

At-home recommendations

Soon, you will bring your little one home. During your hospital admission, you received a lot of information about caring for your baby. This informative leaflet covers several practical matters about the hospital discharge and advice for once you are home.

Feeding

Feeding times

Target times with eight feeding sessions daily:

2:00, 5:00, 8:00, 11:00, 14:00, 17:00, 20:00, 23:00

Target times with seven feeding sessions daily:

5:00, 8:00, 11:00, 1:00, 17:00, 20:00, 23:00

Target times with six feeding sessions daily:

7:00, 10:00, 13:00, 16:00, 19:00, 23:00

Graduated feeding schedules

During your scheduled outpatient appointment, your paediatrician will advise you on gradually increasing the amounts of your baby's feedings. You may also be referred to the Child Health Clinic (consultatiebureau) for advice on feeding.

Formula bottle-feeding

Prepare the formula according to the directions on the packaging (Typically, 90 ml of water + 3 scoops of powder for 100 ml of prepared formula).

The process for cleaning bottles and teats at home is not as strict as at the hospital. It is not necessary to sterilise the baby bottles and accessories.

Breastfeeding

While in the hospital, your little one generally receives eight feedings per day. After your baby is discharged, in most cases he or she will still need at least eight feedings within a 24-hour period.

If you begin feeding your newborn on demand, it is also normal if he or she wants to breastfeed more than eight times a day. Feed your baby whenever he or she indicates hunger (smacking movements with the lips, sucking on fingers or fists, flailing arms, kicking legs, searching with the mouth or opening the mouth when the lips are touched).

The information in this brochure is general in nature and is intended to give you an idea of the care and guidance you can expect. In your own situation, other advice or procedures may apply. This brochure is therefore only an addition to the specific (verbal) information from your specialist or practitioner.

Many breastfeeding infants wait longer between feedings in the morning, preferring to nurse more often in the late afternoon and early evening. Normally, babies are alert and awake, signalling their readiness for a feeding.

On a daily basis, babies have about six wet nappies and one or more bowel movements. As the infant gets older, this stool pattern may change. Babies who receive breast milk will have one to two bowel movements daily, up until they are six to eight weeks.

Babies will pass fewer stools after reaching this age. Up to once every three days or even less is also normal after six weeks. As long as your baby is doing well and the stools are the usual paste-like consistency or soft, yellow poop, this is not a cause for concern.

On average, how much does a baby grow per week?

0-2 months:	150-320 grams weekly
2-4 months:	125-185 grams weekly
6-12 months:	50-80 grams weekly

Does your baby's weight gain differ from the guidelines shown above? If so, please contact the Youth Health Care nurse for advice.

Weighing your baby

The Child Health Clinic holds a weekly walk-in consultation hour where you can have your baby weighed. You can also ask any questions you may have. If your newborn must be weighed daily (on the hospital's recommendation), you can rent a baby scale from Vegro.

For more information, visit www.jgz.ggdbzo.nl/ or www.vegro.nl/onze-winkels/eindhovenkastelenplein.

Lactation consultants

If you have specific questions about breastfeeding, please contact one of Mxima Medical Center's lactation consultants. They are available Monday through Friday. You can call the lactation consultants on: +31 (0)40 888 84 42.

For additional information about breastfeeding, you can visit the Child Health Clinic, a lactation consultant in private practice (found via www.nvlborstvoeding.nl: the website of the Dutch association for lactation consultants) or one of the breastfeeding organisations listed at www.lalecheleague.nl/ouders/.

Day of hospital discharge

We recommend bringing the following items when you take your baby home:

- a car seat with a foot-muff or blanket
- a coat or cardigan
- a baby beanie

We recommend placing a hot water bottle into your baby's cot or bed several hours before the hospital discharge. This will warm the mattress all the way through, which is very pleasant for your baby. Use boiling water in a hot water bottle, so that it creates a vacuum. Before placing your baby into a cot or bed, be sure to remove the hot water bottle.

Caring for your baby

Temperature

A baby's normal temperature fluctuates between 36.7 and 37.3°C. To check whether your baby is overheating while sleeping, feel his or her neck. The first day after coming home, it is best to take your baby's temperature in the morning and the evening.

Children control their temperature primarily via their head. In the first week of life, a beanie can help a newborn stay warm. After that, leave your baby's head uncovered while it is indoors or in bed. Premature babies may benefit from wearing a beanie for longer.

Hot water bottle

If your baby's temperature falls below 36.7°C, place a hot water bottle into the cot or bed. Use boiling water in a hot water bottle, so that it creates a vacuum. Always place a hot water bottle into a bag designed for this, laying it between the blankets with the opening pointing toward the base of the bed or crib. Never place a hot water bottle directly against a baby due to the potential for burns.

Ambient temperature

During your baby's first six to eight weeks of life, 20°C is a good nursery room temperature. After that, the ideal temperature for your baby's nursery lies between 16 and 18°C. Fresh air is important. Regularly open a window in the nursery, when your baby is not in the room. The bath water for babies should be lukewarm: 37°C. Use your elbow to feel the water's temperature. If the temperature feels comfortable to you — not too hot or too cold, then the temperature is right.

Safe sleeping conditions

Always place your baby on its back to sleep. Alternate your baby's head between the left and the right to prevent the formation of a crooked or a flattened head. For the first two years of a child's life, do not use a duvet or pillows in his or her bed. A duvet can be much too warm and your child's head can easily disappear under the duvet.

Pillows can also be dangerous. The danger is that your child may experience issues with breathing. Position your child with his or her feet against the base of the cot or bed.

Make the bed 'short' or 'low' on the mattress (This means that your baby's feet are against the foot end). This is so that your baby cannot slide under the blanket or sheet.

For your child's first two years, use a baby sleeping bag that fits properly. It should be neither too big nor too small. You may use a thin sleeping bag for your child, together with a blanket or a sheet. Avoid any pillows, safety harnesses, toys with cords or strings and large stuffed animals in your child's bed or cot, as these can obstruct breathing.

Lay your baby down to sleep in his or her own bed or cot. Professionals recommend placing the baby's cot or bed in the parents' bedroom for an initial period (roughly the first six months). This way, you will get to know your baby and his or her needs well. You will recognise your baby's signs of hunger faster and be able to feed him or her sooner.

Do not sleep with your baby in your bed during the first four months. You can give your baby a dummy while the little one is falling asleep. If you are still working on getting your baby to breastfeed, it is best to hold off on that dummy.

Environment

When your baby is awake and lying in a playpen or on a blanket, placing the newborn regularly on his or her tummy will stimulate its development. In which case, always make sure your baby has adult supervision. Make sure there is no smoking around your baby. Take care that your baby is not overheating. Excessive ambient heat reduces your baby's arousability.

Make sure the environment around the bed and playpen is safe and secure.

Take into account any curtains, cords, the gap between the cot's bars (4.5-6.5 cm) and a snug, well-fitting mattress.

Pay close attention to pets. Make sure they cannot jump into the bed, cot, playpen and the like.

Going outside

It is nice for your baby to get used to your home's ambient temperature for the first few days before taking him or her outside.

Once your baby's temperature is stable and weather conditions permitting, you can take him or her outside. It is important to adapt your baby's clothing to the outside temperature. If it is very cold, it is advisable to warm your baby's pram in advance with a hot water bottle.

Do not leave your baby in a car seat for more than two hours a day, due to the development of his or her posture. A bouncer is a good alternative to use at home. Again, do not leave your baby in this for too long due to the increased risk of developing a crooked or a flattened head as well as poor motor skills and spinal development.

Preventing infections

Observe good hygiene; wash your hands as much as possible before picking up your baby. During the winter months (October-April), RSV or 'respiratory syncytial virus' is prevalent. This cold virus, which is related to the flu virus, causes respiratory infections. Nearly every child will contract RSV at a very young age. However, the infection can be very serious in young and premature children.

Keep people who have cold sores or other infections away from your baby. Cold sores, which are caused by the herpes virus, are highly contagious.

Because children have underdeveloped immune systems, they can become infected more quickly and become very ill as a result.

If you have a cold, always use clean tissues and wash your hands after coughing, sneezing or blowing your nose.

If your baby's nose is blocked due to a cold, you can clear it using saline nasal drops (0.9% solution) which are available from your local pharmacy or chemist.

Behaviour

Your baby will have to get used to a new environment teeming with different sounds. Some babies need to grow accustomed to the silence, smells and lighting.

You yourself will have to get used to a new daily routine. You will also learn to recognise your baby's distinctive rhythm and behaviour (even better). Follow your feelings and instincts, you know your baby best. Maintain your daily activities as customary (do not be extra quiet, just turn on the radio or television as usual). Your baby needs to get used to the sounds of your home.

Once home, premature babies often cry more and are more frightened than babies born full term. Preemies tend to overstretch their back, arms and legs and to push their head back. This overstretching not only makes babies very restless, but it also often causes them to breastfeed or bottle-feed poorly. Correcting the posture will help your child relax better. Correcting your baby's posture will help him or her to relax.

Rest and regularity do not mean that you should only take your baby out of bed at set times and leave the child when he or she is hungry or awake. We advise feeding your baby fairly soon after he or she awakes and then 'playing' with him or her (giving attention, making eye contact and talking).

As soon as you notice your baby growing tired (becoming less alert, yawning, etc.) put him or her back to bed.

Home-based incubator aftercare

The right to maternity care expires eight days after you give birth. However, you may be entitled to incubator aftercare or postponed maternity care. A maternity nurse from the home care service will visit your home for this. It is a good idea to ask your health insurer how much of this incubator aftercare will be reimbursed.

As soon as you know the date that your baby can go home, you can contact the home care organisation to book an appointment for the incubator aftercare.

Youth Health Care Nurse and the Child Health Clinic

Now that your baby is going home, the team from the Child Health Clinic (the doctor and Youth Health Care nurse) will be your point of contact.

For more information, visit: www.jgz.ggdbzo.nl/.

Your child's health, growth and development will be monitored at the Child Health Clinic.

This is also where your child will receive vaccinations and where you can get advice on these, if you wish.

You can ask questions about your child during scheduled visits to the clinic or during the walk-in consultation hour. You can also contact staff during the Child Health Clinic's telephone consultation hour. You will have to contact the Child Health Clinic yourself. You can do this as soon as you know your baby's discharge date. The Youth Health Care nurse will then book an appointment with you for a home visit and for your first visit to the Child Health Clinic.

When your baby is discharged, you will receive a letter describing the course of the hospital admission. You can give this letter to the Youth Health Care nurse during the first home visit, so that she will also be informed about your baby's hospital stay. The Youth Health Care nurse will give you a so-called 'growth booklet', which you can use to record your child's development.

Associations and websites

Care4Neo (previously known as Vereniging ouders van couveusekinderen)

Care4Neo is an association that provides care and guidance to parents of children who were born (far) too early, with low birth weight or (seriously) ill and therefore were admitted to a neonatal unit. www.care4neo.nl

Other websites

- www.kenniscentrumimh.nl
- www.veiligheid.nl/kinderveiligheid/slapen/veilig-slapen
- www.lalecheleague.nl
- www.mobiël.voedingscentrum.nl

Notes

Do you have any questions after reading this information? We encourage you to write them down here. This way, you can be sure not to forget them.