



Discharge neonatology

H1

01 Content

Nutrition	4
More info on breastfeeding/bottle feeding	11
Medication	11
Preventing cot death	12
Discharge interview with paediatrician	14

02 Welcome

Your baby may leave the hospital soon.

This brochure gives you more preparatory information to create the smoothest possible homecoming for your baby.

If you have any questions after reading this brochure, you can always contact our department.

Maternity (ward H1)

03 Nutrition

Your baby drinks

Feed your baby regularly, every 3-4 hours, so that he has 7 feedings a day.

The feeding hours your baby is currently following are:

07:30 am	10.30 am	1.30 pm	16:30 pm
7.30 pm	11 pm	04:00 am	

These hours are not restrictive and can shift at home. Some babies still need 8 feedings at discharge. If necessary, the paediatrician will inform you about this.

If you wish to switch to different food, do not do so on your own initiative and certainly **do not** give **plain whole milk**. If you wish to change diet, the paediatrician is your best advisor.

Breastfeeding

If the baby can drink at the breast, this is definitely recommended. For premature babies, this is quite an effort. On discharge, the paediatrician or midwife will discuss with you how often you can latch on. The baby's weight and age play an important role in this. It may be that at this point drinking only from the breast is too tiring for your baby and that this needs to be built up as your baby grows. An independent midwife/lactation consultant is the ideal person to guide you through this.

How do I store breast milk?

Fresh pumped breast milk	
Room temperature	3-4 hours at temp. up to 25°C
Refrigerator	2-3 days at 4°C
Freezer compartment in the fridge	2 weeks at -15°C
Freezer	6-12 months at -20°C

Breast milk thawed in the fridge	
Room temperature	4 hours at up to 25°C
Refrigerator	24 hours at 4°C

Breast milk thawed outside the fridge	
Room temperature	Use immediately for food, do not store
Refrigerator	4 hours at 4°C

Thawing breast milk

Thaw frozen breast milk preferably in the fridge or under running water.


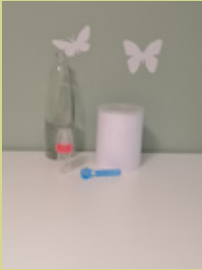

Do not thaw frozen breast milk in a microwave oven or in a pan of boiling water (risk of scalding).

Before using, gently roll the bottle or pouch to mix any separated fat into the milk and evenly distribute the heat.

Throw away leftovers - **you should not refreeze thawed milk.**

Bottle feeding

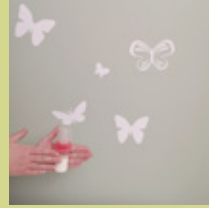
Preparation of artificial formula bottles

Different steps	Photo
<p>Step 1: wash your hands with soap and water and dry them with a clean towel. Hygiene is very important</p>	
<p>Step 2: Fill the bottle with 30ml of water. Use low-mineral, non-sparkling bottled water marked 'Suitable for preparing baby food'. Opened bottles are best stored in the fridge (max 24 hours).</p>	
<p>Step 3: Add a level measure of powder. Always use the measuring spoon from the milk carton.</p> <ul style="list-style-type: none">• 1 level measure of powder per 30 ml of water• 2 scoops of powder per 60 ml of water• 3 scoops of powder per 90 ml of water <p>You can buy the first bottle formula (birth to 6 months) from the pharmacist.</p>	

Different steps

Photo

Step 4: Roll the bottle between both hands to avoid clumps.



Step 5: warm up the bottle.

- In a hot water bath (au bain marie), in an electric bottle warmer or in a microwave oven.
- With a microwave oven, first find the ideal heating time: it depends on the power of the oven and the amount of milk.
- The microwave oven heats the milk unevenly.
- Roll the bottle well between your hands to distribute the heat.
- Always check the temperature by putting a few drops on the inside of your wrist.



Can I reheat a bottle?

- No, except during the same meal.
- If your baby empties his/her bottle so slowly that the milk gets cold, reheat the bottle of formula.
- Never keep leftovers. Pour them away after feeding.

How do I store milk powder?

- An unopened carton of milk powder is usable until the expiry date stated on the packaging.
- Opened packs are best kept in a sealed box.
- An opened box of milk powder should be used up within a month.
- Unopened boxes of ready-to-use formula should be stored in a cool place. Of course, also take into account the best-before date on the packaging.

How do I clean and sterilise the bottle?

- Rinse the bottle and teat under running water immediately after feeding. The longer you wait, the harder it will be to remove the milk residue.
- Thorough cleaning can also be done later:
 - Wash the bottle and teat with hot water and washing-up liquid. Do not forget the edges of the bottle and the screw cap.
 - Use a bottle and teat brush to get everything clean.
 - Rinse with clean water (without detergent).
 - You can also clean the bottle in the dishwasher.
 - Sterilise bottles and dummies.

There are different sterilisation methods. Sterilise the bottles once a day.

And further...

Babies need rest and regularity. If your baby cries a lot, this is especially important. Over-stimulation (by music, toys, etc.) can lead to even more crying. Every baby cries from time to time after eating or drinking. Comfort him/her by taking him/her in your arms and cuddling. You cannot spoil a baby... Remember never to shake a baby. This can lead to serious brain damage.

In hot weather, your baby may be more thirsty. If you are breastfeeding, your baby may drink more often. If you are artificially feeding, you may give your baby some water in between feedings. This water does not replace a feeding.

If you have diarrhoea, it is best to contact your paediatrician. We speak of diarrhoea when the stool consists only of water, i.e. when there are no solid particles in it or when it is much flatter and more frequent than normal.

If your baby has difficulty making bowel movements, you can give an abdominal massage to promote bowel movements. If trouble persists, it is best to contact your paediatrician.



04

More info on breastfeeding/bottle feeding

You can find more information on bottle feeding in Child and Family's 'breastfeeding' or 'bottle feeding' brochure and on their website www.kindengezin.be.

05

Medication

If your baby is still on medication at discharge, the paediatrician will inform you.

One of our midwives will teach you how to administer the medication correctly.

If the medication has to be given orally, it should never be added to the milk. It is best to give the medication directly into the mouth or with a spoon.

If the medication requires a prescription, the paediatrician will inform you and provide you with the necessary prescription.

06 Preventing cot death

Below you will find tips to help your baby sleep safely. By following these, you will be doing something to prevent cot death.

- Always put your baby to sleep on his **back**. If he is awake and you are nearby, he may lie on his tummy for a while.
- Clothing and bedding are best adapted to the room temperature. The ideal **room temperature** is **between 18 and 20** degrees for a child under eight weeks and 18 degrees for older infants.
- **Do not** use **down duvets or quilts**. These can cause overheating. Moreover, they slip easily over the nose and thus hamper breathing. Prefer thin blankets, so you can add or remove blankets as needed.
- Often, a **sleeping bag** will shelter your baby sufficiently. Make sure your baby cannot slip around in it. A combination of a sleeping bag and blankets may also be too warm.
- **Do not** use **a head protector or pillow**; they may obstruct breathing.



- For the first few months, it is recommended that the baby sleep **in your room with you** at night.
- Does your baby have a fever? Then cover him as little as possible or even not at all.
- Provide a **smoke-free environment**. Smoking around your baby increases the risk of colds, bronchitis, ear infections and asthma.
- Make sure the baby's room is **well ventilated**.
- **Never** leave your baby **alone with pets**.
- Never give your baby medication without a doctor's prescription. Be careful with cough syrups.
- If your baby has fallen asleep crying, check again that everything is fine.
- **Never** leave your baby **alone in the car**. If you are going on a long car journey, or if it is very hot, it is best to let him drink some water in between.
- Ensure **good regularity**. Do not disturb your child's peace and quiet.
- If your baby still sees some yellow, put him in front of the window at home from time to time. Daylight also breaks down that yellow colour.
- If you go for a walk, match your baby's clothes to the outside temperature. **Beware of foggy weather**.
- In the course of the first week at home, the Child & Family nurse will contact you, possibly visit you and provide further follow-up for your baby until the age of 2.5 years.

07**Discharge interview with paediatrician**

Discharge will be discussed with the paediatrician in a timely manner and may include additional investigations, a follow-up appointment with the paediatrician for monitoring, ...

You may be able to expect these documents:

- A certificate of stay of the newborn if the baby stays in an N* ward for more than 7 days (so it can be attached to the maternity leave);
- papers to be signed for insurance (to be brought by parents);
- the paediatrician's discharge form (with information on height, weight, medication...).

Consult a doctor immediately if:

- Your baby is not yet 6 months old and has a temperature of $\geq 38^{\circ}\text{C}$ or $\leq 36^{\circ}\text{C}$, and this for no apparent reason.
- Your baby changes behaviour, i.e. is unusually calm or excited.
- Your baby has diarrhoea (bowel movements consist only of water).
- Your baby moans.
- Your baby won't eat anything or vomits.
- Your baby has breathlessness.
- Your baby looks unusually pale, sweats unusually much or breathes noisily.

Notes

A series of 20 horizontal dotted lines for writing notes.

Questions?

In the first instance, contact your GP. If the GP refers you or cannot be reached, you can contact:

paediatrics secretariat
tel: 011 69 96 30

paediatrics (ward D2)
tel: 011 69 97 90

maternity (ward H1)
tel: 011 69 98 41

Child & Family Line
tel: 078 15 01 00

billing department
tel: 011 69 92 22

sint-trudo.be/en/departments/maternity

sint-trudo.be/en/departments/childrens-department-paediatrics



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