

What to expect

You can **contact the nurse of your baby in the NICU by dialing (514) 412-4400, extension 22389**. Simply ask to speak to the nurse caring for your baby – any time of day or night.

Rounds with the NICU team happen starting at 9:30 in the morning on weekdays, and we encourage you as parents to participate and be present if possible.

The following are some of the things you can expect for your baby during his or her stay in the NICU.

Wires and Lines:

- Your baby will be in an **incubator** and attached to a **monitor** that will help the neonatal team monitor his or her **vital signs**.



- There will be a **tube** placed in her **nose or mouth** to help remove air from the stomach, and your baby will have an **intravenous catheter (IV)** inserted for nutrition and medications.
- Your baby may also have a **breathing tube** inserted to help stabilize his or her breathing immediately after birth and/or after surgery if primary closure is performed.

Touch and Contact:

It may not be possible to hold your baby until all the intestines are inside the abdominal wall, and he or she is stable enough to tolerate being held.

Touch is important for healing, and we strongly encourage you to touch your baby and do **modified kangaroo care**. Your nurse can help guide you. Your baby will also **recognize your voice**, and **talking, singing** and/or **reading books** will bring comfort to your baby.

Feeding:

Because the **intestines do not work** well when they are outside the abdomen, your baby will not be able to feed on milk right away. Instead, they will be given special **fluid** that contains sugar, proteins, and fats through their IV.



It is recommended to give breast milk for feeding as it is easily absorbed. If breast milk is not available, a NICU team member will reach out to you about permission to give your baby **human donor milk**. It is still possible to breastfeed! It is key to **start pumping** in the **first hours** after birth. Bring **any quantity** to your baby's nurse, and we will make sure to **preserve** it in a way that we can give it to your baby **once they are ready to take milk**. Return to full feeding can take weeks to months, depending on the condition of the intestines.

When your Baby is Born with...



Gastroschisis

Specialized Care in the NICU

Gastroschisis is a **malformation of the abdominal wall**, with the **intestines growing outside** the baby's body instead of inside the abdominal cavity. Often this is seen on ultrasound before your baby is born.

Babies born with gastroschisis need to be admitted to the **Neonatal Intensive Care Unit (NICU)** immediately after birth to receive specialized care. Your baby will be under the care of Neonatal Intensive Care team, working with the Pediatric Surgical team.



In the NICU, parents/guardians are **welcome at the bedside** of their baby 24 hours per day, 7 days per week.

Immediate care

Your baby's intestines will be protected immediately after birth by covering them with plastic. The surgical team will assess the intestines for complications that need to be addressed urgently. If none are identified, the next goal of your baby's treatment is to put the **intestines back inside the body**, and to close the abdominal wall.

Depending on your baby's stability after birth and the amount of intestines outside your baby's body, **two options** for treatment are generally considered:

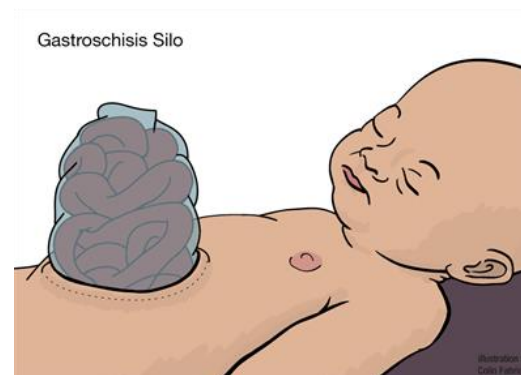
- **Primary (immediate) closure**
- Gradual (staged) closure with the help of a **silo**

Primary Closure vs Silo

If the surgical team decides that a primary closure is possible, your baby will be placed on a **ventilator** for the procedure. Your baby will also receive **medications for pain** while the surgical team puts the intestines back into the abdomen. A **dressing** will be placed afterward, and your baby may be on **bedrest** for several days to allow the incision to heal.



If the surgical team determines that a primary closure at birth is not possible, a protective **plastic bag** called a **silo** will be **placed around** the intestines. This bag is gently suspended above the baby. Gradually, each day, the surgical team will **push the intestines** into the abdomen, until they are completely inside. The abdominal wall can then be closed with stitches and/or an adhesive bandage. This usually **takes 3-5 days** but may be quicker or longer depending on your baby.



Taking care of yourselves as parents

It is important to acknowledge the fact that this time in the NICU will probably be very challenging. You will experience **great milestones**, as well as some **setbacks**. It is important to take care of you, in order to take care of your little one. Here are a few tips:

- **Rest** as much as possible
- Accept the **help** of those around you
- Don't be shy to ask for support: family, friends, social services, and/or a psychologist
- Ask your nurse **how you can participate** in your baby's day-to-day care
- Recognize that your **feelings** are valid and deserve attention

The NICU and Pediatric Surgical Team will be present along the way to guide you as well as possible through this challenging time.

For more information on the NICU at the Montreal Children's Hospital, please scan this **QR code** to have access to **our booklet made for parents**.

