Victoria Mattox
Valley Children's Healthcare & Hospital, USA

Statement of the Problem Early Onset Sepsis (EOS) in newborns can be hard to identify due to multiple contributing factors and a lack of early reliable markers that allow for de nite identi cation. Clinicians depend on determining whether risk factors such as prematurity, Prolonged Rupture Of Membranes (PROM), under treatment for GBS positive or unknown mothers and chorioamnionitis are present to help determine if there is a need to evaluate and treat sepsis prospectively. e identi cation of cord blood neutropenia has been introduced as an independent and adjunct marker to help identify EOS. e purpose of this study was to establish reference values for cord blood neutrophil counts per gestational age and to look at the sensitivity speci city and favorable likelihood ratio of cord neutropenia as an independent marker and as an adjunct marker to detect EOS in newborns >34 weeks' gestational age.

Methodology & eoretical Orientation: is study was done in a retrospect. A cohort was identi ed and included mother-infant pairs that experienced singleton deliverie (r)13 (eep)-8.9 (er g)8.1 (es)5 (t)-6 (a)19 (t)-5 (io).seo dete3 (s p)12 (r H)2