

Frequently Asked Questions

Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

1. When should I come in?

- If you think you are in labor
- If you think your water has broken
- If baby movements have stopped or you feel less than 6 fetal movements in 2 hours.
- If you have constant abdominal or stomach pain
- If you have changes in vision or unusual headaches
- If you have vaginal bleeding
- If you have any health or pregnancy related concerns

2. What time are the main entrance doors open/closed?

- The south side main entrance (across from the parkade) doors are open from **6:00am - 10:00pm**
- Come through Emergency after the main entrance closes
- Underground public parking on the North side of the hospital-take elevator to 2nd floor and come to Unit 27
- There is now an AHS parking app available on Apple App Store and Google Play.
- It is recommended you download this app ahead of time if you would like to use it, as our WIFI service is not great in the hospital.

3. What should I bring?

- Pen
- Going home outfit and blanket for baby
- Comfortable clothing for mom after baby is born. Front opening top if you are planning to breastfeed to provide skin-skin
- Nursing bra or tank top
- 3-4 pairs of maternity **underwear**
- **Generic Pads will be provided.** If you have a specific preference, you will need to bring your own (at least one full pack)
- Plastic (washable) flip flops or croc type sandal
- Camera, cell phone and charger
- Cash/change, credit card for parking and vending machines
- Lotion, lip balm, water bottle
- Soothers are not recommended for 2-3 weeks until breastfeeding becomes established
- You may bring in your own pillow and housecoat-ensure they are clean.
- Unit 25 will provide diapers and wipes for your newborn while you are on the unit.

4. Where is Unit 25 & Unit 27 and how do I get there?

- Both units are located on the second floor of the hospital.
- You can get directions at the information desk located at the South Complex entrance.
- If you arrive through Emergency, security staff will direct you to Unit 25 & Unit 27.

Frequently Asked Questions

Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

5. What happens when I arrive on Unit 27?

- A nurse will do a physical assessment and find out why you have come in
- We will listen to your baby's heartbeat and check your vital signs and possibly check your cervical dilation if you are in labor
- The nurse will update the physician or obstetrician on call, and make a plan of care
- You will either be admitted to a room or discharged home

6. What comfort measures & pain management options are frequently used on Unit 27?

- Bath tub, shower, birthing ball, peanut ball, rocking chair, massage and frequent position changes are encouraged.
- Nitrous oxide "laughing gas", narcotic analgesic (morphine in early latent phase of labor or fentanyl in active labor) and/or epidural analgesic may be available after your individual assessment is complete

7. Can I use essential oils or scented products in labor?

- **No**, the Red Deer Regional Hospital is a scent free facility. Some of our patients and staff are extremely sensitive or allergic to scents from oils, perfumes and even highly scented flowers like lilies.

8. Can I have a water birth?

- If you are under the care of a midwife, water birth **may** be an option.
- If you are under the care of a family doctor or obstetrician water birth is not an option currently.

9. Labor support people, who can be with me?

- You can have 2 designated support people with you.
- We do ask that the support people you choose are healthy, with no cold or flu-like symptoms.

10. Can the father/support person stay with me after baby is born?

- Your support person is encouraged to stay to help with baby.
- One support person may sleep in the postpartum room with you. They may sleep in the chair provided. If they are disruptive, they will be asked to leave. **Please do not sleep or put anything on the empty extra bed in the room.**

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Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

11. What are the regular visiting hours?

- The mother's support person is always welcome.
- Visiting hours are not specific but please be mindful of your roommate.
- The number of visitors at the bedside should not exceed 2.
- Anyone who is sick should postpone their visit until they are recovered.

We strongly discourage parents from taking infants to other areas of the hospital where there is a higher risk of exposure to illness. **Baby should always be transported in a cot when leaving the unit and accompanied by a person that has a matching ID band.** Please ensure when you are taking your baby to the common atriums you keep your baby with you at all times and avoid exposure to anyone with a respiratory-type illness.

12. Will my baby stay with me the entire time after he/she is born?

- Baby will stay with you. There is a bassinet beside your bed. All baby supplies you need will be found under the bassinet. These include diapers, wipes, Vaseline, and extra blankets.
- Your nurse will provide teaching, support and answer all questions while you stay and care for your baby on unit 25.
- You or your support person are to accompany baby when they are taken out of your room for other assessments and tests
- Your nurse and Primary healthcare provider will perform your baby's assessment at the bedside, and we encourage you to ask questions during this time regarding your baby's status
- The only time your baby will not stay in the room with you is if your baby needs to stay in our Neonatal Intensive Care Unit (NICU). This happens for babies who are born preterm before 36 weeks, need IV fluids or medicine, oxygen therapy or special observation for medical reasons.

13. Telephones

- Cellular phones are allowed on units 25 & 27.
- When in labor please request that friends and family wait for you to call them. Multiple phone calls asking for information takes time and for confidentiality reasons staff cannot provide any updates.
- There is a public Wi-Fi network available

14. What are the routine tests/procedures for newborns?

- All babies are assessed by your doctor or midwife after birth.
- Babies are assessed thoroughly each shift. You will be asked to complete a baby feeding diary in partnership with your nurse and keep track of the number of wet and dirty diapers.
- We weigh your baby and measure their head and length shortly after they are born
- We re-weigh the baby before discharge or as needed during your stay here.
- We routinely give a vitamin K injection into your baby's thigh. Please ask your physician for more information about the benefits of vitamin K.

Frequently Asked Questions

Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

- Erythromycin eye ointment is only given to high-risk infants (mothers who have a sexually transmitted infection).
- After 24 hours of age, we routinely collect a blood sample from your baby's heel. This test is called Alberta Newborn Screening Program (ANSP). This test screens multiple different metabolic/thyroid disorders including cystic fibrosis. Please see this link below for more information:
- [Alberta Newborn Screening Program \(ANSP\) | Alberta Health Services](#)
- Before discharge we will use a light meter to check bilirubin (jaundice) levels.
[Bilirubin Test \(alberta.ca\)](#)
- Babies are not bathed until 24 hours of age to help maintain their body temperature (unless the mother has an infectious disease).

15. What happens if I need a cesarean birth?

- If you are booked in advance for a cesarean section, a nurse from our Obstetrical Preadmission Clinic will call you to complete your teaching over the phone. After this call and a consultation with your obstetrician you will know how to prepare and what to expect during your surgery and hospital stay.
- If you have an unexpected cesarean section your physician and nurse will do all the necessary teaching and preparation at that time.
- Once you have a good understanding of why a cesarean section has been recommended you will be asked to sign consent for the surgery.
- One support person can go with you to the operating room.
 - If you have a spinal anesthetic and are awake for surgery one support person can be in the room with you when baby is born.
 - If you have a general anesthetic and are sleeping for surgery, your support person will wait outside the operating room and will accompany your baby to the NICU or Unit 25 depending on your baby's needs.

16. How long on average should I expect to stay in the hospital?

- 24 hours after an uncomplicated vaginal birth.
- 48 to 72 hours after a cesarean section.

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Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

17. What paperwork do I need to fill out in hospital?

- After baby is born you will be given a card with instructions how to register the baby's birth online at www.alberta.ca/birthregistry. For extenuating circumstances (adoption, surrogacy), contact Vital Statistic at number given below.
- The birth mother will complete the electronic form and the father will need to complete his portion. If the father is unavailable at the time of birth, he may be able to add his information later (fees may apply).
- You can save time and money by ordering the birth certificate online after you have registered the birth.
- For any questions or concerns, please contact Service Alberta -Vital Statistics office (toll free) at 310-0000 then enter 780-427-7013. Or email - birthregistry@gov.ab.ca
- You can write to Vital Statistics at Box 2023, Edmonton AB, T5J 4W7
- **Please check the Vital Statistics website for timeframe of completion of registration**

18. What happens if my baby goes to NICU (Neonatal Intensive Care Unit)?

- Your support person will be able to go with baby to NICU immediately after the birth.
- You will be able to see your baby as soon as you are able to walk or go over to the NICU in a wheelchair.
- Parents are encouraged to spend time in NICU with their baby. Babies can experience stress when separated from their parents.
- Parents will get a full orientation of the NICU if their baby is a patient on that unit.
- Visiting restrictions may apply to family and friends depending on the health needs of your baby.
- Please do not wear perfumes or bring strongly scented flowers into NICU or the hospital. Strong scents can cause breathing difficulties with some patients and staff.

19. Why does a public health nurse call me after I go home?

- You will receive a phone call from a public health nurse within 24-48 hours after discharge from the hospital to ensure you are managing okay. If the nurse feels you or your baby need a wellness check she will arrange for you to come to the Public Health Office at a scheduled time. She will provide information about baby immunization schedules, baby safety and community resources.

If you have more questions call the Unit 25/27 preadmission nurse at 403-343-4856 or speak with your primary healthcare provider or PCN family nurse working with your physician's office.

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Hearing screening for your baby

Alberta's Early Hearing Detection and Intervention (EHDI) Program is a province-wide service that identifies permanent hearing loss as early as possible in a baby's life.

Our services include:

- Screening babies for hearing loss by 1 month of age
- Diagnosing permanent hearing loss by 3 months of age
- Ensuring access to intervention by 6 months of age



Babies are never too young to have their hearing checked (screened)



Permanent hearing loss is one of the most common conditions in newborns. Even though a baby may respond to sounds, they may not hear well enough to develop speech and language.

Having your baby's hearing screened soon after they are born is the best way to find hearing loss early and get the support needed to help your baby build speech, language and learning skills.

How is hearing screening done?

While your baby is quiet or sleeping, soft sounds are played into your baby's ears and a computer measures how your baby is hearing sound.

Hearing screening is quick, safe and won't hurt your baby.

When is hearing screening done?

It's done soon after birth, either before your baby is discharged from the hospital or at a community screening site.

When will I get the results?

You will get the results as soon as the screening is done. The result of the test is pass or refer.

What does a pass result mean?

It means that your baby is hearing well on the day of the screening. It is a good idea to monitor your baby's hearing, even after a pass result, using the checklist on the back of this handout.

What happens if my baby doesn't pass the hearing screening (refer result)?

Your baby will need to go for a more specialized hearing test to confirm or rule out hearing loss. Most babies who need further testing are found to have normal hearing, but some are found to have hearing loss. This test is done by a pediatric audiologist (a health care provider who specializes in children's hearing).



Learn more at [AHS.ca/ehdi](https://www.alberta.ca/ehdi) or by calling Health Link at 811.

NOVEMBER 2018



Early Hearing Detection
& Intervention Program

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Bedside Report at Red Deer Regional Hospital Postpartum unit



The Postpartum Unit at Red Deer Regional Hospital Practices Bedside Report.

Please read this carefully and, if you have any questions, speak to someone on your care team.

We use a patient and family centered approach to care for you. It is important for you, your family, and our team to have good communication about your care.

The bedside whiteboard in your room will have information about your care including the names of your doctors and your care team. It will also include the date we plan to send you home and your plan of care for the current day.

Members of your care team will discuss your care with each other and you, at your bedside at the time of shift change. Our shifts changes are at 7:00am, 3:00pm, and 11:00pm. We welcome you to take part in the transfer of information. It is okay for family members to be with you at this time if you want them to be there.

Thank you for helping us to include you in this process and enable a truly family and patient centered experience for your stay.

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Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

So, You're Having a Baby!

Prenatal Education Classes and Unit Tour COMING SOON!!



More information about pregnancy and your baby is available at:

www.healthyparentshealthychildren.ca

Updated: 28 October 2025

Frequently Asked Questions

Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

Information Sources for Parents

- <https://www.birthandbabies.com> – This website offers online prenatal classes and information on all pregnancy related topics.
- www.parachutecanada.org - A comprehensive resource for information on injury prevention. Topics of interest include child safety seats and baby safety/child proofing your home.
- <http://www.artofmanliness.com/2011/08/31/a-mans-guide-to-pregnancy-your-progeny-enters-the-world/>
- **Healthlink** – 811 Call to speak with a registered nurse about a specific pregnancy or a health and safety related concern.

Enhanced Services for Women



For more information about this service please contact us:

Telephone 403-340-5466

Address: 4733-49 Street
Red Deer, AB
T4N 1T6

The Enhanced Services for Women (ESW) program is designed to reach women who need help for a substance use problem or mental health concern during pregnancy or after birth.

The emotional experience throughout pregnancy and after delivery is different for every woman. Hormones, sleep, nutrition, and stress can all impact your ability to cope and feel like yourself again.

It is normal to feel overwhelmed with all of the changes, whether you were prepared for them or not.

Early treatment is important for moms, their baby, and the rest of the family. The sooner you start, the more quickly you will bounce back.

Books

Birthing from within – Pam England

Ina May's Guide to Childbirth – Ina May Gaskin

The Labor Progress Handbook 3rd edition – Penny Simkin, Ruth Ancheta

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Frequently Asked Questions

Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425

Breastfeeding Resources for Parents

- Best Start Resources: <https://resources.beststart.org/product-category/resources/breastfeeding/>
- La Leche League International: <http://www.llli.org/>
- LLLI Answer Pages: <https://llli.org/breastfeeding-info/>
- La Leche League Canada: <https://www.lllc.ca/>
- For parents: <https://www.lllc.ca/information-parents>
- Dr. Jane Morton videos on breastfeeding: <https://med.stanford.edu/newborns/professional-education/breastfeeding.html>
- Global Health Media Breastfeeding videos for parents: https://globalhealthmedia.org/topic/breastfeeding/?_sft_audience=mothers-and-caregivers&_sft_language=english
- Low Milk Supply: <http://lowmilksupply.org/>
- Breastfeeding After Breast Surgery: <http://bfar.org/index.shtml>
- Breastfeeding and medications:
 - Hale's Medication and Mother's Milk: <https://www-halesmeds-com.ahs.idm.oclc.org/>
 - e-lactancia: <https://www.e-lactancia.org/>

Lactation Drop-in Group:

Public Health Nurses will be available at the following drop-in group location

Parkland Mall, Red Deer

Family Services of Central Alberta Office
Entrance #5 (North Facing)
Tuesdays – 10am – 1130am
Fridays – 1pm – 2:30pm

**Lactation Group closed when statutory holiday falls on Tuesday or Friday

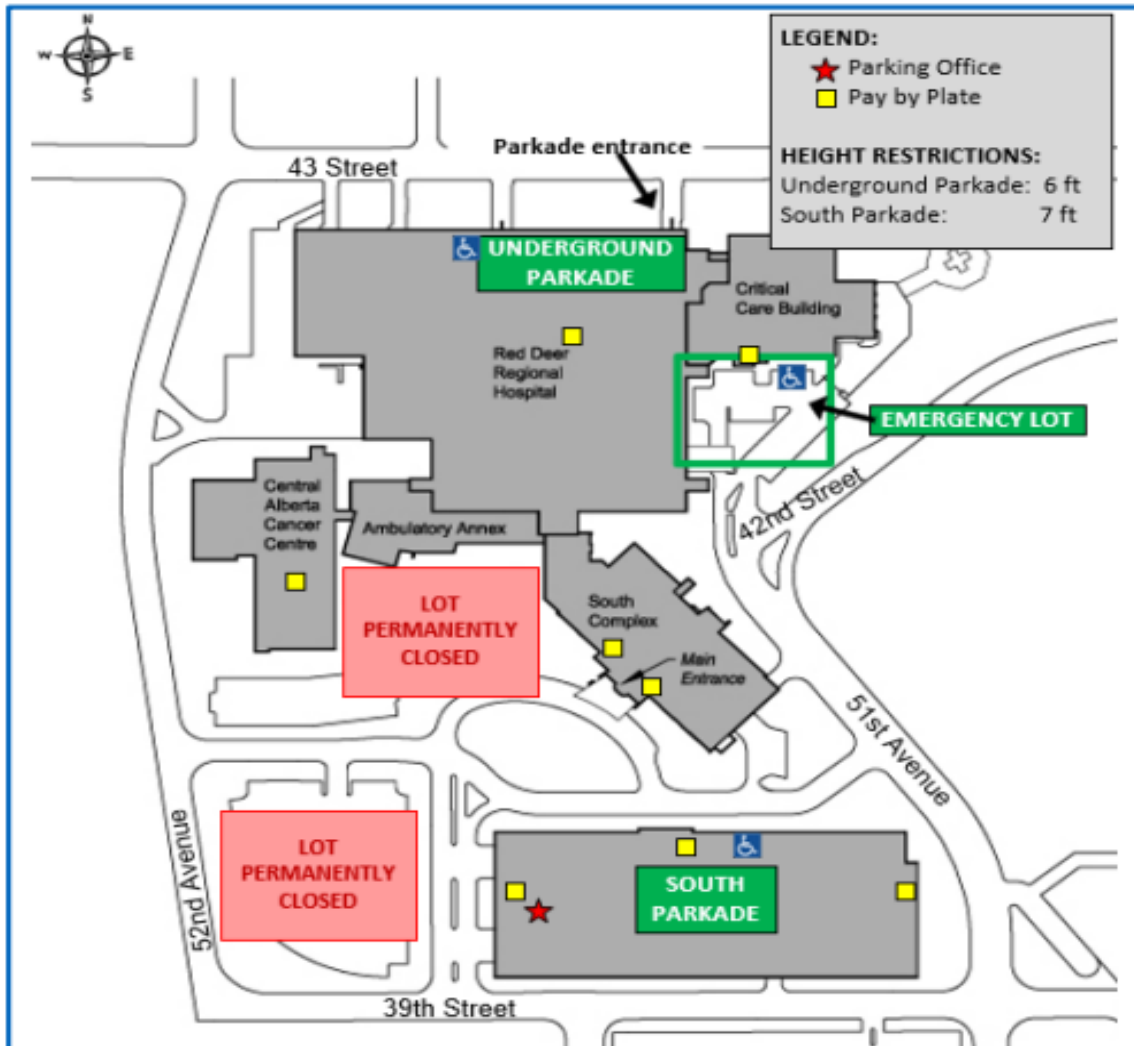
For more information, please contact – Red Deer Johnstone Crossing Community Health Centre at 403-356-6363

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Unit 27 L&D (403) 343-4427 Unit 25 Postpartum (403) 343-4425



Red Deer Regional Hospital Public Parking



- Pay Station locations are marked above in yellow.
- Buy a permit by entering your licence plate before paying by coin or with credit card.
No need to return to your vehicle to display a permit.
- Have a hard time remembering your licence plate number? Take a picture with your smartphone.

Parking rates are unchanged.

See next page for more information.

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Red Deer Regional Hospital Parking Office

Location: Main Level, Hospital Parkade

Business Hours: Monday to Thursday 8:00AM – 12:00 PM, 1:00 PM – 4:00 PM
Friday 8:00AM – 12:00 PM, 1:00 PM – 3:30 PM
Closed on weekends and statutory holidays

Phone Number: (403) 357-5191 **Email:** ParkingCentral@ahs.ca

Public Parking Rates

Rates apply 24 hours per day, and are in effect for all public parking, including those with provincially issued placards for persons with disabilities. Public parking is GST exempt.

Hourly: \$1.50 per half hour or portion thereof

Daily: surface, \$9.00 for 24 hours
underground, \$10.00 for 24 hours

Parking Payment Options

PAY BY PHONE



Parking payment can be made using a smart phone. Download the AHS Parking app (search **AHS Parking** on the Android or Apple IOS app store) and for the parkade/surface, use **zone 6483**; for the underground parkade, use **zone 6482**. Parking can be extended as needed or stop your parking session if leaving earlier than expected.

PAY STATIONS



Pay stations accept Canadian coins (5¢, 10¢, 25¢, \$1, \$2) or credit card (Visa, MasterCard, American Express). Maximum 28 Canadian coins per transaction, no pennies. Pay stations do not provide change.

WEEKLY/MONTHLY PASSES

Weekly: \$39.00

Monthly: \$59.00

Weekly and monthly passes are available for purchase at the Parking Office, with a signed authorization form from the nursing unit or social worker.

There is now an AHS Parking available on Apple App Store and Google Play



AHS Parking (4+)
AHS
Designed for iPad
#90 in Travel
★★★★★ 4.7 • 7.5K Ratings
Free

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Vehicle and Height Restrictions

Propane powered vehicles are not permitted in the parkade or underground parking areas.

Height restrictions: Parkade: 2.13 meters (7 feet)
Underground parking: 1.83 meters (6 feet)



Accessible Parking Locations

Public surface lot: Adjacent to the South Complex (main entrance) doors

Parkade: Near elevators on levels P1 and P2

Underground parkade: Across from the underground parking elevator lobby

Valid government-issued parking placard for persons with disability required. Parking rates apply.

Emergency Lot – Near main the main Emergency access doors

[Parking Services | Alberta Health](#)

