DID YOU KNOW...

... ...you can watch a 20 minute “Introduction to the NICU,” video on any hospital TV (even in the NICU family lounges). It’s on channel 62 and plays daily at 12:15, 5:30 and 10:45 pm. You can also find it in chapters at http://tinyurl.com/3gj2lm4.

Try to watch it in the first few days of your baby's NICU stay. You'll be glad you did.

Your Baby's Neonatologist vs. Pediatrician

Many times we hear parents in the NICU say, “I'm confused, does my baby have a pediatrician while they are in the NICU?” Let's try to make this clear. Each baby in the NICU is cared for by a Neonatologist (a specialized doctor who treats premature and/or sick babies) who works here in the hospital. The entire time your baby is here in the NICU the Neonatologist will be the doctor making the decisions about your baby and coordinating your baby's care. They work hand-in-hand with the bedside nurses and as much as possible, with you. You will need to choose a pediatrician to take the baby to outside the hospital once they are discharged home. When our staff tells you the baby will be going home, you should call the pediatricians office and let them know. They will usually want to see the baby within about 1-3 days of going home from the NICU. Be sure to let the NICU staff know who you have chosen so they can get them information about your baby's stay in the NICU in the form of a discharge summary, for a smooth transition.

If you are not sure about how to choose a pediatrician, maybe these thoughts from past NICU parents about what they like about their pediatricians practices will be helpful to you:

- “I love the spacious well baby/child waiting room and how it is separated by a door off of the regular, sick waiting room. I got pretty germ-phobic while in the NICU and could not stand to have my baby sit in a room full of sick kids when we are just there for a well visit.”

- “I like that after we told the pediatrician how germ phobic we were, he lets us sit in his office until he was ready for us for the whole first year or so.”

- “As a working parent, I really appreciate the evening and weekend office hours.”

- “I felt very strongly that my pediatricians office be close to my home in case I needed to see them quickly. In addition, I didn't want to worry about bad weather or bad road conditions getting in my way.”

- “I like that there is plenty of nearby parking because I don't want to walk for blocks with my baby and other children in tow.”

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Interview With Staff Nurse
Martha Dominique, BSN, RNC

Q: How long have you been working in the NICU here?
A: I started working here in the NICU in 1994 which was about one year after the Special Care Nursery was converted into this 56 bed NICU. This was my first nursing job after graduating from nursing school. I fell in love and I never left.

Q: How did you know you wanted to be a NICU nurse?
A: I worked as a phlebotomist for nine years before becoming a nurse. I was always assigned to draw blood from the babies because very few phlebotomists felt comfortable going to the Special Care Nursery. It became my favorite place to work. From that moment on, I knew I wanted to go to nursing school so I could spend more time with the preemie babies. I pursued my dream and became a NICU nurse.

Q: What do you like the most about working in the NICU?
A: I really like to see the sick babies get better; the very little babies that grow bigger and stronger to go home with their parents. Emotionally, I like to make the journey go as smoothly as I can by teaching the parents how to take care of their babies. I also take pleasure in meeting people from all walks of life.

Q: Have you seen any beneficial changes in the NICU since you have worked here?
A: The greatest changes have been in the technology we use. The NICU is equipped with High Tech equipment which has increased the survival rate of babies. Evidence-based practice also contributes to the efficient care that nurses, respiratory therapists and doctors can give to our NICU babies. Saint Barnabas NICU is very lucky, with the financial help of the Miracle Walk, to have access to all these resources to provide care for the babies, especially the tiny 23-28 weekers. Having NICU support meetings, family pizza nights and the NICU buddy program have allowed parents to share similar stories and offer advice to one another.

Q: What does Family Centered Care in the NICU mean to you?
A: To me, Family Centered Care in the NICU means teamwork; getting the whole “team” involved right away. The team includes nurses, doctors and of course the parents as soon as they are able to participate in taking care of the baby. We have one common goal which is the well-being of the babies.

Q: What suggestions or advice do you have for NICU families?
A: NICU parents, I encourage you to ask questions. If I don’t know the answers I promise I will find out. I am committed to providing the best care for your babies. The more engaged you are, the more comfortable you will feel the day you take your baby/babies home with you.

Q: Anything else you would like to say about your job?
A: I love what I do and I like to try to keep the parents in good spirits. I enjoy talking to the babies and the parents. It’s very gratifying and worthwhile. I feel blessed to be part of such a dedicated team.

Q: Any other questions or personal fun facts you would like folks to know about you?
A: I enjoy cooking, traveling and spending time with my family. As a Born Again Christian, I believe in God and use prayer as my daily coping mechanism. One of my favorite verses that I often share with my family and friends is, “I can do everything through God who gives me strength”.
When our ninth child came into our lives in November of 2012, we knew we were blessed... again! Yes, nine. We have four boys and five girls but Celeste was our first to need to spend any time in the NICU. I was on bed rest for weeks to avoid her arriving early. It helped, but she couldn't wait any longer and joined us at 34 weeks, weighing 3 pounds, 15 ounces.

The birth experience was very scary because we did not know what to expect even though we already had numerous children. We remember thinking how fragile and tiny she seemed the first time we held her but we also knew she was in the best hands. All of the staff members in the NICU were so good and confident about what they were doing. They, and the nurses, gave us so much support, attention and help. They were very kind and gentle with us and explained all the NICU things we didn't know anything about. Our whole family was also very lucky to have wonderful help and support from our family, our church and our community during the 17 days Celeste was in the NICU.

Now, Celeste is 19 months old and doing great. She seems a little smaller and slower than our other children did at her age but she is tough. She seems to strive to keep up with the other kids and doesn't mind if that means she has to do it at her own pace. She eats everything and does everything they do. She is talking up a storm and is very energetic. You can always find her carrying around her beloved baby doll. She makes our day in the silliest ways and we are all enjoying watching her grow and develop.

Because we are so grateful for her and to the NICU staff, I became one of the two bilingual NICU Parent Buddies. I just love to give support to other families with a baby in the NICU, especially Spanish-speaking families. Let your nurse know if you would like a NICU buddy and fill out the form to get one.

-Karen and Ruben C.
"Designated Support People" Program Begins in the NICU

At the suggestion of numerous past NICU families, current NICU parents can now identify up to four support people that will be allowed into the unit without them. “Support people” will need to follow all the existing NICU visitation guidelines and some others, including that they:

- must follow all hand washing guidelines to prevent infection in the NICU
- must be at least 18 years old
- may not bring additional visitors to the NICU who are not on the support person list
- must not come to the unit if they are sick, not feeling well or showing signs of flu symptoms
- must be identified by the NICU family and photographed for an ID badge
- must wear their photo ID badge at all times in the NICU
- will only be given general medical information and must respect the confidentiality of all babies in the unit by not asking questions about or taking pictures of any baby other than the one(s) they are designated to visit
- will respect the family and nurses decisions about what level of involvement is appropriate for the baby each day and understand that this could change from day to day depending on the baby’s condition
- need to step away from the bedside during procedures or emergencies if asked to do so by NICU staff
- understand that this program could be suspended at any time to ensure the safety of the babies (i.e., during a bad flu season)

Think about if you would like for any of your family or close friends to be able to visit your baby in the NICU at times when you are not there. This is not for everyone, but if you are interested in having Designated Support People for your baby talk to your baby’s bedside nurse or social worker about filling out the necessary form.

Your Baby’s Neonatologist vs. Pediatrician (continued)

- “I like my pediatrician but what I like even better is a tip a NICU mommy gave me about scheduling visits to the pediatrician. She suggested trying to make all appointments as early in the day as possible to avoid long waits and lots of “germ buildup” in the waiting room as the day goes on.”
- “Most of my friends got their pediatricians from other friends or family who had used them but I tried to find other NICU parents to ask who they used. You could even go to our NICU facebook page (SBMCNICU) and ask other parents who graduated from our NICU who they recommend in your area and what they like about them.”

Also, some of our parents did caution that you might not feel as comfortable with the pediatrician right away because they don't know your baby like the NICU nurses and doctors did. That is normal and it makes sense to give them a chance to get to know your baby over a few visits. However, if your gut still tells you this doctor is not a good fit for you and your baby, consider a change. After all, you are likely going to have a long relationship built on trust with this person, or people, and you want that to be a good one.