Our project’s aim was to improve the use of nasal CPAP trial before endotracheal intubation from 57% to 75% in very low birth weight infant (VLBW) infants (<1500 grams) within one year.

National benchmark rates published by Vermont Oxford Network (VON) are 65.5%.

When looking at our data, it appears that we showed no improvement in improving rates of NCPAP prior to intubation.

This data point is collected by VON and compared against other like institutions.

The more clinically important and useful question is how many VLBW infants left the delivery without requiring intubation?

This data would more accurately reflect overall delivery room management as well as have more important implications for decreasing BPD.

Evaluate the percentage of these babies leaving the delivery room without getting intubated.

Continue to work on a respiratory bundle to decrease the rates of BPD.

Evaluate percentage of VLBW infants who never required intubation during their NICU stay.

Increased frequency of pneumothorax
Inappropriate use of CPAP before intubation when not indicated (not anticipated).