

appearance for 7 to 10 days, after which the blackness fades and gives way to redness with an eventual lightening of the treated area. During the treatment phase, parents are cautioned to avoid any trauma to the lesion or picking at the scab. The child's fingernails are trimmed as an added precaution. Washing the area gently with water and dabbing it dry is adequate, although in some cases, a topical antibiotic ointment may be used. No salicylates should be taken during the treatment phase, because they decrease the effects of the therapy. The child should be kept out of the sun for several weeks and then protected with a sunscreen of at least SPF 25. Complications associated with laser treatment include redness and bruising and, less commonly, hyperpigmentation, hypopigmentation, and atrophic scarring (Zheng, Zhang, Zhou, et al, 2013).

## Nursing Care of the High-Risk Newborn and Family

### Identification of High-Risk Newborns

A **high-risk neonate** can be defined as a newborn, regardless of gestational age or birth weight, who has a greater than average chance of morbidity or mortality because of conditions or circumstances associated with birth and the adjustment to extrauterine existence. The high-risk period encompasses human growth and development from the time of **viability** (the gestational age at which survival outside the uterus is believed to be possible, or as early as 23 weeks of gestation) up to 28 days after birth; thus, it includes threats to life and health that occur during the prenatal, perinatal, and postnatal periods.

There has been increased interest in **late-preterm infants** of 34 to 36<sup>1</sup>/<sub>7</sub> weeks of gestation who may receive the same treatment as term infants. Late-preterm infants often experience similar morbidities to preterm infants, including respiratory distress, hypoglycemia requiring treatment, temperature instability, poor feeding, jaundice, and adverse neurodevelopmental outcomes (Jefferies, Lyons, Shah, et al, 2013). Therefore, assessment and prompt intervention in life-threatening perinatal emergencies often make the difference