Appendix A: Family Information Packet

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- Signs and Symptoms of Illness
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- Breastfeeding Your Baby
- Gastrostomy Tube (G Tube or Button)
Tips for Finding a Pediatrician

- Your family will need to visit a pediatrician within the first week after leaving the hospital.
- Plan ahead to avoid the pressure and frustration of finding a pediatrician right before your baby is discharged from the hospital.
- Ask your Health Coach or social worker if you need help finding a doctor for your baby.
- Decide whether the pediatrician’s office needs to be close to your home, job, or day care.
- Call the pediatrician’s office to ask if they accept your current health insurance and if they are accepting new patients.
- Ask the pediatrician’s office what your co-payment and responsibilities are.
- Ask the pediatrician’s office which doctor your baby will see at every visit.
- Ask the pediatrician’s office if a doctor is on-call 24 hours a day for emergencies.
Tips About Health Insurance

- Your baby will need to visit the doctor regularly after birth.
- You have only 30 days to add your newborn to your insurance plan. Call your current insurance company as soon as possible to add your newborn.
- Ask your social worker if you qualify for Medicaid, and apply while your baby is still in the hospital.
- Ask about Children’s Medicaid (CHIP), Project Medical Home, and other low-cost health care benefits if you do not qualify for Medicaid.
Signs and Symptoms of Illness

Call the doctor if your baby:

- Has a fever more than 100 degrees Fahrenheit.
- Has diarrhea for more than one day.
- Is throwing up forcefully.
- Is not eating well.
- Has not had at least six to eight wet diapers per day.
- Has very yellow eye color or skin color.
- Is hard to wake up.
- Has fast or difficult breathing.
- Makes jerking movements.
- Is not looking well or acting well.
Crying

Common Causes
- Hunger
- Pain
- Sleepy
- Clothes too tight
- Soiled diaper
- Too hot or too cold

Call your doctor if:
- Your baby looks or acts sick (is throwing up, appears to be in pain).
- You are exhausted from the crying and fear you might hurt your baby.
Colic

What is colic?

- Unexplained crying for 3 or more hours a day.
- Excessive crying.
- Usually begins suddenly and for no clear reason.
- Difficult to comfort.
- Usually goes away as your baby gets older than 3 months of age.

How to comfort your baby during colic?

- Hold and soothe your baby.
- Provide gentle rocking motion in a rocking chair, cradle, or by slow dancing with your baby.
- Place your baby in a swing or vibrating chair.
- Give your baby a warm bath.
- Take your baby for a ride in a stroller or car.
- Feed your baby if it has been more than 2 hours since the last feeding.
- If you have held your crying baby for more than 30 minutes, put him on his back to sleep.

Remember that colic is normal in a lot of babies and is simply part of their personality. It has nothing to do with your parenting or any illness.

It is important to remain calm and NEVER shake your baby.
Medication Safety

- Keep a list of your baby’s medications with your baby at all times.
- Speak to your baby’s health care professional, and ask specific questions about your baby’s medicines.
- When picking up refills, check the label carefully for correct medicine, strength, and dose.
- Read over-the-counter labels to make sure the product is appropriate for your child’s age.
- Use medicines only as directed.
- Use the measuring devices that come with the products, and use these devices as instructed.
- Keep medicine bottles away from other small children.
- Never allow a child to drink directly from a medicine bottle.
Giving Your Baby Oral Medicines

Know the name of the medicine and what it is for

- Carefully read the label of each medicine before giving it to your baby.
- Know why your baby needs to take this medicine.

Know the dose

- It is best to use an oral syringe to give liquid medicine to a baby.
- Avoid using teaspoons because they are not precise.
- Ask the pharmacist to mark the syringe at the dose you need to give.
- Keep the syringe with the corresponding bottle and color code them.
- Know how often to give the medicine

Ask your baby’s doctor or the pharmacist what to do in case you miss a dose.

Know possible side effects

- Always observe your baby for any bad reactions to the medicine.
- Call your baby’s doctor in case of a bad reaction.

Use the following chart to convert teaspoons to milliliters

<table>
<thead>
<tr>
<th>Teaspoon</th>
<th>Milliliter</th>
</tr>
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<tbody>
<tr>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>3</td>
<td>15</td>
</tr>
<tr>
<td>4</td>
<td>20</td>
</tr>
</tbody>
</table>
Preventing Infection

Everyone must wash their hands or use hand sanitizer before and after they touch your baby.

- Avoid large crowds.
- Avoid sick people.
- Have people cover their mouth and nose with a tissue when they cough or sneeze.
- Do not allow anyone to smoke around the baby.
Premature Babies Immunization Schedule

What is an immunization?
Immunizations protect us from getting sick with serious diseases. Often, they are given by a shot, but sometimes they are given by mouth or nose.

Premature babies
Immunizations are given to premature babies at the same age as full-term infants.

At birth
- Hepatitis B Vaccine
  - First dose is usually given at birth before leaving the hospital.
  - Should complete the doses by 6-18 months of age.

6-8 weeks old
- Diphtheria and tetanus and pertussis vaccine (DTaP)
- Haemophilus influenzae vaccine (Hib)
- Pneumococcal vaccine
- Poliovirus vaccine (IPV)

Respiratory Syncytial Virus (RSV)
Your child may be eligible for a treatment to prevent RSV, a virus that can cause serious lung infections. Ask your baby’s doctor.

Benefits of vaccines
- Vaccines prepare your baby’s body to fight illness.
- Vaccines protect you and others around you.
- It cost less to prevent a disease than to treat it.

Are Your child’s immunizations up to date?
You can find out more about which immunizations babies need on the Centers for Disease Control and Prevention’s (CDC’s) Web site http://www.cdc.gov/vaccines/.

If you have any concerns about vaccines, ask the doctor caring for your baby.
How Can I Manage My Child’s Breathing Problems at Home?

- Visit the NICU often, and help care for your baby as much as possible in the hospital.
- Learn how to use equipment: pulse oximeter, oxygen tank, nasal canula.
- Know the signs of difficulty breathing.
- Learn CPR.
- Learn how to give your child’s medicines.
- Plan ahead for extra help at home.
- Schedule routine followup doctor visits.
- Wash your hands frequently.
- Avoid crowds.
- Have your child immunized.
Crib Safety

What is SIDS?
- “SIDS” stands for Sudden Infant Death Syndrome.
- Sudden, unexplained death of an infant less than 1 year old.

What should I know about SIDS?
- Babies sleep safer on their backs.
- Babies should be placed on a firm sleep surface.

What can I do to lower my baby’s risk of SIDS?
- Babies should be put on their backs to sleep for nap and at night.
- Keep toys, objects, and loose bedding out of your baby’s sleep area.
- Do not allow smoking around your baby.
- Do not allow your baby to overheat during sleeping.

What about “tummy time”?
- Daily tummy time is necessary for normal development.
- Make sure your baby spends several hours on their tummy when they are awake and someone is watching.
Bronchopulmonary Dysplasia (BPD)

What is Bronchopulmonary Dysplasia (BPD)?
■ Type of chronic lung disease.
■ Common in babies born early.
■ Damaged lung tissue causes breathing and health problems.
■ Lungs trap air, fill with fluid, and produce extra mucus.

What Causes BPD?
■ Being born early.
■ Having a virus called RSV (ask your Health Coach for a fact sheet about RSV).
■ Having a heart condition.
■ Being on a ventilator.
■ Lack of nourishment.
■ Fluid in the lungs.

What are the Symptoms of BPD?
■ Grunting.
■ Breathing heavily.
■ Flaring nostrils.
■ Sucking in air.
■ Tiring easily.
■ Pale or grey skin.
How is BPD Diagnosed?
- If your baby still needs oxygen at 36 weeks old.
- If your baby has been on a ventilator.

How is BPD Treated?
- BPD is treated with oxygen to control fluid in the body and medicine to relax the airway.
- Treatment does not cure BPD.
- Treatment helps your baby breathe better.
- Lungs will eventually heal.
- Your baby needs nutrients for healthy growth.
Respiratory Syncytial Virus (RSV)

What is Respiratory Syncytial Virus (RSV)?
- A common virus that affects babies and infants.
- Leading cause of two lung infections: pneumonia and bronchitis.

Symptoms of RSV
- Starts out like a cold with fever or runny nose.
- Can also include:
  - Coughing.
  - Problems breathing.
  - Fast breathing.
  - Not eating well.

How is RSV Spread?
- Contact with someone who is coughing or sneezing.
- Enters the body through the eyes, nose, or mouth.

How to Prevent the Spread of RSV?
- Wash your hands before and after handling a baby.
- Avoid exposing your baby to others with cold symptoms.
- Cover coughs/sneezes and throw away used tissues.
- Keep your baby away from crowded areas.
- If your baby is at high risk for RSV, talk to your doctor about a monthly shot that can help lower the risk of a baby getting severe RSV.
- Your baby may be eligible for palivizumab (brand name: Synagis®), a treatment given to prevent and reduce RSV.
- The shot, given monthly during RSV season, reduces the chance of your baby getting pneumonia and bronchitis.
- Babies may still get RSV but will be less sick.
Newborn Feeding

Bottle Feeding

- Feed your baby ONLY infant formula and breast milk for their first 4 to 6 months.
- Feed your baby at least every 3 hours, day and night.
- Before each feeding, warm the breast milk or formula to room temperature by placing the bottle in warm water; do not leave cold bottles on the counter to warm up.
- Never heat breast milk or formula in a microwave oven.
- Throw away any remaining breast milk or formula after each feeding.
- When traveling, keep the breast milk or formula cold in a cooler.

Formula Preparation

Infant formulas are available in 3 ways:

**Ready To Feed**

Do not add water

**Liquid Concentrate**

Add sterile water

**Powder**

Add sterile water

To make Sterile Water:

Boil water for 2 minutes.

Cover the pot.

Let water cool to room temperature.
**Formula Storage and Use**
Store prepared formula in a refrigerator.
Use formula in 24 to 48 hours.

**Bottle Cleaning**
Clean bottles and nipples by washing with hot, soapy water or on top rack of dishwasher.
Allow bottles and nipples to air dry.
Breastfeeding Your Baby

**Breastfed babies have:**
- Fewer ear infections.
- Lower chance of asthma, food allergies, and dental cavities.
- Protection against diarrhea, stomach, and lung infections.
- Better nervous system development and higher IQ levels.
- Lower risk of some childhood cancers.
- Lower chance of becoming overweight.

**Mothers who breastfeed have:**
- Lower risk of pre-menopausal breast cancer.
- Lower chance of osteoporosis later in life.
- Quicker return to pre-pregnancy weight.
- Food source for their babies even during emergencies.
- Lower chance of becoming pregnant before menstruation returns.
Gastrostomy Tube (G Tube or Button)

Giving medicines and feeding if your baby has a gastrostomy tube:

- Clear the G tube or button as your health care provider showed you.
- Check for placement of the G tube or button.
- Slowly push in liquid medicine or feeding with a syringe.
- If the pharmacist says it is ok, pills and capsules may be dissolved in 10 to 20 cc of warm tap water.
- All medicines and feedings should be flushed in with 5 to 10 cc of warm tap water.
- Ask your baby’s doctor, nurse, or pharmacist how to measure the tap water.

It is important to use the specific tube adapter made by the manufacturer of your button.

- In fluid restricted babies flush medicines with ONLY 1 to 5 cc of warm tap water.
- Vent the tube after feeding to remove excess air or fluid and reduce leaking.

Protecting the G Tube or Button

- Snap t-shirts and onsies work best to prevent babies from pulling on the tube or button.
- You may also use a sticky wrap or stretchy dressing.