



COMMWELL HEALTH

WOMEN'S HEALTH SERVICES

**A COMPREHENSIVE
WOMEN'S HEALTH AND
PREGNANCY HANDBOOK**

WWW.COMMWELLHEALTH.ORG

1-877-WELL-ALL (935-5255)

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COMMWELL HEALTH MESSAGE



Congratulations

You are beginning a miraculous journey to the birth of your child!

At CommWell Health, we believe that the journey of pregnancy is best navigated as a collaborative “team effort”. We understand the significance of having a dedicated and compassionate healthcare team by your side, supporting you every step of the way as you prepare for the joyous arrival of your child. Our aim is not only to ensure a happy and healthy pregnancy but to also extend our care beyond the clinical walls. We firmly believe that the postpartum period is just as important as the prenatal phase, and our team will continue to be there for you. We strive to provide comprehensive and personalized support, empowering you to thrive in your new role as a parent while fostering the well-being of your growing family.

We are proud to provide a comprehensive range of clinical services tailored to meet the diverse needs of you and your child. Our offerings include an array of essential healthcare provisions, including pediatric care, women, infants, and children (WIC) services, primary care, dental care, and behavioral health services.

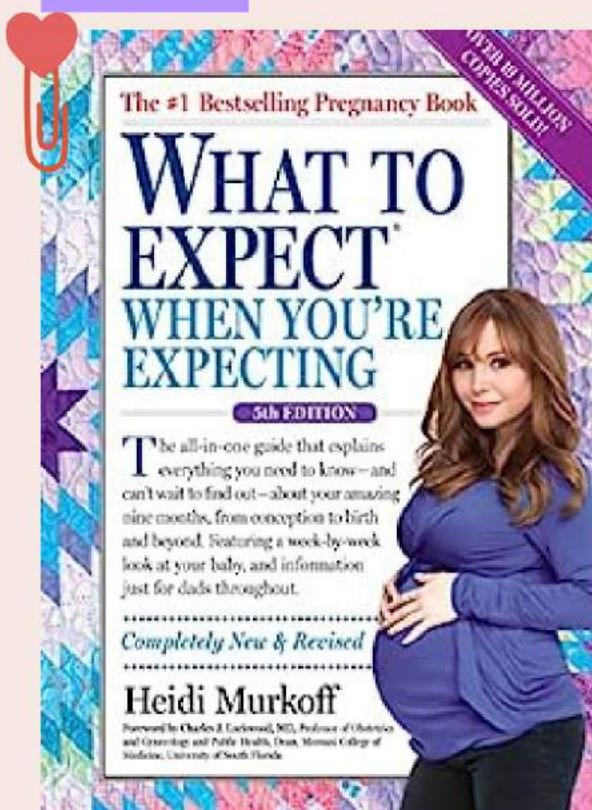
Should you have any questions or concerns, please do not hesitate to ask any member of our healthcare team.

We are here to serve you and your family!

Sincerely,

Your CommWell Health Obstetrics Health Team

SUGGESTED READINGS FOR EXPECTING PARENTS...



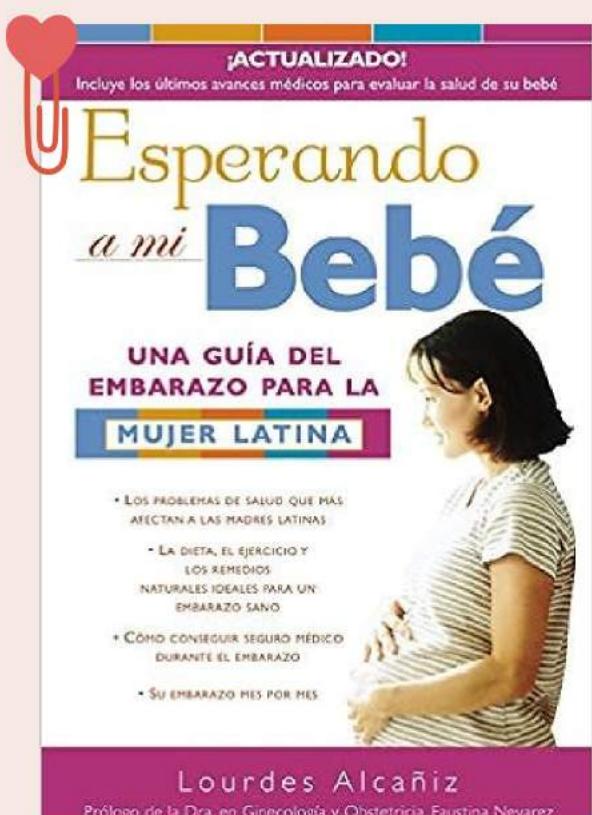
What to Expect When You're Expecting Paperback – Illustrated

May 31, 2016

by Heidi Murkoff (Author)

America's pregnancy bible answers all your baby questions.

- When can I take home a pregnancy test?
- How can I eat for two if I'm too queasy to eat for one?
- Can I keep up my spinning classes?
- Is fish safe to eat? And what's this I hear about soft cheese?
- Can I work until I deliver? What are my rights on the job?
- I'm blotchy and broken out—where's the glow?
- Should we do a gender reveal? What about a 4-D ultrasound?
- Will I know labor when I feel it?



Esperando a mi bebé / Waiting for Bebe: Una guía del embarazo para la mujer latina Paperback

Spanish Edition by Lourdes Alcañiz (Author)

- Esperando a mi bebé es la única guía que aborda las cuestiones específicas de las mujeres latinas embarazadas.
- El embarazo en nuestra cultura latina es un gran acontecimiento familiar, y por generaciones, madres y abuelas han impartido sus consejos a sus hijas.
- En él encontrará temas concretos, tanto fisiológicos como culturales, que afectan a las mujeres latinas durante el embarazo.

TIPS FOR A HEALTHY PREGNANCY



- **Keep ALL your appointments** with your maternity care team (these are sometimes referred to as prenatal appointments).



- **Eat a nutritionally balanced diet** while you are pregnant so your baby will grow.



- **Drink plenty of water**, it is recommended that you drink 8 glasses of water daily.



- **Remember to always take your prenatal vitamins** and folic acid as prescribed by your doctor.



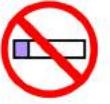
- **Exercise Regularly!** Low-impact exercise is best when pregnant. Try swimming, yoga, aerobic walking, and stretching.



- **Do NOT drink beer, wine, wine coolers, liquor/whiskey, or mixed alcoholic drinks.** Remember that drinking any alcohol when you are pregnant can be harmful to your baby.



- **Do NOT use any drugs** – even over-the-counter medications, unless recommended by your healthcare team. Make sure any doctor you see while you are pregnant understands you are expecting.



- **Do NOT smoke.** We understand that it is hard to quit smoking. However, when you are pregnant it is more important than ever not to smoke. When you smoke - your baby is smoking too.



- **Learn all that you can about having a baby and ask questions!** Knowledge gives you choices and options to help you take the best care of you and your baby!

MONTHLY PREGNANCY GUIDE

It is very important that you begin receiving care as soon as you think you are pregnant.

Keeping all of your appointments for maternity care throughout your pregnancy is the very best thing you can do to have a healthy baby.

Once it has been confirmed you are pregnant your care will begin!

1. During the first and second trimesters, your visits are scheduled once every 4 weeks until the end of the seven month of your pregnancy.
2. During the 8th month of pregnancy, your visits will be every 2 weeks.
3. During your 9th month, you will visit the care team every week until your baby is born.

Every visit to CommWell Health is a chance for you to ask questions about any medical tests you are offered, and discuss concerns or feelings about your pregnancy, or any symptoms you may be experiencing. Make a list of questions and items that you would like to discuss with your care team at the visit and bring it with you.

Remember we are here to help you have a happy and healthy baby!

*****Mental health support:** Most new moms experience postpartum "baby blues" after childbirth, which commonly include mood swings, crying spells, anxiety, and difficulty sleeping. Baby blues usually begin within the first 2 to 3 days after delivery and may last for up to two weeks. Some new moms experience a more severe, long-lasting form of depression known as postpartum depression. If you are experiencing any of these symptoms talk to your provider or midwife or you can contact our Behavioral Health department for your mental health at 1-877-935-5255.



YOUR FIRST MATERNITY CARE (PREGNATAL) VISIT

Your first visit is the most extensive of all the visits during your pregnancy. It is typically done during the first trimester of the pregnancy. You should plan for plenty of time to spend with the care team.

This visit will include:

- **A complete medical history of your health and your partner's health.** Our staff will ask many questions to obtain this history. Your care team must understand all health issues of both parents to give you the best care. If this is not your first pregnancy, it is important to bring all information about previous pregnancies and deliveries with you to this visit.
- **Estimate of your due date.** Please make note of the date of the first day of your last period. This date is used to estimate your "due date" - the approximate date that your baby will be born.
- **A complete physical** will be performed which may include an examination of your thyroid, breasts, and abdomen; listening to your heart and lungs; and an internal physical exam called a "pelvic exam".
- **Laboratory tests** include complete blood count, urinalysis, serology, blood type and RH factor, rubella titer, cultures for chlamydia and gonorrhea, Hepatitis surface antigen, varicella, vitamin D levels, syphilis, and HIV test (by consent).
- **Addressing any questions you have.** Such as the baby's sex. When it comes to questions about your baby's sex during pregnancy, it's essential to communicate openly with your care team. If you're curious about the sex of your baby, discussing this with your care team can help you understand your options. Some parents-to-be may choose to find out the gender through ultrasound or genetic testing, while others prefer to wait until birth for the surprise. Your healthcare provider can guide you on the different methods available and support your decision based on your preferences. Remember, the most important thing is that you feel comfortable and informed throughout the process.
- **A pap smear may be performed to screen for cervical cancer.**
- **WIC Program orientation and application.**

Additional appointments will be made during this visit so that you can plan for the visits.

THE FIRST TRIMESTER

Your Baby

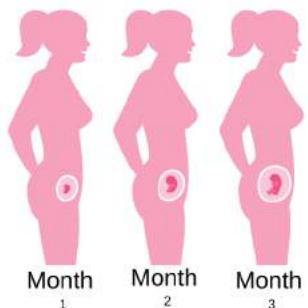
By the end of 8 weeks, the embryo is about 1 inch long. At six weeks the brain and other major organs are developing. The baby's eyes are formed, and the heart function is visible on ultrasound. By your 8th week of pregnancy, the muscles are developing, and the embryo is able to move!



By the end of 12 weeks, the baby will weigh about 1 ounce and be about 2 inches long. The heartbeat can be heard with an instrument called a doppler. Finger, toes, and fingernails are forming, and organs are developing.

Your Body

When you missed your first period, you were about 2 weeks pregnant. Your uterus is growing and changing during the first 12 weeks of pregnancy and your body begins to change. By the end of the first trimester, you may have gained 2 pounds or so and your breast size has probably increased. Your clothes may begin to feel tight.



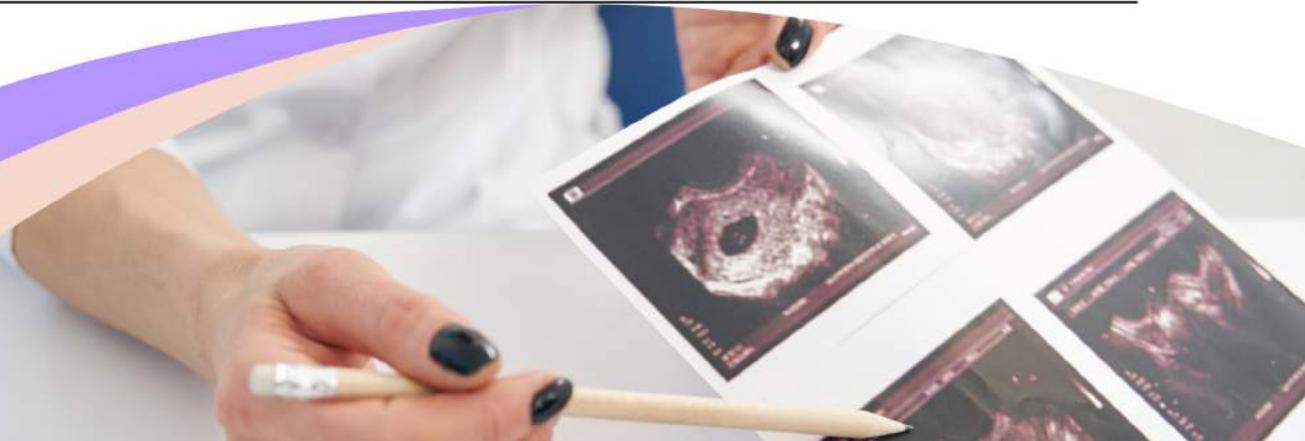
- Tissues around your vagina may become blue in color and you will notice a thicker, whiter vaginal discharge.
- You may be able to feel your uterus just above your pubic bone now. This is a very exciting time!

Common discomforts during the first trimester include:

- | | |
|---|---|
| <ul style="list-style-type: none"> • Fatigue • Nausea | <ul style="list-style-type: none"> • Frequent Urination • Sensitive Breasts |
|---|---|



Questions for your doctor:



THE SECOND TRIMESTER

The second trimester of pregnancy spans from week 13 to week 27 of your pregnancy. Your appointments will typically be every four weeks with your care team.

Visits during the second trimester are used to measure the progress of your pregnancy and to make sure that you and baby are healthy.

These visits (and later visits) usually include:

- Weight and blood pressure.
- Fetal heart tones and activity of the baby.
- Urine test for sugar and protein.
- Measurement of the uterus for size, growth, and position of the baby and amniotic fluid.
- Checking hands and feet for edema (swelling) and varicose veins.



Other Tests (as needed or indicated) during this trimester include:

- **Ultrasound:** Pictures taken with sound waves (not x-rays) of the baby to show how your baby is growing (ultrasounds are usually completed during the 3rd trimester but may be ordered during the 2nd trimester if needed).
- **Quad Marker Screen (AFP):** This test predicts the likelihood of certain problems, such as Down Syndrome, occurring with pregnancy.
- **Glucose Screening (GTT):** This test measures the levels of blood sugars and insulin to check for gestational diabetes.
- **HIV & Syphilis Tests:** This screening is repeated during this trimester for the safety of the mother and the baby.
- **Amniocentesis:** This is a test sometimes conducted - but not always. The fluid in which your baby is growing is tested to detect genetic disorders like Down Syndrome. This test is usually done between the 14th and 16th week of pregnancy.

Questions for your doctor:



THE THIRD TRIMESTER

Congratulations!

You have reached the home stretch of your pregnancy. Your visits during this trimester are more frequent. Please remember to keep each appointment!



Tests During the Third Trimester:

- **Non-Stress Test (NST):** Using a fetal monitor to evaluate the response of the fetal heart to movements. Normally, the heart rate will accelerate immediately following each movement. Two accelerations in a 20-minute period indicate a healthy baby.
- **Group Beta Strep:** The test for GBS is called a culture. It is done between 36 and 38 weeks of pregnancy. In this test, a swab is used to take a sample from the vagina and rectum. If the results show that GBS is present, most women will receive antibiotics through an intravenous (IV) line once labor has started. This is done to help protect the fetus from being infected. The best time for treatment is during labor.
- **Repeat Gonorrhea and Chlamydia Tests:** Pregnant women who remain at increased risk for chlamydial and gonococcal infection should be retested during the third trimester through a vaginal swab to try and prevent maternal postnatal complications and infection in the neonate. Pregnant women identified as having chlamydia and gonorrhea should be treated immediately.



HEALTH CONCERN DURING THIS TRIMESTER

Braxton Hicks Contractions- Before "true" Labor begins, you have "false" labor pains, also known as Braxton Hicks Contractions.

Questions for your doctor:



HEALTH CONCERNS TO BE AWARE DURING YOUR PREGNANCY

High Risk Pregnancy

01

Your pregnancy is called high-risk if you or your baby have an increased chance of a health problem.

02

Pregnancy Warning Signs

Some symptoms during pregnancy are to be expected, but others are cause for alarm. How do you know the difference?

03

Bed Rest - During Pregnancy

Most women are able to stay active throughout pregnancy, but each year, nearly 20% of pregnant women are prescribed bed rest for at least some part.

04

Morning Sickness

For many women, the toughest part of early pregnancy is morning sickness. Try not to worry – nausea is normal and there are several remedies for the nausea that your care team will help you with. Please talk to your care team about this problem and they will help you with a solution. Be sure to contact your care team if you are unable to hold down any fluids.

05

Bleeding During Pregnancy

Bleeding during your pregnancy is common, especially during the first trimester. There is usually no cause for alarm, but sometimes it can be a sign of something more serious. You should always contact your care team and have this evaluated as soon as possible.

06

Anemia

It is normal to have mild anemia when pregnant. However, more severe anemia from low iron or vitamin levels should be addressed and treated to ensure a healthy pregnancy.

07

Ectopic Pregnancy

An ectopic pregnancy is a life-threatening condition that requires emergency treatment. It occurs when the embryo implants in one of the fallopian tubes instead of implanting in the uterus. Typically, this causes severe pain and is diagnosed in early pregnancy.

08

Gestational Diabetes

This type of diabetes develops during pregnancy and is a relatively common complication of pregnancy. It is treatable with diet and medication to control blood sugars and insulin levels. It is important to remember that there is an increased chance of diabetes after pregnancy if you have gestational diabetes.

09

Heartburn

is an irritation of the esophagus that is caused by stomach acid and is a common part of pregnancy as the abdomen grows larger.

!!! DANGER SIGNS!!!

If you experience any of the following symptoms, you should call your care team immediately, call 911, or go to the nearest Emergency Department.

- **Severe lower abdominal pain that does NOT go away.**
- **Vaginal bleeding, like a period or heavier.**
- **Dimness or blurring of vision.**
- **Severe or continuous headaches.**
- **Chills or fever over 101 degrees.**
- **Persistent vomiting.**
- **Absence of fetal movement (baby doesn't move for a 24-hour period after 20 weeks gestation).**
- **Sudden or slow escape of fluid from the vagina.**



EARLY LABOR

Having contractions?

It is normal in your last few months. A contraction happens when your uterus (a rubbery, balloon-like organ around the baby) tightens like a fist and then relaxes. To see if your baby is coming, time your contractions.

See how often they happen, because you may be in labor when your contractions:

- Are regular, or evenly spaced apart.
- Happen more than five times an hour.
- Last for 30 to 70 seconds.
- Get worse if you move around.
- Do not ease with rest or change of activity.

If you have these symptoms, call your care team right away even if the baby is not due for weeks!

Even if you do not have regular contractions, you can still be in labor. Watch out for fluid or blood from your vagina; stomach or menstrual-like cramp; lower backache or back pain that does not go away; and a feeling that the baby is pushing down.

Sometimes women give birth before the due date. If you feel any of the above symptoms, get medical care right away. There is medicine that can sometimes stop labor and save your baby from being born too early.

Once you are in labor, try not to eat anything. You may drink clear fluids.



A LABOR OF LOVE - YOUR MIRACLE!

Stages of labor

Stage 1	Stage 2	Stage 3	Stage 4
Involves effacement and dilation of the cervix.			Is the immediate recovery of the mom.
Phase 1 (early labor) takes about 6-8 hours during which the cervix will dilate (stretch and open) from 0 to 3 centimeters. The contractions are normally short and not usually very painful.			Breathing techniques are very helpful when laboring. It is recommended that expectant mothers attend a class to learn which technique to use in each stage of labor.
Phase 2 (active labor) lasts about 3 to 5 hours and the cervix continues to dilate from 3 centimeters to 7 centimeters. The contractions are usually 3 - 5 minutes apart and are becoming a bit more uncomfortable.	Is the pushing and delivery of the baby which may last up to 3 hours.	Is the delivery of the placenta (after birth) occurring in 3 to 30 minutes after the delivery of the baby.	
Phase 3 (transition) is brief, lasting about $\frac{1}{2}$ hour to 1 & $\frac{1}{2}$ hours during which the cervix dilates fully to 10 centimeters. The contractions are 2 to 3 minutes apart and may be quite uncomfortable.			

APPROVED OVER-THE-COUNTER MEDICATIONS DURING PREGNANCY

Allergies, Cold, & Cough



- Any cough drop
- Chloraseptic
- Benadryl (Diphenhydramine)
- Mucinex (Guaifenesin)
- Robitussin
- Tylenol based products
- Vick's Vapor Rub
- Claritin/Zyrtec
- Saline Nasal Spray



Yeast Infection

- Monistat (3 or 7)



Skin Rashes

- Oatmeal Bath (Aveeno)
- Hydrocortisone Cream
- Calamine Lotion



Headache/Pain/Fever

- Tylenol Extra Strength



First Aid Ointment

- Bacitracin
- J&J First Aid Cream
- Neosporin
- Polysporin

Constipation



- Colace
- Senokot
- Milk of Magnesia
- Citruce/Metamucil
- Miralax

Hemorrhoids



- Witch Hazel
- Annusol/Annusol HC
- Preparation H
- Tuck's Pads

Heartburn/Upset Stomach



- Antacids (Tums/Rolaids)
- Zantac
- Pepcid
- Nexium
- Tagamet



NEWBORN CARE

Caring for a newborn is rewarding but scary for new parents. It is essential to understand the characteristics of a newborn in order to care for them with confidence.

- **The Head:** A newborn's head may be bruised, elongated, and misshapen during the first few days from being pushed through the birth canal. The head will begin to look better within a few days; however, it may take several weeks before it becomes completely round and the bruises or "stork bites" disappear. Occasionally, a swollen area on top of the head (called a cephalohematoma) may also develop from pressure received during the birthing process. It is fluid-filled and will also disappear over the first few weeks. Never hesitate to ask our pediatricians about any concerns or questions you may have regarding your baby's head.
- **Eyes:** Newborns usually keep their eyes closed most of the time. They may also be puffy and have a little yellow discharge for the first few days. This can be removed by using a warm damp cotton ball or washcloth and gently wiping from the inner to the outer corner of the affected eye. If both eyes are involved, use separate cotton balls or different parts of the washcloth to clean from the inner to outer corners of each eye.
- **Breasts:** Both male and female newborns may have some swelling under the nipples. This is a result of maternal hormones and will disappear over a few weeks. Occasionally, some milky discharge may occur. This is normal. Simply wipe any discharge away and do not squeeze the nipples.



NEWBORN CARE...CONTINUED

Genital Areas:

- **Vaginal Discharge:** It is common for baby girls to have a thick creamy or bloody vaginal discharge for the first two to three weeks of life. This is a result of maternal hormones and no reason for concern. You can remove any discharge by wiping gently from the front to back with a diaper wipe or warm damp washcloth.
- **Penis:** If your son has not been circumcised, no special care is required. The skin cannot be pulled back until the child is older. No attempts to force it back should be made. If your son was circumcised, the end of the penis will look red and swollen for a few days. It can be cleaned by squeezing soapy water over the area, then rinsing and drying well. After the circumcision, you may be given some lubricated gauze that can be applied as the old gauze becomes soiled or after bathing. You should not need to purchase additional gauze once this supply has been used. Some obstetricians place a ring on the end of the penis which should fall off after four to ten days. Once this occurs, gently retract the foreskin and wash away any white secretions that may have accumulated.



NEWBORN CARE...CONTINUED

- **Legs:** The feet and legs may be turned in as a result of being in a cramped position during pregnancy. They gradually straighten out during the first year of life. The feet and hands may occasionally turn a bluish color. That is normal.
- **Breathing:** A newborn's breathing may be somewhat irregular. This becomes particularly noticeable between 3 and 6 weeks of age. Nasal congestion is normal, and we suggest a rubber bulb syringe to help clear mucous from the nose when necessary (if it interferes with sleeping or feeding). Sneezing is the newborn's way of clearing the nose and does not necessarily mean a cold has developed.
- **Sleep:** Newborns spend most of their time sleeping even when you are trying to feed them. They also grunt, grimace, kick, and startle easily. All of this is normal. We and the American Academy of Pediatrics recommend that normal infants be positioned on their back to sleep
- **Crying:** All babies cry. Nothing can be more frustrating to a new parent than not being able to quiet your baby. Newborns between two weeks and four months of age may cry more than normal for no apparent reason. This is known as The Period of Purple Crying. Some newborns will continue to cry until they wear themselves out. Remind yourself that crying will not harm your baby. Crying may be a sign that your baby may be hungry, uncomfortable from a soiled diaper, or just wants attention and needs to be held. You cannot "spoil" your baby holding and loving him/her too much.



NEWBORN CARE...CONTINUED

- **Temperature:** Soon after birth, your baby's temperature will adjust to the environment. You should keep the temperature in your home at its usual level and dress your baby accordingly. If you prefer cooler temperatures and wear an extra layer of clothing, your baby will need one as well.
- **Umbilical Cord:** There is no need to use alcohol on the cord; just keep it clean. Meanwhile, a quick submersion bath is fine before the cord falls off, just dry the stump afterward. Also, keep the diaper folded below the cord to keep urine from soaking it. You may notice a few drops of blood on the diaper around the time the stump falls off; this is normal. But if the cord actively bleeds, call your baby's doctor immediately. If the stump becomes infected, it will require medical treatment. **Although umbilical cord infections are uncommon, you should contact your pediatrician if you notice any of the following: foul-smelling yellowish discharge from the cord, red skin around the base of the cord, or crying when you touch the cord or the skin next to it.**

Signs of Illness

Newborn infants must be watched and evaluated more carefully if sickness or illness occurs within the first 3 months of life. If you notice any of the following signs please contact your pediatrician:

- Temperature 100.4 degrees or higher when taken rectally.
- Vomiting (not just "spitting up") for several feedings in a row.
- Excessive or inconsolable crying.
- Listlessness.
- Refusing two or more feedings in a row.
- Bowel movements are looser and more frequent than normal.
- Any unusual rash.
- If the baby does not have a wet diaper at least once a day for the first 2 days of life; 4-6 times a day following the 3rd day of life.
- The umbilical cord area or circumcision site has a foul odor or pus.
- Skin color becomes yellow.
- Lips, areas around the mouth, and nailbeds become bluish in color.



PRIMARY CARE PEDIATRICS

As a parent, the health and wellbeing of your children is your main concern. From infants to teens, CommWell Health provides all the pediatric care your children need.

Services Provided:

- Newborn and infant examinations
- Immunizations and flu shots
- Well Child check-ups
- TB test
- Care and follow-up for acute and chronic illnesses
- Immediate care for minor illnesses and injuries
- School and sports physicals
- Behavioral health
- Dental care
- Adolescent services
- WIC referrals

*3rd Party Insurance, Medicaid and Medicare Accepted.
No insurance? No problem. Ask about EagleCare
Slide Fee Discount program.*

CommWell Health Pediatric Provider:

Nelly Morales, PA



CommWell Health Pediatrician:

Dr. Beverly Yearwood, MD



Visit:

www.commwellhealth.org
or scan code for a list of
Pediatric Locations



VACCINE IMMUNIZATION SCHEDULE

2023 Recommended Immunizations for Children from Birth Through 6 Years Old



ADDITIONAL INFORMATION

- If your child has any medical conditions that put them at risk for infection (e.g., sickle cell, HIV infection, cochlear implants) or is traveling outside the United States, talk to your child's doctor about additional vaccines that they may need.
- If your child misses a shot recommended for their age, talk to your child's doctor as soon as possible to see when the missed shot can be given.

Flu† Two doses of Hep A vaccine are needed for lasting protection. The 2 doses should be given between age 12 and 23 months. Both doses should be separated by at least 6 months. Children 2 years and older who have not received 2 doses of Hep A should complete the series.

FOOTNOTES

COVID-19** Number of doses recommended depends on your child's age and type of COVID-19 vaccine used. Two doses given at least 4 weeks apart are recommended for children age 6 months through 8 years of age who are getting an influenza (flu) vaccine for the first time and for some other children in this age group.

HepA*

Two doses of Hep A vaccine are needed for lasting protection. The 2 doses should be given between age 12 and 23 months. Both doses should be separated by at least 6 months. Children 2 years and older who have not received 2 doses of Hep A should complete the series.

RV* Administering a third dose at age 6 months depends on the brand of Hib or rotavirus vaccine used for previous dose.

Talk with your child's doctor if you have questions about any shot recommended for your child.

Diseases and the Vaccines that Prevent Them

BIRTH-6 YEARS OLD

VACCINE IMMUNIZATION SCHEDULE

22

DISEASE	VACCINE	DISEASE SPREAD BY	DISEASE SYMPTOMS	DISEASE COMPLICATIONS
Hepatitis B	HepB	Contact with blood or body fluids	May be no symptoms, fever, headache, weakness, vomiting, jaundice (yellowing of skin and eyes), joint pain	Chronic liver infection, liver failure, liver cancer, death
Rotavirus	RV	Through the mouth	Diarrhea, fever, vomiting	Severe diarrhea, dehydration, death
Diphtheria	DTaP*	Air, direct contact	Sore throat, mild fever, weakness, swollen glands in neck	Swelling of the heart muscle, heart failure, coma, paralysis, death
Pertussis (whooping cough)	DTaP*	Air, direct contact	Severe cough, runny nose, apnea (a pause in breathing in infants)	Pneumonia (infection in the lungs), death
Tetanus	DTaP*	Exposure through cuts in skin	Stiffness in neck and abdominal muscles, difficulty swallowing, muscle spasms, fever	Broken bones, breathing difficulty, death
Haemophilus influenzae type b (Hib)	Hib	Air, direct contact	May be no symptoms unless bacteria enter the blood	Meningitis (infection of the covering around the brain and spinal cord), intellectual disability, epiglottitis (life-threatening infection that can block the windpipe and lead to serious breathing problems), pneumonia (infection in the lungs), death
Pneumococcal disease (PCV3, PCV13)	PCV	Air, direct contact	May be no symptoms, pneumonia (infection in the lungs)	Bacteremia (blood infection), meningitis (infection of the covering around the brain and spinal cord), death
Polio	IPV	Air, direct contact, through the mouth	May be no symptoms, sore throat, fever, nausea, headache	Paralysis, death
Coronavirus disease 2019 (COVID-19)	COVID-19	Air, direct contact	May be no symptoms, fever, muscle aches, sore throat, cough, runny nose, diarrhea, vomiting, new loss of taste or smell	Pneumonia (infection in the lungs), respiratory failure, blood clots, bleeding disorder, injury to liver, heart or kidney, multisystem inflammatory syndrome, post-COVID syndrome, death
Influenza (Flu)	Flu	Air, direct contact	Fever, muscle pain, sore throat, cough, extreme fatigue	Pneumonia (infection in the lungs), bronchitis, sinus infections, ear infections, death
Measles	MMR**	Air, direct contact	Rash, fever, cough, runny nose, pink eye	Encephalitis (brain swelling), pneumonia (infection in the lungs), death
Mumps	MMR**	Air, direct contact	Swollen salivary glands (under the jaw), fever, headache, tiredness, muscle pain	Meningitis (infection of the covering around the brain and spinal cord), encephalitis (brain swelling), inflammation of testicles or ovaries, deafness, death
Rubella	MMR**	Air, direct contact	Sometimes rash, fever, swollen lymph nodes	Very serious in pregnant women—can lead to miscarriage, stillbirth, premature delivery, birth defects
Chickenpox	Varicella	vaccine protects against chickenpox.	Rash, tiredness, headache, fever	Infected blisters, bleeding disorders, encephalitis (brain swelling), pneumonia (infection in the lungs), death
Hepatitis A	HepA	vaccine protects against hepatitis A.	Direct contact, contaminated food or water	Liver failure, arthralgia (joint pain), kidney, pancreatic and blood disorders, death

DTaP*

MMR**

MMR combines protection against diphtheria, tetanus, and pertussis.

Last updated December 2022 • CS32257-A

FEEDING YOUR BABY

Feeding your baby is one of the baby's first pleasurable experiences. Babies receive nourishment both from food and from the love of their parents. Food helps to achieve healthy growth; parents' love provides security.

There are two sources to supply nutrition to infants.

1. Breastfeeding (optimal source)
2. Bottle feeding with formula



- **We feel that mother's milk is the optimal source of nutrition and urge you to consider breastfeeding your baby.** There are, however, many good reasons that parents may choose to use formula.
- Breastfeeding is the most natural, least expensive, and most convenient way to feed your baby. Breast milk also provides some protection against infection.
- CommWell Health offers lactation/breastfeeding support for all of our new mothers. Sometimes it is hard to get a newborn to latch and breastfeed without causing undue stress and frustration for the mother. We are here to help you with the process!
- Feeding time should be enjoyable for you and your baby. Whether you breast or bottle feed, please hold your baby close.
- During the first two or three days after birth, many babies prefer to sleep rather than eat. They may take only $\frac{1}{2}$ ounce to 1 ounce of formula per feeding if bottle-fed. During this time, you may need to wake your newborn to feed. Remember that newborns may lose up to 10% of their birth weight during this time. Our physicians will follow your baby's feeding and weight loss closely while in the hospital and after discharge.
- Remember that babies swallow air during feedings. Give your baby a chance to burp halfway through the feeding and again at the end of the feeding.
- Hold him upright on your shoulder and pat or rub him gently on the back. Most babies spit up some milk after being fed. These "wet burps" are more of a mess than a serious problem.
- Normal breast milk may vary in color between women; some women may have thick, yellow milk, while others have thin, bluish-white milk. Colostrum, the breast milk secreted in the first few days after birth, is a yellow color and is full of immunoglobulins for your baby. Both breasts should be used at each feeding; start the next feeding on the breast where the last feeding ended. Breastfeed for 10 to 15 minutes on each side so that the baby gets the rich hind milk that comes out of the breast later in the feeding.
- If you choose to formula feed your baby, we recommend using one of the standard infant formulas with iron.



Mothers should have a normal, well-balanced diet while breastfeeding. Occasionally, mothers will find that certain foods in their diet may upset their baby's digestion. These foods can be avoided. Many drugs are excreted in the breast milk; check with us prior to taking any medications. Alcohol should be avoided.

BREASTFEEDING

Breast milk gives protection from infections and allergies and may lead to fewer illnesses in the first year of life. For a mother, breastfeeding often helps to strengthen the mother-baby bond as well. Other physical benefits for the mother include helping to speed the shrinking of the uterus back to its pre-pregnancy size, reducing the risk of breast and ovarian cancer, and increasing the spacing between pregnancies.



Tips:

Get the basics on breastfeeding before delivery. CommWell Health offers lactation support through the WIC department. Make an appointment with them!

Get an early start. Nursing ideally should start within an hour of delivery when the infant is alert and the instinct to nurse is strong. At this time, the breasts contain colostrum, a thick fluid that contains antibodies to disease.

Nurse on demand. Watch for hunger cues and do not wait for your baby to cry. Crying is a late sign of hunger. Cues include rooting movements, hand-to-mouth movements, and clicking or sucking noises. Newborns need to nurse about every 2 hours on a schedule. Doing this will encourage the breasts to produce plenty of milk. Nursing often promotes milk production - the more you nurse, the more milk your breasts will make!

No supplements. Nursing babies do not need sugar water or formula supplements. These will interfere with their appetite for nursing, which can lead to a diminished milk supply. The more your baby nurses, the more milk you will produce.

Delay artificial nipples. It is best to wait at least 2 weeks before introducing a pacifier or bottle to avoid confusion for the baby. Artificial nipples require a different sucking action than breastfeeding and lead to difficulties if introduced too soon.

Air dry. In the early period of breastfeeding, air dry the nipples after each feeding. This prevents cracking. To help fight against nipple cracking and infection, you can coat nipples with breast milk or allergen-free lanolin.

Watch for infection. Symptoms of breast infection include fever, painful lumps, and redness.

Expect engorgement. A new mother usually experiences big, hard painful breasts for a few days. Feed the baby frequently and on demand until your body adjusts and produces what the baby needs.

Eat right and get enough rest. To produce plenty of milk, a mother needs a balanced diet that includes 600 extra calories a day and 8 glasses of water.



WOMEN, INFANTS & CHILDREN PROGRAM (WIC)

The Women, Infants, and Children Program (WIC) is a special supplemental nutrition program offered through CommWell Health designed to improve the health of its participants.



WIC Provides

- Healthy foods
- Nutrition education
- Breastfeeding information and support
- Referrals to other healthcare services



WIC appointments including eligibility determination and/or nutrition assessment will be in person. This includes initial certifications, subsequent certifications, mid-year assessments, and weight and hemoglobin checks. Mini lessons can be completed over the phone.

Eligibility

In order to be eligible you must be one of the following:

- A pregnant woman
- A breastfeeding woman whose baby is under 1 year old
- A woman who has recently delivered
- An infant or child up to 5 years old



You will be interviewed by a nutritionist.

You must meet program income guidelines.

- Medicaid
- SNAP, and
- Work First recipients qualify automatically

Breastfeeding Services

- Private breastfeeding room for nursing mothers
- Breastfeeding Peer Counselor Services Program
- Breast pump loans

WIC Hours of Operation and Locations:

McGee's Crossroads:
Monday: 8:00AM – 5:30PM
Wednesday: 8:00AM – 5:00PM

Salemburg:
Tuesday: 8:00AM – 5:30PM

Newton Grove/Spivey's Corner:
Monday, Tuesday, Thursday:
8:00AM – 5:30 PM
Wednesday: 8:00AM – 5:00PM
Friday: 8:00AM – 1:00PM

TIME TO CELEBRATE!



We extend our heartfelt congratulations on the wonderful arrival of your baby! The journey of parenthood is undoubtedly filled with immense joy and fulfillment. It is an honor for us to be a part of this incredible experience. Throughout your stay at the hospital, your baby will be examined daily. Should any concerns arise we can provide you with a comprehensive discussion, to go over any questions you may have.

There is no secret to being a good parent as we are convinced that there is no single best approach to parenting. Your baby is an individual from the day they are born. Since no two children are alike, your effectiveness as a parent depends considerably on your insight and ability to respond appropriately to the unique, individual needs of your child. It is our goal to protect the baby's health by assisting you in recognizing their needs. Our aim is to recognize problems early and to prevent them through regular well-child checkups, during which all aspects of health, growth, and development will be evaluated. We trust that our guide has equipped you with valuable insights and new knowledge that will assist you in nurturing your newborn.

We look forward to caring for you and your child!

Sincerely,

Your CommWell Health Obstetrics Health Team





THANK YOU



**In partnership with UNC
Women's Health at
Smithfield and Clayton**

Phone call
1-877- WELL-ALL (935-5255)



Website
www.commwellhealth.org



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