

Welcome to Mount Sinai Hospital's Mother and Baby Program

We have put together this orientation presentation to help make your stay as comfortable as possible. Please let your health care team know if you have any questions or need clarification.

Introduction

It will take approximately 15 minutes to complete the following five sections:

1. Navigating Your Room
2. Navigating the Unit
3. During Your Stay
4. Newborn Screening
5. Caring for Yourself
6. Caring for Your Baby

Mount Sinai Hospital, part of Sinai Health System, has the largest obstetrics, gynaecology and neonatology program in Canada. There are approximately 7,000 births that take place at our hospital and we thank you for choosing Mount Sinai to share your new family's special journey.

Mount Sinai Hospital is a scent-free environment. Please do not smoke or vape on hospital property.

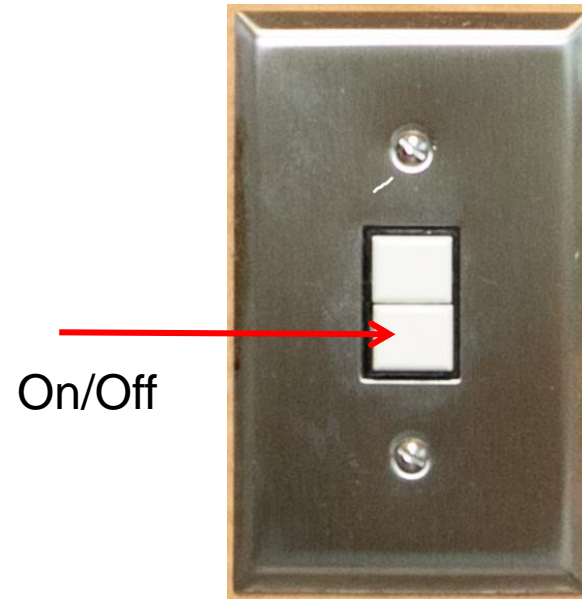
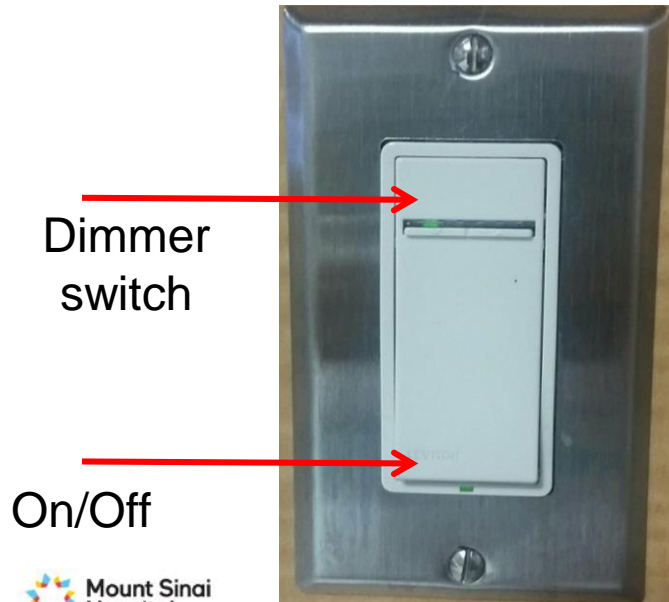
1. Navigating Your Room

Welcome to your room!

- We try our best to book your requested room accommodation (Private, Semi-Private, & Ward). If we were unable to meet your room request, we apologize and hope to do so during your stay as availability permits.
- We waitlist according to birth time, emergencies, and infection control. When your preferred accommodation becomes available, you will be notified by your primary Nurse.
- Any question regarding upgrades/billing and room cost can be discussed with the admitting department.

Adjusting the Lights

Each room may look slightly different. Let us know if you need any assistance.



Adjusting Your Bed

You can adjust your bed using the green panel located on the side.

Knees up/down



Head of bed
up/down

Using the Call Bell

Push the red button to call your nurse



****Note:** If you pull the call bell out of the wall, it becomes an emergency bell (i.e. for any emergency situation)

Adjusting the Lounge Chair

Pull out the tab and push the head of the chair back/forward to your desired recline.



Handle to pull foot rest



****Please do not sit on foot rest****

Your Bathroom

Emergency Cords: There are two red emergency cords in your bathroom. One is located in the shower and one is beside the toilet. Pull the cord for emergency assistance.



Soiled Linen & Garbage

- Please be mindful of where you put your used linens and garbage.
- A used linen hamper is provided for all used hospital linens. Please do not put any trash/diapers in this bin or any food trays on top.
- Make sure you do not accidentally throw out your infant's security badge.



Used linen Garbage
(including diapers)

Your Personal Belongings

- There is a small closet in each room for your belongings.
- Ask your nurse for the code to access the closet.
- Remember to clear the room of your valuable items for your stay and at discharge.
- Patients are responsible for their own belongings

Using the TV to watch the Discharge Class

For instructions on how to use this TV for watching the Discharge Class, follow the instructions provided on the TV set.



2. Navigating the Unit

The Family Lounge and Kitchenette

- You can find a small lounge and kitchenette in room 15-355, 16-353, and 17-208.
- An ice machine, microwave, kettle and fridge are available for your use.
- Please use a label and date all food items you put in the fridge or freezer. If not label is there please see the desk clerk for a label and pen.
- Remember to bring your leftovers home or place them in the garbage.



Food Trays

If you are finished with your food tray, place your tray on the rack in the hallway in the middle of the unit.



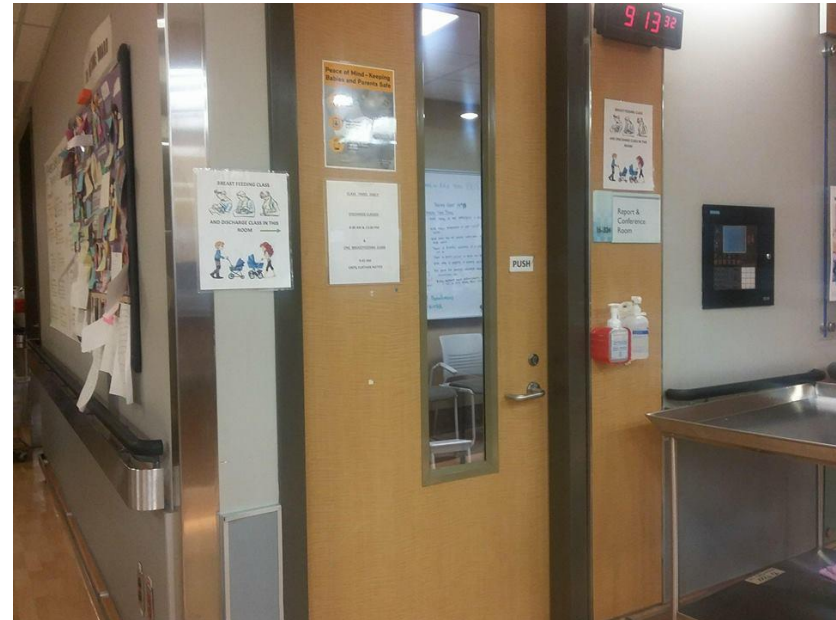
Support Person Bathroom

- If you are in a private room, your support person may use your bathroom.
- If you are in a semi-private or ward room, they may use the bathroom available on the unit.
- Please do not use facilities marked “Staff Only”.



Breastfeeding & Discharge Classes

- Classes are held across from the nursing station, room 16-324.
- There is also information available on this TV 24/7.
- Please check with your nurse or your bedside patient information timeline to see which class time you should attend.
- Prior to your discharge, watch the discharge video on this TV or attend a discharge class.



Leaving the Unit

- Babies are to remain on the unit until you have been discharged home.
- If for any reason you want to leave the unit before that time, please ensure an adult is watching your baby for you, and sign IN/OUT at the nursing station.
- If you or your support person have to leave the unit, you should keep your Baby Identification wristband on to help us identify you and maintain infant security.



3. During Your Stay

What You Should Know About Infant Security

- A security badge should be on your baby's ankle while on our unit.
- The security badge will alarm if anyone takes the baby off the unit before your baby is discharged.
- If the badge is missing or has fallen off, please let your nurse know so it can be replaced.
- The badges are the property of Mount Sinai Hospital, and should not be taken home.



What You Should Know About Infant Security

- Never leave your baby unattended.
- Make sure I.D. bands are on yourself and your baby.
- Check that staff entering your room are wearing their hospital badge.
- Place your baby in the bassinet when walking in the hallways. You can carry your baby in your arms while in your room.
- To keep the hallways clear, have someone bring the bassinet back to your room when you are attending a class.
- Please be aware of anyone walking in the hall without a badge, as this is a breach of our infant security.
- All our units are locked. Use the phone in the hall for access into the unit.

Patient Code of Conduct

We ask that you:

- Are respectful and courteous to all staff, students, other patients, and volunteers.
- Respect the rights, property, privacy and diversity of all, including other patients and their families.
- Ask questions when unsure or need clarification.
- Use appropriate communication with our interdisciplinary team.

The security, privacy, and confidentiality of all patients, staff, and volunteers is important to us and we ask that you seek consent before taking photos, filming and/or sharing on social media

Inclusive Space

- Sinai Health System is committed to providing an inclusive environment where all patients, support persons and visitors are welcomed, and treated with dignity and respect.
- Let your health care team know how you would like yourself, your support person(s) and/or your baby addressed.
- If you require an accommodation, please let your nurse know.



Purchasing Additional Supplies or Food

RioCan Food Hall (Aroma Espresso Bar, Bar Burrito, Freshly Squeezed, King David, Me.Va.Me, Thai Express and U-Naru Express)	The Sinai Baby Shop	Second Cup	Gift Shop - IndigoSpirit	Rexall Pharmacy
Location: Main Floor, Murray Street entrance	Location: 17th floor, University Elevators	Location: Main Floor, University Elevators	Location: Main Floor, University Elevators	Location: Main Floor, University Elevators
Hours of Operation: Varies for each vendor however many are open Monday to Sunday, from morning to late evening	Hours of Operation: Monday to Friday, from 11 am to 3 pm or by appointment	Hours of Operation: Monday: Opens at 6 am Tuesday to Thursday: Open 24 hours Friday: Closes at 9 pm Saturday and Sunday: Open 6 am to 9 pm	Hours of Operation: Monday to Friday: 8 am to 8 pm Saturday and Sunday: 11 am to 5 pm	Hours of Operation: Monday to Friday: 8 am to 8 pm Saturday: 10 am to 6 pm Sunday: 11 am to 6 pm
				

Visiting Guidelines – Family Presence

- A primary support adult person is invited to stay 24 hours a day.
- Please help us create a restful environment for new families. The visitors lounge is a good place to go if your roommate is resting and/or you have more than two guests.
- Please have all your family and visitors practice hand hygiene by proper hand washing or sanitizing prior to holding the baby.

Transfer of Accountability at Nursing Change of Shift

- Nursing change of shift is at 7:30 a.m. and 7:30 p.m.
- The transfer of patient information is at the bedside, you may want to ask your visitors to pause outside the room.
- If you do not wish to have your transfer of patient information at the bedside please let your nurse know.

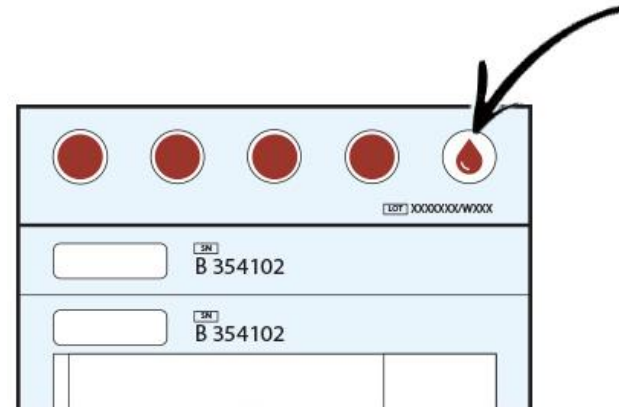
Discharge Home Time

- It is important that you start planning for your discharge as soon as you arrive in your postpartum room.
- Expect to be discharged home:
 - 26 hours after a vaginal birth
 - 36 to 48 hours after a cesarean birth
- Please be packed up and ready to go by 10:00 a.m. on your discharge day.

4. Newborn Screening

Newborn Screening Ontario

- Newborn Screening Ontario is a test done 24 hours after birth to screen for treatable diseases that usually show no symptoms in the newborn period.
- A small sample of blood is taken from the baby's heel between 24 to 48 hours of birth.
- The sample of blood is dropped onto a special type of paper on the newborn screening card.
- The sample is screened for over 25 diseases.
- Results are sent to the hospital or midwifery practice that did the test. You can request that results are sent to your baby's health care provider at www.newbornscreening.on.ca.



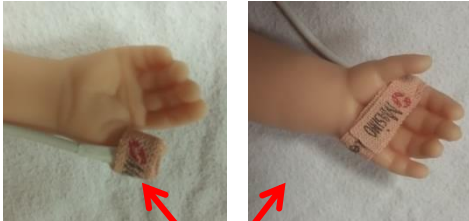
Bilirubin (Jaundice) Test

- Jaundice is a common newborn condition caused by a build-up of bilirubin. Bilirubin is a waste product in the body that may not be filtered out well by the newborn's immature liver. It is shown by a yellowing of the whites of the eyes and skin.¹
- Jaundiced babies may be very sleepy and not feed well.¹
- Similar to the Newborn Screening, a sample of your baby's blood is taken from the heel and is be tested for bilirubin levels at 24 hours of age.
- If the level is high, the test may need to be repeated or your baby may need to be treated. Your health care provider will discuss this with you.

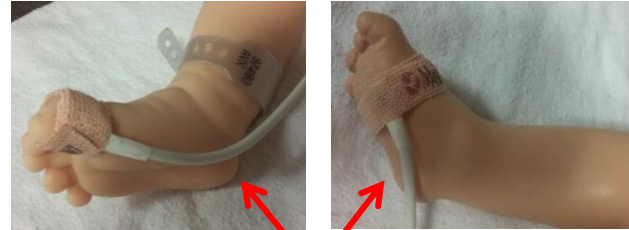


Critical Congenital Heart Disease (CCHD)

- Congenital Heart Disease is a condition that occurs when a baby's heart or major blood vessels have not formed properly.
- To screen for CCHD, the nurse will check your baby's oxygen saturation using a probe on their right hand and one of their feet. This is a painless routine screening done after 24 hours of age.²



Right hand application sites



Foot application sites

Weight Checks

- Your baby will have their weight checked daily to ensure they are healthy, hydrated, & feeding well.
- A certain amount of weight loss in the first few days of life is normal.³
- Your baby should begin gaining weight by day four and be back to their birth weight by 10 to 14 days of age.³



5. Caring For Yourself

Caring for Yourself

For information on caring for yourself, the discharge video saved on this TV includes information on pain management, self-care and more.



Care Timeline

YOUR GUIDE	FROM BIRTH TO 2 HOURS AFTER BIRTH	2 HOURS TO 4 HOURS AFTER BIRTH	4 HOURS TO 12 HOURS AFTER BIRTH	12 HOURS AFTER BIRTH TO DISCHARGE
Treatments or Procedures	You may have an IV If you have a catheter, this will be removed You may have ice packs , if needed Epidural will be removed, if applicable ID bracelets and newborn security bracelet will be applied to your baby	You and your baby will be transferred to the postpartum unit. Upon transfer, you and your baby will be assessed again Ice packs may continue, if needed	IV may be discontinued, if applicable If required, you will have bloodwork done	Your baby's blood work, drawn via heel prick, will include jaundice testing and newborn screening If required, you will have bloodwork done Baby's cord clamp will be removed Baby will have a hearing test
General Care	Baby will be placed immediately skin to skin Your nurse will assess you and your baby on an ongoing basis	You and your baby will be assisted with a supportive wrap to continue skin-to-skin care and transferred to the Mother Baby unit. Once transferred to the Mother Baby unit, you and your baby will be assessed again	You and your baby will be assessed once per 12 hour shift, or more if required You should be passing urine without difficulty If able, you may shower Let your nurse know if you have any concerns	Baby will be checked, this will include weight You will be checked once per 12 hour shift It is encouraged to practice skin-to-skin frequently
Medications	You: Regular and routine pain medication will be given, let the nurse know if you continue to have pain Oxytocin will be given to help contract uterus and control bleeding Baby: prophylactic antibiotic ointment will be applied to the eyes and an injection of Vitamin K given for blood clotting	Your pain should be controlled with pain killers, inform nurse if pain not managed.	Your pain should be controlled with pain killers, inform nurse if pain not managed.	Your pain should be controlled with pain killers, inform nurse if pain not managed. You may be given a stool softener If you are Rh negative, you will be given an Rhogam injection prior to discharge If you are not Rubella immune, you may be given a Rubella vaccination
Drinking, Eating, and Activity	Your usual diet continues and You may ambulate as tolerated	Your usual diet continues and You may ambulate as tolerated	Your usual diet continues and You may ambulate as tolerated	Your usual diet continues and You may ambulate as tolerated
Emotional Support				
Teaching	You will be supported with your infant feeding choice Infant security will be explained Bottle feeding assistance will be given, if applicable	You will be taught how to bathe your baby, cord care, and how to take your baby's temperature You will be shown how to change your baby and record wet and dirty diapers	Infant nutrition information and support will be given, as applicable Information regarding community resources will be given	You may attend breast feeding class You may attend discharge teaching class
Getting Ready To Go Home		"Taking Care" patient information booklet will be given and explained Your baby's OHIP card form will be given and explained Birth Certificate form and information given	You will review contents of the taking care information booklet and go over any questions with your nurse	You and your baby will need discharge orders from your doctor Your baby's OHIP card form will need to be completed and returned Your baby's security bracelet will be removed prior to discharge Follow up appointments booked for mom and baby as necessary

6. Caring For Your Baby

Skin-to-Skin Benefits

- With baby only in a diaper and you or your support person with a bare chest (no bra), place baby's chest against your chest. A cover may be placed over the baby's back.
- Benefits of skin-to-skin may include⁴:
 - Calmer baby, less crying
 - Stable temperature, heart rate, breathing and blood sugars for baby
 - Increased breast milk production
 - Bonding
 - Better awareness of baby's feeding cues
- There is no limit to the amount of time spent having skin-to-skin contact.








Infant Feeding

- Let your healthcare team know how you plan to feed your baby, so we can do our best to support you.
- Exclusive breastfeeding is recommended for the first 6 months of life.⁵
- Newborns need to feed at least eight times in a 24 hour period.³
- Breast milk and/or breastmilk substitute provides all the nutrition and fluids your baby needs in the first six months of life. This means your newborn does not need water.⁶ Vitamin D may be started on day one, please talk to your babies healthcare provider.
- Let your nursing team know if you have made a decision to feed breastmilk substitute to your baby. The nursing team will share some resources with you so that you are able to feed your baby safely and with confidence.
- Ask your nursing team about the signs that your baby is getting enough breastmilk.

Infant Feeding

- If you plan to exclusively breastfeed, we will support you to achieve this goal, and the best way to supplement is to express your own breastmilk.
- Hand expressing your milk into a spoon or small cup can work better than a pump, especially in the first few days.
- For supplementation volumes, follow your baby's hunger/satiation cues to determine when baby needs more or has had enough. There may be a medical reason to supplement.
- The steps outlined on the Feeding Timeline in your room will help guide you, and your nurse and/or Lactation Consultant will support you with expertise and skill.
- There is a Lactation Consultant that can answer your questions and give your guidance. Please watch the video, attend a class, and/or request consultation.
- In most cases you can follow your baby's hunger/satiation cues to determine when baby needs more or has had enough.

****Note:** If you plan to breastfeed, always breastfeed first before supplementing. If there is a medical reason to supplement, the best way to supplement is to express your own breastmilk. If you are having difficulty expressing milk, please speak with your nurse.

Your Baby's Age	0 to 6 hours	6 to 12 hours	12 to 24 hours	24 to 36 hours	36 to 48 hours
Tummy volumes:	size of a cherry 	size of a cherry 	size of a cherry 	size of a cherry 	size of a walnut 

Above: Image of your baby's tummy size in the first 48 hours of life.

Hand Expression

1. Wash your hands with soap & water.
2. Get a clean spoon or cup.
3. Apply heat to your breast with a wet washcloth & gently massage breasts.
4. Place thumb and first finger approximately two finger-widths away from the nipple on each side. **See Image 1.**
5. Press back into your chest. **See Image 2.**
6. Compress breast, relax fingers, repeat steps 4 to 6. **See Image 3.**



Image 1



Image 2

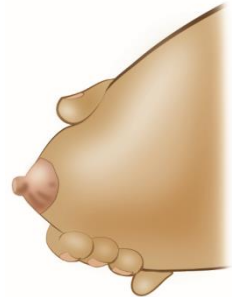


Image 3

Baby's Second Night

- Newborns tend to be sleepy on day one, but wake up more on day two and need a lot of comfort.
- Skin-to-skin contact and breastfeeding on demand will help comfort your baby.



Burping

- Hold your baby upright at your shoulder or in front of you with the head and body well supported.
- Rub upwards and/or pat your baby's back to help air move up.
- If your baby is gagging or choking (i.e. on milk or mucus), always pick your baby up immediately and do the same motion to help them clear their airway.



Safe Sleep Guidelines

- Always place your baby flat on their back to sleep, in a bassinet or crib with a firm infant mattress and no loose items (i.e. blankets, pillows, toys).⁷
- Swaddling is not recommended – the blanket may become loose or your baby can overheat, this can potentially increase the risk of SIDS (Sudden Infant Death Syndrome).⁷
- Dress your baby in fitted one-piece sleepwear. A properly sized sleep sack can also be used.⁸

Diapering

- Your baby may need to be changed 8 to 10 times a day. A good time to check the diaper is before and after feedings.
- To change your baby's diaper⁹:
 - Wash your hands before and after.
 - Always keep one hand on your baby and never leave your baby unattended.
 - Wipe from front to back using a clean, wet, and warm washcloth or unscented baby wipe.
- Allow the diaper area to air dry. Using baby powder to keep the diaper area dry is not safe for newborns as it can get into their lungs.
- If your baby has a diaper rash that does not go away in a few days, your baby may have a yeast infection or other condition and may need a medicated cream.

Car Seat Safety

- Please read the instructions that come with your car seat to secure your baby. Install the base in your car according to the manufacturer's directions.
- The base should not be brought in to the hospital with the car seat.
- Prepare your car seat by adjusting and ensure the following¹⁰:
 - Height of harness straps is at or just below your baby's shoulders
 - Your baby is sitting up straight
 - Chest plate is at the level of the baby's arm pits
 - Only one finger should fit between baby and straps
 - You may roll up your own blankets and place one on each side to keep baby snug
 - Do not place anything under your baby that did not come with the car seat
- At discharge, ask your nurse to check if your baby is safely in the car seat. Only you can adjust the car seat and put your baby in the car seat, the nurse will check if it is correct.



For Additional Information:

- Ask members of your healthcare team if you have questions or concerns.
- The booklet you have been provided with is also full of useful information to help take care of yourself and your little one.



Taking Care
Information for Parents

We want to hear from you!

- Feedback about your care and safety at our hospital is important to us. It helps us to strengthen care, share your compliment, and address your concern.
- To share your feedback, please contact:

1. Patient Relations Program

Mount Sinai Hospital
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208A, 2nd Floor, 600 University Avenue
Toronto, Ontario M5G 1X5
T: 416-586-4800 x 5066
F: 416-586-5280
patientrelations@sinaihealthsystem.ca

2. Nursing Unit Administrator

Angela Leslie
T: 416-586-4800 x 2623
647-621-2320
angela.leslie@sinaihealthsystem.ca

References

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We hope you enjoy your stay with us!