



**BOZEMAN HEALTH**  
DEACONESS HOSPITAL



# **FAMILY BIRTH CENTER**

## PATIENT ADMISSION GUIDE

Our goal is to provide outstanding care 100 percent of the time.

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We warmly welcome you, your coach, your family and friends to our Family Birth Center. We are honored that you have chosen us to be part of your baby's birth! We hope this packet will help acquaint you with the hospital and our department so that your labor, birth and recovery run smoothly.

Our nursing staff has more than 500 years of combined nursing experience in the care of moms and babies. More than half of our nurses have successfully completed additional, voluntary national certification. We take great pride in giving individually customized, competent and compassionate care to each of our patients. We know that the memory of your baby's birth will last a lifetime.

We encourage family-centered care as part of our focus on giving new families a great start. Whether this is your first or tenth baby, we help you and your family adjust to your newest member. We support you in the wondrous adventure of learning the personality of your new addition. In some ways your baby will be like all other newborns...sleeping a lot and cluster feeding during the second night. In many ways your baby will be his or her own little person. During your stay, we will help you discover his/her unique qualities.

If you have a birth plan, please review it with your provider before coming to the hospital. Birth plans will be reviewed again upon admission. Plans may need to change to provide a safe delivery for you and your baby. We encourage you to attend our child birth preparation and newborn feeding classes prior to your due date.

We request that, prior to birth, you choose a hospital-based physician to care for your newborn while you and the baby are in the hospital. We are happy to recommend pediatricians and physicians with privileges at Bozeman Health Deaconess Hospital.

For a list of all physicians credentialed at Bozeman Health Deaconess Hospital, please visit our website at [bozemanhealth.org](http://bozemanhealth.org)

After delivery, one of the most important ways to keep your baby safe is to have direct line-of-sight to your baby at all times. Our nursing staff will address this and many other newborn safety and care techniques with you after your delivery.

**All expectant mothers are encouraged to fill out their pre-registration forms, even if you do not have insurance, and return them to the hospital three months prior to your due date. You can drop them off at the Labor and Delivery desk, located on the second floor of the hospital.**

We consider it an immense privilege to be a part of your baby's birth and delight in serving you in any way we can. Please call me at 406-414-1705 if I can help you with anything.



Most sincerely,

A handwritten signature in black ink that reads "Susan Connell, RN". The signature is written in a cursive, flowing style.

Susan Connell, RN  
Family Birth Center Manager



# PREPARING FOR YOUR STAY

## INFORMATION TO HELP MAKE YOUR LABOR, DELIVERY AND RECOVERY EASIER

### Before You Arrive

- Prearrange childcare for your children at home. The nursing staff is not able to care for children while assisting you in labor. If older children are observing the delivery, please have someone available to remove them if necessary.
- Bring some pajamas for dad to wear if he is staying in the hospital with you.
- Consider finding a doula to assist you in labor.
- Make arrangements for a ride home by 11 a.m. on the day you check out. Most patients who have a vaginal delivery stay two nights after the birth. Most cesarean section patients stay three to four nights.
- You and your spouse or birth coach are welcome to film in the labor room. Please see the rules about photos/video below.
- Have a proper, new infant car seat to take your baby home or you will not be discharged. Montana law requires that a child age six and under who is a passenger in a motor vehicle must be properly restrained in a child safety seat.

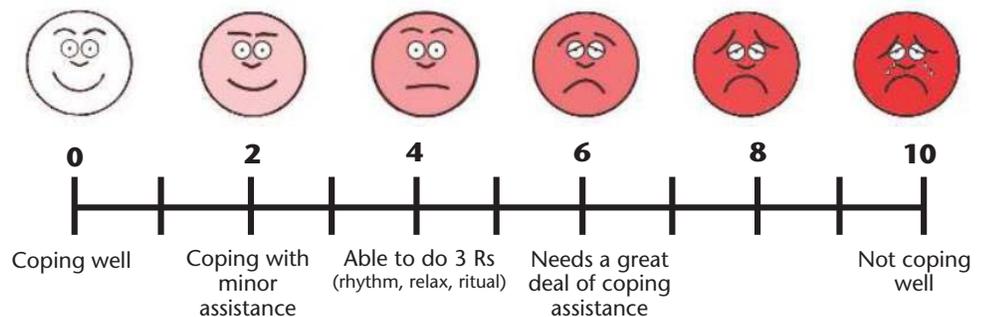
Have the installation of your infant car seat evaluated for safety by the Bozeman Fire Department, 406-582-2350.

Because second hand car seats may have faults that would not provide full protection for your infant on impact, we ask you to purchase a new car seat for utmost safety. Bozeman Health Deaconess Hospital does not supply infant seats for your baby. Our staff is not certified in car seat installation and cannot assess your baby's car seat for safety before discharge.

When you are ready to come to the hospital, plan to park in Lot C and use Entrance 2 (6 a.m. - 5 p.m.) or the ER entrance (nights and weekends). Family Birth Center 406-414-1009

### Pain Management

Managing your discomfort is key to making your labor and birth as easy as possible. There are several different methods to managing your pain and it is most important that you effectively communicate your discomfort level to your care giver. Here is a chart used throughout the hospital to help you describe your pain.



### Personal Photographs

- Photographs must not disrupt patient care and can be stopped at any time by request of patient or staff member.
- Photos may be taken in the operating room (OR) only after delivery of the baby.
- The photos may only contain the baby and/or mother's face.
- Photographer must follow the staff's instruction regarding physical location while taking photos.

#### Photos may not be taken of:

- Any staff member
- The surgical area or beyond the patient drape
- Any medical procedures
- During delivery of the baby.
- In the event of an emergency
- Videos are not allowed.

*If these rules are disregarded, it may result in permanent removal from the delivery room or OR.*

# FAMILY CARE FOR FULL-TERM NEWBORN BABIES

## DEVELOPMENT MILESTONES

### Golden Hours

The first few hours after delivery are a special time for you to bond with your baby. You may want to consider limiting visitors.

### C-Section

If you have a cesarean-section birth, our hope is to keep your family together from birth in the operating room until discharge from the hospital. We encourage 24-hour rooming in. You may have a someone stay with you and your newborn. We have beds or fold-out sleeper chairs in each room just for this purpose.

### Feeding Your Newborn

- After your baby is born, you'll be given your baby to hold. This is a very gentle way to introduce your baby to the world. Your baby hears your heart beat and learns the smell of your skin.
- Your baby will want and need to feed frequently. Staff will help you recognize feeding cues and assist you with nursing or bottle feeding.
- Your baby will stay with you in your room. If needed, for brief periods, you may bring your baby to the Special Care Nursery.
- Nursing moms will be shown different positions to hold her nursing baby and learn about proper latch. This will help assure baby is getting enough milk, and that nursing is not painful.
- You will be given accurate and consistent information about how to breastfeed and how to make enough milk.
- Manual expression of breast milk will be explained.
- Your baby will be given artificial milk or pacifiers only if you request them or if medically indicated. We respect your choice to supplement breastfeeding, should you choose to do so.
- You will be given support information and phone numbers should you need help after you go home.

We consider it a privilege and honor to be a part of your family's birth experience. Please let us know how we can help you.

### Skin-to-Skin Contact

One of the best ways you can bond with your baby is to hold your unwrapped baby against your chest, skin-to-skin. Babies held skin-to-skin are more content and their temperature, breathing, and heart rates are more stable. In fact, your body will heat up or cool down to just the right temperature for your baby. This is one of the reasons skin-to-skin contact is so important. The American Academy of Pediatrics recommends that all babies spend time skin-to-skin as soon as possible after birth. The first hours of skin-to-skin bonding let you and your baby get to know each other.

**Breastfeeding:** Skin-to-skin bonding also gives you and your baby an excellent start for breastfeeding. Research shows that skin-to-skin babies are better able to breastfeed. They also keep nursing an average of six weeks longer.

**While in the hospital:** Your chest is an excellent place for your baby to adjust to life in the outside world. We recommend you keep your baby skin-to-skin while you are awake.

**Beyond your hospital stay:** Continue to provide skin-to-skin contact after you leave the hospital. Your baby will stay warm and comfortable on your chest and the benefits for bonding, soothing, and breastfeeding continue well after birth. Keeping your baby skin-to-skin in their first few weeks makes it easy for you to know when to feed him/her. Skin-to-skin can help your baby be interested in nursing if he or she is sleepy.

We encourage fathers to place their newborns skin-to-skin also.



**thenewbornchannel.com**  
**Enter password 03804**

Helpful information on a variety of topics including:

- Newborn care
- Breastfeeding
- Baby development
- Shaken baby syndrome
- Circumcisions
- Immunizations
- Postpartum care and more!

# NEWBORN FEEDING SUPPORT SERVICES

## CONTACT INFORMATION AND TIPS FOR FEEDING

### Newborn Feeding Support Services

Feeding your infant is a special time of emotional bonding that will last a lifetime. The ability to create and nurture life is a major human event that puts a woman in touch with the essence of being. Whether you choose to breast or bottle feed, Newborn Feeding Support Services will work with you individually to establish a feeding plan that supports your informed decisions.

An International Board Certified Lactation Counselor (IBCLC) or Certified Lactation Counselor (CLC) will visit you daily during your hospital stay.

Counseling is available after you have gone home.

### Newborn Feeding Support Services

Appointments available seven days a week.

9 a.m. to 3:30 p.m.

### Newborn Feeding Support Line

8 a.m. to 5 p.m.

To schedule an appointment or reach the support line, call 406-414-5578. Messages can be left after hours and calls will be returned the following morning.

If you need to speak to someone directly, call the nursery at 406-414-5586.

Feeding Support Services can now be billed to Medicaid and private insurance.

### Feeding on the Second Night

When you become a new parent, both you and your little one spend the first day bonding and recovering from birth.

What you may notice:

- Your baby may eat more often and for shorter periods.
- It may seem that your baby is eating all day and night.
- Feeding patterns may include feeding every 1-3 hours for 30-45 minutes at a time. For example, your baby may feed for 45 minutes, sleep for 15 minutes and then want to eat again. This is okay and expected!
- The baby may be fussier than on day one. This is not because you are doing anything wrong nor is it due to your milk supply not being in. Your baby is simply adjusting to the world outside your womb.

What you can do:

- Allow the baby to nurse as frequently as needed.
- Whether you are breast or bottle-feeding, use skin-to-skin contact for comfort by having the baby dressed in just a diaper and snuggled up against your bare chest. Skin-to-skin can be done with mom and dad, as your baby is familiar with both of you. However, keep warmth in mind for both of you and cover up with a blanket when needed.
- Rest up on day one of life. Keep visitors to a minimum. It is so fun to share this new addition to your life with many visitors, but all the activity can lead to a tired mom and an even fussier baby on the second night.
- Communicate to your spouse/partner, family and nursing staff when you are tired. Small naps are the best way for you to get needed rest. Research tells us that mom and baby rest better when in the same room.

We want to help you on this new journey as a parent. Please communicate your questions and concerns with us.



# LABOR AND DELIVERY CHARGES

## ESTIMATED COSTS YOU MAY ENCOUNTER DURING YOUR STAY

The day you are admitted to the hospital, you are charged for a room, including when you are in the labor/delivery area. You are not charged for the day of your discharge. If you are admitted and leave later that same day, you are charged for one day. Federal mandate allows a 48-hour stay for a vaginal birth and a 96-hour stay for Cesarean birth, starting from the time of delivery.

Charges may vary depending on level of care, complications, multiple births, and length of stay. Any charges not covered by your insurance will be billed directly to you.

**If you have any questions about pricing before you are admitted, please call a financial counselor at 406-414-1039 or 406-414-1711.**

### Professional Charges

Professional charges, including the OB/GYN, anesthesiologist, radiologist, pediatrician, and independent practitioners/offices are not included in your hospital bill. Please contact those providers directly for any billing questions.

Billing and insurance details are on the last page of this booklet.



### IMPORTANT CONTACT INFORMATION

Patient Financial Services	406-414-1720
Financial Counselor	406-414-1039 or 406-414-1711
MASH Advocate	406-414-5595
Montana Medicaid	800-332-2272
Gallatin Valley Anesthesia	844-958-2053
Intercity Radiology	406-587-8631
Montana Department of Public Health and Human Services	800-762-9891 or 406-444-1216
	dphhs.mt.gov

[bozemanhealth.org](http://bozemanhealth.org)

### FAMILY BIRTH CENTER HEALTH EDUCATION

We want to help prepare you and your family for the birth experience you're hoping for. Here are some classes that will help.

- Parent Tours of Family Birth Center
- Prenatal Breastfeeding Class
- Bozeman Health Outpatient Lactation
- Sibling Class: What about Me?
- Childbirth Education Class
- [newbornchannelnow.com](http://newbornchannelnow.com) (password: 03804)

For more information or specific class dates, call 406-414-1644 or visit [bozemanhealth.org/events](http://bozemanhealth.org/events).

# MEDICATION ALLERGIES VS. ADVERSE DRUG REACTIONS

## EMERGENCY SERVICE

Sometimes, when a patient is prescribed a particular medication, that patient may have an unintended reaction. Sometimes those reactions are due to an allergy to the medication itself, and other times it could be an adverse reaction to the drug. It is important for patients and their health providers to recognize and distinguish between the two responses.

An adverse drug reaction (ADR), according to the World Health Organization, is “a response to a drug which is noxious and unintended, and which occurs at doses normally used or tested in [humans]” for diagnosis or treatment of a disease.

### Types of adverse drug reactions (ADR):

- **Allergic reaction:** The body’s immune system overreacts to the medication and triggers an allergic response, producing antibodies to the medication. The most common signs of an allergic reaction are hives, rash, and fever.

*Example:* difficulty breathing after taking penicillin

- **Side effect:** This is a reaction to a medication that is predictable, and known to occur in some people.

*Examples:* clindamycin causing diarrhea; opioids (hydrocodone, oxycodone) causing upset stomach or fatigue

- **Intolerance:** These are signs of a body’s inability to metabolize a drug when taken at a normal dose.

*Example:* ringing in the ear with a normal dose of aspirin

- **Toxicity/Overdose:** This is a dose-related effect that is predictable.

*Example:* high-dose morphine causing sleepiness and breathing problems

- **Pseudo-allergy:** This resembles an allergic reaction, but does not involve the immune system.

*Examples:* “Red-Man” syndrome in reaction to an infusion; itch from morphine.

**ONLY** true allergic reactions should be listed in your patient record as allergies. It is important to know with certainty which type of reaction you have had in the past.

### Which ADRs to List as Allergies in Your Patient Chart

Often, the best medication to treat a condition or disease may not be prescribed because of an “allergy” listed in your record. This could lead to longer treatment, use of medications that are less effective, poor outcomes overall or treatment options that you don’t tolerate well. For example, many people list an allergy to penicillin. If your reaction is not documented accurately, it could keep your doctor from prescribing similar antibiotics, which are the best treatment choices for many infections seen in the hospital. It is also important to note that a small rash from penicillin, or any rash experienced more than 10 years ago should NOT be considered an allergic reaction.

If a parent has had a reaction to a medication, it should NOT be listed as an allergy in their child’s record. If a parent is allergic to a drug, it can increase the chance that the child may also react to that medication, but if it is listed in the child’s record, it could inappropriately limit treatment options.

### True Allergy vs. ADR:

A true allergy is probable if you have had the following symptoms after taking a medication:

- a reaction requiring the use of epinephrine (EpiPen®)
- shortness of breath or wheezing
- swelling of the face or throat
- severe skin rash or hives
- severe drop in blood pressure
- rapid pulse
- any of the above accompanied by nausea or vomiting, dizziness, lightheadedness or loss of consciousness
- any of the above occurring within several minutes of taking the medication

### Signs of an ADR :

- small rash
- headache
- nausea
- stomachache
- diarrhea
- fatigue

# HELPFUL HINTS

## BILLING, INSURANCE AND IMPORTANT PATIENT INFORMATION

### Billing and Insurance Information

**If you have insurance:** Please contact your insurance company for coverage details and required authorizations before receiving services. Coverage provided by your insurance carrier is an agreement between you and them. Also understand that any costs you incur are ultimately your responsibility. The best source to obtain information related to your benefits is to contact your insurance company directly. This includes any questions about adding the baby to your policy.

To satisfy your insurance company's hospital admission requirements, contact your insurance company within the stated time on your policy to notify them of your impending hospital admission. Failure to complete this process may reduce benefits on your claim.

Prior to admission, complete the insurance information area on the pre-registration sheet and send with a copy of your insurance card (front and back) or bring them with you to the hospital. We will be happy to file your insurance claim, provided we are given the necessary information.

You are responsible for providing us with any/all necessary information sent to you by your insurance company to process insurance claims or facilitate payment.

For all patients and insurance types, we submit bills to your insurance carrier(s) on your behalf. If applicable, you will be billed for your co-pay, deductible, and/or co-insurance. After your insurance processes the claim, you have the option to receive a five percent prompt pay discount by paying in full within 15 days after the insurance pays.

Call Patient Financial Services at 406-414-1720 for any questions regarding your bill.

**If you do not have insurance:** As a nonprofit hospital, Bozeman Health Deaconess Hospital is committed to providing medically necessary health care to all, regardless of financial ability to pay. To ensure that cost is not a barrier in our community, we offer payment plans and financial assistance to those who qualify.

Contact Patient Financial Services at 404-414-1720 or our MASH program at 406-414-5595 between 8 a.m. and 4:30 p.m., Monday-Friday, prior to admission. Your final bill will be available 7-10 days after you are discharged.

Self-pay patients receive an automatic five percent discount on their bill. If the patient is able to pay in full within 15 days of their final bill, they can receive an additional five percent prompt pay discount.

*Please refer to the estimated costs on the preceding pages.*

### Advance Directives

"Five Wishes" Advance Directives Booklets are available upon request. We encourage you to complete this form so that your advance directives, if needed, are honored.

### Notice of Privacy Practices

We like all our patients to know how medical information about them may be used. Please refer to Bozeman Health's Notice of Privacy Practices. You should receive this brochure from your health care provider.

### Patients' Rights and Responsibilities

As a patient of Bozeman Health Deaconess Hospital, you have important rights that ensure you receive the highest quality health care. All of your rights also apply to any person with legal responsibility to make decisions regarding your medical care. For more information, please request a copy of Bozeman Health's Patient's Rights and Responsibilities brochure from your health care provider.

### Condition HELP—x1800

Condition Help, or Condition H, is a safety initiative for patients, created to address the needs of patients in case of an emergency or when the patient is unable to get the attention of a health care provider. Dial extension 1800 from any hospital phone to activate a multidisciplinary team who will respond to assess the situation and treat the patient as needed. More information regarding this policy is available upon request.



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