



NCCU CLINICAL GUIDELINES
SECTION: 1

RESUSCITATION AND ADMISSION

Section: 1 Resuscitation and Admission
Weight, length and head circumference measurements
Date Revised: Oct 2013

Neonatology Clinical Guidelines
King Edward Memorial/Princess Margaret Hospitals
Perth Western Australia

WEIGHT, LENGTH AND HEAD CIRCUMFERENCE MEASUREMENTS

WEIGHT

Changes in infant weight provide some indication of growth and fluid balance. Acute changes in fluid balance may be reflected in changes in daily weights, while growth is better reflected in changes in body weight over time.

- All infants are to be weighed on admission to, and discharge from the NCCU.
- Infants requiring intensive care are to be **weighed daily** (unless documented otherwise).
- A neonatal trained nurse should be involved in the weighing of ventilated and CPAP dependent infants. Medically unstable infant may be weighed during the day shift when more staff are available to assist. (Built-in incubator scales are preferable for unstable infants nursed in incubators)
- Daily weighing of stable infants may cause concern over clinically insignificant weight losses/gains, and can be particularly unhelpful as infants near discharge. Infants requiring intermediate care are to be **weighed twice per week** eg. Wednesdays and Sundays
- Infants are weighed prior to washing / bathing to minimise thermal stress.

LENGTH AND HEAD CIRCUMFERENCE

- Changes in infant length and head circumference provide some indication of growth.
- All infants should have their head circumference and length measured at admission.
- The head circumference is then measured weekly and at time of discharge.
- Inform Medical staff of unexpected changes in head circumference.
- If there is an indication for more frequent head circumference measurements (e.g. hydrocephalus) the HC should be measured by the same person (where possible) to promote consistency in measurement.