



# Your Guide to the NICU



St. Joseph Health <sup>SM</sup>  
St. Jude Medical Center  
A member of the St. Joseph Hoag Health alliance

# Welcome to the Neonatal Intensive Care Unit

Every birth is a miracle, but when a baby is born too soon, too small or with complications, our highly respected Neonatal Intensive Care Unit (NICU) specializes in providing the very best start.

As a Level III NICU, we offer round-the-clock, state-of-the-art care—creating exceptional outcomes for even the smallest babies. Our NICU is designed to accommodate the most sophisticated technology available, as well as today's newest innovations in neonate care, all with just one goal: **helping your baby grow stronger.**

You can have the confidence that comes from knowing your infant is receiving the finest care available. Our nurses hold advanced certifications in their specialty, while our board-certified neonatologists—affiliated with Children's Hospital of Orange County (CHOC)—are available 24/7.

Our team also includes specially-trained respiratory therapists, lactation specialists, developmental therapy specialists, social workers, pharmacists and others. This specialized expertise, combined with state-of-the-art capabilities and a commitment to extraordinary care, is why we can offer your baby the best possible beginning.

# About the NICU

All babies who arrive in the NICU are closely assessed by a board-certified neonatologist, monitoring the heart, blood pressure, breathing and temperature. Occasionally X-rays and additional blood tests will be ordered, and in certain situations, some babies may be transferred to CHOC for specialty services and advanced levels of care.

In the NICU, all aspects of your baby's health are monitored. The wires that you see on your baby are attached to monitors to ensure your baby's heart and lungs are functioning properly and temperature levels are within normal range. If any change occurs, the monitors will notify the nurse to respond immediately.

## Important Resources

### Phone Numbers to Know

#### **St. Jude Medical Center NICU**

101 E. Valencia Mesa Dr.  
Fullerton, CA 92835  
(714) 626-8522

#### **David Hicks, MD**

Neonatologist  
Medical Director  
(714) 992-3000 Ext. 8522

#### **Dawn Price, MSN, RN**

Director, Maternal-Newborn Services  
(714) 992-3000 Ext. 4990

#### **Amy Dugan, MSN, RN**

Manager, Maternal-Newborn Services  
(714) 992-3000 Ext. 4998

#### **Lisa Woolery, LCSW**

Social Worker  
(714) 992-3000 Ext. 6614

#### **St. Jude Medical Center**

Cashier's Office and Parking Information  
(714) 992-3000 Ext. 5090

#### **Financial Counselor**

(714) 992-3000 Ext. 3825

#### **Breastfeeding Support**

(714) 626-8528

#### **For St. Jude Heritage Medical Group Patients:**

St. Jude Nurse Advice Line  
(800) 870-7537 Ext. 1

#### **Mother Baby Classes:**

[stjudemedicalcenter.org/motherbabyclasses](http://stjudemedicalcenter.org/motherbabyclasses)

#### **Online Classes:**

[stjudemedicalcenter.org/motherbabyonline-classes](http://stjudemedicalcenter.org/motherbabyonline-classes)

# Visiting Your Baby

We encourage you to visit and participate in the care of your baby as much as possible. This is an important time for you and your baby to get to know each other and for you to gradually take on your role as mom or dad. For your baby's security, please keep your arm band with you when you visit.

Siblings should be three or older to visit—and a sibling screening sheet must first be completed by a NICU staff member to learn about recent illnesses. Please bring an updated immunization record for each child.

The baby's grandparents and two additional family members or friends may also visit. These designated adults can only visit with you or your spouse.

While there are no restrictions on when parents can visit, siblings, grandparents, and other designated family and friends should come during hospital visiting hours of 9 a.m. to 9 p.m. We ask that only two visitors be in the NICU at one time, as premature and ill infants can be overstimulated by noise.

While our unit is open 24 hours a day, it is our suggestion that you limit your visits and calls during our shift changes to promote a safe hand-off between nurse caregivers. Shift change times are 7 - 7:30 (a.m. and p.m.).

## **Building a Relationship**

You can begin connecting with your baby from your very first visit, even if it's not how you imagined. While it may be some time before you can bathe or diaper your baby, ask your nurse for suggestions on how you can remain involved in his care. For instance, a nurse can show you how to use "kangaroo care" or other skin-to-skin contact to sooth and provide a sense of security to your infant.

Because a premature baby's nervous system is not fully developed, stroking or rubbing may be painful rather than comforting. If touch needs to be limited, your baby will still know your voice and smell. Talk to your infant and begin reading your favorite children's books to her—a tradition to continue once you're home. Your nurse can help you find other ways to safely interact with your baby and nurture his development.

## When Visiting Isn't a Good Idea

Those not allowed to visit the NICU include adults and children with a fever or upper respiratory infection (cough, cold or runny nose); diarrhea; draining wounds and skin lesions; or any recent exposure to a communicable disease. If you or your spouse has a fever, cold or other symptoms, talk to your baby's nurse—you will probably need to also avoid visiting until you are better.

During flu season, for the protection of your baby, no one under the age of 16 will be permitted into the NICU. This policy is designed to safeguard our NICU babies

from life-threatening complications. Signs will be posted to notify family and friends when flu season begins.

## Preventing the Spread of Germs

Newborns in the NICU have little ability to fight infection and we are very careful about protecting them. All parents, grandparents, family and friends are asked to thoroughly clean their hands (see Hand Washing Guidelines below) and put on a cover gown. Please clean your cell phone with antibacterial wipes and turn it to vibrate or silent before going into the NICU. To aid in the prevention of infection, no food or drinks are allowed.

# NICU Hand Washing Guidelines

The purpose of handwashing is to remove dirt, organic materials and microorganisms from the hands to decrease possible infections. The number one way that patients get infections is by improper hand hygiene. When arriving to the NICU, please use the waterless hand scrub near the entrance and follow the directions posted at the front of the unit by the sinks.

For the safety of your baby, it is necessary to wash your hands with soap and water for 15 seconds if they become soiled. If you touch your face, phone, camera or anything else, please use the hand gel at the bedside. If you change a diaper, you may also use the hand gel unless your hands are soiled.



# Check On Your Baby Anytime, From Anywhere

When a baby requires care in the NICU, it is a stressful time for the entire family. But at St. Jude Medical Center, we've made it a little easier: new moms and dads can have the reassurance of watching their baby grow and develop from their computer or mobile device.

The Nicview Webcam System creates a “virtual window” into the NICU. Individual cameras mounted above the isolettes provide parents with real-time viewing securely over the Internet. St. Jude Medical Center offers the webcam as a free service to our patients. We know the reassurance and peace of mind it offers is priceless.

## **Strengthening the Bond**

Bonding between parents and their newborn is as important in the NICU as it is at home. Having the ability to watch your baby anywhere can help keep you involved and informed—and strengthens the connection between you and your baby.

## **Bringing Family Together**

With the webcam, traditional boundaries of distance disappear. Family, across the street or across the globe, now has access to real-time video of the newest family member.



## Easy to Use

The webcam is easy to access, and there are no software downloads or Adobe Flash plug-ins. If you can access the Internet, you can use this webcam. Please be aware the NicView automatically turns off twice a day (6:30 and 8 a.m./p.m.) to accommodate shift changes. If you have technical difficulties, customer service support is available 24 hours a day, seven days a week at (855) 642-8439 or contact [support@nicview.net](mailto:support@nicview.net).

## Secure and Reliable

All video and information is secured with 256-bit SSL encryption (the web security standard). No video is stored.

## You Control Access

If you would like to view your baby online, you must sign a consent form. You will be given a unique username and password. Please do not share your information with anyone you do not want to have access to the webcam. No one else will be able to access the webcam, except for St. Jude authorized personnel. Only the baby's parents will be allowed to activate the webcam.

To log in to the NICU webcam, please visit:

[nicview.net/login.aspx](http://nicview.net/login.aspx)

# Coping When Your Baby is in the NICU

Having a baby in the NICU is not easy. Overwhelming love, fear, anger, detachment, and helplessness are just some of the emotions you may feel. Anxiety, guilt and even jealousy toward parents whose babies are born without complications are all very common.

Talking with other NICU parents can help. While it can be difficult to connect with friends and family who have never had a sick baby, these parents understand exactly what you're going through. You can also talk to our NICU nurses, social workers or chaplains, who are eager to support you.

Try keeping a journal, as expressing your feelings on paper can help you cope with and move through them. A journal also allows you to record your baby's progress—and when so many days feel like two steps forward and one step back, a journal can remind you of how far you've both come.

You can also join an online community, such as Share Your Story on the March of Dimes website, which was created especially for families who have faced the frightening experience of a baby born early or with a health condition. You can ask questions, participate in online chats, share your own story by creating a blog, and read about other babies with similar health challenges.

## **Take Care of Yourself**

Spending time with your infant is important, but so is having time for yourself, your spouse and your other children.

Your nurse will give you cues about the ideal times for you to take a break. Use the time to do things you enjoy, like exercise, watching a movie, or going to dinner. Fatigue can exacerbate feelings of sadness or anxiety, so take advantage of being able to get an uninterrupted night of sleep. These breaks will help you stay positive and calm.

## **Build Your Confidence as an NICU Parent**

If this is your first baby, remember that all new parents are anxious and unsure. These feelings are more intense for those with babies in the NICU, but are a natural part of being first-time parents.

Be patient with yourself when you feel awkward or hesitant. Having an infant in the NICU can make even the most experienced parent feel like a beginner. Parenting in the NICU is challenging and very different.

Give yourself time to adjust—and ask your baby's nurse for tips on what to do. Helping parents find their stride in caring for their infant is an important part of what we do.

## Accept That You and Your Spouse Will React Differently

It's important to remember that spouses often respond very differently to having a baby in the NICU. Questions like "Why is he so angry when I'm so sad?" or "Why is she accepting this when I can't?" are common. One of you may have difficulty leaving the NICU, while the other may have difficulty spending time here.

Although different, one reaction is not better than the other. Having a baby in the NICU is stressful and emotionally draining, so support and encourage each other. Once your baby is home, exhaustion will likely be the dominant emotion for both of you.

## When to Get Help

While it's normal to experience a range of emotions, if you're having trouble dealing with some of these feelings, ask for help. For many women, postpartum depression can further exacerbate the stress of having a baby in the NICU, as physical and hormonal changes intensify their emotions for weeks or even months after delivery.

If you can't seem to shake feelings of anxiety, sadness, numbness, hopelessness or disinterest, then it's important that you reach out for help. Our social workers and chaplains are available to meet with you, and can also help you find a professional counselor. Your doctor, pastor and family members are other places to find the support you need.



# Improving Your Baby's Health by Breastfeeding

We strongly encourage breastfeeding. If your baby isn't yet able to breastfeed, you can give him breast milk you have pumped. Our experienced lactation specialists and nurses can give you the individualized instruction and support you need to succeed. Please ask your nurse or a lactation specialist for help in getting started.

Pumping may seem to lack the emotional bonding of breastfeeding, but both play the same important role in your baby's health. Your breastmilk is uniquely designed to meet the needs of your premature infant and is higher in certain proteins and amino acids than that of mothers of full-term babies. Pumping allows you to contribute to the health of your baby in a way that no one else can.

Breast pumps are available in the NICU allowing you to pump at your baby's bedside and your nurse or lactation specialist are available to give you support, help and encouragement. Our lactation specialist is available every day from 7 a.m. to 3 p.m. Please ask your nurse to speak with a specialist.

## Common Questions About Breastfeeding

### Why is breastmilk so important?

Breastmilk from the mother of a premature baby is unique and different from other mothers. A mother's body adapts and produces milk that matches the nutritional needs of a premature infant—and continues to adjust over time as the baby matures.

The antibodies in breastmilk provide protection against infection and diseases, including those more common in premature infants. Studies show that premature babies given breastmilk often go home earlier and have fewer health issues. Even pumping or breastfeeding just for the first few weeks can make an important difference.

Pumping or breastfeeding not only gives you an active role in helping your baby get well, but lowers your own risk for breast and ovarian cancer.

I just tried pumping and produced almost nothing.

What's wrong?

At first, most women produce a very small amount of colostrum, a nutrient-rich liquid that is exactly what your baby needs. Even in tiny amounts, this “nothing” is filled with antibodies that will enormously benefit your baby until your milk comes in. Be patient, relax, drink lots of water, and know you're doing the right thing for your baby.

What do I need to know about pumping?

Pumping does not mean you have to breastfeed—and you can stop at any time. If your baby starts with breastmilk, he can easily transition to formula.

With a little practice, a breast pump is comfortable and easy to use. Most common medications given to postpartum moms are safe to use while pumping or breastfeeding. Ask your nurse or lactation specialist to help you get started, including providing a breast pump or helping you rent an electric pump. The sooner after delivery that you start, the more your milk supply will develop. Practicing kangaroo care (snuggling your baby skin-to-skin) and pumping at your baby's bedside or while looking at your baby's photo can help with letdown.

If you'd like to also try breastfeeding, ask your nurse what signs or developmental progress is needed before your baby is ready.

What kind of information can a lactation specialist provide?

Through hands-on help with technique and practical instruction, our lactation specialist can help make pumping or breastfeeding a successful experience for you and your baby.

Board-certified in her specialty, our lactation specialist offers advice and teaching on:

- Beginning breast pumping
- Keeping milk supply going when the baby is unable to breastfeed
- Renting pumping equipment
- Resolving any problems, such as low milk supply or painful breasts
- What to do when the baby won't latch
- Storing breastmilk and how to transport it to and from the hospital

Our lactation specialist is available every day, 7 a.m. to 3 p.m. and can be reached at (714) 626-8528.

# Help and support after you go home

## **Breastfeeding Helpline**

Our lactation experts are available every day from 7 a.m. to 3 p.m. to answer your questions or help with a specific problem. Call (714) 626-8528. If your call goes to voicemail, please leave a message. Your call will be returned within 24 hours.

## **Breastfeeding Workshops**

Hands-on instruction to help make sure you and baby are on track. The workshop can help with issues such as difficult “latch on,” concern about low milk supply, sore nipples or any other breastfeeding concern.

Private breastfeeding consultations are also available. To sign up, visit [stjudemedicalcenter.org/healthclasses](http://stjudemedicalcenter.org/healthclasses) and click on “Breastfeeding Clinic” or call (714) 578-8775.

## **Breast Pump Rentals and Supplies**

Breast pumps are often a covered benefit, so check with your health plan.

### **Anaheim**

OC Medial Supply  
(714) 956-4690

### **Brea**

Babies “R” Us  
(714) 255-2924

### **Fullerton**

Sunny Hills Pharmacy  
(714) 871-8190

### **Yorba Linda**

B & B Pharmacy  
(714) 777-2737

# Wellness and Fitness for New Moms

St. Jude Wellness Center offers a wide range of classes, services and programs designed to help you regain your health, energy—and if you want to, fit back into your jeans.

Our fitness classes are diverse and include everything from Yoga and Pilates reformer to Zumba, indoor cycling, basic training and boot camp. Specialized programs, including Lifestyle 365 offer coaching, personalized exercise and eating, nutrition counseling and weight management.

For more information, please visit [StJudeWellnessCenter.com](http://StJudeWellnessCenter.com) or call (714) 578-8770



# Your Care Team

**Registered Nurse:** a specially trained Registered Nurse (RN) who will deliver nursing care to your baby. The RN works 12 hour shifts.

**Clinical Coordinator (CC):** a nurse who oversees and supervises the care given to each baby. There is usually one Clinical Coordinator for each shift (day and night). Clinical Coordinators serve as the Charge Nurses. They are available to assist nurses, doctors and parents in problem solving and planning.

**Environmental Services:** staff who care for the supplies and tidiness of the NICU.

**Nurse Manager:** The nurse manager has 24 hour responsibility of nursing for the NICU. Their schedule is flexible, and may be reached by the Charge Nurse after hours. They assist nurses, doctors, and parents in problem solving and planning.

**Neonatologist:** a pediatrician who takes care of sick or premature newborns.

**Pediatrician:** a medical doctor trained in pediatrics.

**Medical Student:** a person who has completed the first two or three years of medical school, learning clinical care of children and newborns. Not yet a licensed medical doctor.

**Consulting Physician (Cardiologist, Neurologist, Ophthalmologist, etc):** A medical doctor trained in some area other than pediatrics.

## Other Members of the Team

**Case Manager:** a staff member who works with insurance agencies and helps with discharge and home care plans.

**Chaplain:** a pastor, priest, minister, or rabbi who offers spiritual care to families.

**Rehab Therapists (Occupational, Physical or Speech Therapy):** is a person who has special training in growth and development of infants. They do exercises that help improve development and muscle control. This helps with feeding skills. A team member rounds daily in the NICU.

**Respiratory Therapist:** a licensed person trained in the management of breathing disorders, treatments, and procedures, oxygen and ventilators. Referred to as an RT or RCP.

**Social Worker:** a clinician with a Master's degree who helps families with their feelings about having a tiny or sick baby. They also help with community resources and financial concerns.

**Technician (X-Ray, EEG, EKG, Ultrasound, etc.):** a person who performs specific tests ordered by the doctor.

**Volunteers:** people who give their time to help in the NICU—greeting, answering phones, and assisting the nursing staff. All volunteers receive an orientation and training by the hospital Volunteer Services Department and the supervisors in the NICU.

# A Parent's Guide to Medications in the NICU

**Acetaminophen** – Used to treat pain or fever

**Acyclovir** – Used to treat the viral infection Herpes Simplex

**Albuterol** – Dilates the pulmonary bronchioles and is used to treat wheezing or tightness from lung disease or bronchopulmonary dysplasia (BPD)

**Ampicillin** – An antibiotic used to treat a bacterial infection

**Amoxicillin** – An antibiotic used to treat common bacterial infections, such as ear and bladder infections

**Betamethasone** – A steroid given to moms to lower risk for respiratory distress in premature infants

**Caffeine citrate** – Used to treat apnea

**Cefazoli** – An antibiotic used to treat a bacterial infection

**Cefotaxime** – An antibiotic used to treat a bacterial infection

**Ceftazidime** – An antibiotic used to treat a bacterial infection

**Ceftriaxone** – An antibiotic used to treat a bacterial infection

**Chlorothiazide** – Increases urine (diuretic)

**Clindamycin** – An antibiotic used to treat a bacterial infection

**Clotrimazole** – Cream used to treat fungal infection of the skin

**Cimetidine** – Treats or prevents stomach irritation or bleeding

**Dexamethasone** – A steroid used to treat or prevent respiratory distress or disease

**Dobutamine** – Helps the heart pump and is used to treat low blood pressure

**Dopamine** – Used to increase blood pressure, help the heart beat stronger, and help the kidneys make urine

**Epinephrine** – Used when the heart is not working adequately or when a baby is having trouble breathing

**Epoetin alfa (Erythropoietin)** – Stimulates the body to make more red blood cells

**Erythromycin** – An antibiotic used to treat a bacterial infection; eye ointment to prevent eye infection

**Fentanyl** – Narcotic used for sedation, to treat pain, or for anesthesia, depending on dose

**Ferrous Sulfate** – Iron supplement

**Fluconazole** – Used to treat a fungus infection

**Furosemide (Lasix)** – Increases urine (diuretic)

**Gentamicin** – An antibiotic used to treat a bacterial infection

**Heparin** – Often added to IV fluids to prevent IV from clotting

**Hydralazine** – Used to treat high blood pressure

**Hydrochlorothiazide** – Increases urine (diuretic)

**Hydrocortisone** – A steroid used to increase blood pressure and treat adrenal insufficiency

**Ibuprofen** – Used for pain and to treat Patent Ductus Arteriosus

**Indomethacin** – Used to treat a Patent Ductus Arteriosus or prevent IVH

**Insulin** – Lowers blood sugar

**Keppra** – Used to prevent seizures

**Lorazepam** – Used to prevent seizures or for sedation

**Metoclopramide** – Used to speed up the emptying of a baby's stomach

**Metronidazole** – An antibiotic used to treat a bacterial infection

**Midazolam** – Used to sedate or relax the baby

**Morphine** – Used to relieve pain or sedate

**Naloxone** – Used to reverse the effect of narcotics

**Nitric Oxide** – An inhaled gas used to relax the blood vessels leading to the lungs

**Nystatin** – Used to treat a fungus infection of the mouth or on the skin

**Nafcillin** – An antibiotic used to treat a bacterial infection

**Palivizumab (Synagis)** - Used to prevent Respiratory Syncytial Virus

**Pancuronium (Pavulon)** - Relaxes muscles; prevents all movement during an IV placement or other procedure

**Penicillin** - An antibiotic used to treat a bacterial infection

**Phenobarbital** - Used to treat seizures or to relax the baby; used to prevent IVH

**Phenytoin** - Used to treat seizures

**Ranitidine** - Treats or prevents stomach ulcers or bleeding; makes stomach less acidic

**Rocuronium** - A short-term paralysis that prevents movement during placements of tubes or other procedures

**Sildenafil (Vigra)** - Treats pulmonary hypertension

**Sodium Bicarbonate** - Makes blood less acidic

**Sodium Sulfacetamide drops** - Eye drops to treat eye infection

**Surfactants** - Used to help newborns breathe and treat respiratory distress

**Spironolactone** - Increases urine (diuretic)

**Theophylline** - Used to treat apnea; used to treat wheezing or tightness in BPD

**Tromethamine (THAM, Tris)** - Reduces acid in the blood

**Vancomycin** - An antibiotic used to treat a bacterial infection

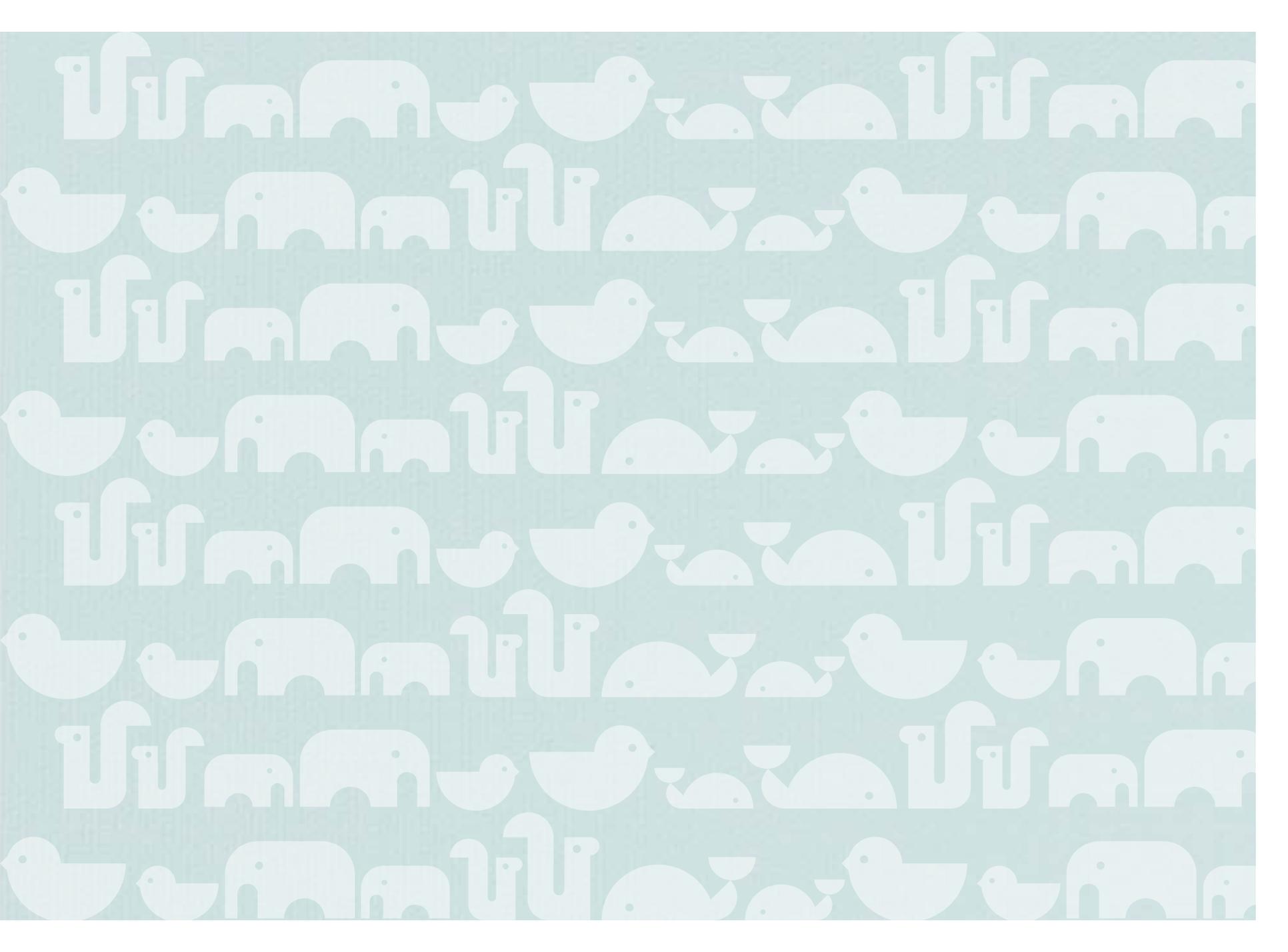
**Vecuronium** - Used to relax muscles; prevents all movement during procedures or surgery

**Versed** - Decreases agitation or activity that may be making a baby worse

**Vitamin D** - Essential to bone mineralization and cellular function

**Vitamin K** - Given after birth to prevent bleeding

**Zidovudine (AZT)** - Used to treat HIV (AIDS virus) infection





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