

weighing, and changing diapers) are associated with frequent periods of hypoxia, oxygen desaturation, and elevated ICP. The more immature the infant, the less able he or she is to habituate to a single procedure, such as taking an oscillometric BP, without becoming overstimulated.

Twenty-four-hour surveillance of sick infants implies maximum visibility and often bright lights. Units should establish a night-day sleep pattern by darkening the room, covering cribs with blankets, or placing eye patches over the infant's eyes at night. Infants need scheduled rest periods during which the lights are dimmed, the incubators are covered with blankets, and the infants are not disturbed for handling of any kind ([Altimier and White, 2014](#)). Sleep periods should be undisturbed for at least 50 minutes to allow complete sleep cycles.

Infants' eyes should be shielded from bright procedure lights to prevent potential harm. Many experts suggest that the human face, especially the parent's, is the best visual stimulus and that visual stimuli be kept to a minimum early in development. Developmental care, accentuating the infant's unique ability to achieve behavioral state organization, is tailored to the developmental level and tolerance of each infant based on a comprehensive behavioral assessment. During the early stages of development (especially before 33 weeks of gestation), external stimulation produces uncoordinated, random activity, such as jerky limb extension, hyperflexion, and irregular vital signs. At this stage, infants need to have minimum environmental stimulation. Using the developmental model of supportive care, the nurse closely monitors physiologic and behavioral signs to promote organization and well-being of the high-risk infant during handling. Softly calling the infant by name and then gently placing a hand on the body signal that care is beginning and alleviate the abrupt interruption that precedes caregiving. Infants are handled with slow, controlled movements (some infants are unstable if moved abruptly), and their random movements are controlled with limbs held flexed close to their bodies during turning or other position changes. This containment or facilitated tucking may also be used before invasive procedures, such as heel stick to alleviate distress. Blanket swaddling and nesting or containment have been shown to decrease physiologic and behavioral stress during routine care