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Abstract
Limited clinical evidence exists regarding whether the single private room Neonatal Intensive Care Unit (NICU) environment of care delivery has a positive, negative, or neutral impact on health outcomes for the high risk neonate and on maternal stress as compared to the open room design. The study purpose was to examine whether a difference exists in health outcomes in the open room versus single private room NICU environment. The factors considered were weight gain, ventilator days, hospital length of stay, incidence and grade of intraventricular hemorrhage (IVH), the number of parental visits, and perceptions of maternal stress. Infants hospitalized in an open room environment (n=52) were matched by gestational age to infants in a single private room NICU (n=52). Mothers of the infants from the open room (n=26) and the single private room (n=20) groups completed the Parental Stress Scale: Neonatal Intensive Care Unit (PSS:NICU) survey instrument. The t-test for independent groups demonstrated a difference for the number of parent visits (t=6.672, df=60.13, p<.001) with a significant increase in visitation frequency for infants in the single private room NICU. Maternal perceptions of stress were not different (t=.154, df=44, p=.878), and high stress scores were reported for both groups regardless of the infant's environment of hospitalization. This study demonstrates that the single private room environment promotes increased parental access to their infants. The finding of high levels of maternal perception of stress in both the open room and single private room NICU's demonstrates that the environment did not impact the perception of maternal stress. This finding supports the implication that mothers of hospitalized infants need nursing support regardless of the type of NICU environment.

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