

Tip of the Month



Baby Me!

Everyone likes to be babied, especially us newborns. And nobody deserves more TLC (tender, loving collection) than we do. But there's a lot you should know about keeping us safe and comfortable when performing a heelstick. By correctly answering the true/false questions below, our relationship is sure to get off on the right foot:

- *When performing a heelstick, don't bother prewarming the puncture site.*
False. Prewarming the collection site for three to five minutes increases blood flow to the area sevenfold and may reduce the overall collection time and improve sample quality because less squeezing is necessary. Monitor the site while prewarming and be sure the temperature of the compress doesn't exceed 42°C, since warmer temperatures can burn delicate neonatal skin.
- *I prefer incision devices that slice the tissue horizontally over devices that puncture vertically.*
True. Incision devices are generally preferred for infants because they cause less discomfort, require fewer repeat incisions and shorter draw times, and heal faster. Regardless of the type of device used, the puncture should be made to the lateral or medial plantar surface of the heel, with the depth of the puncture not exceeding 2.0 mm.
- *A heelstick can be potentially harmful to me if it provokes a high level of pain.*
True. A study conducted at the University of Siena in Italy found common procedures such as a heelstick that are stressful to newborns and cause a high pain response can negatively affect brain development. And just because an infant doesn't cry doesn't mean that they're not experiencing pain. A study at Azusa Pacific University in California concluded that sick premature infants and babies who have experienced a variety of painful procedures don't always demonstrate the typical signs of pain, but may receive the most benefit from pain management strategies.
- *Gentle massage of the leg prior to a heelstick can decrease my pain response.*
True. According to a double-blind trial conducted at the University of Calgary and Foothills Medical Centre, infants who received a two-minute leg massage prior to heel puncture had lower scores on the Neonatal Infant Pain Scale (NIPS) when compared to the pain scores from infants who didn't receive leg massage.
- *If I'm breastfed during a heelstick, it has an analgesic effect on me.*
True. A study appearing in the Italian Journal of Pediatrics confirms the pain-relieving effects of breastfeeding on full-term healthy infants undergoing painful minor procedures, such as a heelstick.
- *It's okay to bandage my heel.*
False. CLSI advises against applying bandages over skin puncture sites in children less than two years of age due to the risk of skin irritation and the choking hazard bandages pose.

We newborns know the formula for accurate results and proper patient management requires "TLC." When a Trained and Loving Collector draws our blood, it's a Testament to the Laboratory's Competence. So remember when you baby me, my doctors have the power of a proper diagnosis, which can Transform Lives Continually the world over.