

Further information on jaundice and phototherapy please contact Neonatal Registrar or neonatal clinical nurse specialist in Our Lady's Children's Hospital, Crumlin, Dublin.

CONTACT DETAILS

Neonatal Registrar

Phone 01 409 6100 Bleep: 8664 or 8602

Neonatal Clinical Nurse Specialist (CNSp)

Phone 01 409 6100 Bleep 8603.

REMEMBER:

Ask your nurse if you are unsure about anything regarding your baby's care.

Additional Instructions

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**Our Lady's Children's Hospital, Crumlin,
Dublin 12**



...where children's health comes first

Information for Parents/ Guardians of a Newborn Infant with

Jaundice and Receiving Phototherapy



Hospital Main No: 01 409 6100

JAUNDICE

Jaundice commonly occurs in newborn babies. It is caused by having too much '*bilirubin*' in the blood. Bilirubin is a chemical made in the body and is passed out of the body in urine and stool.

It is not a serious condition in most babies and is easily treated.

However, if you think that your baby has jaundice, it is important to let your nurse or doctor know to ensure your baby is reviewed.

Jaundice will make your baby's skin look slightly yellow or suntanned. Yellowing in the whites of your baby's eyes or inside their mouth, may be the first sign of jaundice in babies with dark skin. Check for jaundice in natural bright light if possible

A blood test is done to check the level of bilirubin in the blood, should your baby have signs of jaundice.

Mild jaundice does not normally need to be treated. The nurse will support you, if you are breastfeeding your baby to ensure your baby is getting enough milk.

More frequent blood tests will be required to monitor the bilirubin blood levels, should the level be borderline or high.

YOUR BABY IS MORE LIKELY TO DEVELOP JAUNDICE WHEN:

- They are born before full term.
- A brother or sister had jaundice as a newborn and required phototherapy
- When baby's mother breastfeeds exclusively.

NB: It is not usually necessary to stop breast feeding should your baby develops jaundice

- The main treatment provided for babies with jaundice is 'phototherapy'.

PHOTOTHERAPY

There are 2 types of Phototherapy:

- Overhead Lamp - which emits a special light
- '*Biliblanket*' - Fibre-optic light blanket

Your baby will be placed under a lamp, he / she will be nursed in an incubator and will be naked except for a nappy and eye shields

This is to ensure that the light shines on as much skin as possible. The eye shields protect your baby's eyes from the light because it may cause damage.

During phototherapy treatment, you can usually feed (breast / bottle) your baby as normal

Loose stools may occur during phototherapy treatment, which is normal. Change nappies as needed to prevent your baby getting a sore

bottom. Avoid using creams and lotions on baby's skin, during phototherapy treatment

When bilirubin levels are very high, both types of light therapy may be used at the same time. It is important to keep your baby under the phototherapy lamp as much as possible. Breaks from the treatment may be stopped for a short time until bilirubin levels begin to return to normal

BILIBLANKET

When a baby is nursed on the biliblanket, he/ she may be nursed in an incubator / cot and your baby will have the light pad placed directly on his/ her back. Clothes can be worn over the biliblanket

The nurse will encourage you to take your baby out for short breaks to feed, cuddle and attend to their needs, with both types of phototherapy.

Babies with extremely high bilirubin levels, in rare cases, may need to be in the Paediatric Intensive Care Unit (PICU) for further treatment

Your doctor / nurse will discuss plans for treatment, options available and answer any questions or concerns you may have

Please inform your baby's nurse / doctor if you have any concerns while in hospital or following discharge home.