

Your guide to birth at Stamford Hospital



Welcome

Welcome to your comprehensive hospital guide for expectant parents giving birth with Oula provided by Stamford Health. This resource addresses everything you need to know before, during, and after your birth experience. From essential paperwork and hospital logistics to our collaborative care model featuring both midwives and OBGYNs, this guide aims to answer your most common questions and help you feel prepared for your upcoming birth. Our care team is committed to providing personalized support throughout your entire experience.

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Before birth

The weeks leading up to your birth involve important preparation and logistics planning. This section covers the essential paperwork you'll need, how to reach your care team in case of urgent concerns, what to pack for your hospital stay, and an explanation of our collaborative care model between midwives and OBGYNs, that ensures you receive comprehensive support throughout your pregnancy journey.

How do I pre-register for birth at Stamford Hospital?

Prior to delivery, it's helpful to create an account on MyChart, Stamford Health's electronic health record. In MyChart, you can upload your birth preferences, note pain management preferences, and share the names of the individuals who will be with you during the labor and delivery process (care partners). During your hospital stay, you'll use MyChart to connect with your care team in the hospital.

Please follow the steps below to enroll:

1. Download the MyChart app or visit mychart.stamfordhealth.org. Log in if you have a Stamford Health MyChart, otherwise click "Sign up now," then "Sign up online."
2. Complete the self sign-up workflow, and then log in to MyChart.
3. In MyChart, search for "Register for My Delivery."
4. Complete the questions to register for your delivery at Stamford Hospital.

For further assistance, call our MyChart Patient Support Line at 203.276.2079.

Can I tour the hospital in advance?

Unfortunately, Stamford Hospital does not offer in-person tours. However, you should find all the key details you'll need about the hospital experience in this guide. If you have further questions, just send us a note via the portal and we'll help you find the answer!

How can I reach my care team in case of something urgent?

For anything urgent or emergent related to your pregnancy or labor, **please call the Norwalk clinic 24/7 = 203.349.2950**

If you call when the clinic is open, follow the prompts to indicate that you are a current Oula patient and that you have an urgent clinical concern. This will connect you directly to a member of our team who will either respond to your concerns or escalate your message directly to our on-call provider.

If you call after business hours, follow the prompts to indicate you need to speak to a clinician. You'll reach our answering service & they'll take a message and send it immediately to our on-call provider.

In either case, the on-call provider will call you back ASAP to discuss your questions!

What should I bring to the hospital?

Read [our blog post](#) for all you need to know!

Before Birth

What is the role of your OBGYN during my outpatient care vs. hospital stay?

Our patients are at the center of our care model and we personalize your care team so you have the right expert at the right time to help guide your experience. Your prenatal visits will be primarily led by our midwifery team in partnership with an OBGYN. If you would like to speak with an OBGYN at any point in your prenatal care, just ask!

On Labor & Delivery, at the Hollander Family Birthing Center at Stamford Hospital, you will be cared for 24/7 by your midwife with support from a Stamford Hospital attending OBGYN and resident physician in collaboration with you and your birth partner(s).

In the event of a cesarean birth, the Stamford hospitalist team will provide the expert surgical care you need. After your surgery, they will round on you daily, and deliver any necessary medical support during your hospital stay. Your midwife will also be involved in your daily care and seamlessly support your discharge. This includes providing education, support and resources for postpartum. After discharge from the hospital, you will receive all postpartum care at the Norwalk clinic, including a wound check visit at two weeks postpartum as well as your routine six week postpartum visit. You also have access to our virtual Newborn Feeding Group that meets weekly.

If you have a planned c-section, it will be performed by your OBGYN and a midwife may be present for additional support, when available. You will have the opportunity to meet with your OBGYN ahead of the delivery to ensure all your questions are answered. You will receive all medical care at Stamford Hospital, including postpartum support, discharge planning and care.

What do you mean by collaborative care?

At Oula, you have the support of both midwives and OBGYNs. Your midwife leads your day-to-day care, with our OBGYN team available for consultations, co-management of higher-risk conditions, or a visit whenever you'd like to meet with them during your pregnancy. This collaborative model ensures continuity, expert oversight, and shared decision-making so you feel supported in even the most complex situations.

During birth

When labor begins, knowing exactly where to go and what to expect can significantly reduce stress. This section provides practical information about transportation to Stamford Hospital, hospital entry procedures, and what happens during triage. You'll also find details about your care team's role during different birth scenarios, including emergencies and cesarean deliveries. Plus, we've included information about movement during labor, pain management options, and visitor guidelines at the hospital.

How should I get to the hospital?

It's a good idea to call our care team ahead of time, so we can help you plan your transportation timing. If you wait and feel rushed, remember calling 911 requires the dispatcher to send you to the hospital nearest to your home and Oula is not able to medically participate in your care unless you arrive at Stamford Hospital.

I want to keep my placenta after the birth. What do I need to know?

If you'd like to keep your placenta, let your nurse and provider know when you're admitted. You'll sign a consent form, and the hospital will give you a plastic bin to take it home. Bringing a small cooler is helpful and the hospital will provide ice for safe transport. If you choose not to keep your placenta, the hospital will take care of safe disposal for you.

What if I need an emergency c-section or other emergency care from a physician?

You will be introduced to an attending OBGYN upon admission to the hospital. If an emergency or urgent obstetrical need arises during your labor or birth, your OBGYN will be on hand to provide direct patient care in collaboration with you, your birth partner(s) and your midwife.

In the event of a cesarean birth, your OBGYN will provide the expert surgical care needed and they will round on you daily after your surgery to provide any medical support needed during your hospital stay. Your providers will also be involved in your care daily and seamlessly support your discharge. This includes providing education, support and resources for postpartum. After discharge from the hospital, you will receive all postpartum care at the Norwalk clinic, including a wound check visit at two weeks postpartum as well as your routine six week postpartum visit. You also have access to our virtual Newborn Feeding Group that meets weekly.

What if I have a planned c-section?

If you have a planned c-section, our OBGYN team will provide the surgical care needed and one of our midwives will be there for additional support, when available. You will have the opportunity to meet with an OBGYN ahead of the delivery to ensure all your questions are answered. Your OBGYN and our midwives will provide all medical care at Stamford Hospital, including postpartum support and discharge planning and care.

During birth

What happens if there is more than one Oula patient in labor at once?

Our Stamford Health care team is trained to safely support more than one patient in labor when the situation arises. We are committed to making sure you have all the support you need during your hospital stay. In the rare event that we are truly called away for an extended period of time to care for another patient, we have a backup system in place where another provider will be available to support you. In addition to your primary care team member, we will also introduce you to the back-up midwifery colleague and OBGYN attending physician in the event that their services are needed. At the hospital, our team works together to keep you safe and ensure you have the information and support you need.

What happens in triage?

Practically, triage is the area where you enter medical care at the hospital and where we welcome all patients to L&D. You will be greeted by the Stamford Hospital triage team of clinicians, including an attending OBGYN, resident, and nurse to begin your care while your midwife is consulted about your arrival.

Once we have all the triage information, your midwife will meet with you to discuss decisions around what comes next — either being admitted to the hospital, asked to ambulate (walk around) for an hour or two and be re-evaluated clinically, or discharged to home. If you are admitted to the hospital you and your birth partner(s) will head to your L&D room with your midwife.

Prior to arriving at triage, you will be in contact with your care team member over the phone to discuss your triage arrival plan. The Stamford Hospital triage unit is staffed 24/7 by a supportive team of nurses, medical residents and an attending OBGYN physician who will participate in your care under guidance from your midwife. They will provide any relevant medical information to your care team member directly and you will be able to speak to your provider at any time with questions or concerns.

Triage is a space for information gathering around the three most important components of safe labor. First is you, the birthing person. We evaluate how you are working with your pain, what your vital signs are, and ensure you have the space to address any fear or anxiety about the process. The second is the well-being of your baby. This is assessed by fetal ultrasound and heart monitoring in triage. And the third is your labor — understanding your contraction pattern and a cervical exam will help your medical team know which phase of labor you're in and how to best anticipate and support what comes next in the birthing process.

During birth

What happens if I have to go to the hospital for an emergency evaluation before I am in labor?

Emergencies during pregnancy and before labor begins, while rare, may occur. In this event you will be in touch with your provider by phone. We will counsel you on where and when to seek medical care. If you are seen at Stamford Hospital with a non-labor emergency, the Stamford Hospital triage team and attending OBGYN will be responsible for your medical care. Your care team will follow up with you closely after your medical plan is created to personalize next steps and make sure you have all the resources and support you need.

Can you eat and drink at Stamford Hospital?

Once you're admitted to the hospital, the official policy is that you may have clear fluids only. That includes coconut water, tea, broth (such as bone or miso), juice, ice chips, Jell-o or Popsicles. We will encourage you to eat more substantial food in early labor before arriving at the hospital. It's important to keep in mind that there may be some exceptions to these guidelines, and other times where it is important to follow the policy. We will work with you to ensure you have all the essential nourishment you need for the work of labor, including planning your celebratory postpartum meal!

Will I be able to move around in labor at Stamford Hospital?

Yes. Movement is essential to our model of care for two main reasons. First, movement helps reduce tension in the body, which can lessen the experience of pain. Regardless of the pain management pathway you choose, we will work together to reduce pain in your experience. Second, movement helps to promote normal physiologic labor and birth by encouraging contractions and opening your pelvic passageway. We will suggest different positions for labor, pushing and recovery and we welcome your ideas as well. Check our patient portal for more resources and be sure to take our Birth Preferences Workshop.

What are the pain methods available to me at Stamford Hospital?

We provide non-judgmental care in choosing unmedicated labor, IV medications and epidurals for pain management in labor at Stamford Hospital. Hydrotherapy accessed through our private labor room showers may be available to you as a tool if medically appropriate (low risk, spontaneous labor at full term). Check our patient portal for more resources and be sure to take our Birth Preferences Workshop.

During birth

Does the hospital provide birth balls?

Traditional round birth balls are a welcome labor support tool. Stamford Hospital provides birth balls to all laboring patients as well as peanut balls for restful postures. You may want to consider bringing a small pump along with you in the event you'd like to inflate or deflate the ball to best meet your needs.

Are doulas welcome at Stamford Hospital?

Yes, definitely! We love doulas and are committed to ensuring that all of our patients who would like to work with a doula are able to, regardless of ability to pay. Please find our doula referral resource in the portal or reach out to our care team with questions about doulas at any time in your pregnancy care. Stamford Hospital allows up to two support people plus a doula (three adults total) during labor and birth. Keep this in mind as you start thinking about who you'd like on your care team.

What happens if my labor slows down?

Once a patient is in the active phase of labor, defined by regular strong contractions and a cervical exam of 6 centimeters, we expect the cervix to continue dilating until you are ready to push your baby out. If the cervix stops dilating, we typically recommend augmentation to help your labor progress. This could look like an enema, position changes, nipple stimulation, artificial rupture of membranes, or pitocin, a medication administered through an IV. If your labor needs to be augmented, your provider will review the clinical information with you and walk through all risks, benefits, and alternatives. Together, you'll decide on the best option using a shared decision-making approach.

How long can I push for? Is there pressure to make progress?

In most cases, the pushing phase of labor begins when you are fully dilated, or 10 centimeters, and the head has descended into the pelvis. If you do not have an epidural, you may feel rectal pressure or an urge to push. We will be very present during this phase of labor, checking in with you, collaborating on positions for birth, and monitoring your baby's heart rate closely. We would expect to see progress each hour of pushing. If there is not any change in the position of the fetal head, we would discuss interventions including a possible cesarean section to encourage the baby's safe arrival.

During birth

When is a cesarean birth recommended?

A cesarean birth may be recommended if the risks of continuing labor or vaginal birth begin to outweigh the benefits. Your provider will guide you through this decision with informed consent, answering any questions you or your support team may have. An OBGYN is always on site and, if needed, would perform the surgery. Some examples of situations where our clinical team may recommend a cesarean birth include being dilated for > 6 hours without any change in the active phase of labor, a fetal heart rate that is non-reassuring, meaning the baby is experiencing stress, pushing in the second stage of labor without significant change after 2-3 hours, or any acute signs of maternal or fetal stress regardless of labor phase.

What is the visitor policy at Stamford Hospital?

There are two visitors allowed with you at Stamford Hospital during your triage stay. During labor and birth, you are allowed three support people in your private birthing suite, with one of those visitors being your birth doula (two non-doula adults allowed). When you move to postpartum, you are allowed three support people total and that can include your birth team or new visitors — for example, your birth doula could head to rest and a family member could replace them at that time. Your one primary birth partner will be provided a hospital band and can stay with you 24/7. Children under 16 years old are not allowed on L&D but they are permitted to visit the postpartum unit, The Hackett Family Maternity Unit, with an accompanying adult (other than the patient). Please note that in the event of a surgical birth, your one primary birth partner is allowed in the operating room, but your doula is not. Your doula is welcome to rejoin you on the postpartum unit for support.

After birth

Immediate postpartum at the hospital is a time of recovery, bonding, and learning to care for your newborn. This section outlines standard and optional newborn procedures, explains your hospital stay duration based on delivery type, and details the lactation support available at Stamford Hospital. You'll also find information about the discharge process, visitor policies on the postpartum floor, and ongoing support from your care team during your hospital stay and transition home.

What are the standard newborn procedures at The Hackett Family Maternity Unit at Stamford Hospital that I should anticipate?

Newborn Care standards are set by CT state regulations and include CDC and AAP guidelines in the hospital system's recommendations. The following are the list of recommended preventive screening and treatment protocols that promote health in a newborn baby. If you have any questions or plan to decline any procedure through the process of informed refusal, please speak with your provider at your next clinical visit for more information.

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|-----------------------|---|
| ✓ Vitamin K | ✓ Hearing test |
| ✓ Erythromycin | ✓ PKU test |
| ✓ Weight | ✓ Bilirubin screening |
| ✓ Apgar test | ✓ Congenital heart disease screening |

What are the optional newborn care procedures I should be aware of?

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|--------------------------------|------------------------------|
| ✓ Skin-to-skin | ✓ First bath |
| ✓ Delayed cord clamping | ✓ Circumcision |
| ✓ Cord blood collection | ✓ Hepatitis B vaccine |

Skin-to-skin

This is a standard of care at Stamford Hospital and Oula. Whenever possible, the baby will be placed directly on your chest after the birth to facilitate bonding, regulate newborn heart rate, blood sugar and temperature, and promote first "latch" if breastfeeding. In some rare cases, there is a medical need for the newborn to be evaluated by a pediatrician immediately after birth. In those cases, we will facilitate skin-to-skin bonding as soon as is safe and possible.

Delayed cord clamping

Delayed cord clamping is based on the fact that, at birth, a significant amount of the baby's blood is still in the placenta and umbilical cord. Waiting to clamp allows that blood to flow back to the newborn, supporting healthy blood volume and oxygen levels. This practice is recommended by ACOG (American College of OBGYN) in a policy that recommends a minimum of 30-60 seconds of delayed cord clamping. **60 seconds of delayed cord clamping is the standard of care at Stamford Hospital.** We will then clamp the cord and offer your birth partner the option to cut the cord.

After birth

Cord blood collection

Cord blood collection is not currently recommended to the general population by the American Academy of Pediatrics (AAP). Unless a medical provider or genetics counselor has recommended cord blood banking, this is entirely optional and is run by private companies with banking and storage fees. There is no cord blood donation program at Stamford Health. If you opt in for cord blood banking, you will need to arrange the collection kit privately and present that to your care team when you are admitted to the hospital — we're happy to collect the blood for you after your birth.

Baby's first bath

This can be **done when you move to postpartum** (about two hours after the birth) or you can ask to delay until the next day or decline altogether. Ask the nurse to teach you about how to give the baby a bath before you leave the hospital so you feel comfortable. There is emerging data around the concept of the microbiome — that there may be good bacteria on the newborn at the time of birth that will help to build the foundational immune system support. That data is still emerging and there is no clinical recommendation from the American Academy of Pediatrics at this time regarding best practice, so the decision can be based on personal preference.

Circumcision

Circumcision is available for all newborns born with a penis and requires parental written consent. When you are admitted to the hospital system to give birth, your nurse will ask you about your preference and plan for circumcision. If you opt in for care, the clinical team will provide informed consent on the risks, benefits and alternatives of the procedure as well as post-circumcision wound care for your newborn. The procedure is typically done on day one of life (the day after giving birth) and before you are discharged home.

Hepatitis B Vaccine

Hepatitis B is a virus that's passed through blood and bodily fluids. There is a three shot vaccination series over several months that can protect your newborn from this virus. You can opt in and have your newborn receive the first shot in the series at the hospital, or you can decline and follow up with your own pediatrician outpatient. Some patients prefer to wait and zoom out on the year-long vaccination schedule before beginning shots. Others prefer to get started since the full immunity will take several months. Whatever your preference, just let your nurse know your decision and feel free to include it on your birth plan.

After birth

Postpartum stay at Stamford Hospital

Insurance covers a 48-hour stay (two nights) after a vaginal delivery or 3-4 nights after a cesarean birth. Many patients prefer early discharge, 30 hours after a vaginal birth, and this will be coordinated with pediatrician approval. If you have any medical complications after your birth, your insurance will cover an extended stay, but this is extremely rare and unlikely. Stamford Health is committed to providing all patients large private rooms in the maternity unit that are comfortable for you and your care partners.

Postpartum visitor policy

Read all about [Stamford Hospital's visitor policy](#).

What kind of lactation support is available at Stamford Hospital?

After your birth, your clinical team will support your first latch and help facilitate the initiation of your feeding plan. While on postpartum, you are eligible for a visit with the Stamford Health IBCLC, an advanced lactation consultant, who will round on you daily and offer practical and educational support. If you need additional support while you're in the hospital, please just ask. And don't forget to join an upcoming virtual session of our Newborn Feeding Group, hosted by a CLC and postpartum doula. This is a welcoming drop-in space for parents regardless of feeding method.

What time of day does discharge from the hospital happen?

When your provider rounds on you in the morning, you will finalize your discharge plan. The hospital will discharge patients before noon each day. We typically do not discharge patients at night but exceptions can be made. We will be available to talk through all the education you'll need for the transition to home and provide you with a comprehensive postpartum booklet to take home with you.

What interaction/support can I expect from my provider postpartum?

Your providers will be present during the first few hours after your birth. Once you move to postpartum, you will be assigned a postpartum nurse from Stamford Hospital to provide round-the-clock direct care, support and education. Your provider will round on you every day during your hospital stay as will a Stamford Health pediatrician to discuss your newborn's adjustment and discharge plan. Your care team will help coordinate any aspects of your care that involve medical decision-making or concerns, regarding you and/or your baby.

After birth

What happens if my baby is admitted to the NICU (Neonatal Intensive Care Unit)?

Stamford Hospital has a Level 3 NICU staffed 24/7 by expert neonatologists and critical care nurses. In the event that your newborn needs additional medical care after birth, your care team will facilitate the care coordination within this team on the postpartum unit. On-site resources and physical comfort rooms will be available. We will make sure you and your family have all the best medical services, comprehensive health resources, and social and emotional support necessary to navigate this challenging time.

Discover more helpful resources to guide and empower your labor and delivery journey.

- Watch [this video](#) overview of maternity care services at Stamford Health
- Explore Stamford Health's birth prep and postpartum [classes](#)
- [Learn more](#) about Labor & Delivery at Stamford Hospital

A look at Stamford Hospital

The Hackett Family Maternity Unit



Front Desk



The Hackett Family Maternity Unit Nursery



The Hollander Family Birthing Center Waiting Room

