



# Pregnancy Planner

*Essential Insight on Prenatal Care,  
Your Hospital Stay & More*

 **ENLOE**  
HEALTH



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# Prenatal Visits

During your pregnancy, you'll see your obstetric provider or midwife regularly:

- Every four weeks until your 28th week of pregnancy
- Every two weeks after that until your 36th week of pregnancy
- Then every week after that until your delivery

Enloe Health is providing both traditional and group prenatal care. Your first prenatal visit may last about 30 minutes. Your partner is encouraged to attend. Office visits are a great time to get any questions you have answered. Write down your questions before each appointment and bring them with you.



*If you don't have a provider, please call Enloe Health's new referral coordinator at 530-332-5175.*

## Introduction

Congratulations on your pregnancy! The caregivers at Enloe Health's Nettleton Mother & Baby Care Center are excited to guide you and your loved ones through this special journey.

### **Use this booklet to learn:**

- What to expect during your prenatal visits
- What medications are safe to take
- Foods to avoid during your pregnancy
- How to find comfort for common pregnancy issues
- Warning signs to watch for
- About coping with stress
- How to prepare for your hospital stay
- What to expect after your delivery
- And more



## Review Your Insurance

Health care during your pregnancy may come with expenses. Prevent financial surprises by reviewing your health insurance, what is covered during pregnancy, and if your provider and Enloe Health accept your insurance.

If you have questions and would like to speak to a financial counselor before your delivery at Enloe, call Enloe Health's Patient Financial Services at 530-332-6300. Assistance is available in English and Spanish.

# Tests to Expect

You'll have several tests done throughout your pregnancy. These include:

**Blood exams:** These help identify your blood type and Rh factor (another aspect of blood compatibility). Blood tests will also let your health care team know if you have anemia, syphilis, rubella or hepatitis.

**Urine tests:** These help identify possible infections. Expect to have a urine test at some of the office visits you have with your provider. Your provider may also schedule a Pap smear.

**HIV testing:** California law requires all women be tested for Human Immunodeficiency Virus (HIV) during pregnancy. If you're unsure about this testing, talk to your provider.

**Ultrasound:** This test, also known as a sonogram, is usually done early in your pregnancy and helps identify a more accurate due date for your baby. When you have an ultrasound, your partner can attend. Sonograms show your baby's anatomy and can help identify your child's gender. You may need several ultrasounds throughout your pregnancy.

**GBS testing:** Group B streptococcus (GBS) is a bacterial infection. It occurs in the vagina and rectum in about 25% of all healthy women. Women who have this infection can pass it on to their babies during delivery, possibly causing meningitis, sepsis, pneumonia or even death. Many women who have GBS don't know it because they don't have any symptoms.

- Your provider will test you for this infection around your 36th week of pregnancy. If you have this infection, your care team will give you an antibiotic to minimize the chances of passing it on to your baby.
- At Enloe Health, providers typically use Ampicillin for this. Be sure to tell your care team if you have allergies to any medicines. If you have GBS, your team will recommend your baby stay in the hospital for 48 hours after your delivery for observation.

**Other tests:** Later in your pregnancy, you will be tested for diabetes and retested for anemia. An amniocentesis or genetic counseling may also be scheduled. The state offers a test that checks fetal development. This is voluntary and can be done during your 16th week of pregnancy. Please note there is a separate charge for this test.



To learn more about what to expect on your pregnancy journey, watch our **Pregnancy Preview Class**.

## Helpful Resources

You may find these webpages useful during your pregnancy.

### Help for mom:

- Enloe Health's Nettleton Mother & Baby Care Center → [www.enloe.org/baby](http://www.enloe.org/baby)
- Better Babies | [www.nvih.org/services/prenatal](http://www.nvih.org/services/prenatal)
- FAQs on California State Disability Benefits [www.edd.ca.gov/disability](http://www.edd.ca.gov/disability)
- March of Dimes [www.marchofdimes.org](http://www.marchofdimes.org)
- MotherToBaby <https://mothertobaby.org>
- Preeclampsia Foundation [www.preeclampsia.org](http://www.preeclampsia.org)
- ACOG | [www.acog.org/womens-health](http://www.acog.org/womens-health)



### Help with baby care and breastfeeding:

- American Academy of Pediatrics [www.healthychildren.org](http://www.healthychildren.org)
- Baby-Friendly USA | [babyfriendlyusa.org](http://babyfriendlyusa.org)

# Having a Safe Pregnancy

Keep your developing baby safe and reduce the risk of defects by following these simple but important tips.

## ONLY TAKE APPROVED MEDICATIONS

Let all members of your care team, including your dentist, know you're pregnant and only take medications your team advises. Some medications can be dangerous for your baby.

Do not take Ibuprofen, Aleve or Aspirin unless directed by your care provider.

If you suffer from any of the following conditions during your pregnancy, the medications listed are usually safe. However, talk to your provider to be certain.

### Allergies

- Diphenhydramine (Benadryl®): 25-50 mg every 4-6 hours
- Loratidine (Claritin®): 10 mg daily
- Chlorpheniramine (Chlor-Trimeton): 4 mg every 4-6 hours
- Cetirizine (Zyrtec®): 5-10 mg daily

*Do not take the D version of these medications such as Claritin-D.*

### Cold & flu

- Robitussin®: 10- 20 mg every 4-6 hours
- Mucinex®: 100-400 mg every 4- 6 hours, max 2.4 g a day
- Vicks Vapor Rub®
- Mentholated or non-mentholated cough drops
- Sugar-free cough drops for gestational diabetes (no herbs or aspartame)
- Sudafed®: (after your first trimester) 60 mg every 4-6 hours, max 240 mg a day
- Saline nasal drops or spray

*Do not take the sustained action (SA) or the multi-symptom form of these medications.*

*Do not take cold medicine that contains Ibuprofen or use Nyquil®.*

### Constipation

- Citrucel®: 1 tablespoon in 8 ounces of cold water daily, up to three times a day
- Colace®: 240 mg daily
- Fiberall® or Metamucil®: 1 teaspoon in liquid, up to three times a day

- FiberCon®: 1,250 mg four times per day as needed
- MiraLAX®: 17 g in 4-8 ounces of liquid daily
- Milk of Magnesia: 30-60 mL of regular strength
- Prune juice: 1/2 cup per day

### Diarrhea

- Imodium®: (after your first trimester) for 24 hours only 4 mg, then 2 mg after each unformed stool, max 16 mg a day
- Kaopectate® or Pepto-Bismol®: 30 mL every 30-60 minutes for up to eight doses a day, for up to two days

### Minor skin wounds

- Bacitracin: up to three times a day
- Neosporin®: up to three times a day

### Headache

- Tylenol: 325-1,000 mg every 4-6 hours, max 4 g a day

### Heartburn

- Zantac®: 75-150 mg as needed, max 300 mg a day
- Pepcid AC®: 10-20 mg a day
- Maalox®: 10-20 mL four times a day
- Mylanta®: 10-20 mL between meals and at bedtime
- Titalac® or Tums®: (after your first trimester) 1,000-3,000 mg every 2 hours as needed, max 7,000 mg a day
- Roloids®: Chew 2-4 tablets as needed, no more than 12 in a 24-hour period

### Hemorrhoids

- Preparation H®
- Tucks® pads or ointment: apply to anus/perineum up to six times a day

### Insect bites (repellent)

- N,N-diethyl-meta-toluamide (DEET®): higher concentrations have longer duration of action, 4.75% DEET provides 1.5 hours of protection, 20% DEET provides 4 hours of protection

### **Nausea & vomiting**

- Benadryl®: 25-50 mg every 4-6 hours
- Unisom®: 12.5 mg 2-4 times a day
- Vitamin B6: 10-50 mg every 8 hours

### **Rashes**

- Benadryl®: 25-50 mg every 4-6 hours
- Hydrocortisone cream or ointment: apply sparingly 2-4 times a day
- Aveeno oatmeal bath

### **Trouble sleeping**

- Unisom SleepGels® or Benadryl®: 25-50 mg every 4-6 hours

### **Yeast infections**

- Monistat®: 1 applicator of 2% cream intravaginally at bedtime for seven days

**Avoid these supplements:** Arbor vitae, beth root, black cohosh, blue cohosh, cascara, chaste tree berry, Chinese angelica (dong quai), cinchona, cotton root bark, feverfew, ginseng, goldenseal, juniper, kava, licorice, meadow saffron, pennyroyal, poke root, rue, sage, St. John's wort, senna, tansy, white peony, wormwood, yarrow, yellow dock and Vitamin A.

Avoid these essential oils: Basil, calamus, hyssop, marjoram, mugwort, myrrh, pennyroyal, sage, wintergreen and thyme.

## **AVOID ALCOHOL, TOBACCO & STREET DRUGS**

Smoking, drinking alcohol and taking drugs during your pregnancy can cause many problems, including premature birth, birth defects, and infant death. If you need help quitting, talk to your provider.

The Substance Abuse and Mental Health Services Administration (SAMHSA) also offers an online treatment facility locator at [findtreatment.samhsa.gov](http://findtreatment.samhsa.gov).

You can also get two free phone-based smoking cessation programs by calling:

- **1-800-QUIT-NOW (1-800-784-8669)**  
A program sponsored by the U.S. Department of Health and Human Services
- **1-800-KICK-IT (1-800-300-8086)**  
The California Smokers' Helpline



## **A WORD ABOUT MARIJUANA USE WHILE BREASTFEEDING**

In California, marijuana is now legal for adults ages 21 and over, but that doesn't mean it is safe.

What you eat, drink, smoke and what drugs you use will affect your baby; therefore, take only medicines prescribed.

- Marijuana does transfer from the placenta to the baby's body and brain.
- The active chemical in marijuana is THC, which attaches to the baby's brain and alters brain development.
- Less oxygen and food get to the baby, making it harder for the baby to grow and develop.

Using marijuana when you're pregnant or breastfeeding:

- Increases the risk of sudden infant death syndrome (SIDS)
- Can cause poor sucking reflex, poor feeding, slow growth and slow weight gain
- Slows motor and language development; baby may have problems with coordination and learning to talk
- Increase the chance of attention deficit disorder (poor ability to keep attention, follow directions, become easily distracted, and have poor judgment), hyperactivity and learning problems in school
- Can cause behavior problems as the child becomes older such as aggression
- May cause tremors (shaking), high-pitched cry and difficulty comforting baby
- May cause problems sleeping well and regularly, thus making routines and quality of life challenging





### Recommendations

- There is no safe amount of marijuana use, including smoking or ingestion.
- If you are planning a pregnancy, are pregnant, think you are pregnant, or breastfeeding, don't smoke or ingest marijuana.
- Keep your baby protected from all exposure to marijuana, including smoking and ingestion.
- For help to quit, call Dopeless Hoppers at 1-855-399-0014
- Ask your provider to help with alternative potential treatments.

### TAKE YOUR PRENATAL VITAMINS

Be sure to take an over-the-counter prenatal vitamin every day. Any brand is fine, though it's best to take the vitamin with plenty of water and food. If your prenatal vitamins make you nauseous or constipated, talk to your care team.

### HAVE MORE FOLIC ACID

Eating more folic acid before and during your pregnancy can reduce your baby's risk of brain and spinal cord defects. Babies whose moms have a family history of these defects, have diabetes or are taking anti-seizure medication are most at risk.

Have 600 micrograms of folic acid through your 12th week of pregnancy — that's the most crucial time for your baby's brain and spinal cord development. These foods are a great source of folic acid:

- Asparagus
- Avocado
- Beans: kidney, garbanzo and navy
- Berries



For more detailed guidelines on what you should and shouldn't eat, visit [foodsafety.gov/pregnant](https://www.foodsafety.gov/pregnant).

- Blackstrap molasses
- Bran flakes, fortified cereals
- Broccoli
- Brussel sprouts
- Dark leafy greens
- Dried fruits: raisins, dates and peaches
- Eggs (cooked)
- Fish (cooked)
- Fresh fruit
- Lentils
- Nuts
- Peas: green, black-eyed and garbanzo
- Poultry: turkey, chicken and duck
- Seeds: pumpkin, sesame and flax
- Spinach

### WATCH WHAT YOU EAT

***Certain foods can harm your developing baby.***

***To be safe:***

- Only eat pasteurized cheese.
- Opt for fish options with less mercury, such as salmon, shrimp, pollock, tilapia, catfish and cod.
- Avoid tilefish, ahi tuna, yellowtail, marlin, sea bass, shark, swordfish and king mackerel. If you enjoy white tuna, limit yourself to 6 ounces a week.
- Avoid uncooked fish, such as sushi, which can contain parasites and bacteria.



- Cook eggs thoroughly until the yolks and whites are firm.
- Avoid eating foods that may contain raw or lightly cooked eggs, such as raw batter, filling, or cookie dough.
- Pass on eggnog and other egg-fortified beverages that are not thoroughly cooked.
- Avoid homemade dressings and sauces, as well as handmade ice cream, mousse, meringue, and tiramisu. Commercial mayonnaise, dressings and sauces that contain pasteurized eggs are safe.

## BE MINDFUL OF TOXOPLASMOSIS

*Toxoplasma gondii* is a parasite that can damage your baby's brain and eyes. It's found in raw foods, soil and some animals, including cats.

### **To protect yourself:**

- Wash your hands with soap and warm water after touching soil, raw meat, and unwashed fruits and vegetables.
- Wash fruits and vegetables before eating them.
- Cook all meat thoroughly. The internal temperature should reach 160 degrees.
- Separate raw meat from other foods in your grocery cart and refrigerator and while preparing meals.
- Wash all cutting boards and knives thoroughly with soap and hot water after using them.
- Have someone else clean your cat's litter box. If you have to do it yourself, place a mask over your nose and mouth, wear gloves, and wash your hands thoroughly afterward.

## MAINTAIN A HEALTHY WEIGHT

Eating a nutritious diet is important for you and your baby. Drink plenty of water and eat a balanced diet from the five food groups, including fresh fruits and vegetables, lean proteins, and whole grains.

Limit foods that are high in fat or sugar. Keep in mind that you only need about 300 more calories per day now that you're pregnant. For help creating a healthy food plan, visit [www.ChooseMyPlate.gov](http://www.ChooseMyPlate.gov).

People who are overweight or obese have a higher risk of complications during pregnancy, heart disease, Type 2 diabetes and certain cancers. People who are underweight may also be at risk for serious

health problems. If you are overweight, obese or underweight, talk to your provider about maintaining a healthy weight during your pregnancy.

## LIMIT YOUR CAFFEINE

There's no clear consensus on how much caffeine is safe during pregnancy, so it's best to stay away from it as much as possible, especially during your first trimester. Remember that caffeine is in more than your morning cup of coffee. It's also in soda, tea, energy drinks and certain pain medications. If you're unsure how much caffeine you consume, start reading labels and keeping track.

## GET YOUR SHOTS

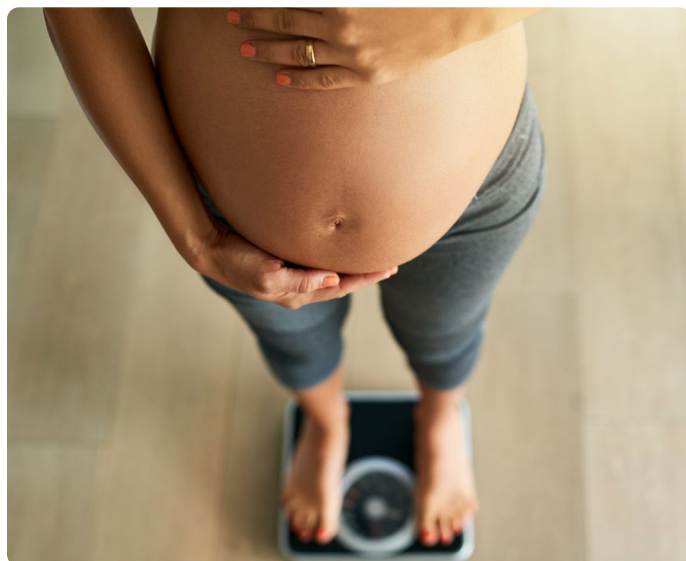
The flu and whooping cough can be dangerous for you and your baby. The flu can cause low birth weight, premature birth, stillbirth or hospitalization.

Whooping cough can:

- Cause coughing fits in your baby
- Leave him or her gasping for air
- And lead to serious lung infections and even hospitalization

That's why you should get your flu vaccine during flu season and a whooping cough (Tdap) vaccine in your third trimester of every pregnancy. The protection you get from these vaccines can be passed on to your baby.

When you're pregnant, you're at high risk for severe illness if you get COVID-19. For this reason, the American College of Obstetricians and Gynecologists strongly recommends being fully vaccinated and boosted against COVID-19.



## VISIT YOUR DENTIST

Research shows a link between good oral health and a healthy pregnancy. During pregnancy, you're more prone to have problems with your teeth and gums. Brush your teeth and floss regularly. If your gums become red, swollen and bleed easily, see your dentist. You may have gingivitis. Remember to let your dentist know you're pregnant before receiving any treatment.

## EXERCISE

Being in good physical condition can make for an easier labor and healthier baby, so keep moving. Try to exercise at least three times a week, rather than once in a while. Brisk walking, swimming, stationary biking, rowing or ski machines are good ways to do so, unless your provider says otherwise. While exercising, prevent heat loss by remaining hydrated and dressing appropriately.

Avoid scuba diving, water skiing and contact sports, as well as activities that may result in blows to your abdomen or loss of balance, or that involve laying on your back. It's also best not to push your heart rate over 140 beats per minute or do continued aerobic exercise for longer than 30 minutes.

Lifting weights for maintenance of strength can be cautiously continued, but heavy weightlifting should be avoided. After your workouts, avoid prolonged soaking in very warm water or hot tubs and saunas. Heat can be dangerous for your baby.



# Comfort for Common Issues

Although pregnancy is a wonderful time, it can come with challenges and some discomforts. Use the tips below to increase your comfort.

## BACK, BREAST & MUSCLE PAIN

As your baby grows, you may notice pain in your back and muscles. Hormones can also make your breasts tender.

### *To help with back pain:*

- Avoid lifting heavy items. When lifting lightweight items, do so with your knees bent and keep your back straight.
- Sleep on a firm, flat mattress, and use pillows to support your back and legs.
- Wear low-heeled shoes.
- Get a massage from a certified therapist who regularly sees pregnant women.
- Try head rolling and shoulder rotating for pain in your upper back.

### *To help with muscle cramps:*

- Eat foods high in calcium.
- When you lie down, do so on your left side.
- Try a gentle massage or a hot water bottle.

### *To help with tender breasts:*

- Wear a supportive bra during the day and a sleep bra at night.
- Use cotton bras. They allow your skin to breathe and may be more comfortable.
- Take warm — not hot — showers. Remember, heat can be dangerous for your baby.

## MORNING SICKNESS & FATIGUE

You may experience nausea and morning sickness early in your pregnancy, too. It usually goes away after 12 weeks. But fatigue can last throughout your pregnancy.

### *To help with nausea:*

- Drink ginger ale or decaffeinated tea.
- Eat frequent, small meals and have an early morning snack.



- Try gelatin, flavored popsicles, chicken broth, white rice, dry toast or pretzels.
- Have a protein snack, like lean cooked meats, pasteurized cheeses or peanut butter before bed.
- Take one of the medications noted on page 5.
- If your nausea is severe, call your provider.

#### **To help with fatigue:**

- Get plenty of rest.
- Avoid eating before bedtime.
- Take warm baths before bed.
- Use relaxation techniques.
- Make sure your bed is comfortable.
- Continue doing light daily exercises.
- Eat a healthy diet.

## **FREQUENT URINATION & DISCHARGE**

During pregnancy you will urinate more often and you may have thick, white vaginal discharge.

#### **To help with frequent urination:**

- Drink less before bedtime to avoid disrupting your sleep.
- Go to the bathroom when you feel the urge. Do not wait.

- Call your provider if you experience any signs of a bladder infection: pain, burning, or irritation when you urinate, with or without a fever.

#### **To help with discharge:**

- Wash your genital area daily with mild soap and rinse well.
- Wear cotton underwear.
- Avoid tight pantyhose or pants.
- Don't use tampons or douche during pregnancy.
- Call your provider if you notice discharge that is bloody, yellow or greenish, or foul-smelling.

## **DIGESTIVE DISCOMFORTS**

You may also experience digestive discomforts, like constipation, gas and heartburn during pregnancy.

#### **To help with constipation and gas:**

- Drink more fluids. Try starting your day with a glass of fruit juice.
- Eat plenty of fruits, vegetables and fiber.
- Exercise regularly.
- Go to the bathroom as soon as you feel the urge.
- Avoid large, high-fat meals, and gas-producing foods, such as cabbage and cauliflower.
- Chew your food thoroughly.
- Avoid mineral oil.
- If you think you need a laxative, view the recommended medications in this booklet on page 4 or talk to your provider.

#### **To help with heartburn:**

- Avoid large, high-fat meals, spicy and acidic foods.
- Drink plenty of liquid with your meals.
- Chew your food thoroughly.
- Stay upright for at least 1 hour after eating.
- Elevate the head of your bed when you lie down and lie on your side.
- Keep good posture.





## CONTRACTIONS

You may have contractions as early as your fourth month of pregnancy. However, most women don't notice them until their seventh or eighth month.

### *To help with contractions:*

- Try sitting and resting.
- Empty your bladder.
- Lie down on your left side.
- Drink plenty of water.
- Call your provider if your contractions are severe, occur more than six times in less than 1 hour and are not going away.

## SKIN ISSUES

About 90% of pregnant women notice darkening skin on their areola (the dark area around the nipple) and moles during pregnancy. Many women also get a dark line, called linea nigra, down their abdomen. You don't need to treat these. They usually disappear after you have your baby.

However, if you notice oily skin, stretch marks or hemorrhoids during pregnancy, you can take steps to relieve them.

### *To help with oily skin:*

- Wash your skin often using a gentle soap and plenty of water.
- Use oil-free makeup to decrease the chances of acne.

### *To help with stretch marks:*

- Ensure you're eating a nutritious diet.
- Drink lots of water to make your skin more elastic.
- Apply moisturizing cream to areas that itch due to your stretching skin.

### *To help with hemorrhoids:*

- Soak in a warm bath.
- Use ice packs or an anesthetic ointment.

## SWELLING & VARICOSE VEINS

Pregnancy can cause swelling in your feet, ankles, and in the veins of your thighs, calves, and vaginal area.

### *To help with swelling in your feet and ankles:*

- Drink plenty of water.
- Eat less salt and more protein.
- Rest with your legs elevated and avoid sitting or standing for long periods.
- Wear support stockings during the day.
- Avoid sitting with your feet on the floor for long periods or sitting with your legs crossed.

### *To help with varicose veins:*

- Avoid wearing tight clothing around your calves.
- Do not stand for long periods of time.
- Avoid crossing your legs when you sit.
- Exercise regularly.

## BREATHING ISSUES

Later in your pregnancy, as your baby gets bigger, it's common to experience shortness of breath.

### *To make breathing easier:*

- Stand or sit erect and keep your shoulders back.
- Try to breathe at a normal rate and move slower.
- Hold your arms up over your head. This expands your rib cage and gives you more breathing space.
- Use pillows to prop you up when you sleep.

# Watch for These Warning Signs

Early labor and preeclampsia can be dangerous for you and your baby. Here's what you need to know.

## PREMATURE LABOR

A normal pregnancy lasts 40 weeks. However, you can go into labor sooner than the 37th week of your pregnancy. This is called premature labor.

***If you notice any of the following signs, call your provider right away:***

- Your uterus tightens more than six times in 1 hour or more often than every 10 minutes.
- You have lower back pain. You may feel pain or a dull pressure that comes and goes regularly.
- Your lower abdomen hurts, and you feel pain, or pressure in your thighs or around your vagina.
- You have a stomachache or cramps. You may have diarrhea.
- You see a change in your vaginal discharge.

## PREECLAMPSIA

Preeclampsia is a serious condition related to high blood pressure. It can appear during the second half of pregnancy and up to six weeks after delivery. For women, this condition can lead to seizures, strokes, organ damage or death. For babies, it can mean early birth or death.

***If you notice any of the signs of preeclampsia, call your provider right away:***

- Stomach pain, especially on the upper right side
- Swelling in your hands or face
- Severe swelling of your legs
- Severe vomiting or nausea
- Excessive dizziness
- Gaining more than 5 pounds in one week
- Headaches
- Seeing spots or flashes of light
- Having blurred or dimmed vision



## OTHER CONCERNS

***You should also call your provider if you fall, are involved in a car accident or notice any of the following:***

- Any amount of bleeding from your vagina, rectum, nipples or lungs
- An absence of — or decrease in — your baby's movement
- A sudden gush of fluid from your vagina
- Frequent uterine contractions
- Chills or fever
- Sharp pain or a burning feeling when urinating
- Shortness of breath
- Chest pain or fast-beating heart
- Overwhelming tiredness



Learn more about maternal warning signs: <https://www.cdc.gov/health/maternal-warning-signs/index.html>

# Coping With Stress

## DEPRESSION & ANXIETY ARE COMMON

Depression is common during pregnancy. It affects about 25% of pregnant women in the United States. Women who have a personal or family history of depression are more likely to be affected. However, lack of support, stress, hormonal changes and other factors can make women susceptible.

### ***Be mindful during your pregnancy and watch for:***

- Feelings of anxiety, sadness, isolation, hopelessness or guilt
- Low energy levels
- Little interest in activities you used to enjoy
- Changes in your eating or sleeping habits
- Irritability or moodiness
- Trouble concentrating or making decisions
- Thoughts of hurting yourself (even if you will not act on these)

### ***If you notice these signs:***

- Talk with your provider and ask about medications you may be able to take.
- Attend a support group. If it is an emergency, call the Butte County Crisis Line at 530-891-2810.
- See a therapist, alone or in group therapy.
- Learn as much as you can about depression during pregnancy.
- Ask family and friends for help when you need it.
- Stay active by walking and stretching.
- Get plenty of rest.
- Eat healthy foods and drink plenty of healthy fluids.
- Don't give up until you get the help you need.



## HELP IS AVAILABLE

These community resources can also help. It's important to get the care you need, so don't hesitate to call these organizations or your health care provider. Depression is a medical condition that will not go away on its own. If you have thoughts of harming yourself or your baby, call 911 immediately.

- **Butte County Behavioral Health Crisis Services**  
1-800-334-6622  
[www.buttecounty.net/behavioralhealth](http://www.buttecounty.net/behavioralhealth)

*Available 24 hours a day, seven days a week, for telephone intervention, information or referrals. Walk-in counseling and assessments are available from 8 a.m. to 5 p.m.*





- **Pregnancy and Postpartum Support Group**



*Led by facilitators, this group provides peer support to patients who are pregnant or recently gave birth. We provide active listening, validation and resources for further services in the community. Hear from other women and share your experiences.*

*This group meets at Enloe Health Obstetrics & Gynecology, 1665 Esplanade. If you need more information, please call 530-332-5017.*

- **Postpartum Dads** | <https://www.postpartum.net/get-help/help-for-dads>

*Provides firsthand information and guidance on postpartum depression.*

- **Postpartum Progress**  
[www.postpartumprogress.com](http://www.postpartumprogress.com)

*A popular blog on postpartum depression and other mental illnesses related to pregnancy and childbirth.*

- **Postpartum Support International**  
1-800-944-4773 | [www.postpartum.net](http://www.postpartum.net)

*Dedicated to helping women suffering from pregnancy-related or postpartum mood and anxiety disorders. When you call, someone will call you back within 24 hours.*

- **988 Suicide & Crisis Lifeline** | 9-8-8  
[988lifeline.org](http://988lifeline.org)

*Offers 24/7 call, text and chat access to trained crisis counselors. Provides free and confidential emotional support to people in suicidal crisis or emotional distress.*

- **Enloe Health Mother & Baby Education Center**  
Perinatal Mood & Anxiety Disorder Community  
Resource Line | 530-332-7208

- **Mothers Strong** | [www.first5butte.org/mothers-strong](http://www.first5butte.org/mothers-strong)  
**Butte 211** | [www.helpcentral.org](http://www.helpcentral.org)

*These organizations do not provide therapy or counseling and cannot provide advice through email. However, they can help you find resources.*

- **PPD Moms** | 1-800-773-6667

*Available 24 hours a day, seven days a week. This hotline is open to anyone experiencing depression during or after pregnancy, or anyone who is concerned about a new or expectant mom.*

## TALK TO A THERAPIST

Therapy can help you overcome depression. If you're considering it, [Butte 211](http://Butte 211) or [helpcentral.org](http://helpcentral.org) can connect you to a local therapist. These therapists have specialized training on maternal depression and anxiety to help moms and their loved ones.

If you don't want to talk to someone in person, try online counseling at [www.breakthrough.com](http://www.breakthrough.com). Private pay and private insurance are accepted.

# Prepare for Your Delivery

## WATCH OUR VIRTUAL TOUR

Enloe Health offers leading-edge technology in maternity and women's health care. This includes an up-to-date special care nursery (or SCN), as well as spacious birthing suites that combine the comforts of home with the latest medical equipment.



Watch our virtual tour in English or Spanish at [www.enloe.org/baby](http://www.enloe.org/baby) to see our facilities for yourself and learn about our services.

## CHOOSE A PROVIDER FOR YOUR BABY

You'll want to select a provider for your baby during your pregnancy. This will be one of the most important decisions you'll ever make. Your baby's provider will be called once your infant arrives and will see your child for years. The provider will offer guidelines for good nutrition, monitor your baby's growth and development, and treat your child when he or she is sick.

That's why it's important to choose someone you trust. To start the process, ask loved ones for recommendations and meet with providers you're considering. Use this time to determine if the provider:

- Listens to your concerns and questions
- Responds in a reassuring manner
- Gives you confidence in their approach to care

And ask these questions, too:

- Are you taking new patients?
- Do you accept my insurance?
- What is your philosophy about treating babies?
- Do you have a separate room for children who are sick?
- Who covers for you when you're unavailable?
- What is the best way to communicate with you? By phone and/or email?
- What will be my baby's exam schedule?

Not familiar with baby providers in the area? Visit [www.enloe.org/doctor](http://www.enloe.org/doctor) to find a provider.

If you don't live in the area or have not decided on a baby provider before your baby is born, one of the pediatricians on call at Enloe Health will care for your newborn during their hospital stay.

## TAKE A CHILDBIRTH COURSE

Becoming a mother is an exciting and busy time. To help you prepare, Enloe Health's Mother & Baby Education Center offers several classes, including Childbirth Preparation courses. Choose between the complete series or our refresher course. Taught by a registered nurse instructor, you'll learn about:

- The birthing process
- Relaxation techniques
- Pain management
- Breastfeeding
- And more

Please register for either option during your fifth month of pregnancy and choose a course that finishes at least one month before your due date. Classes are offered in person and online. Our online classes include classes for new fathers and grandparents.



Online classes are available in English and Spanish. Call 530-332-3970 or register at [www.enloe.org/baby-classes](http://www.enloe.org/baby-classes).

## HAVE A BIRTH PLAN

During your pregnancy, start thinking about your labor and how you want your delivery to be. For instance, do you want pain medication, soothing music or soft lighting during your delivery? Be open with your provider about your wishes, so he or she can provide feedback and you can have the delivery you desire.



See our **Birth and Infant Feeding Menu** to help guide your delivery choices.

## PLANNING A CESAREAN SECTION BIRTH

Our team does everything possible to accommodate a mother's birth preferences, whether you're having a vaginal or cesarean section birth. If you're having a C-section, ask your care team about:

- Playing your own music during your delivery
- Dimming the lights in the operating room; the doctor has a spotlight to see your incision
- Positioning EKG patches to allow skin-to-skin contact with your baby in the operating room
- A peek-a-boo drape to watch your baby being born
- Delayed cord clamping and cutting

If you have other wishes, ask your provider if they can be added to your birth plan.

## HAVING A VAGINAL BIRTH AFTER A CESAREAN SECTION

If you had a C-section during a previous pregnancy, you may be able to choose between delivering through a C-section or a vaginal birth during this pregnancy. This is called a vaginal birth after a cesarean or VBAC. There are some risks, so be sure to talk to your provider.

**At Enloe Health, you're eligible to have a VBAC if you:**

- Had two or fewer prior C-sections
- Never had a uterine rupture or tear in your uterus
- Had a prior low-transverse scar, or a side-to-side cut, in the uterus

A Trial of Labor After a Cesarean (TOLAC) is the attempt to have a VBAC. There are several reasons to consider a TOLAC/VBAC, including:

- A shorter and less painful recovery after birth
- Not needing to have surgery
- Less blood loss from surgery
- A lower risk for infections and other complications

If you're considering a TOLAC/VBAC, some things can reduce your likelihood of success. These include:

- Being obese
- Having high blood pressure
- Having a large baby
- Being less than 19 months from your last pregnancy
- Being past your due date
- Needing to be induced
- Being over the age of 35

It's important to continue discussing the risks and benefits of a TOLAC with your provider throughout your pregnancy.

## LEARN ABOUT OTHER ENLOE HEALTH SERVICES

**Enloe Health Mother & Baby Education Center**  
530-332-3970

*The first year of your child's life is critical to their development. To promote healthy families, Enloe Health offers several classes in addition to our Childbirth Preparation courses. These classes focus on parenting, newborn care and infant safety.*

**Enloe Health Sweet Success** | 530-332-6804

*Available by referral, this program is for women who have diabetes before and during pregnancy. A certified diabetes educator (CDE) will teach you how to manage your blood sugar through diet, exercise and possibly medication.*

To make or change an appointment, call 530-332-5070. If you are tracking your blood sugar, please send your logs every Monday through a MyChart message to your obstetrics provider or email to [diabetes.services@enloe.org](mailto:diabetes.services@enloe.org).



# Breastfeeding

Enloe Health is a Baby-Friendly Hospital. This means our caregivers provide families with the skills they need for the best feeding and bonding experience for success. Breastmilk is the best food for your baby. That's why our goal at the Mother & Baby Care Center is to help you breastfeed exclusively for at least six months. Our nurses have specialized training and are ready to help you breastfeed during your stay at Enloe Health and once you go home.

Our Mother & Baby Education Center has International Board Certified Lactation Consultants (IBCLCs) on hand to provide support. If you have questions about breastfeeding or would like to set up a private lactation consultation, call 530-332-3970.



## THE BENEFITS

***Breastfeeding has many benefits for your baby and you. Babies who are breastfed:***

- Have more protection against asthma and eczema
- Are less likely to get sick from viruses and bacteria
- Have a lower risk of allergies and ear infections
- Have higher IQ and vision scores

***These babies also have a lower risk of:***

- Sudden infant death syndrome (SIDS)
- Inflammatory bowel diseases
- Some forms of cancer, such as Hodgkin's disease and childhood leukemia
- Juvenile-onset diabetes
- Being overweight
- Cavities (and are less likely to need braces)

***Breastfeeding is also good for moms. It lowers your risk of:***

- Anemia
- Ovarian and pre-menopausal breast cancers
- Osteoporosis
- Postpartum bleeding
- Type 2 diabetes

Plus, it helps you return to your pre-pregnancy weight faster and helps you bond with your baby.

***Society also benefits. Breastfeeding:***

- Reduces the number of sick days families must use to care for sick children
- Requires no packaging, and its production does not harm the environment
- Is free



*Watch this video to learn more about breastfeeding your newborn.*

## BREASTFEEDING RESOURCES

You can also learn more about breastfeeding through these resources.

- **Baby-Friendly USA** →  
<https://www.babyfriendlyusa.org>
- **Better Babies** | 530-433-2500  
Medi-Cal clients only
- **La Leche League of Chico** | 530-487-4109
- **WIC** | [wicbreastfeeding.fns.usda.gov](http://wicbreastfeeding.fns.usda.gov)  
Qualifying clients only



### **Butte County**

Chico .....	530-552-4025
Gridley .....	530-552-4025
Oroville .....	530-552-4025

### **Glenn County**

Orland .....	530-865-8791
Willows .....	530-865-8791

### **Tehama County**

Corning .....	530-527-8791
Red Bluff .....	530-527-8791

### **Yuba County**

Marysville .....	530-749-4830
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### **Sutter County**

Yuba City .....	530-822-7224
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## Considering Cord Blood Banking?

Cord blood is blood from a baby's umbilical cord. Collecting this blood is painless and will not harm you or your baby. Cord blood is thought to have life-saving stem cells, which may have the beginnings of the body's immune and blood system, and can regenerate into other types of cells in the body. For example, cord blood can be used to treat certain cancers, sickle cell anemia, metabolic storage disorder and other conditions.

If you're considering cord blood banking, consider this from the American Academy of Pediatrics (AAP):

There is no strong evidence to recommend cord blood banking for an infant's future use, unless the child's sibling has a current or potential need to undergo a stem cell transplant. Learn more at [www.acog.org/store/products/patient-education/pamphlets/pregnancy/cord-blood-banking](http://www.acog.org/store/products/patient-education/pamphlets/pregnancy/cord-blood-banking).

## Car Seat Safety

California law requires children to ride in the backseat of cars in a car or booster seat until age 8. Kids under the age of 2 should be in rear-facing seats that meet federal standards. Violating these regulations can result in citations.

Caregivers at Enloe Health are not certified to install car seats, so it's important for you to buy and install your baby's car seat before your family is scheduled to leave the hospital.

The best car seat for your baby is one that meets your child's size and weight, fits into your car well, and meets current federal safety standards. If you need help with car seat safety and installation, contact one of the local organizations below.



### "KIDS IN SAFE SEATS" RESOURCES

<b>Butte County Public Health</b> .....	530-552-4000
<b>California Highway Patrol</b>	
Chico .....	530-332-2800
Oroville .....	530-538-2700
<b>Northern Valley Indian Health</b> .....	530-781-1440
<b>Feather River Tribal Health</b>	
Oroville .....	530-534-5394

**Low-cost car and booster seats are available for those who qualify.** To learn more, contact Butte County Public Health at 530-552-4000 or [www.buttecounty.net/publichealth](http://www.buttecounty.net/publichealth).

# Your Delivery

## PACKING FOR THE HOSPITAL

As your due date gets closer, you'll want to prepare for your hospital stay. Start by packing a bag to take with you and do this no later than a month before your due date.

### *When you pack include:*

- A bathrobe, nursing gown and a nursing bra
- Slippers you can wash or flip-flops
- Shampoo and deodorant
- A toothbrush and toothpaste
- A hair brush and hair tie or clip
- Items for your partner, such as a sweatshirt, toothbrush and snacks
- Clothes and a blanket for your baby

## ARRIVING AT THE HOSPITAL

Giving birth is a special time in your life! When it's time to head to the hospital for your delivery, go to Enloe Health Medical Center's fourth floor, where the Mother & Baby Care Center is located. Check [www.enloe.org/visitation](http://www.enloe.org/visitation) for the most up-to-date information on visiting. ***Please note that visitors must sign in and out during every visit.***

To keep everyone healthy, please ask your visitors to wash their hands for 20 seconds before touching your baby.

### ***A Note About Photos & Filming:***

Pursuant to California law, you cannot film, record, disclose or distribute images of, or conversations with, Enloe Health caregivers. Video recording is not allowed during your delivery or any procedure.

## SUPPORT DURING YOUR LABOR

Throughout your labor, your care team will be by your side. Let staff know your birth plan, needs and desires. Enloe Health has 1:1 staffing to provide you with continual care and support during your birth experience.



### ***As your labor progresses:***

- Take one contraction at a time.
- Have confidence in your body.
- Avoid making decisions during a contraction.
- Accept coaching and support from your care team.

Your labor partner will play a big role during your delivery. He or she should:

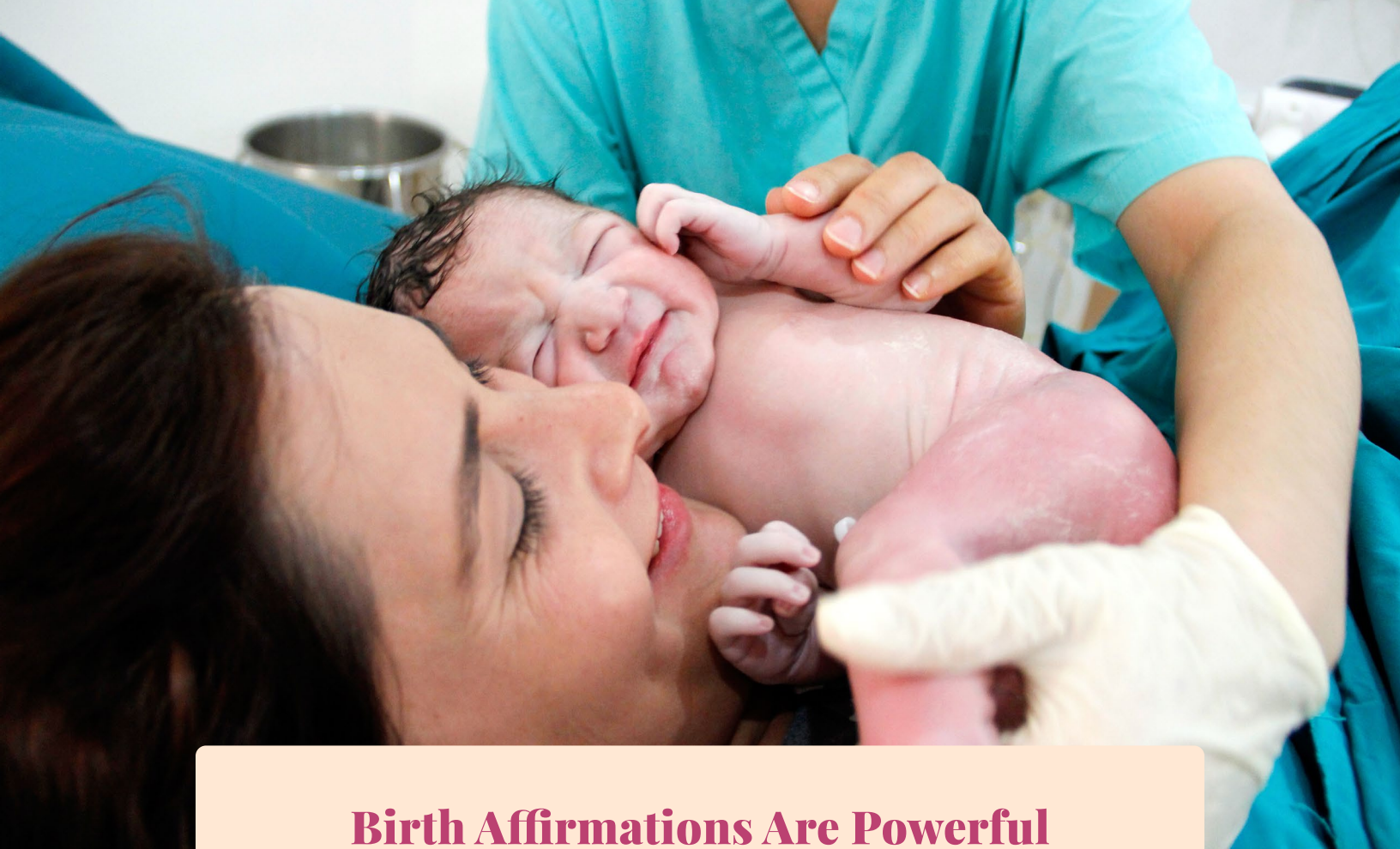
- Know your feelings about medications before your labor begins.
- Provide you with unconditional support throughout the process.

## LABORING WITHOUT MEDICATION

Babies born after an unmedicated labor tend to be more alert and may have an easier time breastfeeding. Some non-medication pain-relief options are:

- Aromatherapy
- Relaxation
- Guided imagery
- Position changes (birth balls, rocking chairs, etc.)
- Concentration focal points
- Massage
- Breathing techniques
- Whirlpool tub and shower





## Birth Affirmations Are Powerful

Saying positive phrases out loud can help you focus during labor. Give it a try. Repeat these birth affirmations as you work to welcome your baby into the world.

1. My body knows how and when to give birth.
2. I embrace the wisdom and innate knowledge of my body.
3. My body contains all the wisdom necessary to give birth to my baby.
4. I surrender to the power of my body. My contractions bring my baby closer.
5. My cervix opens and allows my baby to ease down with each contraction.
6. I trust my body and my baby.
7. My body has been perfectly designed to give birth.
8. My body and pelvis open wide for my baby to pass through.
9. My courage and patience will send my baby into my arms.
10. My body knows what to do. I will surrender fully and completely.
11. I have grown this baby. I will birth him or her courageously.
12. I am a strong woman, and my body is powerful. I trust my instincts to know what I need for my labor.
13. Countless women have given birth before me. Their courage and strength are with me.
14. Good, strong contractions will help me meet my baby.
15. Birth is a safe, wonderful and powerful experience.

## MEDICATIONS

Your care team may use several types of medications during your delivery. Please keep in mind that all medications affect labor and your baby in some way, but with careful monitoring, serious side effects are rare.

Here are a few medications that may be used.



### Labor Augmentation/Induction

Type	Benefits	Possible Side Effects
<b>Prostaglandin (Cervidil):</b> given vaginally before induction of labor	<ul style="list-style-type: none"><li>Increases cervical elasticity</li><li>May stimulate contractions or cramping</li></ul>	<ul style="list-style-type: none"><li>Requires fetal monitoring</li><li>May cause sustained contractions</li><li>Does not always work; you may have to come back another day</li></ul>
<b>Misoprostol (Cytotec):</b> given orally or vaginally before induction of labor	<ul style="list-style-type: none"><li>Increases cervical ripening</li><li>May stimulate contractions</li></ul>	<ul style="list-style-type: none"><li>May cause sustained contractions</li><li>Requires fetal monitoring for 1-2 hours</li><li>Does not always work; you may have to come back another day</li></ul>
<b>Oxytocin (Pitocin):</b> given through an IV	<ul style="list-style-type: none"><li>Begins labor contractions</li><li>Increases strength and frequency of contractions</li></ul>	<ul style="list-style-type: none"><li>Requires continuous fetal monitoring</li><li>Does not always work; you may have to come back another day</li></ul>

### Regional Anesthesia

Type	Benefits	Possible Side Effects
<b>Local Anesthetic &amp; Fentanyl Epidural:</b> given as a continuous infusion via a controlled pump; placed by an anesthesiologist	<ul style="list-style-type: none"><li>May shorten labor by allowing you to relax</li><li>Takes effect in 15 minutes, full effect in 20 minutes</li><li>You remain awake</li><li>With an existing epidural, the anesthesiologist can give additional doses during a C-section</li></ul>	<ul style="list-style-type: none"><li>Restricts mobility and requires bed rest</li><li>Backaches, difficulty urinating, infection, spinal headaches, nausea and numbness</li><li>Blood pressure may drop, so frequent monitoring is required</li><li>May require vacuum or forceps during delivery</li><li>Prolonged labor and pushing</li></ul>
<b>Spinal Block:</b> may be given for a C-section; medication is injected into the spinal canal	<ul style="list-style-type: none"><li>Takes effect immediately</li></ul>	<ul style="list-style-type: none"><li>Spinal headaches after surgery, infection and itching</li></ul>



## Additional Medications for Labor & Delivery

Type	Benefits	Possible Side Effects
<b>Opioid Analgesic (Fentanyl):</b> given through an IV catheter or injected into a muscle	<ul style="list-style-type: none"> <li>Provides pain relief in minutes and may last for several hours</li> <li>Promotes rest</li> <li>Not harmful when given at the right time and dosage</li> </ul>	<ul style="list-style-type: none"> <li>May cause drowsiness, nausea or vomiting; be careful when standing</li> <li>You may feel less in control</li> <li>May temporarily affect your baby's heart rate or affect his breathing if given too close to delivery</li> <li>May make it temporarily difficult for your baby to breastfeed</li> </ul>
<b>Local Anesthetic:</b> used to numb the vaginal area if an incision is needed to extend the opening or to repair a tear	<ul style="list-style-type: none"> <li>Takes effect quickly</li> <li>Numbs a specific area</li> <li>Side effects are rare</li> </ul>	<ul style="list-style-type: none"> <li>No effect on pain associated with cramping</li> <li>Burns when given</li> <li>Allergic reaction possible</li> <li>Limited relief time</li> </ul>

## Postpartum Medications

Type	Benefits	Possible Side Effects
<b>Oxytocin (Pitocin):</b> given after delivery in an IV or injection to reduce bleeding	<ul style="list-style-type: none"> <li>Helps the uterus to contract and remain that way</li> </ul>	<ul style="list-style-type: none"> <li>May cause cramping</li> </ul>
<b>Misoprostol:</b> given orally or rectally to reduce bleeding after delivery	<ul style="list-style-type: none"> <li>Takes effect quickly</li> </ul>	<ul style="list-style-type: none"> <li>May cause nausea and vomiting</li> <li>May increase cramping</li> </ul>
<b>Methergine:</b> given after delivery by injection to reduce bleeding	<ul style="list-style-type: none"> <li>Stronger than oxytocin</li> </ul>	<ul style="list-style-type: none"> <li>May cause nausea and vomiting</li> <li>Not given to patients with high blood pressure</li> </ul>
<b>Carboprost Tromethamine:</b> given after delivery by injection to reduce bleeding	<ul style="list-style-type: none"> <li>Stronger than oxytocin</li> </ul>	<ul style="list-style-type: none"> <li>May cause nausea, vomiting and/or fever</li> </ul>

*This is not an all-inclusive list of side effects. Please contact your provider, nurse or pharmacist if you have any questions.*



# After Your Delivery

## KEEPING YOUR BABY SAFE

Safety is a top priority at Enloe Health. Once your baby is born, a nurse will place matching identification bands on you, your baby and your labor partner. If you are separated from your baby for any reason, nurses will match your band ID with your baby's when you two are reunited. Other safety procedures are in place as well:

- All Enloe Health caregivers wear badges and will introduce themselves when they care for you.
- Caregivers will write their names and call numbers on your communication board.
- When you are ready to leave the hospital, an Enloe Health volunteer will accompany you and your baby to your car.

If you have any questions or concerns about anyone who enters your room, press your call button. If you need to leave your room for any reason, ask your nurse to watch your baby.

## SKIN-TO-SKIN AFTER BIRTH

After labor, a caregiver will place your baby on your chest for skin-to-skin contact, which promotes bonding. This helps your baby:

- Transition to the outside world
- Start breastfeeding in the first hour
- Regulate his or her temperature and blood sugar
- Be calm and comforted

## ROOMING-IN

It is encouraged that your baby sleeps in the same room as you, but in a separate crib. This is called rooming-in. It is important because it helps you:

- Learn your baby's feeding cues
- Feed your newborn on demand
- Learn how to care for your infant

Plus, it helps your baby learn to recognize you.



## TESTS TO EXPECT

Once your baby is born, their care team will need to perform an assessment and a few tests. These include:

**A test for congenital heart disease:** About 8 of every 1,000 infants are born with a form of congenital heart disease (CHD), making it one of the most common birth defects. As a result, it's recommended that all newborns have a non-invasive screening called pulse oximetry at around 24 hours of age. This screening helps caregivers know if your baby has low oxygen levels. This test is painless and takes minutes when a newborn is quiet. If you have any questions about this screening, please talk to your baby's provider.

**A test for genetic and metabolic disorders:** California law requires all babies have a blood test that screens for certain genetic and metabolic disorders. Newborns can look healthy and have one of these disorders. Early detection can prevent serious damage, so your baby will have this blood test before you leave the hospital. A caregiver will draw their blood with a gentle prick of your baby's heel. The blood will then be sent to a lab for testing. If you refuse this required test, you must sign a form stating your hospital, baby's provider and hospital caregivers are not responsible if your baby develops problems from any of these disorders. Your baby's provider will receive the test results in about two weeks.

If your baby needs more testing, you will be notified, so be sure your baby's provider has your current address and phone number. If you plan to go home less than 12 hours after your delivery, the test must be repeated within four days. For more information about newborn screening, visit California Department of Public Health's website at [cdph.ca.gov/nbs](https://cdph.ca.gov/nbs).

**A hearing test:** California law also requires that your baby participate in the Newborn Hearing Screening Program. Hearing is important for your baby's development, much of which occurs in the first three years of life. Babies learn to speak by listening, and children who cannot hear may not develop normal speech. That's why early detection and treatment of hearing loss are important. The test is safe and painless. Most babies sleep through it. For more information on the California Newborn Hearing Screening Program, call 1-877-388-5301.

## PREVENTING VITAMIN K DEFICIENCY & BLINDNESS

We need Vitamin K so our blood can clot normally. When babies are born, they're born with very small amounts in their system. That's why a single Vitamin K injection is recommended. It is given in the muscle of your baby's leg shortly after birth. This protects your baby from developing dangerous bleeding problems. For more details on blood disorders, visit the Centers for Disease Control and Prevention's website at [www.cdc.gov/ncbddd/blooddisorders/index.html](http://www.cdc.gov/ncbddd/blooddisorders/index.html).

State law requires that your baby receive an antibiotic in their eyes shortly after birth to prevent neonatal ophthalmia, which can lead to blindness if left untreated. Your care team will talk to you about this.

## DID YOU HAVE A BOY?

If you have a boy, your baby can be circumcised any time between 24 hours and 30 days of age. The risk is essentially the same regardless of when the procedure is performed, and very little anesthesia is required. During your hospital stay, it's possible that a provider will not be able to perform the procedure. However, your baby's provider can do it during an office visit after your hospital stay.

Please note that circumcision fees are not always covered by insurance. If this is the case with your insurance and you choose to have this procedure performed, payment is due at the time of service for hospital fees. Please be advised that your baby's provider also charges a professional fee. If you have questions about possible charges, call Enloe Health's Patient Financial Services at 530-332-6300. Assistance is available in English and Spanish.

The American Academy of Pediatrics supports circumcision, which can lower the risk of sexually transmitted infections.

# Important Paperwork

## YOUR BABY'S BIRTH CERTIFICATE & SOCIAL SECURITY NUMBER

Before leaving Enloe Health, a perinatal clerk will visit you to get information for your baby's birth certificate and Social Security card. If you would rather your child not have a Social Security card, please let the clerk know before the birth certificate process begins.

You can get copies of your child's birth certificate through the:

### Butte County Clerk Recorder's office

155 Nelson Ave. | Oroville CA

530-552-3400 | [clerk-recorder.buttecounty.net](http://clerk-recorder.buttecounty.net)

There is a fee, and you will need to provide your child's

- Name
- Date of birth
- Place of birth

Your baby's Social Security number can be ordered when his or her birth certificate is complete. You'll get it in the mail in three to six weeks. If you have any questions, let the perinatal clerk know.

## Leaving the Hospital

During your hospital stay, you and your loved ones will get information on caring for your baby, yourself, and your family. This information will also be provided in a Going Home booklet. Let your care team know if you have questions. Our goal is to help you feel confident caring for your baby before you leave the hospital.

As you prepare to leave, have your care partner pack the car with all your belongings. Your ride should be at the hospital by 10 a.m., so you can be prepared for discharge at 11 a.m.



# Safe Sleep for Your Baby

As you prepare for the wonderful journey ahead, start thinking about your baby's sleep. It can be lifesaving. Following the guidelines below can help lower the risk of baby suffocation, SIDS and accidents during sleep.

For more information about SIDS, contact:

- National Institutes of Health  
[www.nichd.nih.gov/health/topics/sids](http://www.nichd.nih.gov/health/topics/sids)
- First Candle | [firstcandle.org](http://firstcandle.org)

## REDUCE THE RISK OF SIDS

SIDS is the sudden death of an infant younger than 1. Researchers do not know exactly what causes it. To reduce your baby's risk:

- Always place your baby on his or her back to sleep, for naps and at night.
- Use a firm and flat sleep surface, such as a mattress in a safety-approved crib\*, covered by a fitted sheet with no other bedding or soft items in the sleep area.
- Share your room with your baby. Keep your baby in your room close to your bed, but on a separate surface designed for infants, ideally for the infant's first year, but at least for the first six months.
- Do not put soft objects, toys, crib bumpers, or loose bedding under or over your baby, or anywhere in baby's sleep area.
- Get regular prenatal care during pregnancy.
- Avoid smoking, drinking alcohol and using marijuana, or illegal drugs during pregnancy or after the baby is born.
- Do not smoke during pregnancy, and do not smoke or allow smoking around your baby.
- Think about giving your baby a pacifier for naps and nighttime sleep after breastfeeding is established (at 3-4 weeks of age).
- Do not let your baby get too hot during sleep.
- Breastfeed your baby. If you fall asleep while feeding or comforting your baby in an adult bed, place him or her in a separate sleep area as soon as you wake up.



- Follow health care provider guidance on your baby's vaccines and regular health checkups.
- Avoid products that go against safe sleep recommendations, especially those that claim to prevent or reduce the risk for SIDS.
- Do not use heart or breathing monitors in the home to reduce the risk of SIDS.
- Give your baby plenty of tummy time when he or she is awake and someone is watching.



The actions listed here are based on recommendations from the American Academy of Pediatrics (AAP) Task Force on SIDS. You can read the latest Policy Statement from the AAP Task Force on SIDS.

### *If you need help creating a safer sleep area for your baby:*

- Call the Butte County Public Health Department at 1-800-339-2941 and ask to speak with a public health nurse.
- Visit the U.S. Consumer Product Safety Commission website for more information about crib safety.



# WHAT DOES A SAFE SLEEP ENVIRONMENT LOOK LIKE?



The following image shows a safe sleep environment for baby.



**Room share:** Give babies their own sleep space in your room, separate from your bed.



Use a firm, flat, and level sleep surface, covered only by a fitted sheet\*.



Remove everything from baby's sleep area, except a fitted sheet to cover the mattress. No objects, toys, or other items.



Use a wearable blanket to keep baby warm without blankets in the sleep area.



Place babies on their backs to sleep, for naps and at night.

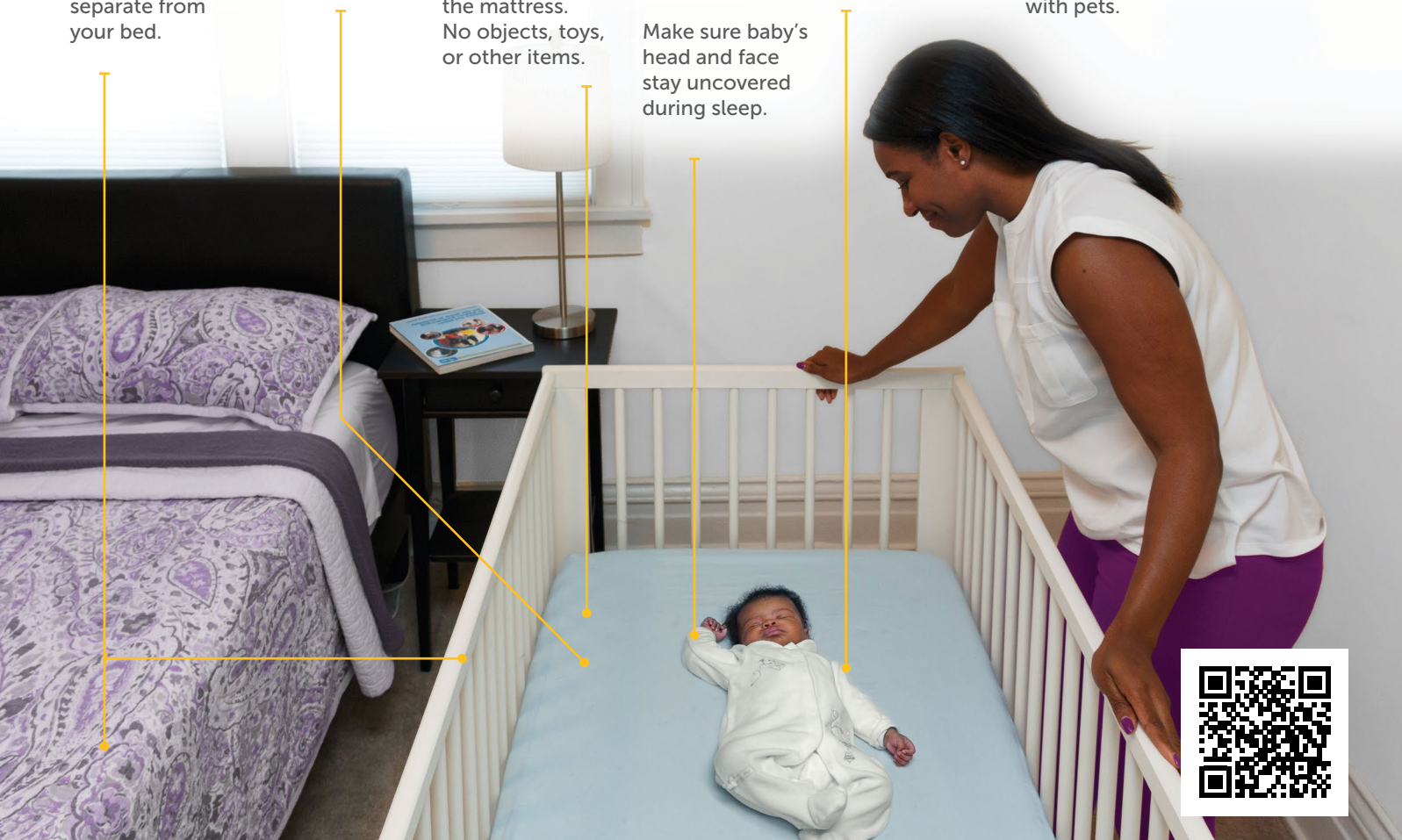


Couches and armchairs are not safe for baby to sleep on alone, with people, or with pets.



Keep baby's surroundings smoke/vape free.

Make sure baby's head and face stay uncovered during sleep.



\*The Consumer Product Safety Commission sets safety standards for infant sleep surfaces (such as a mattress) and sleep spaces (like a crib). Visit <https://www.cpsc.gov/SafeSleep> to learn more.



Eunice Kennedy Shriver National Institute of Child Health and Human Development



# Pregnant now or within the last year?

Get medical care right away if you experience any of the following symptoms:



**Headache that won't go away or gets worse over time**



**Dizziness or fainting**



**Changes in your vision**



**Fever of 100.4° F or higher**



**Extreme swelling of your hands or face**



**Thoughts of harming yourself or your baby**



**Trouble breathing**



**Chest pain or fast beating heart**



**Severe nausea and throwing up**



**Severe belly pain that doesn't go away**



**Baby's movement stopping or slowing during pregnancy**



**Severe swelling, redness or pain of your leg or arm**



**Vaginal bleeding or fluid leaking during pregnancy**



**Heavy vaginal bleeding or discharge after pregnancy**



**Overwhelming tiredness**

These could be signs of very serious complications. If you can't reach a healthcare provider, go to the emergency room. Be sure to tell them you are pregnant or were pregnant within the last year.

Learn more at [www.cdc.gov/HearHer](http://www.cdc.gov/HearHer)



*This list of urgent maternal warning signs was developed by the Council on Patient Safety in Women's Health Care.*











Best wishes for a healthy pregnancy, as you prepare for delivery and parenting.

 **ENLOEHEALTH**  
NETTLETON MOTHER & BABY  
CARE CENTER