

helpless in water, and small children (and some older ones) may turn on the hot water faucet and be severely burned.

Furniture is safest when it is scaled to the child's proportions, is sturdy, and is well balanced to prevent its being easily tipped over. A special hazard for children is the danger of entrapment under an electronically controlled bed when it is activated to descend. Infants and small children must be securely strapped into infant seats, feeding chairs, and strollers. Baby walkers should not be used because they provide access to hazards, resulting in burns, falls, and poisonings. Infants; young children; and children who are weak, paralyzed, agitated, confused, sedated, or cognitively impaired are never left unattended on treatment tables, on scales, or in treatment areas. Even premature infants are capable of surprising mobility; therefore, portholes in incubators must be securely fastened when not in use.

Crib sides should always be raised and fastened securely. Use cribs that meet federal safety standards. Anyone attending an infant or small child on a stretcher or table should never turn away without maintaining hand contact with the child, that is, keeping one hand on the child's back or abdomen to prevent rolling, crawling, or jumping from the open crib ([Fig. 20-2](#)). A child who is likely to climb over the sides of the crib is safest when placed in a specially constructed crib with a cover over the top. Never tie nets to the movable crib sides or use knots that do not permit quick release.



FIG 20-2 The nurse maintains hand contact when her back is turned.

The safest sleeping position to prevent sudden infant death