

Figure 1: Phototherapy thresholds by gestational age and age in hours for infants with no recognized hyperbilirubinemia neurotoxicity risk factors other than gestational age. Use total serum bilirubin concentrations; do not subtract direct-reacting or conjugated bilirubin from the total serum bilirubin. Infants <24 hours old with a TSB at or above the phototherapy threshold are likely to have a hemolytic process and should be evaluated for hemolytic disease. Hyperbilirubinemia neurotoxicity risk factors include gestational age <38 weeks; albumin <3.0 g/dL; isoimmune hemolytic disease, glucose-6-phosphate dehydrogenase (G6PD) deficiency, or other hemolytic conditions; sepsis; or any significant clinical instability in the previous 24 hours. (Kemper et al, *Pediatrics*, 2022)

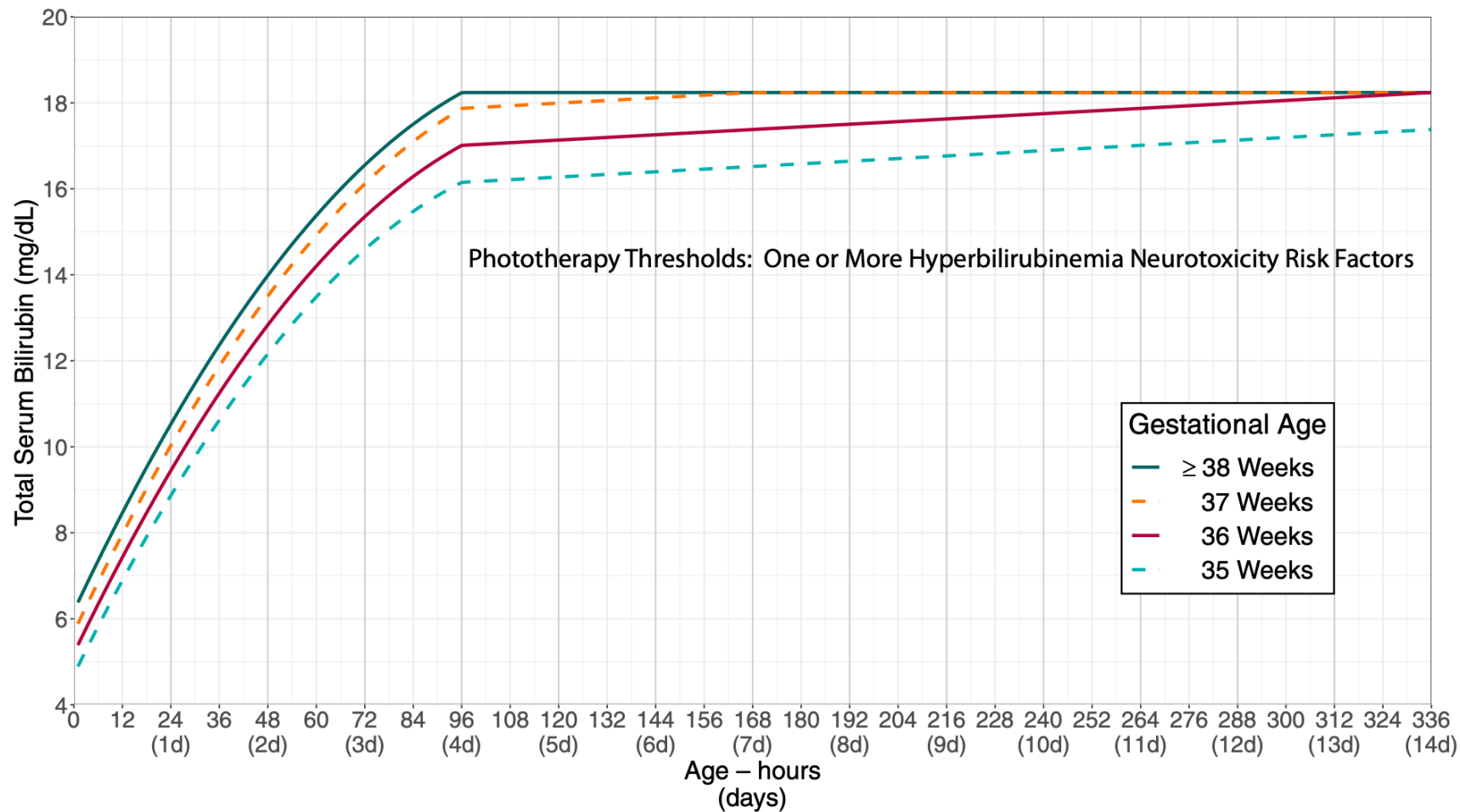


Figure 2: Phototherapy thresholds by gestational age and age in hours for infants with at least 1 recognized hyperbilirubinemia neurotoxicity risk factor other than gestational age. Use total serum bilirubin concentrations; do not subtract the direct-reacting or conjugated bilirubin from the total serum bilirubin. Hyperbilirubinemia neurotoxicity risk factors include gestational age <38 weeks; albumin <3.0 g/dL; isoimmune hemolytic disease, glucose-6-phosphate dehydrogenase (G6PD) deficiency, or other hemolytic conditions; sepsis; or any significant clinical instability in the previous 24 hours. (Kemper et al, *Pediatrics*, 2022)

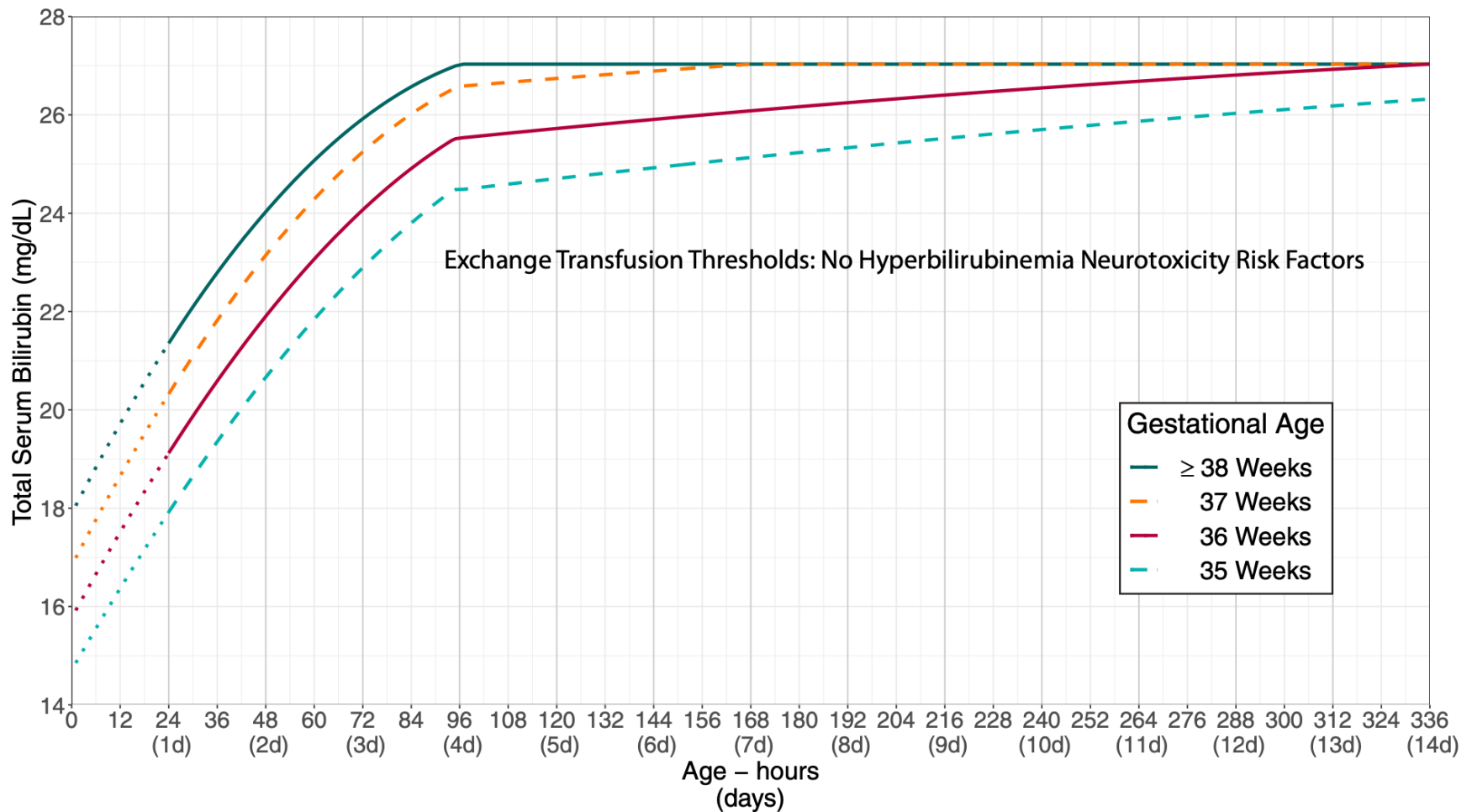


Figure 3: Exchange transfusion thresholds by gestational age for infants with no recognized hyperbilirubinemia neurotoxicity risk factors other than gestational age. Use total serum bilirubin concentrations; do not subtract direct bilirubin from the total serum bilirubin. Hyperbilirubinemia neurotoxicity risk factors include albumin <3.0 g/dL; isoimmune hemolytic disease, glucose-6-phosphate dehydrogenase (G6PD) deficiency, or other hemolytic conditions; sepsis; or any significant clinical instability in the previous 24 hours. (Kemper et al, *Pediatrics*, 2022)

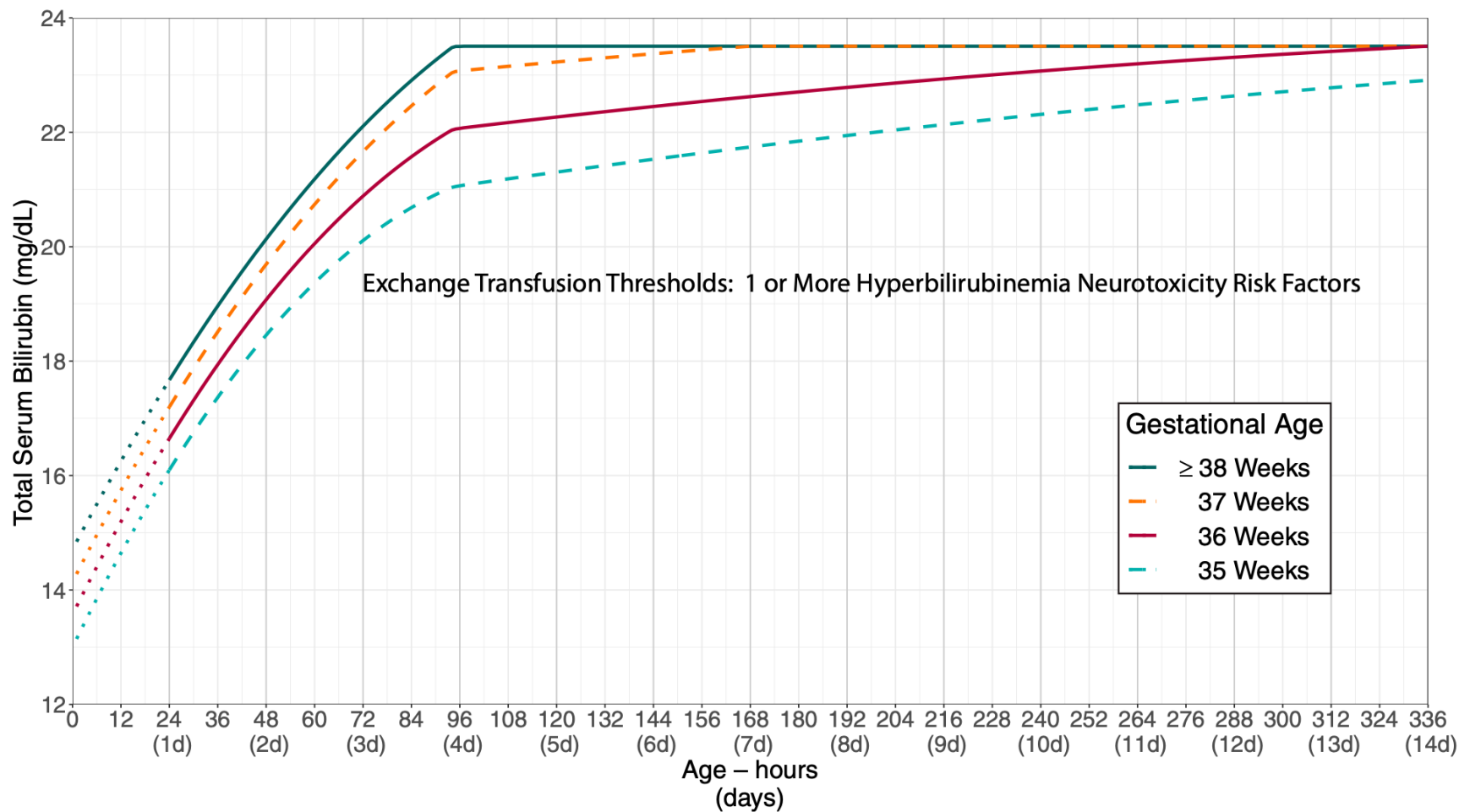


Figure 4: Exchange transfusion thresholds by gestational age for infants with any recognized hyperbilirubinemia neurotoxicity risk factors other than gestational age. Use total serum bilirubin concentrations; do not subtract direct bilirubin from the total serum bilirubin. Hyperbilirubinemia neurotoxicity risk factors include albumin <3.0 g/dL; isoimmune hemolytic disease, glucose-6-phosphate dehydrogenase (G6PD) deficiency, or other hemolytic conditions; sepsis; or any significant clinical instability in the previous 24 hours. (Kemper et al, *Pediatrics*, 2022)