



Cardiopulmonary Resuscitation Training (CPR)

Healthcare professionals caring for high-risk infants and their families are responsible for preparing parents and families for safe discharge and transition to home. Discharge education for these patients should cover safety at home, including cardiopulmonary resuscitation (CPR) training. This education can decrease parents' and families' worry about discharge to home. Families must be evaluated to determine what form of education is appropriate to meet their needs. Learning disabilities or language barriers among family members must be recognized and taken into consideration. Education should be tailored to these family members. There are several potential educational styles for infant CPR, including

in-person, written, and video instruction. The following publications offer comparisons of methods used to provide CPR training:

- Dracup, K., Moser, D. K., Doering, L. V., Guzy, P. M., & Juarbe, T. (2000). A controlled trial of cardiopulmonary resuscitation training for ethnically diverse parents of infants at high risk for cardiopulmonary arrest. *Critical Care Medicine*, 28(9), 3289–3295.
- Forsythe, P. L., Maher, R., Kirchick, C., & Bieda, A. (2007). SAFE discharge for infants with high-risk home environments. *Advances in Neonatal Care*, 7(2), 69–75.



Cardiopulmonary Training (CPR): Information for Parents

The American Academy of Pediatrics suggests all parents learn infant cardiopulmonary resuscitation (CPR) before their babies leave the hospital. For some families, CPR training is required before their baby can be discharged. CPR training for infants and children may be offered through the Red Cross, American Heart Association, local libraries, and your local hospital. You will learn basic CPR skills to help your baby until emergency responders arrive. If an emergency happens, CPR can save your baby's life by reestablishing blood flow to the heart, brain, and other organs and restoring breathing. CPR may be necessary in many different emergencies, including suffocation, accidents, near drowning, and suspected sudden infant death syndrome (SIDS). CPR works best when started as soon as possible, but you must first decide if it's needed. CPR should only be done if your baby is not breathing, has no heartbeat, or is not responding.

Although you may feel very anxious as your baby is being prepared for discharge from the hospital, becoming familiar with emergency procedures will help decrease your fear and increase your confidence when taking your baby home. Partner with the neonatal intensive care unit team early in your baby's hospitalization to help prepare you for your baby's safe transition to home. If your family is having trouble understanding the steps in infant CPR, stop your instructor and ask questions. After learning infant CPR, review the steps often. It is common for parents to be concerned that they will not remember the steps to CPR in an emergency. When calling 911, explain the issue you are having. They will try to walk you through it by phone until the team arrives. Remember, this class is provided so you can give lifesaving care and increase your child's chance for survival in case of emergency until emergency responders can take over.