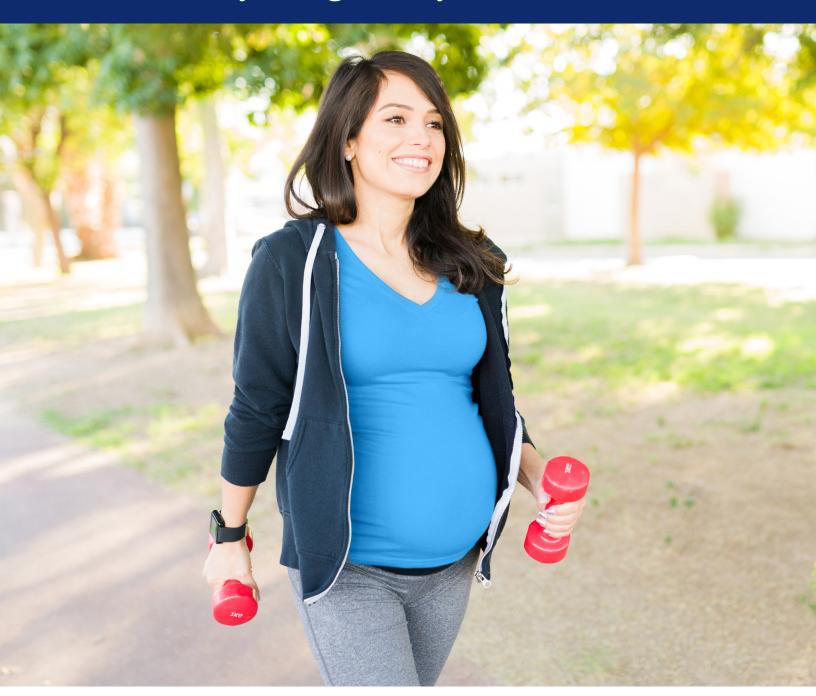


A Healthy Pregnancy Starts With You





From all of us at Banner – University Family Care/ACC (B – UFC/ACC), congratulations on your pregnancy!

This is an exciting time for you and your family. We want you and your baby to be as healthy as possible. Your baby is more likely to be healthy if you take care of yourself during your pregnancy. We have provided this prenatal booklet to help you in having a healthy pregnancy. This includes getting early and regular prenatal care for you and your baby.

Please call your provider to schedule your prenatal appointments. There is no copayment or other charge for covered pregnancy-related services. If your provider wants to see you more often, please follow their recommendations.

Please call our Customer Care Center at 800-582-8686, TTY 711 for help. We are available Monday through Friday from 7:30 a.m. to 5 p.m. We can help you find a provider, make an appointment and arrange a ride to your medical appointments.

We also have nurse care managers available to help you before, during and after your pregnancy. Your care manager can provide you education on your pregnancy, work with your provider, make sure you have all your needed medications, connect you to community resources and help you understand your health care benefits. To connect with a nurse care manager, please contact our Customer Care Center at 800-582-8686, TTY 711. Request to be referred to the Maternal Child Health Department.

If you have already established care with an out-of-network provider for your current pregnancy, please call our Customer Care Center at 800-582-8686, TTY 711 to discuss options for continuing care with your chosen provider.

It is recommended you call Health-e-Arizona at 855-432-7587, Monday through Friday from 7 a.m. to 6 p.m. to notify the Arizona Department of Economic Security (DES) of your current pregnancy and due date.

Best wishes,

Maternal Child Health Department Banner – University Family Care

Talk to your health care provider. This packet is not a substitute for the advice of a qualified expert. Please call our Customer Care Center at 800-582-8686, TTY 711 for assistance in choosing a provider.

Content in this guide

Prenatal Care

- A healthy pregnancy starts with you Page 1
- Stages of pregnancy | Page 8
- Pregnancy warning signs | Page 11
- Fetal kick counts | Page 11
- Preventing a low birth weight baby | Page 12
- Depression and anxiety during and after pregnancy | Page 14

Preparing for Childbirth and Baby

- Preparing for childbirth Page 15
- How will I know I am in labor? Page 19
- Preparing for baby Page 20
- Changing relationships during pregnancy and after baby arrives | Page 20

Postpartum and Baby Care

- Body changes | Page 22
- Medical care after delivery for you and baby Page 23
- Breastfeeding Page 25
- Safe sleep | Page 29
- Programs to help parents in Arizona | Page 30
- Preparing for next pregnancy | Page 32
- Family planning Page 33
- Food Smart: 5 Things a Nutrition Coach Can Help You with During Pregnancy | Page 35
- Pyx: Everyone can use a little extra support | Page 36
- Resources
- Reference

Contact Us

Customer Care Center

800-582-8686

If you are deaf or have difficulty hearing, call TTY 711

Emergency Services

Dial 911

Website

www.BannerHealth.com/ACC







Prenatal Care

A healthy pregnancy starts with you

Staying strong and healthy during your pregnancy is the first step toward delivering a healthy baby. If you eat well, have regular prenatal care and exercise regularly, you can help lower the risk of pregnancy complications. Remember, taking good care of your health is also taking good care of your baby's health.



For more information about maternity care services, please visit www.l please visit www.BannerHealth.com/ACC-MCH or

Prenatal testing

Screening tests are a regular part of prenatal care.

They can help you and your provider know if you or your baby might have an illness or health problem. Some screening tests are given to all pregnant people. Others are only given to someone who may be at high risk for a specific problem. Some screening tests include:

Blood type

All pregnant people will have their blood type checked. If you have an Rh-negative blood type, your blood cells may harm your baby's red blood cells. Your provider will give you a shot of a medication called Rhogam at 28 weeks of pregnancy. Your provider will also give you the medicine within 72 hours after you deliver your baby if your baby's blood type is Rh-positive. Your provider may also give you Rhogam if you experience a pregnancy loss, if you have had bleeding during your pregnancy or if you have had trauma to your abdominal area during pregnancy.

Pregnancy diabetes test

Your provider will usually order this test when you are 28 weeks pregnant but may order the test sooner if you are high risk. During this test, you will drink a sugary drink then have your blood checked after a set amount of time. This is to check the amount of sugar in your blood. If you have a high level of sugar in your blood, you may have gestational diabetes. Your provider will give you instructions for treatment if you are diagnosed.

Ultrasounds

Your provider may order an ultrasound to see how your baby is doing. Normally, all pregnant people will have an ultrasound around 20 weeks. This is called an anatomy scan to check on your baby's growth and development.

Visit your provider

See your provider as early as possible if you think you are pregnant.

If you need help choosing a provider or scheduling your appointment, please call our Customer Care Center at 800-582-8686. TTY 711.

We can also help set up rides, at no cost, to your appointments if you do not have transportation available.

How often will you go to your provider?

Every four weeks until the 28th week of pregnancy

Every two weeks until your 36th week of pregnancy

Every week until you deliver

Your provider might want to see you more often. Please follow their recommendations.

AHCCCS covers doula support services during pregnancy, labor and delivery and for up to a year postpartum.

A doula is a trained non-medical professional who may provide continuous support to the birth parents to improve pregnancy, delivery and newborn outcomes.

GBS test

Group B Streptococcus (GBS) is a bacterium that can be found in some pregnant people. Your provider will check to see if you are a carrier of this bacteria around your 36 week appointment. If you are positive, your provider will treat you with antibiotics during labor. GBS can cause harm to your unborn baby if not treated.

Sexually transmitted infections

Your provider will order a test to check for sexually transmitted infections or STIs. All pregnant members are to be screened for STIs, including syphilis, at the first trimester, third trimester and at the time of delivery. If your test is positive, your provider will talk with you about treatment options. It is very important to follow all instructions to help keep you and your baby healthy if you are diagnosed with an STI. If left untreated, an STI can harm you or your baby.

Possible STIs to be tested for include:

- Genital herpes
- Chlamydia
- Gonorrhea
- Syphilis
- Hepatitis B and C



It is important to practice safe sex, especially during your pregnancy by:

- Using male latex condoms correctly and every time you have anal, vaginal or oral sex.
- Reducing the number of sex partners.
- Getting tested for STIs regularly if you are high risk for infection.
- Getting vaccinated against Human Papillomavirus (HPV) and Hepatitis B. Talk to your provider about the safety of these vaccines during pregnancy.

Getting tested and treated for syphilis can prevent serious health complications for you and your baby.

At your first health care visit, ask your health care provider about getting tested for syphilis. You can discuss:

- Any new or unusual physical symptoms you may be experiencing
- Any drugs or medicines you are using
- Whether you have new or multiple sex partners
- Your risk for syphilis, such as the number of syphilis cases in your area

This information will allow your health care provider to make the appropriate testing recommendations. Some people should get tested again at the beginning of the third trimester and again when the baby is born.

Even if you have been tested for syphilis in the past, you should get tested again when you become pregnant.

Remember that it's possible to get syphilis and not know it. Sometimes, the infection causes no symptoms, only very mild symptoms, or symptoms that mimic other illnesses.

If you test positive for syphilis, you will need treatment right away. It is also important that your sex partner(s) get treated. Syphilis is curable with the right antibiotics from your health care provider. Follow-up testing by your health care provider is necessary to make sure your treatment was successful.

Having syphilis once does not protect you from getting it again. Even after successful treatment, you can get syphilis again. For this reason, you must continue to take actions that will reduce your risk of getting a new infection.

Source: www.cdc.gov/syphilis/about/about-congenital-syphilis.html.

Prenatal HIV testing

It is very important for all pregnant people to be tested for Human Immunodeficiency Virus (HIV). HIV is a virus that keeps your body from fighting sicknesses and infections. This virus can be passed to your unborn baby. There is currently no cure for HIV, but with treatment, you can expect to live a long and healthy life.

Testing

- Any provider you visit can check for HIV by ordering a blood test. This blood test is completely
 covered by your health plan. The provider taking care of you during pregnancy will order this
 test as part of your routine prenatal labs.
- HIV testing, at no cost, is available through www.GetTestedAZ.org/en.
- You may also call your local health department for information about no-cost HIV testing near you.

If you test positive for HIV

Your provider will talk to you about treatment options and may refer you to a specialist. You can also reach out to your local health department for treatment.

- All pregnant people with HIV should start treatment as soon as possible. If you have been diagnosed with HIV before becoming pregnant and are currently receiving treatment, talk to your provider about any changes needing to be made to your medications or treatment plan.
- All pregnant people with HIV should take HIV medicines throughout their pregnancy for their own health and to help stop the spread of HIV to their unborn baby.
- Most HIV medicines are safe to use during pregnancy. Talk to your provider about any medications you are taking.

Benefits of HIV treatment

- Early detection and treatment of HIV can help prevent HIV from being passed to your unborn baby.
- HIV treatment lowers the amount of the virus you have in your blood.
- HIV treatment can prevent transmission to others.
- Making sure to take your medication as prescribed can help limit the chance of the HIV virus changing. The more the virus changes, the less treatment options you might have.

The Arizona Women, Infants, Children (WIC) program provides nutrition education, breast feeding support services, supplemental nutritious foods and referrals to health and social services. Call WIC at 800-252-5942 to get started.

WIC is here for you

Nutrition

Eating safe, healthy foods is very important for both you and your baby. You need to eat the right balance of proteins, carbohydrates, fats, fruits and vegetables every day.

During pregnancy, you should drink 8 to 12 cups (64 to 96 ounces) of water every day. Water has many benefits, including helping with digestion, removing waste from your body and forming the amniotic fluid around your baby. Being dehydrated can increase your risk of going into preterm labor, so it is important to always have water available to you.

Every person's weight gain during pregnancy depends on their health and body mass index before they were pregnant. Talk to your provider about the appropriate weight gain for your pregnancy.

You will want to eat plenty of nutritious food from the five basic food groups:

Fruits: Focus on whole fruits like fresh, frozen, canned or dried.

Vegetables: Eat a variety of vegetables and add them to mixed dishes like casseroles, sandwiches and wraps. Fresh, frozen and canned count too. Look for "reduced sodium" or "no-salt added" on the label.

Grains: Choose whole grain versions of common foods, such as bread, pasta and tortillas. Not sure if it's whole grain? Check the ingredients list for the words "whole" or "whole grain."

Protein: Eat a variety of protein foods, such as beans, soy, seafood, lean meats, poultry and unsalted nuts and seeds. Select seafood twice a week. Choose lean cuts of meat and ground beef that is at least 93% lean.

Dairy: Choose low-fat (1%) or fat-free (skim) dairy. Get the same amount of calcium and other nutrients as whole milk but with less saturated fat and calories. Lactose intolerant? Try lactose-free milk or a fortified soy beverage.

Food to avoid

Food poisoning can be very serious when you are pregnant. To be safe, stick to foods that are completely cooked, clean and pasteurized. Don't eat these items while you are pregnant:

- Raw fish and shellfish (sushi containing raw fish and oysters), smoked fish
- Undercooked meat, hot dogs, deli meat, poultry
- Raw or lightly cooked eggs and foods containing them
- Unpasteurized milk, milk products, juices (apple cider)
- Unpasteurized and pasteurized soft cheeses (Camembert, feta, Brie, blue veined cheeses)
- Refrigerated pâtés and meat spreads
- Raw sprouts (alfalfa sprouts)
- Fish with a high mercury content (shark, tilefish, mackerel, swordfish)

Even though they may not be dangerous, there are some foods that you should eat less of while you're pregnant.

- Limit caffeine to less than 200 mg a day. This is the same as about two, 6-oz cups of coffee per day. Caffeine can also be found in teas, sodas and chocolate.
- Limit sugary foods and drinks that are high in calories.
- Limit solid fats like butter, stick margarine, shortening or lard.
- Limit salty foods that can make your body retain water.

Every person's nutritional needs are different, especially during pregnancy and breastfeeding.

Visit www.MyPlate.gov to learn your estimated calorie needs and how to meet your food group goals.

Prenatal vitamins



Vitamins and minerals play important roles in all your body functions. Eating healthy foods and taking a prenatal vitamin every day should supply all the vitamins and minerals you need during pregnancy. Take only one serving of your prenatal supplement each day. If your provider thinks you need an extra amount of a vitamin or mineral, they may recommend it as a separate supplement. Your health plan will fully cover prescribed

prenatal vitamins, or you can get prenatal vitamins, at no cost, through Power Me A2Z by visiting www.AZDHS.gov/PowerMea2z.

Exercise

If you are healthy and your pregnancy is normal, it is safe to continue or start regular physical activity. Physical activity does not increase your risk of miscarriage, low birth weight or early delivery. It's still important to discuss exercise with your provider during your early prenatal visits. If your provider gives you the okay to exercise, you can discuss what activities you can do safely.

There are many benefits to exercising during pregnancy, including:

- Reducing back pain.
- Easing constipation.
- Improving sleep and your mood.
- Decreasing your risk of gestational diabetes, preeclampsia and cesarean birth.
- Promoting healthy weight gain during pregnancy.
- Improving your overall fitness and strengthening your heart and blood vessels.
- Preparing you for labor and reducing your recovery time.



Experts agree these exercises are safest for pregnant people.

Walking: Brisk walking gives a total body workout and is easy on the joints and muscles.

Always talk to your provider before starting an exercise program.

Swimming and water workouts: Water workouts use many

of the body's muscles. The water supports your weight, so you avoid injury and muscle strain. Stationary bicycling: Because your growing belly can affect your balance and make you more prone to falls, riding a standard bicycle during pregnancy can be risky. Cycling on a stationary bike is a better choice.

Modified yoga and modified Pilates: Yoga reduces stress, improves flexibility and encourages stretching and focused breathing. There are prenatal yoga and Pilates classes designed for pregnant people. These classes often teach modified poses that accommodate a pregnant person's shifting balance. You should avoid poses that require you to be still or lie on your back for long periods.

Things to avoid during pregnancy

Alcohol

No amount of alcohol is considered safe to drink during pregnancy. Alcohol is one of the most known causes of mental and physical birth defects and can cause severe abnormalities in a developing baby. It is best not to drink any alcohol while pregnant. If you need help to stop drinking alcohol, talk to your provider or contact the Substance Abuse and Mental Health Services Administration at 800-662-4357 (HELP).

3 Smoking or vaping

Smoking or using tobacco-containing electronic cigarettes (vaping) during pregnancy increases the chances of having a miscarriage or preterm birth. Smoking also puts your baby at risk for birth defects, respiratory (lung) problems and Sudden Infant Death Syndrome (SIDS). If you need help with quitting smoking or vaping, Arizona has a no-cost service that is available 24 hours a day called ASHLine. Call 800-556-6222 to get started.

Using drugs (amphetamines, narcotics, barbiturates and others) during pregnancy can hurt you and your unborn baby. You could miscarry or deliver your baby too early. Your baby could suffer birth defects or become dependent, which could lead to signs of withdrawal. Using drugs raises the risk that your baby will die while sleeping, known as SIDS. That's why it's very important to talk with your health care provider if you have taken or are taking any type of recreational or street drugs. Your baby could have permanent damage or die if you are not treated early. If you are struggling with drug or substance use, safe treatment options are available during pregnancy. Talk to your provider or contact our Customer Care Center for further assistance.

Neonatal Abstinence Syndrome: Pregnant women who take common drugs or medications need to know about the risk of Neonatal Abstinence Syndrome (NAS). During pregnancy, most substances in your blood can pass to your baby. NAS may occur in the baby after birth if

the mother used certain drugs or medications during the pregnancy. After birth, the baby is suddenly cut off from the drugs in the mother's body. The baby may start to show signs of withdrawal within a few days. This is NAS. Common drugs or medicines that lead to NAS:

- Methadone
- Heroin
- Ocycodone (Percocet)
- Hydrocodone (Vicodin)
- Anti-depressants (Paxil, Zoloft)
- Suboxone (Buprenorphine)
- Fentanyl
- Ativan (lorazepam)
- Xanax (alprazolam)

To help prevent NAS, while you are pregnant, be sure to:

- Talk with your PCP and your obstetrician to make plans for your baby's birth.
- Share with your providers information about ANY medications, drugs or other substances you are taking or have been taking.
- Ask your provider before taking:
 - » Prescription drugs
 - » Over-the-counter medications
 - » Herbal remedies
 - » Sleep aids
 - » Energy drinks
 - » Alcohol
 - » Cigarettes/vapes

Lead

Lead can get into your body when you unknowingly swallow lead or breathe in lead fumes or dust. Lead can pass from a mother to her unborn baby. Exposure to high levels of lead can cause miscarriage, premature delivery, low birth weight and developmental delays of your baby. Lead can be found in certain work areas (construction sites, welding, mining, shooting ranges), products made in other countries

(candy, makeup, glazed pots and spices) and in homes built before 1978. Adults with lead poisoning might not have any symptoms, but common symptoms include tiredness, headaches, moodiness, constipation, trouble sleeping and stomach problems. For more information about lead exposure prevention, call the Arizona Department of Health Services at 602-364-3118. Or visit www.AZHealth.gov/Lead for information about lead poisoning and how to prevent exposure.

Marijuana

There is no evidence that any form of marijuana (smoking, vaping, creams or lotions) is safe for use during pregnancy. Using marijuana during pregnancy may affect your unborn baby's growth and development, including crucial brain development. Some babies may be born with marijuana withdrawal symptoms, including tremors, seizures, slow weight gain, sleeping problems or crying for long periods of time. If you need help to stop smoking marijuana, talk to your provider or contact the Substance Abuse and Mental Health Services Administration at 800-662-4357 (HELP).

Changing the litter box

 $\overline{\mathcal{I}}$ Pregnant people should find someone else to change a cat's litter box. Why? A germ called toxoplasmosis can be spread through dirty cat litter boxes and can cause problems with your baby's health, including prematurity, poor growth and severe eye and brain damage. A pregnant person who becomes infected often has no symptoms but can still pass the infection on to her developing baby.

o\ ∩ Overheating

You should limit activities that could cause you to overheat or raise your body temperature. These include using saunas over 101 F or hot tubs over 95 F, taking very hot, long baths or showers, using electric blankets or heating pads, getting a high fever, becoming overheated when outside in hot weather or when exercising. If your body temperature gets too high for more than a few minutes, it can cause problems with the baby.

Domestic violence

Domestic violence is the use of physical, sexual or emotional abuse by one person to control another person. It is the leading cause of injury to people of childbearing age. When you're pregnant, this type of abuse puts both you and your baby at serious risk of injury. You may be a victim of domestic violence if someone:

- Hurts you physically.
- Forces you to have sex.
- Threatens to take your children away.
- Blames you for the violence.
- Withholds love to punish you.
- Takes away your keys or money.
- Prevents you from getting medical care.
- Scares you with a weapon.
- Keeps you away from family or friends.

Call from a safe place

If you feel that your life is in immediate danger, call 911. If someone is abusing you, confidential help is available by contacting the National Domestic Violence Hotline at 800-799-7233.

Stages of pregnancy

Pregnancy usually lasts 40 weeks or about nine months. Every three months are grouped into a trimester. There are three trimesters:

Week of pregnancy								
1 Trimester		2 Trimester		3 Trimester				
1	6	13	14	20	27	28	34	40

First trimester (Weeks 1 - 13)

During the first trimester you may feel:

- Tired.
- Breast soreness.
- Upset stomach, with or without throwing up (morning sickness).
- Mood swings.
- · Headaches.
- Food cravings or aversions.

How can I feel better?

- Try going to bed earlier and taking a nap when you can.
- Wear a supportive bra.
- Eat small, frequent meals.
- Try bland foods like rice, cereal or fruit.
- Take your prenatal vitamin at bedtime.
- Suck on hard candy

Early and regular appointments with your provider help to make sure you and your baby are healthy. During your first appointment, you'll be asked questions about your health and habits that may have an effect on your pregnancy.

You can expect to have your urine tested and your weight and blood pressure checked at every pregnancy visit until you deliver. The size of your growing belly may be measured to determine if your baby is growing normally. Your provider may order several tests to help make sure you and your baby are as healthy as possible. These tests may include an ultrasound, screenings and blood tests.



It's important to try to remember the date of your last menstrual period so your provider can estimate your delivery date.

They may check for your blood type and Rh factor, anemia, signs that you are immune to rubella (*German measles*) and chicken pox, infections like toxoplasmosis and sexually transmitted infections, including hepatitis B, syphilis and HIV. They may also check for risk of Down Syndrome, trisomy 18 or other possible health concerns.

Your baby is growing fast. At the end of the third month, your baby will be about three inches long and weigh about one ounce. Your baby's organs are forming. Your baby's heart beats regularly. The muscles are working, and your baby can move around.

Second trimester (Weeks 14-27)

As your body changes to make room for your growing baby, it is common to have:

- Body aches, such as back, abdomen, groin or thigh pain.
- Stretch marks on your abdomen, breasts or thighs.
- Darkening of the skin around your nipples.
- A line on the skin of your belly.
- Itching on the abdomen, palms and soles of the feet.
- Swelling of the fingers, hands, feet or ankles.

How can I feel better?

- Try not to stand or sit for too long.
- Wear low-heeled shoes.
- Don't lift heavy objects.
- Use lotion as needed for your itchy skin.
- Wear loose, comfortable clothing.
- Keep your legs raised when sitting or lying down.
- Try to keep your legs uncrossed.
- Drink plenty of water.

Now is a good time to talk to your provider about birth control options and other family planning services.



Continue to visit your provider, even if you are feeling good. Your provider may order an ultrasound to measure your baby's growth. You will be tested for diabetes at the end of the second trimester. The test is done by drinking a very sweet drink then having your blood tested one hour later.

If you notice swelling of the face, any sudden or extreme swelling or if you gain a lot of weight quickly, call your provider right away.

Your provider can help if you have diabetes during pregnancy. You can also speak to a nutrition expert at your local WIC office at 800-252-5942.



Ultrasound scanning is used to see if you are having more than one baby, check for problems and measure your baby's size.

The second trimester is a good time to sign up for a childbirth education class. Start talking to your provider about preparing for breastfeeding while you are still pregnant. The health plan can help you order a breast pump during your third trimester, before you deliver. Ask your provider about choosing a pediatrician for your baby, and learn about how to take care of your new baby after delivery.

During the second trimester, your baby can hear and suck their thumb. Kicks and movements can also be felt. Your baby's eyelashes and fingernails are growing. By the end of the second trimester, your baby will weigh about 1.5 pounds and be about 12 inches long already.

Third trimester (Weeks 28-40)

Some new body changes you might notice in the third trimester include:

- Tender breasts, which may leak a watery pre-milk called colostrum.
- Heartburn.
- Hemorrhoids.
- Your belly button may stick out.
- Trouble sleeping.
- The baby "dropping" or moving lower in your abdomen.
- Contractions, which can be a sign of real or false labor.

How can I feel better?

- Raise your arms over your head if you are short of breath.
- Lay on your side instead of your back.
- Rest when you feel tired.
- Keep your legs raised when you are sitting or lying down.
- Eat several small meals and snacks daily, instead of three big meals.
- Try not to eat greasy and spicy foods.
- Eat plenty of fresh fruits and vegetables.
- Drink more water.
- Wear a supportive bra.
- Take short walks or swim.

You will visit your provider more often this trimester. At about 35 weeks, your provider will test you for group B streptococcus (GBS). GBS is a bacterium naturally found in the vagina of many women and doesn't cause any symptoms. GBS can cause serious infections in newborns if not treated. Ask your provider about your GBS test results.

If you haven't received them yet, the third trimester is the best time to receive important vaccines to help protect your new baby's immune system. It's recommended that pregnant mothers should receive an influenza (flu) vaccine and TDaP (Tetanus, Diphtheria and Pertussis) vaccine with every pregnancy. Both vaccines help to lower the risks of your baby catching an illness that can that cause breathing problems. Being up to date on your COVID-19 vaccinations is also recommended.

Talk to your provider about receiving these vaccines during pregnancy.

In the third trimester, your baby is preparing for birth by turning head down. Your baby's organs are ready to work on their own after delivery. Your baby weighs between 6 and 9 pounds at the end of the third trimester.



Pregnancy warning signs

Call your health care provider immediately if:

- Your baby is moving less or not moving at all.
- You feel unusual or severe stomach pain or backache.
- You have a headache or swelling that is much worse than usual.
- You are seeing spots or flashing lights.
- You are having trouble seeing.
- You have vomiting that will not stop.
- You experience numbness or weakness.
- You have trouble standing or talking.
- You are in preterm labor more than three weeks before your due date.
- You have vaginal bleeding (bright red is not normal).
 - » Know how much you are bleeding.
 - » Look for blood clots.
- Your water breaks before 37 weeks.
- You have a fever above 100.4 F.
- You are experiencing signs of a urinary tract infection:
 - » Urinating often but only small amounts.
 - » Burning or pain with urination.
 - » Seeing any pink or red in urine.
 - » Seeing pus in urine.

When to call your provider

- Fevers
- Swelling
- Headache
- Mild contractions (three or more per hour)
- Low back pain

When to go to the hospital

- Vaginal bleeding
- Leaking of fluid from the vagina
- Baby is moving less than normal for several hours
- You haven't felt your baby move for several hours
- You have painful, regular contractions

Nurse On Call



Health care advice 24 hours a day, seven days a week at 888-747-7990. If you or your family members are

sick or injured, call the Nurse On Call to learn what you should do next. There is no charge for this service. We want to help.

Counting baby kicks is important.

Fetal kick counts

The American College of Obstetricians and Gynecologists recommends you begin counting kicks at 28 weeks or at 26 weeks if you are high risk or pregnant with more than one baby. Counting kicks is a simple way to monitor your baby's well-being.

- Count the time it takes for your baby to make ten movements: kicks, rolls, jabs.
- Pick a time when your baby is most active, and try to count kicks at the same time every day.
- Write down the time you feel your baby's first movement as the "start time."
- When you've counted ten movements, write down the finish time.
- After a few days of regular counting, you'll notice your baby has a regular pattern for how long
 it takes to get to ten movements. This is what is normal for your baby.

Call your provider or visit your nearest hospital right away if you notice a change in your baby's movement, if it begins to take longer to get ten movements, or you do not feel ten movements during a two-hour counting period. Visit **www.CounttheKicks.org** for more information or to download the "Count the Kicks" mobile app to help with counting your baby's movements.

Preventing a low birth weight baby

Low birth weight is when a baby is born weighing less than 5 pounds, 8 ounces. Some babies with low birth weight are healthy, even though they are small. But having a low weight at birth can cause serious health problems for some babies. A baby who is very small at birth may have trouble eating, gaining weight and fighting off infections. Some may have long-term health problems too. About one in 12 babies (about eight percent) in the United States is born with low birth weight.

Some things may make you more likely than others to have a low birth weight baby. These are called risk factors. Having a risk factor doesn't mean you'll have a low birth weight baby, but it may increase your chances. Talk with your health care provider about what you can do to reduce your risk.

Low birth weight baby risk factors

- Preterm labor: This is labor that starts before 37 weeks of pregnancy.
- Chronic health conditions: These are health conditions that last for a long time or that happen again and again over a long period of time. Chronic health conditions need to be treated by a health care provider. Chronic health conditions that may lead to having a baby with low birth weight include high blood pressure, diabetes and heart, lung and kidney problems.
- Taking certain medicines to treat health conditions, such as high blood pressure, epilepsy and blood clots: Tell your provider about any prescription medicine you take. You may need to stop taking a medicine or switch to one that is safer during pregnancy.
- Infections: Certain infections, especially infections of the internal reproductive organs during pregnancy, can slow a baby's growth in the womb. These include cytomegalovirus, rubella, chickenpox, toxoplasmosis and certain sexually transmitted infections.
- Problems with the placenta: The placenta grows in the uterus and supplies the baby with food and oxygen through the umbilical cord. Some problems in the placenta can reduce the flow of oxygen and nutrients to the baby, which can limit the baby's growth.
- Not gaining enough weight during pregnancy: Pregnant people who don't gain enough weight during pregnancy are more likely to have a low birth weight baby than those who

Are you at risk for having a low birth weight baby?

gain the right amount of weight. If you have an eating disorder or have been treated for an eating disorder, tell your provider. Your provider can check on you and your baby carefully throughout pregnancy to help prevent complications and make sure you're both healthy.

- Having a baby who was born too early or who had low birth weight in the past.
- Being pregnant with multiples (twins, triplets or more): More than half of multiple birth babies have low birth weight.
- Smoking, drinking alcohol, using street drugs and abusing prescription drugs: Pregnant people who smoke are more than three times as likely to have a baby who weighs too little at birth than people who don't smoke. Smoking, drinking alcohol, using street drugs and abusing prescription drugs during pregnancy can slow the baby's growth in the womb and increase the risk for preterm birth and birth defects.
- Exposure to air pollution or lead.
- Being a member of a group that experiences the effects of racism and health disparities.
- Domestic violence: This is when your partner hurts or abuses you. It includes physical, sexual and emotional abuse.
- Age: Being a teen (especially younger than 15) or being older than 35 makes you more likely than other parents to have a low birth weight baby.

Spot the signs of preterm labor

Preterm labor is when the process of labor starts before 37 weeks. Here are some signs that you may have preterm labor:

- Contractions (your belly tightens or feels hard) every ten minutes or more often
- Leaking fluid or bleeding from your vagina
- Pelvic pressure or the feeling that your baby is pushing down
- Low, dull backache
- Cramps that feel like your period
- Belly cramps with or without diarrhea

What should you do if you think you're having preterm labor?

- Call your health care provider or go to the hospital right away if you think you're having preterm labor or if you have any of the warning signs. Call even if you have only one sign. Your health care provider may tell you to:
 - » Come into the office or go to the hospital for a checkup.
 - » Stop what you are doing. Rest on your left side for one hour.
 - » Drink two to three glasses of water or juice (not coffee or soda).

Don't rush your baby's delivery

It is best to let labor start on its own and allow your baby to grow and develop the full 40 weeks of pregnancy. While being done with pregnancy may seem tempting, especially during those last few weeks, inducing labor is associated with increased risks, including prematurity, a cesarean section, hemorrhage and infection. Induction of labor or a cesarean section should only be scheduled before 39 weeks for medical reasons—not for convenience or scheduling concerns. If your provider is worried about the health of your baby, an induction or cesarean section may still be the best option. For more information, speak with your health care provider, visit www.MarchofDimes.org/Find-Support/Topics/Birth/Why-Least-39-Weeks-Best-Your-Baby or contact the Health Plan's Maternal Child Health Department to speak with an OB care manager.



Depression and anxiety during and after pregnancy

What should I do if I have symptoms of depression before, during or after pregnancy? Depression during or after pregnancy can become serious if not treated. If you think you may have depression, talk to your provider as soon as possible, even if it's before your next appointment. You may have depression if you have any of these signs that last for more than two weeks:

Changes in your feelings

- Feeling sad, hopeless or overwhelmed
- Feeling worthless or guilty
- Not wanting to be with friends and family

Changes in your everyday life

- Feeling restless or moody
- Eating more or less than you usually do
- Losing interest in things you usually like to do

Changes in your body

- Crying a lot
- Having trouble remembering things, concentrating or making decisions
- Not being able to sleep or sleeping too much
- Having no energy and feeling tired all the time
- Having headaches, stomach problems or other aches and pains that don't go away

If you're pregnant, or have recently delivered, and you have any of these signs, or if the signs get worse, call your health care provider. There are things you and your provider can do to help you feel better. If you are worried about hurting yourself or your baby, call 911.

Help is available

The National Maternal Mental Health Hotline provides 24/7 no-cost, confidential support before, during and after pregnancy in both English and Spanish. Call 833-943-5746 to get started.

If you would like to connect with a caring volunteer to find support for depression during or after pregnancy, call Postpartum Support International at 800-944-4773. Volunteers return messages during business hours.

For immediate help for a behavioral health crisis, contact:

988 Suicide and Crisis Lifeline Call or text 988.

Arizona Statewide Crisis Hotline Call 844-534-4673 or text 44673.

Did you know that you have access to a behavioral health care manager through your health plan? They can assist you in connecting with behavioral health providers and services, including counseling and therapies. Call our Customer Care Center at 800-582-8686, TTY 711 to request a referral.

Preparing for Childbirth and Baby

There is so much to do before you have your baby. You will need to talk to your provider about where you will deliver and work on developing your birth plan. This is a great time to sign up for childbirth education classes. You will also need to start preparing for baby by deciding whether you will breastfeed or bottle-feed. You may choose a pediatrician for your baby and collect all needed items for your baby, including a car seat and crib. This is also a great time to enroll in a home visitation program that works best for your family needs.

Preparing for childbirth

Make a birth plan

Talk to your provider about making a birth plan. A birth plan lets your provider and the place you are delivering know your wishes for labor and delivery. Keep in mind that your birth plan does not guarantee that your labor and delivery will go as planned. Unexpected things can happen. Talk to your provider about making your birth plan.

Childbirth education classes

The more you know about the process of labor and childbirth, the more confident you'll feel when it happens. Using the relaxation methods you learn in class may also help you shorten labor time, use less medication and have an easier birth.

Where will you deliver?

During your first trimester, you'll want to choose a hospital or birth center where your baby will be born. Your health care provider can help you learn which places might be the best choice. If you know you will need special care, you'll need to choose a hospital offering that level of care.

Prepare your hospital bag

If you're like most people, you'll want to start gathering items to take with you to the hospital or birth center well ahead of the beginning of labor. Here's a list of helpful items you may want to pack ahead of time:

- · Hospital paperwork, ID, insurance card
- Copies of your birth plan
- Sleepwear, robes, slippers
- · List of your current medications
- Clothes, underwear, socks
- Comfortable nursing bra
- Cellphone and charger
- Soothing music
- Books, magazines or other things to help pass the time
- Personal items like toothbrush, toothpaste, shampoo, lip balm, etc.
- Baby clothes and blanket
- Car seat



Labor support person

For many people, their labor support person will be their partner or spouse. It could be a family member or even a close friend. Whoever you pick should understand that they will be with you through all the different stages of labor, actively giving you plenty of help and support. You may even choose to include a doula service provider as part of your labor support. Your labor support person can help with:

- Reminding you of any skills you learned in your childbirth education classes.
- Timing your contractions.
- Applying touch and massage to help you relax.
- Providing comfort by bringing you extra pillows, helping you change positions and reminding you to use the bathroom.
- Keeping you relaxed.
- · Updating family and friends.

A doula is a non-medical professional who can help your though your pregnancy, labor and childbirth. AHCCCS covers doula support services during pregnancy, labor and delivery and for up to a year postpartum. A doula is a trained non-medical professional who may provide continuous support to the birth parents, to improve pregnancy, delivery and newborn outcomes.



Did you know your health plan covers some childbirth education classes? Call our Customer Care Center at 800-582-8686, TTY 711 to learn more.



Comfort measures during labor

You'll probably learn about different ways to reduce pain and discomfort in your childbirth classes, including how to control your breathing, touch and relaxation techniques and/or using pain medication.

Relaxation

Progressive relaxation: Your labor partner will tell you to tense one muscle group. Pay attention to what this feels like. Try to keep the rest of your body relaxed. Feel the difference when your partner tells you to relax the tensed muscle group.

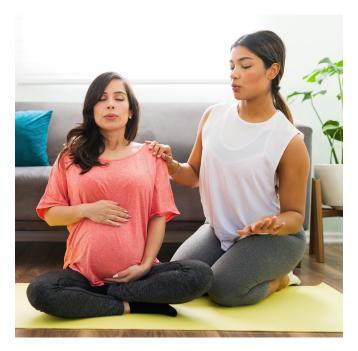
Touch relaxation: Your partner will tell you to tighten a muscle group. When you feel your partner's touch, consciously relax that area. Practice this so that when you are in labor, your partner can let you know to relax a part of your body that seems tense.

Focus and distraction

When you focus all your attention on one thing, your brain can ignore distracting thoughts, including physical discomforts like labor pain. You can pick any one thing to be your focal point. It could be a special photograph or a familiar object that makes you feel calm. Your focal point could also be a repeated word, sound or phrase. The key is to keep all your attention on your focal point to distract your brain from discomfort, fear, stress or other unpleasant feelings.

Cleansing breath: Taking a big breath can relax you at the beginning and end of every contraction. Here's how to do it:

- When a contraction starts, take a deep breath in through your nose. Then let it out through your mouth. This gives you and your baby more oxygen, reminds you to relax and focus and lets your partner know that a contraction is starting.
- When the contraction ends, take another deep breath to get rid of any leftover tension.
 Remind yourself to relax until the next contraction begins.



Breathing patterns

Slow breathing: This is a relaxed and comfortable pattern that may work well in early labor. Simply breathe in slowly and deeply. Then relax your shoulders, hands, face, legs and toes as you slowly breathe out.

Light, quick breathing: This can be helpful when your contractions get stronger and longer. Take a cleansing breath when a contraction starts. Then breathe in and out slowly. When the contraction is more intense, take quick shallow breaths in and out, followed by another deep cleansing breath when the contraction is over.

Pant-pant-blow breathing: Try this pattern when you feel like pushing but your cervix is not fully dilated. Take in a deep breath then breathe out with short pants followed by a longer blow during the contraction. Take a cleansing breath at the end of the contraction.

Changing positions

Staying in one position can increase your tension. You may be more comfortable if you change the way you're sitting or lying down often. It can also help to sit up or walk around. If it's okay with your health care provider, try moving, resting and changing positions when you can.

Touch

Did you know that being touched can lower your pain level? Simply holding hands with someone and having them gently stroke your arms, legs or belly can help your body release "feel good" endorphins. When you are tense, have your partner cuddle up close and gently touch you. It may help both of you relax.

Light massage

Light massage in a circular motion can help you relax, ease feelings of pain and even help you sleep. Ask your partner to relax their hands and lightly draw large circles with their palms on your back, arms or legs. Also have them use just their fingertips to lightly glide over your belly during contractions.

Pressure

Applying pressure to certain parts of your body can lower stress, tension and pain levels. You may have experienced this in the past if you've ever pressed on your forehead to relieve headache pain. You can do the same thing with labor pains. If you're having back labor (intense pain in your lower back caused by your baby's position in the womb), ask your partner to push down on your lower back with a fist or the heel of their hand to help relieve some of your pain.

Heat and cold

Warmth is a very good way to reduce pain and bring on relaxation. A heating pad or a warm pack on your lower back can also help with back pain. A cold (ice) pack may also be used to help reduce pain. Some people find it helpful to alternate between heat and cold packs.

20 minute rule

Good sensations, such as touch, a cold washcloth or a soothing sound can make pain seem to go away. Unfortunately, after about 20 minutes, your brain gets used to that good sensation, and you start to feel pain again. When this happens, change to a different comfort measure to feel better for another 20 minutes.

Pain medications

There are many different pain medications options available to you. Talk to your provider to find out about the options available to you.

We also have nurse care managers available to help you before, during and after your pregnancy. Your care manager can provide you education on your pregnancy, work with your provider, make sure you have all your needed medications, connect you to community resources and help you understand your health care benefits.

To connect with a nurse care manager, please contact our Customer Care Center at 800-582-8686, TTY 711. Request to be referred to the Maternal Child Health Department.

How will I know I am in labor?

Everyone's labor experience will be different. Labor may start when your water breaks or when your contractions become more frequent and intense. This section covers what to do when your water breaks and how to tell if you are truly in early labor or simply having Braxton Hicks contractions.

Is it true labor or Braxton Hicks contractions?

True labor will:

- Have a regular pattern.
- Get more intense.
- Get closer together.
- Cause pain in your back or lower belly.
- Not feel better when you walk or lie down.
- Open your cervix.

Braxton Hicks contractions will:

- Have an irregular pattern.
- Not get more intense.
- Not get closer together.
- Cause your belly to feel sore but not your back.
- Feel better when you walk or lie down.
- Not open your cervix.

Timing your contractions

If you have determined that your contractions are related to true labor, it is important to start timing your contractions. You will want to write down how far apart your contractions are and how long each contraction lasts.

When should I go to the hospital?

Your provider will give you instructions on when you should arrive at the hospital during your final prenatal appointments. Usually, providers will have you follow the 5-1-1 rule. This is when your contractions are five minutes apart and last one minute each for about an hour.

Your provider may want you to go to the hospital sooner if your water has broken. When your water breaks, it may come out as a big gush or a small leak. Call your provider if you think your water has broken. Let your provider know the color of the fluid, if the fluid has an odor, the amount of fluid and the time your water broke.



Preparing for baby

Choosing a pediatrician

You should find a health care provider for your baby before you give birth. This important person will take care of your baby's health for many years. Your baby will be seen by their pediatrician for their first appointment three to five days after going home from the hospital and will be scheduled for regular well-child exams. During these appointments, your child's provider will check on your baby's growth and development, ask you about any concerns you may have about your baby, and provide your child with their vaccines. If you need help choosing a pediatrician in your area, call our Customer Care Center at 800-582-8686, TTY 711.

Feeding baby

An important choice to make prior to baby being born is whether you plan to breastfeed or formula feed your infant. WIC is a great resource for either choice. WIC provides breastfeeding classes to pregnant and postpartum people, healthy foods and can help with breastfeeding supplies and formula. Call WIC at 800-252-5942 to get started.

Getting a bassinet and car seat

You will need to have a car seat and safe place for baby to sleep before you go home from the hospital. If you need help getting baby items, call our Customer Care Center at 800-582-8686, TTY 711 and ask to speak to an OB nurse care manager. They can help you connect with community resources in your area.

Changing relationships during pregnancy and after baby arrives

It is normal for your relationship with your partner to change during your pregnancy and after delivery. During your pregnancy, you may feel excited and close as a couple. You may also feel some stress if you have financial, work or relationship concerns, especially if your pregnancy wasn't planned. After the baby comes, many couples can feel the strain of not getting enough sleep, having less personal time, financial costs of raising the baby and not having time together as a couple. However, having a strong connection is important for both the pregnant person and the baby.

Pregnant people who have an involved and supportive partner during pregnancy are more likely to give up harmful behaviors, such as smoking, and lead healthier lives. Babies may be born healthier as well, with lower rates of preterm birth and growth problems. Women who are well supported during pregnancy may be less anxious and have less stress in the weeks after childbirth.

How can I be a supportive partner?

You can be supportive by educating yourself about pregnancy, going with your partner to prenatal care appointments and joining in making healthy lifestyle choices. Your partner may also be more tired, so helping more around the house or with older children can be one way of showing your support.

During labor and delivery, you can:

- Help distract your partner by playing games with them or by watching a movie during early labor.
- Take short walks with them, unless they have been told to stay in bed.
- Time their contractions.
- Massage their back and shoulders between contractions.
- Offer comfort and words of support.
- Encourage them during the pushing stage.

How can I help and bond with baby?

- Practice skin to skin to bond with the new baby. Undress baby down to their diaper and place their bare chest to your bare chest. Cover up the baby's back with a blanket so they don't get cold.
- Sing or read to the baby.
- Give the baby a bath.
- Learn about baby care and attend pediatrician appointments.
- Help with changing baby's diapers.

How can I help with breastfeeding?

- Bring baby to your partner for feedings.
- Burp and change the baby after feedings.
- Cuddle and rock baby to sleep.
- Help feed your baby if your partner pumps their breast milk into a bottle.

How can couples stay connected with a new baby?

- Take a couple of minutes to connect with your partner. Even if it is only for 10 minutes, sit and talk about your partner's everyday life.
- Plan a date night. It is important to have alone time with your partner.
- Bring the baby into your plans. Being romantic doesn't imply that you need to discover ways to get away from your child. Just taking an afternoon walk with baby in the stroller can be romantic and help you reconnect.
- Alternate taking care of the baby, so each partner has some time to themselves.

Resuming sexual intercourse

- Sexual intercourse can be resumed once the birthing partner has had a postpartum checkup and received the go-ahead from the OB provider.
- Don't feel you have to have sex again before you are ready, and if you want to have sex earlier than your partner does, don't pressure them. Everyone is different and for some people, it can take a long time before they are in a mindset where they want to have sex again.
- Due to hormonal changes, a water-based lubricant may be necessary.
- Pregnancy can occur prior to the birthing person's menses returning, so use a condom or another form of birth control to help prevent an unintended pregnancy.

Postpartum and Baby Care

Body changes

After the birth of your baby, your body will recover from delivery. Plan to take it easy, sleep when the baby sleeps and ask for help when you need it.

Some normal changes after delivery are:

- Vaginal discharge called lochia (LOH-kee-uh). It is the tissue and blood that lined your uterus during pregnancy. It is heavy and bright red at first, becoming lighter in flow and color until it goes away after a few weeks.
- Swelling in your legs and feet. Keep your feet elevated when possible.
- Difficulty having a bowel movement. Try to drink plenty of water and eat fresh fruits and vegetables.
- Menstrual-like cramping is common, especially if you are breastfeeding.
- Your breast milk will come in within two to four days after your delivery. Even if you are not breastfeeding, you can have milk leaking from your nipples, and your breasts might feel full, tender or uncomfortable.

Follow your provider's instructions on how much activity, like climbing stairs or walking, you can do for the next few weeks.



Medical care after delivery for you and baby

Postpartum visit

The American College of Obstetrics and Gynecologists recommends that you see your provider for an initial postpartum visit within three weeks of your delivery date and even sooner if you have had a cesarean section. Your provider will recommend appointments, depending on your individual needs. You should finish with a full comprehensive visit no later than 12 weeks after your delivery.

Your provider will:

- Check on your mood and emotional well-being.
- Ask you about how infant care and feeding are going.
- Talk to you about family planning options and the importance of safely spacing your pregnancies.
- Follow up on your sleep and fatigue.
- Review your physical recovery after birth.
- Make referrals to manage any chronic diseases.
- Follow up on any questions you may have about your recovery.

Postpartum doula support is covered.

A doula is a trained non-medical professional that can support you and your baby up to a year after you deliver.
For more information talk to your OB provider or a doula service provider.

Call your provider immediately if you have any of these warning signs:

- Bleeding that soaks a pad in an hour or less
- Blood clots the size of an egg or larger
- A bad smell coming from your vagina
- Fever of 100.4 F or higher
- Pain in your cesarean incision or stomach pain that won't go away
- A cesarean incision that starts to pull apart
- Swelling, redness, discharge or bleeding from your incision or episiotomy
- Trouble urinating: You can't go, it burns when you go or your urine is very dark
- No bowel movement since giving birth four days ago
- Flu-like symptoms

- Pain or redness in one or both of your breasts
- Legs or calves that hurt, feel warm or are tender or swollen
- Nausea or vomiting
- Signs of depression or anxiety
- Swelling of your hands and face
- Sudden weight gain
- Headaches and trouble seeing things
- Shortness of breath, confusion or anxiety
- Vision changes, such as flashing lights, auras or light sensitivity
- Pain in your upper abdomen

Call 911 immediately if you have:

- Chest pain or problems breathing.
- Facial drooping.

- Weakness on one side of the body.
- Difficulty speaking

Remember to notify any health care provider if you have been pregnant or delivered within the last year, including providers in an urgent care or emergency room.

Well-child visit

Your baby's provider will want to see them for their first well-child visit within the first three to five days after your baby is born. Don't miss a beat for additional wellness visits recommended by your baby's provider.



Benefits of a well-child visit

Prevention

Your child gets scheduled immunizations to prevent illness. You also can ask your pediatrician about nutrition and safety in the home and at school.

Tracking growth and development

See how much your child has grown in the time since your last visit and talk with your provider about your child's development. You can discuss your child's milestones, social behaviors and learning.

Raising any concerns

Make a list of topics you want to talk about with your child's pediatrician, such as development, behavior, sleep, eating or getting along with other family members.

Team approach

Your child's provider can also refer your child to any specialists that your child may need to help with their continued wellness. These referrals are covered by your health plan.

Breastfeeding

Getting started

Breast milk is the best food for your baby during the first year of life. Breastfeeding is natural, but it's also a learned skill that may seem a little overwhelming at first. So be patient with yourself. Always ask for help if you need it. And remember, you are not alone. There are plenty of resources available. Talk to your provider about preparing for breastfeeding. They can answer any questions you may have.

Breastfeeding benefits for both mom and baby

For mom

- Can help with losing the weight gained during pregnancy.
- Lowers the rate of type 2 diabetes and high blood pressure.
- Lowers the rates of breast and ovarian cancer.
- Decreases the amount of bleeding you have after giving birth.

For baby

- Breast milk has the right amount of nutrition needed for your baby's growth and development.
- Breast milk is easier to digest than formula, which can help decrease gas, feeding problems and constipation for your infant.
- Breast milk contains antibodies that protect infants from certain illnesses and infections.
- Breastfed infants have a lower risk of sudden infant death syndrome (SIDS).

Breast milk stages

Colostrum

- This the first milk that develops during pregnancy. You will also make it for the first few days after your baby's birth.
- High in proteins, vitamins and minerals your newborn needs.
- Contains antibodies that protect your baby from diseases.

Transitional milk

- A combination of both colostrum and mature milk, which develops. Your milk changes and increases in quantity.
- Has high levels of fat, lactose, protein, water soluble vitamins and calories.

Mature milk

- Contains mostly water, carbohydrates, proteins and fats.
- Keeps your baby hydrated and maintains a correct fluid balance.
- Has antibodies that benefit your baby's immune system while you breastfeed.

Making milk

When your baby breastfeeds, your brain makes a hormone called prolactin. Prolactin tells your milk glands to make more milk. Your brain will also make a hormone called oxytocin. This hormone tells your milk glands to squeeze milk out of your nipples, which is called the let-down response. During let-down you may feel tingling, warmth in your chest and your breasts getting full.

The more milk your baby takes from your breast, the more milk you will make. An empty breast also makes milk faster than a full one.

Baby feeding cues

When babies are ready to feed, they will show you signs called feeding cues. Your baby needs to breastfeed at least eight times every 24 hours.

Feeding cues to look out for:

- Baby lip smacking and tongue sticking out.
- Baby's head turning to look for the breast.
- Baby opening and closing mouth.
- Baby moving their hands and fists to mouth.

How to breastfeed

- Wash your hands with soap and water.
- Sit in a bed or chair, using pillows for support.
- Choose a position to hold your baby.
- Gently massage each breast and hand express until milk comes out.
- Place your baby tummy-to-tummy with you.
- Line your baby's nose up to your nipple.

- Baby becoming more alert and active.
- Crying is a late feeding cue. You will want to calm your baby first by holding baby skin to skin or by gently rocking them.
- Gently lift your baby's nose up to your nipple.
- Gently lift your breast, keeping your fingers away from the areola.
- Run your nipple above your baby's upper lip.
- Wait for your baby's mouth to open wide.
- Gently pull your baby to your breast.
- Aim your nipple toward the roof of your baby's mouth.

Human donor milk

If your infant is not able to receive maternal breast milk due to a medical condition affecting you or your baby, pasteurized human donor milk may be covered. For more information, talk with your OB provider, pediatrician or call our customer care team and ask to speak to a care manager.

What to expect in the first few weeks

There is help available to help you in being successful with breastfeeding.

WIC is a great resource for breastfeeding mothers. WIC provides breastfeeding classes to pregnant and postpartum people, healthy foods and can help with breastfeeding supplies. Call WIC at 800-252-5942 to get started.

Arizona has a 24-Hour Breastfeeding Hotline that is available at no cost and provides you access to a lactation consultant any time of the day. Call 800-833-4642 for more information.

Your health plan will provide you with a breast pump. There are many different breast pumps to choose from that best fit your needs. Call our Customer Care Center at 800-582-8686, TTY 711 for more information on how to place your order.

Breastfeeding: What to expect in the first few weeks

	Happy birthday	Day 2	Day 3-4	Day 5-11	2+ weeks	
Mom's breasts	Most women notice their breasts change and grow with pregnancy.	Some tenderness is normal.	Breasts are fuller, heavier. Slight discomfort at latch is ok as long as it goes away in 30 seconds.	Breast will feel fuller before a feed and softer after. Nipple pain should ease.	Continued nipple/breast pain is a sign to call for help.	Mom's breasts
Feeding	Skin to skin after birth. Alert first feed, may be sleepy rest of day.	More alert, feeds every 2-4 hours. Second night = lots of feeding.	8-12x in a 24 hour period (not evenly spaced).	8-12x in a 24 hour period (not evenly spaced).	8-12x in a 24 hour period (not evenly spaced).	Feeding
Diapers	Minimum one poop <i>(meconium)</i> and one wet.	Minimum 2 poops and 2 wet.	Minimum 3-4 wet, 3-4 poops. Poop begins to turn green and pasty.	Minimum 6+ wet, 3+ poops. Poop should be yellow, seedy and runny.	Minimum 6+ wet, 3+ poops. Poop should be yellow, seedy and runny.	Diapers
Weight	Birth weight.	Loss of up to 7% of birth weight is normal.	Begins to gain weight.	Weight gain of .5-2 ounces a day is normal.	Baby should be back up to birth weight by 2 weeks.	Weight

Warning signs! Call your care provider if:

No wet diaper in 12 hours No dirty diaper in 24 hours Temperature of 100.4 F or more

Reference: Breastfeeding: What to Expect in the First Few Weeks, Arizona Department of Health Services: www.azdhs.gov/prevention/nutrition-physical-activity/breastfeeding/index.php#resources

Breastfeeding and returning to work

Many parents have questions about expressing breast milk when returning to their workplace after having a baby. Whether returning to work from maternity leave or starting a new job after having your baby, you may be working from home, at a work site or some combination of the two.

How do I talk with my employer about my needs as I return to work?

If you work outside your home, talk with your employer before you return to your workplace about expressing breast milk during work hours. Having this conversation early will help make sure a plan is in place. Talk with your employer about:

- Where there is a private, non-bathroom space to express breast milk.
- Where breast milk can be stored (e.g., refrigerator, insulated cooler).
- Where pump parts can be cleaned.
- What times are best for you during your work schedule for expressing milk.

Where can I store breast milk at my workplace?

- In the refrigerator: Expressed breast milk is a food and may be stored alongside other foods in any refrigerator that is appropriate for food storage.
- In an insulated cooler: You can store and carry freshly expressed milk in an insulated cooler bag with ice packs for up to 24 hours. Once you get home, use the milk right away, store it in the refrigerator or freeze it.

What else might help me continue breastfeeding after returning to work?

- Practice using your pump or hand expressing breast milk before returning to work, so you
 are comfortable with the process.
- Build a supply of frozen breast milk before returning to work.
- Think about how much breast milk you will need to leave at home or at child care for your baby before your first day back at work.
- Think about how often you will need to pump or express breast milk while at work to have enough for your baby while you are apart.
- Once breastfeeding is going well, practice bottle feeding your breast milk so your baby will be
 used to a bottle while you are away at work. If your baby is having trouble taking a bottle at
 first, try having another adult feed your baby with the bottle. You can also try different types
 of bottles and nipples.

Breastfeeding and medications

Most nursing mothers do not need to stop breastfeeding to take over-the-counter or prescribed medicines. Almost all medicines pass into breast milk but usually only in very small amounts. Always follow the directions on the container about how to take the medicine. Check with a health care provider, either yours or your baby's, or a Board-Certified Lactation Consultant (IBCLC) to find out if you can take a certain medicine while breastfeeding. The ADHS 24-Hour Breastfeeding Hotline is available at 800-833-4642 to answer your questions about breastfeeding and medicines. MotherToBaby has experts available, at no cost, to provide you information about medications and other exposures during pregnancy and breastfeeding by phone, text, email or chat. Visit www.MothertoBaby.org or call 866-626-6847 to learn more.

Safe sleep

SIDS stands for sudden infant death syndrome, and is the sudden, unexplained death of a baby younger than 1 year of age that doesn't have a known cause even after a complete investigation. The best way to protect your baby from SIDS is to practice safe sleep habits. Follow the "ABCs" of safe sleep below to create a safer sleeping environment for your baby.

Alone

The safest place for your baby is alone in their own sleeping space in the same room with a parent or caregiver. Their sleeping space should be clear of other people, pets, blankets, toys, bumpers and other soft objects.

Back

For every sleep, place your baby on their back before your child is 1 year of age. Even as your baby grows and learns to roll, starting sleep on their back is best.

Crib

Your baby should always be placed in a safety-approved crib on a firm mattress covered by a fitted sheet with no other bedding or soft objects.



For more information, visit Strong Families AZ at www.StrongFamiliesAZ.com/ABCsafesleep. Complete the "Safe Sleep" quiz, and you could receive a complimentary sleep sack.

Programs to help parents in Arizona

Arizona Health Start: For people who are pregnant or have a child under 2 years old.

If you are pregnant or a mother facing challenges, it's important to know that someone can help you. Arizona Health Start is here to help. Our home visitors can connect you with a variety of community organizations that provide health care, education, parenting resources and application assistance for other programs. We will get to know you and your family, so we can help you get the resources you need. We understand your culture because we live in your community. We also understand what you're going through because we've helped families just like yours.

Visit www.StrongFamiliesAZ.com/Program/Arizona-Health-Start to find the representative for your county.

Early Head Start/Head Start: For families with children under 5 years old.

Head Start (for children 3-5) and Early Head Start (pregnant people and children 0-3) has a variety of program and service delivery options, including Center Base, Home-Base, Combination (Home and Center) or Family Child Care. Each program incorporates an individualized approach to high quality services for low-income pregnant people and children age birth to 5. Families receive support and guidance from Head Start staff to become self-sufficient.

Visit www.StrongFamiliesAZ.com/Program/Early-Head-Start to find the representative for your county.

Healthy Families Arizona: For families with an infant under 3 months old.

Anyone who is having a baby can feel overwhelmed. It is important to know that it's okay to ask for help, especially if you are experiencing a few challenges. Healthy Families Arizona is a no-cost program that helps mothers and fathers become the best parents they can be. A home visitor will get to know you and connect you with services based on your specific situation.

Visit www.StrongFamiliesAZ.com/Program/Healthy-Families-Arizona to find the representative for your county.

Nurse - Family Partnership: For first time mothers less than 28 weeks pregnant.

Children don't come with an instructional guide. So it is only normal that new mothers face challenges and doubt. In times like these, someone is here to help you. Nurse – Family Partnership is a community health care program that will connect you with a nurse home visitor. Through the visits, you will learn how you can best care for your child.

Visit www.StrongFamiliesAZ.com/Program/Nurse-Family-Partnership to find the representative for your county.

Parent As Teachers: For families with a child on the way or under 5 years old.

Your children have so much potential. As a parent, you have a unique opportunity to be their first teacher. That's because most brain development occurs in the first few years of life. You can make a difference. Parents As Teachers will show you how. Our home visitors will provide you with resources appropriate for your child's stage of development. Through Parents As Teachers, you'll develop a stronger relationship with your child and help prepare them for academic success.

Visit www.StrongFamiliesAZ.com/Program/Parents-As-Teachers to find the representative for your county.

Family Spirit: For Native American families with children under 3 years old.

The Family Spirit Program is a culturally tailored home-visiting intervention delivered by Native American paraprofessionals. This is a core strategy to support young Native parents from pregnancy to 3 years postpartum. Parents gain knowledge and skills to achieve optimum development for their preschool age children across the domains of physical, cognitive, social-emotional, language learning and self-help.

Visit www.StrongFamiliesAZ.com/Program/Family-Spirit-Home-Visiting-Program to find the representative for your county.

SafeCare: For families with a child under 5 years old.

Let professional and highly trained home visitors support you and your family on your journey to success. Utilizing the nationally recognized SafeCare model, you will receive weekly visits that are divided into core focus areas: parent-child interaction, health and home safety. In each focus area or module, you will build on and strengthen your skills through a variety of interactive sessions.

Visit www.StrongFamiliesAZ.com/Program/Safecare to find the representative for your county.

Birth to Five Helpline

Do you have questions about your child's development? Birth to Five can help. Nothing out of the question. A no-cost Service of Southwest Human Development.

Visit www.BirthToFiveHelpline.org or call 877-705-KIDS (5437) for more information.

Fussy Baby Program

Clinicians work with families to explore ways to soothe, care for and enjoy your baby. Experts also offer ways to reduce stress while supporting you in your important role as a parent.

Visit www.swhd.org/programs/health-and-development/fussy-baby/ or call 877-705-KIDS for more information.

Arizona Early Intervention Program (AZEIP)

For children up to 36 months of age. AZEIP providers support to families and children birth to 3 years of age with significant developmental delays.

Call 844-770-9500 to learn more.

Raising Special Kids

Raising Special Kids exists to improve the lives of children in Arizona with a full range of disabilities, from birth to age 26, by providing support, training, information and individual assistance so families can become effective advocates for their children.

Visit www.RaisingSpecialKids.org or call 800-237-3007 for more information.

Arizona Youth Partnership

Programs for Pregnant People and Parents: Free programs available to parents and their children from 0-5 years of age to work on improving relationships, mental health, and child well-being and behavior. Also offers programs for teen parents.

Visit www.azyp.org/pregnant-parentingprograms to learn more.

Preparing for next pregnancy

Deciding if you would like to become pregnant again is an important decision. If you do plan to become pregnant again, it is important to wait 18 to 24 months from your last pregnancy to avoid complications or preterm delivery.

Preparing for your next pregnancy is an important key in making sure you reduce your chances of having an unsafe pregnancy and causing harm to your unborn baby.

You can prepare by:

- Using effective birth control until you are ready to have a baby.
- Seeing your provider to talk about:
 - » Any of your current medical conditions like STIs, diabetes, thyroid disease, high blood pressure, asthma or any other disease that is affecting your health.
 - » Any lifestyles and behaviors, including smoking, drinking alcohol, using drugs, living in a stressful or abusive environment or working with or living around toxic substances.
 - » Prescription and nonprescription medications you are taking to make sure they are safe for pregnancy.
 - » Getting up to date on your vaccines, including the annual flu shot and COVID-19 vaccinations.
- Taking a prenatal vitamin with 400 micrograms of folic acid every day at least three months before you plan to become pregnant and continue throughout your pregnancy.
- Stopping drinking alcohol, smoking and using street drugs. Talk to your provider or call our Customer Care Center at 800-582-8686 if you need help stopping.
- Avoiding toxic substances like harmful chemicals, metals, fertilizers, bug sprays and animal feces.
- Reaching and maintaining a healthy weight. People who are overweight or underweight increase their risk of complications during their pregnancy.
- Learning about any family history and sharing with your provider.
- Getting mentally healthy. Talk to your provider or call our Customer Care Center if you would like assistance in finding a behavioral health provider.

Growing Together: The Parenting Connection

Scan the QR code or visit **www.BannerHealth.com/ACC-Newsletters** to view your digital newsletter. It includes useful resources about common pregnancy and parenting topics:



- From Bump to Baby:
 Care During and After Pregnancy
- WIC Arizona
- Count the Kicks,
 Cherish the Moments
- Making Every Breath a Little Easier: Protecting Your Baby From RSV
- Stay Ahead of Syphilis
- HIV Testing and Care in Pregnancy: Ensuring a Healthier Future for You and Your Baby
- And More!

Family planning

Family planning services and supplies are available to members of reproductive age, regardless of gender, from 12 to 55 years of age, who voluntarily choose to delay or prevent pregnancy.

Our providers can help you review and choose birth control methods that will work for you. Members may choose to get family planning services and supplies from any appropriate provider, regardless of the family planning service provider's network status. There is also no copayment or other charge for family planning services and supplies.

Family planning services and supplies for members eligible to receive full health care coverage may receive the following services:

- Contraceptive counseling, medication and/or supplies, including but not limited to, oral and
 injectable contraceptives, LARC (long-acting reversible contraceptives including placement
 of immediate postpartum long-acting contraceptives), subdermal implantable contraceptives,
 IUDs (intrauterine devices), diaphragms, condoms, foams and suppositories.
- Associated medical and laboratory examinations and radiological procedures, including ultrasound studies related to family planning.
- Treatment of complications resulting from contraceptive use, including emergency treatment.
- Natural family planning education or referral to qualified health professionals.
- Post-coital emergency oral contraception within 72 hours after unprotected sexual intercourse (Mifepristone, Mifeprex or RU486 is not post-coital emergency contraception).
- Pregnancy screening.
- Pharmaceuticals when associated with medical conditions related to family planning or other medical conditions.
- Screening and treatment for sexually transmitted infections are covered, regardless of gender.
- Sterilization services are covered, regardless of gender, for members over 21 years of age.



The intrauterine device (IUD) and the birth control implant are long-acting reversible contraception (LARC) methods.

Both are highly effective in preventing pregnancy. They last for several years and are easy to use. Both methods are reversible.

If you want to get pregnant or if you want to stop using them, you can have them removed at any time.

Transportation assistance to your family planning appointments is available.

There are benefits to choosing a LARC, including:

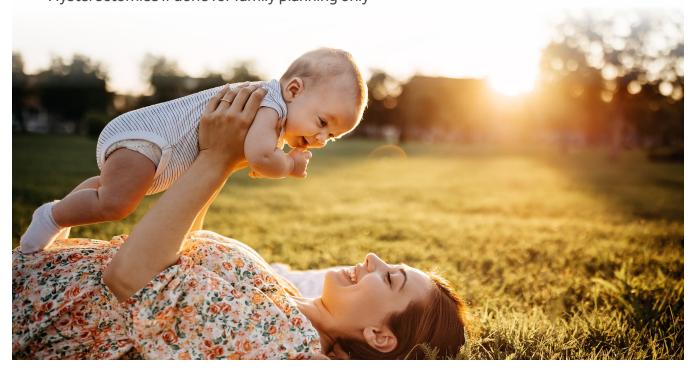
- It is easy to use. Once it is in place, you do not have to do anything else to prevent pregnancy, and it is effective for years.
- No one can tell that you are using birth control.
- It does not interfere with sex or daily activities.
- It can be inserted immediately after an abortion, a miscarriage or childbirth. It can be used while breastfeeding.
- Almost all women can use an IUD. There are few medical problems that prevent its use.
- If you want to get pregnant or if you want to stop using it, you can have the IUD removed. You
 can start trying to get pregnant right after removal. Using an IUD does not affect your ability
 to get pregnant in the future.
- Over time, the hormonal IUDs help decrease menstrual pain and heavy menstrual bleeding.
- The copper IUD is also an effective form of emergency contraception (EC). When used for EC, it should be placed in the uterus within five days (120 hours) of having unprotected sex. Then you can leave it in and use it as a regular form of birth control. (Read Emergency Contraception to learn more.)

Talk to your provider about your family planning options.

If you require family planning services or supplies from a provider that is not in-network, please contact your provider or health plan for assistance.

The following services are not covered under family planning

- Infertility services including testing, treatment or reversal of a tubal sterilization or vasectomy
- Pregnancy termination counseling
- Pregnancy Termination: Unless you meet the specific conditions outlined in the B UFC/ACC Member Handbook, Maternity Care, Medically Necessary Pregnancy Termination section
- Hysterectomies if done for family planning only





5 Things a Nutrition Coach Can Help You with During Pregnancy



What will expecting parents learn by meeting with a nutrition coach?

- How to build healthy meals and snacks that use nutrients important during pregnancy, including protein, omega-3 fatty acids, iron, calcium, choline, and fiber
- How to balance concerns and conditions such as nausea/hyperemesis gravidarum, irondeficiency anemia, and high blood pressure/preeclampsia with nutrition and food intake
- How navigate postpartum: from changing nutrition needs to helping your body recover from birth
- How to manage food cravings and aversions
- How to create a safe exercise program

All Banner - University Family Care members receive access to a Foodsmart nutrition coach - a registered dietitian - at no cost. With Foodsmart, you can meet with your personal nutrition coach from anywhere, by phone or video.

Sign up for a phone call to receive personalized tips on how to support you and your baby's nutritional needs. To get started, simply schedule a no-cost phone call by visiting <u>Foodsmart.com/members/banner-health</u>







Find resources to support your physical and mental health



Make the most of what your health plan offers



Feel better each day with companionship and humor



Connect with compassionate humans for a friendly chat or help with resources

Use your smart phone to sign up for the Pyx Health program at **WWW.HiPyx.com**

A benefit provided at no charge by Banner – University Family Care



Pyx Health^a
Questions about PYX?
Call (855) 499-4777

Resources

B – UFC/ACC Customer Care Center

800-582-8686, TTY 711 www.BannerHealth.com/ACC

No-cost HIV Testing (Get Tested AZ)

www.GetTestedAZ.org/En/Locations

No-cost Prenatal Vitamins (Power Me A2Z)

www.AZDHS.gov/Powermea2z

MyPlate

www.MyPlate.gov

Women, Infants, and Children (WIC)

800-2525-WIC (942) www.AZDHS.gov/Prevention/AZWIC

Count the Kicks

www.CounttheKicks.org

Substance Abuse and Mental Health Services Administration

Call 800-662-HELP (4357) ASHLine 800-556-6222

Arizona Department of Health Services Lead Prevention

602-364-3118 www.AZHealth.gov/Lead

Health-e-Arizona: AHCCCS and Supplemental Nutrition Assistance Program

855-432-7587 www.HealthEArizonaPlus.gov/Login/Default

National Domestic Violence Hotline

800-799-7233 www.TheHotline.org

Nurse On Call

888-747-7990

March of Dimes

www.MarchofDimes.org

Postpartum Support International Warmline

800-944-4773

www.postpartum.net/get-help/psi-helpline

National Maternal Mental Health Hotline

833-943-5746

mchb.hrsa.gov/programs-impact/nationalmaternal-mental-health-hotline

988 Suicide and Crisis Lifeline

Call or Text 988 **988lifeline.org**

Arizona Statewide Crisis Hotline

Call 844-534-4673 or Text 44673

The ADHS 24-Hour Breastfeeding Hotline

800-833-4642

Mother to Baby

www.MothertoBaby.org 866-626-6847

Safe Sleep – Strong Families Arizona

www.StrongFamiliesAZ.com/ABCsafesleep

Birth to Five Helpline

877-705-KIDS

Fussy Baby Program

877-705-KIDS

www.swhd.org/programs/health-and-development/fussy-baby/

2-1-1 Arizona

Call 211

211arizona.org

Arizona Early Intervention Program

888-592-0140

des.az.gov/azeip

Raising Special Kids

www.RaisingSpecialKids.org 800-237-3007

Strong Families Arizona Programs to Help Parents

www.StrongFamiliesAZ.com/Programs

Arizona Youth Partnership

www.azyp.org/pregnant-parentingprograms



References

www.MyPlate.gov

www.ACOG.org/Womens-Health/FAQS/Nutrition-During-Pregnancy

www.ACOG.org/Womens-Health/FAQS/Exercise-During-Pregnancy

www.CounttheKicks.org

www.AZHealth.gov/Lead

www.AZDHS.gov/Ashline

www.TheHotline.org

www.ACOG.org/Womens-Health/Infographics/Breastfeeding-Benefits

www.AZDHS.gov/Documents/Prevention/Nutrition-Physical-Activity/Breastfeeding/ Breastfeeding-What-To-Expect-in-the-First-Few-Weeks.pdf

www.MothertoBaby.org/Contact

www.AZDHS.gov/Documents/Prevention/Nutrition-Physical-Activity/Breastfeeding/ Breastfeeding-Medications-Guidelines.pdf

www.CDC. gov/Nutrition/Infant and Toddler Nutrition/Breast feeding/Workplace-Breast feeding. html the property of the proper

www.MarchofDimes.org/Find-Support/Topics/Birth/Why-Least-39-Weeks-Best-Your-Baby

www.ACOG.org/Womens-Health/FAQS/Long-Acting-Reversible-Contraception-IUD- and-Implant

www.cdc.gov/pregnancy/about/index.html

www.CDC.gov/HIV/Default.html

www.MarchofDimes.org/Find-Support/Topics/Birth/Low-Birthweight

www.ACOG.org/Womens-Health/FAQS/A-Partners-Guide-to-Pregnancy

www.BannerHealth.com/Services/Maternity/Resources/Education



ATTENTION: If you speak English, language assistance services, at no cost, are available to you.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística.

注意:如果您使用繁體中文,您可以免費獲得語言援助服務。

800-582-8686, TTY 711





Banner – University Family Care/ACC 800-582-8686, TTY 711 www.BannerHealth.com/ACC

