

Having a Baby at UAMS

Thank you for choosing UAMS for your care as you look forward to the birth of your baby. To make your health care during pregnancy and birth as easy as possible, please read this information about our services and resources. If you have questions, please ask at your next appointment or ask your nurse while you're in the hospital. We want to make you, your family and your baby as happy, healthy and comfortable as possible.

Care During Your Pregnancy

UAMS has three locations in Little Rock where we see pregnant women and offer prenatal care. To schedule an appointment at any of these clinics, please call 501-686-8000. To get the best care for you and your baby, please call to schedule your first appointment as soon as you think you may be pregnant. Monthly check-ups are an important first step in making sure you and your baby are healthy throughout your pregnancy.

Prenatal Clinics

Pulaski County Health Unit

3915 W. 8th St., 2nd Floor
Little Rock, AR 72205
501-526-7425

Freeway Medical Tower

5800 West 10th St., 5th Floor
Little Rock, AR 72205
501-526-7425

Financial Centre Parkway

11300 Financial Centre Pkwy, Suite 900
Little Rock, AR 72211
501-526-6900

Classes for You and Your Family

UAMS offers several classes that can help you and your family prepare for the arrival of your baby. These classes include breastfeeding, a tour of the UAMS Labor and Delivery Floor, preparing for childbirth class, newborn care, infant CPR and safety, a sibling class and a "Baby on Board" series of classes for a discounted price. [Click here](#) to see a complete list of course dates and times and to register for classes.

Preparing for a hospital stay

It's best to pack a bag and gather things you'll need for your baby's birth several weeks before your due date to make sure you have everything you need. Pack your bag and leave it in your car so you'll be ready. Here are some things you may want to include in your bag:

- Your doctor's phone number
- A map or directions to Parking 1 at UAMS
- Birth plan (please talk with your doctors before delivery about any special requests in order to pre-plan if necessary)
- Birthing ball, mirror, or any objects from home you wish to focus on or use as a focal point
- Powder, lotions, oils, or anything else you would like to be massaged with
- Heavy socks in case your feet get cold while in bed. You will need socks with tread on the bottom for safety when you get out of bed.
- Healthy snacks for your labor partner and for yourself after delivery
- Playing cards, books and other distractions
- Phone numbers for friends and family you'll want to tell about your new baby
- A robe and/or nightgown and slippers, if you'd rather wear your own after the baby is born
- Nursing bra/gown if you plan to breastfeed or a tight bra if you will not be breastfeeding
- A pacifier, if you would like your baby to have one. (To help your baby with successful breastfeeding, UAMS does not provide pacifiers to healthy infants.)

When you are ready to go to the hospital, don't forget to add:

- Cell phone, camera and music player along with chargers
- Toiletries, including shampoo, comb/brush, toothbrush and tooth paste, lotion, soap, deodorant and cosmetics
- A favorite pillow and blanket for yourself

You will need three things before you can take your baby home. These are:

- Clothes for your baby (t-shirt or bodysuit, booties and blanket)
- Infant car seat
- The name and phone number of your baby's pediatrician. UAMS offers newborn care at the Family Medical Center. Call 501-686-6560 to select a doctor for your baby. If you do not have a doctor selected before your baby is born, we can help you schedule an appointment with a UAMS pediatrician.

Mother and Baby Areas of the UAMS Hospital

The **E Wing of the 5th floor (E5)** is our main unit for labor and delivery. When you are ready to delivery your baby, park in Parking 1 or have someone drop you off in the circle drive at the front of the hospital. Go to the hospital lobby and take the B (Visitor) Elevators up to the 5th floor. Follow overhead signs to the E Wing and push the button to have a UAMS employee let you into the unit. Follow the overhead signs to the Registration Desk.

After you are registered, a nurse will take you to the triage room where you and your baby will be attached to monitors. One will check your contractions, and the other will check your baby's heart rate. You are invited to bring one person with you into the triage room.

If your doctor determines after your visit to the triage room that you should be admitted to the hospital, you will be admitted and assigned to a labor suite. Your baby will probably be born in this room, or you will go to the surgery area of the 5th floor for a Caesarian delivery. After your baby is born, you will spend a few hours in your labor suite for your baby's first feeding, then you and your baby will be moved to the postpartum (after birth) unit on the 6th floor.

A few hours after your baby's birth, you and your baby will likely be moved to E6 on the E Wing of the 6th floor. You will stay with in this room with your new baby for 24 to 48 hours. If your baby is healthy and does not need special care in the neonatal intensive care unit (NICU), your baby will stay in your room during your entire hospital stay. We do not have a well-baby nursery. Your baby may be taken out of your room for things such as a hearing screening or circumcision. Do not let anyone take your baby from your room unless they have a UAMS name badge and have identified themselves to you and told you why they need to take your baby from your room.

The first hour after your baby's birth is a special time that can never be relived. We think this special time should be for your baby to meet you for the first time while being held in skin to skin contact with mom. This contact keeps babies warm, reassured and calm, enhances the bond between mother and child, and can help make the first breastfeed a beautiful experience. Our goal is to let this first hour be all about you and your baby, and we will seek to minimize any interruptions or separation if at all possible during this special time. Friends and family are encouraged to visit after this special bonding time between mother, father and infant.

A7, on the 7th floor of the Central Building, is our unit specially designed for expectant moms who need to be monitored at all times and mothers who lose their baby at delivery. This Antepartum (before birth) Unit has a partnership program with the March of the Dimes and the UAMS Patient Education Department to provide a wide variety of activities and educational opportunities for expectant women. These activities help patients meet other patients and learn about caring for themselves and their new babies.

The Neonatal Intensive Care Unit, or NICU, is on the F and H Wings of the 5th floor. This unit has private rooms for babies who are premature, sick, or have a special condition that needs specialized medical care. Parents are welcome to stay in their baby's room at all times, and each room is furnished with a sleeper sofa. Parents are encouraged to participate in their baby's care so they can learn how to care for their baby at home. There are also separate sleep rooms, showers, a laundry room and a kitchen and dining area for families of babies in the NICU. A sibling support program can

help children ages 3 to 8 learn more about their brother or sister in the NICU and how they can help care for the new baby.

For families who live outside Central Arkansas, the Angel Eye program offers live viewing of a baby from the family's home computer. Parents and others they share log-in information with can watch their baby from their home computer using a high-definition camera placed above the baby's bed. With a microphone at home, parents can also speak to their baby or play their favorite music. [Click here](#) for more information about the ANGEL Eye program.

Having Family and Friends with You at the Hospital

UAMS welcomes and encourages friends and family to be with you while you are in the hospital. For the safety and security of other mothers and babies, we have special security precautions on our maternal and infant units. Before entering a unit, friends and family are asked to stop at the Information Desk and get an ID badge. Once you have given permission for friends and family to join you and they have a badge, they will be able to press the button at the entrance to the unit and go to your room.

All doors to our maternal and infant units are all secured for your safety, and guests are not able to enter the unit unless they are wearing a badge and have permission from the mother and/or father of the baby.

For your baby's safety, parents and siblings are welcome in the baby's room. Other friends and family are welcome if a parent is with the baby. Siblings are asked to pass a brief health screening to make sure they do not have a fever or cold before visiting the NICU. For the protection of all the babies and families in the NICU, no one with any signs of cold or flu should visit the NICU.

Infant Security System

All the mother and baby units at UAMS have a security system that allows only certain employees to enter and leave the unit. You and your baby will have special patient ID badges to make sure the two of you leave the hospital together. UAMS also has a separate security system to ensure your baby is not taken from your floor. This system will be explained to you in more detail when you are at the hospital.

UAMS employees who work in the mother and baby units of the hospital and are allowed to touch and hold your baby have blue badge backgrounds. Please make sure that all employees who hold or touch your baby are wearing a UAMS ID badge with a blue background.

Your Baby's First Hours

The first hour after your baby's birth is a special time for you and your baby to meet while being held in skin-to-skin contact. This contact keeps your baby warm, reassured and calm, enhances the bond between mother and child, and can help get you and your baby started on successful breastfeeding. Our goal is to for this first hour to be all about you and your baby. We will try to minimize any interruptions or separation during this time. Friends and family are encouraged to visit after this bonding time between mother, father and baby.

Breastfeeding Your Baby

Breastfeeding is one of the most important ways to begin a happy, healthy life. UAMS wants to help make Arkansas healthier by helping you breastfeed your baby. We support breastfeeding as the primary method of feeding your baby. We will provide you and your baby with the support and resources you and your baby need for successful breastfeeding. We highly recommend that you take our [breastfeeding class](#) before your baby's birth. This class is offered once a month, and you should complete the class during your seventh or eighth month of pregnancy.

Giving your baby breast milk will give him or her the most complete nutrition possible. Breast milk provides the best mix of nutrients and antibodies necessary for your baby to grow and thrive. Research has shown that breastfed children have far fewer and less serious illnesses than those who never receive breast milk, including a reduced risk of sudden infant death syndrome (SIDS), childhood cancers and diabetes.

To promote successful breastfeeding, UAMS does not supply pacifiers to healthy babies who are able to get breast milk from their mother. You may bring your own pacifier to the hospital with you if you would like your baby to have one.

New Words You May Hear at the Hospital

Hospitals seem to have their own language, and the mother and baby units are no different. Below you will find definitions of some terms you may hear during your pregnancy and delivery. If your doctor or nurse uses words you do not know or if you don't understand what they are saying, please ask them to explain what they are saying. More definitions are available at the March of Dimes website (www.marchofdimes.org).

APGAR – APGAR is a quick test performed on your baby one and five minutes after birth. The 1-minute score tells your doctor how well the baby did during the birthing process. The 5-minute score tells your doctor how well your baby is doing outside your body. The test includes looking at the baby's breathing, heart rate, muscle tone, reflexes and skin color. Scores of 7, 8 and 9 are normal. A score of 10 is very unusual. A lower score tells your doctor that your baby needs special attention at birth. A lower score does not mean your child will have serious or long-term health problems.

Bilirubin (bil-ih-ROO-bin) -- An orange-yellow pigment, bilirubin is a waste product of the normal breakdown of red blood cells. Bilirubin passes through the liver and eventually out of the body — mostly in feces and a small amount in urine. Bilirubin testing checks for levels of bilirubin in your blood.

Breastfeeding – Breastfeeding means feeding a child human breast milk. According to the American Academy of Pediatrics, human breast milk is preferred for all infants. This includes even premature and sick babies, with rare exceptions. Breast milk is the food least likely to cause allergic reactions; it is inexpensive; it is readily available at any hour of the day or night; babies accept the taste readily; and the antibodies in breast milk can help a baby resist infections.

C-section – A Caesarean section is surgery to deliver a baby. The baby is taken out through the mother's abdomen. A C-section may be performed because of the health of the mother or the baby or the

position of the baby. The surgery is safe for you and your baby. It may take a bit longer to recover from a C-section than from a vaginal birth.

Jaundice -- Infant jaundice is when a newborn baby's skin and eyes turn yellow. It can occur because the baby's blood contains too much bilirubin. This usually occurs because a baby's liver isn't developed enough to get rid of bilirubin in the bloodstream. Jaundice will usually disappear in a few days with frequent feedings and exposure to indirect sunlight at home.

Lactation – Lactation is the process of milk production. Human milk is produced by the mammary glands, which are located in the fatty tissue of the breast. The hormone oxytocin is produced in response to the birth of a baby. Oxytocin stimulates uterine contractions and begins the lactation process. For the first few days of nursing, a special fluid called colostrum is delivered. Colostrum is high in nutrients, fats and antibodies to help protect your baby from infection. After 3 to 4 days of nursing, your body will transition from colostrum to milk that looks more like skim milk. It may take longer for your milk supply to increase if your baby is born by Caesarean section (C-section). Let your doctor know if your milk supply has not increased a few days after your baby's birth. The amount of milk your body produces is controlled primarily by the hormone prolactin, which is produced in response to the length of time your baby nurses at the breast.

Maternal-Fetal Medicine physicians (MFMs) are doctors with specialized training in high-risk pregnancy. These doctors work closely with expectant mothers with chronic health problems such as diabetes or asthma and those who develop problems during pregnancy such as early labor, bleeding and high blood pressure. If they find birth defects or growth problems, they can start treatment before birth to support babies with the best possible care until they are ready to be delivered.

OB/GYN (obstetrician/gynecologist)—An obstetrician is a doctor who takes care of pregnant women and delivers babies. A gynecologist is a doctor who specializes in treating diseases of the female reproductive organs.

Neonatologist (or Neos)-- A neonatologist is a doctor who specializes in the care, development and diseases of newborn babies.

Pediatrician (or Peds, sounds like peeds)-- A pediatrician is a doctor who specializes in the care of children. Pediatricians help manage the physical, mental and emotional well-being of their patients, in every stage of development -- in good health or in illness. Generally, pediatricians focus on babies, children, adolescents, and young adults from birth to age 21.

Phenylketonuria (fen-ul-ke-toe-NU-re-uh or PKU)-- PKU is a birth defect that causes an amino acid called phenylalanine to build up in your body. Too much phenylalanine can cause a variety of health problems. Babies in the United States and many other countries are tested for phenylketonuria soon after birth. Although phenylketonuria is rare, recognizing phenylketonuria right away can help prevent serious health problems.

Placenta – The placenta is a structure that develops in your uterus during pregnancy. It provides oxygen and nutrients to your baby and removes waste products from your baby's blood. It attaches to the wall of your uterus, and your baby's umbilical cord comes from the placenta. After your baby is born, you will continue to have mild contractions and deliver the placenta, which usually come out with a small gush

of blood. The placenta is usually delivered in about five minutes, but it may take a bit longer. If you have a C-section, your placenta will be removed from your uterus during the procedure.

Resources

When you are in the UAMS hospital, you will be able to watch several educational videos on how to care for yourself and your baby on our patient video channels. These videos can be viewed by dialing 526-4766 on your hospital room phone.

March of Dimes- www.marchofdimes.org

UAMS Patient Education Department - (501) 686-8084

Breastfeeding

If you have any questions about breastfeeding your baby please call the UAMS ANGELS call center at (toll-free) 866-273-3835

Child Passenger Safety

You will need to bring your car seat and car seat base with you when you come in to have your baby. This will allow time for the staff to check the car seat for safety and correct fit for your baby. The car seat must meet standard requirements before your baby is discharged. UAMS offers safe and affordable car seats for purchase. Please contact our Child Passenger Safety Program Coordinator at 501-526-3575 for more information.

Emotional support and resources

“Baby blues” is a common temporary psychological state right after childbirth when a new mother may have sudden mood swings, feeling very happy, then very sad, cry for no apparent reason, feel impatient, unusually irritable, restless, anxious, lonely and sad. The baby blues may last only a few hours or as long as one to two weeks after delivery. The baby blues do not always require treatment from a health care provider. Often, joining a support group of new mothers or talking with other mothers helps. Please talk to your doctor or nurse if you have these feelings.

Postpartum depression (PPD) is temporary depression that some women feel after giving birth. It is common for mothers to experience a feeling of sadness soon after giving birth. However, postpartum depression is a more severe sadness that may require attention from a health care professional. Postpartum depression can be experienced in two forms: early onset and late onset. Early onset is mild, more common, may last a couple of weeks and does not require medication. Late onset usually occurs several weeks to six months after delivery and is not as common as early onset. Postpartum depression is often has the following symptoms, although each person may experience symptoms differently: Sadness, anxiety, fatigue or exhaustion, poor concentration, confusion, a fear of harming the newborn or yourself, mood swings, diminished sex drive, feelings of guilt, uncontrolled crying, loss of interest or pleasure in life, over-concern for the newborn and/or a lack of interest for the newborn, appetite changes, sleep disturbances, feelings of resentment, memory loss, feelings of isolation, and/or feelings of hopelessness.

Women who are at highest risk for postpartum depression include:

- Those with a history of depression, anxiety disorders or alcohol abuse
- Those with a history of moderate to severe premenstrual syndrome (PMS)
- Those who have trouble sleeping
- Those who have unrealistic ideas about motherhood
- Those who have an unwanted pregnancy
- Those who experience a stressful life event such as the death of a loved one, a family illness or work difficulties
- Those who lack emotional support from a partner or experience conflict with a partner
- Those who have low self-esteem
- Those who have a newborn with physical or behavioral problems

The exact cause of postpartum depression is unknown. However, it is believed that the changes in hormone levels that occur during and after pregnancy may produce chemical changes in the brain to make women more susceptible to depression. Postpartum depression is usually treated, like other types of depression, with counseling and medication. Counseling may involve talking with a therapist about how depression makes you think, act and feel. Medication is usually given to those with severe cases of postpartum depression. Some antidepressant medications can harm your baby if you are breastfeeding. Talk with your doctor about which medicine is safe to take. There are also steps you can take to help manage and overcome postpartum depression symptoms. These include:

- Find a companion you can share your feelings with or find a local support group.
- Get in touch with someone who can help take on some of your daily duties, such as child care, household chores and errands.
- Set aside at least 30 minutes a day to do something for yourself.
- Keep a diary where you write down your emotions.

Please tell a doctor or nurse if you experience these feelings while you are in the hospital. If you are not at the hospital and experience any of these feelings or symptoms you can call **(866)-273-3835**. If you have thoughts of hurting yourself or your baby, please call 9-1-1 or go to the nearest Emergency Room.

Love Lives Services

Pregnancy is usually a happy time, but sometimes the unimaginable happens and babies die before they leave the hospital. This can be a particularly hard time if you are surrounded by other mothers and their new babies. To help mothers and families after the loss of a baby, UAMS has a program we call "Love Lives." Our chaplains are available for you and your family at all times, and we have many other resources that can help. A small card with a yellow calla lily is used to mark the rooms of families who have lost a baby so our staff knows of the family's loss.

Pastoral care

UAMS chaplains are available 24 hours a day to provide pastoral and emotional support to patients, families and staff. The Pastoral Care Department is open Monday through Friday from 8:00 a.m. to 4:30 p.m. You can call the Pastoral Care Department at (501) 686-6217. Ministers of all faiths are welcome to visit. UAMS has a non-denominational chapel on the first floor of the hospital. It is open daily from 6:00 a.m. to 8:30 p.m. A worship service is held every Sunday at 10:00 a.m.