

2012). Monitoring is best initiated on an individual basis.

Nursing Care Management

Nurses have a vital role in preventing SIDS by educating families about the risk of prone sleeping position in infants from birth to 6 months old, the use of appropriate bedding surfaces, the association with maternal smoking, and the dangers of co-sleeping on non-infant surfaces with adults or other children. Additionally, nurses have an important role in modeling behaviors for parents to foster practices that decrease the risk of SIDS, including placing infants in a supine sleeping position in the hospital. Data indicate that some nurses still place healthy infants in a side-lying position in the hospital due to a belief of safety concerns if the infant is placed supine ([Mason, Ahlers-Schmidt, and Schunn, 2013](#)). Many health care workers are concerned that infants placed on the back to sleep will aspirate emesis or mucus, yet studies fail to show an increase in infant deaths, spitting up during sleep, aspiration, asphyxia, or respiratory failure as a result of supine sleep positioning ([American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome, 2011](#)).

Education can change practice. After an educational session and laminated reminder card on safe sleep recommendations, neonatal intensive care unit (NICU) nurses had a significant increase in rate of supine positioning (39% before and 83% after), providing a firm sleeping surface (5% before and 96% after), and removal of soft objects in bed (45% before and 75% after) for their NICU patients ([Gelfer, Cameron, Masters, et al, 2013](#)). A safe sleeping practice educational session for nurses at a community hospital in the Midwestern area of the United States showed a statistically significant increase in safe sleep practices with their patients (25% compliance pre-intervention and 58% compliance post-intervention) and 95% of parents planned to use the supine sleep position at home ([Mason, Ahlers-Schmidt, and Schunn, 2013](#)). Role modeling safe sleep practices and providing education to parents is imperative before hospital discharge because limited opportunities exist for parents to receive information about caring for their infant ([Ateah, 2013](#)). Nurses *must* be proactive in further decreasing the incidence of SIDS; postpartum discharge planning, newborn discharges, follow-up home visits, well-baby clinic visits, and