

Newborn Critical Care Center (NCCC) Clinical Guidelines

Special Infant Care Clinic (SICC)

The UNC Special Infant Care Clinic provides a multidisciplinary approach to the developmental surveillance and medical care of high-risk infants from birth to 2 years. A team of physicians, nurse practitioners, a registered dietitian, speech therapists, occupational therapists, and physical therapists provide comprehensive developmental evaluations. Clinic also links infants to community services, such as Early Childhood Intervention. Audiology evaluations are also available. The SICC often aids in the case management of infants followed by multiple subspecialists. Additionally, the SICC provides follow-up for patients involved in clinical research protocols. The SICC dietitian is available to see SICC patients for standalone nutrition appointments prior to the initial SICC appointment, if needed.

This SICC team is available to see infants in the first month after discharge in order to facilitate a successful transition home. Discussion with families about SICC follow-up should begin during the inpatient period. Opportunities to increase family awareness of the importance of SICC include family education facilitated by the bedside RN and in-patient Care Coordinators. SICC brochures are available in the NCCC and should be provided to families who are eligible for SICC follow-up.

The SICC referral can be placed at any point during the hospitalization. When an infant is 1-2 weeks from discharge, the order should be signed by the infant's inpatient provider. **The referral order must specify the "to department" for the team to receive the referral (either UNCH Special Infant Care Chapel Hill or UNCH Special Infant Care Blue Ridge Raleigh).**

AMB REFERRAL TO SPECIAL INFANT CARE CLINIC ✓ Accept ✗ Cancel

Class: **Internal Referral** External Referral

Referral: To Department Specialty:

To Department:

To Provider:

- UNCH SPECIAL INFANT CARE BLUE RIDGE RALEIGH [1070621001021]
- UNCH SPECIAL INFANT CARE CHAPEL HILL [1070011001005]

Priority:

The SICC team receives those orders and schedules the infant accordingly. This allows for appointments to be made before the infant discharges home, and the appointment information to print on the AVS.

All remaining discharge summaries from NCCC are screened for risk factors by SICC APPs, and if needed, scheduled for UNC SICC at Chapel Hill or Raleigh, or closer to home if possible.

Infants to be considered for SICC include:

- Infants with birth weight < 1250 grams or gestational age ≤ 32w0d weeks
- Grade III or IV IVH, PVL, hydrocephalus, meningitis
- Perinatal Asphyxia (umbilical pH < 7.0, abnormal EEG, HIE and/or whole-body cooling)
- Severe CLD or airway anomalies: discharged home on oxygen or with a tracheostomy
- Infant with IUDE who require pharmacological intervention for NAS, complex social situations, and/or home hospice will be considered on individual basis
- Infant who required ECMO
- Hyperbilirubinemia requiring exchange transfusion
- Neurologic disorders, hyper or hypotonia, or seizures
- Genetic disorders associated with neurodevelopmental delays
- Congenital infections
- Hypothyroidism
- Other feeding difficulties requiring gastrostomy tube
- Major congenital heart disease:
 - Critical CHD as defined by AHA:
 - Hypoplastic left heart syndrome
 - Pulmonary atresia
 - Tetralogy of Fallot
 - Total anomalous pulmonary venous return
 - Transposition of the great arteries
 - Tricuspid atresia
 - Truncus arteriosus
 - Additionally:
 - Surgery before 30 days of age (adjusted age < 44 weeks PMA)
 - Bypass
 - Syndromic
 - Cyanotic
 - PICU referral
 - Catheterization before 1 month
- Other conditions that the team feels will place infant at high-risk for neurodevelopmental impairment
 - Patients can be co-managed with Complex Care Clinic (medical home)