



Safety Notice 015/11

Bathing of Newborn Babies and Infection Prevention

10 November 2011

Distributed to:

- Chief Executives
- Directors of Clinical Governance

Action required by:

- Directors of Clinical Governance

We recommend you also inform:

- Directors of Obstetrics
- Directors of Surgery
- District Directors of Nursing and Midwifery
- Midwifery Unit Managers
- Infection Control Professionals

Expert Reference Group

Content reviewed by:

- Maternal and Perinatal Health Priority Taskforce
- Clinical Midwifery Council
- Maternity, Children and Young People's Health Branch
- Clinical Safety, Quality and Governance Branch

Clinical Safety, Quality and Governance Branch

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Internet Website:

<http://www.health.nsw.gov.au/quality/sabs/>

Intranet Website:

<http://internal.health.nsw.gov.au/quality/sabs/>

Background

Standard precautions are defined as work practices that constitute the first-line approach to infection prevention and control in the healthcare environment. These are recommended for the treatment and care of all patients. These practices include hand hygiene, appropriate use of personal protective equipment, safe use of sharps, aseptic technique, environmental hygiene, management of laundry and waste.

These practices are in place to reduce the risk of transmission of micro-organisms from both recognised and unrecognised sources of infection in the healthcare setting.

Contributing Factors

While standard precautions apply to all patients, application must be guided by an understanding of normal or resident skin flora and transient flora which is acquired from staff, other patients and visitors, and the healthcare environment.

However, it must be noted that:

- Newborn babies require maintenance of normal skin flora to protect them from infection. Bathing a baby immediately after birth removes the normal skin flora and exposes baby to infection.
- Newborn babies take some time to regulate their body temperature. Bathing a baby immediately after birth can lead to hypothermia.
- Bathing a baby immediately after birth interferes with recommended skin-to-skin contact between baby and mother, and the establishment of infant feeding.

Suggested strategies

Routine bathing of the newborn immediately after birth is not recommended, except when there is a risk of vertical transmission of an infection from the mother, such as hepatitis B, hepatitis C or HIV, as per local protocols.

References / Other useful information can be found at:

- (2010) Cunningham FG, Leveno KJ, Bloom SL, et al. "Chapter 28. The Newborn Infant". Williams Obstetrics, 23e: <http://proxy14.use.hcn.com.au/content.aspx?aID=6028742>
- (2010) Pairman S, Tracey S, Thorogood C & Pincombe J. Midwifery: preparation for Practice, 2e. Churchill-Livingstone: Australia
- (2009) Royal Australian and New Zealand College of Obstetricians and Gynaecologists. College Statement C-Gen3: Hepatitis B.
- (2009) Royal Australian and New Zealand College of Obstetricians and Gynaecologists. College Statement C-Gen 4: Hepatitis C.
- (2006) National Institute for Health and Clinical Excellence (NICE) Clinical Guideline 37: Routine postnatal care of women and their babies.

Suggested Actions by Local Health Districts/Networks

1. Distribute this Safety Notice to all relevant clinical staff.
2. Audit local newborn routine bathing practices.
3. Review and revise local protocols in line with this Safety Notice.
4. Ensure local protocols and practice promote skin-to-skin contact with both parents.
5. Ensure staff are aware that further information is available via the CIAP website at <http://www.ciap.health.nsw.gov.au> or <http://internal.health.nsw.gov.au>.