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Cup Feeding in the ICU: The Influence of Health Care Team Knowledge

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Abstract

Title: Cup Feeding in the ICU: The Influence of Health Care Team Knowledge.

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Background: Preterm birth has significantly increased in the last two decades. Preterm infants lack synchrony and coordination in sucking, swallowing, and breathing necessary for oral feeding. Cup feeding has been identified as a safe alternative for preterm infants who are not able to fully breastfeed, yet the practice is limited. One potential reason this alternative is underutilized is lack of health care provider knowledge regarding cup feeding. Understanding health care provider knowledge will provide information to guide cup feeding education efforts.

Purpose: The purpose of this study is to examine the relationship between health care team knowledge and the use of cup feeding in neonatal intensive care units.

Methods: A non-experimental cross-cultural correlational design will be used to evaluate study goals. A convenience sample of ~350 neonatal nurses and physicians from US and Jordan will be recruited to complete a web-based survey. Recruitment strategies will include Email, website links, and snowballing. To evaluate health care provider knowledge about cup feeding a questionnaire was developed. The questionnaire includes items asking about demographic data (e.g., Age, ethnicity, occupation, and experience). A 7-point Likert scale ranging from Always to never was used to assess knowledge regarding feeding type (bottle, breast, NGT, and cup). Multivariate Regression analysis will be conducted to examine the relation between health care provider knowledge and cup feeding practices. Regressions will control for potential covariates (e.g., provider age, culture, experience, and education).

Findings and Conclusions: Research still in process. Preliminary results will be available by May. Nurses and physicians have the authority to decide which feeding method to use for an infant. In addition, parents are influenced by health care provider advice. Identifying health care provider knowledge of cup feeding can identify misconceptions regarding cup feeding. These findings will lead to educational interventions aimed at improving feeding of preterm infants.