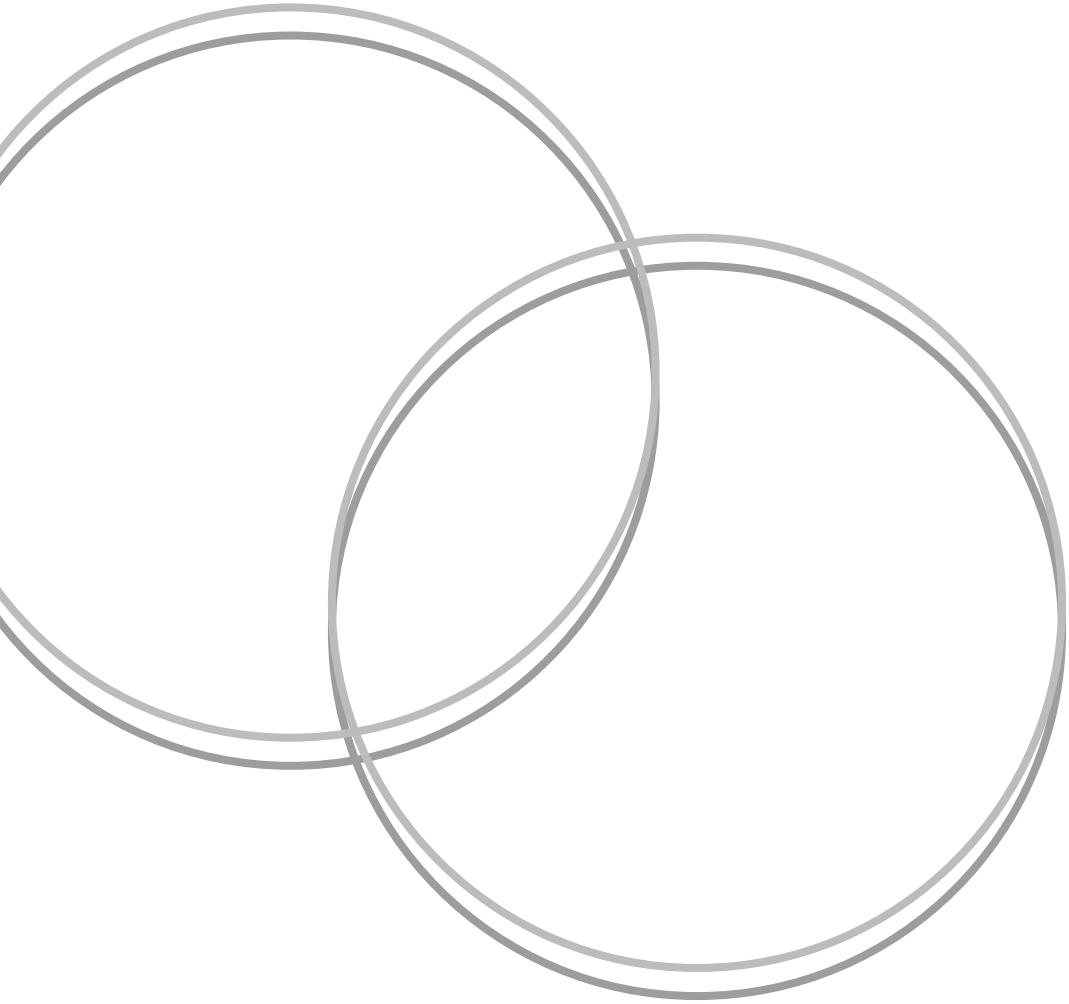
Oxford University Hospitals
NHS Foundation Trust

Transitional Care Unit (TCU)

Information leaflet



The Transitional Care Unit (TCU) is on Level 5 of the Women's Centre at the John Radcliffe Hospital. It is where we look after newborn babies who need extra medical support.

In the TCU we do our best to keep parents and babies together and avoid the need for admission to the Neonatal (Newborn Care) Unit.

The TCU team includes:

- Midwives
- Staff Nurses
- Maternity Support Workers
- Assistant Practitioners
- Neonatal Unit staff

A consultant doctor from the Neonatal Unit visits to answer your questions and help plan your baby's care, and each morning the TCU team will discuss your baby's care plan with you.

Reasons for extra medical support

Prematurity

Babies born early, before 37 weeks of pregnancy

Low birth weight

Babies born with a low birth weight (under 2kg)

Premature and low birth weight babies are more likely to need extra feeding support.

They may also be **sleepier** because they use their energy stores to keep warm and maintain their blood sugar levels.

The TCU Feeding Team will develop a feeding plan with you.

A doctor will review your baby daily, and the Infant Feeding Team will support you.

Jaundice

Jaundice is common in newborn babies and is caused by a build-up of bilirubin, a waste product formed when excess red blood cells break down after birth. The main symptom of jaundice in babies is that their eyes or skin look yellow. They may also be sleepy and not feed well.

Jaundice levels usually peak 3 to 5 days after birth. Many babies develop a slight yellow tinge to their skin around then, without cause for concern, but some babies have high bilirubin levels that need treatment.

Treatment is usually by phototherapy, shining ultraviolet (UV) light on their skin with an overhead lamp, or a specialised treatment blanket.

We will discuss this treatment with you and give your baby regular blood tests to check their progress.

If your baby is sleepy during treatment the Infant Feeding Team can support you.



The picture above shows a baby receiving phototherapy

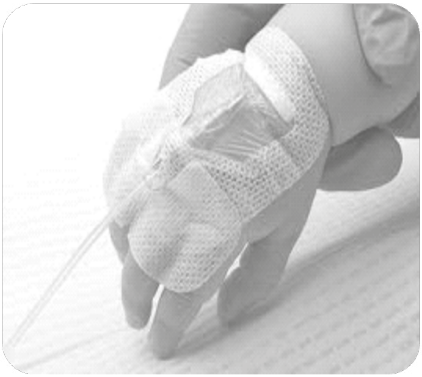
Infection

If we suspect that your baby has an infection, we will give them intravenous (IV) antibiotics twice a day.

We put a small, fine plastic tube called a cannula in your baby's hand or foot, and give antibiotics through it, directly into a vein, for the first 24 hours.

We will do a blood test to identify the cause of the infection. 18 to 24 hours later we will do a second test, and after 36 hours we will decide if we need to continue giving antibiotics.

Treatment can last from 2 to 14 days, and we will review your baby daily. Depending on their progress, we can switch to oral antibiotics (given by mouth), and they may be able to go home. We will discuss all these decisions fully with you.



The picture above shows a cannula placed in a baby's hand

Preparing to go home

Feeding, weight and temperature

Before going home, your baby will need to:

- feed well
- gain weight
- maintain their body temperature without support.

Jaundice / infection

Before going home there should be:

- no concerns about infection
- jaundice levels below a certain level or falling.

Further checks

Checks needed before going home:

- hearing test
- Newborn Initial Physical Examination (NIPE) (within 72 hours of birth).

Advice and support

We will offer advice about:

- breastfeeding
- bottle feeding, including preparing feeds and sterilising equipment
- safety at home
- recognising signs of illness
- giving any medicines your baby needs
- safe sleeping

Caring for your baby at home

Your baby may receive follow-up care at home from the **Neonatal Community Team**, **Community Midwife** and/or **Health Visitor** who will monitor their weight, feeding and development.

Neonatal Outreach Team

The Neonatal Outreach Team will visit you at home if your baby was born **before 36 weeks of pregnancy or weighed under 2kg** when discharged. They will weigh your baby and provide feeding support.

Our team is here to support you and your baby. Please let us know how we can help.

The Oxford University Hospitals' Transitional Care Unit and Wellbeing Room has been kindly supported by ***SSNAP - Supporting sick newborn and their parents***.

SSNAP
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Supporting sick newborn and their parents

Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

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Oxford University Hospitals NHS Foundation Trust
www.ouh.nhs.uk/information

We would like to thank the Oxfordshire Maternity and Neonatal Voices Partnership (OMNVP) for their contribution in the development of this leaflet.

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