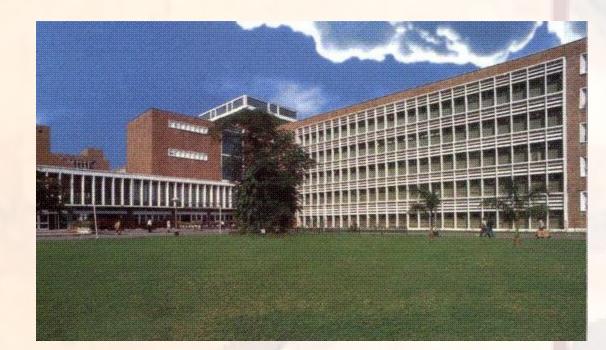
Kaushal M, George G, Aggarwal R, Agarwal R, Paul VK, Deorari AK, WHO Collaborating Center for Training and Research in Newborn Care, All India Institute of Medical Sciences, New Delhi, India



Initial & ongoing skin assessment Color of skin

Rash, breakdown, pressure sores Monitor probe, IV sites

SKIN CARE IN VLBW BABIES

Principles

- Maintain integrity of skin
- Prevent risk of skin injury
- Management of skin injury

MAINTAIN INTEGRITY OF SKIN

Provide appropriate bedding and support using soft bedding. **Turn and position the infant** Sick infants with intact skin: Turn 3-4



No bath

Avoid emollients and creams. If used it should be non-perfumed, nonirritating, and hydrophilic e.g. aquaphor

hourly Infants with skin breakdown: Turn 2 hourly

> Contain the baby in a cotton cloth boundary

PREVENT RISK OF SKIN INJURY

Avoid spilling betadine as it can burn the skin



Pull the adhesive parallel to the skin and apply water to the skin adhesive interface as the tape is folded on itself.



Care givers should hand wash properly:

Simple, Cost effective

^{*} Use a mild soap/solution not containing any anti-microbial agent.

^{*} For two minutes before entering and for 30 seconds before and after touching the baby

Surgical scrubbing: Not recommended

While fixing ET tube, apply tegaderm on the skin before putting dynaplast



Skin preparation First apply spirit, let it dry then apply betadine. Wait for a minute then wipe it off with spirit After the procedure, remove completely with sterile water. Take care not to spill and collect at back of baby.

Tape

Apply tape in minimal possible area

of skin.

Once tape is applied, remove it only after 24 hr.

Do not bandage after venepuncture for hemostasis.

Spray healex on skin before tape application.

Avoid bonding agents such as tincture benzoin.





Use transparent dressing/ tegaderm for fixation of IV canula

Optimize wound healing

- Maintain physiological stability
- Maintain thermal neutral environment
- Ensure adequate nutritional intake Keep wet skin lesion dry and dry

MANAGEMENT OF SKIN INJURY

Skin excoriation

- ²⁰ Determine the cause
- Wash area with warm water
- ²⁰ If lesions are open: apply bacitracin ointment or with a petroleum gauze Intertrigo

Diaper dermatitis

^e Use cotton diapers, change frequently

Clean perineal area with warm water and let it dry to air. Baby wipes containing alcohol and perfumes not recommended * Apply protective ointments containing zinc

skin lesion wet

Clean area with warm water

²⁰ Dry the skin

Promote aeration in the area using neck rolls, soft gauze etc.

oxide (40%) liberally to affected area * Nystatin cream to be applied if fungal infection suspected ^a Do not put baby powder

CONCLUSION

Simple neonatal care practices will help maintaining a healthy and intact skin in VLBW babies