

NAVAJATHA SHISHU PARICHARYA

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मुखविशोधन	नालछेदन	स्नान
गर्भोदक वमन	जातकर्म	पिचु धारण
नालछेदन	स्नान	सुवर्ण प्राशन
जातकर्म		गर्भोदक वमन
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Immediate care

- तद्यथा - अश्मनोः संघट्टनं कर्णयोर्मूले , शीतोदकेनोष्णोदकेन वा मुखपरिषेकः, तथा स क्लेशविहतान् प्राणान्पुनर्लभेत । कृष्णकपालिकाशूर्पेण चैनमभिनिष्पुणीयुर्यद्यचेष्टः स्याद् यावत् प्राणानां प्रत्यागमनम् । ततः प्रत्यागतपाणं प्रकृतिभूतमभिसमीक्ष्य स्नानोदक ग्रहणाभ्यमुपपादयेत् ॥ च. शा. ८/७२
- अथास्य ताल्वोष्ठकण्ठजिह्वा प्रमार्जनमारभेताग्ङ्गुल्या सुपरिलिखितनखया सुप्रक्षालितोपधान कार्पासपिचुमत्या । प्रथमं प्रमार्जितास्यस्य चास्य शिरस्तालु कार्पासपिचुना स्नेहगर्भेण प्रतिसञ्छादयेत् । ततोऽस्यानन्तरं सैन्धवोपहितेन सर्पिषा कार्यं प्रच्छर्दनम् । च. शा. ८/४३

- Striking of stones near the baby's ears
- Sprinkling water over baby's face
- Fanning with broken earthen pot
- Proper cleaning of the oral cavity
- Oil soaked cotton pad to cover the head
- Emesis induced by madhu-saindhava

Acc to Sushrutha,

- Ulba shodhana
- Pichu dharana
- Ashwasana
- Jatakarma
- Abhyanga – Snana

Acc to Vagbhata,

- Ulba shodana
- Taila sechana
- Ashmanorvadana
- Snana
- Pichu dharana
- Prashana

For the asphyxiated baby

- Fanning with branches of specific drugs, or krishna kapalika
- Bala taila irrigation
- Chanting of hymns /striking stones near the right ear
- Alternate sprinkling of hot and cold water

नाल छेदन

- नाभिबन्धनात् प्रभृत्यष्टाङ्गुलमभिज्ञानं कृत्वा छेदनावकाशस्य द्वयोरन्तरयोः शनैर्गृह्णित्वा तीक्ष्णेन रौक्म राजतायसानां छेदनामन्यतमेनार्धधारेण छेदयेत् । तामग्रे सूत्रेणोपनिबध्य कण्ठेऽस्य शिथिलमवसृजेत् । तस्य चेन्नाभिः पच्येत, तां लोध्रमधुकप्रियङ्गु सुरदारुहरिद्राकल्कसिद्धेन तैलेनाभ्यज्यात्, एषामेव तैलौषधानां चूर्णेनावचूर्णयेत् । इति नाडीकल्पनविधिरुक्तः सम्यक् । च.शा.८/४४
- Cord cut at a distance of 8 angulas from the umbilicus
- The cut cord is tied loosely around the baby's neck
- Application of taila to the stump

General care

Snana

- Abhyanga with Bala Taila.
- Snana with ksheeri-vriksha kashaya.

Jatakarma

- Madhu ghrita prasha
- Stanapana
- Udaka kumbha sthapana

Feeding of the newborn

- स्तनमत ऊर्ध्वमेतेनैव विधिना दक्षिणं पातुं पुरस्तात् प्रयच्छेत् ।
च.शा.८/४६
- After madhu-ghrita prashana, right breast is fed.

Prashana

- हरेणुमात्रं मेधयुर्बलार्थमभिमन्त्रितम् | अ. हृ. उ. १
- Medhya drugs are given.

रक्षा कर्म

- आदानीखदिरकर्कन्धुपीलुपरुषकशाखाभिरस्या गृहं समन्ततः परिवारयेत् ।सर्वतश्च सूतिकागारस्य सर्षपातसीतण्डुलकण्कणिकाःप्रकीरेयुः ।.... .
कणककण्टकेन्धनवानग्निस्तिन्दुककोष्ठेन्धनश्चाग्निः
सूतिकागारस्याभ्यन्तरतो नित्यं स्यात्। च.शा.८/४६
- Rakshoghna drugs are placed all around the place
- Fire place is always lit inside the sootikagara.
- Fumigation is done.

Resuscitation of a Newborn

- Of the 25 million infants born every year in India, 3-5% experience asphyxia at birth. Asphyxia is characterised by progressive hypoxia, hypercapnea, hypoperfusion and acidosis. It may lead to multiorgan dysfunction including hypoxic ischemic encephalopathy (HIE) which might result in long-term neuromotor sequelae.

Being prepared

Preparation for delivery should include-

1. A radiant heat source ready for use
2. All resuscitation equipments immediately available and in working order
3. At least one person skilled in neonatal resuscitation.

Suction equipment

- Meconium aspirator
- Mechanical suction
- Suction catheters 10,12 or 14 F

Bag and Mask equipment

- Neonatal resuscitation bags (self-inflating)
- Face-masks
- Oxygen with tubing

Intubation equipment

- Laryngoscope with straight blades
- Extra bulbs and batteries
- Endo-tracheal tubes 2.5,3.0,3.5 mm ID

Medications

- Epinephrine
- NS or RL
- Sterile water

Miscellaneous

- Syringes, Stethoscope, Feeding tube
- Adhesive tape, scissors

TABC of resuscitation

T

• **Temperature**

A

• **Airway**

B

• **Breathing**

C

• **Circulation**

- Temperature - provide warmth, dry the baby
- Airway- positioning, clear airway
- Breathing- stimulate, intubation if $HR < 100$
- Circulation- if $HR < 60$, chest compressions

The 3 Vitals

1. Respiration is evaluated by observing the infant's chest movements.
2. HR can be assessed by auscultating the heart or by palpating the Umbilical cord pulsation for 6 secs.
3. Color is evaluated by looking at tongue, mucous membranes and trunk.

- Good breathing, $HR > 100$ and color- pink, the baby does not require any additional intervention.
- Good breathing, $HR > 100$ but has central cyanosis, administration of supplemental oxygen is indicated.
- Not breathing well or $HR < 100$, then positive pressure ventilation is needed.

- Supplemental oxygen, if central cyanosis is noted
- Positive pressure ventilation, if gasping or HR <100.

AMBU



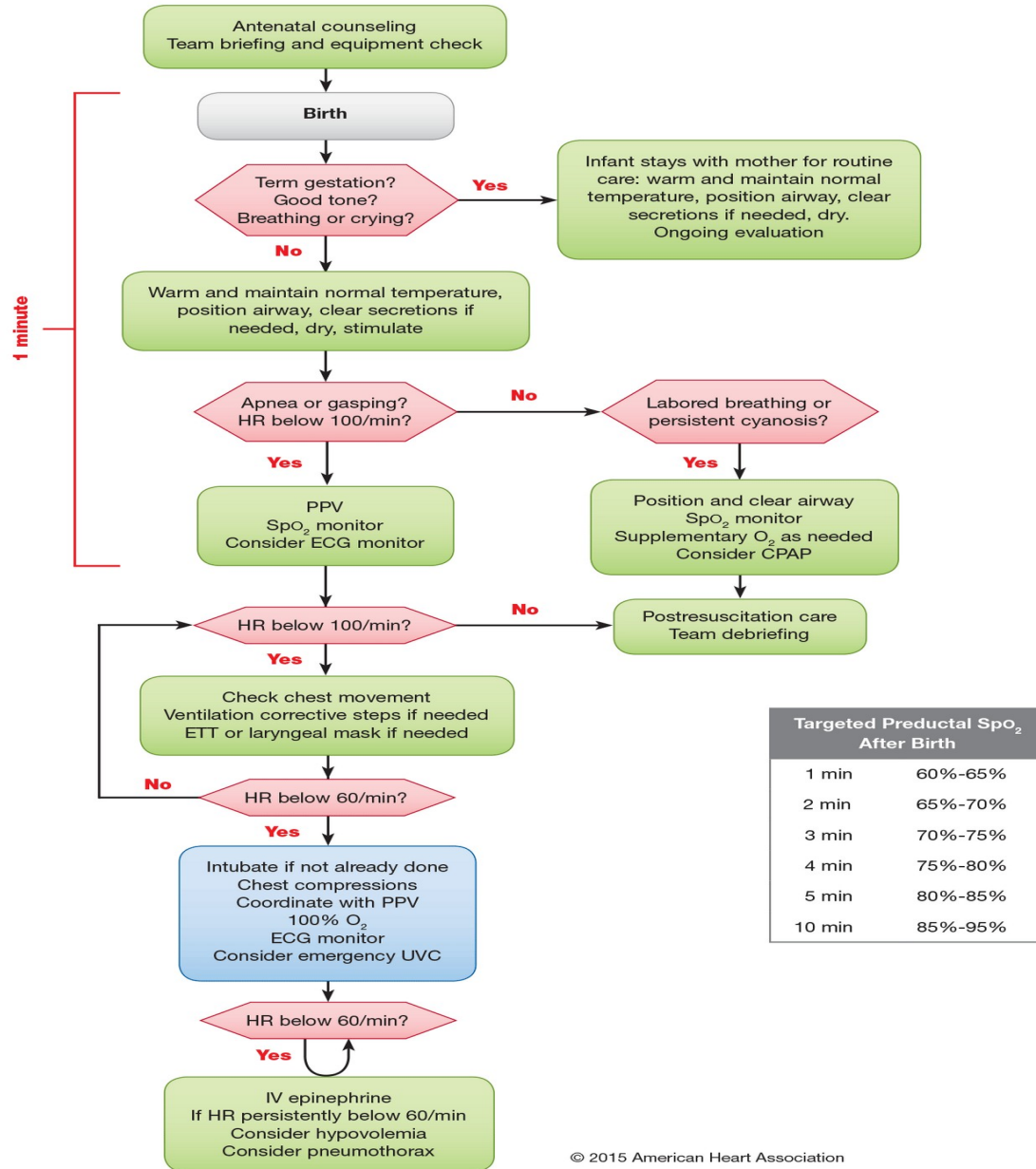
- Chest compressions along with AMBU – when HR<60 min even after ventilation for 30 secs.

Cord Care

- The umbilical cord is clamped soon after delivery.
- After stabilization and drying of the baby,
Using 2 clean ligatures and a new blade, after 2 ligatures are made, the cord is cut between the 2 ligatures.

- Check the cut end of the cord for normal anatomy i.e. 2 arteries and a vein.
- Normally with all the precautions, the cord dries and falls off in 5-10 days.

Neonatal Resuscitation Algorithm—2015 Update



APGAR SCORE

SIGN	0	1	2
Heart rate	Absent	Slow (<100/min)	Normal (>100/min)
Respirations	Absent	Weak cry	Good strong cry
Muscle tone	Flaccid	Some flexion	Active movements
Reflex irritability	No	grimace	Cough or sneeze
Color	Blue/ pale	Body pink, extremities blue	Completely pink

- Immediately after birth, the APGAR scores are assigned at 1 and 5 minutes. If the score is <7 , it is assigned every 5 minutes until 20 minutes.
- The scores may be falsely low in very pre-terms, maternal drug intake, congenital heart disease and CNS malformations.
- Hence, low APGAR should not be equated to Asphyxia.

I have come from an extremely warm, clean, quiet and comfortable abode.

Protect me at birth from microbes and cold.

I am wet and naked, dry me, cover me, place me under a heater.

I don't know how to smile, let me announce my arrival by a cry.

Don't hurt me but gently clean my windpipe to let me cry.

Don't give me injections but give me a breath to save my life.

I have been swimming all through in the womb, don't be in a hurry to bathe me in the labor room.

Thankyou