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SPECIAL TOPIC SERIES ON NEWBORN CARE

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Strategies to Successfully
Implement an Eat, Sleep,
Console Protocol

Infant Safe Sleep
Initiative in Small
Volume Maternity Service


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Gastrointestinal
Microbiome in Colic:
Scoping Review

Spouses' Experiences
with Peripartum
Cardiomyopathy

Relationship with the
Father of the Baby and
Pregnancy-Related Anxiety

Disclosing a Nonlethal
Fetal Anomaly Diagnosis to
Family and Friends

 Wolters Kluwer



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feature articles

182 Strategies to Successfully Implement an Eat, Sleep, Console Protocol

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Eat, sleep, console is being incorporated into care of the newborn with neonatal opioid withdrawal syndrome. Most of the published data is from quality improvement projects, however results appear promising in centering the mother as a caregiver and decreasing pharmacologic therapy and associated length of hospital stay. A review of the evidence is presented with strategies to implement the eat, sleep, console approach in the hospital setting.

Stefanie E. Wortham, DNP, RNC, WHNP-BC,
Ann L. Bianchi, PhD, RN

189 Infant Safe Sleep Initiative in a Small Volume Maternity Service

Safe infant sleep practices in the hospital are the foundation for safe sleep practices by parents and caregivers after hospital discharge and can decrease risk of sudden unexpected infant death. In this quality improvement project conducted in a small volume maternity service in a community hospital, details are offered about how to implement a safe infant sleep program based on recommendations from the American Academy of Pediatrics.

Kimberly J. Patterson, DNP, APRN, NNP-BC, Ellise D. Adams, PhD, CNM, Charlotte Ramieh, DNP, APRN, NNP-BC

195 The Gastrointestinal Microbiome in Infant Colic: A Scoping Review

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PD

Colic is known to self-resolve around three months of age. However, few researchers have investigated how the microbiome may be changing at colic's natural resolution without the intervention of a probiotic. With a better understanding of what leads to colic's self-resolution, future researchers may be able to identify more effective therapies for colic prevention or treatment. This scoping review presents the collective evidence from 21 original, primary research articles on what is known about the gastrointestinal microbiome at colic onset and resolution.

Jessica M. Johnson, MSN, RN, PNP, Ellise D. Adams, PhD, CNM

207 Peripartum Cardiomyopathy and Spouses' Experiences of Persistent Uncertainty

SDC

Peripartum cardiomyopathy is a serious complication of pregnancy, affecting approximately 1 in 1000 women in the United States. In this study, spouses of women who were diagnosed with peripartum cardiomyopathy were interviewed. Participants described their experiences and the ongoing uncertainty of the future health of their wives. These data can help to guide care for spouses of women with pregnancy complications.

Rosanna F. Hess, DNP, RN, Jo Ann Donnenwirth, EdD, MSN, RN

213 Relationship with the Father of the Baby and Pregnancy-Related Anxiety among Pregnant Black Women

In this study of 408 pregnant Black women, their relationship with the father of the baby was evaluated for its potential effect on pregnancy-related anxiety. Support from the father of the baby and conflict with the father of the baby significantly affected pregnancy-related anxiety. During prenatal care, discussions with the pregnant woman about the relationship with the father of the baby may be helpful in identifying stress and offering guidance as needed to decrease anxiety such as listening to their concerns, antenatal yoga, group prenatal classes, extended childbirth education, cognitive behavioral therapy, or counseling.

Suzanne Hyer, PhD, RN, Wenfang Hu, PhD, Mengtong Hu, BS, Jean W. Davis, PhD, DNP, EdD, APRN, FNP-BC, PHCNS-BC, Rui Xie, PhD, Carmen Giurgescu, PhD, RN, WHNP, FAAN

220 Maternal Distress in Disclosing a Nonlethal Fetal Anomaly Diagnosis to Family and Friends

Approximately 3% of pregnant women will learn of a fetal anomaly during their pregnancy. The anomaly could be diagnosed as lethal or non-lethal. In this study, women who received a diagnosis of non-lethal fetal anomaly share their experiences with disclosing this information with their family and friends. Most women describe the experience as very stressful and appreciated information and support from their health care team during pregnancy and postpartum.

Janet Adams Tucker, PhD, MSN, RNC-OB,
Becky J. Christian, PhD, RN, FNAP, FAAN

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ongoing columns

181 EDITORIAL

Newborn Care

Our special topics series on newborn care in this issue covers three important aspects of nursing care for babies: safe sleep in the hospital to promote safe sleep at home, the Eat, Sleep, Console protocol for babies with neonatal opioid withdrawal syndrome and a scoping review of the role of the gastrointestinal microbiome in colic. We hope you enjoy reading these articles about newborn care and are able to incorporate the information into your clinical practice.

Kathleen Rice Simpson, PhD, RNC, CNS-BC, FAAN

227 HOT TOPICS IN MATERNITY NURSING

Respectful Maternity Care

The Association of Women's Health, Neonatal, and Obstetric Nurses has published a new evidence-based clinical practice guideline on respectful maternity care. Our maternity nursing expert, Dr. Bernstein, summarizes the guideline and offers suggestions on how to apply the information to clinical practice. We welcome Dr. Bernstein as a regular contributor to the Hot Topics in Maternity Nursing column and to the MCN Editorial Board.

Samantha L. Bernstein, PhD, RNC-OB, IBCLC

228 HOT TOPICS IN PEDIATRIC NURSING

Supplemental Oxygen and Hyperoxia in Critically Ill Children

Supplemental oxygen is often administered to critically ill children in the pediatric intensive care unit and can result in hyperoxia. Our pediatric nursing expert, Dr. Beal, highlights a recently published systematic review and meta-analysis on the association of hyperoxia with outcomes in critically ill children. Data on hyperoxia in critically ill children are scant. Although the analysis had multiple limitations including lack of randomized clinical trials, small sample sizes, lack of statistical significance, lack of correction for severity of illness, study design heterogeneity, and the need to pool data, cautious use of oxygen for this patient population is warranted, and when given, the goal should be normoxia, rather than hyperoxia. Further study by pediatric nurse researchers would be helpful for this clinical question.

Judy A. Beal, DNSc, RN, FAAN

229 BREASTFEEDING

The Formula Industry is a Powerful Influence on Breastfeeding

A report issued by the World Health Organization and United Nations Children's Fund emphasizes the powerful influence of formula companies on breastfeeding

including all of their targeted strategies. Our breastfeeding expert, Dr. Spatz, summarizes this important report and offers suggestions on what nurses can do to counter formula company actions to promote their products.

Diane L. Spatz, PhD, RN-BC, FAAN

230 GLOBAL HEALTH AND NURSING

Culturally Competent Care for Native American and Alaska Native Childbearing Families

First Nations, Native American, Alaska Native childbearing women, or Aboriginal childbearing women and their families are vulnerable groups at risk for adverse maternal and infant outcomes, including higher rates of preterm birth and maternal and infant mortality. Our global health and nursing expert, Dr. Callister, provides an overview and suggestions for culturally competent care.

Lynn Clark Callister, PhD, RN, FAAN

232 TOWARD EVIDENCE BASED PRACTICE

Experts suggest how 6 research articles can be used in nursing practice.

Coordinated by Annie Rohan, PhD, RN, NNP-BC, CPNP-PC, FAANP, FAAN

Comments by: Rachel Blankstein Breman, PhD, MPH, RN, Nancy O'Brien-Abel, MN, RNC, Cheryl K. Roth, PhD, RN, RNFA, WHNP-BC

235 PERINATAL PATIENT SAFETY

Trends in Labor Induction in the United States, 1989 to 2020

The rate of induction of labor in the United States has risen sharply over the last several years as compared to a slow steady increase since 1989 when these data first began to be collected on United States standard certificates of live birth. The rising rate of induction of labor in the United States has significant implications for nurse staffing for maternity units and for patient safety.

Kathleen Rice Simpson, PhD, RNC, CNS-BC, FAAN

236 ERRATUM

Sudden Unexpected Postnatal Collapse Resulting in Newborn Death in the United States: Erratum

MISSION STATEMENT

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