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VAN NESS CAMPUS

California Pacific Medical Center (CPMC) Van Ness Campus opened at the beginning of 2019 after over 20 years of planning & design. The Van Ness Campus is a LEED-certified Green building that features five living rooftop gardens and 100% fresh outdoor air.

The Women and Children’s Center at the Van Ness Campus helps deliver nearly 4,000 babies a year. It has received the Joint Commission Gold Seal of Approval (2016-present) and was voted one of the Best Birth Centers by Bay Area Parent Magazine. Mothers delivering at CPMC can expect private birthing and postpartum rooms with ensuite bathrooms.

Prior to opening the new campus, CPMC Labor and Delivery was located at the California Campus which was established in 1875. It was the state’s first hospital created by women for women and children. If you ask a native San Franciscan where they were born, chances are they were born at CPMC California Campus, previously known as Children’s Hospital.
WHERE TO GO & PRE-REGISTRATION

Getting to Labor & Delivery

When you are in labor or directed to go to OB triage by your provider, please proceed to the Emergency Room on Franklin Street.

Pre-Registration

Please pre-register during your second trimester so CPMC can anticipate your arrival and quickly start the admission process when you are in labor. This will also help the nurses at CPMC to build your hospital prenatal chart based on Golden Gate Ob/Gyn’s prenatal records. Visit CPMC Birth Center, Van Ness Campus website to sign up.

Hospital Tour Registration

Visit CPMC Birth Center, Van Ness Campus website to sign up or call (888) 407-8576.
PARKING AND VISITORS

All visitors must check-in daily with security on the 2nd floor lobby and wear a visitor’s badge while in the hospital. During COVID-19 only one partner may accompany the patient.

Guests must not be ill with colds, flu, or other contagious conditions, and must respect infection control policies.

Parking is available below the hospital (Post Street or Geary Street entrances).

Additional parking at Daniel Burnham Court Garage or 1000 Van Ness Garage.
HOSPITAL BAG CHECKLIST

Admin:
- Driver’s license & insurance cards
- List of who to call/emergency contacts
- Name of pediatrician or pediatric group that you plan to use
- Extra-long cell phone charger cord
- Camera & charger
- Birth & newborn preferences, 1 page max
- Bluetooth speaker & playlist (if desired)
- Books and/or iPad

Mom:
- Clothing (loose yoga/sweatpants; light jacket/cardigan; pajamas/nursing dress; robe)
- Toiletries (toothbrush/toothpaste, shampoo/conditioner, face wash, dry shampoo, deodorant, lip balm, hair ties, hairbrush)
- Nursing supplies (bra/tank, nipple cream, nursing pads)
- Flip flops (for shower, walking in labor, going home)
- Going home outfit
- Breast pump (lactation can review how to use it while in postpartum)
- Quick snacks (nuts, protein bars, peanut/almond butter packets, coconut water, gum)
- Reusable water bottle
- Pillow (non-white case)
- Essential oils (if desired)

Partner:
- Toiletries
- Clothes & underwear for 3-4 days and pajamas
- Pillow (non-white case)
- Swimsuit (to assist with pain management in shower during labor if desired)
- Quick snacks, drinks, reusable water bottle

Baby:
- Car Seat
- Soothers
- Cute swaddle for pictures
- Breastfeeding pillow (My Breast Friend is good for newborns)
- Going home outfit
AM I IN LABOR?

Call If Experiencing:

1) Contractions
   
   **First pregnancy** Call when you are having painful contractions 5 minutes apart, lasting 1 minute, for 1 hour OR contractions that you cannot talk through.
   
   **Prior vaginal delivery** Call when you are having painful contractions 5 minutes apart, lasting 1 minute for 30 minutes OR contractions that you cannot talk through.
   
   **Trial of labor after previous cesarean section** Call when you are having painful contractions.

2) Membranes rupture (day or night).

3) Heavy bleeding and/or unremitting, severe pain.

No Need to Call if >37 weeks pregnant and experiencing:

1) You are feeling menstrual cramps or having erratic contractions.

2) You notice a slight bloody discharge, pass your mucus plug or see blood-tinged mucus in the absence of regular contractions.

How to Reach the Office:

During regular office hours: Call our office phone number is 415.666.1250 and choose option ‘2’ to speak with a nurse.

After regular office hours: Call our office phone number is 415.666.1250 and press ‘0’ or call 408.533.8021 directly to speak with an on-call nurse. If no one answers, leave a message and the nurse will call you back within 10 minutes.

If you are planning on delivering at CPMC Van Ness and are unable to reach someone in the office, please call OB Triage at CPMC at 415.600.2100.
LABOR & DELIVERY

When you arrive on the 5th floor labor and delivery unit, you will check in with the front desk (it helps if you pre-registered, see Page 4.) After check-in, you will be brought to OB triage where you will be greeted by a nurse in a private room. The nurse will complete an initial evaluation and consult with the Golden Gate Ob/Gyn physician on-call about admitting you to labor & delivery. In OB Triage, a rapid swab test for COVID-19 will be performed on mom. The tests will take approximately 30 minutes to result. From there the hospital staff will provide the most up-to-date instructions for partners and wearing masks.

Once admitted, you will be brought to a private labor suite. You can review your birth plan goals with the nurse at this time, if desired. During labor, if you have not received an epidural, you are welcome to walk around the room or use the shower to help with pain management. Birthing balls are also available upon request. Eating light snacks, prior to an epidural, and staying hydrated while in labor is encouraged.

During labor, you can expect that your contractions and fetal heart rate will be monitored either from time to time or continuously based on an individualized need. Keep in mind that unless you have an epidural, even with continuous monitoring, we encourage you to move around the room. Your nurse and physician will regularly communicate with you about your labor progression.

Once your baby is born, our goal is to immediately place your baby on your chest for skin-to-skin contact. Your placenta also needs to be delivered, usually within 30 minutes after the birth of your baby. You’ll stay in your labor and delivery room for around two hours and throughout that time you and your baby will be assessed by your delivering nurse. The first hour is devoted to skin-to-skin contact and breastfeeding, while in the second hour your baby is weighed, measured, and certain preventative medications (Vitamin K, erythromycin ointment, Hepatitis B vaccine) are given. This timeline applies to whether you have a vaginal or cesarean delivery. Usually the baby’s first bath is delayed until the next day.

At this time, the focus will be on making sure mom and baby are healthy, along with promoting bonding with skin-to-skin and the option to assist with breastfeeding help.

If you have decided to bank cord blood and/or tissue, this is a great time to call the cord blood bank company for pick up.
While no one plans for their newborn to need intensive care services, rest assured that CPMC is approved as a regional level 3 unit. This means that CPMC is equipped with the highest level of both professionals and equipment. They are ready to care for premature babies and/or babies born with serious health issues.

The Newborn ICU is located on the 5th floor and open 24 hours a day for both parents. Currently during COVID-19, only one parent may visit at a time.

Each room includes one newborn bed and one adult pull-out couch for a parent to “room-in” overnight if interested.
LABOR TO POSTPARTUM

A few hours after delivery, you and your baby will transition to the 8th floor postpartum unit. You will be transported in a wheelchair and your baby will be transported in a bassinet. Every newborn must be transported in a bassinet when moving from room to room.

For general safety and security, each newborn has a patient name band and is assigned an electric transponder that is attached to their leg that is removed before discharge home.
POSTPARTUM & NEWBORN NURSERY

POSTPARTUM

CPMC’s postpartum unit is located on the 8th floor and consists of all private rooms with ensuite bathrooms. Each room has a comfortable pull-out couch for your partner (linens will be provided).

Depending on your mode of delivery, the number of days recommended for inpatient recovery will differ (1-2 days after a vaginal delivery and 2-4 days after a cesarean section). Keep in mind that the date of your delivery is not included in the number of recommended recovery days.

You can expect to be evaluated by a member of the Golden Gate OB/GYN provider team daily while in the hospital; either one of the doctors or the nurse practitioners. Additionally, your pediatrician will evaluate your newborn each day. If your pediatrician does not have privileges at the hospital, a hospital-assigned pediatrician will visit and assess your baby daily.

If you request to have your newborn baby boy circumcised, that is usually scheduled and performed by the on-call Golden Gate doctor on the day after delivery once the baby has been cleared by a pediatrician.

CPMC offers lactation consultations for all postpartum mothers. We encourage you to utilize this resource while in the hospital to assist you with breastfeeding and/or answer questions about lactation, pumping, etc. If interested in a consultation, please let your nurse know so that a request can be placed in your chart.

NEWBORN NURSERY

The well baby newborn nursery is located in the middle of the same floor as your postpartum room on the 8th floor. You and your baby will come to the newborn nursery for the first bath, screening tests, and car seat evaluation before discharge. If your newborn has an elevated bilirubin on testing, the recommendation might be for light therapy. Light therapy is sometimes done in the newborn nursery versus your postpartum room for better observation.

While rooming in is encouraged for you and your baby, there is an option for your baby to be in newborn nursery when you are trying to get some sleep.
POSTPARTUM EXPECTATIONS

After delivery it is important to keep in mind that your body is undergoing changes and working to heal itself. Some goals to keep in mind during your recovery are the following:

**Rest:** getting as much rest as possible is key to healthy recovery.

**Hydration:** Drinking plenty of water is important for healing and establishing your milk supply for breastfeeding. Most recommendations for breastfeeding mother are to drink 3.8L (128oz) of water daily.

**Diet:** Eating nutritious meals and snacks especially iron rich is a necessary part of healing postpartum. An extra daily 450-500 calories are needed while breastfeeding.

**Breastfeeding/Pumping/Bottle Feeding:** Feeding your newborn is based on their individual needs and schedule, but a general guideline is to feed every 2-4 hours. For the first few weeks, babies will feed at least 8-12 times in 24 hours.

**Ambulation:** Getting up to the bathroom every 2-3 hours is healthy for your bladder and will also help you experience less uterine cramping. A walk outside your room a few times a day is helpful for healing, resumption of normal bowel habits, and decreases your risk of developing a dangerous venous blood clot.

**Pain Control:** Good pain control is essential for healing and establishing your milk supply. Medications offered to help with pain are typically ibuprofen (e.g. Motrin or Advil) and/or acetaminophen (e.g. Tylenol) every 6 hours. Non pharmacologic pain management options include ice packs, sitz baths, witch hazel pads, dermoplast spray, and/or a soft ‘donut’ to sit on. If pain control with these measures does not help, ask your nurse to discuss more options.

**Bowel Movement:** A bowel movement is not expected before you leave the hospital, but throughout your stay measures to promote a bowel movement are encouraged. This includes: Colace (stool softener pill twice daily), hydration, walking, coffee or other foods/drinks that have worked for you in the past to help encourage a bowel movement.
NEWBORN EXPECTATIONS

Newborn Bath
Your newborn’s first bath will occur approximately 24 hours after delivery. This will be done in the nursery and you and/or your partner are welcome to accompany your newborn to watch. If you prefer your baby not to receive a bath in the hospital, let your nurse know.

Newborn Screenings
Newborn screenings are done routinely within 24 to 48 hours after birth to assess for various complications.

Genetic Screening: A few drops of blood from your newborn’s heel will be sent to a newborn screening lab. In California, newborns are screened for ~60 inherited or genetic conditions. These results can take a few days and will be shared at your pediatrician visit.

Bilirubin Screening: A small sample of blood is taken from your newborn’s heel and is sent to the laboratory to assess bilirubin levels. High bilirubin levels can cause jaundice and may need to be treated to prevent serious problems, such as brain damage.

Oxygen Saturation: Painless skin sensors will measure your newborn’s blood oxygen levels. Low levels can indicate a heart condition.

Hearing screening: A hearing test may be done using a small microphone or earphone.

Blood Sugar Screening: Some newborns have trouble regulating their blood sugar and need supplementation with formula for a short period of time. If your baby meets specific criteria for this screening your nurse will check their blood sugar with a small prick at their heel.

Circumcision
It is your choice whether to have your newborn circumcised. Unless postponed due to medical or religious purposes, circumcision is performed the day after you deliver by the doctor on-call for Golden Gate OBGYN inside the newborn nursery and takes only a few minutes. Various kinds of numbing and pain relief agents are utilized. Your nurse will review circumcision care instructions after the procedure.
DISCHARGE AND FOLLOW UP

Hospital Discharge
Discharge typically occurs before 11am. On the day of discharge, you will be evaluated by a member of the Golden Gate Ob/Gyn provider team and your newborn will be assessed by the pediatrician. Prior to discharge, your nurse will conduct a car seat check so please make sure it is available on the day of discharge. Lastly, your nurse will review discharge instructions and make sure you feel comfortable heading home with your newborn.

Follow up
Please schedule a follow up visit at Golden Gate Ob/Gyn by calling our main office number (415) 666-1250. Your appointment should be scheduled as follows:
- Cesarean Section: 2 weeks and 6 weeks
- Vaginal Delivery: 6 weeks

Sometimes a blood pressure check at the office in the first week after delivery will be advised. The discharging pediatrician will make recommendations for when your newborn should have their first office appointment.

Call if Experiencing:
- Temperature greater than or at 100.4F
- Shaking or chills without a fever
- Pain not relieved by pain medication
- Not able to take food or fluids
- Persistent headache or seeing spots in front of your eyes
- Bleeding soaking more than 1 pad in less than 1 hour
- Area in the breast that’s hot, hard, red, & painful to touch

General Instructions:
- No heavy lifting or strenuous exercise for 6 weeks
- No sexual activity until after your 6 weeks postpartum visit
- No driving until off narcotics and able to drive safely

Pain Management Options:

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<thead>
<tr>
<th>Ibuprofen/Advil (200mg tablets)</th>
<th>Tylenol/Acetaminophen (500mg tablets)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limit to no more than 2,400mg/24hrs</td>
<td>Limit to no more than 4,000mg/24hrs</td>
</tr>
<tr>
<td>2 tablets = 400mg every 4hrs</td>
<td>1 tablet = 500mg every 3hrs</td>
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<tr>
<td>3 tablets = 600mg every 6hrs</td>
<td>2 tablet = 1,000mg every 6hrs</td>
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<tr>
<td>4 tablets = 800mg every 8hrs</td>
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POSTPARTUM MOOD CHANGES

Postpartum mood changes can occur, and it is important to know the differences between postpartum blues and depression. While you are in the hospital, if you are concerned about your mood please inform your nurse and a social work consult can occur. After discharge, if you are concerned please call our office (415) 666-1250 and ask to speak with a nurse. If you are having thoughts or hurting yourself or others, please call 9-1-1 immediately or go to the nearest emergency department.

Postpartum Blues

After birth and for up to two weeks, some women may feel depressed, anxious, and upset. Other signs they may feel:
- Cry for no reason
- Have trouble eating, sleeping, or with decision making
- Question their preparedness with these new responsibilities

Please remember that postpartum blues or baby blues is common and will pass. If these feelings do not pass after 1-2 weeks postpartum, please reach out to your provider. We have many resources to help you get through this.

Postpartum Depression

Postpartum depression can be the same symptoms as postpartum blues but do not improve or resolve by week 2 postpartum. Postpartum depression can also mean more intense feelings of sadness or anxiety that limit being able to complete daily tasks.

These feelings usually occur 1-3 weeks postpartum but can happen up to 1 year postpartum. Do not wait until your postpartum check up to let your provider know you are experiencing these symptoms. We have many resources to help you.