



Patient Information

Welcome



Table of contents

Table of contents	3
What to bring at the time of your admission.....	4
For yourself	4
For your baby	4
PART 1: Your stay at the delivery ward	5
When should you come to the delivery ward?.....	5
How to get to the delivery room?.....	5
PART 2: Your stay at the maternity ward.....	6
Room selection.....	6
Daily schedule	6
Practical tips	7
Registration of birth	8
The days of and after delivery	9
Going home	17
Tips for at home	19
SIDS (Sudden Infant Death Syndrome or cot death) prevention	20
A safe sleeping environment.....	20
A safe sleeping position	20
A safe room temperature.....	20
A smoke-free environment	20
Medication	21
Who to contact if you have questions or problems?	22
Hospital telephone numbers.....	22
Paediatrician consultations.....	22
Emergencies	22
Self-employed midwives.....	22

What to bring at the time of your admission

- The mother's identity documents
- Marriage certificate or certificate of recognition
- Blood type and rubella card
- Prenatal booklet or GP pregnancy file



For yourself

- A comfortable nightgown or T-shirt to wear during labour
- Toiletries
- Towels and wash cloths
- Nightwear
- Slippers
- Sufficient quantity of underwear
- Bras (breastfeeding bra)
- Daytime clothing for day of discharge

4

For your baby

- Clothes (Pyjamas, rompers, socks, caps and bibs)
- Baby soap, baby oil
- Comb and brush
- Towels and wash cloths
- Upon discharge: Jacket, blanket, Approved baby Car seat

PART 1: Your stay at the delivery ward

When should you come to the delivery ward?

- Upon doctor's advice
- After referral by GP or midwife
- As soon as the time between contractions is down to 5 minutes
- If your water has broken or you are experiencing vaginal bleeding
- If you feel your baby moving less than usual
- If you are worried

If you are having any doubt or concern, you can always contact the delivery room midwife on telephone number 014 44 42 31.

Please remember to remove all piercings and nail polish before coming to the delivery room!

How to get to the delivery room?

During the day, between 07:00 and 22:00, you can ring the bell at the delivery ward entrance on the first floor of Campus Sint-Jozef.

5

At night, between 22:00 and 07:00, admission is taken care of by the urgent care unit mother and child at Campus Sint-Jozef.

In the delivery room, there is a strict no visitors policy. Only the future mother and **one** confidant are allowed in.

PART 2: Your stay at the maternity ward

Room selection

The maternity ward has several different types of rooms:

- double rooms
- single rooms without bath or shower
- single rooms with a bath/Shower
- Larger single rooms with a walk-in shower
- Luxury rooms: these are very spacious rooms with rooming in option for partners. Breakfast can be ordered the day before. This is not included in the price.

To know the exact prices, please contact the admissions desk. Please note that the amount on your invoice strongly depends on your **room choice**. All billing information can be found on our website www.azturnhout.be/kostprijen. (only in dutch)

You can take a virtual walk through the maternity department at www.azturnhout.be > onze diensten > materniteit. (only in dutch) This way you can take a look around our department.

Daily schedule

07:00 - 12:00	Midwifery care for mother and baby Paediatrician's visit Gynaecologist's visit Physiotherapist's visit Room maintenance
08:00 - 09:00	Breakfast
11:30 - 13:00	Hot lunch and coffee or tea
15:00 - 16:00	Midwifery care
16:30 - 18:00	Supper
18:00	Midwifery care

You can take a virtual tour of the maternity ward at:

www.azturnhout.be > onze diensten > materniteit.

Practical tips

Visiting hours

Partner and siblings: all day

Relatives: 16.00h – 19.00h

Kind & Gezin

They are available for information concerning infant development, wellbeing and immunization schedules as well as appointments at the well-baby clinic.

Postnatal physiotherapy

After a caesarean or, if so desired, after a vaginal delivery, the physiotherapist comes by to teach you postnatal exercises.

7

Social services

Available upon request.

Ombuds(wo)man

He / she is at your disposal for suggestions, answers to your questions, comments, to express any displeasure or file official complaints.

Internet

Free of charge, no password required.

Galenco care products

An introductory set is available for purchase (8.52 euros), will be added to hospital invoice upon order.

Registration of birth

Every birth must be registered with the City of Turnhout at the Registry of Births, Deaths and Marriages within 15 days.

To do so you need both parents' identity cards, your marriage certificate or the recognition form and birth declaration form which will be given to you by the hospital.

No recognition form? Then both parents need to be present to register the child.

Upon registering your baby, you will receive:

- A certificate for the health insurance fund
- A certificate intended to apply for a maternity grant and child allowance
- 2 additional birth certificates
- A polio vaccination registration form to be filled in by the physician administering each dose of the mandatory polio vaccine.

Registry Office Hours

BLAIRON CITY HALL

<https://www.turnhout.be/geboorteaangifte>



The days of and after delivery

The medical / nursing team keeps the parents informed of the tests and treatments. Our medical policy always aims to improve / secure mothers and baby's condition. We do aim to verbally request consent before any intervention, however, in urgent cases it is not always feasible to request explicit consent prior to medical intervention. By choosing our hospital we presume there is implicit consent or acquiescence from the parents for basic treatments and examinations.

Day 0: Day of Birth

YOUR BABY

- Immediately after birth some babies may have delayed clearing of amniotic fluid and mucous from the esophagus and stomach. Babies may gag, vomit, seem uncomfortable and have a reduced appetite. Don't be distressed, this is a normal occurrence in many healthy new-borns and may take a few days to be cleared. Ask the midwives for help.
- Babies use signals to indicate when they need to be fed: sticking out their tongue, smacking, bringing their hands to their mouth, it is best to offer a feeding before your baby starts crying.
- Feeding on demand is the healthiest approach for babies. If you are breastfeeding, frequent nursing (min.8 times a day) will ensure an optimal start to your breastfeeding journey.
- Frequent skin to skin contact with your newborn will stimulate the innate rooting reflex in baby, stimulates oxytocin release in mom which in turn stimulates lactation.
- The safest sleeping position for a baby is on its back, with the head slightly elevated to minimise reflux. We do not encourage sleeping on the stomach for newborn babies.
- We strongly encourage continuous rooming in with your baby, as to get to know your baby and learn to respond swiftly to any hunger cues.
- It is best to change diapers each feeding, avoid waking baby for diaper changes during deep sleep cycles. The number of soiled diapers may vary greatly.
- In the maternity booklet you will find a follow-up sheet, please utilize it to keep track of when you feed your baby and the number of soiled diapers. Medical staff uses this overview for providing customized care.

YOURSELF

- The first day your vaginal discharge will be bright red blood, comparable to a heavy period, sometimes containing some small to medium sized clots.
- After delivery personal hygiene is very important to prevent infections. All toilets are fitted with a cleansing system for rinsing of your vulva and perineum. For those who are unable to access the bathroom independently (after caesarean, fatigue...) the midwives will come by three times a day to provide vulva and perineal care. For all mothers who delivered by caesarean a mandatory 24h bedrest is advised.
- For a few days you may experience after pains: this is the uterus contracting and relaxing in order to shrink back to normal size.
- Try to urinate regularly, a full bladder interferes with the uterus' involution. Abrasions, lacerations of the labia and/or the vagina may make urinating uncomfortable, rinsing with lukewarm water can soothe the stinging.
- Pain management is available upon request. Mothers who delivered by caesarean will receive a standard IV pain relief schedule the first day. On day 2 you will be switched to tablets according to an upon request system.
- Each day, one of the gynaecologists or assistant physicians will visit you in your room. Feel free to pose your questions concerning your treatment or stay.

10

TIPS IF YOU ARE BREASTFEEDING

- Assume a comfortable position.
- Baby's should open mouth wide and curl lips outward when latching.
- Breastfeeding should not be painful, initial latch might feel uncomfortable after which a light pulling sensation continues for the remainder of the feeding. Ask for help if pain persists after initial latch.
- Frequent nursing ensures a proper start-up of milk production.
- A maternity booklet with tips & tricks for optimal breastfeeding is provided.
- Ask for help! Our experienced midwives are there to assist you.

TIPS IF YOU ARE BOTTLE FEEDING

- You receive tablets to stop milk production.
- Comfortable position.
- Keep a bib at hand.
- Correct position of the teat and the mouth
- If the feeding is not going smoothly, you can always ask the midwife for help after 15 minutes. Bottle feeding should not take more than half an hour. Make sure that when the bottle is empty your baby does not suck air, in order to prevent cramps.
- The bottles are for single use only.

CONTINUOUS ROOMING IN FOR BABY AND MOTHER

Our maternity maintains a continuous rooming in policy for new moms and their babies. This will encourage maternal and new-born bonding as mothers will be more inclined to quickly pick up on and respond to early cues from their baby. Continuous rooming in promotes a sense of safety and wellbeing in both mother and child.

Day 1: the first day after childbirth

YOUR BABY

- The first day after birth it is normal for your baby to lose weight. Your baby defecates and loses fluid. However, your baby should not lose more than 10% of his/her birth weight.
- Normal body temperature for a baby is between 36.5° C and 37.5° C. Please check before bathing. If the temperature is below 36.5° C do not bathe your baby at that time and add an extra layer of clothing and/or extra blanket. If temperature is above 37.5° C it is ok to bathe your baby, adjust clothing by providing only one layer and remove unnecessary blankets. In both instances check temperature again after an hour. Bath water should be set at body temperature which is 37° C.
- Baby's first bath will take place 24h after birth to allow all vernix to be absorbed by the skin. Bathing routine can be scheduled any time of the day however for convenience at the hospital this is done in the morning.
- Products which are approved for baby skin are recommended: wash gels, bath oils for dry skin, moisturizing body lotions. Avoid excessively perfumed products and product lines which contain harsh chemicals.
- Cord care: Initially the umbilical cord is soft and gelatinous, the cord dries, shrivels, becomes black and eventually falls off after 5 to 10 days. Keep cord clean and dry, pat gently with a clean towel after bathing. Cleansing with physiological serum is done as needed. Disinfecting the cord is done only when signs of infection are present (foul odour, redness, oozing puss). The cord does not contain nerves so is completely painless.

YOURSELF

- Your bleeding will gradually diminish and fade to a pinkish or brownish colour.
- The midwives will rinse you twice today, if you so desire.
- If you had a caesarean, you will be washed in bed today. Today you are also allowed out of bed for the 1st time.
- Today we do a routine blood test to check the iron levels in your blood. We will check whether your iron level has not gone down too much because of the blood loss after delivery.
- You should also give a urine sample to make sure you are not suffering from a urinary tract infection.
- After delivery it is possible you are not able to control the urge to urinate. It may also happen that you leak urine when laughing, coughing or sneezing. This is caused by the stretching of the pelvic floor muscles. The physiotherapist will teach you some exercises to bring these muscles back to strength.
- Upon delivery you lose 6 to 7 kg. The rest will disappear more slowly. In the period immediately after childbirth it is best not to start a slimming diet, your body needs healthy food to regain strength.
- You will gradually lose the liquid you accumulated during your pregnancy, after 4 to 6 weeks it should be gone entirely.

TIPS

- Drink enough water
- Eat a balanced, sufficient and healthy diet
- Take enough exercise but be aware to start strenuous activities approximately 6 weeks after delivery.

Day 2

YOUR BABY

- Today we show you how to bathe your baby.
- The 3rd or 4th day after birth your baby may turn yellow. This is caused by bilirubin, a substance released by the degradation of red blood cells.
 - At birth there often are way too many of these. The immature liver often cannot process the bilirubin.
 - The yellow skin colour usually disappears during the 1st or the 2nd week.
 - If your baby is sleepy and lazy when drinking, it often means there is an excess presence of bilirubin. The paediatrician will then decide whether phototherapy is needed.
- Crying is a way of communicating for your baby. Possible reasons are:
 - a dirty diaper
 - hunger or thirst
 - too cold or too hot
 - pain
 - cramps
 - boredom
 - fatigue
- You cannot spoil your baby by comforting and cherishing her. Most babies are more restless at night.
- Because the baby does not urinate very often in the beginning, it is possible that you will see some orangey red discolouration in the diaper. This is caused by urate crystals and it will disappear by itself.
- Girls may excrete some bloody mucus after birth. This is caused by the mother's pregnancy hormones and will disappear by itself.

14

YOURSELF

- It often takes a few days before you are able to defecate. Defecating the first time after giving birth may be a bit cumbersome. Take plenty of time to go to the toilet, it is best not to postpone it.
- If you have not been able to defecate, the midwife will administer you some fibres. They soften the faeces and improve production.
- Think about the length of your stay, if you had a vaginal birth the normal duration is 3 days. If you had a caesarean, it is 4 days. The

condition of mother and child allowing, you can leave the hospital sooner if you want. Please inform the midwife no later than the night before you go home.

TIPS CRIB

- Put the bed of your baby by the window if possible (not in direct sunlight)
 - This will accelerate the bilirubin breakdown.
 - Your baby will be able to produce vitamin D herself.
 - Your baby will more rapidly distinguish day from night.

TIPS BATH

- Before bathing the baby we first check the baby's temperature.
- The water should be between 36° C and 37° C, always check the bath water temperature.
- Keep everything you need at the ready or within reach so that your child is never left alone on the changing table.
- Undress your baby, have her weighed first. First wash the face without soap, then with soap the head, arms, arm pits, abdomen, back, legs, genitals and finally her bottom.
- Gently lay her into the water while carefully supporting the head. Take the baby under her arm and let her head rest on your wrist.
- As soon as the baby is out of the bath, carefully wipe her dry, not forgetting the small creases, then dress her immediately.
- The navel must always be wiped dry well.

15

TIPS IF YOU ARE BREASTFEEDING

- On day 3 or 4 there may some engorgement making your breasts tender and firm.
- Have your baby latch on regularly, this way you avoid your breasts getting too firm. If your breasts are very firm, your baby will have a hard time latching on, which may cause fissures.
- Apply heat when feeding. You can use a hot water bottle, a cherry stone pillow or you can take a shower. Heat will make you feel more relaxed and the milk ejection will be swifter. The loss of milk will soften the skin around the nipple and areola so the baby can latch on more easily.

- A breast massage just before latching on may be relaxing and stimulate the milk ejection reflex. Massage your breast with circular movements from the armpit towards the nipple.
- Sometimes it may be necessary to ask the midwife for a painkiller.
- If the pressure in the breast is too high and it is no longer possible to empty the breasts, you can use a breast pump to fully empty your breasts ONCE.
- If your baby only wants to drink on one side because there is an oversupply of milk, leave her on the first breast for 5 minutes and then latch her on to the other breast until she stops herself. This relieves the tension in both breasts.
- If the engorgement is too severe and the baby cannot empty the breast sufficiently, the midwife may advise you to empty the breasts once with an electric pump.

SOME TIPS

- Learn to live according to your baby's rhythm, rest when your baby is resting.
- Accept help from friends and relatives.
- Limit the visits and ask them to give a call beforehand.
- If your baby suffers from cramps, you can try the following:
 - Kangarooing (put your naked baby on your bare upper body).
 - Just hold the baby with her belly against your upper body. Your upper body keeps your baby's belly warm which has a soothing effect.
 - Your baby may indicate she wants to latch on, so let her. A satiated baby experiences less pain and sucking at the breast has a comforting effect. Make sure, though, that your baby is actually drinking and not sucking, in order to avoid fissures.
 - Put your baby with her tummy on your arm and quietly walk around.
 - Massage the tummy or gently press her legs against her tummy.

Going home

YOUR BABY

- Your baby is gradually gaining weight: on average 20 to 30 g daily, weekly usually between 150 and 250 g. After two weeks she has recovered her birth weight.
- The umbilical cord stump falls off, keep the navel clean and dry.
- Provided your baby is well protected from the cold and the heat, you can go out on daily strolls.
- The morning you go home the paediatrician will come by to discharge your child and to give you some more info on bottle feeding.
- If you are bottle feeding, you can take a box of powder milk from the hospital if you so desire. It will be invoiced.

YOURSELF

- When you go home, the gynaecologist or assistant gynaecologist will come by to discharge you.
- If any forms need to be completed, this will always be done at the time of discharge. Please keep them at hand.
- You may have vaginal bleeding for up to 6 weeks (from red to brown to slimy). During this time it is best not to use tampons in order to avoid infections.
- Generally it is advised not to have intercourse until the bleeding has stopped and the perineum has healed if it was cut or torn. It is important that you are both ready for it.
- If you had a caesarean, a physician or a self-employed midwife must remove the stitches after 1 week.
 - In case of redness, heat and pain or loss of liquid at the level of the wound, have the wound checked by your GP.
 - The first 6 weeks do not lift anything heavier than your baby.
- An appointment will also be made to see your gynaecologist about eight weeks after delivery.
- The doctor will also prescribe a contraceptive if you so wish.
- If you are bottle feeding, you can start again with the same birth control pill you used before your pregnancy. You can start again four weeks after giving birth. You are NOT safe during the first blister of pills and you may still lose some blood.
- If you are breastfeeding, it is recommended to start with the mini pill (Lueva ®). Start with the pill two weeks after giving birth, take 1

pill a day continuously as long as you are breastfeeding. Most women have no periods with this pill. As soon as you stop breastfeeding, you can switch back to your normal contraceptive pill. You can switch right away, do not insert a gap week between the two pills.

- Of course you are free to use another type of contraceptive, e.g. condoms.
- The use of an IUD will be discussed during your follow-up appointment.
- You do not have to sign out when you are going home. Just stop by the desk and we will take care of it.

Tips for at home

Safety in the car

- Always make sure your child is properly strapped in, in a car seat that is sized for his age.
- Make sure it does not get too warm in the car.
- Provide extra drinks on long trips.
- Never leave your child in the car unattended.

Safety at home

- Keep harmful products out of reach of children (medicines, cleaning products, cosmetics, etc. ...)
- Secure AC sockets.
- Never leave your child alone with a pet.
- Do not smoke in the house.

When to consult a paediatrician?

- If your child, younger than 1 month, has a fever of 38° C or more.
- If your child, younger than 3 months, has a fever of 38.5° C or more.

19

General advice

- Breastfeeding is the most suitable food for babies. Until the age of 6 months, a healthy baby needs no food other than breast milk. After these 6 months, breastfeeding remains important but other foods should be introduced as well. The pediatrician, your midwife and/or child and family can provide more information about this.
- If you bottle-feed your baby, always check whether the content is not too hot or too cold.
- To prevent dehydration: in warm weather be extra alert to ensure that you latch on your baby sufficiently, follow the baby's demand and/or offer the breast extra. If you give formula, it may be appropriate to give some extra formula.

Everyone gives advice, only follow the ones you feel comfortable with!

SIDS (Sudden Infant Death Syndrome or cot death) prevention

A safe sleeping environment

- Put your child to sleep on a firm mattress, so he does not sink in. Do not use pillows, for the same reason.
- Avoid asphyxiation risks by applying these rules:
 - Use a mattress that is adapted to the size of the crib, so the baby cannot get wedged in between.
 - The side rail slats should be less than 8 cm apart, otherwise the head may get trapped between them.
 - Remove all unnecessary items from the bed such as cuddly toys he could cover his face with.
- Provide adequate ventilation in the room your child is sleeping in.

A safe sleeping position

- Always lay your child down on his back, unless the doctor recommends a different position for medical reasons. Even if your child is sick, the dorsal position is best. He will get rid of his fever fastest if his head and face are not covered.
- Do not use a duvet.

20

A safe room temperature

- The room temperature should not exceed 20° C for children under 8 weeks old, later no more than 18° C.
- Cover your baby lightly, a blanket or a light sleeping bag, adapted to the child's size, is enough.
- Do not cover the face.

A smoke-free environment

- Smoking is highly discouraged both during pregnancy and after the birth.
- Do not allow anyone to smoke in your child's presence, neither at home nor in the car.

Medication

- Do not give your child any medication without a prescription, certainly not cough syrup nor sedatives.
- If you are breastfeeding, do not take any medication yourself without doctor's advice.

Respect your child's sleeping rhythm and make sure he gets enough sleep.

BE ALERT

Who to contact if you have questions or problems?

Hospital telephone numbers

Hospital General Number	014 44 44 11
Delivery Ward	014 44 42 31
Maternity Ward	014 44 42 21
Neonatology	014 44 42 39

Paediatrician consultations

Only by appointment	014 44 44 16
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Emergencies

During consultation hours	014 44 44 16
Outside consultation hours via emergency relief	014 44 43 11

Self-employed midwives

www.vroedvrouwen.be



AZ Turnhout vzw
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24



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