California Code Of Regulations
|->
Title 22@ Social Security
|->
Division 5@ Licensing and Certification of Health Facilities, Home Health Agencies, Clinics, and Referral Agencies
|->
Chapter 1@ General Acute Care Hospitals
|->
Article 6@ Supplemental Services
|->

Section 70483@ Intensive Care Newborn Nursery Service General Requirements

70483 Intensive Care Newborn Nursery Service General Requirements

(a)

An intensive care newborn nursery service—shall provide: (1) Comprehensive care for all—life-threatening or disability-producing situations. (2) Consultation service to referring perinatal—units. (3) Infant transport services—between perinatal units and the intensive care newborn nursery. (4) A transport team consisting of at least a physician and registered nurse or respiratory care practitioner. (5) Continuing education for staff of the—intensive care newborn nursery as well as referring perinatal units. (6) Review and evaluation of service programs of—perinatal units.

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Review and evaluation of service programs of perinatal units.

(b)

There shall be written policies and procedures developed and maintained by the person responsible for the service in consultation with other appropriate health professionals and administration. Procedures shall be approved by the medical staff and administration where such is appropriate. Such policies and procedures shall include but not be limited to: (1) Relationships to other services in the hospital. (2) Admission to the intensive care newborn nursery. (3) Consultation to perinatal units. (4) Infection control and relationship to the hospital infection committee. (5) Transfer of infants to and from perinatal units. (6) Provision for family-centered infant care by parent or surrogate. (7) Prevention and treatment of neonatal hemorrhagic disease. (8) Visiting privileges. (9) Resuscitation of the newborn. (10) Administering and monitoring of oxygen and respiratory therapy. (11) Transfusion. (12) PKU screening (13) Rhesus (Rh) hemolytic disease identification, reporting and prevention. (14) Management of hyperbilirubinemia. (15) Discharge and continuity of care with referral to community supportive services. (16) Pediatric-pathologic-radiologic conferences. (17) Routine and special care of the infant. (18) Handwashing technique. (19) Individual bassinet technique. (20) Gavage feedings. (21) Intravenous therapy. (22) Formula preparation and storage. (23) Respiratory care procedures.

(1)

Relationships to other services in the hospital.

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Pediatric-pathologic-radiologic conferences.

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Handwashing technique.

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Individual bassinet technique.

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Gavage feedings.

(21)

Intravenous therapy.

(22)

Formula preparation and storage.

(23)

Respiratory care procedures.

(c)

The responsibility and the accountability of the intensive care newborn nursery service to the medical staff and administration shall be defined.

(d)

The hospital laboratory shall have the capability of performing blood gas analyses, pH and microtechniques.

(e)

Infants with diarrhea of the newborn as defined in section 2564, Title 17, California Code of Regulations, or who have draining lesions shall be isolated.

(f)

Infants suspected of having airborne infections shall be separated from other infants in the nursery.

(g)

All infections shall be reported to the hospital infection control committee promptly.

(h)

Social services shall be available.

(i)

There shall be discharge planning and provisions for follow-up care.

(j)

Oxygen shall be administered to newborn infants only on the written order of a physician. The order shall include the concentration (volume percent) or desired arterial partial pressure of oxygen and be reviewed, modified or discontinued after 24 hours.

(k)

The intensive care newborn nursery is considered an electrically sensitive area and shall meet the requirements of section 70853 of these regulations.

(I)

An air-conditioned transport vehicle shall be provided which has an intercommunication system between the driver and the transport team and radio communication between the transport team and the intensive care newborn nursery.

(m)

Periodically, an appropriate committee of the medical staff shall evaluate the services provided and make appropriate recommendations to the executive

committee of the medical staff and administration.