Quick Reference Guide for the Management of the newborn with Pierre Robin Sequence

**NURSE PRONE**
Cardiorespiratory monitoring  
Feed with OGT or Haberman teat

- **Significant obstruction**
  - Insert nasopharyngeal airway
  - Stabilises
    - Discuss with Respiratory Team timing of sleep study – with or without nasopharyngeal tube
  - Does not stabilise
    - Consider CPAP or intubation
    - Multidisciplinary review: Neonatal/ENT Plastics/Respiratory

- **Minimal or no obstruction**
  - Consider breast feeds with supervision
  - Book sleep study for 2-4 weeks

- **Moderate or severe obstruction needs NP tube**
  - Generally remains inpatient until tube is out
  - Repeat sleep studies every 4 weeks

**Discharge on home monitor in prone position if meets all other criteria (see main PRS document)**