



**NEWBORN EMERGENCY TRANSPORT SERVICE MEDICAL GUIDELINES**  
**SECTION: 11**

**INTRODUCTION**

NETSIntro  
Title of policy: Introduction  
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Neonatology Clinical Guidelines  
King Edward Memorial/Princess Margaret Hospitals  
Perth Western Australia

These guidelines outline the routine for accepting, organising and undertaking a NETS transport. It also provides information on the basic knowledge and skills necessary to recognise and manage the more common neonatal medical and surgical problems, as well as an overview of the drugs used most regularly during neonatal retrievals.

These guidelines should be read in conjunction with the more comprehensive “NETS MANSELL COT TRANSPORT SYSTEM MANUAL”.

Each year in Western Australia, approximately 800 newborn babies require transfer from their hospital of birth to either Princess Margaret Hospital for Children or King Edward Memorial Hospital for Women for specialised management. The majority of these transports are from within the metropolitan area, although a significant number (20%) require air evacuation via the Royal Flying Doctor Service (RFDS). PMH receives the majority of the babies with KEMH admitting preterm babies < 30 weeks gestation. NETS WA also performs around 450 transports of babies back to hospitals closer to home after the resolution of their illness.

Transporting a sick neonate requires the team to display a wide range of skills in unfamiliar and often stressful circumstances. One of these skills is an ability to co-operate, and effectively communicate with the many people involved in the transport.

A further aspect of transporting a sick neonate is the altered perspective in clinical management. The emphasis is on **STABILISATION**. Investigations and management procedures should be kept to the minimum necessary to ensure a safe return voyage. Paradoxically, this need for safety during transport often requires undertaking invasive procedures, eg intubation and ventilation.

Transport staff should inform parents of their baby’s condition. However, for very sick babies and those born with malformations, the initial medical discussion should be limited until a full assessment has occurred at KEMH or PMH.

All requests for advice or retrieval are documented on the Transport Call Sheets. This is a legal document and must be completed legibly and accurately. Retrieval data is collected from information recorded on the Transport Data Sheets.