

ASSESSMENT:

Jaundice

Visual assessment

___ 3-5 Head only ___ 5-10 Trunk ___ 10-12 Extremities ___ >12 Palms and soles

Laboratory assessment of bilirubin levels:

Date _____ Level _____

Date _____ Level _____

Treatment _____

Frequency of stools _____ Color of stools _____

Risk factors

American Indian or East Asian ethnicity, bruising at birth, prematurity, blood type incompatibility

RECOMMENDATIONS: (check all that apply)

Nurse frequently, 8-12 times per 24 hours. This may require waking baby for feeds

Wake baby up well before feedings

Undress baby to diaper

Change diaper

Stimulate feet, up and down spine, head

Cool cloth to forehead

Rock baby from lying to sitting position until eyes open

Remove baby from isolette for feedings (may remove eye covers)

Nurse with bili blanket on or bili light over mom/nursing parent and baby (leave eye covers on baby)

No supplements of formula or water unless ordered by pediatric provider

Supplementation technique Supplement _____ ounces/milliliters per 24 hours

Paced bottle feeding, cup or spoon, supplement at the breast, finger feeding

Handout given _____

Use alternate feeding method if infant is placid and difficult to awaken or loses weight

Assure let-down reflex

Establish routine for nursing, relaxation

Sit in same place, drink, music, visual imagery, get comfortable

Place infant in a sunny window wearing only diaper (works best on an adult caregiver's chest to assure baby does not get chilled)

Keep intake/output log

Use hospital grade electric pump _____ times per 24 hours, to support milk supply, if baby is sleepy

Use hospital grade electric breast pump and express 8-12 times in 24 hours, if baby is temporarily not feeding at the breast

Follow-up with pediatric provider for evaluation of serum bilirubin level. Follow up with lactation consultant in ___ days via phone, text, patient portal, office, home.

Other _____