



Your guide to a **healthy pregnancy**



Congratulations!

All of us at Molina Healthcare want to help you have a healthy pregnancy

We're here for you every step of the way!

This guide provides valuable information about pregnancy milestones and benefits available to you along your pregnancy journey.

Register for the **MyMolina member portal** or download the **MyMolina mobile app** to access important information. You will be able to

- o Find a provider
- o Update your contact and demographic information
- Change your PCP
- o Print a temporary ID card
- o Get health reminders
- o View your health history

Member Portal Mobile App



If you have questions or need help completing the steps above, call Member Services at (800) 424-4518 (TTY: 711).



What's inside?

Care Management.....	4
Your liaison to improved birth outcomes.....	4
Steps to a healthy pregnancy and baby.. ..	5
Step 1: Get started with an OB.....	5
Step 2: Get extra services for you and your baby.....	7
Step 3: Healthy eating choices.....	8
Step 4: Healthy teeth and gums.....	10
Step 5: Avoid unhealthy choices.....	11
Getting help.....	14
Getting help with unsafe habits.....	14
Things to know.....	19
A doula is not just for labor.....	19
Warning signs.....	20
Physical and Emotional Warning Signs.....	20
Your 1st Trimester.....	21
Your 2nd trimester.....	22
Getting prepared.....	24
Choices for baby.....	27
Your baby's doctor.....	27
Safe travel tips and car seats.....	28
Safe sleep.....	29
Breastfeeding/Bottle Feeding.....	30
Back at home	31
Let your body heal.....	31
Baby blues or postpartum depression?.....	32
All babies cry.....	33
Your postpartum visit.....	34
Why are immunizations so important?.....	35
Doula Recommendation Form.....	37

Care Management

Your liaison to improved birth outcomes

What is a Care Manager?

A Care Manager acts as a bridge between your healthcare providers and your family. They can help connect pregnant women with primary health care providers and specialists like perinatologists or doulas. They facilitate communication between medical, social, and educational services. They promote quality maternal care and ensure the safety of information.

Your Care Manager is vital in ensuring a smooth and stress-free experience throughout your maternity care journey. Your Care Manager will provide personalized health and wellness information tailored to your maternity care needs, including:

- Developing and coordinating health care programs
- Facilitating communication between staff, patients, and family
- Managing patient care and providing education

They will also create schedules, develop patient goals, and monitor progress to ensure quality care and maintain patient confidentiality.

Your Care Management team will contact you and assess your care management needs.

Questions?

If you have any questions regarding your Care Manager, feel free to call Member Services at (800) 424-4518 (TTY: 711). We are happy to assist you from 8 am. to 8 p.m., 7 days a week.



Steps to a healthy pregnancy and baby

Step 1: Get started with an OB

Make an appointment to see an obstetrician (OB) as soon as you find out you're pregnant. It's important to start prenatal care early and get regular care during pregnancy. Be open and honest with your OB about your medical history and life. The more your OB knows, the more your OB can help you.

Need help finding an OB?

Scan the QR code below to access the online Provider Directory

[Online Provider Directory](#)



If you need additional help finding an OB, you can also call us at [\(800\) 424-4518](tel:8004244518) (TTY: 711).

What to expect during your 1st prenatal visit

Your first prenatal visit will take more time than other visits. Someone in the office or your OB doctor should:

- Check your heart rate, blood pressure and temperature
- Get a urine and blood sample
- Ask you about:
 - Past pregnancies.
 - Any deliveries and children you've had. If you had complications with a past pregnancy, you could be at high risk.
 - Your last period to decide your due date.
 - Your health, the health of your baby's father, and your family's health
 - Your habits and lifestyle choices.
 - Any medicines you take. This includes prescription and over-the-counter.
- Talk with you about things that are unsafe for you and your baby.
- Do a pelvic exam.
- Talk about any risks for you or your baby and ways to treat them.
- Tell you how and when to contact them for any questions or issues during pregnancy.

What to expect during your follow-up prenatal visits

Your follow-up prenatal visits will take less time. Your OB will complete the following:

- Check your heart rate, blood pressure and temperature
- Get a urine sample
- Check your weight gain
- Measure the size of your uterus (fundal height) to track how your baby is growing
- Listen to your baby's heartbeat
- Ask if you can feel your baby move
- Draw blood if needed
- Review warning signs with you
- Answer any questions you have about your pregnancy journey

Your OB follow-up visits are essential!

These visits can keep you and your baby healthy. Your OB can answer your questions and find and treat health problems early when they see you regularly.



Step 2: Get extra services for you and your baby

Below are some of the benefits available to you as a Molina Healthcare Cardinal Care member

Doula Support	Select your birth coach who can provide emotional and physical support before, during, and after your baby is born. For more information about how doulas can help, go to page 19 .
HelpFinder	Visit the HelpFinder online search tool at molinahelpfinderstaff.com to help you find important services in your area like housing, food, job training, and more.
Mother-Baby Connections	Your Care Manager will enroll you in the Mother-Baby Connections program. The program includes: <ul style="list-style-type: none"> • An invitation to a baby shower, hosted quarterly per region • Rides to WIC appointments, Lamaze, and parenting classes. • Infant sleep sacks and diapers. • One bicycle helmet per year for kids under 18. • Annual sports physicals for kids ages 10-18.
Post-Discharge Meals	Your Care Manager will arrange for you and a family member to receive three meals a day for up to 5 days after you leave the hospital, if you are eligible.
Wellness Programs	Healthy Rewards gift cards (up to \$50 each year when you complete a health care activity like: <ul style="list-style-type: none"> • Quit smoking. • Get your annual physical. • Go to all your doctor visits when pregnant • See your doctor within a week after hospital discharge Contact Member Services for more information at (800) 424-4518 (TTY: 711).
Women Infants and Children (WIC)	Cardinal Care members qualify for WIC benefits, a federal program that pays for healthy foods, milk, and juices during and after pregnancy. WIC counselors offer advice on nutrition and breastfeeding. Contact your local WIC office or download the WIC Shopper app to apply and learn more.

Step 3: Healthy eating choices



The best way to teach your baby how to eat healthy is for you to eat healthy during pregnancy. Eat a variety of foods and a rainbow of colors at each meal. This will make the fluid around your baby healthy. Your baby will also learn to like the taste of healthy foods.

Eat five or six small meals with:

- Iron-rich foods (lean meats, foods with added iron, and dark, leafy vegetables). These foods are good for your heart and blood.
- Vegetables and fruits of all colors (melons, tomatoes, and sweet peppers). These foods have potassium, which helps with muscle cramps, and other important vitamins.
- Whole grain and high-fiber foods (100% whole wheat bread and cereals, brown rice, and oats). These foods keep your bowels moving and help lower your risk of hemorrhoids.
- Protein foods (lean meats, fish, chicken, and foods that WIC approves). These foods help your baby grow and give you energy.
- Calcium-rich foods (low-fat milk, yogurts, and low-fat cheeses like ricotta or mozzarella). These foods give you healthy bones and teeth.
- Small amounts of healthy fats (avocado, nuts, and olive oil). These foods give you energy.
- Some healthy snacks are okay in between meals (fat-free popcorn, low-fat yogurt, or raw fruits and vegetables).

On top of a healthy diet, take your prenatal vitamin every day with food. If your vitamins make you sick, tell your OB.



Foods to limit or cut out

No more than 1 a week during pregnancy

- Sugar foods (doughnuts, desserts, and sodas)
- Artificial sweeteners
- Fried foods or red meats
- French fries
- Potato chips
- Canned tuna fish
- Caffeine (coffee, sodas, tea, and chocolate)
- Foods high in salt (lunch meats cooked, canned, frozen, and fast foods)



If you crave non-food items like dirt, clay, or paper, talk to your OB right away. This is known as Pica and could harm you and your baby.

Stay hydrated by drinking at least eight, eight-ounce glasses of water a day.

You can also drink milk and sometimes 100% fruit juice. One cup of pasteurized fruit juice and milk per day.



Never during pregnancy

- Beer, wine, or alcohol
- Undercooked meats
- Undercooked eggs (sunny-side-up or over-easy)
- Raw fish or sushi
- Sea fish with mercury in it (swordfish, tilefish, king mackerel, or shark)
- Cheese that hasn't been processed at a dairy factory (cow, goat, blue, feta, and brie)
- Raw honey
- Organ meats like liver





Step 4: Healthy teeth and gums

Keeping your teeth and gums healthy is important for you and your baby. If you're pregnant and have gum disease, your baby could be born too early or too small.

Sometimes gum disease is painful, but not always. You might have gum disease and not even know it.

Signs of Gum Disease

- Your gums bleed when you brush your teeth
- Red, swollen, or tender gums

If you have any of these signs, keep brushing and flossing every day. Visit a dentist to have your teeth cleaned. Be sure to tell the dentist you're pregnant. It is important for them to know if they need to take an X-ray.

We cover dental cleanings every six months. If you need help finding a dentist, scan the QR code below to access the online provider directory.

Online Provider Directory



Step 5: Avoid unhealthy choices

Smoking

There is **no** amount of smoking that is safe during pregnancy. Any type of smoking can cause complications during pregnancy. This included smoking cigarettes, cigars, e-cigarettes, or vaping.

When you smoke during pregnancy, your baby gets less oxygen.

Smoking can increase your risk of having	Smoking can increase your baby's risk of having:
<ul style="list-style-type: none">• A miscarriage or stillbirth• A baby being born too soon or too small 	<ul style="list-style-type: none">• Crib death, also called Sudden Infant Death Syndrome/Sudden Unexplained Infant Death (SIDS/SUID)• Ear and lung infections• Lifelong learning problems

Secondhand or thirdhand smoke

Secondhand smoke is when you are around someone who is smoking, and you breathe in the smoke they exhale. It can cause:

- Low birth weight
- SIDS/SUID
- Ear infections
- Lung problems
- Coughing
- Wheezing
- Increases your baby's chances of going to the hospital for bronchitis or pneumonia

Thirdhand smoke is when the gas and particles from smoke stick to surfaces like hair, skin, clothes, toys, or furniture. If you or anyone smokes inside your house - **stop!**

A fan or air freshener will not remove secondhand or thirdhand smoke

Stopping smoking will not only improve your health and the health of your baby, it will also:

- Lessen morning sickness
- Give your baby more oxygen
- Lower your risk of a miscarriage or stillbirth
- Reduce complications during and after delivery
- Lower the risk of your baby being born too early or too small
- Lower the risk for SIDS/SUID

Relapse

Relapse is when you start smoking again after you've stopped. It can happen. Lots of people start smoking again. The first few days are the hardest. But the symptoms are a sign that your body is starting to recover!

Take one day at a time and reward yourself for success. Remind yourself why you stopped smoking. **Quitting smoking is the best gift you can give your baby! It's never too late to quit smoking.**

Want more information on how to quit? Go to [page 15](#).

Exercise during pregnancy

Regular exercise helps you adjust to the changes your body is going through during pregnancy. Exercise can relax you and get you ready for labor and delivery. Talk with your OB about the kinds of exercise you can do.

Unless your OB says not to, try to exercise for at least 30 minutes most days of the week.

Overall conditioning like walking, swimming, or biking is very good for you. These exercises increase your pulse rate, condition your body, and strengthen your heart.



No matter what exercise you do, try to walk whenever you can. You can also try:

- Taking a lunchtime walk in the park with a friend if you work.
- Parking away from the store entrance and walk the extra distance when you go shopping.
- Taking the stairs instead of the elevator when you can.

Alcohol

No Amount of alcohol is safe during pregnancy.

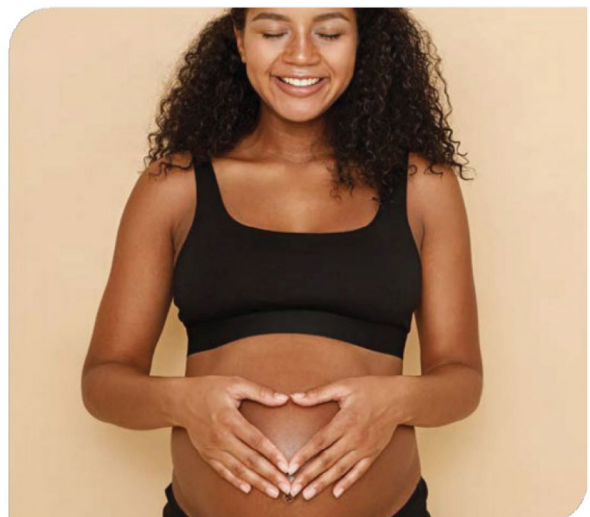
Any alcohol (beer, wine, liquor) can cause complications during pregnancy. If you drink alcohol, it reaches your baby through the placenta. Exposure to alcohol can seriously harm your baby. It can:

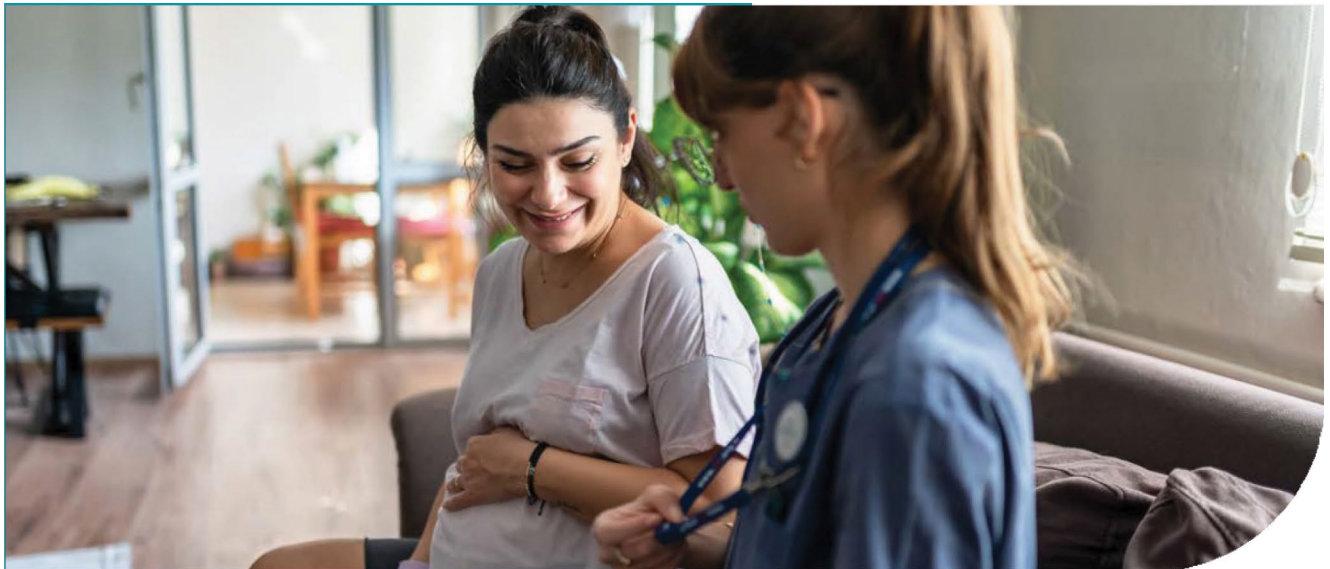
- Stunt the growth of your baby's mind and body
- Increase your risk for complications
- Cause your baby to be born with Fetal Alcohol Syndrome (FAS)

Alcohol and FAS can increase your baby's risk of:

- Being born too early or too small
- Having withdrawal symptoms (these babies must stay in the hospital when mom goes home)
- Having birth defects
- Having lifelong medical and learning problems

To get help quitting alcohol, go to [page 15](#).





Pills, medicines, and other substances

Some medicines are safe to use during pregnancy, like medicine to treat long-term conditions such as asthma, thyroid disease, diabetes, or epilepsy.

Not all natural or home remedies are safe during pregnancy. Herbal, home remedies, and aromatherapy could harm your baby.

Things you should always do:

- Check with your OB before taking any medicine (including herbal and home remedies)
- Tell your OB about any medicines or treatments you get from other doctors
- Only use over-the-counter medicines if your OB approves them, and use them as little as possible
- Ask your OB about alternative pain medicine after delivery

What is Neonatal Abstinence Syndrome (NAS) or Neonatal Opiate Withdrawal (NOWS)?

NAS or NOWS is when your baby is exposed to any of these during pregnancy:

- Painkillers (opioids)
- Antidepressants
- Sleeping pills (benzodiazepines)
- Illicit street drugs (weed, ecstasy, cocaine, and heroin)

It's important to let your OB know if you are using anything that can cause NAS or NOWS. Stopping too quickly can harm you and your baby.

Substances that cause NAS or NOWS can also increase the risk of:

- Miscarriage or stillbirth
- Birth defects
- Your baby being born too early or too small
- Withdrawal symptoms
- SIDS/SUID
- Lifelong learning and behavior problems

Child Protective Services (CPS) might get involved if they think a baby is unsafe. Work with your OB to show that you want your baby to be safe.

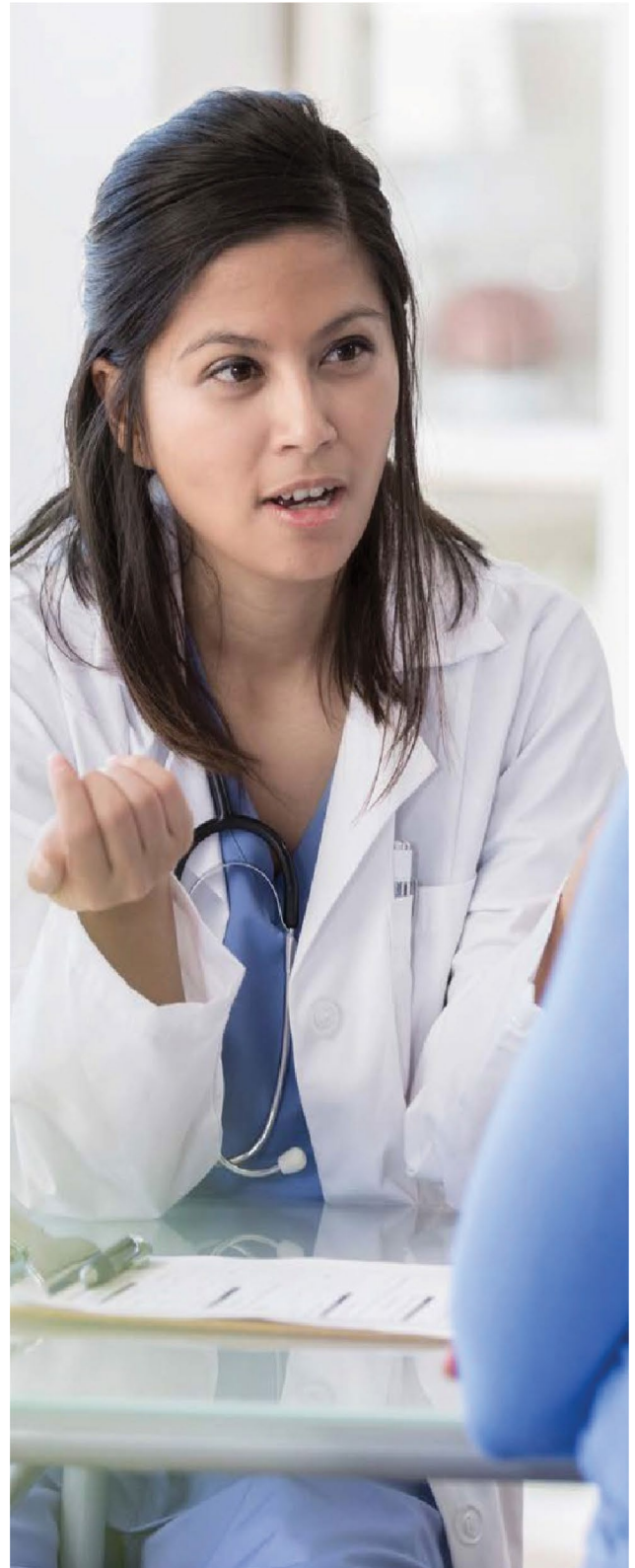
Getting help

Getting help with unsafe habits

You are four times more likely to quit unsafe habits if you have support. You can trust your OB! Tell your OB about any unsafe habits you struggle with and ask for help.

How to get ready to quit

- Avoid people and situations that make you want to do the habit
- Change your routine so you can avoid triggers
- Think about the bad things that can happen if you keep doing these unsafe habits
- Think about the good things that will happen if you stop
- Ask for help and support from your friends, family, and OB
- Make a list of things to help distract you if you feel an urge. You might:
 - Talk to your baby and tell them how much you love them and you want the best for them
 - Remind yourself of the good things that can happen if you stop
 - Take a walk
 - Search the internet for happy videos
 - Play a game on your cell phone
 - Call a positive friend for support
 - Go for a drive
 - Call one of the phone numbers on the next page
- Praise yourself for the progress you have made so far
- Take it one day or even one hour at a time.





Tips to help you to quit smoking:

- Get rid of all ashtrays in the house
- Ask others not to smoke around you
- Chose a day to stop, write it down, and post it on the fridge
- Call (800) QUIT NOW at (800) 784-8669
- Call the American Cancer Society at (800) 227-2345
- Contact your local health department for support groups or classes
- Visit Smokefree.gov



For help to quit drinking:

- Call the National Alcohol and Drug Dependence Hopeline at (800) 622-2255
- Call the Substance Abuse Treatment Facility Locator at (800) 662-4357
- Visit Findtreatment.samhsa.gov
- Visit aa.org (Alcoholics Anonymous)



For help with substance use, misuse, or abuse

- Call the National Alcohol and Drug Dependence Hopeline at (800) 622-2255
- Call the Substance Abuse Treatment Facility Locator at (800) 662-4357
- Visit Findtreatment.samhsa.gov
- Visit NA.org (Narcotics Anonymous)

Contact Member Services at [\(800\) 424-4518](tel:8004244518) (TTY: 711) to find out about additional services available to help you.

We cover behavioral (mental) health benefits!

Project Link

Project LINK is a program that provides support to women and children affected by substance use. It offers intensive case management and home visiting services to pregnant and parenting women who are at risk or currently abusing substances. The program aims to remove barriers to services for substance-using women and their families, improve communication, and enhance service providers' knowledge and skills.

Project LINK also connects members with substance abuse, mental health, medical, and other social services available in the community. The service is open to members throughout the state of Virginia. You can contact Project LINK at [\(502\) 583-3951](tel:5025833951).

Protect yourself and your baby from domestic violence

Not all relationships are healthy and supportive. Abuse is when someone is hurting you in any way. There are different types of abuse. Abuse can be mental, emotional, physical, or sexual. An abuser can be anybody in your life,

Protect yourself from abuse — it's the best thing for you and your baby!

Examples of abuse

When someone:

- Makes fun of you, calls you names, or puts you down in front of your friends or family
- Controls where and when you go somewhere
- Controls how you get food, money, sleep, or other resources
- Keeps you away from friends or family
- Blames you for their frustrations or anger
- Accuses you of being unfaithful
- Threatens you or your family
- Demands to know where you are at all times
- Destroys your favorite things
- Pushes, shoves, slaps, or throws things at you
- Kicks or chokes you
- Leaves marks or bruises on you
- Forces you to do things you don't want to, including sexual acts



How to handle abuse:

- If you're being abused, don't hide it. No one can help you if they don't know.
- Don't be afraid to ask for help. You and your baby have the right to be safe!
- Talk to someone you trust, like your OB, a family member, or a friend.

Things to know:

- Know how to quickly exit your home through doors and windows.
- Tell a trusted neighbor what to do, like call the police, if something happens.
- Know where you will go if you must leave.
- Your children have a high chance of being abused by the same person who is abusing you. The risk is even higher if your partner is not the child's parent.
- Children in an abusive home have a higher chance of becoming abusers and having drug or alcohol problems later in life.

Abuse is not your fault. You are not alone. Help is available!

Who can I call for help?

- **Abuse Hotline:** (800) 752-6200
- **24-hour Crisis Line:** (877) 803-7577.
- **988 Suicide and Crisis Lifeline:** Call or text 988 or chat at 988lifeline.org.

If you don't know what to do or can't get away, call **911**!



Things that are unsafe for you during pregnancy

Never do this during pregnancy	Why?
 <p>Don't change or clean a cat litter box or be around one during and after the cat uses it</p>	<p>Cats can carry a parasite that can cause toxoplasmosis that can hurt your baby.</p>
 <p>Don't douche</p>	<p>Douching can wash away good bacteria, increase your risk of yeast infection, and introduce an infection to your baby.</p>
 <p>Don't take bubble baths.</p>	<p>Bubble baths can cause urinary tract infections.</p>
 <p>Don't use hot tubs, steam rooms, or saunas</p>	<p>You can get sick.</p>
 <p>Don't use hot tubs, steam rooms, or saunas.</p>	<p>These things are dangerous during pregnancy. They can cause your placenta to pull away from the uterus (placental abruption). This can threaten your life and your baby's life.</p>
 <p>Don't do impact or jumping sports or ride animals.</p>	
 <p>Don't ride jarring rides like roller coasters or bumper cars.</p>	
 <p>Don't do hard physical work like lifting, pushing or pulling heavy loads.</p>	
 <p>Don't use dangerous machinery like chainsaws or jackhammers</p>	
 <p>Don't touch lizards, snakes, or turtles.</p>	<p>They have harmful bacteria on their skin called salmonella</p>

Things to know

A doula is not just for labor

Doulas are professional caregivers for pregnancy, childbirth, and the postpartum period. They are trained in physical and emotional support and can play a huge role in helping you have a healthy pregnancy and a positive birth experience. They are birth experts and can be involved throughout your pregnancy to answer questions and address concerns.

During pregnancy: Doulas provide information about comfort, lifestyle, diet, and exercise, as well as emotional support. Are you feeling anxious? Your doula may be able to address your concerns. Think digestion issues are TMI? Your doula has heard it all before. Doulas can also offer information and advice on choosing an obstetrician, midwife, or birth setting, as well as the latest evidence on maternity care options. Whatever type of birth you prefer, your doula is there to support your personal choices.

Postpartum: Doulas assist new mothers with postpartum healing, breastfeeding, and bonding with a new baby. They often help with cooking, household tasks, and caring for older siblings. Need a nap after being up at night with a newborn? Your doula can help give you space to rest and recover.

How can a doula help during labor?

During labor, a doula can provide emotional and physical support, including non-medical methods for pain management. Doulas can help parents understand the medical care they are receiving, discuss options and informed consent for any interventions or procedures, and help communicate with healthcare providers. Doulas also support fathers, partners, friends, or other family members who may be part of the birth team.

To get started



1. If you want to work with a doula, ask your friends, doctor, midwife, or hospital for recommendations. You can also search for a doula near you using our Provider Directory.



2. Work with your PCP, OB, or behavioral health provider to get the **Doula Recommendation Form** (on page 38) signed.
3. Once you make a selection, give your doula the signed form

What are the warning signs of a problem?

Physical warning signs

- Regular contractions when your belly is tightening up like a ball. You might have contractions with or without pain.
- Vaginal bleeding
- Bloody show mucus with a small blood streak (this is normal after 37 weeks)
- Leaking of fluid from the vagina
- Vaginal discharge that changes in color, odor, or amount
- Low, dull backache
- Pelvic pressure or pressure between your legs or in your thighs
- Your baby does not move as much as before or stops moving
- Stomach pain with or without diarrhea
- Cramping that feels like a period
- Burning or pain when urinating
- Feeling dizzy or faint
- Blurred vision, seeing spots or other vision changes
- Headache that does not go away
- Vomiting or diarrhea that does not stop
- Chills, a rash or fever
- Sudden swelling in your face or hands
- Sudden increase in swelling in your feet or legs

If you have any of these warning signs or if you don't feel right, call your OB right away! Your OB may want to see you or send you to the hospital.

Emotional warning signs

The way you think and feel is part of your health. Having a healthy mind and emotions are important for you and your baby. Most pregnant women have mood swings during pregnancy and after delivery.

Talk to your OB if you:

- Feel sad most of the time, or it lasts at least two weeks
- Have a history of depression or anxiety
- Have any new symptoms of depression or anxiety

Moms with mental health needs have a higher risk of pregnancy complications. These complications can put you and your baby at risk.

You're not alone! You can still have a healthy pregnancy with mental health needs. Don't hide how you're feeling. Someone can help you when they know you need it.

If you have any thoughts of hurting yourself or someone else, call [911](tel:911).



Your 1st Trimester

Weeks 1 to 12 Months 1 to 3

- If you're not taking prenatal vitamins yet, start taking them every day.
- Your OB will want to see you every month.
- It's not too early to connect with a doula. Scan the QR code on the next page to search our online provider directory and find a doula near you.
- Hormones can make you feel sick to your stomach. This is called morning sickness, but it can happen at any time of the day. If you have morning sickness:
 - Keep snacks like crackers or almonds with you
 - Eat five or six small meals during the day
- It's okay to have mood swings. Your body is going through a lot of changes.
- Call your OB if you have any warning signs. If you're not sure if something is a warning sign, call our 24-hour Nurse Advice Line at [\(833\) 514-1809](tel:8335141809) (TTY: 711).
- Talk to your OB before using any home remedies.



Did you know?

- About 25% of pregnant women can develop a **subchorionic hematoma**. This is when blood forms between the wall of the uterus and the chorionic membrane during pregnancy. They are most common during weeks 10 to 20 of pregnancy. They make up about 10% of all vaginal bleeding. Most hematomas are not a cause for concern.
- 1 in 4 women lose their pregnancy before week 20. If this happens, help is available for you
 - You can call Lifeline at [\(800\) 273-TALK 24](tel:800273TALK24) hours a day, seven days a week
 - You can also learn more at [Nationalshare.org](https://www.nationalshare.org) and [Pregnancyloss.org](https://www.pregnancyloss.org)

Your 2nd trimester

Weeks 13 to 26 | Months 4 to 6

- Your OB will want to see you every month.
- You may be ready to wear maternity clothes.
- It's not too late to connect with a doula. Visit our online provider directory to find a doula near you.
- Your OB will do an ultrasound to find your baby's organs and make sure they're growing properly. They might be able to see if you're having a girl or boy. If you don't want to know the sex of your baby, tell them before they do the test!

[Online Provider Directory](#)



Here's what you can expect:

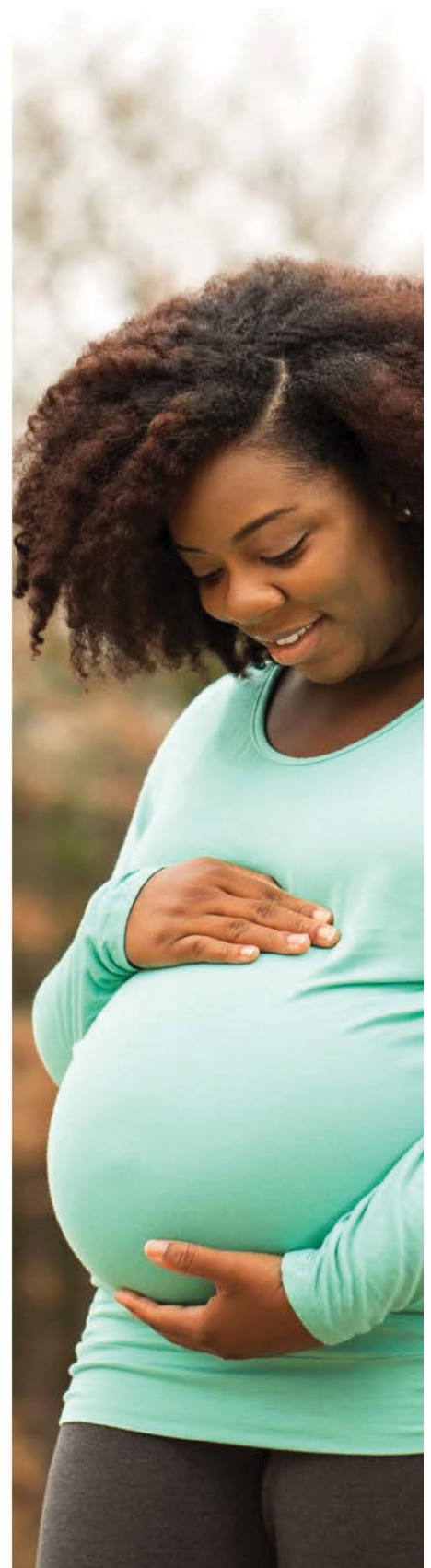
- Someone will draw your blood to check your baby's brain and spinal cord. This is called Alpha-Fetoprotein (AFP).
- You will get a glucose tolerance test (GTT) around 24 to 28 weeks to see how your body controls blood sugar.
 - If you have a history of diabetes, your OB may do it as early as 13 to 14 weeks.
 - You should not eat or drink anything after midnight the night before the test.
 - The lab will draw your blood after you drink a glucose solution.
- Your OB may want to do other tests. They will explain the tests, ask for your permission, and explain why they want to do them.
- **It's too early for delivery.** Call your OB if you have any warning signs! If you're not sure if something is a warning sign, call our **24-hour Nurse Advice Line** at [\(833\) 514-1809](tel:8335141809) (TTY: 711).
- Drink at least eight glasses of water every day.
- As your belly gets bigger, your balance will be off. Take extra care when using bathtubs and stairs
- Talk to your OB or doula about finding and signing up for prenatal classes
- Ask your OB when and how to start keeping track of your baby's movements



Your 3rd trimester

Weeks 27 to 40 | Months 7 to 9

- You need two visits during both your 7th and 8th month of pregnancy.
- You need weekly visits during your 9th month of pregnancy.
- If you have any pregnancy complications, your OB may see you more often and may do extra tests. These visits are important for you and your baby.
- If you haven't had a glucose tolerance test yet, your OB or doula should schedule one for you.
- Talk to your OB or doula about finding and signing up for prenatal classes.
- Your baby will kick, stretch, respond to light and sounds, and weigh about five or six pounds.
- Your OB might do a swab of your vagina around 36 weeks. This makes sure there are no infections that could be unsafe for your baby during delivery. You might not know you have an infection.
- If you think you've had contractions, your OB may want to check your cervix.
- If you haven't had any contractions, you can ask your OB not to check your cervix.
- If you're having signs of labor or any warning signs, call your OB or doula right away. If you're unsure if something is a warning sign, call our **24-hour Nurse Advice Line** at (833) 514-1809 (TTY: 711).
- A healthy pregnancy could last longer than 40 weeks. If this happens, you might have two visits a week.

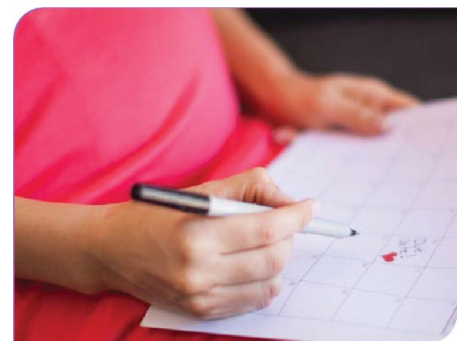




Getting prepared

Ways to get prepared and things to know

- Pack a bag for the hospital in your 3rd trimester.
- If you go into labor on your own and your contractions aren't happening often enough or dilating your cervix, your OB might give you medicine to help start your labor.
- Your OB may decide to start your labor for you. This is called induction. Some reasons for this are:
 - You're past your due date
 - Your blood pressure is too high
 - You have other health problems
 - Your water has broken, but labor hasn't started
 - Your baby has health problems
- Labor is coming too soon if you have:
 - Lightening or dropping (your baby had dropped or settled deeper into your pelvis)
 - Bloody show (mucus with streaks of blood)
 - An increase in energy (nesting)



Braxton Hicks vs. true labor

There is a difference between false labor (Braxton Hicks) and true labor.

False labor (Braxton Hicks)	True labor
<ul style="list-style-type: none">• Irregular contractions• Does not get stronger• Does not become more frequent• Goes away when you drink water, walk, or change positions	<ul style="list-style-type: none">• Regular contractions• Gets stronger• Becomes more frequent• Might start in your back and hug around to your belly• Does not go away when you drink water, walk, or change positions• Dilate the cervix

Things to know:

- If your water breaks, it might be a small amount of fluid or a gush. It can be clear, green, yellow, or blood-tinged. Call your OB for instructions and let your doula know. Do not take a bath or insert a tampon.
- If you think you're in labor, start timing your contractions, let your Doula know, and call your OB. They will ask you about your contractions.
 - o You'll need something to record time, such as your cell phone.
 - o Time your contractions from the start of one to the start of the next one. This tells you how often they are coming.
 - o Time each contraction from start to finish. This tells you the length of each contraction.
 - o **Do not drive yourself** to the hospital if you're in labor. Have a friend or family member drive you, and wear your seatbelt. If you don't have anyone to drive you, call 911.
 - o Go straight to the hospital if you have heavy vaginal bleeding or if you don't feel your baby moving.

If you have any labor signs before 37 weeks, call your OB right away!

Different Types of Deliveries

Vaginal delivery

- This is when the baby passes through the vagina or birth canal. Most women have vaginal deliveries. Contractions will dilate your cervix during labor until it is completely open or dilated. You will push your baby out of your vagina.
- You can expect to be in the hospital for up to two days after delivery.
- After delivery, staff will show you how to care for yourself, including ice packs, sitz baths, numbing spray, and pain relief.

Cesarean section (C-section) delivery

- This is when your baby is born through surgery. Your baby is born through a cut that your OB makes in your belly and uterus. Sometimes a baby cannot be safely delivered through the vagina, and a C-section is needed. You might schedule this surgery and know ahead of time, or you might need a C-section if something unplanned happens during labor, such as:
 - You are in labor too long or your cervix won't dilate completely
 - You or your baby do not tolerate labor (distress)
- You can expect to be in the hospital for up to four days.
- You will go to the recovery room for a few hours after the surgery. The nurse will bring your baby to you once you're in your regular room.

Vaginal birth after C-section (VBAC)

This is a vaginal birth after a C-section birth.

What to Expect After Delivery

- On the day of delivery, you might not get to hold your baby right away. The nurse might take the baby to the nursery to watch them closely for a few hours.
- After delivery, staff will check your vitals and incision regularly and show you how to care for yourself.
- Once you are ready to leave the hospital, the staff will give you personal care items to take home for you and your baby.





Choices for baby

Your baby's doctor

- Choosing your baby's doctor is a big decision. You want to be happy with your choice and trust their care.
- A pediatrician is a doctor who cares for children from birth to early adulthood.
- A family primary care provider (PCP) is a doctor who provides care from birth to old age.
- You'll want to choose your doctor before you deliver and ensure they accept new patients. Your baby will need to see the doctor very soon after birth.
- If you already have children and are happy with their doctor, you can take your newborn to the same doctor.
- Ask friends, family, neighbors, or co-workers for doctors they like and trust. Your OB or doula can also help you choose the best doctor for your baby.
- You can visit the office and meet the doctor before deciding. Call and ask the office for a tour and ask questions such as:
 - What are your hours?
 - What should I do if my baby has an emergency?
 - Who will take care of my baby when the doctor is off or out of town?
 - What hospital or emergency room (ER) does the doctor use?
 - What kind of support do you have if I want to breastfeed?

Provider Directory



If you need help finding a pediatrician, review the online provider directory. Scan the QR code below to get started.

Safe travel tips and car seats

- When your baby is ready to be discharged from the hospital, you'll need a car seat.
- Always read the instructions for the car seat. Learn how to properly install the seat in the car and how to secure your baby in the seat. You must install the car seat before you can take your baby home.
- If you are unsure how to install the car seat, call your local police, fire station, or health department. They will check the car seat for free.
- Always place car seats in the back seat.
- Infants should face the rear of the car until they are about two years old.
- Ask about the car seat rules on public transportation.
- If you borrow or buy a used car seat:
 - Check with the manufacturer for any safety recalls.
 - Make sure it has never been in an accident.
 - Do not use the seat if it's expired.
- When it's cold outside, strap your baby into their car seat first. Then, cover them with a blanket. This will make sure the straps fit the baby properly. Using a blanket or bulky coat between the baby and straps is unsafe.





Safe sleep

SIDS/SUID is when infants die during sleep and is the leading cause of death for infants between the ages of one month and one year. Many deaths happen because of unsafe sleeping environments.

Safe sleep — ALWAYS do this!	Unsafe sleep — NEVER do this!
<ul style="list-style-type: none"> • When it's time to sleep, lay your baby on their back. • When it's time to be awake and active, lay your baby on their tummy for "tummy time." Please make sure you're with them during tummy time. • When it's time to sleep, put your baby in their own area, such as a <ul style="list-style-type: none"> ◦ Safety-approved crib ◦ Bassinet ◦ Pack and Play • Use a safe sleep surface, such as a safety-approved mattress with a fitted sheet • When it's time to sleep, dress your baby in light clothing, such as a sleeper or something that's not too hot or too cold. 	<ul style="list-style-type: none"> • Don't put your baby to sleep on their belly. • Don't use bumper pads or put blankets, pillows, toys, or stuffed animals in your baby's sleep area. • Don't use an outdated or unapproved crib. • Don't sleep with your baby (co-sleeping or bed-sharing) or let anyone sleep with your baby. • Don't let your baby sleep on an adult bed, a sofa, a pillow, or any other soft surface, in a bouncy seat, carrier, or swing. Babies can suffocate in these places. If your baby falls asleep in one, move them to a safe sleep area. • Don't smoke during pregnancy or allow anyone to smoke around your baby.

Breastfeeding

Breastfeeding is best, but it's not always right for everyone. It's not safe to breastfeed with certain medical conditions. Talk to your OB to see if breastfeeding is right for you.

Benefits of breastfeeding for you

- Brings you closer to your baby
- Is more convenient because it's always ready, at the right temperature and the right amount
- Costs less money
- Your baby's diapers are less smelly
- Helps your uterus go back to its normal size faster

Benefits of breastfeeding for your baby

Breast milk is the perfect food because it:

- Is made by you for your baby
- Is it easier for your baby to digest
- Has antibodies to help your baby's immune system fight infections
- Lowers your baby's chance of getting colds, allergies, and asthma
- Lowers your baby's chance of having stomach problems like gas and colic problems that can cause crying
- Lowers your baby's chance of being overweight as a teen and adult
- Lowers your baby's chance of having diabetes as a teen and adult

Bottle feeding

If you choose not to or cannot breastfeed due to a medical issue, baby formula is a great choice. Formula is made from cow milk and/or soy. If you sign up for the WIC program, they will help you get baby formula.

Changing formulas can be stressful to a baby's system. They may be fussy and have more gas or constipation. If you need to change your baby's formula, talk to your baby's doctor.



Back at home

Let your body heal

Your body has been through a lot, and it will take time to heal.

There are things you can do to help your body heal:

- Get plenty of rest and try to sleep when your baby sleeps.
- Keep taking your prenatal vitamins and any prescribed medicines.
- Keep eating a variety of healthy foods and drink plenty of fluids.
- Take advantage of your postpartum doula visit.
- Don't lift anything heavier than your baby until your OB tells you it's ok.
- Ask family and friends to help with household chores and meals. This will allow you more time to rest and bond with your baby.
- Use ice packs, peri bottles, numbing spray, sitz baths, and witch hazel pads for comfort.
- If you had a C-section, check your incision daily for redness, bleeding, or drainage.
- If you cannot see your incision, look in a mirror or have a family member look at it.
- Don't have sex until your OB tells you it's okay. Wait at least 18 months before you get pregnant again.
- Your period might start around 6 to 8 weeks after delivery. If you're breastfeeding, you might not have a period. Even if you don't have a period, you can still get pregnant. It's important to use birth control.
- As your body adjusts to hormone changes, you might have mood swings, night sweats, skin changes, hair loss, or texture changes. These things often go away within a few weeks. Talk to your OB if you have concerns.



Baby blues or postpartum depression?

There is a difference between baby blues and postpartum depression. Many women have some form of baby blues that go away in a few days or weeks. These symptoms are mild and do not need treatment. If these feelings last longer than two weeks, you might need treatment.

Baby blues:	Postpartum depression:
<ul style="list-style-type: none">• Sadness• Mood swings• Crying spells• Decreased appetite• Difficulty sleeping• Feeling nervous for no clear reason• Feeling scared for your newborn or yourself for no clear reason	<ul style="list-style-type: none">• Constant sadness, hopelessness, or feeling overwhelmed• Crying all the time• No energy or feeling tired all the time• No appetite• No interest in spending time with friends or family or doing things you used to enjoy• No interest in taking care of yourself or your baby• Feeling like things will never be the same

Things you can do

- Let your OB and doula know how you are feeling.
- Get plenty of rest
- Keep eating a rainbow of colors at every meal
- Keep taking your prenatal vitamins.
- Talk to your partner, family, or friends
- Join a support group with other new moms
- Ask for help with household chores
- Ask people you trust to watch your baby
- so you can have some time for yourself



Postpartum depression can start any time after delivery. Symptoms are more serious and can last a few weeks to several months. Call your OB or doula right away if you or your loved ones see any signs of postpartum depression. If you have thoughts of hurting yourself, your baby, or anyone else, please call 911

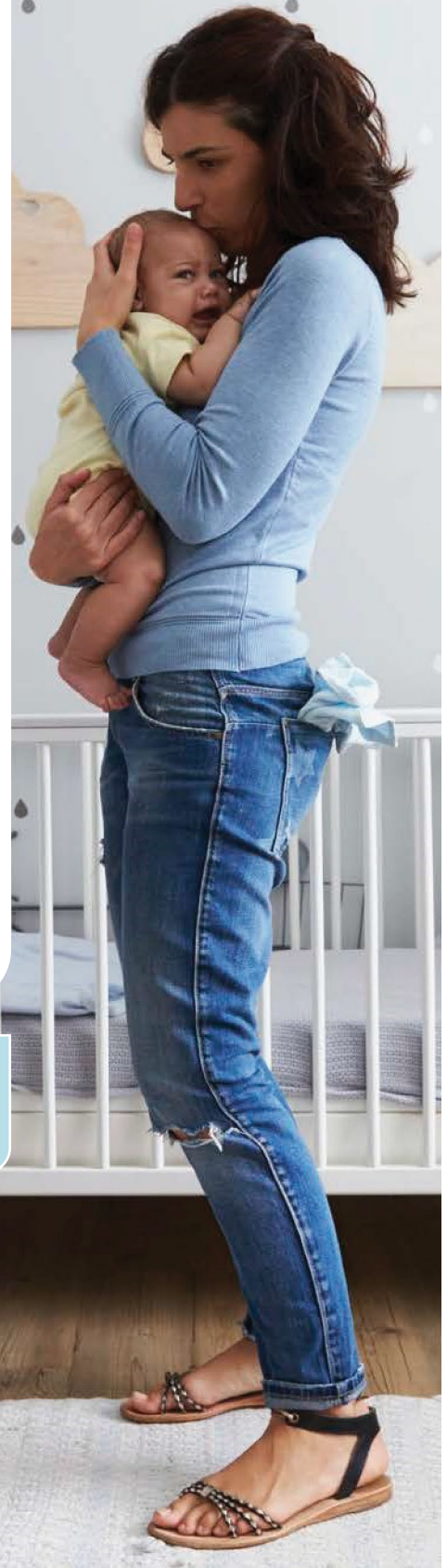
All babies cry.
It's the only way they can
communicate.

What are the most common reasons babies cry?

- Hunger (this is the first thing you should think of when your baby cries)
- Stomach problems from colic or gas
- Need to be burped
- Dirty or wet diaper
- Need to sleep
- Need to be held or cuddled
- Too hot or cold
- Something is hurting or bothering them (this could be a clothes tag or buttons irritating their skin)

If you've checked these things and your baby is still crying, you can put them in a safe sleep area on their back in a crib. Walk away to take a few minutes to calm yourself down. Check on the baby every 10 to 15 minutes until you are both calm.

**Never shake a baby. Shaking is abuse and
your baby can die.**





Your postpartum visit

It's very important to see your OB after delivery. If you had complications or a C-section, see your OB two weeks after delivery. Then, see your OB again for your regular postpartum visit at six weeks.

If you have any of these warning signs, call your OB right away:

- Burning or pain when you urinate
- Vomiting or diarrhea that does not stop
- Feeling dizzy or faint
- Having chills, a rash, or fever
- Blurred vision, seeing spots or other vision changes
- Sudden swelling in your face or hands
- A headache that does not go away
- A sudden increase in swelling in your feet or legs

What happens at a postpartum visit?

Your OB checks to make sure you're healing from delivery. Your OB will discuss birth control options with you. If you had complications during your pregnancy, it's even more important to go to your postpartum visit.

See your PCP

It's important to make an appointment with a PCP. Your PCP will take care of most of your care and make referrals when needed. Think of your PCP as your "medical home" the place that knows you the best!

If you have any medical needs after your delivery, your OB should tell you to call your PCP.

If you haven't had a dental or vision exam during your pregnancy, now is the time to make an appointment to get them done.

If you need help finding a PCP or a dentist, visit the online provider directory.

Provider Directory



Why are immunizations so important?

Immunizations are shots that help the body fight disease. Each shot fights a different disease, like chickenpox, measles, or mumps. Kids need shots to keep them safe from disease and to get ready for school. Talk to your doctor about which shots you or your kids need. Remember, these shots are covered at no cost to you.

Here is a look at the current shot schedule recommended by the Centers for Disease Control and Prevention (CDC):

Shots you need:	When you need them:
Abrysvo RSV vaccine	<ul style="list-style-type: none">• 1 dose: 32 through 36 weeks of pregnancy, administered immediately before or during RSV season
Shots your kids need:	When they need them:
Hepatitis B (HepB)	<ul style="list-style-type: none">• 1st dose: Birth• 2nd dose: 1 to 2 months• 3rd dose: 6 to 18 months
Rotavirus (RV): <ul style="list-style-type: none">• RV1 (two doses)• RV5 (three doses)	<ul style="list-style-type: none">• 1st dose: 2 months• 2nd dose: 4 months• 3rd dose: 6 months
Respiratory Syncytial Virus (RSV) <ul style="list-style-type: none">• Nirsevimab	<ul style="list-style-type: none">• 1st dose: infants 8 months or younger born during or entering their first RSV season• 2nd dose: infants and children aged 8-19 months who are at increased risk for severe RSV disease and entering their second RSV season.
Diphtheria, Tetanus, Acellular Pertussis (Dtap)	<ul style="list-style-type: none">• 1st dose: 2 months• 2nd dose: 4 months• 3rd dose: 6 months• 4th dose: 15 to 18 months• 5th dose: 4 to 6 years



Shots you need:	When you need them:
Haemophilus Influenza Type B (Hib) (three or four doses)	<ul style="list-style-type: none"> • 1st dose: 2 months • 2nd dose: 4 months • 3rd dose 6 months • 4th dose: 12 to 15 months
Pneumococcal Conjugate (PCV13)	<ul style="list-style-type: none"> • 1st dose: 2 months • 2nd dose: 4 months • 3rd dose 6 months • 4th dose: 12 to 15 months
Inactivated Poliovirus (IPV)	<ul style="list-style-type: none"> • 1st dose: 2 months • 2nd dose: 4 months • 3rd dose: 6 to 18 months • 4th dose: 4 to 6 years
Influenza (IIV) or Influenza (LAIV)	<ul style="list-style-type: none"> • Yearly shot (1 or 2 doses) • 6 months to 18 years
Measles, Mumps, Rubella (MMR)	<ul style="list-style-type: none"> • 1st dose: 12 to 15 months • 2nd dose: 4 to 6 years
Varicella (VAR)	<ul style="list-style-type: none"> • 1st dose: 12 to 15 months • 2nd dose: 4 to 6 years
Hepatitis A (HepA)	<ul style="list-style-type: none"> • Two doses: 12 to 23 months
Tetanus, Diptheria, Acellular Pertussis (Tdap)	<ul style="list-style-type: none"> • 11 to 12 years
Human Papillomavirus (HPV)	<ul style="list-style-type: none"> • Two doses. 9 to 14 years • Three doses: 15 years and older
Meningococcal	<ul style="list-style-type: none"> • 1st dose: 11 to 12 years • 2nd dose: 16 years



Virginia Medicaid

Department of Medical Assistance Services

DOULA CARE RECOMMENDATION FORM

If a member is enrolled in Fee-For-Service, please fax forms to 804-452-5447.

If a member is enrolled in a managed care organization, please refer to that MCO for detailed form

If you are a [Virginia Medicaid member](#) and are pregnant or have given birth within the last six months....

You are eligible for community doula care to provide you physical, emotional, and informational support before, during and after you give birth. Your doula must get a licensed practitioner's recommendation to provide this care under the VA Medicaid program. You can request a recommendation (for example, from a doctor/midwife/nurse¹) and give it to your doula. You can ask for a recommendation even if you don't know who your doula will be yet.

If you are a [doula](#)....

You must secure and retain the record of a licensed practitioner's recommendation for each member prior to initiation of their doula care, storing the record in a manner consistent with HIPAA requirements. A copy of this form must be provided to the Managed Care Organization in which the member is enrolled (for managed care members) or the Department of Medical Assistance Services (for Fee-for-Service members) prior to initiating services.

If you are a [licensed practitioner](#)¹....

By filling out this recommendation form, you are enabling this individual to access non-clinical community doula services. A recommendation is not the same as a prescription/medical order.

Licensed Practitioner's Recommendation for Doula Care

VA Medicaid member full legal name (first, middle,

last): VA Medicaid member DOB or ID#:

Licensed Practitioner's Signature:

Licensed Practitioner's full legal name (first, middle,

last): Licensed Practitioner's NPI number:

Date of recommendation (MM-DD-

YYYY): Name of doula (if known):

Name/address of member's ob/gyn provider (if known):

¹ For the doula benefit, VA Medicaid defines a “licensed practitioner” as licensed clinicians, including physicians, licensed midwives, nurse practitioners, physician assistants, and other Licensed Mental Health Professionals (Virginia Administrative Code 12VAC35-105-10 defines a Licensed Mental Health Professional as a: physician, licensed clinical psychologist, licensed professional counselor, licensed clinical social worker, licensed substance abuse treatment practitioner, licensed marriage and family therapist, or certified psychiatric clinical nurse specialist). Recommendations from licensed, non-clinical providers will not be accepted. The recommending clinician need not be a VA Medicaid provider. VA Medicaid’s doula services are provided as a preventive service. Federal Medicaid law (42 C.F.R. Section 440.130(c)) indicates: “Preventive services” means services recommended by a physician or other licensed practitioner of the healing arts acting within the scope of authorized practice under State law to (1) Prevent disease, disability, and other health conditions or their progression; (2) Prolong life; and (3) Promote physical and mental health and efficiency.

Notes

Use this page to write questions for upcoming appointments or make notes from recent appointments.

