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Good Samaritan

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**Owner:** TIFFANY NORDMEYER: RN-  
 EDUCATOR WOMENS HEALTH  
**Policy Area:** Nursing - Maternal Child  
**References:**  
**Applicability:** Good Samaritan

## Abusive Head Trauma / Shaken Baby Syndrome

### PURPOSE

- A. The purpose of this policy is to provide standard evidence based education for new parents on the prevention of Abusive Head Trauma (AHT), previously known as Shaken Baby Syndrome (SBS).

### POLICY STATEMENT

- A. It is the policy of CHI Health Good Samaritan to provide current evidence based education to new parents according to the recommendations of the American Academy of Pediatrics, The National Center on Shaken Baby Syndrome, and Centers for Disease Control and Prevention on Abusive Head Trauma (AHT), previously known as Shaken Baby Syndrome (SBS).
- B. Education will include but is not limited to:
  1. Definition of AHT/SBS, caregiver risk factors
  2. Infant susceptibility
  3. Injuries caused by shaking
  4. Signs and symptoms of AHT/SBS
  5. What to do if they think their child has been injured
  6. Prevention measures including why babies cry and that crying is the #1 trigger for AHT/SBS
  7. How to calm a crying baby
  8. Crying plan with tips on what to do if the baby's crying is bothering them
- C. Definitions:
  1. Abusive head trauma (AHT), which includes shaken baby syndrome, is a preventable and severe form of physical child abuse that results in an injury to the brain of an infant or child. AHT is most common in children under age five, with children under one year of age at most risk. AHT is caused by violent shaking and/or with blunt impact.<sup>3</sup> The resulting injury can cause bleeding around the brain or on the inside back layer of the eyes.
  2. Nearly all victims of AHT suffer serious, long-term health consequences such as vision problems, developmental delays, physical disabilities, and hearing loss. At least one of every four babies who experience AHT dies from this form of child abuse.<sup>3</sup>
  3. Research shows that AHT often happens when a parent or caregiver becomes angry or frustrated

because of a child's crying. The caregiver then shakes the child and/or hits or slams the child's head into something in an effort to stop the crying.

4. Crying—including long bouts of inconsolable crying—is normal behavior in infants. Shaking, throwing, hitting, or hurting a baby is never the right response to crying (Retrieved from cdc.gov, 2018).

## PROCEDURE:

- A. All healthcare personnel and new employees caring for children (including personnel working in labor and delivery, NICU, newborn nursery, postpartum, pediatrics, and the emergency room) under the age of 1 year, will be required to complete baseline and then annual education including what is AHT/SBS, signs and symptoms of AHT/SBS, prevention of AHT/SBS, inconsolable crying is the number one trigger for AHT/SBS, calming techniques, and The Crying Plan.
- B. Prior to discharge, in accordance with the Nebraska State Revised Statute 71-2103, staff will present to new parents a video and reading material discussing the dangers of shaking a baby and sudden infant death syndrome. Once video and written materials are viewed and discussed, the parent and/or significant other will sign the Sudden Infant Death and Shaken Baby Syndrome Information Acknowledgement stating they have read the information and watched the video or they have refused to read and view it.
- C. Provide evidence based discharge instructions to the parent or caregiver including:
  1. Definition of AHT / SBS
  2. Why babies are susceptible to injury (their heads are bigger proportionally than the rest of their bodies and their neck muscles are weak, and factors that put an infant at risk like being less than 1 year of age, prematurity or disability, multiple birth, inconsolable or frequent crying).
  3. Factors that increase the parents or caregivers Risk for harming a baby (male parent or partner, infant crying causes frustration or anger, being tired, limited anger management or coping skills, limited social support, young parental age).
  4. Injuries that shaking a baby can cause. (blindness, learning disability, seizures, cerebral palsy, paralysis, broken bones, speech problems, and even death) .
  5. Signs and symptoms of AHT /SBS (irregular, difficult, or not breathing, extreme crankiness, seizures, vomiting, tremors or shakiness, limp arms or legs, no reactions to sound, acts lifeless, difficulty staying awake).
  6. What parents should do if they think their baby has been shaken (call 911, take to the nearest emergency room).
  7. Inconsolable crying is the #1 trigger for AHT.
  8. Explanation of why babies cry (tired, hungry, need to burp, sick, dirty diaper, diaper rash, too hot, too cold, a way to communicate).
  9. Calming techniques (offer pacifier, swaddle the baby, hold them close, use white noise or rhythmic sounds, place the baby skin to skin, sing, talk, or use shushing noise, gentle rock the baby or use an infant swing, put the baby in the car seat and take a ride in the car, or take a walk in the stroller).
  10. Relief plan (prevention strategies/tips on what the parent should do if the baby's crying is bothering them) put the baby in a safe place like a crib, close the door, and walk away, checking back on the baby every 5 to 10 minutes until crying stops or the parent/caregiver is calm; call a friend for support

- or to give you a break, exercise, listen to music.
- 11. Prevention, review a crying plan and encourage them to fill it out prior to discharge ensuring they review the plan with anyone caring for the baby.
- 12. Your plan:
- D. Staff will incorporate AHT/SBS prevention information and The Crying Plan into the follow up/discharge phone calls to patients.
  - 1. Questions to be asked:
    - a. "Before you went home, did you learn about Abusive Head Trauma commonly known as Shaken Baby Syndrome?"
    - b. "Did you receive information on The Crying Plan?"
    - c. "Do you have The Crying Plan ready for use for when you are feeling frustrated you're your babies crying?"

## DOCUMENTATION

- A. Education will be documented in the medical record, including the Sudden Infant Death and Shaken Baby Syndrome Information Acknowledgement.
- B. Education materials provided to the parents.
  - 1. "The Crying Plan" and:
    - a. Either "1, 2, 3 Don't Shake Me" or "The Period of Purple Crying".

## REFERENCES

- A. *Learn More*. (2017, November 6). Retrieved from National Center on Shaken Baby Syndrome: <https://www.dontshake.org/learn-more>
- B. *Preventing Abusive Head Trauma in Children*. (2017, November 6). Retrieved from Centers for Disease Control and Prevention: <https://www.cdc.gov/violenceprevention/childmaltreatment/abusive-head-trauma.html>
- C. *Preventing Shaken Baby Syndrome A Guide for Health Departments and Community-Based Organizations*. (2017, November 6). Retrieved from Center for Disease Control and Prevention: <https://www.cdc.gov/violenceprevention/pdf/preventingsbs.pdf>

### Attachments:

No Attachments

### Approval Signatures

Approver	Date
ELIZABETH GIBBS: CLINICAL PRACTICE COORD	pending
TIFFANY NORDMEYER: RN-EDUCATOR WOMENS HEALTH	06/2018