



09PT775

Grúpa Ospidéal
Oirthear na hÉireann



Information Booklet

Maternity Department

REGIONAL HOSPITAL MULLINGAR



Longford Road, Mullingar, Co Westmeath • 044 9340221

Congratulations on your pregnancy and welcome to the Regional Hospital, Mullingar!

We look forward to providing you with the highest standard of care and support throughout your pregnancy, birth and into parenthood.

Further helpful pregnancy advice can be found in your 'My Pregnancy' information book.

ANTENATAL CARE

You can avail of one of the following options for your antenatal care:

1. Combined care between your **G.P. and the Hospital Obstetric Team**
 2. Combined care between your **G.P. and Midwives Clinic**
 3. Combined care between your **G.P. and a Consultant Obstetrician** of your choice, as a private patient.
 4. You will be given a **Combined Care Card** which will be filled in at each Clinic and GP Antenatal Visit.
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APPOINTMENTS

Once your pregnancy is confirmed by your G.P. a referral letter is sent on your behalf to the hospital to arrange your first booking visit. A date and time of appointment will then be sent to you.

FIRST BOOKING VISIT

At this visit a detailed medical and obstetric history is entered in to your chart. Your weight, blood pressure and urine sample will also be checked. (You will be asked to have a fresh urine sample ready for each visit during your pregnancy).

Routine blood samples will be taken and explained to you. These blood samples test for:

- ✓ Blood group, Rhesus Factor & Antibodies: to ascertain your blood type.
- ✓ Full Blood Count: to measure your Haemoglobin (Iron) levels along with other blood components.
- ✓ Rubella Status: this will determine if you are immune to 'German Measles'.

Infectious diseases: Varicella (Chicken pox), Parvovirus (Slapped cheek syndrome), Hepatitis B, HIV and Syphilis.

The infectious disease screening is offered to all pregnant women and requires your written consent. While some of these infections are rare, a person can carry them without knowing it and they can cause problems in pregnancy if they go undetected. By doing these blood tests and observing the results, we can look after you and your baby thoroughly.

An ultrasound dating scan will be carried out at approximately 12 to 14 weeks. A full bladder is necessary for this scan. We encourage you to have one adult accompany you for the scan. As children are not recommended to attend the scanning session, we strongly advise you to make alternative childcare arrangements for this visit. The Midwife Sonographer will advise you if you require any further scans during your pregnancy.

FOLLOW-UP VISITS

Follow up appointments will be issued at the reception before your departure from each antenatal clinic visit. Please ensure to make your own appointment before leaving the clinic.

CLINIC VENUES

Location	Day	Time	Consultant
Longford	Tuesday	Morning	Dr Gannon
	Wednesday	Morning	Dr Thomas
Mullingar	Monday	Afternoon	Dr Gannon
	Wednesday	Morning	Anti D clinic If Rhesus Negative blood type: attend at 28 weeks.
		Afternoon	Dr Thomas & Midwives' Clinic
	Thursday	Afternoon	Dr Ravikumar Diabetic Clinic
	Friday	Morning	Dr Ravikumar & Midwives' Clinic
Tullamore	Wednesday	Afternoon	Dr Ravikumar Midwives' Clinic

ANTENATAL CLASSES & INFORMATION

All pregnant women are encouraged to attend antenatal classes. These can help you to understand your pregnancy and prepare you for birth and becoming a parent. The appropriate time to book antenatal classes is in early pregnancy. You can commence classes at approximately 28 weeks of pregnancy. All ante-natal classes are free of charge.

Please see the options below to find your nearest venue.

Venue	Address	Further Details & Booking
Athlone	Primary Care Centre, Clonbrusk, Athlone	Tel: 0906 424807 Afternoon classes
Longford	Primary Care Centre, Longford	Tel: 043 3339707 Afternoon classes
Mullingar	Regional Hospital Mullingar	Tel: 044 9394654 Or 044 9340221 Bleep 131 michelle.walsh@hse.ie Afternoon and evening classes available
Tullamore	Physiotherapy Dept. Midland Regional Hospital Tullamore	Tel: 057 9358721 Evening classes

BREASTFEEDING INFORMATION CLASS:

There is a 3 hour Breastfeeding Information Class available to every woman planning to breastfeed her baby. Please ask the staff at the antenatal clinics about booking into this class.

This class will also be helpful if you have any questions or concerns about breastfeeding or if you have encountered difficulties while breastfeeding previously.

CARING FOR YOURSELF AND YOUR UNBORN BABY

DIET

Eating for two? You don't need to! From 12 weeks, you only need up to 300kcal extra to provide your baby with energy to grow and develop. It's the quality rather than the quantity that matters. Use the 'Healthy Eating for Pregnancy' booklet to plan and eat a healthy diet. Try to include in each meal: wholegrain carbohydrates for energy, protein to help growth and vegetables for fibre, vitamins and minerals. Keep yourself hydrated to combat fatigue, headaches and constipation.

Did you know?

Many women become anaemic in pregnancy due to low iron levels.

Iron helps transport oxygen around our bodies. The best source of iron is diet.

Red meat & leafy green vegetables are loaded with iron. You may be advised to take iron supplements if diet alone is not enough.

Tea, Coffee and antacids block iron absorption, whereas taking Vitamin C along with iron rich foods helps the body to absorb iron.

Did you know?

'Junk food' like sweets, crisps, fast food and fizzy drinks contain a lot of salt, sugar and fat, and do little to help your baby's growth and development.

FOLIC ACID

Folic Acid 400mcg can be purchased without prescription and is recommended to be started before pregnancy right up to 14 weeks.

It is essential for healthy cell growth in the body including red blood cells and it also helps prevent Neural Tube Defects in baby. Some women may require a prescription from their GP for a higher dosage of folic acid (5mg) if they have a family history of Neural Tube Defect (NTD) or a history of Diabetes. Your GP will guide you.

NICE guideline 2008

DENTAL CARE

Pregnancy hormones can affect your teeth and gums. Please visit your dentist during pregnancy for a check-up! www.dentalcareireland.ie

SMOKING

If you or your partner smoke, do your best to stop now.

Why stop smoking during pregnancy?

The single most important thing you can do to protect your health is to stop smoking.

- ✓ When you smoke you breathe in nicotine, tar and carbon monoxide.
- ✓ You also breathe in around 4,000 other chemicals, many of them poisonous, such as arsenic, ammonia and benzene.
- ✓ The tar and some chemicals build up inside your lungs, where they may eventually cause cancer.
- ✓ Nicotine, carbon monoxide and the other chemicals rush from your lungs into your bloodstream, reducing the amount of oxygen in your blood.

All of the above substances may transfer into your baby's bloodstream via the placenta.

Medical research has shown that women who smoke while pregnant are more likely to suffer from sickness, bleeding, miscarriage and other pregnancy complications. There is an increased likelihood that babies are born prematurely, ill or underweight and are at greater risk of stillbirth or cot death. Due to the lack of evidence and regulation, we do not promote the use of E-Cigarettes in pregnancy.

For more information on the above visit: www.quit.ie

**National Smoker's Quit line Freephone 1850 201 203
or Freetext QUIT to 50100**

For your local Stop Smoking Clinic, see below for details:

Midlands Area

Freephone 1800 242 505

This is a free service — no appointment necessary.

POSITIONING UPRIGHT FOR LABOUR:

How could upright positions benefit normal labour and birth?

The pelvic outlet dimensions are wider in a squatting, kneeling or hands-and-knees position, the baby can get more oxygen as mother's aorta is not suppressed and gravity can help baby to move downwards. Gupta et al 2017

Upright birthing positions include:

- ✓ Standing/squatting, supported by a partner or prop
- ✓ Kneeling upright or on hand-and-knees
- ✓ Using a birth seat



ADMISSION TO HOSPITAL (From 20 weeks of pregnancy)

Where do you call?	Antenatal Ward, Regional Hospital Mullingar 044 9394422
Where do you go?	Admissions Room on the Antenatal Ward, Maternity Floor, Level D
What do you bring?	Your Antenatal Combined Care Card & your hospital bag

If you have any concerns **up until 20 weeks of pregnancy**, please contact your GP firstly, MIDOC or the Accident & Emergency (Casualty) department.

When should I come in to hospital?

- ✓ Vaginal bleeding at any stage of pregnancy.
- ✓ Reduced Fetal Movements
- ✓ Regular uterine contractions / pains.
- ✓ If 'the waters break' or if you think you are leaking fluid.
- ✓ Severe abdominal pain.
- ✓ Sudden onset of severe swelling of feet hands and / or face & eye lids.
- ✓ Severe headache and/or blurring of vision or dizziness.
- ✓ Premature labour.



If you have any concerns about yourself
or your baby **PLEASE CONTACT US!**

044 9394422

Believe in yourself!

PLANNING FOR THE BIRTH OF YOUR BABY

SUPPORT

We welcome one person to be with you during birth. Please decide prior to admission who this person will be. This may be your partner/husband or female relative or friend.

A Midwife will be with you during labour and for your baby's birth.

We would appreciate your understanding that mobile phone use and video equipment are not permitted in the Delivery unit.

LABOUR

Labour starts once your contractions form a regular pattern. When labour starts, you are advised to come to the hospital.

**If in doubt, to speak to a midwife
please call 044 939 4422**

Please note restricted visiting times:

Partners/spouses/children 9am-1pm & 4pm-8.30pm

Grandparents ONLY 6.30-8.30pm

STRICTLY NO VISITORS 1-4PM



THE HOSPITAL BAG(S)

Due to the limited bedside space, we recommend that you have 2 small bags. (Cabin-sized luggage bags are ideal).

One bag for the Delivery suite (to use for your own clothes after delivery) and a second bag for the baby.

BAG 1 – Delivery suite bag

- ✓ Dressing gown and slippers
- ✓ 4-5 front opening light night dresses / night shirts
- ✓ Underwear
- ✓ 2 bath towels
- ✓ Flip-flops
- ✓ 2 packets of maternity sanitary towels
- ✓ Wash cloth/cereal bars/water bottle/hair band/lip balm
- ✓ Personal toiletries
- ✓ A baby's hat, vest & sleep suit (Baby is not dressed in the labour ward)
- ✓ 2 cotton cellular baby blankets
- ✓ TENS machine (if applicable) / birthing ball
- ✓ Birth preferences (if applicable)



BAG 2 – Baby bag

(Can remain in the car until transfer to Postnatal ward)

All luggage bags can be sent home as shelves are provided on the postnatal ward for your belongings.

- ✓ 6 baby sleep suits & 6 baby vests & 2 hats
 - ✓ 2 crib sheets
 - ✓ 1 baby towel (pre-washed)
 - ✓ 1 large packet of new born nappies
 - ✓ 1 roll or bag of cotton wool
 - ✓ 4 cotton cellular baby blankets (Fleece blankets are not recommended as being safe for use with newborn babies).
-

Items to have ready at home, that you may need during and after your hospital stay:

- ✓ Extra baby vests & sleep suits
 - ✓ Extra crib sheets & cotton cellular blankets
 - ✓ Maternity pads
 - ✓ Maternity/breastfeeding bra & breast pads
 - ✓ Spare underwear & nightshirts
 - ✓ Clothes for going home for both you & baby
 - ✓ Nipple balm/nipple compresses
-

BIRTH PREFERENCES

We aim to help you to make your birth experience everything that you hope it to be, while ensuring safety and the use of evidence-based best practice and experience.

When the time comes to birth your baby, you may not always feel like talking. If there are certain things that are important to you surrounding the birth of your baby, that you wish to communicate to your Midwife or Doctor on the day; please include them here and do discuss it with your Midwife or Obstetrician at your next antenatal clinic visit, ideally before 36 weeks of pregnancy.



Please remember to bring your birth preferences with you to the Delivery suite!

ACCOMMODATION

The average length of stay after a normal delivery is approximately up to 3 days and 5 days after a Caesarean Section. Mothers are accommodated in single and four bedded rooms. Your baby rests in a cot at your bedside at all times, this is called "Rooming-in". This is a fantastic way for you to get to know your baby's feeding cues and to get used to each other before you go home together.

SECURITY

Security cameras are located in strategic points in the Maternity Department. Staff are vigilant but mothers are asked not to leave their babies unattended at any time. If you have to leave the ward please inform a member of staff. At birth, two identification bands and an electronic security tag are placed on your baby. Your Midwife will remove these before your discharge home.

ENQUIRIES

Confidentiality is important to us. Your partner/husband should be able to keep your relatives and friends updated. **Mobile phones are not allowed to be used in the Delivery suite.** However, any downloaded apps may still be used in flight mode.

COMMUNICATIONS

There is WiFi available in the hospital. However, the coverage can be limited. Mobile phone charging stations are located in the café area.

CAFÉ/SHOP

A café & shop is situated on the ground floor close to the Main Reception.

Opening Hours:

Monday – Friday	9.am – 8.30pm
San/Sun/Bank Holidays	11.15am – 6.30pm

POST

Post is delivered to the wards daily.

CHAPLAINCY SERVICES

There is an Oratory located on Level B, close to the office of Nursing Administration. Clergy of all denominations are available on request. If you would like to avail of this service, please ask the ward staff.

INFORMATION FOR WOMEN ATTENDING THE MIDWIVES' CLINIC FOR ANTENATAL CARE

What is a Midwife?

The word Midwife means "with woman". Midwives care for women throughout pregnancy, childbirth and after their baby is born.

Midwives view pregnancy and childbirth as being normal life events. Your Midwife is trained to recognise any changes from the normal in your pregnancy and can refer you onwards to an Obstetrician or any other member of the multidisciplinary team, should it be necessary.

What are the benefits of attending the Midwives' antenatal clinic?

["Midwife led care is the best form of care for low risk women." NICE 2010].
Your Midwife provides you with quality, individualized care. They provide information and support to women and their partners to make choices about their pregnancy and child birth. The Midwives' Clinic provides continuity of care to the women attending, as it is run by a team of Midwives. In Regional Hospital, Mullingar, we offer you an 'assisted care' pathway where you can avail of a Midwives' clinic which runs alongside the Obstetric clinic. If any concerns arise during your antenatal visit, an immediate referral is made to the Obstetric Team.

(As recommended by The National Maternity Strategy 2016-2026).

All women who wish to attend the Midwives' Clinic should discuss their intention to do so with their Obstetrician during their first antenatal check.

Women are considered suitable once they have uncomplicated pregnancies and can then have their follow-up visits arranged to attend the Midwife.

All women attending the Midwives will have combined care with their GP. Regular antenatal visits will be scheduled from approximately 18 weeks of pregnancy.



POSITIVE MENTAL HEALTH

Remember that while we cannot control everything in life, we can prepare ourselves for birthing and parenthood by getting as much information as we can to help us understand birth, our bodies and looking after a baby. Be careful of what you read as not everything on the internet is reliable. Being pregnant can make you feel both excited, nervous and scared at times. This is normal.

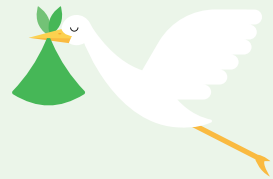
We encourage you to attend your free antenatal classes and physiotherapy classes. Why not look into other classes in your locality that will help you deal with stress and aid your own relaxation and wellbeing such as Yoga, Aquanatal and Hypnobirthing/Gentlebirth classes?!

Anxiety can occur during pregnancy but if it begins to affect your daily activities or your mood, then it is good to talk to someone. Help is available. If you have a history of mental health difficulties, it is important that you talk to your midwife or doctor. (Adapted from NICE guidelines, 2014)

We can put you in touch with our 'Thoughts Before and After Birth' midwife or our support nurse. Also you can log on to www.nurturecharity.org for more information.

INDUCTION OF LABOUR

Labour is a natural process that normally begins between 37- 42 weeks of pregnancy. Sometimes however labour may need to be started artificially, and this process is called Induction of Labour.



Reasons for induction of labour:

- ✓ If your pregnancy has passed your expected due date by approximately 10-12 days
- ✓ Concerns relating to the health of you or your baby
- ✓ If your waters have broken but the contractions have not started

Other information should you require induction of labour:

- ✓ Induction of labour is a medical intervention that we use to encourage the onset of labour when necessary.
- ✓ How the body responds to the medication can vary and while some women can progress very quickly in labour, others can take 1 to 2 days for labour to begin.
- ✓ You and your baby are monitored closely during the Induction process.
- ✓ If labour does not progress, delivery by Caesarean Section may be necessary.
- ✓ Whether your labour is induced or happens spontaneously, the use of upright postures can help your baby navigate the birth passage more easily. (See pg7)

Methods used:

Prostaglandin gel: A gel is inserted into the vagina. This gel helps the cervix to soften, shorten and open enough to allow the 'waters' to be released.

Artificial rupture of the membranes: (breaking the waters) This is done by a Midwife or a Doctor during an internal (vaginal examination), when the cervix is open.

Syntocinon Infusion: Oxytocin is a hormone released naturally in your body when you start labour. Syntocinon is a synthetic form of oxytocin used to start contractions following the breaking of the waters. It is usually used when the contractions have not started, or are infrequent. It is given intravenously through a drip in your arm. The baby's heartbeat will be continuously monitored whilst you are getting this drug.

If induction is necessary, you may require one or all of the above methods depending on an individual assessment made by your doctor. All your options will be discussed with you.

PAIN RELIEF IN LABOUR

What pain relief is available for me during labour?

There is a hospital leaflet available detailing natural and medicinal methods of coping with labour. You will be given this at your clinic visit. In addition to mobilizing, massage and hydrotherapy in early labour; other methods outlined in the booklet include relaxation, complimentary therapies such as Homeopathy and Gentlebirthing, using a TENS machine, Opioids, Gas & Air and Epidural.

Your Midwife will also explain the benefits and any risks of each method at the Antenatal Classes so that you can make an informed decision about what is best for you and your baby.

We encourage the use of the 'Labour Hopscotch' both in pregnancy (to help the baby move down in to your pelvis) and to help you through the various stages of labour itself. This allows baby to move in to a good position for birth while helping you to become more comfortable and relaxed. You can see Hopscotch posters at your clinics, on the Delivery Suite and at your Antenatal classes.

Please ask your midwife at your clinic visit for more information and she will be delighted to explain it to you or visit:

www.nmh.ie click on Maternity→→Community & General Midwives Clinics. Information Booklet→→Labour& Birth. Download booklet containing Labour Hopscotch by Sinéad Thompson, National Maternity Hospital.

SERENITY SUITE

We are excited to announce that we have redecorated one of our labour rooms to facilitate a more 'home from home' environment. It has been widely documented that the birthing environment can greatly influence the processes of labour and birth, both negatively and positively.

This room offers a space that is less clinical and more homely than the standard labour room on the Delivery suite. It aims to provide a calm, relaxing environment that will support normal physiological processes of birth (National Maternity Strategy 2016-2026).

As well as providing a less clinical environment, we have equipment available that supports an active labour and physiological birth, such as a birth ball, birth stool, floor mats, TENS machine, labour bean bag, heat pads, music, aromatherapy and low lighting. These promote the use of gravity and optimal positioning in labour to help your baby negotiate the birth passage and to encourage your birth hormones.

We are delighted to offer this relaxing environment to women who wish to labour with fewer interventions. Any woman who chooses to labour physiologically and who is at low-risk of developing complications can use the room. If the room is occupied, the mobile equipment can be availed of in any other birthing room.



THE BIRTH

We encourage you to change position to that which is most comfortable for you during your labour. Regularly changing your position and using upright, forward leaning postures can help your baby navigate the birth passage more easily. (See pg7)

We will observe your baby's heartbeat closely in labour and work in partnership with you to achieve a positive birth outcome. Most mothers will have a normal birth. Your Midwife is there to encourage you and guide you along the way.

Once you have birthed your baby, your body goes on to expel the placenta or 'afterbirth'. To encourage this, we ask for your consent to administer a Syntocinon injection to help your placenta to separate and control bleeding. You may experience the sensation of pressure as you pass the placenta.

Occasionally the baby may need to be delivered by vacuum, forceps or by Caesarean Section. If any of these methods of delivery are indicated the doctor and midwife will support you and provide you with all the necessary information. If you are planning for a Vaginal Birth After having had a Caesarean section previously (**VBAC**), you will be supported by your doctor and midwife.

You will be supported to hold your baby in skin-to-skin contact immediately after birth for at least one hour. This will keep your baby warm and calm. After a little rest on your chest, your baby will start to look for your breast and feed naturally. Your midwife will support you to breastfeed your baby. You and your baby will remain in skin-to-skin contact on transfer to the postnatal ward.

Occasionally, babies may need to go to the Special Care Baby Unit (SCBU) for observation. We will keep you informed and facilitate you to be with your baby and encourage skin to skin contact and feeding as soon as possible.

EARLY SKIN TO SKIN CONTACT WITH YOUR BABY IS ENCOURAGED BECAUSE:

- ✓ Your baby is reassured when they hear your heart beat and voice.
- ✓ Your baby stays warm with the heat from your body.
- ✓ Skin contact helps your baby to regulate his heartbeat and breathing.
- ✓ You can touch and stroke your baby and get to know him/her.
- ✓ Breastfeeding gets off to a good start when baby can take the time to attach to your breast.
- ✓ Your baby's contact with your breast helps your womb to contract reducing the risk of bleeding.
- ✓ You worry less when you can see your baby is safe with you.
- ✓ Skin to skin contact is encouraged for all mothers and babies.

If you or your baby are unwell after birth, you can start skin to skin contact when you are both ready. Meanwhile your partner can do skin-to-skin contact with baby. This close contact can be used to settle your baby at any time.

Some babies may want to suck immediately; however other babies may take an hour or more. During this time, baby may nuzzle or lick the breast or just rest on your chest. Your baby can be examined while he is lying on your tummy, calm and quiet. *(Adapted from B.F.H.I Link Ireland)*

INFORMED CHOICE - BREASTFEEDING V FORMULA

Breastfeeding proven advantages

Breast milk is for human babies. It has been used for thousands of years. It cannot be duplicated.

Breast milk contains:

- ✓ a blend of ingredients in the right amounts tailored for your baby.
- ✓ factors which help your baby absorb nutrients which make him/her grow.
- ✓ immune factors which help protect your baby from disease now and into adulthood

Breast Milk:

- ✓ changes to meet your baby's needs as they grow.
- ✓ is very suited to your baby's delicate digestive system.
- ✓ helps develop the gut of a premature baby and reduces the risk of serious disease.

When you breastfeed you protect your baby against:

- ✓ ear infections.
- ✓ chest infections and wheezing.
- ✓ kidney infections.
- ✓ vomiting, diarrhoea and tummy upsets.

When you breastfeed you lower your baby's risk of:

- ✓ childhood diabetes.
 - ✓ asthma and eczema in childhood.
 - ✓ obesity in childhood and later life.
 - ✓ promote better mouth and teeth formation.
-

When you breastfeed you protect yourself against:

- ✓ pre-menopausal breast cancer.
- ✓ ovarian cancer.
- ✓ brittle bone disease in later life.

Breastfeeding helps you to return sooner to your pre-pregnancy figure by burning an extra 300 - 500 calories daily.

Breastfeeding is convenient because:

- ✓ no preparation is needed with breastfeeding.
- ✓ care and accuracy is essential when making bottle-feeds.
- ✓ travelling is much easier when you are breastfeeding your baby.

Breastfeeding is economical:

- ✓ Breastfeeding costs nothing.
- ✓ A healthier family means less health care costs.

Possible challenges of breastfeeding

- ✓ The early days are a learning time for you and can be overwhelming to learn new skills.
- ✓ Your baby may feed often in the first few weeks to increase your milk supply.
- ✓ Some mothers may feel uncomfortable feeding in company until they gain confidence. (Adapted from B.F.H.I Link Ireland)

BREASTFEEDING SUPPORT GROUPS

There are many active Branches of La Leche League and Cuidiú in the Midlands which are run by trained volunteers. Breastfeeding mothers and their babies attend these meetings, and expecting mothers are also welcome.

For breastfeeding assistance and support contact:

Maternity Department 044 - 9394440

Regina 087 7797058

Sonya 085 7192770 (Cuidiú)

Catriona 044 9343377 (Cuidiú) <https://www.facebook.com/cuidiumullingar>

Sharon 087 6402568

Georgina 044 9341227 / 087 3157478 / Lucy 086 0688035 (La Leche League)

Caroline 057 9355061 (La Leche League Leader, Tullamore)

* See page 26 for some useful website links

You may also contact your PHN, Practice Nurse or GP.

WHAT IS FORMULA?

Formula is artificial baby milk, made from a mixture including cow's milk and vegetable proteins, oils from fish, animals and plants, with various sugars and starches and added trace nutrients. All infant formula sold in Ireland must meet government standard, so no company can claim their formula is best.

Possible advantages of artificial feeding

- ✓ Other people can prepare formula and feed your baby.
- ✓ Your baby may feed less often as it takes longer to digest formula.

Disadvantages of formula feeding

- ✓ **Digestion:** Some babies may be unsettled if they find formula hard to digest.
- ✓ **Preparation & storage:** Powdered infant formula is not sterile. It may contain bacteria that can make your baby sick. You can reduce this risk by preparing and storing infant formula safely as outlined in the booklet "How to prepare your baby's bottle feed" which is available on the postnatal ward.
- ✓ **Cost:** It can cost up to €600 to feed a baby formula for the first six months and there is a greater chance of having more visits to your G.P.
(Adapted from B.F.H.I Link Ireland)

If you decide to feed your baby formula the Midwives and Nurses will assist and support you to do this. You will be shown how to prepare a feed so you can do this safely at home.

Further information can be obtained from www.safefood.eu

HAND HYGIENE

Attention to hand hygiene is very important when caring for your baby. Hands should be washed properly using soap and water and dried thoroughly. Alcohol gel provided in hospital may be used on visibly clean hands.

Hand hygiene must always be carried out:

- ✓ Before preparing feeds.
 - ✓ Before handling baby.
 - ✓ After nappy changing.
 - ✓ At home after handling pets.
-

ROOMING-IN WITH YOUR BABY

Well mothers and babies stay together at all times during their hospital stay. This is called rooming-in and is good because:

- ✓ You will get to know your baby quicker.
- ✓ You will learn how to care for your baby and help is available at your bedside from the staff.
- ✓ You will be more confident going home having learned your baby's night-time needs.
- ✓ Breastfeeding is easier when your baby is close to you.
- ✓ Your baby will cry less as you can quickly respond to his needs.
- ✓ You will worry less knowing your baby is safe beside you.
- ✓ Your baby is less likely to get infections from other people when he/she is being cared for by you at your bedside. *(Adapted from B.F.H.I Link Ireland)*

VITAMIN D AND YOUR BABY

What is Vitamin D?

Vitamin D is important because it helps our bodies use calcium to build and maintain strong teeth and bones. Children (and adults) in Ireland have low levels of vitamin D which can lead to weak bones.

Vitamin D is known as the "Sunshine Vitamin" because our bodies can make vitamin D from the sun. When sunlight hits our skin, the body uses the ultra-violet B (UVB) sun rays to make vitamin D. However, it is not possible for babies to safely get the vitamin D they need from the sun. To ensure that ALL babies get enough vitamin D they should be given 5 micrograms (5µg) of vitamin D3 every day from birth to 12 months, whether breastfed, formula fed or taking solid foods. There are a number of suitable infant vitamin D3 products available to buy in Ireland. These provide the correct kind of vitamin D3. A list of these products can be found on www.hse.ie/go/vitaminD

BABY'S EXAMINATION

All newborn babies are examined by a paediatric doctor usually at 3 days old, on discharge from hospital and at any time if required.

Every baby is checked for Development Dysplasia of the Hips (DDH) also known as 'Click Hip' prior to discharge from hospital.

Remember to tell the doctor about any family history of illness or disorders when your baby is being examined.

THE NATIONAL UNIVERSAL NEWBORN HEARING SCREENING PROGRAMME (UNHSP)

The Newborn hearing screening service is offered to all babies in all maternity hospitals in Ireland before discharge from hospital.

This screening test uses quick and simple methods to check the hearing of all newborn babies. One to two babies in every 1,000 are born with a hearing loss in one or both ears. This hearing screening test will allow those babies who may have a hearing loss to be identified early. Early identification is known to be important for the development of the child. Parents will be provided with information and support at an early stage. This screening test takes place on day of discharge from the hospital. It does not hurt the baby. It is completed at the bedside in your presence while you baby is asleep. The test takes anything from a few seconds to 2 minutes to complete on each ear. You will receive an information leaflet on the day the screening test is performed to help explain how the test works. The screener will be happy to answer any questions you may have regarding the screening.

For further information please visit

www.hse.ie/eng/health/child/newbornscreening/newbornhearingscreening

DRY CORD CARE

Your newborn baby's cord stump usually falls off within 2 weeks of birth. First it must dry, harden & darken. Treat it gently, ensure it remains outside of the nappy. It is not necessary to clean it unless it becomes soiled. If it is soiled or appears sticky, you may use cool boiled water and cotton wool to clean around the base of the cord and dry it also. Resist the temptation to pull at the stump, even if it is hanging off, it will separate by itself. If redness appears on the surrounding skin, or the cord becomes moist with any odour it is essential to have it checked by your doctor, midwife or Public Health Nurse.

NEWBORN BLOODSPOT SCREENING

(Heel Prick Test) www.hse.ie/newbornscreening

ALL babies between 72 and 120 hours of age are checked for certain Metabolic disorders. Metabolism is the process that breaks down the food you eat to make energy and build cells. A Metabolic disorder disrupts your body's ability to do this. Arrangements are made before you go home to have this test done by your Public Health Nurse or in some circumstances you may need to return to the hospital.

INFANT IMMUNISATION PROGRAMME

You are asked to attend your GP/Health centre to commence your baby's immunization programme. The first vaccines are given at 2 months of age. The Public Health Nurse (PHN) will provide you with further information on the immunisations. Please visit www.hse.ie/eng/health/immunisation/pubinfo/

REGISTRATION OF BIRTHS

Your baby must be registered within 12 months from their date of birth.

However, in order to be automatically registered for Child Benefit Allowance you must register your baby within 90 days of the baby's birth. Birth registration is not done in the hospital. You can register your baby's birth at your nearest Births, Deaths & Marriages Registration Office. Once registered, you will receive your baby's birth certificate and with this you can apply for Children's allowance, baby's passport, baptism, etc.

A PPS number is necessary in order to register your baby's birth.

Photo ID must be produced i.e. Passport, Driving Licence.

You are asked to submit an English version of a Marriage certificate or if unmarried, both parents may present to sign the register.

In the case of Single, Separated or Divorced parents please contact your nearest office to clarify the necessary documentation and opening hours. www.hse.ie

These offices are located in:

LONGFORD Health Centre	43 3332226 / 3332227
MULLINGAR Primary Care Centre	044 9353706 / 9353707
NAVAN , Trim Road, Navan	046 9097833 / 9097834
NAAS Monread Office & Leisure Complex	045 887660
PORTLAOISE Health Centre	057 8692800
ROSCOMMON Government Buildings	0906 637507 / 637508
TULLAMORE The Lodge(Beside MIDOC) Midlands Regional Hospital Tullamore	057 9315957 / 9315958

CARING FOR YOURSELF

Every day during your post natal stay in hospital you will be examined by a midwife. This is to:

- ✓ Ensure that your body is gradually returning to normal following the birth (this can take some time).
- ✓ Ensure that baby is doing well.
- ✓ Answer any queries that you may have.

There are regular information talks given on the postnatal ward. We encourage you and your partner to attend. This information will help you when caring for yourself and your baby at home and adapting to parenthood. There is also a bathing demonstration for your baby. You are encouraged to bathe your baby in hospital to ensure that you will have the confidence to do so at home and your Midwife will observe and assist you with this.

REST

Try to get as much rest as possible. Sleep whenever baby sleeps. Aim to keep visitors to a minimum and accept offers of help.

VISITING TIMES

Visiting times are restricted to allow you to receive adequate **REST** while in Hospital.

1pm - 4pm (Rest Time for mothers)	Strictly NO visiting during this time.
9am - 1pm	Spouses/Partners ONLY allowed to visit
4pm - 6.30pm	Spouses/Partners ONLY allowed to visit
6.30pm - 8.30pm	Partner & Grandparents ONLY allowed to visit
9am - 1pm & 4pm - 8.30pm	Only mothers OWN children are allowed to visit. Those children must be kept supervised by an adult at all times.

MOBILE PHONES Mobile phones must be turned off whilst mothers rest:
1pm - 4pm and from 10pm – 8am.

CARE OF YOUR PERINEUM & CESAREAN SECTION WOUND SITE

Good hygiene is essential to prevent infection. Avoid any perfumed products around the perineal area or your Caesarean Section wound. We recommend you do not use any bath additives when you bathe.

Take note of any bleeding, redness or foul smelling discharge around your wound, this could be a sign of a wound infection.

Change your sanitary towels frequently. If you notice any offensive smell from a wound or heavy bleeding, this could be a sign of infection. If you have any such concerns, contact your doctor or hospital immediately.

POSTNATAL EXERCISES

Information on postnatal exercises is given by the Physiotherapists. This information is given on a one to one basis and is available Monday—Friday (excluding bank holidays). It is important for you to continue these exercises for 6 weeks after your baby's birth. If you have any specific problems e.g. urinary incontinence or back pain, please ask to speak to the physiotherapist during your hospital stay [or call the Physiotherapy Department: 044 9394654](tel:0449394654)

FAMILY PLANNING

Advice is available on both natural and artificial methods of contraception and is given to you before you are discharged home from hospital.

MEAL TIMES (8.30AM/12.30PM/4.30PM)

You are asked to ensure that your bedside curtains are opened back fully and your bed table is clear in order to receive your meal tray safely and on time.

SETTLING IN AT HOME

It is important you have adequate rest, do accept help with household chores. Your Public Health Nurse will call at your house soon after discharge from hospital. Your Public Health Nurse can be contacted at your local Health Centre from 9.30 — 10.30am Monday to Friday.

POSTNATAL CHECK UP FOR MOTHER & BABY

All mothers attend their own GP for check-up at 6 weeks. All babies must attend their GP for check-up at 2 weeks and 6 weeks of age.

N. B. If you do not intend to stay at your home address on discharge from hospital, please inform the Hospital staff where you will be during those early weeks.

USEFUL WEBSITE LINKS

- ✓ www.mychild.ie HSE website for all you pregnancy/baby/toddler needs
 - ✓ www.hse.ie Useful website with healthcare content
 - ✓ www.nice.org.uk Obstetric/Maternity care guidelines
 - ✓ www.hse.ie/eng/health/immunisation/pubinfo/ Vaccinations
 - ✓ www.nmh.ie Labour Hopscotch
 - ✓ www.quit.ie Stop Smoking information
 - ✓ www.dentalcareireland.ie Dental Hygiene
 - ✓ www.healthpromotion.ie Smoking/Diabetes/Mental Health/Breastfeeding
 - ✓ www.breastfeeding.ie Breastfeeding support and troubleshooting
 - ✓ www.cuidiu-ict.ie Breastfeeding groups
 - ✓ www.nbc.ca Jack Newman, breastfeeding clips
 - ✓ www.friendsofbreastfeeding.ie Buddy supports in your area
 - ✓ www.breastfeeding-and-medication.co.uk
 - ✓ www.safefood.eu Formula preparation and food safety
 - ✓ www.spinningbabies.com Foetal positioning
 - ✓ www.birthresources.org Foetal positioning
 - ✓ www.babywearingireland.ie Sling library
 - ✓ www.whatsupmum.ie Information for pregnancy & parenthood
 - ✓ www.whatsupmum.ie/diabetes Gestational Diabetes
 - ✓ www.nurturecharity.org Positive Mental Health for women in pregnancy
 - ✓ www.imba.ie Multiple births-Twins, Triplets, etc.
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Baby's Name:

.....
Expected Date Of Arrival (Due Date): Actual Date Of Arrival (Date Of Birth):

.....
Mode Of Arrival (Type Of Delivery): Gender:

.....
Who Was Present:

.....
Midwife Present At Birth: Doctor(S) Present At Birth (If Applicable):

On Seeing Baby, Our First Thoughts Were:

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.....
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