



North Wellington Health Care OB Booklet



Welcome to the Family Centred North Wellington Health Care Birthing Units

It is our intent to make this experience special for you, your baby and your family. The obstetrical team has prepared this booklet for you. If you have any questions that are not answered in this booklet, please feel free to ask us any time!

A team of health care professionals will provide you with care at the hospital. We will work together with you to identify your needs and create a care plan specific to you. Your health care team may include a Registered Nurse, Doctors, Midwives, Pharmacist, Registered Dietitian, Public Health Nurse or Student training in health care. In order to provide the best care for you and your baby information about your health care may be shared between members of the health care team. Your health care providers welcome your comments and questions.

North Wellington Health Care (NWHC) is a dynamic organization that is dedicated to quality and passionate about improving the health status of our community. NWHC offers obstetrical care at both their Palmerston and District Hospital (PDH) and Louise Marshall Hospital (LMH) sites.



What to bring with you to the hospital



Be prepared. Pack your bag at least **one month** in advance. It is usually your baby that makes the final decision of when you will deliver. We ask that you bring these supplies with you to the hospital.

For Mother:

- Health Card (OHIP)
- Personal care items, large sanitary pads and extra underwear
- Any prescription medications
- Clothing items
- Nursing pads for breastfeeding
- Labour items you may want to bring: watch, camera, water bottle, chapstick, mirror
- Snacks for partner and mom after delivery
- Personal music player with headphones

For Baby:

- Receiving blankets
- Baby clothes
- Safety approved infant car seat (to be used upon discharge)
- Newborn diapers
- Baby wipes

For Partner:

- Sleeping bag
- Pillow



Getting Help During Your Pregnancy

Dial 9-1-1 in a medical emergency

Medical emergencies may include:

- ☑ Heavy bleeding from your vagina
- ☑ A seizure
- ☑ Fever, chills, dizziness, vomiting or bad headaches
- ☑ You feel like your baby is coming now – or you feel like pushing
- ☑ You feel something unusual in your vagina or between your legs – this may be the baby's head or cord
- ☑ Sudden or constant pain in your abdomen, or bad cramps, stomach pains that do not go away
- ☑ Sudden or sever swelling of your feet, hands or face

At anytime during your pregnancy, come to the Labour and Delivery Unit when:

- Your contractions are regular and uncomfortable
- You have lower back pain/pressure or change in lower backache
- Your water has broken, a trickle or gush of fluid from your vagina
- You have a small amount of bleeding or spotting from your vagina
- There is a change in how often your baby is moving
- You have blurry vision, or see spots before your eyes
- You have been in a car accident, fallen or been injured, even if you think it is minor
- You have one or more of these signs of pre-term labour
 - Regular contractions or tightening of the uterus
 - Menstrual-like cramps or low, dull backache
 - An increase or change in your vaginal discharge (watery, mucousy or bloody)
 - Abdominal cramps, with or without diarrhea
 - You are concerned about yourself or your baby

Please call before coming to the hospital, so we can prepare for you. PDH: (519) 343-2030. LMH: (519) 323-2210.

Signs Of Labour

Most women begin labour between 37 and 41 weeks of pregnancy. Because you do not know when you will go into labour, it is a good idea to be ready a few weeks before your due date. Talk to your doctor or midwife about any special instructions that they have for you about when to go to the hospital.



Our Birthing Area

During labour two support people are permitted to be in the room. If you have a cesarean section, one support person can accompany you into the operating room. All other visitors are requested to wait at home, as there is no waiting room outside of the Labour & Delivery area.

Using Nitronox

Nitronox is a mild, pain relieving gas that contains a mixture of oxygen and nitrous oxide. Breathing the gas mixture through a mask helps relieve the pain of labour. Nitronox has been called laughing gas, because it makes some people feel 'goofy'. It may make you feel a bit light-headed or groggy. Not everyone will feel the same way. While you are using Nitronox, the nurse will monitor its affect on you.

Nitronox is safe for your baby. Nitronox is usually used in the last part of labour, when your cervix is almost fully dilated and you are almost ready to push your baby out. It is used for short periods of time, usually no longer than two hours.

Taking medication for pain

Medications can be safely used to relieve labour pain. If you are considering pain medication, the doctor or midwife will discuss the risks and benefits with you.



Some types of Narcotic medications can be given during labour to help you relax and relieve some of your pain. Narcotic medications are usually given through a needle into your buttocks or thigh, or through an intravenous in your arm.

These medications may make you feel sleepy and may cause nausea and vomiting. If your baby is born within four hours of having medication it may affect your baby's breathing. Giving your baby special medication, when he or she is born, can reverse this affect.

Identifying your baby

Right after birth, matching identification bands are put on your baby, your partner or support person and you. The bands have this information:

- baby's gender and hospital identification number
- mother's name and hospital identification number
- date and time of birth

The mother's and baby's name will be the same as the name on the mother's health card. The identification bands must be worn until you take your baby home.

Medications your baby needs for good health

The nurse will give your baby two medications within the first hour after birth. During birth, your baby's eyes may be exposed to bacteria that could cause an infection. An antibiotic ointment called Erythromycin is put into each of your baby's eyes to prevent him or her from getting an eye infection. Your baby will also need Vitamin K to prevent bleeding problems. Vitamin K is given as a needle in your baby's thigh.

After delivery

After your delivery, if there are no health concerns, your new baby will remain in your room with you, 24 hours a day. Keeping your baby with you gives you a chance to learn about each other. It also allows you to offer frequent feeds in the early days of your baby's life. It is recommended to you to nurse, at least, 8-12 times in 24 hours.

You will be in a private room and your partner or support person can stay overnight. Staying overnight is a good opportunity for your partner or support person.

Your partner or support person should bring the following items when staying overnight:

- Sleep apparel
- Pillow and blankets/sleeping bag
- Toiletries
- Food and snacks

During the night, your partner or support can help by:

- Holding or rocking your baby
- Getting you a drink or snack
- Changing your baby's diaper
- Help with breastfeeding/ positioning your baby

During the first few hours, your nurse will check your baby's:

- Breathing and heart rate
- Temperature
- Colour

Caring for your baby's cord

Your baby's cord should fall off by 2 weeks of age. Keep your baby's cord clean and dry. You do not need to put alcohol or other creams or lotions on your baby's cord. Research has shown that a baby's cord will fall off more quickly by keeping it clean and dry.

North Wellington Health Care's Baby-Friendly Breastfeeding Policy

At North Wellington Health Care we follow the World Health Organization's Baby-Friendly practices encouraging you to breastfeed, and we believe that breastfeeding is the healthiest way to feed your baby. Breastfeeding is good for you and your baby. The following is an overview of our breastfeeding policy. If you wish to see the full policy please ask our staff.

We will:

- Train all of our nurses and health care providers to support and assist you with your feeding choice
- Help you to start breastfeeding by placing your infant with you, skin-to-skin, as soon as possible after birth for as long as you wish
- Help you to breastfeed within the first hour together - if you need to be separated from your infant we will help you to maintain breast milk production
- Not promote use of any foods other than breast milk unless it is for medical reasons
- Allow you to remain together with your infant 24-hours a day and have you room-in with your baby
- Monitor your progress with learning to breastfeed and offer assistance throughout your stay with us
- Encourage breastfeeding on demand and will teach you ways to understand when your baby is hungry
- Encourage you to breastfeed exclusively for the first six-months, and beyond
- Not promote pacifiers or artificial nipples for feeding your baby
- Not allow formula companies to advertise or distribute free samples through our hospitals
- Refer you to ongoing breastfeeding support following your hospital discharge
- Welcome breastfeeding within all areas of our facilities – let us know if you wish to have a private space



Please feel free to ask your nurse for assistance and let us know if you have any questions or concerns.

Feeding your baby

As recommended by the World Health Organization, breast milk is the best food for your baby and is the only food they need for the first 6 months. Breast milk helps your baby grow in the best possible way. Babies do not need a lot of milk at once – they need a little milk often, at least 8 feeds per 24 hours in the early months. A newborn stomach stretches gradually over the first week or two. Skin to skin contact is important as it helps stabilize your baby's temperature, heart rate and breathing. It also reduces your baby's stress hormones.

How to tell when your baby is ready to feed

In the first 24 hours after birth, you may find your baby is sleepy and that you need to wake him or her to feed every 1.5 to 3 hours. In the next 24 hours your baby will be more awake and want to feed more often. Spend as much time as you can with your baby to get to know him or her. You will learn to recognize when your baby is hungry and ready to feed.

Here are some signs that your baby is hungry and ready to feed:

- Your baby's eyes move rapidly behind closed eyelids
- Your baby may try to lick or suck at whatever is close to his or her face
- Your baby may turn his or her head from side to side
- Your baby may bring his or her arms closer to his or her face
- Your baby's hands may rub or even scratch his or her face

Crying may be one of the last signs that your baby is getting ready to feed.

When you are nursing your baby, positioning is key. You should be in a comfortable position with your back well supported and your shoulders relaxed. Your baby's position should be "tummy to mummy", nose to nipple and their bum tucked in. Remember to always bring baby to breast and not breast to baby.

Testing your baby's hearing

Babies are able to hear at birth. Good hearing is needed for babies to learn how to talk and understand language. Hearing loss can delay or prevent babies from learning these skills.

All newborns in Ontario can have their hearing screened. When hearing loss is found early, the baby can get help and support right away. This gives the baby the best chance to develop normal language skills. Your Nurse will give you a list of Hearing Screening locations. It is your responsibility to book an appointment for your baby's hearing test following your hospital discharge.



Newborn Screening

Your baby will require a blood test after 24 hours of age. This test screens for a variety of diseases that are not usually apparent in the newborn period. Early detection is key to effective treatment and can prevent serious health problems. The blood sample for the test is collected from a small heel prick. If you choose to go home from the hospital before your baby is 24 hours of age, you are required to return to the laboratory for this test, and a requisition with instructions will be given to you at discharge from the hospital.

When it is time for Discharge from the hospital

Discharge time is 10:00 a.m. When your doctor advises you that you will be discharged please arrange for someone to pick you up. If this is not possible please speak to your nurse. There are special circumstances where you may be discharged later in the day; your nurse will inform you of this.



Your baby's safety is of utmost importance to us

- NEVER leave your baby unattended
- NEVER allow anyone to remove your baby from your care; you or your partner may need to accompany your baby anywhere it may need to go within the hospital such as x-ray. If this is not possible, a nurse will accompany your baby.
- Always make sure the person administering care to your baby is wearing a North Wellington Health Care identification tag with picture. Ask the staff member to show you the ID tag if you do not see it
- Babies must be transported in a bassinet or infant seat while in hospital
- Do not visit other patients with your baby
- Clean your hands before you pick up your baby while in hospital

Use your baby's bassinet when you need to move the baby from one place to another outside your room. Do not carry the baby in your arms while you are walking in the hallway. Keep your baby close by while you are showering or try to plan your shower when your partner or a visitor is in the room. If there is no one to watch your baby, speak to your nurse to make arrangements for your baby to be cared for while you are out of your room. Your baby may stay in your room when you use the washroom in your room. Bring your baby close to the washroom door and leave it slightly open. Your baby should not leave the unit until he or she is discharged from the hospital.

Cord Blood Banking

As a new parent, you may wish to participate in cord blood banking for stem cells. Umbilical cords contain potentially lifesaving stem cells. Stem cells can treat dozens of life threatening diseases. Your baby's cord blood can be collected at birth and stored for future use. If you decide that you wish to have cord blood samples obtained for stem cell collection, you will need to make **your own arrangements PRIOR** to birth with a private Cord Blood Banking Clinic of your choosing. Your physician will help you with collecting the desired sample as per the instructions in the kit you obtain. Transportation of the sample, after collection, to the Cord Blood Bank you have chosen is your responsibility. Please discuss this with your doctor.

Visiting at the hospital

Visitors are an important part of patient care. However, we need to limit the number of visitors in order to help prevent the spread of infection and allow patients to get the rest they need to recover. Partners, support persons and visitors should stay at home if they are feeling unwell or have been exposed to an infectious illness. Please pass this information on to them and make sure they understand. Everyone must practice hand hygiene when they visit the hospital and before and after visiting a patient.

We encourage your partner to be involved in the baby's care as much as possible. The mother's significant other/partner/spouse is welcome to visit/stay 24 hours. There are fold out chairs provided to sleep on. Remember to bring your own pillow and sleeping bag/blankets and sleep apparel.

Visitors are welcome between 2 PM – 8 PM



During visiting hours you may have two visitors at a time in addition to your partner or support person. Visitors may rotate as long as the maximum number of visitors with you is not more than two.

Siblings of the newborn are welcome if they have had their chicken pox vaccine or have previously had chicken pox. A responsible adult must supervise them to visit while you are in hospital. All other children are not allowed to visit while you are in hospital.

If you are bringing food or snacks from home you may keep them in the ward kitchen fridge. Please label any containers or food with your name.

Screening for congenital heart disease

Before your baby is discharged, the nurse will conduct a simple screening test on your infant to check for low oxygen levels that may be a sign of heart defects. This screening test does not hurt your baby. A small sensor will be placed on their right hand and on one foot to obtain readings. This screening is best completed after your baby is at least 24 hours of age. If your infant shows low oxygen levels in their blood, your Doctor will be advised of the results. They may then complete another physical examination of your baby and/or recommend further testing.

Back to Sleep – tummy to play

Healthy babies should sleep on their backs to reduce the risk of Sudden Infant Death Syndrome (SIDS). Never leave your baby on his or her tummy or side to sleep until they are old enough to roll over to sleep that way on their own.

Your baby needs some “tummy time” each day. This is playtime on his or her stomach, when your baby is awake and someone is watching.

Soothing a crying baby

All babies cry. Some babies cry more than others. It can be hard if you are the mother of a baby who cries a lot. Ask for help if you feel upset or frustrated. Every baby is different, but here are some things that might help:

- Undress the baby and put the baby against your skin
- Try feeding the baby again even if they fed a short time ago
- Try to respond to your baby quickly if they start to cry. It is harder to calm a baby if they have been crying for a long time.
- Hold your baby on your chest or your shoulder and rock with them, or rock in a rocking chair
- Try burping the baby
- Talk, sing or say “shhhhh” to the baby
- Change the baby’s diaper
- Use a baby carrier or wrap while you walk

Choosing a safe care seat for your baby

Before you leave the hospital with your baby, your baby will need to be placed in a CSA approved car seat. The nurse will observe the placement of your baby in the care seat. Newborn babies must be in a rear-facing car seat. The car seat should not be installed in the front seat where there is an air bag. There are many different types of car seats. Choose a seat that will work best for you. Be aware that buying a used car seat can be unsafe because a used car seat may:

- Be missing parts or instructions
- Have been recalled
- Be too old to meet today’s safety standards
- Not be safe if it has been in a motor vehicle crash

For more information you may wish to contact:
The Co-operators Insurance 905-681-7711
Your local Ontario Provincial Police
Transport Canada 1-800-333-0371



Please read the instruction/safety manual, that accompanies your car seat, before using it. Each seat has specific instructions and a manufacturing expiry date.

Your Role

As a member of the health care team, we encourage you and your partner to take part in your care and help us learn from you. Here are things you can do to participate in your care:

- Share information about yourself with your health care team
- Take part in making informed decisions about you and your baby
- Take part in your care and the care of your baby
- Decide on how many family member and support persons will be involved with your care
- Ask questions to make sure that you understand your health care treatment



Partner's role

- Talk to your unborn baby, he/she can hear as early as 20 weeks
- Talk to your partner about the expectations of parenthood
- You may wish to join a prenatal class with your partner to learn about your growing baby, various techniques for labour/birth and support needs. Discuss expectations and plans for labour/birth.
- Share in the care of your baby.
- Begin early to build a relationship with your child.
- Spend time together as a couple – make time for the two of you.
- Be a positive role model for your child – praise your child often – read and spend time with your child – hug, kiss, hold and comfort your baby.
- Create a smoke-free environment.
- Take time to learn how your child communicates through crying, cooing, smiling and what this means.