KIDS Clinical Guideline:

Metabolic emergencies presenting in the Neonatal Period and Early Infancy

**Checklist:**
- Use this checklist to assist in ensuring adequate therapy and monitoring are in place prior to and during transfer.

**Identify and Consult:**
- **Identify possible inherited metabolic disease** (e.g., antenatal diagnosis; family history; consanguinity; baby in first few days/weeks of life, poor feeding/sleepy, hypoglycaemic, high lactate, metabolic acidosis, abnormal liver function)
- Conference call with KIDS and Birmingham Children's Hospital Metabolic Consultant (0300 200 1100)
- **Identify Time Critical Nature** – prepare for possible local team transfer (in discussion with KIDS and Metabolic Consultant)

**Airway and Breathing:**
- Support airway/administer O₂ as required
- Monitor respiratory rate and SpO₂
- Intubate and ventilate as required (i.e., GCS < 8)

**Circulation:**
- Obtain 2 points of venous access
- Use 0.9% saline boluses to support circulation
- Consider vasoactive agents after 40-60 ml/kg
- Monitor heart rate, blood pressure, perfusion, pulses, urine output

**Other Management:**
- Stop feeds and administer dextrose as per BIMDG guideline – in discussion with KIDS/BCH Metabolic Consultant
- Monitor serum glucose and blood gases frequently including lactate
- Measure serum ammonia - send urgently
- Measure LFTs, U&Es, coagulation screen
- Start emergency drugs as per BIMDG guideline - in discussion with KIDS/BCH Metabolic Consultant

**Further actions:**
- Take sample for x-match (may require haemofiltration)
- Administer emergency drugs as per BIMDG guideline - discuss with KIDS/BCH Metabolic Consultant
- Do not wait for specialist drugs or lab results to be available if this will delay patient transfer – discuss with KIDS/BCH Metabolic Consultant

**To access the specialist drugs required for treatment of hyperammonaemia:** Call your local hospital on call pharmacist, who should call Birmingham Children’s Hospital Pharmacy for assistance on 0121 333 9999 (bleep via switchboard)

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**Treat as time critical – do not delay transfer whilst instituting other measures other than those which are immediately life saving!**