

Orders, Communication and Documentation

Team discussion is had to ensure safety criteria is met and parents are informed.

Typical discussion includes that the baby is stooling appropriately, no concerns for pathology and checking the latest x-ray for radiology confirmation of normal bowel gas pattern. RN confirms no skin concerns on the trunk.

Parents are provided information regarding the rationale of the belly band and things to keep an eye out for including skin issues, change in digestion or breathing that is atypical.

As this is an adjunctive therapy, nursing and parents are given permission to remove it with any concerns and to notify therapy if it is removed with the reason. This is atypical as parents tend to see improved comfort and RNs tend to see improved stooling and decreased distension. However, if the baby has a change in status that is a concern such as appearing to breathe faster, an acute change in abdominal or GI assessment, or develops a skin issue, it is appropriate to remove the support and consult with therapy and the team before continuing.

Ordering

It is recommended to modify the original therapy order to add initiation of abdominal support with the provider that day signing the update.

Nursing communication

(This may be a non-physician order after physician order is added to PT or OT order for abdominal support use. This allows the therapist to provide any individualized instructions. Check your facility process for the equivalent in your setting.)

For example:

Please place and wear belly band per instructions. Continuous wear is recommended while on CPAP. Take nightly abdominal circumference 1cm above the umbilicus. Hold the tape to allow the baby to breathe in and out and read on the exhale. If weaned from CPAP to high flow or room air, please continue 6 on 6 off wear until therapy can re-assess. If RN or parent concerns arise, remove, notify therapy with reason for removal and await team discussion. Thank you.

Open an LDA or equivalent flowsheet to track wear and skin. See bedside instructions for an example.

Therapy should document progress at least weekly.