# Neonatal vital statistics and transport in Hualien county

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### 摘要

#### **Abstract**

Vital statistics on live births and transportation of high-risk neonates in Hualien County were analyzed retrospectively

according to the birth hospital classification level. The purposes of this study were to provide useful information for

planning regional perinatal care and to allow the local population to efficiently use the medical resources and receive

superior perinatal care. Fourteen hospitals (twelve level I and two level II, A and B) have maternity services in Hualien

County. There were 4258 live births from July 1995 through May 1996. The percentage of very low birth weight babies

at level I and level II hospitals was 0.3% and 1.1%, respectively; and low birth weight babies was 6.1% and 6.3%, respectively.

The incidence of having low birth weight neonates according to maternal age is shown as below: <20

(14.1%), 20-24 (7.8%), 25-29 (5.8%), 30-34 (5.7%), <sup>3</sup>35 (9.3%). Sixty-two neonates were transported from level I to

level II hospitals. None of the neonates died during transport. The incidence of transport morbidity was evaluated in 34

neonates transported to hospital A. Ten (29.4%) of these 34 neonates had cyanosis, hypothermia, hypoglycemia or

acidemia. Twenty-eight (82.4%) of 34 neonates were transported by a family member and private vehicle. The full-time

nursing and medical staff were not adequate to constitute a transport team in Hualien. In conclusion, we found that the

relative lack of perinatal regionalization in Hualien may increase neonate morbidity during transportation and contribute

to duplication and underutilization of effective neonatal techniques. We suggest that the goal of health policies

in this area be to promote the regionalization of perinatal care and to increase the number of personnel on neonatal

intensive care wards. (Clinical Neonatology 1998;5(1): 10-13)