The MedStar St. Mary’s Hospital birth experience.

A guide for expecting parents.
Welcome!

The birth of your baby will be one of the most memorable experiences of your life, and one we hope you will treasure always. During your stay at MedStar St. Mary’s, we’d like you to think of this as your home away from home. Your health, safety, and comfort—and those of your new child—are our top priorities. Please don’t hesitate to reach us at the numbers below for assistance.

Please note: Information in this booklet is subject to change during the COVID-19 pandemic. We will work to share important updates before your arrival, but please do not hesitate to contact us with questions. We appreciate your understanding as we work to keep you, your family, and our community safe.

Breastfeeding Resource Center  
P 301-997-6505

Childbirth & parenting classes  
P 301-475-6019

Women’s Health & Family Birthing Center  
P 301-475-6240

Payment assistance counselor  
P 301-475-6039

Patient Registration  
P 301-475-6024

Birth certificate registration/information  
P 240-434-7658

Keep this book as a reference during your pregnancy. Bring it to the hospital when you go into labor.
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Pre-admission registration

In the back of this booklet is the pre-admission registration form. Please complete both sides, tear out, and drop the pages off at the Patient Registration desk, or mail it to MedStar St. Mary’s Hospital, Patient Registration, P.O. Box 527, Leonardtown, MD 20650. Please include a copy of the front and back of your insurance card(s) and photo ID. If you are unable to provide all of the requested information, please complete as much as possible. We need this data within eight weeks of your expected due date. All information will remain confidential.

Health insurance

Many insurance companies require pre-admission certification approval. This kind of policy requires that the insured person notify his/her insurance company of any upcoming hospital admission. It is very important to contact your insurance carrier to inform them of your upcoming admission for maternity care.

If you are unsure whether or not your insurance company requires this, carefully read the back of your insurance card. This is where you will usually find a toll-free number to call for pre-certification or to obtain any other information regarding your coverage. If a different insurance is used to cover the baby once he/she is born, please contact that
insurance company to let them know of the upcoming birth. Also indicate this information on the bottom of the MedStar St. Mary’s Hospital Pre-Admission Registration form. If you have any questions regarding your admission, please call 301-475-6024.

In 1996, a Maryland law took effect setting guidelines for insurance coverage for maternity patients. Following are some provisions of the law:

**Length of stay** - Insurers are required to pay for mothers and newborns to stay in the hospital for at least 48 hours following an uncomplicated vaginal delivery, and 96 hours following an uncomplicated birth by cesarean section. You may be discharged prior to 48 hours, but only after consultation with your physician.

**Coverage for home visits** - If the mother, in consultation with her physician, opts for a shorter length of stay, insurers and Health Maintenance Organizations (HMOs) are required to provide coverage for a home visit that occurs within 24 hours after discharge, and an additional home visit if prescribed by the attending physician. Even if the mother remains in the hospital for the full 48 or 96 hours, insurers and HMOs are required to provide coverage for a home visit if prescribed by the attending physician.

**Extended hospital stays for mother and infant** - If a mother is required to remain in the hospital after childbirth for medical reasons beyond the 48 or 96 hours, she may request that her newborn remain in the hospital with her. Insurers and HMOs are required to cover up to four additional days for the hospitalization of the newborn.

**Copays and deductibles for home visits** - Insurers and HMOs may not impose copays or deductibles for a home visit or refuse to pay if the home visit does not occur within the first 24 hours of discharge.

The bill’s provisions are limited to insurance contracts issued within the State of Maryland. The above guidelines do not necessarily apply to individuals who are covered by insurance policies which are written outside of Maryland, or to persons covered by self-insured plans.

We recommend a careful review of your own insurance coverage prior to your due date. Your insurance provider will be able to clarify the terms of your coverage.

If your insurance will not cover your full bill, or if you have no insurance or other payer, or have a balance from previous hospital services, please contact our Financial Assistance Counselor at 301-475-6039 to discuss your account.
Your birthing environment

When it’s time to deliver your baby, wouldn’t it be nice to feel the comforts of home around you? That’s exactly what expectant parents experience at MedStar St. Mary’s. Five birthing suites offer everything you and your newborn will need during delivery, but you are also welcome to bring special pillows, music, or lotions with you to make you more comfortable.

Expecting parents may take a tour of the Women’s Health & Family Birthing Center and the birthing suites during childbirth classes offered through our Health Connections department.

For the security of our patient families, the center is securely locked 24 hours a day; authorized patients and visitors may gain admittance to the unit by calling at the entrance. All patients and visitors are required to sign in and show a picture identification. Additional safety is provided by our Safe Place infant security system, which monitors the newborn’s location 24/7.
**Arriving at the hospital**

When you arrive at the hospital to have your baby, go directly to the Women’s Health & Family Birthing Center on the second floor. A nurse will assess your needs and inform your provider. If you arrive between 8 p.m. and 7 a.m., please enter the hospital through the Emergency Department lobby.

**While you’re in labor**

Your partner is encouraged to stay with you while you are in Labor and Delivery. Upon admission, you will be asked to designate your support person(s). Others will be permitted into the Labor and Delivery room as your situation allows.

While in the hospital, please do not give out the phone number of the birthing suite, as you may be sleeping, in the shower, concentrating on your birth experience, or otherwise unable to take calls.

You may have ice chips, popsicles or clear liquids, and in some cases solid food, if your provider permits.

*Each woman’s labor is unique.* The amount of labor discomfort you feel will differ from that felt by others in labor. It depends on factors such as your level of pain tolerance, the size and position of the baby, strength of uterine contractions, and prior birth experiences. You will find a detailed section on pain management in the next section of this booklet.

Visitors other than the mother’s designated support person(s) may wait in the Visitors’ Lounge. They may help themselves to coffee, juice, or tea in the pantry next to the nurses’ station in the Women’s Health & Family Birthing Center. Restrooms are located in the Visitors’ Lounge and also on the Medical/Surgical/Pediatrics Unit (through the double doors of the Birthing Center, turn left and follow the sign).

The Blue Heron Café, the hospital’s cafeteria, is open from 6:30 a.m. to 6:30 p.m., with drink and snack vending machines available 24/7 in the room adjacent to the cafeteria on the first floor. Beverage and snack machines are located in the Visitors’ Lounge as well.
Pain management

Your obstetrician, midwife, anesthesiologist, and nurses will work together with you and your partner to develop a pain management plan for your unique birth experience. Some women achieve adequate pain control with breathing and relaxation techniques. Some relaxation techniques include the use of birthing balls, positioning, and walking. These are all available at MedStar St. Mary’s. Others may choose to have pain medication during labor and delivery.

Terminology to remember

Analgesia is the full or partial relief of painful sensations. Anesthesia is usually considered to be a more intense blockage of all sensations, including muscle movement. Your wishes and your medical condition are important in selecting the type of pain relief administered to you. Be assured that your providers will prescribe or administer medications only in the amounts and during those stages of labor that are best for the safety and well-being of you and your baby. There are several choices for pain relief.

Intravenous “IV” medication: Pain relieving medications that are injected into a vein or muscle will help dull your pain but may not eliminate it completely. These IV medications may be prescribed by your provider. Because they sometimes make both you and your baby sleepy, they are used mainly during early labor.

Local anesthesia: Other pain-relieving medications may be injected in the vaginal and rectal areas by your provider at the time of delivery. These medications are local anesthetics, which provide numbness or loss of sensation in a small area. Local anesthesia is often used to ease the pain of delivery or when an episiotomy incision is done to assist the delivery. Local anesthesia is also used to repair the perineum after delivery. It does not, however, lessen the pain of contractions.

Regional blocks: Regional blocks can reduce the discomfort of labor and provide either analgesia or anesthesia. Regional blocks refer to epidural and spinal blocks. They are administered in the lower back by a specialist physician called an anesthesiologist. Local anesthetics and other drugs are used for these procedures to reduce or “block” pain and other sensations over a wider region of the body. Epidural anesthesia may be used for labor and vaginal delivery. An epidural block may be used to provide anesthesia for a cesarean section. A spinal block may be used to provide anesthesia for a cesarean delivery. A combined spinal/epidural block also may be used for labor analgesia and/or anesthesia in certain cases.
Regional blocks for labor and delivery have become very popular because of the comfort they provide. The epidural block decreases sensation in the lower areas of your body, yet you remain conscious. The right time to administer the epidural block will vary from patient to patient. If you request an epidural block, your provider and anesthesiologist will evaluate you and your baby, taking into account your state of health and past anesthetic experiences, the progress of labor, and your baby’s response.

How is the epidural block performed?
An epidural block is given in the lower back. You will either be sitting up or lying on your side. The block is administered below the level of the spinal cord. This is called a lumbar epidural block. The block may also be given in the tailbone area, called a caudal block. Before the block is performed, your skin will be cleansed with an antiseptic solution that feels cold. The anesthesiologist will use local anesthesia to numb an area of your lower back or near the tailbone which will sting a little. A special needle is placed in the epidural space just outside the spinal sac. A tiny, flexible tube called an epidural catheter is inserted through this needle. Occasionally, the catheter will touch a nerve, causing a brief tingling sensation down one leg. Once the catheter is positioned properly, the needle is removed and the catheter is taped in place. Additional medications are given as needed without another needle being inserted. The medication bathes the nerves and blocks out the pain. This produces epidural analgesia.
How soon will the epidural block take effect?
Because the medication needs to be absorbed into several nerves, the onset is gradual, not immediate. Pain relief will begin to occur within 10 to 20 minutes after the medication has been injected.

What will I feel after the block takes effect?
Although significant pain relief will occur, you may still be aware of pressure or sensations with contractions. You may feel your provider’s examinations as labor progresses. Depending on your circumstances and your baby’s condition, your anesthesiologist will adjust the degree of numbness for your comfort and to assist labor and delivery. You might notice some degree of temporary numbness, heaviness, or weakness in your legs.

What is a combined spinal/epidural block?
A combined spinal/epidural block uses both techniques and can provide pain relief much faster. An injection of medication is made into the spinal sac followed by the placement of the epidural catheter.

How long will the block last?
The duration of epidural analgesia can be extended usually for as long as you need it. After the epidural catheter is placed, additional medication can be administered through it as needed. Throughout your labor, your comfort and progress will be monitored frequently and medications adjusted accordingly. A nurse will assist your anesthesiologist with this monitoring. After delivery, the epidural catheter will be removed and, within a few hours, sensations will return to normal.

Will the epidural block affect my baby?
Considerable research has shown that epidural analgesia and anesthesia can be safe for both mother and baby. However, medical judgment, special skills, precautions, and treatments are required. That is why a qualified anesthesiologist performs this procedure.

Will it slow down my labor?
Each mother may respond differently to the various epidural medications. Some may have a brief period of decreased uterine contractions particularly when less than four to five centimeters dilated. Many, however, are pleasantly surprised to learn that after epidural medications have made them more comfortable and relaxed, their labor may actually progress faster.
Can I “push” when needed?
Regional analgesia allows you to rest during the longest part of labor, which occurs during cervical dilation. Then, when your cervix is completely dilated and it is time to push, you will have energy in reserve. The regional block can reduce your pain while allowing you to push when needed. Even if you do not have the urge to push, you will feel the pressure of the baby’s head on your rectum and you should be able to push with instruction.

What are the risks of a regional block?
Although uncommon, complications or side effects can occur, even though you are monitored carefully and your anesthesiologist takes special precautions to avoid them. To help prevent a decrease in blood pressure, fluids will be administered intravenously (into one of your veins before and during your epidural). In addition, during your labor, you will usually be positioned on your side. After delivery, you should remain in bed until the block wears off.

Shivering may occur and is a common reaction. Sometimes it happens during labor and delivery even if you did not receive any anesthetic medications. Keeping you warm often helps it subside.

Although uncommon, a headache may develop following the block procedure. By holding as still as possible while the needle is placed, you help to decrease the likelihood of a headache. The discomfort, sometimes lasting a few days, often can be reduced or eliminated by simple measures such as lying flat, drinking fluids, and taking pain medication. Occasionally, a patient may need additional treatment if the headache persists.

Your anesthesiologist carefully evaluates your condition, makes medical judgments, takes safety precautions, and provides special treatment throughout the procedure. You should feel free to talk with your anesthesiologist about your opinions for pain relief and their possible side effects.

Anesthesia for cesarean birth

Epidural, spinal, or general anesthesia may be given safely for cesarean deliveries. Choices depend on several factors, including the medical conditions of you and your baby and, when possible, your preferences.

How is the epidural block given for a cesarean delivery?
If you already have a labor epidural catheter in place and then need a cesarean delivery, it is usually possible for your anesthesiologist to
inject additional anesthetic medication through the same catheter to enhance pain relief safely. This stronger concentration of medication converts the analgesia to anesthesia. Anesthesia is necessary to numb the entire abdomen completely for the surgical incision.

**What is spinal anesthesia?**

Spinal anesthesia is given using a much thinner needle in the same general location of the back where an epidural block is placed. The main differences are that a much smaller dose of anesthetic medication is needed for a spinal block, and it is injected into the sac of spinal fluid below the level of the spinal cord. Once the spinal anesthetic medication is injected, the onset of numbness is quite rapid. Spinal anesthesia is usually used if you do not already have an epidural catheter in place.

**When is general anesthesia used?**

General anesthesia is used when a regional block is not possible or is not the best choice for medical or other reasons. It can be started quickly and causes a rapid loss of consciousness. It is used when an urgent cesarean delivery is required, as in rare instances of problems with the baby or vaginal bleeding. In these circumstances, general anesthesia is quite safe for the baby.

Because there is always a possibility you will require general anesthesia, you are asked to eat and drink lightly after your labor pains begin—regardless of your plans for delivery or pain control.

**Will I receive a separate bill from the anesthesiologist?**

Your anesthesiologist is a physician specialist like your obstetrician, midwife, or pediatrician whose medical services have been requested. You will receive a bill for your anesthesiologist’s professional services as you would from other providers. If you have any financial concerns, your anesthesiologist or an office staff member will answer your questions. You will note that your hospital charges separately for medications and equipment used.

Modern anesthesiology offers today’s mothers a variety of choices for a more comfortable childbirth. It is the goal of our anesthesiologists to answer your questions, ease your fears, and make your labor and delivery as safe as possible for you and your baby. Please discuss your anesthesia-related questions or concerns with your midwife or obstetrician. If needed, a consultation with an anesthesiologist can be arranged before your anticipated delivery.
Confidentiality

Please let your friends and family know that hospital staff cannot give out information to anyone other than you and your partner. We ask that your support person provide updates to your loved ones.

After you deliver

Designed with your comfort in mind, our newly-remodeled postpartum suites offer a relaxing stay while you bond with your new family member. With spa-like touches, modern decor, dimmable lighting and more, we hope the environment will be a soothing one after labor.

Meals are available at your request. An updated nutrition room features a variety of snacks and beverages near the unit entrance. If you would like to relax with a cup of tea, please let your nurse know—your experience is important to us!

You will have a phone at your bedside with a number you may share, if desired. From 10 p.m. to 7 a.m., your room phone will be turned off so as not to wake you; calling in during these hours will reach the nurses’ station.

You, your partner, and your baby will be given matching identification bands after the birth with a number unique to your family. It is important for your partner to leave the band on until you and the baby are discharged home, which will allow him or her to visit without limitations. Your partner may also make arrangements to stay in your room overnight on the provided sleeper sofa. Your newborn will also have a Safe Place transmitter placed on their ankle, which provides 24/7 surveillance of their location on the unit.
The hospital practices couplet care, which pairs a mother and baby with one nurse, rather than a nursery nurse for the baby and a postpartum nurse for the mother. The program facilitates teaching of infant care and bonding while promoting successful breastfeeding. Mothers room with their babies. Although we do not have a staffed nursery, whenever there is a need, the “float nurse” is assigned to the nursery for those babies who need additional observation or to give moms a rest.

Pain management continues after delivery on a case-by-case basis. Depending on your childbirth experience, your pain following the delivery will vary. If you experience discomfort at any time during your postpartum stay, please notify your nurse for pain management.

**Siblings and other visitors***

If you have other children, they may visit you in your room. Please make sure there is always another adult at MedStar St. Mary’s to provide supervision of siblings. Do not bring children in if they are sick or are known to have been exposed to an illness.

MedStar St. Mary’s has a special “sibling packet” for young children to help occupy them during their visit. The packet includes a coloring book about the new baby and crayons.

All other friends and family may visit between 9 a.m. and 9 p.m., four visitors at a time. Each person must obtain a visitor’s pass in the Main Lobby prior to coming to the unit. Upon arrival on the unit, friends and family will be asked to sign in and show a picture ID. All siblings are allowed to visit, regardless of age. Non-siblings must be age 5 or older. New babies are very susceptible to germs. Everyone who visits you must wash their hands before touching the baby.

*Visitation policies are subject to change, particularly during the COVID-19 pandemic. We appreciate your understanding.

**Newborn care on the maternity unit**

Our highly trained nursing staff provides excellent professional care. During your stay with us, your baby’s doctor will also be caring for your infant and visiting you.
A pediatric hospitalist is available 24 hours a day. Our hospitalists are readily available for any questions or concerns, should any arise. They usually provide care for babies who need more constant care as requested by community pediatricians. Some community pediatricians do not visit newborns while in the hospital. These newborns are assigned to a pediatric hospitalist while they are here.

**Keeping your newborn safe**

The safety and security of your newborn is very important to us. We have several systems in place, including numbered identification bracelets and electronic security devices, that will help ensure the security of your new baby.

We also want to keep your baby safe from falling during your stay. We will remind you to place your baby in their bassinet while they are sleeping. If you are feeling sleepy yourself, always place your baby in the bassinet. Never leave your baby unattended in the room or unattended on the couch or bed. Don’t hesitate to ask us for help if you are feeling particularly tired or weak after delivery.

**Hearing screening**

Babies learn to speak by hearing you talk—a process that begins at birth. If undetected, hearing loss can lead to speech, language, emotional, social, and educational problems. For this reason, MedStar St. Mary’s performs a hearing screening test on your baby.

Our computer-managed, non-invasive screening will be completed in just minutes. Your baby will listen to a series of soft clicking sounds, and the ears’ responses will be recorded automatically.

A few babies will need to have their hearing rescreened one month after leaving the hospital. For more information about the hearing test, or for specific information regarding your baby’s hearing, contact your baby’s physician.

**Critical congenital heart disease**

All newborns are screened prior to discharge for heart defects. This is done with a non-invasive check of the newborn’s oxygen level on their hand and foot.
Baby’s birth certificate

MedStar St. Mary’s will file paperwork for your baby’s birth certificate through the State of Maryland Department of Health and Mental Hygiene in Baltimore. After you have given birth, you will be given a folder with birth certificate information. A birth registrar will visit you to gather necessary information, help answer your questions, and obtain the name you have chosen for your baby. The registrar will then submit the information to the Division of Vital Records. Please contact Birth Registration at 240-434-7658.

If you are not married to the father of the child and you wish to have his name on the birth certificate, an Affidavit of Parentage form must be completed. You can also take the form home with you, complete it, and send it back to the Division of Vital Records. If you choose to take the form home, each parent must sign the Affidavit in the presence of a notary public. For further information, please contact Health Information Management at 301-475-6078.

If you wish to change your child’s name or the information provided to us for the birth certificate, you must contact the Department of Health and Mental Hygiene at 410-767-6500.

It will take 6-12 weeks to receive your child’s birth registration card. This is not a legal document. You should check the information on the card for accuracy: review the card, make any necessary corrections, and sign and return the card to the Division of Vital Records with their fee as instructed. If corrections are needed, a new modified card will be returned to you—you must return that card with your approval. Vital Records will issue the official certificate of birth once they have received a signed birth registration card that has been verified as correct.

It is important that you have a certified copy of the birth certificate for legal purposes (i.e. school registration, passport, insurance). Visit the Division of Vital Records online at health.maryland.gov/vsa/Pages/birth.aspx to download a form, request a certificate online, or learn more about the process, including fees.

Duplicate birth certificates are also available through the St. Mary’s County Health Department for residents born in St. Mary’s County after 1940. Visit smchd.org/birth-certificates/ or call 301-475-4330 to learn more.
Baby’s Social Security number

Although it is not mandatory, there are many advantages to getting a Social Security number for your baby. You’ll need that number for any child age 1 or older listed as a dependent on your tax return. If you plan to open a bank account or apply for some kinds of government services for your child, you’ll also need a Social Security number.

When our birth registrar asks you for the information needed to complete your baby’s birth certificate, you’ll be asked if you’d like us to apply for a Social Security number for your child. If you wish, we’ll submit the application to the Social Security Administration for you. This way, you will not have to fill out a special application form or submit a birth certificate or other evidence to Social Security.

Sharing your news

If you wish, you may fill out a birth announcement form to be published in Southern Maryland News, our community newspaper. Birth announcements are also published on their website at somdnews.com. We are happy to handle the publication of this announcement if you choose to provide it.
Learning to care for your newborn

As a new mother, you may need in-depth instructions on the care you and your baby should receive during the first few days at home. During your hospital stay, you will receive a booklet on maternal and infant care. The booklet includes a health record page for you to document your baby’s weight, height, and immunizations at each check-up. Please refer to this booklet and contact your doctor for further guidance.

You can receive personal education relating to maternal and child health during your hospital stay by using myStation, the in-room education system accessible through your television. Speak to your nurse for more information.

Breastfeeding resources

The American Academy of Pediatrics recommends breastfeeding through at least the first year of life. At MedStar St. Mary’s, board-certified lactation consultants are available to help encourage new moms who are or may be considering breastfeeding. Inpatient or outpatient consultations are available by appointment. A full line of breastpumps and breastfeeding supplies are available for rental or purchase. Families who deliver at our hospital will be called by the lactation consultant after discharge. To reach a consultant, please call 301-997-6505.

The hospital has a Breastfeeding Resource Center for use before and after the birth of your baby, as well as a monthly support group to connect you with other new moms. See page 20 for more details.
Preparing for parenthood

Parents-to-Be workshops

One-day workshops, presented through Health Connections in the Outpatient Pavilion, recognize the many unique needs that new moms and dads have while beginning life with their newest family member. The program is designed to help ease that transition, answer your questions, and provide guidance on this next chapter.

Expecting parents are invited to attend a course that will cover the basics of baby care and beyond, childbirth, and more. Parents-to-Be workshops are typically held monthly on Saturdays. Fees apply.

Among the topics covered are:

- **Childbirth**: The basics on labor, delivery, pain control, breathing techniques, cesarean sections, and postpartum care. A tour through the Women’s Health & Family Birthing Center is included to familiarize you with the childbirth environment and make it a more comfortable, less mysterious place before you arrive to have your child. Please bring two pillows and a blanket to assist you with this section.

- **Breastfeeding basics**: Fundamentals with a focus on what to do in the first few weeks of feeding. Lactation consultants are available to assist and encourage you in your breastfeeding journey.

- **Baby care and beyond**: Giving baby that first bath, taking temperatures, soothing and calming techniques, and even properly holding the newborn are just a few topics covered. Preparation will be your key to relieving anxiety of those first-time experiences.

- **Infant CPR**: Parents learn the basics of infant CPR and what to do if the baby is choking.

Childbirth classes fill quickly! For upcoming dates, visit [MedStarStMarys.org/Calendar](http://MedStarStMarys.org/Calendar) or call 301-475-6019 to learn more and register.
Growing families

The Parents-to-Be program prepares parents for childbirth and the weeks to follow. Other classes and support groups offered through Health Connections go a step further:

Support for breastfeeding moms
As a new mom, it’s nice to feel support from other mothers. The Breastfeeding Moms group meets each Wednesday in Health Connections and is facilitated by lactation consultants. The support group also runs a private Facebook group, available by searching MedStar St. Mary’s Breastfeeding Support Group. No cost to participate.

Safe Sitter
This program teaches adolescents ages 12-14 common sense babysitting tips, basic first aid, and CPR. Fees apply.

To learn more, please call Health Connections at 301-475-6019.
The birth experience.

Pre-admission registration
Please print, using a pen (blue or black ink only)

Please fill out completely and return to MedStar St. Mary’s Hospital, Patient Registration, P.O. Box 527, Leonardtown, MD 20650, or simply leave it at the hospital Patient Registration desk or with Guest Relations at the front desk.

Name
First ____________________ Middle __________________  Last __________________

Social Security Number _____/_____/______ Your Date of Birth _____/_____/____

Mailing address: ____________________________________________________________
________________________________________________________________________

Phone: ______________________________ Alternate Phone: _______________________

Marital Status:  □ Single  □ Married  □ Widowed  □ Divorced  □ Separated

Maiden name __________________________ Race __________ Ethnicity __________

Your OB Physician_____________________Your Primary Care Physician_________________

Due Date _____/_____/____  Date of Last Menstrual Period _____/_____/____

Religion ____________________________

Do you want a visit from clergy during your hospitalization?  □ Yes  □ No

Preferred Language __________________ Interpreter Needed?  □ Yes  □ No

Did you ever serve in the military?  □ Yes  □ No    Branch _______________________

Would you like access to the myMedStar online portal?  □ Yes  □ No

Email address for portal access:________________________________________________

Last 4 digits of Social Security Number (preliminary password)____________________

Please attach a copy of insurance cards (front and back), or bring all insurance cards to MedStar St. Mary’s Hospital at the time of registration and/or admission.
Pre-admission registration (Continued)

Employment status
☐ Full-time  ☐ Part-time  ☐ Not Employed  ☐ Self-Employed

Patient employer
Name of Employer ________________________________________________
Address __________________________________________________________
City/State/Zip _____________________________________________________
Phone ____________________________________________________________

Primary insurance (please attach front and back copy of insurance card)
Name of Insurance Company _________________________________________
Address __________________________________________________________
City/State/Zip _____________________________________________________
Phone ____________________________________________________________
Type of Insurance: ☐ Medicare  ☐ Medicaid  ☐ HMO  ☐ POS  ☐ Other
Policy/ID/Member # _________________________________________________
Group # / Enrollment Code __________________________________________
Name as it appears on insurance card: ________________________________
Relationship to the above-named person
☐ Natural Child  ☐ Step-Child  ☐ Spouse  ☐ Self

Subscriber/policy holder information
Name of Policy Holder: _____________________________________________
Date of Birth ___/___/___
Subscriber Social Security # _________________________________________
Subscriber Employer: _____________________________________________
Subscriber Employer Phone # ________________________________________

Person to notify in case of emergency
Name ____________________________________________________________
Address __________________________________________________________
City/State/Zip _____________________________________________________
Home Phone _______________________________________________________
Cell Phone _________________________________________________________
Relationship to Patient _____________________________________________
Secondary insurance
Name of Insurance Company _________________________________________
Address ____________________________________________________________________________________________
City/State/Zip _________________________________________________________________
Phone ____________________________________________________________________________________________
Type of Insurance: □ Medicare □ Medicaid □ HMO □ POS □ Other
Policy/ID/Member # ______________________________________________________________
Group # / Enrollment Code __________________________________________________________________________
Name as it appears on insurance card: ________________________________________________________________
Relationship to the above named person: □ Natural child □ Step-Child □ Spouse □ Patient

Subscriber/policy holder information
Subscriber Social Security # ______________________________________________________________
Subscriber Employer ________________________________________________________________
Subscriber Employer Phone Number __________________________________________________

Newborn insurance (if different than above)
Name as it appears on insurance card: ______________________________________________________________
Infant’s relationship to the above-named person: _________________________________________________
Policy/ID/Member # ________________________________________________________________
Group # / Enrollment Code __________________________________________________________________________
Name of Insurance Company ________________________________________________________________
Address ____________________________________________________________________________________________
City/State/Zip _________________________________________________________________
Phone ____________________________________________________________________________________________

Subscriber/policy holder
Subscriber date of birth: ________________________________________________________________
Subscriber Social Security # ________________________________________________________________
Subscriber Employer ________________________________________________________________
Subscriber Employer Phone # __________________________________________________________
Type of Insurance □ Medicare □ Medicaid □ HMO □ POS □ Other

This form must be completed in order for you to be registered.
Please call 301-475-6024 from 7 a.m. to 10:30 p.m. with any questions.
My birth preferences

During your stay at MedStar St. Mary’s, we’d like your birth experience to be tailored to your needs and preferences. Please consider the following options and check all that apply. Bring this plan to the hospital when you come to have your baby, and give to your nurse on admission to the birthing suite.

Labor

Activity:
- Move around
- Stay in bed
- Take a shower

Nutrition:
- Ice chips
- Frozen juice pops

Fetal monitoring:
- Continuous electronic monitoring
- Intermittent monitoring

Pain management:
- Avoid pain medications
- Pain medication if needed
- Prefer medication through IV
- Prefer epidural

Alternative pain relief methods:
- Breathing techniques
- Hot or cold packs
- Visualization
- Shower
- Other: ______________________________________________________

Support persons:
- My partner
- Birth coach
- Doula (trained labor assistant)
- Friends or family members
- Children (12 and older)

Environment:
- Music or relaxation tapes
- Photographs

Notes

__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
__________________________________________________________________
Delivery

Positioning
- Traditional semi-reclining position
- Move around

Episiotomy
- Yes, if the doctor thinks I will tear
- I prefer not to be cut under any circumstances

Partner participation
- My partner to cut the cord during delivery

Environment
- A mirror positioned so I can see the baby being born

In the event of cesarean delivery
- I want to see and touch the baby immediately after the operation
- I want my partner present

After delivery

Procedures
- Postpone non-critical procedures until after I’ve bonded with the baby

Feeding
- Breastfeed
- Formula feed

If I have a boy
- Circumcision desired
- I prefer not to circumcise my baby

Discharge
- Recover at the hospital
- Go home as soon as possible

Notes

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

perf line - do not print
As you plan for your pregnancy and childbirth, remember that your caregivers at MedStar St. Mary’s Hospital are here for you whenever you need us. Best of luck to you and your growing family!

MedStar St. Mary’s Hospital
25500 Point Lookout Road
Leonardtown, MD 20650
P 301-475-8981

MedStarStMarys.org

It’s how we treat people.