شبكة المعلومات الجامعية

التوثيق الإلكتروني والميكروفيلم

بسم الله الرحمن الرحيم

HANAA ALY

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HANAA ALY

Assessment of the Nurses' Role toward Nutritional Therapy for High Risk Neonates

Thesis

***Submitted** for Partial Fulfillment*
Of the Requirement of Master Degree in
Pediatric Nursing

By

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2021

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Researcher

Hanan Hesham

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List of Abbreviations

Abb.	Meaning
BMBF	Bovine Milk-Based Fortifiers
BPD	Bronchopulmonary Dysplasia
CRIB	Clinical Risk Index for Neonates
DHM	Donor Human Milk
ECF	Extra Cellular Fluid
ELGA	Extremely Low Gestational Age
EN	Enteral Nutrition
EUR	Extra-Uterine Growth Restriction
EPT	Extermly Preterm
GER	Gastro-Esophageal Reflux
HM	Human Milk
HMF	Human Milk Fortifier
HRN	High Risk Neonates
MEF	Minimal Enteral Feeding
MN	Mixed Nutrition
NANN	National Association of Neonatal Nurses
NEC	Necrotising Entero Colitis
NGT	NasoGastric tube
NS	Nutritional Support
OGT	OroGastric Tube
PDA	Patent Ductus Arteriosus
PDHM	Pasteurized Donor Human Milk
PMA	Post Menstrual Age
PN	Parenteral Nutrition
RCT	Randomized Controlled Trial
RGO	Rate of Glucose Oxidation
ROP	Retinopathy of Prematurity
TPN	Total Parenteral Nutrition

Assessment of the Nurses' Role toward Nutritional Therapy for High-Risk Neonates

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Abstract

Background: Nutritional therapy is important to support the high-risk neonates to promote growth and neurodevelopmental outcome. **Aim:** assess the nurses' role toward nutritional therapy for high-risk neonates. **Design:** A descriptive design. **Subjects**: A purposive sample was composed of 50 nurses who worked at the Neonatal Intensive Care Unit in Children Hospital and Gynecological Hospital affiliated with Ain Shams University. **Tools:** Assessment tool of high-risk neonates to assess characteristics' the studied neonates; predesigned questionnaire sheet, observation checklists and attitude Likert type scale. **Results:** The results revealed that less than half of the studied nurses had an average level of total knowledge. More than half of them had an incompetent level of practice and a positive attitude toward nutritional therapy for high-risk neonates. There were statistically significant differences between the studied nurses' characteristics and their knowledge, practices and attitude regarding nutritional therapy for high-risk neonates. Finally, there was a positive correlation between the nurses' knowledge, practices and their attitude related to nutritional therapy for high-risk neonates**. Conclusion:** The study concluded that, less than half of the studied nurses had an average level of total knowledge, less than two-thirds of them had an incompetent level of practice and more than half of them had a positive attitude toward nutritional therapy for high-risk neonates by P-value < 0.05. **Recommendation:** the current study recommended that, establish a written updated protocol about nutritional therapy to improve the level of nurses' performance regarding the nutritional therapy for high-risk neonates and training program should be provided for all nurses working in NICUs to improve their performance regarding nutritional therapy for high- risk neonates.

Keywords: High-Risk Neonate, Nutritional Therapy, Nurses role.

Introduction

Proper nutrition of high-risk neonates is essential for normal growth, resistance to infection, long-term health and optimal neurologic and cognitive development. Providing adequate nutrition to high-risk neonates is challenging because of several problems, some of them unique to these small infants. These problems include immaturity of bowel function, inability to suck and swallow high risk of necrotizing enterocolitis, illnesses that may interfere with adequate enteral feeding and medical interventions that preclude feeding **(Willis et al., 2015)**.

The improvement in possibilities of saving high-risk neonate's lives that have been done in the last years resulted in a growing number of neonates with dangerous abnormal development that require monitoring of quality and rate of development. High-risk neonates initially require parental and enteral feeding because of their immaturity and clinical problems **(Costeloe et al., 2016)**.

There are two general approaches to the nutritional therapy of high-risk neonates; it includes enteral nutritional therapy and parenteral nutritional therapy. Enteral nutritional therapy makes use of the gastrointestinal tract; it may involve nutritional therapy by mouth or by nutritional therapy tube. Meanwhile, parenteral nutritional therapy involves supplying nutrients through peripherally or centrally placed intravenous catheters. It is undertaken only