Welcome to the Neonatal Nurseries

Neonatal Intensive Care Unit (NICU)
Intermediate Care Unit (L2N)

We care for babies who are sick, premature, need surgery or have special needs.
# Inside this book

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Welcome!

The staff of the Neonatal Nurseries welcomes you and your baby to our nursery. Your baby is here because he or she needs special care from a highly skilled health care team. Our nurseries also have the medical equipment and technology that your baby needs.

As a parent, you have a special role. Your baby needs your love and care every day. During your baby’s stay in the hospital, your baby’s health care team will give you information, help and support. We will help you learn about your baby’s health and how to care for your baby. We encourage you to take part in your baby’s care as much as possible.
Family-centred care

The Neonatal Nurseries are part of McMaster Children’s Hospital at Hamilton Health Sciences. The care we provide reflects what matters most to our patients and families. We call this family-centred care.

Based on what patients and families have told us, we will:

**Communicate**
- Get to know you and your family and treat you with dignity and respect.
- Work together as a competent team.
- Communicate with each other and your family about your child’s care.
- Give you prompt feedback on your child’s progress.

**Collaborate**
- Ensure you understand the health concerns about your child.
- Partner with you in decisions about your child’s care.
- Help you learn skills to take part in your child’s care.
- Plan the next steps in your child’s care together.

**Respond**
- Respond promptly when you or your family need help.
- Include persons who are important to you in your child’s care.
- Provide a convenient, accessible, child-friendly, welcoming environment.
- Seek and respond to your family’s comments about our care.
Getting information about your baby

When can I see my baby?

You will be able to visit your baby usually within an hour of birth. Please come and stay with your baby as often as you can. You are very important to your baby and to your baby’s health care team.

The first time you come to the nursery, you will be given an ID band with your baby’s identification number. Please do not give this ID number to anyone else. When you use this number, the nursery staff will know that you are a parent. We want to make sure that only parents may enter the nursery at any time and are given private information about your baby.

How can I find out how my baby is doing?

When you are in the nursery, the nurse will talk with you about your baby. Please ask the nurse any questions you have about your baby’s health. If you are unable to be with your baby, we encourage you to call in.

From outside the hospital:
- 905-521-5025
- Toll-free 1-866-207-1971

From inside the hospital:
- Neonatal Intensive Care Unit (NICU) ext. 76146
- Intermediate Care Nursery (L2N) ext. 73753

Each time you CALL the nursery you will give:
- your name
- your baby’s full name
- your baby’s identification number – the last 4 numbers
No information about you or your baby will be given over the phone or in person to other family members or friends. We will tell people that only you, the parents, can share this information.

The nurse will arrange for you to speak with other members of the health care team. Team members can help you learn about your baby’s condition and care. They welcome your questions at any time.

We encourage you to take part in daily bedside rounds, where the health care team will discuss your baby’s plan of care.

**Coming to the nurseries**

**How do we enter the nursery?**

- **The nursery doors are always locked.**
- During the day, the business clerk will usually open the door.
- When the business clerk is away from the desk, use the phone on the desk at the entrance to NICU. The business clerk inside the nursery will answer the phone and open the door.
- When you go in, show your ID band to the business clerk at the South desk before going to your baby’s bedside.

**What is available for parents?**

- The family room has a closet for your coat, comfortable seating, a refrigerator, a microwave oven, and a children’s play area.
- Lockers for personal belongings.
- There is a quiet room for parents at the end of the entrance hallway.
- At your baby’s bedside there is a comfortable chair.

We want you to feel at home in the nurseries.
Visiting the nurseries

Who can visit my baby?

There may be times when we need to restrict visiting in the Neonatal Nurseries. Your nurse will let you know if this happens.

People who are special to you may visit during regular hospital visiting hours, from 11 am to 8 pm. For your baby’s safety we recommend that you limit the number of people who come into the nursery. Small, ill babies are more likely to get infections than adults or older children.

**Visitors must be age 16 or older and in good health.** Please tell your family members and visitors that we will ask them about their health before they can enter the nursery. We do this to protect the babies from getting sick. Their bodies are not strong enough to fight germs. Germs that may cause only a mild illness in an adult or older child may cause a serious infection in a premature baby.

**A parent needs to be with all visitors.** Only 2 people may come in to see your baby at any one time. This means that you can bring in one visitor at a time. Other visitors may wait in the family room, just outside the nursery.

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**We are a fragrance restricted hospital.**

Many people have asthma and other allergies. Please do not wear perfume, cologne, aftershave, scented hairspray or other scented products.
Can my other children visit?

Your children may come with you, if:

1. **They are healthy at the time of their visit.** Your children will not be allowed to visit if there is a chance they could spread an infection to others.

2. **Their vaccinations are up-to-date.** When your children arrive for their first visit, your baby’s nurse or the business clerk will ask about their health and vaccinations (immunizations). You will need to leave a copy of the most recent date of their vaccinations for DTP-PHib and MMR, and whether they have had chicken pox or been vaccinated against chicken pox. If you do not provide this information, your children will not be allowed to visit.

   If your child has recently been vaccinated it is not possible to visit for at least 21 days after the date of the vaccination.

   If your children have been exposed to chicken pox, let us know.

   **These precautions are very important for your baby’s health.**

   Brothers and sisters are welcome, but please, **no other children under 16 years of age.** During your children’s visit, please keep them with you so you can watch them carefully.
When are visitors not allowed into the nursery?

Your children, family members and visitors will not be allowed to visit if they have any of these problems:

- a rash, itchy skin or an infection on the skin or hands
- a cold, or a runny nose
- a cold sore, or feel a cold sore is starting
- diarrhea (loose or watery bowel movements) for at least 48 hours
- vomiting (throwing up)
- fever
- recent exposure to someone with chicken pox, measles or the flu

If your children have any of these problems, please call your baby’s nurse before you bring them for a visit.

If you are not feeling well or have a cold sore, talk with your baby’s nurse. You can decide together the best thing to do.

Are there special times for visiting?

Parents are not considered visitors. You are part of your baby’s health care team and are welcome in the nursery 24 hours a day.

Visitors will be asked to leave during shift change. Parents may stay at their baby’s bedside during report on their baby, but may be asked to leave during report on other babies. You can wait in the family room or go for a break.

Parents and visitors need to check with the business clerk at the reception area when they come to visit. The business clerk will check with your baby’s nurse to see if it is OK to go in at that time.
Can parents and visitors get a parking pass?

There is an hourly rate for parking with a daily maximum. You pay at the machines by the elevators when you leave the hospital. Day passes are available if you are going to be in and out of the hospital throughout the day.

If your baby is in the Neonatal Nursery for more than a few days, it will cost less to buy a 2-week pass or a monthly pass. Passes give you unlimited in and out privileges. Up to 4 vehicles can be registered on the same pass, but the pass can only be used for 1 vehicle at a time.

You can buy a parking pass at the Parking Office, in the red section of the parking garage, beside the Main Street exit.

For driving directions, maps and parking rates go to: http://www.hamiltonhealthsciences.ca/body.cfm?id=2714

For more information about the hospital’s parking services, call 905-521-2100, ext 75266.
Infection control

Patient safety is our top priority. To keep our patients safe we must do everything possible to prevent infections. The babies in our nurseries are not able to fight germs as well as a healthy child or adult. An infection that would only give you a mild illness could seriously harm a tiny or sick baby.

Cleaning your hands is the best way to stop the spread of germs and infection.

When you arrive at the nursery:

1. Roll up your shirt sleeves so that you are “Bare below the elbows”.
2. Remove all jewelry: rings, watches, bracelets.
3. Clean your hands with soap and water for at least 30 seconds.

For the rest of your visit, you may wash with soap and water, or use the alcohol based hand rub (if your hands are not soiled).

We encourage you to ask anyone who is going to touch your baby if they have cleaned their hands.

Protect your baby: Rules for all parents and visitors

- Bare below the elbows. No wrist watches, bracelets, rings (other than plain gold band), or other jewelry.
- No fake nails, shellac or chipped nail polish.
- No food or drink is allowed in the nursery, other than water in an unbreakable container or bottle with a closed top.
- No stuffed toys.
- Limit the number of visitors or family who touch your baby.
- Do not visit if you are feeling unwell.
Your baby’s health care team

A special team of people will care for your baby. You and your family are an important part of this team. Your baby’s health care team will provide accurate, up-to-date information about your baby. Team members will be happy to answer any questions or concerns you may have, and will help support you through your stay in the Neonatal Nurseries. Please speak with them whenever you need to. Together we can identify your baby’s needs and design a plan of care to meet those needs.

Here are the team members you may meet:

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<tr>
<th>Role</th>
<th>Description</th>
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<tr>
<td>Neonatologist</td>
<td>A pediatrician with special training in the care of very sick and premature babies. The neonatologist is in charge of (manages) your baby’s care.</td>
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<tr>
<td>Pediatrician</td>
<td>A doctor who is an expert in caring for children. The pediatrician is responsible for your baby’s medical care. Many pediatricians work in the L2N. They take turns being ‘on-call’, so that a pediatrician is always available.</td>
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<tr>
<td>Neonatal Fellow</td>
<td>Pediatricians who are getting more training in the care of sick and premature babies. They work in the NICU.</td>
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<tr>
<td>Resident</td>
<td>Residents are doctors who are learning about the care of sick children and premature babies. They are training to become pediatricians.</td>
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<tr>
<td>Nurse Practitioner (NP)</td>
<td>A nurse with advanced education and skills in the care of sick and premature babies, and their families.</td>
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<tr>
<td>Registered Nurse (RN)</td>
<td>The nurses who work in the NICU have training and experience in intensive nursing care of babies and their families.</td>
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<tr>
<td>Respiratory Therapist (RT)</td>
<td>The RT assists the nurses and doctors with the treatment and care of babies with breathing and lung problems.</td>
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| **Social Worker** | The social worker:  
- Can give you and your family practical and emotional support while your baby is in the hospital.  
- Works closely with the health care team to meet your needs, in hospital and when you are planning to go home.  
- Can help you get the resources you need to manage with a new baby. |
| **Pharmacist** | The pharmacist works very closely with the doctors and nurses to provide safe medication therapy. |
| **Occupational Therapist (OT)** | The occupational therapist can assess your baby’s development. An OT can plan activities for your baby to learn new skills. This can help overcome problems such as feeding difficulties, long-term hospital stays, and positioning care. |
| **Dietitian** | The dietitian works with the doctors and nurses to plan the best nutrition for your baby. The dietitian also helps mothers with breastfeeding support and advice about healthy eating. |
| **Lactation Consultant** | The lactation consultant is a specially trained nurse who can support and help mothers with breastfeeding. |
| **Network Leader** | Communicates and collaborates with the Neonatal Teams and our regional partner hospitals to support the transfer of babies to a community L2N when they no longer require NICU care at McMaster Children’s Hospital. |
| **Business Clerk** | The business clerk greets and directs families and visitors to the Neonatal Nurseries. The business clerk helps with telephone calls and mail, books tests and appointments for the babies. He or she helps make the arrangements for babies’ admission, transfer and discharge. |
Health Care Aide

The health care aide keeps equipment working, stocks the supplies at each baby’s bedside, and takes specimens to the lab for testing. The HCA may also help the nurse during procedures, or when taking your baby for tests.

Environmental Aide (EA)

The environmental aide helps to keep the nursery clean. The EA is the person who washes all the incubators and baby warmers.

Learners

As this is a teaching hospital, you may meet student doctors, student nurses and other learners on the health care team. Each student works under the close supervision of a fully trained health professional. With your permission, learners may be involved in your baby’s care.

Other members of the care team include:

- Clinical Manager
- Clinical Leader
- Clinical Nurse Specialist
- Child Life Specialist
- Education and Development Clinician
- Pharmacy technician
- Dietetic Assistant
- Pediatric Surgeon
- Pediatric Neurologist (brain specialist) or Neurosurgeon (brain surgeon)
- Pediatric Cardiologist (heart specialist)
- Pediatric Ophthalmologist (eye specialist)
- Pediatric Nephrologist (kidney specialist)
- Pediatric Hematologist (blood specialist)
- Neonatal Follow-up Clinic
- Public Health Nurse
- Data Management Specialist

If you have questions about patient care or nursery activities that your baby’s nurse or the charge nurse cannot help you with, please ask to speak with the Clinical Manager or Clinical Leader.

Every baby’s stay in the Neonatal Nurseries is different. While other parents may have had similar experiences, we ask that you refer to your baby’s health care team for the most accurate information.
Parent’s questions

What do parents feel when their baby is in the Neonatal Nurseries?

When a baby has a problem serious enough to require admission or transfer to the Neonatal Nurseries, parents will feel many emotions.

Parents may have spent months or years looking forward to the arrival of a healthy newborn baby. When their baby’s birth does not happen as they expected, they may feel grief, anger, guilt and an intense sense of loss. All these feelings are normal. It is also normal for parents to feel a loss of control as many health care team members provide care for their baby.

Social workers are available for any questions or concerns you may have.

How can I take part in my baby’s care?

During your first visits to the nursery you may feel anxious or unsure about what you can do to help your baby. The health care team will help you feel more comfortable and learn how to care for your baby. You are an important, valued member of your baby’s health care team. We encourage you to ‘partner’ with the people caring for your baby.

We will give you lots of information and support. To learn about your baby’s condition and care, the health care team will give you printed information. They welcome all of your questions.
How can I make my baby feel at home?

You are welcome to bring in personal items for your baby. Babies can usually wear their own socks and hats. If your baby is doing well, your baby can also wear his or her own clothes.

If you like, you can bring in flannel blankets and one small, washable, unbreakable toy for your baby. The toy cannot be placed inside the incubator because of the risk of infection. Please do not bring stuffed toys, as we cannot keep them in the nursery.

Please write your baby’s last name on any items you bring to the nursery so that there is less chance that they will get lost.

What if I need to make a difficult decision about my baby’s care?

Families and staff must make difficult decisions every day in the Neonatal Nurseries. Sometimes there are no obvious answers or easy solutions. There can be differences in opinions, values and beliefs.

The Ethics Consultation Service helps families and their caregivers reach common ground. A team of health professionals with experience and training in medical ethics runs the service. The team helps all those who are responsible make the best possible decisions about patient care.

Together they identify and clarify problems, explore implications and consider options.

While the Ethics Consultation Service may make suggestions, the final decisions rest with the families and caregivers.
The Ethics Consultation Service is free, confidential and available to all. The team can begin helping you within 48 hours of receiving your request.

You can contact the Ethics Consultation Service by asking any staff member to request an ethics consultation. Or you can call 905-521-2100 ext. 76443 and ask for the Clinical Ethics Consultant on-call.

Will our personal information be kept private?

We will protect the privacy and confidentiality of all the personal information you give us.

Information about your baby is shared only with you, the parents, and the other members of your baby’s health care team. The information is used to:

- plan care for your baby
- plan for future needs of all babies
- contact you for special Neonatal celebrations and events, such as the annual memorial service
- to keep statistics about babies

For a complete statement about our privacy practices, please see the poster found at the front desk of the Neonatal Nurseries, or go to the hospital’s website www.hamiltonhealthsciences.ca and select ‘Patients and Visitors’.

Hamilton Health Sciences is a teaching hospital. During daily teaching sessions called ‘rounds’, the health care team discusses the care of each baby. The team will make every effort to maintain privacy for each family. However, you may overhear these discussions. If you do hear something about another baby or family, please keep this information to yourself. Confidentiality for each family is important to us at McMaster Children’s Hospital.
Can I take pictures in the nursery?

You can take pictures and video of your own baby at any time. Our hospital policy requires that you get permission in advance from any other person you would like to photograph or video.

What can I post on my personal website?

You may want to post pictures of your baby on a personal website or a social networking site such as Facebook®.

To include a picture with anyone else from the nursery (such as a caregiver, another baby or another parent), you must have permission to take the picture and to post it on your website.

Help us protect the privacy of caregivers, patients and families; do not put pictures or names of other people on the internet without their permission.

Where can I stay to be close to my baby?

If you need to find a place to stay, please speak with a member of the health care team. There are a limited number of Bunkrooms and Care-by-Parent rooms available to the Neonatal Nurseries.

If you live more than a 45 minute drive away, the Social Worker may be able to arrange for you to stay at the Ronald McDonald House near the hospital – so you can be with your baby as much as possible.
Following your baby’s progress

Parents can follow their baby’s progress in the Neonatal Nurseries by using the ‘Discharge Planning Train’. The picture of the train at your baby’s bedside shows how your baby is doing in five areas: breathing, feeding, growing, jaundice and tests. Each area is shown as a coloured window on the train. As your baby’s condition changes, you can follow along by changing the colour of each car window.

The Discharge Planning Train

RED means that your baby needs intensive care in our nursery.

YELLOW means that your baby is stable and preparing for transfer or to go home.

GREEN means that your baby is doing well and is ready for transfer or to go home.

The colour of each window in your baby’s train depends on your baby’s condition and needs. The health care team has developed a list of the changes that need to happen for each colour change. You can help keep the windows up-to-date by talking with the health care team about the changes you see in your baby.

Each baby has different needs, so each train is unique. For some babies, the train windows change often. Other babies progress more slowly.

The train is meant to be a general guide to follow your baby’s condition. The health care team will give you specific information about your baby’s condition and plan of care. They welcome your questions at any time.
Will my baby be transferred to another nursery?

Yes, when your baby no longer needs the intensive care provided in the NICU, your baby will be transferred to an intermediate care nursery or to a hospital closer to your home. This type of nursery is usually called a Special Care Nursery (SCN), or a Level 2 Nursery (L2N).

Babies with complex needs may be transferred to one of the children’s wards on the 3rd floor at McMaster Children’s Hospital. Your Social Worker will arrange a tour of that ward before your baby is moved.

When a bed becomes available, your baby’s nurse will tell you the approximate time of the transfer. Your baby’s transfer could happen very quickly, sometimes in the late hours of the night.

The health care team will keep you informed about the plans for your baby’s transfer.

The transfer of a baby can be stressful for parents. Feeling both anxious and excited about the move is normal and very common.

Support for parents and families

If you would like to connect with another parent who has gone through a similar experience, please talk with the Social Worker.

Special infant CPR/choking sessions are available usually each month for parents wishing to learn this skill. Look for more information posted in the Family Lounge.
Health information on the internet

We encourage parents to learn as much as they can. Learning will help you understand your baby’s condition, make decisions with the health care team and take part in your baby’s care. The health care team will help, by talking with you, and giving you printed information to take home. The Social Worker also has a small library of books that you may borrow.

Finding information you can trust

Searching for information online can be challenging. There are so many websites and the information you find may not be accurate, complete or relevant to your situation. Some of the information may be hard to understand. Here are three questions to help you find good information.

1. Is the website a reliable source of information?

Find out who provides the information and runs the website. This information may be found in the ‘About Us’ section.

Look for:
- government and university websites
- websites of hospitals or health agencies
- website of professional associations such as the Canadian Pediatric Society
- the authors’ education, experience and how to contact them
- where the information comes from - facts should be backed up with references to medical research

Be cautious of:
- commercial sites ending with ‘.com’ that are selling products or services
- claims that seem too good to be true or facts without supporting evidence
- personal websites that give opinions and testimonials
- websites that ask for personal information or ask you to subscribe or pay to become a member

Don’t trust everything you read. Anyone can put information on the web and make it look ‘official’.
2. How up-to-date is the information?

Health information changes all the time. Look for the date at the bottom of the webpage to see if the information was recently updated.

3. Is the information clear and easy to understand?

Many websites provide detailed medical information. If you prefer information written in plain language, look for websites that are created for parents and families. For example, the Canadian Pediatric Society has a website for parents and caregivers called ‘Caring for Kids’.

If you are having trouble finding information that is easy to understand, ask a member of the health care team for help.

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<th>These websites can help you find good health information</th>
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<tr>
<td><strong>MedlinePlus</strong></td>
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<td>• Tutorial</td>
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<td>• Evaluating internet health information</td>
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<td>• A guide to healthy web surfing</td>
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<td><strong>Health On the Net Foundation</strong></td>
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<tr>
<td>• <a href="http://www.hon.ch/pat.html">http://www.hon.ch/pat.html</a></td>
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Recommended websites for parents

Internet health information can help you have an informed discussion with the health care team. Please talk about the information you find on the internet with your baby’s doctor or other members of the health care team. They know you and your baby, and can best answer your questions.

We would also like to know what websites you recommend for other parents.

You can also find support groups online. It may be helpful to share information and discuss concerns with others, but be cautious about taking advice from people you do not know. Before taking any action, talk with a member of your baby’s health care team.

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<td>Canadian Coalition for Immunizations Awareness and Promotion</td>
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<tr>
<td>• <a href="http://www.hamiltonhealthsciences.ca">www.hamiltonhealthsciences.ca</a></td>
<td>• <a href="http://www.immunize.cpha.ca">www.immunize.cpha.ca</a></td>
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<td>• Click ‘Patient Education’ on the left. Search by key word or select ‘View all’ for an alphabetical list of all our patient education materials.</td>
<td>Co-ordinated Access for Child Care in Hamilton</td>
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<td>• <a href="http://www.cps.ca/">www.cps.ca/</a></td>
<td>• <a href="http://www.cafcc.on.ca">www.cafcc.on.ca</a></td>
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<td>Canadian Pediatric Society</td>
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<td>• <a href="http://www.hc-sc.gc.ca">www.hc-sc.gc.ca</a></td>
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<td>Canadian Neonatal Network</td>
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<td>• <a href="http://www.caringforkids.cps.ca">www.caringforkids.cps.ca</a></td>
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### Breastfeeding

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<tr>
<td><a href="http://www.breastfeedinghelphamilton.ca">www.breastfeedinghelphamilton.ca</a></td>
<td><a href="http://www.prematurity.org">www.prematurity.org</a></td>
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### Rare diseases

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<thead>
<tr>
<th>Ontario Newborn Screening Program</th>
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<td><a href="http://www.newbornscreening.on.ca">www.newbornscreening.on.ca</a></td>
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<th>National Institutes of Health</th>
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<td>Office of Rare Diseases</td>
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Research and your baby

In the Neonatal Nurseries, we strive to provide excellent care to our tiny patients and their families. Research is a very important part of the work that we do. Through research, we learn new information about how to best care for babies.

Who does the research?

Doing research is part of the staff’s work at McMaster Children’s Hospital. All research studies are led by a qualified health care provider who works with a research team that may include doctors, nurses, therapists, dietitians, and other staff.

What kind of research is being done?

We do research in many different areas. We do research to find ways of improving nutrition, medication, and respiratory care for babies. We also do research to find ways of reducing infection. Some of our research implements new techniques and procedures. Our research often requires monitoring your baby more closely.

Should I allow my baby to take part?

It is your decision whether your baby will take part in research. Your choice will not affect the care your baby receives in the Neonatal Nurseries.

A research staff member may approach you before or after your baby is born, to talk about research that your baby could take part in. The research staff member will provide information, explain the study and answer any questions you may have.
Are there any risks to taking part in research?

All of the risks of a study will be explained to you, so that you can decide if the study is right for your baby. A study is not allowed in our nursery unless all risks have been minimized. All personal information gathered about you or your child will be kept confidential. All research in the Neonatal Nurseries is approved by the Hamilton Integrated Research Ethics Board.

We learn from babies….research helps bring better care.
Make your home smoke free

There are many things to think about before you bring your baby home. To protect your baby from possible harm, you will want to make your home as safe as possible. To ‘child-proof’ your home, consider the safety of your baby’s crib, change table and toys etc. We encourage you to also think about the safety of the air in your home.

If someone in your home is a smoker, protect your baby from the harmful effects of environmental tobacco smoke or ‘second hand’ smoke.

What is second hand smoke?

Second hand smoke is made up of:
- smoke from the end of a cigarette, cigar or pipe, and
- smoke that is inhaled by the smoker first, then exhaled into the air

Second hand smoke contains over 4000 chemicals. Some of them are associated with or known to cause cancer. There is no safe level of exposure to second hand smoke.

How does second hand smoke affect my baby?

Second hand smoke is harmful to everyone, but it is especially dangerous to your baby because his or her lungs and immune system are still developing.

Babies who breathe in second hand smoke:
- have a higher risk of dying from Sudden Infant Death Syndrome (SIDS)
- have more frequent infections of the ear and lungs (cough, pneumonia, bronchitis and croup)
- are more likely to develop asthma
- may have problems with thinking skills and score lower in tests
How can I protect my baby?

Talk with your family. Make a decision together to protect your baby by making your home and car smoke-free. It is helpful to tell guests and babysitters about your decision, before they come to visit.

Here are some suggestions as you plan for a smoke-free home:

- If there is a smoker in your home, strongly encourage that person to quit and help him or her to stop smoking. There are many resources available to help people quit smoking. Some are listed below.
- If the smoker is not ready to quit, ask him or her to smoke outside the house. You may need to insist, because your family’s health depends on this. It is not safe to smoke in another room as smoke can travel from room to room. Opening a window or using a fan does not help. It is still harmful to smoke in the house even if the baby is not there at the time. Smoke clings to clothes, curtains, carpet and other materials in the room long after someone has been smoking in the room.
- If you (or anyone caring for your baby) smokes, do not leave small children alone to go outside to smoke. Ask a neighbour to watch the children, or plan a walk or other outside activity and take the children with you.
- It is also important not to smoke in your family’s vehicle. The small, enclosed space of a car makes the amount of harmful chemicals much higher.

Where can I get more information?

- Talk with your doctor or pharmacist.
- Health Canada
  - [www.quit4life.com/index_e.asp](http://www.quit4life.com/index_e.asp)
- Canadian Lung Association [www.lung.ca/](http://www.lung.ca/)
- Canadian Cancer Society – Smokers’ Helpline
  - [www.smokershelpline.ca](http://www.smokershelpline.ca) or call 1-877-513-5333
Your notes and questions