

# Hey Mama!

A Guide to Pregnancy,  
Birth and Babies

CENTER  
BOSTON  
MEDICAL

EXCEPTIONAL CARE. WITHOUT EXCEPTION.

**Welcome and thank you** for choosing Boston Medical Center for care while you are pregnant. Maybe you are pregnant for the first time. Maybe you have been pregnant before. You will feel different each time you are pregnant. You may have many new questions, thoughts and feelings. You may want to know how your baby is growing. And you may want to know how to take care of yourself. You will have many visits with your provider during your pregnancy. Your provider may be a midwife, a doctor or a nurse practitioner. Ask lots of questions at your visits. Go to a childbirth education class. Learn as much as you can.

# CONTENTS

## Part 1:

### Pregnancy

#### First Trimester

Taking Care of Yourself while You Are Pregnant .....	4
Safety in Pregnancy .....	5
Exercise .....	6
Healthy Eating .....	7
Problems during Pregnancy .....	9
Making Love during Pregnancy .....	10
What to Expect at Prenatal Visits .....	11
Your Growing Baby .....	13
Changes in Your Body Months 1 to 3 .....	14
Birth Sisters <sup>SM</sup> Program .....	15
Childbirth Education .....	16

#### Second Trimester

Changes in Your Body Months 4 to 6 .....	17
------------------------------------------	----

#### Third Trimester

Changes in Your Body Months 7 to 9 .....	19
Getting Ready for Your Baby .....	21

## Part 2:

### Birth

This section will answer some of your questions about labor and birth. Talk to your provider before you go into labor. Ask questions and learn as much as you can. Think about what is important to you and your family during labor and birth.

What Are the Signs of Labor? .....	23
Directions to Labor and Delivery .....	24
What Should I Expect When I Get to the Hospital? .....	25
What Happens to My Body in Labor and Birth? .....	26
What Are My Choices? .....	
- Labor Pain without Medication .....	27
- Labor Pain with Medication .....	28
Problems during Birth .....	29
What Should I Know about Cesarean Birth? .....	31
What Happens after I Give Birth? .....	32
Facts about Breastfeeding .....	33
When You Leave the Hospital .....	35

## Part 3:

### Babies

Congratulations and welcome to your new baby! The first hours after birth are filled with many changes. You have been waiting a long time to meet your baby. And giving birth takes a lot of energy. You may feel excited as well as tired, sore and a little nervous about what to expect when you go home.

#### Taking Care of Yourself

- Changes in Your Body after Birth .....	37
- Your Body after Cesarean/ Emotions after Birth .....	39
- Healthy Eating and Exercise .....	40
- Family Planning .....	41
- Methods of Birth Control .....	42
- More Important Tips .....	43

#### Taking Care of Your Baby

- The Look of Your New Baby .....	44
- Baby Care: What Should I Know? .....	45
- More Important Tips .....	47

Glossary .....	48
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Part 1:

# Pregnancy



## TAKING CARE OF YOURSELF

# While You Are Pregnant

## Ten ways to stay healthy while you are pregnant:

1. Go to your prenatal visits (health care while you are pregnant).
2. Drink 8 to 10 glasses of water every day.
3. Eat healthy foods.
4. Exercise.
5. Get plenty of rest.
6. Do not use alcohol, cigarettes or street drugs.
7. Wear your seat belt.
8. Go to a childbirth education group.
9. Learn to relax with deep breathing.
10. Talk about your questions and worries. Ask for help.

## Ways Your Support Person Can Help

Your support person may be your partner, the father of the baby, a friend or family member. Your support person can:

- Be a good listener.
- Go to a childbirth education group or prenatal visit.
- Ask questions at prenatal visits.
- Help with housework, errands and cooking.
- Help with childcare.

# Safety in Pregnancy

Many women have questions about foods, chemicals, germs or behaviors they have heard can hurt the baby. Here are some facts:

## Alcohol, cigarettes and street drugs:



- Alcohol (beer, wine and liquor) can hurt your baby's brain and body.
- Cigarettes can cause your baby to be born too early or too small.
- Secondhand smoke (the smoke from another person smoking) can hurt your baby.
- Street drugs can hurt your baby's brain and cause labor to begin too early.

Do you need help to stop?

Smoking Cessation Program: [617.414.4847](tel:617.414.4847)

Addiction and Pregnancy Helpline: [617.414.4165](tel:617.414.4165)

**Chemicals:** Avoid breathing strong-smelling chemicals in your home or workplace.



Chemicals include paint, cleaning fluids and varnish.

## Dirty cat litter:



Cat stool (poop) can have a virus called toxoplasmosis. Getting sick with this virus could harm your baby. Have someone else change the cat litter.

## Hot tubs or saunas:



You may become too hot in a hot tub or sauna. This can hurt your baby's brain and body.

**Caffeine:** More than 2 drinks with caffeine a day may affect your pregnancy. Some drinks with caffeine are coffee, tea and certain sodas.



## Fish with mercury:



Mercury is a poisonous metal found in some fish. These fish include shark, swordfish and king mackerel. Avoid eating a lot of fish with mercury.

## Foods with germs that could harm your baby:



Raw or under-cooked raw meat, fish, shellfish and eggs. Unpasteurized cheese, milk or juice.

## Is it safe to take medications while I am



**pregnant?** Talk to your provider about any herbs, vitamins or medications you may be taking or want to take.

## Is it safe to travel?



Most women can travel up to the last month of pregnancy. Wear your seat belt. Take breaks when driving. Get up and walk around every hour when flying. Drink plenty of water. Take a copy of your prenatal records with you.

# Exercise

Exercise helps you to stay healthy while you are pregnant.  
Talk to your provider about how to exercise while you are pregnant.

## Exercise can help you:

- Have stronger muscles for birth.
- Have more energy.
- Be in a better mood.
- Lower your stress.
- Prevent too much weight gain.
- Ease leg cramps and backaches.
- Help with constipation.

Even a few minutes of stretching each day can make you feel better and stronger. Try things like swimming, housecleaning, yard work or a combination of these activities.

Try to exercise for 30 minutes every day. Drink plenty of water before and after you exercise. Stop exercising if you feel:

- Pain.
- Dizziness.
- Shortness of breath.
- Uterine cramps like when you get your period.
- Contractions (your stomach gets tight and hard).



## Yoga

You can take a yoga class or practice with a yoga video.



## Dancing

You can dance anywhere!



## Walking

Walk for 30 minutes a day. You can walk to the park, to the store or to the bus stop.

# Healthy Eating

Foods you need when you are pregnant:



## Bread, Rice and Cereal

**Eat 6–11 servings a day**

Have vitamins, minerals and energy you need to grow a healthy baby.



## Meats, Beans and Eggs

**Eat 3–4 servings a day**

Have protein that helps build your baby's brain, muscles, heart, lungs and other organs.



## Vegetables

**Eat 3–5 servings a day**

Have vitamins and minerals that keep you and your baby healthy.



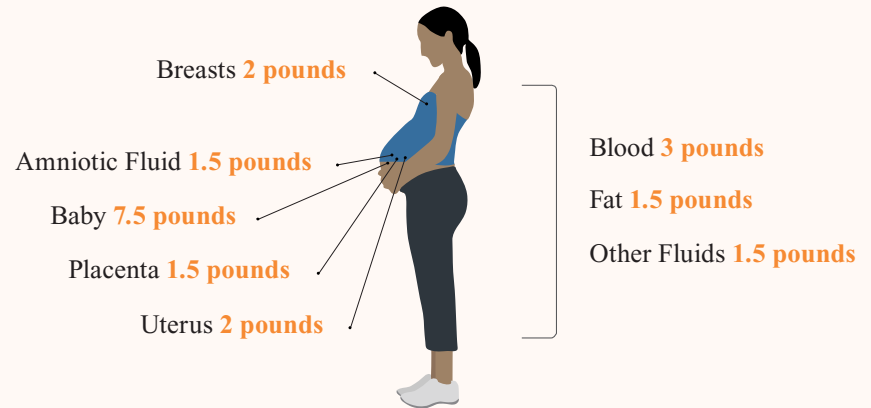
## Weight Gain During Pregnancy

Gain **28 to 40 pounds** if you are underweight.

Gain **25 to 35 pounds** if you are average weight.

Gain **15 to 25 pounds** if you are overweight.

Talk with your provider about the best weight gain for your body.



### Milk, Cheese and Yogurt

**Eat 3–4 servings a day**

Have calcium that helps build your baby's bones and teeth.



### Fruits

**Eat 2–4 servings a day**

Have vitamins and minerals that keep you and your baby healthy.

### Helpful Hints

- Water is good for you. Drink 8 or more glasses of fluid every day.
- Avoid foods like cookies, chips, french fries, donuts and soda. They fill you up but do not give you the vitamins and minerals you need to grow a healthy baby.
- Eat small servings of food every 2 to 3 hours. A small amount is 1 cup of cooked rice, 1 piece of fruit, 1 slice of cheese or a piece of meat the size of the palm of your hand.
- Get folic acid early in pregnancy from leafy green vegetables, beans, citrus fruits, whole grain breads and cereals. Folic acid lowers the chance of problems with your baby's spine.
- Eat food with iron such as red meat, leafy green vegetables, beans and cereal. Iron helps your blood carry oxygen to you and your baby.

# Problems during Pregnancy

## Depression while You Are Pregnant

Some women feel sad or depressed when they are pregnant. Maybe you felt this way before you were pregnant. Maybe this is the first time you have felt this way. You may wonder why you feel sad when others tell you that you should feel happy to be pregnant. Pregnancy is a time of change, and change can be stressful. Too much stress can make you feel depressed, worried or unsure.

### Some signs of depression include:

- Feeling sad.
- Sleeping all day or having trouble sleeping.
- Changes in eating (eating too much or too little).
- Feeling anxious or worried.
- Feeling grumpy or irritable.

It is not your fault that you are depressed. With help, you can feel better. Talk to your provider to learn more about treatment.

## Problems at Home

In some families, people hurt each other by hitting or using mean or hurtful words. Does this happen in your family? Being pregnant can make the hurting worse. Here are some ways to get help for yourself and your children:

- Talk with your provider.
- Call the National Domestic Violence Hotline: **800.799.SAFE (7233)**

## Warning Signs in Pregnancy

Call your clinic during office hours.  
After office hours call **617.414.2000** or the number given to you by your provider for:

- Very bad nausea with vomiting that won't go away.
- Pain or burning when you pass urine.
- Very bad stomach pain.
- Sharp blow or trauma to your stomach.
- Chills or fever greater than 100.4° F.
- Your baby is not moving as much as before.
- Very bad headache that won't go away.
- You feel dizzy.
- Your vision is blurry.
- Bleeding.

## Preterm Labor (labor before 37 weeks)

### Some signs may be:

- Contractions (your stomach gets hard) more than 4 times in an hour.
- Stomach cramps like when you get your period.
- Low, dull backache.
- Blood or fluid from your vagina.

# Making Love during Pregnancy

Your feelings about sex may change during pregnancy. You may find sex very exciting. Or you may not enjoy sex as much as before. You or your partner may worry sex will hurt your baby.

It may not be easy for you to talk with your partner about your feelings. Or you may feel like your partner will not understand. Pick a time to talk when you are not making love. Try new positions. Find other ways to please each other.

## **Here are some facts about sex when you are pregnant:**

- Gentle lovemaking will not hurt your baby.
- You can get an infection in your vagina from having sex with a partner who has HIV, hepatitis B & C, herpes, warts (HPV), chlamydia, gonorrhea or syphilis.
- Infections may cause problems for your baby.
- Infections in your vagina may cause your labor to begin too soon.
- Using a condom will lower your chance of infection.
- Sex with one faithful partner will lower your chance of infection.



# What to Expect at Prenatal Visits

## Why do I need prenatal visits?

Prenatal visits help you and your provider to:

- Make sure your baby is growing well.
- Check you for problems in pregnancy such as high blood pressure, diabetes, infections or anemia.
- Talk about questions or worries you may have.

## How often will I have prenatal visits?

Expect 1 prenatal visit a month until you are 7 months. Then you will have a visit every 2 weeks until the last month. You will have a visit every week in the last month. Your provider may ask you to come more often for any problems you may have.

## What happens at my first prenatal visit?

You will see a provider on your first visit. The provider may be a midwife, obstetrician, family medicine doctor or nurse practitioner. Expect your provider to:

- Ask questions about your health history.
- Check your weight, blood pressure, heart, lungs, thyroid and breasts.
- Check your uterus and cervix.
- Decide your baby's due date.

Your provider will also order some tests.

These might be:

- A Pap test to check for cancer of your cervix.
- A test for infections in your vagina.
- A blood test to check for anemia, your blood type and signs of infection.
- A urine test to check for protein, sugar or infection.
- A test for tuberculosis (an infection in your lungs).
- HIV counseling and the choice to take an HIV test.

## Will I have an ultrasound or other tests for my baby?

Your provider will talk to you about an ultrasound to check for problems in your baby. Your provider may ask you to talk with a genetic counselor. A genetic counselor will talk to you about the chance of your baby having a genetic problem like Down Syndrome.

## Here are some facts about some tests for your baby:

**Ultrasound:** An ultrasound uses sound waves to make a picture of your baby. Ultrasound can be used to check the:

- Age of your baby.
- Heartbeat.
- Growth of your baby's heart, brain, spine, kidneys and other organs.
- Position and size of your baby.

**First trimester or 3-month screen test:** You may have this test when you are in month 3. This test is an ultrasound and a blood test that tells the chance of some birth defects.

**Quadruple screen test:** The quadruple screen is a blood test. It looks at 4 substances in your blood that may be related to some genetic problems or problems with your baby's spine.

**Sickle cell test:** This is a blood test for you, and sometimes for the baby's father, to tell the chance of your baby having sickle cell disease. You can inherit (get it from your mother or father) sickle cell disease. Sickle cell disease is more common in people of African ancestry.

**Cystic fibrosis test:** This is a blood test for you, and sometimes for the baby's father, to tell the chance of your baby having cystic fibrosis. You can inherit (get it from your mother or father) cystic fibrosis. Cystic fibrosis is more common in people of Northern European ancestry.



## What other tests will I have?

### Tests at 6 months:

- Diabetes test or 1-hour gluco test. This is a blood test to check for diabetes you can get when you are pregnant.
- A blood test to check for anemia.

### Tests at 9 months:

- Group B Strep (GBS) test. GBS is bacteria (germ) in your vagina that can make your baby sick. Women with GBS need antibiotics (medicine) during labor to lessen the chance that the baby will get sick.
- Another HIV test.

# Your Growing Baby

## At 4 weeks

- Your baby is the size of a pea and the heart is beating.

## At 6 weeks

- Your baby's face, eyes, ears and mouth are forming.

## At 8 weeks

- Your baby is a little less than 1 inch long.

## At 12 weeks

- Your baby is about 2 ½ inches long and weighs about 1 ounce—about as much as a slice of cheese. You may hear your baby's heartbeat at your prenatal visit. The placenta is fully formed. The placenta carries oxygen and nutrients to the baby.

## At 16 weeks

- Your baby is about 5 inches long and now weighs 5 ounces or a little more than a quarter of a pound.

## At 20 weeks

- Your baby is about 6 inches long and weighs ½ to 1 pound. Your baby can suck its thumb. Your baby's eyes can open and close. Your baby can turn a full circle and kick.

## At 24 weeks

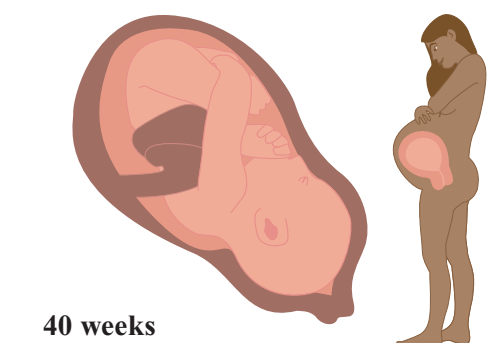
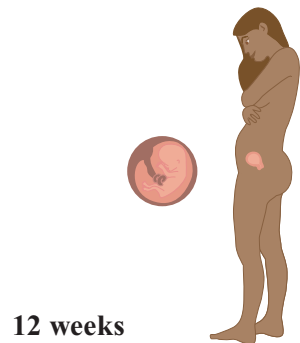
- Your baby is about 8 inches long and weighs 1 to 1 ½ pounds.

## At 32 weeks

- Your baby is about 10 inches long and weighs 2 to 3 ½ pounds.

## At 40 weeks

- Your baby is almost 19 inches long and weighs about 7 pounds.



## CHANGES IN YOUR BODY

# Months 1 to 3

Changes	What will I notice?	What can I do?
<b>Nausea (feeling like you want to vomit)</b>	You may wake up with nausea. Or you may have nausea all day. Notice smells more than before. Feel like you need to spit.	Eat some crackers or dry cereal before lifting your head off the pillow in the morning. Keep some food in your stomach at all times. Eat every 2 to 3 hours. Eat plain foods not greasy or fried foods. Drink fluids between meals instead of with your food.
<b>Breast changes</b>	Your breasts get larger and may feel heavy and tender. Your nipples get darker and bigger. Your breasts get ready to make milk. You may leak some early milk (colostrum).	Wear a bigger bra that gives you good support.
<b>Feeling tired</b>	You may feel very tired, like you want to sleep all day.	Take naps if you can. Go to bed earlier.
<b>Need to urinate (pee) more often</b>	Your growing uterus or womb presses on your bladder. You may feel like you need to urinate more often.	Avoid drinks with caffeine that make you urinate more. These drinks include coffee, tea and soda.
<b>Headaches</b>	Some women get headaches.	Drink 8 to 10 glasses of water each day. Eat healthy food every 2 to 3 hours.
<b>Mood changes</b>	You may have feelings that change quickly from happy and excited to unsure or worried.	Talk about your feelings. Decide what you need and ask for help.

# Birth Sisters<sup>SM</sup> Program

Birth Sisters are women from the communities around Boston who are specially trained to give you support during pregnancy, birth and after the baby comes.

They speak your language, listen to your needs and help you talk with your providers about your questions or concerns. They will:

- Meet with you before the baby comes.
- Stay with you through labor and birth.
- Support you at home after the baby comes.
- Help you with breastfeeding.

To learn more, call: **617.414.5168**

I love my Birth Sister. She has become my friend. She has been at the birth of my three children! I especially remember when I gave birth to my first child. My Birth Sister was making me laugh so much that I pushed my baby out while I was laughing very hard!



*\*Birth Sisters is a registered service mark of Urban Midwife Associates and is used with permission.*



# Childbirth Education

Come to a childbirth education class. Maybe this is your first baby. Maybe you have had a baby before. Anyone can come to this group. You can also bring your support person.

## **In the group you can:**

- Talk about being pregnant with other pregnant women.
- Learn about how your body works and how your baby is growing.
- Talk about birth. Learn the signs of labor and what to expect during birth.
- Learn about breastfeeding.
- Talk about parenting.
- Find support. You may need a safe place to ask questions or talk about worries.

To learn more, talk to your provider or call **617.414.3875**.

## **CenteringPregnancy® Program**

The CenteringPregnancy® Program at Boston Medical Center offers you prenatal visits in a group with 8 to 12 other pregnant women and a midwife or doctor. During your visits you will talk about how to have a healthy pregnancy, get to know other mothers and have your check-up. Women say they love CenteringPregnancy® because the group offers:

- Unhurried time with the midwife or doctor.
- Pre-scheduled visits for the whole pregnancy and no waiting the day of appointment.
- Support from other women going through the same changes at the same time.



## CHANGES IN YOUR BODY

## Months 4 to 6

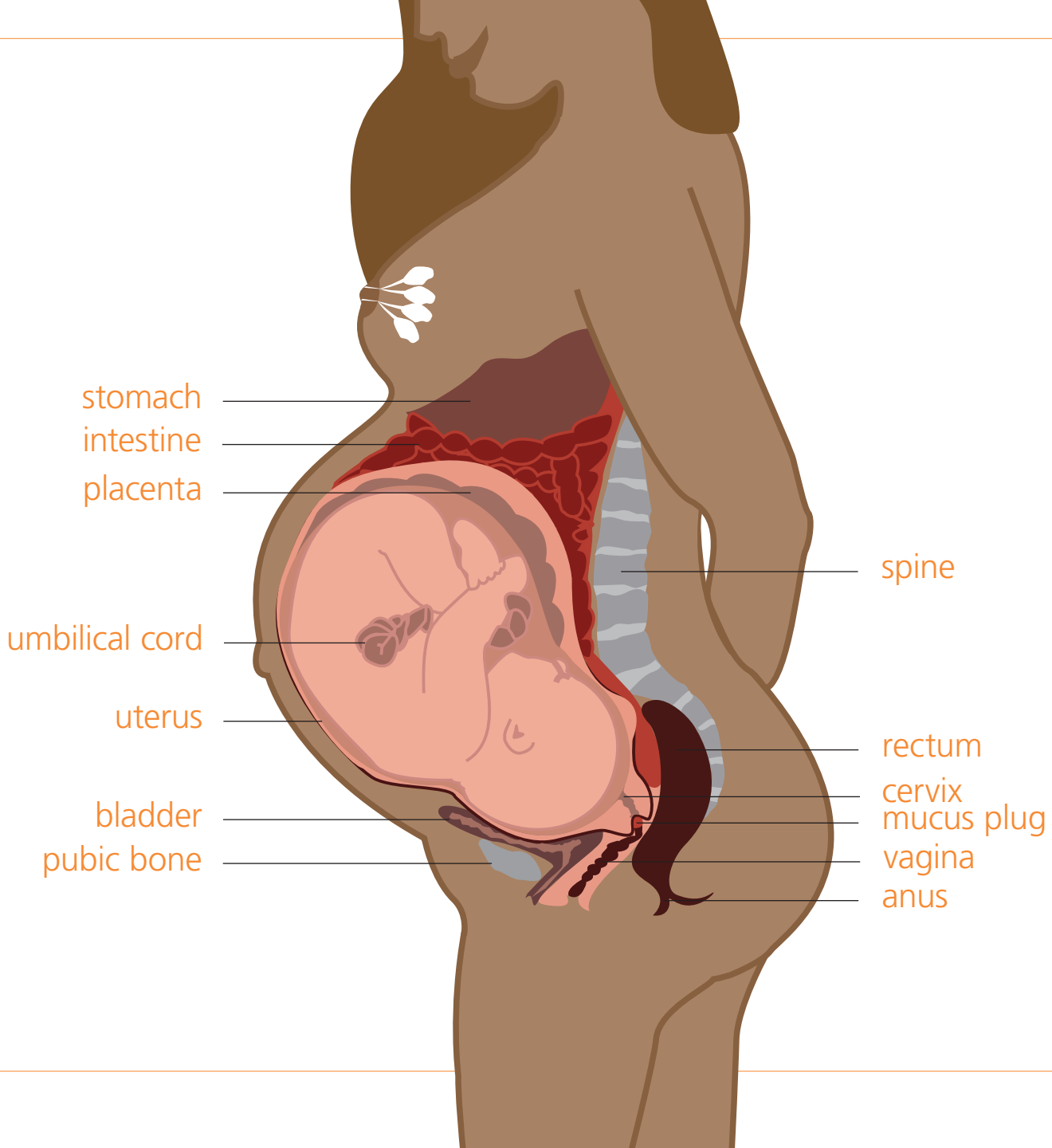
Changes	What will I notice?	What can I do?
<b>Your uterus grows bigger</b>	You start to look pregnant.	Wear loose-fitting clothes or maternity clothes. Avoid very high-heeled shoes as they can cause your lower back to hurt.
<b>You can feel your baby move</b>	You will feel your baby move at about month 5. This feels like a flutter at first. The moves will feel stronger as your baby grows.	Learn when your baby is most active and when your baby rests. Enjoy feeling your baby move!
<b>More energy, less nausea</b>	You may feel less tired and less nauseated.	Enjoy it!
<b>Skin changes</b>	You may have brown marks on your face or a dark line down your stomach. The skin around your nipples gets darker and bigger. You may get stretch marks on your stomach, hips and breasts. These are brown or dark red lines that come from your skin stretching.	Dark areas on your skin go away after pregnancy. Stretch marks get lighter after pregnancy.
<b>Stuffed-up nose</b>	Pregnancy hormones may make your nose feel stuffed up like you have a cold.	Use saline drops (Ocean <sup>®</sup> spray drops) to clear your nose.
<b>Bleeding gums</b>	Pregnancy hormones can make your gums bleed more easily.	Use a soft toothbrush and floss every day. Go to a dentist for a cleaning.

Changes	What will I notice?	What can I do?
<b>Heartburn</b>	Your growing baby and uterus put pressure on your stomach. Pregnancy hormones relax the opening to your stomach. Acid from your stomach can burn your esophagus (the tube from your mouth to your stomach).	Eat small meals every 2 to 3 hours. Sit up after meals. Eat plain food not spicy or greasy foods. Talk to your provider about medicine to help heartburn.
<b>Sharp pulling feeling on the side of your uterus</b>	You may feel a sharp cramp or pulling feeling on the side of your uterus. This is called round ligament pain. This happens when the ligaments on the sides of your uterus stretch.	Change your position. This might be sitting instead of standing or turning onto your other side if you are lying down.
<b>Constipation</b>	Pregnancy hormones slow digestion. This may cause constipation. Your stool (poop) or bowel movement may be hard and painful to pass. You may not pass stool as often as before.	Drink 8 to 10 glasses of water a day. Eat vegetables, fruit and whole grains to make softer stools.
<b>Hemorrhoids</b>	Many women get hemorrhoids during pregnancy. They feel sore and may bleed when you pass stool. They may itch as they heal.	Use witch hazel pads (Tucks®) or hemorrhoid cream prescribed by your provider.
<b>Feelings</b>	You may feel: <ul style="list-style-type: none"> <li>• Happy to feel less tired and less nauseated.</li> <li>• Excited to feel your baby move.</li> <li>• A sense of well-being.</li> </ul>	Enjoy this exciting time in your pregnancy!

## CHANGES IN YOUR BODY

## Months 7 to 9

Changes	What will I notice?	What can I do?
<b>Aches and pains</b>	You may have a backache, pain under the ribs, pain in the groin, pain over the pubic bone or leg cramps.	Change your position. Avoid standing for a long time. Sleep with a pillow behind your back and between your knees. Try stretching. Call your provider about any pain that does not go away.
<b>Braxton Hick's contractions</b>	You may feel your stomach get hard. This is not painful. These contractions do not come at regular times.	Rest when you need to. Drink 8 to 10 glasses of fluids a day. Call your provider for more than 4 Braxton Hick's contractions in an hour.
<b>Swollen feet, ankles and hands</b>	Your feet, ankles and hands may look swollen or puffy. Your shoes or rings may not fit.	Raise your legs when you sit or lie down. Drink 8 to 10 glasses of fluids a day. Swimming helps.
<b>Vaginal discharge</b>	You may have more white or yellow discharge. This is normal. Discharge keeps your vagina clean and healthy.	Wear cotton underwear. Do not wash inside your vagina or douche. Call your provider if you have discharge that is red, green, smelly or itchy.
<b>Varicose veins</b>	The veins in your legs may stick out or seem bigger.	Raise your legs when you sit or lie down. Try not to sit, stand or cross your legs for a long time. Ask your provider about support stockings.
<b>Feelings</b>	You may feel: <ul style="list-style-type: none"> <li>• Tired of being pregnant.</li> <li>• Excited and scared about birth.</li> <li>• Eager to get everything done.</li> </ul>	Talk to your support person about your feelings.



# Getting Ready for Your Baby

## Picking a provider for your baby

A provider for your baby may be a doctor (pediatrician or family medicine doctor) or a nurse practitioner. You will have many visits with your baby's provider. You may want to meet this person before your baby is born.

Pick a provider who:

- Answers your questions.
- Listens.
- Knows about breastfeeding.
- Has an office close to your home.

## Circumcision for boy babies

Circumcision removes the foreskin from the penis. Some people decide to do this. Others do not. Talk to your provider to learn more.

## Tests for new babies

**Hearing test:** Your baby will have a hearing test after birth. Talk more with your provider or your baby's provider about this test.

**Newborn screening test:** This is a blood test to check your baby for diseases that can be treated. To learn more, talk to your provider.

## Health care proxy

All people who go to a hospital are offered a health care proxy. This is a person who can decide about your care if you are not able to make decisions due to a physical or mental problem (such as being unconscious). Read the health care proxy form. Think about whom you trust to decide for you. You can fill out the form and give it to your provider.

## What to pack when you go to the hospital

- Lip balm and hair ties.
- Pajamas, robe, slippers.
- Several sets of spare underwear.
- A change of clothes to wear home.
- Comfortable support bra or nursing bra.
- Toothbrush, deodorant, soap and lotion.
- Clothes for your baby.
- A camera if you want to take pictures.
- A car seat.

## Ways to learn more:

### Websites:

[www.childbirthconnection.org](http://www.childbirthconnection.org)

[www.marchofdimes.com](http://www.marchofdimes.com)

[www.nchealthystart.org](http://www.nchealthystart.org)

[www.cfsan.fda.gov](http://www.cfsan.fda.gov) (for mercury in seafood)

### Help lines:

**Smoking Cessation:** 617.414.4847

**Depression:** 617.414.5245 or 866.472.1897

**Domestic Violence:** 800.799.SAFE (7233)

**Childbirth Education:** 617.414.3875

**Birth Sisters<sup>SM</sup> Program:** 617.414.5168

**Addiction and Pregnancy Helpline:**  
617.414.4165

## Breastfeeding help:

**BMC Warmline:** 617.414.MILK (6455)

[www.bmc.org/breastfeeding](http://www.bmc.org/breastfeeding)

**Birth Sisters<sup>SM</sup> Program:** 617.414.5168

**LaLeche League:** 877.4.LALECHE  
(877.452.5324) or [www.llusa.org](http://www.llusa.org)

**Nursing Mothers Council:** 617.244.5102

**Main WIC Office:** 800.WIC.1007

**Jewish Family and Children's Services**  
781.647.5327 extension 1968

**Department of Health and Human  
Services - Women's Health** 800.994.9662  
or [www.womenshealth.gov](http://www.womenshealth.gov)





# What Are the Signs of Labor?

Many changes happen in your body before labor begins.

## **You may have some of these signs before you go into labor:**

- A small amount of light pink or brownish mucus from your vagina.
- Your baby moves down into your pelvis. You may feel less pressure on your stomach and more pressure on your bladder.
- Diarrhea.
- Cramps or mild contractions. These feel like when you get your period.
- Lower back pain.
- Your bag of water may break. You might have a gush or a trickle of fluid from your vagina. (You can be in labor without breaking your water.)

## **When do I call my provider?**

Call your clinic during office hours. After office hours, call **617.414.2000** or the number your provider gives you if:

- Your bag of water breaks. Call even if you do not have contractions.
- You have regular, painful contractions.
- You have bleeding from your vagina.
- Your baby is not moving as much as before.

## **What to do about early labor:**

- During the night, stay in bed and rest as much as you can.
- During the day, go for a walk or talk to friends.
- Drink plenty of water and eat meals and snacks at regular times.
- For pain relief, try a warm bath or shower massage or a hot water bottle.
- Ask for help from your partner, Birth Sister or other support person.
- Call your provider before you come to the hospital.
- Leave valuables like jewelry at home.





## WHAT SHOULD I EXPECT

# When I Get to the Hospital?

### At the hospital

- In the Labor and Delivery Unit, a nurse will check your vital signs (your blood pressure and temperature), your baby's heartbeat and your contractions.
- A provider will see you. The provider may do a vaginal exam to check your cervix.
- You will move to a private birthing room if you stay in the hospital.
- The nurse will put an IV (intravenous needle) in your arm. You can get extra fluids and medicines through your IV if you need to during labor.
- The nurse will take some blood to check for anemia and your blood type.
- A provider will talk to you about the risks of labor and birth and ask you to sign a consent form to care for you during labor and birth.

### Is it really labor?

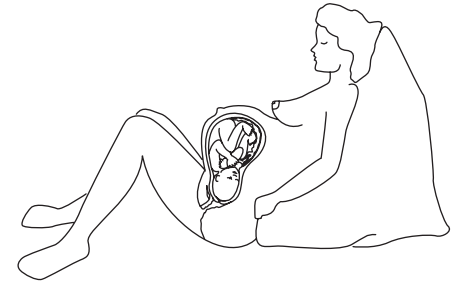
You may have contractions that do not open your cervix. Your provider may ask you to drink water and walk for 1 or 2 hours. Your contractions may stop or get stronger. The provider will check your cervix again and decide if you should stay or go home.

### Can I have visitors?

Support people are very important during labor. You may have up to 3 support people during your labor and birth. For safety reasons, your support person may be asked to leave the room during a procedure, like getting an epidural. You may have one support person for a cesarean birth if you are awake. Your support person will need to wait for you outside of the operating room if you are asleep for a cesarean birth. (To learn more, see *Cesarean Birth* on page 31.) Talk to your provider about having a sibling attend the birth before you are admitted in labor. Children must be with an adult at all times.



# What Happens to My Body in Labor and Birth?



## Early Labor (5–24 hours)

Rest, eat and drink lightly.  
Breathe slowly through  
contractions and relax.



**Cervix opens  
0–4 centimeters.**

## Active Labor (3–6 hours)

Change your position.  
This may be taking a shower,  
sitting in a chair or rocking  
on your hands and knees.



**Cervix opens  
4–8 centimeters.**

## Transition (10–60 minutes)

This is a very intense part  
of labor but does not last  
very long. You may need  
extra support during this  
part of labor.



**Cervix opens  
8–10 centimeters.**

## Pushing and Birth (5 minutes–3 hours)

Push in a comfortable position.  
Blow or pant when your  
baby's head is crowning.  
This helps to prevent tears  
to your vagina.



**Your baby moves out  
of your uterus, through  
your vagina and out  
of your body.**

## Birth of the Placenta (5 minutes–3 hours)

Contractions feel very mild.  
Your vagina may feel sore.  
You may be shaky and cold.

**Your placenta moves  
out of your uterus,  
through your vagina and  
out of your body.**

WHAT ARE MY CHOICES?

# Labor Pain without Medication

Each woman deals with her labor pain in her own way. Understanding how your body works and feeling relaxed, loved and supported will help you to deal with labor.

**You can also:**

- Breathe through your contractions.
- Take a shower to help with pain.
- Use warm packs or ice packs where it hurts.
- Walk if you can.
- Choose a support person who can help you through the contractions.
- Change your position when it is hard to cope.

**Positions that can help are...**



## WHAT ARE MY CHOICES?

# Labor Pain with Medication

Some women choose pain medication to deal with labor pain. There are two types of medications: narcotic medication and anesthesia medication.

### Narcotic medication

This is medication given through your IV or by shot. Narcotic medication helps to:

- Take away some of the pain.
- Make you feel more relaxed.
- Sleep in between contractions.

#### **Narcotic medication may:**

- Not take all of the pain away.
- Make your baby sleepy and have a harder time breathing if you get the medicine too close to giving birth.
- Cause an allergic reaction in some women. This is rare.

### Anesthesia medication

This is a medication given by an anesthesiologist (a doctor specially trained to give anesthesia medicine) to numb labor pain. During labor or a cesarean section, anesthesia can be given in 3 ways:

#### **1. Epidural anesthesia**

The anesthesiologist places a small catheter or tube in your back. Pain medication goes through the tube to numb your labor pain. You can get more pain medication through the tube as you need it during your labor. It takes about 20 minutes for the pain to stop. An epidural is the most common way to give anesthesia pain medication.

#### **2. Spinal anesthesia**

The anesthesiologist gives you a shot of pain medication in your back. Spinal anesthesia numbs labor pain in a short amount of time and is more often used for a cesarean section.

Epidural and spinal anesthesia help to:

- Numb most of your labor pain.
- Make you feel more relaxed.

Epidural and spinal anesthesia may:

- Slow the pace of your contractions and make pushing time longer.
- Cause a headache that can last several days.

#### **3. General anesthesia**

The anesthesiologist gives you medicine to make you go to sleep during surgery. You will have a tube down your throat to help you breathe while you are asleep. General anesthesia is not used very often.

# Problems during Birth

While most labor and births go normally, sometimes problems develop. This section will answer some of your questions about the most common problems.

Problem	What treatments will help?	What else should I know about the treatments?
<b>What if my labor needs to be induced?</b>	Misoprostol and oxytocin (pitocin). These are medicines to ripen your cervix and start contractions.	Misoprostol and pitocin can make contractions too strong. Your baby may have a hard time with strong contractions. Your provider can change your medicine should you or your baby have a problem.
<b>What if my labor slows down?</b>	Position changes, rest or extra fluid through your IV <b>Amniotomy.</b> This is when your provider breaks your bag of water with a small hook, like a crochet needle. This does not hurt. This may shorten your labor. <b>Oxytocin (pitocin).</b> This is a medication that can make contractions stronger. (To learn more, see <i>What if my labor needs to be induced?</i> ) <b>Intrauterine pressure catheter.</b> This is a small tube your provider puts inside your uterus. It shows how strong your contractions are. <b>Cesarean birth.</b> You may need a cesarean birth because other treatments did not help. (To learn more, see <i>Cesarean Birth</i> on page 31.)	
<b>What if there's a problem with my baby's heartbeat?</b>	Position changes. Extra oxygen for you to breathe. <b>Fetal Scalp Electrode (FSE).</b> This is a small monitor your provider puts on your baby's head. It gives more information about your baby's heartbeat.	

Problem	What treatments will help?	What else should I know about the treatments?
<b>What if my baby needs help coming out quickly?</b>	<p><b>Forceps or a vacuum cup.</b></p> <p><b>Episiotomy.</b> This is a small cut in your vagina. Most women do not need an episiotomy.</p> <p><b>Cesarean birth.</b> (To learn more, see <i>Cesarean Birth</i> on page 31.)</p>	<p>Most babies do fine with <b>forceps</b> or a <b>vacuum cup</b>. Forceps may bruise your baby’s skin or very rarely hurt a nerve in your baby’s face. The vacuum cup may cause swelling on your baby’s scalp or very rarely hurt blood vessels in your baby’s head. Forceps or a vacuum may increase the risk of hurting the muscles in your pelvis.</p> <p><b>Episiotomies</b> can increase the risk of deep tears in the vagina. Tears into the rectum can cause problems with holding gas or bowel movements.</p>
<b>What if I get a fever during labor?</b>	<p><b>Antibiotics.</b> An infection in your uterus may cause a fever. Your provider may give you antibiotics through your IV.</p>	<p>Your baby may also need IV antibiotics after birth.</p>
<b>What if my vagina tears during birth?</b>	<p>Sometimes your vagina can tear during birth. Your provider will check your vagina for tears after your baby is born. You may need stitches to heal the tear. A cold pack helps with soreness on the first day.</p>	
<b>What if I bleed a lot?</b>	<p><b>Massage.</b> Your provider may massage your uterus to help it to contract.</p> <p><b>Oxytocin and other medicines.</b> These medicines can stop your uterus from bleeding.</p> <p><b>Dilation and Curettage.</b> This is surgery to take out any tissue left in your uterus after birth. It can help to stop the bleeding. Dilation and Curettage may increase your risk of infection and damage to your uterus, bladder or intestines.</p> <p><b>Blood transfusion.</b> This is when you get new blood to replace the blood you lost.</p> <p><b>Hysterectomy.</b> This is when your doctor removes your uterus to stop the bleeding. Very few women need a hysterectomy.</p>	
<b>Shoulder dystocia</b>	<p>This is when the baby’s head is born but the shoulder gets stuck behind your pubic bone. This is an emergency. This happens in 2 out of every 100 births. Your provider may ask you to change your position. They might cut an episiotomy. Your baby’s collar bone could break during birth. Mostly this gets better quickly. Sometimes pressure on the baby’s shoulder can hurt a nerve in your baby’s arm. Mostly the nerve gets better with physical therapy. Although rare, brain damage or death can happen to a baby stuck for a long time.</p>	

WHAT SHOULD I KNOW ABOUT

# Cesarean Birth?

Cesarean birth means your doctor makes a cut through your skin and uterus to deliver your baby.

## **You may need to have a cesarean birth because:**

- Your baby has a problem in pregnancy or in labor.
- Your labor stops.
- You had a cesarean birth before.
- Your baby is not in the right position.
- You have a medical problem.

## **What problems can a cesarean birth cause?**

- Blood loss.
- Infection.
- Pain after cesarean.
- Scar tissue. This can make other abdominal surgeries harder to do.

## **Some rare problems might be:**

- Damage to your bladder, intestines or blood vessels.
- A small cut on your baby.
- Hysterectomy (surgery to remove your uterus).
- Death.

## **Can I have a vaginal birth after a cesarean birth?**

Maybe. Although rare, the scar on your uterus can tear in labor. You are more likely to tear if you have had more than one cesarean. Your midwife or doctor will talk to you about the chance of having problems in your next pregnancy.

Your provider will talk to you about cesarean birth and ask you to sign a consent form. Your support person can be with you in the operating room. After the cesarean, you, your support person and your baby stay in a recovery room. A nurse will take care of you.



# What Happens after I Give Birth?

Enjoy the special time after your baby is born. Your baby is awake for the first hour after birth. This is a good time to breastfeed your baby for the first time. Your provider, nurse or Birth Sister can help you and your baby to breastfeed. Expect to stay in your labor room for 1 to 2 hours after you give birth.

## **Your nurse will:**

- Check your baby's weight.
- Put erythromycin, an antibiotic ointment, in your baby's eyes. The ointment prevents infections that can pass from you to your baby during birth.
- Give your baby a shot of vitamin K. Vitamin K helps to prevent problems with bleeding in your baby.
- Check your bleeding and vital signs.
- To learn more, see *Your Stay at Boston Medical Center After Birth*.

## **Keeping your baby safe:**

- The nurse will put a security band around your baby's ankle. Taking your baby out of the postpartum area will set off an alarm. This is to keep your baby safe.
- You will have many visitors during your stay. These visitors may be nurses, doctors, midwives and other hospital workers. Anyone who comes into your room should wear a hospital ID badge.
- Your baby may go to the nursery during your stay. Make sure the person taking your baby to the nursery is wearing a hospital badge.
- Do not leave your baby alone. Ask your nurse for help as you need to.
- Do not leave your baby alone on an open surface, like the edge of your bed. Put your baby in the bassinet (plastic crib).



# Facts about Breastfeeding

Breast milk is healthier for babies than formula. Here are some reasons why:

## Why is breastfeeding good for my baby?

Babies who breastfeed have:

- Fewer ear infections, colds and diarrhea.
- Fewer allergies.
- Less chance of diabetes.
- Less chance of being overweight as children.
- Less tooth decay.
- Less chance of some cancers.

## Why is breastfeeding good for me?

For moms, breastfeeding helps to:

- Make your uterus smaller after birth.
- Lose pregnancy weight.
- Feel closer to your baby.
- Lower the chance of breast or ovarian cancer.
- Lower the chance of diabetes.

## How does breastfeeding work?

- You and your baby work together as a breastfeeding team.
- Your breasts start to make some milk while you are pregnant. This early milk is called colostrum.
- Your baby's sucking helps your body to release milk.

- Each time your baby takes milk from your breast, your body will make a little more milk.
- It is normal for your baby to breastfeed many times in the first few days.

## Why is colostrum good for newborn babies?

Colostrum is special milk for your newborn baby. You can see it by gently squeezing your nipple. It may be yellow, clear, dark or pink. Colostrum:

- Fills your baby's small stomach.
- Is easy to digest.
- Helps your baby to fight colds, diarrhea and other viruses.

## How will I know my baby is getting enough milk?

- Count the number of wet and stool (poopy) diapers your baby makes. Your baby should make 6 to 8 wet diapers and 3 stools a day after you go home. The stools should change to a yellow color when the baby is 3 or 4 days old.
- Count how many times your baby breastfeeds in 24 hours. Most new babies want to breastfeed 8 to 12 times in 24 hours. Your baby has a small stomach for the first few days after birth. So lots of breastfeeding is normal.

- Watch and hear your baby swallow.
- Go to your baby's doctor visits for a weight check. Most babies lose some weight the first 2 to 3 days after birth. Your baby should be back to his or her birthweight by 2 weeks after birth.
- Many new babies breastfeed for a long time, fall asleep and wake a short time later wanting to feed again. Babies sometimes breastfeed 3 or 4 times in 2 hours. This is called cluster feeding. Babies may cluster feed during a growth spurt or in the early evening hours.

## What helps sore nipples?

- Sore nipples may come from your baby having only the nipple and not enough breast in her mouth. Ask for help to make sure your baby is in a good position.
- Ask your provider or lactation consultant (a person specially trained to help with breastfeeding) about treatments to help sore nipples.

## Babies who cannot breastfeed right after birth

Some babies cannot breastfeed after birth. The baby may be born too early or may need special care. Some babies need more time to learn how to breastfeed well. You can use a breast pump to

remove milk from your breast. You can give this milk to your baby or store it for later. Ask your nurse for more help.

### **Can I breastfeed and bottle feed my baby?**

The more time you wait to give your baby a bottle, the more time your baby has to learn to breastfeed. Waiting 4 weeks to give your baby a bottle helps:

- Build your milk supply.
- Teach your baby to breastfeed.
- Prevent sore nipples.

### **Can I breastfeed my baby when I go back to work or school?**

Yes, you can! You can pump and store your milk for when you are away.

### **Can I breastfeed and take birth control pills or other medicines?**

Many medications and some birth control pills are safe to take. Talk to your provider first. The pharmacy at Boston Medical Center can tell you what medications are safe for breastfeeding.

### **Can I breastfeed and drink alcohol?**

- 1 drink or fewer each day does not seem to hurt your baby.
- Drinking a lot of alcohol every day (2 drinks or more) may hurt your baby's growth over time.

### **Can I breastfeed and smoke?**

Smoking can cause many health problems for you and the people who breathe your smoke. You and your family will be healthier if you quit or cut down. Some women cannot stop smoking when they are breastfeeding. It is still healthier for your baby to breastfeed. Here are some tips to keep your baby as healthy as possible:

- Avoid smoking right before you breastfeed.
- Do not smoke around your baby.
- Do not let anyone smoke around your baby.

### **Can I breastfeed and give my baby a pacifier?**

A pacifier may make it harder for your baby to learn to breastfeed. Avoid a pacifier for the first 4 weeks.



# When You Leave the Hospital

- Plan to leave between 10 a.m. and noon on the day you go home.
- Have a car seat for your baby.
- Your nurse will make a visit time with your provider between 1 and 6 weeks after birth.
- Your nurse will make a visit time with your baby's provider about 1 week after birth.

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*My midwife or doctor*

---

*Telephone number*

---

*Visit date*

---

*My baby's doctor or nurse practitioner*

---

*Telephone number*

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*Visit date*





## TAKING CARE OF YOURSELF

## Changes in Your Body after Birth

Changes	What will I notice?	What helps?
<b>Feeling tired</b>	You may feel very tired after giving birth. This is not surprising. Giving birth is hard work. Your baby will also wake you every 1 to 3 hours to feed during the night.	Rest as much as you can. Sleep when your baby sleeps. Ask for help with housework and care of other children.
<b>Your breasts fill with milk</b>	Your breasts will fill with milk between days 2 and 4 after birth. Your breasts may get swollen, sore and hard.	Breastfeed your baby often. Cold packs and Tylenol® can help women who do not breastfeed.
<b>Your uterus gets smaller</b>	Your uterus contracts or tightens to get smaller. You may feel cramps like when you get your period. You may feel more cramps when you breastfeed.	Empty your bladder often. A full bladder may cause more cramps. Your provider can prescribe Tylenol or Motrin® to help with cramps.
<b>Sweating</b>	Sweating is your body's way of getting rid of extra fluid. You may notice sweating more at night.	Change your clothes or take a shower for comfort. Sweating goes away after a few days.
<b>Hemorrhoids</b>	Many women get hemorrhoids during pregnancy. They feel sore and may bleed when you pass stool. They may itch as they heal.	Use witch hazel pads (Tucks®) or hemorrhoid cream prescribed by your provider.

Changes	What will I notice?	What can I do?
<b>Bleeding (lochia)</b>	Bleeding from your vagina starts as a heavy red flow like your period. You may have a few small clots of blood. Bleeding gets lighter in color and lessens over a week. Expect bleeding to last from 2 to 8 weeks.	Wear thick sanitary pads. Avoid putting anything in your vagina until the bleeding stops (about 6 weeks). Call your provider if you soak more than 2 pads in an hour.
<b>Weight loss</b>	You may feel like you still look pregnant after you have your baby. For most women, it takes 6 months to a year to lose all of the pregnancy weight.	Exercise for 30 minutes most days of the week. Eat healthy foods.
<b>Constipation</b>	You may not pass stool for several days after giving birth. This is normal. You may also feel nervous about passing stool with stitches or a sore perineum (place between the opening of your vagina and your anus).	Drink lots of water and eat vegetables, fruit and whole grains to make soft stool. Support your perineum with a clean pad or folded toilet paper while you pass stool.
<b>Urinating</b>	For a day or so after giving birth, you may not feel the need to pass urine even when your bladder is full. Urinating may burn your perineum while it is healing.	Make sure to pass urine every 2 hours. Drink 8–10 glasses of water a day. Spray your perineum with water in a spray bottle while you are urinating.
<b>Sore perineum</b>	Your perineum (place between the opening of your vagina and your anus) may be swollen and sore. You may have stitches from a tear or an episiotomy.	Use a cold pack on your perineum on the first day. Take warm baths or sitz baths (a small tub of warm water) on the other days. Warm water helps to clean and heal the area. Ask your nurse for help with a sitz bath. Use a spray bottle to clean yourself after urinating or passing stool. Wash your perineum gently when you shower. Do not wash inside of your vagina. Use a mild soap like Dove®. Pat the area dry. Wear cotton underwear. Change your sanitary pad often. Your stitches will dissolve in 1–2 weeks.
<b>Sore muscles</b>	You may have sore muscles in your legs and back from giving birth. You may also feel a little achy all over.	This is normal. Heat or massage on the sore area can help. Avoid lifting anything heavier than your baby for 2 weeks. Talk to your provider about problems with walking or pain that does not go away after a few days.

# Your Body after a Cesarean/ Emotions after Birth

## What to Expect after a Cesarean Birth

**You will go through many of the same changes in your body and your emotions as a woman who had a vaginal birth. But the first days after a cesarean may be hard. You may also:**

- Feel pain at the site of the surgery.
- Feel pain when you change position, cough or hold your baby.
- Have gas pains or become constipated.
- As the site heals, you will have a scar. Some women have numbness at the incision site. The skin may be itchy and dry.

### **To help with healing:**

- Avoid lifting anything heavier than your baby for 8 weeks after giving birth.
- Avoid driving your car for 2 weeks after giving birth.
- Take short walks around the hospital and your home every 2 to 3 hours for the first week after giving birth.
- Drink 8–10 glasses of water a day and empty your bladder every 2 hours.

## Blues and Postpartum Depression

**Your hormones change after giving birth. You may be tired from being awake with your baby at night. Caring for your new baby can be stressful. At times you may feel moody, sad or depressed.**

Blues often start on day 3 after giving birth. The blues may come and go for 10 days to 2 weeks.

Common signs of the blues:

- Crying without knowing why.
- Feeling grumpy.
- Worrying about your baby or being a good mother.
- Having trouble sleeping.

### **Postpartum depression**

Signs of postpartum depression may be the same as the blues. But the signs last longer than 2 weeks and get worse.

Common signs of postpartum depression:

- Feeling very sad or badly about yourself.
- Sleeping all day or having trouble sleeping.
- Not wanting to eat.
- Worrying so much that you cannot think of anything else.
- Not wanting to care for yourself or your baby.
- Having panic attacks (heart beats quickly, throat feels tight, sweaty palms, shortness of breath).
- Feeling like you want to hurt yourself or your baby.
- Rarely, seeing or hearing things that are not there (psychosis).

It is not your fault that you feel depressed. Changing hormones after giving birth cause depression in some women. Counseling and medicine can help postpartum depression. Talk to your provider to learn more about treatment. With help, you will feel better.



TAKING CARE OF YOURSELF

# Healthy Eating and Exercise

## Eating Healthy Food after Giving Birth

Eating healthy food after birth matters as much as when you were pregnant. Breastfeeding women need 500 calories more every day. Eat fruits, vegetables, whole grains and foods with protein and iron like meat, chicken and fish. Take your prenatal vitamins for extra iron.

## Exercise: What Can I Do? How Does it Help?

Ask your provider when you can start exercising. **Start slowly.** As little as 20 minutes 3 times a week makes you healthier. Work up to 30 minutes most days of the week. Here are some exercises you can do:

**Walking** Go for a walk every day! Take your baby with you. You will have more energy. Walking calms a crying baby. Babies need fresh air. Walking also helps a bad mood.

**Sit-ups** Sit-ups make your muscles stronger and your stomach flatter. Strong stomach muscles help your back to be strong.

**Kegel exercises** Squeeze the muscles inside your vagina. Can you stop the flow of urine? You have used the right muscles. Squeeze the muscles for 5–10 seconds. Relax. Do this exercise 10 times each day. Kegel exercises make the muscles in your pelvis stronger. You will have fewer problems with leaking urine.



# Family Planning

## Making Love after Giving Birth

You may or may not feel like having sex for a while after giving birth. Many women do not. This is normal. You may feel tired, out of shape or just not in the mood. When you do decide to have sex:

- Wait to have sex until your bleeding stops and your perineum heals.
- Use birth control. You can get pregnant 2 weeks after birth.
- Breastfeeding does not stop pregnancy.
- You can get pregnant without getting your period.
- Your vagina may be dry. Use a lubricant like Astroglide®.
- Talk with your partner about your feelings. Maybe you do not want to have sex but your partner does.
- Find other ways to be intimate. This may be hugging, touching or talking.

## Planning or Preventing Another Baby

Your body needs time to recover after having a baby. It may be healthier to wait 1 to 2 years to have another baby. Here are some questions to ask yourself and your partner:






- Do you want to have another baby?
- When do you want to have another baby?
- Is birth control important to you?
- What kind of birth control is right for you?



## TAKING CARE OF YOURSELF

# Methods of Birth Control

Here is some information about different methods of birth control. Talk to your provider about what type of birth control is right for you.

<b>Condom</b>	Fits over the man's penis. Catches sperm.	
<b>Depo-Provera®</b>	A shot of hormones you get every 3 months.	
<b>Implanon</b>	A small rod with hormones that goes under your skin. Works for 3 years.	
<b>Diaphragm</b>	Covers the cervix. Prevents sperm from going into your uterus.	
<b>Foam, Suppositories and Film</b>	Made of chemicals that kill sperm.	
<b>Intrauterine Device (IUD)</b>	A small device your provider puts in your uterus. Stops sperm from joining egg.	
<b>Pill, Patch and Vaginal Ring</b>	Hormones that stop ovaries from making an egg.	
<b>Natural Family Planning</b>	Learn fertile days. Avoid sex on fertile days.	
<b>Sterilization</b>	Makes you unable to have a baby. Permanent.	

# More Important Tips

## Emergency Contraception

### What do I do if I had sex and...

- The condom broke or slipped?
- I didn't start my pills on time?
- I missed my depo shot?
- I didn't use any birth control?

**You have the option to take emergency contraception, or Plan B. This is two pills of a hormone called progesterone. Here are some facts about Plan B:**

- The sooner you use it after you have sex, the better it works.
- Plan B is very safe.
- Some women may feel a little nausea (feeling like you need to vomit).
- Plan B will not end a pregnancy if you are already pregnant.
- Your provider can give you a prescription for Plan B.
- For women forced to have sex, the emergency room at any hospital in Massachusetts will give Plan B. It's the law.

## When to Call Your Provider

- Fever higher than 100.4° F.
- Pain when you pass urine.
- Heavy bleeding (soak more than 2 pads in 1 hour).
- Very bad stomach or back pain.
- Sore or red area on your breast or leg.
- You feel short of breath.
- You feel very dizzy or you faint.
- Bad-smelling bleeding from your vagina.
- You feel like you want to hurt yourself or your baby; or you feel like you cannot take care of yourself or your baby.

## Staying Healthy between Babies

The better your health, the better the health of your next baby. Before you get pregnant again, you can:

- Lose the weight you gained when you were pregnant by exercising and eating healthy foods.
- Get treatment for medical problems.
- Stop smoking.
- Stop using street drugs.
- Take folic acid.
- See your provider for regular check-ups, and as soon as you know you are pregnant again.

## TAKING CARE OF YOUR BABY

# The Look of Your New Baby

New babies have a special look. Your new baby may have:

**Vernix** A white, creamy coating that protects your baby's skin during pregnancy.

**Molding** A long, cone-shaped head that comes from fitting through your pelvis. This goes away after a day or so.

**Swollen nipples and genitals** This will go away after several days.

**Vaginal discharge or bleeding (girl babies)** This is normal and goes away by itself in a few days.

All babies also have:

**Fontanels** Two soft spaces on your baby's head. There is a small one on the back of the head and a larger one on the top of the head. The back fontanel closes when your baby is 6 to 8 weeks old. The top fontanel closes when your baby is 15 months old.

**Dark gray eyes** They will change to their final color in several months. Your baby can see about 12 inches.

The same sense of hearing and smelling as you. Loud noises will startle your baby.



## TAKING CARE OF YOUR BABY

# Baby Care: What Should I Know?

**Umbilical cord care** Your baby's umbilical cord will dry up and fall off in 1 to 2 weeks. Keep the area around the cord clean and dry. Fold the diaper below the cord. Check for redness or pus around the cord. Call your baby's provider if you see these signs.

**Bathing** You can bathe your baby after birth. Your nurse can help you with the first bath.

**Diaper care** Change your baby's diaper often to prevent diaper rash. Clean your baby's bottom with water or baby wipes. Wipe a girl baby from front to back so that stool does not get in her vagina. Use diaper cream for a rash.

**Circumcision care** Change your baby's diaper often. Use warm water to clean the penis. Let the penis dry. Put A+D® ointment on the tip of the penis each time you change the diaper. Expect the tip of the penis to be red. The penis may bleed a little bit.

**Clothing** Dress your baby as warmly as you dress yourself. Put a hat on your baby in cool weather. Do not overdress your baby. Babies can get hot.

**Feeding** To learn more about breastfeeding, see *Facts About Breastfeeding*, page 33.

## Comforting Your Crying Baby

Many new babies have a fussy time each day. Your baby may cry because he or she is tired, hungry, wet, in pain, sick or just wants to be held. You will learn about your baby's different cries. Here are some ways to comfort your baby:

- Feed your baby.
- Change your baby's diaper.
- Wrap or swaddle your baby in a blanket.
- Gently rock your baby in your arms, a chair or in a swing.
- Walk your baby in a sling, front carrier or stroller.
- Sing to your baby or repeat a sound like "shhh, shhh, shhh" again and again.

**Colic** Some babies have colic, crying hard for many hours. Often you cannot comfort a baby with colic. Most babies cry less after 3 or 4 months. Talk to your provider to learn more about colic and ways to cope with your baby's crying.

## Shaken Baby Syndrome

A crying baby can make you feel tense and angry. Do not shake your baby. This can hurt your baby's head, neck or spine. Put your baby down in the crib if you feel tense and angry. Ask someone to care for your baby while you take a break. Warn others about the danger of shaking a baby.

## Keeping Your Baby Safe

- Wash your hands and ask others to wash their hands before holding or touching your baby.
- Use a car seat every time you are in the car.
- Put your baby on his back to sleep to stop SIDS, Sudden Infant Death Syndrome.
- Support your baby's neck.
- Put your baby in the crib or bassinet when you are not holding her.
- Do not leave your baby alone on the changing table, couch or bed. Your baby could roll over and fall.
- Do not put pillows, stuffed animals or large blankets in your baby's crib. Your baby could suffocate.

## Siblings

Older children may need extra love when a new baby joins the family. Spend some time alone with your older child each day. Some ways you can do this are to read a book, take a walk, listen or play with your child.



## TAKING CARE OF YOUR BABY

# More Important Tips

### When to Call Your Baby's Provider

- You count fewer than 6 wet diapers in 24 hours.
- Your baby looks yellow or tanned.
- Your baby has rectal temperature greater than 100.4° F.
- Your baby vomits a whole feeding with force.
- The area around the umbilical cord is red, swollen and has yellow or green pus.
- Your baby will not eat or has diarrhea.
- Your baby seems more tired or more restless than before.
- Your baby is having a hard time breathing or turns blue.

### Circumcision Warning Signs

Some reasons to call your baby's provider might be:

- Swelling around the penis.
- Yellow or green pus.
- Bleeding more than the size of a quarter.
- Fever greater than 100.4° F.
- No wet diaper in 8 hours.

### Ways Your Support Person Can Help

Babies need many people to give them love. And mothers need many people to help. Maybe your support person is your partner, the father of the baby, a friend or a family member. As the support person, you can:

- Hold, bathe or change the baby.
- Take care of the baby while mom takes a nap.
- Help with housework, cooking and errands.
- Help with the other children in the family. Children need lots of love and support when a new baby joins the family.
- Support the breastfeeding mother. Tell her she is doing a good job. Get her a snack and a glass of water when she breastfeeds.
- Go to the baby's provider visits when you can. Ask questions.
- Be understanding. Having a new baby can be a stressful and tiring time.



# Glossary

**Amniotomy** Breaking the bag of water around your baby with a special plastic hook.

**Anemia** Low levels of hemoglobin (see *Hemoglobin*) in your red blood cells. Hemoglobin is the part of your red blood cells that carries oxygen to your body and your baby's body. Anemia can be caused by low iron or a disease.

**Anesthesiologist** A doctor specially trained to give anesthesia pain medication during surgery or when you are in labor.

**Antibiotics** Medicine to treat infection caused by bacteria.

**Areola** The pink or brown skin around your nipple.

**Braxton Hick's Contractions** Your uterus gets hard without pain.

**Cervix** The opening of your uterus or womb.

**Cesarean Birth** Surgery to remove your baby from your uterus. Also called C Section.

**Circumcision** Removing the foreskin from a baby boy's penis.

**Colostrum** Early milk in your breasts during pregnancy and at birth.

**Constipation** You are not able to pass stool at regular times. Your stool may be hard and painful to pass.

**Contraction** Your uterus gets tight. Contractions can be strong and regular or mild and not regular. Strong, regular contractions can open your cervix.

**Dilation & Curettage** Surgery to take out any tissue left in your uterus after giving birth. Also called D & C.

**Epidural Anesthesia** Anesthesia pain medication by an anesthesiologist through a tube or catheter in your back.

**Episiotomy** A small cut in your vagina and perineum (see *Perineum*) to help your baby to be born more quickly.

**Esophagus** The tube from your mouth to your stomach.

**Express Milk** To remove milk from your breast with your hand or a breast pump.

**Family Medicine Doctor** A doctor who gives care to all people. This includes prenatal, labor and delivery and newborn care.

**Fetal Scalp Electrode** A small monitor that attaches to your baby's head to measure the baby's heartbeat.

**Group B Strep or GBS** A type of bacteria or germ that can be found in your vagina.

**Heartburn** A burning feeling in your stomach caused by stomach acid in your esophagus (see *Esophagus*).

**Hemoglobin** The part of your red blood cells that carries oxygen to your body and your baby's body.

**Hemorrhoids** Swollen blood vessels around your anus that may bleed and feel sore.

**Hysterectomy** Surgery to remove your uterus.

**Intrauterine Pressure Catheter** A small tube put into your vagina and uterus to measure the strength of your contractions.

**Lochia** Bleeding from your vagina after giving birth.

**Mercury** A poisonous metal found in some fish.

**Nausea** Feeling like you want to vomit.

**Nurse-Midwife** A provider specially trained to give clinical care, support and education to women during normal pregnancy, labor and birth.

**Nutrients** Vitamins and minerals found in food.

**Obstetrician** A doctor specially trained to provide medical care during pregnancy and birth.

**Oxytocin (Pitocin)** Medicine given through your IV that causes contractions. Pitocin may be used to induce labor or to stop bleeding after birth.

**Pediatric Nurse Practitioner** A nurse with extra training in caring for babies and children.

**Pediatrician** A doctor who is specially trained to care for babies and children.

**Perineum** The tissue between the opening of your vagina and your anus.

**Placenta** A red, fleshy organ that grows with your baby inside your uterus. Oxygen and nutrients cross through the placenta to your baby by the umbilical cord (see *Umbilical Cord*).

**Provider** This may be a midwife, a doctor or a nurse practitioner.

**Round Ligament Pain** Sharp cramp or pulling feeling on the side of the uterus as the ligaments stretch.

**Secondhand Smoke** Smoke from another person smoking.

**Spinal Anesthesia** Anesthesia pain medication given by an anesthesiologist as a shot in your back.

**Toxoplasmosis** A virus found in cat stool. Getting sick with this virus could harm your baby.

**Ultrasound** A test that uses sound waves to make a picture of your baby.

**Umbilical Cord** Blood vessels that carry oxygen and nutrients from the placenta to your baby (see *placenta*).

**Uterus** Your womb or the part of your body where your baby grows.

**Varicose Veins** Blood vessels in your legs that get bigger and stick out.

**Vernix** White creamy coating on your baby's skin.

**Women's Health Nurse Practitioner** A nurse with extra training to give clinical care, support and education to pregnant and non-pregnant women.

The initial concept for this project was created by students at the Massachusetts College of Art and Design, under the direction of Associate Professor of Graphic Design Lisa Rosowsky.

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