

# Welcome

# Olive Annalise

March 26, 2014

2:06 p.m.

8 lbs. 2 ounces

21 3/4 inches

Anxiously, we were all awaiting March 17. If this baby was anything like your boys, in the early morning you would begin to feel that the baby was on its way. However, that Monday morning you went to the gym, and that evening you settled in with your family and you weren't experiencing definitive signs of labor. Since your boys had come on their due dates, and Grace had waited a week longer, I began to seriously suspect you were having a little girl.

You began having contractions Monday morning, a week after your March 17<sup>th</sup> due date, that continued into the evening, and the next day. Tuesday morning you declared it to be the "longest early labor ever." Who would have suspected that your labor wouldn't really become regular until only hours before you were scheduled to go to the hospital to be induced?

Karen and I met you at the hospital at 7:30 a.m., and Jason informed us while we waited in the hallway that you were already 5 centimeters dilated, 80% effaced, and baby was at -1 station. Karen and I were impressed to know that the contractions that had been keeping you up in the early morning were so effective that you most likely would not need any additional help to get labor to progress.

Once we were allowed into the room, you were sitting on the bed, while your contractions and the baby's heart rate were being monitored. You seemed very peaceful and calm, and in fact you even had your makeup done and earrings on, which Karen pointed out. You said since you were coming into the hospital so early in labor, you had time to do all of those things.

While you were in the bed, you were still experiencing contractions, but they were spaced further apart than they had been at home. It seemed as though you were slowly adjusting to the environment at the hospital. Karen and I did our best to restore that atmosphere by lowering the lights, and limiting our talking and distractions. Your nurse requested that all of us, including Jason, leave the room, so she could ask you some personal questions. While we were in the hallway, we all discussed the meanings behind potential names (though no names were revealed), how every child is unique, and how media's portrayal of labor and birth makes birth seem imminent after the first contraction, including in the I Love Lucy episode, which I discovered you had watched the day before.

After the many questions were asked by your nurse, we were told we could go back in. I asked whether you had passed the hospital's test. You replied, "Yes, I passed."

Dr. Umholtz came in soon thereafter and after getting an update on your status, she recommended breaking your water as a way to bring contractions closer together and stronger. You declined saying you preferred to wait. She replied that eventually they would need to break. You declined again stating that you wanted to wait until the pushing stage to have the waters ruptured because if they were broken earlier, you knew you would want an epidural. In all your labors, the waters did not break on their own, so you were anticipating the same with this one.

After she left, you said, "I think she took that news well."

I told you how proud I was that you stated your wishes calmly and firmly. Soon after, the nurses came in and said the Dr. Umholtz had ordered that you be started on Pitocin to induce labor.

"I guess she didn't take that news as well as I thought."

When the nurses asked if it was something you wanted to do, you said "no", but if you had to. It was at that moment that Jason asked you if it was something you really want, and you reaffirmed "No", you did not want Pitocin, but would rather walk or move around to bring contractions more regularly. There was a great partnership here, showing that you and Jason had discussed your wishes many times before, and he was standing up for you.

The nurses consulted with Dr. Umholtz, and when they returned, let you know you could labor in the room out of the bed, but that they wanted to continue monitoring the baby's heart-rate because it was in a higher range than it should be and they couldn't tell whether the contractions were causing that, or if it was the norm.

We suggested that you use the birth ball and rest your head on the bed. In that position your contractions immediately became closer together, approximately every 3 minutes, and you began to really focus during them. Between contractions, you carried on conversations with Jason, Karen and I as though nothing momentous was happening. It was impressive to see how you maintained composure on the birth ball, even though you knew it was bringing contractions closer together.

As they intensified, you began to feel shaky, and we recommended that you kneel in the bed and rest your head on the back. This would allow you to get some of the pressure off your back, and bring the baby forward since at this point your cervix was still posterior. You really labored well in this position, and felt relaxed enough to really sway and rock your hips during contractions.

When the nurses wanted to do an exam, they would ask you to lie on your back, and quickly check you between contractions, so that you did not experience a contraction lying down. You were now at a 6, but you were beginning to get closer to fully dilated because you were now having uncontrollable shaking, burps, and having to really work with contractions.

At 10:12, you began to feel even more pressure. Everyone in the room thought you were in transition from how the contractions were affecting you. You said "I don't like this part", and Jason immediately replied "You are doing awesome!" He stayed right by your side, and during contractions you looked to him for support.

When the nurse did another exam, you were 7 centimeters at this point, progressing really well ,and your cervix was moving forward from a posterior position.

Everyone in the room was trying to gauge from you whether you were ready to push and encouraging you to do what you felt was right. You felt even more pressure, but were beginning to feel a lot in your back as well as the baby moved even lower. At 10:50 the nurse did another exam, and said you were not quite complete. Since your previous babies were born before you were complete, Jason said he would like the doctor to come and see whether she would give you the go ahead to push soon.

It was around this time, you were also saying "Can I push soon?" and immediately following it saying "I don't want to push." Your body was bringing the baby lower and lower each time, and at 11:30, you said "something happened." From the tone of your voice, I assumed your water had broken, and the nurse confirmed that. It had broken all on its own.

The nurses asked whether they could do the internal fetal monitoring, because they were unable to monitor baby's heart rate while you were kneeling, or lying on your side. You agreed to it, but were very unhappy to lie on your back during it, knowing that with your contractions closer together they wouldn't get it placed in time for you to move back to kneeling. You had a

contraction immediately after the nurse told you that it wasn't placed correctly, and she would need to have someone else come in to place it.

Shortly after, another nurse was able to get the electrode placed and you were able to move back into the position you desired. You were beginning to feel overwhelmed and worried the baby wouldn't descend because this birth was so different than with your previous children. It seemed this baby was working very hard on proper positioning, but putting a lot of pressure on your back as they descended.

Jason encouraged you, letting you know that you had experienced this with all the others and then shortly after were able to push. Since a lot of your pain was in your lower back, I did counter-pressure and hip squeezes to lessen the intensity.

Soon after, you were adamant that you wanted something in the IV to relieve some of the pain. You knew that these sensations were different than with the others, due to your water being broken. The nurse let you know that since you were so far along, it was not good for the baby to have anything in an IV and that if you wanted relief you would need an epidural. You wanted relief any way possible, and the nurses called for the anesthesiologist, as well as the doctor.

Within ten minutes, Dr. Larry Stephens came in and started to ask you a variety of questions before placing the epidural. Jason stated that you didn't need a large dose because the last time you had one it made you completely numb and had negative side effects. Dr. Stephens said that it sounded like you had a spinal the first time, and that this would be very different.

You had two or three contractions during the time he was placing the epidural and were able to cope really well by rocking side to side and gripping the bed.

Once the epidural was in place, you began to feel slight relief and with each passing contraction had more and more relief. Within 20 minutes after having the epidural placed, you were able to completely relax and when the nurse/doctor did a check, you had only a rim of cervix remaining. She asked you to try pushing just to see how effective you were at bringing the baby down. At that point, she said she would allow you to continue laboring down since it would give you a chance to rest and let the effects of the epidural decrease some.

Dr. Umholtz declared that you would have a "baby soon."

Dr. Stephens came in to check on you and asked you how you felt now to which you responded “I feel awesome.” He then said epidurals are the way to go, and you replied that you wish you would’ve known about it earlier in labor. He also gave a brief tutorial on how an epidural and a spinal are placed in different locations, and how the effects are different as well.

During this time, Karen and I allowed you and Jason to rest. You began to talk to Jason about the baby, and asked him “So what do you think, boy or girl?” He replied, “I have my ideas, but I don’t want to jinx it by putting it out in the universe.”

Jason was using this time to also update your family that the baby would be here very soon, and told us how the family would find out the baby’s gender with an announcement featuring all the children. You also told us that each of your children had different ideas of what they thought the baby would be and what they wanted the baby to be. However, Grace was very certain she wanted a sister!

The nurse gave you an update at 1:40 p.m. that in 20 minutes, Dr. Umholtz would come in to see if you were ready to meet your baby. You used this time to rest even more knowing that soon you would be able to push, but enjoying the break from a little while longer.

When I returned to the room from grabbing a snack, the nurses and doctor were back in the room setting up for you to push. In the time that you had been resting, your body had brought your baby down to +2 station, which meant the baby’s head was visible without you pushing. Dr. Umholtz communicated to the nurse that she wanted the bed set up, so if you needed assistance getting the baby out due to shoulders, she would be able to do so quickly.

You didn’t need any help whatsoever! In less than 2 minutes and just a few pushes, your baby was out and ready to meet you. There was so much joy in the room, that I forgot that Jason was going to announce the baby’s sex; it seemed he forgot as well. When he did announce that the baby was a little girl, he asked whether he could also share her name. He said that her name was Olive, and I was completely thrilled. Jason went to the warmer with Olive while she was weighed and measured. When it was announced to the room, you immediately said how she was so similar to Alexander; even her length was the same.

Jason held Olive skin to skin while the nurse was checking on how you were feeling, and how you were recovering. Once the nurse was done, Jason gave you more time with Olive while you

continued to keep her skin to skin. You continued to comment that she was “just like Alexander” from her hair to her toes.

The children were welcomed into the room by Jason. Grace immediately smiled and went to give you a hug. The boys hung by their Dad a little bit more and were interested in seeing the new baby. “I think I know what it is” was Daniel’s statement, and Grace was held up so she could see the new baby and announce boy or girl.

“Girl!” and she beamed as she turned around to say it again, “A girl!”

Jason brought Olive back to you so she could continue to nurse, and she was crying very loudly. The boys were making exaggerated expressions and covering their ears in response to Olive’s cries. Grace got on the sofa with them and did the same, while I was able to get a photograph of all of them together. When you were sssshhing Olive she was very content, but in no hurry to nurse.

When we left, Alexander, Daniel, and Grace were reading books quietly, while Olive had settled down quietly, nestled on your chest. You were now a family of six, and you made it seem so effortless.

It was an absolute joy to be invited to the birth of Olive, and to support you as you and Jason worked together to welcome her to this world.

With great admiration,

Taylor Rhodes-Estrada and Karen Bianco