

## NEONATAL NURSING PROCEDURE FOR ADMISSION TO NEONATAL UNITS

<b>Key Document code:</b>	WAHT-KD-015	
<b>Key Documents Owner:</b>	Dr Vivianna Weckemann	Consultant Paediatrician
<b>Approved by:</b>	Neonatal Guidelines Review Meeting	
<b>Date of Approval:</b>	11 <sup>th</sup> November 2022	
<b>Date of Review:</b> <b>This is the most current version and should be used until a revised document is in place</b>	10 <sup>th</sup> May 2026	

### Key Amendments

Date	Amendments	Approved by
November 2022	Document approved for 3 years with no amendments	Dr Gregory/ Neonatal Guidelines Review Meeting
10 <sup>th</sup> November 2025	Document extended for 6 months to allow time for review and update	Susan Smith

## INTRODUCTION

This provides guidelines for the admission of babies to Neonatal Units. The order of care is dependent on the baby's clinical condition. Preparation for admission enables the procedure to be less stressful and easier to carry out.

**Use in conjunction with guideline WAHT-NEO-009, which identifies, babies who will require admission to Neonatal unit**

## COMPETENCIES REQUIRED

This procedure may be undertaken by any qualified nurse/midwife working on the Neonatal Unit.

## PATIENTS COVERED

This guideline applies to babies on neonatal Units at Alexandra Hospital and Worcester Royal Hospital.

## GUIDELINE

### Equipment

- Clean cot/Incubator
- Admission tray
- Nursing documentation

### Procedure

- Check the baby's identification bracelets and cot card to ensure patient safety

## **WAHT-KD-015 Neonatal Key Documents**

- Commence heart rate, breathing and pulse oxymetry monitoring
- Record weight and if not already done to obtain baseline measurements
- Record temperature and repeat as necessary
- Record blood sugar and repeat as necessary
- General observations of breathing (tachypnoea, recession), colour and movements – record/document
- Record if baby has passed urine or had bowels open prior to admission

### **Vitamin K**

Vitamin K to be administered soon after birth (refer to guideline *WAHT-NEO-006*) with parental consent, if not already administered on delivery suite

### **Documentation**

Once baby's condition stable, complete documentation

- Nursing care plan, admission book/chart
- Badger database
- Bed state
- Ensure all maternal details required are noted on neonatal record

### **General Information**

- Discuss method of feeding with parents – breast or bottle and ask parents for their informed choice of branded formula
- Discuss and inform parents of baby's condition. Plan care with parents and discuss their involvement in their babies care and document on care plan
- Take a photograph of the baby if very sick, or requiring transfer or mother unable to visit unit

### **Information**

- A Nasogastric tube should be passed in babies:-

<35/40 weeks as these babies will need help feeding

Any babies who require a chest X-ray use a radiopaque gastric tube

When respiratory symptoms evident to ensure stomach empty to prevent further respiratory embarrassment

- MRSA screen on all transfers in from another hospital.

**WAHT-KD-015**  
**Neonatal Key Documents**

- Doctors to clerk baby as per policy

**MONITORING TOOL**

STANDARDS:

Item	%	Exceptions
Correct documentation completed for admission	100%	
How will monitoring be carried out?	Audit of records	
When will monitoring be carried out?	Continuously	
Who will monitor compliance with the guideline	SCBU/NNU nurses/midwives	

## **REFERENCES**

Halliday H.L., McClure B.G., Reid M. (1998) Handbook of Neonatal Care 4<sup>th</sup> ed London: W.B. Saunders

Kelnar C.J.H., Harvey D., Simpson C. (1995) The Sick Newborn Baby 3<sup>rd</sup> ed London: Bailliere Tindall

Yeo H. (1998) Nursing the Neonate London: Blackwell Science

## **CONTRIBUTION LIST**

### **Key individuals involved in developing the document**

<b>Name</b>	<b>Designation</b>
Coreenna Bowers	Neonatal Practice Development Nurse
Cee Sheridan	Ward Manager ALEX
Vicky Bullock	Ward Manager WRH
Dr John Scanlon	Clinical Director
Dr Andrew Short	Neonatologist
Dr Andrew Gallagher	Neonatologist

### **Circulated to the following individuals for comments**

<b>Name</b>	<b>Designation</b>
All Consultant Paediatricians	

### **Circulated to the chair of the following committee's / groups for comments**

<b>Name</b>	<b>Committee / group</b>
Mrs Jacqui Fernell	Nursing Guidelines Group