I can remember waving at my mom from the parking lot of the hospital where she delivered my younger sister Sara (or was it my brother, Ted?) Anyway, as I vaguely recall, we were not allowed to visit mom in the hospital, so my dad took me and my older sisters for a glimpse and a wave until she and our new sibling were allowed to come home, probably after a four or five day postpartum stay.

The experience of having a baby has sure changed in the 50 years since my mom waved at us from her hospital room window. A four day stay for a routine delivery is pretty unusual today, and family members are not only allowed to visit new moms and babies in the hospital, they are (as a standard) in the delivery room supporting, coaching and witnessing the miracle of life first hand. Indeed, my husband and I had our kids 25 and 22 years ago and things have changed a lot even since then.

At Mercy, we are constantly, passionately improving the birth experience in ways that are highly visible, and behind the scenes. We finished a full facelift of our Birth Center just last year and recently completed a remodel of our state-of-the-art cesarean section room to enhance the physical environment for moms, babies and their often-extended families. In addition, we were excited to host a ribbon cutting event to celebrate the makeover of our Mercy-Hillcrest Maternal Health Clinic this past summer. We are very proud of our 27-year partnership with Hillcrest and Medical Associates Clinic, providing prenatal and postpartum care for women with limited financial resources in a team-based, patient-focused model which resulted in the delivery of 150 babies last year.

While the improvements to our facilities are impressive, our commitment to the highest standards of excellence in maternal, newborn and pediatric care is even more robust. In the last five years, Mercy obstetricians, family physicians, pediatricians, nurses and other members of our care team have participated with Trinity Health in a national perinatal patient safety initiative, implementing leading-edge, evidence-based practices that result in better outcomes for our moms and babies. All of our eligible nurses are nationally certified in electronic fetal monitoring, externally validating that the members of our nursing team are experts in their field. Processes related to pre-term and second stage labor, vaginal delivery after cesarean section, and OB hemorrhage (to name a few) make patient safety our number one priority so that we can prevent complications whenever possible, and deal with them most effectively if the unavoidable happens.

Of course, the birth experience is just the beginning of what we hope is a lifelong and extraordinary relationship between Mercy and growing families, and we are prepared to partner with you every step of the way. A pediatrician sees every baby during his or her hospital stay; a Mercy Birth Center nurse makes home visits shortly after discharge; and if a child needs hospitalization, he or she will be cared for by a collaborative team of pediatric physicians and caregivers in a dedicated pediatric unit, all intended to exceed standards and patient expectations.

Today’s birth experience is dramatically different than it was 50, and even five years ago. Care at Mercy is better and safer than ever, and we promise that we will continue to lead the way so that families can focus obsessively on their newest members, and create memories that will last a lifetime.
Drink up!
THE BENEFITS OF DRINKING water

Drinking water plays an important role in maintaining a healthy body.

Some of the benefits from drinking enough water include:

- Banishing headaches
- Improving your mood
- Relieving fatigue
- Boosting your energy level
- Relieving constipation
- Flushing out toxins
- Improving digestion
- Promoting weight loss
- Preventing kidney stones
- Boosting your immune system
- Improving your complexion
- Alleviating back and joint pain
- Regulating body temperature

ARE YOU DRINKING ENOUGH WATER?
The easiest way to know if you’re drinking enough water is to pay attention to your urine—it should be nearly clear.

NEED SOME FLAVOR?
Add a squirt of lemon or lime, mashed berries, a few sprigs of fresh mint, or a cucumber or orange slice. Refreshing and delicious!
Taking care of every baby in the NICU is special, but being able to take care of my own nephews was amazing. I got to place both Weston and Colton into my sister’s arms for the first time, an experience I’ll never forget.”

— Trista Kenicker, BSN, RN, Mercy Birth Center
Every birth is a unique experience. Tiffany Schmitt, of Sherrill, Iowa, can attest to that.

Tiffany and her husband, Mike, have five children, all born at Mercy: Hailee (7), Levi (5), Skylar (3), and twins Colton and Weston (10 months). And each birth was different from the others.

Hailee unexpectedly arrived six weeks early, despite a healthy pregnancy without any complications.

“It was scary for us since she was our first, but her lungs were fully developed and she did great,” Tiffany recalls. “She only needed to stay in the NICU for 10 days before coming home.”

Levi was full term, and labor progressed so quickly that they barely made it to Mercy before delivering their healthy newborn.

Skylar was also full term, but Tiffany was induced. She particularly remembers bonding with her nurse during that time. “Since I was being induced, I had more time to talk with my nurse. She was so friendly and relatable since she had kids too. She was just really nice.”

As for the twins, they arrived five weeks early, and the babies needed to be born via cesarean section since one baby was breech (turned in the wrong position). And what made the twins’ birth even more unique, is that Tiffany’s sister, Trista Kennicker, is a Mercy NICU nurse who helped with the delivery of her nephews.

As she was arriving for her shift, Trista got the call that Tiffany was on her way to the hospital. As a nurse and sister, Trista offers a unique perspective of the birth. “As NICU nurses, we always get nervous about receiving a call about a possible pre-term delivery. That feeling was heightened immensely knowing it was my sister,” says Trista.

Because the babies were early, Trista worried about respiratory distress, which can be a common condition for premature babies. But as each baby was born, their welcomed cries were loud and clear.

“When we got the twins stabilized in the NICU, I got a chance to reflect on the experience,” Trista recalls. “Taking care of every baby in the NICU is special, but being able to take care of my own nephews was amazing. I got to place both Weston and Colton into my sister’s arms for the first time, an experience I’ll never forget.”

However, over the next few days Colton’s breathing worsened and he had to be placed on a ventilator.

“We were lucky the doctors were able to care for him at Mercy versus transferring him to Iowa City so the twins wouldn’t have to be separated,” says Trista.

Tiffany agrees, “I was so grateful that we were able to stay in town. Especially with our other kids, it would have been difficult going to Iowa City.”

Mercy’s NICU is the only Level II Regional Center in the area, which means Mercy can care for premature newborns and those who are at a higher risk.

Trista knows that having a baby in the NICU is extremely worrisome for parents.

“When you take care of a baby in the NICU, sometimes for several weeks, you not only get to know the baby but also the family. We try to make the experience as tolerable as we can for parents, explaining every step of the way what is going on,” she says. “One of the most rewarding things to see in the NICU is when the baby starts to turn a corner and makes noticeable improvement for the parents to see. Sometimes it’s a preemie who has been learning to eat for weeks and finally takes his or her entire feeding orally instead of through a tube, or a baby who is removed from oxygen for the first time since he or she came into this world. We get to see just how remarkable these little patients can be. I get the opportunity to be a part of that and hopefully make a difference in these families’ lives during a very stressful time. That is why I became a NICU nurse.”

Colton’s condition improved and he was able to be removed from the ventilator. At almost 10 months old now, the twins are both doing well and are moving all over the place.

Tiffany is grateful for each birth experience at Mercy.

“Mercy is able to take care of babies sooner. I always tell people that I love Mercy and would have been sad if I had to go elsewhere. The staff is all very kind and very helpful. Each experience was the best I could have had.”

The birth of your baby should be one of the most memorable, life-changing, and joyful experiences of your life. A birth plan can help you think about your wishes for this special event. Download Mercy’s birth plan today at mercydubuque.com/birth-plan
Q&A

**Q:** I’m expecting my first baby. What are my options to reduce pain during labor?

**A:** Congratulations! I’ll be honest, labor hurts, but it’s possible to create a birth plan that ensures little or no pain. Mercy Birth Center offers several options to reduce pain, and an epidural is the most common option. However, we’re pleased to now offer you another option that can help you manage pain and anxiety during childbirth: nitrous oxide.

Nitrous oxide is a safe blend of 50 percent nitrous and 50 percent oxygen. The use of nitrous oxide takes effect in seconds and offers immediate relief of pain and anxiety without long-lasting effects. You control when you use it and how long to use it. It allows you to recognize and respond to your pain and discomfort on your own terms. You simply hold a mask to your face and inhale as you start to anticipate a contraction and remove the mask when the contraction ends.

This option is also safe for baby. Nitrous oxide is the only pain relief method used for labor that is cleared from the body through the lungs, so as soon as you pull the mask away, the nitrous effect is gone within a breath or two.

I’m happy to answer any more questions you may have about nitrous oxide or other pain relief methods. You’re welcome to contact me at 563-589-8094.

— Amy Wright, MSN, RN, director of maternal child services

**Common diagnoses that can be treated at Mercy include:**

- Alternative augmentative communication (AAC)
- Articulation difficulties
- Autism
- Bracing, orthotics, and adaptive equipment
- Brain injuries
- Cerebral palsy
- Feeding issues
- Gross motor and developmental delays
- In-toeing
- Language development
- Literacy
- Social skills
- Spina bifida
- Spinal muscular atrophy
- Stutter
- Toe walking
- Torticollis

To schedule an appointment, please call 563-589-9035.

---

**PEDIATRIC THERAPY AT MERCY**

The first five years have so much to do with how the next 80 years turn out.

Children can benefit from a full range of outpatient therapy services available at Mercy, including physical, occupational, and speech therapy for children age birth through young adult.

Mercy’s comprehensive, multi-disciplinary team works closely with the child’s family to allow for better understanding of needs and goals, and educates the family in ways to better assist their child at home. Each therapy program is individualized to the child to best accommodate their needs. Mercy also offers therapy session times in the late afternoon as well as Friday mornings to accommodate the Dubuque Community School District’s school hours.

“My favorite part about working with children is watching them achieve their goals and their parents’ goals, and watching their confidence grow as they master new milestones”

— Krista Laufenberg, Mercy pediatric physical therapist

---

**MERCY GIFT SHOP**

**WALK INTO CHRISTMAS**

*Gift Show, Bake Sale, and Toyland*

- **Sunday, November 4** | 11 a.m. – 4 p.m.
- **Monday, November 5** | 10 a.m. – 5 p.m.
- **Tuesday, November 6** | 10 a.m. – 7 p.m.

Proceeds benefit children’s needs at Mercy Medical Center.

To learn more about having a baby at Mercy or to schedule a tour, visit mercydubuque.com/birth-center.
Special touches included in the NEW C-SECTION SUITE

Moms preparing to deliver their babies by cesarean section at Mercy now will do so in a new, state-of-the-art C-section suite located in the hospital’s birth center.

The new and expanded space includes more room for physicians, staff, the patient and support person, as well as three infant warmers to accommodate triplets. Murals on the wall are welcoming and calming. A monitor is available with options for mom to view the procedure, the warming bed where baby is being cared for, or a mural that displays a field of flowers.

In addition, moms have the option of using a clear drape to also view the birth of baby. And as soon as it’s determined that both mom and baby are doing well, baby will be placed on mom’s chest for skin-to-skin contact, or bundled for the significant other to hold, to promote bonding between the new family.

BLACK BEAN AND CORN SALSA

MAKES APPROXIMATELY 6 SERVINGS (SERVING SIZE: 1 cup)

INGREDIENTS
1 red pepper, diced
1 green pepper, diced
½ jalapeño (for more spice, add seeds)
1½ cups fresh sweet corn OR 1 can of corn (no salt added and drained)
2 Roma tomatoes, ripe
½ red onion, diced
1 can black beans (no salt added, drained)
2 tablespoons cilantro, chopped
2 tablespoons lime juice
½ teaspoon cumin
1 tablespoon white wine vinegar
½ teaspoon salt
Pepper to taste

INSTRUCTIONS
1 - Mix all of the ingredients together.
2 - Refrigerate for one to two hours. Serve chilled.
BLACK BEAN AND CORN SALSA

“This salsa is a tasty new way to enjoy fresh sweet corn. Enjoy this blend of corn, beans, peppers, and spices over a bed of lettuce, on top of chicken or beef tacos, or as a dip paired with a heart healthy chip. Black beans are also an excellent source of fiber and protein, and contain a variety of both antioxidant and anti-inflammatory properties, which help combat cardiovascular disease.”

— Stacy Huss, RD, LD

NUTRITIONAL INFORMATION:
100 calories, 0g saturated fat, 18g carbohydrates, 203mg sodium, 3.5g fiber, 5g protein