

# Kangaroo Mother Care (KMC) - Standard Operating Procedure

ON ADMISSION	WHEN IN HOSPITAL	JUST BEFORE DISCHARGE	AT DISCHARGE
<ul style="list-style-type: none"> <li><input type="checkbox"/> Check the baby's weight</li> <li><input type="checkbox"/> Assess activity, breathing, color, heart rate, and temperature</li> <li><input type="checkbox"/> Classify the baby as well or unwell.                             <ul style="list-style-type: none"> <li>– If unwell or sick stabilize baby as per protocol</li> <li>– If well do the routine care for the baby.</li> </ul> </li> <li><input type="checkbox"/> Inform the ASHA of the particular area about admission, need for KMC and support</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Counsel mothers and family members on KMC of all babies less than 2.5 kg</li> <li><input type="checkbox"/> Initiate KMC for all eligible babies</li> <li><input type="checkbox"/> Give KMC kit (Cap, Socks, binder, and diaper)</li> <li><input type="checkbox"/> Implement AKKA model                             <ul style="list-style-type: none"> <li>– Get a family member to provide KMC when the mother needs a break (Foster KMC)</li> <li>– Get a mother who has experience in KMC to teach other mothers (Peer KMC mother)</li> <li>– One nurse takes responsibility each shift to encourage mothers to give KMC (Nurse support)</li> </ul> </li> <li><input type="checkbox"/> Educate mothers and family using KMC Modular training (initiation, maintenance &amp; discharge module)                             <ul style="list-style-type: none"> <li>– A KMC session means it should be for at least one hour</li> <li>– Give prolonged KMC for 24 hours, as long as the mother &amp; family member can comfortably provide it</li> <li>– Give exclusive breastfeeding even when in KMC position</li> </ul> </li> <li><input type="checkbox"/> Check baby when in KMC for Activity, Breathing, Color and Temperature (ABCT)</li> <li><input type="checkbox"/> Record all KMC sessions in the KMC case sheet</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Shift to KMC ward when baby is on full enteral feeds and does not need Oxygen</li> <li><input type="checkbox"/> Decide on discharge, if they meet the criteria                             <ul style="list-style-type: none"> <li>– Baby receives 8-10 hours of KMC for 2 consecutive days prior to discharge</li> <li>– Baby taking feeds 10-12/ day</li> <li>– No danger signs</li> </ul> </li> <li><input type="checkbox"/> Educate the mother and family to continue KMC at home</li> <li><input type="checkbox"/> Educate regarding danger signs                             <ul style="list-style-type: none"> <li>– Not active (lethargic)</li> <li>– Not feeding</li> <li>– Respiratory distress: Fast breathing, severe chest indrawing,</li> <li>– Temperature less than 35.5°C or more than 37.5°C</li> <li>– Colour (yellow palms/soles)</li> <li>– Convulsions</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Hand over the discharge kit to the mother                             <ul style="list-style-type: none"> <li>– Micro-planning tool</li> <li>– Linkage card</li> <li>– KMC record</li> <li>– KMC pamphlet</li> </ul> </li> <li><input type="checkbox"/> Instruct the mother to meet ASHA and hand over the micro-planning tool as soon as she reaches home</li> <li><input type="checkbox"/> Tell the mother to return for follow-up within one week of discharge or if baby has a danger sign</li> </ul>