Welcome to the Mother-Baby Unit

Congratulations! This is an exciting time for your family and we would like to make your stay with us as comfortable and pleasant as possible. It will also be a very busy time for you and your newborn; a time when you are trying to rest and recover from your delivery while also getting to know your newborn, and how to care for and feed him/her.

When it’s time to have your baby you will be admitted to The Birthing Center on McClure 7. After a recovery period of about two hours you and your newborn will be transferred to the Mother-Baby Unit on Baird 7.

Let us tell you about what you can expect during your stay on the Mother-Baby Unit and introduce you to our team that will be involved with your care.

MOTHER-BABY UNIT—BAIRD 7

Accommodations: Baird 7 has twenty-three private rooms and three semi-private rooms. At times of maximum patient census our semi-private rooms are shared.

Nursing: Our staff includes nurses and licensed nursing assistants (LNA). Your assigned nurse will provide the care you need to heal and assist you with caring and feeding your newborn. Education will be provided to prepare you and your family for discharge. Each shift, our unit has an assigned newborn charge nurse who coordinates newborn care and a unit charge nurse who oversees and coordinates the overall unit needs.

Breastfeeding Support/Lactation Services: All Mother-Baby staff are experienced in supporting you and your newborn in those important first few days of breastfeeding. If you require more intensive support with breastfeeding, an International Board Certified Lactation Consultant (IBCLC) is available most days. Home lactation services are also available in the community. Please check with your insurance company before your delivery to arrange for lactation support after discharge. Arrangement ahead of time ensures breastfeeding support right when you get home.

Unit Secretary: Unit secretaries are present each shift and provide support services to the clinical staff.

Medical Team: Your care team includes your attending physician or midwife, a resident physician, as well as medical students, or nursing students.

OB/GYN Providers: After your delivery, you can expect to see and be examined by a provider daily. Each patient is seen early in the morning by the resident staff and later by an attending from your practice.

Pediatrician: Your newborn will be seen and examined by a provider from your Pediatricians office each morning. Please make sure you have chosen a pediatrician prior to delivery and have their full name, practice location and phone number. Most parents like meeting the pediatrician prior to delivery. If your pediatrician does not have admitting rights at UVMMC the pediatric hospitalist will see your baby during your inpatient stay.
**Audiology Staff:** Your newborn will have their hearing tested prior to discharge by an audiology technician. This is a quick procedure which is done in your room.

**Housekeeping:** Our housekeeping staff will be in daily to tidy up your rooms and empty the trash and recycling. If you need additional assistance please let your nurse know.

**Dietary:** After you have placed your order, a dietary technician will deliver your meal tray to your room. A dietician will also see you to ensure your diet needs are being met.

**Laboratory Staff:** A phlebotomist will come to your room to draw blood if your provider has ordered it.

**WHAT TO EXPECT DURING YOUR STAY**

**Length of Stay:** Most women are discharged 1-2 days after an uncomplicated vaginal delivery, or 3-4 days after a cesarean delivery—the national average is 24-48 hours.

**Welcoming Policy:** The Mother-Baby Unit has had to adapt our Welcoming Policy due to COVID-19. Currently, we are allowing one support person to stay with mother/baby couplet for the remainder of their stay. This person should be the same person that was present for the birth. We ask that families make arrangements for other children/pets/other responsibilities in order to not leave the hospital until time of discharge. We encourage families to utilize technology to connect with family and friends and can assist with making these arrangements if desired.

**Patient Centered-Report:** This occurs during each shift change with the outgoing and incoming nurse providing your care. They will discuss key information regarding what happened during the last 8-12 hours to ensure that all important safety information gets passed on. We invite you to be part of this process and encourage you to help set goals for the oncoming shift. Medical information will be discussed at these times.

**Hourly Rounding and Pain Management:** Unit staff will check on you each hour to ensure your safety and your newborn’s safety and to ask you about your comfort level and needs.

**Examinations:** Physical assessments are performed by nursing staff for you and your newborn each shift and by the medical staff every morning.

**Safety:** You will be provided with two wristbands to wear, one for you and the second for your newborn. Your newborn will also have two bands, one is placed on the wrist, and the second is on the ankle. These bands contain identifying information and will be checked by nursing staff each shift and anytime that you may be separated from your newborn. Your partner or support person will also be provided with a newborn wristband.

Each Baby will be given a “Hugs” tag to wear. The Hugs band will be placed on your infant’s ankle. This is a security device that will set off an alarm if the infant is brought close to the unit exit doors. If you notice that the Hugs tag has slipped off of your newborn’s ankle please notify nursing staff immediately.

Please visit [UVMHealth.org/MedCenter/SafeKidsVT](http://UVMHealth.org/MedCenter/SafeKidsVT) to learn about Safe Sleep Practices. Our nursing staff will review this with you and help you to practice safe sleep habits during your stay with us so that you may continue these practices once you are at home.

**STAFF**

Staff members have a teddy bear on the upper corner of their badge. This means that they are recognized by the hospital as being able to care for your newborn. Always check staff badges and never let your newborn go unaccompanied with staff that does not have these teddy bears on their badge.
DISCHARGE PREPARATION

A number of tasks and procedures must be completed prior to discharge. Infants are typically not discharged prior to 24 hours of age to allow for recommended screenings to be completed. Upon admission you will receive a folder with further information. Please review the discharge checklist and work with your nurse to complete the tasks which include our discharge Book and Web App “Understanding Mother and Baby Care”. We ask that all parents complete their baby’s birth certificate paperwork within 24 hours of birth.

Car Seats: It is strongly recommended that you have your car seat fitted to your car before delivery. There are many places near you that can provide this car seat fitting service, including many fire stations and police stations: look at this web site for a place near you: http://www.beseatsmart.org/. You may make an appointment at the hospital to have your car seat fitted by calling 847-1215 (appointment needed). Bring your newborns car seat to the unit before discharge. It is expected that the baby will be discharged in the seat after the straps have been checked by your nurse.

NEWBORN INFORMATION

Birth Certificate: You will receive a lot of information during your pregnancy in regards to the birth certificate and social security card. We will provide all the worksheets and information needed during your stay. The state requires that the birth certificate be filed within the first 24 hours following the birth of your child.

Vaccines/Medications: According to the American Academy of Pediatrics it is recommended that newborns receive Vitamin K and erythromycin after birth (this will occur on Labor & Delivery) and Hepatitis B vaccine with the 24 hour bundle (this will occur on Mother/Baby Unit).

24 hour bundle: This series of tests include: Critical Congenital Heart Defect Screening (CCHD), transcutaneous bilirubin screen (TCB), Hepatitis B vaccine, and the Newborn Screen. Your admission folder will have more information on all of these tests. Aside from this bundle of tests your newborn will have his/her hearing check during their stay.

Circumcision: If parents desire a circumcision the provider, most typically the OB/GYN MD, will review the risks vs. benefits with you and have you sign a consent form for this elective procedure.

FEEDING YOUR NEWBORN

Breastfeeding: Often immediately following delivery newborns are alert and this is the best time to initiate breastfeeding. Typically following this alert period is a period of sleepiness that can last until 24 hours of life. Your nurses will encourage you to do skin to skin as much as possible during this period. After 24 hours expect to feed your newborn 8-12 times in 24 hours. We will encourage you to look for early feeding cues and to offer breast at least every 2-3 hours. Although your body produces colostrum from the start, your milk will not come in until day 3 to 5. For most babies there is no need for supplementation while waiting for your milk to come in. If more support is needed an LC consult will be placed and a feeding plan will be devised by your care team.

Formula: We provide formula during your stay and will assist you in determining the frequency and amount of formula your newborn needs.

UNPLANNED EVENTS

Newborns: Issues such as high levels of jaundice, infection, difficulty breastfeeding, late preterm delivery (35+0 – 36+6 weeks gestation), or a NICU admission for your newborn could extend your stay with us.

Mothers: Those women experiencing hypertension issues prior to delivery can experience a 1-2 day post-partum reprieve but symptoms may reappear closer to day of discharge. Monitoring and treatment of high blood pressure may prolong your visit with us.