



Where did 50 dBA come from?

A hospital reference has a setting, a metric and a date. Keep all three attached.

Here are three verifiable checkpoints in nursery-noise literature. This is a selected source map, not a claim to identify the first-ever use of the number.

1999

Hospital nursery criteria

For occupied, newly built or renovated hospital nurseries, Philbin and colleagues recommended an hourly average (Leq) no higher than 50 dBA. This concerned the overall sound environment, not a home machine setting.

[\[1\] Philbin, Robertson & Hall \(1999\)](#)

2006

The metric changes the meaning

The 2006 NICU standards set limits of 45 dBA for hourly Leq and 50 dBA for hourly L10. L10 and Leq describe different aspects of sound; the number alone is incomplete.

[\[2\] Philbin & Evans \(2006\)](#)

2014

A device-study comparison

The infant sleep-machine paper used 50 dBA as a hospital-nursery comparison. It did not establish a universal home safety limit.

[\[3\] Hugh and colleagues \(2014\)](#)

Before using a number, ask three questions

1. For which setting and population?
2. Which metric and averaging period?
3. What can the measurement actually establish?

Keep the context

A hospital design criterion is not a guarantee about a baby's home exposure. A live phone estimate is not an hourly average or a hearing assessment.

[\[1\] DOI: 10.1038/sj.jp.7200279](#)

[\[2\] DOI: 10.1038/sj.jp.7211585](#)

[\[3\] DOI: 10.1542/peds.2013-3617](#)

[Full guide: lullasure.com/guides/how-loud-should-white-noise-be-for-baby#50-dba](https://lullasure.com/guides/how-loud-should-white-noise-be-for-baby#50-dba)