

Essential Antenatal Perinatal And Postpartum Care

"As a psychotherapist and educator of future mental health practitioners, I believe this work fills an important gap in reference books for professionals who care for childbearing women. Since the volume provides invaluable neurobiological research on depression and anxiety, I recommend this work to all health and mental health professionals."--Illness, Crisis and Loss

Over the past three years, pregnancy related mood disorders have become the focus of health care advocates and legislators alike with subsequent reflection in nationwide media. Statistics on the prevalence of perinatal mood disorders suggest that up to 20% of women experience diagnosable pregnancy related mood disorders. The growing recognition of these common disorders, coupled with an increasing knowledge base about the dire consequences of untreated maternal depression, has propelled this issue to the fore of national public health priorities. This increasing awareness has also resulted in recent legislative and healthcare initiatives to screen, assess, and treat such disorders. On April 13, 2006, Governor Jon S. Corzine (D -NJ) signed a law requiring all new mothers to be educated and screened for postpartum depression. This law is the first of its kind in the country, but many states and federal advocates are proposing similar laws. The motivation for states and the federal government to adopt education and screening program is high and may soon be a federal mandate. But a major barrier to successful implementation of such programs is the lack of available resources to train healthcare professionals in this specialty. This book offers a major resource for healthcare professionals, mental health professionals, and medical, nursing, psychology, and social work students who will be confronting this problem in their practices. The contributions, by renowned experts, fill a glaring gap in the knowledge professionals need in order to successfully manage maternal mental health.

Pregnancy, childbirth, postpartum and newborn care: a guide for essential practice (3rd edition) (PCPNC), has been updated to include recommendations from recently approved WHO guidelines relevant to maternal and perinatal health. These include pre-eclampsia & eclampsia; postpartum haemorrhage; postnatal care for the mother and baby; newborn resuscitation; prevention of mother-to-child transmission of HIV; HIV and infant feeding; malaria in pregnancy, interventions to improve preterm birth outcomes, tobacco use and second-hand exposure in pregnancy, post-partum depression, post-partum family planning and post abortion care. The aim of PCPNC is to provide evidence-based recommendations to guide health care professionals in the management of women during pregnancy, childbirth and postpartum, and newborns, and post abortion, including management of endemic diseases like malaria, HIV/AIDS, TB and anaemia. The PCPNC is a guide for clinical decision-making. All recommendations are for skilled attendants working at the primary level of health care, either at the facility or in the community. They apply to all women attending antenatal care, in delivery, postpartum or post abortion care, or who come for emergency care, and to all newborns at birth for routine and emergency care.

Sexually transmitted diseases, unintended pregnancies, infertility, and other reproductive problems are a growing concern around the world, especially in developing countries. Reproductive Health in Developing Countries describes the magnitude of these problems and what is known about the effectiveness of interventions in the following areas: Infection-free sex. Immediate priorities for combating sexually transmitted and reproductive tract diseases are identified. Intended pregnancies and births. The panel reports on the state of family planning and ways to provide services. Healthy pregnancy and delivery. The book explores the myths and substantive socio-economic problems that underlie maternal deaths. Healthy sexuality. Such issues as sexual violence and the practice of female genital mutilation are discussed in terms of the cultural contexts in which they occur. Addressing the design and delivery of reproductive health services, this volume presents lessons learned from past

programs and offers principles for deciding how to spend limited available funds. *Reproductive Health in Developing Countries* will be of special interest to policymakers, health care professionals, and researchers working on reproductive issues in the developing world. Despite recent declines in infant mortality, the rates of low birthweight deliveries in the United States continue to be high. Part I of this volume defines the significance of the problems, presents current data on risk factors and etiology, and reviews recent state and national trends in the incidence of low birthweight among various groups. Part II describes the preventive approaches found most desirable and considers their costs. Research needs are discussed throughout the volume.

The gold-standard guide from the AAP and ACOG -- newly updated and more valuable than ever! Significantly revised and updated, the new 8th edition of this bestselling manual provides the latest recommendations on quality care of pregnant women, their fetuses, and their newborn infants. Jointly developed by the American Academy of Pediatrics (AAP) and American College of Obstetricians and Gynecologists (ACOG), this unique resource addresses the full spectrum of perinatal medicine from both the obstetric and pediatric standpoints. New in the 8th edition: New section on suggested levels of maternal care from birth centers to Level IV institutions New sections on screening for preterm delivery risk added to chapter on antepartum care New topics covered include the timing of cord clamping, the need (or not) for bedrest, and updates in hypertension Guidance regarding postpartum contraception recommendations has been expanded New section on mosquito-borne illnesses (including Zika) New section on infections with high-risk infection control issues Updated recommendations on neonatal resuscitation, screening and management of hyperbilirubinemia, and neonatal drug withdrawal.

The main aim of this practical Handbook is to strengthen counselling and communication skills of skilled attendants (SAs) and other health providers, helping them to effectively discuss with women, families and communities the key issues surrounding pregnancy, childbirth, postpartum, postnatal and post-abortion care. The MNH Counselling Handbook is chiefly designed to be used by groups of SAs with the help of a facilitator. It can also be used by individual SAs who can get together with colleagues for discussions and activities where needed. It relies on a self-directed learning approach, allowing SAs to work at their own pace, drawing on their past counselling experience. The way it is used will be determined by each country's context, and the SAs' preference. The MNH Counselling Handbook is divided into three main sections. Part 1 is an introduction which describes the aims and objectives and the general layout of the Handbook. Part 2 describes the counselling process and outlines the six key steps to effective counselling. It explores the counselling context and factors that influence this context including the socio-economic, gender, and cultural environment. A series of guiding principles is introduced and specific counselling skills are outlined. Part 3 focuses on different maternal and newborn health topics, including general care in the home during pregnancy; birth and emergency planning; danger signs in pregnancy; post-abortion care; support during labour; postnatal care of the mother and newborn; family planning counselling; breastfeeding; women with HIV/AIDS; death and bereavement; women and violence; linking with the community. Each Session contains specific aims and objectives, clearly outlining the skills that will be developed and corresponding learning outcomes. Practical activities have been designed to encourage reflection, provoke discussions, build skills and ensure the local relevance of information. There is a review at the end of each session to ensure the SAs have understood the key points before they progress to subsequent sessions.

Kangaroo mother care is a method of care of preterm infants which involves infants being carried, usually by the mother, with skin-to-skin contact. This guide is intended for health professionals responsible for the care of low-birth-weight and preterm infants. Designed to be adapted to local conditions, it provides guidance on how to organize services at the referral

level and on what is needed to provide effective kangaroo mother care.

Prenatal and Postnatal Care: A Woman-Centered Approach is a comprehensive resource for the care of the pregnant woman before and after birth. Ideal as a graduate text for newly-qualified adult nurses, family and women's health practitioners, and midwives, the book can also be used as an in-depth reference for antenatal and postpartum care for those already in practice. Beginning by outlining the physiological foundations of prenatal and postnatal care, and then presenting these at an advanced practice level, the book moves on to discuss preconception and prenatal care, the management of common health problems during pregnancy, and postnatal care. Each chapter includes quick-reference definitions of relevant terminology and statistics on current trends in prenatal and postnatal care, together with cultural considerations to offer comprehensive management of individual patient needs. Written by experts in the field, *Prenatal and Postnatal Care: A Woman-Centered Approach* deftly combines the physiological foundation of prenatal and postnatal care with practical application for a comprehensive, holistic approach applicable to a variety of clinical settings. This new edition builds on the strengths of the popular first edition, with updated national and international data, and the most recent debate around the controversial area of childbirth. With the increasing risk of litigation, there can be a tendency to classify women as 'at risk' if they present with even a hint of a problem. This is a contentious area and midwives need to be aware of the wide parameters of 'normal' in order to practise autonomously, effectively and safely. This book provides an evidence-based source for all midwives and other health professionals with an interest normal birth. Explores the wider range of normal childbirth that is unique to individual mothers and babies Challenges the assumptions underpinning current beliefs and attitudes Updated statistics, both national and international Latest research and debate A comprehensive guide to all aspects of the development, adaptation, and use of home-based maternal records as an exciting new tool for reducing maternal and perinatal morbidity and mortality. Home-based maternal records, which are retained by the woman and serve as her "passport" to appropriate health care, are simple cards designed to facilitate the easy recording and interpretation of comprehensive information on the health status of a woman before her first pregnancy, during the current pregnancy, delivery, postpartum and neonatal periods, and during two subsequent pregnancies. The cards can also be used to record information during the periods between pregnancies and on the woman's breast-feeding, family planning, and tetanus toxoid immunization status. Though simple in concept and design, the cards have demonstrated their effectiveness as a tool for the early detection of risk factors, the promotion of timely referral, the monitoring of women's health for periods of up to 10 years, and the education of women about health, nutrition, and family planning. Home-based maternal records have also shown their potential to encourage more appropriate referrals and better utilization of health services, to promote self-diagnosis and self-care, to foster greater community involvement, and to facilitate the collection of health information. Designed to help program managers and administrators introduce and use home-based maternal records to the greatest effect, the book draws on experiences and lessons learned during the extensive field testing of home-based. While a WHO prototype record is presented as a model, emphasis is placed on the best ways to adapt this prototype to local conditions, test its effectiveness, pinpoint problems, and find solutions, even when resources are scarce and populations largely illiterate. This up-to-date, comprehensive and consolidated guideline on essential intrapartum

care brings together new and existing WHO recommendations that, when delivered as a package, will ensure good-quality and evidence-based care irrespective of the setting or level of health care. The recommendations presented in this guideline are neither country nor region specific and acknowledge the variations that exist globally as to the level of available health services within and between countries. The guideline highlights the importance of woman-centered care to optimize the experience of labor and childbirth for women and their babies through a holistic, human rights-based approach. It introduces a global model of intrapartum care, which takes into account the complexity and diverse nature of prevailing models of care and contemporary practice. The recommendations in this guideline are intended to inform the development of relevant national- and local-level health policies and clinical protocols. Therefore, the target audience includes national and local public health policy-makers, implementers and managers of maternal and child health programs, health care facility managers, nongovernmental organizations (NGOs), professional societies involved in the planning and management of maternal and child health services, health care professionals (including nurses, midwives, general medical practitioners and obstetricians) and academic staff involved in training health care professionals.

Essay from the year 2006 in the subject Medicine - Pediatrics, grade: 60% (England), Glasgow Caledonian University, 34 entries in the bibliography, language: English, abstract: No matter how far one looks back in the history of mankind: As long as humans are born by women there were midwives and there will be midwives. The knowledge of "wise women" led already in the Middle Ages to uncertainty - particularly among the physicians and church princes. Midwives were strongly affected by witch-hunt. Many were burnt at the stake, because people did not trust their knowledge and their art – because of ignorance or eagerness for power. At that time midwives were considered to work in the function of a gynaecologist or as a person with healing skills which got their knowledge as a gift. They acquired their knowledge through the knowledge of older women and own practical experience. The current and historical literature about the midwife art gives an idea of this traditional occupation of woman (Skolik 2001). This knowledge developed more and more and passed on since generations. But nowadays the situation has changed: Many midwives are working on their own with their own experiences and their own unverified methods of practice. This already begins in the time of the midwifery training without standards in many working areas. The care of the umbilical cord of the baby is in the homely care of the midwife again and again in discussion. The unverified methods of practice in midwifery tasks are widespread in different working fields and should initiate a development of caring with evidence-based background. Dannenfeld stated in their work about the significance of the salutogenetic concept of the midwifery work that in this work it is important to deal with scientific topics for achieving a more effective and more professional work. This statement is emphasised by the Schweizer Hebammenverband. They mentioned that the midwifery work is including the task of assuring and further development of their quality of work. In 2002 the World Health Organisation (WHO) mentioned in their training modules about Essential Antenatal, Perinatal and Postpartum Care that throughout the world there are numerous methods of caring for the cord, but the most effective is to use NO application to the cord but to keep it clean and allow it to dry over the first two days. In context to this statement this essay works

out the different actually used methods of umbilical cord care and their advantages and disadvantages in comparison to the recommendations of the WHO.

Patient-centered medicine is not an illness-centered, a physician-centered, or a hospital-centered medicine approach. In this book, it is aimed at presenting an approach to patient-centered medicine from the beginning of life to the end of life. As indicated by W. Osler, "It is much more important to know what sort of a patient has a disease than what sort of a disease a patient has." In our day, if the physicians and healthcare professionals could consider more than the diseased organ and provide healthcare by comforting the patients by respecting their values, beliefs, needs, and preferences; informing them and their relatives at every stage; and comforting the patients physically by controlling the pain and relieving their worries and fears, patients obeying the rules of physicians would become patients with high adaptation and participation to the treatment.

A Guide to effective care in pregnancy and childbirth is a clearly written review of the important research evidence on the effects of the various care practices carried out during pregnancy, childbirth, and the early days after birth. In addition to the details provided in the text, the book concludes with valuable tables that list the practices which are beneficial, those of unknown effectiveness, and those likely to be ineffective or harmful.

More than 30 years ago, the Institute of Medicine (IOM) and the National Research Council (NRC) convened a committee to determine methodologies and research needed to evaluate childbirth settings in the United States. The committee members reported their findings and recommendations in a consensus report, *Research Issues in the Assessment of Birth Settings* (IOM and NRC, 1982). *An Update on Research Issues in the Assessment of Birth Settings* is the summary of a workshop convened in March, 2013, to review updates to the 1982 report. Health care providers, researchers, government officials, and other experts from midwifery, nursing, obstetric medicine, neonatal medicine, public health, social science, and related fields presented and discussed research findings that advance our understanding of the effects of maternal care services in different birth settings on labor, clinical and other birth procedures, and birth outcomes. These settings include conventional hospital labor and delivery wards, birth centers, and home births. This report identifies datasets and relevant research literature that may inform a future ad hoc consensus study to address these concerns. Midwifery across the globe faces different issues. In some countries the autonomy of the profession is a tradition, while in some societies midwives struggle to practice autonomously the basic competencies. In one part of the world the medicalisation of childbirth is the main issue, preventing the natural processes of pregnancy and childbirth to flow at their own pace, while in other parts of the world midwives struggle with lack of resources to provide safe midwifery care. The authors of this book practice midwifery in different cultures and within different social contexts. They have to deal with different obstacles and seek solutions to diverse problems. With their contributions, they offer an insight into their thinking, their dilemmas, and the problems of midwifery practices in their countries. However, despite different backgrounds, they all have in common a uniform goal - a wish to offer women optimal midwifery care and to improve midwifery services.

Prenatal care programs have proven effective in improving birth outcomes and preventing low

birthweight. Yet over one-fourth of all pregnant women in the United States do not begin prenatal care in the first 3 months of pregnancy, and for some groups--such as black teenagers--participation in prenatal care is declining. To find out why, the authors studied 30 prenatal care programs and analyzed surveys of mothers who did not seek prenatal care. This new book reports their findings and offers specific recommendations for improving the nation's maternity system and increasing the use of prenatal care programs.

Influence of Pregnancy Weight on Maternal and Child Health: Workshop Report summarizes a one and a half day workshop convened in May 2006 that reviewed U.S. trends in maternal weight (prior to, during, and after pregnancy) among different populations of women; examined the emerging research findings related to the complex relationship of the biological, behavioral, psychological, and social interactions that affect maternal and pregnancy weight on maternal and child health outcomes; and discussed interventions that use this complex relationship to promote appropriate weight during pregnancy and postpartum. Given the unprecedented environment in the United States in which two-thirds of the adult population meets the criteria for being overweight or obese, the implications for women in the reproductive age period are unique in the history of the country. The concerns for maternal and infant health are real. The questions and answers tackled by committee members and workshop participants were not easy. Nevertheless, having an opportunity to explore what is known, examine the gaps in knowledge, and explore what to do now and in the future build a pathway for further inquiry and action. This report summarizes the workshop proceedings and highlights key themes that deserve further attention. The participants in this workshop describe what is known about recent trends in maternal weight gain and the impact of maternal weight during pregnancy on the health of mothers and their children. The workshop provided a valuable opportunity to assess trends that have occurred since the publication of an earlier study by the Institute of Medicine (IOM), which included guidelines for recommended weight gain during pregnancy. Midwives support women during the reproductive period of their lives. Dimensions of midwifery work include, in addition to the physiological aspect, psychological and spiritual issues. Midwifery activities mean involvement in the most intimate sphere of clients' lives. Women's perceptions of partnership, sexuality, pregnancy and birth are affected by their personal experiences and by the culture they live in. The same factors also influence the midwives' perception of these issues. It is therefore crucial for the midwives to be aware of certain areas of their work that have a sexual inclination and clarify their own eventual prejudices regarding sexuality, since these can affect their provision of holistic, individual and competent care to women and their families. This book deals with different aspects of sexuality that can have an influence on everyday midwifery work. It might also be of interest to different groups of people - midwives in clinical settings, midwifery educators, midwifery students and also other health professionals who manage women during the reproductive period.

Basic Steps in Planning Nursing Research: From Question to Proposal is the perfect introduction to the research process. It details the development of an effective research plan, and guides readers through all stages of the process from finding a research topic, to the final written proposal. It takes an in-depth focus on the planning process which makes it an excellent tool for beginners while still being relevant to people at all levels of study who need to develop a research plan. The Seventh Edition continues to teach readers how to prepare an appropriate question and topic and the steps it takes formulate a conclusion. All of the chapters have been updated with new references and current information including a renewed focus on evidence-based practice and an expansion of research ethics. Proposals are included at the end of the text to help students learn.

Health psychology is a rapidly expanding discipline at the interface of psychology and clinical medicine. This new edition is fully reworked and revised, offering an entirely up-to-date, comprehensive, accessible, one-stop resource for clinical psychologists, mental health

professionals and specialists in health-related matters. There are two new editors: Susan Ayers from the University of Sussex and Kenneth Wallston from Vanderbilt University Medical Center. The prestigious editorial team and their international, interdisciplinary cast of authors have reconceptualised their much-acclaimed handbook. The book is now in two parts: part I covers psychological aspects of health and illness, assessments, interventions and healthcare practice. Part II covers medical matters listed in alphabetical order. Among the many new topics added are: diet and health, ethnicity and health, clinical interviewing, mood assessment, communicating risk, medical interviewing, diagnostic procedures, organ donation, IVF, MMR, HRT, sleep disorders, skin disorders, depression and anxiety disorders.

Dignity in the care of patients and clients of all ages, whether in hospital or community settings, is an area of increasing national and international importance and concern. However, a comprehensive, accessible resource for nurses and midwives on the theory and practice of dignity in care has until now been lacking. *Dignity in Healthcare* provides a practical approach, underpinned by up-to-date theory, to this crucial issue for those providing care to people in all stages of life, including those with mental illnesses or learning disabilities. Care in areas such as maternity, community, palliative and acute care and others is explored in depth. Approaches to education and practice development for promoting dignity in care are also outlined clearly and accessibly, with each chapter combining an evidence-based theoretical underpinning with practical application through scenarios. Pre-registration nursing and midwifery students and their teachers will find this book essential reading, but it will also be of interest to practising nurses, midwives and other health professionals seeking clear insights into the principle of care that is central to all healthcare professions.

In collaboration with Consulting Editor, Dr. Lucky Jain, Drs. Hamrick and Ing have put together a comprehensive issue that provides current information of anesthesia, sedation, and pain control in the NICU and for mothers. Clinical review articles are devoted to the following topics: Anesthesia neurotoxicity in the developing brain: Basic studies; Anesthesia neurotoxicity: Update on clinical studies; Neurologic Injury after neonatal cardiac surgery; Effect of repetitive pain on developing brain and physiology of nociception; Sedation/pain control in the NICU; Assessment of Pain in the Newborn; Non-pharmacologic Approaches to Pain Management; Epidurals/spinals for newborn surgery; Neonatal airway management; Effects of maternal anesthesia on perinatal hemodynamics and neonatal acidemia; Maternal anesthesia for urgent c-section; Fetal anesthesia; Neonatal abstinence syndrome (Neonatal Opioid Withdrawal Syndrome); and Opioid crisis in the US: Maternal management. Readers will come away with the information they need to provide better care to the neonate and mothers and improve outcomes.

"The guideline, commissioned by NICE and developed by the National Collaborating Centre for Mental Health (NCCMH), covers the care and treatment of women with mental health problems during pregnancy and the first postnatal year. This includes depression, anxiety disorders, and severe mental illnesses such as bipolar disorder and schizophrenia." "This guideline encompasses the organisation of perinatal mental health services, making it the first of its kind to fully integrate the clinical and service aspects of care into a single volume. The book is illustrated by women's experiences of mental health problems, treatment and services."--BOOK JACKET.

Comprehensive and heavily illustrated, this is a unique reference for anyone involved in the diagnosis and treatment of dermatologic diseases in infants and newborns. In addition to over 500 superb photographs of normal and abnormal skin conditions, this latest edition also includes new algorithms, new tables, and new care plans. Simple to use text and tables for reference during daily practice. Comprehensive information on infant skin care and toxicology. Differential diagnosis aided by lists, text and images. Assists with work-up and management of common and rare conditions New Care Plan boxes help you to outline your diagnosis and

treatment plan. Differential diagnosis algorithms guide you to more effective decision making. New illustrations and photos provide even more visual examples than before.

A WHO perinatal study group was set up in 1979 to study and report on the issues surrounding birth care in Europe and this is their final report. They describe and review the official services, the alternative services, and the information and evaluation services. Information gleaned ranged from systems of birth and death registrations, patterns of antenatal visits and provision of intensive care services, to who is allowed to be present during a birth, and what tests and procedures are administered routinely. The variation in the rates for many procedures from country to country, without any resultant variation in mortality or morbidity rates, shows that the use of many of them could be usefully reviewed. Based on these findings, the final chapter summarizes the present state of services for women and their babies during pregnancy and birth and following birth, and analyses present trends and future needs.

This book is a practical guide to the CARE programme, a home visiting programme that aims to assess infants' growth, development and psycho-social transitions in their first year of life and that together with the Index of Need checklist aims to engage parents in risk assessment. It provides evidence-based research for the programme, and gives clinical examples of how to use the assessment tools (including the Index of Need) and how to work with parents. The authors take a 'partnership with parents' approach throughout, while bearing in mind the practical workload issues that practitioners face.

Within the continuum of reproductive health care, antenatal care provides a platform for important health-care functions, including health promotion, screening and diagnosis, and disease prevention. It has been established that, by implementing timely and appropriate evidence-based practices, antenatal care can save lives. Endorsed by the United Nations Secretary-General, this is a comprehensive WHO guideline on routine antenatal care for pregnant women and adolescent girls. It aims to complement existing WHO guidelines on the management of specific pregnancy-related complications. The guidance captures the complex nature of the antenatal care issues surrounding healthcare practices and delivery, and prioritizes person-centered health and well-being --- not only the prevention of death and morbidity --- in accordance with a human rights-based approach.

A guide for expectant and new mothers on breastfeeding their baby.

The delivery of high quality and equitable care for both mothers and newborns is complex and requires efforts across many sectors. The United States spends more on childbirth than any other country in the world, yet outcomes are worse than other high-resource countries, and even worse for Black and Native American women. There are a variety of factors that influence childbirth, including social determinants such as income, educational levels, access to care, financing, transportation, structural racism and geographic variability in birth settings. It is important to reevaluate the United States' approach to maternal and newborn care through the lens of these factors across multiple disciplines. *Birth Settings in America: Outcomes, Quality, Access, and Choice* reviews and evaluates maternal and newborn care in the United States, the epidemiology of social and clinical risks in pregnancy and childbirth, birth settings research, and access to and choice of birth settings.

Clinical audit is at the heart of clinical governance. Provides the mechanisms for reviewing the quality of everyday care provided to patients with common conditions like asthma or diabetes. Builds on a long history of doctors, nurses and other healthcare professionals reviewing case notes and seeking ways to serve their patients better. Addresses the quality issues systematically and explicitly, providing reliable information. Can confirm the quality of clinical services and highlight the need for improvement. Provides clear statements of principle about clinical audit in the NHS.

This book helps all those working in maternity services to improve the quality of the care they offer. Improvement is driven by clinical effectiveness and increasing patient demands, and for

each area of practice described this book outlines the service organisation needed to achieve this improvement. The goal is to help clinicians take responsibility for developing services that meet the needs of their patients as well as managing their individual medical conditions. The book demonstrates that much can be achieved within current resources and without major additional expense. Different approaches are demonstrated, but the key issue is the patient pathway. Trainees, clinicians, managers and commissioners of services will find this book of practical value. There should be a copy on the shelves of every hospital obstetric unit.

This guide provides a full range of updated, evidence-based norms and standards that will enable health care providers to give high quality care during pregnancy, delivery and in the postpartum period, considering the needs of the mother and her newborn baby. All recommendations are for skilled attendants working at the primary level of health care, either at the facility or in the community. They apply to all women attending antenatal care, in delivery, postpartum or post abortion care, or who come for emergency care, and to all newborns at birth and during the first week of life (or later) for routine and emergency care.

This guide is a guide for clinical decision-making. It facilitates the collection; analysis, classification and use of relevant information by suggesting key questions, essential observations and/or examinations, and recommending appropriate research-based interventions. It promotes the early detection of complications and the initiation of early and appropriate treatment, including time referral, if necessary. Correct use of this guide should help reduce high maternal and perinatal mortality and morbidity rates prevalent in many parts of the developing world, thereby making pregnancy and childbirth safer.

WINNER OF THE ACNM BOOK OF THE YEAR AWARD 2003! This comprehensive text examines the bond between the human mother and her newborn from the perspective of labor, birth, and breastfeeding, and looks more closely at labor mechanics and interventions, and how these affect breastfeeding.

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Canadian society has changed dramatically since 1960. This work captures the scope and range of these changes through a systematic documentation of seventy-eight social trends. The introduction summarizes and locates the major waves of change. The authors then document each trend in relation to eighteen thematic groups that include age, community, women, labour, management, stratification, social relations, the state, mobilizing institutions, social forces, ideologies, households, lifestyle, leisure, education, integration, and attitudes and values. In contrast to many recent works and journalistic reports, *Recent Social Trends in Canada* concentrates on the trajectory of change rather than on current events. It provides a longitudinal context in which unfolding events can be interpreted in a broader historical and international context. Comparable volumes in the McGill-Queen's Comparative Charting of Social Change series describe similar tendencies in the United States, Quebec, France, Germany, Italy, Greece, Russia, and Bulgaria, making it possible to situate the Canadian experience in a global context.

Since childbirth became a medicalized - and usually hospitalized - event a century ago, women's and families' psychosocial needs have been relegated to a somewhat peripheral role within the clinically focussed hierarchy of medical care. This text reinstates psychosocial issues as a primary focus of care, together with clinical excellence. Family-centred care is a familiar phrase in today's maternity services, with professional guidelines and hospital policies including the term in their care protocols; however, few definitions, and no specific standards, for family-centred care exist. While all caregivers and care services are likely to define their care as sensitive to women's needs, and family-centred, the actual implementation of a family-centred approach - despite it being a current fashion in care - is still inadequate. This book clearly defines family-centred perinatal care, and outlines how truly family-centred care can, and should, be implemented, and how, and where, this has been done.

Immunization during pregnancy with currently recommended vaccines prevents infection in the mother, the unborn fetus, and the young infant, and there is an increasing focus from different stakeholders to use this approach for other infections of importance to protect these vulnerable groups. The aim of this Maternal Immunization book is to provide a contemporary overview of vaccines used in pregnancy (and the lactation period), with emphasis on aspects of importance for the target groups, namely, rationale for the use of vaccines in pregnancy, safety, immunogenicity (immunology), timing to vaccinate, repeat doses, protective effects in the mother, fetus, and infant, and public acceptance and implementation, of existing and of future vaccines. Provides an overview of a quickly evolving topic. This will benefit the reader who wishes to rapidly become informed and up-to-date with new developments in this field Suitable to a broad audience: scientific researchers, obstetricians, gynecologists, neonatologists, vaccinators, pediatricians, students, and industry. Maternal vaccination impacts a wide range of specialists Allows health care professionals/researchers to gain insight into other aspects of vaccination in pregnancy outside of their specialism Is coauthored by specialists from multiple disciplines, providing a diverse view of the subject, increasing its interest and appeal Creates awareness of the current developments in this area of medicine and of the potential of maternal vaccination to improve the health of mothers and infants worldwide

The book provides guidance for conducting a well-woman visit, based on the American College of Obstetricians and Gynecologists Well Woman Task Force recommendations. The scope of problems, the rationale for screening or prevention, and the factors that alter screening are explained, then the recommendations are summarized, and advice is offered on their application.

Guidelines for Perinatal Care

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