

Training Objectives

- To ensure that newborns have a safe sleep environment by using the AAP recommendations as a guideline
- To ensure that parents/caregivers receive consistent messages about safe sleep and to ensure that these messages are modeled by hospital staff
- Understand the necessity of documentation regarding Safe Sleep Education



FIMR Criteria

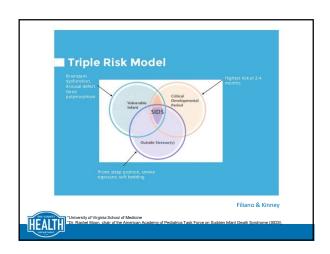
- Resident of Oklahoma, Canadian, Cleveland, Pottawatomie, and Logan Counties
- Must be 24 weeks gestation or later and weigh 500 grams or more
- · No litigation attached

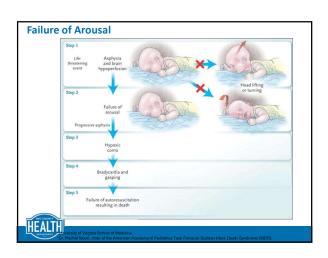


SIDS

- Sudden Infant Death Syndrome
- Sudden death of an infant that cannot be explained after:
 - ✓ Scene Investigation
 - ✓ Autopsy
 - ✓ Review of medical history



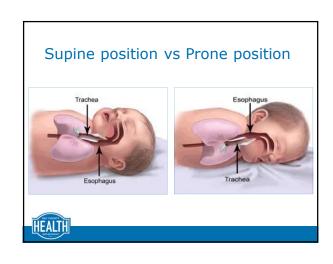








What if my baby chokes while sleeping on his back?



"What if my baby gets a flat head from being on their back all the time?"





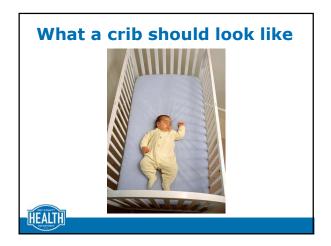












Avoid Overheating

- · Do not overdress baby
- · Avoid over bundling and covering of the face and head
- Avoid putting hats on babies indoors, except in the first few hours of life or in the NICU
- Dress baby in no more than 1 layer more than an adult would wear to be comfortable





Alternative to Blankets



- Sleep Sacks/Wearable Blankets or footed pajamas should be used rather than blankets
- Check on the baby for signs of overheating

Baby may be:

- Flushed
- Sweatv
- Fussy

Provide Visuals



- Provide a separate sleep space for the baby (crib, bassinet or portable crib)
- Room sharing NOT bed sharing
- Room sharing is recommended for at least 6 months, continuing for up to a year or more
- No bed-sharing devices e.g. Dock-a-Tot or Snuggle Me Organic



FIMR Fact:

Of the 378 infant death cases documented by FIMR from 2015-2019, 27% (102) were sleep-related.

- · 51% of those cases were found in an adult bed
- 11% were found on a couch
- 54% were found surface-sharing
- 25% were in prone position
- · 8% slept on their sides

Source: FIMR Infant Mortality Data 2015-2019. Oklahoma State Department of Health (OSDH), Center for Health Statistics, Health HEALTH

Feeding of Human Milk

- Reduces the risk of SIDS
- Recommended to be <u>exclusively</u> <u>fed for at least 6 months</u>, with continuation until 1 year or longer as <u>mutually desired</u> by parent and infant
- If unable to or choose not to feed human milk, it is still important to follow Safe Sleep Recommendations
- Be aware that breastfeeding/chest feeding relaxes parents
- When feeding at night, if getting tired, make sure to place back in crib and avoid bedsharing





Human milk

Contains anti-infective and anti-inflammatory factors

Six months of exclusive breastfeeding is associated with reduction in:

- · Lower respiratory tract infections
- Severe diarrhea
- Ear infections
- Obesity
- SIDS





Provides safe, pasteurized milk donated by healthy, screened breastfeeding mothers, to ensure that our most vulnerable babies will receive full human milk feedings.

http://www.okmilkbank.org

Pacifier Recommended

- Although the mechanism is yet unclear, studies have reported a protective effect of pacifiers on the incidence of SIDS
- Typically dislodges within 15 minutes to 1 hour of sleep
- Never coat the pacifier with anything sweet
- Don't use a string or anything else to attach a pacifier around your baby's neck or clothing
- If breastfed/chestfed, wait until it is fully established.





Schedule and Go to all well-child visits

- There is NO evidence of any causal link between immunizations and infant death
- Recent studies suggest that immunizations may have a protective effect against infant deaths
- · Talk to your health care provider







Do not rely on products that claim to reduce the risk of infant death

- These include wedges, positioners, special mattresses and special sleep surfaces
- Manufacturers should not claim a product protects against SIDS unless there is scientific evidence to prove it





The Risks with Tobacco Use

- Out of all sleep related infant deaths, <u>48%</u> of moms used tobacco.
- 52% of moms/babies were exposed to Second-hand and third-hand smoke
- The SIDS/Sleep-Related Death rates among mothers who smoked was 11 times higher than nonsmokers
- Non-Hispanic White mothers who smoked was 12 times higher
- Non-Hispanic Black Mothers who smoked <u>11</u> <u>times</u> higher



SMOKING DURING PREGNANCY AFFECTS THE BABY BY...

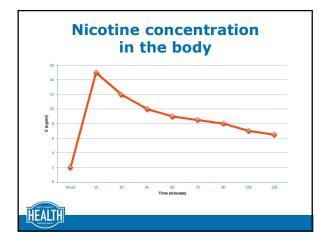
- Slowing the development of the baby's lungs
- Constricting the blood vessels in the placenta leading to oxygen and nutrient deficiencies and fetal growth restriction
- Increasing the risk of the baby being born too
- Increasing the baby's heart rate



Tobacco Risks don't end with Pregnancy

- Effects of tobacco Reduce Exposure exposure on an infant
 - Prematurity
 - Low birth weight
 - Under-developed
 - Addiction
 - Behavioral
- HEALTH

- - · Limit number of cigarettes per day
 - Timing breast feeding
 - Smoking away from infant
 - Avoid 3rd hand smoke



Avoid all cigarette smoke Second-Hand Smoke 7000 chemicals and 69 cancer causing agents · Lingers in the air for hours Can be brought in from outside Third Hand Smoke Residue from second-hand smoke that remains on surfaces

1 800 **QUIT NOW TEALTH**

- Can be harmful when it comes into contact with baby's skin
- Can linger on surfaces for years



Other Postnatal **Exposures**

- Avoid using alcohol, marijuana, opioids, and illicit drug use during pregnancy and after birth
- Can increase the risk of SIDS especially when someone bedshares with baby



















