Growth of very-low-birth-weight (VLBW, ≤ 1500 g) and low-birth-weight (LBW, 1501 to 2500 g) premature infants differs from that of normal-birth-weight term infants during infancy and early childhood. Because these infants may not catch up to term infants in growth during the early years, their growth should be compared to that of premature infants of similar birth weight.

The growth percentiles presented here are based on a large sample of infants enrolled in the Infant Health and Development Program (IHDP). Some infants most likely to experience growth problems from biologic or environmental causes, premature infants with birth weight greater than 2500 g, and small-for-gestational-age term infants were excluded. Study infants, however, are probably typical of premature infants who receive modern neonatal intensive care.

References

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Instructions for Use
1. Measure and record weight, length, and head circumference.
2. Calculate gestation-adjusted age by subtracting Adjustment for Prematurity in weeks from postnatal age in weeks. Adjustment for Prematurity equals 40 weeks minus GA. For example, at 12 wk postnatal age, an infant born at 30 wk GA would be 2 wk (0.5 mo) gestation-adjusted age.
3. Plot data at the gestation-adjusted age on the appropriate graph.
4. When possible, plot serial data on the same graph to permit detection of change in growth percentiles with age.

Interpretation
These graphs permit comparison of a LBW premature boy’s growth relative to current reference data. Further investigation may be indicated when the plotted measurements are markedly different from the 50th percentile, or growth percentile changes rapidly.

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