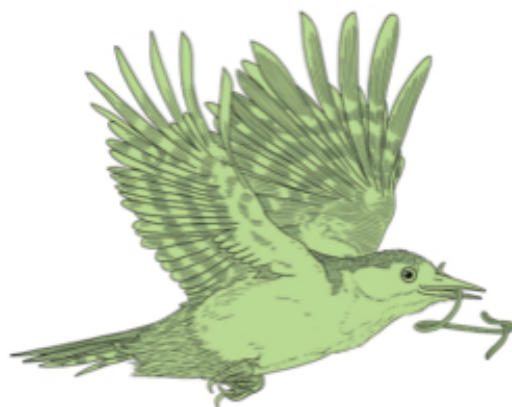


NEONATOLOGY DISCHARGE BOOKLET



Discharge booklet Neonatology

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Your baby is ready to go home

The big day is coming - your baby is going home! To help you prepare, we are providing this leaflet with the latest information and useful tips for the first days at home. Please take the time to read this leaflet carefully. If you have any questions or concerns, you can discuss them during the discharge meeting with the nurse before you leave the hospital.

Discharge arrangements

In consultation with you and the department, we will agree on the date and time of discharge. Before going home, you will have the opportunity to bathe and feed your baby at the hospital.

Questions after going home?

If you have any questions or concerns once you're home, please feel free to call us during the first week after discharge. We prefer calls during office hours so that we can consult the pediatrician if needed.

We wish you all the best as you start this new chapter with your baby!

Nurses, Child & Youth Department



Rooming-in with your baby before discharge

We offer you the opportunity to room in with your baby for 24 hours before discharge. During this time, you can stay in a room with your baby and care for them independently. This includes activities like bathing, feeding, learning how to prepare food, and staying overnight. It will also give you the chance to get used to your baby's sounds and movements.

The advantage of rooming-in is that if you have any questions or encounter any issues, the nurses are nearby and available to help. If you'd like to make use of this option, please let the nurse on the ward know.

Visit to the consultation office (Centrum Jong)

Even if you have regular check-ups with the pediatrician, it is still a good idea to visit the consultation office with your baby. In most cases, the district nurse will contact you in advance to schedule an appointment for this. If you haven't been contacted, please reach out to them directly. You can call the general phone number at (075) 651 83 40. To find a location near you, please visit:

www.centrumjong.nl .

Maternity care after discharge

If your baby is discharged within 8 days of birth, you are still entitled to maternity care. In the case of premature babies, extended maternity care may also be available. For more information about your options, please contact your health insurance provider.

Information at discharge

When your baby is discharged, you will receive the following information (if applicable):

- An appointment with the nurse specialist at the outpatient clinic. If needed, the nurse specialist will consult with the pediatrician.
- A prescription for any medicines, food, or supplements your baby may need.
- Breastfeeding advice, including a booklet and additional tips for breastfeeding after discharge.
- Authorization for special nutrition (for insurance purposes).
- The neonatal screening envelope (heel prick).
- Any stored breast milk we have for you. It's helpful to bring a cool box on the day of discharge.
- A form requesting your permission to share information with the child health clinic.

Most babies who have been admitted to the ward will return to the aftercare clinic about a week after discharge and visit the regular pediatrician after a few weeks.

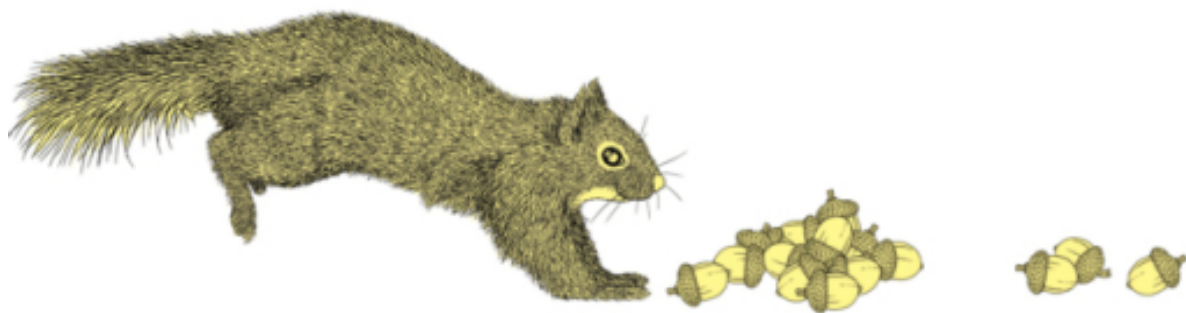
As there are often additional questions or concerns in the early days, we will continue our care at the outpatient clinic. Your baby will be seen regularly by the pediatrician at the pediatric outpatient clinic (if needed).

The pediatrician, along with your GP and the child health clinic doctor, will provide care regarding nutrition, illnesses, vaccinations, and growth. After discharge, a digital discharge letter will be sent to your GP so they are informed about the reason for and course of your baby's admission.

During the consultation hour, you can discuss any questions or uncertainties regarding your baby's care. We will also weigh and measure your baby.

Discharge details

- Name:
- Date of birth:.....
- Birth weight:
- Date of discharge:
- Weight at discharge:.....
- Type of food:
- Feeding per session:
- Additives:
- Feeding schedule:
- Nutrient upgrade plan:
- Medicines:.....
- Times of administration:.....
- Administration method:
- Navel has / has not fallen off
- The Neonatal screening has / has not been pricked. Date of test:
- The ALGO hearing screening is done at home, provided that your baby has been in a university hospital for the first week. And if the first test is unsuccessful.
- Further details:
-
-
-
-
-
-



Feeding

On the ward, your baby was usually fed at fixed times. However, it's not necessary to stick to these exact times, especially if you are breastfeeding on demand. Just make sure there is enough time between feedings (3 to 4 hours). If your baby is having 7 feedings a day, you can adjust by postponing the last feeding of the night and offering the first feeding a little earlier. This will help create a longer rest period overnight. Over time, as the feedings become more consistent, your baby may begin to sleep through the night.

Bottle feeding

Follow the instructions on the packaging to prepare the bottle. You can use regular tap water. To heat the formula, you can use a bain-marie in a pan or a bottle warmer. While you can use a microwave, please be aware that it can heat the food unevenly, creating "hot spots."

Always check the temperature of the food before feeding it to your baby. You can do this by dropping a small amount on the inside of your wrist. Do not reheat the formula, and do not store any leftovers.

Bottles and teats

After feeding, rinse the bottle and teat with cold water to remove any food residue. This prevents protein from solidifying at higher temperatures. Then, thoroughly clean the bottle and teat, either by hand or in the dishwasher.

Sterilization: Boil the bottle, teat, and pacifier for 3 minutes once every 24 hours. This is not necessary if cleaned in the dishwasher.

To prevent bacterial growth, store the bottle and teat in the refrigerator between feedings.

Vitamins

All babies need extra vitamin D from one week after birth until the age of four. Breastfed babies also require vitamin K unless at least half of their total diet consists of formula. Vitamin D supports bone development, while vitamin K is essential for blood clotting. These vitamins are available in liquid drop form at pharmacies and drugstores. The recommended dosage is stated on the packaging. You can administer the drops using a spoon.

Stool

Newborns often start pooping as soon as they eat, due to a natural reflex. As babies grow, this reflex fades as their intestines mature and adapt to a feeding pattern. Bowel habits vary widely -some babies poop multiple times a day, while others go once every three days.

For breastfed babies, bowel movements can range from once every six days to several times a day. Formula-fed babies typically poop every one to three days. Their stool is usually soft or slightly loose and light brown to yellow in color. As long as your baby has no discomfort, is growing well, and passes stool without pain, there is no cause for concern.

Many babies experience mild digestive discomfort, such as burping, intestinal cramps, constipation, diarrhea, gas, frequent hunger, or an increased need to suck -often from drinking too quickly. These issues can lead to fussiness and distress, which may worry parents. However, the type of food is rarely the cause. In most cases, these symptoms result from an immature digestive system and will improve over time.

Temperature

We recommend checking your baby's temperature regularly during the first few days after discharge, preferably twice a day—once in the morning and once in the evening. A normal temperature ranges between **36.5°C and 37.2°C**.

If your baby's temperature is too high or too low, take appropriate action.

- Fever (>38°C): Always contact your doctor.
- Low temperature: Dress your baby warmer or put on a hat. If this is not enough, use a hot water bottle. Place it behind your baby's back or at the foot of the bed on top of the blankets—never directly against your baby.

Important safety tips for using a hot water bottle:

- Do not fill it with boiling water.
- Keep the cap opening facing away from your baby and positioned over the edge of any waterproof cover or mattress protector to prevent leaks.

If your baby is sweating, they are too warm. In that case, dress them more lightly. When taking your baby out of bed, use a shawl to help prevent sudden temperature changes.

Baths

During your baby's hospital stay, you may have already seen how to bathe them. If not, the maternity nurse will assist you at home. You can bathe your baby whenever you like, preferably before feeding to reduce the chance of spitting up. Daily baths are not necessary—freshening up with a washcloth and water is also sufficient.

Ventilating the room

You can air out the room while your baby is in another space. Be sure to avoid drafts.

Going for a walk with your baby

Once you and your baby have settled into a routine and their temperature is stable, you can start going outside. Take your time, as your baby needs to adjust. Depending on the season, gradually increase the time spent outdoors over several weeks. Dress your baby warmly, including a hat, as they lose a lot of heat through their head. In summer, ensure your baby is well protected from the sun.

Crying

Crying is a normal part of a baby's development and an important way for newborns to communicate with parents and caregivers. It typically peaks around six weeks of age and gradually decreases after three months, stabilizing during the first year.

Crying often occurs in the evenings and is not influenced by parenting style. It is a natural part of development, linked to changes in behavior and the maturation of the central nervous system. However, rest and routine can have a calming effect.

First, try to identify and resolve the cause of the crying. If no clear cause is found, comforting your baby usually helps. If the crying persists, you can seek further advice from your healthcare provider or consultation office.

Smoking

Smoking during and after pregnancy is harmful to both mother and baby. It increases the risk of serious health problems, including sudden infant death syndrome (SIDS) and long-term health complications.

The best environment for your baby is a completely smoke-free home. If quitting is not an option, minimize the risk by smoking as little as possible and never smoking indoors or in enclosed spaces like a car. Smoke particles can linger in a room for up to eight hours, so it's important to regularly air out the room where your baby sleeps, even if no one smokes inside.

Rest and regularity

Establishing a regular feeding and sleep routine is important for both you and your baby. We recommend limiting visitors during the first few days so you and your baby can adjust to your new family dynamic. A consistent routine, while considering your baby's needs, can help prevent most crying spells and disruptions to their sleep cycle.

It's also wise to avoid people with colds or the flu. If you have a cold sore, avoid close contact with your baby.

Babies experience many new impressions in their early days. They suddenly hear, see, feel, and experience so much, which can sometimes lead to overstimulation. This may cause them to cry more and sleep poorly.

Tips for establishing rest and regularity

- Create fixed bed and bath routines to signal to your baby that it's time to relax.
- Allow your baby to wake up on their own, feed them, and then engage in some gentle play. If you notice signs of tiredness (eye rubbing, crying, or restlessness), return them to bed.
- Put your baby to bed while they're still awake so they can learn to fall asleep on their own. Avoid making eye contact, as babies often seek attention. Tuck your baby in to provide comfort and security, helping them feel safe and minimizing restlessness.
- Sleep crying is normal. Fifteen minutes of crying is common, and some babies may cry for up to 30 minutes. If you're concerned, check on your baby, but over time you'll learn to recognize different types of cries and distinguish between genuine needs and attention-seeking.
- Don't always pick up your baby when they cry during sleep time. A calm voice, a gentle kiss, a pat on the head, or a pacifier may be enough. Responding too frequently can reinforce difficult sleep behaviors and cause more restlessness.
- Keep night feedings short and simple, avoiding making it too cozy. You can feed your baby while they're still sleepy, as babies have a natural reflex that allows them to do this.
- Stay calm when putting your baby back to sleep to help them settle more easily.

Sleeping position

The safest position for your baby to sleep is on their back, with their head turned alternately to the left and right. Babies who sleep on their side can easily roll onto their stomach after just a few weeks, so it's important to avoid placing your baby on their stomach, even for comfort. If there's a specific reason to deviate from this advice, always consult your doctor first.

It's beneficial to regularly place your baby on their stomach while they are awake and being supervised. Allowing your baby to explore and practice tummy time for about fifteen minutes several times a day supports motor development. Once your baby becomes older and can easily turn themselves over, and they choose to sleep on their stomach, it's fine to let them do so. Ensure that the sleeping environment is safe.

To avoid your baby developing a preferred sleeping position (such as only turning their head to one side), it's important to alternate the direction of their head. If breastfeeding, switch sides regularly; when bottle feeding, change arms. Always place your baby on their back to sleep, alternating the direction of their head.

If needed, adjust the position of the crib or hang an attention-grabbing object on either side to encourage your baby to turn their head. Avoid leaving your baby in the same position for long periods in a car seat or bouncer, as this can contribute to a flat head. The risk of developing a flat head is highest during the first four months, so if your baby consistently favors one side, don't hesitate to consult your doctor.

Bedding and sleep safety

Duvets can be too warm and pose a risk for babies under two years old. They can also easily become loose, causing the baby to become completely covered. This applies to blankets inside duvet covers as well. A blanket tucked securely around your baby or a sleeping bag is much safer.

When using a blanket, ensure your baby's feet are positioned near the foot of the crib. If using a larger cot, make sure the bed is not too large, as it can result in heat loss. A sleeping bag is often a better option, as it keeps your baby's head uncovered.

Avoid placing pillows or other objects in the crib due to the risk of sudden infant death syndrome (SIDS).

Important and useful addresses

- Neonatology. Tel: (075) 650 71 90
- Child and Youth Department. Tel: (075) 650 23 63
- Gynaecology/Obstetrics. Tel: (075) 650 77 43
- Paediatrics Outpatient Clinic. Tel: (075) 650 12 40
available between 08.30-16.45 hours.
- Outpatient clinic Saendelft. Tel: (075) 650 14 50
Kaaikhof 69, 1567 JP, Assendelft
- Huisartsenpost Zaandam (at ZMC). Tel: (075) 653 30 00
Koningin Julianaplein 58a, 1502 DV, Zaandam
available Monday to Friday between 17.00-08.00 hours (by telephone appointment)
and 24 hours during Saturdays, Sundays and public holidays
- De Zaanapotheek (at ZMC). Tel: (075) 650 26 05
Koningin Julianaplein 58, 1502 DV, Zaandam. info@Zaanapotheek.nl
- Lactation consultant
Questions about breastfeeding can be asked to your maternity nurse, midwife or nurse. If you would like more information or more detailed advice, you will be referred to a lactation consultant. The GGD employs a lactation consultant.
- GGD Youth Health Care: Tel: (075) 651 83 40
- Centrum Jong. Tel: (075) 651 83 40
On the website www.centrumjong.nl you will find information about a location near you and for guidance at home.
- On www.borstvoeding.nl you will find the joint site of the 5 Dutch breastfeeding organizations.
- VOC Association for parents of incubator children www.incubators.nl
- Dutch Association for parents of multiple births www.nvom.net
- Tips on safe sleeping can be found at www.safesleep.info

Finally

Was there any information you missed or would have liked to receive later? Please mention this during the discharge interview. Your feedback helps us improve the quality of care, so we can better inform and support other parents.

Questions and/or tips

Do you have any questions or tips? Feel free to write them down below. You can discuss them during the discharge interview with the nurse.

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