(HealthDay)—For parents with an infant in the neonatal intensive care
preferences for parent-centered decision making are positively associated with decisions that involve big-picture goals and have the potential to harm the infant, according to a study published online March 19 in *JAMA Pediatrics*.

Elliott Mark Weiss, M.D., from the University of Washington School of Medicine in Seattle, and colleagues conducted a cross-sectional survey to examine parents' preferences for parent- versus medical team-centered decision making across 16 clinical decisions that arise in the NICU. Respondents included 136 parents of infants in one of three NICUs. For each clinical decision characteristic, analyses were performed to examine whether middle and high versus low levels of that characteristic were correlated with a preference for parent-centered decision making.

The researchers found that preferences for patient-centered decision making were correlated positively with decisions that involved big-picture goals (middle and high odds ratios, 2.01 [99 percent confidence interval, 0.83 to 4.86] and 3.38 [99 percent confidence interval, 1.48 to 7.75], respectively) and had the potential to harm the infant (middle and high odds ratios, 1.32 [99 percent confidence interval, 0.84 to 2.08] and 2.62 [99 percent confidence interval, 1.67 to 4.11], respectively). There were inverse associations for preferences for parent-centered decision making with technical decisions, the potential to benefit the infant, decisions requiring medical expertise, and a high level of urgency.

"Preferences for parent-centered versus medical team-centered decision making among parents of infants in the NICU may vary systematically by the characteristics of particular clinical decisions," the authors write.

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