
General information

1. How many deliveries do you have a year? <1000 1000-2500 2500-4000 >4000
2. How many premature-babies <1500g do you have a year? <20 20-50 50-100 >100
3. Level of your Neonatal Unit: I II A II B III A III B III C
4. Indicate the place where you resuscitate the newborn child in the moment to be born:
   In delivery room / in NICU / in another place (to specify):
5. Indicate from that age gestational premature babies are resuscitated in your hospital:
   >23 w / >24 w / >25 w / >26 w / others (to specify):

Resuscitation team (RT) members and training

NOTE: please, answer all the items in which the response is YES/NOT

6. Indicate what RT members are qualified to attend newborns in delivery room (DR) 24 hours a day, including high risk infants:
   - Board certified Neonatologist YES NOT
   - Paediatric residents YES NOT
   - Board certified Paediatrician YES NOT
   - Midwives YES NOT
   - Neonatal nurses YES NOT
   - Board certified anaesthesiologists YES NOT
   - Others (to specify): YES NOT

7. Can 2 or more RT members attend to a high risk infant simultaneously the 24 h of the day?
   YES NOT

8. Has anyone of the care givers attending round the clock in the DR completed a course in NR in the last 3 years?
   Always / frequently / sometimes /never

9. RT members that resuscitate habitually in your centre know:
   - NRG courses (Spanish Neonatal Society) YES NOT
   - NRG manual book (Spanish Neonatal Society) YES NOT
   - ILCOR 2005 guidelines YES NOT

10. Are there any NR instructors in your hospital or zone?
    YES NOT

11. Are NR courses performed in your hospital or health area?
    YES NOT

12. If the previous response is affirmative, indicate the periodicity of the NR courses:
    Half-yearly / annual / occasional / other one (to specify)

Equipment in the resuscitation area
13. Indicate the equipment you have requested in the budgets of last 2 years for your DR:

- Blenders
- Ventilator (Mechanical, manual type Neopuff®)
- Pulse oximeters
- Neonatal laryngoscopes of cold light
- CO₂ detectors
- PEEP valve
- Others (please specify):

14. Your DR has of:

- 0₂ source
- Air - 0₂ source
- Blenders
- Pulse oximeter
- Self-inflating bag 240 mL
- Self-inflating bag 450 mL
- Self-inflating bag with PIP valve
- Self-inflating bag with PEEP valve
- Flow-inflating bag
- Mechanical ventilator
- CO₂ detectors
- Meconium kit
- Plastic (polyethylene) wraps / bags

Resuscitation practices

15. Do you measure the temperature of the newborns in DR?
   Always / frequently / sometimes / never

16. Do you measure the temperature of the newborns within the first hour after admission in NICU?
   Always / frequently / sometimes / never

17. What measures do you use to prevent the heat loss in premature babies?

- Higher environmental temperature in DR
- Heat of the thermal cradle
- Cap or similar
- Plastic (polyethylene) wraps / bags
- Hot-water bottles / heated towel

18. Do you use therapeutic hypothermia in DR? Yes / No

19. What means do you use for oxygen administration:

- Free oxygen
- Blenders

20. If you have of pulse oximeter in DR, you use it:
   Always / frequently / sometimes / never

21. If you never (or little) use the pulse oximeter, specify the motive:

- Values not reliable
22. What criteria do you use to change the FiO₂?
- According to the saturation, using the pulse oximeter
- According to the colour
- According to the heart rate
- Others (to specify)

23. If you need to administer positive pressure with facial mask, what ventilation devices you use:
- Self-inflating bag without PEEP valve
- Self-inflating bag with PEEP valve
- Flow-inflating bag
- T-piece manual ventilator (type Neopuff®)
- Mechanical ventilator

24. Regarding the use of CO₂ detectors to confirm intubation in DR:
- Are they routinely used
- Do you think is necessary always
- Only if there are doubts of intubation

25. In extreme premature infants you use controlled PIP and PEEP:

Always / frequently / sometimes /never

26. If you use PIP/PEEP controlled in the resuscitation of extreme premature infants, specify the level of:
- Initial PIP: ____________ cmH₂O
- Initial PEEP: ________ cmH₂O

27. Do you use elective intubation in premature infants in DR? (If you answer yes, to indicate from that EG: <26s/<27s / <28s / <29s)

28. Do you use electively endotracheal tubes including 2nd lumen for surfactant administration?

29. Do you use CPAP in premature infants in DR? (For transport to see paragraph of the following page):

30. If you use CPAP, what device do you use to apply it in DR? (For transport to see paragraph of the following page):
- T-piece (type Neopuff®)
- Ventilator
- Infant Flow®
- Others (to specify):

31. If you use CPAP, how do you apply it initially in DR? (For transport to see paragraph of the following page). By means of:
- Mask
- Single-nasal prongs
- Bi-nasal prongs

32. If you use CPAP, what level of initial pressure do you use? ______________ cmH₂O

Transport from DR to NICU
33. What is the time to transport a stabilized newborn since DR to NICU?

- < 5 minutes: YES NOT
- 5-10 minutes: YES NOT OR
- >10 minutes: YES NOT

34. How do you ventilate the newborns during transport?

- Transport ventilator: YES NOT
- Self-inflating bag: YES NOT
- Flow-inflating bag: YES NOT
- Others (to specify): YES NOT

35. With what device do you apply CPAP during the transport?

- Transport ventilator: YES NOT
- T-piece (type Neopuff®): YES NOT
- Others (to specify): YES NOT

36. With what prong do you apply CPAP during the transport?

- Single-nasal: YES NOT
- Bi-nasal: YES NOT

37. Do you use blenders during the transport? YES NOT

Thank you for your participation