Oula

Your guide to birth at Novant Health Presbyterian Medical Center

Welcome

Welcome to Oula's comprehensive hospital guide for expectant parents giving birth at Novant Health Presbyterian Medical Center. This resource addresses everything you need to know before, during, and after your birth experience. From essential paperwork and hospital logistics, to Oula's collaborative care model integrating 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.

Before birth

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

Can I tour the hospital in advance?

Yes! Novant Health Presbyterian Medical Center offers in-person tours every few days that can accommodate up to 20 people. You can find the tour schedule here.

How can I reach Oula in case of something urgent?

For anything urgent related to your pregnancy or labor, please call your home clinic, our team is available 24/7:

- **Oula Cotswold:** (704) 266-6454

If you call when the clinic is open, follow the prompts to indicate you're a current Oula patient with an urgent clinical concern. You'll be connected directly to a team member who can either address your concern or connect you with our on-call provider.

If you call after business hours, follow the prompts to indicate you need to speak to a clinician. Your message will be taken by our answering service and sent immediately to our on-call provider.

In either case, our on-call provider will call you back promptly to discuss your questions.

What to Bring to the Hospital

When you arrive at the hospital to give birth, have these items ready:

- **Photo ID** (required for check-in)
- **Insurance card**
- **Birth preferences priority card**, if you have one (Oula provides this at your 28-week visit)

Not sure what to pack in your hospital bag? Review our hospital bag checklist blog, created by one of our incredible midwives.

Before birth

Choosing Your Pediatrician

Before you come in for labor, we recommend selecting your newborn's pediatrician. This gives you time to:

- Research providers and practices that align with your values and approach to newborn care
- Confirm they're in your insurance network
- Ensure they have availability to see your baby shortly after discharge

When you're admitted to the hospital, let your care team know who your pediatrician is so we can coordinate your discharge plan and ensure smooth care handoff.

If you are still exploring your options, Novant Health offers a **network of pediatricians** who provide comprehensive care for infants, children, and adolescents.

When you arrive at the hospital

Your outpatient and hospital teams communicate regularly, so your care doesn't start over when you arrive at Labor & Delivery. Our Oula midwives and Novant Health OBGYNs meet routinely to review upcoming births, share relevant clinical information, and align on your plan of care.

This means the OBGYNs on the Labor & Delivery floor will be familiar with the Oula care model, aware of your clinical history, and prepared to receive you and collaborate with you and your Oula midwife.

During labor, you will be cared for 24/7 by an Oula midwife and a Novant Health OBGYN working collaboratively with you, your birth partner or support people, and the hospital nursing team. Your midwife will remain closely involved in your labor and birth, while the hospital-based OBGYN is immediately available if additional medical or surgical care is needed.

What is the role of my Oula OB team during outpatient care and my hospital stay?

At Oula, we build your care team around you — making sure you have the right support, from the right provider, at every stage of your pregnancy.

Your prenatal visits are led by our midwifery team, in close partnership with your Oula OBGYN. Your Oula OB monitors all pregnancies behind the scenes, works hand-in-hand with your midwife, and steps in directly if a medical condition arises or if you're planning a TOLAC or cesarean birth. If you'd like additional OB check-ins beyond that, you can always speak to your care team about what makes sense for you.

When it's time to deliver, you'll be cared for around the clock by an Oula midwife alongside one of the OBGYN physician partners at Novant Health Presbyterian Medical Center — an experienced team who work closely with Oula and are a seamless extension of your OBGYN care in the hospital setting.

Before birth

When is a Cesarean Birth Recommended?

Cesarean birth is recommended when the benefits of labor or vaginal birth are no longer outweighed by the risks. We will center informed consent throughout this process and will make this decision with you. Your Oula OBGYN will be available to answer all of your questions. Some examples of situations where our clinical team may recommend a cesarean birth include being dilated for >4 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 the phase of labor.

If you need a cesarean birth during labor

In the event of a cesarean birth, your Novant Health OBGYN will provide expert surgical care and round on you daily throughout your hospital stay. Your Oula provider will be by your side throughout as well, supporting your recovery and coordinating a smooth discharge — including postpartum education and resources before you head home.

Once you leave the hospital, your postpartum care continues at the Oula clinic and virtual. This includes a wound check visit at 2 weeks, weekly virtual access to our Newborn Feeding Support group, and your routine 6-week postpartum visit.

If you have a planned cesarean birth

If your Oula OBGYN isn't available for your scheduled cesarean birth, a Novant Health OBGYN will support your care. Our midwifery team will be present when available. You'll meet with your Oula OB before surgery to go over any questions.

After you leave the hospital

After discharge, Oula will continue to provide your postpartum care and support. This includes a two-week postpartum visit or incision check, weekly virtual access to our Newborn Feeding Support group, and your routine six-week postpartum visit.

Whether you are receiving care in an Oula clinic or at Novant Health Presbyterian Medical Center, your midwives and OBGYNs function as one connected team — communicating with one another, planning together, and ensuring that you receive coordinated, personalized care throughout your pregnancy, birth, and postpartum recovery.

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 Novant Health Presbyterian Medical Center such as parking options, hospital entry procedures, and what happens during triage. You'll also find important details about Oula's role during different birth scenarios, including emergencies and cesarean deliveries, plus information about hospital policies regarding movement during labor, pain management options, and visitor guidelines.

UNDERSTANDING CONTRACTIONS

Why am I experiencing contractions before labor starts?

The uterus is the largest muscle in the body at full term pregnancy and can become irritable with all the changes happening. You may experience Braxton Hicks contractions (practice contractions) during your third trimester. An increase in these contractions at full term is common and doesn't necessarily mean labor is starting.

How can I tell if my contractions are real labor or just practice?

If you’re more than 37 weeks, try the "labor test":

- If you've been active: Get home, rest, and drink about a liter of water
- If you're in bed: Get up, walk around, and hydrate

If the contractions quiet down and go away, your body is likely just practicing and labor isn't imminent. If contractions continue after resting and hydrating, labor may be starting.

What if I'm experiencing contractions before 37 weeks?

Please call our care team right away if you experience these symptoms before 37 weeks.

CARE CONTINUITY

It’s important that we stay connected in your final weeks, days, and hours of pregnancy and as early labor begins so we can understand your preferences, personalized needs, and offer support and guidance. Of course, reach out anytime you have questions or concerns but here are some guidelines for when you should proactively reach out and call your care provider:

During birth

EARLY LABOR AT HOME (THE LATENT PHASE)

Early labor (the latent phase) is characterized by irregular contractions that may stop and start and is typically the longest phase of labor, especially for first-time parents.

The Oula Philosophy: In the absence of medical risk factors, **the best place to be during this phase of labor is at home**. Home allows for freedom of movement, your own food, and a familiar environment that keeps stress hormones low and helps natural oxytocin, the labor hormone, flow. *If you don't feel your home environment is conducive to feeling safe or comfortable in early labor, please let your care provider know.*

What to Do: The "Labor Test"

If you're 37 weeks, in the absence of any warning signs and you start to feel some uterine contraction activity but you aren't sure if you're in "real" labor, try this:

- **If you've been active (at work, running errands, etc.):** Go home, rest, and drink a liter of water.
- **If you've been resting (asleep, watching TV):** Get up, use the restroom and walk around your home or apartment.
- Wait an hour and see how your sensations evolve.
- **The Result:** If contractions quiet down or stop, your body is just practicing! If it's nighttime, go back to sleep and check in with your body (and your care team, if needed) in the morning. True labor could return anytime. If things continue, this is a good time to utilize your comfort tool kit and reach out to your doula or labor support partner.

Comfort & Distraction

- **Distraction is Key:** Watch a movie, take a walk around the block, rest or do a puzzle. Ignore labor until it demands more attention. Save your energy and focus on rest, hydration, and distraction.
- **Your Toolkit:** Use your tools — before you're full term, come up with a list of passive and active activities that your birth partner can help guide you through to pass the time and keep you comfortable and focused on other things until labor progresses. Warm baths, massages, or a living room dance party.

Educational Preparation and Support:

If you plan to labor without medication, want to avoid medical interventions for labor augmentation, or just want to learn more about your options – we strongly recommend a **Childbirth Education class** and working with a **doula**. Learning the underlying physiology of early labor helps you build a personalized toolkit for movement and comfort tools which help you allow labor to evolve on its own before admission to the hospital. While your care provider will be available by phone, doulas are invaluable in helping you navigate the early labor phase in the comfort of your own home and understanding how to ease the transition to the hospital.

During birth

Educational Preparation and Support, Continued:

While you explore those options, check out our Workshops for some free educational content from trusted partners and community resources!

Physical Preparation: In the weeks leading up to your labor, check out Oula's Guide to Labor Preparation and Hormonal Stimulation and Phase Two of the Oula's At Home Guide for Optimizing Fetal Positioning. Speak with your care provider about what methods might be the best fit for you and your preferences.

WHEN TO CALL US

When should I call about contractions if this is my first baby?

- **The 5-1-1 Rule:** For first-time parents, give us a call when contractions are 5 minutes apart, 1 minute long, for 1 hour, and feel moderate to strong. (If this isn't your first baby, call after 3 strong, regular contractions or if you think your labor has begun)
- **Water Breaking (SROM):** Give a call if you think this happens. Note the time, color (clear is ideal), and amount. We'll talk about your GBS (group beta strep test results) if we know them.

This indicates you're moving toward active labor. We'll talk with you over the phone to make a plan about labor support, transportation, and when to head to the hospital.

When should I call if this isn't my first baby?

Subsequent pregnancies often progress more quickly, so we recommend calling us as soon as you notice signs of labor or after you've had three strong, regular contractions. This gives you time to arrange childcare for your other children and finalize any last-minute details before heading to the hospital.

What if I think my water broke?

Call us right away. We want to know:

- **What time** it happened
- **Color** of the fluid (should be clear; let us know if it's brown, green, or blood-tinged)
- **Amount** of fluid (put on a pad to monitor)

We'll also review your GBS (Group B Strep) status from your 36-week test and discuss safety concerns. If you're unsure whether it's your water breaking or something else, just call us to check in.

During birth

WARNING SIGNS

When is vaginal bleeding normal, and when should I be concerned?

Normal bleeding ("bloody show"): Mucousy, blood-tinged secretions when you wipe. This happens as small blood vessels in your cervix break down during cervical effacement and early dilation.

Call us immediately if you have:

- Heavy bleeding like a period flow
- Bright red bleeding that soaks into a pad

This could indicate a placenta issue and needs immediate evaluation. When in doubt, always call us.

How do I know if my baby is moving enough?

You are the expert in your baby's movements at this stage. Most babies have about 3 active periods per day, usually after you eat or when you lie down at night. While there's less room to move as they grow, you should still feel the same overall number of movements.

What should I do if I think my baby isn't moving as much as usual?

Try fetal kick counting:

A terrific resource for this can be found here: https://countthekicks.org/

1. Drink something cold or eat something sweet
2. Wiggle your belly
3. Lie on your left side with your hands on your belly in a quiet space
4. Count movements: You should feel **5 movements in 1 hour** OR **10 movements in 2 hours**

If your baby isn't moving as expected or you're unsure, **call us right away** so we can check in with you in person.

When should I call about headaches or vision changes?

Call us if you have:

- A headache that won't go away with usual remedies (Tylenol, hydration, changing activity or lighting)
- Visual changes like flashing lights or spotting in your vision

These could indicate high blood pressure. **Call immediately** if these symptoms come with heartburn or chest pain.

During birth

How should I get to the hospital?

It’s a good idea to call ahead so we can help you plan when to head to the hospital. 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 Novant Health Presbyterian Medical Center.

Where can we park near the hospital?

All patients should park in the main hospital parking deck. For expecting parents arriving for labor and delivery, there are six designated parking spaces on the first floor marked "Reserved Parking for Mothers in Labor."

These spaces are intended as a convenient drop-off area for patients who are in labor. Once the patient and family are settled into their room, we ask that the driver move the vehicle to a regular parking space in the parking deck so these reserved spaces remain available for other families arriving for care.

Where do I go once I’m at the hospital?

Take the elevators to the 8th floor and follow signs to Labor & Delivery.

Entering the building:

- **Daytime (5:30 AM – 10 PM):** Enter through the side door by walking up the ramp next to the steps.
- **Nighttime (10 PM – 5:30 AM):** Enter through the sliding doors in the parking deck's North Wing Lobby.

Once inside, check in at the **Women's Center Information Desk**, staffed 24/7. All visitors must show a valid ID and will receive a photo badge to wear during their visit.

Important:

- **Under 20 weeks pregnant:** Use the Emergency Room entrance — follow the red signs inside or outside the building.
- **20 weeks or more**: Use the North Wing Lobby entrance.
- **Non-pregnancy emergencies:** Go to the Emergency Department.

During birth

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

Let your nurse and Oula provider know when you're admitted, and you'll be asked to sign a consent form.

What to bring: A small ice cooler — the hospital will provide ice.

Important guidelines:

- In some cases, your placenta may need to be sent for pathology analysis for medical reasons. If this happens, you'll be able to pick it up after the analysis is complete. Your provider will discuss this with you if it becomes necessary.
- The placenta must leave the Labor & Delivery room before you move to postpartum care. It cannot be stored in a hospital refrigerator or brought to your postpartum room.
- The hospital will provide a plastic container, or biohazard bag, for transport. Once ready, it should go directly out of the facility.
- If you're considering consuming the placenta (e.g., encapsulation), please discuss this with your OB provider, pediatrician, and lactation consultant before making a decision.
- Lotus births are not permitted per our neonatology team.

If you choose not to keep your placenta, the hospital will handle safe disposal.

What happens/what is Oula's role in triage?

Triage is where we assess three crucial components of safe labor: your wellbeing (vital signs, pain management, emotional state), your baby's health (through ultrasound and heart monitoring), and your labor progress (contraction patterns and cervical exam). This information helps your medical team understand which phase of labor you're in and how to best support what comes next.

At Novant Health Presbyterian Medical Center, triage is located on the 8th Floor, to the right of the L&D Unit. Upon arrival, you'll be greeted by the Novant Health triage team, including an Attending OBGYN, L&D Nurse, and your Oula Midwife.

Once your assessment is complete, your Oula Midwife will discuss next steps — typically admission to the hospital, an observation period of 1–2 hours before reassessment, or discharge home. If admitted, you and your birth partner(s) will move to your private L&D room with your Oula Midwife.

Before arriving at triage, you'll speak with your Oula care team by phone to create an arrival plan. We know this transition can feel overwhelming. The good news: Novant Health's triage unit is staffed 24/7 by supportive clinicians who communicate directly with your Oula team. If you have questions or concerns at any point, your Oula Midwife is available by phone.

During birth

What happens/what is Oula's role 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 Oula provider by phone. We will counsel you on where and when to seek medical care. If you are seen at Novant Health Presbyterian Medical Center with a non-labor emergency, the Novant Health triage team and attending OBGYN will be responsible for your medical care. Oula 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 Novant Health Presbyterian Medical Center?

We want to help you stay comfortable, hydrated, and energized throughout your labor experience.

Most laboring patients may have liquids during labor, including water, apple juice, soda, coffee, broth (chicken, beef, or vegetable), popsicles, and Jell-O. Your care team will discuss what is safest and most appropriate for you based on your individual needs.

Some patients may also qualify for a labor diet, which includes a selection of approved snacks. If you qualify, you will receive a menu of available options. For your safety, only snacks included on the approved labor diet menu should be consumed during labor.

If you receive an epidural or reach a certain stage of labor, your care team may recommend limiting intake to clear liquids only. Your provider will guide you based on your specific situation and any medical considerations.

Will I be able to move around in labor at Novant Health Presbyterian Medical Center?

Yes. Movement is an essential part of our care model for a few reasons. It helps release tension in your body, which can lessen the sensation of pain — no matter what pain-management approach you choose. Movement also supports normal physiologic labor by encouraging effective contractions and helping your pelvis open for birth.

As part of our Optimizing Fetal Positioning Program, Oula providers are trained to suggest different movements and positions for both labor and pushing, and we welcome any positions you'd like to try as well.

What tools are available for movement during labor?

All Novant Health hospitals provide birthing balls and peanut balls for patients to use in labor. You're also welcome to bring your own birth ball if you have a preference.

During birth

What are the pain methods available to me at Novant Health Presbyterian Medical Center?

We provide non-judgmental care and support whether you choose an unmedicated labor experience or pain management options such as nitrous oxide, IV pain medication, or epidural anesthesia.

Hydrotherapy may also be available if medically appropriate. Most patient rooms include a bathtub for comfort during labor, while some rooms are equipped with a shower only. Please note that Novant Health Presbyterian Medical Center does not offer birthing tubs, and water birth is not available.

Are doulas welcome at Novant Health Presbyterian Medical Center?

Absolutely — doulas are welcome as part of your labor support team!

At Presbyterian Medical Center, unit doulas are available on every shift and can provide free doula support to any interested patient.

If you have your own doula, please note that Novant Health–verified doulas may accompany you in labor and delivery, triage, and, if needed, the operating room. Doulas who are not Novant Health verified are welcome in labor and delivery as a support person but are not permitted in triage or the operating room and would count toward your visitor/support person allowance.

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 labor continue to move forward as we promote physiologic labor. This could look like a cervical ripening agent, position changes, nipple stimulation, artificial rupture of membranes, or Pitocin, a medication administered through an IV. Your provider will share the options with you and you will make a decision together based on your personal preferences and what is medically necessary at that time.

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

The pushing phase typically begins when you're fully dilated (10 centimeters) and your baby's head has descended into the pelvis. If you don't have an epidural, you'll likely feel pressure or a natural urge to push.

We'll be right there with you during this phase — checking in, helping you find positions that work, and closely monitoring your baby's heart rate. We typically expect to see progress with each hour of pushing. If after 2–3 hours there hasn't been a change in your baby's position, we'll talk through next steps, which may include interventions like a cesarean birth to help bring your baby safely into the world.

During birth

What is the visitor policy at Novant Health Presbyterian Medical Center?

You may have up to three visitors with you during labor and birth in your private birthing suite. Please note that a Novant Health–verified doula is considered part of your care team and does not count toward your visitor limit.

After delivery, visitors are welcome 24 hours a day, 7 days a week, and there is no limit on the number of visitors. Visitors of all ages are welcome, although seasonal health precautions during flu season may result in temporary visitor restrictions.

To support rest and recovery, quiet hours are observed daily from 2:00–4:00 p.m. on the postpartum unit. During this time, we encourage patients not to receive new visitors and ask everyone to help maintain a calm, quiet environment.

After birth

The postpartum period 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 Novant Health Presbyterian Medical Center. You'll also find information about the discharge process, visitor policies on the postpartum floor, and ongoing support from your Oula care team during your hospital stay and transition home.

What are the standard Newborn Procedures at Novant Health Presbyterian Medical Center that I should anticipate?

Newborn Care standards are set by North Carolina state regulations and follow American Academy of Pediatrics (AAP) guidelines. Below is a list of recommended preventative screening and treatment protocols that support your newborn's health. If you have questions about any procedure or would like to discuss declining one, please speak with your Oula provider — you can do this at any clinical visit or call anytime.

- ☑ **Vitamin K**
- ☑ **Erythromycin**
- ☑ **Weight Measurement**
- ☑ **Apgar Test**
- ☑ **Hearing Test**
- ☑ **PKU Test**
- ☑ **Bilirubin Screening**
- ☑ **Congenital Heart Disease Screening**

What are the optional Newborn Care procedures I should be aware of?

- ☑ **Skin to Skin**
- ☑ **Delayed Cord Clamping**
- ☑ **Cord Blood Collection**
- ☑ **First Bath**
- ☑ **Circumcision**
- ☑ **Hepatitis B Vaccine**

Skin to Skin

This is a standard of care at Oula and Novant Health. 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 the first “latch” if breastfeeding. In rare cases, your baby may need immediate evaluation by a pediatrician after birth. We'll still prioritize skin-to-skin bonding as soon as it's medically safe to do so.

Delayed cord clamping

At birth, a significant portion of the baby's blood volume remains in the placenta and umbilical cord. Delayed cord clamping allows this blood to return to the newborn. At Novant Health Presbyterian Medical Center, we follow the American Academy of Pediatrics (AAP) recommendation to support delayed cord clamping up to one minute. Only then do we clamp the cord and offer your birth partner the opportunity to cut it. Ask your provider if you have other preferences around cord clamping.

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 Novant Health Presbyterian Medical Center. If you opt in for cord blood banking, you will need to arrange the collection kit privately and present that to our Care Team when you are admitted to the hospital - we’re happy to collect the blood for you after the birth.

Baby’s First Bath

At Novant Health Presbyterian Medical Center, we delay your baby's first bath by several hours after birth (rather than immediately). Here's why: emerging research on the newborn microbiome suggests that beneficial bacteria naturally present on your baby's skin at birth may help establish foundational immune system support. While this data is still new and the American Academy of Pediatrics hasn't issued a clinical recommendation yet, the evidence is promising enough that we think it's worth considering.

The choice is yours. If you'd prefer to bathe your baby sooner, you can. Before you leave the hospital, ask your nurse to walk you through how to give your baby a bath so you feel confident doing it at home.

Circumcision

Circumcision is available for all newborns with a penis and requires parental written consent. When you are admitted to the hospital to give birth, your nurse will ask about your preference regarding circumcision.

If you choose to proceed, the clinical team will discuss the risks, benefits, and alternatives with you and provide instructions on post-circumcision wound care. The procedure is typically performed the day after birth by a pediatric urologist and before you're discharged home.

Hepatitis B Vaccine

Hepatitis B is a virus passed through blood and body fluids. The vaccine is a 3-shot series over several months that protects your newborn from infection. You can receive the first shot before you leave the hospital, or wait and follow up with your pediatrician. Some parents prefer to start right away since full immunity takes several months; others prefer to review the full vaccination schedule before deciding. Whatever works best for your family, just let your nurse know—you can also include your preference on your birth plan.

After birth

Postpartum Stay at Novant Health Presbyterian Medical Center

The average length of stay after an uncomplicated vaginal delivery is 24–36 hours, and after an uncomplicated Cesarean birth is 36–48 hours. Some patients prefer to go home earlier, and this can be coordinated with your pediatrician's approval.

If you experience any medical complications after birth, your care team will keep you as long as you need. This is rare, but your health and your baby's wellbeing come first.

Have questions about your postpartum stay? Ask your Novant Health nurse or Oula provider after you give birth — they can walk you through what to expect and answer any concerns.

What kind of Lactation Support is available at Novant Health Presbyterian Medical Center?

During L&D & Hospital Stay

Your clinical team supports your first latch and feeding initiation from the moment of birth. Baby Nurses and Unit Doulas in Birthing Care will assist with skin-to-skin contact, your first latch, and hand expression if needed. Once you're in the Family Care Unit, you have access to Novant Health's IBCLC (International Board Certified Lactation Consultant) for support and guidance throughout your stay. The number of lactation visits varies depending on unit census and workflow, but don't hesitate to ask if you need additional support — our team is here to help.

Beyond the Hospital

Oula offers a virtual Newborn Feeding Group, hosted by a CLC and postpartum doula. It's a welcoming drop-in space for parents regardless of your chosen feeding method. Sign up for the next session in your patient portal.

Novant Health also offers Baby Cafes — in-person and online breastmilk feeding groups where you can connect with other nursing parents and get peer support.

If you're interested, donor milk is available for patients who want it.

What time of day does Discharge from the hospital happen?

When your Oula provider visits you in the morning, you'll finalize your discharge plan together. Discharge typically takes place between 10 AM – 12 PM, though evening discharge may also be available depending on your situation.

Before you leave, we'll walk you through everything you need to know for the transition home and send you off with a comprehensive postpartum booklet.

After birth

What interaction and support can I expect from the Oula provider postpartum (vs. Novant Health staff)?

Oula providers will be present during the first few hours after your birth. Once you move to the Family Care Unit, you will be assigned a Novant Health postpartum nurse to provide round-the-clock direct care, support, and education. Your Oula provider will round on you daily during your hospital stay, as will a Novant Health pediatric provider. Together, you'll discuss your newborn's adjustment and discharge plan. Oula will help coordinate any medical decisions or concerns related to your care and your baby's care.

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

Novant Health Presbyterian Medical Center has a Level 4 NICU staffed 24/7 by expert Neonatologists and critical care nurses. In the event that your newborn needs additional medical care after birth, Oula will facilitate the care coordination within this team. 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.

A look at Novant Health Presbyterian Medical Center

Features:

Your Private Birthing Space

Every L&D room is private with a window, en-suite bathroom with shower, adjustable temperature control, privacy door, and customizable lighting. You can use LED battery-operated candles and twinkle lights to create the ambiance you want (no open flames). During birth, our clinical team uses focused lighting as needed, but you're in control of the overall environment.

Support for Movement & Positioning

Our rooms are equipped to support labor in any position you choose:

- Birthing balls and peanut balls in various sizes
- Squatting bars, body wedges, and foot stools
- Mirrors to support visualization during pushing

Comfort & Connectivity

- Two cushioned seats for your support team (one upright, one that extends into a bed for resting)
- Free WiFi throughout
- Multiple outlets for charging devices
- Table and ceiling fans
- TVs with device connectivity
- Pediatric warmer for newborn transition support

Care & Services Available

- Lactation support during your stay and after discharge
- Pet therapy and chaplain services (upon request)
- Virtual, telephonic, or in-person interpreter services
- MyChart Real Time access for you and your support team
- Level 4 NICU and 24/7 critical care support on site