**Katherine Stock u933257**

**Weighing healthy term newborns; are we setting them up for intervention?**

Weighing babies when they are born is a common midwifery practice, yet there is minimal research about this being an evidence-based practice. This number may not be an accurate representation of the baby’s state however it is used to plan care which potentially leads to unnecessary monitoring, intervention and ramifications for parenting confidence and postnatal care. There are many mitigating factors that can inflate a baby’s weight at birth. The first weight includes not only the solid body but also the fluid the baby took on board while in utero, such as the fluids given to the mother during labour and the fluids the mother has on board during pregnancy. There is minimal evidence in the midwifery and medical literature to inform the best time to first weigh babies.

Rather than a policy, I am proposing a research study which continues the work of Joy Noel-Weiss, a Canadian RN/IBCLC. She proposed an observational study to examine the associations between maternal fluids, neonatal output and newborn weight loss. An ethics approved research protocol will inform a pilot study of healthy term single pregnancy, spontaneously birthing babies with no maternal or neonatal risk factors. A full breastfeeding assessment will be undertaken within the first 24 hours. Outcomes measured will include management of and/or NICU admissions for weight loss, midwives and paediatrician’s confidence and maternal satisfaction. Data will contribute to the current limited evidence base and support further research to ensure optimal care is provided.

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