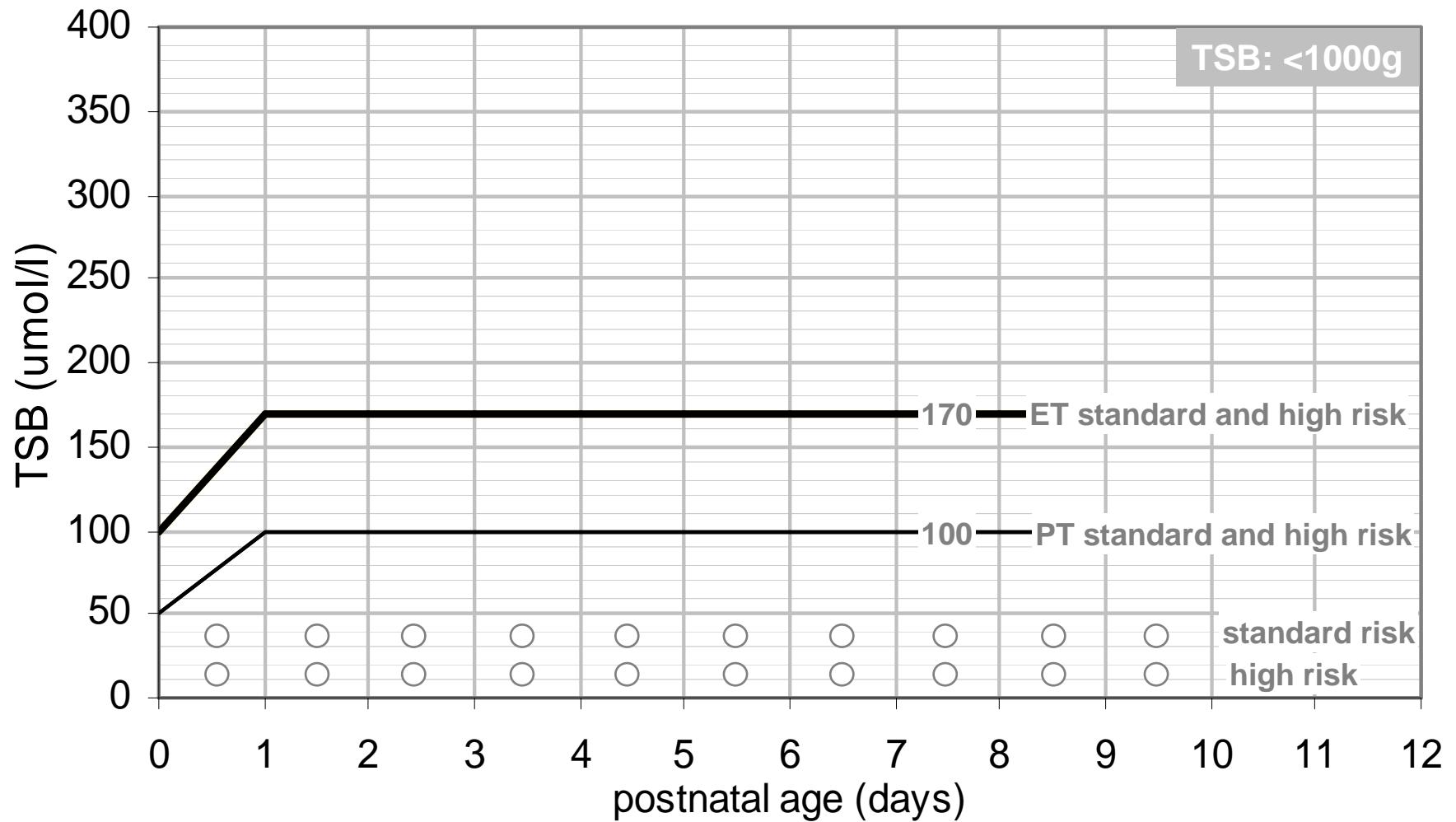


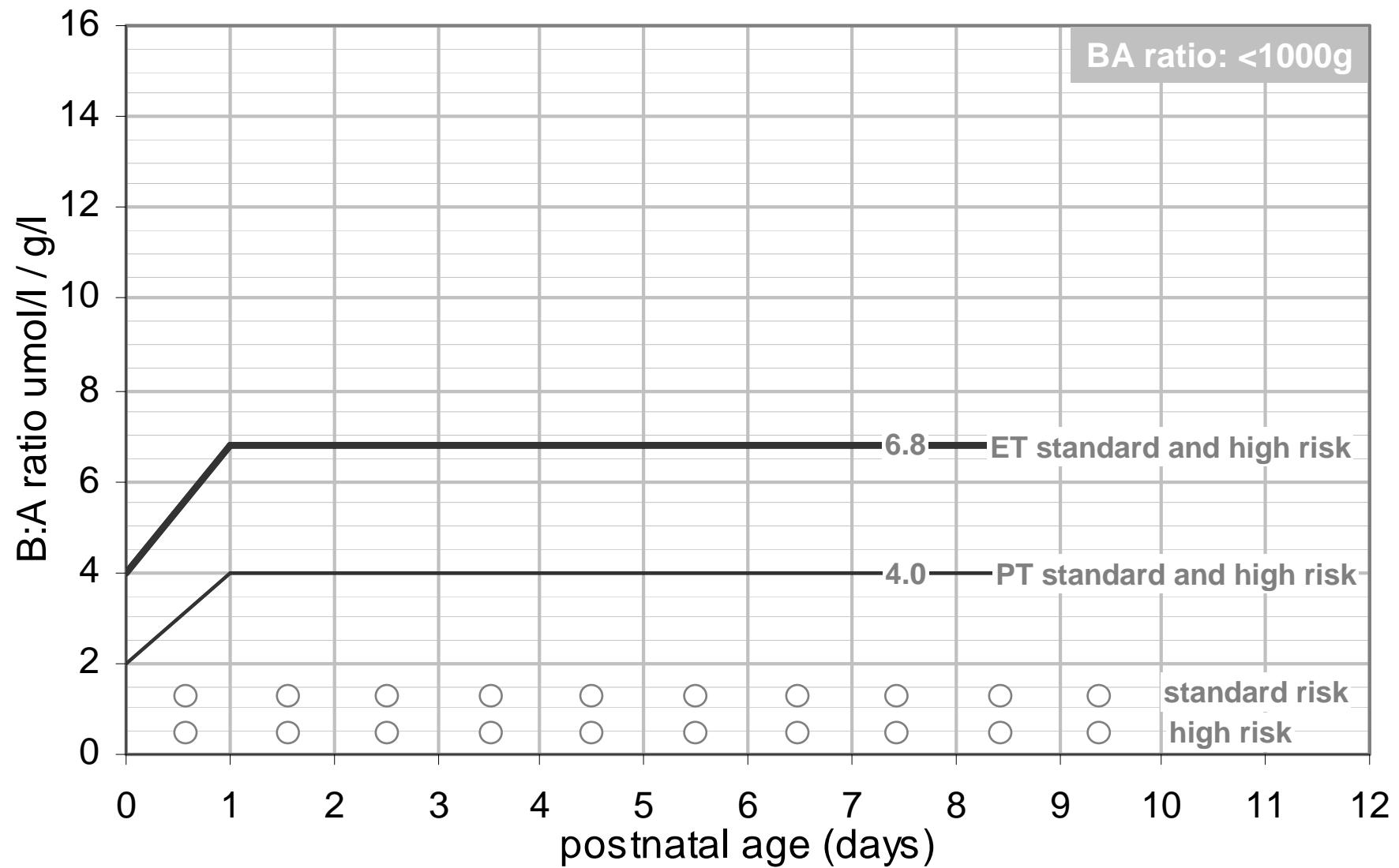
BARTrial bilirubin normograms for phototherapy and exchange transfusion

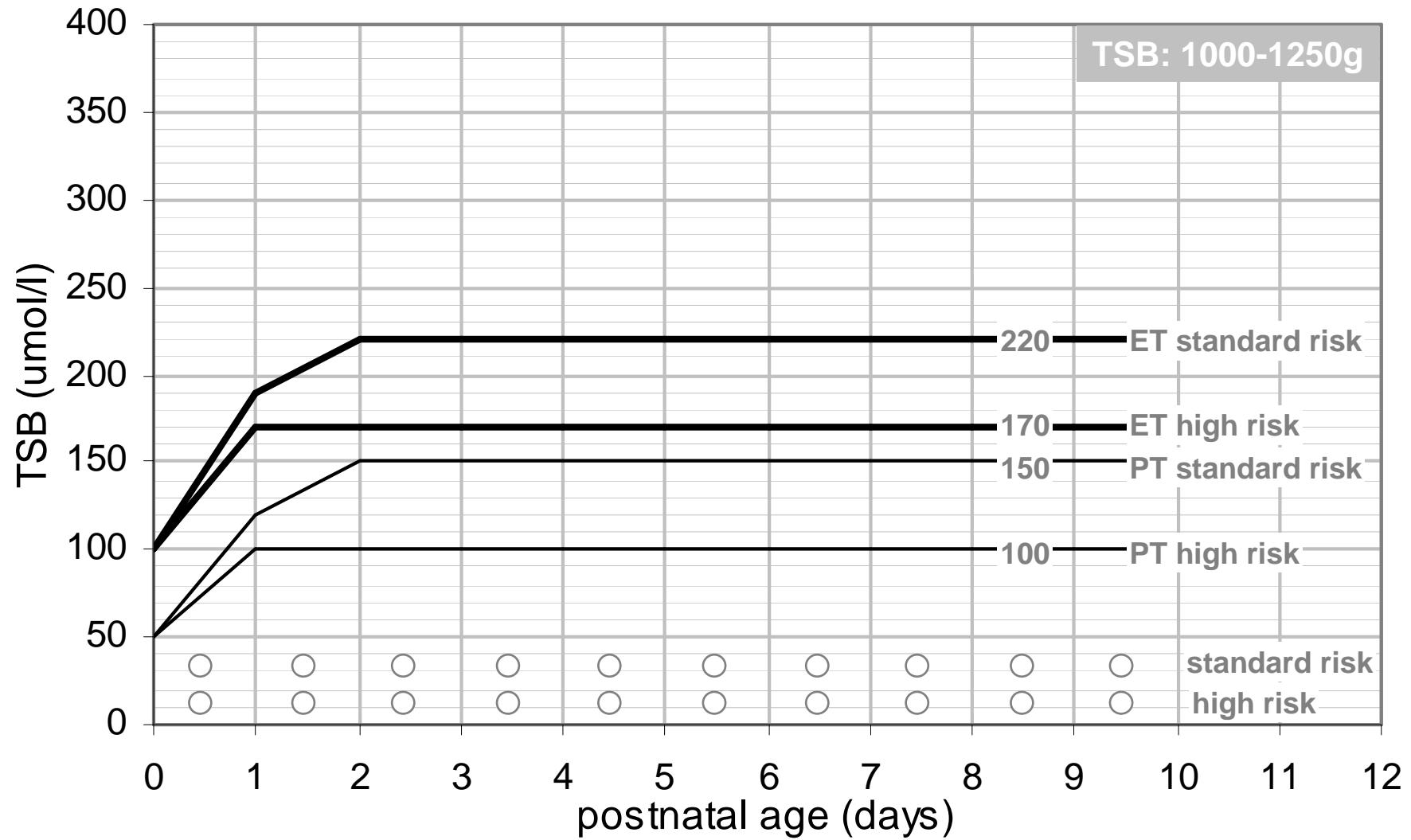
Total Serum Bilirubin (TSB) and for Bilirubin:Albumin ratio (BA)

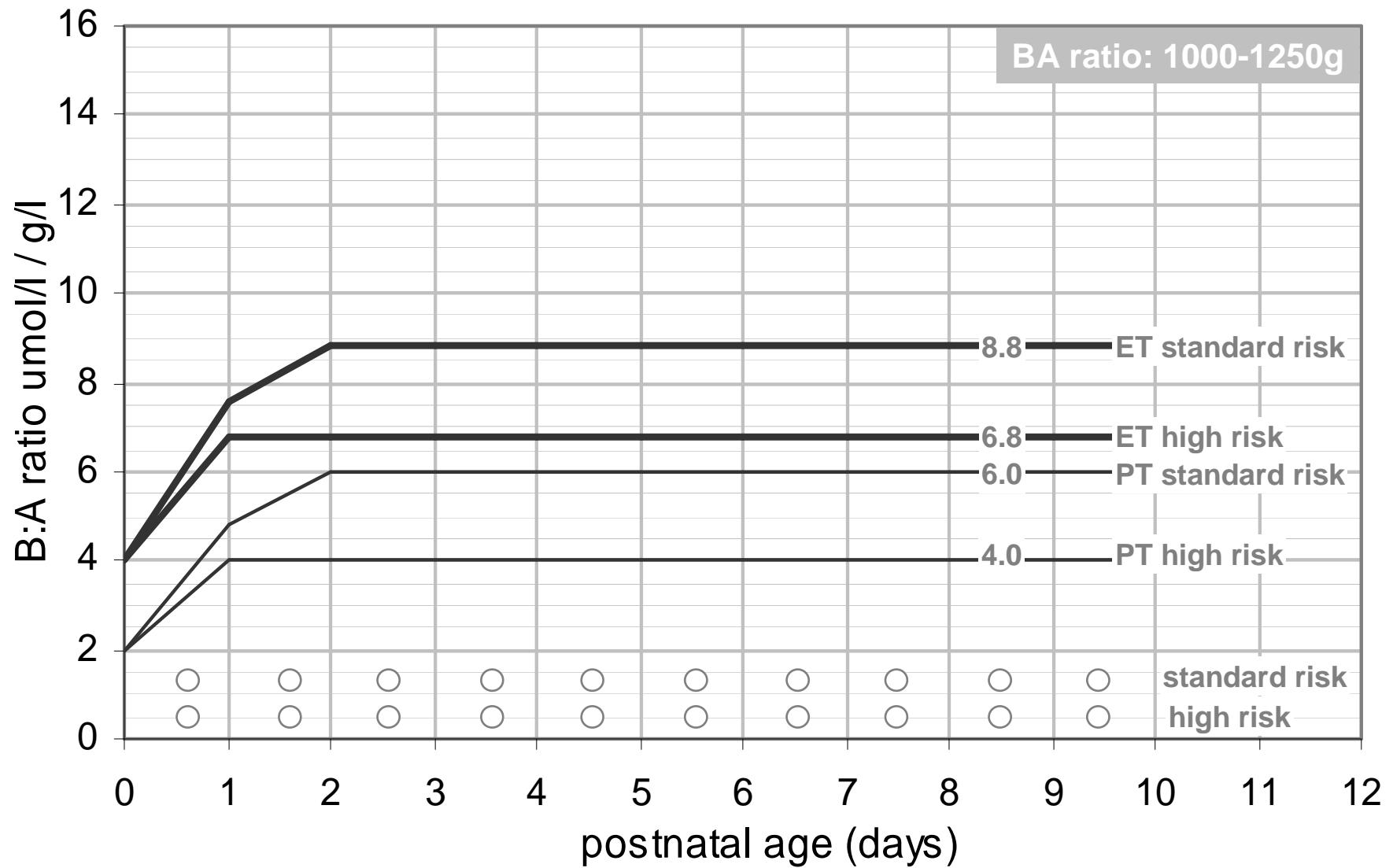
Birthweight categories

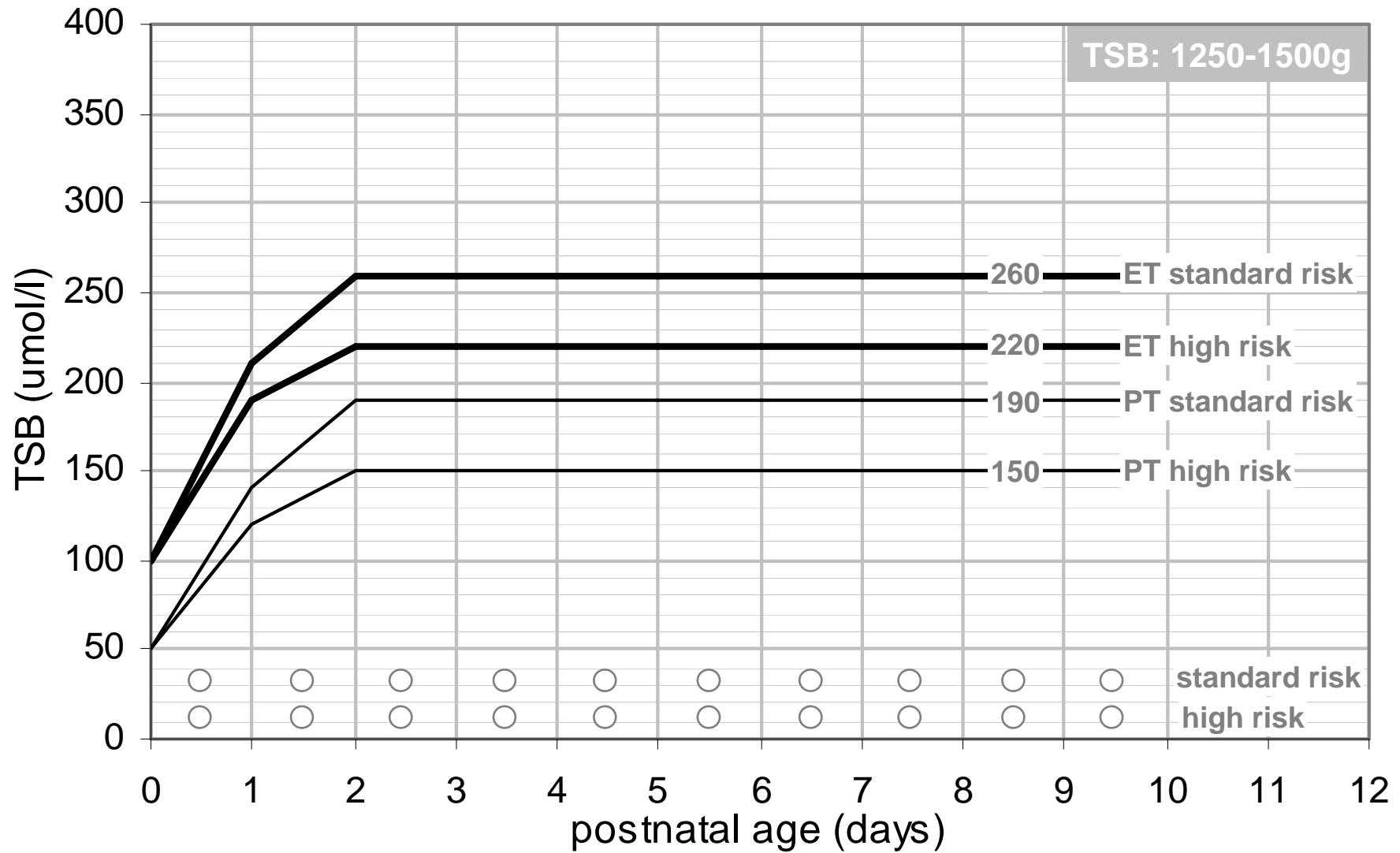
<1000 g	BA ratio group	TSB and BA normograms
<1000 g	TSB group	TSB normogram
1000-1250 g	BA ratio group	TSB and BA normograms
1000-1250 g	TSB group	TSB normogram
1250-1500 g	BA ratio group	TSB and BA normograms
1250-1500 g	TSB group	TSB normogram
1500-2000 g	BA ratio group	TSB and BA normograms
1500-2000 g	TSB group	TSB normogram
>2000 g	BA ratio group	TSB and BA normograms
>2000 g	TSB group	TSB normogram

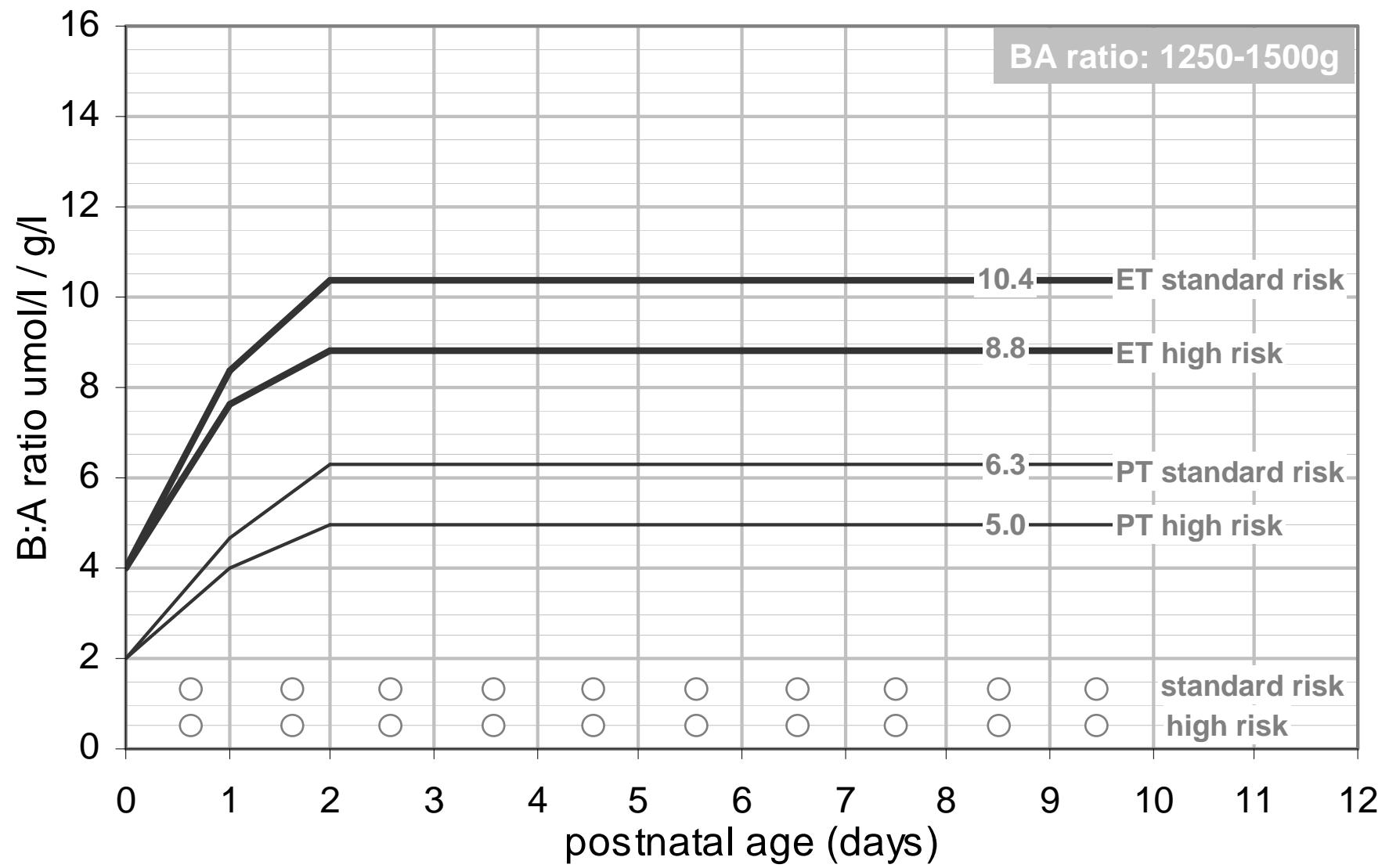


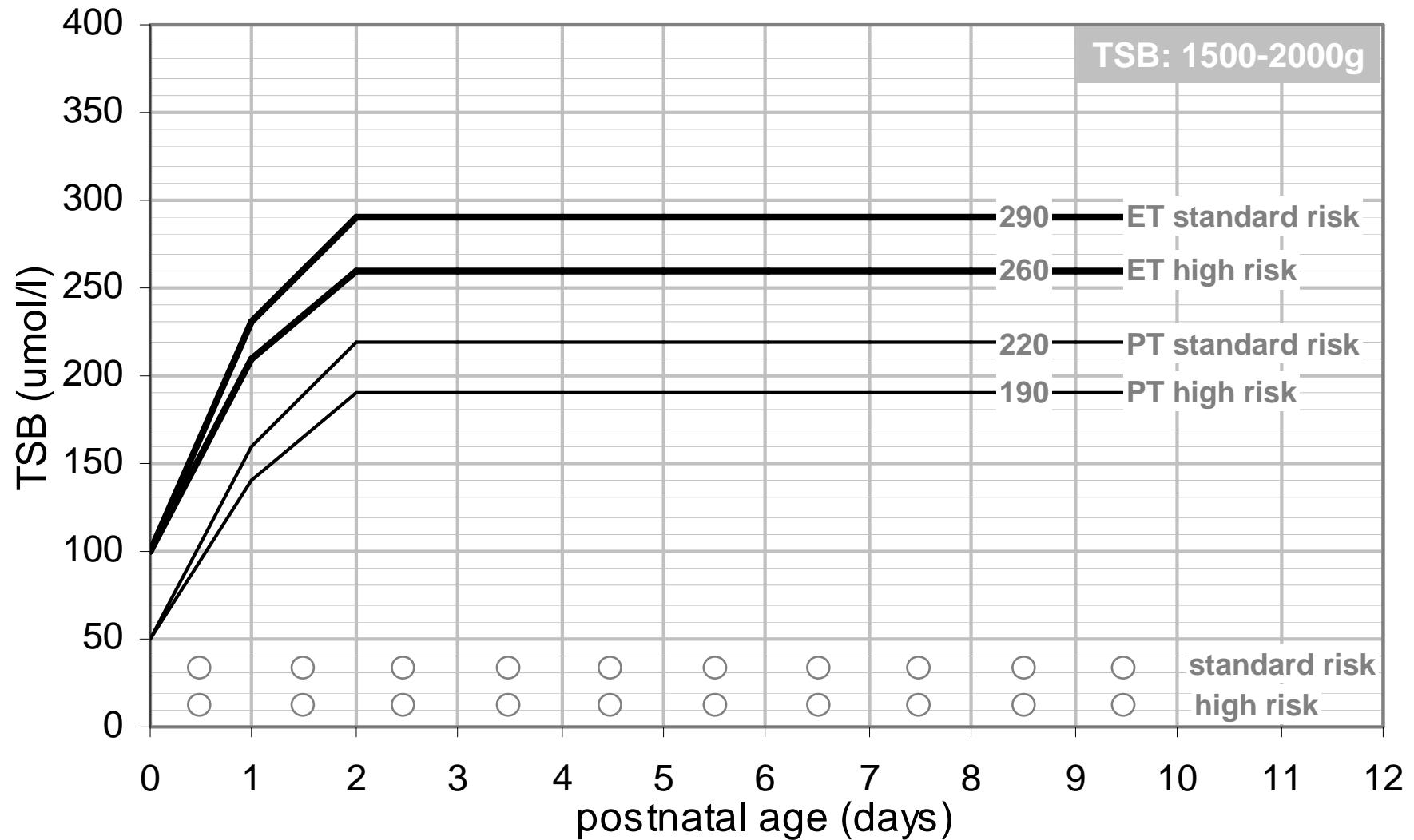


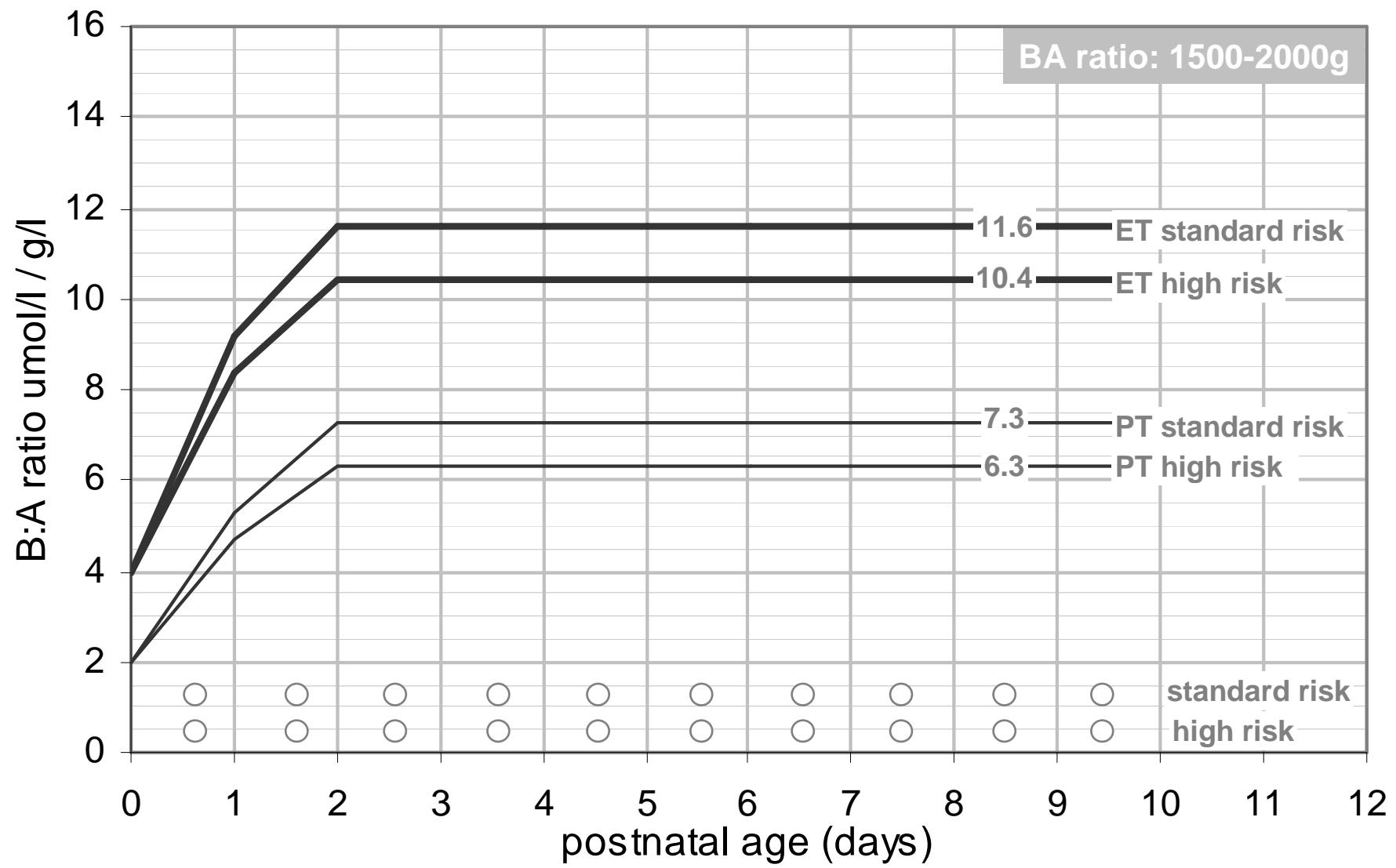


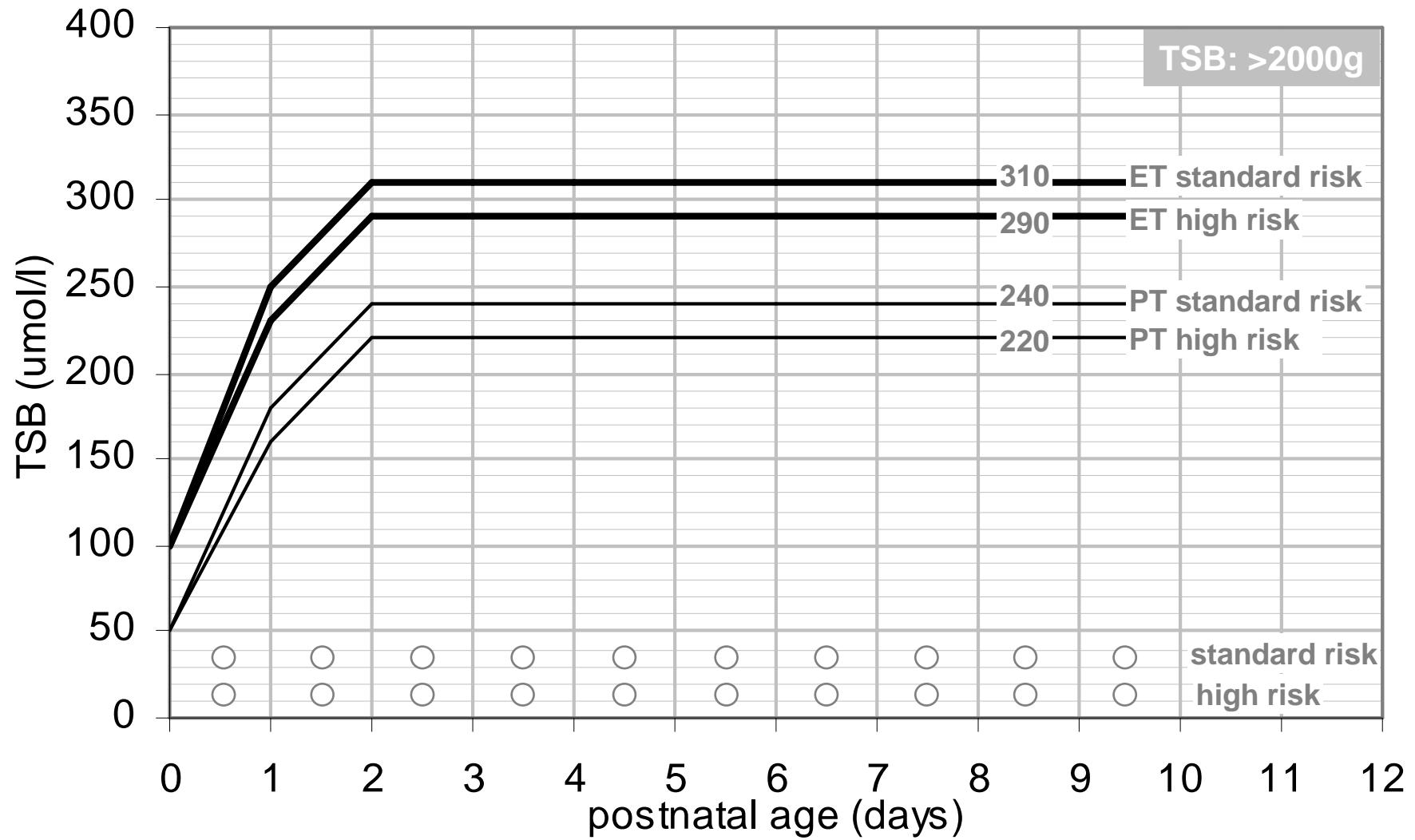


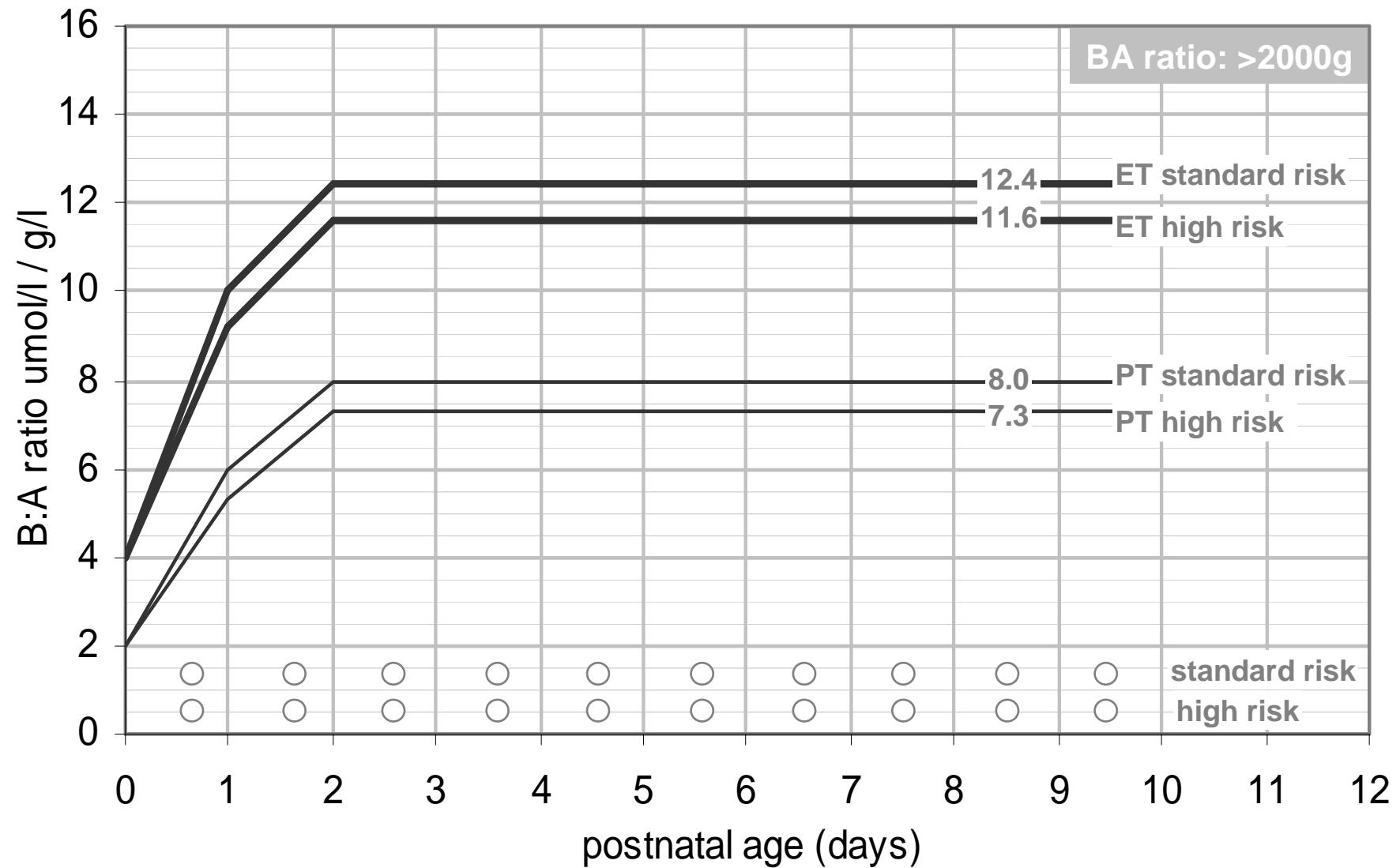












Guideline for the use of TSB and BA ratio normograms for phototherapy (PT) and exchange transfusion (ET). TSB in $\mu\text{mol/L}$, BA-ratio in $\mu\text{mol/L} / \text{g/L} = \mu\text{mol/g}$. TSB 17.1 $\mu\text{mol/L} = 1 \text{ mg/L}$

1. Select appropriate normograms based on birthweight
2. Mark risk status (standard risk or high risk)
3. Mark TSB and BA ratio in normograms
4. Start phototherapy if TSB or BA is > PT-threshold
Stop phototherapy if TSB and BA < PT-threshold
5. Consider exchange transfusion if TSB or BA reaches ET threshold despite intensive PT

High Risk (check daily)

- asphyxia: Apgar score < 3 at 5 min
- hypoxemia: $\text{PaO}_2 < 40 \text{ mmHg} (< 5.3 \text{ kPa}) > 2 \text{ hrs}$
(recent 24 hrs)
- acidosis: $\text{pH} < 7.15 > 1 \text{ hr}$ (recent 24 hrs)
- hemolysis with positive Coombs
- clinical of neurological deterioration (sepsis with use of vasopressors, meningitis, intracranial hemorrhage > gr 2)

based on guidelines published by Ahlfors 1994 and Maisels 2003

Guideline for the use of TSB nomogram for phototherapy (PT) and exchange transfusion (ET).

TSB in $\mu\text{mol/L}$. $17.1 \mu\text{mol/L} = 1 \text{ mg/L}$

1. Select appropriate normogram based on birthweight
2. Mark risk status (standard risk or high risk)
3. Mark TSB in normogram
4. Start phototherapy if TSB > PT-threshold
Stop phototherapy if TSB < PT-threshold
5. Consider exchange transfusion if ET-threshold is reached despite intensive PT

High Risk (check daily)

- asphyxia: Apgar score < 3 at 5 min
- hypoxemia: $\text{PaO}_2 < 40 \text{ mmHg} (< 5.3 \text{ kPa})$ > 2 hrs (recent 24 hrs)
- acidosis: $\text{pH} < 7.15$ > 1 hr (recent 24 hrs)
- hemolysis with positive Coombs
- clinical of neurological deterioration (sepsis with use of vasopressors, meningitis, intracranial hemorrhage > gr 2)

based on guidelines published by Ahlfors 1994 and Maisels 2003

BA ratio GROUP birthweigthgroup < 1000 g	name..... date of birth..... gestational age..... birthweight..... patientnumber..... studynumber.....
BA ratio GROUP birthweigthgroup 1000-1250 g	name..... date of birth..... gestational age..... birthweight..... patientnumber..... studynumber.....
BA ratio GROUP birthweigthgroup 1250-1500 g	name..... date of birth..... gestational age..... birthweight..... patientnumber..... studynumber.....
BA ratio GROUP birthweigthgroup 1500-2000 g	name..... date of birth..... gestational age..... birthweight..... patientnumber..... studynumber.....
BA ratio GROUP birthweigthgroup >2000 g	name..... date of birth..... gestational age..... birthweight..... patientnumber..... studynumber.....

TSB GROUP
birthweigthgroup
<1000 g name..... date of birth.....
gestational age..... birthweight.....
pati nnumber..... studynumber.....

TSB GROUP
birthweigthgroup
1000-1250 g name..... date of birth.....
gestational age..... birthweight.....
pati nnumber..... studynumber.....

TSB GROUP
birthweigthgroup
1250-1500 g name..... date of birth.....
gestational age..... birthweight.....
pati nnumber..... studynumber.....

TSB GROUP
birthweigthgroup
1500-2000 g name..... date of birth.....
gestational age..... birthweight.....
pati nnumber..... studynumber.....

TSB GROUP
birthweigthgroup
>2000 g name..... date of birth.....
gestational age..... birthweight.....
pati nnumber..... studynumber.....

Guideline for the use of TSB and BA ratio nomograms for phototherapy (PT) and exchange transfusion (ET)

TSB in $\mu\text{mol/l}$ and albumin in g/l and B:A ratio in $\mu\text{mol/l/g/l} = \mu\text{mol/g}$

1. Select appropriate nomogram based on birthweight
2. Mark risk status (standard risk or high risk)
3. Mark TSB and/or B:A ratio in nomogram
4. Start phototherapy if PT-threshold is reached
Stop phototherapy if TSB is under PT-threshold
5. Consider exchange transfusion if ET-threshold is reached despite intensive PT

High risk (check daily)

asphyxia: Apgar score < 3 at 5 minutes

hypoxemia: $\text{PaO}_2 < 40 \text{ mmHg} (< 5.3 \text{ kPa}) > 2 \text{ hrs}$ (recent 24 hrs)

acidosis: $\text{pH} < 7.15 > 1 \text{ hr}$ (recent 24 hrs)

hemolysis with positive Coombs

clinical of neurological deterioration (sepsis with use of
vasopressors, meningitis, intracranial hemorrhage > gr 2)

based on guidelines published by Ahlfors 1994 and Maisels 2003

TSB: 17.1 $\mu\text{mol/l} = 1 \text{ mg/dl}$