ROCHESTER, Minn. — Approximately 10 percent of newborns require help breathing after birth, and 1 in 1,000 newborns require more intensive resuscitation measures. These infrequent, high-risk deliveries may present challenges to community hospitals less familiar with advanced newborn resuscitation interventions. Telemedicine consultations are a good option to help meet these challenges and positively impact patient care, according to a study published in Mayo Clinic Proceedings.

“Following a complicated delivery, a newborn’s outcome is associated with the quality of care provided during the first minutes of life," says Jennifer Fang, M.D., a Mayo Clinic fellow in Neonatal-Perinatal Medicine and one of the study’s authors. "Because of this reason, it is critical to understand how telemedicine can be used to positively impact those outcomes."
During a 20-month study, Mayo Clinic’s Division of Neonatal Medicine worked with six health system sites to provide newborn telemedicine consultations. During the study, 84 telemedicine consultations were conducted.

“The enhanced access to neonatologists, who could remotely assess the newborn and guide the local care team through the resuscitation, allowed one-third of the babies to stay with their families in the local hospital,” says Dr. Fang. “This allowed the patients to receive the correct level of care in the right location — increasing the value of care. Also, the potential cost savings can be substantial.”

This study also looked at how the local care team and neonatologist collaborated. “Other research has shown that teamwork and communication are critical during neonatal emergencies. We wanted to assess how telemedicine affected teamwork and communication,” according to Dr. Fang.

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Providers responded positively to surveys that assessed teamwork and the impact of the telemedicine consult on patient safety and quality of care. “These results speak to the acceptability and clinical impact of this type of telemedicine project in community hospitals,” says Dr. Fang.

In addition to Dr. Fang, the paper’s co-authors are:

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