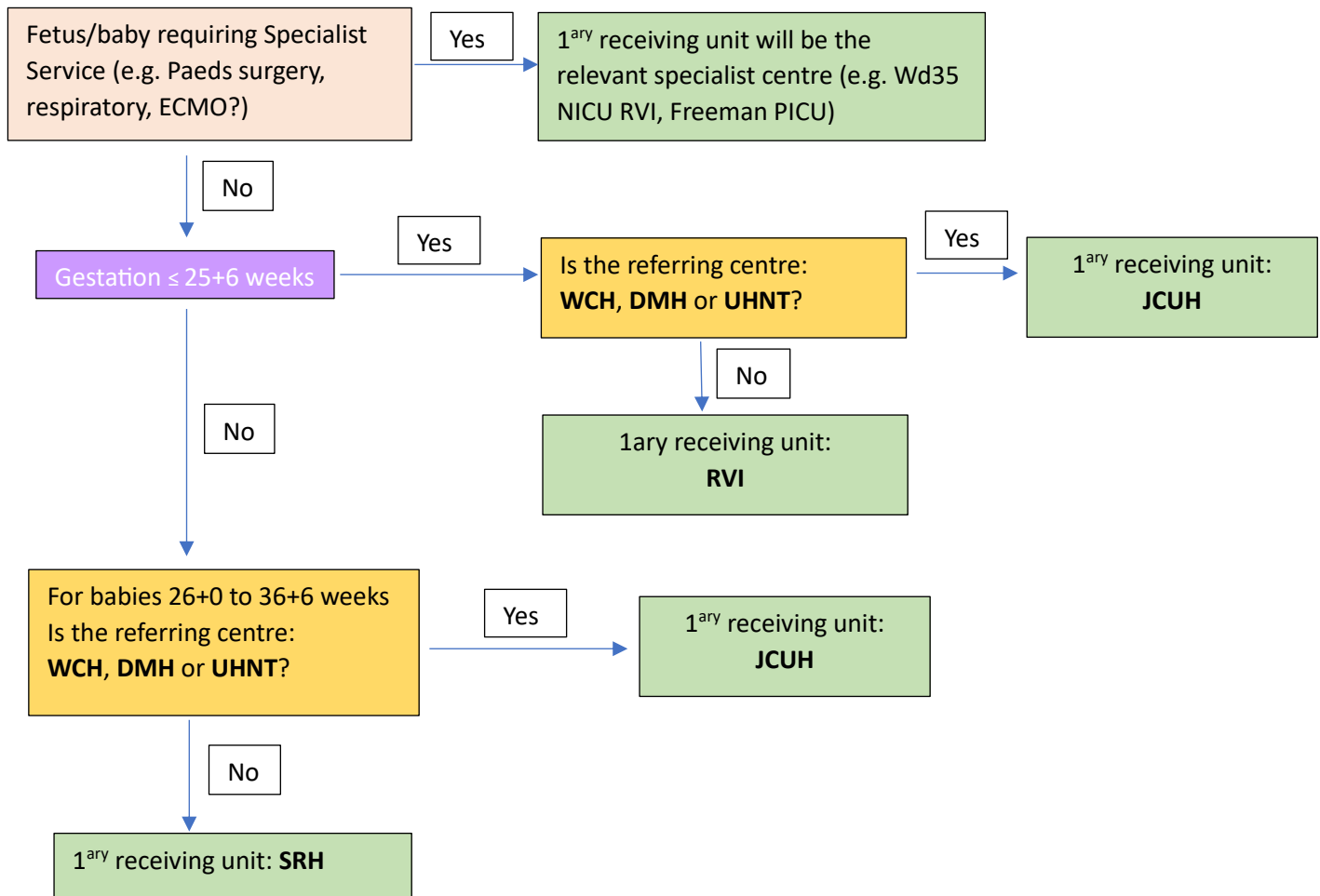


## Referral of IUT/EUT via NNeTS Hotline for babies 36+6 weeks gestation or less



### IUTs:

When receiving IUT requests, collect the usual information and determine (see flowchart above) the correct primary receiving centre. This identified centre **must** then be offered the IUT; contact the NICU and DS as per usual process, regardless of previously declared NICU or DS activity/capacity at the preceding ring-round.

**If the primary receiving centre declines the IUT**, document clearly in the IUT book what time and WHY the IUT has been declined (e.g. no NICU cots to admit into, no DS beds, NICU cot closures due to staffing etc).

After that, contact the nearest unit of appropriate level of care required in the usual fashion and continue the IUT process until a receiving centre is confirmed. Then put the obstetricians in contact as usual.

### EUTs:

When receiving a request for uplift in care (an 'acute' referral), as usual the clinical details should be recorded, consultant conferenced and ambulance booked asap. In parallel, or after the need for uplift has been confirmed, determine (see flowchart above) the correct primary receiving centre. This identified centre **must** then be offered the EUT; contact the NICU as per usual process, **regardless of previously declared NICU activity/capacity at the preceding ring-round**.

**If the primary receiving centre declines the acute uplift**, document clearly in the Acute (red) book **what time, which centre, and WHY** the uplift has been declined (e.g. no NICU cots to admit into, NICU cot closures due to staffing etc). After that, contact the nearest unit of appropriate level of care required in the usual fashion, and continue the process until a receiving centre is confirmed.