



Pregnancy Guide

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Welcome to Pregnancy!

Few experiences in life are as meaningful and significant as welcoming a baby into the world. And whether this is your first pregnancy or your fourth, you can look forward to 40 memorable weeks!

Choosing Renown Medical Group – Women’s Health is the first step to a safe and healthy pregnancy. Our expert team has seven board-certified obstetrician/gynecologists offering more than 80 years of experience. Not only will your primary obstetrician (OB) coordinate pregnancy care, you’ll also have the opportunity to meet, and get to know, each OB.

Our OBs develop a personal relationship with every mom, so they learn about your birth choices and preferences. The health and safety of you, and your baby, are top priority. Whether you go into labor during the day or in the middle of the night, a board-certified OB will be available. We also offer:

- Six private labor assessment rooms where moms-to-be are evaluated upon arrival to determine their labor status. A private lounge is available to accommodate your support persons.
- 15 newly renovated private Labor & Delivery rooms and nine private antepartum rooms (for pregnant mothers who require hospitalization) are designed with your comfort in mind.
- 42 private Baby & Family Suites offer top amenities and a soothing, comfortable environment where you can breastfeed and bond with your baby. A newborn nursery is also available for closer monitoring, if necessary.
- 24/7 transition nurse coverage for infants in the first two hours of life - these nurses support and facilitate skin-to-skin contact between mothers and babies.
- 24/7 anesthesiologist as part of your healthcare team.
- If you have a cesarean birth, everything you’ll need is on the same floor.
- Labor support items, including birthing balls, peanut balls and rocking chairs are all available upon request..

If you’d like to learn more - visit renown.org/childbirth, take a virtual tour online at renown.org/HavingABaby or call **775-982-5000**. Thank you for trusting Renown to guide you through a safe pregnancy.

The First Visit: What to Expect

Your first appointment is a great opportunity to get to know your OB and start discussing your birth plan. Ask all your questions, address any concerns and, of course, feel free to express your hopes, expectations — and excitement!

Your OB can learn a lot about the health of you and your baby on the first visit. So come prepared with your medical history and any personal information to get a full picture of your health. The more your OB knows, the better. You'll receive a physical exam, including a pap smear, and a blood test.

Routine Testing

We test for the presence of cervical cancer, Rh factor, anemia and infections including: chlamydia, gonorrhea, syphilis, rubella and hepatitis B. Testing for HIV is optional but highly recommended by The Centers for Disease Control (CDC) to further ensure your baby's health.

Offices & Locations

**Renown Medical Group –
Women's Health, Center F**
901 E. Second St., Suite 307
Reno, NV 89502

**Renown Medical Group –
Women's Health,
Medical Pavilion B**
Renown South Meadows
Medical Center
10085 Double R Blvd., Suite 255
Reno, NV 89521



Get Your Folic Acid

This all-important prenatal vitamin helps prevent birth defects of the brain and spine. Most doctors recommend taking folic acid prior to conception, throughout pregnancy and after while nursing. Inform your doctor if you're taking any other supplements and medications, and discuss how much folic acid is right for you.

Vaccinations

During pregnancy you should receive a dTAP shot to protect against pertussis, diphtheria and tetanus. A flu shot is also a must during flu season. You may need MMR, hepatitis B or chickenpox vaccinations, too. Your OB will help determine which shots you may need.

Due to infection prevention standards, we ask that you shower (or bathe) before each visit to Renown Medical Group – Women's Health.

Regular Pregnancy Visits

Schedule an appointment every four weeks, until your pregnancy reaches 28 weeks. Your visits will increase to one every two weeks when you reach week 34. At 36 weeks, you'll see your healthcare provider weekly until delivery. High-risk pregnancies require more frequent visits.

Each appointment is fairly routine: Fetal heart tones, fundal height, urine, weight and blood pressure are checked. Other tests and screenings are done at key points throughout your pregnancy, including:

Ultrasound: This painless test is usually given between 18 and 22 weeks to check your baby's development. You can also learn the sex of your baby. Some women receive an ultrasound before 12 weeks to determine their due date. Additional ultrasounds are given for high-risk pregnancies.

Gestational Diabetes: This non-invasive screening is done between 24 and 28 weeks. You'll drink a sugary beverage and undergo a blood draw one hour later.

Group B Strep (GBS): Performed between 35 and 37 weeks, this test swabs your vagina and rectum to obtain a culture for analysis. GBS is a normal bacteria found in about 25 percent of healthy women. If you test positive, you'll receive antibiotics during labor and delivery to protect your baby from the bacteria.

Additional Testing: You Decide

Additionally, you have the option of testing for various genetic diseases and disorders. Discuss the need, benefits and any risks of these tests with your provider. Ask your insurance company to confirm which screenings are covered. A sample of some of the genetic screenings we offer include:

Cystic Fibrosis (CF) Screening: Both parents must carry the gene for your baby to develop CF, which is determined through a blood test or mouth swab. If necessary, your baby can be screened in utero for this disease.

First-Trimester Screening: This ultrasound is a first-line screening for Down syndrome risk and other genetic issues.

Quad Screen: This blood test, given between 15 and 20 weeks, identifies your baby's risk for Down syndrome and neural tubal defects — defects of the brain, skull and spinal cord.



Seeking Medical Attention

Being uncomfortable is normal during pregnancy. After all, your body is going through a miraculous change. Here's information for you to know how (and when) you can manage symptoms at home and when to contact Renown Medical Group – Women's Health **(775-982-5000)**.

When to Go to the ER

But first things first. Go directly to the ER at the hospital where you plan to deliver, if you have any of the following:

- A headache with vision changes
- Excessive bleeding
- Your water breaks
- Painful contractions occurring more than six times an hour if you're less than 36 weeks
- Decreased fetal movement
- Abdominal (stomach) trauma or car accident

The chart below explains some pregnancy symptoms, how to ease them at home, and when to make a call or seek medical advice. Our office staff screens and takes messages on all non-emergency calls, and every effort is made to return calls on the same day. If you leave a message, keep your phone handy so we can reach you.

In case of emergency, call 911.

ILLNESS/SYMPTOM	HOME TREATMENT	CALL THE OFFICE	GO TO THE HOSPITAL
<p>Urinary Urgency and/or Pain with Urination</p> <p>(Generally not a concern during the second trimester.)</p>	<ul style="list-style-type: none"> • Urinate as needed • Drink 8-12 glasses of water a day — especially if you're nursing 	<ul style="list-style-type: none"> • Feeling an urgency to void, yet very little urine is produced • Pain when urinating 	<ul style="list-style-type: none"> • Contractions • Upper back pain • Blood in urine • Fever of 101 degrees or higher
<p>Cold and Flu</p>	<ul style="list-style-type: none"> • Drink more fluids • Use a vaporizer • Take Sudafed, Tylenol, Robitussin, Actifed as needed • Rest 	<ul style="list-style-type: none"> • Presence of green or yellow mucous • 5 days with continual cough • Fever of 101 degrees or higher 	<p>Wheezing or difficulty breathing</p>
<p>Rupture of Membranes</p>	<p>None; go to the hospital</p>	<p>None; go to the hospital</p>	<p>Water breaks, whether it's a small flow or a gush of fluid</p>
<p>Vomiting</p> <p>(Common for pregnant women during the first trimester.)</p>	<ul style="list-style-type: none"> • Rest • Eat plain popcorn • Consume solids and liquids separately; for example, eat dry cereal and follow it up an hour later with a glass of milk • Avoid the sun • Take 25 mg of vitamin B6 3 times a day 	<ul style="list-style-type: none"> • Weight loss of more than 3 pounds • Inability to retain both liquids and solids for over 24 hours 	<ul style="list-style-type: none"> • Go straight to the hospital when vomiting is accompanied by stomach pain • Indicators of dehydration such as poor skin elasticity, feeling tired, dry mouth • Not able to retain liquids over 12 hours

ILLNESS/SYMPTOM	HOME TREATMENT	CALL THE OFFICE	GO TO THE HOSPITAL
<p>Labor</p> <p>(Don't panic. Mild contractions are normal without other symptoms.)</p>	<ul style="list-style-type: none"> • Drink 8-12 glasses of water a day • Monitor potential dehydration; it can bring on contractions, especially in the summer • Rest up — you'll need it when you deliver 	<ul style="list-style-type: none"> • Contractions (regular or not) that are stronger than Braxton-Hicks (irregular, mild contractions) • More than 6 contractions an hour when you're under 36 weeks 	<ul style="list-style-type: none"> • Heavy bleeding — more than your typical period • Contractions every 5 minutes for an hour • Contractions and/or pain that won't go away • Water breaks, whether it's a small flow or a gush of fluid
<p>Swelling</p> <p>(Swelling in the ankles, face, hands, feet or legs is normal.)</p>	<ul style="list-style-type: none"> • Decrease salt consumption and drink plenty of liquids — 8-12 glasses of water a day • Rest lying on your left side • Put up your feet and wear comfortable shoes 	<p>Visible increase in swelling in the feet, ankles, face and hands</p>	<ul style="list-style-type: none"> • Swelling coupled with decreased fetal movement • Rise in blood pressure (if you have a home-monitoring system) • Rapid swelling or swelling accompanied by vision changes, headache or upper abdominal pain
<p>Spotting, Bleeding or Cramping</p> <p>(Note that some bleeding and cramping might occur after an internal exam.)</p>	<p>Avoid lifting more than 20 pounds</p>	<p>Bleeding is less than a period combined with mild cramping — common in the 1st trimester</p>	<ul style="list-style-type: none"> • Cramping is comparable to or worse than menstrual cramps • Heavy bleeding requiring a new pad at least every 2 hours
<p>Decreased Baby Movements After 24 Weeks</p>	<ul style="list-style-type: none"> • Eat a light snack • Rest • Drink juice or soda 	<p>Your baby moves less than 4 times in 30 minutes during what is typically an active period</p>	<p>Lack of fetal movement along with extreme abdominal pain</p>



Common Symptoms of Pregnancy

(They require a phone call or an ER visit only in extreme cases.)

Nausea: Most common during the first trimester, but it can be throughout pregnancy. Lessen it by eating five to six smaller meals throughout the day. Eat bland foods such as cereal, dry toast, plain popcorn or crackers and drink bubbly beverages such as 7-Up or ginger ale. Ginger is a natural remedy for nausea.

Abdominal Cramps: Empty your bladder and drink one to two glasses of water. If you are less than 36 weeks pregnant and having more than six contractions an hour after taking these steps, contact the office or go to the hospital.

Leg Cramps: Prevent leg cramps, by eating potassium and calcium-rich foods. These include: whole grains, dark green vegetables, bananas, beans and low-fat milk. Also, make sure you are drinking plenty of water.

Aches and Pains: Backaches are common as your baby grows. You may feel pulling and stretching in the pelvic area due to weight gain, loose joints or pressure from your baby's head. Take a load off your feet by resting with them up, and also practice good posture. Treat discomfort and pain with heat and Tylenol.

Constipation: To help with this common problem, drink plenty of water. Also eat high-fiber fruits, vegetables, and whole grains. If you develop hemorrhoids, try Epsom salt baths three to four times a day, 15 minutes at a time. If discomfort persists, contact the office.

Discharge: An increase in white, milky vaginal discharge is common during pregnancy. If it becomes watery or smells bad, call the office or go to the hospital.

Heartburn: It happens more at the end of pregnancy, when your baby is largest. You can avoid much of this discomfort by eating five to six smaller meals a day. Specifically, do not lay down (or go to sleep) after eating.

Pregnancy-Safe Medications

The energy you use growing a baby leaves you more likely to catch illnesses - including flu and colds. If you feel under the weather, here's a list of over-the-counter (OTC) remedies that are safe to take during pregnancy. Each mother and each pregnancy are unique, so consult your OB before taking any medication to make sure you, and baby, stay safe and healthy.

Colds/Allergies:

Chlor-Trimeton, Dimetapp
Vicks Vapor Rub
Drixoral Non-Drowsy
Mucinex (guaifenesin)
Tylenol Cold & Sinus (avoid if you have high blood pressure)
Benadryl
Claritin
Zyrtec

Constipation:

Fibercon
Metamucil
Colace
Miralax
Dulcolax Laxative Suppository

Cough:

Cough Drops
Robitussin (plain)
Actifed

Gas

Mylicon
Phazyme
Gas-X

Headaches:

Cold Compress
Tylenol (Acetaminophen)

Heartburn:

Zantac
Pepcid, Pepcid Complete
Aciphex
Maalox
Mylanta
Tums (limit 4 a day)
Prevacid
Prilosec

Hemorrhoids:

Hydrocortisone OTC
Vaseline lotion applied topically
Anusol
Preparation H
Tucks

Leg Cramps:

Benadryl

Stuffy Nose:

Saline nasal spray

Nausea:

Ginger root
Sea Bands – Acupressure
Unisom
Dramamine
Emetrol
Vitamin B6

Sleep Aids:

Chamomile tea with warm milk
Ambien
Benadryl
Tylenol PM
Unisom

Throat:

Cepastat
Cough Drops
Cepacol
Salt (gargle with warm water)

Tooth Pain:

Orajel

Yeast Infection:

Terazol 3
Gyne-Lotrimin
Monistat-3 (avoid 1-day creams)

Prenatal Vitamins:

All OTC prenatal vitamins are safe. DHA is an optional addition to your prenatal vitamins. DHA is found in some plant-based vitamins and fish oil.

Nutrition: Eating When Expecting

Nutrition is vital before, during and after pregnancy. Sure, you may get a few cravings and have the occasional 'treat.' But following some basic eating guidelines will ensure you, and your baby, get the nutrition you need

What's the optimum diet for a pregnant woman?

- 6 servings of whole grains per day
- 3 servings of dairy
- 5 servings of fruits and vegetables
- 1 to 3 servings of protein: extra lean chicken without the skin, peas and beans, or fish
- 8 or more glasses of water per day

Minerals and Calcium

If you're a vegetarian, you may need supplements to make sure you're getting enough protein, vitamin B12, vitamin D and iron. In fact, lactose intolerance can actually improve during pregnancy. But if your dairy issues persist, talk to your healthcare provider about supplements, so you're getting enough calcium. Remember that milk is not the only calcium source. It can be found in spinach, kale, yogurt, cheese, salmon and white beans.

Stay away from:

- Paté and all meat spreads
- Raw eggs, raw or undercooked meat, and shellfish
- Fish that might contain mercury or heavy metals, such as tuna
- Unpasteurized milk
- Smoked seafood
- Imported, soft cheeses

Work with your OB to establish an eating plan that's right for you. For example, during your first trimester you might eat a small breakfast if you have morning sickness. Toward the end of your pregnancy you may eat a lighter dinner, if heartburn is a problem. Consider it an adventure, and be flexible. An important piece of the nutrition puzzle is necessary weight gain — embrace it.

Healthy weight gain is normal. If you're putting on a healthy number of pounds, so is your baby. The following are general weight recommendations for pregnancy. Consult your OB about how much you gain, to ensure you're maintaining the right weight for your body mass index (BMI).

Underweight women (BMI < 20): 30-40 pounds

Normal-weight women (BMI 20-25): 25-35 pounds

Overweight women (BMI 26-29): 15-25 pounds

Obese women (BMI > 29): up to 15 pounds



NUTRIENT (DAILY DOSE)	FUNCTION	SOURCES
Vitamin B12 (2.6 mcg)	Maintains nervous system; vital component of red blood cells	Found only in animal sources including poultry, meat, milk, liver, fish; vegetarians require a supplement
Vitamin C (85 mg)	Promotes healthy gums, bones and teeth; helps the body absorb iron	Melon, oranges and strawberries
Folate (600 mcg)	Assists in producing blood and protein	Liver, beans, oranges, nuts and green leafy vegetables
Calcium (1000 mg)	Helps build strong bones and teeth	Sardines, cheese, milk and yogurt
Vitamin B6 (1.9 mg)	Assists body in forming red blood cells; helps the body synthesize protein, fat and carbohydrates	Ham, whole grain cereal, liver, bananas, pork and beef
Vitamin A (770 mcg)	Assists with bone growth; promotes healthy eyesight and skin	Sweet potatoes, carrots and dark leafy greens
Iron (27 mg)	Prevents fatigue; helps form red blood cells that delivering oxygen to your baby	Iron-fortified cereals, lean red meat, beans and peas

Pregnancy FAQ's

Can I travel?

Generally it's safe for you to travel during pregnancy. However, consult your provider. With this in mind, it's best to stay close to home in the last six weeks. When you fly, take breaks by standing up and walking around every couple of hours. Always wear a seat belt with the lap belt resting below your belly. Call our office immediately or go to the hospital where you will deliver if you are involved in a car accident.

Is exercise OK?

Exercising 30 minutes a day is encouraged. Jogging, aerobics, swimming, walking, yoga, biking and even strength training are considered healthy. Listen to your body: Don't push yourself too hard, and make sure you drink plenty of fluids. Avoid exercises where you lie on your back after 20 weeks and those that put you at risk of falling or causing trauma to your baby. Ask your provider about specific concerns.

What about sex?

Having sex is absolutely fine unless your pregnancy presents complications or you find that it's uncomfortable. Refrain from sex and exercise if your OB has determined your baby is growth-restricted or you experience:

- Dizziness or general weakness
- Leaking amniotic fluid
- Vaginal bleeding
- Decreased fetal movement
- Chest pain
- Headache
- Preterm labor
- Uterine contractions

How does pregnancy affect dental care?

Teeth and gums are more sensitive throughout pregnancy. Tell your dentist that you are pregnant and try to avoid X-rays altogether. Consult your OB with more specific questions.

I'm so tired. Why? Is there a preferred position that will help me sleep better?

Feeling tired is normal, and your pregnant body needs more sleep. Shoot for 8-10 hours a night. Take cues from your body figure out the amount of sleep you need.

Sleeping on your side allows maximum blood flow to your baby. Try not to sleep on your back, as it can cause your blood pressure to drop. To increase your comfort level, place a pillow behind your back and one between your knees. As the weeks and months go by, use more pillows and change positions often to stay comfortable.

How long before I feel my baby move?

Usually your baby moves between 16 and 25 weeks, most often after a meal or a snack, when you're nervous or once you go to sleep. In the beginning, movements may feel like butterfly flutters, but as your pregnancy progresses you will feel more movement.

What's the best way to monitor my baby's movements?

The best time to monitor your baby's movements is 20 to 30 minutes after breakfast or dinner. If you're concerned about lack of movement, drink a beverage with sugar or caffeine, then lie on your side and press your hands against your belly. If you still have concerns about your baby's movement, contact the office or go to the hospital where you will deliver.

Is it safe for me to care for my pets?

Talk to your healthcare provider about precautions to take if you have cats. Avoid changing the litter box, if possible. But if you must, wear gloves to avoid direct exposure to toxoplasmosis — a rare infection from cat feces.

Can I hop in the Jacuzzi after a long day?

No! Avoid Jacuzzis and whirlpool baths during pregnancy.

What about cigarettes, vaping, alcohol and marijuana?

Avoid alcohol completely during pregnancy — there is no safe amount. It can cause a host of health issues for your baby, including abnormal brain development, birth defects and intellectual disabilities.

It's a fact: If you're smoking or breathing in secondhand smoke while pregnant your baby is too. Infants exposed to cigarette smoke in utero are more likely to struggle with intellectual and learning disabilities; suffer from cerebral palsy; or incur lifelong damage to various organs like the kidneys or lungs.

Labor & Delivery: Prepping for the Big Day

Register Ahead of Time

Don't wait until you go into labor and your baby is on the way. After your 20th week you can pre-register at the hospital. You will need your due date, OB name and insurance information to get started. It's quick and easy. You have two options:

1. Visit Sierra Admitting on the first floor of Renown Regional Medical Center, Sierra Tower, and complete your paperwork in person.
2. You can also pre-register online at [renown.org](https://www.renown.org).
 - Select **Pre-Register**
 - Follow the instructions to fill out your admissions forms.

For additional information about hospital admissions and preparing for labor, contact Sierra Admitting at **775-982-5067**.

Have It Your Way

Work with your OB to create the labor and delivery birth plan you want, so your medical team knows your preferences in advance. But be flexible — things don't always go according to plan. Remember that everyone's ultimate goal is the safe delivery of your baby. Some things to consider:

- Do you want a natural childbirth experience or do you want the option of pain medication?
- Do you want a doula to support you during and after the birth?
- What methods would you prefer for managing pain?
- Who would you like to be in the delivery room with you?
- Do you want music? Would you like to wear your own clothing?
- Are you interested in cord blood banking? Talk to your OB to learn more about this resource, but beware that most insurances do not cover this procedure.
- Is skin-to-skin contact immediately following delivery important to you? Do you plan to breastfeed, and would you like to do so as soon as possible?
- If you're having a scheduled C-section, what post-birth experience do you want?
- What do you want for your baby's care — where to sleep, when to eat and immunizations following birth, for example.

Prior to delivering, we also recommended finding a pediatrician who takes your insurance. Your pediatrician will check up on your baby at the hospital and newborns generally have a well visit within a week of birth. Your baby's birth information, including test results, will be sent directly to your pediatrician. Your OB can help you find the pediatrician that's right for you and your baby. You can also visit [renown.org/children](https://www.renown.org/children) to find a pediatrician and schedule an interview with them.



Pack Your Bags

When labor hits, you want to be ready. Pack everything you'll need in advance so you can grab your bags and get to the hospital on the big day. The list below will get you started.

- **Paperwork.** Pack your insurance card, ID and copies of your birth plan.
- **Toiletries.** While some personal items are available at the hospital, you'll feel more at home with your own toothbrush, toothpaste, shampoo and conditioner, face wash, deodorant, lotion, and soap. Don't forget hand sanitizer, a head band or ponytail holder, and lip balm.
- **Personal Items.** Bring your glasses or contact lenses, cell phone, camera, bathrobe, socks/slippers, nursing bra if breastfeeding, and undergarments.
- **Relaxation and Labor-Support Items.** You'll experience some downtime, so pack books, magazines, and other items to relax.
- **For Your Partner.** Be sure you have an overnight bag with a change of clothes and hygiene items for your partner.
- **For Your Baby.** Save space for your baby's going-home outfit, blanket and socks. Remember that Nevada State law requires you have a car seat when leaving the hospital with your baby. Place the seat in your vehicle ahead of time.

Please leave jewelry or other valuables at home.

Labor & Delivery: It's Time!

For first-time moms especially, it's not always easy to know when you're actually in labor. The chart below can help. If you are experiencing true labor or your water breaks, go to the hospital immediately.

TRUE LABOR	FALSE LABOR
Contractions are consistent, become closer together as labor progresses and generally last between 40 and 60 seconds.	Your contractions are irregular, do not progress and get closer together, and are shorter — usually 20 to 40 seconds.
Your contractions will continue no matter your activities and movement.	Contractions often stop if you lay down to rest, change positions or go for a walk.
Contractions are painful. The pain generally begins in the back and makes its way to the front.	Pain begins in the stomach, not the back.
Contractions increase in strength and intensity.	False contractions are weak and do not grow in strength, pain and intensity.
Your cervix dilates as contractions progress.	Your cervix will not dilate.
You may experience bloody show.	Bloody show is not likely.

Inducing Labor

If your due date comes and goes and you haven't gone into labor, you'll undergo additional monitoring to assess the health of you and your baby. If there are health concerns or your baby is more than five to seven days late, you will more than likely be induced.

Cesarean Birth

If you and your doctor determine you will have a cesarean delivery, or C-section, you can schedule it in advance. A baby may also be delivered via C-section if delivery complications happen, making it a safer option. With Csections, skin-to-skin contact and breastfeeding may still be possible immediately following birth. Initial Csection recovery is the same as vaginal births. Medical staff will monitor you and your baby for approximately two hours in the recovery room after delivery.

Vaginal Birth After Cesarean (VBAC)

If you've had a previous C-section, a vaginal delivery may be an option with your current pregnancy. Consult your OB to find out if you are a good candidate for a VBAC.

After Delivery: What Happens Next?

1. Schedule an appointment with your OB for six weeks after a vaginal delivery. Do not douche, use tampons, have sex, swim or lift anything heavier than your baby until you've had your postpartum checkup. Be sure to discuss contraception options at your appointment.
2. If breastfeeding schedule an appointment with our lactation consultant in the first week.
3. If you had a C-section, schedule your postpartum appointment for one to two weeks after delivery so your doctor can examine your incision. Until then, keep your incision clean and dry. If it becomes red or swollen or produces any unusual drainage, call the office. Try not to climb stairs more than two or three times a day. Too much activity can delay healing.
4. No driving for two weeks after delivery.
5. If you're breastfeeding, continue eating nutritiously and taking prenatal vitamins daily. If you experience signs of a breast infection such as pain or redness in the breast, or fever or flu-like symptoms call the office.
6. If bottle feeding, relieve tender breasts after your milk comes in with ibuprofen, ice packs and a supportive bra.
7. Expect vaginal bleeding for six to eight weeks while the uterus contracts and returns to its pre-pregnancy state. Spotting and/or a menstrual-like flow is common and physical activity increases flow. If vaginal bleeding persists or worsens get off your feet, and take two Advil. If you're not seeing improvements call the office.
8. Keep exercise low-key at first including: Kegels, walking and abdominal-tightening exercises. No aerobic activity (running) and sit-ups until after your first check-up.
9. Drink at least six to eight glasses of water a day to ease constipation. Stool softeners, Metamucil and Citrucel are safe OTC solutions. Adding more fiber to your diet can also help.
10. Hemorrhoids are more common after delivery. Talk to your doctor about prescription medications that can relieve symptoms.
11. If you experience redness, tenderness or swelling in the lower leg or a fever of 101 degrees or higher, call the office immediately.
12. Avoid baths. Take a shower, instead.

Postpartum Depression

Don't confuse postpartum depression with the baby blues, which generally begins two to three days after delivery and goes away within two weeks. Postpartum depression symptoms develop the first few weeks after giving birth and last longer - often months. Between 40 and 80 percent of women experience these mood changes after delivery.

If you feel depressed, sad and anxious; are not bonding with your new baby; or find you unable to take care of yourself, you may be suffering from postpartum depression. We have medical professionals who can help you get back on your feet and start enjoying motherhood. Call **775-982-5000** if you feel you may be experiencing postpartum depression.



Breastfeeding Basics

When it comes to nutrition for your baby, you can't beat human breast milk. According to the American Academy of Pediatrics, exclusive breastfeeding for at least six months provides the best nutrition for newborns. Breast milk benefits babies by:

- Promoting emotional and physical well-being
- Providing all of the nutrients and immunities a baby needs
- Providing a natural source of nourishment that's easy to digest
- Supporting heart health
- Lowering rates of obesity, lung infections, disease and asthma

Mothers benefit from breastfeeding, too. It reduces stress levels and lowers risk of ovarian and breast cancers, postpartum depression, and type 2 diabetes. Breastfeeding mothers also experience less bleeding and increased weight loss. Most importantly, nursing strengthens the bond between mother and baby.



At the hospital, nurses and certified lactation consultants are available to guide you while breastfeeding and give you helpful tips. Once home, Renown's Breastfeeding Medicine provides nursing mothers helpful, board - certified consultation on all things breastfeeding with the following:

- Private appointments with board-certified consultants
- Breast pump instruction, plus supplies for rent and for sale
- Breastfeeding circles where moms find support, exchange experiences and discuss concerns
- Certified nursing bra fitter
- Billing most insurances

Visit us online for more information or call to make an appointment.

The Shops at Renown – Renown Regional Medical Center
The Lactation Connection
First Floor, Center for Advanced Medicine C
75 Pringle Way
Reno, NV 775-982-5210
Monday through Friday, 9 a.m. to 5 p.m.

Breastfeeding Medicine
Renown Women's Health
901 E. Second St. #307
Reno, NV 775-982-6365

The ABS's of Safe Sleep

Sudden infant death syndrome (SIDS) and accidental suffocation are the leading causes of death among babies age 0 to 12 months old, with those 2 to 4 months of age most vulnerable. Parents can reduce this risk by following the simple guidelines below.

Remember: **Alone, Back, and Crib (ABC)**.

The safest way to put babies to sleep is alone, on their back, in a safety-approved crib. Adult beds, cribs filled with soft bedding and toys, and even sofas are dangerous for little ones. Dangers include: suffocation, being smothered by an adult or another child, or getting trapped between cushions.

Alone

The caregiver's room is the safest place for your baby to sleep — alone. Do not co-sleep. Your baby should not sleep with you or anyone else in a bed, on a couch or in a chair.

Back

The back is for sleep, and tummy is for play. Always place your baby on their back when sleeping— naps and nighttime.

Crib

Always place your baby to sleep in an empty, safety-approved crib with a firm mattress. Remove all loose bedding, pillows and toys.

Other Safe Sleep Tips

- Quit smoking. Don't smoke before or after the birth of your baby, and don't allow others to smoke around your baby.
- No soft surfaces. Do not place your baby to sleep on waterbeds, sofas or other soft surfaces.
- Do not co-sleep. Make sure your baby always sleeps alone in a safety-approved crib or Pack 'n Play.
- Monitor tummy time. Give your baby tummy time when they're awake and supervised, not during sleep.
- Say yes to a pacifier. Offering your baby a pacifier during sleep and after breastfeeding are both recommended to reduce risk of SIDS.
- Vaccinate your little one. Make sure your baby gets regular check-ups and stays current with immunizations.
- Spread the word. Make sure everyone who watches your baby is fully aware of your safe sleep practices. Education is key to keeping babies safe.

And remember: **Alone, Back, Crib**.

What Does a Safe Sleep Environment Look Like?

Bed

- The crib should be placed in the parents' or caregiver's room if possible. It's the safest place for baby to sleep.
- Whether nap or nighttime, put your baby to sleep alone on their back in a safety-approved crib with a firm mattress and a tight-fitting sheet. Use a Pack 'n Play when traveling.
- Decorate the room, not the crib: Remove all loose bedding and toys such as comforters, quilts, sheepskins, stuffed animals, bumpers, wedges and pillows.
- No co-sleeping. Never let your baby fall asleep in a bed, chair or couch with you or another person.
- Crib railings should be no more than 2^{3/8} inches apart. You should not be able to fit a vertical dollar bill through them.
- The American Academy of Pediatrics recommends your baby sleep in the same room for the first year.

• **Environment and Covers**

- Keep the room at a temperature that's comfortable for an adult, and dress your baby in light sleep clothing.
- Use a sleep sack instead of a blanket. If you must use a blanket, make sure it extends no higher than the middle of your baby's chest and is tucked into the mattress.
- Maintain a smoke-free home. Don't smoke before or after birth or allow others to smoke around your baby.

Breastfeeding

- Breastfeed your baby in a position allowing you to stay awake. During the night, return baby to the crib after breastfeeding.
- You may offer your baby a clean, dry pacifier after nursing to suck on during sleep. This has shown to help reduce risk of SIDS.
- Never give your baby a pacifier with attached objects, such as stuffed animals, for sleep.
- Dad can help engage mom during feedings. This can help mom stay awake.

Safe Sleep Resources:

Birth, Baby and Beyond

Classes and support from prenatal to childbirth to teething and toddlers

renown.org/babyclasses

babyclasses@renown.org

Cribs for Kids

Ask the Pediatrician

cribsforkids.org

Safe to Sleep

National Institute of Child Health and Human Development

800-370-2943

[Nichd.nih.gov](https://nichd.nih.gov)

American Academy of Pediatrics

847-434-4000

[Aapcc.org](https://aapcc.org)

Consumer Product Safety Commission

800-638-2772

[Cpsc.gov](https://cpsc.gov)

Ready to Quit Smoking?

- Renown Health and Wellness Quit Smoking Program: 775-982-3941
- Tobacco Users Help Hotline: 1-800-QUIT-NOW (784-8669)
- Nationally: smokefree.gov

For more information about having a baby at Renown Regional Medical Center or to schedule a tour, visit renown.org/childbirth. Take a virtual tour online at renown.org/HavingABaby.

Car Seat Safety

Buckle Up Your Baby Safely

Finding the right car seat and installing it correctly is no easy task. Let the Child Health Institute Car Seat Safety Station help you to make sure your little one travels safely. Our Car Seat Safety Station is staffed by nationally certified Child Passenger Safety Instructors, and we offer vehicle safety restraint education, inspection and installation.

Nevada Requirements

Nevada state law requires children under 6 years old and weighing 60 pounds or less to be secured in an appropriate child restraint system while in a motor vehicle.

Car Seat Installation Appointment Information

Cost: \$25 for inspection and installation services; \$10 for income-eligible families. You must provide proof of income eligibility or a referral from a public assistance agency such as WIC or Medicaid to receive the reduced rate. Each additional seat installation/inspection during the same visit is \$15.

Time: Appointments are Monday – Friday (no holidays), from 8 to 11 a.m. and 12:30 to 4 p.m. (installation is about 30 minutes)

Location: 1095 E. 2nd St., Reno, NV.

For additional car seat resources including buying, installing and finding the right car seat for your child call **775-982-2620**.



Birth and Baby Support Classes: From Prenatal to Childbirth to Teething to Toddlers

If you're a first-time parent, childbirth education classes are a must. You'll learn about labor and delivery, breastfeeding, how to care for a baby, infant CPR and more. Go to renown.org/events to see a list of upcoming classes, support groups and tours, or for more information call **775-982-6365**.



Keep Your Child Healthy

Finding the Right Pediatrician

Our dedicated pediatricians, specialists and nurse practitioners bring decades of experience and a passion for children's health to our community. To meet the needs of children from birth to 18 years of age, we offer a range of services including:

- Wellness and preventive visits
- Sick visits
- Immunizations
- Behavioral health visits

Four Convenient Locations:

- 75 Pringle Way, Suite 300, Center for Advanced Medicine C, Reno
- The Healthcare Center, 21 Locust St., Reno (Medicaid only)
- 15 McCabe Dr., Suite 100 (located near Bishop Manogue High School in south Reno)
- 901 E. 2nd St., Ste. 201, Center for Advanced Medicine F (proud partner of UNR Med), Reno

To schedule a consultation with a pediatrician, visit renown.org/pediatrics or call **775-982-5000**.

BestMEDICINE Children's Health

Don't forget - our BestMEDICINE health blog is updated bi-monthly with helpful articles and tips. We cover everything ranging from pregnancy and breastfeeding to kid and teen nutrition to safety and back to school. Find us at bestmedicineneeds.org.

Renown Children's Hospital

Children deserve a specially designed hospital with them in mind. A place to heal close to home.

At Renown Children's Hospital, our goal is to make kids better today and healthier tomorrow. And our family-centered care gives you an active role alongside our specialists to help your child recover from an illness or accident.

Located at Renown Regional Medical Center, our team of pediatric specialists, surgeons, pediatricians, nurses, social workers, child life specialists, pharmacists and other healthcare professionals all have experience recognizing children's illnesses. Services include:

- A 39-bed Neonatal Intensive Care Unit (NICU) – the largest in northern Nevada
- Region's Only Children's ER
- Region's only Pediatric ICU
- Over 20 pediatric specialists, including, neurology, endocrinology & diabetes, pulmonology and hematology (blood disorders) and cancer.
- Certified Child Life Specialists who are specially trained to help children and families cope with challenges of hospitalization, illness or disability
- A Healing Arts Program that include art, music and pet therapy as well as Children's Healing Garden, an environment designed to promote healing and comfort.

For more information, visit renown.org/children