

CW WIEBE MEDICAL MATERNITY PROGRAM

at the Hospital

What to pack in my hospital bag



Mom

- ♣ SIN (Social Insurance Number) you will need to add your number on the birth registration before discharge
- ♣ PJ's/ sleepwear Instead of a hospital gown if you wish
- Comfy clothes to wear in hospital/ for going home in
- ♣ Toiletries- (hospital supplies basic soap/ shampoo)
- ♣ Slippers or flip flops
- Phone charger
- Music/ game or cards/ activity/ I-pad/laptop
- **♣** Wallet- cash/ coin for vending machine after cafeteria closes. Debit and ATM in cafeteria
- Own water bottle If desired but not required
- ♣ Extra snacks/ food for partner (patient will get regular meals) (Take-out food Is permitted and can be delivered to hospital)
- Bathing suit for laboring in shower if desired although not required
- Magic bag for heat/ comfort to warm up in microwave If desired
- ♣ Transcutaneous electrical nerve stimulation (TENS) is a method of pain relief involving the use of a mild electrical current. A TENS machine is a small, battery-operated device that has leads connected to sticky pads called electrodes.

Items supplied by Hospital

- Linens, pillows, towels, soap, and face cloth for patients as well as for partner who is rooming in.
- Birthing ball, peanut ball
- Hospital gown while laboring and nursing gown postpartum
- ♣ Nipple cream/ breast pads
- ♣ Stretchy/ mesh postpartum panties, pads
- Baby bassinet, sleepers, blankets, diapers, cloths/ towels, baby soap, formula
- Meals and water provided for patient
- Medications ordered for client supplied by hospital
- Basic hair blow dryer

Less is more! The less you bring = the less you need to bring home!

Baby

- Outfit/ hat/ blanket for going home in
- Car seat can leave in car until discharge
- ♣ Wipes if desirable but hospital does supply wash cloths for diaper changes

Birth Plan

A birth plan can help you to prepare for the delivery. Some individuals will prepare a document, but don't feel that it is a necessity! We will be asking you questions when you arrive at the hospital so that we can best support you and your experience.

Before labour, we would encourage you to think about the following:

- 1. Who is my support person, and what is expected of them? (e.g., massage, positive affirmations, creating a music playlist)
- 2. How do I respond to pain, and what techniques are effective for me? (e.g., breathing, water, distraction, medications)
- 3. What can help me to feel safe and empowered? (e.g., comforting items, music, birth plan document)

In addition, Boundary Trails Health Centre Obstetrics advocates for the following:

- vaginal delivery
- spontaneous labour
- induction when medically necessary
- intermittent doppler monitoring of the baby; if it is medically necessary, the baby should be monitored throughout labour ("continuous monitoring")
- upright positioning, especially in early labour
- pushing position dependent on your preference and effectiveness
- delayed cord clamping for 1-2 minutes, early clamping only if baby is not responsive (and the support person will be offered to "cut" the cord unless an emergency)
- injection of oxytocin into the muscle at delivery (WHO recommendation, this helps to decrease your blood loss)
- placenta will come on its own, but sometimes we will have to help by gentle pulling, (frequently the placenta will sit in the vagina otherwise!)
- ➡ Vitamin K injection for the baby (Canadian Pediatric Society recommendation)
- ≠ episiotomy, operative vaginal delivery (vacuum, forceps) is not done routinely
- skin to skin with the baby starting as soon as baby is born. We recommend uninterrupted for the first hour (even with a c-section we will try to do this!)

As mentioned above, this will all be discussed with you at the hospital as well!

Pain control in labour

At Boundary trails, the following treatments are available to you if you wish:

- 👃 nitrous gas ("laughing gas") that you breath in through a mask
- ◆ sterile water injections via a small needle into the skin of your back
- opioids:
 - o Long acting (2-3 hours or more) morphine through an intravenous ("IV") or into your muscle
 - Short acting (20-60 minutes)- fentanyl through an intravenous ("IV")
- epidural through a catheter that is inserted near your spinal column by an anesthesia specialist doctor

Note! A "spinal" is typically only used for c-sections. This is an injection of medication into the spinal column space that wears off after 1-2 hours.

There are many other ways of managing pain in labour:

- listening to music, meditation, or words of your support person(s)
- stretching, walking, squatting, and other positions
- **↓** using water → every labour room has its own shower (there are no tubs)
- **↓** using a birthing ball or peanut ball —→we have lots of these at the hospital
- massage, TENS machine, pressure on your hips or back by your support person(s) ("counter pressure")
- ♣ anything else that can distract your mind! (e.g., melting chocolate in your mouth, focusing on an object in the room, reading, watching a video) ▶ each room has a TV which is available to rent for access to cable channels.



Ready to welcome baby!