

physical aspects of care that they ignore the emotional needs of infants and their families. The significance of early parent–child interaction and infant stimulation has been documented by reliable research. Nurses, aware of these infant and family needs, must incorporate activities that facilitate family interaction into the nursing care plan.

The birth of a preterm infant is an unexpected and stressful event for which families are emotionally unprepared. They find themselves simultaneously coping with their own needs, the needs of their infant, and the needs of their family (especially when they have other children). To compound the situation, their infant's precarious condition engenders an atmosphere of apprehension and uncertainty. They are faced with multiple crises and overwhelming feelings of responsibility, helplessness, and frustration.

All parents have some anxieties about the outcome of a pregnancy, but after a preterm birth, the concern is heightened regarding both the viability and the normalcy of their infant. Mothers may see their infant only briefly before the newborn is removed to the intensive care unit or even to another hospital, leaving them with just the recollection of the infant's very small size and unusual appearance. They often feel alone or lost on the mother–baby unit, belonging neither with mothers who have lost their infants nor with those who have delivered healthy, full-term infants. The staff and physicians are often guarded in discussing the infant's condition; mothers are continually expecting to hear that their infant has died, and they are sensitive to the anxieties of other mothers and staff members. Going home without their infant only compounds their feelings of disappointment, failure, and deprivation.

When an infant is to be transported from the hospital, the parents need a description of the facility where the infant is going. They need to know the location, reputation, and nature of the facility and the care that the infant is expected to receive. The name of the infant's physician and the telephone number of the nursery should be given to them, and unfamiliar terms (such as *neonatologist*, *ventilator*, *infusion*, and *incubator*) should be explained. Explanations should be kept simple, and parents are given the opportunity to ask questions. If booklets are available that describe the facility, they are