

1. Characteristics of your NICU (Please note that Level III relates tertiary level care)

- Level I
- Level II
- Level III

Other (please specify)

2. Characteristics of your NICU:

Total number of intensive care beds

Number of very low birth weight infants annually

3. Is your NICU part of a paediatric hospital or a general hospital? (The option will be to tick as many as suitable)

- Paediatric hospital
- General hospital
- Free standing maternity
- University hospital

4. Do you have any institutional recommendations regarding the diagnosis and treatment of hypotension in first 72 hours after delivery in the ELGAN?

	Diagnosis	Treatment
Yes	<input type="checkbox"/>	<input type="checkbox"/>
No	<input type="checkbox"/>	<input type="checkbox"/>

5. How do you evaluate poor perfusion in ELGA newborn?

- Clinical examination
- Laboratory testing
- Ancillary methods (ECHO etc.)
- All of the above

6. If you use clinical examination what parameters do you measure?

	Yes	No
Capillary refill time	<input type="checkbox"/>	<input type="checkbox"/>
Urine output	<input type="checkbox"/>	<input type="checkbox"/>
Colour of peripheries	<input type="checkbox"/>	<input type="checkbox"/>
Heart rate	<input type="checkbox"/>	<input type="checkbox"/>
Warmth of toes	<input type="checkbox"/>	<input type="checkbox"/>
Activity level	<input type="checkbox"/>	<input type="checkbox"/>

Other (please specify)

7. What capillary refill time do you consider abnormal and where do you measure it?

	Abnormal time	Place of measurement
Capillary refill time (CRT)	<input type="text"/>	<input type="text"/>

8. What laboratory tests do you use to evaluate poor perfusion in ELGA newborn?

- Base excess
- Lactate (absolute value)
- Lactate (direction of change)
- Other (please specify)
- Haemoglobin
- pH
- Significance of lactate change

9. What ancillary methods do you use to evaluate poor perfusion in ELGA newborn?

- ECHO
- Mixed venous O2
- Perfusion index
- EEG/aEEG
- Temperature
- NIRS
- CVP (Central Venous Pressure)
- Other (please specify)

10. Do you measure blood markers of myocardial dysfunction?

	Answer	If "YES"
Blood markers measurement	<input type="text"/>	<input type="text"/>

11. Under which circumstances do you consider ELGA newborn to have low blood pressure?

- According to a predefined percentile
- According to a mean blood pressure is less than gestational age
- According to a limit you believe to be associated with poorer outcomes
- Other (please specify)

12. If functional ECHO is performed, what parameters of low perfusion do you measure?

- Left cardiac output
- Fractional shortening of left ventricle
- Right cardiac output
- SVC flow
- Other (please specify)

13. If hypotension is determined, what initial treatment you choose?

- Volume administration
- Inotropes
- Steroids

14. If volume, what agent and amount do you use initially?

	Agent	Amount
Volumotherapy	<input type="text"/>	<input type="text"/>

15. If volume, what maximum cumulative amount of volume do you use?

20 ml/kg

30 ml/kg

40 ml/kg

More

No cumulative volume

16. What inotropes do you use initially?

- Dopamine
- Dopamine and dobutamine
- Dobutamine
- Other (please specify)
- Norepinephrine
- Vasopressin
- Milrinone

17. Please specify the starting dose and maximum dose from your chosen agent.

Starting dose

Maximum dose

18. If initially inotrope therapy failed what is your second choice?

- Dopamine
- Norepinephrine
- Vasopressin
- Other (please specify)
- Dopamine and dobutamine
- Dobutamine
- Epinephrine
- Milrinone
- Steroids
- Levosimendane

19. What preparation of steroid do you administer for hypotension?

- Hydrocortisone
- Methylprednisolone
- Dexamethasone
- None

Other (please specify)

20. If you administer steroids for hypotension, please specify dose in mg/kg.

Hydrocortisone

Methylprednisolone

Dexamethasone

Other

21. Do you change your approach when you consider hemodynamically significant ductus arteriosus is present?

- Yes
- No

22. If your answer of previous question (21) is Yes, please specify.

- | | |
|---|--|
| <input type="checkbox"/> No volumotherapy | <input type="checkbox"/> Increase hematocrit |
| <input type="checkbox"/> Indomethacin/ibuprofen | <input type="checkbox"/> Change of ventilatory setting |
| <input type="checkbox"/> Fluid restriction | |

23. Do you practice delayed cord clamping?

- Yes
- No

24. Do you believe that permissive hypotension is an acceptable strategy for treating ELGA newborn infants during the first few days of life?

- Yes
- No

25. Please fill the country of your hospital.