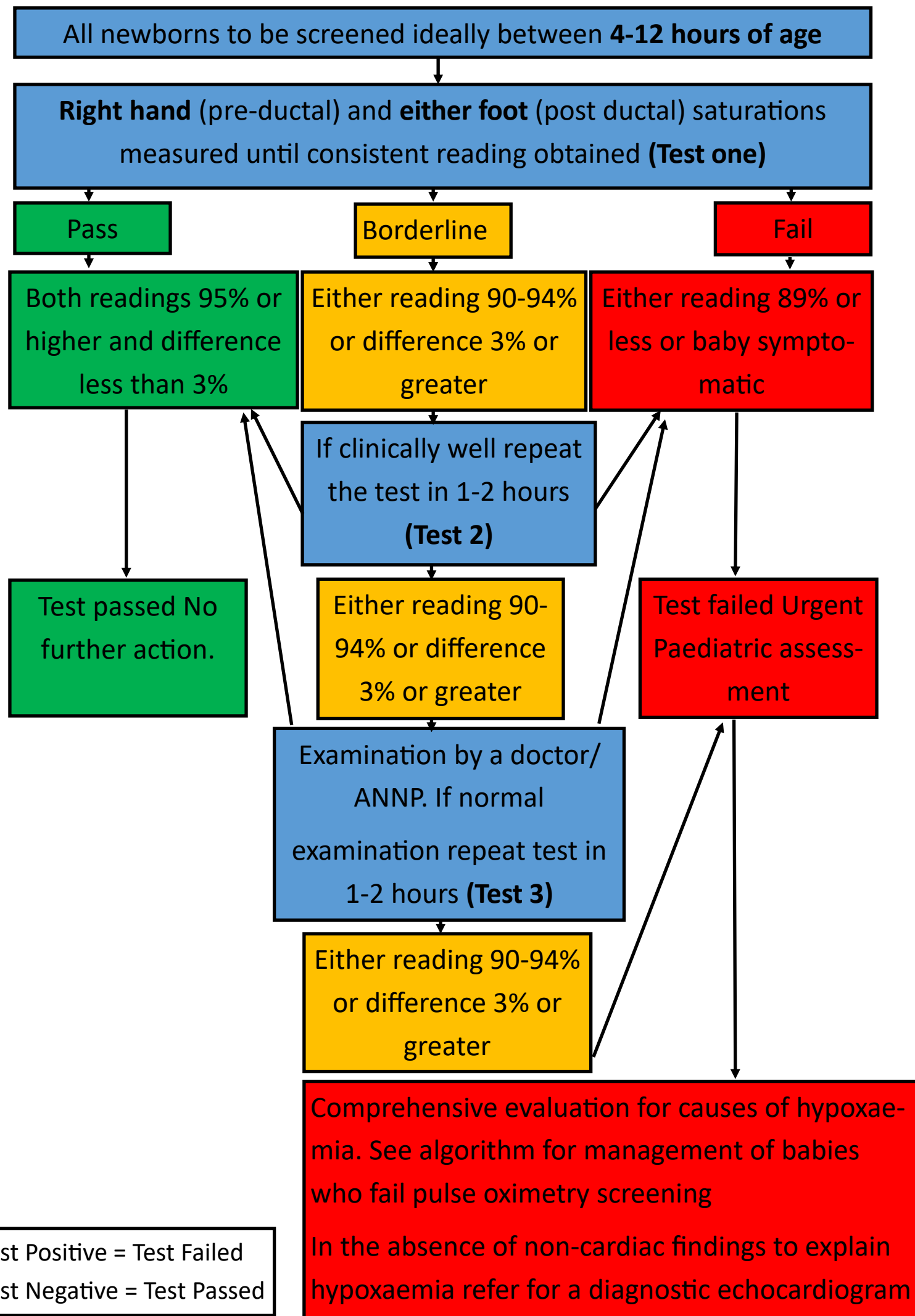


Pulse Oximetry Screening for babies born in Hospital with a NNU onsite



Pulse Oximetry Screening for babies born at Home or in a Standalone MLU

All babies **born at home** or in **Stand Alone Midwifery Led Units** should undergo pulse oximetry screening, performed by the attending midwife/maternity support worker (MSW)
Screening should ideally be performed from **2 hours after birth**, unless there is a **cause for clinical concern**

Right hand (pre-ductal) and **either foot** (post ductal) saturations measured until consistent reading obtained (**Test one**)

Pass

Borderline

Fail

Both readings 95% or higher and difference less than 3%

Either reading 90-94% or difference 3% or greater

Either reading 89% or less or baby symptomatic

Test passed No further action.

Discuss with on-call neonatal/paediatric registrar.

If both midwife/MSW and doctor have no clinical concerns, repeat the test in 1-2 hours (**Test 2**)

Refer to neonatal/local paediatric team for urgent assessment

Either reading 90-94% or difference 3% or greater

Note: Passing the screening does not rule out a congenital heart defect, and an abnormal cardiac examination should always be investigated (even if the baby has passed the screening)

Test Positive = Test Failed
Test Negative = Test Passed

Investigations for babies who fail Pulse Oximetry Screening (Test positive)

