



Admissions Brochure

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The Clough Birthing Center at Emerson Hospital

Family centered philosophy

Emerson's family-centered approach offers a flexible environment, in which we respect each family's unique and individual needs, questions and concerns. We are committed to providing you with the information, care and support necessary to create the pregnancy and childbirth experience you and your family expect.

The Clough Birthing Center

The Clough Birthing Center is unique because it offers the perfect blend of two distinct worlds—the highest quality medical expertise for both mother and baby in a wonderfully serene and wooded location close to home.

The Birthing Center offers expectant mothers and their families highly trained and supportive physicians and nurses in a technologically advanced facility. We have the region's most qualified medical team, including a wide array of obstetricians, midwives, 24-hour inhouse anesthesiologists, pediatricians and neonatal resuscitation certified RNs—all of whom offer you personalized care. If necessary, we provide high-risk pregnancy specialists from Brigham and Women's Hospital, Level 2 diagnostic ultrasound, and genetic counseling.

The Birthing Center has long been recognized for its expertise in nursing care. Our nurses regularly enhance their knowledge and skills through continuing education, while Emerson's treatment protocols are frequently updated to ensure that the standard of care is state-of-the-art.

Throughout each stage of your pregnancy, labor, delivery, and post-partum care, we will work closely with you and your family. With our exclusive childbirth menu of classes, you and your family members may participate in such programs as prenatal and infant care, sibling preparation, and exercise for mothers-to-be. Post-partum exercise classes and new mother support groups are also available.

Special Care Nursery staffed by a physician from the Massachusetts General Hospital

The Special Care Nursery (Level 2A) is equipped and staffed to care for special care newborns. This unit is also able to stabilize and manage the babies born at Emerson who may require transfer to a Level 3 facility. Many of these very ill infants may return to Emerson to grow and gain strength in our Special Care Nursery. The Special Care Nursery is prepared to monitor and respond to sudden changes in your baby's condition at any time. Emerson's in-house pediatric program ensures that one of the hospital's pediatricians is on duty at the hospital 24 hours a day to provide immediate attention should your baby need it. A neonatologist (specialist in newborn care) from Massachusetts General Hospital oversees the Special Care Nursery and is available to consult on more complex medical issues.

Post-partum care

Each private postpartum room in our Mother-Baby unit is designed to enhance the process of bonding with your new baby. For those who choose to breastfeed, our trained nurses and certified lactation consultants will be available to assist you.

After you deliver your baby at Emerson Hospital, we recommend "rooming-in." This means you will keep your baby with you in your private hospital room the whole time you are in the hospital.

This is a healthy choice for families because it lets you care for your new baby. Rooming-in will help you learn to care for all your baby's needs while staff is around to help if you need it. This will help you feel more comfortable taking care of your baby once you go home.

When you room-in:

- You can more easily hold, cuddle, look at, learn to respond to, and get to know your baby.
- Your baby can get to know you more easily.
- Your baby should cry less than babies in the nursery who are away from their mothers.
- Your baby can learn to breastfeed faster and gain weight sooner.
- You should feel more able to take care of your baby when you go home.

What you can expect:

- You and the staff will work together on bonding with your baby, keeping your baby warm, and, if you choose, breastfeeding.
- This is an exciting time for you and your family. We suggest you limit your visitors for the first few hours after you get to your private room so you and your partner can give all your attention to your new baby.
- You might think you will get less sleep if your baby is with you. However, studies actually show that mothers get more sleep with their baby in the room.
- We suggest that you keep your diapered baby directly against your skin (called skin to skin contact). When you are sleeping, we ask that you put the baby in the crib next to your bed to be safe.
- We recommend that you have someone stay with you during your hospital stay to assist with caring for your baby. This way, while you are recovering you will still be able to have the benefits of rooming in and spending time together.

We want this to be the best possible experience for you. If you have any questions, please ask the nurse who is caring for you. Rooming-in is just a small way to get to know your baby. It will help you learn all the exciting noises your baby makes and see the many things your baby can do.

Seeing is believing

We invite you to visit the Clough Birthing Center at Emerson Hospital and learn more about our facilities and caring, supportive staff. Please visit emersonwellness.org for tour information and schedules.



Special features of the Clough Birthing Center at Emerson Hospital

- Provide a variety of prenatal classes in preparation for the birth of your baby
- A locked unit and wireless infant security system for your peace of mind
- A dedicated entrance and spacious visitor waiting area
- High risk pregnancy services, including consultations with a perinatologist from Brigham and Women's Hospital
- Dedicated, compassionate and responsive nursing care throughout your birthing and post partum experience
- 24 hour obstetrical anesthesiologists
- Hydrotherapy for labor support
- 24 hour in-house pediatricians
- The region's only Level 2A, Special Care Nursery, directed by a Massachusetts General Hospital neonatologist, for babies needing special medical attention
- Private, spacious, comfortable, family centered post partum rooms
- Certified Lactation (breastfeeding) Consultants



Pain management options in childbirth

Birthing Center staff members are supportive of each woman's needs and choices around pain control in childbirth and offer a number of resources to make each delivery as personal and comfortable as possible. There are several ways to reduce your pain during labor and to help comfort you during the birth of your child.

Comfort measures

During any part of your labor, you may try warm packs, deep breathing, birthing ball, walking, using a rocking chair, massage, shower to ease your labor pains and help you relax. For your comfort, we have a hydrotherapy tub available in Labor and Delivery. The tub is located in a private, relaxed setting with light dimmers for comfort and relaxation

Analgesics

Analgesics are medicines that are injected into your muscle or your IV line to reduce pain. This provides rapid partial pain relief for a limited period of time. These medicines often make people feel "fuzzy." Some people do not like this feeling, while others find this feeling helps them to relax. This is a good medication to try if you are not sure what will work for you or what is most helpful. This medication can be given every few hours. Some patients find this medication can get them through to the delivery. Others choose a higher level of pain management, such as an epidural.

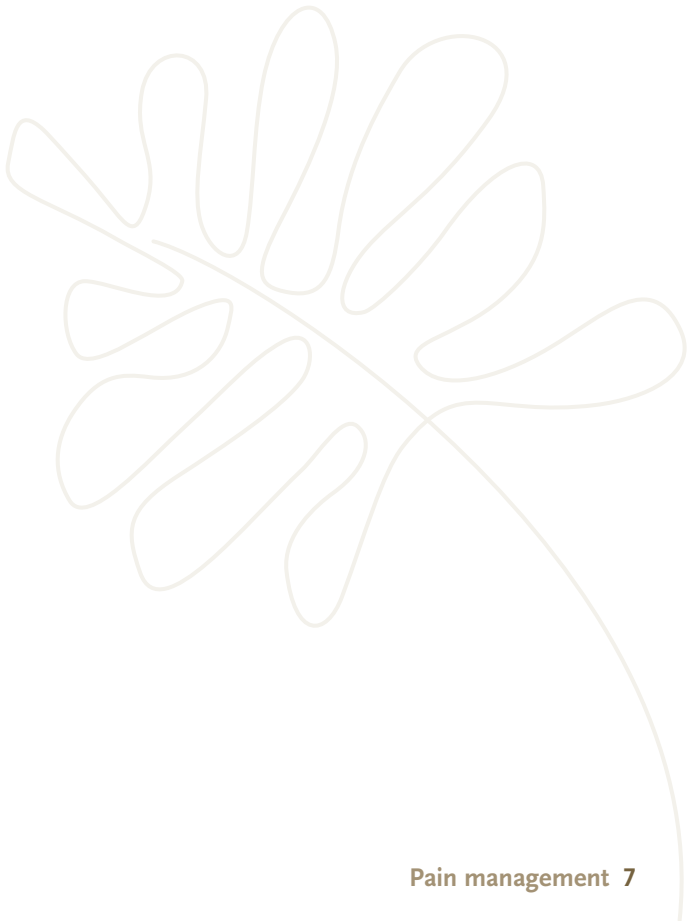
Nitrous oxide

Emerson Hospital now offers nitrous oxide for labor. This epidural alternative is popular in Europe and provides both pain relief and decreases anxiety in labor.

Nitrous oxide is a colorless gas, mixed 50/50 with oxygen, that's inhaled through a face mask. While in labor, the patient places the mask on her face and breathes deeply before her next contraction begins. The gas not only blunts the feeling of pain but also reduces anxiety. Some women use the nitrous oxide right through delivery, while others still opt for an epidural.

Advantages of nitrous oxide for labor pain management

- Provides enough labor pain relief for many women
- Enables women to avoid or postpone epidural pain medication
- Can be used in any stage of labor right up to the birth
- Gives laboring woman control over managing labor pain
- Useful in additional obstetrical procedures
- Wears off within seconds and has no adverse effects on mom or baby





Facts about obstetrical anesthesia at Emerson Hospital

A member of the Emerson Hospital Department of Anesthesia is present in the hospital 24 hours a day to help make your delivery a safer, more comfortable and enjoyable experience. The department is staffed with board-certified anesthesiologists, several of whom have trained at Boston's major teaching hospitals, such as Brigham & Women's, Beth Israel-Deaconess and Massachusetts General Hospital. Following is a summary of the types of anesthesia most commonly used in obstetrics at Emerson.

Epidural

Epidural analgesia provides safe and effective pain relief from early labor through delivery. This technique involves the administration of medications into the epidural space, a small space adjacent to the spinal cord. You will be asked to either lie on your side or sit up, with your back arched outward like an angry cat. It will be necessary to remain in this position for several minutes until the procedure is completed. After cleaning your lower back with an antiseptic solution, local anesthetic is injected into the skin. The epidural needle is then placed through the anesthetized area, and a small tube or catheter is inserted through the needle. Finally, the needle is removed and the catheter is taped into place.

After placement of the epidural catheter, an initial dose of anesthetic is injected through the catheter. A local anesthetic, or novacaine-like drug, is usually used in combination with a narcotic, or morphine-like drug. The combination is more effective than either drug alone, and allows smaller doses of each agent to be used, thus decreasing the chances of side effects.

It normally takes about 10 minutes to place the catheter and another 10 minutes or so for the epidural medications to reduce the discomfort of labor. After the initial dose is administered, the epidural catheter is attached to a pump that provides a continuous infusion of anesthetic, so that you can remain comfortable until your baby is delivered. After delivery, the epidural catheter will be removed and normal sensation will return within an hour or two.

With epidural analgesia, it is not unusual to experience numbness or tingling in the legs, and you should be aware that you will not be allowed out of bed once the epidural is in place, since your legs may be too wobbly to support you. Other side effects may include itching, sleepiness, low blood pressure, or a headache after the procedure.

If you already have an epidural catheter in place and you then need a Cesarean delivery, in most cases, anesthesia for the Cesarean delivery can be administered through the epidural catheter.

Spinal

If you need to have a Cesarean section and you do not already have an epidural in place for labor, most likely you will have a spinal anesthetic. A spinal is an injection into the lower back that can usually be done quickly and easily. It provides excellent anesthesia, while allowing you to be awake so that you may participate in the delivery process and see your baby right after delivery.

As with an epidural, you will be asked to either lie on your side or sit up, with your back arched outward like an angry cat. It will be necessary to remain in this position for a few minutes until the procedure is completed. After cleaning your lower back with an antiseptic solution, local anesthetic is injected into the skin. The spinal needle, much smaller than an epidural needle, is placed through the anesthetized area and a small amount of local anesthetic is injected through the needle directly into the spinal fluid. Unlike an epidural, a catheter is not left in place when the needle is removed and only a single dose of anesthetic medication is customarily given.

Once the anesthetic is administered, you will feel the onset of numbness, starting from your feet and rising to mid-chest level. You may feel pressure or movements at times during the procedure, but you will experience no pain. The numbness will begin to wear off after about two hours. Since most Cesarean sections take less than an hour, there is little chance that the anesthetic will wear off too soon.

A spinal anesthetic is safe for both mother and baby. There is a small risk of headache one or two days afterward, but this is not very common with the needles and techniques now in use. If a headache does occur, it can usually be treated with bed rest, fluids, caffeine, and pain medications.

General

General anesthesia is sometimes necessary in obstetrics for Cesarean delivery. If you do require a Cesarean delivery and your obstetrician feels that taking time to perform a spinal would put your baby at risk, we may administer a general anesthetic, which would put you to sleep and ensure that you feel no pain throughout the procedure. If you do need general anesthesia, a qualified anesthesia provider will remain with you until the procedure is completed to ensure your comfort and safety.

We hope that you find the above information helpful as you prepare for the birth of your baby. If you have any questions concerning anesthesia, we encourage you to call us. During normal office hours (8:00 am to 4:00 pm), a member of the Anesthesia Department can be reached at 978-287-3162. After hours, you may call 978-369-1400 and ask to speak with the anesthesiologist who is on call at the hospital.





Pediatric care

Emerson's pediatric program includes several components that are unique for a community hospital—in-hospital coverage by staff pediatricians, a Special Care Nursery for ill newborns, the Pediatric Intervention Team and partnerships with the pediatric services at leading Boston teaching hospitals.

Pediatricians who are affiliated with Emerson Hospital are available in Acton, Bedford, Concord, Fitchburg, Groton, Harvard, Littleton, Sudbury, and Westford. If you would like a list of pediatricians, please call Emerson Hospital physician referral at 1-877-936-3776 or visit the web site at www.emersonhospital.org/doctors.

If you have not chosen a pediatrician or if your pediatrician does not admit to Emerson Hospital, the Emerson Pediatric Group (EPG) is available to provide care for your newborn. A pediatrician from the EPG is at Emerson Hospital 24 hours a day, seven days a week. These pediatricians are certified in neonatal and pediatric resuscitation, provide emergency pediatric services and attend high risk deliveries as needed. At the time you and your baby are discharged, EPG will be happy to assist you in the choice of a primary care pediatrician.

Here are the answers to some questions that new parents frequently ask.

Why does my baby receive erythromycin eye ointment at birth?

The Massachusetts Department of Public Health (105 CMR 130.601 (A) (2), p. 12) requires the administration of eye prophylaxis.

Erythromycin eye ointment is given to the newborn at birth to protect against newborn conjunctivitis, especially gonococcal conjunctivitis.

The omission of erythromycin eye ointment at birth may predispose your baby to conjunctivitis.

Why does my baby receive an injection of Vitamin K after birth?

The Massachusetts Department of Public Health (105 CMR 130.601 (A) (2), p.12) requires the administration of Vitamin K.

Vitamin K is produced in the newborn's intestine and is deficient in the first few days of life.

Vitamin K is vital for the activity of certain clotting factors. A deficiency of Vitamin K may lead to hemorrhagic disease of the newborn characterized by bleeding from various organs as well as the central nervous system, resulting in serious complications. Hemorrhagic disease of the newborn may also be life threatening. Administration of Vitamin K at birth protects the newborn from hemorrhagic disease.

Why is a blood specimen taken from my baby before we go home?

Massachusetts has a newborn screening program to test all newborns for a number of disorders including thyroid disease and phenylketonuria (PKU).

The blood is obtained by a heel stick and sent to the state lab for analysis.

Omission of the newborn screening may lead to delayed diagnosis of the following disorders:

- Congenital hypothyroidism
- PKU
- Sickle cell disease
- Toxoplasmosis
- Galactosemia
- Maple syrup disease
- Homocystinuria
- Adrenal hyperplasia
- Cystic fibrosis

Why is it recommended that my baby receive the Hepatitis vaccine?

There is a vaccine to protect babies against Hepatitis B. Babies can be protected by getting three doses of the Hepatitis B vaccine. It is important to protect babies before they have contact with the virus. The Department of Public Health recommends that your baby receive the first dose of vaccine before leaving the hospital. The second and third doses will be given by your baby's pediatrician.

In addition, the Department of Public Health requires a newborn hearing screening. Hearing screenings are performed by Pediatrix in your room or the nursery prior to discharge.

Why does my baby receive a hearing screening in the hospital?

Sometime during your baby's hospital stay his or her hearing will be screened. It is important to check a baby's hearing at birth because good hearing is needed for a child to learn to talk. Because of the importance of hearing for learning, it is now a Massachusetts state law that all newborn babies be checked for hearing loss.

The test is easy, painless, reliable, and is done either in the mom's room or in the nursery while the baby is sleeping. The test will measure your baby's brain wave response to thousands of soft clicks that he/she will hear through small earphones placed over their ears. The test usually takes 15 to 45 minutes depending on how quietly your baby sleeps through the test. If your baby's screening matches normal response, your baby passes the screening. In some instances, the baby may be too awake for the screening, or the baby's screening does not match the normal response. The baby will receive a repeat test. You will receive a written handout with the results of the screening. If another test is needed, an appointment for this test should be made before you leave the hospital, for within three weeks. The Massachusetts newborn screening law requires that third-party payors cover the cost of the screening tests. If no coverage is available, then the Commonwealth of Massachusetts will cover the test.

If you have any questions about the hearing screening, feel free to ask your nurse. Exemption from the hearing screening is only permitted on the grounds of sincerely held religious beliefs, in which case a waiver will need to be signed documenting the exemption.

If you have any concerns about your baby's hearing at any time, you should discuss these concerns with your pediatrician. Further information about newborn screening can be obtained from the Massachusetts Department of Public Health at 800-882-1435.

Why does my baby receive a screening for congenital heart disease?

When and how babies are screened

Pulse oximetry is a simple bedside test to determine the amount of oxygen in a baby's blood and the baby's pulse rate. Low levels of oxygen in the blood can be a sign of a CCHD. The test is done using a machine called a pulse oximeter, with sensors placed on the baby's skin. The test is painless and takes only a few minutes. Screening is done when a baby is 24 to 48 hours of age, or as late as possible if the baby is to be discharged from the hospital before he or she is 24 hours of age.

The importance of screening for critical congenital heart defects

Some babies born with a heart defect can appear healthy at first and can be sent home with their families before their heart defect is detected. It has been estimated that at least 280 infants with an unrecognized CCHD are discharged each year from newborn nurseries in the United States. These babies are at risk for having serious complications within the first few days or weeks of life and often require emergency care.

Pulse oximetry newborn screening can identify some infants with a CCHD before they show signs of a CCHD. Once identified, babies with a CCHD can be seen by cardiologists and can receive specialized care and treatment that could prevent death or disability early in life. Treatment can include medications and surgery.

If you have any questions about the screening, feel free to ask your nurse.





Breastfeeding support at Emerson Hospital

How can I learn about breastfeeding?

Emerson Hospital's family centered approach to the birth of your baby begins with a variety of prenatal classes which are designed to prepare expectant parents for the new joys of parenthood that they are about to embark on.

We strongly encourage you and your partner to take prenatal breastfeeding classes before you deliver. Please visit emersonwellness.org to sign up for our classes.

Skin to skin connection

Seeing your baby for the first time is an experience you will never forget. All those moments of preparing and dreaming have finally become real. Once the baby is born, assuming there are no complications, your baby will be placed skin to skin directly on your chest. A warm blanket will be placed on the baby and now the bonding can begin. This connection of the unwrapped baby lying directly on your skin is called skin to skin contact and can provide you and your baby time to get to know each other. This initial snuggling also have very important health benefits.

Skin to skin contact immediately after birth has these positive effects on a newborn and new mother:

Babies

- Breastfeed better
- Cry less and are calmer
- Stay warmer
- Have better blood sugar levels
- Have more stable and normal heart rate and blood pressure
- Are protected by some of your good bacteria

Mothers

- Breastfeed more easily
- Learn cues that their baby is getting hungry
- Bond more with their baby
- Gain confidence and contentment in caring for their baby

The best start for breastfeeding is when a baby is kept skin to skin with the mother immediately after birth until the first feeding. The baby's sense of smell allows him to find the breast to begin the initial latch on.

Benefits of breastfeeding

There are many benefits of breastfeeding. For however long you choose to nurse, your baby's immune system can benefit greatly from breastmilk. The following are just a few of the benefits for a baby and the mother.

For baby:

- Easily digested
- Perfectly matched nutrition
- May have protective effect against SIDS
- Less gastrointestinal disturbances, ear infections and allergies
- Skin to skin, eye and voice contact

For mother:

- Convenient
- Economical
- Helps the uterus return to its normal size faster
- Helpful with weight loss
- Reduces the risk of osteoporosis
- Less likely to develop uterine, endometrial and ovarian cancer
- Reduces the risk of breast cancer

Exclusive breastfeeding

Because of the benefits of exclusive breastfeeding, UNICEF and the World Health Organization (WHO) recommend exclusive breastfeeding for the first 6 months of a baby's life. This is based on scientific evidence that show benefits for infant survival and proper growth and development. Breastmilk provides all the nutrients that an infant needs during the first 6 months. Exclusive breastfeeding may also reduce infant death caused by common childhood illnesses such as diarrhea and pneumonia and hastens recovery during illness. For special medical situations, when mother's own milk isn't available, Emerson now has pasteurized Mother's milk available for supplementation.

Helpful tips on becoming successful at breastfeeding

“Watch your baby and not the clock” is the advice to live by. Learn your baby’s feeding cues and feed early and often.

Your baby will eat 8–12 times every 24 hours

Rest as much as you can—sleep when the baby sleeps

Milk production is regulated by supply and demand.

The more you breastfeed, the more milk you will make.

Signs of hunger

- Sucking on tongue or lips during sleep
- Sucking on fingers
- Moving arms and hands toward mouth
- Fussing or fidgeting while sleeping
- Turning head from side to side

Signs of being full

- Falls asleep
- Relaxes the body
- Opens his fists
- Relaxes the forehead
- Lets go of the nipple



Our Journey to becoming Baby-Friendly

A Baby-Friendly hospital is a mommy-friendly hospital! Baby-Friendly has always been our mission at Emerson Hospital, but we are taking extra steps as part of the worldwide Baby-Friendly Hospital Initiative to implement practices that offer an optimal level of care for infant feeding and mother/baby bonding.

To become a Baby-Friendly Hospital, hospitals have to implement “Ten Steps to Successful Breastfeeding.” Emerson Hospital is on the journey to completing all ten of these steps and achieve this highly regarded designation. You can also find more information on the Baby-Friendly Initiative by visiting www.babyfriendlyusa.org.

Here are things you should know

- All healthcare staff are familiar with the infant feeding policy and have been trained to help carry out the policy, including adequately informing all pregnant women about the many benefits of breastfeeding and how to manage breastfeeding after leaving the hospital
- Your baby will be placed skin to skin with you right after birth.
 - If you have had a vaginal delivery and there are no complications, your baby will be placed directly on your chest after delivery and remain there until the first feeding is accomplished.
 - If you have had a cesarean delivery and there are no complications, your baby will be placed skin to skin as soon as possible, usually in the recovery room.
- Your baby will be able to stay in the room with you at all times
- We will refer you to a support group upon discharge
- If you chose to breastfeed:
 - You will be provided instruction and support on how to breastfeed and continue breastfeed
 - Your baby will only be given breast milk. This means no other forms of food or drink, unless medically necessary.
 - Your baby will not routinely receive pacifiers or artificial nipples
- If you chose to formula feed:
 - You will be provided instruction about safe preparation and feeding of infant formula
 - Your baby will not routinely receive pacifiers

What happens when I go home?

You may have additional breastfeeding challenges once you are at home. In these cases, a Lactation Consultant is available by telephone or by appointment. The Emerson Lactation Consultant welcomes your call and is available for consultation whether you have delivered at Emerson Hospital, or at a neighboring facility. Some insurance companies will reimburse the Breastfeeding Support Service for outpatient visits. In the event that your insurance company does not reimburse for this service, you will be responsible for payment.

For more information on breastfeeding support at Emerson or to speak to the Lactation Consultant, please call 978-287-3317.





“Germ free” environment

The obstetrical department is very diligent in maintaining the most “germ free” environment for all our newborns. We ask that all siblings and/or visitors are free from any communicable or infectious diseases while in the hospital. Please relay this to your friends and families.

Family members or other visitors who have a communicable disease for which the newborn is at particular risk (including impetigo, varicella, tuberculosis, measles, mumps, rubella and influenza) should NOT visit.

Visitors and family members should also be free from common colds or coughs as these might be quite serious for newborns.

Finally, please advise all visitors to wash their hands before visiting a newborn.





Your rights when you have a baby

Federal law gives you the right to stay in the hospital with your baby for at least 48 hours after giving birth (or 96 hours after birth if you have a Cesarean section). If this time period ends between 8:00 pm and 8:00 am, you have the right to stay in the hospital for one more night, until after 8:00 am, unless you choose to leave earlier.

If you would like to go home from the hospital early (before 48 hours after giving birth or before 96 hours after a Cesarean section), you may do so if your doctor agrees.

If you choose to leave early:

- You have the right to at least one home visit by a nurse to make sure that both you and your baby are healthy and to answer any questions you may have.
- The hospital will arrange the home visit. Please speak with a nurse or doctor if you feel you are entitled to a home visit.
- A home visit is voluntary. If you do not want one, please let your nurse or doctor know.
- The home visit must occur within 48 hours after you go home.

Please note—some health insurance plans are not required to pay for a home visit. Contact your health plan or your employer if you have questions.

For more information: If you have questions about your rights under this law, talk to your nurse, doctor, or midwife, or call the Massachusetts Department of Public Health at 617-753-8000 or the Board of Registration in Medicine at 617-654-9830.



Resources

Childbirth Education classes

Emerson Hospital offers courses in prenatal care, infant care, breast-feeding and more. All courses require pre-registration, preferably by your 4th month. Please visit emersonwellness.org to view additional classes or to sign up.

Tours

Free tours of the Birthing Center are given on a regular basis. For more information and to register, please visit emersonwellness.org. Registration is required for tours.

Prenatal Childbirth

This five week class helps pregnant women and their partners make informed decisions about childbirth. Topics include information about relaxation breathing, realistic labor options, and understanding the process of labor.

Prenatal Childbirth—*One Day*

This condensed childbirth education class in a fast-paced teaching environment is designed to prepare couples for their labor and birth experience. Bring two pillows, a snack and lunch, or you may purchase lunch in the hospital café.

Natural Childbirth

This three-session course is ideal for the expectant mom and her labor coach who wish to learn about the multiple natural coping techniques for an unmedicated birth. Coping techniques include relaxation, position and movement, hydrotherapy and massage.

HypnoBirthing®

HypnoBirthing® is a unique program that will support a natural childbirth experience using hypnosis. You will learn simple breathing, relaxation and guided imagery techniques to help you release tension and fears, and increase comfort throughout your pregnancy and birth. This is a five week class.

Sibling Preparation

A special class to prepare youngsters ages 2 1/2 to 6 for the arrival of a sibling. Siblings will be encouraged to talk about what babies are like and how it feels to be a big brother or sister. This class will include a child-oriented tour of the birthing center.

Your child should bring:

- A baby picture of himself or herself.
- A small doll or stuffed animal.

We ask that a parent attend class with their child or children.

Infant Care

This class will provide an opportunity to learn infant care and parenting skills including bathing, diapering, and holding. Information about normal infant characteristics, when to call the pediatrician, infant feeding, and approaches to parenting will be discussed.

Breastfeeding

This class covers the benefits and challenges of breastfeeding. Special consideration is given to techniques, common early concerns, and how to successfully incorporate breastfeeding into your lifestyle.

Infant CPR Anytime™ Program

This one-hour introductory class provides information and practice of the skills needed to perform infant CPR and to relieve choking. Participants will receive the CPR Anytime™ kit to use at home for future practice.

This is a non-certification class.

Safety 101

Our safety class prepares new and expectant parents, grandparents and others providing childcare for various aspects of newborn and early toddler (up to age 2) safety including: car seat safety, crib and sleep safety, baby proofing the home, poison prevention, water safety and much more.

Soon to be Grandparents Class “We’re going to be grandparents”

Back to sleep? Tummy time? Car seat inspections? Today’s parents have dozens of new products, new ideas and new “rules” that barely existed 30 years ago. This class provides the perfect update for new grandparents-to-be.

Topics include:

- The changes in labor and delivery practices
- The latest recommendations for infant care and safety
- Grandparents will also learn how to support the new parents and accept their decisions
- Enjoy a tour of the OB unit

Lactation Consultation

Emerson Hospital offers outpatient visits with a certified lactation consultant. These visits can be very helpful in resolving difficulties you may be having with breastfeeding. Some insurance plans cover lactation consultation. Please check your plan for specific coverage information. For more information about Emerson Hospital’s Lactation Consultation, please call 978-287-3317.

New Mothers Group

The New Mothers Group is a place for new mothers to come with questions and concerns or to just meet and share experiences with other mothers. Join other new mothers and their babies who are also facing the challenges of these early months. For more information about this support group, in conjunction with First Connections, please call 978-287-0221.



Clough Birthing Center
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