# Kidz First Neonatal Research

## Links

- Maternal & Perinatal Central Coordinating Research Hub
- ON TRACK Network
- CMDHB Ethics and Privacy Guide for Research and Evaluation

## Neonatal Unit Studies

<table>
<thead>
<tr>
<th>Study</th>
<th>Contacts</th>
<th>GA/BWC Criteria</th>
<th>Eligibility</th>
<th>Consent</th>
<th>Links</th>
</tr>
</thead>
</table>
| PLUSIS | Daytime: Lisa Mravicich 021897982 or Chris McKinlay 0274725099  
After hours: Chris McKinlay 0274725099 | <28 weeks  
No weight restriction | Inclusion:  
- <48 hours  
- Surfactant if given, <12 hours ago  
- Receiving mechanical ventilation via an endotracheal tube OR receiving non-invasive respiratory support including CPAP, nasal IPPV or nasal high flow AND a clinical decision to treat with exogenous surfactant | Written informed consent prior to randomisation. | Randomisation  
Database  
Flow Chart  
Quick Guide  
Consent and Forms  
Health Professional Brochure  
Protocol  
Study Handbook |
| Daytime: Elizabeth Nevill 021300877 | <31 weeks | Exclusion:  
- Twin to twin transfusion  
- Placental abruption  
- Congenital abnormality  
- Severe antenatal IUGR  
- En caul delivery  
- Short umbilical cord  
If unable to obtain consent antenatally, randomise based on deferred consent with informed, written consent obtained within 24 hours. | Consent Form Deferred  
Consent Form Antenatal Protocol |
<table>
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<tbody>
<tr>
<td>After hours: duty consultant</td>
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</table>
| Daytime: Tanith Alexander 021024662 76 | 32+0 to 35+6 weeks | Inclusion:  
- <24 hours of age  
- Mother intends to breastfeed  
- Insertion of intravenous lines based on clinical need  
- Domicile in Auckland  
Written informed consent prior to randomisation. | Randomisation |
| After hours: Tanith until 8 pm |  |  |
| Daytime: David Hou 021414888 or Lisa Mravicich 021897982 | >3 5 weeks | Inclusion:  
- <23 hours  
- One or more of the following: Apgar 5 at 10 mins after birth; OR receiving ongoing resuscitation at 10 mins after birth; OR on cord blood or arterial/venous blood obtained at < 60 mins after birth, pH less than 7.00 OR base deficit 12.0 mmol/L.  
- Moderate to severe encephalopathy, defined between one and six hours after birth by: 3 out of 6 modified Sarnat criteria indicating moderate/severe encephalopathy  
- Hypothermia treatment initiated by 6 hrs of age; Study treatment planned to start within 24 hrs after birth  
- At least one parent 18 yrs old  
- Anticipated ability to collect primary endpoint at 2 yrs  
Written informed consent prior to randomisation. Where this cannot be obtained in time to allow randomisation by 23 hours of age, telephone parental consent is acceptable, with signed consent obtained as soon as feasible. | Randomisation  
Protocol  
Consent Form Drug Administration Guide |
| After hours: duty consultant |  |  |

**PAEAN**

Erythropoietin for Neonatal Hypoxic Ischaemic Encephalopathy

Daytime: David Hou 021414888 or Lisa Mravicich 021897982  
After hours: duty consultant  

Inclusion:  
- Severe IUGR (birth weight <1800 g)  
- Suspected major chromosomal or congenital anomalies  
- HC <3rd centile below mean for GA & gender  
- Imminent withdrawal of care is being planned  
Written informed consent prior to randomisation. Where this cannot be obtained in time to allow randomisation by 23 hours of age, telephone parental consent is acceptable, with signed consent obtained as soon as feasible.  

Randomisation  
Protocol  
Consent Form Drug Administration Guide
<table>
<thead>
<tr>
<th>Daytime: Lisa Mravicich 021897962 or Chris McKinlay 0274725099</th>
<th>Inclusion:</th>
<th>Written informed consent prior to randomisation.</th>
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</thead>
<tbody>
<tr>
<td>After hours: Chris McKinlay 0274725099</td>
<td>&gt;3 weeks</td>
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<td>&lt;8 weeks old</td>
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<td></td>
<td>Previous exposure to paracetamol or ibuprofen</td>
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<td>Chronic disease associated with limited life expectancy (&lt;6 years)</td>
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<td></td>
<td>Likely to leave NZ in first 6 years</td>
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<tr>
<td>Inclusion:</td>
<td>Written informed consent prior to randomisation.</td>
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<tr>
<td>&lt;72 hours</td>
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<tr>
<td>Major congenital abnormality</td>
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<td>Minor congenital abnormality likely to affect respiration, growth or development</td>
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<td>Previous caffeine treatment</td>
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<tr>
<td>Renal or hepatic impairment</td>
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<tr>
<td>Tachyarrhythmia</td>
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<tr>
<td>Seizures</td>
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<tr>
<td>Hypoxic ischaemic encephalopathy</td>
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<td>Residing outside of the Auckland DHB regions</td>
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### Publications

**2019**

2018


2017


2016

2015


2014


2013


2012
