

TEENS ON COURSE™

TEENS AND PREGNANCY

REAL ISSUES
REAL ANSWERS™

BABY
ON
BOARD

BIG BUMPS AHEAD

STRESS

OUCH!

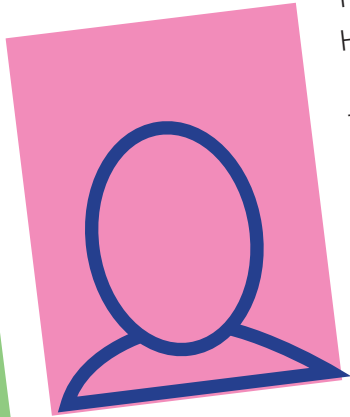
EMOTIONS

HEALTH

A BABY MAKES TWO

DRIVER'S LICENSE

PREGNANT? DON'T FREAK OUT.



YOU

This is serious, but it's not the end of the world. It's OK.
Here's how to deal with it.

This book will give you a lot of info on what's going on inside your body and what's going to happen, how to get the best care, what's going to happen on delivery day and what to expect after your baby comes. Yes. We said, "baby." It can be a scary little word. It can also mean great joy and love and laughter and the start of a new life.

**So don't freak out. Knowledge is power.
And baby, that's exciting!**

DISCLAIMER. This book provides general information about teen pregnancy and related issues. This information does not constitute medical advice and is not intended to be used as a solitary reference on the subject matter, for the diagnosis or treatment of a health problem, or as a substitute for consulting a licensed health care professional. Consult with a qualified physician or health care practitioner to discuss specific individual issues or health needs, and to professionally address personal, emotional, health, physical or medical concerns.

It is very important to see a doctor as soon as you think you are pregnant and to get regular prenatal care throughout your pregnancy.

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REAL ANSWERS™

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CHAPTER 1

PREGNANCY

SO MUCH MORE THAN
THE BIRDS AND THE BEES

SO...HOW DOES PREGNANCY HAPPEN?

Let's slow things down and look at it in simple terms. Pregnancy occurs when sperm from a man joins with an egg from a woman, which happens during sex.

SPERM + EGG = BABY



THE FACT IS...
IF YOU HAVE SEX, YOU CAN BECOME PREGNANT
OR GET SOMEONE PREGNANT.



MISSION: DEFINITION

Menstruation [mèn stroo áy sh'n]: monthly discharge from the womb.
Slang; period, the flow, delicate.



REMEMBER:

THE BEST WAY *NOT* TO GET PREGNANT
IS *NOT TO HAVE SEX*.

PERIOD OF ADJUSTMENT

A woman's body is a special thing. About the time a girl becomes a teenager, several changes start to happen to her body. One of the changes in young women is that they have bleeding from the vagina, which happens about once a month. It's a natural change in the body and nothing to be worried about. It's called menstruation, or a period.

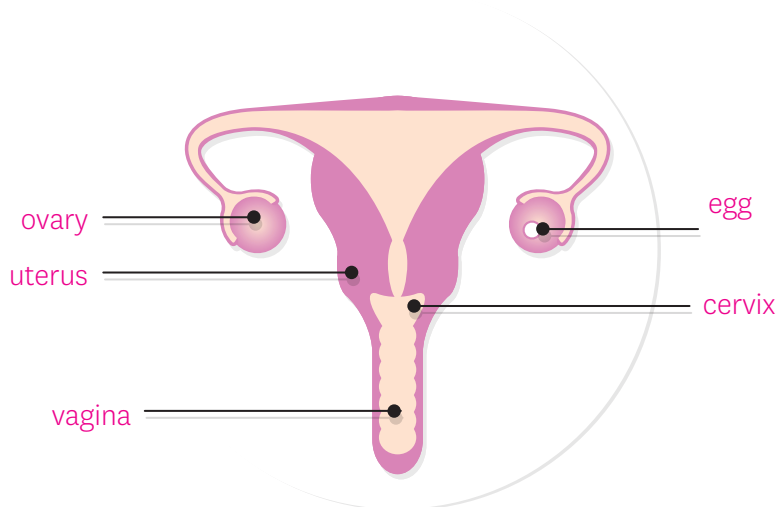
WHY DO WOMEN HAVE THEIR PERIOD?

A period is the natural way in which a woman's body prepares for pregnancy. Each month, a woman's **ovaries** produce an egg that travels to the **uterus**. This process is called **ovulation**.

If sperm happens to be in the **fallopian tube** while the egg is there, fertilization can happen, meaning that the egg moves to the uterus, sticks to the lining and becomes a pregnancy or the beginning of a baby.

If the egg is not fertilized, the lining of the uterus sheds off (don't worry, it rebuilds itself every month). During that time there will be bleeding from the vagina while the lining is released. This lasts for about three to seven days. A period usually starts with spots of blood, gets heavier for a few days, and then gets lighter near the end of the period. The whole process repeats itself about every 28 days.

OVULATION
(OV-YOO-LAY-SHUN)





DID YOU KNOW?

- An egg (or ovum) is only as wide as a human hair
- Usually, just one egg is released during ovulation
- Each woman is born with millions of eggs that are awaiting ovulation



WHAT HAPPENS TO THE EGG?

If the egg is not fertilized (meaning no pregnancy), it passes through the uterus, the cervix and out the vagina during your period.

NOT FROM KISSING

Pregnancy happens when sperm from a male's penis gets inside a woman's vagina. These things DO NOT cause pregnancy:

- **kissing**
- **masturbation**
- **body rubbing**
- **oral sex**
- **anal sex**

These things can't cause pregnancy unless sperm somehow enters the vagina.



SO HERE WE ARE

You've had sex, the sperm and egg have "met," and now you're pregnant. We have fertilization! Your periods will be put on hold for a while. It'll take lots of care to get ready for the adventure that lies ahead. You'll have many hard decisions to make. A baby changes everything. This is your life, and there's no better time to take charge and be brave.

It may be a hard time dealing with school, work, parents and friends, but stay calm and read the words of wisdom and advice from experts who have gone through the same things you will. You're pregnant, and this book is here to help sort some things out for you.



MedicineNet.com: Pregnancy Body Changes and Discomforts

medicinenet.com/pregnancy_basics/article.htm



BODY BASICS

YOUR REPRODUCTIVE SYSTEM

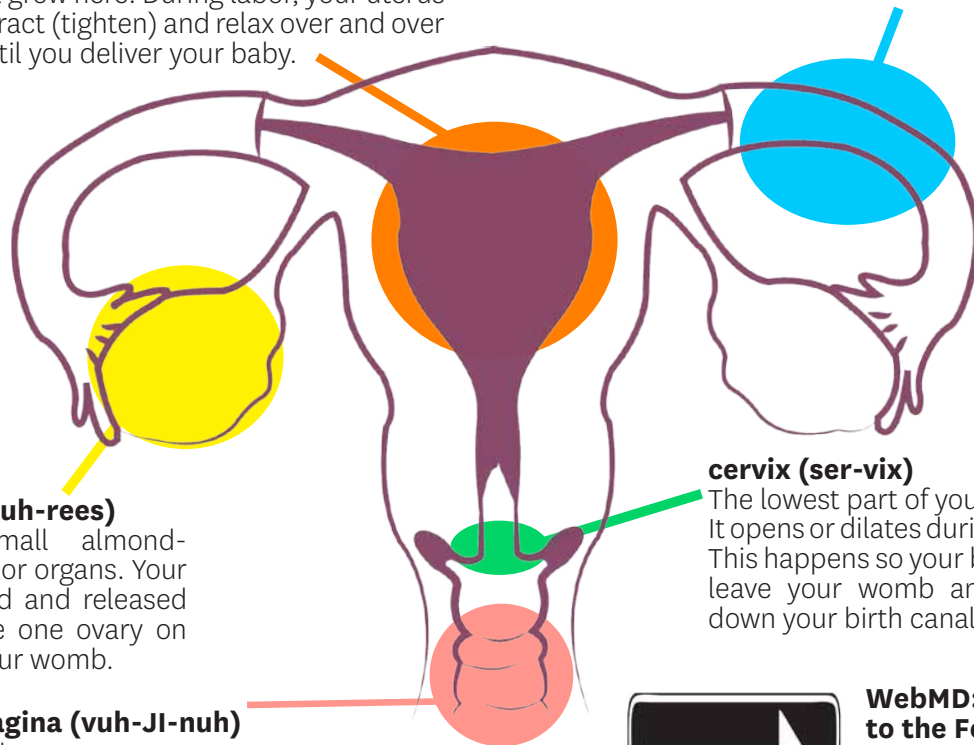
It's pretty amazing to think there's a tiny human being growing inside your body. It doesn't happen without a lot of body parts helping out and playing a role. Get to know these special parts and you'll be able to talk to your doctors and nurses about what's going on inside you during this exciting time.

uterus (YOO-ter-iss)

Often called your womb. It's a hollow, pear-shaped organ in your lower belly. It sheds its lining each month during your period. Your baby will grow here. During labor, your uterus will contract (tighten) and relax over and over again until you deliver your baby.

fallopian tubes (fuh-LOPE-ee-un)

Two thin tubes that run from each side of your womb to each ovary. The sperm and the egg meet here to start pregnancy.



ovaries (OH-vuh-rees)

Two very small almond-shaped glands or organs. Your eggs are stored and released here. You have one ovary on each side of your womb.

cervix (ser-vix)

The lowest part of your womb. It opens or dilates during labor. This happens so your baby can leave your womb and move down your birth canal.

vagina (vuh-JI-nuh)

Where your partner enters during sex. It's the tube, or birth canal, leading from your womb to the outside of your body.



WebMD: Your Guide to the Female Reproductive System
webmd.com/sex-relationships/guide/your-guide-female-reproductive-system

AM I REALLY PREGNANT? THE REALITY OF PREGNANCY

HAS IT SUNK IN YET?

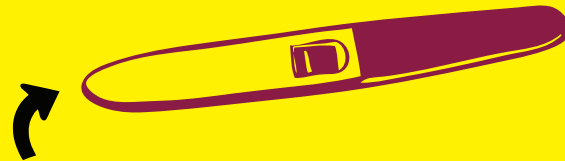
Probably not. This life-changing event will take some getting used to. You may deny that you're really pregnant. This couldn't possibly happen to you, right? Wrong. Even birth control doesn't work 100 percent of the time. Pregnancy happens. Babies happen. And you're going to have one.

PREGNANCY SIGNS

Missing your period is the most common sign that you could be pregnant. But stress, hormones, tension, birth control methods, fatigue and losing or gaining too much weight can also cause you to miss or skip periods. Here are some other signs that you may be pregnant...

- **Bleeding after the embryo attaches to the lining of the uterus**
- **Tender or swollen breasts**
- **Tiredness**
- **Backaches**
- **Nausea or morning sickness**
- **Headaches**
- **Having to pee often**
- **Changes in appetite**

These signs may show up within a few weeks of having sex and fertilization happening.



PREGNANCY TESTS

If you've been having some of the above symptoms and think you could be pregnant, you should take a pregnancy test. This can be done at home, in a doctor's office or at a pregnancy center or clinic. There are two types of pregnancy tests. One tests the urine. The other tests the blood and is always done by a doctor.

The home pregnancy urine test looks for HCG, sometimes called the pregnancy hormone. You can do this test easily by yourself. They're available at any drugstore. Wait at least five days after missing your period before you take a home pregnancy test.

If this test is positive and shows that you're pregnant, see a health care practitioner within a week or so. If the test comes up negative, pay attention to your body and figure out if the test could have been wrong. If your period still doesn't come, take the test again or see a doctor.

YOUR OPTIONS

It's time to make some big decisions. The sooner you decide what's best for you and your baby, the sooner you can make plans. Here are a few of your options:

Keep the Baby

Your first option is to keep your baby. The joy a baby can bring into your life is nothing short of wonderful. It can also be very difficult. Plans for school or work many times have to be put aside to raise a child. If you are able to do this emotionally and have the money, you should think about taking the steps to raise your child and be the best mom you can be.

Adoption

Placing the child up for adoption is another choice. It's pleasing for some women to know that their child is being raised in a loving and stable home. Others feel a deeper sense of loss that lasts a long time. Adoption laws are different state to state. You can learn the adoption laws in your state, as they may help you make this important decision. Find out what rights the baby's father has in your state. He may have to agree to a plan of adoption for the child.

Foster Care

Continue with the pregnancy, and then give the baby to a foster care family for a short time. This family will care for your child until you're emotionally, physically and financially ready to take over.

For more information, see the National Foster Parent Association's website: **nfpaonline.org**

Mom and Dad

You and your baby may be able to live with your parents as they help provide for you and your child, offering you a place to live and teaching you parenting skills. This decision starts with you telling your parents about your pregnancy and helping them understand how important it is for you to keep and raise the baby.



American Pregnancy Association
americanpregnancy.org

NEWS TRAVELS FAST

TELLING YOUR PARENTS

THE RESULTS ARE IN

You took a pregnancy test or went to the doctor and found out the news: it's positive. You're pregnant. You've been thinking about the situation for days and can think about little else. The results of this one little test have so much more impact than a Geometry or English test. This is life changing stuff. You're going to have to tell your parents but you have no idea how they'll react.

Will they be supportive? Will they understand? Will they scream at you? Will they kick you out of the house?

You're scared and confused. You're shocked and desperate for solutions. And you're not alone. You aren't the first teen to become pregnant and have to share that fact with parents. And guess what? You won't be the last.

BRACE YOURSELF

You may consider yourself really close to your parents. Maybe they've supported your decisions in the past and have been easy to share ideas and beliefs with. But this is big. You likely have no idea how they'll react to the news that you're pregnant. If your parents know you've been having sex, they may be more understanding to the fact that you're pregnant. But if you've been told not to have sex before marriage and that it's against their values, you could have a rough time breaking this news to them.

Most likely your folks will be alarmed and shocked to find out their teenage daughter has been having sex. The pregnancy will make them disappointed and worried for you. They know this will change your plans for the future in a big way. Think about your parents and how they'll react. Getting an idea of what to expect can help you prepare for the conversation.



CONVERSATION STARTERS

Choose a good time to deliver the news, preferably when everyone is sitting down with nothing distracting them. Try to be as calm as you can. You might say:

“I have to tell you something really important, and it’s difficult for me to say, but I found out that I’m pregnant.”

Let this soak in for them! Your parents will probably be a bit stunned. They may be angry. They may yell. They may become emotional. They will certainly ask a lot of questions. If you’re prepared, you’ll know how to react and answer those questions. Try to keep the conversation positive. Don’t yell back if a parent yells at you. Not all parents react this way. Some can be surprisingly supportive, wishing only the best for you. Believe that even those parents who get upset will most likely turn out to be supportive and caring soon enough.

Let your parents know that you understand their feelings and concerns. Use phrases such as these to make that point:

“I know I let you down and that you didn’t expect this of me.”

“You have a right to be mad. I don’t blame you.”

Once you’ve had the chance to speak honestly and openly, let your parents have their say. They may need to blow off steam at this point. Let them. Then share your feelings with them. Tell them you’re sorry and know that you’ve let them down, if that’s how you feel.

Don’t be afraid to share your worries and concerns with Mom and Dad. Talk to them if you’re unsure of what to do, how it will affect school, what friends will think, where to go from here for help.

WHERE TO GO FROM HERE FOR HELP

It’s OK to become emotional and cry when you share this news. It’s a big change, and it will affect more than just you. If you think you might get too choked up to speak clearly with your parents, write your feelings down in a letter. That may help you express the points you want to make more clearly.

Your doctor's office or health clinic can offer help with how to talk to your parents and deliver your news. They'll know how to get you ready for the talk. A doctor, nurse or health counselor will work with you to find the right words to say and how best to say them. Some may even offer to be with you when you talk to your parents.

If you're worried that a parent will react to the news with violence or abuse, have someone else there, such as an aunt, an uncle, a trusted family friend. If your safety is at stake, get advice ahead of time from a teen health clinic, Planned Parenthood or a teen pregnancy hotline. These helpful sources will direct you to people who can support and protect you.

PREGNANCY BY THE NUMBERS

273,105

Total number of babies born in the U.S. in 2013 to women aged 15-19 years, a record low for this age group and a 10 percent drop from 2012.

Source: Centers for Disease Control and Prevention

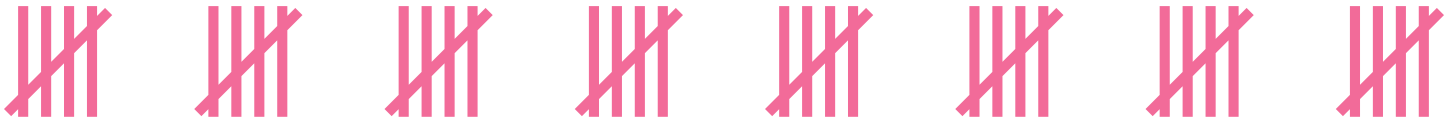
THE DIALOGUE CONTINUES

It's going to take more than one talk on this subject. There will be a lot to discuss, and feelings will change. You'll need the emotional and intellectual support of your parents in deciding what to do along the way. It's good to talk to your parents whenever you can. You'll have many feelings and issues that they can help you figure out. Best case: your parents can help you make decisions and will support the choices you make. Use Mom and Dad as a source of guidance and support. A hard situation like this can often lead to a closer-knit family, built on love, support, forgiveness, acceptance and teamwork. Go, Team Family!



TeensHealth: Telling Parents You're Pregnant

kidshealth.org/teen/your_mind/Parents/tell_parents.html



FORTY WEEKS OF WONDER

BREAKING DOWN THE TRIMESTERS

GETTING USED TO PREGNANCY

OK. You've accepted that you're pregnant. It's going to happen. You're going to have a baby and you've told everyone who needs to know. Here comes the next question...

»» WHEN ARE YOU DUE? »»

At your first prenatal visit, your doctor will help you figure out your due date. Your due date is 40 weeks from the first day of your last menstrual period.

Understand that your due date is just a guess. Most babies are born between 38 and 42 weeks from the first day of their mom's last period and only a small percentage of women deliver on their actual due date.

It's helpful to think in terms of weeks when looking at your pregnancy. Most pregnancies last about 40 weeks. Get used to hearing the term **trimester**. A pregnancy is split into three trimesters. Each trimester lasts about 13 weeks.



MISSION: DEFINITION

Trimester (TRI-mest-er): one of the three divisions during pregnancy, in which different phases of a baby's growth take place. Each trimester is three months.



UCSF Medical Center: The Three Trimesters

[ucsfhealth.org/
conditions/pregnancy/
trimesters.html](https://www.ucsfhealth.org/conditions/pregnancy/trimesters.html)

1ST TRIMESTER

WEEK 1 TO THE END OF WEEK 12

WHAT'S HAPPENING TO BABY

The fertilized egg moves down the fallopian tube and connects to the lining of the uterus.

During the first part of this trimester, baby's major organs and systems begin developing.

Bones and muscles form. Muscles can tighten and baby can make a fist.

The baby weighs about 1 ounce and is about 3 inches long by the end of this trimester.

WHAT'S HAPPENING TO YOU

- Hormone changes start to affect your whole body. Some women go through these health conditions:
- Morning sickness
- Weight gain
- Exhaustion
- Breast swelling and soreness
- Food cravings
- Mood swings
- Headaches
- Need to pee more
- Constipation

2ND TRIMESTER

WEEK 13 TO THE END OF WEEK 26

WHAT'S HAPPENING TO BABY

Sex organs form. The doctor may be able to tell if your baby is a boy or girl.

Eyebrows, eyelashes and fingernails form. Your baby has a fingerprint all its own.

Your baby can swallow, hear and suck its thumb.

Your baby will start sleeping and waking regularly. You should be able to feel movement and kicking by the middle of the second trimester (20 weeks).

The baby measures about 14 inches long and weighs over 2 pounds.

WHAT'S HAPPENING TO YOU

- Morning sickness and fatigue are going away. You start "looking pregnant" due to your growing baby. You may experience these discomforts as your body expands:
- Body aches, back and abdomen pain
- Stretch marks
- Itchy, dry skin on stomach
- Numb, tingly hands
- Swelling in face, feet and hands
- A dark line from your belly button to your pubic line

3RD TRIMESTER

WEEK 27 TO DELIVERY

WHAT'S HAPPENING TO BABY

This is the trimester of the most growth.

Baby opens its eyes for the first time since the first trimester and can notice changes in light.

Taste buds form. She can tell sweet tastes from sour tastes. The baby may even hiccup.

All organs and senses are fully developed by the end of this trimester. The baby moves down the uterus into the head-down position to get ready for delivery.

Your baby will be around 20 inches long and weigh six to 9 pounds when born.

WHAT'S HAPPENING TO YOU

- Because of your size, you may find it hard to get comfortable and sleep at night. Along with what you felt during the second trimester, you may also have:
- Heartburn
- Shortness of breath
- Pre-milk called colostrum leaking from your nipples
- Contractions that may mean real or false labor



STARTING OFF RIGHT

YOUR FIRST PRENATAL DOCTOR VISIT



MISSION: DEFINITION

Prenatal (pree-NAY-tul): Before birth; during or related to pregnancy.

FIRST THINGS FIRST

It's VERY IMPORTANT to see a doctor as soon as you think you're pregnant. Getting prenatal care early can help you have a healthier baby. You want to give your child the very best start at life. This is your child, and the care you give now will play a role in his or her growth.

AT YOUR FIRST PRENATAL VISIT

Before your first visit, talk to your family and the baby's father. Ask them about any health problems that run in the family. You'll share the info with your doctor, and he or she will take your whole health history. Tell your doctor about any health problems you may have. List any medicines you take.

Your doctor will...

- **Do a physical exam**
- **Let you hear the baby's heartbeat, if possible**
- **Do an ultrasound, if needed**



MISSION: DEFINITION

Ultrasound (UL-truh-sound): A scan that uses sound waves to get a picture of the growing fetus. The scan is done through the vagina in the first trimester and on the abdomen after 13 weeks.



THE TEST KNOWS BEST

Blood tests are needed to:

- **Check your blood type and blood cell counts**
- **Find out whether your body is safe from some diseases like German measles**
- **Check your urine for protein, sugar or infection**
- **Check for HIV, hepatitis and syphilis, all of which are Sexually Transmitted Diseases (STDs)**



REMEMBER:

Blood tests help your doctor learn about your health. All pregnant women should get these tests.

A WORD ABOUT STDs

Nearly **10,000,000** – that's 10 MILLION – teens and young adults get a sexually transmitted disease (STD) each year. This is why your doctor will test for STDs when you come in for your first visit. STDs can cause problems for you and your baby – sometimes problems that don't show up until years later.

Knowing if you have an STD gives the doctor a chance to help you and your growing baby. And know that being pregnant doesn't mean you can't get an STD, either. If you have sex while you're pregnant, be sure your partner uses a condom.

HERE TO HELP

Make sure you ask your doctor and your health team all the questions you'd like. They want to know what's on your mind. No question is silly or stupid. This is your team, and they're on your side, ready to help.

Q & A

Q: How many times will I need to visit the doctor while I'm pregnant?

A: Every four weeks during the first 29 weeks you are pregnant. Then it's every two to three weeks from 30 to 36 weeks. After 36 weeks, it's every week until you deliver.

Make sure you go to all of your prenatal visits, even if you're feeling well. Your health and the health of your baby depend on it.



Keep all your pregnancy materials in one place. Buy a notebook with pockets and decorate it with stickers. Write down any questions you have for your doctor or nurse between visits. Keep your appointment cards and prescriptions in a safe place until you need them.



BabyCenter: Your First Prenatal Visit

babycenter.com/0_your-first-prenatal-visit_9344.bc

CASE BY CASE

YOUR CASE MANAGER AND YOU

SO WHAT'S A CASE MANAGER?

Working for an insurance company, a case manager is most often a trained nurse or social worker. The case manager works with the mother-to-be and her family, setting health goals and helping to see that the patient reaches those goals. She doesn't prescribe medicine or give you hands-on health care. But she can help you understand what's going on with your body during your pregnancy. She can also offer emotional support, help you find resources and work to keep your medical team advised about any health problems.

WHAT YOUR CASE MANAGER CAN DO FOR YOU

- Teach and get you ready to make health care choices that are best for you and your baby
- Work with other members of your support team and help everyone work toward the same goal
- Answer your questions about medicines, treatment or just general questions about being pregnant
- Find resources if you need help with personal or daily care needs
- Offer you extra options to help you have a healthy baby



Case Management Society of America
cmsa.org

TESTING, TESTING

HOW MEDICAL TESTS CAN HELP YOUR PREGNANCY

PRENATAL TESTING

It's important to realize that special types of tests during your pregnancy make sure the process is going well. This is called PRENATAL TESTING.

Some tests look at your health—others look at your baby's health. If you get too far along, you may not be able to get the tests you need. Make sure to go to all of your visits so you don't miss any tests.

BIRTH DEFECTS

There's a test that can be performed during the first trimester of pregnancy called a First Look. Usually done between weeks 11 and 13, this test includes two blood tests and an ultrasound that measures the area at the back of the growing baby's neck. It's safe and painless and can check for possible birth defects related to the chromosomes.

If you miss this early test, you can get a simple "marker test." Done between weeks 15 and 20, this blood test checks for birth defects by measuring proteins or hormones. Tests like this can check for spinal defects and chromosome problems.

During the first trimester, tests can't always tell for certain if your baby has a birth defect or not. Tests can give you an idea of the chances of having a defect.



RISK FACTORS:

- **Your age**
- **Your weight**
- **Your race**
- **Your health**



MISSION: DEFINITION

Chromosomes (CROME-uh-somes): The threadlike structures of nucleic acids and protein found in the nucleus of living cells, carrying genetic information in the form of genes.



URINE

Your doctor will ask for a urine sample at each visit. You'll pee into a cup so the lab can check your urine. This sample will show your sugar and protein levels and can tell if you have any signs of infection.

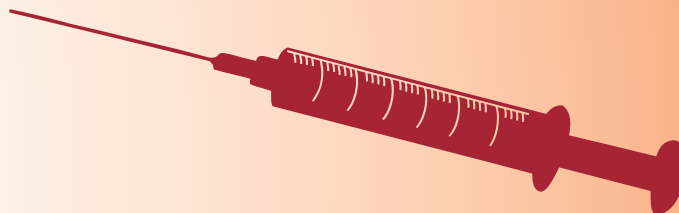


AMNIOCENTESIS (AM-NEE-YOH-CENT-EE-SIS)

If the test for birth defects comes out "abnormal," your doctor may suggest a second test. This test is called amniocentesis, or "amnio" for short. For this test, the doctor will put a long, very thin needle through your belly. Most women say it doesn't hurt. Some women say they feel a quick tug or pinch. Next, the doctor will remove a small amount of water from the sac that surrounds the baby. The fluid is then tested to check the baby's chromosomes.

An amnio test can sometimes:

- **Check for rare diseases or infections in the baby**
- **Find out if the baby's lungs are mature**
- **Tell if your baby is a boy or a girl**



SAFE AND (ULTRA)SOUND

Ultrasound uses sound waves to see your baby inside you. During the middle of your pregnancy, at about 18 to 20 weeks, an ultrasound can be useful in looking closely at what's going on in your womb.

The person doing the test will place a clear jelly on your belly. Then he or she will gently press a special tool over your tummy. The test does not hurt.

THE ULTRASOUND WILL MEASURE:

- **The baby's size, which helps check your due date**
- **The amount of fluid in the sac**
- **The placenta**

THE ULTRASOUND WILL SHOW:

- **How many babies you are carrying**
- **Any major physical birth defects**



PREGNANCY BY THE NUMBERS

120,000

Approximate number of babies born in the U.S. each year with a birth defect.



MISSION: DEFINITION

Placenta (pluh-CEN-tuh):

The tissue that joins the mother-to-be and the unborn baby in the womb. It brings food to the baby and takes waste out.

DIABETES TESTING

It is important to have your blood sugar tested during your pregnancy. High blood sugar can cause health problems for babies. Making sure you eat healthy foods, stay active and see your doctor can lower your chance of getting gestational diabetes. Your blood sugar should be tested between weeks 24 and 28 of your pregnancy. See the DANGER AHEAD chapter (pg. 39) for more on diabetes.

THE Tdap VACCINE

Sometime after the first trimester, all pregnant women who have never gotten it before should get the Tdap vaccine. This shot is safe for the baby. It helps protect you from the diseases Tetanus, Diphtheria and Whooping Cough. It also helps protect the baby from whooping cough during the first six weeks of life, when he or she is most at risk.

FLU SHOT

All pregnant women should get a flu shot during the flu season. Flu season runs from November to April each year.

Pregnant women who get the flu can get much sicker than other people. Plus, the shot protects your baby from the flu. It's safe for your baby when you get the flu shot.

CVS TESTING

CVS (Chorionic villus sampling) is a prenatal test used to find birth defects and other problems. Doctors take a sample of cells from the placenta where it attaches to the lining of the uterus. CVS can help identify chromosomal problems such as Down syndrome or other genetic diseases like cystic fibrosis and sickle cell disease.

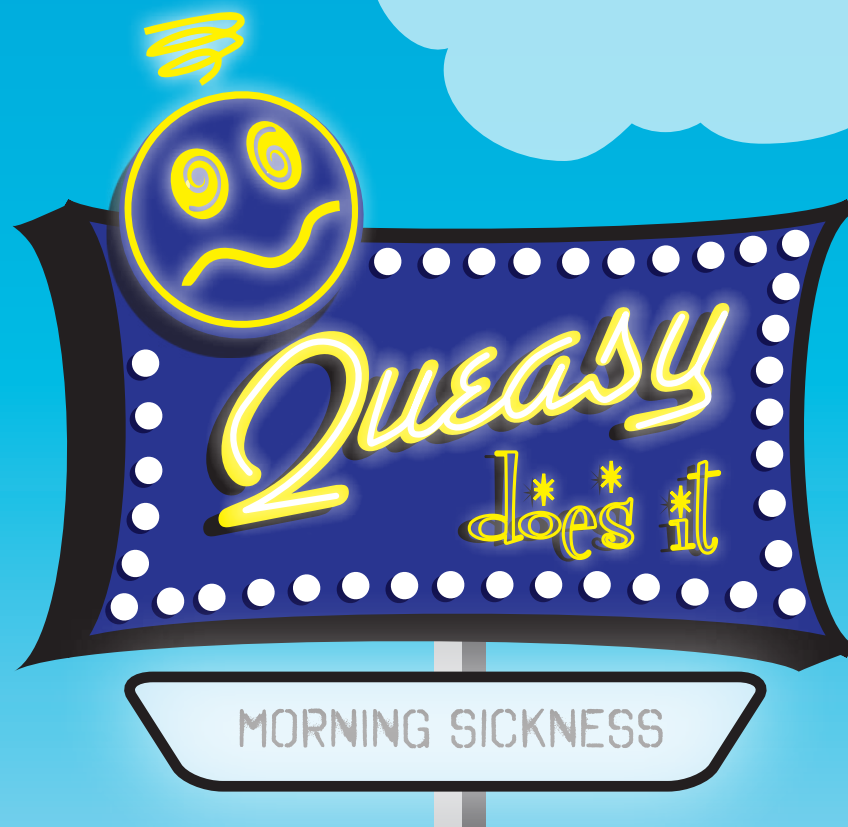


American Pregnancy Association: Prenatal testing

americanpregnancy.org/prenataltesting

Medline Plus: Prenatal Testing

medlineplus.gov/prenataltesting.html



THE BIG QUEASY

Here's the thing about "morning sickness" – it's not always just in the morning! While some women feel the symptoms worst in the morning, the feelings of nausea and vomiting can flare up anytime and often last the whole day. In fact, the medical term for morning sickness is "nausea and vomiting of pregnancy." Symptoms are different for different women. Nausea happens in 50 percent of pregnancies.

Morning sickness usually begins about six weeks in, and it may get worse after that.

RELIEF IN SIGHT

THE GOOD NEWS

About half of women who feel the "nausea and vomiting of pregnancy" move past it by about week 14. Within another month, the rest of the moms-to-be get relief from the queasy discomfort.

THE BAD NEWS

It can return later in some cases. A small number of women feel the symptoms nearly up to the time of delivery.

HERE ARE SOME WAYS THAT HAVE WORKED IN EASING
THE NAUSEA AND VOMITING FOR SOME WOMEN:

- Eat many small meals and snacks through the day so your stomach is never empty.
- Stay away from foods and smells that cause nausea for you.
- Nibble on easy snacks like crackers first thing in the morning, then rest a while before you get up.
- Try to stick to bland foods served at room temperature.
- Steer clear of fatty foods, rich, spicy, acidic and fried foods.
- Sip fluids often all through the day.
- Stay away from nonfood morning sickness triggers. Perfume smells, stuffy rooms, car rides and even flickering lights could set you off.
- Relax and take naps if you have the time.
- Watch a movie or visit with friends to take your mind off the nausea.
- Take your prenatal vitamins with food or just before bed.
- Make sure to drink lots and lots of water.
- Drink ginger tea or take ginger capsules.

Morning sickness can drain you and wear you down. Your doctor can suggest ideas for relief, based on the symptoms you're having.



BabyCenter: Morning Sickness: Causes, Concerns, Treatments
babycenter.com/morning-sickness

WebMD: Managing Morning Sickness
webmd.com/baby/guide/managing-morning-sickness



WHAT A PAIN!



OTHER COMMON PREGNANCY DISCOMFORTS AND WHAT HELPS THEM

HEARTBURN



WHY YOU HAVE IT

Your hormones change how your whole digestive system works. Foods move slower through your body.

The space between your esophagus (food pipe) and your stomach gets more relaxed. Acids can move into your food pipe from your stomach.

Your growing womb also pushes on your stomach a little.

WHAT HELPS

Ask your doctor about antacids.

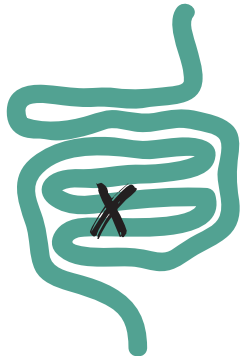
Eat five or six small meals over the day instead of two or three large ones.

Wait an hour or two after you eat before lying down.

When lying down, prop your head and back up with pillows. This puts your upper body higher than the rest of your body.

Stay away from high fat foods, chocolate, spicy foods and caffeine in tea, coffee and soda.

CONSTIPATION



WHY YOU HAVE IT

More of the hormone progesterone, which relaxes smooth muscles in the body, including the digestive tract.

The pressure of your growing uterus on your rectum.

High doses of iron supplements in your body.

WHAT HELPS

Drink about one-half gallon of water each day, or eight 8-ounce glasses. Talk to your doctor first if you have kidney or health problems.

Eat a diet high in fiber. Get your fiber from foods like whole grains, bran, and fresh or dried fruits, like prunes.

Exercise regularly. Walking, swimming and yoga can all help ease constipation and make you feel more fit and healthy.

SWOLLEN ANKLES



WHY YOU HAVE IT	WHAT HELPS
High hormone levels.	Drink at least six to eight glasses of water each day. Eat less salty foods and don't add salt to your food. Put your feet up and rest lying on your side as often as you can. Do this a few times each day. Wear loose and comfortable clothes and shoes. Stay active. Moving your muscles will help keep fluids from collecting in your ankles.

BACK PAIN



WHY YOU HAVE IT	WHAT HELPS
Leaning back for balance as your belly grows. Added stress on your muscles.	Get a "belly belt" at a store that sells maternity items. This support belt helps hold your back and growing belly. Stand up straight and push your shoulders back. Good posture helps ease back pain. Keep your back straight up and down when you lift things off the ground. Use your legs. Wear low-heeled shoes with good foot support. Stretch your back with yoga or other exercises.

LEG CRAMPS



WHY YOU HAVE IT	WHAT HELPS
Too much calcium. Too little calcium.	Eat calcium rich foods like milk, cheese, yogurt, spinach, kale, soybeans and grains. Move! Try not to sit or stand in one place for a long time. Stretch each leg and your calf muscles for 20 to 30 seconds before you go to bed. Massage the muscle when you get a cramp. Stay active during the day. Try to take a walk each day. Drink about one-half gallon of water each day, or eight 8-ounce glasses. Talk to your doctor first if you have kidney or other health problems. Take your vitamins.

FEELING TIRED



WHY YOU HAVE IT	WHAT HELPS
Body and hormonal changes. Emotional stress.	Take a nap or a few rest periods each day. Rest lying on your side. Get plenty of sleep. Go to bed earlier than you did before you had a baby on the way. Eat healthy. Take your prenatal vitamins. Ask family or friends to help you with housework or tasks that wear you out. Stay active. Exercise can give you more energy when you're pregnant.



WebMD: Common Pregnancy Pains and Their Causes
webmd.com/baby/guide/pregnancy-coping-with-discomforts

Baby Med: Tiredness during Pregnancy
babymed.com/pregnancy/tiredness-during-pregnancy

CHAPTER 2

STAYING HEALTHY... FOR YOU AND YOUR BABY

PREGNANCY AND WELLNESS

STAY ACTIVE!

DID YOU KNOW

Staying active while you're pregnant can make your labor and delivery a little more simple! Regular exercise helps you stay at a healthy weight and is good for your health and your baby's health.

WAYS TO STAY ACTIVE

Walk around the neighborhood or in an inside mall with your friends and family.

Find TV shows with low impact exercises for pregnant women, or get a video on the subject.

Try a yoga program designed for pregnant women.

Swim. Call your local YMCA or Department of Parks and Recreation to see if there is a program near you.

Talk with your doctor before starting any exercise program. If you exercised before you got pregnant, you should be able to keep it up. As you get further along, you may need to slow down.

Try to exercise at least two to three times each week for 20 to 30 minutes each time.

Drink plenty of water before, during and after exercise.

Don't exercise outside on hot days. You and your baby can get overheated and sick.

Don't lift heavy weights.

Don't play sports like soccer, basketball and softball. You could get hurt by a ball or another player.

Don't do activities where you might fall. Stay away from exercises like skating, rollerblading, skateboarding, cycling and horseback riding.

Don't keep exercising if you start to feel tired, short of breath or faint.

REMEMBER:

Always talk with your doctor before starting an exercise program.



EATING HEALTHY FOR TWO

Eating many smaller healthy snacks instead of three large meals daily can help with morning sickness and keep you from binging on junk food.

Try these healthy choices. Check them off as you try them.



FOOD CHOICE	RECOMMENDED DAILY SERVINGS
Whole grains like whole-wheat bread, whole wheat pasta, oatmeal and whole-grain cereal	6 ounces
Vegetables	2 cups
Fruits	1 to 2 cups
Protein-rich foods like lean meats, poultry, fish, tofu, eggs and beans	2 to 3 servings
Healthy fats like olive oil, canola oil, nuts and avocados	2 to 3 servings
Calcium-rich foods like low-fat yogurt, skim milk and low-fat hard cheeses	2 to 3 cups

CHOICES

Healthy Food Choices:

- Choose fresh or canned fruits for a snack.
- Try dried fruit like raisins instead of candy.
- Eat fresh or frozen vegetables instead of canned. They have less salt.
- Eat less fat. Take the skin off chicken and trim the fat off the meat before eating.
- Go easy on butter and margarine and fried foods.
- Stay away from fast food.
- Stay away from or limit foods with little nutritional value like junk food.
- Stay away from or limit drinks with little nutritional value like sugary sodas, fruit punches and sports drinks.

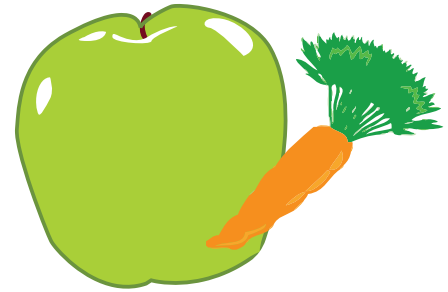
Quick Meal Choices:

- Chicken (skin taken off) with brown rice and green beans
- Hard-boiled or scrambled eggs and wheat toast
- Lean hamburger with small salad
- Beans and rice with broccoli

SNACK CITY

If you're in the mood for snacking, there are smart choices you can make to satisfy the cravings:

- Applesauce topped with cinnamon
- A piece of fruit
- Canned or fresh fruit and cottage cheese
- Cereal and milk
- Cup of tomato soup and crackers
- Cut up veggies and sliced cheese
- Glass of milk and graham crackers
- Light tuna mixed with a little low-fat mayo
- Peanut butter on bread, crackers or an apple
- Yogurt with some cereal on top



If you feel like snacking and can't save your appetite for something healthy, try these tips:

- Instead of white bread, try whole-wheat bread.
- Instead of chips, reach for pretzels.
- Instead of candy, go for something sweet like applesauce topped with cinnamon.
- Instead of high fat cookies, cakes, doughnuts and pastries, try fig bars or graham crackers.
- Instead of soft drinks or flavored powdered drinks, try juice mixed with some seltzer water.



THE CALCIUM CONNECTION

Calcium is great for you and your baby's bones. It doesn't just come from milk!



YOU CAN GET CALCIUM FROM...

- Almonds
- Beans (black beans, navy beans)
- Bok choy (a type of Chinese cabbage)
- Broccoli
- Cottage cheese
- Greens (turnip, mustard, collard)
- Kale
- Orange juice with calcium added
- Molasses
- Sesame seeds
- Soy milk with calcium added
- Spinach
- Yogurt

WIC (WOMEN, INFANTS AND CHILDREN)

Pregnant women who qualify for the federal WIC program can get healthy foods like cereal, juice, milk, cheese, eggs, beans, peas, peanut butter, carrots and tuna for free.

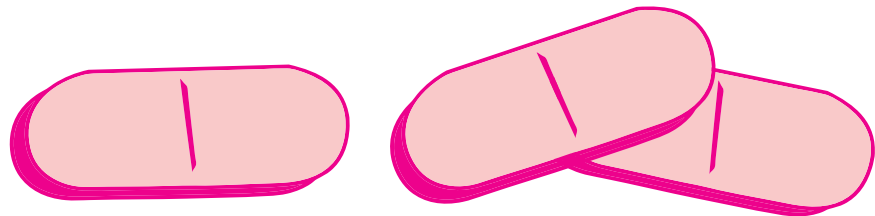
After your baby is born, you can also get formula and breast-feeding support on WIC. Talk to your doctor or local health department to learn more about WIC.

VITAMINS ARE VITAL

Most people can benefit from vitamins, but they are even more important for pregnant women. Special prenatal vitamins and minerals such as iron, calcium and folic acid (sometimes called folate) are needed for the growth and development of your unborn baby.

Prenatal vitamins:

- Help make sure that you have all of the ingredients your body needs to carry a healthy baby
- Contain folate to help your baby's brain and spinal cord form well
- Often contain extra calcium and iron your body needs





If you have morning sickness, you might try chewable vitamins. The downside? These vitamins don't have all the nutrients you need. If you don't eat any beef, chicken, turkey, pork or fish, talk to your doctor. Vegetarians may need extra vitamin B-12.

THE FACTS ON FOLIC ACID

Folic acid is also called folate and is a natural B vitamin. It does more than anything else in your prenatal vitamins to help you have a healthy baby.

Folic acid helps avoid brain and spinal cord birth defects in your baby. Since your baby's brain and spinal cord form early on, you should take folic acid as soon as you find out you're pregnant.

New studies show that folic acid also helps keep babies from being born too soon. Women who were trying to get pregnant took folate for a year before getting pregnant. The results? The moms had a much lower chance of having their baby too soon.

All prenatal vitamins contain plenty of folic acid for a pregnant woman. If you take one prenatal vitamin each day, you will not need any extra folic acid.

It may be added to foods like bread and pasta. Many breakfast cereals have all the folic acid you need in just one bowl. Check the label to find out.

These foods are a good natural source of folate:

- **Broccoli**
- **Bananas**
- **Nuts**



USDA Food and Nutrition Service: WIC

fns.usda.gov/wic/women-infants-and-children-wic

American Pregnancy Association: Prenatal Vitamins

americanpregnancy.org/pregnancyhealth/prenatalvitamins.html



NOT GOOD FOR THE BABY BUMP

DANGERS TO STAY AWAY FROM

FOOD RISKS

We mentioned some of the best foods to eat while you're pregnant, as well as other choices for healthy snacking. Some foods can be harmful for your baby and a risk to his or her health and growth.

LIMIT THESE FOODS:

- **Liver**
- **Tuna:** Don't eat more than two 6-ounce cans of white or albacore tuna each week. Tuna steak should be limited to 6 ounces in a week

Other foods can be downright dangerous for your baby. They may contain harmful germs.

DON'T EAT THESE FOODS:

- **Raw or undercooked meat: chicken, turkey and sushi**
- **Fish with high levels of mercury: shark, swordfish, king mackerel, tile fish—also called golden or white snapper**
- **Refrigerated smoked seafood: salmon (lox), whitefish or cod. These can be eaten if they are cooked or heated**
- **Refrigerated meat spreads**

DON'T DRINK THESE LIQUIDS:

- **Raw (unpasteurized) milk or foods made from it**
- **Unpasteurized fruit or vegetable juices. These may say "fresh squeezed" on the label**

WARNING

Beer, wine, and other alcoholic drinks can cause babies to have serious mental and physical defects for their whole life. Do not drink any wine, beer, booze or spirits while you are pregnant.



REALLY BAD NEWS!

BOOZE IS BAD NEWS

Drinking alcohol when you're pregnant can cause your baby to have serious mental and physical defects for his or her whole life. During this important time, say no to beer, wine, mixed drinks and alcohol shots.

FETAL ALCOHOL SYNDROME

When a pregnant woman uses or abuses alcohol, the results pose harmful risks for her unborn baby. After all, just like the food you eat, what you drink passes through the placenta into the baby. Any amount of alcohol taken in by the mother can be passed to her baby and cause a condition known as Fetal Alcohol Syndrome. There is no safe amount of alcohol to have when you're carrying a child. Larger amounts increase the chances, and binge drinking presents a greater risk than small amounts.

A baby with Fetal Alcohol Syndrome may have these symptoms:

- Poor growth in the womb and after birth
- Poor coordination and muscle tone
- Delayed growth and problems in thinking, speech, movement or social skills
- Heart defects
- **Problems with the face, including:**
 - Narrow, small eyes with large folds
 - Small head
 - Small upper jaw
 - Smooth groove in upper lip
 - Smooth and thin upper lip

Think about the damage you could do to your child before he or she is even born. The results can last a lifetime for your child. Say no to alcohol while you're pregnant. Your friends will understand and respect your wishes. If they don't, what kind of friends are they really?

PREGNANCY BY THE NUMBERS

1981

Year the Surgeon General first advised that women should not drink alcoholic beverages during pregnancy because of the risk of birth defects.

QUIT SMOKING. NOW!

Are you a smoker? Quit it.

Giving up cigarettes is one of the best things you can do for your baby. Smoking can cause very serious health problems for your unborn child. Think about the reasons why you smoke (“It relaxes me.” “It calms my nerves.” “It feels good.”) and add this: “It dangerously harms my baby!”

Smoking cigarettes while you’re pregnant can hurt your baby’s lungs and airways. This damage can lead to breathing problems and asthma. It can also increase the risk of Sudden Infant Death Syndrome, or SIDS. This is the unexplained sudden death of a healthy baby. It’s also known as “crib death.” Smoking can raise your chances of having a miscarriage.

DID YOU KNOW: Being around someone who smokes while you’re pregnant can also cause harm to your baby? This secondhand smoke is just as harmful as if you were smoking. **Make sure no one smokes around you or in your home.**

Smoking or being near secondhand smoke while you’re pregnant can:

- Slow down your baby’s growth and development
- Lower the amount of oxygen for your baby
- Raise the risk that your baby will be born too early
- Cause your baby to fuss and cry more
- Make it harder for your child to do well in school
- Cause your child to have more ear infections and colds

Give up cigarettes, feel healthier. You will quickly see that you:

- Have more energy
- Breathe easier
- Enjoy the taste and smell of food more
- Make more breast milk
- Have fewer wrinkles and cleaner teeth
- Have more money to spend on you and your baby



Quitting smoking isn’t easy but once you quit, you and your baby will feel better. If you want to stop smoking for your baby’s health and your health, take that first big step and ask your doctor for help. Your health plan may be able to give you some tips as well. For free help, go to smokefree.gov, or call 1-800-QUIT-NOW. If you can’t quit, at least cut back. Smoking less is still better for your baby.

STREET DRUGS: DEALING IN DEATH

Using drugs can cause you health problems. Your baby can become addicted to the drug you take. Ever go through withdrawal from a drug? Not pleasant, is it? Now imagine your baby going through that same withdrawal pain after birth.

Even a little bit of a drug can be harmful. Cocaine use can cause the placenta to separate from your womb. This is called abruption. It is very painful and very dangerous. And it can lead to the death of you or your baby.

BE MEDICINE-SMART

To keep your baby safe, talk to your doctor before taking any:

- **Over-the-counter drugs**
- **Prescription drugs**
- **Herbal medicines**
- **Medicines meant for others**
- **Medicines with hormones**

BE TOUCH-SMART

Even things you touch can be harmful to your baby. Some activities run the risk of catching toxoplasmosis.

- If you have cats, wash your hands after handling them. Wear gloves to clean litter boxes. Touching cat poop while you're pregnant can cause toxoplasmosis.
- Wash your hands well after handling raw meat.
- Don't touch lizards, snakes and turtles, which can spread the germ salmonella.

BE SCHOOL-SMART

The leading cause of school dropout for teen girls is pregnancy or becoming a parent. Becoming a teen mother is a life-changing situation, to be sure. But staying in school or going back and completing high school will pay off later for you and your child. Studies show that less than 2 percent of teen moms get a college degree by the age of 30. The children of teen moms are more likely to drop out of high school when they reach their teens. Getting your diploma will help you find a better job and take care of your child.

Many public school systems have alternative schooling plans for teen mothers and fathers. These programs can help you not only finish your schooling and get your degree, but also teach you about parenting.



MISSION: DEFINITION



Toxoplasmosis

(tox-oh-plaz-MO-sis):

An infection caused by a single-celled parasite that may attack tissues and damage the brain, especially of the fetus and newborn.



BE CHEMICAL-SMART

- Don't breathe carbon monoxide gas. Make sure any gas or charcoal-burning stoves are in a well-vented space and vent to the outside. Never run a car inside the garage even if the door is open.
- Talk to your doctor before taking any herbal medicines. The effects of these drugs on a pregnant woman are still not known.
- Only get needed X-rays. X-rays can slow your baby's growth and cause other problems. Make sure your doctor knows when you are getting X-rays.
- Limit caffeine. It's safe to have about 12 ounces of coffee or soda with caffeine each day.
- Don't work or be around harmful chemicals. They can cause a miscarriage or cause your baby to be born too soon (preterm birth). They can also cause birth defects or learning problems later in life.

LIVE SMART

Stay out of hot tubs, steam rooms and saunas. The heat from these can damage your baby's brain and spinal cord.

Don't do hard physical work. Skip heavy lifting, pushing or pulling heavy loads, climbing stairs, and standing for long periods of time.



MISSION: DEFINITION
Miscarriage (MISS-care-idge):
The loss of an embryo or fetus before the 20th week of pregnancy.



CDC: Fetal Alcohol Spectrum Disorders (FASDs):

cdc.gov/ncbddd/fasd/facts.html

March of Dimes: Smoking During Pregnancy

marchofdimes.org/pregnancy/smoking-during-pregnancy.aspx

GO TO YOUR HAPPY PLACE

HOW TO RELIEVE STRESS DURING PREGNANCY



WARNING: HIGH TENSION!

The results are in: High stress raises the chance of your baby being born too soon or too small! Studies have also shown that pregnant moms who are stressed and worried have a greater chance of having a baby with asthma and allergies. Stress lowers your immune system and that of your baby.

The good news is you can take steps to relieve stress in your life. Doing so will improve your health and your baby's chances for a better life.

STRESS BUSTERS

Here are some ways to chill out and beat stress:

- Stay active and eat right.
- Do something you enjoy every day. Watch a movie, go for a walk, chat with a friend or whatever chills you out.
- If you feel yourself getting stressed, do something that relaxes you. Take some slow breaths, stretch, or put your feet up and close your eyes.
- Too much tension in your house? Talk to someone you trust. Try to stay with a friend or relative if the tension gets to be too much.
- Worried about the pregnancy itself? Go to all your doctor visits. This way you can ask questions and get the answers you need.
- If you're in an abusive relationship, talk to your doctor. Call the National Domestic Violence Hotline toll-free at 1-800-799-7233.



**MedicineNet.com: Fetus to Mom:
You're Stressing Me Out!**

[medicinenet.com/script/main/art.
asp?articlekey=51730](http://medicinenet.com/script/main/art.asp?articlekey=51730)

DANGER AHEAD!!

WHEN THINGS GO WRONG

SERIOUS STUFF

It's important to know that some serious bad stuff can happen during your pregnancy. While most pregnancies are easy and drama-free, sometimes things can go wrong. Seeing your doctor regularly can keep these complications from happening to you. Read the different complications in this section so you know what to look out for.

PRETERM LABOR

Most pregnancies are full term and last between 37 and 42 weeks. But sometimes a baby is born early between weeks 20 and 37. This is known as preterm or premature birth. These early babies are often called “preemies.”

If you have any of these signs more than three weeks before your due date, you may be in PRETERM LABOR:

- Contractions that come as often as six times in an hour
- Cramps that feel like you're having your period
- A feeling of pressure in your pelvis or lower belly
- Bleeding from your vagina, or a pink-tinged discharge

IF YOU THINK YOU'RE IN PRETERM LABOR...

Call your doctor or go to the hospital right away. Your doctor may tell you to go to the office or hospital for an exam.

Or, your doctor may ask you to take these steps:

- Stop what you are doing and lie down on your left side.
- Drink two to three glasses of water or juice.
- Time your contractions. Write down the time each contraction starts and ends.
- Watch your symptoms for an hour. If they continue or get worse during that time, call your doctor again, or go to the hospital. If your doctor thinks that you're in labor, he or she will then decide how to treat you.



WHO HAS PRETERM LABOR?

Preterm labor could happen to any woman. But there are things that can raise the chance of having your baby too soon.

You are more likely to have a preterm birth if you...

Have certain physical problems:

- Your womb is not shaped normally
- Your cervix is too weak or too short, usually from past surgery on your cervix
- There are problems with your placenta
- Your bag of water breaks too early (premature rupture of membranes)

Have certain health problems:

- You have an STD (sexually transmitted disease)
- You have diseases like diabetes, high blood pressure or asthma that are not treated well
- You have a bladder infection that was not treated
- You were underweight before your pregnancy

Have a high-risk lifestyle:

- You smoke, drink alcohol or use drugs while pregnant
- You are under a lot of stress
- You had late prenatal care or no prenatal care
- You work long hours while standing
- You have had physical, sexual or emotional abuse

You are also more likely to have a baby born too soon if:

- You had a preterm baby before
- You gave birth less than nine months before the start of this pregnancy
- You are pregnant with more than one baby (twins, triplets or more)
- You are carrying a baby who has a birth defect
- You are African-American or Hispanic

PREGNANCY BY THE NUMBERS

4.4 MILLION

Average number of live births in the U.S. each year.

900,000 TO 1 MILLION

Average number of pregnancy losses in the U.S. each year.



MISSION: DEFINITION

Contraction (con-TRACK-shun): A tightening of the muscles of the upper uterine segment that starts as mild tightening and becomes very strong late in labor, occurring as frequently as every two minutes and lasting more than one minute. Contractions shrink the size of the uterus and squeeze the fetus through the birth canal.



Talk to your doctor if you have had a preterm baby in an earlier pregnancy. There's a hormone medicine that can prevent another preemie. This shot, called 17P, can be started as early as 16 weeks and is taken every week through 38 weeks.

BLEEDING

Light bleeding in early pregnancy may be caused by having sex. Follow your doctor's instructions if the bleeding is for this reason.

An ultrasound can help your doctor figure out why you're bleeding. Blood tests may also help when the doctor thinks it's needed.

More serious bleeding may happen if:

- You're having a miscarriage, the loss of a pregnancy before the 20th week.
- You have an ectopic pregnancy. That means the pregnancy is in a fallopian tube instead of your womb. If your doctor finds out that this is the case, you'll be treated with surgery or with medicine. Sadly, the baby may not survive.

MISCARRIAGE

Before the 20th week of a pregnancy, a woman can lose her unborn baby. Miscarriage happens more often during the first 12 weeks of being pregnant.

Most early losses happen because of a problem with the baby's genes and chromosomes. Some happen because of problems with the mother's hormones. In some cases, we never know the cause.

The chances that things will go well the next time you get pregnant are very good. If you do get pregnant again, make sure you see a doctor.



Most moms feel very sad after they miscarry. A miscarriage causes you to lose the pregnancy and all the dreams you had for this baby. Feeling low? Talk to your doctor or nurse. Ask if there is a program at your hospital or clinic to help you deal with feelings of loss.

BLADDER AND KIDNEY INFECTIONS

UTI. Urinary Tract Infection. Maybe you've heard your doctor or nurse talk about UTIs and you weren't sure what secret code they were using to discuss your health. A urinary tract infection is an infection of the bladder, kidney or urethra, the tube that carries pee from your bladder to outside your body.

Why do you have a bladder infection now when you never did before?

When you're not pregnant, your body works hard to get rid of any germs that want to make their home in your urinary tract. But when you're pregnant, your body doesn't do this as well. The germs that stay can cause an infection. Your doctor can collect a urine sample from you and check for infection.

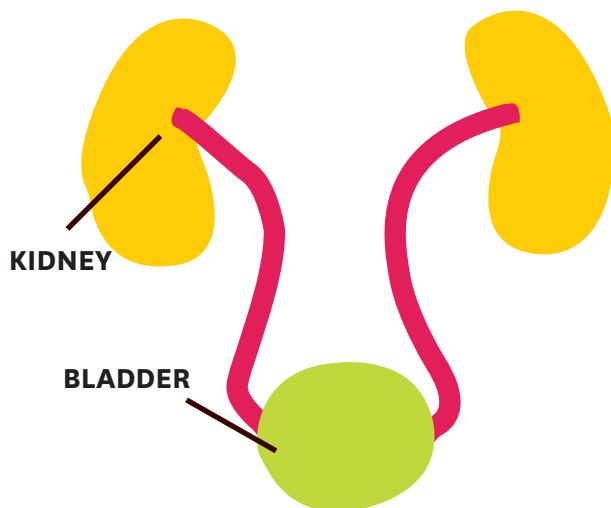
Bladder infections can seem harmless and painless, but if they aren't treated, they can lead to big problems. The infection could creep up into the kidneys and cause terrible pain, fever and chills. IV antibiotics in the hospital may be needed to fight the infection.

THE BAD NEWS

Bladder infections can also lead to preterm labor and delivery if not treated. If the infection spreads into the water around your baby, the water may break due to damage from the infection, exposing your preterm baby to health risks.

THE GOOD NEWS

You can get treatment for bladder infections. Pay attention to what your body tells you and listen to your doctors and nurses.



You may have a bladder infection, if:

- You have to pee more often than usual
- You have pain low in your belly
- You feel like you have to pee, but not much urine comes out
- You feel sick to your stomach
- You feel pressure behind your pubic bone
- It stings or burns when you pee
- You feel like you have to pee every 5-10 minutes
- Your pee looks cloudy, pinkish or bloody

If you notice any of these signs, call your doctor.

Keep in mind that you may have all, some, or none of these signs and still have a bladder infection. A urine test will tell for sure. That's another good reason to go to all of your doctor visits.

KIDNEY INFECTIONS ARE SERIOUS. CALL YOUR DOCTOR RIGHT AWAY IF YOU:

- Have bad pain in the middle or side of your back
- Feel sick to your stomach
- Have chills or fever



Keep your bladder healthy! Try these tips:

- Drink about six to eight glasses of water each day.
- Urinate soon after you have sex.
- Know the signs of bladder infection.
- Make sure your urine is checked at your doctor visits.
- If you do get an infection, take your medicine correctly until all the medicine is gone.

DIABETES

Diabetes is all about high blood sugar. If your blood sugar levels go too high during pregnancy, it's called gestational diabetes. High blood sugar can cause serious health problems for you and your baby. Get treatment right away if you have any symptoms of gestational diabetes.

First trimester dangers:

- Higher risk of birth defects
- Higher risk of miscarriage

Second and third trimester dangers:

- Greater chance that your baby will grow too large, making labor and delivery hard
- Greater chance your baby will have low blood sugar after birth
- Greater chance your baby will be born dead (stillborn)



MISSION: DEFINITION

Gestational diabetes (Jes-TAY-shun-ul die-uh-BEE-tus): The condition in which women without previously diagnosed diabetes have high blood glucose levels during pregnancy.

WARNING SIGNS

Tell your doctor right away if you have any of these signs:

- Being very thirsty all the time
- Needing to go to the bathroom a lot (frequent peeing)
- Being very hungry all the time
- Losing weight even when you are eating
- Blurry vision

Any pregnant woman can get gestational diabetes. Here are some risk factors for high blood sugar.

- If you're Hispanic, Native American or African-American
- If you're older than 25
- If you're overweight (a Body Mass Index of 30 or higher)
- If you have a parent, sister, brother or child with diabetes
- If you had diabetes in a past pregnancy
- If you had a baby who weighed more than 9 pounds
- If you had a baby who died in the womb after week 20

TREATING GESTATIONAL DIABETES

- Take care of yourself
- Keep active each day
- Go to all doctor visits
- Eat right. Talk to a dietician. Gestational diabetes is controlled 99 percent of the time by diet alone



PIH—HIGH BLOOD PRESSURE

PIH = Pregnancy-Induced Hypertension. Hypertension is also called high blood pressure. PIH is a health problem that can happen during pregnancy. It's also known as toxemia or preeclampsia.

The Symptoms of PIH:

- Your blood pressure goes up to at least 140/90. Blood pressure is the force of your blood against the walls of your arteries.
- Your body holds onto fluid. This causes swelling called edema.
- There is protein in your urine.

The Signs of PIH:

- Your hands, feet and face are puffy.
- You gain a lot of weight in just two or three days.
- Your vision changes. For example, you may see bright lights or dark spots.
- You have pain on the upper right side of your belly.
- You have severe headaches.
- You feel sick to your stomach.

If you have any of these warning signs, call your doctor right away. High blood pressure can cause serious health problems for you and your baby.

Treating PIH

The treatment for PIH is bed rest—either at home or in the hospital. If bed rest doesn't help, delivering your baby is the only choice.

If you have PIH:

- Follow your doctor's instructions carefully.
- Go to all your doctor visits.
- Go to the hospital if your headache does not go away or you see dark spots or bright lights.

Any pregnant woman could get PIH. But you are more likely to get PIH if you are:

- Pregnant for the first time
- Younger than 20 or older than 35
- Pregnant with two or more babies
- Have a mom or sister who had PIH
- Had high blood pressure before you were pregnant
- Had high blood pressure during a past pregnancy



REMEMBER:

PIH IS MORE COMMON LATE IN PREGNANCY. BUT SOME CASES OCCUR AS EARLY AS WEEKS 25 TO 28.



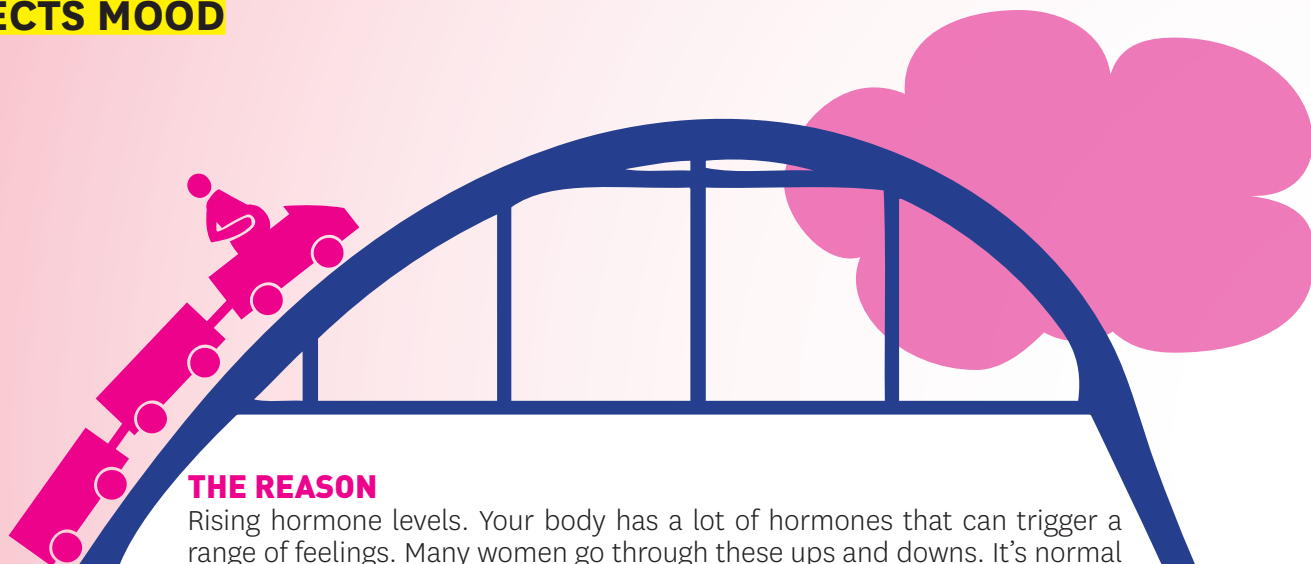
WomensHealth.gov: Pregnancy Complications
[womenshealth.gov/pregnancy/you-are-pregnant/
pregnancy-complications.html](https://www.womenshealth.gov/pregnancy/you-are-pregnant/pregnancy-complications.html)

EMOTIONS IN MOTION

HOW PREGNANCY AFFECTS MOOD

RIDING THE ROLLER COASTER OF FEELINGS

When you're pregnant, your emotions can swing up and down. You're happy one minute and crying uncontrollably the next. Maybe you're tense and on edge for no reason. It's not your fault. It's going to be OK.

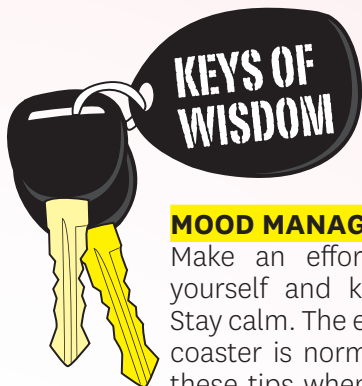


THE REASON

Rising hormone levels. Your body has a lot of hormones that can trigger a range of feelings. Many women go through these ups and downs. It's normal to feel emotional when you're pregnant. Serotonin is a chemical that controls mood. Some women are more sensitive to how it reacts with hormones and affects moods. It's not unusual to be flying high one minute and scraping bottom the next. These mood swings normally happen during the first 12 weeks of a pregnancy.

You no doubt have a lot of questions and feelings of uncertainty. You may feel unattractive, that you're gaining too much weight. You might worry that you can't exercise or be as active as before. You may have real questions like how you're going to finish school, how this baby will change your life and how you'll be able to pay for everything. These are real concerns that can affect your emotions.

And the physical symptoms of being pregnant, like heartburn, morning sickness, feeling overly tired and having to urinate too much, can really grab a hold of you.



MOOD MANAGEMENT

Make an effort to care for yourself and keep balanced. Stay calm. The emotional roller coaster is normal. Remember these tips when feeling overly emotional:

- Relax and take it easy, if at all possible
- Bond with your partner
- Do something you enjoy that makes you feel good
- Talk it out
- Manage your stress instead of giving in to it

REMEMBER:

There's no way to stop a roller-coaster ride once it's started. Your moods during pregnancy are the same way. Be brave. Ride it out.

DEPRESSION

Tell your doctor if your mood swings last longer than two weeks and don't seem to get better. Ten percent of pregnant women have to deal with depression during pregnancy. If you seem nervous or anxious a lot of the time, you may be suffering from an anxiety disorder. If not treated, emotional health problems can harm your baby and raise your risk of preterm labor.



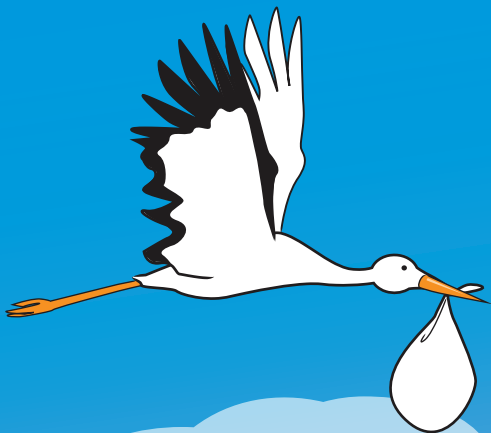
BabyCenter: Mood Swings During Pregnancy

babycenter.com/0_mood-swings-during-pregnancy_253.bc



CHAPTER 3

PREPARE FOR LANDING THE BIG DAY



HERE WE GO

You've made it this far. You can do this. There's a lot to get ready for. Taking care of yourself, thinking about plans for your life with a new person in it, getting baby supplies, picking out a pediatrician (baby doctor)...it can be a lot. But keep your eyes on the prize of having an amazing new baby in your life.

Childbirth classes can teach you a lot and help you get ready for labor, delivery and being a parent. Decide whom you want in the delivery room as your labor coach. This trusted person will have your back during this important time. These classes will teach you how to relax and breathe in a special way that helps with labor.

DESTINATION: HOSPITAL

Pack a bag or suitcase a few weeks before your due date. Have this bag ready to go when it's time to head to the hospital to have the baby. Here's a checklist to use when you pack:

FOR ME:

- ☐ Extra underwear
- ☐ Hairbrush
- ☐ Insurance card
- ☐ Loose clothes to wear on the way home
- ☐ Nightgown
- ☐ Robe
- ☐ Slippers or warm socks
- ☐ Toothbrush and toothpaste

FOR MY BABY:

- ☐ Baby blanket
- ☐ Baby wipes
- ☐ Onesie or undershirt
- ☐ Outfit for photos
- ☐ Baby car seat for the ride home (They won't let you take your baby home without it.)
- ☐ Newborn diapers

BABY GEAR BASICS

Having everything ready for your baby when you bring him or her home is a great plan. Use this checklist to help you get the things you'll need. Many times you can borrow items from friends or family.

TO WEAR:

- ☐ Booties or socks
- ☐ Hats
- ☐ Onesies
- ☐ Sweaters
- ☐ Stretch suits with feet
- ☐ Sleepwear: one-piece pajamas or nightgowns

FOR SLEEPING:

- ☐ Bassinet or cradle
- ☐ Crib and mattress
- ☐ Tight fitting crib sheets
- ☐ Quilted mattress pads
- ☐ Small, light blankets
- ☐ Waterproof pads

IF YOU BREAST-FEED:

- ☐ Breast pump to collect milk (Sometimes you can borrow or rent the pump from the hospital.)
- ☐ Lanolin cream to soothe sore nipples
- ☐ Nursing pads to wear in your bra

FOR LAUNDRY:

- ☐ Fragrance-free soap and fabric softener. These are much less likely to bother your baby's skin.

FOR BATHING:

- ☐ Baby bathtub
- ☐ Baby lotion for after the bath
- ☐ Baby shampoo
- ☐ Baby washcloths
- ☐ Hooded bath towels
- ☐ Liquid baby soap

FOR EATING:

- ☐ Bibs
- ☐ Bottles and nipples for breast milk or formula
- ☐ Bottle and nipple brushes
- ☐ Burp cloths or cloth diapers for spit-ups

FOR CHANGING:

- ☐ Diapers
- ☐ Diaper pail for cloth diapers
- ☐ Baby wet wipes
- ☐ Diaper rash cream
- ☐ Changing pad and table
- ☐ Diaper bag and changing pad

FOR HEALTH CARE:

- ☐ Cool mist humidifier to ease baby's breathing when the air is dry
- ☐ Medicine dropper or baby spoon to measure medicine
- ☐ Nasal suction bulb
- ☐ Thermometer

FOR TRAVEL:

- ☐ Blankets to cover your baby while you're outside
- ☐ Front pack or backpack to carry your baby in for the first six months
- ☐ Baby car seat
- ☐ Stroller

OTHER USEFUL SUPPLIES:

- ☐ Playpen
- ☐ Rocking chair
- ☐ Safe toys
- ☐ Safe baby swing (not the kind that hangs from a doorway)
- ☐ Pacifiers, if you decide to use them



REMEMBER:

The thing your baby needs most from you is love! While these items are nice to have, love is the greatest gift you can offer your baby.

IS THIS IT? HOW TO KNOW IF YOU'RE IN LABOR

After nine months of waiting and watching your body go through a bunch of changes, you're ready for the big day. But how will you know if you're really in labor? There's true labor and false labor. Get to know the signs to be able to tell the difference.

SIGNS OF FALSE LABOR

You may feel your uterus tighten up. It may feel like a menstrual cramp. You're having Braxton-Hicks contractions. These are also called "practice contractions," or false labor pains.

Your contractions are most likely practice contractions if they:

- Don't have a regular pattern
- Are more than 10 minutes apart
- Aren't painful
- Go away after a short walk
- Go away after drinking two glasses of water

Practice contractions are OK if you're in your final month of pregnancy. If you're not in your final month, you could be having preterm labor and your baby could be born too soon.

WARNING

If you're having regular contractions more than one month before your due date, call your doctor right away. You may be in preterm labor.

SIGNS OF TRUE LABOR

Though signs of labor may be different from woman to woman, here are some common ones:

LIGHTENING

This is when your baby “drops” or settles into your pelvis. Lightening may occur two to four weeks before labor in first-time moms. It may happen just a few hours before labor starts if you’ve had a baby before.

BLOODY SHOW

You may notice a slightly brown, pink or red stain on your underwear or toilet tissue. This shows that you have lost the mucus plug from your cervix as it thins and opens. Having a bloody show alone doesn’t mean you’re in labor.

RUPTURE OF MEMBRANES

The bag of water around your baby has broken. You may feel fluid coming from your vagina. Some women feel a big gush. Others feel a little leaking. If you think your water has broken, don’t use a tampon, don’t get in the tub and don’t have sex. Call your doctor and get to the hospital right away.

TRUE CONTRACTIONS

Unlike the practice contractions you had earlier in pregnancy, true contractions get stronger and more frequent. You can feel your entire womb squeezing. It can feel like a belt is getting tighter and tighter around you.

Are your contractions coming less than 10 minutes apart? Do they take your breath away? This may mean that true labor has begun.

PAIN IN YOUR LOWER BACK

Are you getting regular pains in your lower back? Check to see if your womb is getting tight at the same time. If so, you may be having true contractions.

After nine months of waiting and watching your body go through a bunch of changes, you’re ready for the big day. But how will you know if you’re really in labor? There’s true labor and false labor. Get to know the signs to be able to tell the difference.

WARNING

If you have any of these signs more than three weeks before your due date, call your doctor right away. You may be in preterm labor.

THIS IS IT! YOU'RE REALLY IN LABOR

Hey, guess what. You're in true labor and need to get to the hospital. You're going to have a baby. NOW!

Here's what to expect when you get there. You'll most likely have to:

- **Fill out some papers**
- **Go to the labor and delivery unit**
- **Change into a hospital gown**
- **Be checked by a nurse or doctor to see how much your cervix has opened**
- **Go to your room if you're in active labor**
- **Meet the nurse who will care for you**
- **Be hooked up to a monitor. This records your contractions and keeps track of your baby's heart rate**

THE THREE STAGES OF LABOR

STAGE 1

LABOR

The longest and hardest part of childbirth.

Contractions may feel like strong cramps at the start.

Your cervix will slowly open.

Your contractions will get longer and come closer together.

Stage 1 ends when your cervix is all the way open. It will measure 10 centimeters across. This is called being completely dilated.

STAGE 2

PUSHING AND DELIVERY

This stage may last two to three hours or more.

Your cervix has fully opened, and you're ready to start pushing.

Your contractions move your baby down the birth canal to the opening of your vagina. You help your baby along by pushing.

Stage 2 ends when your baby is born. That's the delivery part!

STAGE 3

DELIVERING THE PLACENTA

This stage usually lasts 30 minutes or less.

It begins right after the birth of your baby.

It ends when the placenta comes out of your vagina.



MISSION: DEFINITION

Umbilical cord (um-BIL-ih-cul): A flexible cordlike structure containing blood vessels and attaching a human or fetus to the placenta during gestation.

INDUCED LABOR

Your doctor may want to get your labor started or speed it up. This is called induction, or induced labor.

Reasons you might be induced:

- You are a week or more past your due date.
- You have very high blood pressure.
- You have a health problem like diabetes.
- There are problems with your baby's health.
- Your membrane broke, but contractions have not started.

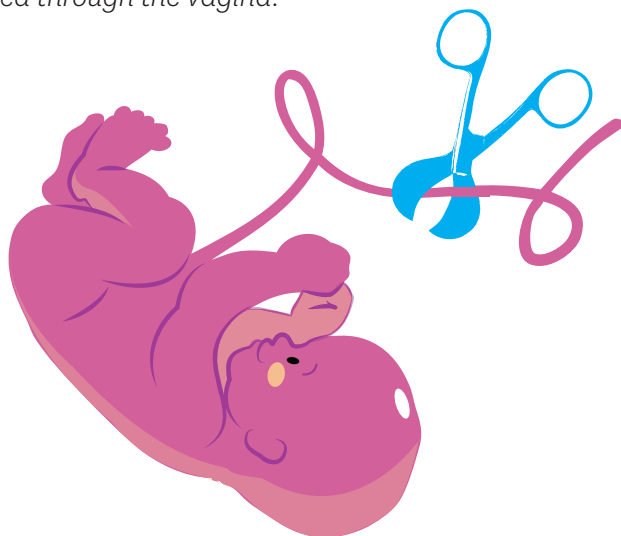
There are different forms of induction. Your doctor may take some or all of these steps:

- You may get a medicine called pitocin through an IV. This will help your womb contract.
- You may get a medicine in your vagina to soften your cervix.
- Your “bag of water” may be broken to help get labor going.

NOTE: Most cases of induction go well, and the baby is delivered through the vagina.

CUTTING THE CORD

For nine months, your baby was connected to you by the umbilical cord. That's how he or she fed and breathed. Now that your baby has left the womb and made his or her debut in the world, this cord won't be needed. After a few minutes, the doctor will cut the umbilical cord a few inches from the baby's body. Within a week or two, the umbilical stump will wither and fall off, leaving the baby with a scar that all humans have. We call it a belly button or a navel.



WHEN BABY IS STUCK

Once in a while, a baby gets stuck in the birth canal. Here are some ways to get the baby out.

FORCEPS DELIVERY

Forceps is a tool that looks like tongs. In a forceps delivery, your doctor uses this tool to grasp your baby around the head. Then the doctor gently guides the baby out of your vagina.

VACUUM EXTRACTION

A vacuum is a small suction cup. In a vacuum extraction, the doctor puts the vacuum on the baby's head. This tool helps bring the baby down and out. You still need to help by pushing.

After a forceps or vacuum delivery, you may notice bruising or small cuts on your baby's head. These will heal in a few days.

EPISIOTOMY

An episiotomy is a cut made next to your vagina. While few women need this to deliver their babies, it can help your baby get out. Your doctor will stitch up the cut after delivery.

EASING THE PAIN

Childbirth can be painful, but it has a very important purpose: getting your baby into the world.

There are a lot of things you can do to deal with the pain.

- **Massage**
- **Listening to music through headphones**
- **Walking and moving around**
- **Talking with loved ones**
- **Standing in a warm shower**



MISSION: DEFINITION

Epidural (ep-uh-DUR-ul):

An anesthetic used in childbirth to numb the body below the waist.

Pain medicines should be available to you. These may be:

- **Analgesics:** medicines that ease the pain of contractions. They usually work for about an hour.
- **Epidural anesthesia:** a shot that numbs the nerves in the body below the belly button during labor and delivery. An epidural takes the pain away and helps you focus on the hard work of delivering your baby.

You'll have chances to talk to nurses, doctors and your childbirth educator about this method before the time. The decision to have an epidural is one for you to make with your doctor and nurses.

C-SECTION

Most babies are born through the mother's birth canal or vagina. Sometimes problems during labor make that hard or risky. In these cases, delivering the baby might call for a C-section or Cesarean section. C-sections may be planned ahead of time or performed on an emergency basis.

A C-section may be done if:

- You or your baby has a health problem
- Labor goes on too long, and you or your baby starts to have trouble
- Your doctor thinks your baby is too big to go safely through your birth canal
- Your baby is breech, with its feet or butt coming through the birth canal first
- You have had other C-sections

Before the C-section

During a C-section, you can stay awake. You go into the operating room and get a spinal or epidural block to take away the pain. If you had an epidural during labor, this will be used for the pain control. A sheet is draped over your legs.

During the C-section, your doctor:

- Cuts through your belly to reach your womb
- Makes a small cut in your womb
- Takes your baby out
- Closes the layers with stitches

After the C-section, your nurse:

- Gives you fluid through your IV
- Gives you ice chips to suck
- Gives you pain medicine as needed



PREGNANCY BY THE NUMBERS

32.7

Percentage of US births delivered by C-section in 2013, according to the National Center for Health Statistics.



MedLine Plus: Childbirth

nlm.nih.gov/medlineplus/childbirth.html

BabyCenter: Giving Birth by Cesarean Section

babycenter.com/0_giving-birth-by-cesarean-section_160.bc

DAY 2 AND BEYOND

GETTING BETTER ALL THE TIME

THE ROAD TO RECOVERY

Having a baby is a lot of work. It takes time to recover from giving birth. Here are some of the things you can expect while recovering.

Recovering from Vaginal Delivery

At the hospital, you may:

- Stay for about two days
- Have your vital signs checked often (vitals are heartbeats per minute, breaths per minute, temperature and blood pressure)
- Get help for pain
- Get help caring for your baby
- Have your womb massaged to help it shrink and keep you from bleeding too much
- Get help with breast-feeding

At home, you may:

- Feel tired
- Have cramps for seven days or longer as your womb shrinks back to its normal size
- Have bleeding and discharge from your vagina for a few weeks
- Get sore and swollen breasts as they fill with milk
- Have a sore bottom, hemorrhoids, and trouble peeing or having a bowel movement
- Feel moody, sad, or blue for a few weeks

IMPORTANT!

After a vaginal birth, don't douche, use a tampon, have sex, drive or exercise until your doctor tells you it's OK.





Recovering from a C-section

It takes a little longer to get better from a C-section than from a vaginal delivery. Be patient. Here's what to expect.

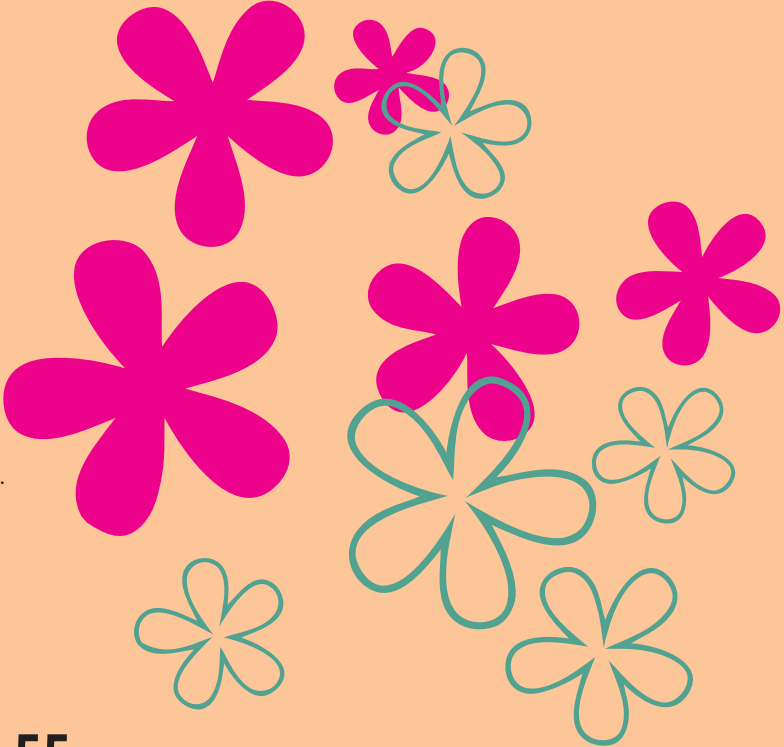
At the hospital, you may:

- Stay for about three or four days after the C-section
- Get pain medicine through your IV or epidural at first
- Take pain medicine by mouth later on
- Start to get out of bed, move and go to the bathroom with help about a day after the C-section (This speeds your recovery.)
- Have your wound checked to be sure it's healing the right way

At home, you may:

- Feel tired
- Have painful cramps for seven days or longer as your womb shrinks back to its normal size
- Feel some soreness, numbness and itching around your scar
- Have sore and swollen breasts as they fill with milk
- Feel moody, sad or blue for a few weeks
- Have bleeding and discharge from your vagina for a few weeks

What to do after a C-section:

- Hold your belly when you sneeze or cough.
 - Use pillows for extra support while feeding your baby.
 - Try not to go up and down stairs a lot.
 - Ask your doctor when you can shower.
 - Don't lift anything heavier than your baby.
 - If you need housework done, ask others to help you.
 - Don't spend too much time in bed or on the couch.
 - Gentle moving will help you heal more quickly.
- 



HOW TO FEEL BETTER

You can feel better! Try these ways to deal with problems.

Sore Breasts (If Not Breast-feeding)

- Wear a firm bra that supports your breasts.
- Use cold packs for one to five days until your milk stops coming in.

Sore Bottom

- Use a cold pack.
- Take a sitz bath – soaking in a small, shallow plastic tub in warm water.
- Use cotton balls or pads soaked in witch hazel. You can buy witch hazel at a drugstore.
- Wash your bottom many times a day with a spray bottle or peri-bottle given to you in the hospital.

Feeling Very Tired

- Get as much rest as you can.
- Focus on the things you need to do, and let the other stuff wait.
- Try to nap, eat, sleep, and shower when your baby is napping.

Lean on friends and family to help you. Chances are they'll be more than willing.

They can:

- Bring over meals
- Do laundry
- Wash dishes
- Clean up the kitchen
- Help take care of your baby
- Run errands
- Take you to appointments

- Soothe piles – hemorrhoids – with over-the-counter ointments or creams.
- Take pain medicine as needed.

- Eat healthy foods and drink plenty of fluids.
- Keep taking your vitamins.
- Limit visitors.
- Ask family and friends to help you.

WARNING SIGNS

Be sure to call your doctor right away if you...

- Have a fever
- See any redness, opening, bad odor or fluid leaking from your C-section wound
- Have unusually heavy bleeding from the vagina

BABY BLUES

Most new moms get the baby blues. This sadness is normal and doesn't often last long. Here are some ways to feel better:

- Get as much rest as you can
- Say yes to help from family and friends
- Talk with other new mothers

This health problem is called **postpartum depression**. These blues are very common and can happen to anyone. There is nothing you did wrong. Most likely you will start feeling better in no time.

Signs of Postpartum Depression

If you have postpartum depression, you may:

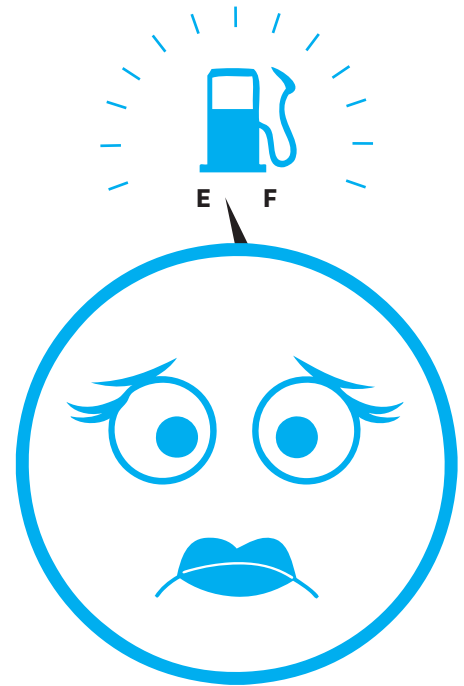
- Feel very sad, “down,” or depressed
- Have trouble sleeping (even when the baby is asleep or when others are caring for the baby)
- Lose interest in things that you used to enjoy
- Feel guilty
- Lose energy
- Have trouble keeping focus
- Change your eating habits
- Not take care of yourself or your baby
- Think about harming yourself or others

If you have any of these signs, call your doctor. Don't let these feelings go on for a long time.

HELP!

Help is there. Know that you aren't alone—other women get depressed after they have a baby. Some women find that talking to a counselor can help. Others use prescribed medicine for a little while to help the sadness lift.

You may feel like this low feeling will never go away. It's good to know that this type of depression can be treated with great results. There is help!



BabyCenter: Recovering from Childbirth
babycenter.com/recovering-from-childbirth

WebMD: Postpartum Depression Health Center
webmd.com/depression/postpartum-depression

THE NUTRITION SOURCE

BREAST-FEEDING, FORMULA & NUTRITION

THE POWER OF BREAST-FEEDING

Want to protect your baby from a long list of diseases? Want to help keep your baby from developing allergies? Want to help make your baby smarter? Keep him or her from becoming obese? Lower the risk of Sudden Infant Death Syndrome? Reduce your risk of certain types of cancer? Get rid of stress and the threat of depression? Well, experts believe that breast-feeding your baby can help make all these conditions true. Not only does breast milk have all the vitamins and nutrition a baby needs for the first six months, but the power of breast-feeding and breast milk has benefits beyond any other food. Studies have shown that breast-feeding is great for your health and your baby's.

Q&A



Q: HOW CAN I FIND OUT MORE ABOUT BREAST-FEEDING?

A: Talk to your doctor, nurse or childbirth educator before your baby is born. Ask questions after. The hospital staff can help you with breast-feeding. Sometimes moms talk with a person called a lactation consultant. This person is trained to help moms with breast-feeding.

Q: CAN EVERY WOMAN BREAST-FEED?

A: Almost every mom can. The size of your breasts doesn't matter. Talk to your doctor first if you have HIV, or you use street drugs or alcohol. On prescription drugs? Read the label and talk to your doctor before you breast-feed. Let your doctor know if you've had breast surgery, because sometimes that can lower the amount of breast milk you make.

Q: I AM A VEGETARIAN. CAN I STILL BREAST-FEED?

A: Talk with your doctor or nurse. You may need to take extra vitamins.

Q: I HAVE HEPATITIS. CAN I BREAST-FEED?

A: Yes. Just be sure to talk to your doctor first.

Q: WHAT IF I DON'T WANT TO OR CAN'T BREAST-FEED?

A: Don't feel guilty. It's your choice. Make the decision that's best for you at this time in your life.

Breast Milk

Breast-feeding your baby is a great start for your baby's life. Health experts like breast-feeding over formula feeding. Moms who decide to breast-feed should do so for the first six months before adding solid foods into the baby's diet. It's best if you breast-feed through the first year of your baby's life. If you can't, even a few weeks breast-feeding is good for your baby.

THE BEST OF BREAST-FEEDING

Breast milk is said to be the perfect nutrition for a baby's fragile digestive system.

Breast milk is easy to digest.

Breast milk has the vitamins and minerals needed by newborns.

It's believed that breast-fed babies don't have as many allergies later in life.

Breast-fed babies tend to drink more and then sleep longer through the night.

Breast milk is cheaper than formula.

Breast milk is always there.

Breast milk can be frozen and stored for later use.

DID YOU KNOW?

Breast milk has antibodies that protect babies from many diseases. Studies say that breast-fed babies are less likely to have certain medical problems later, including diabetes, high cholesterol and asthma. People who were breast-fed as babies have also shown less of a chance of becoming obese or overweight.

For the mother, breast-feeding burns calories and helps shrink the uterus, making it simpler to get back in shape. It can also lower the risk of ovarian and breast cancer.



BREAST-FEEDING TIPS FOR NEW MOMS

- Nurse as soon as you can after giving birth.
- Figure out the proper latch-on style to get rid of much of the nipple pain and soreness. It also lets the baby get milk more easily.
- Don't use fake nipples.
- Let your baby breast-feed as often as he or she wants.
- Try to sleep when your baby sleeps.
- "Wear" your baby. Carry your baby in a sling for easy nursing.
- Drink a glass of water each time you sit down to nurse to make sure you're drinking enough fluids.
- Don't wear non-nursing bras and tight-fitting clothing in the first few weeks after delivery to let sore nipples heal.
- Use pillows to support you and your baby while breast-feeding.
- Talk with a lactation consultant who teaches breast-feeding.

FORMULA FOR SUCCESS

Formula is the other choice for those who can't or choose not to breast-feed. Though it doesn't have all the same benefits as breast milk, formula with iron added is a good choice. If your baby seems fussy, has diarrhea or is constipated, talk to your pediatrician about whether your baby has a lactose or soy allergy.

GOOD TO KNOW

If you choose formula over breast-feeding, make sure you use only commercially made formula. These contain all of the vitamins, minerals, proteins, sugars and fats a baby needs.

FORMULA ONE

Keep these tips in mind for formula feeding:

- Follow directions on the label with care.
- Throw out any formula left out of the refrigerator for more than one hour or any left in the bottle.
- Don't store pre-made bottles in the refrigerator for more than 12 hours.
- Warm the bottle with care just before feeding.
- Don't warm a bottle in the microwave.
- Don't add anything to formula without first talking to your doctor.
- Never lie your baby down to sleep with a bottle propped up.
- Always use the scoop in the can of formula for measuring.
- Don't dilute the measurement with less formula.



HOW MUCH?

How much breast milk or formula does your child need per day? Experts suggest these amounts:

0 to 4 months
4 to 6 months
6 to 8 months
8 to 10 months
10 to 12 months
12 to 24 months*

21-24 oz. (6-12 feedings, 2-4 oz. each)
24-32 oz. (4-6 feedings, 4-8 oz. each)
24-32 oz. (4-5 feedings, 5-8 oz. each)
24-32 oz. (3-4 feedings, 6-8 oz. each)
20-32 oz. (3-4 feedings, 5-8 oz. each)
16-24 oz. breast milk if still nursing,
though no formula is needed (1-4 breast
feedings daily, sometimes more)

*Toddlers past their first birthday
should drink whole milk as their
main liquid source of nutrition.



Family Education: Breast-feeding vs. Formula Feeding

life.familyeducation.com/breastfeeding/formula-feeding/44286.html

KidsHealth – Feeding Your Newborn

kidshealth.org/parent/growth/feeding/feednewborn.html

MedicineNet.com – Infant Formula

medicinenet.com/infant_formulas/article.htm



SAFETY FIRST

KEEPING YOUR BABY SAFE

THE CALL GOES OUT FOR SUPER MOM

It's time for you to summon the Super Mom in you. Your baby needs your care, and you're just the woman for the job! Some safety tips will seem clear. Others you may not have considered.

Never put your baby in a high place. Even newborns can move suddenly and fall off beds and changing tables. Strapping them into baby seats and car seats will make sure they don't tumble out. Keep a close eye out for pets. Make sure your dog or cat is known to be safe around babies. Bring a baby blanket home from the hospital that your baby was swaddled in to let your pet get used to the smell of your new baby.

A SAFE PLACE TO SLEEP

Even before your baby comes home from the hospital you should have his or her room set up.

Take these steps:

- Buy or borrow a firm mattress and a crib, cradle or bassinette that follows safety rules.
 - Make sure the sheets fit tight.
 - Never place your baby on sofas, waterbeds, sheepskins or other soft surfaces. They can cause your baby to stop breathing.
 - Don't use soft bedding, pillows, bumper pads or stuffed toys in your baby's sleep area. Use a light blanket and tuck it into the sides of the crib.
 - Set the room temperature so your baby doesn't get too hot or too cold. An adult with light clothes on should be comfortable in the room.
 - Make sure your home has smoke detectors and carbon monoxide detectors. Place them on each level of the house and near bedrooms.
- 

You can put your baby in a safe sleep position by following these rules:

- Put your baby on his or her back to sleep for naps and at night, unless your doctor tells you not to.
- Place your baby in the “foot to foot” position in the crib. Place your baby so his or her feet are near the end (or foot) of the crib. If you use a light blanket, tuck it in around the crib mattress so it doesn’t come loose and cover your baby’s head. The blanket shouldn’t be any higher than your baby’s chest.
- Baby can be placed on his or her tummy when awake. This is often called “tummy time.”

WARNING

Cigarette and cigar smoke is very dangerous for a baby. Never smoke around your baby or his or her sleep place. Don't let others smoke around your baby either.



CAUTION

**HARD HAT
REQUIRED
IN THIS AREA**





Here are some safety tips for the areas of your home.

IN THE KITCHEN

- Keep poisons and toxic liquids out of reach, not under the sink.
- Put latches on doors and cabinets containing harmful items.
- Turn pot and pan handles away from baby's reach.
- Baby-proof stove knobs.
- Get rid of magnets on the refrigerator that can fall off and be choked on by your baby.
- Wash out cleaning supply bottles and put lids on before putting them in the trash.

IN THE BATHROOM

- Don't take pills or medicine in front of baby. They mimic things they see you do.
- Put medicine in a locked box, out of baby's reach.
- Don't keep soap, razors and shampoo on the edge of the bathtub.
- Put a cover on the bathtub spout.
- Don't get out of the tub while holding your baby.
- Lock toilet lids closed.
- Never leave your baby alone in a tub. Never leave a tub with water in it.

IN THE NURSERY

- Set up crib attachments to the wall side of the crib.
- Don't attach wall hangings above the crib or within baby's reach.
- Remove mobiles when baby is five to seven months old.
- Never leave baby alone on a changing table.
- Cover electrical outlets on walls near the crib.

AROUND THE HOUSE

- Cover all electrical outlets.
- Keep trash bins locked and out of baby's reach.
- Remove tall lamps or coat racks or put them out of reach behind furniture.
- Keep plants out of reach. Babies can choke on the leaves, and some plants are poisonous.
- Put cords from electronics and appliances out of reach.
- Keep emergency phone numbers, like poison control, near a telephone.
- Make sure table cloths aren't hanging down where baby can reach them.
- Keep exercise gear away from baby.
- Place cords for blinds and curtains high out of baby's reach.
- Don't put a pet's food bowl where baby can get to it.

» CHECK WITH CAUTION »

NEVER LEAVE A BABY ALONE!

For children ages 4 and younger, the leading causes of injury-related death are:

1. **Car accidents**
2. **Drowning**
3. **Fires and burns**
4. **Suffocation**
5. **Deaths while walking**
6. **Firearm mishaps and homicides**
7. **Falls**



Safe Kids Worldwide: Baby
safekids.org/infantsafety

FAMILY PLANNING

YOUR BIRTH CONTROL OPTIONS

Most teen pregnancies aren't planned. If you choose to be sexually active, you should know the ways to prevent becoming pregnant. You should know that the only real 100 percent effective birth control method is abstinence – not having sex at all. But if you do, you should know about these birth control methods and how they work.

“The Pill” (combined oral contraceptive)

91-99 percent

Prescribed by a doctor, the pill is swallowed at the same time each day. It contains the hormones estrogen and progestin.

The “Mini pill” (progestin only)

91-99 percent

The mini pill contains only the hormone progestin. It's prescribed by a doctor and taken at the same time each day. The mini pill is good for women who can't take estrogen

Implant

99 percent

The implant is a small thin rod placed under the skin in a woman's upper arm. The rod contains the hormone progestin which is released into the body for over three years.

Injection or “shot”

94-99 percent

A doctor administers a shot in the buttocks or arm every three months. This shot contains the hormone progestin.

Patch



91-99 percent

This is a skin patch worn on the lower abdomen, buttocks, or upper body. Prescribed by a doctor, the patch releases the hormones progestin and estrogen into the bloodstream. Once a week for three weeks, women put on a new patch. No patch is worn during the fourth week so the woman can have her period.

Hormonal vaginal contraceptive ring

91-99 percent

The hormones progestin and estrogen are released through the ring inside the vagina. The ring is worn for three weeks. It's removed during the fourth week to allow for a period, before inserting a new one.



	Copper T intrauterine device (IUD)	over 99 percent	Shaped like a T, the IUD is a small device inserted into the uterus by a doctor. The IUD can stay in place for up to 10 years.
	Levonorgestrel intrauterine system (IUS)	over 99 percent	The IUS is small and T-shaped like the IUD. A doctor places it inside the uterus. Every day it releases progestin which prevents pregnancy. The IUS can stay in place for up to five years.
	Male condom	82-98 percent	A condom is worn by a man. It keeps sperm from entering the woman's body. Condoms help prevent pregnancy and HIV and other STDs. They are used only one time each.
	Female condom	79-95 percent	The female condom is worn by the woman. It can be inserted up to eight hours before sex and works by keeping sperm from entering her body.
	Diaphragm or cervical cap	84-94 percent	Shaped like a shallow cup, the diaphragm is placed inside the vagina to cover the cervix to block sperm. Before sex, you insert it with spermicide to block or kill sperm. Diaphragms come in different sizes. See your doctor for the right fitting.
	Spermicides	72-82 percent	These products come in foam, gel, cream, film, suppository, or tablet. They're placed in the vagina no more than one hour before sex and work by killing sperm. You leave them in at least six to eight hours after sex.



GirlsHealth.gov: Types of Birth Control
girlshealth.gov/body/sexuality/bc_types.html

NOTES

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

RESOURCES

Adoption services and information

adoption.com

Birth control - Teensource

teensource.org/birth-control

Birth defects

marchofdimmes.com

Breastfeeding

thebump.com/t/breastfeeding
lalecheleague.org

Fetal development

babycenter.com/pregnancy-week-by-week

Health departments by state

healthfinder.gov/FindServices/SearchContext.aspx

Health insurance

healthcare.gov
insurekidsnow.gov

Paternity testing

dnacenter.com/paternity/legal-testing.html

Potty training

babycenter.com/toddler-potty-training-advice

Pregnancy loss

babyloss.com

Pregnancy testing centers

womenscarecenter.org

Teen pregnancy

thehelpline.org: 1-866-942-6466
standupgirl.com



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