

Tips for
parents

The first
hours at
home with
your baby

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Big adventures start small



Congratulations on the birth of your baby and welcome home!

We have put together some important information for you to help you through the first night at home. This document explains everything clearly topic by topic.

Let kraamzorg VDA know that you have come home again, so our scheduling department can get in touch with the maternity assistant and send her round to your house in the morning. There is no need to ring us in the middle of the night unless it is an emergency; ring us between 7 and 8 o' clock in the morning, that will still leave us plenty of time to make arrangements.

If you are seriously worried about something or need urgent answers, you can get in touch with your midwife.

- Make sure that the house is not too cold (+/- 20 degrees centigrade) and use a shawl to keep the baby warm when he or she is not in his or her cot.
- Go to the toilet before every feed and change your maternity pad.
- Change your baby's nappy before every feed and take his or her temperature.
- After you have fed the baby, put him or her in the cot with the right number of hot water bottles.
- Babies can suffer from nausea during the first few days and often have cold/blue hands; that is normal.



Care for the new mother

- If you are unable to urinate within six hours after delivery, please call your midwife.
- Make sure you urinate frequently, preferably before every feed. If your bladder is empty, your womb can contract more easily, which is important because it reduces the surface of the wound (caused by the placenta) and you will lose less blood.
- Always rinse with a (drinking) bottle or jug of water while or after urinating. It can ease the burning sensation of the stitches but it is more hygienic, too.
- Change your maternity pad(s).
- Wash your hands.
- During the first 24 hours, do not go to the toilet alone and don't lock the door. You might feel light-headed during the first few days when you go to the toilet or take a shower. It is important to have someone near. That person must be able to come and help you if something goes wrong.
- You might lose blood clots, which can be the size of oranges. If you lose more than two large clots, get in touch with your midwife.
- Losing more than two full maternity pads of blood within half an hour is another reason to get in touch with your midwife.



Changing your baby's nappy

- Change your baby's nappy before every feed and take your baby's temperature.
- Remove your baby's leggings and open up the romper. Make sure you pull your baby's top up to far enough to make it easy to put a clean nappy on your baby.
- Open up the nappy but leave it under your baby's bottom. Be careful: little baby boys in particular tend to urinate while you are changing their nappy!
- Clean up your baby's bottom with wet wipes and place the dirty wipes in the dirty nappy.
- Take your baby's temperature by inserting the thermometer into his or her rectum.
- Remove the dirty nappy and put it to one side. Slide a clean nappy under your baby's bottom.
- Rub Vaseline on your baby's bottom during the first few days. The Vaseline will make it easier to clean up your baby's first, sticky stools (poo), which is called meconium.
- Fasten the nappy after checking whether it is not too tight or too loose. You have got it right if you can slip two fingers between the nappy and your baby's tummy. Make sure the edges of the nappy are turned outwards properly.
- Put the clothes back on your baby, clean everything up again and then wash your hands.
- Make a note of wet and soiled nappies in the maternity file.

During the first days, the urine can be quite concentrated because your baby is not taking in much feed yet, which means that there might be urates in the nappy. You might see orange or red spots in the nappy, which are uric acid crystals.

Baby girls practically always have some white or transparent discharge. Only wipe the discharge away on the outside of her vagina. Sometimes, baby girls can experience a "pseudomenses" as the mother's hormones disappear from the baby's body. That means that the baby might lose a very small amount of blood from her vagina. If you are worried about what you see in a nappy, keep the nappy to show to the maternity assistant when she arrives.

Taking your baby's temperature

- It is important that your baby's temperature is normal. A baby that is too cold will lose a lot of energy by trying to keep his or herself warm, leaving less energy for the baby to stay properly awake, to feed properly and to grow. The womb's temperature is 37° C, so even in the summer when we are hot, most babies will need a hot water bottle or a hat to stay warm.
- Switch the thermometer on and then gently insert the thermometer's steel tip into the baby's bottom until just past the steel tip.
- Wait until you hear a beep (or until the thermometer stops flashing).
- Put the thermometer to one side and clean it once you have put the clothes back on your baby. You can clean it with some cotton wool and the alcohol included in the maternity set. Put the clean thermometer back in its case.
- Make a note of the temperature in the maternity file.
- You do not need to take your baby's temperature every time you feed your baby if you are breastfeeding on demand. Twice a night is enough, unless your baby has a very low or a very high temperature. In that case, you need to take your baby's temperature every 2 to 3 hours.



Breastfeeding

- Feed the baby on demand, leaving no more than 3 hours between feeds during the day. At night, you can leave 5 hours between feeds once during the night.
- Offer both breasts and start each feed with the breast the baby fed from last during the previous session.
- Make a note of the feed in the maternity file afterwards.

Points to remember when the baby latches on

- Try to relax and make sure you are adequately supported.
- Place your baby's tummy against your own, making sure that your baby is lying so that his or her top lip/nose aligns with your nipple.
- Let your baby take a large bite. By this, we mean that the baby's mouth should cover the areola, not just the nipple.
- If your baby is breastfeeding properly, you will notice that his or her nose is not touching your breast.
- His or her lips are curled outwards and his or her cheeks are puffed out. You won't hear any noise except swallowing and breathing.



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Bottle feeds

- Make sure the bottle is clean. Wash your hands.
- Follow the instructions on the packet.
- Check the temperature of the milk by dropping a little on your wrist. Too cold is better than too hot.
- Offer your baby the quantity of milk instructed by the hospital OR respond to the demand of your child (be careful: crying is not always a sign of hunger). The quantities are usually 10 ml on day 1, 20 ml on day 2, 30 ml on day 3 and so forth.
- Too much feed can cause colic in the first hours.
- Burp your baby by holding him or her upright.
- Throw away any leftover milk.
- Make a note of how much your baby drank in the maternity file.

Clean the bottle immediately after use.

- Take the bottle to pieces and rinse all the parts with cold water. Then wash everything with hot water and washing-up liquid, using a bottle brush.
- Rinse again with hot water.
- Place all the bottle parts upside down on a clean tea towel or a bottle rack.

Your midwife and/or maternity assistant will discuss your feeding policy with you in the morning.



The cot

- The bedding in the cot should be turned right down so that your baby can't wriggle too far under the blanket. Use a small sheet and a blanket to make up the bed (don't use a duvet).
- Lay a hydrophilic nappy folded into a triangle under your baby's head and tuck the corners in well. If your baby throws up, you will only need to replace the hydrophilic nappy.
- Place your baby on his or her back in the cot, making sure that every time you put him or her down, his or her face turned to the left or right alternately. You need to do this to make sure your baby doesn't adopt a preferred position and to prevent your baby's head becoming flattened.
- It is preferable to keep the cot in the parents' bedroom.



Nausea

In the first 48 hours following the birth, your baby might still be very nauseous. Your baby might retch or vomit. Don't be alarmed! You can, if you want, gently turn your baby onto his or her side if he or she needs to throw up; wipe away the vomit with a cloth or piece of gauze. Your baby might be so nauseous that he or she doesn't want to drink. There is nothing to worry about if this happens on the first day and your maternity assistant will explain what to do.

The vomit is usually transparent white/yellow. It depends on what the baby has been fed. Sometimes, the vomit can be brown. It means that there could be a little bit of blood in it. This is normal, don't be alarmed.

Making up a hot water bottle

- Stand the hot water bottle in the sink.
- Fill the water bottle to the brim with hot water; only use boiling water if a doctor, midwife or maternity assistant has instructed you to do so.
- Any air in the bottle increases the chance of a leak, so make sure the bottle is filled completely.
- Turn the lid anti-clockwise a little, until it slips into the screw thread. Then turn the lid clockwise to close it. Use a dry tea towel to screw the lid on tightly and never touch the bottle with bare hands!
- Dry the bottle and place it on its side on the kitchen worktop to check that it doesn't leak.
- Stand the hot water bottle upright again and slide the cover over it from the top to the bottom. Fasten the hot water bottle cover.

Lay the hot water bottle in the cot

- Make a deep fold in the blanket lengthways towards your newborn's bottom and leg. Place the hot water bottle on the blanket.
- To make sure that the hot water bottle doesn't shift, wrap it in a hydrophilic nappy over the hot water bottle cover and fasten it with a knot. The knot in the hydrophilic nappy should be between the hot water bottle and your baby.
- Place the hot water bottle about a hand-span away from your newborn, level with his or her bottom. Make sure the lid of the bottle is turned to the bottom of the cot.
- If you are using two hot water bottles, place the bottles in an L-shape.
- Your baby's normal temperature should be between 36.5°C and 37.5°C. If you are using an Aerosleep mattress in the cot, you will need to take it out if the baby needs a hot water bottle. In the exceptional event that the hot water bottle leaks, the water has nowhere to go on an Aerosleep mattress. Aerosleep mattresses have better ventilation, so there is more cold air under the baby.

What to do if your newborn's temperature reaches any of the following temperatures:

- <36°C** Ring the midwife; hold your baby in skin-to-skin contact. If the temperature measurements vary, check whether your baby's temperature is more normal after an hour.
- <36,5°C** Make up 1 hot water bottle with boiling water and 1 hot water bottle with hot water and cover your newborn's head with a hat. Take your baby's temperature again after an hour. If it doesn't rise, ring the midwife.
- 36,5°-36,9°C** Make up 1 hot water bottle with boiling water (and cover your newborn's head with a hat if necessary).
- 37°-37,5°C** Make up 1 hot water bottle with hot water from the tap for the night.
- >37,5°** Reduce the heat gradually by taking off the hat and leaving out the hot water bottle.
- >38°C** Take off the hat, remove the hot water bottle, lower the room temperature and/or remove some of the baby's clothes. If the temperature hasn't dropped after an hour, ring the midwife.

Cold/blue hands

Babies' circulation doesn't work properly yet, so they often have cold hands and feet. Their hands and feet might look a bit blueish too. You don't need to put your baby's hands under the blanket. The most relaxing position for a baby is to have his or her hands next to/above his or her head.

Ring the midwife immediately if:

- **your baby looks drowsy or is limp, makes a groaning sound when breathing or breathes irregularly or quickly**
- **your baby's face or body has a greyish or very pale colour**

Kraamzorg VDA
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