

SMALL BABY CARE AND MINIMAL STIMULATION



For infants < 1500 grams, < 30 weeks gestation





SMALL BABIES

St. Joseph's NICU considers any infant born less than 30 weeks and/or less than 1500 grams (about 3 pounds, 5 ounces) to be a Small Baby. Babies born at less than 30 weeks gestation are typically less than 1500 grams.

1. If your baby weighs less than 1000 grams (2 pounds, 3 ounces) he/she is considered an Extremely Low Birth Weight infant (ELBW)
2. If your baby weighs less than 1500 grams (3 pounds, 5 ounces) he/she is considered a Very Low Birth Weight infant (VLBW)

Babies born at this gestational age and this size are at higher risk for short and long term developmental delays and medical problems.

These babies are also at increased risk for infection, growth problems and problems that affect stomach, intestines and their brain.

SMALL BABY TEAM



St. Joseph's NICU utilizes a Small Baby Team (SBT) to care for these infants

This includes:

IN-DEPTH EDUCATION

Special education for staff members caring for small babies

FOCUSED APPROACH

All team members put the special needs of small babies and their families at the center of what we do

SPECIFIC GUIDELINES

Best Practice research guides our care

EARLY FAMILY INVOLVEMENT

Parents and infant are the center of our care



MINIMAL STIMULATION (FIRST 72 HOURS)

The first 72 hours are very important for small babies

One risk for these infant's is bleeding in the brain, or intraventricular hemorrhage, which occur most often during this period.


To decrease this risk we focus on minimizing **NEGATIVE** stimulation which means:

1. Keeping the room DARK and QUIET!!
 - a. Please speak just above a whisper and parents, please, sing or talk very quietly
2. Keeping the HOB elevated 10-30°, but no higher
3. Keeping baby's nose in-line with their belly button at all times
4. If baby is doing fine, cares (assessments, diapers, and feedings) are done every 6 hours
 - a. We will intervene if your baby needs something inside the 6 hours
5. We 'cluster' care, or provide care with many team members at the same time
6. Utilize two people for two person cares



MINIMAL STIMULATION (FIRST 72 HOURS)

1. **TWO** person cares helps to keep babies feeling contained and safe
 - a. This means someone is always supporting the infant with facilitated tucking, or hand-hugging
 - b. This is something the parent can help with (i.e. you can be one of the two people)
2. Limit the amount of negative stimulation - allow positive/good stimulation around cares
 - a. Developmental Therapy involvement, massage and parent involvement is good!
3. Please log roll or slip diapers under babies for diaper changes - No leg lifts!
4. Other procedures or care that is not necessary is delayed
 - a. Bed and linen changes
 - b. We decrease the number of lab draws if we can
5. If babies don't have an umbilical arterial line, skin-to-skin or kangaroo care is great for your baby. (See the "**Kangaroo**" lesson in the family integrated care tab on the website). We try to keep them in midline positioning for this.



BEYOND 72 HOURS

Once your infant is older than 72 hours, we continue focused and infant specific developmental care
Every 1-2 weeks brings different developmental milestones

This means:

1. Your baby can tolerate different amounts and kinds of stimulation depending on their age.
This stimulation includes:
 - a. Light, sound, touch, temperature, taste, smell, and positioning
2. Follow the recommendations posted on the developmental signs near your baby's bed
3. Read more about sound, noise and light in the "[Developmental](#)" tab on our website



OTHER INFORMATION ABOUT SMALL BABIES

1. Small Babies are fragile, but strong
2. These babies depend on interaction with mom and dad
 - a. Research shows improved outcomes are linked to parental involvement
 - i. Our focus in the NICU is to minimize NEGATIVE interactions. Your interactions are **POSITIVE**
3. Like all babies, Small Babies grow, develop, and change day after day
4. Small Babies often have lots of ups and downs (many people relate having a NICU baby to being on a rollercoaster)
5. Small Babies LOVE and thrive being held skin-to-skin



SKIN-TO-SKIN WITH SMALL BABIES

1. There are very few limitations for doing skin-to-skin at any age
 - a. If your infant has an umbilical arterial line or is very unstable, the care team may choose to wait to do skin-to-skin care
 - b. There is no gestational age or size limit, small babies do great with skin-to-skin care
 - c. View skin-to-skin video for babies with breathing tubes on the website

2. No matter how careful we are, sometimes, a breathing tube can dislodge while moving babies, this can be very **SCARY**
 - a. If the tube does come out, Don't panic
 - i. Your team is always present and will respond quickly and expertly to stabilize your infant
 - ii. Be aware that many team members will arrive at the same time and there will be a lot of activity.



SMALL BABY CARE

For more information on Small Babies, please pick your baby's gestational age tab on the St. Joes NICU website

1. Learn more about developmental care
2. Learn more about milestones
3. Learn more about the importance of parental role in small baby care