10 CARE OF THE NEONATE

10.2 ROUTINE CARE OF THE NEONATE IN THE WARD

10.2.2 NEONATAL OBSERVATIONS

Keywords: Meconium obs, neonatal measurements, newborn observations, neonatal vital signs, baby obs

AIM

• To ensure appropriate and timely neonatal observations are performed and recorded.

VITAL SIGNS

NORMAL RANGE FOR A NEWBORN

<table>
<thead>
<tr>
<th>Measurement</th>
<th>Normal Range</th>
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<tbody>
<tr>
<td>Temperature</td>
<td>36.5 – 37.4°C</td>
</tr>
<tr>
<td>Apex beat</td>
<td>110-160 beats per minute (bpm)</td>
</tr>
<tr>
<td>Respiration</td>
<td>30-60 breaths per minute</td>
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</table>

TEMPERATURE

• On admission record axillary temperature hourly until three consecutive readings of ≥ 36.5°C have been recorded since birth. If normal, cease measurements unless the clinical situation indicates further monitoring is required.

  See Neonatology Clinical Guidelines, Section 4 Neonatal Temperature Ranges.

• All babies on antibiotics have their temperature recorded prior to a feed. Once the antibiotics have been ceased, record the temperature once per shift for a further 24 hours.

• Instruct the mother on how to take the neonatal temperature. Inform her to report to midwifery staff any abnormal findings.

• Any recordings below 36.5°C or above 37.4°C are recorded in red and the paediatric registrar or resident is notified immediately.

HEART RATE

• On admission record the neonatal heart rate hourly until three consecutive readings have been recorded since birth. If the heart rate recordings are within normal limits, observations may be ceased unless the clinical situation indicates further monitoring is required.

RESPIRATIONS

• On admission record the neonatal respirations hourly until three consecutive recordings have been recorded since birth. If the respirations are within normal limits then recording may cease unless the clinical situation indicates further monitoring is required.

ADDITIONAL OBSERVATIONS

• Operative Birth – no additional observations unless specified.

• Meconium Stained Amniotic Fluid – temperature, heart rate and respirations to be taken at birth, 1 and 2 hours of age and repeated 2-3 hourly before feeds until 12 hours of age.

• Babies at Risk of Early Onset Sepsis (included positive Group B Streptococcal (GBS) culture, GBS bacteriuria, previous infant with invasive GBS disease, ruptured membranes > 18 hours, preterm birth, intrapartum maternal temperature > 38°C).
  
  ➢ Where adequate intrapartum antibiotics have been given for maternal risk factors – temperature, heart and respiratory rates shall be taken at birth then 1 hourly for 4 hours, then before each feed / 4 hourly for 24 hours.
  
  ➢ Where there has been inadequate maternal antibiotic prophylaxis observations as above and refer to the full neonatal guideline for further tests and assessments Infection, Screening and Management of Infection.
- Near Term Newborn Infant (>35 <37 weeks) and / or 2.0kg – 2.5kg
  Temperature at birth then 1 hourly for 3 hours, then 3-4 hourly before feeds until 24 hours of age. Temperature before feeds until the temperature has been within the normal range for a further 24 hours.

**MEASUREMENTS FOR WEIGHT, LENGTH AND HEAD CIRCUMFERENCE**

**WEIGHT**
- All neonates are weighed at birth.
- Daily weights and weight on day of discharge should be performed on all neonates who are:
  - Less than 2500g
  - Small for gestational age – less than the 10th percentile of birth weight for gestation at birth.
  - Pre term
- Neonates >2500g shall be weighed at birth, day 3 and day 5 after birth.

**HEAD CIRCUMFERENCE (HC)**
- Measure HC at birth
- Measure HC on day of discharge if:
  - Any birth trauma has occurred causing alteration of normal expected HC e.g. haematoma or caput

**LENGTH**
- Measure length at birth

**REFERENCES (STANDARDS)**


National Standards – 1- Care provided by the clinical workforce is guided by current best practice
2- Recognising and Responding to Clinical Deterioration

Legislation - Nil

Related Policies - Nil

Other related documents – KEMH Clinical Guidelines, Section:
- **B: 10.2.7 Management of the Neonate with a Temperature Below 36.5°C**
- **NCCU Section 1: Newborn Resuscitation Algorithm**

**RESPONSIBILITY**

<table>
<thead>
<tr>
<th>Policy Sponsor</th>
<th>Director of Nursing and Midwifery</th>
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<tbody>
<tr>
<td>Initial Endorsement</td>
<td>September 2001</td>
</tr>
<tr>
<td>Last Reviewed</td>
<td>September 2014</td>
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<tr>
<td>Last Amended</td>
<td>November 2014</td>
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