

EXCEPTION REPORTING - LEARNING POINTS

Following discussion of the exception report summary at the Clinical Forum North meeting held 25 June 2019, the learning points detailed below have been identified:

January 2019 – April 2019

- When a baby already known to a NICU develops issues e.g back on ventilation consider speaking to the unit that knows the baby even if not your local NICU
- Embrace and local units should ensure that when they use a call via Embrace as a route to advice, this should always include the Tertiary Centre, even when the Embrace consultant is joining the discussion.

EXCEPTIONS INCLUDE:

LNU

- Babies <27wks or <800g in a LNU beyond 1 day of life
- Babies receiving intubated ventilatory support for greater than 48 hours beyond 1 day
- Babies receiving ventilation via a tracheal tube AND Inotrope, prostaglandin infusion, insulin infusion, a chest drain, or had an exchange transfusion in a LNU beyond 1 day
- Babies with hypotension, disseminated intravascular coagulation (DIC), renal failure, or metabolic acidosis
- Babies who received nitric oxide, HFOV, or therapeutic hypothermia

SCBU

- Babies <32wks or <1000g in a SCBU beyond 1 day of life (except London ODN which doesn't use the beyond 1 day of life criteria)
- Babies receiving IC in a SCBU beyond 1 day
- Babies receiving inotrope, prostaglandin infusion, insulin infusion, have a chest drain, or had an exchange transfusion in a SCBU beyond 1 day
- Babies receiving intubated ventilatory support for greater than 48 hours beyond 1 day
- Babies with hypotension, disseminated intravascular coagulation (DIC), renal failure, or metabolic acidosis
- Babies who received nitric oxide, HFOV, or therapeutic hypothermia