

POSITIONING

WHY POSITION?

- Enables sleep
- Promotes brain development
- Optimises muscle/joint development
- Decreases energy expenditure
- Enhances bone mineralisation
- Enables self regulation
- Enables midline awareness
- Promotes motor development

Assess:

- Flexed?
- Symmetrical?
- Free movement with recoil?
- Contained?
=The "Awe" Factor



Use a Variety of Positions

- Promotes symmetry
- Enhances vestibular experience
- Supports proprioceptive development
- Enhances head shaping
- Supports Respiration



Nests

- Fold don't roll
- Chest drain (boundary reduced at drain site **only**)
- Boundary essential for recoil and bone/muscle development
- Cooling - due to low tone, use rolls to support limb position

Positioning + Getting ready for home

- Safe Sleep
- Lullaby Trust
- Prior to discharge position babies to sleep on their back only
- No rolls/gels/boundaries when off monitor

TALK, TOUCH THEN MOVE

Knowledge nugget

- Muscle Tone develops from feet (33-35 weeks) towards upperlimbs (35-37 weeks) and from distal to proximal.
- Trunk tone emerges closer to term
- This highlights the importance of developmentally appropriate supportive positioning.

- Boundary in close contact with back
- Back rounded

SIDELYING



- Shoulders rounded
- Hands to Face
- Chin tuck 10 deg

- Pelvis, hips and knees flexed and aligned

PRONE

- Rounded shoulders
- hands to face



Back rounded

- Hips/knees flexed >90deg with toes pointing to each other

- Use a **support** - "Birdy" positioner or folded muslin
- Support placed from belly button to top of head

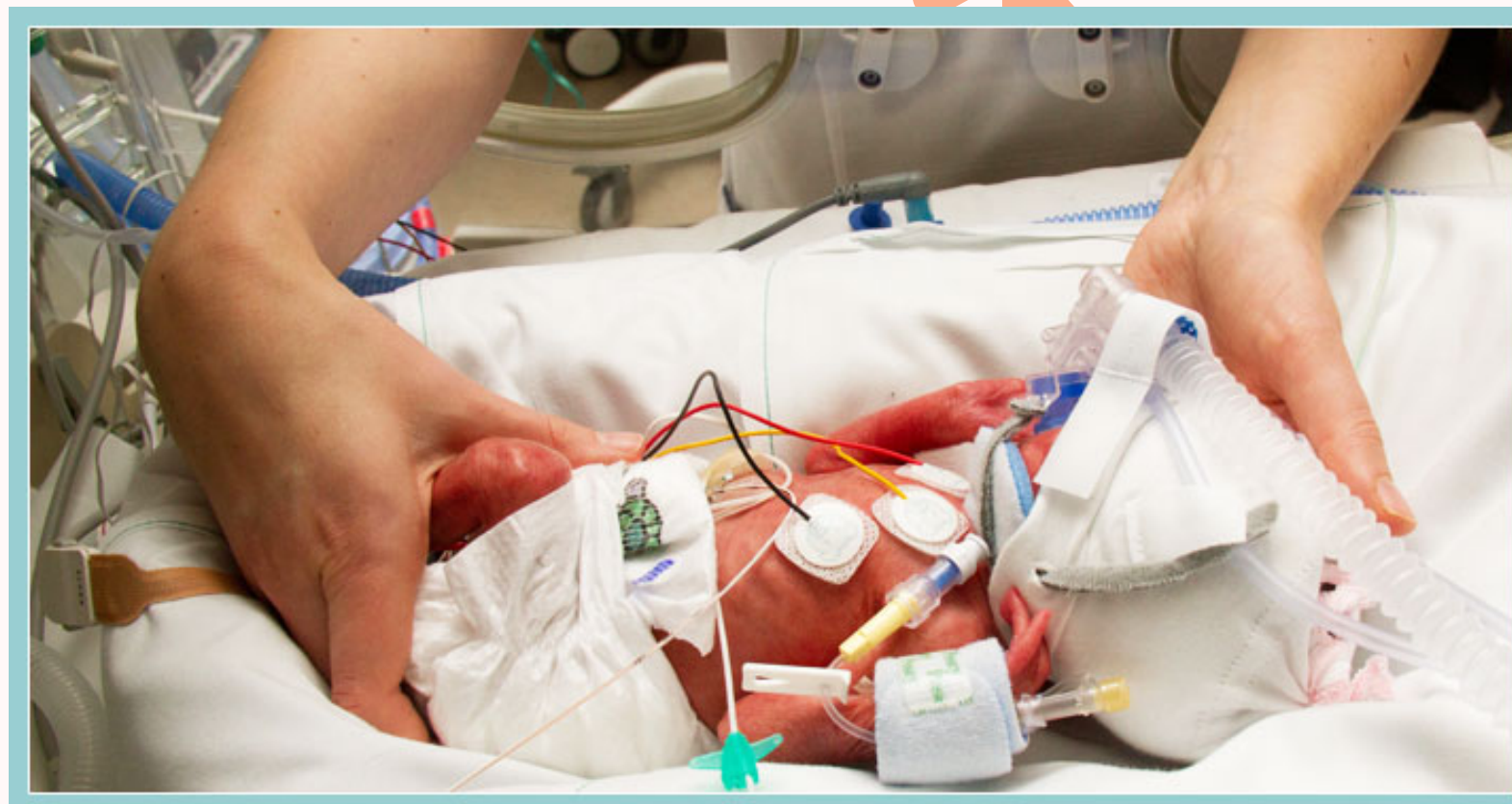
SUPINE

- Hips and knees in line
- Boundary for feet to recoil against



Head in midline

- Hands to face
- Shoulders rounded



KANGAROO CARE

- Upright
- Aids respiration (enables excursion of diaphragm)
- Flexion
- Benefits of skin to skin

MOVE SLOWLY PACE