



Publications

Vento M, Schmölzer G, Cheung PY, Finer N, Solevåg AL, Oei JL and Saugstad OD. (2016) *What initial oxygen is best for preterm infants in the delivery room?-A response to the 2015 neonatal resuscitation guidelines*. Resuscitation [Epub ahead of print]. [PMID: 26827713](#).

Li ES, Cheung PY, O'Reilly M, LaBossiere J, Lee TF, Cowan S, Bigam DL and Schmölzer GM. (2016) *Exhaled CO2 Parameters as a Tool to Assess Ventilation-Perfusion Mismatching during Neonatal Resuscitation in a Swine Model of Neonatal Asphyxia*. PLoS One 11(1):e0146524. [PMID: 26766424](#).

van Os S, Cheung PY, Kushniruk K, O'Reilly M, Aziz K and Schmölzer GM. (2016) *Assessment of endotracheal tube placement in newborn infants: a randomized controlled trial*. J Perinatol [Epub ahead of print]. [PMID: 26765556](#).

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- Honorary Clinical Professor, Department of Pediatrics & Adolescent Medicine, University of Hong Kong
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Dr. Cheung is a Clinician-Scientist and conducts both clinical and basic science research in neonatal hypoxia-reoxygenation injury and neonatal transition. He is the Divisional Director of Neonatology, Department of Pediatrics and Associate Director of the Centre for the Study of Asphyxia and Resuscitation (CSAR), as well as an active member of the Women and Children's Health Research Institute, Mazankowski Alberta Heart Institute and Cardiovascular Research Centre at the University of Alberta and the Canadian Neonatal Network.

Dr. Cheung's research is funded by the Canadian Institutes of Health Research, Heart and Stroke Foundation of Canada, European Commission Health Grant, Laerdal Foundation of Acute Medicine, Alberta Heritage Foundation for Medical research and Stollery Children's Hospital Foundation.

In 2012, Dr. Cheung was recognized as the Top 100 most productive researchers in Newborn and Stillbirth Research by the

Institute for Scientific Information.

Currently, he has more than 160 peer-reviewed articles, 17 book chapters and over 220 peer-reviewed abstracts.

Clinical Implications of Research

Using room air to resuscitate asphyxiated newborns has been adopted as the Canadian guideline since 2006.