**From Conception to Cradle**  
*An Obstetric and Neonatal Conference*

The Division of Women and Children’s Services at the WMC invites you to attend *From Conception to Cradle*, our third annual obstetric and neonatal nursing symposium.

The symposium will commence with Katherine Jorgensen, MSN, MBA, RN, C, HonD, a nationally recognized speaker and researcher, who will explore the impact of newborn admission activities after birth.

Legal aspects of perinatal nursing can be stressful for every nurse. A legal expert will present helpful techniques for clinical application.

Concurrent sessions will offer diverse choices appealing to the perinatal nurse. An update on respiratory care and pain management will be presented for nurses working in Neonatal Intensive and Intermediate Care Nurseries. Current concepts about preterm labor and labor support may appeal to nurses working in Labor and Delivery and Obstetric settings.

Polly Perez, BSN, RN, FACCE, will reenergize us with

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**ECMO Preparations Underway at Westchester Medical Center**

As part of the plan to develop a state of the art Extra Corporeal Membrane Oxygenation (ECMO) program at the Children’s Hospital of Westchester Medical Center, team members recently participated in an intensive training course at Johns Hopkins Medical Center in Baltimore, Maryland. The multidisciplinary group included neonatologists, pediatric intensivists, pediatric general and cardiac surgeons, NICU/PICU nurse specialists, cardiac perfusion technologists, and respiratory therapists.

The comprehensive curriculum included lectures regarding all aspects of clinical ECMO. Hands-on experience was obtained in a series of “wet labs”, and the final session involved management of ECMO in a neonatal piglet. In addition to the basic information obtained, the course demonstrated the advantages of the multi-disciplinary approach, which the WMC program will exemplify.

Team members are currently preparing ECMO training sessions for physicians, nurses, and respiratory therapists at the medical center. The program anticipates accepting patients *for ECMO by June 2001*.

Lester Permut, M.D.  
Assistant Professor of Surgery & Pediatrics NYMC - Chief, Section of Pediatric Cardiothoracic Surgery WMC
a motivational approach for empowering ourselves as caregivers. She will challenge us to look at our individual philosophy of care and ask us to analyze how we can better care for ourselves and others.

Join us as we advance our clinical practice and share a pleasant day with our colleagues.

Date - April 27, 2001

Place - Westchester Marriott Hotel - Tarrytown, NY

Time - 7:30am - 4:15pm

Cost - $150.00

For registration please call (914) 493-8892

For more information go to our web site at:

http://www.nymc.edu/dept/home/peds/neonatology/index.htm#education

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March of Dimes
“Walk America 2001”

Date: Sunday April 29, 2001

Time: 8am check-in

9am start

Place: Saxon Woods Pool

White Plains, NY

Distance: 8 miles

Contact: Eileen Margenat, CNS

Women’s Health (914) 493 – 8498

Or (914) 949 - 7166

1. Pick up a sponsor card from Eileen and begin asking your friends and family to help support you in this important fund-raiser.

2. Please make a donation if you’re unable to walk. Prizes will be awarded to individuals raising over $150.00!

Lunch will be provided by “The Outback”!

Support the March of Dimes in this fund raising effort to decrease infant morbidity & mortality!

NEWSFLASH: Kangaroo missing on “Survivor, the Australian Outback.” If you know of mothers and fathers, who would like to kangaroo their babies, a new, comfortable recliner is available in the Unit. Manufactured in France by LaFuma, and recommended by kangarooing specialists, this light but durable chair will optimize the experience for parents. If you would like further information please contact any DOH Team member.

ENJOY!

Welcome!

A warm welcome is extended to our newest faculty member,

Gad Alpan, M.D.

Associate Professor of Pediatrics

Dr. Alpan is a full-time board certified neonatologist here at The Children’s Hospital and comes to us from Johns Hopkins Medical Center, Baltimore Maryland.

Dr. Alpan was born in Israel. He has previously held positions, at Hadassah University Hospital, Georgetown University Hospital, UCLA Medical Center, and The Cardiovascular Research Institute, UCSF.

Most recently, Dr. Alpan was Associate Professor of Pediatrics at Johns Hopkins School of Medicine and Chairman, Department of Neonatology at Johns Hopkins Bayview Medical Center in Baltimore, Maryland.

Dr. Alpan has an established record of research experience, including recent studies involving use of Nitric Oxide in the Neonatal ICU setting.
First Breaths: ECMO to arrive shortly:

By now, there is a buzz throughout the Unit about the arrival of Extracorporeal membrane oxygenation (ECMO). This procedure will help the sickest of infants and children, both in the NICU and in the PICU. It will be particularly suited for term infants who have pulmonary hypertension (PPHN), either from Meconium Aspiration Syndrome, Pneumonia, Respiratory Distress Syndrome, or for unknown reasons (Idiopathic). It may also benefit infants born with Congenital Diaphragmatic Hernia.

Babies will be eligible if they have reversible cardiopulmonary failure, but will not be eligible if they have multiple congenital anomalies or a major chromosomal abnormality incompatible with life (e.g., Trisomy 13, 18). Additional disqualifiers include infants who have suffered neurologic damage (e.g., severe asphyxia or IVH), or who are too immature (e.g., infants should be >2kg, and >34 weeks gestation). Infants from the NICU will be eligible if they have been on the ventilator for less than 7-10 days, since this treatment is restricted to reversible conditions.

Additional qualifications will be an elevated Oxygenation Index \[O.I. = \frac{\text{(Mean Airway Pressure})(\text{FiO}^2)(100)}{\text{(PaO}_2)^2}\]. I think the staff is now used to calculating this value on the sickest infants who often require high frequency ventilation (HFV) and/or inhaled Nitric Oxide (iNO). Previously, O.I. values greater than 40 had been thought to confer a greater than 80% mortality risk. With the implementation of these “newer” modalities of treatment (HFV, iNO), the threshold for placement on ECMO may have risen. Another measurement of ineffective oxygenation is the Alveolar-arterial oxygendifference \[AaDO^2 = (760-47) - \text{PCO}_2 - \text{PO}_2\]. \[AaDO^2 > 610\] reveals a dramatic oxygenation abnormality.

Placement on ECMO requires cannulation with catheters that will allow either veno-venous (VV) or veno-arterial (VA) access. Infants with intact myocardial function may require only VV ECMO, while those who have compromised cardiac function may benefit from VA ECMO. There are advantages and disadvantages to either system.

Continue next column

The RNICU at Westchester Medical Center treats the largest number of newborns weighing less than 1000 grams in the state of New York. We also see a large number of term or near-term infants who have respiratory failure and are critically ill. The implementation of ECMO will allow us to offer treatment to babies at this other end of the spectrum. Look for upcoming orientations about Neonatal ECMO. Please feel free to contact Dr. Parton or Kathy Rogan, MS, RN, C, Neonatal Outreach Coordinator (914-493-7362), if you have specific questions.

Lance Parton, M.D., Neonatologist
Associate Professor of Pediatrics
Email Lparton@go.com or phone (914)-493-8859

On February 27th, a letter outlining the technical infrastructure requirements for the State Perinatal Database System implementation was sent to Health Information Management personnel. If you did not receive this letter please notify the DOH team at the Regional Perinatal Center at Westchester Medical Center.

Team listed below.

State Perinatal Database Team
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We are interested in providing you with a newsletter that is relevant and of interest to you. Please contact us with perinatal topics you would like to see addressed.

For a copy of our newsletter or to be placed on our mailing list contact us by phone or e-mail.
(See above)
Bedside Balloon Septostomy

Figure Legend: Dr. Paul Woolf performs bedside balloon septostomy in the NICU in a critically ill neonate with Transposition of the Great Arteries and Congenital Diaphragmatic Hernia utilizing echocardiographic guidance. Pictured are Dr. Paul Woolf (center), Dr. Marcus Erb (at Echocardiogram monitor), Dr. Pradeep Mally (left), Dr. Claire Waite (inflating the balloon) and Muel Edwigards (positioning the Echocardiogram probe). The patient tolerated the procedure without incident. Kudos to Dr. Woolf and the team!