

Going Home

Caring for your Newborn



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Congratulations, on the birth of your beautiful baby/babies.

We know that this may have been a difficult time for you, during your baby's stay in the neonatal unit. The aim of this booklet is to give you information on how to care for your baby at home, now that your baby is nearing the end of their journey in the neonatal unit.

This booklet is intended as a reference guide, and should not replace discussing your baby's unique care requirements with nursing and medical staff. Not everything described in this book will apply to your baby.

Taking your baby home from hospital can be both an exciting and nervous time. However, please be reassured that we will only send your baby home once they have met strict discharge criteria. We hope that by providing you with this information, we can give you confidence in your ability to care for your baby at home. We endeavour to do our best to support your journey to home so that you can enjoy the experience of taking your baby home.



Breastfeeding

During your baby's time in the neonatal unit you will have become familiar with your baby's feeding pattern. On discharge, breastfed babies will be feeding 8-12 times in a 24 hour period. Some of these feeds can be in a cluster, often in the evening time. Aim for feeds to be 20 – 40 minutes long. Sitting in a comfortable position, offer both breasts, baby occasionally may feed from both. The baby should feed approximately every 2 to 3 hours with no more than one longer interval of up to 5 hours at night (i.e. 8 breastfeeds at least each 24 hours).

Often a period of skin-to-skin contact with your baby will help them to become interested in a feed. A good latch at the breast and a proper position will ensure that your baby gets the most from each feed.

To ensure your baby has an adequate intake of breast milk observe your baby's nappies for sufficient wet and dirty nappies. 5-6 wet nappies and 1-2 dirty nappies are normal in 24 hours. If your baby is not feeding as well as before, help from your public health nurse, GP, or hospital should be sought promptly.

There is breastfeeding support available to mothers after discharge from hospital from the Breastfeeding Helpline in CUMH 087-6623874 (Monday-Friday) and from your public health nurse.

For more information on all aspects of breastfeeding, including troubleshooting and support please refer to:

www.mychild.ie

www.breastfeeding.ie

Ask Our Breastfeeding expert

Facebook pages of voluntary breastfeeding support groups Cuidiú or La Leche League.



Breastfeeding

Often if your baby has been born premature or very unwell, mums may still be expressing and offering top-up feeds of expressed breast-milk or formula to ensure an adequate intake of milk and good weight gain. If this is the case when your baby is being discharged then the neonatal nurses and breastfeeding support team will advise you on a feeding regimen depending on your babies needs. If you have been expressing milk while your baby is in the neo-natal unit and you wish to continue expressing after discharge then you will need to source a breast pump prior to your baby's discharge. If you have availed of a breast pump loan from the neonatal unit then this pump will have to be returned prior to your baby's discharge.



<https://rental.medicare.ie/> for Medela Symphony breast pump rental.



<https://www.breastisbest.ie/> for Ardo breast pump rental.



<https://www.oflynnmedical.com/rental/breast-pump-rental/> for Ameda Elite breast pump rental.



Bottle feeding your baby

Sit in a comfortable position. Always hold your baby in your arms and the bottle in your hand. Never prop or lean the bottle or your baby against a pillow or another support. This can cause your baby to choke. If you have been advised of a specific position or method for bottle feeding your baby, depending on their needs, while in the neonatal unit then continue with this as advised by the staff. Make the most of this time to bond with your baby, consider opening your shirt and doing skin-to-skin contact with your baby and look into your baby's eyes and your baby will look back at you. Take it slowly and enjoy the cuddles. If warming a bottle prepared in advance, warm it by;

1. Placing it in a bowl of warm water, making sure that the level of the water is below the neck of the bottle.
2. Using a bottle warmer.
3. **NEVER** use a microwave to warm your baby's bottle.



Do not warm it for more than 15 minutes and ensure to check bottle temperature prior to feeding your baby. Check the temperature by shaking the bottle and placing a drop of liquid on the inside of your wrist, it should feel warm and not hot.

Winding your baby

If necessary, while breast or bottle feeding, you may need to wind your baby to help get rid of swallowed air. Common signs of trapped wind include squirming or crying during a feed or looking uncomfortable and in pain if laid down after feeds.

At the end of a feed, sit and hold your baby upright and gently rub or pat their back for a while to bring up any wind.

For more advice please scan the QR code.



To prepare formula milk correctly, you will need:

- A clean work surface
- At least 6 bottles, lids, discs and teats
- Formula milk
- A kettle
- A bottle brush and a small teat brush
- Sterilising equipment like a chemical, steam or microwave kit
- Tongs to help you grip the equipment while sterilising

You can use a chemical or steam steriliser to sterilise equipment. If necessary you can also sterilise equipment by placing it into a pot of boiling water and boil the items for 3 minutes. A steam steriliser is the best.

The Food Safety Authority of Ireland (FSAI) does not recommend the use of formula preparation machines or automatic machines. There is not enough research to show these machines are safe and effective for preparing your baby's bottle.

Bottled water

You may need to use bottled water to make up feeds;

- If you have a water softener system.
- Have been told to boil all tap water before use.
- Are on holiday abroad.

Use still water only and always boil the bottled water before using it to make up feeds. Avoid using bottled water labelled as 'natural mineral water' as it can have higher levels of sodium and other minerals.

Preparing your baby's bottle

1. Empty your kettle and fill it with 1 litre of freshly-drawn cold tap water and boil. Alternatively, boil 1 litre of water in a clean pan. **Do not use tap water that has a water softener system. It may contain too much sodium.**
2. Leave the boiled water to cool in the kettle or pan. Cool it for 30 minutes, but no longer. This will make sure that the water is not too hot, but also that it is no less than 70°C.
3. Clean the work surface well. Wash your hands with soap and warm water and dry them on a clean towel.
4. Read the instructions on the formula's label carefully to find out how much water and powder you need. A usual guide is for each 30mls (each ounce) of water, you need one level scoop of formula powder.
5. Pour the correct amount of water into a sterilised bottle. Water that is 70°C is still hot enough to scald, so be careful. Always add the water before you add the powdered formula.
6. Add the exact amount of formula to the boiled water using the clean scoop provided. Reseal the packaging to protect it from germs and moisture. Adding too much or too little formula could make your baby sick.
7. Screw the bottle lid tightly and shake well to mix the contents.
8. To cool the feed quickly, hold the bottle under cold running water or place it in a large bowl of cold water. Make sure that the cold water does not reach above the neck of the bottle.
9. To check the feed is not too hot, shake the bottle and place a drop of liquid on the inside of the wrist – it should feel luke- warm, not hot. Feed your baby.



10. Throw away any feed that your baby has not taken within two
11. hours. After a feed, clean and rinse the bottle and teat.

If making up feeds in advance, ensure to cool bottle quickly, as above and place bottles in the back of the fridge, use up any formula prepared in advance within 24 hours.

Vitamin D

Give your baby 5 micrograms of vitamin D3 as a supplement every day from birth to 12 months if they are:

- breastfed
- taking less than 300mls or 10 fluid oz (ounces) of infant formula a day



You do not need to give your baby a vitamin D supplement if they are fed more than 300mls or 10 fluid oz (ounces) of infant formula a day. This is because there has been an increase in the amount of vitamin D added to infant formula.

Use a supplement that contains vitamin D only. You don't need a prescription to buy vitamin D. Check the label on your vitamin D3 supplement for the number of drops or amount of liquid you need to give your baby. You may need to give your baby the supplement in a different way with each new brand. Give your baby the correct dose directly into the side of their mouth.



How much milk your baby needs

This table is a guide only. Talk to your public health nurse or GP if your baby is taking a lot less or a lot more expressed breastmilk or formula than the amounts in this table. If your baby has specific feed requirements, the staff in the neonatal unit will inform you of this prior to discharge.

Your baby's age	Number of feeds	Amount of formula feed per baby weight.
Birth - 3 months	8 feeds if feeding 3 hourly. 6 feeds if feeding 4 hourly.	150mls per kilogram (kg) in 24 hours. This total volume will then be divided by the number of feeds per day.

Preventing Infection

Hand washing is the number one defence for protecting your baby against infection.

1. Wet your hands with warm water and apply soap.
2. Rub your hands together palm to palm until the soap forms a lather.
3. Rub the back of one hand with your palm and fingers spread so you wash between fingers. Repeat with the other hand.
4. Interlock the top of your hands and rub your fingertips - this cleans your fingertips and knuckles.
5. Then finally grasp your thumb tightly and twist to make sure your thumbs are cleaned. Repeat with the other hand.
6. This should take at least 20 seconds. Rinse your hands under running water.
7. Dry your hands with a clean towel or paper towel.
If you have dry skin or a skin condition, apply moisturiser after washing your hands and at night.



Safe Sleep Guidelines

Cot death is also called sudden infant death syndrome (SIDS). It is the sudden and unexpected death of a baby who seems healthy, during sleep. Cot death can happen anywhere a baby is sleeping. Because the cause of cot death is not known, it cannot be completely prevented. But research has shown that you can take steps to significantly reduce the risk of cot death.

You can reduce the risk as follows:

- Always place your baby on their back to sleep in their own cot. Place their feet to the foot of the cot. Do this every time your baby goes to sleep or has a nap, both day and night.
- Do not smoke and keep your baby away from smoking.
- Never fall asleep in bed with your baby. Bed sharing or co-sleeping in the same bed can be dangerous. It can increase your baby's risk of suffocation, which can occur when your baby slips under the bed covers, rolls under an adult, gets trapped between the bed and the wall or falls out of the bed.
- Keep their head uncovered and don't use too many clothes.
- Use only 2-3 layers of cellular blankets or a sleeveless sleeping bag in the cot.
- Do not have pillows, cushions, sleep positioners or any other items in the cot.
- Make sure the room temperature is between 16°C to 20°C (degrees Celsius).
- Keep the cot in your room for the first 6 months.
- Other ways to reduce the risk include breastfeeding. Some research shows using a soother might also help.

Sleeping in a sitting position can make it difficult for your baby to breathe. Never leave your baby unsupervised in a sitting device. This includes a car seat, baby seat, sling, carrier or similar products. These sitting and carrying devices are not recommended for routine sleep in the home.

Safe Sleep Guidelines



Safe Sleep for Multiples

Only place multiples side-by-side in a cot in the early weeks, when they can't roll over or onto each other. Make sure they are not close enough to touch and potentially obstruct each other's breathing. There is no need to use any- thing else to divide the sleeping space, as these devices are not recommended because they can become potential hazards. It might be good to start sleeping them at opposite ends of their cot from the beginning - this means they'll both be in the 'feet to foot' position with their own bedding firmly tucked in.

Once any of your babies have learnt to roll, it might be practical to move them to their own sleep spaces. It is not advisable to place your twins or triplets in the same Moses basket, even when they are very small. This is to minimise the chance of them overheating, which is known to increase the chance of SIDS. Even with small babies a Moses basket is too small for more than one baby to sleep safely.

Sleep, play and tummy time for babies

Sleeping:

Place your baby on their back for sleep. Take care to turn the baby's head to the side (alternating sides) to prevent flattening of the back of the head. The use of cushions or pillows is not recommended for babies.

Play:

Active movement through play is very important even in the early stages. It is important for babies to experience different positions during wakeful supervised periods, for example, spending time on their tummies or on their sides. Little and often is the key to movement. Walkers, entertainment centres and jumparoos are not appropriate for your baby at any stage of their development. Babies should be spending active time in play throughout the day and tummy time is a lovely way to start this, it is also an important way for parents and children to bond together on the floor.



Sleep, play and tummy time for babies

Tummy time:

What do babies do on their tummies? Babies achieve better head control and stronger muscles in their shoulders, arms and necks – this will help with the development of their head and neck control.

Babies move from side to side on their tummies which helps them to learn to reach and crawl and will assist with development of their movement skills. Tummy time also helps to improve hand-eye coordination and better long term balance and coordination.

It also helps to prevent your baby from developing flat head or an asymmetrical head shape. Your baby should not have a hand preference, until they are about 2 years old and so it is very important to use both hands equally.

How to encourage tummy time?

The World Health Organisation (WHO) says infants just a few days old should get two or three tummy time play sessions per day, each lasting three to five minutes.

You can start tummy time from birth, initially placing the baby on your chest in a semi reclined position, holding the baby facing you. This is a great way to play with your baby as they have to lift their head to see your face, whilst also strengthening their neck muscles. Try to maintain eye contact with your baby while they are on their front with lots of communication and interaction.

Later, place mirrors or brightly coloured toys in front of the baby on the floor to encourage the baby to lift and turn their head.

Holding baby in a supported sitting position also aids the development of the muscles at the front of the neck. Please ensure to support the head when uncontrolled.

Child Safety

For advice on keeping your home safe for your baby including fire, water and pet safety, as well as child-proofing your home, check out:

<https://www2.hse.ie/wellbeing/babies-and-children/child-safety/>



Car Seats

You will need to bring your car seat to the neonatal unit on the day of discharge so that nursing staff can ensure that your baby is appropriately positioned and secured in their car seat. Ensure that you have familiarised yourself with how your car seat works prior to your baby being discharged and how to safely secure the seat in your car. For more advice on car seat safety, check out:

<https://www.rsa.ie/road-safety/road-users/passengers/children/child-seats>



Follow-Up

Your baby may need follow-up appointments after leaving the neonatal unit. These may be with the hospital clinic or specialist appointments. It is important that you attend these appointments so that your baby is receiving appropriate follow-up interventions as needed. These appointments will be arranged and details posted to your home address, please notify the hospital if you change address. A public health nurse will also visit you in your home.

If you cannot attend an appointment, please notify the appropriate clinic in good time so an alternative appointment can be arranged.

Vaccines

Vaccination is a safe and effective way to protect your baby against certain infectious diseases, which can cause serious illness or even death. When your child gets a vaccine, their body responds by making antibodies. The antibodies then stay in your child's body and protect them against the actual disease. As a parent, you might not like the fact that your baby has to get an injection. But remember, vaccinations are quick, safe, effective and protect your baby from disease. If you don't vaccinate your child, there is a chance they could become very ill, or even die. This can happen if they catch one of the diseases that the vaccines protect them from.

Your baby will receive vaccines at 2, 4, 6, 12 & 13 months. If your baby is discharged from the neonatal unit prior to this time then vaccines will be organised through your GP. If your baby is born prematurely then vaccines will continue based on your baby's actual age, and not their corrected age, meaning they will begin 2 months (60 days) from the date of your baby's birth. If your baby has received vaccines in hospital then you will receive documentation at discharge that will detail what vaccines your baby has received, so that you can continue on the schedule of vaccines with your GP.

It is important to protect your baby from viral and respiratory illnesses therefore, it is important that you and your family members, including children, aged 2-17, receive a flu vaccine. These are available from your GP.

Bathing Your Baby

Babies under 12 months are at greatest risk of drowning in the bath.

Never leave your baby alone in the bath. If you need to leave, bring your baby with you.

Adult supervision is necessary for your baby at all times. Always empty bathwater immediately after use. For advice on bathing technique check out:



Put the cold water in the basin or bath first. Then put the warm water in. Finally put cold water in again to make sure the taps are cool and won't burn your baby. The temperature should be about 36-37 degrees Celsius. Use a bath thermometer to test this, if you have one. Otherwise you can check the temperature of the bathwater with your elbow. Your hands are not heat-sensitive enough. Mix the water well to ensure there are no 'hot spots'.

You don't need to bathe your baby every day, although you can if it relaxes and soothes them. 2 or 3 baths a week is enough to keep your baby clean. Choose a time when they are not too hungry or tired. It is best not to bathe them directly after a feed. Make sure the room you are bathing in is warm. Close windows to prevent a draught.

To prevent your baby from getting cold, it is important for at least the first couple of months to wash the head and body separately. Begin by washing the face and hair first while your baby is wrapped in a towel, then carefully dry your baby's hair with a dry towel, before placing them in the bath. Always keep one hand supporting your baby in the bath, do not rely on bath seats or positioning aids to keep your baby safe. Always clean their eyes and face with clear water. Use a cotton pad for cleaning each eye. Clean from the nose outwards. Dry the eyes with a clean cotton pad. Clean the rest of the face, and behind the ears and neck. Dry them afterwards.

Place one hand under your baby's shoulders and hold the arm that is farthest away from your body. This supports their head and shoulders. Place the other hand under the bottom and hold the thigh farthest away from your body. Now lower the baby slowly and gently in the bath. Continue to support the head and shoulders with one hand while washing the rest of the body. Always clean from top to bottom, leaving the nappy area until last. Make sure to get in between all creases. Use a cotton pad for cleaning bottom and genitalia.

Make sure you use both hands to lift your baby out of the bath. Lay them flat on a towel, cover and dry them gently, paying special attention to dry all the creases. This is a good time to massage your baby. Massage can help them to relax and sleep well. Avoid using any oil or lotions until they are at least a month old.

If you are anxious about bathing your baby, you don't need to put them into the bath until you feel confident. Instead you can 'top and tail' them. This means washing:

- your baby's face and hands
- the folds or creases under the neck
- the folds and creases under arms
- the nappy area

It is important to ensure your baby receives a 'top and tail' wash daily, if not having daily baths.



For advice on further caring for your baby's skin check out:

<https://www2.hse.ie/babies-children/parenting-advice/caring-for-a-new-baby/your-babys-skin/>



Umbilical Cord Care

Your baby's umbilical cord stump will fall off in its own time, usually 5 to 15 days after birth. Until your baby's umbilical cord stump falls off:

- Wash your hands before and after you touch the cord
- Clean around the base of the cord if needed with cotton wool and cooled boiled water
- Keep the belly button area dry after you clean it
- Inspect the umbilical cord at every nappy change to make sure there is no redness there
- Fold your baby's nappy down, away from the stump
- Make sure that the nappy is not covering the cord

After the stump falls off, if you notice any bleeding or discharge from your baby's belly button, ask your midwife, public health nurse or GP for advice.

Get medical advice if there is any redness of the skin on your baby's stomach around the belly button. This may be a sign of infection.



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References/Useful Websites:

MyChild.ie

<https://www2.hse.ie/babies-children/parenting-advice/>



Breastfeeding.ie

<https://www2.hse.ie/babies-children/breastfeeding/>



Irish Neonatal Health Alliance

<https://www.inha.ie/>



Lullaby Trust

<https://www.lullabytrust.org.uk/safer-sleep-advice/>



BLISS

<https://www.bliss.org.uk/>



CUMH

<https://irelandsouthwid.cumh.hse.ie/>



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