

Patient Information Leaflet

## Supporting your baby's development

### 28-30 weeks gestation



## INFORMATION FOR PARENTS

**Produced By: NICU**

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Congratulations on the birth of your baby. Having a baby in a Neonatal Unit can be frightening but this leaflet will tell you a little about what to expect from your baby at this age and, importantly, how you can help their development.

It is not designed to replace information you will get from your baby's doctors, nurses and therapists. If you have concerns or questions about your baby's development please talk to the Neonatal staff.

All babies are individuals and each one will develop at a slightly different rate. Your baby's development will be affected by gestation at birth, how much they weigh, and by how well they are. Each baby's genetic make up will also play a part in how they develop and mature. In the womb the baby will experience a variety of sensations – some pleasant, some not so pleasant. The baby will move around in the amniotic fluid and be able to get hands to mouth. They will hear their mother's voice and other sounds from outside. The baby will sleep and be active according to mother's daily pattern of activity.

The newborn preterm baby has to quickly accommodate to their new surroundings. These surroundings affect their behaviour and development and it is important that we recognise how they react and how we can help their development to progress.

This is a time when your baby's brain is growing at a very rapid rate and it is important that what we all do and how we do it, is as developmentally appropriate as possible.

### **Your baby is 28-30 weeks gestation (about 10 - 12 weeks early)**

At this age your baby's senses are immature. Because your baby is so small, care will be specialised. Your baby needs gentle touch, dim lighting and as little noise as possible.

The Neonatal Unit staff will help you to care for your baby. Always ask the nurse looking after your baby about their condition before you touch or handle. Ask if you need help or you don't understand what is happening

### **Touching and holding**

Twitches, tremors and jerks are common at this stage, but you may start to see some smooth movements as your baby moves. When you touch one part of your baby's body you will often see a movement in another part. Your baby's skin is sensitive to touch.

- **What you can do to help**

Speak softly to your baby before you touch them.

Place your hands around your baby's head, bottom and/or feet

Hold your baby's hand. Try not to stroke as very small babies don't like this.

Keep your baby wrapped and close to your body as you move them in or out of the incubator.

Kangaroo Care is recommended at this stage if staff feel that your baby is ready for this and you feel ready to start.

### **Feeding**

You may start to notice your baby "rooting" They will be ready to suck a dummy during tube feeds. Hold your baby while they are being tube-fed.

Feeding will be through a tube from their nose or mouth to their tummy (called an NG or OG tube). This is because your baby has not yet developed a mature sucking, swallowing and breathing pattern

- **What you can do to help**

Begin collecting your breastmilk as soon as you can so that it is ready for your baby as soon as they are ready. Providing breastmilk is one of the best things you can do for your baby. Do Kangaroo Care as often, and for as long as possible, as this may help your milk supply.

### **Sleeping**

It may be quite difficult to tell whether your baby is awake or asleep. They will start to show brief “alert” periods as they get closer to 30 weeks.

- **What you can do to help**

Let your baby have periods of undisturbed sleep Try not to wake them if they appear to be sleeping.

Protect your baby’s eyes from the light and try to avoid loud noise. Your baby will like to hear your voice if you speak softly.

### **Positioning**

Your baby’s movements may be jerky, especially when they are moved quickly and they may have difficulty curling up. This is tiring and uses up energy needed for growing.

- **What you can do to help**

Your baby needs to have their hands close to their face and their legs curled up – like they were in the womb.

Move your baby slowly and avoid sudden movements.

Your baby should have a deep boundary around them so that they can have something to snuggle into. This boundary may be a rolled blanket, a “bumper” and/or a fabric “nest”. Your baby will settle and rest better if they are well-positioned.

You can start by helping the nurse when they change your baby’s position and, when you feel confident, you will be able to do it yourself

### **Nappy changing /Cares**

Nappy changing and cares can be disturbing for babies of this gestation.

- **What you can do to help**

Try to provide a boundary when you change your baby’s nappy

Move your baby gently and slowly. Hold your baby’s feet together, soles touching. Fold the legs rather than lifting.

Provide still holding and a quiet voice. Be prepared to stop if your baby looks stressed.

The nurses will show you how to gently wash your baby, change their nappy and clean their mouth using breast milk if possible or sterile water.

### **Social**

Your baby will not be ready for social interaction. They will have limited energy reserves and need to rest as much as possible. They may begin to briefly alert or “still” when they hear your voice. If their eyes are shaded from the light they may briefly “look” at you.

- **What you can do to help**

Allow your baby as much peace and quiet as possible.

Provide still holding and a quiet voice. Be prepared to stop if your baby looks stressed.

Be patient and watch your baby when they are calm and when they appear to need rest.

You will soon learn to recognise your baby’s individual cues. Don’t rely on the monitors – learn to understand your baby!

For more information see the Bliss Baby Charity website at:-  
[www.bliss.org.uk](http://www.bliss.org.uk) or tel.0500 618140

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