



Abroad News

Maternal and Infant Care

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This time I was asked by the Chief Editor of the journal to write up an article as to what Perinatal Nurse Practitioners do. To the best of my knowledge, there isn't such a thing as Perinatal Nurse Practitioner in the USA. The vast majority of the Womens Health Nurse Practitioners and Obstetric and Gynecology Nurse Practitioners do take care of patients who are in the perinatal period. Thus, some of them may be labeled as "Perinatal Nurse Practitioners."

In the article published in March, 2004, I briefed you on the general job descriptions of different NPs. Therefore, I would like to focus this time on what Obstetric and Gynecology Nurse Practitioners do and to describe their roles in detail. In this article, I will use the term of Perinatal Nurse Practitioners (PNPs) and Obstetric and Gynecology Nurse Practitioners interchangeably.

The PNPs are advanced practice nurses who have advanced skills in physical and psychosocial assessment. They hold a RN license and MSN with advanced practice certification. They go through programs generally 2 years in length. These programs are affiliated with major medical centers and Obstetricians who are willing to train PNP-to-be students.

The PNPs provide health care in a wide range of settings, generally focusing on primary care, health maintenance, and prevention of illness. They carry out many of the medical

responsibilities traditionally handled by Obstetricians and/or Gynecologists. They conduct physical examinations, take detailed medical histories, order lab tests, and X rays, diagnose, and treat illness and prescribe medications. The PNPs can order blood tests to determine Rh factor, Hemoglobin, Hematocrit, Alpha Feto Protein, and serology. They perform microscopic examinations to diagnose sexually transmitted diseases, Pap Smears, and Fibronectin test, and also prescribe medications, such as antibiotics and steroids, if and when needed.

One of the primary roles for the PNPs is to make sure that nurses provide consistent information to their clients either at clinics or hospitals. This practice means that the PNPs actively participate in staff as well as patient teaching.

The definition of "perinatal nursing" is the nursing care during the period surrounding birth. Furthermore, the perinatal period is the time beginning when the fetus reaches 500 grams (about week 20 of pregnancy) and ending about 4 weeks after birth.

The perinatal death is the sum of the fetal and neonatal rates. I would like to pause here to refresh your memory. A fetal death is defined as the death in utero of a fetus weighing 500 grams or more, roughly the weight of a fetus of 20 weeks or more gestation, whereas a neonatal death is defined as the first 28 days of life.

주요어 : Perinatal Nurse Practitioners, Certified Nurse Midwives, Lactation Consultant

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The idea of utilizing the PNP's is based on the concept of intensive individual attention before, during, and after birth. The pattern of care by PNP's includes multiple prenatal visits, encouragement of hospital accouchement, fetal monitoring interpretation, and well-baby clinics. However, postnatal services are largely not attended by the PNP's in the USA. This means great demands upon manpower, facilities, and financial resources.

It is important to note that the vast majority of the PNP's do not attend births, even though they are educationally, as well as clinically prepared to interpret fetal heart patterns and to take appropriate medical and nursing interventions if and when necessary. In many cases, Certified Nurse Midwives (CNMs) attend birthing.

There seem to be a lot of overlaps between PNP's and CNMs. The both are advance practice nurses who specialize in providing care to healthy women during pregnancy, childbirth, and after birth. To be more specific, the CNMs provide accessible, safe birth care especially in rural and inner city areas where Obstetricians are often less available. They teach patients and their families about the birthing process and often provide the mother in labor more birthing information and individualized attention.

The CNMs provide care in a variety of settings including hospitals, birthing centers, clinics, homes, and offices.

Many PNP's seem to be certified "lactation consultants." The term lactation consultant refers to anyone who is working in the field of lactation, either as a volunteer or as a professional. However, certification to become an International Board Certified Lactation Consultant (IBCLC) is considered the gold standard for lactation consultant. This exam is held once a year worldwide. Criteria that must be met for certification are bachelor's, master's, or doctoral degree or 4 years for post-secondary education; a minimum of 2,500 hours of practice as a breastfeeding consultant; and a minimum of education specific to breastfeeding within the 3 years prior to the exam.

Many PNP's seem to be childbirth educators as well. They provide informational and educational classes for expectant parents. Classes include information on relaxation techniques;

comfort measures, breathing techniques, and birth options. Childbirth educators play an important role in the emotional, physical, and informational support for expectant parents. Most hospitals and birthing centers in the USA offer this type of educational program for their clients. Usually a PNP with excellent teaching and interpersonal skills is selected to teach class on site to expectant parents.

This individual, of course, must have knowledge about the childbearing years, pregnancy, labor and delivery process, clinical competence in obstetrical nursing and ability to collaborate with physicians.

It has been well known in the USA that the PNP's and the CNMs carry some legal concerns that extend above and beyond other areas of nursing, because care is often given to an "unseen client" -the fetus- or to clients who are not of legal age for giving consent for medical procedures. This concern in the USA is long lasting, since children who feel health care providers wronged them can bring a lawsuit at the time they reach legal age. This means that a nursing care given and nursing note written today may need to be defended as many as 20 years in the future. Thus, the PNP's need to be conscientious about obtaining informed consent for invasive procedures and in determining that pregnant women are aware of any risk of harm to the fetus involved with a procedure or test. Malpractice insurances for the PNP's and CNMs are soaring because of the reasons described above. Thus, the vast majority of the PNP's, if not all, carry their own malpractice insurance. However, many private physician offices, health department clinics, and hospitals absorb the cost of their malpractice insurance when hired.