

DOWNLOAD PDF EMIC (EMERGENCY MATERNITY AND INFANT CARE) A STUDY OF ADMINISTRATIVE EXPERIENCE

Chapter 1 : Nursing Bullets: Maternity and Newborn Nursing Reviewer – Nurseslabs

The Emergency Maternity and Infant Care plan was the first national health plan which could be analyzed in detail. It offered an important field for the accumulation of information regarding governmental health programs.

Lathrop, a noted maternalist reformer also active in the Settlement Movement, was the first woman ever to head a government agency in the United States. The Bureau completed birth registration campaigns and conducted infant mortality studies in 10 cities between and . These studies revealed strong connections between poverty and infant deaths. The Bureau endorsed activities such as prenatal care, infant health clinics, visiting nurses, public sanitation, certified milk stations, and education of mothers. By , the Bureau estimated that the information in its pamphlets had benefited one-half of all U. These studies helped to reveal the prevalence and nature of child labor in the United States. Projects in most states included some or all of the following: Midwife training programs, licensing, and enforcement Parent education through traveling health demonstrations, health centers, home visits, correspondence courses, and classes Establishment of standards and licensing procedures for maternity homes Data collection on maternal and infant mortality The program ended in , having helped an estimated 4 million infants and preschool children and approximately , pregnant women. She held this position until Maternal and Child Health Care funded clinics, professional education, and medical care for needy children. Child Welfare Services provided state grants to address the needs of dependent and neglected children. In , the National Industrial Recovery Act NIRA opened the door for the Bureau to establish industry-specific child labor codes and the first federal minimum age for full-time employment. Many of its provisions, however, were recreated in the Fair Labor Standards Act passed three years later. Committee for the Care of European Children to maintain a central register of unaccompanied refugee children arriving in the United States, to oversee their placement with agencies and foster families, and to establish standards for their care. At the time, EMIC was the largest federally funded medical care program ever undertaken in the United States, serving approximately 1. In this reorganization, the Bureau lost authority over all labor-related programs. In , the Bureau formed the Special Juvenile Delinquency Project with foundations and other private partners interested in improving the prevention and treatment of delinquency. The Project sponsored public meetings and collaborated on a series of practice guides and professional standards. Bureau-funded programs helped to develop treatment options to keep children with disabilities within their own families, schools, and communities. Beginning in , federal child welfare funds began to support children in foster care. At the same time, a growing emphasis was placed on providing services, including homemaker services, to help keep families together. Under her direction, the Bureau also advocated for greater protection for all parties in an adoption. Early topics included methods for meeting the needs of disadvantaged preschool children and their families a precursor to the Head Start Program , selection of foster parents, and the well-being of adopted children and their families. The Bureau held meetings with experts and drafted a model statute that states could use to require doctors and hospitals to report suspected abuse. The Bureau also funded grants to research causes of child abuse and effective prevention methods. A Youth Services Unit was created in to encourage more proactive services to help youth transition successfully into adulthood. These standards, emphasizing the importance of due process for youth offenders, were cited in the groundbreaking in re Gault decision that year. Department of Health and Human Services. Increased attention was paid to the growing number of hard-to-place children, including those from minority groups, older children, children with disabilities, and sibling groups. The Bureau supported exploration of nontraditional adoption arrangements, such as cross-cultural, transracial, single-parent, and subsidized adoption. This led to legislative and policy changes during the late s and early s, including the establishment of a federal program to support independent living services for youth aging out of the foster care system without permanent families.

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Chapter 2 : - NLM Catalog Result

Its total service to the community was the provision of hospital or domiciliary maternity and infant care for 1, , mothers and , infants. EMIC was a novel pattern of health service in the United States and it cut across normal health service practices in several important directions.

Bullets Basic Concepts The male sperm contributes an X or a Y chromosome; the female ovum contributes an X chromosome. Fertilization produces a total of 46 chromosomes, including an XY combination male or an XX combination female. Organogenesis occurs during the first trimester of pregnancy, specifically, days 14 to 56 of gestation. Implantation in the uterus occurs 6 to 10 days after ovum fertilization. The chorion is the outermost extraembryonic membrane that gives rise to the placenta. The corpus luteum secretes large quantities of progesterone. From the 8th week of gestation through delivery , the developing cells are known as a fetus. The union of a male and a female gamete produces a zygote, which divides into the fertilized ovum. Spermatozoa or their fragments remain in the vagina for 72 hours after sexual intercourse. If the ovum is fertilized by a spermatozoon carrying a Y chromosome, a male zygote is formed. Implantation occurs when the cellular walls of the blastocyte implants itself in the endometrium, usually 7 to 9 days after fertilization. Heart development in the embryo begins at 2 to 4 weeks and is complete by the end of the embryonic stage. If a patient misses a menstrual period while taking an oral contraceptive exactly as prescribed, she should continue taking the contraceptive. The first menstrual flow is called menarche and may be anovulatory infertile. Therefore, the second breast should be used first at the next feeding. A woman who is breastfeeding should rub a mild emollient cream or a few drops of breast milk or colostrum on the nipples after each feeding. She should let the breasts air-dry to prevent them from cracking. Human immunodeficiency virus HIV has been cultured in breast milk and can be transmitted by an HIV -positive mother who breast-feeds her infant. Colostrum, the precursor of milk, is the first secretion from the breasts after delivery. A mother should allow her infant to breastfeed until the infant is satisfied. The time may vary from 5 to 20 minutes. Most drugs that a breastfeeding mother takes appear in breast milk. Prolactin stimulates and sustains milk production. Breastfeeding of a premature neonate born at 32 weeks gestation can be accomplished if the mother expresses milk and feeds the neonate by gavage. Hot compresses can help to relieve breast tenderness after breastfeeding. Unlike formula, breast milk offers the benefit of maternal antibodies. A lower specific gravity suggests overhydration; a higher one suggests dehydration. During the first hour after birth the period of reactivity , the neonate is alert and awake. The neonatal period extends from birth to day A low-birth-weight neonate weighs 2, g 5 lb 8 oz or less at birth. A very-low-birth-weight neonate weighs 1, g 3 lb 5 oz or less at birth. Administering high levels of oxygen to a premature neonate can cause blindness as a result of retrolental fibroplasia. An Apgar score of 7 to 10 indicates no immediate distress, 4 to 6 indicates moderate distress, and 0 to 3 indicates severe distress. Normally, the neonate abducts and extends all extremities bilaterally and symmetrically, forms a C shape with the thumb and forefinger, and first adducts and then flexes the extremities. If jaundice is suspected in a neonate, the nurse should examine the infant under natural window light. If natural light is unavailable, the nurse should examine the infant under a white light. Fetal alcohol syndrome presents in the first 24 hours after birth and produces lethargy, seizures, poor sucking reflex , abdominal distention, and respiratory difficulty. In a neonate, the symptoms of heroin withdrawal may begin several hours to 4 days after birth. In a neonate, the symptoms of methadone withdrawal may begin 7 days to several weeks after birth. In a neonate, the cardinal signs of narcotic withdrawal include coarse, flapping tremors; sleepiness; restlessness; prolonged, persistent, high-pitched cry; and irritability. Chlorpromazine Thorazine is used to treat neonates who are addicted to narcotics. The nurse should provide a dark, quiet environment for a neonate who is experiencing narcotic withdrawal. Drugs used to treat withdrawal symptoms in neonates include phenobarbital Luminal , camphorated opium tincture paregoric , and diazepam Valium. In a premature neonate, signs of respiratory distress include nostril flaring, substernal retractions, and inspiratory

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grunting. Respiratory distress syndrome hyaline membrane disease develops in premature infants because their pulmonary alveoli lack surfactant. Whenever an infant is being put down to sleep, the parent or caregiver should position the infant on the back. When teaching parents to provide umbilical cord care, the nurse should teach them to clean the umbilical area with a cotton ball saturated with alcohol after every diaper change to prevent infection and promote drying. Cutis marmorata is mottling or purple discoloration of the skin. The first immunization for a neonate is the hepatitis B vaccine, which is administered in the nursery shortly after birth. A fever in the first 24 hours postpartum is most likely caused by dehydration rather than infection. Neonates who are delivered by cesarean birth have a higher incidence of respiratory distress syndrome. The narcotic antagonist naloxone Narcan may be given to a neonate to correct respiratory depression caused by narcotic administration to the mother during labor. In a neonate, symptoms of respiratory distress syndrome include expiratory grunting or whining, sandpaper breath sounds, and seesaw retractions. Cerebral palsy presents as asymmetrical movement, irritability, and excessive, feeble crying in a long, thin infant. The nurse should assess a breech-birth neonate for hydrocephalus, hematomas, fractures, and other anomalies caused by birth trauma. In a neonate, long, brittle fingernails are a sign of postmaturity. Desquamation skin peeling is common in postmature neonates. The average birth weight of neonates born to mothers who smoke is 6 oz g less than that of neonates born to nonsmoking mothers. Neonatal jaundice in the first 24 hours after birth is known as pathological jaundice and is a sign of erythroblastosis fetalis. Then it begins to disappear from the face, trunk, arms, and legs, in that order. In a neonate, hypoglycemia causes temperature instability, hypotonia, jitteriness, and seizures. Premature, postmature, small-for-gestational-age, and large-for-gestational-age neonates are susceptible to this disorder. Neonates typically need to consume 50 to 55 cal per pound of body weight daily. During fetal heart rate monitoring, variable decelerations indicate compression or prolapse of the umbilical cord. A neonate whose mother has diabetes should be assessed for hyperinsulinism. The best technique for assessing jaundice in a neonate is to blanch the tip of the nose or the area just above the umbilicus. Strabismus is a normal finding in a neonate. Respiratory distress syndrome develops in premature neonates because their alveoli lack surfactant. Rubella infection in a pregnant patient, especially during the first trimester, can lead to spontaneous abortion or stillbirth as well as fetal cardiac and other birth defects. The score is based on respiratory effort, heart rate, muscle tone, reflex irritability, and color. Erythromycin is given at birth to prevent ophthalmia neonatorum. Hepatitis B vaccine is usually given within 48 hours of birth. Hepatitis B immune globulin is usually given within 12 hours of birth. In neonates, cold stress affects the circulatory, regulatory, and respiratory systems. Fetal embodiment is a maternal developmental task that occurs in the second trimester. During this stage, the mother may complain that she never gets to sleep because the fetus always gives her a thump when she tries. Mongolian spots can range from brown to blue. Their color depends on how close melanocytes are to the surface of the skin. They most commonly appear as patches across the sacrum, buttocks, and legs. Mongolian spots are common in non-white infants and usually disappear by age 2 to 3 years. Caput succedaneum is edema that develops in and under the fetal scalp during labor and delivery. It resolves spontaneously and presents no danger to the neonate. To establish a milk supply pattern, the mother should breast-feed her infant at least every 4 hours. During the first month, she should breast-feed 8 to 12 times daily demand feeding. To avoid contact with blood and other body fluids, the nurse should wear gloves when handling the neonate until after the first bath is given. Tocolytic agents used to treat preterm labor include terbutaline Brethine, ritodrine Yutopar, and magnesium sulfate. A pregnant woman who has hyperemesis gravidarum may require hospitalization to treat dehydration and starvation. Diaphragmatic hernia is one of the most urgent neonatal surgical emergencies. By compressing and displacing the lungs and heart, this disorder can cause respiratory distress shortly after birth. Common complications of early pregnancy up to 20 weeks gestation include fetal loss and serious threats to maternal health. The diamond-shaped anterior fontanel usually closes between ages 12 and 18 months. The triangular posterior fontanel usually closes by age 2 months.

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Chapter 4 : EMIC (Emergency Maternity and Infant Care). A Study of Administrative Experience.

Title / Author Type Language Date / Edition Publication; 1. EMIC (Emergency maternity and infant care) a study of administrative experience: 1.

Chapter 5 : Government-sponsored health care's success (in World War II) - Philly

A study of infant care in the Emergency Maternity and Infant Care Program of the District of Columbia /.

Chapter 6 : United States Children's Bureau - Wikipedia

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