## Wilcox Medical Center HPH Guidelines for Transfer to Kapi'olani Medical Center for Higher Level of Neonatal or Pediatric Care

Effective February 27, 2017

The following guidelines are designed to provide guidance to practicing clinicians regarding the types of conditions in neonates and pediatric patients for which transfer is typically required. These guidelines are not intended to supersede the medical judgment of the attending provider.

## **Neonatal**

- 1. Infants born < 35 weeks and < 2 kg or requiring respiratory support
- 2. All neonates < 34 weeks gestation
- 3. All neonates < 1800 grams
- 4. Neonates with prolonged feeding problems that could benefit from parenteral nutrition
- 5. Respiratory support requiring:
  - a. High flow nasal cannula 3 LPM for more than 6 hours
  - b. High flow nasal cannula 2 LPM and FiO2> 0.4 for more than 6 hours
  - c. Prolonged CPAP (up to 6 hours without improvement), or increasing need for support on CPAP
  - d. Mechanical ventilation for intubated babies
- 6. Tension pneumothorax, pneumothorax that requires needle thoracentesis or chest tube placement
- 7. Bilious emesis or abdominal distention
- 8. Congenital anomalies with feeding difficulties or if requiring respiratory support beyond the first 6 hours
- 9. Hypoglycemia requiring > D12.5W to maintain blood glucose
- 10. Inability to acquire necessary IV access
- 11. Hypotension or poor perfusion requiring inotropes
- 12. Complex or cyanotic heart disease (does not include PDA, VSD, ASD)
- 13. Complicated seizures (i.e., status epilepticus)
- 14. Potential need for total body cooling
- 15. Bilirubin approaching exchange transfusion levels despite intensive phototherapy
- 16. Need for blood product transfusion

## **Pediatric**

- 1. Respiratory support requiring:
  - a. Increasing respiratory support that may lead to need for advanced airway
- b. Mechanical ventilation for intubated children/adolescents
- 2. Children requiring urgent pediatric subspecialty care
- 3. Multiple trauma
- 4. Pediatric surgical emergency in very young children (age variable- local surgical opinion most important factor)
- 5. Complicated seizures (i.e., status epilepticus)

For questions regarding these guidelines, contact Amy Corliss, MD: (808) 346-8420; amy.corliss@wilcoxhealth.org Reviewed and approved by the HPH Medical Group Leadership Council, 2/27/2017