Having Your Baby at the
Regina General Hospital
Patient and Family Centered Care
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Patient and Family Centered Care

Pregnancy, birth, and afterwards is a time of change in your life. Family centered care is important as everyone works together to meet the needs of your family during this time. A team approach is used when giving care.

Saskatchewan Health Authority Maternal and Children’s Provincial Program’s vision is for Healthy Mothers, Healthy Children, Healthy Saskatchewan. All individuals, families, and newborns can expect provincially strengthened, local delivered Maternal and Children’s Programs that improve health and wellbeing every day. It is expected that everyone will display open, inclusive, and respectful behaviour including patients, family members, and health care providers.
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“It’s Safe to Ask”

You are an active participant in your care during your pregnancy. Make sure you and your family are actively involved and informed by asking questions about your care and needs.

When health care providers complete your prenatal record, you’re admitted to hospital, or you move from one unit to another, information about you is shared. This is a perfect time to make sure you share any information about your experience or needs.

Another way to assist with the safety of yourself and your family is to learn about your care. Bring a family member or friend along when discussing your health.

There are many decisions and choices that you will have to make relating to pregnancy, birth and beyond. It is important for you to be aware of the fact that you have the right to make informed choices regarding your care. During your stay, the healthcare team want to make sure you are safe and informed.

Please speak to your care providers at any time if you have questions or concerns. We want you and your baby to have a safe, pleasant, and comfortable experience. You can always ask for clarification.

To see if a decision is right for you and your family, you could use the acronym BRAINS. Ask yourself:

- What are the proposed Benefits?
- What are the proposed Risks?
- What are the Alternatives?
- What is my Intuition telling me?
- What if I Need more time, or do Nothing?
- Signing the waiver and/or providing consent to the decision.

<table>
<thead>
<tr>
<th>It’s Safe to Ask</th>
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<tr>
<td>Informed choice means that you are empowered and have the option to ask questions.</td>
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<td>It’s ok to ask for help, clarification, or if something was not heard.</td>
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<tr>
<td>There are examples of possible questions throughout this document. These are suggestions and ideas to assist you and your family in knowing any question is important.</td>
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Some examples of questions to ask your health care providers are:

“Are there any risks to me and my baby?”

“What can I expect?”

“Are these the correct medications?”

“What is this medication used for?”

“Can you provide me with information regarding the care being provided?”

“While in hospital, where is my call bell?”

Violence

Each person within the health care team, including the patient and family, must promote an environment that is respectful and free of intimidation, blame, harassment and violence. Workplace violence includes incidents in which a person is threatened, abused or assaulted in circumstances related to their work, including all forms of harassment, bullying, intimidation, physical threats, or assaults, robbery or other intrusive behaviours. These behaviours could originate from patients or co-workers, at any level of the organization. Violence will not be tolerated within the Regina General Hospital.

Important Numbers

You may meet many health care providers during your pregnancy and birth such as: physicians, midwives, nurses, public health nurses, social workers, First Nation and Métis Health Services, lactation consultants, and health care students. There will be male and female providers. Here is a space for you to record important phone numbers for your care providers:

Primary Health Care Provider (doctor, midwife, nurse practitioner)
Other areas in Regina where healthcare services may be provided are:

**Regina General Hospital Fetal Assessment Unit** 306-766-0647
This area provides services such as ultrasound, fetal monitoring with Non-Stress Testing, WinRho injections for the individual, home blood pressure monitoring, and the Pregnancy and Diabetic Clinic.

**Regina Sexual Assault Centre** 306-352-0434
This centre provides free counselling to individuals over the age of 16 who have experienced any assault, abuse or violence.
More information can be found at [https://www.reginasexualassaultcentre.ca/](https://www.reginasexualassaultcentre.ca/)

**First Nations and Métis Health Services (FNMHS)** 306-766-4155
First Nation and Métis Health Services (FNMHS) is holistic based and focuses on the mental, emotional, and spiritual aspects of the individual. FNMHS has a Health Educator who has an office located directly on the Mother Baby Unit. Although they try and see all families who may access our services, you can also phone to request a visit. FNMHS provides:

- **Elders/ Cultural support workers** – available to support prayer, counselling, trauma and crisis support, and guidance.

- **Advocacy** – FNMHS assists with communication between the health care team and patients, as well as for those who wish to include traditional care practices as part of their health care plan. They act as a supporting voice during patient admission and health care planning.

- **Coordination of Services** – FNMHS assists with co-ordination of Non-insured Health Benefits (NIHB) including medical transportation, language translation, make connections to community resources and access to appropriate services. In some cases, you may be eligible to have an escort present with you while you are here to birth. If you are eligible to receive NIHB, you are able to receive specific coverage for things such as a breast pump. They also provide information regarding application for treaty status and registration for Métis Nation of Saskatchewan.

- **Education** - To increase cultural safety and awareness, FNMHS collaborates with front line staff to support patients in their understanding of medical procedures and discharge plans.

- **Healing Centre** - At the RGH, anyone wishing to include traditional or spiritual care as part of their health care plan can access the healing centre located in First Nation and Métis Health Services. The healing centre can be accessed without referral during regular business hours. This space is for prayer and ceremony.
Four Directions Community Health Centre (4D) 306-766-0200
This community health centre offers support to pregnant individuals through their many programs. These programs support the at-risk pregnant person and their families. Team members in the programs include community health workers, public health nurses, elders, addiction counsellors, a family wellness counsellor and a nutritionist. Four Directions is located at 1504 Albert Street.

Social Work 306-766-4444
The Maternal and Children’s area have numerous social workers. These individuals provide a link between the individual and family to community resources. Social work provides information, supportive counseling and assistance for people and their families.

Metabolic and Diabetes Education Centre (MEDEC) 306-766-4540
MEDEC provides diabetes education, care and support to people with type 1 and type 2 diabetes, pre-diabetes (IFG/IGT), gestational diabetes (GDM), hypoglycemia, or polycystic ovarian syndrome (PCOS).

Your Pregnancy
A person’s body prepares and adjusts during pregnancy. There are a lot of changes you and your family will experience prior to and after the birth of your baby.

What is Recommended During Pregnancy?

- Have regular check-ups with your doctor/midwife/nurse practitioner.
- Avoid drinking alcohol, smoking/vaping, marijuana use, and using other drugs. Please see your health care provider if you would like to quit smoking/vaping or decrease your alcohol or marijuana intake, or if you need over the counter medications.
- Discuss your prescription or herbal medications with your healthcare provider.
- Eat well with healthy foods by following the Eat Well with Canada’s Food Guide available at https://food-guide.canada.ca/en/ and drink 6 to 8 glasses (1 glass = 250 mL or 8 oz) of water per day.
- Be aware of your baby’s movements. You will notice your baby moving regularly around 24 weeks. If you notice a change in your baby’s movements, see a healthcare provider as soon as possible.
- You will have blood tests in your pregnancy. Your doctor, midwife, or nurse practitioner will explain the results.
- Pregnancy is normally a healthy life event. Poor nutrition or violence may affect some individuals and families. There may be resources available (see above) or speak with a social worker or healthcare provider.
- Talk to your doctor, midwife, or nurse at any time if you have questions or concerns. It is important that you, your partner, and your baby have a safe and healthy pregnancy and birth experience.
It’s Safe to Ask
1 in 5 people experience anxiety and depression in pregnancy and after birth.
“I feel overwhelmed and unable to cope; can you help me find supports for my mental health?”

- In the event that you and your partner experience a complication, pregnancy loss, or stillbirth, there are resources available. Please speak to your healthcare team.

Iron During and After Pregnancy

What is iron deficiency?
Iron deficiency is when your body’s iron stores are low. Your health care provider will order a blood test to see if this is a condition, you have (ferritin less than 30 ng/mL or transferrin saturation less than 15%). Many women are iron deficient during pregnancy and postpartum.

What is anemia?
Anemia is having a low number of healthy red blood cells. It is diagnosed by a blood test (hemoglobin less than 110g/L in pregnancy). The number one cause of anemia in pregnancy is iron deficiency. Anemia after pregnancy is common.

What are symptoms of iron deficiency and/or anemia?
• fatigue
• low energy
• restless legs
• poor concentration
• depression
• insomnia
• craving ice or dirt.

What causes iron deficiency?
• diets low in iron, vegetarian diets, diets high in calcium, more than 2 servings milk/day
• Celiac disease, inflammatory bowel disease
• antacids / medication used for heartburn
• endurance athletics
• weight loss surgery
• pregnancy or menstruation.
Why is iron deficiency a concern in pregnancy / postpartum?
Iron deficiency and iron deficiency anemia have been associated with a number of pregnancy and postpartum problems including:

- preterm (early) delivery
- high blood pressure in pregnancy
- depression
- excessive bleeding
- poor breastfeeding
- poor mother-baby bonding
- babies that are
  - small
  - iron deficient
  - have a developmental delay

If you adjust your diet to include iron rich sources of food including liver, oysters, meat and fish, it will help improve your iron levels. Vegetarian sources of iron including spinach and beans are not absorbed as well. Your healthcare provider will recommend treatment for iron deficiency and anemia.

How is iron deficiency treated?
The two forms of iron supplementation are a pill or an infusion. Both forms of iron supplementation are safe in pregnancy and during breastfeeding.

What are tips for taking your iron pill?
- Take it no more than once per day. If every other day is easier on your digestion, that is okay.
- Take it on an empty stomach (1 hour before meals, 2 hours after meals) or at bedtime.
- Don’t take it at the same time as coffee, tea, milk, antacid, or thyroid medication.
- Take it with Vitamin C (half an orange or a chewable Vitamin C tablet 250-500mg).
- The most common side effect of taking an oral iron pill is digestive changes, including nausea, constipation, or diarrhea. Speak to your healthcare provider if you experience side effects.

What is intravenous (IV) iron?
IV iron is the fastest way to treat iron deficiency. In one dose of IV iron, you will get as much iron as you would absorb with 1-2 months of using an iron pill. Your healthcare provider may choose to give you IV iron if:
- You tried oral iron and it did not work for you (either due to side effects or lack of increased hemoglobin).
- You cannot absorb oral iron (inflammatory bowel disease, previous weight loss surgery, etc.).
- Your hemoglobin is very low.
Intravenous iron also has some possible side effects. It may stain the skin, cause temporary muscle soreness, change your urine color dark, change your blood pressure, or make you feel light-headed. The risk of life-threatening problems is very low.

**What follow-up is required if iron deficiency occurs in the pregnancy or postpartum?**
If you are being treated for iron deficiency or anemia, a repeat blood test should be done in 1-3 months to confirm you have responded to treatment.

**Where Can I Find Prenatal Education?**
Prenatal Education can provide you and your family information regarding pregnancy, birth, and the period after birth. Classes can help you learn about healthy pregnancy.

Free prenatal classes are offered at Saskatchewan Health Authority Primary Health Care (PHC) Networks Population and Public Health Services offices. There are online options available.

Regina: PHC in Regina offer free Prenatal Classes for individuals and families. Four classes are 2 hours in length. Classes typically are on weekday evenings and some Saturdays. Call 306-766-7500.

Rural Areas: PHC in rural areas offer single and group prenatal classes in surrounding communities. Please contact the Primary Health Care Network Population and Public Health Services through the Government of Saskatchewan website https://www.saskatchewan.ca/residents/health/public-health/public-health-offices

All Nations’ Healing Hospital in Fort Qu’Appelle has a Women’s Health Center that provides prenatal care and information. Call 306-332-2673.

The Regina Community Clinic has prenatal information for newcomers to Canada. Call 306-543-7880.

Regina Open Door Society offers prenatal classes and information for newcomers, immigrants, and refugees. Call 306-352-3500.

The Al Ritchie Heritage Community Health Center, part of Regina Central Urban Primary Care Network, offers prenatal classes and parenting classes to vulnerable parents and families. They are located at 1550 - 14th Avenue, call 306-766-6320.

There is availability of online prenatal classes and information. You can find classes available in your area by searching prenatal classes and your location.
The Saskatchewan Prevention Institute has an app and website that has information about pregnancy, birth, and postpartum. Information is available at The Saskatchewan Prevention Institute Your Pregnancy Month by Month https://skprevention.ca/pregnancy/.

** Other Resources **

Other Resources for prenatal, birth, and newborn information:
Moms and Kids Health Saskatchewan
https://momsandkidssask.saskhealthauthority.ca/

The Sensible Guide to a Health Pregnancy by the Public Health Agency of Canada

The Society of Obstetricians and Gynaecologists of Canada Pregnancy Info Website
https://www.pregnancyinfo.ca/

** Prenatal Tours at the Regina General Hospital **
Prenatal tours are available at the Regina General Hospital through a variety of partners. In-person tours may not be available if there are public health restrictions in place (e.g. COVID-19). Please call ahead to determine the availability. All tours provide information on the Labour and Birth area, Mother Baby unit, NICU, and general information on what to expect when coming to the hospital for the birth of your baby.
First Nation and Métis Health Services (FNMHS) call 306-766-4155 for additional information. YMCA call 306-757-9622 extension 0 for more information.

** Coming to the Regina General Hospital Entrances/ Admitting **

When you come to the hospital, you must receive an admission “pink” sheet. If you need healthcare services emergently, go directly to the Labour and Birth Unit.
You can use the following admitting entrances at the listed days and times:

- **14th Avenue Entrance** - weekdays: 6:00 a.m. to 6:00 p.m.
- **15th Avenue Entrance** - weekdays: 7:00 a.m. to 3:30 p.m.
- **Emergency Department entrance** – anytime (including on weekends, holidays and after 6:00 p.m.)
- **If you park in the Emergency Department parking lot, you need to move your vehicle as soon as possible. You must also register your license plate number at the Security desk in the Emergency Department.**

Where do you park?

Pay parking lots are located at the 14th Avenue and 15th Avenue entrances. Two hour parking is located on side streets around the hospital.

What Should I Bring for the Hospital Stay?

Your stay in hospital will be for one or two days, but it could be longer if there are complications or difficulties encountered. Items needed for your birth are different for each person and family.

It is recommended you bring the items below to the hospital. Have your bag packed before going into labour.

**Things for you:**

- prenatal records, given to you by a health care provider;
- Saskatchewan or provincial health services card;
- prescription medication;
- insurance cards;
- birth plan, if you have one;
  - Examples of birth plans
    [https://www.healthlinkbc.ca/sites/default/libraries/healthwise/media/pdf/hw/form_abl1753.pdf](https://www.healthlinkbc.ca/sites/default/libraries/healthwise/media/pdf/hw/form_abl1753.pdf)
- underwear and sanitary pads;
- loose fitting clothing to go home in; and
- deodorant and toothbrush with toothpaste.

**Things for the baby:**

- car seat meeting Canadian Safety Standards;
- Vitamin D drops; and
- baby clothing; hat and a blanket for the baby to go home in.
Additional Things You May Want:

- a bag packed for the support person including toiletries, clothes, and snacks, food, and drinks (meals are available for the support person to purchase in the hospital);
- phone charger
- music, movies, and/or comfort objects (games, books, cards);
- food and snacks (fridge available in each hospital room);
- non-alcoholic drinks;
- night gown or comfortable clothes to wear in the hospital;
- personal toiletries such as soap, shampoo and conditioner;
- breastfeeding bra or larger bra;
- nipple cream or Lanolin cream;
- extra pillows or a feeding pillow; and
- slip on footwear.

All valuable items and/or large sums of money should be left at home. If this is not possible, you can take your money and valuables to the Finance Department on the first floor of the Regina General Hospital. It is open Monday to Friday from 9 a.m. to 1 p.m. and 2 p.m. to 4 p.m.

What is Provided During My Stay?

- open back night gown and house coat
- facial tissue
- sanitary pads
- breastfeeding pads
- meals and beverages for maternal patient
- diapers, cloths, gowns, formula and blankets for baby
- recliner bed for your partner on the Mother Baby Unit
- portable breast pump to use in hospital.

Areas in the Regina General Hospital to Purchase Items

Gift shop is located on the main floor near elevators 7, 8, 9. It is open Monday to Friday 9:00 a.m. to 8:00 p.m., Saturday 9:00 a.m. to 5:00 p.m., and Sunday 1:00 to 5:00. These times are subject to change.

Shoppers Drug Mart is located on the main floor by the 15th Avenue entrance. It is open Monday to Friday 9:00 a.m. to 5:00 p.m. Closed Saturday and Sunday.

The cafeteria is located on Level 0 adjacent to elevators 7, 8, 9. It is open 8:00 a.m. to 7:00 p.m. daily.

Robin's Donuts is located in 2 locations: at the main entrance which is open 24 hours a day and at the center of hospital down the hall from the Gift Shop which is open 7:00 a.m. to 7:00 p.m. daily.
Getting Ready for Birth

In the early stages of labour, your body is going through various changes.

It is recommended **NOT** to shave your pubic area from 36 weeks of pregnancy until after the delivery. Shaving the pubic area can increase infection if a cesarean section is required to deliver the baby.

Often people wonder what labour is and when will they know when it has started. Remember, that it is normal for the labour process to start and stop and it is individual for each person. Health care providers will assess you and depending on the stage of pregnancy and/or labour you are in, you may be encouraged to go home until you are in active labour.

What is Early Labour?

- Early labour is when your opening of your uterus (cervix) is starting to open (dilate). You may have irregular cramps or contractions.
- Your body beginning to prepare for the birth of your baby and active labour.
- The contractions in the early stage help to open and soften your cervix. This stage can last a long time and it can start and stop. The amount of time it takes for your body to progress and get to the active stage of labour is different with each pregnancy and person.
- The contractions, your baby, your body, and your mind work together to assist with the birth.
- If you have had a healthy pregnancy or your health care provider encourages you to do so, it may be best to stay home until active labour.
- Staying at home and being comfortable with your support people helps to decrease pain, decrease interventions occurring during your labour, and have a positive birth experience.

How can I Cope with Early Labour?

**Activities to do at home:**

- rest or sleep (if you can)
- go for walks
- watch television or movies
- play video games or cards
- eat and drink whatever you feel you would enjoy.
- regularly empty your bladder
- have a relaxing bath or shower
- begin to track your contractions, time how far apart they are and how long they last.
Your support person can assist by:

- providing encouragement and support
- giving the labouring person a back massage or distraction
- assisting with monitoring labour contractions
- get things ready to go to the hospital
- help with other children or plan when to go to hospital.

If you have questions or concerns call:
Your health care provider or
HealthLine 811

What is Active Labour?
Active Labour has begun when your cervix is 4 cm to 5 cm dilated and you are having regular contractions that are getting stronger. Remember:

- labour and birth of a baby takes time and energy
- to continue to drink clear fluids
- the amount the cervix is open is not the only predictor of labour.

It is time to come to the hospital when you have any of the following:

- regular, intense or painful contractions
- a pattern of contractions every 3 – 4 minutes lasting 1 minute for 1 hour
- amniotic fluid sac leakage, “water broke”
- any bright red vaginal bleeding or clots
- less fetal movement
- constant pain that is not relieved by usual comfort measures, severe pain, or trouble coping with pain
- worried or unsure of what to do.

What is Preterm Labour?
Preterm Labour is when changes occur for the birth of the baby prior to 37 weeks of pregnancy. It is time to come to the hospital when you experience any of the following:

- uncomfortable or painful contractions, cramps or back pain
- changes in mucous or discharge from the vagina, such as clear mucous or red bleeding
- fluid loss, if the amniotic fluid sac is leaking
- less fetal movement.

**All Photos courtesy of the former RQHR Medical Media Services Department**
It’s Safe to Ask
“**My baby is not moving as much as usual when do I go to the hospital?”**

- Most individuals feel their baby in the uterus (fetus) move between 13 – 20 weeks of pregnancy. The fetus develops a pattern of fetal movements over the pregnancy, with periods of rest and activity.
- A resource to count your baby’s movements is CEAC 0634 “Counting Your Baby’s Movements Instructions” patient education brochure, it is available at [http://www.rqhealth.ca/rqhr-central/files/0634.pdf](http://www.rqhealth.ca/rqhr-central/files/0634.pdf)
- If you are concerned about your baby’s movements being less than usual, see your healthcare provider or go to the hospital.

**How Can I Manage Any Discomfort During Labour?**

There are many ways to help you cope with the birth of your baby. Pain is unique to each patient. Your health care team will provide you with pain management and support options. These options include: coaching, breathing methods, relaxation in a bath or shower, use of a birthing ball or birthing stool, position changes, massage, and medications.

- Remember to practice what you learn in the prenatal classes with your support person and health care provider.
- Please ask for information about options for pain relief during your labour and birth.
- If you receive pain medication in active labour, it is good to continue to change positions, this includes if you receive an epidural.
- You have the right to ask questions about your care and the options available.

**It’s Safe to Ask**
What are my options for pain management?
What are the risks and what is best for me at this time?

**What Can I Eat and Drink in Early and Active Labour?**

It is encouraged to eat in EARLY labour, before 4 cm and contractions are irregular. This stage of labour can be quite long and it’s important to keep your strength up by eating and drinking.

Once you are in ACTIVE labour and are admitted to the Regina General Hospital, the obstetrician and anesthetist team recommend not eating. Active labour is defined as 4cm dilated or greater with regular contractions.

**What are the risks of not eating during labour?**

The result of not eating during labour may be feelings of low energy. This may lead to more painful and lengthier labour.
What are the risks of eating in active labour?
Eating during labour can provide nutrients and energy required to give birth but food remains in the stomach after eating. During active labour, stomach emptying slows down and food eaten during this time remains in the stomach longer than normal.

Eating during active labour may lead to a higher risk of vomiting or regurgitating solid food (due to the stomach not emptying during labour). If a cesarean section (major surgery) is required, this increased risk of the vomiting increases the possibility of the stomach contents getting into the lungs possibly causing a serious and sometimes fatal pneumonia.

What can I eat during active labour or if I am having an induction of labour?
While in active labour or having an induction of labour, there is no limit to the amount of clear fluids. You are encouraged to have:
- water
- fruit juice or flavored drinks
- Jell-O™ or ice pops (e.g. Popsicles ®
- tea or coffee without milk
- sports drinks
- broth

What if I choose to eat during active labour?
Should you choose to eat during active labour, we advise you to discuss your decision with your primary health provider. Your primary care provider may want to complete a form with everyone’s signature to communicate that the risks associated with eating during active labour were discussed with you.

What Can I Expect with a Scheduled Cesarean Section?

Cesarean section is a type of surgical procedure to deliver the baby. This type of major surgery may be planned prior to labour if your pregnancy has complications or may be necessary during labour if there are complications with you or your baby.

In Regina, Pre-Admission for a prearranged cesarean section is done by the Fetal Assessment Unit at the Regina General Hospital. This appointment may take place over the phone. Check with your doctor to make sure this has been arranged for you. Your doctor will give you a booklet with more detailed instructions and information.

- Shaving or waxing of your vagina and area may be done 7 days before your surgery. There is increased risk of surgical site infection if done within 7 days of your surgery.
- The Fetal Assessment Pre-Admission Clinic will tell you when to arrive at the hospital and will update you on current visiting guidelines You will be admitted to the Mother Baby Unit.
The support person attending the birth in the cesarean section operating room will dress in a hospital gown, hat, shoe covers, and mask. The guidelines for support during cesarean section may change.

A Regina and area video outlining what a patient can expect during a cesarean section is available to watch in the Fetal Assessment Unit and can be viewed through YouTube at https://youtu.be/GMiD39P9aUg

If you experience a cesarean section, you will need time to heal and recover after surgery. You may need to consider having additional assistance at home following the cesarean section. Some things you may want to consider are:

- pain management - this will be discussed with you by your healthcare providers
- assistance getting out of bed or different sleeping positions
- support for when you go home with cooking, cleaning, help with baby and other children if necessary
- lifting other children or objects. You will not be able to lift anything other than your baby (without a car seat) for a period of time.

Labour and Birth Unit (L&B) Information 306-766-6150

Who Can Support Me During the Birth Experience?

It is important that you have the support you need when you need it. Those who have supportive people with them during labour have been shown to:

- need less pain medications and less medical interventions
- have shorter hospital stays
- have a more positive birth experience, overall.

* Visiting guidelines are subject to change *

Regina Labour and Birth Triage Area (Assessment area)

- 1 person may stay with you, plus 1 additional person may be allowed in special circumstances.
**Regina Labour and Birth Room**

- Partner/Support Person and other people you have identified that will support you throughout labour and birth.
- Siblings of the baby must be accompanied by a separate care giver.

The number of support people and the length of time supports are with you are determined by you and your healthcare team. This helps to ensure your safety and improved experience. The support you need is specific to what you request. Following the birth of your baby, family are welcome for a brief visit, being respectful of your needs.

**Cesarean Section in the Operating and Recovery Rooms**

During a Cesarean section, the nurses and doctors will help you and your family with your needs during the surgery and recovery on the unit.

- One person may stay with you for the surgery, 1 additional person may be allowed in special circumstances (for example your Doula).
- Children are not allowed to visit in the operating or recovery room.

**What Happens Throughout the Birth Experience?**

**Triage Assessment Area**

- When you arrive on the Labour and Birth Unit, you are assessed in the triage area.
- Bring your prenatal record as staff will review it and you will be asked questions regarding your pregnancy, medical history, and why you came to hospital.
- Your temperature, blood pressure, and pulse will be assessed and you may be asked for a urine sample.
- Your baby’s heart rate and your contractions will be monitored.
- Following consent, a physical exam (vaginal and abdominal examination) may be completed.
- There are doctors available 24 hours a day. Your doctor or midwife may be contacted.
- The healthcare team will talk to you about the plans for your birth and answer any questions or concern you may have. The health care team may determine if you should be admitted or if it is safe for you to go home.

**Induction of Labour**

You may require an induction of labour where your health care provider will try to start your labour before it normally would begin. The reasons you may need to have an indication of labour are there may be concerns about your health, your baby’s health, or the related to the pregnancy continuing.
Birthing Room

- During labour you and your baby are supported and assessed on an ongoing basis.
- We encourage you to move around during your labour. We let you know if there are any restrictions.

It’s Safe to Ask

“Can I walk in the hallway or off the Labour and Birth Unit?”

- Videotaping and photography of the birth experience is a personal choice. Please discuss your wishes with your support people and the healthcare team before the birth of your baby.
- There is a bathtub available and birth balls for your comfort.

After the Birth

Your newborn will be placed on you, skin to skin shortly or immediately following birth. There are many benefits to skin-to-skin as it helps to keep the baby warm and it helps the baby to transition to life outside the womb.

Oxytocin may be given to you right after the birth with an intermuscular injection (IM) or by intravenous (IV). This medication helps to prevent postpartum hemorrhage.

It’s Safe to Ask

“I have the right to refuse medications, what is this medication for?”

The placenta (afterbirth) may take anywhere from 2 to 60 minutes to be delivered. You may not notice this occurring.

- The health of you and your baby are the most important thing at this time.
- Once the placenta is delivered, healthcare provider’s examine it to ensure it is complete and send it for further testing or disposal.
- It is not recommended that the placenta be consumed by humans according to Health Canada. Information can be found at https://healthycanadians.gc.ca/recall-alert-rappel-avis/hc-sc/2018/68368a-eng.php.
- If you would like to take the placenta home for spiritual or personal reasons you will have to sign a “Release of Tissue” form at the hospital. Talk to your healthcare providers.

It’s Safe to Ask

“Can you tell me if there are any complications following the birth?”

- There may be a possibility that you will have to have a catheter during labour or following the birth of the baby to empty urine from the bladder continuously.
  - You may experience an obstetrical tear. There is information available for you if this occurs Obstetrical Tear information can be accessed at http://www.rqhealth.ca/rqhr-central/files/ceac_1367.pdf
How Long Will I Stay in Hospital After My Baby is Born?

Usually, you and your baby will be discharged from the hospital together. The average length of stay is:

- Vaginal delivery - 24 to 36 hours.
- Cesarean section 24 - 48 hours.

Mother Baby Unit (MBU) Information 306-766-6170

Between 1 to 2 hours after delivery you and your family are welcomed to the Mother Baby Unit. The majority of the time, your baby stays with you in your room unless there are concerns about you or your newborn that additional help is needed.

Who Can Visit on the Mother Baby Unit?
It is important to ensure that family members are not sick with signs and symptoms of a cold, flu, or any infection. It is important to wash each person’s hands for 2 minutes when they come to visit.

- Individuals are encouraged to have one additional (1) “Support Person” plus their partner/support person to help them throughout their hospital stay. This may be a family member, friend, or close support. These people are referred to as individual’s Support People. These Support People are welcome to be with you at any time, night and day. The 24 hour Support People can be changed at your request.
- It is your responsibility to determine who visits you by informing visitors/guests of your room number. Patients, families and guests are asked to minimize disruptions and respect the privacy of other patients.

It’s Safe to Ask

“Are you sick right now before you hold the baby?”

“Please wash your hands before touching the baby.”

“I would request that you do not kiss the baby right now as it is a newborn.”
• Siblings of the baby are welcome to visit. Any visitor under the age of 12 years must be accompanied by an adult caregiver. The Mother Baby Unit does not have the capacity to allow for any children to stay overnight.
• Space limitations require large groups to alternate their times to visit with the patient. Four (4) guests can be accommodated at a time.
• Individuals/families will determine their own rest periods. “Do Not Disturb” signs are available in each patient room if patients wish to use them.

* Visiting guidelines are subject to change *

What Services Are Available on the Mother Baby Unit?

There are interpreter services available within the Regina General Hospital. The staff can help you access Can Talk at any time or to help with communication with your healthcare team.

Each room on the unit provides family centered care to the patient and the family during the hospital stay. Each room is equipped with its own bathroom, tub, and shower. There are 2 galley kitchens in the unit with a fridge and a small amount of food and beverages for the patient. There is a microwave in each galley for you and your family to use.

Telephone and television rentals: Each patient room has a television and telephone at the bedside for an additional cost. The televisions can play videos from a flash drive. Payment is accepted with Visa or MasterCard.

Fridge: There is a patient fridge in each room for your snacks, food, and drinks that you bring.

Technology: The use of cellular phones is allowed on the unit. You are welcome to bring a personal DVD player or a wireless tablet/laptop to access the internet. Free WiFi is available at the Regina General Hospital.

Mother Baby Gathering Room: This room is for patients and their babies to gather day or night. It can provide a quiet place for them. Information sessions about “Baby Friendly” breastfeeding are daily at 11:00 a.m. There is a lactation consultant who is available every day if you are unable to go to the information session.

What is the Daily Routine on the Mother Baby Unit?

It is important that you have the support you need as you welcome the newest member of your family. Your Support People are encouraged to be with you and baby during your hospital stay.

**All Photos courtesy of the former RQHR Medical Media Services Department**
• There is spiritual, mental, emotional, and physical support available. Your healthcare team can help you contact spiritual care services/First Nation and Métis Health Services /or social work.
• Staff will assess you and your baby when you arrive on the unit and on each shift.
• You get to know your baby and begin to gain confidence caring for your newborn by being together as a family.
• Continue to have skin to skin contact with your baby.
• Staff will help you with the registration of the birth for Vital Statistics Birth Records. Make sure this form is filled out before you are discharged home. Information regarding the baby’s birth certificate and child tax are given to you.
• Medications for your pain relief are available. If it does not help your pain, talk to your nurse/physician/midwife.

Neonatal Intensive Care Unit (NICU) Information 306-766-6161

The length of time your baby stays in NICU/SCN depends on your baby’s condition. Please ask the health care team any additional questions or concerns you may have at any time. There are many reasons why babies are admitted to this area. The newborn may:
• be preterm
• have a suspected infection
• experience affects by some medications used by parent
• have difficulties with their breathing or have a low blood sugar
• have a low birth weight.

Newborn Nursery (NBN) / Special Care Nursery (SCN) 306-766-6657

These areas provide additional care and support for newborns and their families. With help from staff, individuals and families may access the NBN when family support is limited and if there are concerns about patient or baby. Talk to your nurse if you would like more information about the nurseries.

**All Photos courtesy of the former RQHR Medical Media Services Department**
What are the Visiting Guidelines in the Newborn Nursery (NBN), Special Care Nursery (SCN) & Neonatal Intensive Care Unit (NICU)

If your baby is admitted to the NBN/SCN/NICU, it is best if you visit as often as possible. You and your family are given more information about the unit and your baby during your first visit.

It is important to ensure that family members are not sick with signs and symptoms of a cold, flu, or any infection. It is important to wash each person’s hands for 2 minutes when you come to visit.

- Parents and grandparents are welcome anytime.
- Siblings over the age of 5 supervised by a parent can visit.
- Four visitors at a time are permitted.

Visitors are not allowed during shift change-over.
**Visitors may be asked to leave during doctors’ rounds.**

Visiting or Supporting People During Public Health Restrictions
Check with your health care providers regarding any restrictions that may be in place at the Regina General Hospital or for appointments during public health emergencies (e.g. COVID-19 or Influenza).

What Care Will Our Newborn Receive in Hospital?

- Skin to skin contact immediately after birth and throughout the newborn’s life is important.
- Please speak to your health care team regarding the choice of feeding method, if you need help with feeding please let your team know. Breastmilk is a natural food and the only food the newborn needs in the first 6 months of life.
- Newborns have a physical assessment, and are weighed and measured.
- The newborn may receive necessary medications after you or your support/partner consent for them to be given.
- Your baby receives a vitamin K injection with a needle in their leg muscle to prevent bleeding.
- You, your support, and your baby have identification bands on.
- Healthcare providers teach you about your baby and care of your baby. You are provided with a postpartum teaching check list to help the team understand the information you need. Some topics for learning are breastfeeding, bathing the baby, cord care, birth control, and taking care of yourself.
- The Newborn Hearing Screening Program provides a hearing test for your baby prior to being sent home from the hospital.
It’s Safe to Ask

“Can you help me and show me how to bathe my newborn?”

“Can you assist me with dressing my newborn?”

- Following your informed consent, the newborn will have blood tests done. Information regarding the Saskatchewan Newborn Screening program can be found at https://www.saskhealthauthority.ca/Services-Locations/RRPL/Documents/newborn-screening-info-for-parents-june-2009.pdf
- Another blood test that may be done is a bilirubin level to assess for jaundice. If the level is high the baby may be placed under a special “blue” light to treat the increased amounts in their blood.
- These tests are done by a small poke on your baby’s heel. To help the baby with the procedure you can place your baby skin-to-skin, breastfeed, or discuss the option of giving your baby sucrose while sucking.

For Your Baby’s Safety:

- If you leave the unit, always make sure to have someone look after your baby.
- Never leave your baby alone in your room or take your baby off the unit.
- To prevent falls, push baby in the bassinet when you are walking.
- The Regina General Hospital does not support co-sleeping due to the increased frequency of Sudden Unexpected Infant Death and Sudden Infant Death Syndrome associated with this practice.
- The baby must sleep in the bassinet on their back.

Feeding Our Baby, What Can We Expect?

Your health care team offers you support and help with feeding your baby. During a low risk pregnancy hand expression of colostrum can be started after 36 weeks. The benefits of starting hand expression near the end of the pregnancy are that:

- it helps milk come in sooner
- the quantity of milk is greater; and
- frozen colostrum that is saved can be used by the newborn after delivery.

If you would like to start hand expression or are interested in more information, speak to your healthcare provider. The hand expression video available at https://med.stanford.edu/newborns/professional-education/breastfeeding/hand-expressing-milk.html provides teaching on how to do hand expression effectively.
Feeding your baby is a learned, new skill for the individual, family, and the baby. Breastfeeding can be challenging and is different with each baby and can most often be successful with the support of family and the health care team.

**It’s Safe to Ask**

“Breastfeeding is challenging for me, can I have some help with latching the baby?”

“This is the first time I am feeding my baby a bottle, can you show me how to hold the baby?”

Additional help is available from a certified Lactation Consultant. There is a “Baby Friendly” class available daily at 11:00 a.m. on the Mother Baby Unit and a breast pump is available for you.

You can find an International Board Certified Lactation Consultant and information on the Saskatchewan Lactation Consultant Association’s website: [www.skslca.com](http://www.skslca.com).

**What does “Baby Friendly” mean?**

It means that you and your family have assistance to:

- have uninterrupted skin to skin contact with your baby
- make decisions on how to feed your baby
- be prepared with correct and current information about feeding
- receive help getting a good start with breastfeeding in hospital
- learn how to get feeding support once you are home
- feel confident and supported to continue feeding for as long as you and baby want to.

**Going Home**

During your stay at the Regina General Hospital, speak to your doctor, midwife, nurse practitioner, or nurse at any time if you have questions or concerns. For information following your birth please refer to the booklet called “Caring for Yourself and Your Newborn; The First Month” - [http://www.rqhealth.ca/rqhr-central/files/0012.pdf](http://www.rqhealth.ca/rqhr-central/files/0012.pdf).

- All linen, house coats, and breast pumps that have been provided to use in the hospital are property of the Regina General Hospital and must be returned before you go home.
- Make sure that you have baby clothes and an approved car seat to take your baby home in. Staff will make sure you have your baby properly strapped into the car seat prior to you leaving the hospital.
- The Maternity Visiting Program (MVP) supports families in and around Regina once you are home. A MVP public health nurse talks to you about this service before you leave the hospital. You can call the MVP nurse at 306-766-3700
- The MVP nurse calls you once you are home to provide support and arrange a home visit. The MVP nurse can support you and your family for up to two weeks. After two weeks, a Public Health Nurse from one of the Population and Public Health Networks will contact you to provide additional support if needed.
• If you live outside of the Regina area, a Public Health nurse within your community contacts you to discuss how you and your family are doing, to provide support, and may arrange a home visit.
• Postpartum care is provided by your doctor/ midwife/ nurse practitioner. Your midwife sees you in your home or in their office. You are encouraged to make an appointment to see your doctor/nurse practitioner in their office within 6 weeks.
• Newborn care will be provided by the doctor/ midwife after you leave the hospital. You are encouraged to make an appointment to see them within a couple of weeks from the birth.
• Discuss leaving the hospital and further instructions with your nurse/ doctor/ midwife before you go home.

It is important to know about depression in pregnancy, depression after the birth, and possible “baby blues” or postpartum psychosis. It has been shown that 1 in 5 women will suffer from maternal mental health disorders like postpartum depression.

Mental Health, Anxiety and Depression
It is very important to ask for help if you find you are struggling with anxiety and/or depression. Talk to your family, your healthcare provider, and the Public Health Nurse, as there are many resources available to help you. The Saskatchewan Maternal Mental Health initiative https://sites.google.com/site/maternalmentalhealthsk/ has some resources. Health care providers will help you and you do not have to fear your baby being taken away.

*The Obstetric Healthcare Team is here to care for you and your family and help each of you in the birth experience.*