

Department of Patient Care Services

POLICY: MCH Visitation		DEVELOPED BY: MCH	
PATIENT CARE SERVICES POLICY/GUIDELINE COMMITTEE: _____ Claudia Garzon-Rivera MSN, RN, CCRN, CNL Committee Chair <input type="checkbox"/> N/A		APPROVED BY: _____ Rita Smith, DNP, RN CNO, Senior Vice President Patient Care Services _____ Name: Title: Dept: Chair/Designee of Developing Committee	
Effective Date: January, 2009	Revised Date: March, 2011, August 2012	Reviewed Date:	

Distribution: L&D, Post Partum, Obstetrical Triage Area, NICU, Newborn Nursery, Security

PURPOSE: *To establish a policy for visitation in the MCHD that will maximize quality of care and provide privacy for both mother and newborn but also one that encourages a family centered environment allowing family and sibling bonding and patient support.*

POLICY: *JCMC is committed to providing a caring healthy environment and optimal wellbeing and safety of our patients. Visitors to MCHD will abide by the procedures outlined below:*

POLICY:

I. General Visitation Guidelines

A. The following guidelines are to be followed in these areas:

1. All visitors should be free from colds, infections, sore throats and any rashes
2. All visitors **must** wash their hands prior to handling the newborn
3. Visitors may **not** use cell phones in the hallways. Cell phone usage is restricted to the visitor lounge **and/or** patients room
4. *At the discretion of the physician, visitors may be asked to go to the waiting area during all nursing/medical procedures, i.e., epidural, catheterization, etc.*

5. *All visitors to the MCH division must have a picture ID pass issued by security before entering into this area.*
6. *All visitors must abide by Liberty Health's visitors Code of Conduct*

II. Mother/Baby Area

A. Guidelines to be followed in this area:

1. Visiting hours are from 1200-2000 in the post partum area (PP)
2. Visitors in the room are limited to a total of two (2) persons, at any given time, not counting the father of the newborn (post partum) and **siblings**.
3. Siblings of the newborn who visit should be at least two (2) years of age. No children will be allowed in the Labor and Delivery (L&D) areas. *If a child or children becomes unruly or uncooperative, they must be taken off the unit by the accompanying adult until settled.*
4. Children **must** be attended by an adult at all times and are not to be left in the care of the new mother
5. *The father of the newborn has unlimited visitation privileges and is allowed 24hrs support of the new mother in all rooms without a second patient. Fathers should be allowed to sleep in the designated sofa beds and offered clean linen. Cohabiting in the hospital bed is prohibited. If the room is shared with another patient, the father may be requested to leave at 2300.*
6. Grandparents may visit during regular visiting hours in the mother's room. If delivery is not during a regular visiting time, the grandparents may briefly visit the new mother when she arrives in her room. *The baby may be viewed for a short time through the nursery window immediately after delivery. Arrangements should be made with the charge nurse of the post partum unit and the newborn nursery.*

III. Labor and Delivery Area

A. Guidelines to be followed in this area:

1. One Primary Support Person is to be designated by the mother upon admission this role may not be interchanged with other visitors
2. The Primary Support Person (PSP) is permitted to be present throughout the labor, delivery and recovery process. *This person may be a Doula, FOB or any person designated by the patient.*
3. *In addition to the PSP two (2) other visitors may be present in the L&D area which does not include siblings*
4. *No children are permitted in L&D. Visitors must be ≥ 16 yrs old.*
5. All other visitors will wait in the waiting room. No food is to be brought into the L&D room or the family waiting area. Food may be eaten in the hospitals' cafeteria on the first floor.

B. Delivery Guidelines for Visitors

1. *Two (2) visitors in addition to the PSP* may be designated by the patient to attend a normal vaginal delivery, *unless the physician, within reason* restricts the number of observers. These persons may be present during the pushing phase of labor, set-up of the room and delivery. They may act to provide emotional support to the patient

2. *No one is allowed to increase visitors in the room to no more than 3 persons including the PSP*
3. Visitors and the PSP will be instructed in what areas of the room they are permitted to move about freely and any restricted areas in order to maintain the integrity of the sterile field
4. At any time, *and if necessary*, visitors may be asked to leave the room and return to the waiting area. The patients PSP will be responsible to keep the family informed
5. All visitors, including the PSP, will be instructed in the proper hand washing techniques before handling the infant
6. Visitors may **not** stand in the hallway outside the LDR room *at any time*.
7. A visitor may not interfere with nursing care of the patient. Any person that interferes or interrupts intentionally the care of the patient will be requested to leave the area. The charge nurse, if necessary will inform the Assistant Director of Nursing and/or Security.
8. *With the exception of the FOB or PSP, no visitors are allowed during the golden hour to allow for uninterrupted time for mother-baby bonding, skin-to skin and bonding.*

C. LDR Recovery

1. Visitors, at the request of the patient, may return to the LDR after the patient has been taken down from stirrups and the room is made ready for the recovery
2. Both mother and infant must be in stable condition

D. Cesarean Section Delivery

1. In the event of a routine, scheduled or non-emergent Cesarean Section (C-Section), the PSP **only** may accompany the patient with the **approval** of the surgeon and the anesthesiologist. In the event that the PSP is unable to accompany the patient, the patient may choose another support person
2. The PSP will be requested to don appropriate attire for the surgical area. Once the patient is prepped and draped, the circulating nurse or her designee will call the PSP to the operating room. The PSP should be instructed not to move around the room freely in order to maintain the integrity of the sterile field. The PSP will be seated at the patients head in order to provide emotional support
3. The PSP may go to the infant stabilization area as directed by the nursery nurse, neonatologist or circulating nurse. In the event that the infant does not stay with the patient through recovery, **the PSP will accompany the escorting nurse with the infant to the nursery**. The PCP may return to the Recovery Room to await the patient's arrival, but may not re-enter the operating room
4. In the event of an emergency C-Section, the PSP will not be taken to the operating room unless the surgeon or anesthesiologist grants permission

E. Minor Surgical Procedures (post partum sterilization, *Cerclages* or D&C)

1. **The primary support person may accompany the patient to the operating room for any surgical procedures for which Regional Anesthesia is utilized. The PSP will be directed to the waiting area should the procedure requires General Anesthesia.**

F. Obstetrical Recovery Room

1. **The PSP is the only person allowed to stay with the patient during the surgical recovery period. If an exception is made, it must be granted by the charge nurse**

and communicated to others as needed. *All other visitors and/or family members will be allowed to see the patient once she is stable and transferred to the mother/baby unit.*

IV . Newborn Intensive Care Unit (NICU)

- All visitors including siblings are required to **Wash Their Hands** prior to entering NICU and **To Wear a Yellow Gown** when holding their infant.
- Anyone wearing artificial nails **MUST** wear gloves.
- Visitors will be asked to leave the NICU for **60 Minutes** during shift change from 6:30AM-7:30AM and 6:30PM-7:30PM.
- Visitors may be asked to leave at staff's discretion.
- Visitors are allowed only when accompanied by the identified person with an ID Bracelet holder.
- Only **ONE VISITOR** may accompany bracelet holder at a time for each patient.
- Parents with an ID Bracelet can visit any time and for the duration desired.
- Only parents are allowed to touch and hold their baby.
- Adult visitors, except parents, are allowed to stay for **30 minutes visit.**
- Sick visitors are not allowed to visit.
- Cell phone use is prohibited in patient care area.
- Sibling visitation for ages 3 years and above are allowed on weekends and holidays between the hours of 2pm – 5pm with the following terms:
 - Review of immunization card by healthcare professional
 - 2 children per bedside at a time for only 15 minutes



Appendix B

Policy/Guideline Title: _____

Approvals:

Behavioral Health	Approved: _____	Date: _____	NA ___
Cath Lab	Approved: _____	Date: _____	NA ___
Critical Care	Approved: _____	Date: _____	NA ___
Emergency Department	Approved: _____	Date: _____	NA ___
Interventional Radiology	Approved: _____	Date: _____	NA ___
Med Exec	Approved: _____	Date: _____	NA ___
Pathology/Blood Bank	Approved: _____	Date: _____	NA ___
Perinatal	Approved: _____	Date: _____	NA ___
Peri-Op	Approved: _____	Date: _____	NA ___
Pharmacy/ P&T	Approved: _____	Date: _____	NA ___
Professional Practice	Approved: _____	Date: _____	NA ___
Quality & Safety Nursing	Approved: _____	Date: _____	NA ___
Value Analysis	Approved: _____	Date: _____	NA ___
Trauma	Approved: _____	Date: _____	NA ___
Other:	Approved: _____	Date: _____	NA ___
Other:	Approved: _____	Date: _____	NA ___
Other:	Approved: _____	Date: _____	NA ___

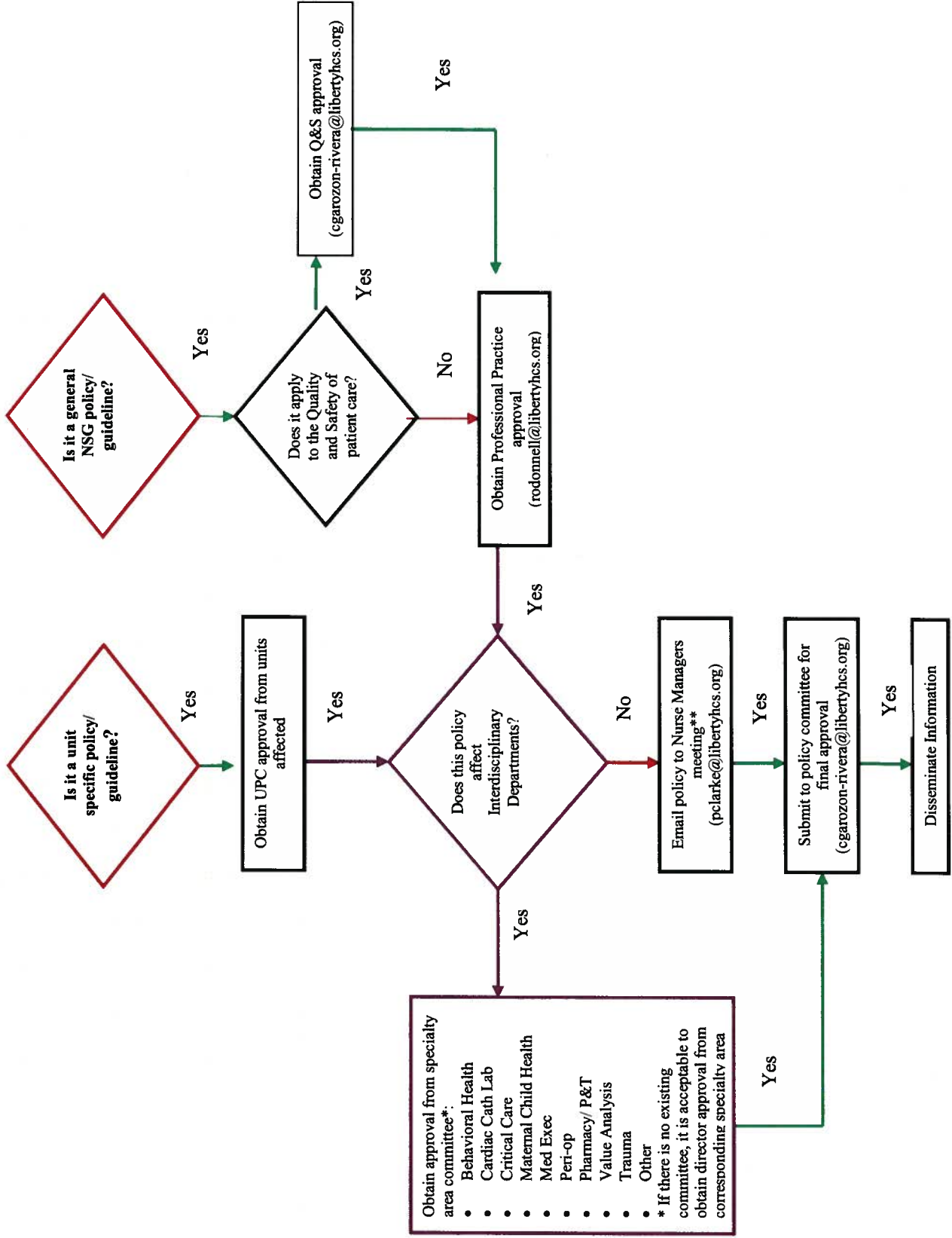
Name of Person submitting for review and approval: _____

Date Submitted to Committee: _____

Date Approved: _____

Date Uploaded to Intranet: _____

Appendix A Policy/Guideline Algorithm



** If it is a unit specific policy/guideline obtain signature from unit

