





Rev. Enferm. UFSM, v.13, e38, p.1-14, 2023 • • Submission 7/15/2023 • Acceptance 9/26/2023 • Publication: 10/27/2023

Original article

The value of the nursing teleconsultation at the human milk bank in the view of nurses

O valor da teleconsulta de enfermagem no banco de leite humano na visão de enfermeiras El valor de la teleconsulta de enfermería en el banco de leche humana desde el punto de vista de las enfermeras

Ediane de Andrade Ferreira (D), Valdecyr Herdy Alves (D), Diego Pereira Rodrigues (D), Bianca Dargam Gomes Vieira (D), Siomara Correia de Holanda Barbosa (D), Thais Renata Muniz (D)

¹ Universidade Federal Fluminense, Niterói, Rio de Janeiro, Brasil ^{II} Universidade Federal do Pará. Belém, Pará, Brasil ^{III} Prefeitura Municipal de Arapiraca, Arapiraca, Alagoas, Brasil ^{IV} Secretaria Municipal da Saúde de Boa Vista, Roraima, Brasil

Abstract

Objective: to unveil the value meanings of nurses in a human milk bank about nursing teleconsultation. **Method:** A phenomenological study based on Max Scheler's Theory of Values, with phenomenological interviews conducted in October and November 2022 with five nurses from a human milk bank in the second metropolitan region of Rio de Janeiro. The data collected was then subjected to Bardin's thematic analysis. **Results:** two categories emerged: Nursing teleconsultation and nurses' actions in the human milk donation process in times of Covid-19 - an expansion value; Nursing teleconsultation in the care of donors and infants assisted at the human milk bank - a useful health value. **Conclusion:** teleconsultation was understood as having values that expand and guarantee care, improving the representation of access for users, collaborating with the continuity of breastfeeding and the donation of human milk.

Descriptors: Breast Feeding; Milk Banks; Nurses; Remote Consultation; Infant

Resumo

Objetivo: desvelar os significados valorativos das enfermeiras em um banco de leite humano, sobre a teleconsulta de enfermagem. **Método**: estudo fenomenológico sustentado na Teoria de Valores de Max Scheler, com a realização de entrevista fenomenológica outubro e novembro de 2022, ocorreu com cinco enfermeiras de um banco de leite humano na região metropolitana II do Rio de Janeiro. Os dados colhidos sucederam a análise temática de Bardin. **Resultados:** emergiram em duas categorias: A teleconsulta de enfermagem e as ações das enfermeiras no processo de doação de leite humano em tempos de covid-19 - um valor de expansão; A teleconsulta de enfermagem no cuidado de doadoras e lactentes assistidos no banco de leite humano – um valor útil em saúde. **Conclusão:** a teleconsulta foi compreendida com valores que ampliam e garantem o cuidado, melhorando a representação de acesso das usuárias, colaborando com a continuidade do AM e a doação de leite humano.

Descritores: Aleitamento Materno; Bancos de Leite Humano; Enfermeiras e Enfermeiros; Consulta Remota; Lactante

Resumen

Objetivo: develar los significados valorativos de las enfermeras de un banco de leche humana sobre la teleconsulta de enfermería. Método: Estudio fenomenológico basado en la Teoría de los Valores de Max Scheler, con entrevistas fenomenológicas realizadas en octubre y noviembre de 2022 a cinco enfermeras de un banco de leche humana de la segunda región metropolitana de Río de Janeiro. Los datos recogidos fueron sometidos al análisis temático de Bardin. Resultados: surgieron dos categorías: Teleconsulta de enfermería y actuación de las enfermeras en el proceso de donación de leche humana en tiempos de Covid-19 - un valor de expansión; Teleconsulta de enfermería en el cuidado de las donantes y de los lactantes asistidos en el banco de leche humana - un valor útil para la salud. Conclusión: la teleconsulta fue entendida como poseedora de valores que amplían y garantizan el cuidado, mejorando la representación de acceso de los usuarios, colaborando con la continuidad de la lactancia materna y la donación de leche humana

Descriptores: Lactancia Materna; Bancos de Leche Humana; Enfermeras y Enfermeros; Consulta Remota; Lactante

Introduction

The Human Milk Banks (HMB) are part of the actions implemented by the Ministry of Health (MoH) and are articulated with the national Breastfeeding (BF) policy in the Unified Health System (SUS) as a strategy for qualifying maternal and neonatal care, prioritizing the production of health care that enables food and nutritional security in the field of lactation. They aim to promote, protect and support breastfeeding by managing the donation of human milk (HM) for the growth and development of premature newborns admitted to neonatal intensive care units (NICUs) and providing care for breastfeeding women and their families. The purpose of HMBs is to collect, process, quality control and distribute donated and pasteurized HML for premature babies.¹

In this context, HMBs have become essential specialized services that manage an important action within the food chain of hospitalized premature infants, i.e. they are strategic and guarantee food safety for this clientele, contributing to the maternal-neonatal care cycle, being allies of Primary Health Care (PHC) through their collaboration with the promotion of BF and the donation of HM.

With the advent of the new coronavirus pandemic, called Sars-CoV-2, at the beginning of 2020, Brazil and the world experienced a health emergency with a direct influence on the quality of human life, public health and global economic activity. 2 During this period, it was necessary for milk banks to adjust their work process between the service and donors, so, with social distancing, digital service became the fundamental support for maintaining the HM donation process until it was offered to recipients in neonatal units.

One of the actions that has demanded the most attention is the home collection service for HM donations and the recruitment of donors, showing the importance of systematized nursing practices, ensuring the maintenance of protection and support processes for HM donors in unique moments, such as when facing the covid-19 pandemic. The nurse and her team must act based on their autonomy, detecting problems and finding solutions, even in extreme conditions such as the pandemic in question.³

The effective work carried out by the nurses who assist the breastfeeding woman/puerperal woman in the specialized space of the HMB has always enabled qualified care and ensured the reliability and safety of a process that is instructed by specific technical standards guided by the National Health Surveillance Agency, and executed through the Nursing Process (NP).³ These processes were adjusted during the pandemic period, and in order to maintain access for nursing mothers and HM donors, telehealth became an important tool in the routine of the HMBs. It has broadened the channel for communication and clarifying doubts, identifying lactation complications, as well as continuously supporting breastfeeding, reducing early weaning and avoiding crowding of women in the HMB space, maintaining real-time contact with HM donors.4-5

Digital tools that promote interaction between health professionals and users in a virtual way make it possible to assess their health conditions at a distance. In this way, the professional can define strategies for questioning and formulating clinical hypotheses, with the aim of understanding the health situations of the users they serve. Remotely, a care plan is defined or other referrals are made.6

Ordinance GM/MS No. 913/2022,7 which declared the closure of the Public Health Emergency of National Concern (ESPIN) due to human infection by the coronavirus in telehealth services,⁸ maintained the aim of expanding access to health services and providing opportunities for a multiplicity of telehealth actions in care services, increasing the resolvability of health care as an expansion value in daily care.

In order to cope with the coronavirus pandemic, the Federal Nursing Council (COFEN) issued Cofen Resolution No. 707/2020,⁹ which regulates telenursing in the field of digital health, expanding the scope of nurses' work in nursing consultation, health interconsultation and health education, guaranteeing the nursing workforce in the field of digital health.

The innovative use of telehealth in HMBs, especially in the pre- and post-pandemic context, has broadened nursing and health care in the area of breastfeeding and donation of HM, bringing new values that are embedded in nurses' daily practice. Understanding these phenomena will make it possible to expand the work force of nurses in improving access and resolvability in nursing care for breastfeeding women, babies and families. This innovation is one of the health challenges of the 21st century.^{3,10}

In the world of values based on Max Scheler's Theory of Values,¹¹ the expansion in the acquisition of values is a priori based on emotional intuition, experienced and instituted through their material realization in everyday life, expressed here in the nursing teleconsultation at the HMB. The theoretical¹¹ makes it possible to understand how values are presented in life and their implications experienced by the person on a daily basis, the reality of what is lived is given in its essence, through emotional intuition. Based on this premise, values are understood by each person and their incorporation is revealed in a hierarchy of values that can be expressed as: sensitive, vital, aesthetic, spiritual and ethical-legal values.

As such, the aim of this study was to unveil the evaluative meanings of nurses at a HMB regarding nursing teleconsultations.

Method

This is a qualitative study based on phenomenology from the perspective of Max Scheler's Theory of Values.¹¹

The participants in the study were five nurses who work with human milk donors registered at the milk bank of a university hospital in the municipality of Niterói, Rio de Janeiro, which is a reference in metropolitan region II and a practical training ground for students at the Fluminense Federal University (UFF). It was carried out in the municipalities of Niterói, Maricá and Rio Bonito, which have the region's three reference services - two Human Milk Collection Stations and one HMB, where the professionals were invited in person and, once they accepted and signed the Informed Consent Form (ICF), the following inclusion criteria were applied: being a nurse working in consultation, collection, processing and pasteurization of human milk, excluding those who had been working for less than six months and those on vacation or sick leave.

The data was collected by a doctoral student/researcher with experience in qualitative research who works as a researcher, accompanying undergraduate students who go through the HMB in the practical field. Although the interviewer had previously met the participants, she had no hierarchical role over them, which helped create an environment conducive to the free expression of their opinions and experiences. No pilot study was carried out for the research.

Data was collected using the phenomenological interview technique, with interviews lasting an average of 45 minutes, between October and November 2022, based on the following guiding question: What is your perception of the use of telehealth in your daily work at the HMB? The interviews took place in a private room, without third parties interrupting the dialogue between the researcher and the participants, and were recorded on an Mp3 device authorized by the participants. Theoretical saturation was reached during the interviews, when there was a similarity of meanings during the interviews and thus no more different meanings, culminating in the cessation of data collection and the establishment of the number of participants.¹²

After transcribing the material in full, the results were processed using thematic analysis13. The Atlas-ti® version 23 software was also used to organize the analysis process, which proceeded according to the three chronological stages proposed: the first was pre-analysis, with a careful reading of the material and choice of representative elements; the second, exploration of the material, with coding for the purpose of categorization and, in this phase, the software already described was used to identify the following meanings: nursing teleconsultation,

donor, infant and support for breastfeeding, and the last, inference and interpretation, with the formulation of categories built on the basis of the meanings identified from the participants. 13

The study was approved on July 7, 2022 by the Research Ethics Committee of the UFF Faculty of Medicine, according to CAEE No. 58491722.2.0000.5243, as recommended by Resolution No. 466/12 of the National Health Council, which establishes the Guidelines and Regulatory Norms for Research Involving Human Beings. The nurses' participation was voluntary and dependent on signing the informed consent form, as stipulated in the aforementioned resolution. In order to preserve their confidentiality, anonymity and reliability, the interviewees were identified with the initial letter E for nurses, followed by a numerical number corresponding to the sequence in which the interviews were conducted (E1, E2, E3, E4 and E5). A standardized checklist, the Consolidated Criteria for Reporting Qualitative Research (Coreg), 14 was used to help researchers report qualitative research information with transparency and quality.

Results

Based on the meanings revealed, it was possible to build thematic categories: Nursing teleconsultation and nurses' actions in the human milk donation process in times of covid-19 - an expansion value; and Nursing teleconsultation in the care of donors and infants assisted at the HMB - a useful health value.

Nursing teleconsultation and nurses' actions in the human milk donation process in times of covid-19 – an expanding value

Telehealth is a tool that has been widely used as a vehicle for expanding knowledge, allowing health activities and health care to be carried out remotely. With the covid-19 pandemic, the global health system has experienced and continues to face the challenge of offering clinical support, health promotion and health training to SUS professionals and users. The need to overcome geographical barriers and integrate the support network in solving health problems has revealed the value of expanding the area of teleconsultation for safety and quality in the HMB.

The expansion value, as an integral part of the essential median values that make up the vital value, represents the expansion and growth of the various aspects that aim to meet human needs. In this context, it is represented by access to health care, in line with the premise that health and well-being are fundamental to life.

I particularly believe that, faced with the scenario caused by the pandemic, the nursing teleconsultation was of great value and is still used today. In the current scenario, it has become a significant working tool. (E2)

In the context of the pandemic and day-to-day life, the nursing teleconsultation was very valuable because sometimes the mother was in pain, she couldn't breastfeed and we were able to welcome her and give her guidance for that moment. (E4)

The value of expanding nursing teleconsultation at the HMB expands the health intervention network, qualifying care for women through guidance and clinical support for the demands of human milk donors, a reality of care and support between professionals and service users, and thus guaranteeing qualified access to the HMB.

> Teleconsultations we started doing at the milk bank with puerperal women, with donors, we still do it, but at the beginning of the pandemic, it was used a lot because there was no more face-to-face care, our only resource was teleconsultations, and they were very useful, because women were left without face-to-face care, but we managed to keep in touch, we had a lot of opportunity to help many women at that time. (E5)

> Teleconsultation came as a tool that, during the pandemic, became the flagship for us not to lose human milk donations, it was very good. (E1)

In this sense, the innovation for the HMB through the use of nursing teleconsultation was to expand the experience of virtual teleconsultation to provide continuity of care for puerperal women and nursing mothers and to promote donation of LH, expanding the intervention force to promote, protect and support breastfeeding.

> I think that teleconsultation helps a lot with the issue of successful breastfeeding, with the issue of prolonging the breastfeeding period, because when we make ourselves available to answer a message when she has a question and can't come to the unit, it's a tool that does help a lot. (E3)

The motivation for using nursing teleconsultation was a care strategy to guarantee access to lactating women and donors at the height of the Covid-19 pandemic.

Nursing teleconsultation in the care of donors and infants assisted at the HMB - a useful value in health.

In this category, the knowledge of HMB nurses about nursing teleconsultation is highlighted, as an enhancer of nursing practice in the area of promotion, protection and support for MS with a focus on HL donation, in order to guarantee and expand women's access to timely care for HL donation.

> In my day-to-day work as a nurse in the human milk collection room, nursing teleconsultation is becoming increasingly applicable and necessary in the routine of our care. It is a very useful tool, especially in the post-consultation period, where it is possible to accompany the breastfeeding mother throughout the entire breastfeeding process. (E2)

> At the moment, I think that teleconsultation is valid in the context that the user is seen and we want to know how she's doing so that we can follow up, there's the possibility of making a video call, following up. I think this creates a greater bond between the professional and the HMB user and you can address the difficulties there, but post-care, when she gets home, it's a different reality. (E4)

The results also indicate that nursing care is in line with the care protocols of the HMB network (r-HMB) and nursing regulation in the field of teleconsultation. For the interviewees, teleconsultation expands the modus operandi and values care that is useful for the clinical management of breastfeeding, with a view to donating human milk.

> In the teleconsultation, the video consultation, we can observe their problems and carry out the necessary procedures. In my opinion, it was very useful and, when necessary, we have the opportunity to make use of this resource. It was a gain for our care at the milk bank, with the donors and with the puerperal women who had some difficulty breastfeeding and the result was very positive. (E5)

In terms of Max Scheler's philosophy, the useful value makes up the essential median values and is in the field of vital value, value for life, since the nursing teleconsultation produces care in the field of HM donation, an interaction of technological tools, connected to the internet and to people (nurses, women donors and families), producing a useful value with the capacity to meet the needs and expectations of women HM donors.

> I think the teleconsultation is very worthwhile, so we can have one more tool to be able to give quality, better reception to this user who needs our support at this moment. (E1)

> Several teleconsultations, I would send videos to help the breastfeeding woman realize with that video what she needed to learn in that moment of knowledge and really be able to do it, I would give feedback until the breastfeeding woman was able to solve it. (E3)

Nursing teleconsultation in the area of breastfeeding, especially in promoting HM donation, has potential in clinical practice, with a view to providing safe, efficient and quality care, with useful resolvability to the processes experienced by breastfeeding women who wish to become HL donors.

Discussion

Undeniable are the benefits of breastfeeding as demonstrated by scientific evidence, as well as national and international policies in the field of breastfeeding, especially the HMB network, which aims to increase the chances of recovery for premature babies who are in neonatal ICUs. Based on the food and nutritional security of this clientele, the HMBs provide life chances for these recipients, as well as developing actions to promote, protect and support breastfeeding women, donors, babies and families. The challenges faced during the covid-19 pandemic, decreed on January 30, 2020 by the World Health Organization (WHO), stand out. On March 11 of the same year, the WHO declared that covid-19 was a global pandemic. In this sense, in the field of health care, actions were linked to health promotion, prevention and management of health problems, in order to prevent the advance of mass contamination of covid-19 and to provide solutions to health emergencies.

At the HMBs, work processes were restructured, reducing their service schedules and prioritizing the safety of nursing mothers, infants, their families and the health team, in accordance with the recommendations of the Ministry of Health regarding crowds of people and the use of Personal Protective Equipment (PPE) throughout the work process.

At the time of the global pandemic, telehealth played a key role in expanding health care in the field of primary and specialized health care. It has expanded integration between health professionals and SUS users, guaranteeing access to health services and, in the case of HMBs, access to breastfeeding promotion, protection and support, based on receiving complaints from breastfeeding women, identifying possible breast complications, promoting and guiding breastfeeding, as well as keeping track of HM donors and attracting new donors.

In the field of nursing, Cofen Resolution No. 634/2020 authorizes and standardizes telenursing and the electronic means used in the practice of teleconsultation by nurses in the care, educational and/or research dimensions; the regulation instituted, which made it possible to expand the action of nurses in their daily care and nursing practice. The innovation instituted by the standardization of nursing teleconsultation has expanded the nurse's workforce, expanding access to SUS users in health services, contributing to meeting the challenge arising

from the covid-19 pandemic in the field of primary and specialized health care with nursing actions at the individual or collective level.

These include the promotion and protection of health and the prevention of illnesses, imposing on nurses effective clinical reasoning to meet users' needs and the implementation of the NP described in their practice and anchored in nursing theories.

Ordinance GM/MS No. 913 (published in the DOU on April 22, 2022) declared the end of the Public Health Emergency of National Concern7 due to covid-19 and the United Nations declaration ended the Public Health Emergency of International Concern regarding covid-19 on May 5, 2023.¹⁷

In the trajectory experienced by the nurses in the study regarding the use of teleconsultation at the HMB during the covid-19 pandemic and after its closure, important issues were revealed in their view, such as the value of expanding this care to women through teleconsultation. This work process by HMB nurses expands women's access to this health service and qualifies care in promoting, protecting and supporting BF and reinforces the practice of donating HM. There is a need for this specialized care service at the HMB to be expanded.¹¹

In order to solve health problems, teleconsultation can result in increased access for women. The philosopher¹¹ shows that value emerges from the needs of the subject and, at this point, the value of expansion is aligned with women's rights and enhances care geared towards their needs. The nurses' support constitutes an intervention network for the care of women in the field of LH donation, which is articulated to guarantee comprehensive care aimed at supporting BF.¹⁸

In this sense, teleconsultation as an expansion value for health professionals becomes an innovation in health, as it expands care for breastfeeding and breast milk donation in virtual mode. Similarly, it has a utilitarian value in the vital sphere of maternal health.

The utilitarian value of teleconsultation in the vital field¹¹ makes it possible to redesign qualified interventions for women's care, with better security regarding health issues in the practice of breastfeeding. Access to this resource makes it possible to monitor women more closely and inhibit possible problems caused by inadequate practice, such as breast fissures, breast engorgement and mastitis, or any difficulty with latch-on and correct positioning during breastfeeding, guaranteeing promotion, protection and support.

Thus, the clinical management carried out by the nurse during the teleconsultation has a

utilitarian value for the health and safety of the woman and her newborn. The philosopher's precepts also enable a new care design to guarantee accessibility to HMB services, broadening the meanings of the care produced in the day-to-day work of nurses in the field of BF.

The study was carried out in a region of the state of Rio de Janeiro, which is made up of seven municipalities, and the participants portray the profile of that region, which may not be the same as other regions in Brazil. However, the contributions of this study are significant in the context of nursing teleconsultation in HMBs. It is hoped that this approach can further strengthen the role of nurses in providing care, promoting access to the women treated by the HMB. This translates into an expansion of services to promote, protect and support breastfeeding and donation of HM, with the aim of resolving the needs identified during nursing teleconsultations.

The results of this study may motivate further research in the area of nursing teleconsultation and its applicability in HMBs, which may contribute to further improving care for breastfeeding women, maintaining the flow of milk donations with systematic rigor in order to guarantee food safety for premature babies. In addition, teleconsultation makes it easier to attract milk donors and maintain a good interpersonal relationship between them and health professionals.

Conclusion

The work processes described from the nursing teleconsultation carried out by the nurses and aimed at the lactating women they assist require the establishment and maintenance of an interpersonal and trusting relationship between the nurses and the lactating women, valuing the expansion of the nurses' care for the users. This expansion allows care to go beyond the initial complaints that lead to the search for breastfeeding support, enabling access to health care.

From a holistic perspective of health-disease, considering Max Scheler's Theory of Values, it is worth emphasizing that other dimensions of the human being should make up the NP and guide care actions at the HMB.

As for the analysis of the nurses' view of nursing teleconsultation, it is seen as a useful value in the care process, especially when it comes to donating human milk from an HMB. The value of promoting, protecting and supporting breastfeeding is central to the modus operandi in this specialized space.

This recognition reinforces the importance of promoting, protecting and supporting breastfeeding as central elements in the practice of these professionals in a specialized environment such as the HMB. The findings not only enrich the understanding of care in these contexts, but can also serve as a basis for future research and improving care for breastfeeding women. Therefore, they should be evaluated and expanded in HMB services in order to improve the care provided by nurses to donors and premature newborns.

References

- 1. Barros MS, Almeida JAG, Rabuffetti AG. Rede brasileira de bancos de leite humano: uma rede baseada na confiança. RECIIS. 2018;12(2):125-33. doi: 10.29397/reciis.v12i2.1253
- 2. Ribeiro-Silva RC, Pereira M, Campello T, Aragão E, Guimarães JMM, Ferreira AJF, et al. Implicações da pandemia COVID-19 para a segurança alimentar e nutricional no Brasil. Ciênc Saúde Colet. 2020;25(9):2421-30. doi: 10.1590/1413-81232020259.22152020
- 3. Marchiori GRS, Alves VH, Rodrigues DP, Vieira BDG, Pereira AV, Calandrini TSS. Reflection on the organization of Nursing work in the milk bank: shared and multidisciplinary care. Esc Anna Nery. 2022;26:e20210174. doi: 10.1590/2177-9465-EAN-2021-0174
- 4. Ministério da Saúde (BR), Fundação Oswaldo Cruz, Rede Brasileira de Bancos de Leite Humano. Recomendação Técnica Nº 03/20.160420. Assunto: Recomendações para Acolhimento e Manejo Clínico em aleitamento materno de gestantes, puérperas e lactantes assintomáticas ou sintomáticas de COVID-19 pelo Banco de Leite Humano. Brasília (DF): Ministério da Saúde; 2020 [acesso em 2023 abr 14]. Disponível em: https://rblh.fiocruz.br/sites/rblh.fiocruz.br/files/usuario/80/covid-19_-_rblh_recomendacao_n.0320.160420.pdf
- 5. Wosik J, Fadum M, Cameron B, Gellad ZF, Cho A, Phinney D, et al. Telehealth transformation: COVID-19 and the rise of virtual care. J Am Med Inform Assoc. 2020;27(6):957-62. doi: https://doi.org/10.1093/jamia/ocaa067
- 6. Celuppi IC, Lima GS, Rossi E, Wazlawick RS, Dalmarco EM. An analysis of the development of digital health technologies to fight COVID-19 in Brazil and the world. Cad Saúde Pública. 2021;37(3):e00243220. doi: 10.1590/0102-311X00243220
- 7. Ministério da Saúde (BR). Portaria GM/MS nº 913/2022 [Internet]. Brasília (DF): Ministério da Saúde; 2022 [acesso em 2023 abr 14]. Disponível em: https://www.in.gov.br/en/web/dou//portaria-gm/ms-n-913-de-22-de-abril-de-2022-394545491
- 8. Harzheim E, Chueiri PS, Umpierre RN, Gonçalves MR, Siqueira ACS, D'Avila OP, et al. Telessaúde como eixo organizacional dos sistemas universais de saúde do século XXI. Rev Bras Med Fam Comunidade. 2019; 14(41):1881. doi: 10.5712/rbmfc14(41)1881
- 9. Conselho Federal de Enfermagem (COFEN). Resolução Cofen nº 707/2020. Dispõe sobre a atuação da Enfermagem na Saúde Digital, normatizando a telenfermagem [Internet]. Brasília (DF): Conselho Federal de Enfermagem; 2020 [acesso em 2023 abr 14]. Disponível em:

http://www.cofen.gov.br/resolucao-cofen-no-696-2022 99117.html

- 10. Fonseca RMS, Milagres LC, Castro SC, Henriques BD. The role of human milk banks in promoting maternal and infant health: a systematic review. Ciênc Saúde Colet. 2021;26(1):309-18. doi: 10.1590/1413-81232020261.24362018
- 11. Scheler M. Da reviravolta dos valores. 2ª ed. Petrópolis: Vozes; 2012.
- 12. Nascimento LCN, Souza TV, Oliveira ICS, Moraes JRMM, Aguiar RCB, Silva LF. Saturação teórica em pesquisa qualitativa: relato de experiência na entrevista com escolares. Rev Bras Enferm. 2018;71(1):243-8.
- 13. Bardin L. Análise de conteúdo. Lisboa (PT): Edições 70; 2015.
- 14. Souza VRS, Marziale MHP, Silva GTR, Nascimento PL. Tradução e validação para a língua portuguesa e avaliação do guia COREQ. Acta Paul Enferm. 2021;34:eAPE02631
- 15. Fonseca RMS, Milagres LC, Franceschini SCC, Henriques BD. O papel do banco de leite humano na promoção da saúde materno infantil: uma revisão sistemática. Ciênc Saúde Colet. 2021;26(1):309-18. doi: 10.1590/1413-81232020261.24362018
- 16. Conselho Federal de Enfermagem (COFEN). Resolução Cofen nº 634/2020 [Internet]. Brasília (DF): Conselho Federal de Enfermagem; 2020 [acesso em 2023 abr 14]. Disponível em: http://www.cofen.gov.br/resolucao-cofen-no-0634-2020_78344.html
- 17. Organização Mundial de Saúde (OMS). OMS declara fim da Emergência de Saúde Pública de Importância Internacional referente à COVID-19. Genebra (CH): Organização Mundial de Saúde; 2023 [acesso em 2023 abr 14]. Disponível em: https://www.paho.org/pt/noticias/5-5-2023-omsdeclara-fim-da-emergencia-saude-publica-importancia-internacional-

referente#:~:text=Bras%C3%ADlia%2C%205%20de%20maio%20de,)%20referente%20%C3%A0%20 COVID%2D19

18. Azevedo ARR, Alves VH, Souza RMP, Rodrigues DP, Branco MBLR, Cruz AFN. O manejo clínico da amamentação: saberes dos enfermeiros. Esc Anna Nery. 2015;19(3):439-45.

Funding: Not applicable

Authorship contributions

1 - Ediane de Andrade Ferreira

Nurse. Master in Nursing - edianesaude@gmail.com

Conception and design of the study, analysis and interpretation of the data, final review with critical participation in the manuscript.

2 – Valdecyr Herdy Alves

Nurse. Full Professor - herdyalves@yahoo.com.br

Conception and design of the study, analysis and interpretation of the data, final review with critical participation in the manuscript.

3- Diego Pereira Rodrigues

Corresponding Author

Nurse. Adjunct Professor - diego.pereira.rodrigues@gmail.com

Conception and design of the study, analysis and interpretation of the data, final review with critical participation in the manuscript.

4 - Bianca Dargam Gomes Vieira

Nurse. Adjunct Professor - biadargam@gmail.com

Conception and design of the study, analysis and interpretation of the data, final review with critical participation in the manuscript.

5 – Siomara Correia de Holanda Barbosa

Nurse - siomaraholanda@gmail.com

Final review with critical participation and intellectual analysis in the manuscript.

6 - Thaís Renata Muniz

Nutritionist - thaysrmuniz@hotmail.com

Study conception and design and data analysis and interpretation.

Scientific Editor-in-Chief: Cristiane Cardoso de Paula

Associated Editor: Aline Cammarano Ribeiro

How to cite this article

Ferreira EA, Alves VH, Rodrigues DP, Vieira BDG, Barbosa SCH, Muniz TR. The value of the nursing teleconsultation at the human milk bank in the view of nurses. Rev. Enferm. UFSM. 2023 [Access at: Year Month Day]; vol.13, e38:1-14. DOI: https://doi.org/10.5902/2179769284450