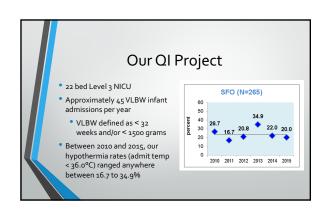
### Heat Loss Prevention in Very Low Birth Weight Infants Jeannie Chan, RN, MS, CNS, NNP-BC NCANN STABLE & Neonatal Hot Topics AUGUST 2017

# Objectives Upon completion of this lecture, the learner will be able to: Define potential outcomes for the VLBW infant with hypothermia Describe methods and degrees of heat loss Identify interventions to prevent heat loss in the VLBW infant

### Outcomes Admission temperatures below 36°C are associated with increased mortality and late onset sepsis For each 1°C decrease in admission temperature below 36°C 28% increase in mortality 11% increase in LOS Moderate hypothermia in VLBW infants also associated with Persistent Pulmonary Hypertension (PPHN) Moderate to severe Bronchopulmonary Dysplasia (BPD) Intraventricular Hemorrhage (IVH)



# Our Goal In Fall of 2015 we set our goal: To decrease our hypothermia rate in our VLBW infants by at least 50% Goal admission temperature = axillary temperature between 36.5°C to 37.5°C within the first hour of admission to our ICN



### Brief Timeline of Events 10/2015: Developed staff checklist (ensure use of porta warmer mattress, NeoWrap, Giraffe Shuttle) Identified RN barriers to success Staff education on use of equipment and products 11/2015: Agreement with Obstetricians - OR temp locked in at 74 degrees 2/2016: ICN Staff Skills Days Training – code simulation included VLBW infants and emphasis on heat loss prevention

6/2016: changed to Trans Warmer Infant Transport Mattress (previous squeeze activation mattress difficult to activate)

5/2017: OB concern that OR too warm, possibly contributing to surgical site infections, so OR temps now decreased and locked at 72 degrees

5/2016: added polyethylene lined thermal hat

### Prevention strategies

- Approaching all angles of potential heat loss and ensuring we are doing everything possible to prevent heat loss - Heat Loss Prevention Bundle
- Prevent Conductive Heat Loss
- Prevent Convective Heat Loss
- Prevent Radiant Heat LossPrevent Evaporative Heat Loss
- Checklist and standardization of care

## Prevent Conductive Heat Loss Pre-warm Giraffe Isolette, specific beds designated as VLBW Admission Beds Portable warming mattress TransWarmer Mattress Easy to activate and maintains heat of 204°C for up to two hours Polyethylene lined hat

### Prevent Convective Heat Loss

- Maintain a constant heated operating room and resuscitation room
  - 72°F degrees in OR
  - 74°F degrees in Resuscitation Room
- Use of polyethlene wrap around baby
- $\ ^{\bullet}$  Without drying, wrap baby with the plastic wrap or place them in a bag
- Place a polyethylene lined hat onto baby's head
- Minimize traffic around resuscitation bed with "Red Tape" area for NICU Team only

### Prevent Convective Heat Loss (cont.)

- Resuscitate on the same bed that the baby will be transported on and then admitted in, avoiding transferring of baby from one bed to another.
- Use of Giraffe Shuttle to transport
- Use of warm humidified oxygen during transport when possible (i.e. transporting on bubble CPAP)

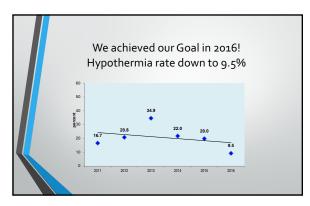


# Prevent Evaporative Heat Loss Use of polyethylene wrap and lined hat Heated and humidified oxygen during transport Start humidity as soon as possible









### Preliminary Data for 2017 • For 2017 our goal was to decrease hypothermia rates by another 50% • So far we have achieved that goal: • 33 babies born so far this year • 1 baby with low temp < 36.5 • Hypothermia rate so far is 3% for this year!



### References

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