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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
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| 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
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| 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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