Special Care Nursery Handbook

Special Care for Special Babies
Dear Parents,

Bringing a new baby into this world is surely one of life’s greatest miracles. The birth of a newborn that requires special medical and developmental care is likely an unexpected and a stressful event. We have created this booklet to help answer your questions about Holland Hospital’s Special Care Nursery and to highlight information you’ll receive as we care for your infant.

Boven Birth Center and the Special Care Nursery staff are here to give your baby the best care possible. We do not consider you a visitor. You are an important part of our health care team. The Special Care Nursery is open to you at any time so that you can remain active in your infant’s care throughout the day. A lounge and a kitchen are available to make your stay more comfortable.

When you need to take a break and go home, please feel free to call us for updates. Keeping you informed about your baby’s progress is part of our care. We welcome questions at any time. We are here for both you and your baby.

Sincerely,

The Special Care Nursery Staff

Call us at (616) 394-3640
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Meet the Team

The Special Care Nursery is staffed with pediatric hospitalists around the clock, here to manage your infant’s care until he is discharged to your own pediatrician. As a parent, you are considered the most important part of the health care team and are encouraged to participate and ask questions about the care of your infant. Other members of the health care team include:

- **Lactation Consultants:** to provide breast feeding support.
- **Care Management:** to help you with your discharge needs.
- **Speech/Occupational/Physical Therapy:** to assist with feeding or developmental concerns.
- **Cardiopulmonary:** to provide intervention and support with your infant’s care if there are any respiratory issues.

The entire care-giving team meets in the Special Care Nursery each morning during the week to discuss your baby’s progress and her plan of care. You are encouraged to be present and take part in this discussion.

Family Lounge & Kitchen

A comfortable lounge area is available for you and your visitors and includes a kitchen with refrigerator and microwave and lockers for personal items. Please label and date your food and beverage items. Food and drink, except for water in a covered cup, are not allowed in the nursery.
Safe & Secure

Providing a safe environment for your infant is important to us.

• You, your baby and your significant other will wear matching identification (ID) bands. Staff will verify the ID band each time you enter the Special Care Nursery (SCN).

• Your baby will wear a HUGS® security ankle bracelet which allows us to monitor the location of your infant at all times.

• The nursery is a secure area. Doors can only be accessed by staff with a card reader. The nursery is never left unattended.

• To ensure safety and confidentiality, all SCN visitors must be accompanied by the infant’s parent or legal guardian.

• Due to patient privacy regulations, nursery staff will only discuss your baby’s condition with a parent or legal guardian.

• Parents are encouraged to call the nursery at any time for updates. To protect your privacy and confidentiality, a personal password will be used to verify your identity before information can be shared over the phone.
Guidelines for Visitors

Working together to protect your infant from illness.

- Hand washing is extremely important and effective. Everyone must wash their hands before entering the Special Care Nursery. A large scrub sink is available outside the nursery.

- When at the bedside, use hand sanitizer before and after touching your baby, after coughing or sneezing, or after touching other surfaces.

If feeling ill, it’s recommended that you stay home. Visitors who are ill will not be allowed to visit in the nursery.

Nursing staff will provide a brief health screening for your other children before visiting. Brief visits by siblings are recommended. Another adult must be available to supervise your other children. Besides your own children, visitors less than 12 years old will not be able to visit in the Special Care Nursery.

Strong odors can be harmful for your infant; therefore we ask that all visitors refrain from the use of perfumes, colognes and strong scented lotions.

Clothing exposed to tobacco smoke can be a hazard for a newborn. If necessary, we can provide you with a clean gown while you visit and hold your baby.
Going Home!

The Question:
“When will my baby go home?” It’s a common question, so don’t feel bad about asking. We understand how important reaching this ultimate goal is to you.

The Answer:
If your infant is on antibiotics, he will need to complete his course of medication before he goes home.

If your baby is not requiring oxygen and is here to grow and learn how to feed, she will go home when...
• taking and tolerating all of her bottle and/or breast feedings
• gaining weight
• able to maintain a normal temperature in an open crib
• not experiencing low heart rate or low breathing alarms

It is important that you are present to care for your baby as much as you can in order to make the transition home as easy as possible.
Breast Feeding and the Use of Breast Milk

Breast milk is undeniably the best nutrition for your infant and the most easily digested. If you are planning to breast feed, our staff will work with you to help you meet your goal. We will provide education and support with consideration for your infant’s needs. If you are planning to formula feed your infant, you may want to consider pumping to give your infant some of your breast milk while he is healing and growing. Donor breast milk is available at no cost when a mother’s own milk is not available.

Starting to pump soon after birth and continuing to pump regularly is important in order to stimulate and maintain your milk supply.

Breast pumps are available for your use while you are hospitalized and as you visit your infant. You may pump at your infant’s bedside or in the family lounge or kitchen.

Skin to skin is an important first step toward breast feeding and has many benefits for your infant, even if you are not planning on breast feeding.

Lactation Consultants will check in on your infant’s feeding progress regularly throughout your infant’s hospitalization. They are also available after discharge to assist you. Contact the lactation consultants anytime at (616) 394-3269.
Feeding Your Baby

Feeding needs to be safe, enjoyable and developmentally appropriate

- **SAFE** means that your baby is able to coordinate sucking, swallowing, and breathing without choking or struggling with intake.

- **ENJOYABLE** means that your baby is actively involved in sucking. He is alert and ready to feed. He is being held comfortably and is relaxed and contained while he eats.

- **DEVELOPMENTALLY APPROPRIATE** means that your baby is not taking oral feedings before his brain has made the connections to coordinate the suck/swallow/breathe pattern. Each baby matures at their own rate. We will help you identify your baby’s cues and developmental milestones that signal the ability to begin breast or bottle feedings. Usually a baby will not be able to take the entire feeding orally until at least 36 weeks gestation. Some infants will take even longer. Until that time, your infant may be tube-fed for some or all of the feedings.
Your Baby’s Development

Leaving the womb is a stressful experience. Your baby has gone from a dark, warm, comfortable environment to an unpredictable one. Even a healthy, full-term baby needs time to adjust to the new environment. When a baby is born prematurely, there are many additional challenges. During the last six weeks of pregnancy, the baby’s brain nearly doubles in size and is adding connections needed for balance, coordination, learning, and social functioning. The Special Care Nursery provides a safe and calm environment in which to grow. You can help nurture your baby.

- Minimize direct light
- Keep noise levels low
- Skin to skin care and nuzzling at the breast provide many benefits to your infant.
- Provide a pacifier and help your baby to bring his hands to his mouth
- Facilitate sleep-wake cycles. Your baby does best when allowed to sleep quietly between feedings.
- Limit handling by visitors – a lot of holding can interrupt sleep as well as expose your infant to germs.
- Avoid perfumes, cologne, strong smelling soaps and smoke on clothing.

Infant brain development at 35 weeks and at term:
Even though your baby can’t talk, he can communicate. We will help you learn how to read your infant’s cues.

**I’m Happy**
- Pink
- Quiet, even respirations
- Smooth movements
- Suck searching
- Sucking
- Finger holding
- Quiet alert
- Mouth shaping (ooh)
- Speech movements

**I’m Overwhelmed**
- Pale, mottled color
- Irregular breathing
- Tremors
- Twitching
- Hiccoughing/sneezing
- Flaccid (limp)
- Squirming, arching
- Finger splaying
- Averting eyes
- Vomiting

If your infant is showing any signs of being overwhelmed, hold him quietly, turn down the lights, quiet the room and allow your infant a ‘time out’. Skin to skin contact during this time is great!
Safe Sleep Environment/Back to Sleep

- Always position your newborn on his back when putting him down to sleep. Side sleep is not advised.

- Firm sleep surfaces (crib mattress) covered by a sheet are recommended.

- Separate, but close sleep environment is recommended (same room). Don’t sleep in bed, on the couch or in an armchair with your infant.

- No soft objects or loose bedding in crib, including stuffed animals, quilts, comforters and pillows. Avoid bumper pads unless thin, firm, and well secured.

- Pacifiers may be offered at nap and bedtimes. Pacifiers should not be forced upon an infant and should not be reinserted if they fall out.

- Lightly dress your infant for sleep and avoid overdressing. The room temperature should feel comfortable for a lightly clothed adult (68-72 degrees), and the infant should not feel hot to the touch.

- Avoid using positioning aides.

- Provide “tummy time” several times each day with your newborn. Be sure they are awake and observed. Tummy time helps develop neck and arm strength which helps them attain milestones such as sitting, crawling, standing and walking.
Smoking and Your Baby

If you smoke, quitting is one of the best decisions you make for your baby’s health. All children are hurt by exposure to smoke, and babies who are born prematurely are especially affected.

Smoking around children causes:
- Higher rates of asthma
- More colds and upper respiratory infections
- Lower birth rates
- More ear infections
- Higher rates of Sudden Infant Death Syndrome

You can protect your baby from the harms of secondhand smoke by:
- Quitting
- Establishing strict no-smoking rules for your home and car

If you smoke and would like to quit, please call the Center for Good Health to register for a tobacco cessation class at 394-3344.
Period of **PURPLE** Crying

- **P** = Peak of crying
- **U** = Unexpected
- **R** = Resists soothing
- **P** = Pain-like face
- **L** = Long lasting
- **E** = Evening

Not all babies experience the Period of **PURPLE** crying, but those who do often leave parents feeling helpless and frustrated. Your baby’s crying will **peak** in the first couple of months and then decrease. He will cry at times that are **unexpected** and you may not know why. Often he will cry and **resist** all efforts to comfort him. Sometimes he will cry as if he is in **pain**, but he isn’t. Sometimes your baby cries for periods that **last** a long time, as much as 5 hours and longer. In the afternoon and **evening**, he seems to cry more than at other times. This period will pass.

Feeling angry or upset is OK. It’s what you do with your anger that is important. Never shake your baby. Take a break to take care of yourself.

Normal, healthy babies can go through the period of purple crying. If your baby is not sick and is not hungry, your baby may cry, but you can know that he is OK…and so are you.

**Remember**

We are here to provide the highest quality care for your infant. We are here for you too. You are an important part of the care-giving team and we encourage your participation at the bedside.
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The material contained here is for INFORMATION ONLY and should not replace the counsel and advice of your physician.