#### Mini-Medical School



## Care for Premature Infants at Home

# 早產兒居家注意事項(英文)

### **Bathing Guidelines**

- Add cold water before adding hot water. Use the inner side of elbow or wrist to test the temperature.
- Do not take a shower in 1 hour after feeding and keep the room temperature warm.
- Clean the skin wrinkles such as neck, armpit, crouch, and genital parts.
- Prepare the wrapping towel, cloth and diaper before taking a shower. Place the large towel nearby for use.

## Milk Feeding Guidelines

- The water used for brewing baby's formula milk must be boiled/filtered/sterilized at the temperature of 70°C.
- Add water, followed by formula milk.
- Use the spoon enclosed in powdered milk to scoop the milk powder.
- Take frequent small meals. For example, change from 60cc per every 4 hours to 40cc or 50cc per every 3 hours.
- Allow the infants to rest and burp according to their condition. Infants do not need to be fed once but can be fed in separate times.
- It is best feed the infants while holding the infants while they can take semi-sitting position.
- Pay attention to the infant's condition at all time. In the event of cyanosis or fast breathing, stop feeding milk for a

- while and only continue to feed after the infants have restored to normal condition.
- After feeding, pad the infant's back to burp. Allow the infants to lie on the side, lift the head and observe for milk spill.

## Milk Choking Treatment

Infants tend to cry, are anxious, have black face or breathing stop. The veins on the face the neck are clearly congested with the lips appear to be blue

- Provide infants with oxygen if available at home.
- Tilt the infant's head on one side for the milk to flow out.
- Place the infant in prone position so the head is lower than the lung, percuss the shoulder and scapula continuously with the root of the palm.
- At the hospital, draw the milk out; at home, use suction ball to draw the milk or sputum inside the mouth.
- If the infants are unconscious with black lips and without breathing and heartbeat, conduct CPR immediately (cardio pulmonary resuscitation).

## Change of Milk

New milk 1/3 + Existing milk 2/3(feeding 2 days without adverse reaction)

- $\rightarrow$ New milk 1/2 + Existing milk 1/2 ( feeding 2 days without adverse reaction )
- →New milk 2/3 + Existing milk 1/3 (feeding 2 days without adverse reaction)
- → Full measurement of new milk.

## Infection Prevention

- Wash hands before touching the infants.
- Shower and change cloths daily.
- Keep the air circulated in the room and second-hand smoking is prohibited.
- Access in and out of public area prohibited.
- Keep the infants isolated if someone in the house catches a cold. The main caregiver shall wear a mask.

### **Body Temperature Measurement**

- Armpit temperature: Place the thermometer on the back until the body temperature is displayed (different time is needed for display by different brands).
- Back temperature: Place the thermometer on the back until the body temperature is displayed (different time is needed for display by different brands).
- Normal body temperature : 36.5 °C ~ 37.5 °C (armpit temperature, ear temperature).

#### Fever Treatment

- When the body temperature is higher than 37.5 °C, remove some clothes and blanket, adjust the room temperature and measure again in 30 minutes.
- If the body temperature is still higher than 37.5 °C, wipe the body with lukewarm water and measure the body temperature again in 30 minutes.
- If the body temperature is higher after wiping the body with lukewarm water, please proceed to the hospital for treatment and do not take medicine that has not been prescribed by physician.

## Skin Tone Observation

- Pale: The facial tone is whiter than the average infants, frequently caused by anemia.
- Cyanosis: The area surrounding the lips is slightly black when crying due to deficiency inn blood oxygen concentration.
- Jaundice: The skin of the whole body appears to be yellow. Jaundice infants will recover the skin tone to normal color through lighting treatment. Observe for other diseases if the skin tone continues to be yellow after a few days (i.e. liver and gallbladder disease or G6PD deficiency).

Before the G6PD screening results come out, keep infants away from gentian violet, mothball and bleach. In case of hemolysis due to accidental contact, seek for medical assistance immediately.

### Stool Observation

• Abnormal Color: Black, red, white, grey, and light yellow. Refer to the Stool Card on Infants' Manual.

- Abnormal State: Water stools, sour and foul odor, and hardened stool texture.
- Abnormal Times:

Diarrhea: The number of defecation per day is more than usual (approximately 10 times).

Constipation: No defecation over 3 days.

### Effect of Medicine and Administration

- Different infants have different medication use. Please discuss with the attending physician of your infants for relevant medication.
- Ferrum Hausmann (iron):

1 ml contains 50 mg iron, which is quickly absorbed and an ideal therapeutic agent for various iron-deficient anemia.

Take medicine in 30 minutes before feeding. Best absorption with empty stomach.

Do not take it with medicine to avoid iron absorption.

Do not store in area under temperature higher than 25  $^{\circ}$ C. Start administering in 3  $\sim$  4 weeks after feeding.

Dosage:	Times/Day,	Drip/Day,	Administration time:	

## Preventive Vaccination

The immune system of premature infants is worse than that of full-term infants and hence will require regular vaccination to avoid the infection of severe disease. However if the infants have not received vaccination due to treatment during hospitalization, the physician will evaluate the vaccination time upon discharge and families can refer to the yellow card on the Infants' Manual for actual injections (Vaccination Schedule and Records).

### Outpatient Tracing

- The physicians will arrange infants with first revisit to follow up and families should bring the infants on scheduled time. The physician will diagnose and evaluate the home care condition so the physician will know more about the conditions of infants upon returning home and families will not need to worry.
- Premature infants born in weeks less than 34 weeks shall routinely return to outpatients for tracing of retinopathy of prematurity.

#### Protection of Oral and Anal Mucosa

- Infants do not need to brush teeth. Families can use clean gauze and dampen with water to clean the oral of the infants in order to remove milk stain.
- Infants' skin is more delicate and can be applied with Vaseline on the anus after changing the diaper each time to avoid red buttocks due to the stimulation from stool.
- In case there is rash or severe redness and skin ulcer on the anus, please stop the use of Vaseline immediately and take the infants to the nearest hospital and clinic for professional physicians to evaluate and prescribe special ointment or Chinese medicine powder for use on red buttocks. Apply the ointment or sprinkle the medicine powder after changing the diaper and cleaning.

### Use of Oxygen

- Use oxygen concentration monitor according to physician prescription to maintain the blood oxygen concentration of the infants within the scope needed.
- No smoking allowed in the room using oxygen to avoid explosion.
- Use oxygen flowmeter specifically for premature infants to avoid excessive flow.
- The flow is subject to the center of flow sphere.
- Adjust the oxygen by  $0.5 \sim 1$  l/min.

### Use of Blood Oxygen Monitor

- The average blood oxygen falls between 90  $\sim$  95 %, with upper limit of 100 % and lower limit of 85 %.
- The upper limit to the average heart rate is mostly 200 times/minute and the lower limit are 100 times/minute.
- In case of alarm, pay attention to the heart rate and blood oxygen concentration displayed on the monitor while paying attention to the changes in skin color of infants, mentality and respiration. Sometimes it is an error caused by the poor contact of sensor cable connecting to the body that could not detect the actual heartbeat. However if the skin color of the infants becomes black or purple without breathing or reaction, refer to the treatment for Basic Life Support on Infants.

For any question, please contact with us. Contact number: (04)22052121 EXT. 2652 Neonatal Intensive Care Unit

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