Poster Presentations – Nursing

**1845** DO MOTHERS AND FATHER TO PRETERM EVALUATE THEIR EXPERIENCE OF STRESS AND NURSE’S SUPPORT DIFFERENTLY WHEN HOSPITALIZED IN A NICU?

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**Background** Studies show that mothers and fathers of a premature infant have high levels of stress. Studies also confirm the importance of nursing support to reduce stress of parents.

**Aim** To explore gender differences in experiencing parental stress and nursing support of mothers and fathers who become parents to premature infants and receive standard care.

**Methods** Mothers and fathers (N=62) answered two self-reporting questionnaires, the Nurse Parent Support Tool (NPST) once and the Parental Stressor Scale (FSS: NICU) twice. The NPST consists of 21 items classified into four dimensions, information, appraisal, emotional support and nursing care. The FSS: NICU is designed to measure parental perception of stressors arising from the physical and psychosocial environment of the NICU.

**Result** At baseline both mothers and fathers experienced high stress levels in relation to the infants appearance, some to the parental role and alteration and less on the dimension of sight and sound. The fathers’ experienced higher levels of stress at follow up compared to baseline for a number of variables. There were no significant differences regarding parents’ experiences with support from nurses.

**Conclusion** Mothers’ experiences of stress decrease but fathers reports increased stress at discharge to home compared to their baseline responses. In spite of this both parents were satisfied with the support from nurses, especially in relation to the information dimension and the nursing care dimension. As a result of this study we have become aware of the importance of stress preventing initiatives towards fathers of “healthy” premature infants.

**1846** ASSESSMENT OF SOUND LEVELS IN A NEONATAL INTENSIVE CARE UNIT IN ALZAHRA TEACHING HOSPITAL IN TABRIZ, IRAN

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**Introduction** The maleffects of loud noise on preterm infants have been recognized for years and the necessity of measuring the noise level and its reduction in NICU has been proven to the Neonatologists.

**Aim** This study aims to evaluate the noise level of NICU in Tabriz Alzahra hospital and compare it with the standard level and also to specify the noise producing sources.

**Materials and Methods** 24 accidental, continuous hours were selected in four working days and the Leq, L10, Lmax and Lpeak variables were measured in six fixed spots of NICU ward using a sound level meter based on dBA.

**Results** The mean of noise levels gained in the for Leq (M=63.46 dB), L10 (M=65.81dB), Lmax (M=71–24dB) in six different spots and hours of measurement was higher than the standard level (NICU Leq=45dB, L10=50dB, Lmax=65dB). There was no significant difference in the noise level of the six spots measured. The loudest Leq belonged to the round hours of the nurses and had a direct relationship with the number of people present in the ward. The least Leq was related to the time when the fewest number of people were present in the ward. Based on their intensity, the noise producing sources were application of metal equipments and dropping them, presence of students, nurse rounds, physicians’ rounds, alarms of devices and the wheels of portable trolleys, respectively.

**Conclusion** Noise level in NICU ward is higher than the standard level, it is necessary to take measures for the purpose of reducing it.
**Introduction** Some studies have indicated that home-based newborn visit interventions can prevent of newborn deaths. The aim of this study was to determine the effectiveness of home visit on mortality and morbidity of Preterm newborn.

**Method** This is a semi-experimental study in which Preterm newborns with fetal age of less than 37 weeks weighing below 2500 grams were placed in two groups of case (30 neonates) and control (30 neonates) randomly. Home visit was presented to case group for a period of 6 months after discharging from hospital. Control group received hospital routine cares and referred for visiting. Both groups were followed up for a period of 6 months. The samples of both groups were compared with each other from the view point of mortality and hospitalization. Collected data were analyzed using X² and independent T test.

**Results** The mortality during first six months of life of both groups did not show any difference (P>0.05). However, the number of inpatient cases of neonates and also the number of their disease cases not required to be hospitalized during first six months of life among case group was less than that of control group (P<0.05).

**Conclusion** The results of this study indicated that, carrying out home visit by health care givers results in reducing the number of inpatient cases of neonates during first six months of life. Therefore, it is suggested to appoint home visit as a part of health programs so as to reduce neonates’ hospitalization cases and thereby to improve their health.

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**THE MEANING OF PERSONAL DIARIES IN PICU TO CHILDREN AND FAMILIES**

**Background and Aims** In our PICU, nurses have for several years been writing a personal diary for all children admitted for 3 days or more. The purpose of the diary is to help the children understand their recollections and experiences from the PICU stay and thereby support their coping.

Research involving adult ICU patients has explored patients experiences with diaries and the effect on psychological outcome, but no PICU studies have been reported on the subject.

Thus the aim of our study was to investigate how diaries are being used and to explore their role in coming to term with the PICU stay.

**Methods** 5 semi-structured interviews with children and their families, 4–6 months after discharge from PICU. The data was analyzed using the method of systematic textcondensation described by Kirsti Malterud. During this analytic process the text is decontextualised into “units of meaning” from which themes and subthemes are identified.

**Results** One family had not used the diary much and ascribed this to a short PICU stay. The remaining families all expressed positive opinions of the diary and saw it as one of several tools to help understand and make sense of their experiences from PICU.

Three main themes emerged from the analysis:

- **Value to the entire family**
- **Creating memories**
- **The importance of pictures**

**Conclusions** Personal diaries are used in the families after discharge as support for both children and their relatives. They play an important role in making the PICU experience meaningful by providing explanations and coherence.

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**EFFECT OF HOME VISIT ON MORTALITY AND MORBIDITY OF PRETERM NEWBORN**

**Family Life and Parenthood after Birth of Late Preterm Infant**

**Background and Aim** Danish studies show that premature-mothers develop PTSD symptoms more frequent than the rest of the population. Little research has been conducted on family life the first year after birth of a late preterm infant (GW 32–37) and they are discharged to normalcy without extra health care services.

**Methods** A Phd in anthropology is research frame. My one and a half year fieldwork in Danish families after birth of a late preterm child consists of participant observation in every day life and interviews. Health care nurse visits are included as well as peer groups of mothers.

**Results** My preliminary findings show a heavy focus on monitoring child development and health being associated with good parenting. Parenthood is a professionalized and highly moral practice. In spite of an excessive amount of knowledge on babycare parents experience much uncertainty in the multiple daily choises on sleep, stimulation, contact, food etc. The premature birth as event with hospitalisation and an experience of risk, accentuates the insecurity as it is difficult to make sure whether or not the child is to be considered normal. Peer Groups of mothers are thought to be a place of recognition and sharing, but can negatively contribute to the stigma of premature families in the process of mutual assessment that is practiced in the groups.

**Conclusion** The development and health oriented focus in Denmark 2012 has generated a monitoring practice that contributes to parental insecurity and a sense of difference in stead of being empowered.