

641—150.7(135,77GA,ch1221) Level II hospitals.

150.7(1) *Definition.* Level II hospitals provide the same care and services as Level I hospitals plus they provide management of certain high-risk pregnancies and services for newborns with selected complications. These hospitals deliver approximately 500 or more babies annually and have an obstetrician and pediatrician on staff. The perinatal unit is under the co-direction of a pediatrician and an obstetrician.

150.7(2) *Functions.* In addition to the functions of Level I hospitals, Level II hospitals have the capability to:

- a. Manage selected high-risk pregnancies.
- b. At a minimum, manage neonates of 34 weeks and greater gestation.
- c. Manage recovering neonates who can be appropriately transferred from the referral center.
- d. Maintain a special area designated for the care of sick neonates.
- e. Maintain nursing personnel with demonstrated competency in the care of sick neonates.
- f. Maintain nursing personnel with demonstrated competency in the care of high-risk mothers.

Consultation with a pediatrician or neonatologist and possible referral to a higher-level perinatal center should be initiated for infants requiring oxygen therapy for more than six hours or ventilatory care for more than two hours.

150.7(3) *Physical facilities.* Level II hospitals have the same physical facilities as Level I hospitals.

150.7(4) *Medical personnel.* Level II hospitals have the same medical personnel as Level I hospitals. In addition, the perinatal units in Level II hospitals are under the co-direction/supervision of either a board-eligible or board-certified obstetrician/gynecologist or a board-eligible or board-certified pediatrician for their respective areas. Allied medical specialists in various disciplines are on staff, including specialists in internal medicine, radiology, and pathology. Psychiatric services are available.

150.7(5) *Nursing personnel.* Level II hospitals have the same minimal requirements for nursing personnel as Level I hospitals. Nursing orientation and competencies in a Level II hospital are specific to the patient population they serve.

150.7(6) *Outreach education.* Level II hospitals have the same responsibility for outreach education as Level I hospitals.

150.7(7) *Allied health personnel and services.* Level II hospitals have the same allied health personnel and services available as Level I hospitals, with the addition of the following:

- a. Respiratory therapy.
- b. Ultrasound.

150.7(8) *Infection control.* Infection control guidelines are the same as for Level I hospitals.

150.7(9) *Newborn safety.* Level II hospitals have at least the same requirements for newborn safety as Level I hospitals.

150.7(10) *Maternal-fetal transport.* Level II hospitals have the same requirements for maternal-fetal transport as Level I hospitals. In addition, Level II hospitals are expected to accept patient referrals when appropriate. A critical function of providers at Level II hospitals is to communicate with the providers at Level I hospitals in deciding whether a particular patient should be transported to the Level II hospital. Careful assessment of the hospital's capabilities for perinatal management will be critical in these decisions. This information will need to be disseminated among the hospital staff. Providers of obstetric care need to know the critical gestational age limitations for their particular nursery. Below this gestational age, maternal-fetal transport should be utilized if delivery is anticipated and the circumstances permit.

150.7(11) *Perinatal care committee.*

a. All Level II hospitals maintain a perinatal care committee. Members of this committee should represent, but not be limited to, the fields of obstetrics, pediatrics, family practice, nursing, administration, laboratory, respiratory therapy, anesthesia and social services.

b. Responsibilities of the perinatal care committee include the following:

(1) Develop policies for the unit including provisions to ensure adequate patient care by qualified providers.

(2) Conduct a meeting at least semiannually to resolve problems related to the unit.

- (3) Review educational activities conducted by the unit.
- (4) Serve as a general liaison between the various groups represented on the committee.