



THERMAL WEANING – INCUBATOR TO OPEN CRIB TRANSFER OF INFANT (NEONATAL)

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Critical Points

- 1. The goal of thermal weaning is to evaluate the infant's ability to maintain an axillary temperature of 36.5 to 37.5°C in an open crib without an increase in caloric expenditure as assessed by normal growth.
- 2. RNs can initiate thermal weaning without a provider order; however, an assessment of readiness should be made in collaboration with the medical team.
- 3. Guidelines for initiation of thermal weaning include:
 - Weight = more than 1600 grams
 - Age 32 weeks or more and appropriate size for gestation
 - Medically stable (no increase in apnea or bradycardia episodes)
 - Able to maintain a stable axillary temperature of 36.5 37.5°C in air mode of the incubator
 - Sustained weight gain of 15-30 grams per day
- 4. Infants transitioning to an open crib should not be placed near a window or drafty area.
 - Infants weaned to open cribs are dressed at all times.
- 5. Success of weaning is measured by the infant's weight gain, temperature stability, and clinical condition after weaning.
- 6. Larger preterm infants may be cared for in an incubator for improved observation, concern about weight gain, or with a provider order.

Equipment

Crib or bassinette

Procedure

THERMAL WEANING

- 1. Assess readiness criteria, including minimal weight, stability, and growth for the past week.
- 2. Dress infant in shirt, diaper, and swaddle/cover with 1-2 blankets.
- 3. Change incubator mode to air control.
- 4. Monitor and record infant's axillary temperature one hour after the change, then every 3-4 hours if stable.
- 5. Lower incubator temperature by 0.5 to 1°C daily until 25-26°C (77-78.8°F) is achieved.
- 6. Place infant in open crib when infant has been in incubator on air control at 25-26°C for a minimum of 24 hours with stable axillary temperatures within target range.
- 7. Monitor infant's temperate one hour after being placed in open crib

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- 8. Dress infant in appropriate clothing and use up to two blankets to maintain temperature.
- 9. Consider omitting bath on the first day in an open crib.
- 10. Return infant to incubator if infant:
 - Cannot maintain axillary temperature of at least 36.5°C with 2 blankets
 - Develops an increased oxygen requirement
 - Is medically unstable
 - Loses weight or fails to gain weight
 - Develops difficulty in feeding
 - As determined by the medical team
- 11. Notify Provider of infant's failure to tolerate weaning.

DOCUMENTATION

1. Document infant's tolerance or intolerance of procedure in a nursing note.

Troubleshooting

Problem	Suspected issue	Action
Inability to maintain temperature within 36.5 to 37.5 °C range	Thermal stress from environment	 Confirm room temperature is between 72 –78°F in the nursery. Confirm area is draft-free and crib is away from windows. Consider checking blood glucose to screen for hypoglycemia associated with cold stress.
 Change in physiologic status, such as: Respiratory Distress Apnea Bradycardia Failure to gain weight 	 Thermal stress, intolerance of weaning 	 Check temperature Notify Provider Place infant back into incubator.

References

e	Level*	Reference
of Evidence	E3	Barone, G., Corsello, M., Papacci, P., Priolo, F., Romagnoli, C., & Zecca, E. (2014). Feasibility of transferring intensive cared preterm infants from incubator to open crib at 1600 grams. <i>Italian Journal of Pediatrics,40</i> (1), 41. doi:10.1186/1824-7288-40-41
Level o	E2	New, K., Flint, A., Bogossian, F., East, C., & Davies, M. W. (2011). Transferring preterm infants from incubators to open cots at 1600 g: A multicentre randomised controlled trial. <i>Archives of Disease in Childhood - Fetal and Neonatal Edition</i> , <i>97</i> (2). 88-92. doi:10.1136/adc.2011.213587

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THERMAL WEANING (continued)

E1 New, K., Flenady, V., & Davies, M. W. (2011). Transfer of preterm infants from incubator to open construction lower versus higher body weight. Cochrane Database of Systematic Reviews. doi:10.1002/14651858.CD004214.pub4 * FAME Scale details: See nursing policy, Procedure, & Competency Development, Review, & Approval		E1	
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Procedure History

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