



TEN STEP TUESDAY

Safe Skin-to-skin Positioning

Proper positioning during skin-to-skin contact is essential for the safety of our patients. Please review the checklist below and consider your practice as you support Step 4 of the Baby-Friendly Hospital Initiative.

Safe Positioning Guide During Immediate and Uninterrupted Skin-to-Skin Care



- Mother or provider of skin-to-skin care should be in reclining position, not flat
- Infant's back should be covered, and hair should be dry
- Infant is in a well-flexed position on chest
- Infant and mother/provider are chest to chest. Infant should not be over a breast
- Infant's head is turned to one side
- Infant's face, nose, and mouth are visible and uncovered
- Infant's neck is straight, not bent (sniffing position)
- Infant and mother are awake and alert*

* Staff should monitor continuously and if the mother/provider becomes sleepy, ill or unable to continue to hold their infant. Staff should intervene to prevent accidental falls or suffocation.

Tip: Engage family members in discussions so that they can play an active part in safety and alerting staff if conditions change suddenly.

Source: Ludington-Hoe, S. M., & Morgan, K. (2014). Infant Assessment and Reduction of Sudden Unexpected Postnatal Collapse Risk During Skin-to-Skin Contact. *Newborn and Infant Nursing Reviews*, 14(1), 28-33. doi:10.1053/j.nainr.2013.12.009

Photo excerpted from Ready, Set, Baby Prenatal Education Curriculum