## **NICU Study List**

Study Title	Inclusion Criteria	Exclusion Criteria	Principal Investigator
KNIRS	<ul><li>Preterm &lt; 32 weeks</li><li>&lt; 96 hours of age at start of NIRS</li></ul>	<ul> <li>Major congenital</li> <li>anomalies</li> <li>Skin issue</li> <li>Attending discretion</li> </ul>	Matt Harer  mwharer@wisc.edu  608 658 6304
Happy Baby Hearts	<ul> <li>Concern for Coarctation of Aorta</li> <li>≥35 weeks</li> <li>&lt; 12 hours of age at start of NIRS</li> </ul>	- Major anomaly of kidney - Attending discretion	Matt Harer <u>mwharer@wisc.edu</u> 608 658 6304
Baby Brain Recover Study	<ul> <li>Has confirmed acute unilateral or bilateral brain lesions (Eg. Stroke, ICH, PVL)</li> <li>CGA between term and 6 months</li> </ul>	<ul> <li>Metabolic disorders</li> <li>Neoplasm         contraindications to         MRI</li> <li>Separate neuro         disorder</li> <li>Apneic episodes</li> <li>Requiring         supplemental         ventilation</li> <li>Uncontrolled seizures</li> </ul>	Ryan McAdams (Med. Monitor)  mcadams@pediatrics.wisc.edu  206 499 7886  PI: Bernadette Gillick bgillick@wisc.edu
Healthy Little Eyes	<ul> <li>Diagnosed with HIE (does not require cooling)</li> <li>Less than 78 hours at enrollment</li> </ul>	<ul> <li>Diagnosed brain/eye abnormalities ex. ROP</li> <li>CNS illness other than HIE</li> </ul>	Ryan McAdams  mcadams@pediatrics.wisc.edu  206 499 7886  Main PI: Pelin Cengiz

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AERO-05	<ul> <li>Gestational age at birth ≥ 29 0/7 AND ≤ 36 6/7</li> <li>Birthweight ≥ 1,000 AND ≤ 3,500 grams</li> <li>Age ≥ 1 hour and ≤ 6 hours</li> <li>Clinical diagnosis of surfactant-deficient RDS</li> <li>Requiring CPAP</li> <li>Respiratory Severity Score (RSS) ≥1.25 AND ≤2.4</li> </ul>	<ul> <li>Attending does not approve</li> <li>Minor parents, state custody, foster care</li> <li>Surfactant administration prior to randomization</li> <li>Mechanical ventilation prior to randomization</li> <li>Major congenital anomaly (suspected or confirmed)</li> <li>Abnormality of the airway (suspected or confirmed)</li> <li>Respiratory distress</li> </ul>	Dinushan Kaluarachchi kaluarachchi@pediatrics.wisc.edu 347 279 5014
	- If subject is >34 weeks' gestation a chest radiograph is required	presumed secondary to an etiology other than RDS - Culture-positive bacterial sepsis requiring at least 5 days of antibiotic therapy Apgar score <3 at 5 minutes of age - Umbilical cord gas pH <7.0 or BD> 10	
PEAPOD	- Born at Meriter Hospital, Inc ≤ 32 weeks GA	- Known genetic condition that impact	Whitley Hulse whulse@wisc.edu
		neurodevelopmental	785 550 5827

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		outcomes or brain structure development Multiple major congenital anomalies - Will require transfer to AFCH prior to 36 weeks PMA	
Lung POCUS to Predict Extubation	- All infants admitted to the NICU with respiratory	- Known major congenital disease	Adam Bauer  adam.bauer@wisc.edu
Success	distress requiring intubation Meeting the following	(chromosomal abnormality, heart disease, respiratory	414 828 7316 Ann Chacko
	extubation readiness criteria as per the	malformation)  Neonates with parents	archacko@uwhealth.org
	attending neonatologist.	that are less than 18 years old.	