

Adapting to Pregnancy: Third Trimester

Although common during pregnancy, some discomforts may seem worse in the final weeks. Simple lifestyle changes can help. Take care of yourself. And ask your partner to help out with small tasks.

Limiting leg problems

Ways to combat leg issues:

- Wear support hose all day.
- Avoid snug shoes and clothes that bind, like tight pants and socks with elastic tops.
- Sit with your feet and legs raised often.

Caring for your breasts

Tips to follow include:

- Wash with plain water. Avoid using harsh soaps or rubbing alcohol. They may cause dryness.
- Wear a nursing bra for extra support. It can also hide any leaks from your nipples.

Controlling hemorrhoids

Ways to avoid hemorrhoids include:

- Eat foods that are high in fiber. Also, exercise and drink enough fluids. This will reduce constipation and hemorrhoids.
- Sleep and nap on your side. This limits pressure on the veins of your rectum.
- Try not to stand or sit for long periods.

Controlling back pain

As your body changes during pregnancy, your back must work in new ways. Back pain is due to many causes. Physical changes in your body can strain your back and its supporting muscles. Also, hormones (chemicals that carry messages throughout the body) increase during pregnancy. This can affect how your muscles and joints work together. All of these changes can lead to pain. Pain may be felt in the upper or lower back. Pain is also common in the pelvis. Some pregnant women have sciatica. This is pain caused by pressure on the sciatic nerve running down the back of the leg. Ask your healthcare provider for specific tips and exercises to help control your back pain.

Tips to help you rest

Good rest and sleep will help you feel better. Here are some ideas:

- Ask your partner to massage your shoulders, neck, or back.
- Limit the errands you do each day.
- Lie down in the afternoon or after work for a few minutes.
- Take a warm bath before you go to sleep.
- Drink warm milk or teas without caffeine.
- Avoid coffee, black tea, and cola.

Stopping heartburn

- Avoid spicy, greasy, fried, or acidic foods.
- Eat small amounts more often. Eat slowly.
- Wait 2 hours after eating before lying down.
- Sleep with your upper body raised 6 inches.

Managing mood swings

Ways to manage mood swings include:

- Know that mood changes are normal.
- Exercise often, but get plenty of rest.
- Address any concerns and limit stress. Talking to your partner, other women, or your healthcare provider may help.

Dealing with urinary frequency

Tips to deal with having to urinate often include:

- Drink plenty of water all day. If you drink a lot in the evening, though, you may have to get up more in the night.
- Limit coffee, black tea, and cola.



Pregnancy: Your Third Trimester Changes

As the baby grows, your body changes too. You may also see signs that your body is getting ready for labor. Be patient. Within a few more weeks, your baby will be born.

How you are changing

Your body is preparing for the birth of your baby. Some of the most common changes are listed below. If you have any questions or concerns, ask your healthcare provider:

- You'll gain more weight from fluids, extra blood, and fat deposits.
- Your breasts will grow as your body gets ready to feed the baby. They may be more tender. You may also notice a slight yellow or white discharge from the nipples.
- Discharge from your vagina may increase. This is normal.
- You might see some skin color changes on your forehead, cheeks, or nose. Most of these will go away after you deliver.

How your baby is growing



Month 7

Your baby can open and close his or her eyes and weighs around 4 pounds. If born **prematurely** (too early), your baby would likely survive with special care.



Month 8

Your baby is building up body fat and weighs around 6 pounds.



Month 9

Your baby weighs nearly 7 pounds and is about 19 to 21 inches long. In other words, any day now...

Family-Centered Care at the HCMC Birth Center

The HCMC staff provides the best medical care available. We will do everything we can to help and support you and your baby. Help is available 24 hours a day.

What to expect in the hospital

Skin-to-skin:

Right after your baby is born, he will be placed naked on your naked chest and remain there for at least one hour. This improves bonding, helps him develop infection fighting power, and helps him feel warm and secure. During the first weeks of life, your baby should be held skin-to-skin often.

Rooming in:

You and your baby will share a room for your entire hospital stay. All routine care will be provided in your room. You and your baby may need to leave your room for a hearing test or male circumcision. You are invited to go with him. Rooming in allows you to know when your baby needs to feed. You and your baby will get more rest if you are near each other.

Feeding cues:

Your baby will let you know when he needs to eat by doing things like smacking his lips, putting his fingers in his mouth or turning his head back and forth. Your nurse can help you look for these cues. You should feed your baby 8-12 times in 24 hours. Babies eat during the day and the night.

Crying is the only way babies can “talk.” Crying babies can be soothed by rocking, being held skin-to-skin, singing, changing diaper, etc. A baby must be calm to feed.

The benefits of breastfeeding:

Start breastfeeding as soon as your baby is born. The American Academy of Pediatrics (AAP) recommends breastfeeding for at least one year. They also recommend waiting until your baby is 6 months old before starting other food. The longer you breastfeed, the more benefits your baby receives.

Some of the many benefits of breastfeeding:

- For babies: fewer infections, lower risk of asthma, fewer food allergies, and lower risk of obesity, diabetes and heart disease as an adult.
- For moms: decreased risk of diabetes, obesity, ovarian and breast cancer, and improved weight loss after delivery.

Breastfeeding is free and no added supplies are needed. Breastmilk is ready and warm whenever the baby is hungry.

Breastmilk is all your baby needs!

The first few days of your baby's life:

On the day of birth, your baby should feed in the first 1-2 hours of life. He will be sleepy most of the first day and may only feed 2-3 times. This is normal. On the second day, your baby will be more awake and feed more often. The first few days he doesn't need a large amount of breastmilk. The more your baby feeds, the more breastmilk you will make.

Some new moms are worried that they will not make enough breastmilk for their babies. Breastmilk is made even before the baby is born and increases in amount over the first few days of life. Your breasts will feel fuller when your baby is 3-4 days old. Know that if your baby has many wet diapers throughout the day and night, he is getting enough to eat. His poop will turn from dark brown to green to yellow by the time he is 4-5 days old.

It is normal for your baby to lose some weight in the first few days. Your health care provider will let you know if he has lost too much weight.

Pacifiers:

The AAP recommends a pacifier not be used until your baby is about 3-4 weeks old. The sucking the baby needs to do at the breast is different than that of a pacifier or bottle nipple.

Your baby needs to be able to show you he is hungry and this may be missed if there is a pacifier in his mouth. There are ways to soothe your baby other than using a pacifier.

After 3-4 weeks it is recommended that you use a pacifier when you put your baby down to sleep. This may help prevent SIDS.

Using formula while breastfeeding:

If you are breastfeeding, you should not give your baby formula unless your healthcare provider recommends it. Using formula can lead to a decreased breastmilk supply. The more the baby breastfeeds, the more milk will be produced. The longer you breastfeed, the more health benefits you and your baby will receive. Feeding only breastmilk will lead to the most benefit.

If you are concerned that your baby is not getting enough milk, talk to your provider before using formula to supplement.

If you have any breastfeeding problems, please call the HCMC Breastfeeding Clinic at (612) 873-MILK (6455). It is open Monday-Friday.

Kick Counts

It's normal to worry about your baby's health. One way you can know your baby's doing well is to record the baby's movements once a day. This is called a **kick count**. Remember to take your kick count records to all your appointments with your healthcare provider.

How to count kicks

Here are tips for counting kicks:

- Choose a time when the baby is active, such as after a meal.
- Sit comfortably or lie on your side.
- The first time the baby moves, write down the time.
- Count each movement until the baby has moved 10 times. This can take from 20 minutes to 2 hours.
- Try to do it at the same time each day.





When to call your healthcare provider

Call your healthcare provider **right away** if you notice any of the following:





- Your baby moves fewer than 10 times in 2 hours while you're doing kick counts.
- Your baby moves much less often than on the days before.
- You have not felt your baby move all day.








Your Birth Control Choices

Method	How to Use	Impact on Bleeding	Things to Know	How well does it work?*
External Condom 	<ul style="list-style-type: none"> Use a new condom each time you have sex Use a polyurethane condom if allergic to latex 	None	<ul style="list-style-type: none"> Can buy at many stores Can put on as part of sex play/foreplay Can help prevent early ejaculation Can be used for oral, vaginal, and anal sex Protects against HIV and other STIs Can decrease penile sensation Can cause loss of erection Can break or slip off Does not need a prescription 	87%
Internal Condom 	<ul style="list-style-type: none"> Use a new condom each time you have sex Use extra lubrication as needed 	None	<ul style="list-style-type: none"> Can put in as part of sex play/foreplay Can be used for anal and vaginal sex May increase vaginal/anal pleasure Good for people with latex allergy Protects against HIV and other STIs Can decrease penile sensation May be noisy May be hard to insert May slip out of place during sex May require a prescription from your health care provider 	79%
Diaphragm Caya® and Miletex® 	<ul style="list-style-type: none"> Put in vagina each time you have sex Use with spermicide every time 	None	<ul style="list-style-type: none"> Can last several years Costs very little to use May protect against some infections, but not HIV Using spermicide may raise the risk of getting HIV Should not be used with vaginal bleeding or infection Raises risk of bladder infection 	83%
Emergency Contraception Pills Progestin EC (Plan B® One-Step and others) and ulipristal acetate (ella®) 	<ul style="list-style-type: none"> Works best the sooner you take it after unprotected sex You can take EC up to 5 days after unprotected sex If pack contains 2 pills, take both at once 	<ul style="list-style-type: none"> Your next monthly bleeding may come early or late May cause spotting 	<ul style="list-style-type: none"> Available at pharmacies, health centers, or health care providers: call ahead to see if they have it People of any age can get progestin EC without a prescription May cause stomach upset or nausea Progestin EC does not interact with testosterone, but we don't know whether Ulipristal acetate EC does or not Ulipristal acetate EC requires a prescription May cost a lot Ulipristal acetate EC works better than progestin EC if your body mass index (BMI) is over 26. Ulipristal acetate EC works better than progestin EC 3-5 days after sex 	58 - 94%





*Typical Use

Method	How to Use	Impact on Bleeding	Things to Know	How well does it work?*
Fertility Awareness Natural Family Planning 	<ul style="list-style-type: none"> • Predict fertile days by: taking temperature daily, checking vaginal mucus for changes, and/or keeping a record of your monthly bleeding • It works best if you use more than one of these methods • Avoid sex or use condoms/spermicide on fertile days 	<ul style="list-style-type: none"> • Does not work well if your monthly bleeding is irregular 	<ul style="list-style-type: none"> • Costs little • Can help with avoiding or trying to become pregnant • Use a different method on fertile days • This method requires a lot of effort • Does not require a prescription 	85%
The Implant Nexplanon® 	<ul style="list-style-type: none"> • A clinician places it under the skin of the upper arm • It must be removed by a clinician 	<ul style="list-style-type: none"> • Can cause irregular bleeding and spotting • After 1 year, you may have no monthly bleeding at all • Cramps often improve 	<ul style="list-style-type: none"> • Long lasting (up to 5 years) • You can become pregnant right after it is removed • It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS) • May cause mood changes 	> 99%
Copper IUD ParaGard® 	<ul style="list-style-type: none"> • Must be placed in uterus by a clinician • Usually removed by a clinician 	<ul style="list-style-type: none"> • May cause cramps and heavy monthly bleeding • May cause spotting between monthly bleeding (if you take testosterone, this may not be an issue) 	<ul style="list-style-type: none"> • May be left in place for up to 12 years • You can become pregnant right after removal • It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS) • Rarely, uterus is injured during placement 	> 99%
Progestin IUD Liletta®, Mirena®, Skyla® and others 	<ul style="list-style-type: none"> • Must be placed in uterus by a clinician • Usually removed by a clinician 	<ul style="list-style-type: none"> • May improve cramps • May cause lighter monthly bleeding, spotting, or no monthly bleeding at all 	<ul style="list-style-type: none"> • May be left in place 3 to 7 years, depending on which IUD you choose • You can become pregnant right after removal • It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS) • Rarely, uterus is injured during placement 	> 99%

*Typical Use

Method	How to Use	Impact on Bleeding	Things to Know	How well does it work?*
The Patch Ortho Evra® 	<ul style="list-style-type: none"> Apply a new patch once a week for three weeks No patch in week 4 	<ul style="list-style-type: none"> Can make monthly bleeding more regular and less painful May cause spotting the first few months 	<ul style="list-style-type: none"> You can become pregnant right after stopping patch Can irritate skin under the patch This method contains estrogen - it is unclear if estrogen interacts with testosterone 	93%
The Pill 	<ul style="list-style-type: none"> Take the pill daily 	<ul style="list-style-type: none"> Often causes spotting, which may last for many months 	<ul style="list-style-type: none"> Can improve PMS symptoms Can improve acne Helps prevent cancer of the ovaries This method contains estrogen - it is unclear if estrogen interacts with testosterone You can become pregnant right after stopping the pills May cause nausea, weight gain, headaches, change in sex drive - some of these can be relieved by changing to a new brand 	93%
Progestin-Only Pills 	<ul style="list-style-type: none"> Take the pill daily 	<ul style="list-style-type: none"> Can make monthly bleeding more regular and less painful May cause spotting the first few months 	<ul style="list-style-type: none"> You can become pregnant right after stopping the pills It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS) May cause depression, hair or skin changes, change in sex drive 	93%
The Ring ANNOVERA® NuvaRing® 	<ul style="list-style-type: none"> Insert a small ring into the vagina Monthly Ring: Change ring each month Yearly Ring: Change ring each year 	<ul style="list-style-type: none"> Can make monthly bleeding more regular and less painful May cause spotting the first few months Can increase vaginal discharge 	<ul style="list-style-type: none"> There are two types: a monthly ring and a yearly ring. One size fits all Private You can become pregnant right after stopping the ring This method contains estrogen - it is unclear if estrogen interacts with testosterone 	93%
The Shot Depo-Provera® 	<ul style="list-style-type: none"> Get a shot every 3 months (13 weeks) Give yourself the shot or get it in a medical office 	<ul style="list-style-type: none"> Often decreases monthly bleeding May cause spotting or no monthly bleeding 	<ul style="list-style-type: none"> Each shot works for up to 15 weeks Private for user Helps prevent cancer of the uterus May cause weight gain, depression, hair or skin changes, change in sex drive It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS) Side effects may last up to 6 months after you stop the shots 	96%

*Typical Use

Method	How to Use	Impact on Bleeding	Things to Know	How well does it work?*
Sterilization: Tubal Methods 	<ul style="list-style-type: none"> • These methods block or cut the Fallopian tubes • A clinician reaches the tubes through your belly 	None	<ul style="list-style-type: none"> • These methods are permanent and highly effective • Reversal is difficult • The risks include infection, bleeding, pain, and reactions to anesthesia 	> 98%
Sterilization: Vasectomy 	<ul style="list-style-type: none"> • A clinician blocks or cuts the tubes that carry sperm from your testicles 	None	<ul style="list-style-type: none"> • This method is permanent and highly effective • It is more effective, safer, and cheaper than tubal procedures • Can be done in the clinician's office • No general anesthesia needed • Reversal is difficult • Risks include infection, pain, and bleeding • It takes up to 3 months to work 	> 99%
Vaginal Acidifying Gel Phexxi® 	<ul style="list-style-type: none"> • Insert gel each time you have sex 	None	<ul style="list-style-type: none"> • Can be put in as part of sex play/foreplay • Does not have any hormones • Requires a prescription • May irritate vagina, penis • Should not be used with urinary tract infection 	86%
Vaginal Spermicide Cream, gel, sponge, foam, inserts, film 	<ul style="list-style-type: none"> • Insert spermicide each time you have sex. 	None	<ul style="list-style-type: none"> • Can buy at many stores • Can be put in as part of sex play/foreplay • Comes in many forms: cream, gel, sponge, foam, inserts, film • May raise the risk of getting HIV • May irritate vagina, penis • Cream, gel, and foam can be messy • Does not require a prescription 	79%
Withdrawal Pull-out	<ul style="list-style-type: none"> • Pull penis out of vagina before ejaculations (that is, before coming) 	None	<ul style="list-style-type: none"> • Costs nothing • Less pleasure for some • Does not work if penis is not pulled out in time • Must interrupt sex 	80%

*Typical Use

Birth Center | Childbirth Education and Services

Childbirth Education

Online childbirth education is available online to you and anyone who will be providing support for you during labor or after the baby is born. You can access these videos on your own time and at your convenience.

1. Visit www.hennepinhealthcare.org/childbirtheeducation
2. Click on the “Childbirth education videos (password required)” button
3. Enter the password “hcmc” (all lowercase) to log in

Childbirth education

Online childbirth education is available to you and anyone who will be providing support for you during labor or after the baby is born.

Your doctor or midwife will provide you with a password so that you are able to access these videos on your own time and at your convenience. Your doctor or midwife will also follow your progress with educational review at your visits and will be able to answer any questions you may have.

Childbirth education videos (password required)



Your doctor or midwife will also follow your progress with educational review at your visits and will be able to answer any questions you may have.

Need a computer? HCMC has public computers in the cafeteria in the Orange Building, Level 3.

Interested in in-person childbirth education? We currently do not offer this service but recommend two organizations; visit their website for more information: **Amma**, ammaparentingcenter.com and **Blooma**, blooma.com

Tour the Birth Center

Learn about coming to the Birth Center at HCMC to have your baby. A tour will help you know what to expect during your stay here. Tours are open to the public. Attending a tour is a great way to see if Hennepin is the place for you and your family. **Sign up online or call 612-873-6963.**

Car seat classes

Clients are eligible to register for a car seat class and receive a free car seat if they are a member of one of the following health plans: BluePlus MA, UCare MA, or Hennepin Health. A car seat class helps families learn which car seats to use and how to install them properly. **Call to sign up for classes: 612-873-6963. Register early; class sizes are limited.**

Classes are held at:

MVNA
2000 Summer St NE, Suite #100
Minneapolis 55413

Once you have registered by phone, a confirmation letter with your class date and location will be mailed. We bill your insurance for the cost of all classes.

Doula services

If you are having your baby at the Birth Center and choose to work with a doula, this service is provided at no additional cost to you. Doulas are trained in childbirth and can support a mother who is expecting, is in labor, or has recently given birth. Doulas can not provide medical advice or care but can help you to have a safe, memorable, and empowering birth experience.

Studies have shown that having a doula present at birth, patients are more likely to:

- Have a normal, vaginal birth and avoid a cesarean birth.
- Avoid using pain medication during labor.
- Have positive feelings about childbirth.
- Have a shorter labor.
- Have a healthy baby.

Tell your healthcare provider as soon as you know that you want to work with a doula. You can ask to work with a doula at any point in your birth process.

What Does A Safe Sleep Environment Look Like?

The image below shows a safe infant sleep environment.

Baby's sleep area is in the same room, next to where parents sleep.

Use a firm and flat sleep surface, such as a mattress in a safety-approved crib*, covered by a fitted sheet.

Baby should not sleep in an adult bed, on a couch, or on a chair alone, with you, or with anyone else.

Do not smoke or let anyone else smoke around your baby.

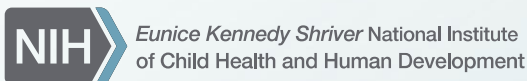


Do not put pillows, blankets, sheepskins, or crib bumpers anywhere in your baby's sleep area.

Keep soft objects, toys, and loose bedding out of your baby's sleep area. Make sure nothing covers the baby's head.

Dress your baby in sleep clothing, such as a wearable blanket. Do not use a loose blanket, and do not overbundle.

Always place your baby on his or her back to sleep, for naps and at night.



Safe Sleep For Your Baby

Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death



Always place baby on his or her back to sleep, for naps and at night, to reduce the risk of SIDS.



Use a firm and flat sleep surface, such as a mattress in a safety-approved crib*, covered by a fitted sheet with no other bedding or soft items in the sleep area.



Share your room with baby. Keep baby in your room close to your bed, but on a separate surface designed for infants, ideally for baby's first year, but at least for the first 6 months.



Do not put soft objects, toys, crib bumpers, or loose bedding under baby, over baby, or anywhere in baby's sleep area.

To reduce the risk of SIDS, women should:



Get regular prenatal care during pregnancy.



Avoid smoking, drinking alcohol, and using marijuana or illegal drugs during pregnancy or after the baby is born.



Do not smoke during pregnancy, and do not smoke or allow smoking around your baby or in your baby's environment.



Think about giving your baby a pacifier for naps and nighttime sleep to reduce the risk of SIDS. Wait until breastfeeding is well established (often by 3 to 4 weeks) before offering a pacifier.



Do not let your baby get too hot during sleep.

For more information about the Safe to Sleep® campaign, contact us:

Phone: 1-800-505-CRIB (2742) | **Fax:** 1-866-760-5947

Email: SafetoSleep@mail.nih.gov

Website: <http://safetosleep.nichd.nih.gov>

Mail: 31 Center Drive, 31/2A32, Bethesda, MD 20892-2425

Federal Relay Service: Dial 7-1-1



Breastfeed your baby to reduce the risk of SIDS. Breastfeeding has many health benefits for mother and baby. If you fall asleep while feeding or comforting baby in an adult bed, place him or her back in a separate sleep area as soon as you wake up.



Follow guidance from your health care provider on your baby's vaccines and regular health checkups.



Avoid products that go against safe sleep recommendations, especially those that claim to prevent or reduce the risk for SIDS.



Do not use heart or breathing monitors in the home to reduce the risk of SIDS.



Give your baby plenty of tummy time when he or she is awake and someone is watching.

* A crib, bassinet, portable crib, or play yard that follows the safety standards of the Consumer Product Safety Commission (CPSC) is recommended. For information on crib safety, contact the CPSC at **1-800-638-2772** or <http://www.cpsc.gov>.