Infant positioning
Promoting comfort

Non-nutritive sucking: infant’s natural response to stress
- Offer pacifier or if mother is breastfeeding, put infant to the breast during the procedure.
- Allows close face contact with parent.

Swaddling: most suitable for infants 0–3 months
- Swaddle infant leaving limb accessible for the procedure.
- Promotes self-calming.
- Use in conjunction with pacifier or sucrose.
- After procedure, swaddle infant to promote calming and recovery.

Facilitated tucking and containment: provides boundaries which promote a feeling of safety
- Acts as a comfort measure and minimises distress.
- Allows for positive interaction with parent and observation of infant.
- Used in conjunction with distraction.
- Offer pacifier or sucrose during the procedure.

Infant’s arms or legs tucked in sheet.

Containment promotes boundaries; it can be used for procedures or daily care.

Comfort Kids
Effective procedural pain management for all children reduces discomfort, distress and anxiety.

The Royal Children’s Hospital Melbourne
Be sweet to infants up to 18 months
Sucrose equals short term comfort/pain relief

**When should sucrose be used**
- For painful/distressing procedures and tests
- Not appropriate for ongoing comforting of upset babies

**How does sucrose work best**
- Only works if given orally (not via NGT or PEG)
- Sucrose concentration may vary, give in small increments

**Who can give and sign for sucrose**
- All Nursing & Medical Staff/Allied Health/Technicians/Pathologists

**Where to record**
- Inpatient – Record in the as required “prn” section of the Medicine Chart (MR690/A)
- Outpatient – Record in a log book or the patient notes (Patient name, DOB, procedure, amount of oral sucrose)

**Storage**
- Bottled sucrose 33% stored in fridge, use within one month – RCH pharmacy supplied
- Pre-packaged sucrose products, expires in 2 years, stored at room temperature

**How to give sucrose**
- Prepare recommended amount to be given (see table)
- Give approximately 1/4 of the total amount of sucrose 2 minutes prior to the start of the procedure
- Give small amounts at the start and throughout the test or procedure
- The effect lasts 5–8 minutes
- Total amount to be given in 24 hours (see table)

**How much to give**

<table>
<thead>
<tr>
<th>Patient group</th>
<th>NI orally</th>
<th>&lt;1500 grams</th>
<th>Newborn 0–1 months</th>
<th>Infants 1–18 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total amount to be given</td>
<td>0.2 ml</td>
<td>0.2–0.5 ml</td>
<td>0.2–1 ml</td>
<td>1–2 ml</td>
</tr>
<tr>
<td>Recommended total amount in 24 hrs</td>
<td>1 ml</td>
<td>2.5 ml</td>
<td>5 ml</td>
<td>5 ml</td>
</tr>
</tbody>
</table>

**What else helps**
- Sucking – breast feeding/dummy if used
- Positioning & parental contact – swaddling, holding and cuddling. Upright positions for infants >6 months
- Distraction – Older infants; sight/sound toys, bubbles or singing

Further information: Refer to clinical practice guideline “sucrose oral”

Acknowledgments: RCH Neonatal Unit

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