Clinical Update

Oral Therapy and The Use of Mother’s Milk in the Treatment of Neonates

... Protocol Driven Solutions
Oral Therapy

- **Oropharyngeal Administration of Colostrum**
  - Extremely/Very Low Birthweight Babies

- **Oropharyngeal Administration of Mother’s Milk**
  - NPO and Tube Fed Babies

- **Oral Hygiene**
  - All Babies/Babies on Respiratory Support

**Expected Benefits**

- Exposure to Immune System Agents
  - Seed the oral cavity with sIgA, interleukins lactoferrin, lysozyme and oligosaccharides.

- Developmental Support
  - Introduce taste & smell of mother’s milk to encourage maternal bonding, development of non-nutritive sucking, and calming/soothing.

- Infection Prevention
  - Regular cleaning and moisturizing help reduce the possibility of healthcare-acquired infection and maintain good oral tissue health.

**Expected Outcomes**

- Reduced time to oral feeds
- Reduced time to enteral feeds
  - Shorter length of stay
  - Healthy oral tissue
  - Fewer infections
  - Lower cost of care
The Potential Impact of Oral Therapy

Improved Clinical Outcomes

**Reduced Time to Enteral Feeds**

A pilot study in very low birthweight babies using oropharyngeal administration of colostrum showed a 10 day reduction in time to enteral feeds.\(^1\)

**Reduced Time to Oral Feeds & Shorter Length of Stay**

A 3 day reduction in time to full oral feeds and a 4 day reduction in length of stay was shown in tube fed babies exposed to the smell of mother’s milk.\(^2\)

**Fewer Infections**

VAP rates declined 71% in a study utilizing a q3-4 oral care protocol with mother’s milk or sterile water as part of a ventilator bundle.\(^4\)

**Healthy Oral Tissue**

Bacterial colonization of the oral cavity was reduced by 54%, and gram negative colonization was eliminated in 33% of affected patients, in a pilot study utilizing a q6 oral care regimen with water or mother’s milk.\(^3\)

Lower Costs and Other Benefits

**Lower Cost of Care**

A 4 day reduction in length of stay, from 23 to 19 days,\(^2\) yields a 17% cost savings based on a $1,500 average per day cost of treatment in the NICU\(^5\)

\[\text{Savings} = \frac{\text{Cost} \times \text{Days}}{\text{New Days}} \times \text{Cost per Day} \]

\[\text{Savings} = \frac{23 \times 1,500}{19} \times 1,500 = 6,000 \]

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**A New Standard of Oral Care for the NICU**

Plak-Vac® Petite products support all oral therapy needs

Plak-Vac tailor-made daily kits organize all components at the point-of-care to enhance protocol compliance and support infection control policies. Choose from our size-appropriate Petite swabs and a variety of options for cleaning, moisturizing, and suctioning the oral cavity.

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**Plak-Vac Petite Daily Kits**

**Plak-Vac Petite Swabs**

(Actual Size)

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**Cleanser & Moisturizer Options**

- Sterile Saline 5 ml
- Sterile Water 5 ml
- Biotene® Oral Balance Gel 3g
- Lansinoh® Lanolin
- White Petrolatum 5g
- Saline Wipes
- Ayr® Saline Gel 0.5 oz
- Neotech Little Sucker® Preemie or Standard with or without Cover

**Oral Suction & Options**

- Suction Catheters 8,10,12 Fr.
- 2” x 2” Gauze
- Medicine Cup

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**Customer-Specified Protocol**

**Timed Treatment Packets**

**Pouch Contents**

- Petite Swab 6 mm
- Petite Swab 8 mm
- Sterile Water

Contents are Non-Sterile

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**Oral Care Procedure**

- Use contents as directed by Oral Care Protocol to clean patient’s oral cavity.

**Pouch Contents**

- Petite Swab 6 mm
- Petite Swab 8 mm
- Sterile Water

Contents are Non-Sterile

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**Kit Contents:**

- 6 - Petite Applicator Swabs – 6 mm
- 6 - Petite Applicator Swabs – 8 mm
- 6 - Sterile Water – 5 ml

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**Change kit on:**

Mon Tues Wed Thur Fri Sat Sun

This kit is intended for 24 hr.

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**Kit Change Indicator**

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**Order No.**

**Lot No.**

**Contents are Non Sterile**

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**St. Mary’s Medical Center q4 Petite Oral Care Kit**

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