

**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....”)