

# Almost There, 28 Weeks!

Carteret Ob-Gyn Associates

 ${PART 2}$ 

Prenatal Instructions and Information

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# almost there, 28 weeks!

This next section of the booklet is preparing for your final weeks and the arrival of your baby.

#### STAYING HEALTHY:

Exercise!! We encourage regular low impact exercise. Many women find that at this point in pregnancy, walking can be an excellent way to stay in shape. Discuss your level of activity with your health care provider if you have any questions.

Baby movement: You should be able to feel baby movement on a daily basis at this point. Monitor kick counts, 10 in two hours.

Eliminate stress and conflicts that decrease overall well-being. If you have feelings of sadness and hopelessness lasting longer than 2 weeks and/or thoughts of harming yourself, talk to your physician or nurse practitioner.

Weight gain in pregnancy should be between 25 to 35 pounds. If you were overweight when you became pregnant, your weight gain should be lower than that. Please continue to select a wide variety of fruits, vegetables, and healthy foods for you and your baby.

During this period of time, your health care providers will test you for a form of diabetes in pregnancy. Although you may eat or drink before the test, you may not eat, drink, or smoke during the one-hour test.

Drink milk and eat other products rich in calcium, such as yogurt, cheese, and orange juice fortified with calcium. You need 1200 mg of calcium each day. If you are not getting enough with your food, add a supplement such as Tums.

Take a multivitamin every day.

Begin to think about and plan for your labor and delivery. There is a Lamaze course offered for patients. This is the point at which you should inquire about signing up for the class. It is always better for you to be well informed about labor and delivery.

If you are still smoking at this point in your pregnancy, please stop. Smoking has proven dangers for both you and your unborn child. Ask your health care providers about smoking cessation strategies.

Remember to stay very well hydrated. Drink eight 8-ounce glasses of water each day.

Consider breast-feeding your baby. There are many benefits for you and your child. Breast-feeding classes are available and there are resources in the community to help you with breast-feeding once you deliver.

#### **INCREASE YOUR CALCIUM INTAKE!**

ADULTS		LCIUM (mg) EEDED DAILY
Men	(20+)	800
Women	(20-30)	1000
Women	(30-50)	1200
Women	(50+)	1500

#### **CALCIUM-RICH FOODS**

ITEM	SERVING SIZE	CALCIUM (mg)
Yogurt Ricotta cheese,	1 cup	400
part-skim	½ cup	340
Milk, all types	1 cup	300
Orange juice	reap	000
w/calcium	1 cup	300
Swiss cheese	1 ounce	260
Cheddar cheese	1 ounce	200
American		
cheese	1 ounce	175
Tofu, firm		
w/ calcium	½ cup	200
Total cereals,		
wheat or corn	1 ounce	200
Oysters	³⁄₄ cup	170
Salmon, canned	2	150
with bones	3 ounces	170
Collard greens;	1/	1.45
most greens Instant break-	½ cup	145
fast drink,		
powdered	8 ounces/wate	er 105
Spinach,	o ounces/wate	1 103
cooked	½ cup	100
Ice cream	72 cup	100
or ice milk	½ cup	100
Frozen yogurt,	/2 cap	100
soft-serve	½ cup	100
Mustard greens,	1	
cooked	¹⁄₂ cup	100
Beans, cooked	1 cup	90
Cottage cheese,	•	
2% low-fat	½ cup	80
Kale, cooked	½ cup	75
Broccoli,		
cooked	½ cup	70
Orange	1 medium	55
Tortilla, corn	1 medium	40

#### WEIGHT LOSS and HEALTH RESOURCES

Develop your own weight loss and nutrition plan at

www.choosemyplate.gov

Learn about reading labels and meeting daily recommended allowances at www.fda.gov

Count your calories at www.foodcaloriescounter.com or www.calorieking.com

Weight Watchers www.weightwatcher.com or 1-800-561-2121

Here's To Your Health 252-258-1001

**The Sports Center** 252-726-7070

**Golds Gym** 252-247-4653

#### RECOMMENDED SUPPLEMENTATION ALTERNATIVES FOR VITAMIN D

FOOD AND DRUGS	INT'L UNITS PER SERVING
Cod liver oil, 1 tbsp	1360
Mackerel, 3.5 oz	345
Sardines, 1.75 oz	250
Tuna fish, 3 oz	200
Quaker Nutrition for Wo	omen
Instant Oatmeal (Qual	ker
Oats, Chicago, IL)	154
Orange juice-vitamin D	
Fortified, 8 oz	100
Milk-vitamin D fortified	1,
8 oz	98
Margarine, fortified, 1 th	bsp 60
Nature Made vitamin D	
(Nature Made, Missio	n
Hills, Calif)	1000
Centrum Multivitamins	
(Wyeth, Madison, NJ)	
One-A-Day Multivitami	
(Bayer, Garden Grove	
Calif)	400-800
VIACTIV Multivitamin	S
(McNeil Nutritionals,	
Ft. Washington, Penn)	
Weil Nutritional Supple	
Vitamin D (Weil Lifes	
Phoenix, Ariz)	1000
Ergocalciferol-oral	400-800 daily
Ergocalciferol-oral	50,000 twice weekly
	For 5 wks
Ergocalciferol-IM	500,000 1 time
FOSAMAX Plus D	
(Merck, Whitehouse	
Station, NJ)	5600 once weekly
Os-cal 500+D	
(GlaxoSmithKline,	200
Pittsburgh, Penn)	200
Os-cal 500+ Extra D	
(GlaxoSmithKline,	400
Pittsburgh, Penn)	400

#### **KICK COUNTS: INSTRUCTIONS FOR FETAL MOVEMENT COUNTS**

- Once a day when your baby is typically most active, set aside time to count your baby's movements. Any movement counts, whether it's a kick, a punch, a shift of position or even a hiccup.
- Make a note of your start time and check a box for each movement you feel. Make a note of your finish time when you have felt ten movements. This will give you a record of your baby's activity. When your baby has moved ten times you are done.
- If you do not get at least 10 movements in 2 hours when the baby is typically most active, you should first free yourself from distractions such as the television and other people and pay very close attention to the movement of the baby. Sometimes drinking a sugary drink such as Coca-Cola, Gatorade or having a piece of candy will help stimulate the baby's movements. If you still do not have adequate movement, you should go to the hospital for evaluation in the Labor & Delivery Unit. If this occurs during normal office hours, call for instructions.

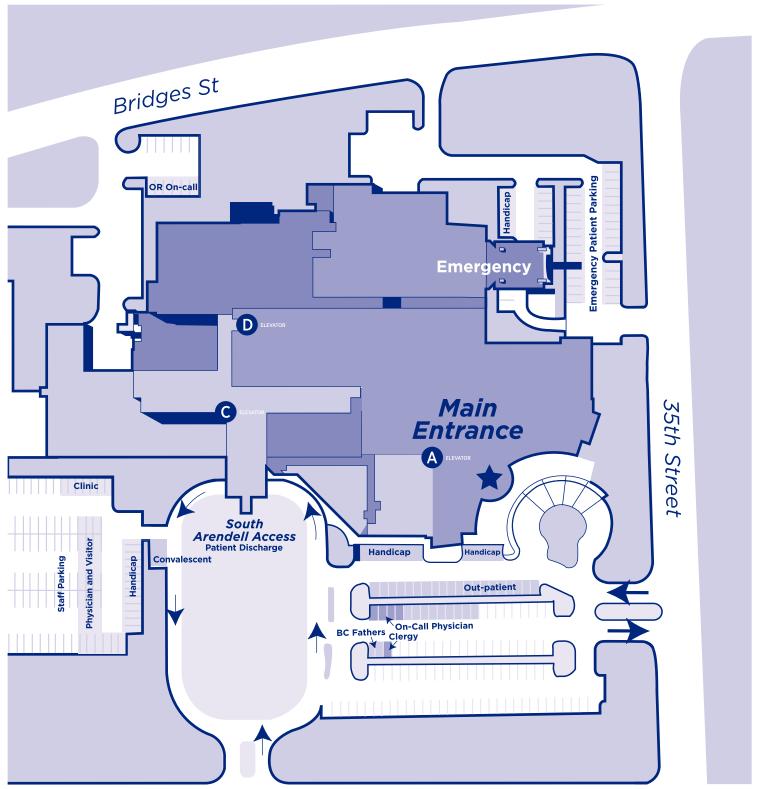
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#### Directions to Day Surgery for Anesthesia Consult

- Enter hospital at the New Main Entrance
- Take Elevator A up to the 2nd floor
- Go left out of the elevator and straight down the hall, which will bring you to Day Surgery



Arendell Street

#### CHILD BIRTH AND BREAST FEEDING CLASSES:

By your 24-28 weeks we recommend that you register for childbirth preparation classes which helps you prepare for labor. Please call Scheduling at (252) 499-6200 for location and times.

#### **HOW DO I TIME CONTRACTIONS?**

- Use a clock or watch with a second hand.
- Feel your upper belly (uterus) while lying down on your left side. If it is hard and you can't press your fingertips in, this is a contraction.
- When your belly starts to get hard, this is the beginning of a contraction.
- Write down the time the contraction begins. The time from the beginning of one contraction to the beginning of the next contraction is how far apart the contractions are.
- Write down how long the contractions last. The length of the contraction is from the beginning of the contraction to the end. This is measured in seconds (contractions usually last 30 to 70 seconds).
- Time your contractions for at least 30 minutes.
- If you are less than 37 weeks gestation and have 4 or more contractions in one hour, rest and drink at least one liter of water (4 eight ounce glasses). If the contractions continue, go to Labor & Delivery.
- If you are greater than 37 weeks gestation and contractions are every five minutes, or less, for at least one hour, **go to Labor & Delivery**.
- Anytime you think your water has broken, no matter how far along you are or whether you are having contractions, **go to Labor & Delivery**.

#### WHY IS IT IMPORTANT TO TIME CONTRACTIONS?

- By learning to recognize and time contractions, you may be able to keep your baby from being born too soon with the help of your doctor.
- If you are at the end of your pregnancy (full term), you will need to time your contractions to know when active labor has started.

Ask your healthcare provider when to call about contractions. Always call if you are confused about how you are feeling.

#### **HOSPITAL VISITATION POLICY:**

Please visit the Cartret Health Care website for the most up-to-date visitor policy. https://www.carterethealth.org/patient-resources/coronavirus-19-resources/

#### **HOME SWEET HOSPITAL: TIPS & LISTS**

Unless you are planning a home delivery, you probably have a few days in the hospital in your near future. While things are calm, it's a good time to pack up some things to make your hospital stay more "homey".

0SPI1	PITAL CHECKLIST:	
	] Shampoo	
	Toothbrush/toothpaste	
	] Deodorant	
	] Hairbrush	
	l Cosmetics	
	l Moisturizer	
	Other toiletries	
	Glasses, in case you have to remove contact lenses	
	Comfortable PJs (bring a couple), slippers, and a robe	
	Video and still cameras (don't forget the batteries ad to clear your	memory cards)
	1 Socks	
	] Pillows	
	Playing cards, puzzles, magazines, books	
	l Laptop and your favorite DVDs	
	Hard candies/lollipops to suck on during labor	
	Pencil, notepad, and a watch for timing contractions	
	Phone numbers for family and friends	
	Nursing bra, if you plan to breastfeed	
	Underwear (several pairs)	
	Street clothes for when discharged home	
	1 A going-home outfit for the baby, including socks, onesie, diaper, a	nd hat
	Baby blanket	
	1 Infant car coat	

#### BABY'S FIRST WEEKS, WHAT YOU NEED:

#### **BASIC INFORMATION:**

The following list suggests the very basic supplies needed to care for your baby. If your budget allows, you can add extra items. Buy ahead of time as much as you need to feel prepared and to care for the baby without feeling hassled. Purchase other items as you need them. Items do not need to be new, just safe and clean. Watch for garage sales, other special sales, or exchange items with family or friends.

#### **CLOTHING:**

- Avoid buying large quantities of newborn sizes that your baby will quickly outgrow.
- Diapers, if using cloth diapers, 3-4 dozen. Diapers, disposable 12 per day. (If you are using disposable diapers, cloth diapers work nicely as burp cloths and 1-2 dozen are helpful).
- Diaper pins (if using cloth diapers) 8-12.
- Shirts (tie front or snap) 6-8.
- Sleepers, nightgowns, 4-6.
- One-piece rompers (above the knees; snap at the crotch; for spring or summer baby) 4-6.
- One-piece stretchies (long pants with or without feet) 4-6; for fall or winter baby; 2-3 for spring or summer baby.
- Pairs of booties or boot-like socks 4-6.
- Sweaters 2.
- Waterproof pants if using cloth diapers 3-4.
- Caps (knitted for winter; brimmed for summer) 1.
- Bunting or hooded jacket (winter) 1.
- Blanket sleepers (winter) 2-3.
- Bibs, washable, 4-6.

#### **BEDDING:**

- Receiving blankets 4-5.
- Waterproof pads 3-4.
- Fitted sheets 3-4.

- Lightweight blanket 1-2.
- Quilted mattress pad (optional) 2.

#### BATHING:

- Hooded towels 2-3.
- Wash clothes 8-12.
- Mild soap 1 bar or bottle.
- Oil or lotion 1 bottle.
- Baby bathtub (optional) 1.
- No-Tears baby shampoo 1 bottle.
- Nail clippers.

#### **BREAST-FEEDING SUPPLIES:**

- Support/nursing bras, 3-6.
- Bra pads 5-6 washable; 2-3 dozen disposable.
- · Breast pump.

#### FORMULA EQUIPMENT/SUPPLIES:

- 4 oz bottles, nipples and caps 4.
- 8 oz bottles, nipples and caps 4-8.
- Extra nipples and caps 2-4.
- Disposable bottle (if using disposable system) inserts 1 box of each size.
- Formula in ready-to-feed, powdered or liquid concentrate form 1 week supply to start with.
- Boiled sterile water 1 gallon to mix with formula.

#### **EQUIPMENT:**

- · Crib/bassinette/cradle.
- Changing table (optional).
- · Diaper pail with cover.
- Thermometer.
- · Diaper bag.
- Infant carrier/car seat.
- Stroller.
- Baby swing (optional).
- Rocking chair (optional).
- Portable crib or playpen (optional).
- Intercom or baby monitor.
- Soft carrier or backpack (optional).

#### OTHER:

- Rubbing alcohol/cotton balls for cord care.
- Petroleum jelly (Vaseline) for lubricating rectal thermometer or circumcision care (is applicable).
- Sterile gauze pads (if boy has had circumcision).
- Ointment for diaper rash (A&D or Desitin) 1 tube.
- · Diaperwipes.

Please call your pediatrician's office if you have questions about what you need or don't need for your baby's first few weeks.

#### BREAST-FEEDING - THE GIFT OF GOOD HEALTH!

New mothers and mothers-to-be want to give their babies the very best of everything and breast milk can't be beaten as a perfect first food for your child. Deciding whether to breast-feed your baby is an extremely personal decision. It is also one that must be carefully considered as it will affect your routine once the baby is born and has implications for your child's future health. Every mother has the ability and potential to make a success of breast-feeding and enjoy it as a wonderful and natural bonding experience.

The advantages of breast-feeding: Modern research has shown that breast milk is the perfect nourishment for babies as it contains all your baby's nutritional requirements in ideal proportions. Breast milk has just the right amount of sugar (energy), water, fat and protein that your baby needs for normal growth and development. A mother's milk is also easier for your baby to digest than commercial formulas.

Breast milk provides your newborn with protection from bacteria and viruses and helps him/her fight infection and disease. This is made possible through antibodies from the mother's own immune system in her breast milk. Babies who have been breastfed have been shown to be healthier and have fewer infections, allergies, general medical problems, and hospital admissions than those who are bottle-fed (formula).

In terms of convenience, breast-feeding comes out on top again as the best method of feeding your baby. You will save time and money spent on buying, measuring, and mixing formula, as well as sterilizing bottles and warming milk in the middle of the night!

Because breast-feeding uses up calories, it is also one of the best, natural weight loss methods for losing those post-pregnancy pounds effortlessly! Nursing is also a wonderful way to bond with and feel close to your new baby.

**Getting it right!:** Nursing your infant does not always come as naturally and easily as one would hope and many women have difficulties with learning the art of breast-feeding. If you are having trouble breast-feeding, know that you are not alone and try not to get too frustrated with yourself. Breast-feeding is a skill to be learned and doesn't come naturally to many women at first. However, if nursing does not come easily at first, it is well worth persevering and there are many organizations and support groups that can help you to make a success of breast-feeding.

Problems with latching your baby and technique are extremely common. A lactation consultant will be able to help you with difficulties of technique and positioning as well as provide support, advice, and encouragement.

#### There are a number of ways you can improve your chances of breast-feeding successfully. These include:

- Start as early as possible. Nursing soon after delivery takes advantage of your newborn's strong sucking reflex and provides your baby with a first meal of colostrum and all the immune protection it contains (colostrum is the first milk available in the days after birth and before the mature milk comes in).
- Practice "demand feeding" by nursing whenever your baby shows signs of hunger, including increased activity, putting the hands in the mouth, or turning the head in search of a nipple. If you are unsure, feeding at least every two hours at first is a good estimate and will help to stimulate the production of milk and to help both you and your baby to "practice" breast-feeding.
- Feed your baby breast milk exclusively. Mother's milk contains everything your baby needs including the perfect amount of water. So avoid feeding any "extra" formula, water, or anything else. Because it is not possible to measure how much your baby drinks (as you can with bottle-fed babies), many women worry that their babies are not receiving sufficient milk and then resort to supplementing breast milk with formula. A better idea is to breast-feed more frequently in order to stimulate milk production, rather than supplementing with formula.
- Look after your health by eating a wholesome, balanced diet and drinking enough water, or other caffeine-free beverages. Your body needs extra fluid and energy to produce enough milk for your child, so don't diet or reduce portion sizes during breast-feeding.
- Although it is sometimes difficult in the first stressful weeks and months after your baby is born, sufficient rest and relaxation is
  important for milk production. Remember not to overdo things and find time to "put your feet up" every day.

When you don't have much milk: Many new mothers feel that they don't have enough milk for their baby's needs or that their milk is not flowing easily. It is important for new moms to remember that the initial milk produced in the first few days of your baby's life (colostrum) is produced in fairly small amounts, but is high in nutrients and immune boosting substances. Though it may seem like very little, colostrum contains everything your baby needs for the first few days of life.

If your milk supply seems low, perseverance is also key as the frequent suckling action of your baby nursing will actually stimulate your body to produce more milk.

Once your mature milk comes in after a few days, you can expect 4 to 6 wet disposable diapers (one to two more if you use cloth diapers) and 3 to 4 bowel movements in 24 hours. This will usually show that you baby is getting a perfectly adequate volume of milk.

Things to avoid when breast-feeding: Your diet and lifestyle choices can have a direct impact on your baby when you are breast-feeding, so bear the following guidelines in mind:

- Avoid caffeinated drinks and if you do drink coffee, limit yourself to a maximum of 2 cups a day. More than this will affect your baby's sleeping patterns as caffeine can be passed on to your baby in the breast milk.
- Don't smoke or use illegal drugs.
- Avoid drinking alcohol.
- Avoid heavily spiced foods, which may flavor your breast milk and upset your baby's tummy.

Breast-feeding and formula feeding together: Some women would love to breast-feed exclusively, but for some reason are unable to do so. There are a number of options for mothers who work or are separated from their infant regularly. You may be able to express or pump milk and store it in a bottle for later feeding. Otherwise, combination feeding of both breast milk and formula is also a possibility. Although your baby will not receive 100% of the benefits of exclusive breast-feeding, this method still has great advantages over formula feeding only.

The joy of nursing your little one! Cherish this special time with your child. Nursing your new baby should be a wonderful and precious experience, not only of feeding your child, but also of bonding between the two of you – the start of a bond that will last a lifetime!



Contact: Kim Roberts, RN Program Assistant 252-499-6275

#### What is the Breastfeeding Support Program?

The Breastfeeding Support Program is to provide support and assistance to moms with ongoing access to someone they call for questions or problems. Home visits and phone calls are scheduled as needed or requested by the client.

#### What services are provided by the Breastfeeding Support Program?

- Hospital visits provided to new breastfeeding mothers.
- Home visits as needed or requested by the mother.
- On-going phone calls for information and support.
- Hospital grade electric pump are provided for mothers who meet the criteria.
- Nurse contact for information regarding medicines or other medical questions.
- The program provides referrals to healthcare providers or community agencies as needed.

#### **CORD BLOOD COLLECTION**

Congratulations on your pregnancy. As you prepare for delivery, you may read information regarding cord blood banks.

Cord blood collection is available at Carteret Ob/Gyn. Our providers are certified with the following cord blood banks.

CBR- Cord Blood Registry www.cordblood.com Carolinas Cord Blood Bank www.dukehealth.org

There is a collection fee that must be paid prior to delivery. If you are interested in obtaining more information please talk with your provider. Brochures and payment information can be received by contacting our OB coordinator at (252) 247-1604.

#### SAFE SURRENDER OF NEWBORNS

#### What everyone needs to know about North Carolina's Law

#### What is the Safe Surrender Law?

An infant up to 7 days old may be left with a responsible adult, legally and anonymously. This is North Carolina state law, properly called the "Infant Homicide Prevention Act."

#### Why is there such a law?

The risk of homicide on the first day of life is 10 times greater than the rate during any other time of life. Every year, several babies are either killed or left to die in North Carolina by a parent in crisis, who may feel they have no other choice. The law hopes to provide such parents a way to surrender their unwanted newborn safely and anonymously.

#### Who can receive an infant through safe surrender?

The law states that a baby may be surrendered to "any responsible adult." Some people are especially cited: on-duty health care provider, law enforcement officer, social services worker or emergency medical services worker. However, "any responsible adult" could mean just about anyone.

#### What happens to these babies?

An adult who receives the baby is required to keep it safe and warm, and to call 911 or the local department of social services right away. They should know that the surrendering parent is not required to give any identifying information. The goal is to have the baby adopted into a safe and loving home as quickly as possible.

#### How big a problem is infantcide and child homicide?

In our state, an average of two infants are killed or left unprotected to die every year. Every two weeks, a North Carolina child is killed by a parent or caregiver in some form of child abuse.

#### Has the law worked?

No official numbers exist, but since the law was enacted in 2001, at least two newborns have been highlighted in the media as having been safely surrendered. However, at the same time, a number of newborns have also been abandoned unsafely or killed (six have died). Public awareness is crucial to help parents know this option exists, and also to alert the public that receiving a surrendered newborn is legal. Help us spread the word by copying and distributing this information.

#### What about fathers? Don't they have rights too?

There is a natural concern that a woman may have a baby and surrender it without the father knowing it exists. Any man who hears of a surrendered infant and believes it may be his should come forward.

#### Is Safe Surrender the same as Safe Haven?

Many states have what are called Safe Haven laws. These designate places where a baby may be surrendered. North Carolina's law is unique in that it designates people, not places.

resources: NC Department of Health and Human Services

www.safesurrender.net 1 (800) FOR BABY In an emergency: 9-1-1

### **KEEP CALM AND LABOR ON!**

• • •

Know what to expect in early labor.

# OH BABY! YOU JUST HAD YOUR FIRST CONTRACTION. IS THIS IT? SHOULD YOU GRAB YOUR BIRTHING BAG AND HEAD OUT?

You may be in early labor — the phase that comes before active labor.

#### WHAT'S EARLY LABOR LIKE?

- Contractions are getting stronger and settling into a regular pattern
- As contractions strengthen, you'll need to work harder and find a rhythm
- The cervix dilates to 6 cm to prepare for birth, as the baby moves down in your pelvis¹
- Early labor is most often the longest phase, more than half of the total labor time

# THERE ARE BENEFITS TO STAYING HOME DURING LABOR AS LONG AS POSSIBLE:



Gives you more **flexibility** to move freely—which can **reduce** the risk of medical interventions<sup>3</sup>



Helps **increase** the labor hormone, oxytocin—which **allows** the cervix to thin and open<sup>4</sup>

#### **DID YOU KNOW?**



The average length of early labor is **6-12 hours** for first-time parents (early labor is usually shorter for experienced moms).<sup>2</sup>

It may even last **24 hours or more**, which can be perfectly normal

# HOW CAN YOUR PARTNER AND DOULA SUPPORT YOU?



Offering comfort, physical care and reassurance



Helping time contractions



Keeping your mind off labor with simple activities, like playing games

#### **STAY CONNECTED**

Resting and relaxing Drinking plenty of fluids and eating what appeals to you

Going for a short walk Moving around or changing positions Focusing on slow, deep breathing Using a warm pad or ice pack on your lower back

Reading a good book or watching TV Asking your doula or partner for a gentle massage



#### HOW DO I KNOW WHEN TO GO?

Active labor begins when contractions are roughly 3-5 minutes apart, last 1 minute and have been that way for 1-2 hours.<sup>6</sup>

However, listen to your body. If you feel it's time to go to your birthing facility, follow that instinct and/or call your care provider first, especially if your water breaks.

## LEARN MORE ABOUT EARLY LABOR IN A LAMAZE CLASS, IN-PERSON OR ONLINE, SO YOU CAN BE PREPARED! VISIT LAMAZE.ORG TO LEARN MORE.



- 1 American College of Obstetricians and Gynecologists, Society for Maternal-Fetal Medicine. Safe prevention of the primary cesarean delivery. Obstetric Care Consensus No. 1.

  American College of Obstetricians and Gynecologists.
- American Journal of Obstetrics and Gynecology (2014): 123:693-711. doi: 10.1097/01.AOG.0000444441.04111.1d
- 2 Mayo Clinic. (2013, July 18). Labor and delivery, postpartum care Stages of labor: Baby, it's time! Retrieved from http://www.mayoclinic.org/healthy-lifestyle/labor-and-delivery/in-depth/stages-of-labor/art-20046545
- 3 Regan, M., McElroy, K., lobst, S., and Lothian, J. (2015). Optimizing childbirth outcomes through adoption of healthy birth practices.
- 4 Childbirth Connection. (April 2011). Understanding & Navigating the Maternity Care System. Retrieved from http://www.childbirthconnection.org/maternity-care/role-of-hormones/
- 5 March of Dimes. (May 2014). Vaginal birth Stages of labor. Retrieved from http://www.marchofdimes.org/pregnancy/stages-of-labor.aspx
- 6 Lothian, J.A., McGrath, K. (2012, April 24). Your step-by-step guide to giving birth. [Web log post]. Retrieved from http://www.lamaze.org/StagesOfLabor



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#### www.carteretobgyn.com

#### Dear Expectant Parents -

When your baby is born, during the first 24 hours in the hospital, the Pediatricians will examine your baby. The Pediatrician will also order certain tests to make sure that your baby doesn't have certain medical disorders. These are medical disorders which must be detected early in order to make the biggest difference for your infant. Below are several websites which will give you information about the testing which will be done.

#### Baby's First Test

Available at: http://www.babysfirsttest.org. Retrieved March 1, 2015

#### March of Dimes | Newborn Screening

Available at: http://www.marchofdimes.org/baby/newborn-screening.aspx. Retrieved March 1, 2015

#### National Newborn Screening and Global Resource Center

Available at: http://genes-r-us.uthscsa.edu/. Retrieved March 1, 2015

#### Center for Disease Control | Newborn Screening information

http://www.cdc.gov/ncbddd/newbornscreening/ Retrieved March 1, 2015

#### American College of Obstetricians and Gynecologists | Newborn screening

Patient Fact Sheet PFS006. Washington, DC: American College of Obstetricians and Gynecologists; 2014. Available at: acog.org/Patients/FAQs/These-Tests-Could-Save-Your-Babys-Life-Newborn-Screening-Tests.

Retrieved March 1, 2015

Please let us know if you have any questions. You can also speak with a Pediatrician. Patients are invited to make an appointment with their chosen Pediatrician prior to the birth of the child to discuss newborn and infant care.

#### From

The Providers at Carteret OB Gyn Associates carteretobgyn.com (252) 247-4297

The above resources are for information purposes only. These resources are not meant to be comprehensive. Please note that these web sites are subject to change without notice.



Jot down any questions you may have and ask your physician....

