

Table of Contents

How to Reach the Heart Center Team.....	2
Important phone number.....	2
MYchart.....	2
Clinic locations.....	2
 Caring for Your Child After Surgery.....	 3
Incision care after heart surgery.....	3
Helpful hints to help you remember red flags.....	5
 Your Child’s Heart.....	 6
Heart failure.....	6
Infective endocarditis.....	8
Cardiopulmonary resuscitation (CPR).....	11
 Support for Your Child.....	 15
Finding mental health services.....	15
Cardiac Neurodevelopmental Program (birth to preschool age).....	16
Complete developmental care for your school aged child.....	17
 Heart Center Programs.....	 20
Kids at Heart.....	20
Feed the Mind.....	21
Feed the Heart.....	21
Feed the Mom.....	22
Ollie’s Branch.....	22
 Notes.....	 23

How to Reach the Heart Center Team

Important phone number

Call 404-256-2593 for questions or concerns. You can reach someone 24 hours a day, 7 days a week.

You can also send a MYchart message to your child's care team for non-urgent issues. Please allow time for the team to respond.

In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.

MYchart

MYchart is a way to communicate with the care team about your child's care. MYchart can be used for:

- Routine questions.
- Prescription refills.
- Obtaining limited lab results and medical information.

You can sign up for a MYchart account during your visit or from home at any time. Please visit choa.org/MYchart to learn more. If you have urgent issues, please contact your child's doctor right away. Do not use MYchart for urgent issues or concerns.

Clinic locations

We have many clinics. Go to choa.org/medical-services/heart-center to learn more about our locations.

Caring for Your Child After Surgery

Incision care after heart surgery

Your child's incision will need special care after your child leaves the hospital. Please follow the doctor's advice and these guidelines to help your child's incision heal.

How do I care for my child's incision?

- Your child may take a bath or shower. Wash the incision and chest tube sites gently every day with soap and water. Then rinse and pat dry.
 - Do this 1 time each day for the first 14 days after surgery.
 - Only use fresh water from the sink on your child's incision.
 - Do not soak the incision or let it stay under water.
- Do not put any lotion, cream or ointments on the incision or chest tube sites. You may put sunscreen on the incision after 2 weeks.
- Your child's incision may itch. Itching is normal and is part of the healing process.
- At first, the incision will be slightly raised with a small amount of redness. The swelling and redness will go away over time.
- You can take a picture of your child's incision on the day you leave the hospital. Then you can use the picture at home to help see changes in the incision.

What is covering the incision?

Your child may have a dressing that covers their incision. You will remove the dressing at home.

Your child may have 1 of the dressings listed below. Talk with the doctor about your child's dressing.

- Dermabond is a clear skin adhesive that holds the skin edges together and provides a protective barrier.
 - Do not pick at the Dermabond.
 - Remove the dressing 14 days after surgery. See your "How to Remove Dermabond" sheet for more details.
- Dermabond Prineo is a self-adhesive mesh that holds the skin edges together and provides a protective barrier.
 - Remove the dressing 14 days after surgery. See your "How to Remove Dermabond Prineo" sheet for more details.

When should I call the doctor?

Call your child's doctor **right away** if you see signs of infection, such as:

- Increased swelling.
- Increased redness around the incision or chest tube sites or red streaks moving away from these sites.
- Increased pain or tenderness.
- Drainage or bleeding from the incision.
- A bad smell from the incision.
- Your child has a fever over 100.5°F.

Also call your child's doctor if:

- The incision opens or separates.
- You have any questions or concerns about how your child looks or feels.

What type of activity can my child take part in?

The bony part of the chest was separated in surgery. It takes 6 weeks for the bones in the chest to fully heal. Talk with the doctor about specific care for your child. Some guidelines are listed below.

School and day care

- Most children may return to school or day care after the first post-operative (post-op) visit with the surgeon. This visit is most often 1 week after discharge from the hospital.
- Your child should not carry a backpack for 6 weeks.
- Your child may not lift more than 5 pounds for 6 weeks.
- Most children may go to PE after 6 weeks. Ask the doctor when your child may return to PE classes.

Play and sports

- Encourage your child to walk and return to their normal routine as they are able. Your child may feel like playing the first day you are home. They may walk up and down stairs.
- Do not pull your child by their arms, and do not pick them up under their arms for 6 weeks.
- Avoid sharp blows to the chest. Do not let your child play contact sports (like football, basketball and soccer) for 6 weeks.
- Do not let your child play games that could cause something to hit their chest for 6 weeks. This includes jumping on the trampoline, doing karate, wrestling and playing on monkey bars.
- If they get physical therapy (PT), your child may return and follow guidelines given to you in the hospital.

- For babies:
 - Encourage tummy time while awake and supervised. There are no problems with babies rolling onto their tummies.
 - You may burp your baby on your shoulder or hold them on your knee as you support their head and neck.

Cars and trucks

- Your child should always wear a seat belt in the car. Always use an infant car seat or booster seat until a child reaches the height or weight limit.
- Do not place any padding on or around the seat belt or car seat straps.
- Teens should not drive for 6 weeks.

Swimming

- Your child may swim in a chlorine or saltwater pool after 2 weeks, or as advised by the surgeon.
- Your child may swim in a lake, river or ocean after 2 months.

Helpful hints to help you remember red flags

It is important to pay attention to your child's symptoms and behaviors, so you know when to call the Heart Center. Use these ABCs to help you know when to call.

A ppetite	Is your child feeding like usual today? Are they refusing to eat or taking longer to eat? Have they vomited or had diarrhea more than 2 times in one day?
B reathing	Is your child breathing well? Are they breathing harder or faster than normal? Do they have grunting, head-bobbing or flaring nostrils?
C olor	Is your child's color normal for them? Do they have a pale, gray or blue color to their face, lips or hands while resting?
D	We don't have a "D"
E nergy	Does your child have their normal energy level? Are they sleeping more or responding less than usual?
F ever, F ussy	Does your child have a temperature of 100.5°F or higher? Is your child fussy or irritable? Have you tried all calming tricks but still cannot calm down your child?

Call 404-256-2593 to reach Children's Healthcare of Atlanta Cardiology as needed.

You can use this number 24 hours a day, 7 days a week.

Your Child's Heart

Heart failure

What is heart failure?

Heart failure happens when the heart does not fill or pump like it should. This may affect your child's growth and development. The heart needs to pump enough blood to the body, so all organs get the blood flow and oxygen they need to work well. This includes your child's brain, liver, lungs, kidneys and other organs.

What causes it?

Heart failure can happen at any age and for many reasons. The doctor will talk with you about the cause of your child's heart failure. Common causes include:

- Congenital heart defect – this happens when the heart or blood vessels near the heart do not form as they should before birth. This can cause the heart muscle to not work normally.
- Cardiomyopathy – this is a heart muscle problem that a child can be born with or can be caused by other diseases. There are many types of cardiomyopathy.
- Myocarditis – this happens when infections or inflammatory disorders injure the heart muscle.
- Cardiotoxicity – this is a muscle injury caused by certain medicines or treatments, such as chemotherapy (chemo) and radiation.

What are the possible symptoms?

Your child may have 1 or more of these symptoms. The most common symptoms of heart failure are listed below.

Possible symptoms	Babies and toddlers	Older children and teens
Feeding problems	<ul style="list-style-type: none">• Will not eat• Falls asleep while eating or taking a bottle• Needs breaks often while feeding• Takes longer to feed than normal• Has trouble breathing while eating• Sweats while feeding• Has nausea (upset stomach)• Vomits (throws up)• Has belly pain	<ul style="list-style-type: none">• Will not eat• Does not eat as much as normal• Has nausea (upset stomach)• Vomits (throws up)• Has belly pain

Possible symptoms	Babies and toddlers	Older children and teens
Breathing problems	<ul style="list-style-type: none"> Breathes faster than normal Has signs of trouble breathing, such as: <ul style="list-style-type: none"> Heavy breathing Grunting noises when your child breathes air out of their nose or mouth Head bobbing Flaring nostrils Retractions, which is when the skin pulls in their neck, between the ribs or below the ribs with each breath Lasting cough that is not from allergies or sickness with fever 	<ul style="list-style-type: none"> Breathes faster than normal Has signs of trouble breathing, such as: <ul style="list-style-type: none"> Heavy breathing Grunting noises when your child breathes air out of their nose or mouth Flaring nostrils Retractions, which is when the skin pulls in their neck, between the ribs or below the ribs with each breath Not able to lie flat to sleep Lasting cough that is not from allergies or sickness with fever
Skin and weight changes	<ul style="list-style-type: none"> Has pale, blue, gray or blotchy skin Has sweaty skin, most often around your child's hairline Has swelling of the eyelids, face, hands, belly, legs, ankles or feet Does not gain weight 	<ul style="list-style-type: none"> Has pale, blue, gray or blotchy skin Has swelling of the face, hands, belly, legs, ankles or feet Unexplained weight gain Unexplained weight loss
Energy level changes	<ul style="list-style-type: none"> Sleeps more than normal Does not wake up to play like normal Falls asleep while eating or taking a bottle 	<ul style="list-style-type: none"> Feels so tired that they do not play like they would on a good day Cannot keep up with other kids their age when playing or doing activities Needs breaks often when playing or doing activities
Unexplained fever	<ul style="list-style-type: none"> Call for any fever of 100.5°F or higher 	<ul style="list-style-type: none"> Call for any fever of 100.5°F or higher

What is the treatment?

Your child's doctor will talk with you about specific care for your child. Your child's doctor may advise for:

- Rest.
- Medicines to help your child's heart pump better and help their body get rid of the fluid. Give medicines as advised by your child's doctor.
- Surgery if needed to improve how the heart works.

When should I call the doctor?

Call your child's cardiologist (heart doctor) **right away** if:

- Your child complains of pain in their chest.
- Your child has:
 - Any breathing or feeding problems.
 - Changes in skin color.
 - Swelling of the eyelids, hands or feet.
 - Unexplained fever.
 - Changes in energy level or ability to do activities.
- You have any questions or concerns about how your child looks or feels.

Infective endocarditis

What is infective endocarditis?

Infective endocarditis is an infection of the:

- Lining of the heart, or
- Valves of the heart, or
- Blood vessel

It is not common, but it can cause serious heart damage. It is also called bacterial endocarditis.

What causes it?

Infective endocarditis is caused when bacteria (germs) enter the heart through the bloodstream. Germs normally live in certain parts of our body. When germs get into the bloodstream, they can stick to heart tissue or valves.

- These tissues give germs a surface to attach and grow.
- After heart surgery or heart catheterization (heart cath), germs can stick to areas where there are patches, valves or artificial devices.

What are the possible symptoms?

Your child may have 1 or more of these:

- Chills or fever that does not go away after 2 to 3 days
- Tiredness or weakness that does not improve
- Joint or muscle aches and pain
- Night sweats
- Nausea (upset stomach) or vomiting (throwing up)

How is it diagnosed?

If the doctor thinks your child may have infective endocarditis, the doctor may have your child get:

- Blood tests to find out if there are germs in your child's bloodstream. These tests are called blood cultures.
- An echocardiogram, also called an echo. This is a test that takes pictures of the heart using sound waves.

What is the treatment?

If your child has infective endocarditis, the doctor will talk with you about specific treatment. This may include:

- A hospital stay.
- Treatment with intravenous (I.V.) antibiotics. Your child may also need to take oral (to swallow) antibiotics for several weeks.
- Surgery, if needed, to repair any damage to the heart.

Can it be prevented?

Not all cases of infective endocarditis can be prevented. Germs always live and grow inside the mouth, on the skin and in other areas of the body.

Some children may need to take antibiotics **before** they have certain treatments. This includes treatments or procedures that involve:

- Teeth and gums (dental)
- Airway and lungs (respiratory tract)
- Muscles and bones (musculoskeletal system)
- Infected skin

All children who have had heart surgery need to take antibiotics before these treatments and procedures for at least 6 months. Your child's cardiologist (heart doctor) will talk with you about how long your child will need to do this.

Based on American Heart Association (AHA) guidelines, only children with high risk heart disease need antibiotics before treatments and procedures for longer than 6 months. This includes those who have:

- An artificial heart valve.
- Had endocarditis in the past.
- Congenital heart disease for these 3 conditions:
 - Cyanotic (blue) congenital heart disease that has not been fully repaired yet. This includes children with shunts and conduits.
 - A congenital heart defect that has been repaired with a new valve or other device. This includes repairs done by surgery or a catheter. These children are at risk for 6 months after the surgery or procedure.
 - A congenital heart defect that has been repaired, but that still has a defect at or close to the repair site. This includes repairs done with a patch, valve or other artificial device.
- A heart transplant with heart valve disease.

Antibiotics are no longer routinely used for heart patients who have procedures on their stomach, intestines, kidneys or bladder.

How do I get antibiotics for my child before a procedure?

Your child's dentist, pediatrician or heart doctor can give you a prescription for antibiotics.

- Your child should swallow the antibiotic before the procedure as directed by your child's doctor or dentist.
- Before the procedure, tell your child's dentists or doctors what type of heart problem your child has.
- Also make sure your child's dentists and doctors know about any allergies your child has.

How else can I help my child?

You help when you practice good health habits, such as:

- Having your child and everyone in your family wash their hands often during the day. This includes after using the bathroom, after changing a diaper and before eating. You may also use an alcohol-based gel or foam if you do not see dirt on your hands.
- Having your child brush and floss their teeth each morning and before bed. Make sure your child gets regular dental check-ups.

Talk with your child's heart doctor if you have any questions about whether or not your child needs antibiotics.

Talk with your child's pediatrician or heart doctor if you have questions or concerns about how your child looks or feels.

Cardiopulmonary resuscitation (CPR)

Tap and shake the person to see if they respond. If they do not respond:

- Tell someone to call 911 and to get an AED (if another person is nearby). Then, begin CPR using the C-A-B guidelines below.
- Call 911 before starting CPR if you are alone with an adult. Or, call while you are doing CPR if you have a cell phone, and put it on speaker.
- If you are alone with a baby or child, do 5 sets of 30 compressions and 2 breaths first before leaving to call 911. You can call sooner and while doing CPR if you have a cell phone with you at the time.

C Begin **CHEST COMPRESSIONS** if the person shows no signs of life, such as coughing, moving or breathing.

A Open the **AIRWAY** by lifting the chin and tilting the head back.



B Give 2 **BREATHS**, just enough to make the chest rise.


Continue CPR using the guidelines below until help arrives and they tell you to stop or until the person shows signs of life, such as coughing, moving or breathing. If someone brings an AED before help arrives, open it, turn it on and follow the prompts. It is very important to make sure everyone follows the AED's instructions when it says not to touch the person.



	Baby	Child and adult
Age	Birth to 1 year old	Child (1 year old to puberty) Adult (anyone past puberty)
Chest compressions	100 to 120 compressions per minute	
Number of chest compressions and breaths	30 compressions and 2 breaths (each cycle)	
Chest compression depth (must be on a hard surface)	Push hard and fast, about one-third total depth of chest — around 1 ½ inches. Allow chest to come all the way up each time.	Push hard and fast, about one-third total depth of chest — around 2 inches for children and at least 2 inches for adults. Allow chest to come all the way up each time.


	Baby	Child and adult
Hands	Use 2 fingers or 2 thumbs (using encircling technique) on breastbone, just below nipple line. If unable to push down about one-third total depth of chest, use heel of 1 hand instead.	For small children, use heel of 1 hand on the breastbone between the nipples. For larger children and adults, use 2 hands stacked on top of each other. You can always use 2 hands if 1 hand seems difficult.

C-A-B guidelines

	Baby	
C Compressions		<ul style="list-style-type: none"> • Use 2 fingers or 2 thumbs (using encircling technique) on breastbone, just below nipple line. If unable to push down about one-third total depth of chest, use heel of 1 hand instead. • Push hard and fast — at least 100 times per minute. Count out loud. • Allow chest to come all the way up each time.
A Airway		<ul style="list-style-type: none"> • Put 1 hand on the baby's forehead. With your other hand, put 2 fingers under the baby's chin and gently tilt the head upward. • Avoid tilting the head too far back.

<p>B Breathing</p>	 <ul style="list-style-type: none"> • Do 30 compressions and then give 2 breaths. • Cover the baby's nose and mouth with your mouth. • Each breath should be just enough to make the chest rise and should last only 1 second. • Continue CPR using C-A-B guidelines until help arrives and they tell you to stop or until the baby shows signs of life. • If someone brings an AED before help arrives, open it, turn it on and follow the prompts.
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	Child and adult
<p>C Compressions</p>	 <ul style="list-style-type: none"> • For small children, use heel of 1 hand on breastbone between the nipples. • For larger children and adults, use 2 hands. • Push hard and fast — at least 100 times per minute. Count out loud. • Allow chest to come all the way up each time.
<p>A Airway</p>	 <ul style="list-style-type: none"> • Open the airway by lifting the chin and tilting the head back. • Put your hand on the chin — not on the throat or airway.

<p>B Breathing</p>	 <ul style="list-style-type: none"> • Do 30 compressions and then give 2 breaths. • Cover the child or adult's mouth with your mouth while you pinch the nose closed with your fingers. • Each breath should be just enough to make the chest rise and should last only 1 second. • Continue CPR using C-A-B guidelines until help arrives and they tell you to stop or until the person shows signs of life. • If someone brings an AED before help arrives, open it, turn it on and follow the prompts.
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Hands only CPR

A compression-only method of CPR called hands-only CPR may be used by lay rescuers for adults who suddenly collapse. In hands-only CPR:

- If others are nearby, tell someone to call 911 and get the AED. If alone, go call 911 first if you do not have a cell phone with you. If you have a cell phone with you, put it on speaker, dial 911 and begin hands-only CPR. It is very important to make sure everyone follows the AED's instructions when it says not to touch the person.
- Begin chest compressions, and keep doing them nonstop until medical help arrives and takes over.
- If someone brings an AED before help arrives, open it, turn it on and follow the prompts.

Hands-only CPR is not advised when CPR is needed for oxygen-related reasons. This includes drowning, choking, allergic reactions, overdose of narcotics or sedatives (medications) and breathing trouble that causes someone to pass out. **Because most babies and children need CPR for oxygen-related reasons, regular C-A-B CPR guidelines should be used.** Hands-only CPR should only be used for babies and children if the lay rescuer cannot give breaths.

Support for Your Child

Finding mental health services

It is common for children and parents to have symptoms of anxiety, depression, and/or traumatic stress when dealing with a cardiac problem. There are many ways to help you and your child cope.

These symptoms may suggest the need for mental health services:

- Symptoms of depression
 - Feeling sad, empty and hopeless most of the time
 - Difficulty getting out of bed or completing daily tasks
 - Not enjoying things that used to be fun
 - Trouble sleeping or sleeping too much
 - Trouble focusing or making decisions
 - Eating too much or too little
 - Recurrent thoughts of death
- Symptoms of anxiety
 - Constant worry that something is wrong
 - Avoiding situations
 - Muscle tension
 - Feeling tired all of the time
 - Sweating
 - Feeling of heart racing or pounding
 - Fast breathing or hyperventilation
- Symptoms of traumatic stress
 - Exposure to traumatic event
 - Frequent, upsetting memories and/or dreams of traumatic event
 - Avoiding reminders of traumatic event
 - Negative thinking or mood
 - Irritable behavior, angry outbursts or sleep problems

Please let your care team know if you or your child are experiencing symptoms so that you can be referred to the cardiac social worker and/or psychologist.

To find mental health services outside of the hospital, contact your insurance company to see what providers are in-network.

You can also go to [psychologytoday.com](https://www.psychologytoday.com) to do a search for in-network providers who specialize in pediatric or health psychology.

988 Suicide & Crisis Lifeline is a national hotline that provides free mental health crisis support 24 hours a day, 7 days a week. You can call or text 988 to connect with a trained crisis counselor.

Cardiac Neurodevelopmental Program (birth to preschool age)

After healing your child's heart, we can help their mind.

For children from birth through preschool age

Our experts at Children's Healthcare of Atlanta can help kids with heart conditions work through developmental issues.

Why does my child need this care?

Children with heart conditions are more likely to have delays or difficulties with typical developmental skills.

How does a heart condition affect a child's development?

A child's brain needs a healthy heart. Children with heart conditions may have problems with:

- Feeding and sleeping.
- Learning to sit, walk, run and jump.
- Making clear speech sounds and words.
- Following simple directions.
- Talking with longer phrases and sentences.
- Using fingers for small tasks like eating.
- Calming down after crying.
- Frequent tantrums.
- Playing and sharing with other children.
- Separating from a preferred caregiver.
- Adjusting to change or new situations.

Other health issues may also affect your child's behavior or ability. These may become worse as your child gets older. It is important to treat these issues early.

Who will evaluate my child?

You and your child will meet with a pediatric psychologist, who is a psychologist with extra training to understand how medical conditions affect development and adjustment. The pediatric psychologist will use tools to assess your child's thinking, communication and motor skills.

How can this evaluation help?

The goal of the evaluation is to find your child's strengths and problem areas to help improve developmental skills.

What will my child's visit be like?

Your child's visit will take place in the neuropsychology department. You will be given several forms to complete. During your child's visit, we will interact and play with your child using toys, pictures and other objects. We will work with you to make sure your child is comfortable during the evaluation. The appointment will last 1 to 2 hours.

At the end of the evaluation, we will:

- Review the results with you.
- Make a plan to help your child at home and in the community.

Your child's care plan may involve a referral to:

- Our Rehabilitation Program, which includes feeding, physical therapy, occupational therapy and speech-language pathology.
- The Georgia Department of Public Health's Babies Can't Wait Program.
- The Early Intervention Program in your area.

For more information:

- Visit choa.org/medical-services/heart-center/cardiac-neurodevelopmental-program.
- Call 404-785-2849 to schedule a visit.

Complete developmental care for your school aged child

Why does my child need this care?

Children with heart conditions are more likely to have problems with attention and learning.

How does a heart condition affect a child's development?

A child's brain needs a healthy heart. Children with heart conditions may have problems with:

- Thinking and learning
- Attention
- Language
- Handwriting
- Reading and math

Your child may also have issues with:

- Impulsivity
- Hyperactivity
- Decision-making
- Problem-solving
- Friendships

Other health issues may also affect your child's behavior or abilities. These may become worse as your child gets older. It is key to treat these issues early.

What is a neuropsychologist?

A neuropsychologist is a psychologist with extra training to understand how the brain controls thoughts, actions and feelings. The neuropsychologist works with doctors and teachers to better understand your child's experiences and get them the help they need.

How can a neuropsychologist help?

This doctor finds your child's strengths and problem areas to help them improve at home and school.

What will my child's visit be like?

Before your child's visit, we will:

- Review your child's medical or school records.
- Meet with you to learn about your child's family, social and medical histories.
- Ask you and your child's teacher to fill out forms about their learning, focus and behavior.

During your child's visit, we will give your child:

- Written tests
- Picture-based tests
- Audio tests

This will take 1 to 5 hours to finish. The number of tests is based on your child's needs.

A few weeks after your child's visit, we will:

- Review the results with you.
- Make a plan to help them at school and home.
- Send you a report with their plan and any test results.

Your child's care plan may involve doctors, teachers and others who care for your child.

For more information:

- Visit choa.org/medical-services/heart-center/cardiac-neurodevelopmental-program.
- Call 404-785-2849 to schedule a visit.

Heart Center Programs

Kids at Heart

Offering support, guidance and special events designed for families who have a child with a heart defect, Children's Healthcare of Atlanta Kids at Heart brings heart families together to learn and find community.



Learn about your child's future

- **Parenting Your Heart Child Conference:** Learn how to care for children with heart defects.
- **Cardiac Teen Retreat:**
Help prepare your heart teen to transition to adult care, while also building leadership and teamwork skills.

Meet other families

- **Family dinners:** Connect with other heart families through monthly support dinners at Arthur M. Blank Hospital.
- **Kids at Heart Facebook page:** Join our private, closed group to virtually meet and speak with Children's staff and other heart families.

Support for the whole family

- **Camp Braveheart:** A week-long camp designed for heart kids, with cardiologists and cardiac nurses on staff.
- **Teen events:** Opportunities for teens to build friendships, have fun and learn about congenital heart disease.
- **Events for parents and siblings:** Special events, such as Mom's and Dad's Days Out and Cardiac Sibling Day, provide each family member with a supportive event just for them.

To register, visit choa.org/kidsatheart.

Feed the Mind

Upon admission to the Children's Healthcare of Atlanta Heart Center, babies from 0 to 12 months old receive a bag containing 2 age-appropriate books so that family members and caretakers can begin reading to them. Families also receive an age-appropriate developmental toy to assist with their child's neurodevelopmental health.

Reading to infants and babies is critical to their neurodevelopment, and it helps them build communication, listening and memory skills at an early age. By the time babies reach their first birthday, they have typically learned all the sounds needed to speak their native language. The more stories you read aloud, the more words your baby will hear, which will improve your child's speaking abilities.



Reading to your baby also:

- Helps parents create a bond with their child.
- Introduces concepts, such as numbers, letters, colors and shapes, in a fun way.
- Builds vocabulary skills.
- Gives babies information about the world around them.

Feed the Heart

Feed the Heart provides meals, snacks and drinks for Heart Center patients and their families during hospital stays so families do not have to worry about food and can focus on caring for their child. Since its beginning in 2015, Feed the Heart has served meals to more than 9,000 people. It is 100% funded by the generosity of donors.

Weekly dinners

Dinner is provided by Feed the Heart, typically 1 time each week, to families staying in the Heart Center. Boxed meals are served out of the family lounge on the 4th floor (CICU). Families staying in the CACU (floor 5) will take the elevator one floor down to get a meal. Volunteers are able to help bring meals to your room if needed.



Food pantry

The Feed the Heart food pantry provides drinks, snacks and nonperishable food items that Heart Center patients and families can access throughout the day. A food cart is also available for patients and families behind the unit secretary desks.

Feed the Mom

The Feed the Mom Program is a support program for mothers of babies in the Heart Center at Children’s Healthcare of Atlanta. Babies in the CICU are often admitted directly from the birth hospital, which can delay bonding between mother and baby. Feed the Mom helps mothers and infants by providing emotional support, breastfeeding support, mental health resources and donor-funded care packages that include an encouraging note from a fellow heart mom. A heart mom support group is offered once a month for all inpatient moms.



Ollie’s Branch

Made possible by the Brett Boyer Foundation, Ollie’s Branch mission is “to offer compassionate, accessible mental health support to allow peace of mind for families and caregivers of children with or affected by pediatric heart disease.”

Children with pediatric heart disease are more likely to struggle with mental health. Ollie’s branch provides accessible therapy sessions.

Their services are for children, their parents, siblings, grandparents and other primary caregivers. Services include:

- 8 therapy sessions
- Confidential support
- Local resources
- Simplified access to therapy

To learn more, email olliesbranch@theohhf.org or visit www.theohhf.org/ollies-branch.

[illegible]

This handbook should not replace instructions given to you by your child's doctor and healthcare team. It is not meant to be medical advice or a complete source of all information about this subject. Your child's doctor is the best source of information about what is best for your child's treatment and care.

Health-related information changes frequently, and therefore information contained in this handbook may be outdated, incomplete or incorrect. This handbook may contain printed material that has been updated by Children's Healthcare of Atlanta. Please talk with a member of your child's healthcare team if you need an up-to-date copy.

Children's Healthcare of Atlanta has not reviewed all of the sites listed as resources and does not make any representations regarding their content or accuracy. Children's Healthcare of Atlanta does not recommend or endorse any particular products, services or the content or use of any third-party websites, or make any determination that such products, services or websites are necessary or appropriate for you or for the use in rendering care to patients. Children's Healthcare of Atlanta is not responsible for the content of any of the above-referenced sites or any sites linked to these sites. Use of the links provided on this or other sites is at your sole risk.

Call 911 or go to the nearest emergency department right away in case of an urgent concern or emergency.

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Children'sSM
Healthcare of Atlanta

Children's Healthcare of Atlanta

Nondiscrimination Statement

Discrimination is against the law. Children's complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. Children's does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

Children's Healthcare of Atlanta:

Provides people with disabilities reasonable modifications and free appropriate auxiliary aids and services to communicate effectively with us, such as:

- Qualified sign language interpreters.
- Written information in other formats (large print, audio, accessible electronic formats).

Provides free language assistance services to people whose primary language is not English, including:

- Qualified interpreters.
- Information written in other languages.

If you need any of these services, contact Children's Civil Rights Coordinator at **404-785-4545**.

If you believe that Children's has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance with:

Children's Civil Rights Coordinator
1575 Northeast Expressway NE
Atlanta, GA 30329
404-785-4545
section1557coordinator@choa.org

If you need help filing a grievance, Children's Civil Rights Coordinator is available to help you.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services Office for Civil Rights electronically through the Office for Civil Rights complaint portal, available at **ocrportal.hhs.gov/ocr/portal/lobby.jsf**, or by mail or phone at:

U.S. Department of Health and Human Services
200 Independence Ave. SW
Room 509F, HHH Building
Washington, DC 20201
800-368-1019
800-537-7697 (TDD)

Complaint forms are available at:

<http://www.hhs.gov/ocr/office/file/index.html>

This notice is available at **choa.org**.

Language Assistance Services and Auxiliary Aid Services

English

ATTENTION: If you speak English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Call 404-785-4545 or speak to your provider.

Spanish

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Llame al 404-785-4545 o hable con su proveedor.

Vietnamese

LƯU Ý: Nếu quý vị nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các dịch vụ và phương tiện hỗ trợ phù hợp để cung cấp thông tin theo các định dạng dễ sử dụng cũng được cung cấp miễn phí. Vui lòng gọi theo số 404-785-4545 hoặc trao đổi với người cung cấp dịch vụ của quý vị.

Korean

주의: 한국어를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 방식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 404-785-4545 번으로 전화하거나 서비스 제공업체에 문의하십시오.

Chinese

注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。请致电 404-785-4545 或咨询您的服务提供商。

Gujarati

ધ્યાન આપો: જો તમે ગુજરાતી બોલતા હો તો મફત ભાષાકીય સહાયતા સેવાઓ તમારા માટે ઉપલબ્ધ છે. સુલભ ફોર્મેટમાં માહિતી પૂરી પાડવા માટે યોગ્ય સહાયક સાધનો અને સેવાઓ પણ વિના મૂલ્યે ઉપલબ્ધ છે. 404-785-4545 પર કોલ કરો અથવા તમારા પ્રદાતા સાથે વાત કરો.

Language Assistance Services and Auxiliary Aid Services

French

ATTENTION : Si vous parlez français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et des services auxiliaires appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Appelez le 404-785-4545 ou parlez à votre fournisseur de services.

Amharic

ማሳሰቢያ፡- አማርኛ የሚናገሩ ከሆነ፣ የቋንቋ ድጋፍ አገልግሎት በነፃ ይቀርብልዎታል። መረጃን በተደራሽ ቅርጸት ለማቅረብ ተገቢ የሆኑ ተጨማሪ እገዛዎች እና አገልግሎቶች እንዲሁ በነፃ ይገኛሉ። በስልክ ቁጥር 404-785-4545 ይደውሉ ወይም አገልግሎት አቅራቢዎን ያናግሩ።

Hindi

ध्यान दें: यदि आप हिंदी बोलते हैं, तो आपके लिए निःशुल्क भाषा सहायता सेवाएँ उपलब्ध हैं। सुलभ प्रारूपों में जानकारी प्रदान करने के लिए उपयुक्त सहायक साधन और सेवाएँ भी निःशुल्क उपलब्ध हैं। 404-785-4545 पर कॉल करें या अपने प्रदाता से बात करें।

Haitian

ATANSYON: Si'w pale Kreyòl, sèvis assistans lang ou disponib pou ou gratis. Èd ak sèvis oksilyè apwopriye pou bay enfòmasyon nan fòm akse sib yo disponib gratis tou. Rele nan 404-785-4545 oswa pale avèk founisè ou.

Russian

ВНИМАНИЕ: Если вы говорите на русском, вам предоставляются бесплатные услуги языковой поддержки. Также бесплатно предоставляются соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах. Позвоните по телефону 404-785-4545 или обратитесь к своему поставщику услуг.

Arabic

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على الرقم 404-785-4545 أو تحدث إلى مقدم الخدمة.

Language Assistance Services and Auxiliary Aid Services

Brazilian Portuguese

ATENÇÃO: Se você fala português do Brasil, serviços gratuitos de assistência linguística estão disponíveis para você. Auxílios e serviços auxiliares, apropriados para fornecer informações em formatos acessíveis, também estão disponíveis gratuitamente. Ligue para 404-785-4545 ou fale com o seu provedor.

Telugu

గమనించండి: మీరు తెలుగు మాట్లాడితే, మీకు ఉచిత భాషా సహాయ సేవలు అందుబాటులో ఉంటాయి. యాక్సెస్ చేయగల ఫార్మాట్‌లలో సమాచారాన్ని అందించడానికి తగిన సహాయక చర్యలు మరియు సేవలు కూడా ఉచితంగా అందుబాటులో ఉంటాయి. 404-785-4545 కి కాల్ చేయండి లేదా మీ ప్రొవైడర్‌తో మాట్లాడండి.

German

ACHTUNG: Sie haben Anspruch auf kostenlose Sprachdienste, wenn Sie Englisch sprechen können. Kostenlose Dienstleistungen und Hilfsmittel, die geeignet sind, Informationen in zugänglicher Form zu vermitteln, werden ebenfalls angeboten. Sprechen Sie mit Ihrem Anbieter oder rufen Sie die Nummer 404-785-4545 an.

Tamil

கவனிக்க: நீங்கள் ஆங்கிலம் பேசுபவராக இருப்பின், இலவச மொழி உதவி சேவைகள் உங்களுக்கு வழங்கப்படும். எளிதில் அணுகக்கூடிய வகையில் தகவல்களை வழங்குவதற்கான பொருத்தமான துணை உதவிகளும் சேவைகளும் இலவசமாகக் கிடைக்கின்றன. இந்த சேவையை பெற 404-785-4545 என்ற எண்ணிற்கு அழைக்கவும் அல்லது உங்கள் வழங்குநரிடம் கலந்துரையாடவும்.