

# NICU FOLLOW-UP PROGRAM FOR HIGH-RISK INFANTS

# **Entry criteria**

All infants born less than or equal to 32 GA or <1500 grams OR Any of the following documented criteria during the NICU admission:

## (1) Respiratory:

- a. Requiring oxygen > 5 days
- b. Supplemental oxygen at discharge
- c. iNO > 4 hours or received pulmonary vasodilatory medication
- d. Congenial Diaphragmatic Hernia

### (2) Cardiac:

- a. Hypotension requiring vasopressor support
- b. PDA ligation or catheterization plug
- c. Extracorporeal membrane oxygenation (ECMO)
- d. Congenital heart disease (CHD) anticipated to require surgery in the first 6 months of life
- e. Hydrops

## (3) Neurologic:

- a. History of electrographically confirmed seizures
- b. Compromise around delivery- pH ≤7.0 on cord blood sample or a blood gas obtained within one hour of life) or Apgar score of less than or equal to 3 at five minutes, or Apgar score of less than or equal to 5 at ten minutes, or receiving epinephrine or chest compressions in the DR, or any patient that received therapeutic hypothermia
- Abnormal neurologic exam around the time of discharge
- d. Evidence of intracranial pathology-intracranial hemorrhage (grade II or greater), cerebellar hemorrhage, periventricular leukomalacia, cerebral thrombosis, cerebral infarction or stroke, congenital structural central nervous system abnormality (excluding mild ventriculomegaly)
- Toxic in-utero exposures: suspected fetal alcohol effects/FAS, medical treatment of neonatal opiates withdrawal syndrome; confirmed exposure to cocaine, PCP, methamphetamines/MDMA

#### (4) Infection:

- a. Confirmed CNS infection
- b. Culture positive bacterial or fungal sepsis treated for >5 days
- c. Congenital CMV, toxoplasmosis, syphilis, rubella, zika, varicella, HSV (disseminated or meningitis)

#### (5) GI issues:

- a. Home with NG/G-tube feedings
- b. NEC Bell Stage II or greater
- c. SIP
- d. Bowel resection due to ischemic bowel

## (6) Hematology

- a. Infant requiring total or partial exchange transfusion or concerns for kernicterus
- b. Twin-Twin transfusion infants requiring intrauterine therapy (amnioreduction or laser)

#### (7) Other

- a. Prolonged hospitalization past 44 weeks PMA
- Requiring 2 or more surgeries requiring general anesthesia in the newborn period
- c. Qualifying sibling of multiples set
- d. <3rd percentile of head circumference and/or weight (Fenton/WHO)
- e. LIP request

uichildrens.org/follow-up-nicu

## Referrals to the NICU Follow-up Program:

319-353-6880

→ uichildrens.org/refer