

BACKGROUND

The UMC NICU employs an algorithm to direct initial oral feeding, classifying infants as "high risk" or "low risk." After two years, evidence suggests some infant populations may not be adequately identified within this framework. Additionally, studies comparing flow rates (see chart) highlight concerns about the use of disposable nipples, specifically, fast or "standard" flow rates.

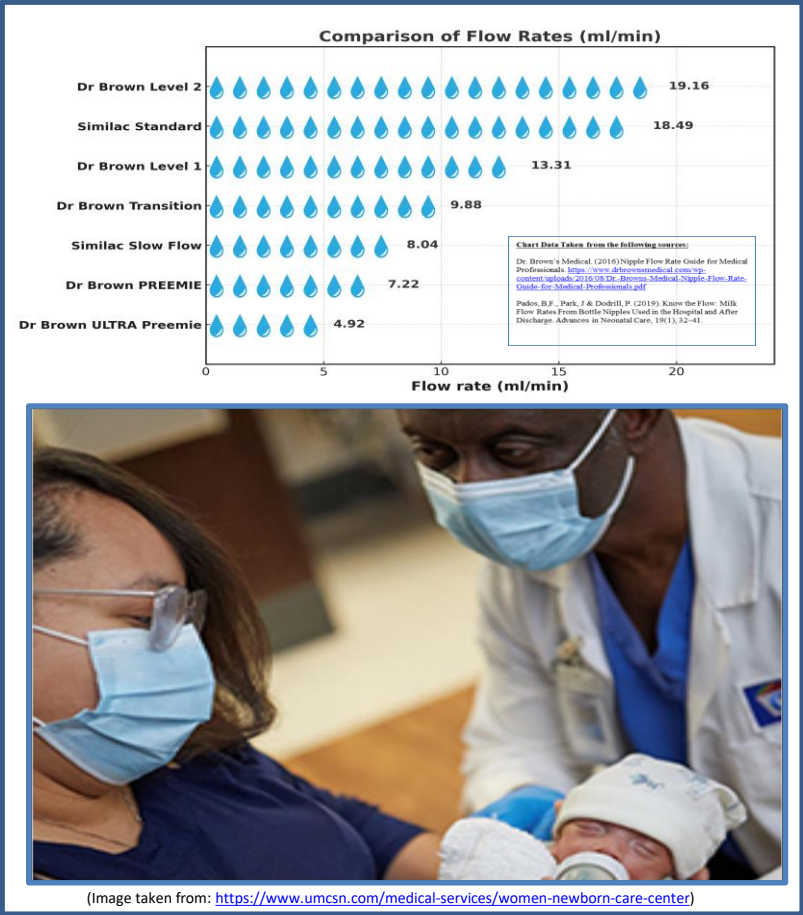
PURPOSE

The aim of this proposal is to undertake a quality improvement project refining the existing NICU feeding algorithm through the following:

- Optimize developmental feeding practices for infants in the NICU
- Improve the culture of safety and consistency in feeding plans of care among caregivers
- Improved interdisciplinary management of feeding for infants with Neonatal Abstinence Syndrome (NAS) or Neonatal Opioid Withdrawal Syndrome (NOWS)

REFERENCES

Scan QR code for the literature review of references.



CONCLUSIONS

Based on these comprehensive findings, proposed updates to the feeding algorithm will be drafted and submitted to the Neonatology team for detailed review and approval. Upon approval, targeted educational sessions will be provided for clinical bedside nurses and the developmental feeding team to ensure successful implementation of the revised algorithm.

METHODS

- A systematic review of the existing algorithm will be conducted to clarify the definitions distinguishing "high risk" from "low risk" infants.
- Evaluation of evidence-based practices regarding developmental feeding algorithms, including recommended timelines and methodologies for comparison with our current approach.
- Completed an empirical evidence analysis on bottle flow rates and their impact on the developmental feeding progression of premature infants in the NICU.

RESULTS

By implementing developmentally appropriate bottle flow rates for NICU infants, the project aims to foster a more consistent approach to feeding plans among caregivers that encourages emphasis on developing feeding skills that promote positive outcomes. This initiative is anticipated to strengthen interdisciplinary collaboration, resulting in improved management of feeding practices and enhancing the quality of care for premature infants.

