



A SPECIAL PLACE  
**FAMILY  
BIRTHPLACE**



## THINGS TO KEEP IN MIND

- A telephone is located at your bedside, and calls can come directly to your room by using the seven-digit number found inside your receiver. Please encourage your callers to use this number instead of going through the hospital switchboard. If you do not want calls, please dial “0” and ask the operator to hold your calls. Callers may then leave a message for you at the nursing station or call again at another time.
- To guard against infection for you and your new baby, we encourage you not to put any items that have been on the floor on your bedside stand or over-bed tray. A closet in your room will hold personal items such as clothing and suitcases. Your bedside stand has drawers for personal items. Please do not set items on the window ledge.
- Each room contains a sink, toilet area, and shower. You may take a shower at your convenience.
- If you leave your room for any reason, do not leave your baby unattended. You may call one of our nurses for assistance.
- If you have an episiotomy, you will be encourage to take a sitz bath to cleanse and improve healing of your perineum. Your nurse will instruct you on its use. Ask us if you have questions. You are encouraged to take your sitz bath equipment home with you to continue treatment twice a day until healing is complete.
- With Room Service, you can make your own meal selections. The number and ordering times are on the special menu you will receive. For an additional charge, your guest may order from this menu, too. We especially encourage weekend visitors to order from the special menu, as the cafeteria is closed.
- During your stay, you will also be treated to a complimentary celebration dinner for two. Call Room Service to make arrangements.
- Family and friends are invited to visit our Cafeteria on the Main Level. Hours vary, but an adjacent vending room area is open 24 hours a day.
- Please be aware that we have male ambassadors and laundry personnel who may come to your room to provide services. These personnel will knock on your door and identify themselves before gaining your permission to enter your room.

## McLAREN NORTHERN MICHIGAN FAMILY BIRTHPLACE

At McLaren Northern Michigan, we want to make sure your birthing experience is as meaningful as possible. This booklet has been prepared to help you understand what to expect when labor begins and to explain the types of obstetrical services and care available to you at the hospital.

### FAMILY BIRTHPLACE PHONE GUIDE

If you need medical assistance, or have questions about your pregnancy, please contact your physician. If calling after office hours, your physician’s answering machine will give you further directions.

- McLaren Northern Michigan Physician After Hours ..... (231) 487-4000
- Family BirthPlace..... (231) 487-4226
- Childbirth Education Office.....(231) 487-4762
- Lactation Line ..... (231) 487-7195

### INSURANCE COVERAGE

We suggest you understand your insurance company coverage ahead of time. If you have questions about your insurance coverage, please call (800) 625-2736. If you would like to set up pre-pay options, you may call (800) 591-8707. For price estimates, explanations of billing and payment options, visit our website at [mclaren.org/main/carepricer-estimator](http://mclaren.org/main/carepricer-estimator).

You are also encouraged to contact a Patient Accounts Representative before your delivery to discuss payment of hospital charges. If your insurance coverage requires a deductible, or will not pay for a portion of your care, you may wish to begin paying your bill in advance of delivery to decrease your balance, making such expenses easier to manage.

Should your insurance coverage change at any time during your pregnancy, please advise our staff in the Patient Access Department.

### CHILDBIRTH EDUCATION CLASSES

McLaren Northern Michigan offers a comprehensive Childbirth Education Program to help you prepare for pregnancy, childbirth, newborn care, postpartum, and early parenting years. Classes are specially designed to meet your needs and the schedule offers a wide variety of options. Expectant parents are strongly encouraged to take these classes.

All Childbirth Education classes are taught by McLaren Northern Michigan Certified Professional Childbirth Educators. Taking these classes will provide you with information, skills, and insight into your birthing options, allowing you to make informed choices that are best for you and your baby.

### PRE-BIRTH HOSPITAL APPOINTMENT

All mothers (even if you’ve had a baby) planning to give birth at McLaren Northern Michigan are asked to have a 40-45 minute appointment by phone or in person. You will meet with a nurse to fill out necessary paperwork, review educational needs, discuss your birth plan, and tour the OB area if desired. A nurse will call you between 32-34 weeks to schedule your appointment.

- Childbirth Education Office.....(231) 487-4762

## WHAT TO PACK

During your stay at McLaren Northern Michigan, we encourage you to bring a bathrobe, slippers, personal toiletries, nursing bras, and clothing for your baby to wear home.

If you plan to breastfeed your baby, we suggest bringing at least two nursing bras. You may bring your own tops and robe for comfort, or we will be happy to provide them for you. We recommend breastfeeding mothers bring tops or robes that open in the front.

## WHEN LABOR BEGINS

Labor can start in several ways. Most often, labor begins with contractions of the uterus, which soon become strong enough to be uncomfortable, regular intervals, lasting 5-10 minutes. These contractions are felt most in the lower abdomen and may radiate to the back, becoming stronger and more frequent as time passes. During false labor, or pre-labor, contractions remain irregular, stopping and starting, and are usually felt as a tightening in the upper abdomen.

The membrane (bag of water) may break at any time before or after the onset of labor contractions, and you may lose varying amounts of fluid. Occasionally, there is some bloody mucus “show” that may be a clue to expect further development but does not require immediate attention.

You should call your health care provider if you experience any of the following:

- Regular contractions, 5-7 minutes apart
- Ruptured membrane (bag of water breaks)
- Bright red bleeding, like a period
- Any other concerns

Your physician may discuss the possibility of inducing labor. Inducing labor (also called labor induction) is when your physician gives you medicines or uses other methods to start your labor. He or she may recommend inducing labor if you have medical problems that could harm you or your baby, or if your pregnancy lasts longer than 42 weeks. For some women, inducing labor is the best way to keep mom and baby healthy.

If your pregnancy is healthy, it's best to let labor begin on its own. The American Academy of Pediatrics (AAP) and the Association of Women's Health, Obstetrics and Neonatal Nurses (AWHONN) recommend that elective deliveries prior to 39 weeks gestation, without a medical indication, should be avoided. The March of Dimes recommends that labor be induced only when the health of the woman or baby is at risk. This gives your baby's lungs and brain all the time needed to fully grow and develop before birth.

Your physician will provide you with information and answer your questions regarding the benefits and risks of inducing labor.

Residents of Emmet or Charlevoix counties will also receive a form to complete for the *Petoskey News-Review* to announce the birth of the child and the names of the proud parents, grandparents, and siblings. The Health Unit Coordinator will submit the form to the newspaper on your behalf and the announcements should appear in the paper within a few days.

## VISITING HOURS

All visitors are determined by you. This is your time to recover, bond, and receive education on the care of yourself and your newborn during your short period of time with us. Please use discretion when inviting visitors to see you in the hospital. Welcome them to visit you once you are home. The Family BirthPlace is a secured (locked) unit. Visitor must push a button and be cleared to enter. If the waiting room becomes crowded with multiple patient visitors, some may be asked to wait in the main lobby. Under Fire Code and HIPAA regulations, visitors are not allowed to stand or sit in the hallway while waiting for a delivery.

**Visiting hours are 8 a.m. - 9 p.m.** One support person may stay with you 24 hours/day to assist with infant care and education. Two additional visitors will be allowed. Children, other than siblings, must be 12 years or older. Siblings/minors are not allowed to stay through the night. Please have arrangements made accordingly.

All visitors must be free of colds and infections. Hand washing or hand sanitizer must be used before handling the newborn. If you wish to limit visitors, please inform your nurse and let us know if Security may need to be notified.

Prior to discharge, you will be offered a referral for a Health Department visiting home nurse, who specializes in mother and baby care. You will be asked to complete a form and return it to your nurse before discharge. The nurse will then come to your home within 3-5 days after discharge and examine you and your baby, as well as assist you with any questions or concerns that you may have.

## SMOKING

For the health and safety of our patients, visitors, and colleagues, the use of tobacco products is prohibited on campus.

If you are a smoker, perhaps your stay with us will be a good time to think about stopping the cigarette habit. It is not healthy for your baby's small lungs to inhale cigarette smoke, it increases their risk for Sudden Infant Death Syndrome, and if you smoke often around your baby at home, you are not giving him/her the best possible start in life. McLaren Northern Michigan is a smoke-free campus. Let us know if we can assist in your effort to quit.

## HEPATITIS B

Hepatitis B is a contagious liver disease that results from infection with the hepatitis B virus. When first infected, a person can develop an “acute” infection, which can range in severity from a very mild illness with few or no symptoms to a serious condition requiring hospitalization. Acute hepatitis B refers to the first 6 months after someone is infected to the hepatitis B virus. Some people are able to fight the infection and clear the virus. For others, the infection remains and is “chronic,” or lifelong. Chronic hepatitis B refers to the infection that occurs when the hepatitis B virus remains in a person’s body. Over time, the infection can cause serious health problems.

It’s hard to imagine putting your newborn through the pain of a shot. But a little stick on the first day of life is an important first step to protecting your baby against deadly disease.

All babies should get the first shot of hepatitis B vaccine after birth. This shot acts as a safety net, reducing the risk of getting the disease from moms or family members who may not know they are infected with hepatitis B. When the mom has hepatitis B, in addition to the hepatitis B vaccine, the baby should also get the hepatitis B immune globulin (HBIG) within the first 12 hours of life. HBIG is a medicine that gives a baby’s body a “boost” or extra help to fight the virus as soon as he or she is born. The HBIG shot is only given to babies of mothers who have hepatitis B.

*Source: Center for Disease Control*

## FEEDING YOUR NEWBORN

It will be beneficial to begin breastfeeding in the recovery area. Breastfed babies usually need to eat every one-and-a-half to three hours, or 8-12 times every 24 hours. The nurse will help you each time until you feel comfortable. It will be helpful for you to take the Prenatal Breastfeeding class offered through Childbirth Education. This will provide you with information on the benefits of breastfeeding, as well as how to get started. The class will also discuss your dietary needs, how to know if the baby is getting enough milk, expressing milk, and more. It provides a wonderful opportunity for you to ask questions and learn about resources that can help you once you go home. You will also receive additional written material on breastfeeding during your stay. We have Certified Lactation Counselors who can help you with any breastfeeding concerns.

If your baby is going to be bottle-fed, you may give the baby the first feeding of formula within four hours of birth. Bubble or burp your baby after each one-half to one ounce is taken. We suggest that babies be fed “on cue,” that is, when they are hungry (and before they are “too” hungry). Bottle fed babies should be fed every two to four hours, particularly during the first few weeks of life, but keep in mind that schedules may vary between babies and even day-to-day as your infant adjusts to a new world.

## CELEBRATING YOUR BABY

After your baby is born, you will be given a birth certificate form to fill out. The Health Unit Coordinator will type it up, have you check it and sign it, then send the information to the State of Michigan. If you are choosing to establish paternity on the birth certificate, the father of the baby needs to bring in a picture ID when signing the paternity papers. The birth certificate should be available for pick up at the Emmet County Clerk’s Office roughly six weeks after you go home. Your baby’s Social Security card will come by mail, usually within two weeks.

## AT THE HOSPITAL

Check in through the McLaren Northern Michigan Emergency Department. You will be escorted to the Family BirthPlace and assisted to the labor area. You will be evaluated there.

If you are having a planned Cesarean delivery, please come directly to the Family BirthPlace at your scheduled arrival time.

In the labor and delivery area, your assigned nurse will take several steps to evaluate you, including taking your temperature, pulse, respirations, and blood pressure, and listening to your baby’s heartbeat. The physician or nurse may do an internal examination to determine your progress in labor. You will also be placed on an internal or external fetal heart monitor when you are admitted and as your labor progresses.

Your physician will be informed of your arrival and stage of labor and will check in on you as your labor progresses. Upon arrival, please introduce your labor nurse to your support person. We encourage you to have your husband and/or support person with you throughout labor, birth, and the postpartum stay. If you have children who are attending the birth, they must be prepared in advance and have their own support person. At any time, you, the physician, or labor/delivery nurse may refuse entrance to visitors or ask them to leave.

Throughout your labor, a member of our nursing staff will be nearby to help you with comfort techniques and suggestions. We will provide encouragement as we monitor you and your baby. Please don’t hesitate to ask questions.

When you arrive in the labor area, you will be shown the call button near your bed should you need assistance when a nurse is not in the room with you. There is a phone and a television. Your labor nurse and/or physician will advise you if you are able to move around, go to the bathroom, eat, or drink.

You will periodically be given a vaginal examination during labor to check for progress. Your physician will be informed of your status if he/she is not present.

## CESAREAN BIRTH

For a variety of reasons, it may be necessary for your baby to be delivery surgically. In a Cesarean birth, the baby is born through an incision in the abdominal and uterine walls. This method of birth is relatively safe, although you will be anesthetized and experience a longer recovery period. In many cases, you and your physician will know ahead of time that a Cesarean is necessary and the birth will be scheduled in advance.

However, it may be determined during the labor process that a Cesarean is necessary. You may wish to discuss this process with your physician in advance, so you know what to expect.

After a Cesarean birth, you will be moved to the recovery area in the Family BirthPlace for about an hour. During that time, you may have your baby with you. A nurse will be there to help.

## YOUR BIRTHING ROOM/VAGINAL BIRTH

During vaginal birth, you will be laboring, delivering, and recovering in the same room. Each birthing room is decorated much like a bedroom in your home and has a special birthing bed to help you during labor and delivery. The room is large and offers a great deal of space to move to different positions during labor. Birthing balls and the “peanut” are available to aid mother’s comfort and assist in the birth of the baby. Each

room has a recliner, glider rocker, hot tub, and shower. The lighting is inset in the ceiling and can be dimmed for a comfortable atmosphere.

Each room has an Infant Care Station, which has an infant warmer. The entire room has a comfortable environment. These rooms also include a complete supply of any needed medical equipment. Both you and your support people may share in the joy of seeing your baby born by looking into a mirror located at the end of the bed, if you desire.

## **RELIEF AND RECOVERY**

Immediately following birth, your new baby will be placed on your abdomen while the umbilical cord is clamped and cut. Keeping baby “skin-to-skin” until at least as long as the first feeding is highly recommended. This helps regulate baby’s temperature, calms baby, helps regulate blood sugar levels, and helps with breastfeeding. Bracelets bearing your baby’s name, date, time of delivery, and tag number (for identification) will be placed on your baby’s and your wrists.

It is the standard of care that antibiotic ointment be placed in your baby’s eyes within one hour of birth to prevent infection. A Vitamin K shot is also administered to help the baby’s blood coagulate. This can be done at your bedside, so you and your baby are not temporarily separated.

Your baby will be weighed and measured during the first hour after birth at the Infant Care Station in your room. In cases where there are complications, or an infant needs special care, he or she may be taken to the McLaren Northern Michigan Nursery.

During a recovery period of one hour, or until your condition is stabilized, your pulse, blood pressure, uterus, and bleeding will be checked frequently. When your condition is stable, you will be moved to your postpartum room. Not only is this time for recovery, but it’s also an opportunity to begin preparing for your new life with your baby.

A “HUGS” infant security bracelet will be secured to your baby’s ankle. The “HUGS” bracelet sets off an alarm and locks all exit doors if an attempt is made to remove the infant from the Family BirthPlace.

Please take advantage of our knowledge and experience to help make your transition from the hospital to home as smooth as possible. You are encouraged to be involved as much as possible with your baby’s care and with your own postpartum recovery. We want you to spend time with your baby, so you can get to know his or her needs and ask us questions while you are here, whether you want to know more about the proper position for breastfeeding, or how to bathe your newborn.

## **MOTHER AND BABY CARE**

Your baby may remain with you, in your room, throughout your stay. This will allow you and your support people the time to get to know your baby’s feeding cues and to learn all about your baby while still being supervised by the nursing staff. Your baby will be given a special crib, which will be stocked with baby supplies. You and your baby will have the same nurse so that he or she can work with both of you with limited interruptions. For safety reasons, please do not walk in the hall carrying your baby.

The pediatric hospitalist will examine your baby daily. If you have a boy and plan to have him circumcised, it most likely will be performed during your stay. We will let you know when the procedure will take place.

Your baby will receive a hearing test sometime prior to discharge from the Hospital. The screening test is painless and takes just a few minutes. In fact, most babies sleep through the entire procedure. It is important to identify babies who have a hearing loss, so they can receive help with communication development at a young age.

The Michigan Department of Community Health requires newborn screening (NBS) on every baby born in Michigan to detect rare disorders before there is any sign of an illness. These disorders are clinically invisible but can cause serious problems if not detected early. A simple blood test at 24 hours of age assures early detection and treatment if needed.

## **MICHIGAN BIOTRUST FOR HEALTH**

The Michigan BioTrust for Health (BioTrust) is a program that oversees the research use of blood spots that may remain after newborn screening is completed. 5-6 drops of blood, called dried blood spots (DBS) will be collected from your baby’s heel for newborn screening (NBS), which tests babies in Michigan for rare disorders. You will be asked if you are willing to grant permission to make your child’s DBS from their newborn screening available for health research once screening is complete. It is your choice to allow your child’s leftover blood spots to be used in research. If you agree, all patient identifying markers are removed from the DBS once your baby’s testing is complete to protect your privacy. Your decision will not affect your baby’s NBS – only whether the leftover DBS can be used in future health research. If you decline to participate in the BioTrust, your baby’s leftover DBS will be destroyed. Additional information about the BioTrust is available at [Michigan.gov/BioTrust](http://Michigan.gov/BioTrust).