York and Scarborough Teaching Hospitals
NHS Foundation Trust

Information as you are admitted to hospital following diagnosis of foetal abnormality

Information and advice for parents

ⓘ For more information, please contact your midwife

Maternity Services

Scarborough Hospital
Woodlands Drive, Scarborough, YO12 6QL
Telephone: 01723 236869
or
York Hospital
Wigginton Road, York, YO31 8HE
Telephone: 01904 726869

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Introduction

We recognise that you have been faced with a very difficult decision, and we will be there to support you. We will work with you to ensure that you are fully involved in all aspects of your care.

Parents often feel overwhelmed by their sadness. We realise that the days and weeks following the loss of your baby can be bewildering and difficult. It is unfortunate that there are so many important decisions that need to be made at a time when you feel unable to think calmly or clearly about anything.

There is no right or wrong way to do things. Try to take things one step at a time.

This leaflet deals with your immediate care and the birth of your baby.

Where will I deliver my baby?

There are three places that are available for delivering your baby. These are:

- Bereavement room in York located just off labour ward.
- Labour ward in York.
- Bereavement room in Scarborough located on the labour ward.

Parents are requested to contact the nominated ward for delivery at 08.00 hours on the date booked to ensure that this is still available. If this is unavailable further options for care will be discussed with you or admission may need to be delayed.

What happens when I come into hospital?

On admission you will be allocated a private room.

You will be able to stay in this room throughout your labour and the birth of your baby until you are ready to go home provided there are no complications.

You will receive information and a contact number for Antenatal Results and Choices (ARC). This is a national charity which supports parents through antenatal testing and when an abnormality is diagnosed in their unborn baby. ARC offers support to parents whatever they decide. ARC works with professionals to improve the care given to parents at this difficult and sensitive time.

Prior to your admission, as part of the induction process you may have been given a tablet called Mifepristone. This prepares your body for the induction process which unfortunately will replicate a labour and vaginal delivery.

When you arrive on the Labour Ward you and your family will be shown to your room. A midwife will be allocated to care for you.

You will need to bring into hospital with you:

- An overnight bag and toiletries
- Nightwear and comfortable clothes
- Underwear
- Slippers and dressing gown (optional)
- Sanitary towels

You may like to bring things with you for your baby, for example clothes, toys, mementos. You may also bring a camera for you and your family to take pictures of your baby.

Whilst at home take your time to read all the information given to you and you may want to start filling out the plan of care booklet with your wishes for delivery and immediate care of your baby.

You could also download the Sands bereavement support app on: www.sands.org.uk/app. This can help guide you through your bereavement journey. There are a number of voluntary support groups/helplines and websites that you can also view, located in the back of this booklet.

If you go into labour at home you will need to return to hospital before your scheduled appointment time, please telephone the labour ward.

York Labour Ward – 01904 726869 (option 3)

Scarborough Labour Ward - 01723 236869 (option 3)

What happens next?

What is the induction process?

Your midwife will continue the induction process by giving you further medication. These tablets can be given either orally or vaginally or both this depends on how many weeks pregnant you are and what the medical staff have prescribed. The medicine will be repeated every three or four hours until your baby is born.

You may feel some pain and discomfort, similar to that of period pains and some backache. You may also feel sick, your temperature may increase and some women can experience dizziness and bleeding. If you are concerned about any of this, please discuss it with your midwife.

Only five doses of prostaglandin tablets can be given during any 24 hour period. If your baby has not been born within the first 12 hours you will then have a 12 hour rest period before starting to have any more prostaglandin. This can take some time so please be prepared to be in hospital for several days.

What are my pain relief options?

We are aware that this process can be long and painful, pain relief is always available. To begin with you may be offered oral pain killers and you may consider having a warm bath. When the pain increases, if these are not effective, you may be offered a Patient Controlled Analgesia System (PCAS) which is a pump containing morphine. An anaesthetist will come and set the pump up and show you how to use it. You will then be in control of your own pain management.
Entonox (“gas and air”) may also be available.

Injections of opioids are not recommended as they cause drowsiness and affect your ability to understand what is happening and remember the events in the future which may add to your distress

What happens when I am ready to give birth?

At some point during your labour you will feel a pressure sensation in your bottom and an urge to use the toilet. This could be an indication that you are ready to deliver your baby. Your midwife will want to look to see if your baby's delivery is about to happen. You will then be encouraged to push.

Following the delivery you will be given an injection to help deliver the placenta. You should deliver the placenta soon after delivering your baby. If this does not happen you may require help from a doctor to remove your placenta. Your midwife will explain this process to you if required.

Once your baby is delivered we will carry out your wishes according to your plan of care. Please feel free to change your mind at any time.

You need to be aware that your baby's body will alter following the birth. Keeping the environment cool and the special "cold cot", "cold plate" or "cold mattress" which your baby will be in/on when not being held significantly slows this process. This means that the baby can be with you as long as you wish.

Will my baby be born alive?

It is probably rare for a baby to be born alive following a medical termination before 22 weeks gestation.
However there is a possibility that your baby may make movements at birth but that this does not mean that the baby could survive. The consultant may discuss this with you before the termination process. If you are concerned about this please ask your midwife for more information.

If you are over 22 weeks there is stronger evidence that your baby could be born alive. Your consultant will have recommended that you consider stopping the baby's heartbeat before delivery.
Despite this recommendation, it is not a legal requirement and the choice is up to you.
However if the baby is born alive with a non-lethal anomaly, the baby may survive and care will need to be administered that is in the baby's best interests.

Decisions about your baby

What happens about arranging a post mortem?

A post mortem examination is often thought useful. Your consultant may have already discussed this with you. Further information about the condition of your baby may help you make decisions about any future pregnancies. You will be asked to sign the consent form if you decide to go ahead with a post mortem.
A doctor or senior midwife will discuss this further and take the necessary consent for the procedure. If it has been agreed with your consultant that a post mortem examination is not necessary it will not be discussed any further.

Can I have my baby either blessed and or baptised?

Your midwife can contact the hospital chaplain for you if you would like to do this. You can also contact the chaplain yourself or you may ask your own minister to come to the hospital.

Can I take photographs?

Your midwife will offer to take photographs of your baby. If you do not wish to take them home with you they will be kept in your notes in case you change your mind. Parents often return for these later. You can of course take your own photographs. Please discuss the processing of these with your midwife before you go home if you intend to take these to a shop for developing.

Can I keep mementos?

If you would like to keep any mementos, a small box can be provided for you to keep any mementos in, such as wristbands, hand and footprints, clothes, toys and blankets.

Other mementoes may be offered to you, which you may or may not want to use, this is totally your choice and we respect your wishes.

If you have any particular requests do not hesitate to talk to the staff, no one will think any request is unusual or strange.

Do I need to register the death?

In England and Wales all births, stillbirths and deaths have to be registered by the Registrar of Births and Deaths.

If your baby was delivered after 24 weeks this is classed as a stillbirth and you will need to arrange to officially register the birth/death as such and obtain a certificate. By law your baby will need to have a funeral and be either buried or cremated.

There is no legal requirement to register your baby if they were not born alive before the 24th week of pregnancy.

Please refer to the booklet “Information to help you following the loss of your baby”.

Can I have a funeral for my baby?

If your baby was delivered after 24 weeks this is classed as a stillbirth and your baby will need to have a funeral.

All parents have a choice whether to have a funeral service or not and whether they would like their baby buried or cremated and the hospital can help with these arrangements.

A member of staff from Bereavement Services can visit you in hospital after the birth of your baby or telephone you once you are discharged. They will be able to discuss the options available to you regarding funeral arrangements for your baby and, if you wish, assist you with the organisation.
If you choose not to have the involvement of Bereavement Services then you are perfectly entitled to make your own arrangements.
However all parents need to discuss with the bereavement officer their wishes about what happens to their baby and until this has occurred no arrangements can be made.

Please note that there is no immediate rush to make decisions and that you are free to go home and discuss this as a family in your own time.

The booklet “Information to help you following the loss of your baby” also provides further information. If you have not received this please ask for a booklet.

Can I take my baby home?

There is no legal reason why parents should not take their baby home to make their own arrangements for the funeral unless the death is to be investigated by a coroner.

For your protection and to avoid misunderstanding there is some important paperwork which will be given to you to complete. If you would like to do this please have a look at the ‘Taking Your Baby Home’ leaflet.

If you have consented to a post mortem you can still take your baby home following this procedure.
Some families also opt to have the baby at home the night before the funeral. Please discuss this with the bereavement officer who can guide you through this procedure

How will my body react after the delivery of my baby?

You may start to produce breast milk after giving birth to your baby. Your midwife may offer you medication that could prevent this. You may experience some side effects such as dizziness, headaches and nausea. Please discuss any concerns with your midwife.

You can expect some vaginal bleeding which will reduce slowly over the first week but may last three to four weeks before disappearing.

Period type stomach pains (commonly known as after pains) can be relieved by taking paracetamol.

Your perineum may also be bruised and painful. A daily bath and careful hygiene will help.

If you need iron tablets these will be given to you to take home or you will be asked to obtain a prescription from your GP.

If you have any other problems or complications your midwife or doctor will explain these to you as needed and answer all your questions. Please do not hesitate to ask your GP or community midwife if you are worried about anything.

Will my community midwife come to see me?

Once you go home you may need a post-natal follow up from your community midwife because you have just experienced labour. This can be arranged to suit you. Your Community Midwife, Health Visitor and GP will all be notified when you are discharged from hospital. Your partner may need some time off work too: Please ask someone to inform their GP if you are not registered at the same practice.

Do I have any further appointments?

You and your partner will be sent an appointment to see your consultant; this maybe up to 12 weeks or even longer depending on what investigations were taken.

We understand that it may be difficult to return to the hospital but it will give you the opportunity to discuss what has happened. You will have plenty of time to ask questions. Do keep a list of things you would like to ask.

The hospital bereavement midwife will contact you by letter following your discharge home. If you would like to see them, please contact the bereavement services who can arrange this for you.

Who will contact me after discharge?

The midwife who specialises in bereavement will contact you via telephone to guide you through the bereavement process. You will also receive a letter following your discharge home with further support information and contact details for voluntary groups.

If you would like to see them or discuss anything with them at any point, please contact them via email at yhs-tr.bereavement.midwives@nhs.net and leave a message. They will contact you on their next working day.

The bereavement team will also send you a questionnaire to allow you to feedback on any aspect of your care. If you would like a response to this please include your details on the questionnaire otherwise it is anonymous.

If you have not met the bereavement officer during your stay they will contact you after a few days. Alternatively you may want to contact them.

Once discharged home the bereavement officers can keep you informed about your baby, funeral arrangements and follow up with the consultant.

Where can I go for emotional support?

People react to grief differently. You and your partner may experience differing emotions or feelings at the same time. We recognise that different people need different amounts of support.

If you feel it would be helpful to speak to someone who has been in a similar situation, the national help line telephone numbers for various organizations are at the back of the booklet.

You could also download the Sands bereavement support app on: www.sands.org.uk/app.

You may prefer to discuss support with your GP.

We all recognise that nothing we can offer can alleviate your grief. We hope that this information leaflet helps to explain what will be happening to you and the services we are able to offer you and your family to help you begin to cope with your loss.

The staff on the Labour Ward recognises the difficult decision that you have been faced with. We want to support you in that decision, working with you to ensure that you are fully informed and involved in all aspects of your care.

Useful telephone numbers

Patient Advice and Liaison Service (PALS) 01904 726262

York Hospital Site Contacts

Labour Ward 01904 726869 (option 3)

Bereavement Services 01904 725445

Community Midwives, contact via Maternity Medical Records during Office hours 01904 726720

Midwife Support
Email: yhs-tr.bereavement.midwives@nhs.net

Chaplaincy 01904 725579
(Office hours/voicemail)

Scarborough Hospital Site Contacts

Switch board 01723 368111

Labour Ward 01723 236869 (option 3)

Bereavement Services 01723 385178

Midwife Support
Email: yhs-tr.bereavement.midwives@nhs.net

Chaplaincy 01723 342500

National Support Organisations

Antenatal Results and Choices (ARC)

Helpline open Monday to Friday 10am to 5.30pm
Telephone number 0845 077 2290
Or 0207713 7486 from a mobile

Stillbirth and Neonatal Death (SANDS)

National helpline open Monday to Friday 10am to 4pm
Telephone number 020 7436 5881
www.uk-sands.org

British Association for Counselling And Psychotherapy 01455 883300

(IAPT)

Improving access to psychological therapies.
www.northyorkshireiapt.co.uk

Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact:
Bev Shelley, Bereavement Midwife, Bereavement services, York Hospital, Wigginton Road, York, YO31 8HE or telephone 01904 725445.

Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

Leaflets in alternative languages or formats

If you would like this information in a different format, including braille or easy read, or translated into a different language, please speak to a member of staff in the ward or department providing your care.

Patient Information Leaflets can be accessed via the Trust's Patient Information Leaflet website: www.yorkhospitals.nhs.uk/your-visit/patient-information-leaflets/

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