

Section: Division of Nursing
Approval: _____

* PROCEDURE *

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HACKETTSTOWN REGIONAL MEDICAL CENTER

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NEWBORN SERVICES
(Scope)

TITLE: ADMISSION BATH AND UMBILICAL CORD CARE FOR NEWBORN

PURPOSE: To define nursing care and responsibilities in initiating skin and umbilical cord care for newborn.

- SUPPORTIVE DATA:**
1. All newborn temperature readings must be taken rectally to reflect newborn core care temperature while newborn is under the radiant warmer.
 2. Admission bath is given **only** when newborn core temperature is 98.6 or higher. (The bath is not required as part of the admission assessment.)
 3. Gloves must be worn when caring for newborns until/after this admission bath is given due to body fluid precautions.
 4. As hypothermia is known to contribute to hypoglycemia and/or hypoxia, precaution must be taken to keep the newborn under the radiant warmer for as much of his procedure as possible.
 5. The admission bath provides an additional opportunity for continued assessment of the newborn.
 6. The admission bath provides an educational/teaching opportunity for parents and other family members present.

- EQUIPMENT LIST:**
1. Pre-heated radiant warmer.
 2. Bath items: basin, comb, baby soap, disposable wipes.
 3. Blankets and newborn clothing; undershirt, diaper, hat.
 4. Non-sterile gloves.

- | CONTENT: | PROCEDURE | KEY POINTS |
|-----------------|--|-------------------|
| | <ol style="list-style-type: none">1. As bath is being done, explain each step, demonstrating to parents correct bath procedure. Also explain normal newborn responses to bath process.2. Partially fill bath basin with warm water comfortable to the touch.3. Wet 2 -3 disposable wipes in basin, using one, apply small amount of baby bath soap and work it into the wipe.4. Wash newborn's face in the following order. Rinse well with clean wipe taken from basin. Pat dry gently with warmed blanket. This bath is the only time soap is used on the face .<ol style="list-style-type: none">a. Eyes: Wash each eye from the inner aspect out, using a fresh spot of wipe cloth for each eye.b. Ears: Wash each one.c. Face | |

5. Cleanse newborn's body in the following order, removing blood, body fluids and only excess vernix. The vernix protects the newborn's skin and may leave a raw, unprotected surface if removed. Pay particular attention to body creases. Rinse each area well, using a fresh warm wipe, Pat dry gently before proceeding to next area:
 - a. **Arms and upper body:** Show parents how to cleanse neck area creases in particular.
 - b. **Legs and lower body**
 - c. **Diaper area:** Show parents how to care for especially delicate skin in groin area. For girls, wipe between labia from front to back. Do not scrub out vaginal mucous.

6. Cleanse hair and scalp last.
 - a. May need to change bath water at this point.
 - b. Show parents how to use football hold with newborn wrapped warmly in blanket.
 - c. Holding newborn's head over bath basin.
 1. Wet hair/scalp with water from basin.
 2. Squeeze small amount with baby bath soap directly onto scalp, then lather in well, showing parents how to gently massage scalp, where soft spots are, and how to avoid getting soap into newborn's ears or eyes.
 3. May use comb to gently remove birth debris from hair. Use care on tender scalp.
 4. Rinse clean.
 5. If newborn's hair is a generous amount and there is a lot of birth debris, steps 1 - 4 may need to be repeated. Vernix on pre term newborn's scalp will be very adherent. Allow to remain despite hair not **looking clean**.
 6. Gently dry head and hair, comb hair - show to parents - usually a **photo opportunity !**

7. Replace newborn under radiant warmer, reapply skin probe.

8. Allow newborn to stabilize temperature post - admission bath.
 - a. May retake rectal temperature within 15 minutes to one-half hour after bath.
 - b. Place clean blankets, undershirt, diaper and hat with newborn under radiant heater. Clothing will be pre-warmed; newborn will not lose heat to them.

Fold ears over with finger to prevent water from going into ears.

Clinical symptoms of hypothermia may be subtle and include tachypnea and increased heart rate.

9. When newborn rectal temperature reaches 37 C (98.6 F) or higher, dress newborn and place knitted hat on head under the radiant warmer, using double blankets to wrap, then remove to parent's arms or open crib.
10. Instruct/educate parents and family members about newborn's need to be kept warm, and temperature reassessment that will take place two hours post removal from radiant warmer.
11. Document any additional assessment findings on the newborn admission assessment in Cerner.
 - a. Document time removed from radiant warmer.
 - b. Take and record temperature two hours post-removal from radiant warmer.

Reference:

Varney's Midwifery, Jones and Bartlett Publishers, Inc. , 1997, pp.554-555.

AWHONN Perinatal Nursing, Kathleen Rice Simpson, PHD, RNC, FAAN, And Patricia Cuchan MS,MA,RNC,ACCI , pages 501, 2001