



Public Policy Position on Neonatal Levels of Care

November 13, 2014

WHEREAS, since the mid-1970s, in a national effort to address infant mortality, key national organizations such as the American Academy of Pediatrics (AAP) and the American College of Obstetrics and Gynecology (ACOG) have supported the regionalization of risk-appropriate care for newborn infants and mothers and issued guidelines for this purpose.

WHEREAS, AAP and ACOG produced joint perinatal care guidelines that describe the type for care required for infants and mothers at risk for mortality. These guidelines support the United States Healthy People 2020 goal that 90% of very low birth weight infants (< 1500 grams) should be born at hospitals with Level III Neonatal Intensive Care Units (NICUs).

WHEREAS, in 2012 the AAP issued revised perinatal guidelines that would revitalize regionalization of neonatal services in order to assure continued reduction in neonatal mortality. The 2012 guidelines recommend the establishment of Level IV Regional NICUs that would draw subsets of patients from the low volume Level III NICUs to assure that very high risk infants receive optimal care.

WHEREAS, in 2014, the American College of Surgeons (ACS) published standards of surgical care that support and add clarity to the AAP's revised perinatal guidelines.

WHEREAS, the Illinois Perinatal Advisory Committee (PAC), is currently evaluating whether there is Illinois data to support changes in standards of perinatal care to the Illinois Department of Public Health.

RESOLVED: that Ann & Robert H. Lurie Children's Hospital of Chicago supports data driven policy and program initiatives that support the establishment of Level IV Regional NICUs within the Illinois Perinatal Network in accordance with the standards of the American Academy of Pediatrics and the American College of Surgeons.