



Hackensack  
Meridian *Health*  
Joseph M. Sanzari  
Children's Hospital

NICU FAMILY ADVISORY COUNCIL NEWSLETTER

# Family-to-Family

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## NICU CLASSES AND NICU EVENTS

in the NICU Conference Room

**For Dates and Times:** See the monthly calendar at the greeter desk

Your baby's nurse can register you for any education class. The support programs do not require registration. All Programs are free.

### Classes and programs:

- **NICU 101:**  
A complete orientation to our NICU and an opportunity to ask questions and receive support.
- **Infant Care:** A comprehensive class that includes care of the premature baby, feeding, safety, development and discharge planning.
- **Infant CPR:** American Heart Association Family and Friends Infant CPR training with hands on practice.
- **Scrapbooking:** A support session for families that includes making a scrapbook for your baby's pictures and socializing with other NICU families.
- **Bead Program:** Celebrate your baby's milestones in the NICU by building a beautiful necklace.

## Helpful Tips To Maximize the Summer Season

by Dr. Joanne Bishara, Neonatologist, Hackensack University Medical Center NICU

The days of summer are upon us. For preemies, this means the end of RSV and flu season. For parents of preemies, this means more time outdoors, enjoying fresh air and nature with your baby. I'd like to share some helpful tips with you about how to maximize the summer season while always keeping your baby's safety and well-being top of mind.

### Plan outdoor time wisely

Picnics, visiting the zoo and parks are some great ways to pass the time with your baby. Plan outdoor time wisely; remain cool by staying indoors during peak sun hours of 11am- 2pm. Avoid exposure to direct sunlight for your baby. If headed to the beach,



be sure to use a beach umbrella or tent to shade your newborn. Limit your baby's sun exposure by dressing him or her in loose, comfortable cotton clothing and a wide-brimmed hat. Your precious one will look adorable in sunglasses, while you'll feel good knowing your baby's eyes are well protected! Sunscreen is not recommended for babies younger than 6 months of age. For babies older than 6 months, apply sunscreen liberally and reapply every two hours. Choose a broad-spectrum sunscreen with a sun protection factor (SPF) of at least 30. To avoid irritating your baby's skin and eyes, use a sunscreen that contains zinc oxide or titanium dioxide. Avoid products that combine sunscreen and the insect repellent DEET as sunscreen must be reapplied regularly while insect repellent typically does not need to be reapplied. Don't forget to keep your baby hydrated with breast milk or formula. (Babies under 6 months should not drink water.)

You might be wondering when it is appropriate to take your infant swimming. For infants younger than 2 months of age, immunity is a concern and therefore swimming is not recommended. If you have a premature babies with lung problems, your baby is even more vulnerable. It is not recommended that parents take their young infants to public swimming pools, lakes or the ocean. Keep in mind

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**Helpful Tips**, *continued from cover*


that babies have less body fat as compared to older children. This means your baby’s temperature can change quickly. Water temperature between 85 and 87 degrees Fahrenheit is optimal. If you notice he or she begins shivering, it is time to get out! Hot tubs are entirely off limits!

If planning a trip, consider the duration and timing of the travel, as well as the mode of transportation you plan to use. When traveling by car, do not leave your baby in the car for any length of time. It may be tempting to keep him or her in the car set with the windows down until naptime ends, however this can lead to overheating. Especially on hot days, always take your baby out of the car and out of the car seat once you’ve reached your destination.

Considering air travel? Keep in mind that the quality of the oxygen available is affected by the cabin pressure. Moreover, your baby will be breathing in

recycled air which increases the risk of infection. This may not be an issue for a 2-week old, full-term baby, but would pose a potential risk for a premature baby with lung problems. Check with your pediatrician before planning to fly.

And no matter what activities you’re engaged in with your baby, always remember to be as vigilant as you were in the NICU about protecting your baby from germs through handwashing.

This season is a great opportunity for your preemie to gain new experiences and grow. Make the most of it! Remember that much of what you do will be new for your baby. Take pleasure in watching him or her interact with the world. Enjoy watching them engage in an entirely new sensory experience. So, go ahead...sit them in the grass and smile. You’ve earned it! 

**Who’s Who in the NICU?**

**Gina Signorelli, MS, RD, CNSC, IBCLC**  
NICU Nutrition Support Dietitian



On my path to becoming a registered dietitian, I obtained my bachelor of science degree in dietetics from Montclair

State University. I then completed my internship through the Coordinated Program in Dietetics from the College of St. Elizabeth, which included over 900-hours of practical experience, as well as completion of a national examination. In addition, continuing education is required to maintain registration status. I also obtained a Master of Science degree from the former University of Medicine and Dentistry of New Jersey (UMDNJ),

now known as Rutgers). I have been certified in nutrition support for over ten years. In the last 3 years, I became an international board-certified lactation consultant.

Registered dietitians have the unique opportunity to improve nutritional outcomes for very low birth-weight and critically-ill neonates. With this patient population, the focus is on individualizing nutritional care to improve nutrition intake and infant growth. A normal day begins with gathering information on each infant in preparation for medical rounds. During rounds, each infant’s plan of care is addressed by the neonatologist, physician assistant or nurse practitioner, nurse, and dietitian, and ultimately approved by the neonatologist. While each member of the care team has a different focus, I discuss the nutritional needs in detail. Serving in the capacity of dietitian,

I monitor their nutrition, caloric intake, and growth. This includes analyzing the neonate’s intake, output, electrolytes, acid-base balance and minerals to determine how to feed the infant enterally and parenterally.

My main role is to provide consistent nutritional care to each infant and create nutrition protocols and monitoring tools. Feeding practices are current with the latest research and evidence-based practice. By enhancing clinical effectiveness and avoiding clinical complications, the dietitian can work toward a decreased length of hospital stay for the neonatal patient. Because an infant’s nutrition status, starting at birth, significantly affects their physical growth and neurological status throughout their life, it is important that the baby is gaining weight and growing appropriately and that his/her nutrient needs are met. Research has shown growth exhibited


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### Who's Who in the NICU? *(continued from page 2)*

by preterm infants while in the NICU has ramifications for the long-term neurodevelopmental outcomes.

In addition, families are educated regarding specific diet requirements, implementation, and maintenance of dietary therapy. Mothers' diets are also reviewed, as necessary,

in addition to their vitamin and mineral usage. I provide assistance in promoting breastfeeding and identifying and addressing barriers. Although, some families may not be aware of my role in their babies' care, I am constantly hard at work behind-the-scenes to ensure the health and future wellness of their children. 

## Parent Perspective


### OLIVIA'S NICU DAYS By Melissa Treves Gurkan, NICU Family Advisor



My daughter Olivia was born at 32 weeks, weighing three pounds and six ounces. Until the end of my seventh month of my pregnancy, my blood pressure and other factors were very normal; but rather suddenly, my blood pressure started to elevate and I began gaining weight rapidly, became very swollen like a balloon. I was fortunate that my OB/GYN physician was monitoring me very closely during my pregnancy; he wanted to make sure about everything and asked me to complete a 24-hour urine test to check my protein levels. The results came back sky high and so he ordered me to rush to the hospital right away; and that was the moment I learned that I was having a complication called preeclampsia. That night my blood pressure went as high as 220/ 120 and my OB/GYN had to perform an emergency c-section the next morning.

After the delivery, the doctor brought my daughter next to me so I could say hello to my little princess and kiss her. After our first hello, doctors quickly rushed her to the NICU. When I saw her in the NICU

for first time, I collapsed in shock; she was covered with lots of different wires, monitors, C-Pap and so many other things that I had no idea about and had never seen in my life before. Those things made me feel unexplainably sad, helpless, anxious and nervous. At the sixth day, I had to leave my baby and go home. I don't think anybody can really understand how terrible and helpless a mother feels if they haven't gone through the same experience. Every morning we were going to the hospital in the early hours, staying until midnight. This routine continued for 40 straight days.

We are so thankful first to God and to all of the nurses and doctors who took care of me and for taking care of my baby, a piece of my heart, when I had to leave at night. Those 40 days in the NICU were an educational experience for me. I learned how to hold, feed, change and take care of a tiny baby with confidence. Now my 3 lbs. 6 oz baby at birth is a two-and-a-half year-old beautiful, smart, and a super active toddler. Being in the NICU is a life-changing experience that one never forgets. Watching your child fighting for survival gives you a new appreciation for life and its value. But I would like to say to the parents who have their precious babies in the NICU now – Although it seems very hard at the moment, there is definitely light at the end of the tunnel. Your child is your hero! They are our little fighters; our strongest life miracles. 





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## Family Advisory Council

The Family Advisory Council is a group of “graduate NICU parents” who have had a baby in the NICU and will be able to provide new parents with emotional and informational support. They are able to provide a unique form of support that only another parent who “has been there” can give. Family Advisors understand that this is a stressful time for new parents.

New NICU parents:

- May not have expected to deliver for several months
- Are worried about their baby’s medical condition
- May not know anyone else who has had a baby in the NICU

### How to reach us

You can choose to meet a Parent to Parent Support volunteer at any time, whether it’s “Day one” or down the road.

We encourage you to reach out to us whenever we can help.

- Speak with the social worker, charge nurse or your baby’s nurse and let them know that you are interested in receiving this type of support.
- We will ask you to provide some information and to sign a request form.

### How can the Family Advisory Council help new parents

- By reducing the possible isolation of being a NICU parent,
- By providing an example of hope and coping,
- By sharing information and resources,
- By providing the opportunity to talk to new parents in the NICU

*Family Advisory Council provides support!*

## Important Phone Numbers

	Room Numbers	Phone Number
Intensive Care Area	02- 24	551-996-4655
Intensive Care Area	25 – 40	551-996-4661
<b>Intermediate Care Area</b>		
Annex A	42 – 52	551-996-4726
Annex B	54 – 64	551-996-2221
Annex C	66 – 80	551-996-4688
Continuing Care Area	81 – 90	551-996-4645

Birth Certificate Office – 551-996-3096  
Child Life Specialist – 551-996-5342  
Main Social Service Department – 551-996-2110

Neonatology Office- 551-996-5362  
Pastoral Care – 551-996-2345  
Lactation Consultant- 551-996-2000 ext. 71820

### Contributors

The NICU Family to Family Newsletter is produced by the NICU Family Advisory Council of the Neonatal Intensive Care Unit - Joseph M. Sanzari Children’s Hospital at Hackensack University Medical Center. We welcome your suggestions and comments. Please contact Kryz Toczyłowski at 551-996-4106.

**Disclaimer** – The information contained herein is provided for educational purposes only and is not a substitute for medical advice and treatment or consultation with qualified physicians and other healthcare professionals regarding your individual needs.