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| **Children’s National Cardiac Intensive Care Unit**  **Non-Pharmacologic Interventions to Support Comfort** | | |
| **Sense** | **Nursing Practice Recommendations** | **Caregiver Practice Recommendation** |
| Touch | * Follow Holding Guidelines | * Participate in holding guidelines with hand hugs or holding * Learn signs of overstimulation to use when touching infant |
| Hearing | * Play recordings of parent and family voices or lullabies (time limit) * White noise for neonates and infants especially in times of stress to get to sleep * Limit harsh sudden noises near infant (ie: alarms, slamming drawers, TV remote , etc.) | * Make recordings of voices |
| Sight | * Black, white and red patterns (mobile or pictures) for infant 0 - 3 months. Add bright colors as they get older * Pictures of faces near infant * Use a mirror for infants >2 months age * Limit direct light on baby * Use night and daytime room light * No TV | * Bring pictures of parent and family members |
| Taste | * Offer oral immune therapy * Offer pacifier to infants for non-nutritive sucking (achieves oral feedings sooner) * Monitor for feeding cues | * Provide colostrum and breast milk for oral immune therapy * Interact with speech and occupational therapy to learn feeding cues and signs of overstimulation |
| Smell | * Provide cloth, mother’s breast pad, or blanket with mother’s breast milk scent. * Ask mother to have item close to her while pumping, then provide to patient in times of stress * Provide cloth during tube feedings, as research indicates smell of maternal breast milk combined with pacifier for nonnutritive sucking achieves oral feedings sooner | * Bring in pillowcase, t-shirt or other material with parental scent. * Bring in breast pad or other material with maternal breast milk scent. |
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