Neonatal nursing: Caring for our most vulnerable patients.

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Introduction

Neonatal nursing is a vital specialty within the nursing profession, dedicated to the care of newborn infants, particularly those who are premature, ill, or require special medical attention. This field is distinguished by its focus on the earliest stage of human life, addressing the unique needs and challenges that come with it. Neonatal nurses play an essential role in ensuring the health and development of these fragile patients, providing both medical care and emotional support to families [1].

The neonatal period, defined as the first 28 days of life, is a critical time for an infant's development. During this period, babies are highly vulnerable to health complications, especially if they are born prematurely or with congenital conditions. Neonatal nurses are trained to manage a range of issues, from respiratory difficulties and infections to feeding problems and developmental delays. Their expertise is crucial in stabilizing these infants and promoting their growth and development [2].

One of the key principles of neonatal nursing is family-centered care. This approach emphasizes the importance of involving parents and family members in the care process. Neonatal nurses recognize that parents are essential partners in the health and well-being of their babies. They provide education and support to help parents understand their infant's condition, treatment options, and care procedures. This collaborative approach not only enhances the care provided to the infant but also empowers parents, helping them to feel more confident and capable in their roles [3].

Caring for premature infants is a significant aspect of neonatal nursing. These infants, born before 37 weeks of gestation, often face numerous health challenges due to their underdeveloped organs and systems. Neonatal nurses are skilled in managing conditions such as respiratory distress syndrome, which is common in premature infants due to insufficient surfactant in the lungs. Treatment typically involves the administration of artificial surfactant and the use of mechanical ventilation. Nurses must carefully monitor the infant's respiratory status and adjust treatments as needed to ensure adequate oxygenation [4].

Neonatal jaundice is another common condition that neonatal nurses manage. It occurs when there is a high level of bilirubin in the blood, leading to a yellowish discoloration of the skin and eyes. While mild jaundice may resolve on its own, severe cases require intervention to prevent complications such as kernicterus, a form of brain damage. Phototherapy is a common treatment, and nurses are responsible for monitoring bilirubin levels, ensuring proper hydration, and maintaining the infant's exposure to the therapeutic light [5].

Pain management in newborns is an area of growing importance. Neonatal nurses are trained to recognize signs of pain in infants, who cannot verbally communicate their discomfort. Strategies for pain relief include the use of sucrose, swaddling, skin-to-skin contact, and, when necessary, pharmacological interventions. Effective pain management not only provides comfort but also supports the infant's overall health and development [6].

Developmental care is a holistic approach used by neonatal nurses to support the neurodevelopmental and psychosocial needs of preterm and ill infants. This approach includes minimizing environmental stressors such as noise and bright lights, promoting sleep, and encouraging parental involvement in care activities. By creating a supportive and nurturing environment, neonatal nurses help to promote healthy brain development and bonding between parents and their infants [7].

The transition from hospital to home is a significant phase in the care of newborns. Neonatal nurses are instrumental in discharge planning, ensuring that families are well-prepared to care for their infant at home. This involves providing education on feeding, medication administration, and recognizing signs of potential complications. Nurses also coordinate follow-up care and connect families with community resources to support their ongoing needs [8].

Neonatal nursing is not only about clinical expertise but also about emotional support. The NICU experience can be overwhelming and stressful for families. Neonatal nurses provide reassurance, comfort, and encouragement to parents, helping them navigate the challenges of having a critically ill or premature infant. This emotional support is crucial in fostering a positive environment for both the infant and the family [9].

Continuing education and professional development are essential for neonatal nurses. The field of neonatal care is constantly evolving, with new research, technologies, and best practices emerging. Neonatal nurses stay current through ongoing education, attending conferences, and obtaining certifications. This commitment to lifelong learning ensures that they provide the highest standard of care to their patients [10].

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Conclusion

Neonatal nursing is a dynamic and multifaceted specialty dedicated to the care of our most vulnerable patients—newborn infants. Neonatal nurses blend technical expertise with compassionate care, addressing the unique needs of each infant while supporting their families. Through their skilled and dedicated efforts, neonatal nurses make a profound impact on the lives of infants and their families, ensuring that even the smallest patients receive the best possible start in life.

References

- 1. Zeller B, Giebe J. Pain in the neonate: focus on nonpharmacologic interventions. Neonatal Netw. 2014;33(6):336-40.
- 2. Kavanaugh K, Moro TT, Savage T, et al. Enacting a theory of caring to recruit and retain vulnerable participants for sensitive research. Res Nurs Health. 2006;29(3):244-52.
- 3. Spence K. Ethical advocacy based on caring: a model for neonatal and paediatric nurses. J Paediatr Child Health. 2011;47(9):642-5.
- 4. Fraser JA, Barnes M, Biggs HC, et al. Caring, chaos and the vulnerable family: Experiences in caring for newborns of

- drug-dependent parents. Int J Nurs Stud. 2007;44(8):1363-70.
- 5. Adama EA, Bayes S, Sundin D. Parents' experiences of caring for preterm infants after discharge with grandmothers as their main support. J Clin Nurs. 2018;27(17-18):3377-86.
- 6. Webb MS, Passmore D, Cline G, et al. Ethical issues related to caring for low birth weight infants. Nurs Ethics. 2014;21(6):731-41.
- 7. Ilhan E, Pacey V, Brown L, et al. Neonates as intrinsically worthy recipients of pain management in neonatal intensive care. Med Health Care Philos. 2021;24:65-72.
- 8. Roehrs C, Masterson A, Alles R, et al. Caring for families coping with perinatal loss. J Obstet Gynecol Neonatal Nurs. 2008;37(6):631-9.
- 9. Morton J, Konrad SC. Introducing a caring/relational framework for building relationships with addicted mothers. J Obstet Gynecol Neonatal Nurs. 2009;38(2):206-13.
- 10. McGowan EC, Abdulla LS, Hawes KK, et al. Maternal immigrant status and readiness to transition to home from the NICU. Pediatrics. 2019;143(5).