

Survey on the 'Diagnosis and Treatment Standard for Neonatal Hypoglycaemia ($\geq 35+0$ weeks of gestation)' - Midwives/Nurses

Dear midwives and nurses of the Department for Obstetrics and Gynaecology and the Department of General Paediatrics, Neonatology and Paediatric Cardiology of the University Hospital Düsseldorf,

Thank you for taking the time to complete this questionnaire regarding the new diagnosis and treatment standard for neonatal hypoglycaemia. The survey is anonymous, so it is not possible to identify you. Please answer the questions truthfully. This is the only way we can adequately evaluate the standard and subsequently optimise it.

Personal information: I have ____ years of work experience

I work as a: midwife nurse
 Department of Obstetrics and Gynaecology Department of Paediatrics

Please indicate to what extent the statements apply to you.

Example:

Statement	strongly disagree	disagree	slightly disagree	slightly agree	agree	strongly agree
	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

1. I use the standard in every baby with neonatal hypoglycaemia.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
2. The diagnosis and treatment standard is clearly and logically structured.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
3. The diagnosis and treatment standard is complete.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
4. The standard gives me confidence in the management and treatment of at-risk neonates and neonates with hypoglycaemia.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
5. I am following the diagnosis and treatment measures of the step-by-step flowchart of the standard.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
6. The diagnosis and treatment standard better monitors at-risk neonates.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
7. I follow the measures for prevention of hypoglycaemia stated in the standard.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
8. The measures for prevention of hypoglycaemia mentioned in the standard are followed by my colleagues.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
9. The measures for prevention of hypoglycaemia are reasonable.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
10. I make sure to check after birth/admission if the neonate has a risk factor for hypoglycaemia and therefore an indication for blood glucose screening and preventive measures.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
11. I regularly use the SGA/LGA weight chart in the standard to determine if the baby has a risk factor for neonatal hypoglycaemia.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
12. For neonates who have been seen/examined by a paediatrician after birth but stay in the obstetrics wards, I independently re-evaluate whether there is a risk factor for hypoglycaemia and a blood glucose screening should be performed.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
13. Since the implementation of the treatment standard, I have been paying more attention to clinical signs consistent with hypoglycaemia in the neonates.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

14. When I notice clinical signs consistent with hypoglycaemia in a neonate, I perform a blood glucose measurement.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
15. Since the implementation of the standard, I have taken more measures to prevent hypothermia in the neonate.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
16. Neonatal hypoglycaemia is a physiological phenomenon and should be tolerated without prevention and treatment.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
17. Supplemental feeding is useful to prevent hypoglycaemia.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
18. The volumes of formula that are fed supplementary are too high.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
19. Supplemental feeding often leads to breastfeeding problems.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
20. I have enough time to make the supplementary feeding 'breastfeeding friendly (cup, spoon)' and to avoid bottle feeding.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
21. I think 'breastfeeding-friendly' supplemental feeding (cup, spoon) is important.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
22. Collecting colostrum even before admission for delivery would be a useful addition.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
23. I regularly give dextrose gel to prevent hypoglycaemia.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
24. The application of dextrose gel is simple and safe.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
25. I regularly give dextrose gel for hypoglycaemia \leq 45 mg/dl.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
26. For hypoglycaemia in the 46-54 mg/dl range, I regularly give dextrose gel after feeding if the child has not drunk enough.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
27. For the administration of dextrose gel, I use the dosing table of the standard.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

If 0-2: How do you dose the dextrose gel?

28. The regular blood glucose measurements are a burden on my daily work.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
29. Due to the regular blood glucose measurements, I neglect other tasks.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
30. Timing of blood glucose measurements depending on blood glucose results is reasonable.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
31. The time requirement of 12 hours for the duration of blood glucose screening in babies of diabetic mothers and LGA is justified.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
32. The time requirement of 36 hours for the duration of blood glucose screening in SGA and preterm infants is justified.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
33. Too many blood glucose measurements are performed.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
34. The many blood glucose measurements that the standard demands are more likely to harm the neonate than to protect it.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
35. Parents understand that preventive measures and blood glucose measurements are performed on at-risk neonates.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

36. The blood glucose measurements cause worries in parents.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
37. I have enough knowledge about neonatal hypoglycaemia to educate and advice parents.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
38. In case of hypoglycaemia < 30 mg/dl or $3x \leq 45\text{mg/dl}$, I immediately inform a paediatrician.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
39. There is often a time delay between a blood glucose measurement and the following intervention.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
40. Since the implementation of the standard, more neonates are being transferred to the neonatal unit due to hypoglycaemia.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
41. Since the implementation of the standard, overtreatment of neonates with hypoglycaemia has occurred.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
42. I believe that the standard is sufficient to protect neonates from even mild hypoglycaemic brain damage.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
43. I am glad that the standard was introduced.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
44. There was enough opportunity to participate in the development of the standard.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5
45. I had the opportunity to attend training sessions for the new standard.	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5

I have the following important modification requests:

Do you have any other remarks/comments on the 'Diagnosis and Treatment Standard for Neonatal Hypoglycaemia ($\geq 35+0$ weeks of gestation)?

Thank you for your participation!