

Pulse Oximetry Screening Pathway for babies born in Midwifery Led Units (MLUs) and at Home

- All babies born at home or in Midwifery Led Units should undergo pulse oximetry screening, performed by the attending midwife/maternity support worker (MSW)
- Screening should ideally be performed from **2 hours after birth**, unless there is a **cause for clinical concern**

Right hand (pre-ductal) and either foot (post-ductal) saturations measured until consistent reading obtained (Test One)

Pass

Both readings 95% or higher and difference of less than 3%

No further action required
Document saturations in the notes

Borderline

Either reading 90-94% or difference of 3% or greater

Discuss with on-call neonatal/paediatric registrar.
If both midwife/MSW and doctor have no clinical concerns, repeat the test in 1-2 hours (**Test 2**)

Either reading 90-94% or difference of more than 3%

Fail

Either reading 89% or less, or baby symptomatic

Refer to neonatal/local paediatric team for urgent assessment

Test Positive = Test Failed
Test Negative = Test Passed

Note:

Passing the screening does not rule out a congenital heart defect, and an abnormal cardiac examination should always be investigated (even if the baby has passed the screening)