

# Information for Parents about their baby in the Newborn Period

**Women & Children's Group**

**This leaflet has been designed to  
give you important information  
about your condition / procedure,  
and to answer some common  
queries that you may have.**

## Examination of the newborn

Prior to discharge a Midwife / Paediatrician will visit you and ask to perform an examination of your baby – this includes listening to the heart and lungs and checking the hips and eyes. However, please note the head to toe examination is intended to check for some of the more obvious problems which can arise within 4 – 48 hours of delivery. If a member of staff has any concerns you may be asked to wait for the Registrar or Consultant to review your baby.

## Can every condition be diagnosed by this examination?

No, there are some conditions that cannot be detected when the baby is so young; therefore, the examination cannot guarantee that your baby will not become ill or unwell in the future. This is why your GP, Health Visitor and Midwife will continue the support and screening in the community.

In order to perform this examination as thoroughly as possible, you may be asked the following questions:

- During your pregnancy did you have any medical conditions, i.e. diabetes or epilepsy, or have you taken any medication?
- Did you have any problems during your pregnancy, for example shown on your scan report, blood tests, or was your baby lying in a different position, i.e. breech?
- Are there any relatives who have experienced any of the following problems at birth or in early childhood?
- Thyroid problems
- Heart problems

- Clicky hips/limbs
- Breathing problems
- Kidney/urinary problems
- Deafness or blindness
- Jaundice or anaemia
- Metabolic problems
- Any other health problems which you may want to discuss

Please note that this is also an opportunity for you to ask us any questions you may have regarding your baby.

## Some common findings with newborns:

- Yellow / white spots on the face or nose, called millia. They will fade during the first two weeks
- Pearly white spots in the mouth – 70% of newborns have Epstein's Pearls' which disappear within a couple of weeks
- Stork marks – on the back of the neck or eyelids, may appear red and usually spontaneously resolve after 12 months
- Enlargement of the baby's breasts – a harmless effect of your hormones', which may also cause swelling of the genitalia. This swelling will disappear within a few days of life
- White tipped spots with red blotchy surround – this is called neonatal urticarium, or erythema toxicum. 30% of term babies will have this rash, thought to be due to the babies developing some immunity to the external environment
- Pink urine – a pink staining is the result of your baby excreting extra urinary

deposits from birth and disappears within a few days

- Vaginal loss – you may see a milky white discharge, possibly streaked with blood (pseudo-menstruation) again due to your hormones and is quite common within baby's first days

As a parent you become aware of your baby's behavior, activity and appearance. Should you feel something is not right your GP, Health Visitor and / or Midwife should be available to discuss your concerns.

Keep the temperature of the room your baby sleeps in at an even temperature of about 65°F (18°C) both day and night. Do not swaddle your baby in blankets as this may overheat them.

Avoid smoking and taking your baby into smoky atmospheres – please read the leaflet about reducing the risk of cot death.

Sleeping position – put your baby to sleep on its back from the beginning, with feet to foot of the cot. Do not sleep with the baby in your bed or lying together on a sofa (especially if you have been smoking, drinking or using drugs).

***Here is a list of times when you should contact your GP or Midwife:***

- If breast feeding – if time spent on the breast is reduced or baby is going for long periods without feeding
- If feeding is reduced – if baby has taken less of the usual amounts of feed, contact your midwife
- If baby has vomited – at least ½ the feed after at least 3 of the last feeds and if any of the vomits are green in colour

- Dry nappies – if there is much less urine passed than usual
- Bloody stools – if this occurs please contact your G
- Baby's cry – if your baby's cry has changed (high pitched or weak) and you cannot settle them by usual methods; seek advice from your GP or Midwife
- Responsive – if your baby is less responsive, less active or more floppy than usual – contact your GP immediately
- Colour – if your baby has a colour change during a feed, looks very pale all over, grunts with each breath, had obvious dips in the upper tummy or between the ribs as they breathe – contact your GP immediately
- Fever – contact your GP if baby has a high temperature

Even if you have consulted a Doctor, Midwife or Health Visitor, if your baby is not improving or is getting worse, tell your GP again even on the same day.

**Contact Details:**

**Scunthorpe General Hospital:**

Central Delivery Suite: 01724 290117 / 290405

Ward 26: 01724 290112

**Diana Princess of Wales Hospital:**

Blueberry Team: 01472 875249

Holly Team: 01472 875250

Jasmine Team: 01472 875555

Honeysuckle Team: 01472 875251

**For further information please visit:**

[www.newbornphysical.screening.nhs.uk](http://www.newbornphysical.screening.nhs.uk)

## Concerns and Queries

If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

### For Diana, Princess of Wales Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

### For Scunthorpe General Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which is situated on C Floor.

### For Goole and District Hospital

Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290172.

## Confidentiality

Information on NHS patients is collected in a variety of ways and for a variety of reasons (e.g. providing care and treatment, managing and planning the NHS, training and educating staff, research etc.).

Everyone working for the NHS has a legal duty to keep information about you confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

## Zero Tolerance - Violent, Threatening and Abusive Behaviour

The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:

- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening / abusive / violent and ensuring the removal of those persons from the premises.

All acts of criminal violence and aggression will be notified to the Police immediately.

## Risk Management Strategy

The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.

## Moving & Handling

The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, you may speak to any member of the nursing staff, the designated keyworker within the department or the Trust Moving & Handling Coordinator.

**Northern Lincolnshire and Goole  
Hospitals NHS Foundation Trust**

**Diana Princess of Wales Hospital  
Scartho Road  
Grimsby  
01472 874111**

**Scunthorpe General Hospital  
Cliff Gardens  
Scunthorpe  
01724 282282**

**Goole & District Hospital  
Woodland Avenue  
Goole  
01405 720720**

[www.nlg.nhs.uk](http://www.nlg.nhs.uk)

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