



Rooming-In

For many infants, the NICU experience is lengthy and complex. As families prepare for their infants to come home, they may exhibit varying degrees of anxiety and stress. A thorough assessment of the family's needs, environmental issues, and knowledge of their infant's care before discharge is an important part of the transition to home. Providing an opportunity to care for their infant with professional caregivers nearby for assistance has been shown to increase parental competence and provide confirmation of their readiness to provide independent care at home.

Rooming-in is a practice where parents and other caregivers provide total care for their baby in a home-like environment while in the hospital. This process provides the caregiver with the opportunity to care for their infant with the availability of assistance from healthcare professionals. Studies indicate that mothers found rooming-in experiences to be beneficial in preparing them for the discharge of their infant. Other mothers stated that it was an extremely positive experience, aided them in breastfeeding, increased their confidence, and helped them feel like a family. Rooming-in facilitates the transition of the patient from hospital to home prior to discharge.

While rooming-in, the parents or caregivers provide all of the physical care and supervision for their infant, including giving medications, changing diapers, and feeding. Any additional equipment, such as monitors, oxygen therapy, or feeding pumps, is also used during the rooming-in

period. All discharge education, including equipment training from the identified home health agency or durable medical equipment company, is completed prior to rooming-in.

The rooming-in period is usually 12–48 hours. Ideally, both the mother and father—or other adult family members who may be involved in the infant's care—are involved with rooming-in. A family member or other caregiver remains with their infant during the entire rooming-in period. Be aware of state laws regarding minor parents (those under age 18). Some states will require parental consent for minors to room-in with their baby.

Once the rooming-in period has been completed successfully and all discharge goals for the infant, family, and staff have been achieved, it is time for discharge and transition to home.

Bibliography

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Rooming-In: Information for Parents

Shortly before your baby is discharged from the NICU, you may have the opportunity to room-in with him or her for a certain amount of time. Rooming-in usually takes place for 24–48 hours in a private room with a home-like atmosphere. This experience is like a practice session for taking care of your baby on your own before you go home. It gives you a chance to try all you have learned with a nurse close by for help and advice. Rooming-in can make the change from hospital to home much smoother for you and your baby. Some hospitals may not have a private room for you to room-in, but you can go to your baby's room for 12–16 hours and spend time caring for him or her.

Before Rooming-In

- Hospital staff will give you instructions, and you will be able to demonstrate all care for your baby.
- You will receive training on equipment to be used at home.
- Your baby's nurse will review the rooming-in process and make suggestions about what to bring for rooming-in, such as comfortable clothing, a toothbrush, and personal grooming items.
- You may bring clothes you want your baby to wear during the rooming-in time.
- All the supplies you need to care for your baby (for examples, diapers, bottles/nipples, and blankets) will

be in the room with you. Make sure you bring items you will need when you take your baby home (for example, blankets, outfits, etc.).

During Rooming-in

- You provide all care for your baby, including giving medications, changing diapers, and feedings.
- You use any monitoring or other equipment you will need to use at home.
- Take notes on what your baby is doing, what you did and when you did it, and how your baby responded. Things you should note include the time of feedings, number of wet or dirty diapers, times when your baby is fussy, or other things you may have questions about.
- Nurses are available by phone to answer questions and offer assistance.
- One parent or caregiver is expected to stay with the baby at all times.
- Rooming-in is a time for you and your baby; visitation by family and friends who are not primary caregivers is not recommended.

You are almost home. Rooming-in helps you learn more about your baby's habits, behaviors, and routines before going home. It gives you time to ask questions and gain confidence in caring for your baby.