

Monitors are effective only if they are used. They do not prevent death but alert the caregiver to the ALTE in time to intervene. The need to use the monitor and to respond appropriately to alarms must be stressed. Noncompliance can result in the infant's death.

Many of the stresses observed during the home monitoring period are characteristic of families with chronically ill children. The child with an apnea or cardiorespiratory monitor may have additional health care needs such as a gastrostomy, tracheostomy, and myriad medications or treatments that exacerbate the parents' stress. Parents report increased stress, including concern for the child's survival, fear of incompetence in assuming home responsibility, inadequate respite care, lack of time for other children and spouse, social isolation from friends and extended family, constant work, and fatigue. To deal with these potential effects, nurses need to use the same interventions as those discussed for children with chronic illness and be aware of the need for referral when difficulties are suspected.

To lessen the continuous responsibility of monitoring, other family members, such as grandparents and other immediate family members, should be taught how to manipulate the equipment, read and interpret the signals, and administer CPR (if needed). They are encouraged to stay with the infant for regular periods to allow the parents respite. Support groups of other families who have successfully completed monitoring can also be of benefit. Because reliable babysitters are difficult to locate, support group members and nursing students may be potential sources of qualified caregivers.

NCLEX Review Questions

1. Vitamin A may be administered in significant amounts to children with this childhood communicable illness to decrease morbidity and mortality:
 - a. Pertussis
 - b. Varicella
 - c. Rubella
 - d. Measles