Healthy Start, Grow Smart

Building a Bright Future
Through a Healthy Pregnancy
Healthy Start, Grow Smart

Building a Bright Future
Through a Healthy Pregnancy

Prepared by
U.S. Department of Health and Human Services
Centers for Medicare & Medicaid Services
This booklet was published by the U.S. Department of Health and Human Services’ Centers for Medicare & Medicaid Services (CMS) and is in the public domain. No permission is necessary to reproduce the booklet in whole or in part. When reproducing the booklet in whole or in part, please include the following citation: U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services. 2007. Healthy Start, Grow Smart: Building a Bright Future Through a Healthy Pregnancy. Baltimore, MD: U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services.

This publication can be downloaded from the CMS Web site at http://www.cms.hhs.gov/LowCostHealthInsFamChild/03_HSGSPamphlets.asp.

This booklet is intended to supplement the advice of your personal health care provider, whom you should consult about your individual medical situation.

Acknowledgments

The Healthy Start, Grow Smart booklet series is an informational outreach project of the U.S. Department of Health and Human Services’ CMS. The booklets provide health information (“best practices”) to consumers to improve the health of pregnant women and young children from before birth to age 35 months.

This series began as a White House initiative. The original booklets, spanning the period from birth to age 14 months, were adapted from information included in Take Time for Kids, a magazine published by the Texas Department of Health.

We would like to thank the following individuals for their work on this booklet: Jeanne Anastasi (writer), Ruth Barzel (editor), and Katrina Holt (project director/writer), all of Georgetown University, and Oliver Green (graphic designer) and Carol Adams Rivera (writer/content lead) of Health Communication Connection, L.L.C. We would also like to recognize the contributions of CMS staff, other health professionals, and, in particular, the consumers who reviewed the booklet and helped to ensure that the content and presentation were reader-friendly.
# Table of Contents

Introduction .................................................................................................................. 1  
Hot Topics .................................................................................................................... 2  
Pregnancy Weeks, Months, and Trimesters ............................................................... 3  
First Trimester: Weeks 1–13....................................................................................... 4  
Second Trimester: Weeks 14–27.................................................................................. 6  
Third Trimester: Weeks 28–40.................................................................................... 8  
At Your Health Care Provider’s Office........................................................................ 10  
When to Call Your Health Care Provider................................................................. 13  
Healthy Eating............................................................................................................. 14  
Weight Gain During Pregnancy.................................................................................. 16  
Taking Care of Your Teeth and Gums......................................................................... 17  
Being Physically Active.............................................................................................. 18  
Keeping Your Developing Baby Safe.......................................................................... 19  
Taking Care of Your Emotional Health....................................................................... 20  
Especially for Teens..................................................................................................... 21  
Becoming a Family....................................................................................................... 22  
Getting Ready to Bring Your Baby Home..................................................................... 23  
Labor and Delivery...................................................................................................... 25  
Taking Care of Yourself After Delivery...................................................................... 27  
Keeping Your Family Safe—Preparing for an Emergency.......................................... 29  
Getting Help—Resources for Families......................................................................... 31
Introduction

For all your dreams of your baby’s bright future,
For all that your baby will wish to become,
Choose what is best to protect and nurture,
The tiny, trusting being you’ll soon hold and welcome.

This booklet will help you take good care of yourself while you are pregnant. By taking good care of yourself, you will allow your baby to be born healthy. Your baby’s health before and at birth can affect his health for many years to come.

The pages of this booklet will let you know:
- The changes to expect in your body
- How your baby is developing
- Nutrition guidelines and physical activity tips
- How to take care of your emotional health
- What to expect during labor
- How to take care of yourself after delivery
- And much more

The booklet ends with a section on resources. These are places where you can get more help in case of a problem. Even difficult problems can often be solved if you talk with the right person. Never give up on finding help for yourself and your baby.
This booklet tells you many ways to keep yourself and your developing baby healthy. But here are the three most important things to do right now.

- Make your first prenatal appointment, if you haven’t already had one. If you miss your appointment, make another one as soon as possible.
- If you smoke, drink alcohol (including beer or wine), or use drugs, stop now. If you need help stopping, call your health care provider. Also see “Getting Help—Resources for Families” in this booklet.
- Start taking a prenatal vitamin every day, if you aren’t already taking one. You can take any brand of prenatal vitamin available at a drug store or grocery store.
Pregnancy usually lasts for around 40 weeks, the same as about 9 months. The 40 weeks are counted beginning with the first day of your last menstrual period.

It can be confusing to think of 40 weeks divided into 9 months. You might think, shouldn’t 40 weeks be 10 months? But most months are actually a little longer than 4 weeks. So that is how 40 weeks can fit in 9 months.

Your health care provider will usually talk about your pregnancy using weeks. Keeping track of weeks gives the best idea of how your baby should be growing. Also, some tests can or should be done during certain weeks. Weeks are helpful when more exact time periods are needed.

Another way of talking about pregnancy is using trimesters. The 9 months of pregnancy are divided into three trimesters. Each trimester is 3 months long. Trimesters are used to describe changes that happen over a long period of time.

See the following pages for information on each trimester of pregnancy.
First Trimester: Weeks 1–13
Months 1–3

Your Body

In the first trimester of pregnancy, your body changes in many ways. Some of the changes you can expect are described below. But every woman is different, so you might notice only some of these changes.

The first signs of pregnancy include:

- Spotting, light bleeding, or no menstrual period.
- Breast soreness, tingling, and swelling. Your breasts will probably be tender and feel fuller.
- Frequent urination. You may need to go to the bathroom more often.
- Fatigue. You may feel tired and need more sleep.
- Nausea (feeling sick). Nausea and vomiting can happen at any time of day. About 70 percent of pregnant women have nausea. It usually begins at around 6 weeks of pregnancy and usually ends by around 14 weeks.

Other common changes in the first trimester include:

- Nipple and areola changes. Your nipples may begin to stick out more. Your areolas (the circles of darker skin around your nipples) will probably get bigger.
- Changes in digestion. You may be constipated or have heartburn.
- Weight changes. You may gain or lose a few pounds.
- Mood changes. You might feel excited, sad, afraid, or more emotional than usual.
- Sleep changes. You might have a hard time sleeping. You may have unusual dreams.

Your body is also:

- Making a lot more blood and fluids.
- Growing the placenta (tissue that nourishes your baby and carries away waste) inside your uterus (womb).
Your Baby

During the first month of pregnancy (counting from the first day of your last menstrual period):

- The egg released by one of your ovaries combines with a single sperm. The fertilized egg divides many times to form a ball of cells. The ball of cells buries itself in the lining of your uterus.
- Some cells grow to become your baby. Other cells become the placenta. The umbilical cord (connection between baby and placenta) starts to form.
- Your baby’s brain, eyes, spinal cord, arms, legs, and lungs begin to develop.
- Your baby’s heart begins to pump.
- Your baby grows to be around $\frac{1}{4}$ inch long.

During the second month, your baby’s:

- Heartbeat can be seen and heard through ultrasound.
- Eyelids form.
- Major organs all begin to develop.
- Ears begin to develop.
- Fingers and toes form.
- Movements begin.
- Length grows to around 1 inch.

During the third month, your baby’s:

- Face becomes well formed.
- Bones and muscles grow.
- Fingernails and toenails begin to develop.
- Genitals (sex organs) look either male or female.
- Movements grow stronger.
- Length grows to around $3\frac{1}{2}$ inches.
- Weight reaches around 1 ounce.
Second Trimester: Weeks 14–27
Months 4–6

Your Body

You will probably feel better in your second trimester. You can expect:

- Less fatigue.
- Fewer trips to the bathroom.

The most exciting change may be:

- Feeling your baby move! You might first notice your baby kicking between 18 and 20 weeks. Some women notice this earlier or later. The first kicks feel like flutters or bubbles.

Other changes in the second trimester include:

- Looking pregnant. People will probably start noticing your growing belly.
- Breast changes. Breast soreness usually goes away by the beginning of the second trimester. But your breasts will keep growing and feeling heavier. As your breasts get ready for breastfeeding, a yellowish fluid (colostrum) may leak out.
- Weight gain. You will probably gain about a pound a week.
- False labor. Beginning as early as week 22, you might sometimes feel your uterus get tight and hard. This squeezing is called Braxton Hicks contractions or false labor. The contractions are short (around 30 seconds) and not regular. They are usually in your stomach, not your back. Changing your position, resting, or drinking water can help.
- Discomfort. You might have backaches, hemorrhoids (swollen veins around the rectum that itch or bleed), or pain from muscles or ligaments stretching.
- Skin changes. You may notice stretch marks, darker areas, or veins showing more under your skin.
Your Baby

During the fourth month, your baby:

- Can smile, frown, and swallow.
- Begins to see light through his closed eyes. Starts to hear sounds.
- Grows some hair on his head, plus eyebrows and eyelashes. He also grows fine hair all over his skin.
- Begins to practice breathing and may have hiccups.
- May be recognized as a boy or girl on ultrasound.
- Grows to be around 6 inches and 5 ounces.

During the fifth month, your baby:

- Is very active.
- Can hear your voice and other sounds around you.
- Has a good sense of touch. She may feel her face or other parts of her body.
- Can suck her thumb and has taste buds.
- Forms a thick white coating that protects her skin.
- Sleeps and wakes.
- Grows to be around 10 inches and 1 pound.

During the sixth month, your baby:

- Has a lot of brain growth and changes.
- May recognize your voice.
- Starts to form more fat underneath his skin. The layers of fat will make his wrinkled skin look smoother.
- Has 20 tiny teeth inside his gums.
- Begins to make the substance that will allow his lungs to fill with air.
- Grows to be around 12 inches and 2 pounds.
Third Trimester: Weeks 28–40
Months 7–9

Your Body

In the third trimester, you may be less comfortable as you and your baby keep growing. In this trimester, you can expect:

- Fatigue. Sleeping is more difficult. Don’t sleep on your back. Sleeping on your left side is best.
- More weight gain. You will probably continue to gain about a pound a week. But in the last few weeks, you might lose a couple of pounds.
- More pressure on your bladder. You may go to the bathroom more often. You may leak urine when you sneeze, laugh, or cough.
- Shortness of breath. Your baby takes up more room inside you.
- Swelling. Your hands, feet, legs, or face may swell. If swelling happens suddenly, call your health care provider right away. Sudden swelling can be a sign of preeclampsia (a serious disorder that causes high blood pressure and swelling).
- Breast changes. Your breasts may be bigger. A yellowish fluid (colostrum) may leak out. But not leaking colostrum is normal, too. You will be able to breastfeed even if your breasts are not leaking colostrum.
- Discomfort. You might have backaches, hemorrhoids, heartburn, or constipation.

As you get close to your due date:

- Your baby may drop lower in your pelvis, making it easier for you to breathe.
- Braxton Hicks contractions will probably be more common and may feel stronger.
- You will probably notice more mucus from your vagina.
- Your cervix (opening at bottom of uterus) will probably begin to dilate (open). You may feel brief pains in your vagina.
Your Baby

During the seventh month, your baby:

- Continues to gain weight.
- Has much more brain growth.
- Opens and closes her eyes.
- Can turn her head from side to side.
- Starts to lose the fine hair covering her body.
- Grows to be around 14 inches and 4 pounds.

During the eighth month, your baby:

- May not kick as hard, since he has less room in your uterus. But you should still feel him move at least 10 times every 2 hours.
- Gains weight quickly and has a rounder face.
- Has lost almost all the hair covering his body. Some hair may remain on his back and shoulders, but it will fall out after birth.
- Will probably turn head-down in your uterus.
- Grows to be around 18 inches and 6 pounds.

During the ninth month, your baby:

- Has enough fat to look plump and healthy. She begins to gain weight more slowly.
- May have a full head of hair.
- Loses most of the white coating over her skin.
- Is considered full term beginning at 37 weeks from the first day of your last menstrual period. She is ready to be born!
- Grows to be around 20 inches and more than 7 pounds on average. Weighing between 6 and 9 pounds at birth is common.
As soon as you think you might be pregnant, make an appointment with your health care provider. Your provider may be a physician, a nurse practitioner, or a certified nurse-midwife. Getting prenatal care early is the best way to have a healthy pregnancy and delivery. Your health care provider will let you know when to come in for prenatal visits.

- Write down dates and times of your prenatal visits. Ask what to expect at each visit (like special tests).
- Go to all your prenatal visits. If you miss one, make another appointment right away, and be sure to keep the appointment.
- Share any questions or concerns with your health care provider. Write them down ahead of time.
- Make sure you understand the answers to your questions. Bring along your baby’s father or someone else you trust.
- Discuss where your baby will be born. Arrange to tour the hospital or birthing center.
- Ask about prenatal, childbirth, and baby care classes at your hospital or birthing center. Classes may be offered free or at a low cost.
- Ask about other health care providers in the office. Will others provide some of your prenatal care or assist with labor and delivery?
- Ask for an after-hours or emergency phone number in case of a sudden problem.
- Ask for handouts or other information on pregnancy, childbirth, and parenting.
**First Visit**

If you know the date of your last menstrual period, bring it to the visit. If you are switching to a new health care provider, bring copies of all your records. Bring any medicines you are taking.

Your first visit will most likely include the following:

- A review of your medical and family history.
- A complete physical exam, including a pelvic exam.
- A Pap test, if you have not had one in a while. Cells are taken from the cervix to be tested for cancer.
- A pregnancy test (urine and/or blood) to confirm your pregnancy.
- A check for sugar, protein, or signs of infection in your urine.
- A test to find out your blood type.
- A test for anemia (low iron in the blood).
- Tests (or an offer of tests) for sexually transmitted diseases (STDs). STDs include HIV/AIDS, hepatitis B, syphilis, chlamydia, and gonorrhea.
- Tests to see if you are immune to (can fight off) illnesses like German measles.
- An ultrasound, if your provider recommends one.
- An estimate of your due date.

**Every Visit**

At each visit, your weight and blood pressure will be checked. You may have a physical exam. You will probably have a urine test for sugar, protein, and infection, just to make sure there are no problems.

**Special Visits**

At some visits, special checks or tests may be done.

- Weeks 11 to 13. Your health care provider will offer you first trimester screening. Screening will let you know the chances that your baby has a birth defect. A blood test and possibly an ultrasound will be used. If the chances of a problem are high, you can ask for genetic testing, which allows you to find out for sure. Genetic tests include chorionic villus sampling (CVS) and amniocentesis. Ask your health care provider about the chances of genetic tests causing miscarriage or other problems.
Weeks 15 to 20. Screening called a triple screen or quad screen can be done with a blood test. Having the test done between weeks 16 and 18 gives the most accurate result. Through this screening, you can learn the chances of your baby having a birth defect. If the chances of a problem are high, you can ask for amniocentesis. Most of the time, amniocentesis shows that the baby is fine.

Weeks 18 to 20. You will probably have an ultrasound. An ultrasound lets you see pictures of your baby on a screen. Your baby’s development will be checked. You might also find out if your baby looks more like a boy or a girl. If you don’t want to know, just say so.

Weeks 24 to 28. You will have a glucose tolerance test (check of blood sugar levels) to screen for gestational (pregnancy) diabetes. If the screening test is positive, you will need to have more tests.

Weeks 35 to 37. You will be tested for group B strep (GBS), a common form of bacteria (germ) that could harm your baby. If the GBS test is positive, you will need antibiotics while you are in labor.
When to Call Your Health Care Provider

Call your health care provider right away if you have any of the following symptoms. Some symptoms are more serious depending on when they happen in your pregnancy.

- Bleeding or spotting from your vagina.
- Watery fluid leaking from your vagina.
- Stomach cramps or pain, other than a brief twinge.
- Fainting or feeling dizzy.
- A bad headache, or a headache that does not go away after you take medicine (remember that all medicines must be approved by your health care provider).
- A fever of 101° F or higher.
- Vomiting everything you eat or drink for 24 hours or more.
- Pain or burning when you urinate.
- Sudden swelling of your face, hands, or feet.

Signs of Preterm Labor

Preterm labor means going into labor too soon (before 37 weeks of pregnancy). Watch for these signs of preterm labor during your second and third trimesters. Call your health care provider right away if you have any of these signs.

- Contractions (hard squeezes of your uterus) that happen every 10 minutes or less.
- Bleeding or spotting from your vagina.
- Watery fluid leaking from your vagina.
- Stomach cramps, with or without diarrhea.
- A constant ache in your lower back.
- More frequent urination.
- Pressure in your pelvis or lower abdomen (belly).
- Feeling like your baby is pushing down hard.
Healthy Eating

The foods you eat during pregnancy affect the way your baby grows. They also affect the way you look and feel.

Because you are pregnant, you may need extra nutrients, such as iron, folic acid, and calcium. Ask your health care provider how to make sure you are getting all the nutrients you need.

Eating a variety of foods fortified with folic acid and foods rich in folate before and during pregnancy helps prevent having a baby with birth defects. Foods that may be fortified with folic acid include breads, cereals, pasta, and rice. Foods that are good sources of folate include asparagus, leafy green vegetables, melons, oranges, and strawberries. Eggs, beans, and sunflower seeds are good sources of folate, too.

Listeriosis is an illness caused by bacteria found in certain foods. When a pregnant woman is infected, the disease can cause problems for her baby, including miscarriage or stillbirth. To prevent listeriosis:

- Thoroughly cook raw food from animal sources, such as beef, pork, or poultry.
- Do not eat processed meats such as hot dogs, lunch meats, or deli meats, unless they are reheated until steaming hot.
- Keep uncooked meats separate from vegetables and from cooked foods and ready-to-eat foods.
- Wash raw vegetables thoroughly before eating.
- Avoid unpasteurized (raw) milk or foods made from unpasteurized milk.
- Do not eat soft cheeses such as feta, Brie, and Camembert, or blue-veined cheeses unless they have labels that clearly state they are made from pasteurized milk.
- Wash hands, knives, and cutting boards after handling uncooked foods.
- Eat perishable (fresh) and ready-to-eat foods as soon as possible after buying them.
My Pyramid

Foods from the following food groups provide nutrients to keep you healthy, especially when you are pregnant:

Grain Group
Any food made from wheat, rice, oats, cornmeal, barley, or another cereal grain is part of the grain group. Examples are bread, cereals, pasta, oatmeal, tortillas, and grits.

Vegetable Group
Any vegetable or 100 percent vegetable juice is part of the vegetable group. Vegetables may be raw, cooked, fresh, frozen, canned, or dried. Examples are beans, carrots, corn, lettuce, peas, potatoes, spinach, and tomatoes.

Fruit Group
Any fruit or 100 percent fruit juice is part of the fruit group. Fruits may be fresh, canned, frozen, or dried. Examples are bananas, berries, grapefruit, grapes, melons, oranges, and raisins.

Milk Group
All milk products and many foods made from milk are part of the milk group. Examples are fat-free or low-fat milk, yogurt, cheese, cottage cheese, and desserts (like pudding made with milk, or frozen yogurt).

Meat and Bean Group
All foods made from meat, poultry, fish, dry beans or peas, eggs, nuts, and seeds are part of the meat and bean group.

Oils
Consume oils that are liquid at room temperature, like the vegetable oils used in cooking (canola, corn, soybean, or sunflower oil). Foods that are mainly oil include mayonnaise, some salad dressings, and soft (tub or squeeze) margarine. To be healthy, you need to eat some oil (about 5 to 6 teaspoons per day). Limit your intake of solid fats, like butter and shortening, which are solid at room temperature.
Weight Gain During Pregnancy

Your diet is the main source of energy for your baby. That means you need to eat more healthy foods while you are pregnant. But, for your baby to grow and be healthy, you don’t need to eat much more than you normally do. About 300 calories more a day than you usually eat is all you need.

Following is a list of foods and the approximate number of calories in each:

- One medium banana: 100 calories
- Four ounces orange juice: 60 calories
- Eight ounces 1 percent milk: 100 calories
- One 3-ounce lean steak: 200 calories
- Two tablespoons peanut butter: 180 calories

To help you eat the right number of calories, look at food labels. They list the size of a serving, the number of servings in the container, and the number of calories per serving. When cooking at home, check the labels of ingredients.

Gaining the right amount of weight is an important part of a healthy pregnancy. The amount of weight you need to gain during pregnancy depends on whether you were underweight, overweight, or a healthy weight before pregnancy. For woman at a normal weight before pregnancy, a healthy weight gain is 25–35 pounds. Discuss your weight-gain goals with your health care provider.

How much weight should you gain in pregnancy?

<table>
<thead>
<tr>
<th>Weight Status</th>
<th>Weight Gain (pounds)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight</td>
<td>28–40</td>
</tr>
<tr>
<td>Normal weight</td>
<td>25–35</td>
</tr>
<tr>
<td>Overweight</td>
<td>15–25</td>
</tr>
<tr>
<td>Obese</td>
<td>15</td>
</tr>
<tr>
<td>Multiple births (twins)</td>
<td>35–45</td>
</tr>
</tbody>
</table>

The pattern or rate of weight gain is just as important as total weight gain. A normal weight gain is about 2–4 pounds during the first trimester and slightly less than 1 pound per week during the second and third trimesters. Discuss your rate of weight gain with your provider.
Taking Care of Your Teeth and Gums

Here are some ideas to help keep your teeth and gums healthy during pregnancy:

- Brush your teeth with fluoridated toothpaste at least twice a day. If possible, brush after every meal.
- Use a soft-bristled toothbrush, and brush gently. If your gums hurt after brushing, apply ice.
- If you can’t brush your teeth because of nausea, rinse your mouth with water or with an over-the-counter alcohol-free mouth rinse containing fluoride.
- If you vomit, brush your teeth afterwards. If you can’t brush, use a saltwater or baking soda rinse (1 teaspoon of salt or baking soda to 1 cup of water).
- Floss daily.
- Rinse every night with an over-the-counter alcohol-free mouth rinse containing fluoride.

Visit a dentist to get oral health care. It is safe to have oral health care during pregnancy. Don’t put it off until after you have the baby. Tell the dental office staff that you’re pregnant and how far along you are.

Hormonal changes that occur when you are pregnant may make your gums inflamed. Inflamed gums (gingivitis) may look red and puffy, feel tender, and bleed when you brush or floss. If gingivitis is not treated, it may lead to periodontal disease (gum disease).

You can also help keep your teeth and gums healthy during pregnancy by

- Eating healthy foods such as fruit, vegetables, grain products (especially whole grain), and dairy products.
- Cutting down on sweets such as candy, cookies, cake, and soft drinks (pop or soda).
- Drinking water throughout the day, especially between meals and snacks.
Being Physically Active

Being physically active is one of the healthiest things you can do when you’re pregnant. If you don’t have health problems, do 30 minutes or more of moderate activity per day on most or all days of the week. Don’t overdo it. Start slowly and then build up. Check with your health care provider about what physical activities are best for you throughout your pregnancy.

Physical activity can
- Improve muscle tone, strength, and blood flow.
- Help you sleep and give you more energy.
- Ease discomforts like backaches and constipation.
- Make you feel better.
- Help your body get ready for childbirth.
- Make it easier to return to your normal weight.

Choosing the Best Activities

Walking, swimming, dancing, and low-impact activities are safe for most pregnant women. Avoid activities that could cause a fall or an injury.

Try these tips:
- Choose activities you like.
- Stretch your muscles gently before and afterward. Avoid bouncy or jerky movements.
- Don’t exercise on your back after the first trimester. This can limit blood flow to your baby.
- Drink lots of water before, during, and after physical activities.
- Don’t get too tired or overheated.

Special Exercises

To strengthen muscles you’ll use during labor and delivery, simply tighten the muscles that control the flow of urine for 5 to 10 seconds, and then relax them for 5 to 10 seconds. Repeat sets of 10 or more, three times a day.
Keeping Your Developing Baby Safe

Avoiding the dangers below will help keep your developing baby safe. If you need help making changes, talk with your health care provider.

**Behaviors**

- Smoking. Smoking during pregnancy can cause premature birth, stillbirth, low birthweight (less than 5 1/2 pounds at birth), and birth defects.
- Drinking alcohol, including beer or wine. Drinking alcohol during pregnancy can cause low birthweight, mental disabilities, behavior problems, heart problems, and facial defects. No amount of alcohol is safe.
- Using drugs. Using drugs like marijuana and cocaine during pregnancy can cause miscarriage, premature birth, stillbirth, and birth defects.

**Household Products**

- Never use cleaning products labeled as ‘toxic.’ Do not mix ammonia and chlorine products, which produce toxic fumes
- Oil-based paints, or paint from before 1978 that may contain lead.
- Insect poisons and weed killers.
- Cat litter boxes and outdoor sandboxes or soil.

**Foods and Drinks**

- Food or drinks that contain caffeine. Caffeine is found in coffee, tea, some soft drinks, and chocolate. Small amounts of caffeine (one or two cups of coffee each day) may be safe.
- Foods or drinks that contain saccharin. Other artificial sweeteners like aspartame may be safe in small amounts.
- Don’t eat fish that are high in mercury (shark, swordfish, king mackerel, or tilefish).

**Medicines and Medical Treatment**

- Medicines not approved by your health care provider. Always check with your provider before taking any medicines. This includes prescription medicines, over-the-counter medicines, and herbal medicines.
- Treatment by health care providers who do not know you are pregnant.
Taking Care of Your Emotional Health

Being pregnant means big changes ahead. Changes in your body’s hormones during pregnancy can affect your moods and emotions. You may feel happy, scared, or overwhelmed—maybe all at the same time!

You’re also dealing with questions like:

- Will my baby be healthy?
- Will I be a good mother?
- How will having a baby change my relationship with my baby’s father, my family, and others?

Here are ways to boost your sense of well-being during pregnancy:

**Be Gentle with Yourself**

- Respect your feelings and your body. Rest when you feel tired.
- Ask for help when you need it. Don’t try to do everything yourself.
- Relax. Take slow deep breaths, listen to soft music, visit a friend, or go for a walk.
- Learn as much as you can. Take childbirth and baby care classes. Ask about local resources: WIC, health care, and social services.
- Cut costs. Borrow some baby things instead of buying them.

**Create a Circle of Support**

If you’re close to your baby’s father and to your family, you already have a circle of support. But if they can’t “be there” for you—or even if they can—it’s good to widen your circle. Reach out to family, friends, neighbors, and other pregnant women or new mothers. Share your feelings and concerns, and ask for support.

**If you’re feeling sad or down…**

If you’re often sad or anxious, you may be depressed. But you’re not alone. Depression can occur anytime during pregnancy or after giving birth. When a pregnant woman is depressed, her behavior can sometimes be harmful to herself or her baby. Tell your health care provider how you’re feeling, and get help right away.
Especially for Teens

Being a pregnant teen can feel exciting. Or it might feel scary or lonely. If you feel afraid or alone, there are people around you who can help. Tell your parents and the baby’s father as soon as you can. If you can’t tell them, talk with your school nurse, school counselor, health care provider, or other trusted adults. Many communities have programs for pregnant teens.

Taking Care of Yourself

To help you and your baby stay healthy:

- Go to all your prenatal visits. If you miss one, make another appointment right away and be sure to get there.
- Take prenatal vitamins every day. Eat healthy foods and limit fatty foods (French fries, chips) and sweets (candy, cookies, soft drinks)
- Don’t smoke, drink alcohol, or use drugs. If you need help to quit, ask for help.
- Avoid exposure to sexually transmitted diseases.
- Go to prenatal, childbirth, and baby care classes. Some may be free or low-cost.

Preventing Problems

Getting good prenatal care early can reduce your risk of having:

- Anemia (low iron in the blood). This can harm your developing baby.
- Pre-eclampsia. This serious disorder causes high blood pressure and swelling.
- A low-birthweight baby (born too small or less than $5^{1/2}$ pounds).
- A preterm baby (born too early or less than 37 weeks).

You and Your Baby’s Future

You have many choices to make. Talk with your parents or other trusted adults about what’s best for you and your baby. Ask your school counselor about services to help you stay in school.
Becoming a Family

Becoming a family is exciting! Try these tips to involve other family members:

Involving Your Baby’s Father

- Talk things over. You’re both wondering how pregnancy and parenting will affect your lives. Share your feelings. Try to meet each other’s needs.
- Go to prenatal visits together, if you can. Ask questions, learn what to expect, and share miracle moments like hearing the baby’s heartbeat together.
- Tour the hospital or birthing center together.

If You’re on Your Own

You can create your own “family” with friends, neighbors, and others. Even if your baby’s father isn’t around, he still has to pay child support. This is the law.

Involving Your Family

Families can provide lots of support and advice. Value their help, but follow your health care provider’s guidance on what’s best for you and your baby. Share what you learn with your family.

If you have other children:

- Take them to visit the hospital or birthing center nursery.
- Explain what will happen and who will take care of them when you give birth.
- Avoid making big changes (toilet training, crib to bed) around the time your baby is born.

Using Community Resources

Check out resources for families. From home visiting to help with relationships, most communities have programs that support families. Many churches, mosques, and synagogues offer help for pregnant women and their families.
Getting Ready to Bring Your Baby Home

Before you know it, you will be bringing your baby home. To prepare for this day, take classes in infant care and breastfeeding, or read about these topics. Also learn from family and friends. Basic baby items appear below.

Car seat. In all states, babies must ride in a rear-facing infant car seat whenever they are in a car. You may not even be allowed to take your baby from the hospital or birthing center if you don’t have a car seat.

Clothes. Choose baby clothes that are easy to put on and take off. Wash them before use. Using receiving blankets (small flannel blankets) for the first few weeks will help your baby feel warm and secure.

Bed. Your baby can sleep in a crib or bassinet. Crib slats should be no more than 2 3/8 inches apart. To help prevent sudden infant death syndrome (SIDS), always put your baby to sleep on his back. The mattress should be firm. Don’t use pillows. Use a sleep sack or lightweight blanket instead of a comforter or duvet. If you use a blanket, tuck it under the mattress to keep it from going any higher than your baby’s chest.

Breastfeeding or feeding supplies. Breastfeeding is the best way to feed your baby. (See “Benefits of Breastfeeding” on the following page.) You don’t need any special items to breastfeed, although you may find a nursing bra and breast pads helpful. If you’re not able to breastfeed due to medical or other reasons, you will need infant formula. You will also need bottles, nipples, and a bottle brush.

Diapering supplies. You can change diapers on a changing table or on a diaper pad on the floor. You will need diapers (newborn size), baby wipes, and diaper rash ointment. If you use cloth diapers, you will need plastic pants and diaper liners. Other helpful items include a diaper pail and a diaper bag.
**Bath and grooming supplies.** You can bathe your baby in a special infant tub. You can also use a sink lined with a towel. Useful supplies include sponges, soft washcloths and towels, mild baby shampoo and soap, baby lotion, and baby nail clippers.

**First aid kit.** The kit should include a baby thermometer, and an aspirator (rubber bulb) for clearing your baby’s nose.

**Stroller, sling, or carrier.** These make it easier to get around with your baby when you are walking.

---

**Benefits of Breastfeeding**

Breastfeeding is best for the health of both you and your baby. Breastmilk is the best food for babies. Breastfed babies get sick less often than formula-fed babies. Breastfed babies have fewer ear infections, less diarrhea, and fewer lung infections like pneumonia. They may also have less risk of sudden infant death syndrome (SIDS).

The benefits of breastfeeding are lasting. Children who were breastfed as babies may have lower risk of sudden infant death syndrome (SIDS), gastrointestinal infections, obesity, childhood leukemia (cancer), and diabetes. They may also do better on intelligence tests.

Breastfeeding helps mothers, too. Women who breastfeed have less risk of breast and ovarian cancer and of diabetes when they get older.

Breastfeeding is cheaper than formula feeding. It is quicker and easier than formula feeding once mother and baby know what to do. Breastfeeding creates a special bond between mother and baby.

Breastfeed your baby! Both you and your baby will be glad you did.

For more information and assistance with breastfeeding, contact La Leche League, the National Breastfeeding Helpline, or the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) (see “Getting Help—Resources for Families”).
Labor and Delivery

You’ve made it through 9 months of pregnancy, and your baby is finally ready to be born!

Getting Ready

- Take a childbirth class with your baby’s father or another “coach.”
- Pack your bag for the hospital or birthing center.
- If you have other children, plan who will care for them while you are delivering your baby and afterwards if needed.
- Ask your health care provider how to tell when labor has begun, when to call, and when you should go to the hospital or birthing center. You may be told to go to the hospital or birthing center when your contractions:
  - Are about 5 minutes apart, from the beginning of one contraction to another.
  - Last for 45 to 60 seconds.
  - Have been happening for at least 1 hour.

Vaginal Delivery

Vaginal labor and delivery happen in three stages. For first-time mothers, labor and delivery last an average of 14 hours.

First stage. Contractions dilate (open) your cervix to about 10 centimeters (4 inches) in diameter (across). Once your cervix is open wide enough, you will be ready to push your baby out. If you want medicine for pain, your health care provider will let you know your choices.

Second stage. Delivering (pushing out) your baby through your vagina. Your health care provider or hospital or birthing center staff will let you know when to push.

Third stage. Delivering the placenta.
**Cesarean Section**

You may need to have a cesarean section (C-section) rather than delivering your baby through your vagina. A C-section is a surgery to deliver your baby. A small incision (cut) is made in your lower abdomen and uterus, and your baby is lifted out.

**After Your Baby Is Born**

After your baby is born, enjoy your first special moments together. If you are planning to breastfeed, begin as soon as possible after birth.
Taking Care of Yourself After Delivery

Giving birth takes a lot of energy. Take good care of yourself as you begin to heal. Be sure to follow your health care provider’s advice. And continue the healthy habits you had during pregnancy—good health is a lifelong habit.

Caring for Your Body

- Eat healthy food and drink plenty of water. Continue taking vitamins.
- Rest as much as you can. Sleep when your baby sleeps.
- Expect vaginal bleeding or “flow” for 4 to 6 weeks. Use sanitary pads, not tampons. Change pads often.
- Clean your vagina and rectum (wipe front to back) whenever you use the bathroom or change pads. Use a squirt bottle with warm water, then pat dry with clean tissue. Wash your hands.
- Talk with your health care provider about birth control before you leave the hospital or birthing center.
- Delay having sex until vaginal bleeding has stopped. Allow time to heal.
- Have your postpartum (after-delivery) checkup at 6 weeks.

Call your health care provider right away if you have any of these symptoms:

- Heavy bright-red vaginal bleeding after the first week.
- Stitches that are painful, red, swollen, or leaking fluid.
- Pain or problems passing urine or having bowel movements.
- Swelling, pain, redness, or heat in one or both lower legs.
- Fever over 100.4° F.
- Swelling, pain, or hardness in your breasts.
Caring for Your Emotions

Feeling worn out, scared, or overwhelmed is common after giving birth. Many new mothers have the “baby blues” for a week or two. Here are ways to beat the baby blues:

- Give yourself time to learn how to love and care for your baby.
- Spend time with your baby’s father. Find ways to support each other.
- Stay close to family and friends. Share your feelings.
- Don’t do everything yourself. Ask family and friends for help with meals and chores.
- Do something you enjoy every day. Find a responsible adult to watch your baby while you go for a walk or to the store. Or bring your baby with you to visit a neighbor or to the park.
- Talk with other mothers. Join a support group.

When Sad or Anxious Feelings Seem Here to Stay

If the baby blues won’t go away or seem to get worse, you might have postpartum depression. This can happen any time in the first year. Tell your health care provider if you:

- Feel sad, hopeless, angry, or anxious.
- Cry a lot.
- Have trouble eating or sleeping.
- Feel worthless or guilty.
- Have trouble with simple choices and everyday tasks.
- Stay away from family and friends.
- Have headaches, chest pains, or a fast heartbeat.
- Worry about hurting yourself or your baby.

Depression can be treated with counseling, medicines, or both. It’s important to get help right away!
Hurricanes, floods, tornadoes, earthquakes, household fires, and other emergencies can affect anyone. Following a few simple steps can help you prepare your family for an emergency.

Contact your local emergency management office or local American Red Cross chapter. They can tell you what types of emergencies may occur and how to prepare.

They can also tell you how your community alerts its citizens to an emergency (for example, alarms or sirens or messages on TV and radio stations) and what to do if you hear alerts.

These are some basics that you should keep in your home at all times, in case of emergency:

- One gallon of water per person per day. Keep enough for 3 days.
- Canned or packaged food (for example, ready-to-eat canned meats, fruits, and vegetables, and canned juices). Choose foods that require no refrigeration or cooking and little or no water. Keep enough for 3 days.
- First-aid kit for your home and one for each car.
- Household items such as a battery-operated radio, a flashlight, extra batteries, candles, matches, toilet paper, diapers, soap, and a few toys for your child.

Household Emergency Plan Checklist

- Put emergency phone numbers by each phone.
- Check around the home for items that can move, fall, break, or cause a fire.
- Plan two ways to escape from each room.
- Find places in your home where you and your family will be safe in case of an emergency.
- Test your smoke alarms once a month. Remember to change the batteries when you change your clock.
Make two copies of important papers, and keep the originals in a safe deposit box. If you don’t have a safe deposit box, use a fireproof metal box or a waterproof plastic bag or box. Examples of important papers are:

- birth certificates
- passports
- other proofs of identity
- marriage certificates
- immunization records
- medical records

Take an American Red Cross first aid and CPR class.

Replace stored water and food every 6 months.

Decide where your family will meet or how you will contact each other if you can’t get home in an emergency. For example, you could meet at a family member’s house or leave a message with a friend. If your child is in child care, make sure your child care provider is included in your plan.
Getting Help—Resources for Families

**Adult Literacy**
For information about programs that teach adults how to read or write, study for the GED or other high school programs, or learn English, contact America’s Literacy Directory. Call (800) 228-8813, or go to www.literacydirectory.org.

**Alcohol and Drugs**
For information about alcohol abuse or drug treatment programs, contact the Substance Abuse and Mental Health Services Administration. Call 800-662-HELP (4357), or go to www.findtreatment.samhsa.gov.

**Birth Control**
For information on birth control, including how to use birth control and what types of birth control are available, contact the National Women’s Health Information Center. Call (800) 994-9662, or go to www.womenshealth.gov.

**Breastfeeding**
For information and assistance with breastfeeding, contact La Leche League International. Call (800) 525-3243, or go to www.lalecheleague.org. You can also contact the National Breastfeeding Helpline at (800) 994-9662, or go to www.womenshealth.gov/breastfeeding.

**Car Safety Seats**
For information about choosing and using a car safety seat or to get a referral to borrow a car safety seat, contact Safe Kids USA. Call (800) 441-1888, or go to www.usa.safekids.org/skbu/cps/index.html.

**Domestic Violence**
For help with domestic violence, contact the National Domestic Violence Hotline. Call (800) 799-SAFE (7233), or go to www.ndvh.org.

**Education**
For information about Early Head Start, a program that promotes healthy prenatal outcomes for pregnant women, contact the Early Head Start National Resource Center. Call (202) 638-1144, or go to www.ehsnrc.org.

**Emergency Planning**
For disaster planning information and relief services and lifesaving courses, contact the American Red Cross. To find your local American Red Cross chapter, call (800) HELP-NOW (435-7669), or go to www.redcross.org/where/where.html.
Food and Nutrition Programs
For nutrition counseling and vouchers for foods such as milk, cheese, juice, and cereal, contact the Special Supplemental Nutrition Program for Women, Infants and Children (WIC). To find the WIC office nearest you, call your health department, or go to www.fns.usda.gov/wic.

Lead Poisoning
For information about lead hazards and lead poisoning prevention, and for a list of state-certified (licensed) lead professionals for lead evaluation services, contact the National Lead Information Center. Call (800) 424-LEAD (5323), or go to www.epa.gov/lead.

Marriage Education
For information about the skills and knowledge helpful for a healthy marriage, contact the National Healthy Marriage Resource Center. Call (866) 916-4672, or go to www.healthymarriageinfo.org.

Oral Health
To find a dentist working in your community, contact the American Dental Association at (312) 440-2500, or go to www.ada.org/public/disclaimer.asp.

Perinatal and Postpartum Depression
For assistance locating resources to help you cope with mood disorders during or after pregnancy, contact Postpartum Support International. Call (800) 944-4773, or go to www.postpartum.net.

Poison Control
For the poison control center in your community, contact the American Association of Poison Control Centers. Call (800) 222-1222, or go to www.aapcc.org/findyour.htm.

Prenatal Care and Parenting
For information about prenatal care and parenting, contact the National Healthy Mothers, Healthy Babies Coalition. Call (703) 837-4792, or go to www.hmhb.org/family.html. You can also contact the National Women’s Health Information Center at (800) 994-9662, or go to www.4woman.gov/pregnancy/index.cfm.

Smoking
For help quitting smoking, contact the American Lung Association. Call (800) LUNGUSA (586-4872), or go to www.lungusa.org.