Infant Safe Sleep Checklist

**Purpose:** The goal of a safe sleep environment for infants is to reduce the risk of Sudden Infant Death Syndrome and other sleep-related deaths such as accidental suffocation and strangulation in bed. The purpose of this checklist is to provide a method for reviewing the infant’s sleep environment. This checklist can serve as a basis for providing safe sleep education. This material was prepared by the SIDS Center of New Jersey based on the most recently issued guidelines and technical report, to date, of the American Academy of Pediatrics (AAP) Task Force on Sudden Infant Death Syndrome. The articles (Moon, RY, Pediatrics, 2011) can be accessed through the AAP website aap.org by placing “2011 guidelines for safe infant sleep” in its search bar. When the summary appears, click on the hypertext to retrieve the articles. Safety guidelines for infant mattresses, cribs, bassinets and other sleep products can be accessed at the US Consumer Product Safety website, www.cpsc.gov. The information in this checklist addresses infants from birth through 12 months of age and is intended for discharged premature as well as term infants. Rarely, the infant's physicians may recommend alternative guidance based on a health condition. In these instances, the physician's advice should be the family's guideline.

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**Directions:** In reviewing these guidelines with the family, point out where the practice in the home is consistent with or differs from the recommendations. Help families understand the purpose of each guideline, and address any concerns. Use the SCNJ Safe Sleep flyer and the NICHD safe to sleep materials to illustrate your discussion.

1. **Assess the location and setting where the baby sleeps.**

   _____ The Infant is placed to sleep on a firm sleep surface such as a mattress in a crib, bassinet or portable crib. (Current safety standards for these products can be accessed through www.cpsc.org)

   _____ The infant is not placed to sleep on a sofa, chair or adult bed.

   _____ The infant is never put to sleep on the same sleep surface as another adult, child, infant or twin.

   _____ The mattress fits snugly in the crib with no gaps between end of mattress and the sides or edges of crib.

   _____ The fitted crib sheet fits tightly around the mattress

   _____ No soft or loose bedding, such as quilts or pillows, is placed underneath the infant.

   _____ Pillows, quilts, blankets, other loose bedding and bumpers are kept out of the infant’s sleep area.

   _____ Where needed, instead of a blanket, the infant is placed to sleep in sleep clothing such as a one-piece sleeper “wearable blanket.” (The one-piece sleeper fits appropriately).

   _____ Nothing covers the infant’s face.

   _____ Stuffed animals and stuffed toys are kept out of the sleep area.

   _____ If parents bring the infant into bed to comfort, cuddle or feed, it is safest to return the infant to his or her separate sleep area such as a crib, bassinet or portable crib that meets CPSC safety standards when the parent is ready to sleep.

   _____ Room sharing reduces the risk of SIDS and other sleep related infant deaths. Therefore, it is recommended that the infant’s crib, bassinet or portable crib be placed in the room where the parents sleep. Keeping the baby close by but not in the sleeping parent’s bed is ideal.

2. **Assess the infant’s sleep position** (Parents should indicate if they have discussed sleep positioning with the infant’s healthcare provider.)
Infants under one year of age are always placed on their backs to sleep, for naps and at night. (Opportunities for discussion: (1) there is no increased risk of choking; (2) Infants should continue to be placed supine for the first 12 months; however, once an infant can roll over from supine to prone and prone to supine, (s)he can be allowed to remain in the sleep position that (s)he may roll into following supine placement; (3) Rarely; a health condition may have been identified that leads the infant’s healthcare provider to indicate an alternative placement. Parents can describe the exception.

When the infant is awake and being watched by a caregiver, it is desirable to place him or her on the stomach for “tummy time.” Tummy time helps infants achieve developmental milestones and reduces the risk of flat spots developing on the head. Avoiding excessive time in carriers and bouncers can also help. Another method for helping to prevent flat spots is to alternate the direction in which the baby is placed to sleep in the crib (see below). By changing the direction of the baby’s placement, the activity in the room is more likely to be on his left for some nights and on the right on others, leading the baby to turn his head in different directions and thus not always sleep on the same side of his head.

Parents avoid products that are intended to control the position of the infant in sleep as these have not been sufficiently tested for effectiveness or safety and have been found by the Consumer Product Safety Commission to have unintended adverse consequences.

3. Assess the infant’s environment

- There is no smoking in the home or alternative care environment.
- The infant is kept away from any area where smoking has occurred.
- The sleeping infant is not overheated by a room temperature that is too high or by too many layers of clothing.

4. Pacifier use:

- A clean dry pacifier is offered when placing the infant down to sleep for naps or at night. (The pacifier does not need to be re-inserted if it falls out. If infant refuses the pacifier, he or she should not be forced to take it. For breastfed infants pacifier use should be delayed until 1 month of age to ensure good onset of breastfeeding. The pacifier should not be coated in any sweet solution. Pacifier should be cleaned often and replaced regularly. Pacifier should not be attached to the infant’s clothing by a string or any other device.

5. Breastfeeding:

- Breastfeeding is associated with a lower risk for Sudden Infant Death Syndrome. Breastfeed, if at all possible.

6. Educational material (check off what has been provided)

- Safe Sleep educational material and SIDS Center hotline number given (800) 545-7437 and guidelines discussed.