

WELCOME TO THE
CHILDREN'S CENTER



**TALLAHASSEE
MEMORIAL**
HEALTHCARE

TALLAHASSEE MEMORIAL HEALTHCARE

TABLE OF CONTENTS

2 PIN Number Information

3 Welcome to the Children's Center

4 What to Expect During Your Stay

5 What to Expect in the PICU

6 Kids Korner

7-8 TMH Information

9 Understanding Your Pain

10 Babies Cry. Have A Plan!

11 Need a Healthcare Provider For Your Baby?

12 Activities

13 Vaccination

14 Car Seat Safety



Pin Number Information

USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION TO FAMILY MEMBERS AND OTHER INDIVIDUALS INVOLVED IN YOUR CARE.

During your child's hospitalization, you may wish to share information related to your child's care with family members and other individuals. To protect your child's privacy, we are providing you with a personal identification number (PIN). You may share this number with those individuals who are authorized by you to communicate with your child's healthcare team about results, findings and treatments during this hospitalization.

This PIN number will generally be used for telephone questions in order to verify that the caller has a right to this information. However, it may be required in other situations based on the judgment of the healthcare team.

Please understand that TMH is not responsible for who you share the PIN with and the information disclosed.



Welcome

TO THE CHILDREN'S CENTER AT TALLAHASSEE MEMORIAL HEALTHCARE

We know that a hospital admission can be a scary experience for both you and your child. We thank you for placing your trust in Tallahassee Memorial for your healthcare needs. We are committed to providing you with the best healthcare possible and to make you and your child as comfortable as possible during your stay.

We believe our patients deserve:

- Quality care
- To feel welcome
- To be treated ethically with dignity, courtesy and respect
- To participate in individualized treatment and care decisions
- Personal privacy and confidential management of information
- Safety and security

We believe our patients' responsibilities are:

- To ask questions
- To tell us when there is a problem
- To share all medical information with us
- To respect other patients' rights and privacy

We have provided the following items to supply you with information that should be helpful during your stay:

- Guide to the Children's Center
- Guide to the Pediatric Intensive Care Unit (PICU)
- Activities and Volunteers
- Guide to Understanding Pain
- Ronald McDonald House of Tallahassee

We know you will have many questions about your child's treatment. We are here to help! If you are uncertain about any aspect of your child's care, please feel free to ask any member of your healthcare team for assistance or information. Thank you for allowing us to care for you and your child. When you receive your patient satisfaction survey in the mail we ask that you please take the time to complete and return it, as we are interested to hear your feedback and suggestions.

Linda Abate, RN-BC, BSN, MSOL, Nurse Manager

Crystal Kelly, BSN, RN, CPN, Assistant Nurse Manager | Erin DeGroff, BSN, RN, CPN, Assistant Nurse Manager

GUIDE TO THE CHILDREN'S CENTER

What to Expect During Your Stay

Our healthcare team will develop a plan of care with your child's needs in mind. This plan allows the entire healthcare team to choose the best path to serve your child's individual needs. We encourage you to be a part of your child's care!

Your Healthcare Team

Key members of your healthcare team are:

- **Physicians** – Your physicians will visit your child at least once daily and answer any questions you may have. Your physician will make decisions based upon the team's reports of your child's needs.
- **Nurses** – A nurse will routinely assess your child's clinical condition and nursing care needs, as well as give medications, change dressings, etc. Your nurse will educate you and your child about his/her illness, procedures/ tests to be performed, new medications and possible side effects. During your stay, and at discharge, your nurses will also provide you with education on home care, home medications, follow-up appointments and any other instructions given by your physician.
- **Patient Care Assistants** – A Patient Care Assistant (PCA) will check your child's vital signs and tend to your child's personal hygiene needs.
- **Child Life Specialist** – A child life specialist (CLS) is on staff to provide support for both you and your child. A CLS is someone who specializes in child development and children's reactions to their hospitalization. The CLS is available to provide developmentally appropriate explanations for tests and procedures as well as procedural support. The CLS is also here to make sure your child has opportunities to play.
- **Music Therapists** – Music therapists are on staff to participate in music sessions with the patients to increase coping skills, reduce pain and stress, and enhance relaxation strategies.
- **Animal Therapy** – Animal therapy provides the opportunity for children and caregivers to visit with trained therapy animals. Patients and families who are not on contact isolation can request a visit through their nurse.

Routine Monitoring

Members of our nursing staff will check your child's vital signs (temperature, heart rate, oxygen saturation, respiratory rate) every four hours. We may check your child's vital signs more or less often depending on the physician's orders and your child's condition. If your child is receiving fluids or medication through an IV, the nurse will check the IV site every hour to ensure it is working properly. Your physician may order for your child to be weighed every day. This is done between midnight and 6 am if the patient is less than 1 year old. Lab work is routinely performed early in the morning so that results will be back before the physician rounds. Although your child's rest is essential, we will monitor his/ her condition throughout the night. We always strive to allow for as much rest as possible and we apologize for any inconvenience.

Bedside Report

At Tallahassee Memorial HealthCare, we conduct "bedside report" to keep you better informed about your plan of care, medications, tests, procedures and progress while you are here. This involves the nurses doing bedside reporting, in your presence, at each shift change to ensure proper communication of all important information and to introduce you to your new nurse.

In the event you have visitors in your room at the time of bedside report, or anytime you feel uncomfortable about any information being discussed, please let your nurse know and other arrangements will be made at that time. If you are sleeping during change of shift, a verbal report will be conducted without waking you up to allow for continued rest.

We believe bedside report will benefit you and your child by keeping you better informed of your child's condition. It also allows us to maintain the high quality of care you expect as a parent of a patient at Tallahassee Memorial HealthCare.

PEDIATRIC INTENSIVE CARE UNIT

What to Expect in the PICU

The Pediatric Intensive Care unit provides care for children with acute life threatening illness or injury. Child and/or family participation is strongly encouraged in decision-making regarding treatment and health care. To ensure optimum care for all children in the PICU, we request patient and family cooperation.

You can help by:

- Appointing one family spokesperson to be the link between the PICU team and the family. Phone calls into the unit may interrupt care, so please have only the designated spokesperson call the PICU team. We ask that other family members and friends to contact the spokesperson for updates on your child's condition.
- You can help make your child more comfortable by providing personal items such as a pacifier, sippy cup, blanket, slippers, robe, or a favorite doll/toy, etc.
- Be prepared to see a lot of wires, tubes and equipment. Monitors have alarms to alert the staff that something needs to be checked. Alarms are not always a cause for concern.
- We invite the child and family to participate in the child's plan of care. The healthcare team (nurses, physicians, respiratory therapists, case managers, social workers, child life specialist and others) will be reviewing the child's overall care daily and consulting with you regarding the plan of care. If you have any questions, please feel free to ask. Bedside report occurs twice each day at shift change and we welcome your input and participation.
- We encourage one parent to spend the night. The hospital can be a scary place for children and parents play a significant role in comforting patients during this time.
- The doors to the PICU are routinely kept closed to promote privacy. Please check in at the main nurses station for admittance into the PICU.
- A child life specialist is available to prepare any children who are visiting for what they might see upon entering the PICU. Visiting the PICU can be frightening for children and preparing children ahead of time can assist the child in coping with the environment and things that might be seen during a visit.
- Your child's safety is our first concern. Depending on how sick your child is, medical staff may impose restrictions on visitors.
- PICU visitors are limited to 2 visitors at a time. Visitors must be 12 years of age or older to visit a patient in the PICU. Visitors ages 12-17 must be accompanied by an adult.

Public restrooms are located in the Children's Center waiting room. Turn left out of the PICU doors and the waiting room is the second doorway on the right.

Due to the generosity of the Truman Family, we have a parent lounge located in the Children's Center where you may go to check email, watch TV or relax. We ask that you take no food or children into the parent lounge. We ask that you do not sleep in the parent lounge. Ask your nurse for details.

Kids Korner

Pokes and prods can be scary for little ones. But at Kids Corner, Certified Pediatric Nurses are ready to make outpatient procedures as easy as possible.

Located within the Tallahassee Memorial Children's Center, Kids Korner is a 4-bed unit, providing a positive, kid-friendly environment for common outpatient procedures such as:

- Lab work
- Blood transfusions
- Endocrine studies
- IVs
- Pre and post-operative care
- Recovery from procedures requiring sedation

Who can be seen at Kids Korner?

As long as you have scheduled an appointment, all children 17 and younger are eligible for services at Kids Korner.

What makes Kids Korner special?

- Only outpatient facility with a complete staff of Certified Pediatric Nurses
- Comfortable, kid-friendly environment
- Child Life Specialist on staff to provide distraction, education and support

Ready to schedule an appointment?

In order to provide the same experience to each patient, Kids Korner does not accept walk-ins. To make an appointment, please call **850-431-2241**.

Tallahassee Memorial HealthCare

The Children's Center is comprised of a general medical surgical pediatric unit, pediatric intensive care unit (PICU) and Kids Korner. Our general pediatric unit is a 22-bed unit with all private rooms, although at times it may be necessary to convert to semi-private rooms in the case of increased admissions. Our PICU is a 10-bed unit with all private rooms.

Helpful Hints for Parents

- Accept family and friends' offers to run errands.
- Develop a caring tree to keep family and friends current with information.
- Take a break – taking care of you takes care of your child.
- Remember to bring along and obtain important health information.

Visitation

All visitors over the age of 18 will be asked to provide a photo ID to receive a visitor badge upon entering the Children's Center. Ask your nurse any questions about our current visitation policy. Please wear the visitor badge in a visible location above the waist at all times.

- Visiting children must be in constant direct supervision by an adult.
- Speak with a nurse if you have special visitation restrictions.
- Always wash your hands or use the cleansers at the hand hygiene dispensers before entering and upon leaving the patient's room.

Medications

Your child will receive all prescribed medications from the hospital pharmacy – Do not give any medications to your child during their hospitalization. Upon admission, staff will ask for a list of medications that your child takes at home (prescribed medications, over-the-counter medications, vitamins, etc). Your nurse will notify you if you need to bring in any medications from home.

Privacy

Due to HIPAA (privacy) regulations, please do not loiter at the nurse's station as we may be discussing or viewing confidential patient information. All visitors are welcome to use the Pediatric Waiting Room if they must wait to enter a patient's room for any reason.

Food Services

- Your child's dietary needs are ordered by his or her physician and can be explained in detail by your nurse. We request that any food brought in from outside the hospital be approved by your nurse to make sure it follows the orders by the physician.
- You may make dietary selections for your child from items specifically prepared for the diet your physician has ordered. A dietary host/hostess will visit your room daily to help with the meal selections. On occasion, x-rays, procedures or laboratory tests may require a meal to be delayed. A late tray may be ordered by your nurse within specified times.
- Cafe 1300, TMH's cafeteria, is located on the ground floor and open seven days a week. It is open 24 hours a day with the exception of 10:30 am -11 am and 11:30 pm -12 am.
- We have a selection of drinks and snacks available on the floor for the patients. Please ask your nurse for assistance.
- Coffee and water/ice are available at all times. Parents are allowed to eat in patient rooms, but food/drink may not be stored in the room and any leftovers must be discarded. Please discuss food storage exceptions with your nurse. Encourage family and friends to call ahead before bringing food or drinks to the hospital. If you are from outside of Tallahassee and are financially unable to purchase food for yourself, please let your nurse know and he/she can contact the Ronald McDonald House to make arrangements for you.

Safety

Every pediatric staff member wears a pink hospital ID badge with their name, photo and title. If someone without a pink badge comes to your room to take your child to a procedure, CALL YOUR NURSE and verify that the procedure is to be done. We encourage all parents to go with their child for all tests and procedures. If your child is at risk for falling, a “humpty dumpty” sign may be placed on your door to assist in falls prevention.

For you and your child's safety and security, we ask that you observe the following guidelines:

- All patients are required to wear a hospital ID band. This band must be present for medications to be given and for procedures to be done. DO NOT REMOVE THIS BAND.
- If your child is under 5 years old, they will be required to wear an armband with a transponder security device. This is a measure to prevent child abduction.
- A nurse call button is at the bedside. Be sure your nurse shows you how to use it for routine requests and in cases of emergency. Please use the call button for any requests or questions/concerns you may have. There is also an emergency cord that can be pulled in case of an emergency while in the bathroom.
- Please place all side rails up if your child is in crib or at least two side rails up if your child is in a bed, even if your back is turned momentarily.
- Please inform the staff if you are leaving your child. If possible, please arrange for another responsible adult to stay with your child during your absence. If you must leave your child alone, please be sure the side rails are up and the crib top is lowered before you leave. Bring a copy of your PIN with you and make sure the staff has a phone number to reach you if necessary. If your child is an infant, staff will need to know when he/she was last fed and changed.
- Children MAY NOT sleep in the bed or recliner with parents. This is an issue of safety and it is for your child's well-being.
- Please help keep your child's room picked up and clean. It is very important for the staff to have clear and quick access to your child. Please do not allow your child to play on the floor.
- Please do not visit other patient's rooms. This helps prevent the spread of infection.

Hand Hygiene

When done correctly, proper hand hygiene can keep you healthy and reduce the spread of germs. TMH encourages all healthcare workers, patients and their families to use the alcohol-based gel dispenser located in each room. If you notice a staff member has not performed hand hygiene, it is okay to remind them to do so.

Computers

We have one computer available in the Truman Respite Room for use by parents. If you choose to bring your own computer, you are welcome to use the TMH guest internet access. Please ask your nurse for assistance with either of these options.

Telephone Calls

You may make local phone calls from your room at any time by dialing 9 and the number you wish to call. Incoming phone calls may be received in your room (431-room number) from 7:00 am-9:30 pm. Beyond these hours, calls will not come through in order to promote patient and family rest. Please notify your nurse if you need assistance making a long-distance phone call.

Flowers/Balloons

Your family and friends are welcome to bring or send flowers, plants and mylar balloons to your child.

Latex balloons are NOT allowed as they can be a choking hazard and some of our patients are allergic to latex. Flowers and plants are not allowed in the PICU.

Important Phone Numbers

Your room number	(850) 431-room number
Children's Center	(850) 431-2294
Pediatric Intensive Care unit	(850) 431-2295
Ronald McDonald House	(850) 222-1706

Understanding Your Pain

Pain management has many benefits, including a quicker recovery! Overall, your child will have greater comfort while healing. Unrelieved pain can cause anxiety, irritability and problems with eating and sleeping, which can slow healing and disrupt treatment. However, total absence of pain is often not realistic nor always achievable. Keeping your child comfortable allows your child's energy to be used for healing and recovery instead of dealing with pain. You, along with your healthcare team, will decide which method of pain management is best for your child.

Measuring Pain

Never assume doctors or nurses know your child is in pain. No one knows your child as well as you do, so it is important to help your child communicate to the staff how he or she feels before the pain becomes too severe. You can expect health professionals to respond quickly to reports of pain. If your child is an infant or nonverbal, the nurse will look at behaviors like crying, movement, agitation, body language and vital signs to gauge the level of pain. Your child may be asked to rate pain using the faces scale. Each face shows a different level of discomfort and your child points to the face that best shows how he or she feels.



Your child may be asked to rate the level of pain on a scale of 0–10. Zero means there is not pain at all. Ten means it is the worst pain imaginable.

Pain Relief WITHOUT Medicine

- Children feel more secure when parents are present. Being loving and caring are comforting ways to support your child in pain. Cuddling, rocking and using a pacifier can also provide comfort.
- Distraction shifts attention from the pain to something more pleasant. Some forms of distraction are television, movies, games, music, blowing bubbles, pop-up books and being read to.
- Deep breathing increases relaxation and eases pain. Have your child “blow the pain away.”
- Imagine a favorite place or event to take the focus off the pain.
- Contact your Child Life Specialist for additional ideas and resources.
- It is important for children to continue normal enjoyable activities to the extent possible while in the hospital.

These methods alone are usually not enough for strong pain, so medicine may be necessary.

Pain relief WITH Medicine

- Pain medicine can be given by mouth in pill or liquid form, by rectum (suppositories) or through the skin.
- A constant level of pain medication can be given through an IV.
- Patient-controlled analgesia (PCA) is another way pain medicine can be given through an IV. With a PCA, your child can push a button to receive an additional preset amount of pain medicine as needed.

Going home

You will be given information on how to care for your child's pain at home. Medications used appropriately are very safe and effective and addiction is not a concern with short-term use. Ask your doctor or nurse if you have any questions about your child's medication.

BABIES CRY. HAVE A PLAN!

Share it with anyone who cares for your baby



All babies cry, some more than others. **Crying is a baby's language.** When babies cry they may be lonely, scared, tired or may cry for no reason. Here are some ways to stay calm and comfort your baby:

1 First, check my baby's physical needs.

- Are they hungry?
- Do they need to burp?
- Is their diaper dirty or wet?
- Are they too hot or too cold?
- Are there any signs of sickness (vomiting or fever)? Seek medical care immediately, if there are concerns.

2 I have checked the **Calming Techniques** that work best for my baby. (Please mark your choices.)

- ☐ Swaddling
- ☐ Use of "white noise"
- ☐ Gently swing or rock her
- ☐ Take him for a stroller ride
- ☐ Place her in a car seat and go for a car ride
- ☐ Breast feeding and/or skin to skin holding
- ☐ Other: _____

Sometimes when nothing else works, my baby really enjoys: (Please complete with your best solutions.)

It is more important to stay calm than it is to quiet the baby. Sometimes babies cry for no apparent reason. When this happens, feeling frustrated is normal. **Never Shake a Baby!**

3 To calm yourself try:

- Going outside for fresh air
- Taking several deep breaths
- Counting to 100
- Washing your face or taking a shower
- Exercise. Do sit ups or walk up and down stairs a few times

4 Also try using some of the following **Coping Techniques**:

- ☐ Put the baby down in a safe place like a crib, and check back when I am feeling calm
- ☐ Call a friend or neighbor
- ☐ Call the doctor if crying lasts over 3 hours
- ☐ Other: _____

I will call the following people, if I need help. The first name on my list is my friend or neighbor. (Please list the first name and phone number)

TAKE A BREAK. NEVER SHAKE!

TALLAHASSEE MEMORIAL HEALTHCARE

NEED A HEALTHCARE PROVIDER FOR YOUR BABY?



Whether you choose a pediatrician, pediatric nurse practitioner or a family practice provider, it's important for your child to have a healthcare provider familiar with their unique needs who can provide routine check-ups and care for them when they're sick.

When choosing a healthcare provider for your baby, you will want to consider whether their office accepts your insurance, takes new patients and has hours, policies and procedures that are in line with your needs.

To help you select the best care provider for your family, we encourage you to ask the following questions:

- How does the practice handle children who are sick? What about after hours?
- What hospitals are you affiliated with?
- How long have you been practicing?
- Do you have any sub-specialties?
- To become a patient, what paperwork is needed?

Scan the QR code below or visit **TMH.ORG/Pediatrician** for a list of local pediatric providers.



Activities at the Children's Center

To help support and promote a more family friendly environment for you and your child, we have several different groups of volunteers and activities to help your child cope with being in this hospital. We understand the needs of every child are different so we hope to provide resources and activities for kids of all ages.

Volunteers

Our Child Life Specialist oversees our volunteers and child life students from Florida State University.

- There are FSU child life students available during weekdays who can provide children and families with toys, movies and developmentally appropriate materials.

Playroom

- The playroom is open Monday-Friday 9 am - 12 pm and 3:30 pm - 7:30 pm.
- The playroom can be opened on the weekends by request.
- Please feel free to visit our playroom to find toys, books or games to take back into your child's room.
- Children who are on isolation precautions or have had a fever in the past 24 hours are not allowed in the playroom due to infection control policies; however, volunteers can bring toys and games to your child's room.
- All children must be accompanied by an adult who is 18 years or older.
- No food or drink is allowed in the playroom.
- Please help us keep our playroom clean and neat by placing dirty toys in the bin labeled "Dirty Toy Bin."

Activities

- In addition to the toys and games that are available in the playroom we also have DVD's. Feel free to request a movie list where patients and families can select movies from a large DVD collection.
- Patients and families can check out two movies at a time.
- A limited number of Wii U gaming systems are also available for children to have in their rooms. Wii U's are equipped with multiple games for all ages.
- At the Children's Center we sometimes have special visitors come to visit the patients and families. To find out more about our special visits please see the activity calendar outside the playroom.

If you have any questions about the volunteers, playrooms or activities please ask for the child life specialist.

CDC Vaccination Chart

WHEN DO CHILDREN AND TEENS NEED VACCINATIONS?

Age	HepB Hepatitis B	DTaP/Tdap Diphtheria, tetanus, pertussis (whooping cough)	Hib <i>Haemophilus influenzae</i> type b	IPV Polio	PCV13 Pneumococcal conjugate	RV Rotavirus	MMR Measles, mumps, rubella	Varicella Chickenpox	HepA Hepatitis A	HPV Human papillomavirus	Men- ACVY Meningococcal	MenB	Influenza Flu
at Birth (within 24 hours of birth)	✓												
2 months	✓	✓	✓	✓	✓	✓							
4 months	✓ ¹	✓	✓	✓	✓	✓							
6 months	✓ (6–18 mos)	✓	✓ ¹	✓ (6–18 mos)	✓	✓ ¹							✓ (6 mos and older)
12 months			✓ (12–15 mos)		✓ (12–15 mos)		✓ (12–15 mos)	✓ (12–15 mos)	✓ ² (2 doses given 6 mos apart at age 12–23 mos)				
15 months		✓ ² (15–18 mos)											
18 months													
19–23 months													
4–6 years		✓		✓			✓	✓					Influenza vaccine is recom- mended every year for every- one age 6 months and older.
7–10 years													
11–12 years		✓ (Tdap)								✓ ³	✓		
13–15 years													
16–18 years											✓	✓ ^{4,5}	

One dose each fall or
winter to all people ages
6 mos and older. Some
children younger than
age 9 years need 2 doses;
ask your child's health-
care provider if your child
needs more than 1 dose.

FOOTNOTES

- 1 Your child may not need this dose depending on the brand of vaccine that your healthcare provider uses.
- 2 This dose of DTaP may be given as early as age 12 months if it has been 6 months since the previous dose.
- 3 Children with certain medical conditions will need a third dose.
- 4 This vaccine may be given to healthy teens. It is also recommended for adolescents with certain health conditions.
- 5 Your teen may need an additional dose depending on your healthcare provider's recommendation.

immunization
action coalition



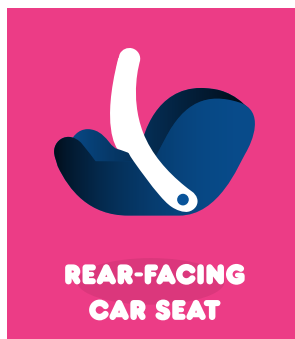
immunize.org

Technical content reviewed by the Centers for Disease Control and Prevention
Saint Paul, Minnesota • 651-647-9009 • www.immunize.org • www.vaccineinformation.org
www.immunize.org/catg.d/p4050.pdf • Item #P4050 (6/17)

Car Seat Safety

CHOOSING THE RIGHT SEAT

Age (Years)													
Birth	1	2	3	4	5	6	7	8	9	10	11	12	13+
Rear-Facing Car Seat													
	Forward-Facing Car Seat												
					Booster Seat								
								Seat Belt					



Your child under age 1 should always ride in a rear-facing car seat in the back seat. There are different types of rear-facing car seats: Infant-only seats can only be used rear-facing. Convertible and 3-in-1 car seats typically have higher height and weight limits for the rear-facing position, allowing you to keep your child rear-facing for a longer period of time.

A **rear-facing car seat** is the best seat for your young child to use. It has a harness and in a crash, cradles and moves with your child to reduce the stress to the child's fragile neck and spinal cord.



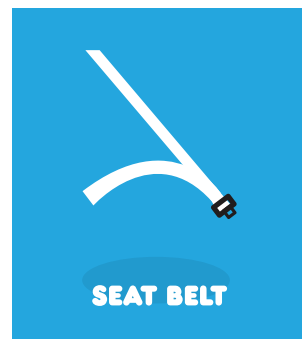
Keep your child rear-facing as long as possible. It's the best way to keep him or her safe. Your child should remain in a rear-facing car seat until he or she reaches the top height or weight limit allowed by your car seats manufacturer. Once your child outgrows the rear-facing car seat, your child is ready to travel in a forward facing car seat with a harness in the back seat.

A **forward-facing car seat** has a harness and tether that limits your child's forward movement during a crash.



Keep your child in a forward-facing car seat with a harness until he or she reaches the top height or weight limit allowed by your car seats manufacturer. Once your child outgrows the forward facing car seat with a harness, it's time to travel in a booster seat, but still in the back seat.

A **booster seat** positions the seat belt so that it fits properly over the stronger parts of your child's body



Keep your child in a booster seat until he or she is big enough to fit in a seat belt properly. For a seat belt to fit properly the lap belt must lie snugly across the upper thighs, not the stomach. The shoulder belt should lie snug across the shoulder and chest and not cross the neck or face. Remember: your child should still ride in the back seat because it's safer there.

A **seat belt** should lie across the upper thighs and be snug across the shoulder and chest to restrain the child safely in a crash. It should not rest on the stomach area or across the neck.



Reduce the risk of death and injury by properly securing your child. To maximize safety, keep your child in the car seat for as long as possible.

Information from www.SaferCar.gov.

The Tallahassee Police Department's Traffic Unit has a Certified Child Safety Seat Technician who can assist parents with safety seat checks. The seat checks can be done by appointment every Wednesday. If you or a patient is interested in making an appointment, please call 891-4261.

THE ABCs OF SAFER SLEEP



ALONE

Babies should sleep alone in a safe, empty crib

BACK

The safest position for babies to sleep is on their back. Have baby wear a one-piece sleeper or sleep sack. Baby will stay warm and comfortable. No blankets are needed.

CRIB

A safe crib has a firm mattress that fits headboard and footboard tightly with no gaps. A sheet that tightly fits the mattress. No pillows, bumper pads, quilts, or stuffed toys.

Please **no** bed-sharing. Bed-sharing puts your child at risk of suffocation, strangulation and entrapment (death by loss of oxygen). It also increases the risk of overheating, rebreathing & airway obstruction.