

Our baby's stay in neonatology



Your baby needs special care or monitoring day and night. This is provided in the neonatal unit. This fact sheet explains how this unit works and how you can take care of your baby during this stay.

Why does our baby need care or observation in neonatology?

The main reasons for admission to this unit are:

- birth at 35 weeks or earlier
- low weight
- jaundice (in certain cases)
- low blood sugar (hypoglycemia)
- respiratory problems
- feeding problems
- possible infection

What is the neonatal unit?

This is a unit that provides specialized care for babies with special needs at birth. The care team includes specialist physicians, nurses, nutritionists, social workers, psychologists, and other professionals such as respiratory therapists, occupational therapists, and physiotherapists.

These people look after the baby's care and treatment. They can also help you with breastfeeding and are there to listen, support, and reassure you.

The care team may use special equipment, depending on the baby's health status, such as:

- an incubator to keep the baby warm
- a small breathing tube in the nostrils or an oxygen mask
- a solution, which is a liquid injected through a tube inserted into a vein, that can be used to hydrate the baby or provide medication
- a feeding tube, which is a small tube inserted through the baby's nose or mouth that goes directly into the stomach; this allows the baby to be fed without becoming tired from sucking, which would hinder weight gain
- sensors to continuously monitor the amount of oxygen in the blood, as well as the baby's breathing, heartbeat, etc.



When might our baby be admitted to the neonatal unit?

Your baby could be admitted to the unit immediately after birth or a little later, while still in the hospital. Admission to the unit is also possible up to 7 days after going home, if your baby needs care again. Beyond this time, you would need to go to the emergency room of any hospital that admits children.

How long could our baby stay in the neonatal unit?

The length of stay could range from a few hours to several days, depending on your baby's condition and needs. Your baby will be discharged home as soon as his or her health status allows it.

When can we see our baby?

You can stay with your baby the whole time. If your baby is in an incubator, one parent can sleep at the bedside. Most rooms are single-bed rooms, for greater privacy. There are rocking chairs, zero-gravity chairs, sleep chairs, and a locker for your belongings.

If your baby is in the nursery, you can also stay beside him or her for as long as you want. For these situations, family rooms are available. Parents can take turns sharing them upon request. Ask your health care team if you can use one of them.

How can we help our baby during the stay in the neonatal unit?

Maintain **physical contact with your baby** as much as possible. Your baby already knows you! It's good to rock, hold, talk, sing songs, and touch your baby.

Your involvement is encouraged. If the baby's health allows it, the parents should provide basic care (bathing, changing diapers, rocking, comforting, etc.).



Parents are the people who can provide the most comfort to the baby. You are at the heart of your baby's care.

> Use skin-to-skin contact

Also called the kangaroo method, this contact with the mother or the father is an excellent way to reassure the baby. Feel free to ask the team to help you settle in.

> Give the baby your breastmilk

The milk of a mother who has given birth prematurely is perfectly suited to the specific needs of the premature baby. It protects against infections and helps the baby's digestion. Receiving your breast milk from the very first days will be very beneficial for your baby.

If the baby has trouble latching on to the breast, it's still possible to provide your milk, either through a nasal feeding tube or some other means. As soon as your baby is able to take the breast or a bottle, you should use that method, even at night.

> Remember to take care of yourself

To take good care of your baby, you need to take good care of yourself. Feel free to ask for help. Remember to relax, spend time outdoors, and try to catch up on lost sleep.

Finally, eat healthfully and, if possible, take your mind off things, whether by going for a walk, relaxing at home, or taking a bath, etc. Your partner or anyone else you choose can stay with your baby when you're not there. Let the health care team know who will replace you.

> Take advantage of the help available

Several care providers can help parents during the baby's stay in the neonatal unit.

We advise you to agree to see a social worker, who can tell you about the services available for parents. The social worker can also support you in difficult times. If needed, you can also see a psychologist.

Don't hesitate to ask your nurse about the many services available.

What procedures apply during the stay in the unit?

- To enter and leave the unit, you will need an access card. You will be given one in exchange for a deposit (only one card per family).
- You will need to bring diapers, as they are not provided.
- Your meals are at your own expense. Food and beverages are not allowed inside the care unit. You can eat in the cafeteria. A refrigerator and a microwave oven are available in the family kitchen.
- No objects, stuffed animals, or toys may be placed in incubators or cribs. This is to prevent any risk of injury or choking. You should do the same when you return home.
- Personal effects should be kept to a minimum in the incubator area. Store them with your clothes in the locker provided. Leave valuable items at home. The hospital is not responsible for lost or stolen items. For reasons of hygiene and cleanliness, plants and flowers are not allowed in the care unit and family rooms.

- Coats and boots should be left on the racks at the unit entrance.
- Keep your identification bracelets on until your baby is discharged.

Can our family and friends enter the unit to see our baby?

Three people at a time, including the parents, can enter to see the baby. Brothers, sisters, grandparents, and friends are most welcome.

However, persons who are sick should not come to visit. If you have any concerns, discuss them with the health care staff.

Handwashing is mandatory before entering the care unit. If you're unable to come, another member of the family can replace you at the baby's bedside. Notify the nurses that you have given your consent for this.

You can also check up on your baby at any time. To do this, call the neonatal unit.



How do we make the transition from hospital to home?

Going home can be an emotionally charged experience. The team will help you make this transition smoothly. Several things might be done to make the return home easier. For example, the team might encourage you to spend a night in the unit with your baby.

When you get home, don't hesitate to accept help from your family, friends, and community.

Who can I contact for help or to ask questions?

After your baby's birth, when you return home:

- in the first 7 days, if you have any questions about your baby's health, you can call the CHUM Post-partum Unit:
> **514 890-8426**
- **however, for an emergency, call 9-1-1.** The CHUM does not offer emergency health care services for babies (pediatrics).

For non-urgent questions, you can also contact your perinatal clinic:

Tel.:



USEFUL RESOURCES

Discover our guide for parents, also available on the web page of the Neonatal Unit.



> chumontreal.qc.ca/repertoire/neonatalogie

Perinatal nurses at your neighbourhood CLSC. To locate your CLSC by telephone:

> **1 877 644-4545 (toll free)**

To search by postal code:

> sante.gouv.qc.ca/repertoire-ressources/

Info-Santé :

> **8-1-1** (at any time)

You received the guide *From Tiny Tot to Toddler* at your first medical visit. You can also consult it online:

> www.inspq.qc.ca/en/tiny-tot/

Préma-Québec, the association for parents of premature infants:

> **450 651-4909 ou 1 888 651-4909**

> premaquebec.ca/en/

Association de Parents de Jumeaux et de Triplés de la région de Montréal :

> **514 990-6165**

> apjtm.com (French only)

To learn more about pregnancy, delivery, or follow-up care, visit our internet site.



Videos, other fact sheets, and more resources are available at:

centredesnaissanceschum.com

The content of this document in no way replaces the recommendations and diagnoses made, or the treatment suggested by your health professional.

To find out more about the Centre hospitalier de l'Université de Montréal
chumontreal.qc.ca

APPENDIX 1: TEACHING PROVIDED

During your baby's stay, several information sessions will help you to care for your baby and prepare for your return home.

Keep this document close by. You can fill it out after each information session. Feel free to let your nurse know what topic you'd like to learn about next. Lessons begin during your baby's first days in neonatology.

Lessons in the first days

- Changing diapers
- Skin-to-skin contact
- Breast pump maintenance
- Preventing infections

Support to families

- Care plan, information on the baby's health status
- How to communicate with the neonatology team
- Strategies for fostering attachment in neonatology
- Coping strategies for parents
- Financial benefits for babies born before 33 weeks
- Préma-Québec

Lessons to prepare for discharge

- Giving medications
- Taking the baby's temperature
- Creating a safe home environment
- Using a baby car seat
- Preventing shaken baby syndrome
- How to access helpful resources

Questions and other training I would like to receive:

Lessons during the hospital stay

Basic care

- Treating diaper rash
- Bathing in a bathtub
- Swaddling bath

General hygiene

- Nasal hygiene
- Skin care
- Umbilical cord care
- Mouth hygiene

Position of the baby

- In general
- When placed in an incubator or crib
- Tools for positioning the baby correctly
- Preventing flat head and stiff neck

Feeding

- Burping
- Pacifiers
- Breastfeeding
- Bottle feeding
- Commercial formulas
- Bottle and pacifier care

Other

- Signs of stress and coping
- Safe handling
- Safe sleeping
- Vaccination
- Antibodies against respiratory virus
- Finding a pediatrician

Good news! Soon you'll be returning home with your little treasure. Here's how to properly plan for this stage in your new family life.

2 to 3 days before departure, you'll need to:

- Make sure you have at home all the material needed for your baby's well-being and safety: crib or bassinet, car seat, clothes, diapers, bottles...
- If your baby needs to be bottle-fed, bring your bottles from home. This will allow you to transition from the hospital bottles to your own. The baby will be able to adapt to the new nipples.

For safe sleep, as recommended by Health Canada, you should:

- Remove everything (small bumpers, head support, etc.) before placing the baby in the bed.
- Make sure your baby's crib is level and flat.
- Position your baby only on his or her back to sleep.
- Make sure your baby is partially swaddled, with arms out, and wearing pajamas.
- Make sure you have received the Health Canada information booklet before you leave.
- Feel confident, before you leave, that you can look after your baby's overall care for 24 to 48 hours including overnight (cohabitation).

If your baby has special needs and this applies to you, make sure that:

- Your nutritionist** has taught you how to focus properly on your baby's nutritional needs and plan for supplementation if needed.
- Your physiotherapist** has given you advice and an exercise program to do with your baby.
- Your occupational therapist** has shown you how to make sure your baby can bottle-feed safely.

That's it! Now you're ready to go home. We wish you much happiness with your baby.



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chumontreal.qc.ca



Questions

Write down any questions you want to ask your care team so you don't forget anything.



Handwritten notes area for questions, containing several horizontal lines.



Observations - Comments

Write down observations you feel are important: your symptoms, treatments, follow-up, energy level, spirit, etc.



Handwritten notes area for observations and comments, containing several horizontal lines.



Resource people and contacts

Write down phone numbers, email addresses and websites that could be useful.



Handwritten notes area for resource people and contacts, containing several horizontal lines.

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