Back to sleep

SOT
Cristy Shafer, obstetrics manager at OSF HealthCare Heart of Mary Medical Center in Urbana, Illinois

"There's actually a larger airway opening [when on their back]. So they are able to either swallow back down what they have in there or actually cough it up and get it out of the airway. If they're on their tummy, you're decreasing that opening of the airway. The other part is if they put their head straight down, they're putting their head straight down into whatever they're lying on top of. So you decrease the amount of air that they're able to get in. Whereas when you're lying on the back, you don't have that as an option." (:26)

SOT
Cristy Shafer, obstetrics manager at OSF HealthCare Heart of Mary Medical Center in Urbana, Illinois

"In today's society, we're looking at what we're spending a lot more closely because of how the economy is. So if I am going to borrow great grandma's crib or grandma's crib, it might not be up to code for what those slats are supposed to be. So we want to make sure that we are having safe, quality things in the home as far as the sleeping environment." (:19)

SOT
Cristy Shafer, obstetrics manager at OSF HealthCare Heart of Mary Medical Center in Urbana, Illinois

"Parents are tired. When they finally get that chance to sleep, they're not easy to arouse most of the time. You find breastfeeding moms are a little bit easier to arouse because they're so used to waking up when that baby's crying and rolling over and trying to get the feeding going. But oftentimes, if that baby's sleeping longer periods, if it's got more of the formula or milk in its stomach, it's going to sleep longer also. [Adults] get to that deep sleep pattern and you're not aware when you're rolling around the bed. So you can have those times when the parents have actually rolled over on top of the infant and not know that they've done that. Or the babies rolled up so close against them that they've had issues getting air." (:37)