- ☯ **Communication systems not developed**

# Constraints in neonatal transport *(contd...)*

**A challenge in developing countries**

- ☯ **Ill equipped health facilities**
- ☯ **Families have poor resources**
- ☯ **No provider accompanies baby**
- ☯ **No care possible en route**

# Transport

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Tertiary Centre

# Neonatal transport

## Prepare well before transport

- ☯ **Make careful assessment of the need and urgency of referral**
- ☯ **Correct hypothermia before – it is going to worsen during travel**

# Before transport

1. **Communicate , write a note**
2. **Encourage mother to accompany**
3. **Arrange provider to accompany**
4. **Explain care during travel**

# Communicate

- ☯ Explain the condition, the prognosis and the reasons for referral of the baby
- ☯ Explain where to go and whom to contact
- ☯ Inform the referral facility beforehand, if possible



# Assess & stabilize

- ☯ **Temperature**
  - Tactile / Thermometer
  - Warmer/Cover / KMC
- ☯ **Airway**
  - Position/Suction
- ☯ **Breathing**
  - Tactile stimulation / PPV 100% O2

# Assess & stabilize

- ☯ **Circulation**  
CFT, Pulses  
Fluid bolus RL/NS 10 ml/kg - Reassess
- ☯ **Fluids**  
Day of life/ abnormal losses
- ☯ **Medications**  
Antibiotics, Anticonvulsants, vitamin K etc.
- ☯ **Feeding**  
Gavage, paladai, breast feeds

## Who to accompany ?

- ☯ **Mother should accompany, as far as possible**
- ☯ **A doctor / nurse / dai / health worker should accompany the baby, if feasible**

# Care during transport

- ☯ **Ensure warm feet**
- ☯ **Ensure open airway**
- ☯ **Check breathing; stimulate, if apneic**
- ☯ **Provide feeds, if active**

# Warm transport

- ☯ **Skin to skin care**
- ☯ **Well covered**
- ☯ **Improvised containers**
- ☯ **Transport incubator (rare)**

# Skin to skin care

**(Kangaroo Mother Care)**

**Baby is naked except for a cap and napkin**

- ☯ **Baby is placed facing the mother in skin to skin contact between breasts**
- ☯ **Baby's back is covered by tying the blouse or with a fold of gown / 'chunari'**

**Another woman or a man (father) can also provide**



**Kangaroo  
mother care**

# If provider not accompanying

- ☯ Avoid running I.V. fluids
- ☯ Avoid oro-and nasogastric feeds
- ☯ Avoid hot water filled bags for warmth



# Summary of safe transport for neonates

## Prepare well before transport

- ☯ Communicate , write a note
- ☯ Assess & stabilize
- ☯ Correct hypothermia

## During transport

- ☯ Caregiver to accompany
- ☯ Arrange a provider to accompany
- ☯ Ensure warm transport

# Conclusion

- ☯ Neonatal transport in developing countries is a formidable challenge
- ☯ A simple approach is required
- ☯ Family plays a major role
- ☯ There is a need to educate providers

**Take the baby to the nearest  
referral facility, by the shortest  
route, using the fastest possible  
mode of transport**