



GOING HOME FROM HOSPITAL AFTER YOUR BABY IS BORN

Bringing your new baby home can be exciting but it's busy and demanding too. It's normal to feel overwhelmed sometimes but there are a number of things that you can do to help you and your family enjoy the early weeks at home.

Discharge from hospital

If all is going well with you and your baby, you will be able to go home from six hours after the birth.

Morning discharge time is 9.30am. Please arrange to be collected from the hospital at this time. It may be helpful for your partner or another support person to take any flowers and gifts home the night before discharge so that you can concentrate on yourself and baby in the morning. If you are unable to be picked up at the discharge time, you may be asked to wait in the patient lounge while we arrange accommodation for new admissions.

Before you leave the hospital make sure you have:

- » any medicines that the doctor has prescribed
- » any x-rays that you may have bought in
- » a medical certificate if you require one
- » a letter for your GP and your hand-held record
- » CentreLink and baby registration forms, including Notice of Birth for Mother
- » Baby's Green Book.

Remember if you are going home in your own car, you will need to have an appropriate child restraint fitted. (Visit the VicRoads website <http://www.vicroads.vic.gov.au> or ask your midwife for the VicRoads Child Restraints brochure).

If you, or the medical and midwifery staff feel that you may need extra assistance to recuperate when you are at home, a formal assessment will be done in hospital to give you access to services such as homecare, respite childcare and Meals on Wheels. This assessment will be done after the birth of your baby.

A visit at home

You will be offered a midwife (domiciliary) visit at home to make sure you and your baby are both well and settling in. Before you leave the hospital make sure you have spoken to a midwife to arrange this. You should also confirm your home address or the address where you will be staying if you are not returning to your usual place of residence.

Maternal and Child Health Nurse

The maternal and child health nurse will visit you at home within the first two weeks. The nurse will assess you and your baby and organise subsequent visits at the maternal and child health centre.

Your 6-week check up

We recommend that all women have a 6-week check-up with their GP after the birth of their baby. This is important to ensure that your body has returned to its pre-pregnancy health. It is also an opportunity to develop an ongoing relationship with your GP and your new baby, and to discuss ongoing health concerns such as contraception and pap smears.

Settling in at home

All new parents need support, especially if they're single or have no family close by. Don't be afraid to ask for help. You can contact your maternal and child health nurse, or speak to your domiciliary midwife about services available in your area.

Here are some other tips to help with the transition from hospital to home:

- » Joining a new mothers group and/or attending your Maternal and Child Health Centre are good ways to meet other new parents and share ideas and suggestions.
- » Include your partner in the routine care of your baby, such as bathing and changing. It's good for everyone: it helps your partner get to know your baby; gives you a break; and helps your baby feel close to both parents. It's okay if your partner does things in a different way to you.
- » Don't forget to look after yourself:
 - You can start pelvic floor exercises as soon as your baby is born. Try to get into the habit of doing them throughout the day. Do try to make time for your exercises if you have abdominal muscle separation. Factsheets on both of these exercises can be found on the Women's website.
 - If you have a caesarean wound or perineal stitches, take painkillers such as paracetamol as needed and keep your wounds clean. Wash your hands before and after going to the toilet to minimise the risk of wound infection.
 - Keep housework to a minimum (looking after yourself and the baby is more important). Family and friends often like to help with housework and cooking as a 'welcome' gift.
 - Save energy by sitting down to do things like changing nappies or folding laundry.
- » Most women can breastfeed successfully and breastfeeding is best for your baby. Your maternal and child health nurse can help. If you do find that you are having problems you can contact the Breastfeeding Service on (03) 8345 2400.

Common questions about newborns

The baby's cord

Your baby's cord will drop away from the belly button in one to two weeks. Until then, clean the cord daily after your baby's bath. Clean around the base of the cord and along the stump with a clean cotton bud. Don't use creams or powders on the cord. Fold your baby's nappy down so it doesn't cover the cord. This helps the cord stay dry.

Rashes

Nappy rash makes the baby's bottom red and sore.

You can help prevent nappy rash by:

- » changing nappies often
- » washing and rinsing cloth nappies thoroughly
- » leaving your baby's nappy off for a while each day
- » washing your baby's bottom with water only or with perfume- and alcohol-free baby wipes.

The best nappy rash treatment is zinc and castor oil cream. If the rash doesn't get better, tell your maternal and child health nurse or your doctor.

Rashes on the face

Rashes on the face are common in babies at around four weeks, and may affect the body too. They usually go away after a couple of weeks. If you're worried, talk to your maternal and child health nurse.

Baby's stools

Breastfed baby's stools (poo) are normally greenish-yellow. Formula-fed baby's stools are more yellow and formed. See your doctor if the baby's stools:

- » are watery
- » have a very bad smell
- » have blood in them.

When to see a doctor

Following the birth of your baby you will receive the *Parent Guide for the First Week of Life*. In this guide we outline the reassuring signs of a healthy newborn baby and the signs of a baby who may be sick. It includes information on what to do and who to contact if your baby seems unwell or your instinct tells you something is wrong.

If you are worried about your baby, your maternal and child health nurse can usually help. See your doctor if your baby:

- » has a fever – a temperature over 37.5°C (taken with a thermometer under the arm). Some babies with a fever become hot, flushed and upset. Others are pale and floppy
- » has redness around the belly button
- » seems sick
- » has a big drop in appetite.

Reflux (regurgitation)

Reflux is when the baby brings up a small amount of milk after a feed. It's common in young babies, and usually not a problem. Babies generally grow out of it between six and twelve months. See your doctor if your baby brings up a lot of milk and doesn't seem to be growing well.

A growing family

A new baby means some major changes for the entire family. Children can be excited, loving and caring about a new brother or sister or they can be jealous, aggressive and difficult. After the baby is born:

- » involve your child in caring for your baby
- » spend some quality time with your other children every day
- » praise your child for being gentle with the baby
- » plan ahead to prevent problems at feeding times
- » try to be consistent and stick to a routine.

If you have pets, you should consider preparing them for the new addition to the family. (Ask for the *Kids and Pets Brochure* produced by the Royal Children's Hospital)

Further information

Maternal & Child Health Line (24 hours)

Tel: 13 22 29

Australian Breastfeeding Association

Tel: 1800 686 268 Breastfeeding Helpline

Web: www.breastfeeding.asn.au

24 hour Nurse-On-Call

Tel: 1300 606 024

Web: www.health.vic.gov.au/nurseoncall

The Royal Children's Hospital

Web: www.rch.org.au

PANDA (Post & Antenatal Depression Inc)

Tel: 1300 726 306 Helpline

(10am–5pm Monday to Friday)

Web: www.panda.org.au