

# 2012 Military Health System CONFERENCE



## Implementation of Skin-to-Skin Contact in the Immediate Post-Partum Period

Improving the Experience of Care

### The MHS: Healthcare to Health

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# Introduction



- Historical Perspective
  - Resuscitation of newborns took place on radiant warmers away from their mothers.
    - Delayed affects of early and essential skin-to-skin contact (SSC) that promotes bonding and breastfeeding.
    - Infant suck reflex is greatest in the first 30 minutes of life; this separation greatly affects infants' ability to learn the suckling process.

# Introduction



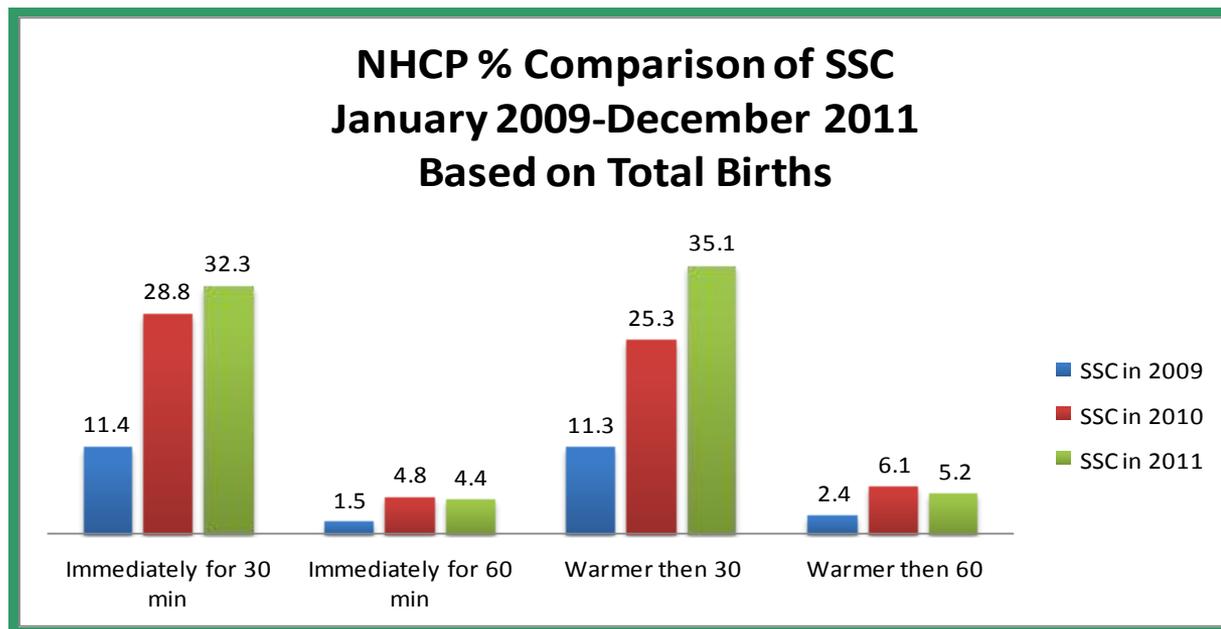
- Current Naval Hospital Camp Pendleton Standard of Care
  - Focus has returned to promoting immediate SSC in healthy newborns.
    - Helps infant regulate his/her temperature.
    - Early suckling of colostrum stimulates digestive peristalsis.
    - Promotes initiation of early breastfeeding.
    - Stimulates maternal uterine contractions and may decrease amount of excess post-partum bleeding.

# Methods



- Assessment in 2009 revealed low % of SSC
  - Changes in process initiated in 2010
    - Unit policy created to increase promotion of SSC.
    - Medication and weight assessment for healthy newborn can be delayed until an hour of life.
    - Education on principles of SSC to staff & patients.
    - Initial Neonatal Resuscitation and assessments were taught to be performed on maternal chests.
  - Because cesarean sections account for 25% of NHCP births, SSC was initiated in the OR.

# Results and Conclusion



- Benefits of early SSC improve maternal satisfaction with their birth process while promoting family centered care.
  - “Skin-to-Skin after a c-section was awesome! I loved this. It was my last baby and I’ve never been able to do this before.”