

MARGARET H. ROLLINS SCHOOL OF NURSING
Nursing 201 – Nursing Care of Special Populations
Death, Loss, and Grieving Across the Lifespan

Grief in Perinatal Loss

Miscarriage

- Grieve individual fantasies
- Others may be unaware of pregnancy or miscarriage
- Nurse may be the most important support
- Overwhelming sense of responsibility for failure of pregnancy
- Resolution occurs when acknowledge was not at fault
- Sadness, regret as experience reminder of baby that never was
- Fear, anxiety with subsequent pregnancy

Abortion

- Guilt, depression of short duration post abortion
- Problems with subsequent pregnancy perceived as punishment
- Unresolved grief may contribute to postpartum depression with birth of subsequent infant

Relinquishment

- Simultaneous feelings of attachment and detachment
- Frequently life-long feeling of grief
- Cannot share loss with others
- Labor is a negative, punitive event
- Seeing baby is encouraged; dispels “fantasy child”

Stillbirth

- Labor is an event of both hope and dread
- Initial stage (shock, disbelief) may be lengthened by heavy sedation
- Gently confront with reality of infants’ death
- Encourage expression of feelings
- Discuss pros and cons of seeing baby
- Take pictures!
- Create memories for parents
- Discuss funeral arrangements
- Autopsy often shows no cause for death

Baptism of an infant

General information

- May call own clergy, hospital chaplain, or may be done by nurse
- Holy Water is kept in the nursery
- Family informed
- Note to be placed on chart

What to say

“I baptize you in the name of the Father, and of the Son, and of the Holy Spirit”
(If unsure, first say: “If you are capable of receiving baptism....”)