

# Second of three 'intensive care' nurseries to open

By DON MILLER

Sentinel Staff Writer

SANTA CRUZ — An "Intermediate Intensive Care Nursery" will open Tuesday at Dominican Hospital. Stepping beyond jargon, that means infants born prematurely or with illnesses classified as non-life threatening will be able to stay in a local hospital.

Watsonville Community Hospital already has such a facility. Community Hospital of Santa Cruz will open one in about three months, bringing to 20 the number of such nursery beds in Santa Cruz County.

With these nurseries, the hospitals themselves can take care of "preemies" or, say, infants with breathing difficulties, without putting families through the trauma of moving babies — and sometimes mothers — over the hill to larger hospitals.

But some question whether the new facilities mean a duplication of services — and resulting increased charges to consumers.

Are that many beds needed?

And, considering that Watsonville's nursery opened but one year ago, why has there been such a sudden explosion in the construction of such centers?

"So many of our mothers were being shipped out of Santa Cruz County — and if they weren't, the babies were," said Mary Wood, the manager of the pediatrics department at Dominican. She estimated "10 to 50" babies a year are transferred to Level 2 nurseries from Dominican.

Hospitals classify nurseries as Level 1 — no complications; Level 2 — prematurely born infants with at least 33 weeks of gestation and infants with illnesses that are not immediately life threatening; and Level 3 — premature babies with less than 32 weeks of gestation, and infants with heart problems, congenital abnormalities and life-threatening illnesses.

There are no Level 3 nurseries in Santa Cruz County. All the ICNNs, existing or planned, are Level 2. Before the Watsonville ICNN opened, the nearest such nurseries, either Level 2 or 3, were at Stanford, Good Samaritan Hospital in San Jose or Santa Clara Valley Medical Center.

"If we cut the number of cases transported by one half, this nursery is worth it," Wood said.

Wood estimated the nursery contains \$60,000 to \$70,000 of equipment. Included are six beds, including two intensive-care cribs fully self-contained including a life-support system; and four "isolettes," used to keep prematurely born infants warm and to facilitate their growth.

The intensive-care beds can hook up to a "gas track" that nearly encircles the 480-square-foot nursery. The track contains oxygen, air and suction, and has threaded nipples for quick tapping.

Wood said Dominican obstetricians wanted the nursery. "Obstetrics care in the Central Coast

area has gone the same way year after year," Wood said. "Stanford has played Big Brother to all of us. It's time we started doing this on our own."

Lonnie Truax will be the nurse in charge of the new nursery. Truax came to Dominican from Stanford Hospital, where for four years she supervised the ICNN.

"We received a lot of Santa Cruz County babies," Truax said. "It was said many times to me by Santa Cruz County families that we needed care over here."

She said transporting infants can be traumatic for parents, who have to drive back and forth over the hill. "A newborn nursery in any hospital is set up to take care of strictly healthy babies. Now, we're improving care for all newborns," Truax said.

She said many of the infants to be cared for in the ICNN will be patients who previous to the nursery would have stayed at the hospital anyway, but who will now receive better, more sophisticated care.

She walked into a small room filled with equipment where two prematurely born infants lay sleeping and said, "This will make life a lot easier."

"The biggest change will be in prematures," said Wood. "We've been quick to transport them before."

Six nurses have been sent to Stanford for training in areas such as nutrition and breast feeding for prematures, and infant stimulation. Truax said nurses working in the ICNN — three per shift — also will be available to work with healthy, normal newborns if the ICNN beds are not being used.

Dominican will present an open house from 1 to 4 p.m. Sunday introducing the new nursery.

"Dominican has always had a commitment to obstetrics," Wood said. "We've expanded and now we're really a birthing center. This is one more option — a high-tech option."

Truax said, "You just can't be a Level 1 anymore — unless you're really in the sticks."

"OB (obstetric) patients aren't sick," Wood said. "They have nine months to see what they want to do."

"I think you have to see what the needs of consumers are and address them. OB is business."

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But is it good business? According to data provided by Mid-Coast Health Systems Agency, a consumer watchdog and health planning organization that studies how hospitals in Santa Cruz, San Benito, Monterey and San Luis Obispo counties are utilizing the services they provide, 23 ICNN Level 2 beds are needed in the four counties. Twenty of those 23 will be in Santa Cruz County by the time Community finishes its ICNN, in about three months. That nursery will contain four beds.

"We're responding to the needs of patients," said Community Hospital

Administrator Jean Adams. "I think it's appropriate. Each hospital has a need for it."

Community's need may be more specialized than at the other two hospitals.

Adams said Community hopes to perform pediatric heart surgery and that the ICNN will be needed to care for heart patients. Such surgery would be in conjunction with Community's new heart-care center, the first stage of which has recently opened. Open-heart surgeries are scheduled to begin in six months, Adams said.

But a Watsonville Hospital doctor in charge of its ICNN did not agree with Adams' explanation of why Community Hospital needs an intensive-care nursery. "That's sheer nonsense. It blows my mind," said Dr. Wells Shoemaker. He said he was referring to the possibility of pediatric heart patients being sent to Community Hospital.

"Babies with congenital heart problems need to be taken care of in centers with trained staff and where hundreds of babies have been treated, places like Stanford, or UC-San Francisco or Santa Clara Valley Medical Center," he said.

"It's crazy," said Shoemaker, "to set up a four-bed unit. There is no way you can maintain staff."

Watsonville's intensive-care nursery has 10 beds, making it the largest ICNN in the county. Shoemaker said Community's planned nursery was "done for marketing purposes. They just don't want to be the only one without one. They don't have enough deliveries to warrant it."

Dominican, Shoemaker said, had a number of skilled pediatricians who

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Dan Coyro/Sentinel

## Dominican's Mary Wood and Lonnie Truax wheel "isolette" into new nursery.

would use the ICNN "responsibly." Watsonville, he said, had built a large facility for several reasons: the hospital is further away from Bay Area ICNNs; it has more births than other county hospitals; and because it serves a larger segment of lower-income families than the other two. Such families, he said, show a higher incidence of medical problems, including a greater possibility of premature birth.

A study compiled by Mid-Coast attorney and staffer Ted Bogue, however, refutes Shoemaker's contention about the number of births at Community Hospital. In 1984, Community had 1,090 births. Of those, 577 were in the hospital and 513 were at alternative birthing centers.

Dominican Hospital had 1,058 births in 1984, with 579 of those at the hospital and 479 at alternative birthing centers.

Watsonville recorded the most births in 1984 — 1,294, with all but 58 of those occurring at the hospital.

Community's 16-bed obstetrics ward had a 34.8-percent occupancy rate. Dominican, with 14 beds, showed 49.2-percent occupancy rate. Watsonville, 12 beds, had 80.5 percent occupancy rate.

Community recorded 40 infants born in 1984 with low birth weights, defined as under 2,500 grams. Six of those were under 1,500 grams.

Dominican had 27 births under 2,500 grams; seven of those were under 1,500 grams. Watsonville had 38 births under 2,500 grams with two of those under 1,500 grams.

David Wright, Executive Director of Mid-Coast, offered that it was "hard to say" if 20 ICNN beds were too many for Santa Cruz County. He did have some thoughts on why such nurseries are popular.

"It's occurring as a response to a changing, shrinking market," Wright said. "Hospitals are attempting to diversify and offer new services. There also is a medical malpractice crisis — premiums are going up on somebody different in the medical profession every year. Now it's gotten around to obstetricians. So if a difficult birth occurs, they want the capacity to take care of it."

He said ICNN services are expensive and that "the problem is where you have more supply than demand, it (artificially) creates more demand, the unit price goes up and charges are higher."

Wright said recent studies indicate a drop in the fertility rate. "We don't know if these beds will be used at the turn of the century," he said. "More high tech has come home. People will bear the cost."