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## 2. SCIN-Newsletter (May 2022)

Dear colleagues,

With this 2nd issue of our monthly newsletter we would like to inform you again about the current status of our joint project "**SCIN** - Survey on Currently applied Interventions in Neonatal resuscitation" and pass on important information to you.

### **Recruitment**

Last month, 9 additional clinics in Germany and one additional clinic in Switzerland were included. Thus, **42 clinics are participating in the survey** so far.

	Deutschland	International
Teilnahme	31	11
Interesse	7	2

**However, recruitment is still ongoing!** If you have not yet confirmed your participation or can refer interested clinics in your area, please feel free to contact us at [neo-survey@ukdd.de](mailto:neo-survey@ukdd.de).

### **Survey**

In the meantime, almost all of the participating clinics have started the survey and for May, about 50% of the outstanding data sets have already been submitted. Thus, **886 newborns with interventions are currently recorded** in our database. We thank you for your commitment and look forward to the outstanding feedback for May!

### **Important Updates**

Clarification of 30-minute limit - To clarify uncertainties regarding the **30-minute limit**, we would like to point out that this limit should be understood as an **inclusion criterion only**. All children who receive more interventions than drying and stimulation before 30 minutes of life in the primary care setting will be included. However, for these children, **all interventions during neonatal resuscitation are then recorded, even if they occur after 30 minutes**.

Documentation "peripheral i.v. access" - Previously, neonates were sometimes recorded who did not receive any intervention due to good postnatal adaptation, but were provided with a peripheral i.v. access prior to transfer for further diagnostics. Because these infants did not receive interventions of neonatal resuscitation as such, we have excluded these records. In order to save you documentation work, **we ask you to document peripheral i.v. accesses** in the same way as for the "suction" item **only if other interventions have also been performed**.