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1. For spontaneously breathing infants on CPAP with RDS, do you use a non-invasive method of surfactant administration such as LISA/MIST/AEROSOL inhalation?

Yes	(57) 50%
<div style="border: 1px solid #ccc; margin-bottom: 5px;"><div style="background-color: #e67e22; width: 50%;"></div></div>	
No and no immediate plans to change practice	(28) 24%
<div style="border: 1px solid #ccc; margin-bottom: 5px;"><div style="background-color: #3498db; width: 24%;"></div></div>	
No, but we are reviewing all practices and planning to implement change in near future (within one year)	(30) 26%
<div style="border: 1px solid #ccc; margin-bottom: 5px;"><div style="background-color: #3498db; width: 26%;"></div></div>	

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1. If yes to Question 1A or have plans to implement, at what gestational age do you use it or plan to start using it?

At all gestational ages	(12) 14%
≥ 26 weeks	(32) 38%
≥ 29 weeks	(31) 37%
≥ 32 weeks	(9) 11%
≥ 37 weeks	(0) 0%

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Polls

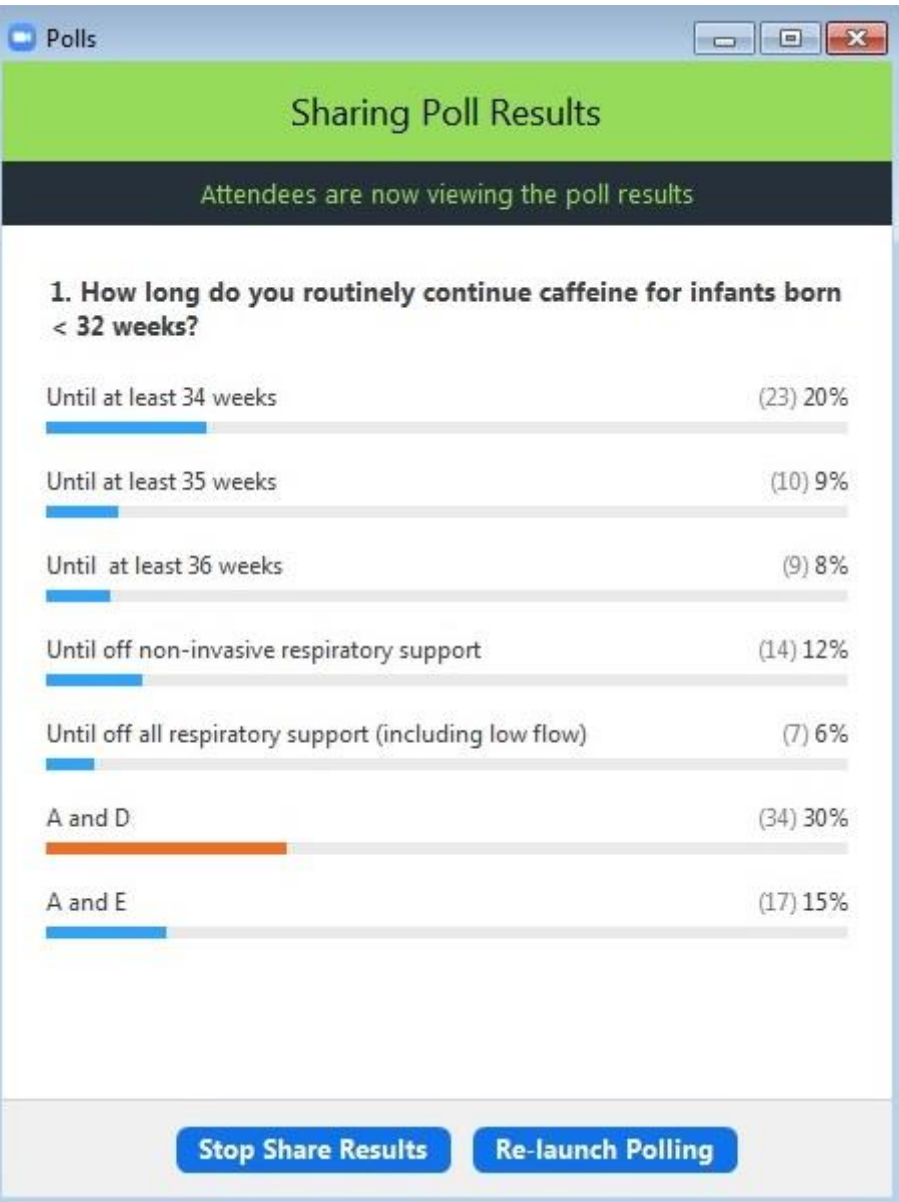
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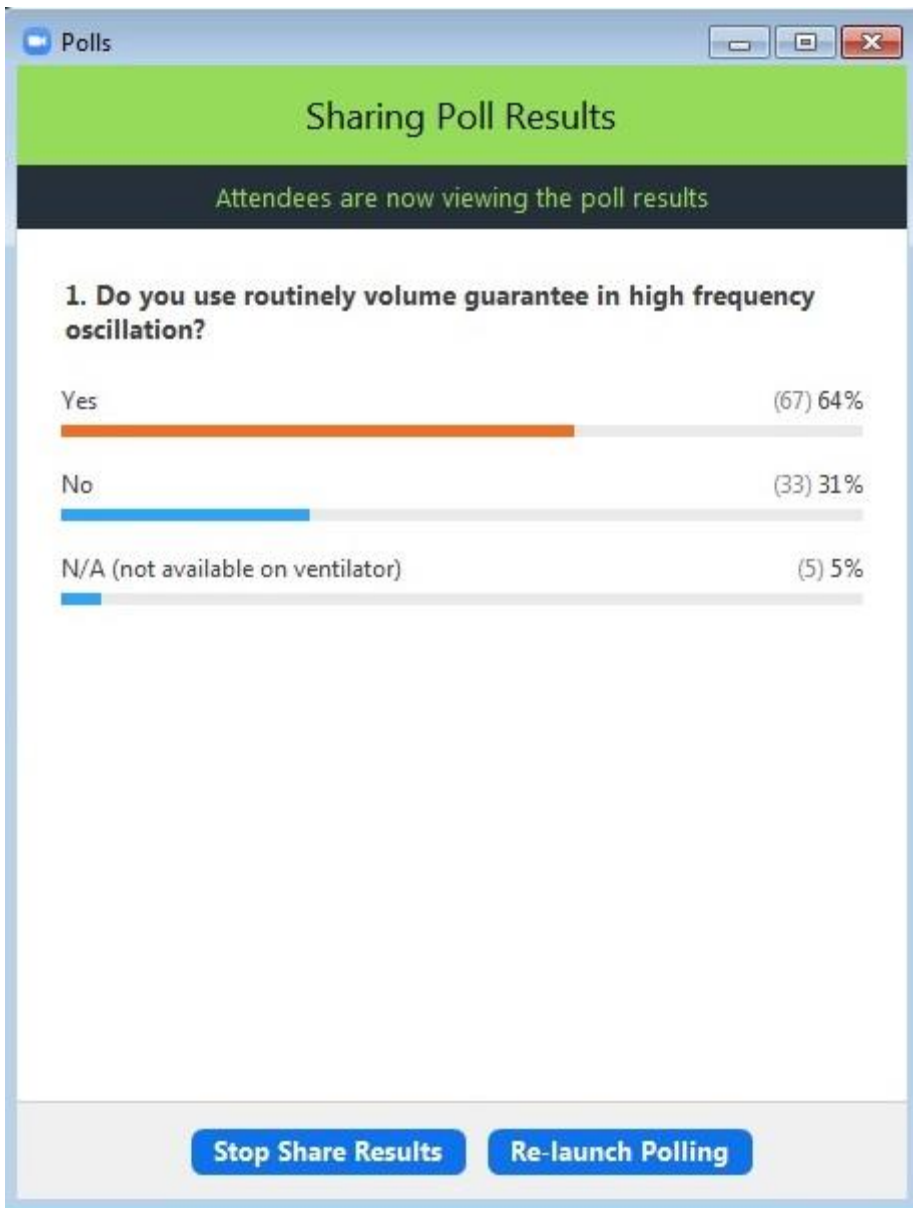
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1. Do you use or plan to use low dose prophylactic hydrocortisone (Premiloc regimen) for preterm babies?

Yes, we do Premiloc for babies born between 24 to 28 weeks of gestation.	(0) 0%
Yes, we do Premiloc for babies born between 22 to 28 weeks of gestation.	(6) 6%
Yes, but we use different criteria.	(19) 19%
No, we don't use and we are not considering it.	(42) 42%
No, we do not use it but we are thinking about it	(34) 34%

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1. In your unit, how do you wean from non-invasive respiratory support in neonates with evolving BPD/BPD?

.Wean by reducing PEEP until ready to discontinue support altogether (27) 22%



Wean by reducing PEEP and then cycle on and off and increase duration of off period before discontinuing (4) 3%



Wean by "step-down" to High-flow support routinely and then wean high flow (32) 26%



Wean by switching to low flow as routine and then wean low flow (0) 0%



Use a variety of the approaches mentioned above based on clinical condition (58) 48%



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