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i'm pregnant.
now what?

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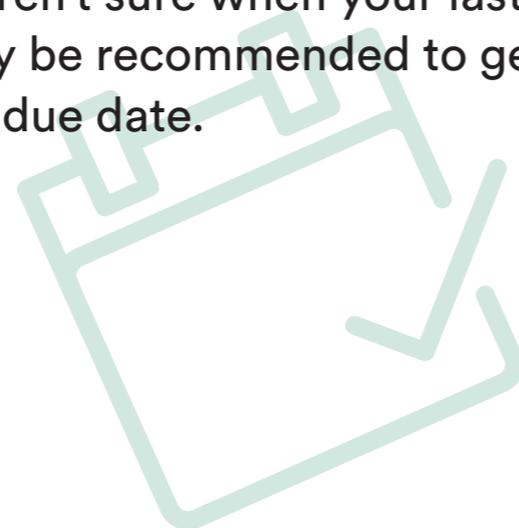
i'm pregnant. now what?

It's normal to experience a million emotions ranging from elation to fear after finding out you're pregnant. If you just learned the news, you're probably thinking:
Now what?

This guide is meant to help you navigate the early days of pregnancy, often before you've told many people the news or even had your first midwife or doctor appointment.

figure out your due date

The first day of your last menstrual period (LMP) is considered to be day one of your pregnancy, despite the fact that this can be up to two weeks before you even released the egg that got fertilized. Pregnancy lasts an average of 280 days, or 40 weeks. You can use Naegle's rule to calculate your due date. Add seven days to your LMP, subtract three months (and change the year if need be). You can also Google a pregnancy due date calculator. Just don't get attached to that date! Fewer than 5% of people give birth on their actual due date, with the majority giving birth somewhere between the 37th and 42nd week. Yes, you have a whole five-week window in which you are considered full term and could give birth at any time. If you aren't sure when your last period was, an ultrasound may be recommended to get an approximate sense of your due date.



research who you'd like to help deliver your baby



Selecting your midwife or doctor is one of the most important decisions you'll make about your pregnancy. Which care provider you choose affects things like how likely you are to have a vaginal birth, whether you'll be allowed to move around in labor, how engaged you'll feel in your care, how many people can be in the room with you during the birth, whether you can deliver your baby in whatever position is working for you, and so on.

Most of us already have an OBGYN who does our gynecological appointments, but this person may not be right to deliver your baby. Ask friends and family, talk to people who recently became parents, ask local doulas who work regularly with midwives and doctors, look at your insurance, read online reviews (but take them with a grain of salt), and interview some different care

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providers in order to find the right option for you.

Here are some questions you might consider asking:

- What is your Cesarean birth rate? (How often they perform C-sections becomes how likely it is for you to have one. The WHO recommends that a nation's Cesarean birth rate be 10-15%.)
- Do you allow movement during labor?
- Are you supportive of doulas?
- Will you allow eating and drinking during labor? (There are no studies to support withholding food and drink from laboring people, but many care providers restrict eating and drinking routinely.)

Consider not only the answers that they provide, but how seriously they take your concerns and how respected they make you feel.

think about where you want to give birth

Where you give birth will influence the type of care you receive and the likelihood of medical intervention. There are four types of places people can give birth, depending on whether you have a low or high-risk

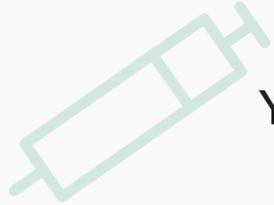
pregnancy, where you live, what type of insurance you have, what type of facilities are available near you, and what care providers deliver near you. But generally, options include your home, a freestanding birth center, a birthing center in a hospital, or the labor and delivery wing of a hospital.

- Do you only want to have a cesarean birth if medically necessary? Birthing centers and home birth (for low-risk people) typically have lower cesarean rates.
- Do you want to give birth in water? Consider a hospital or birth center that provides a large tub for labor and allows waterbirth, or consider your home where you can use your tub or rent a birth tub.
- Do you want an epidural? A labor and delivery wing of a hospital routinely provides epidurals.
- Do you want a home-like environment, but don't feel comfortable birthing at home? A freestanding birth center might be a great choice for you.
- Do you have a high-risk pregnancy? Hospitals will provide the technology needed to manage medical births.

Other considerations include things like how important it is to you to have freedom of movement, the option to eat and drink during labor, how many family members can join you and how likely you are to have skin-to-skin contact immediately after your birth.



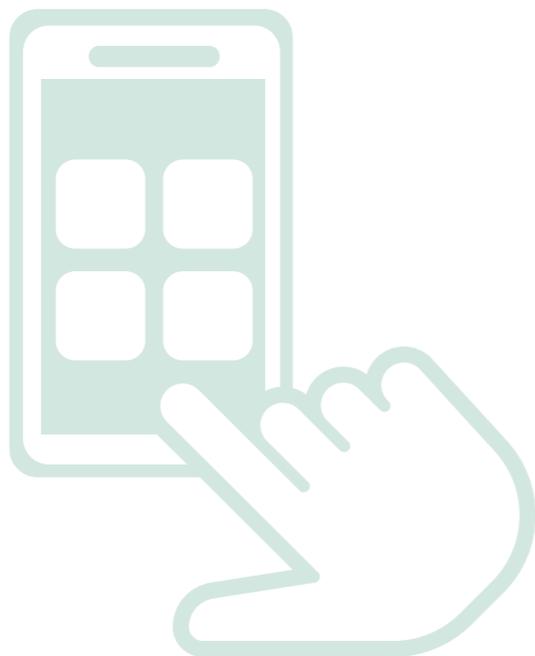
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Birth Option	Home	Freestanding Birth Center	In-hospital Birth Center	Hospital Labor and Delivery wing
Water Birth	Yes	 Yes	Possibly	No
Eating and Drinking During Labor	 Yes	Yes	Yes	Usually not, or restricted to clear fluids
Intermittent Monitoring	Yes, with a wireless handheld monitor	Yes, with a wireless handheld monitor	Yes, with a wireless handheld monitor	Usually, with a wired electronic fetal monitor
IV medication, Epidurals	No, but if needed, you can transfer to a hospital	No, but if needed, you can transfer to a hospital	No, but if needed, you can transfer to a hospital	 Yes
Unlimited Support People	 Yes	Yes	Yes	Usually restricted 1-3 support people. Ask your hospital
Separation of Parents and Baby	No, unless medical issue with baby	No, unless medical issue with baby	No, unless medical issue with baby	Depends

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make your first appointment as soon as you can

Many care providers won't see you until you are about eight weeks pregnant, but some get booked early. The earlier that you hire them, the more likely you'll be able to work with the provider of your choice. **Early prenatal care** is also critical to the wellbeing of you and your baby, reducing the risk of pregnancy, and fetal and infant complications.



call your insurance company

If you don't know how your insurance company deals with pregnancy, now's the time to call and find out. Ask specifically what their pregnancy-related benefits and coverage includes.

Ask if it covers pregnancy related classes and services like childbirth classes, breast pumps, lactation support, or midwifery care. What are the plan's rules regarding in-network and out-of-network providers? What about hospitals? If the plan provides greater coverage for in-network providers and hospitals, ask for a directory of midwives and doctors who serve your area. Do you have contact with the health insurance company when you're admitted to the hospital for labor and delivery? How long do you have to call after the baby is born to add your baby to the plan?

Does the plan cover prenatal and maternity care? If you work for an employer with 15 or more employees, a federal law requires that your plan cover your pregnancy-related medical bills. Will you need

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preauthorization for any of your prenatal or maternity care? What coverage does the plan provide for prenatal tests such as ultrasounds and amniocentesis procedures? If you want to use a midwife or have your baby in a birth center or at home, find out what coverage your plan provides for these situations. Most plans cover certified nurse midwives, and some pay for delivery at certain birth centers or at home.



decide when and how to announce your pregnancy

Some people wait until after the first trimester when the risk of miscarriage is significantly lower, while others tell everyone as soon as they know, so that if they do miscarry, they'll have support. Think about what the right choice might be for you. There are lots of fun ways to announce you are pregnant—just make sure you are on the same page with your partner (if you have one) first. And if you decide to tell people in stages, remind your confidantes to hold the news until you share it more widely.

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learn about healthy eating while expecting

You're not really eating for two. Your fetus is a mere fraction of your size, so being pregnant does not actually require doubling your caloric intake. In fact, on average pregnant people are only consuming about 300 calories per day more than non-pregnant people. The trick is making those extra calories really count. Protein is especially important in pregnancy and may ward off preeclampsia toward the end of pregnancy.



eliminate behaviors known to be harmful during pregnancy

- **Quit smoking:** Smoking comes with many risks, including miscarriage and stillbirth. Talk to your healthcare provider about quitting and know that even reducing your intake is beneficial. Secondhand smoke is risky as well, so no one should be smoking in your household either.
- **Stop drinking:** Most health care professionals recommend that you stop drinking alcohol as soon as you know you are pregnant to reduce the risk of low birth weight and fetal alcohol syndrome. Because there is no known safe amount of alcohol to consume during pregnancy, the **CDC recommendation** is not to drink at all.
- **Check in with your caffeine consumption:** Most people recommend keeping caffeine intake under 200 mg per day while pregnant. (An average 8-oz cup of coffee contains around 80-100 mg of caffeine.)
- **Avoid foods that can be harmful during pregnancy:** These include items that tend to harbor bacteria, toxins, or parasites, like raw fish,

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undercooked meat, soft cheeses, or deli meats with nitrates, etc. Talk to your midwife or doctor to get a full list.

- **Don't change cat litter.** If you have a cat, you should not be the one to change its litter, due to the risk of contracting toxoplasmosis, an infection caused by a parasite which can be present in litter.
- **Check your makeup and skincare products.** Now's the time to consider switching to non-toxic brands that are safer. The skin is the largest organ in the body and absorbs toxins.
- **Consider whether your job activities or environment are safe for pregnancy.** Are you routinely exposed to harsh chemicals? Radiation? Do you have to lift heavy items? **Learn your rights** as a pregnant person in the workplace and talk to your boss right away to make adjustments.
- **Vitamins and supplements:** Folic acid is one of the key vitamins you hear people talking about in early pregnancy, as it can greatly reduce the risk of spina bifida and other neural tube defects. Discuss with your care provider whether folate is preferable to folic acid, as some research is directing pregnant people that way. Most care providers recommend a complete prenatal vitamin, unless you are able

to verify that you can get the required vitamins and minerals from your diet. Talk to a prenatal nutritionist to find out what's right for you.



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watch for these warning signs during early pregnancy

Call your midwife or doctor if you experience any of the following including bleeding/leaking from your vagina, blurred vision, frequent or severe headaches, rhythmic cramping, excessive nausea and vomiting, fever, pain or burning with urination, swelling, etc. Always call your care provider if something doesn't seem right to you.

be prepared for potential symptoms

Some people make it all the way through pregnancy with little to no significant shifts in their state of being! But most of us experience some of the following during early stages of pregnancy: Bone-deep fatigue, nausea, vomiting, seriously sore breasts, frequent urination, or an aversion to smells and certain foods.

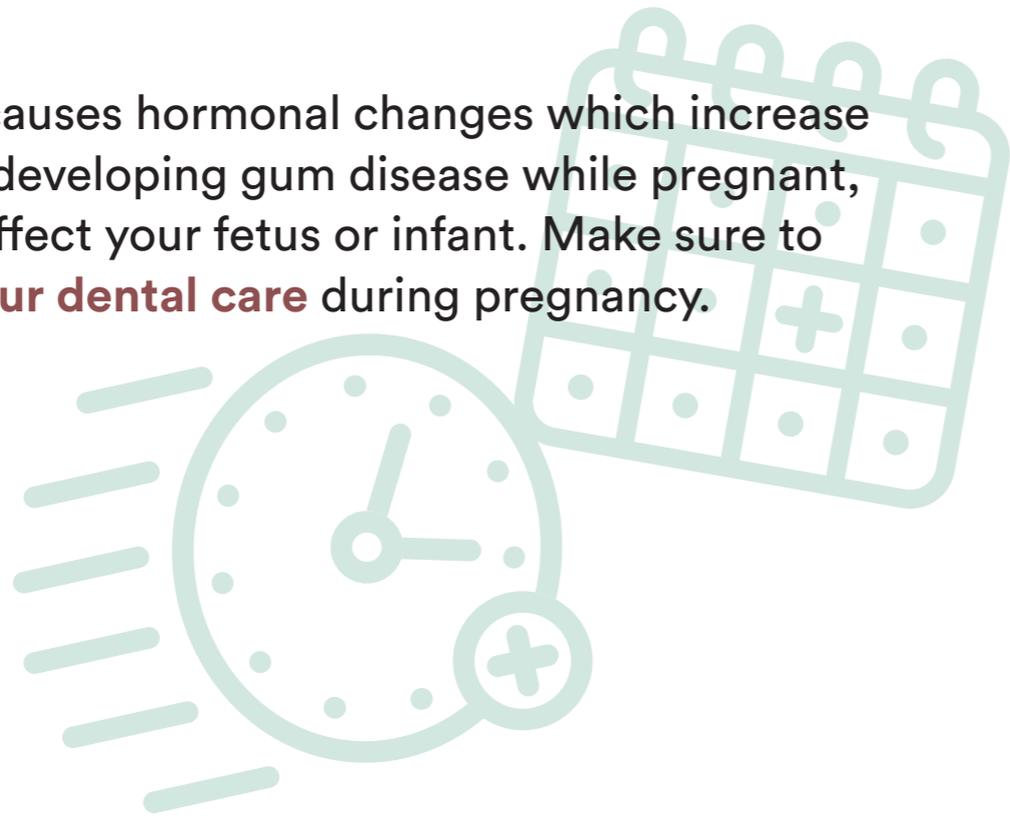
protect your mental health

Have a history of depression or anxiety? Now is a wonderful time to check in with your mental health person or to find a therapist who specializes in the perinatal period (pregnancy to postpartum). While PMADs (Perinatal or Postpartum Mood and Anxiety Disorders) are more likely to surface in people who have a history of depression or anxiety, anyone can experience this in the year after having a baby. No history? Don't assume it will happen to you, but know **help is available** if you need it.

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make an appointment with a dentist

Pregnancy causes hormonal changes which increase your risk of developing gum disease while pregnant, which can affect your fetus or infant. Make sure to **continue your dental care** during pregnancy.



plan for the rest of your pregnancy

Throughout the next months, you'll likely be offered various procedures and options. Here are some additional things to start thinking about:

- **Research testing options.** Throughout your pregnancy, various tests may be offered, like the first trimester screen, which uses a blood test and ultrasound to identify if you're more likely at risk of carrying a baby with chromosomal abnormalities. You'll decide whether or not to take these tests which may lead to further diagnostic procedures like CVS and amniocentesis. Now is a good time to learn more and talk with your care provider about whether these screenings and tests are right for you.
- **Check in with your HR department.** What is your parental leave situation? What benefits does your employer provide? How long will you (and your partner, if applicable) be able to take off from work following the birth of your child? If you are freelance, begin to think about your post-baby plan.
- **Consider hiring a birth doula.** Now's a great time to **read about the value of doula care** and determine if a doula is right for you. Studies show doula care lowers the risk of cesarean, increases maternal satisfaction with the birth experience, decreases postpartum depression and increases breastfeeding rates. Doulas are available **virtually** during the pandemic and in-person when it is safe.
- **Think about your postpartum plan.** Who makes

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up your circles of support? This includes close friends and family who you can talk to at any hour or who will safely visit and help you, followed by people you can hire virtually (or in-person when safe), like **postpartum doulas**. Many people think a lot about birth, but don't form a plan for their transition to parenthood or consider how they will recover after birth. Postpartum doulas provide baby care (support with diapering, bathing, swaddling, soothing, sleep and more) and you care! Take a class about **preparing for postpartum**.

- **What other care might you need to thrive as you become a parent?** Learn about **prenatal acupuncturists, chiropractors, and mental health therapists** for pregnancy and postpartum. 98% of moms we surveyed said using one or more of these services improved their pregnancy or postpartum period. During the pandemic, social distancing rules may affect what type of care you can use.
- **Going to a childbirth class educates you about how labor works, what your choices and options are, teaches pain-coping and comfort measures for birth and connects you to other people who are also preparing to give birth.** During the pandemic, take a live, interactive virtual **class!** If possible, take a class outside of your hospital

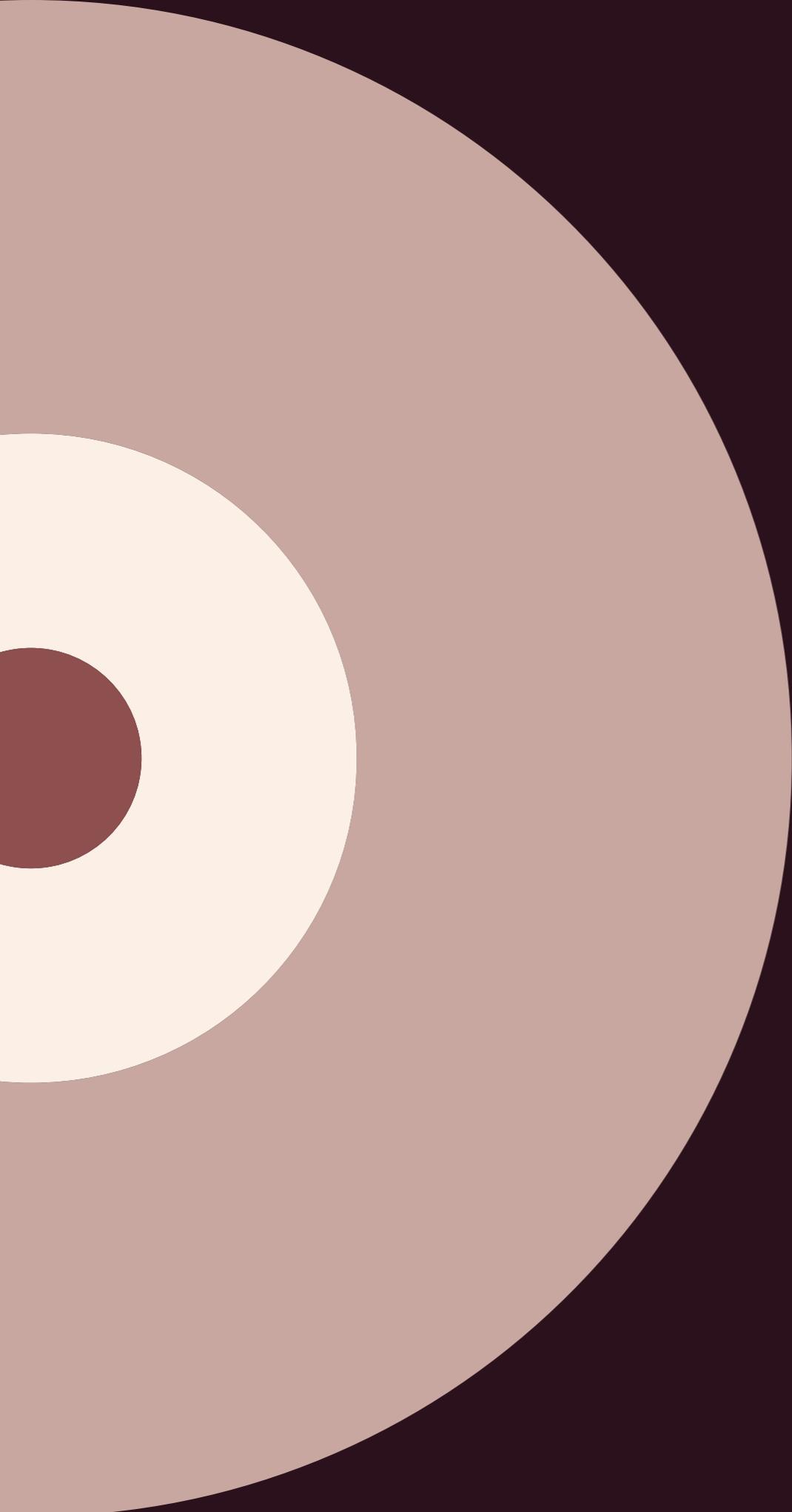
in order to get information about birth that you are entitled to, rather than just learning your hospital's preferred protocols and procedures.

- **Try to take some time out from preparing and give yourself the gift of self-care.** Just like you build in time for midwife/doctor appointments, build in hours that are just for your wellness or relaxation. During the pandemic, this might take the form of taking a virtual prenatal yoga class, receiving a massage from your partner or kneading your own tense muscles, or simply allowing yourself an hour (or 8 minutes!) to lay down, drink a cup of tea and listen to music or read a book. These forms of self-care will go the distance in making pregnancy more enjoyable.

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