



## CLINICAL GUIDELINE

# Weight, Length and Head Circumference Measurements

|                |                              |
|----------------|------------------------------|
| Scope (Staff): | Nursing and Medical Staff    |
| Scope (Area):  | NICU KEMH, NICU PCH, NETS WA |

### Child Safe Organisation Statement of Commitment

CAHS commits to being a child safe organisation by applying the National Principles for Child Safe Organisations. This is a commitment to a strong culture supported by robust policies and procedures to reduce the likelihood of harm to children and young people.

This document should be read in conjunction with this [disclaimer](#)

## Aim

To provide an indication of growth and fluid balance by monitoring weight, length and head circumference.

## Risk

If infant weight, length and head circumference are not monitored as per this guideline changes in growth and fluid balance may not be adequately monitored and addressed.

## Weight

Changes in infant weight provide some indication of growth and fluid balance. Acute changes in fluid balance may be reflected in changes in daily weights, while growth is better reflected in changes in body weight over time.

- All infants are to be weighed on admission to, and discharge from the NICU.
- Weight checks are to be conducted during the day in consultation with parents, in order to facilitate parent involvement.
- Infants requiring intensive care are to be **weighed daily** for the first week of life. Then alternate day weight unless otherwise ordered.
- Infants on respiratory support must be weighed by two nursing staff members. A neonatal trained nurse should be involved in the weighing of ventilated infants. (Built-in incubator scales are preferable for unstable infants nursed in incubators).

## Weight, Length and Head Circumference Measurements

- Before commencement the shift coordinator should be consulted in order to assess patient safety related to unit workload. If deemed unsafe then weighing should be deferred to a more suitable time.
- Level 2 care infants are weighed daily for the first week of life then are to be **weighed twice per week** e.g. Wednesdays and Sundays. The timing of these weighs should be discussed with their parents in order to facilitate parent involvement.
- **Surgical** infants are weighed **daily** until otherwise directed by medical staff.
- Daily weighing of stable infants may cause concern over clinically insignificant weight losses/gains and can be particularly unhelpful as infants near discharge.
- If [washing / bathing](#) is required at the same care time as weighing, infants should be weighed first, to minimise thermal stress.
- All weights are to be plotted on MR415.01/.02 and documented on MR489/491.00

### Length and Head Circumference

- The timing of these measurements should be discussed with their parents in order to facilitate parent involvement.
- Changes in infant length and head circumference provide important information regarding growth as opposed to fat deposition.
- All infants should have their head circumference and length measured at admission.
- Head circumference is then measured weekly on Sundays and at time of discharge.
- Inform Medical staff of unexpected changes in head circumference.
- If there is an indication for more frequent head circumference measurements (e.g. hydrocephalus) the HC should be measured by the same person (where possible) to promote consistency in measurement.
- Length is then measured weekly (dependent on infant's condition) and at time of discharge.
- All weekly head circumferences, lengths and weights are to be plotted on MR415.01/.02 and documented on MR489/491.


#### Related CAHS internal policies, procedures and guidelines

[Cares, Hygiene and Clothing](#)

[Parenting in the Neonatal Unit](#)

## Weight, Length and Head Circumference Measurements

This document can be made available in alternative formats on request.

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|-----------------------|--|-------------------|-------------------------------|
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