

Editorial on Neonatal Nursing

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EDITORIAL

Neonatal nursing may be a sub-specialty of medical care for newborn infants up to twenty-eight days after birth. The term neonatal comes from neo, "new", and natal, "pertaining to birth or origin". Neonatal nursing requires a high degree of skill, dedication, and emotional strength because the nurses look after newborn infants with a variety of problems, varying between prematurity, birth defects, infection, cardiac malformations and surgical problems.

Level I consist of caring for healthy newborns. Level I nurses are now uncommon within us. Healthy babies typically share an area with their mother, and both patients are usually discharged from the hospital quickly [1].

Level II provides intermediate or special look after premature or ill newborns. At this level, infants may have special therapy provided by nursing staff, or may simply need longer before being discharged.

Level III, the Neonatal intensive-care unit (NICU), treats newborns that can't be treated within the other levels and are in need of technology to survive, like breathing and feeding tubes. Nurses comprise over 90 percent of the NICU staff.

Level IV includes all the talents of the extent III but involves the extensive care the foremost critically and sophisticated newborns. This facility will have 24-hour resident neonatologists and surgeons. They involved intricate surgical repairs like congenital cardiac issues and purchased malformations.

The purpose of this study was to explain the work satisfaction of neonatal medical care unit (NICU) nurses within the Midwestern us. The factors explored in job satisfaction were monetary compensation (pay), job stress, caring for patients in stressful situations, level of autonomy, organizational support, level of data of the specialty, work environment, staffing levels, communication with physicians, communication with neonatal nurse practitioners, interdisciplinary communication, solidarity, and therefore the amount of required "floating" to other nursing units.

Participants were 109 NICU nurses working as either staff nurses (n = 72) or advanced practice nurses (n = 37). 96% worked during a level 3 NICU. A descriptive, correlational design was wont to study job satisfaction among NICU nurses. Nurses were recruited at 2 regional NICU conferences in 2009 and 2010. The questionnaire

was a researcher-developed survey consisting of 14 questions during a Likert-type response rating 1 to five, with a neighborhood for comments. Descriptive statistics and correlations were wont to analyze the resulting data.

This article reviews the origins and evolution of neonatology and considers the role of the neonatal nurse within this specialty. Neonatal nurses are an important a part of the neonatal team that gives look after sick babies. The medical care required by sick babies and their families on a neonatal unit are often variable and sophisticated. The past century has seen significant changes within the role of the neonatal nurse. This has happened through dramatic technological developments on neonatal units, an increased understanding of neonatal physiology and pathology, changes within the education of neonatal nurses, and active and ongoing clinical research within the specialty.

Neonatal nurses report an excellent deal of ethical challenges in their everyday work. Seemingly trivial everyday choices nurses make are not any more value-neutral than life-and-death choices. Everyday ethical challenges should even be recognized as ethical dilemmas in clinical practice. The aim of this study is to research which sorts of ethical challenges neonatal nurses experience in their day-to-day look after critically ill newborns. Findings suggest that nurses experience a various range of everyday ethical challenges associated with challenging interactions with parents and colleagues, emotional strain, protecting the vulnerable infant, finding the balance between sensitivity and authority, ensuring continuity of treatment, and miscommunication and professional disagreement. a serious finding during this study is how different agents involved in caring for the newborn experience their realities differently. The study presents new aspects which increases knowledge and understanding of the truth of nursing during a neonatal medical care unit, while also demanding increased research during this field of care [2].

Fetus and neonate spend most of their time sleeping inside and out of doors the womb. Sleep is considered an important action of time of life almost like breathing and nutrition. It plays a key role in brain development. Today, it is shown that sleep plays a predominant role in blood heat regulation, energy saving and neuronal detoxification. Sleep is that the most vital behavioral state of neonates, particularly in preterm ones.

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Received: September 15, 2020, **Accepted:** September 20, 2020, **Published:** September 27, 2020

Citation: Sakinala S (2020) Editorial on Neonatal Nursing. J Neonatal Bio. 9:282. doi:10.35248/2167-0897.20.9.282.

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