

## Improve the Detection and Management of Neonatal Hypoglycaemia

**BACKGROUND:** At present babies are unnecessarily transferred to Special Care Baby Unit (SCBU) from other clinical areas within the maternity unit to have capillary blood sampling undertaken to assess for hypoglycaemia.

We have undertaken an audit of babies with risk factors for hypoglycaemia (as per NICE/local guidance). We reviewed capillary sample results obtained from the blood gas analyser that were taken between the months of January and June 2018. 135 babies were included for analysis.

56 babies were brought to SCBU from postnatal ward for capillary sampling to determine levels of hypoglycaemia and hyperbilirubinaemia; a total of 309 tests were performed. 76% of the sample were to exclude hypoglycaemia, these babies were unnecessarily separated from their mother.

**AIM:** By April 2019 we aim to reduce, by 50%, the amount of babies being born to diabetic mothers and at risk of developing hypoglycaemia, being separated unnecessarily for blood glucose monitoring.



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