**Surfactant Administration:**

- Place the infant in the supine position. The base of the warmer or incubator is to remain flat throughout. Transcutaneous monitoring (TCM’S) advisable.
- Leave flow sensor in place (should be replaced after procedure if it becomes contaminated with surfactant)
- Remove the blue connector from the endotracheal tube and attach the appropriate adaptor and Trachmac device. Reconnect endotracheal tube to ventilator.
- Draw up the prescribed volume, add 1ml of air. Ensure that the air is at the plunger end of the syringe. Attach syringe to luer lock connector.

1. **The insertion distance** for the Trachmac is determined by the length of the ETT to the cut off point plus 5 cms. (Note the colour band before the number for easier visualisation).
2. Insert the catheter & as soon as the colour appears in the “**window area**” of the Trachmac catheter - stop advancing the catheter (the tip will be at the end of the ETT to within 0.5 cm out of the end of the ETT.
3. Instill 1/2 of dose. Withdraw the trachmac catheter from the ETT and wait until vital signs are stable.
4. Instill 2nd aliquot of surfactant followed by air to clear surfactant from catheter.
5. Withdraw the trachmac catheter from the ETT as above
6. Remove syringe and replace combi stop to connector.

- Leave Trachmac device in situ for 2nd dose then discard.
- To be changed to Ballard suction device after second administration is complete.
- Following administration, position prone if stable/practical.
- Alter ventilator settings as medically ordered.
- Take a blood gas at 15 - 30 minutes after administration to detect changes in lung function.
- Subsequent gases as ordered.