



CLINICAL PRACTICE GUIDELINE

Guideline coverage includes NICU KEMH, NICU PMH and NETS WA

Hygiene: Bathing and Sponging

This document should be read in conjunction with the [Disclaimer](#)

Regular bathing or washing of the skin using lotions and soaps in the sick or preterm infant has been shown to alter the skin pH. The acid mantle and natural flora of the skin is an important defense against infection.

The procedure of washing or sponging the sick or preterm infant can cause significant stress. As seen by episodes of desaturation, increase or decreases in the heart rate, hypothermia. It can take some infants up to 1 to 2 hours to recover.

This guideline is to provide a guide in meeting the hygiene requirements of infants requiring Level 3 and Level 2 care within the NICU. Discuss individual requirements outside of these guidelines with CNC on duty.

Use of Water Wipes will be used for all washes and nappy changes for:

- All Level 3 babies in SCN3 and SCN2 - including Term babies
- All babies in incubators
- All babies less than 1500g.
- All babies with intravascular devices.

Each baby will have their own packet of WaterWipes.

The above babies will be washed every four days using Waterwipes.

They will continue to have Antistaph lotion (1% Chlorhexidine lotion) applied second daily. Refer to [Antistaphylococcal Procedure](#).

Wash

One to three hours before wash perform hand hygiene and remove sufficient WaterWipes from the packet and place in clean container. Place container in incubator to warm wipes. Reseal WaterWipes packet and return to incubator drawer. Proceed with wash working from head to toe. Use sterile water and cotton wool for face area. If more Waterwipes are required perform hand hygiene prior to removing from packet. Collect used wipes in brown paper bag for disposal at end of wash.

Possible exceptions: Level 3 babies in SCN2 who are > 35 weeks and maintaining temperature in an open cot but still requiring CPAP or HHF. In order to facilitate family centered care these babies may be considered for routine bathing.

This should follow discussion with the relevant Consultant/CNC involved. Water for the bath should be drawn from the bath tap located at the rear of SCN2 (KEMH).

Nappy Change

Perform hand hygiene and remove sufficient wipes for a wash from WaterWipes packet and place in clean container. Reseal WaterWipes packet and return to

incubator drawer. Continue with nappy change, place dirty nappy and WaterWipes in brown bag for disposal. If more Waterwipes are required perform hand hygiene prior to removing from packet.

Infants Graded Out of Incubators

- After successfully grading out of incubator into perspex cot infants are to continue with the “Waterwipes” regime for 48 hours. Waterwipes are to be warmed on radiant warmer prior to use.
- If baby is a Level 3 baby, is < 1500 grams or has peripheral IV then to continue with “Waterwipes” regime until these criteria no longer apply.
- If after 48 hours infant has maintained its temperature in the cot then infant may have a staff bath. Infants need baths only every 2-3 days. Subsequent Supervised/Unsupervised baths by Parents should if possible reflect this.

Babies who are not Level 3 babies in SCN3 or SCN2, who are not in incubators, who are greater than 1500 grams and do not have intravascular devices can have their washes/baths using tap water (apart from their faces which should be washed using sterile water and cotton balls).

Minimal Handling

Ventilated Infants

- Stable: 4-6 hourly repositioning / nappy changes.
- Unstable: 6 hourly position changes / nappy changes. Longer than 6 hours after discussion with senior nursing staff or at direct order from medical staff. These infants should have pressure relieving devices in use.

CPAP Infants

- 3-4 hourly hat releases / repositioning / nappy changes to correlate with feed times.

Infants on full enteral feeds (not on CPAP or Ventilated)



- Continuous milk feeds: 2 hourly observations, 4 hourly PA temperature, 4-6 hourly nappy change and cares.
- 2 hourly feeds: 2 hourly observations, 4 hourly PA temperature, 4-6 hourly nappy change and cares.
- 3 hourly feeds: 3 hourly PA temperature and observations 3-6 hourly nappy change and cares.

References

1. Allwood M. Skincare guidelines for infants aged 23-30 week's gestation: a review of literature Neonatal, paed & Child health Nurs., 2011, 14(1)
2. John Hunter Children's NICU guidelines
3. Lovejoy-Bluem, A. Newborn Skin Care Guidelines. Neonatal Network. 2014, 33(4)
4. Lund, C., Kuller, J., Lane, A., Lott, J., & Raines, D. (1999) Neonatal skincare: Clinical outcomes of the AWHONN/NANN evidence-based practice guideline. J Obstet, Gynaecologic, & Neonatal Nursing, 28(3), 241-254.
5. Lund, C., Osborne, J., Kuller, J., Lane, A., Wright, J., & Raines, D. Neonatal skincare: Clinical outcomes of the AWHONN/NANN evidenced-based clinical practice guideline. J Obstet Gynecol Neonatal Nurs. 2001; 30, (1) 41-51.

Related WNHS policies, procedures and guidelines

Neonatology Clinical Guideline – [Antistaphylococcal Procedure](#)

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