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**Dads in the NICU Blog V2**

Children who are born with Prader-Willi Syndrome or any rare disease, it can be extremely scary and stressful for both parents. The initial shock of seeing your floppy baby and hearing their faint cry is scary and overwhelming for both parents. The mother may become more scared and stressed as the doctor informs her that the child will have to be admitted to the Neonatal Intensive Care Unit (NICU) due to other issues not initially observed such as inability to regulate temperature or thrive (suck on a bottle or breast). Unknowingly, the child could remain in the NICU for hours, days, weeks or even months. This is when have a strong and caring partner (DAD) is important for both the wife and the child.

The Dad’s role during the NICU stay is very important especially within the first 48-72 hours of the child’s birth especially depending on whether the mom delivered caesarean or normal mother’s birthing and breast- or bottle-feeding methods, but these tips can be used regardless of those decisions. The Dad should be overly supportive, hyperattentive, available, anticipate her needs and reduce as much stress as possible for your wife and family. The Dad will be the wife’s counselor, prayer warrior, listener, shoulder to lean on, hospital lawyer, paralegal, care tacker (wife & children), certified nursing assistant, housekeeper, photographer, reporter, bouncer, chauffer, masseuse and husband. Who knew as a Dad we would have to fulfill some of these roles.

Based upon my wife’s stay in the NICU for 3 weeks, a Dad has the opportunity to:

1. Be empathetic and supportive of your wife’s emotional needs (what does she need). Both will cope with the experience differently. Reassure her that she is not responsible for the baby’s condition (seek professional counseling if needed)
2. Take care of yourself (emotionally, physically and spiritually)
3. Communication with your wife (before, during and after NICU, doctor and family visits)
4. If she can’t go to the NICU, visit the baby and provide updates on how your baby’s doing (i.e., pictures, tell her about your baby’s condition, activities and medical care).
5. Be involved with and support decisions (husband & wife Team decision)
6. Be available and attend all doctor, nurse and specialist visits to NICU, wife’s room and also attend NICU shift change/closeouts (where updates on the baby is exchange between shift nurses/doctors)
7. Be attentive to what the doctor and nurses are saying and doing, take notes, ask lots of questions (build confidence in your ability to update wife and other doctors as needed)
8. Keep tracking of issues/concerns, medications, treatments and following tasks to be complete to maintain the treatment plan
9. Help her provide breast milk for your baby. Help get bottles ready (cleaning and labeling), maintain feeding & pumping logs, make sure the breast milk is stored correctly and take it to the NICU so it’s ready when your baby needs it. Breast milk is the best food for most babies, and it’s even better and healthier for babies in the NICU.
10. Encourage your wife to get rest and eat healthy. Also, have her snacks, and munchies available.
11. Taking on the responsibility to visit the baby in the NICU (bonding time baby in the absence of wife)
12. Track doctors, nurses, medical and insurance information for future follow-up or questioning
13. Help make some of the necessary phone calls to insurance companies, specialists, etc.
14. Update concerned family and friends and control visitation
15. Do majority of the physical workload in the NICU (lifting, carrying items, pushing and carrying the baby, pushing wife in wheelchair)
16. Spend time with your other children at home (if needed)