



CPS NRP 9TH EDITION CHANGES FOR BUSY CLINICIANS

UMBILICAL CORD MANAGEMENT

- Deferred cord clamping duration increased to at least **60 seconds**.
- Umbilical cord milking for non-vigorous term and late preterm newborn infants (35-42 weeks' gestation) may be a reasonable alternative to early cord clamping (less than 60 seconds).

VENTILATION

- Ventilation rate target is expanded to **30 to 60 breaths per minute**.
- **Initial peak inflation pressure (PIP) has been separated based on gestational age.**
- CPS Recommendations for initial PIP:
 - ≥32 weeks - 25 cm H₂O
 - <32 weeks - 20 cm H₂O
- Time period extended to **15 to 30 seconds** before beginning ventilation corrective steps.
- Ventilation corrective steps may be performed in the order most likely to be helpful, **CPS recommends continuing with MRSOPA.**

OXYGENATION

- Target oxygen saturation table now starts at **2 minutes** versus 1 minute.
- Initial oxygen concentration for preterm infants is further broken down to identify **levels for 32 to 34 weeks' gestation and gestational age less than 32 weeks' gestation.**

SUPRAGLOTTIC AIRWAYS

- A supraglottic airway may now be used as a primary device for ventilation **if face mask or intubation are unsuccessful/unavailable.**

ENDOTRACHEAL INTUBATION

- Endotracheal tube size table has been adjusted.
- The endotracheal tube depth is **measured to the anterior edge of the baby's upper (maxillary) gum in the midline.**
- **Video laryngoscopy** is recommended for intubation where readily available and expertise exists.

**DISCLAIMER:
NOT ALL CHANGES OR
DETAILS ARE REFLECTED HERE.
PLEASE REFER TO THE 9TH
EDITION ALGORITHM.**