

UMBILICAL CORD CARE - SCH

PRACTICE GUIDELINE[®]

DOCUMENT SUMMARY/KEY POINTS

- Meticulous hand washing must be attended by parents and nursing staff when attending to cord care.
- The umbilical cord stump must be dried thoroughly after bathing.
- The umbilical cord stump should be kept out of the nappy to prevent soiling and promote drying.
- The skin/cord junction will be cleaned with sterile water, unless heavy discharge is present.
- Alcohol is generally not to be used for cleaning the cord or stump, however aqueous chlorhexidine solution may be used if skin/cord junction has a heavy discharge or has an offensive odour and a swab has been taken for culture.
- Cord clamps are to be removed at 24 - 48 hours post delivery with a clean cord cutter

CHANGE SUMMARY

- Document due for mandatory review.
- Replaces SCH document C.9.04 ***Umbilical Cord Care – SCH***
- No change in practice

READ ACKNOWLEDGEMENT

- All SCH clinical nurses who care for newborn infants (neonates) need to read and acknowledge this document

This document reflects what is currently regarded as safe practice. However, as in any clinical situation, there may be factors which cannot be covered by a single set of guidelines. This document does not replace the need for the application of clinical judgement to each individual presentation.

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| Approved by: | SCHN Policy Procedure and Guideline Committee | |
| Date Effective: | 1 st October 2015 | Review Period: 3 years |
| Team Leader: | NUM | Area/Dept: C2S Infant Surgical Unit SCH |

Standard

1. Meticulous hand washing must be attended by parents and nursing staff when attending to cord care.
2. The umbilical cord stump must be dried thoroughly after bathing.
3. The umbilical cord stump should be kept out of the nappy to prevent soiling and promote drying.
4. The skin/cord junction will be cleaned with sterile water, unless heavy discharge is present.
5. Alcohol is generally not used for cleaning the cord or stump as it delays separation of the cord stump, however 0.5% aqueous chlorhexidine solution may be used if skin/cord junction has a heavy discharge or has an offensive odour and a swab has been taken for culture.
6. Cord clamps are to be removed at 24 - 48 hours post delivery with a clean cord cutter.

Umbilical Cord Management

Cord stumps are initially glistening blue or white in colour. Upon contact with air they quickly dry and within twenty-four (24) hours become stiff and a dull yellow-brown. Later it may turn black-brown and shrivel considerably. The cord stump separates from the umbilical area by a process of dry gangrene. This usually occurs five (5) to ten (10) days after birth.

Note: Never attempt to remove the cord forcefully.

The general principle of umbilical cord care is the area should be kept clean and uncovered to promote healing and drying.

Procedure for Umbilical Cord Care

This procedure may be completed by registered or enrolled nurses

1. Remove nappy.
2. Wash hands.
3. Observe cord area, after bathing and with each nappy change.
4. After each bath dry the skin/cord junction thoroughly with a cotton bud, and instruct mothers to do same.

Note: Parents should be advised to dry baby after a bath with a towel and around the umbi area. Cotton buds are not used – the skin/cord junction is not disturbed to allow natural separation to occur.

5. If the area is soiled, e.g. with urine or faeces clean the skin/cord junction with sterile water and cotton bud.
6. Replace nappy, leaving umbilical cord area exposed.
 - o If skin/cord junction has a heavy discharge or is foul smelling notify the medical officer, and obtain a dry swab.
 - o Clean the skin/cord junction with 0.5% aqueous chlorhexidine solution using cotton buds, repeat this every four hours until the area is clean and dry.

Procedure for Cord Clamp Removal

1. Remove nappy.
2. Observe cord area, and clean if required prior to clamp removal.
3. Open clean cord clamp cutter pack.
4. Wash hands
5. Place cord clamp cutter on the hinged side of the clamp, and cut off the clamp.

Note: The cord should not bleed when clamp is cut off.

6. If bleeding occurs and does not cease within a few minutes notify the medical officer as the cord may need to be re-clamped and observed closely.
7. Continue to keep area dry and uncovered until skin/cord junction separates.

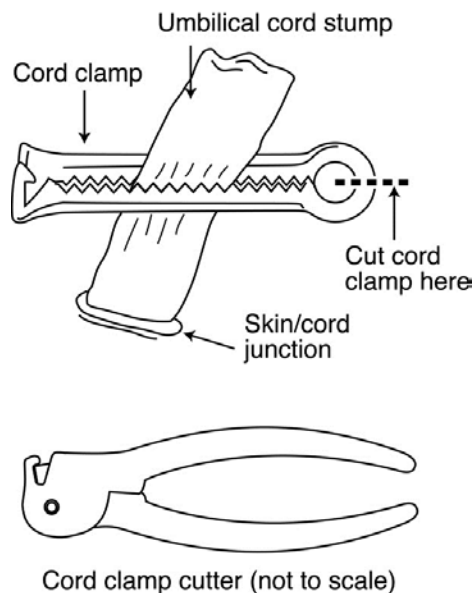


Figure 1. Umbilical cord stump and cord clamp cutters

Potential for Complications

- Bleeding at the skin/cord junction may occur but should only be slight
- Cord/skin junction separation may be delayed up to 20-30 days due to infection or moisture.
- Consult medical officer if complications arise.

Outcome

Infants will receive effective care of their umbilical cord area.

Reference:

1. Merenstein, G.B & Gardner, S.L. Handbook of Neonatal Intensive Care 7th ed. 2011, Mosby, St Louis..

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