evidence of inadequate parenting. The extended body position promotes heat loss, because more surface area is exposed to the environment. Encourage the parents to swaddle or wrap the infant snugly in a blanket before picking up the child to provide security and warmth. The nurse also discusses with parents their feelings concerning attachment to the child, emphasizing that the child's lack of clinging or molding is a physical characteristic and not a sign of detachment or rejection.

Decreased muscle tone compromises respiratory expansion. In addition, the underdeveloped nasal bone causes a chronic problem of inadequate drainage of mucus. The constant stuffy nose forces the child to breathe by mouth, which dries the oropharyngeal membranes, increasing the susceptibility to upper respiratory tract infections. Measures to lessen these problems include clearing the nose with a bulb-type syringe, rinsing the mouth with water after feedings, increasing fluid intake, and using a cool-mist vaporizer to keep the mucous membranes moist and the secretions liquefied. Other helpful measures include changing the child's position frequently, practicing good hand washing, and properly disposing of soiled articles, such as tissues. If antibiotics are ordered, the nurse stresses the importance of completing the full course of therapy for successful eradication of the infection and prevention of growth of resistant organisms.

Inadequate drainage resulting in pooling of mucus in the nose also interferes with feeding. Because the child breathes by mouth, sucking for any length of time is difficult. When eating solids, the child may gag on the food because of mucus in the oropharynx. Parents are advised to clear the nose before each feeding; give small, frequent feedings; and allow opportunities for rest during mealtime.

The protruding tongue also interferes with feeding, especially of solid foods. Parents need to know that the tongue thrust is not an indication of refusal to feed but a physiologic response. Parents are advised to use a small but long, straight-handled spoon to push the food toward the back and side of the mouth. If food is thrust out, it should be refed.

Dietary intake needs supervision. Decreased muscle tone affects gastric motility, predisposing the child to constipation. Dietary measures, such as increased fiber and fluid, promote evacuation.