



NICU Family Care Conferences

Hello!

We are honored to care for your little one here in the UAMS NICU! We know that being in the NICU can be very stressful for you and your family, and the NICU staff are here to support you through your NICU journey.

Family care conferences will be held for babies we predict to have a longer stay. The purpose of care conferences are to allow you to meet with members of your baby's care team including physicians, nurses, physical therapist, occupational therapist, speech-language pathologist, dietician, social worker, patient educator and others. Team members will talk with you about their role in your baby's care, baby's progress, and treatment plan going forward. You will be given the opportunity to ask questions and/or discuss concerns with all team members present.

The first care conference will be scheduled about two weeks after birth. Other care conferences will be scheduled as your baby meets milestones and moves toward discharge. Your social worker will work with you to schedule care conferences at a time that works for you.

If you have any questions/comments or concerns at any point during your stay here at UAMS please call the charge nurse office at 501-526-1500.

Sincerely,
UAMS NICU Staff

This information was created and reviewed through a partnership with the UAMS Patient and Family Advisory Councils and the UAMS Center for Health Literacy.

UNIVERSITY OF ARKANSAS FOR MEDICAL SCIENCES
4301 West Markham Street - Little Rock, Arkansas 72205

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ROADMAP to DISCHARGE

for babies in the NICU



THE JOURNEY
BEGINS

CALMS

"shhhh baby
is growing"

BREASTMILK!
It Does A Baby Good!

Wean
Respiratory
Support



Move to
Open Crib

Isolette on Air
Temperature?
Dress me up!

Check Eyes
To "See More"

Put me on
my back!



Seymour
the Owl



97

98²

98⁶

Maintain Your Temperature!

Conquer the PO Challenge!

Gain that weight!

65

88

78

Goodbye Bradys and Desats!



Learn
My Cues!

Attend Parent
CPR & Safety Class

Hearing
Screening
and
Car Seat
Test

Two More Tests
To Go!

Room In
With Me!



UAMS

■ Can I touch my baby?

Touch is very important to your baby and can help soothe/calm him or her. For extremely premature or very sick infants, sleep should be protected for the first several days after birth or if their condition gets worse. As your infant becomes more stable, touch and soothing sounds of their families can improve growth, calm heart rates, and assist your infant with sleeping.

Here are some things you can do to help your baby:

Hand Hugging: Place your hands at your infant's head and bottom to provide gentle support. This action can help calm your infant.



Kangaroo care: Your infant is placed chest to chest with you. Your skin temperature helps keep the baby warm, and in most cases the infant rests well. Your nurse will help you get your baby out of the isolette, and can help decide when Kangaroo care is appropriate. Please see "Kangaroo Care" handout.



Hand holding: Touch is very important to your baby. Even simply holding their hand can provide comfort for both you and your baby.



Infant Massage: Infant massage can be beneficial to comfort your baby and promote growth, when he or she is old enough. Please ask your nurse if this would be appropriate for your baby and our NICU therapists can help with this when the time is right.



Caring for Your Baby, continued

Can my baby hear?

Hearing is developed in the womb starting around the 3rd week of pregnancy, and at 28 weeks babies begin to process sounds. Appropriate sound is not only soothing but can be very helpful while their brain pathways continue to develop.

It is important to protect very young/small babies from too much noise.

As your baby grows, they need to hear words, songs and the sounds of their families. You can sing, read or just talk to them during your visit. Sleep is still very important to your growing baby, but if your infant is in an awake state (eyes open), they would love to hear you. *Please refer to the "Music Therapy" handout.*

Can my baby smell?

The olfactory system (sense of smell) starts working by 28 weeks gestation and can affect your infant both positively and negatively. We encourage you to avoid perfumes, colognes and strong lotions that may have negative impacts on your infant's developing system. When using alcohol foam for hand cleansing, allow the foam to dry thoroughly before opening isolette port holes. You can make positive memories with smell as well. Breast milk provided during oral care helps associate maternal scent; Kangaroo care and scent dolls also help promote positive development of the olfactory system.

Can my baby see?

Premature babies may open their eyes some but cannot focus. Light and other things can be stressful to the baby. At around 30 weeks, babies begin to like eye contact, cuddling or quiet talking while they are alert. It is important to watch for signs of stress though. At 40 weeks, babies can focus on objects 8-10 inches from their face.

Early in pregnancy, the growing baby is able to sense light through mom's tummy. This light helps the baby's eyes develop. After the baby is born, at first it is important to protect the premature baby from bright light. However, after the baby is stable, the baby needs to safely experience light during the day. This can happen with cycled lighting. Cycled lighting provides light to your baby during the day (sunshine from windows or light from the bulbs). For rooms with windows, open the shades during the day and pull the isolette cover back. In the evening, cover the isolette again. For rooms without a window, turn the up-lights on in the room during the day and turn them off in the evening. In addition to helping baby's eyes develop, cycled lighting can improve weight gain and growth as well as reduce fussing and crying.

Caring for your baby, continued

■ Other things to remember...

- *Check with your nurse to make sure your infant can tolerate touch/sound; this is especially important for infants who are very premature or very sick.*
- Some babies can get over stimulated very easily; in these cases it is important limit the types of interaction with your infant. Watch for signs of over stimulation (listed below) and decrease touch and/or sound if needed.
- Turn down/off your cell phone when you enter the NICU.
- Keep overall conversations/voice volume in the room low, to avoid over stimulation.
- Always clean your hands before and after touching your infant.
- Close the isolette portholes gently (not popping them). Infants may startle with this noise, and it can create anxiety for your little one.
- Turn on the warming curtain to keep your infant warm while the isolette door is open if your baby is on skin temperature control or is really small.

Ways to tell when your infant has had enough stimulation...

- Splaying of hands/fingers
- Hiccups
- Yawning
- Crying
- Turning head away
- Desaturation (Drop in pulse ox)
- Bradycardia (Drop in heart rate)

Finger Splay:



Yawning:



■ What is C.A.L.M.S.?

C.A.L.M.S. stands for Comfort, Activity, Lighting, Movement, and Sound/Smell. It is a holistic approach to support the preterm infant and their developing neurological system. C.A.L.M.S. helps nurses and parents work together to help the preterm or sick baby develop and recover in a positive healing environment.

Why is C.A.L.M.S. important?

Research has shown that a program like C.A.L.M.S. can have a positive effect on the parents and baby, including:

- Shorter hospital stay
- Increased parent satisfaction
- Reduced number of complications for baby
- Better neuro-developmental outcomes for baby

What does C.A.L.M.S. look like for a parent?

Education will start with parents as soon as the baby is admitted to the NICU. Babies will be classified into one of four C.A.L.M.S. categories

- First 72 hours
- Critical- 4B
- Stable- 4A
- Feeder and Grower- 3A and 2A

A colored card will be outside of each infants room to classify what category the infant is in related to C.A.L.M.S.

How can the parent become involved?

Each category has specific ways a parent can be involved in and help participate in your child's care. Your baby's nurse will teach you how to participate and check off each skill that is taught. You should keep the sheet and continue to check off new skill as infant progresses through the four categories.

C.A.L.M.S.

Acuity Level

	First 72 hours	Critical 4B	Stable 4A	Feeder and Grower 3A and 2A
<p>Caregiver Involvement (Please check off skills with RN)</p> <p>Comfort</p> <p>Activity</p> <p>Lighting</p> <p>Movement</p> <p>Senses</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Handwashing* <input type="checkbox"/> Air curtain/portholes <input type="checkbox"/> Hand Hugging <input type="checkbox"/> Quiet Talking <ul style="list-style-type: none"> <input type="checkbox"/> Do not touch and talk at the same time <input type="checkbox"/> Scented Doll/Blanket <input type="checkbox"/> Oral Care <ul style="list-style-type: none"> <input type="checkbox"/> Colostrum or Donor breast milk <input type="checkbox"/> Cluster Care <input type="checkbox"/> Low lights <ul style="list-style-type: none"> <input type="checkbox"/> No flash pictures <input type="checkbox"/> Cover eyes when bright lights are on <input type="checkbox"/> Cell Phone on vibrate and no speaker phone <input type="checkbox"/> Limit visit time of young siblings to minimize noise <input type="checkbox"/> Consult Lactation to initiate pumping 	<p>Includes previous skills plus:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Kangaroo care* <input type="checkbox"/> Hold tube for gravity while doing Kangaroo care <input type="checkbox"/> Assist with weighing baby <input type="checkbox"/> Establish milk supply 	<p>Includes previous skills plus:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Take baby temperature <input type="checkbox"/> Change Diapers <input type="checkbox"/> Assist with baths <input type="checkbox"/> Cyclic Lighting for babies >28 weeks <ul style="list-style-type: none"> <input type="checkbox"/> Consider moving to window room <input type="checkbox"/> Maintain milk supply <input type="checkbox"/> Pre-feeding skills <input type="checkbox"/> Infant Massage <input type="checkbox"/> Music Therapy* <input type="checkbox"/> Transition to open crib <ul style="list-style-type: none"> <input type="checkbox"/> Keep room temp 72-78 degrees <input type="checkbox"/> HOB flat <input type="checkbox"/> Can bring clothes from home <input type="checkbox"/> Safe Sleep* <input type="checkbox"/> Protect babies sleep <input type="checkbox"/> Choose Pediatrician <input type="checkbox"/> Discharge education <input type="checkbox"/> Flu vaccine 	<p>Includes previous skills plus:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Cue based feeds as appropriate <input type="checkbox"/> Establish breastfeeding schedule <input type="checkbox"/> Developmental Positioning <ul style="list-style-type: none"> <input type="checkbox"/> Developmental aids with order <input type="checkbox"/> Remove all positioning aids before discharge <input type="checkbox"/> Change baby clothes <input type="checkbox"/> Supervised tummy time when awake <input type="checkbox"/> Bring in car seat and base <ul style="list-style-type: none"> <input type="checkbox"/> Angel Tolerance Test <input type="checkbox"/> Car seat safety education*??? <input type="checkbox"/> Room in and provide care <input type="checkbox"/> CPR and infant safety <input type="checkbox"/> Hearing screen <input type="checkbox"/> Discharge instructions <ul style="list-style-type: none"> <input type="checkbox"/> Nutrition <input type="checkbox"/> Speech <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Home Medication <input type="checkbox"/> Home equipment <input type="checkbox"/> Immunizations

*indicates UAMS educational handout available

Teaching Your NICU Baby to Sleep

Congratulations! Your baby has moved to an open crib, a very important step on the road to discharge home. Now that your baby has reached this exciting milestone, it is time for us to begin the process of sleep training.

Did you know?

- Your baby has to learn to sleep a certain way, just like he/she must learn how to eat? It may seem that sleep would just come naturally to babies. But as many new parents will tell you, babies don't often sleep when parents want to sleep. The good news is we can begin right now to help your baby learn to sleep in a safe way.

How should my baby sleep?

- **Alone**
- on their **Back**
- in a **Crib**

Before now, your baby may have spent a lot of time on his or her tummy, especially if he/she was born very early, or on extra oxygen after delivery. But now that your baby is big enough and old enough to be in a regular crib, it is time to teach him/her to sleep in a different way. We want your baby to learn to sleep safely here in the NICU before you he or she goes home with you. Some babies learn quickly and settle right in to their new sleep environment, and some need help learning how.



How do I teach my baby to sleep?

- Put them in their crib when they are sleepy, for every sleep time. This helps them to understand that their crib is the place where they sleep. There are a number of things you can do to help soothe your baby as they get sleepy.
- Consider using a wearable blanket to provide swaddling to your baby.
- A pacifier (after breastfeeding is well established), rocking, swaying, patting and walking around are a few ways to help babies quiet down for sleep.
- Your baby also loves the sound of your voice! You can sing to your baby or read your baby a book while you rock.
- You can also play music or turn on a mobile to help them settle in their crib.

As soon as your baby starts to drift off to sleep, lay them on their back in their crib. Your baby may fuss for a few minutes before falling asleep; that is normal as they learn new sleep habits. Sometimes babies will fall asleep while they are in their swing, rocker, or carseat or while you are holding them. If that happens, gently place your baby back in his or her crib for the rest of sleep time.

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Teaching Your NICU Baby to Sleep cont.

Another way to help your baby learn to sleep is to teach your baby a routine. Babies love routines, just like adults do. A simple cycle that can help establish a routine for your baby is the Wake, Eat, Play, Sleep cycle.

What is Wake, Eat, Play?

- Newborns need to eat every 2-3 hours, and gradually that time between feedings spaces out. After you change your baby's diaper and feed him or her, take time to play together.
- At first, this will just be holding and talking to your baby. As your baby gets older, they will be very interested in the environment around them. Play time will include supervised time on their tummy to develop muscles and simple games like peek-a-boo. Eventually, your baby will spend time sitting on the floor and playing with toys.
- When your baby shows signs of being tired, like yawning, rubbing eyes, and fussing, start getting them ready for sleep in a way that they like best. This may include rocking, swaying, singing, reading a book, playing music, etc.

Remember, as soon as your baby starts to drift off to sleep, place them on their back in their crib!

You may hear from friends and family members that there are other, better ways to help your baby learn to sleep. Some people may suggest that you put your baby on their tummy for sleep, let your baby sleep in a swing or rocker, put your baby in their car seat and drive around while they sleep, or put your baby in your bed so they can sleep with you. All of these ways may help your baby fall asleep, but they are NOT the safest way for your baby to sleep, and will put your baby at risk for Sudden Unexpected Infant Death.

There may be times when you are sleepy but your baby is not. Call a neighbor or friend or family member to help you so that your baby can stay safe while you sleep. Try to take naps when your baby is sleeping, and never hold your baby while you sleep.

Being a parent of a newborn can be hard; you need a lot of support during this time. Our goal is to help you teach your newborn how to sleep in the safest way possible to reduce their risk of Sudden Unexpected Infant Death.

Talk with your pediatrician if you are having trouble getting your baby to sleep. Here are a couple of resources that describe routines and teaching your baby how to sleep:

“Secrets of the Baby Whisperer – How to Calm, Connect, and Communicate with your Baby” by Tracy Hogg

“On Becoming Baby Wise: Giving Your Infant the Gift of Nighttime Sleep” by Gary Ezzo and Robert Bucknam

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Cue-Based Feeding for a Baby in the NICU

Cue-based feeding means watching for your baby to show you when he/she is hungry:

Feeding your baby only when you see these signs helps them reach full feeds sooner. For that reason, we focus on the quality of the feed not the amount. Your baby's cues or signs may also show times in the day that the baby is more alert allowing us to plan ahead.

Once your baby is ready there are things that we all need to look for when deciding if your baby is hungry and ready to eat. The nurse will score the baby based upon the cues shown and a breast or bottle feed will be offered when the baby is ready.

Some of the cues your baby may show are:

- Awake
- Sucks on pacifier
- Turning head
- Seeking and rooting for food
- Fingers in mouth
- Stable vital signs



During the feeding there may be some signs that your baby is stressed or needs to stop feeding. Some of these signs are:

- Pulling away from bottle
- Arms extended or floppy
- Frowning or looked stressed
- Poor seal on the nipple
- Tired
- Holding their breath
- Breathing events
- Aspiration concerns: watery eyes, coughing/choking etc.



If your baby loses weight, cannot maintain temperature, or there are concerns of aspiration their feeding plan will be changed. If you have any questions or concerns, please let your baby's nurse or doctor know.

WEBSITES:

- *National Perinatal Association* — <http://www.support4nicuparents.org>
- *March of Dimes (Share Your Story)* — <http://www.marchofdimes.org>
- *Graham's Foundation* — <http://grahamsfoundation.org>
- *Zoe Rose Memorial Foundation* — <http://www.zoerose.org>
- *PENUT Trial (Section on Prematurity)* — <http://www.penut-trial.org>
- *Inspire: Premie Support Group* — <https://www.inspire.com/groups/preemie>
- *Kayla Aimee Writes Blog* — <http://kaylaaimee.com>
- *Text4Baby* — <https://www.text4baby.org>
- *Premie Parent Alliance* — <http://premieparentalliance.org>
- *Papas of Premies* — <http://www.papasofpreemies.com>
- *NICU Helping Hands* — <http://www.nicuhelpinghands.org>
- *NICU Healing* — <http://www.nicuhealing.com>

BOOKS:

- *Understanding the NICU* (Published by the American Academy of Pediatrics)
- *Anchored: Finding Hope in the Unexpected* (Kayla Aimee)
- *Girl in Glass* (Deanna Fei)
- *Premie Voices* (Saroj Saigal)
- *The Premature Baby Book: Everything You Need to Know About Your Premature Baby from Birth to Age One* (Sears Parenting Library)
- *Once Upon a Premie* (Jenné Johns)