

Important appointments

These appointments will be made during your postpartum stay:

Pediatric lactation visit

This appointment is about 3-5 days after you're discharged from the hospital. It includes a physical exam of your baby and a feeding consultation. Bring a hungry baby. Lactation help is available to you for as long as you are breastfeeding.

2-week pediatric check-up

Please select a pediatrician or family practice clinician before your baby is born. To find out who is available at your chosen location, go to **kp.org/ healthengagement/lookbook**. You may also arrange a "meet and greet" appointment with the clinician.

1-month group visit for first-time parents

This optional visit is designed to bridge the gap between the 2-week and 2-month checkups. Join other first-time parents and babies for check-ups and discussion. This group is staffed by a pediatrician, pediatric nurse, and lactation consultant.

6-week OB visit

This visit is usually scheduled during one of your final prenatal visits. You can do this as a video visit if you do not feel the need to be seen in person.

Feeding support

While Kaiser Permanente will support you in your feeding choices – breastmilk or formula – our hospitals follow breastfeeding and bonding practices. These include:

- All nurses have specialized training in breastfeeding. They can assist with positioning and latch.
- Certified lactation consultants are available if you need additional support.
- Lots of skin-to-skin contact is encouraged. It helps stabilize babies and promotes breastfeeding behaviors.
- Parents and babies will practice "rooming-in" to stay close for bonding. This also helps you learn to recognize infant behaviors, including feeding cues.
- Babies are not offered any food or drink other than breastmilk, unless they need it medically or parents choose to formula feed.
- No artificial nipples are regularly offered to healthy breastfeeding babies. An exception is in the case of certain medical procedures where sucking may provide comfort.
- Supplementation with donor breastmilk is available if your baby needs it.
- Nursing parents are encouraged to hand express 5 times a day, for 5 minutes, for 5 days. This has been shown to increase milk production by 130%.
- Parents are helped with pumping if they need it.

Kaiser Permanente resources

Advice

- Less than 20 weeks pregnant or postpartum, 1-855-285-4246 (toll free)
- More than 20 weeks pregnant 503-571-2229

Coming to hospital in labor

- Kaiser Permanente Sunnyside Medical Center and Kaiser Permanente Westside Medical Center 503-571-2229
- Legacy Salmon Creek Medical Center 360-487-4300

Lactation support

- Kaiser Pediatric Lactation 1-855-206-0302 (toll free)
- Nursing Mother's Counsel 503-282-3338 or 360-750-0656 nursingmotherscounsel.org

kp.org/healthengagement

Interested in a class on childbirth or parenting? Looking for health resources? Get information about these topics and more on the Health Engagement and Wellness Services Department website. You may also call us:

Portland area	503-286-6816
All other areas (toll free)	1-866-301-3866

kp.org

On Kaiser Permanente's website, you can email your doctor, refill prescriptions, and find information and resources on many health and wellness topics. Check out **kp.org/maternity** for health information for parents and baby. For facility specific information, go to **kp.org/maternity/sunnyside** or **kp.org/maternity/westside**.



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Childbirth tour



Health Engagement and Wellness Services

Please call 503-571-2229 for any of the following:

- Any advice past 20 weeks of pregnancy
- Signs of preterm labor
- In labor before coming to hospital
- Your bag of waters breaks

Warning signs of preterm labor

If you are less than 37 weeks pregnant and experience any of the following, call right away, even if you are unsure. Warning signs of preterm labor may be very subtle and difficult to recognize – waiting could result in the preterm birth of your baby.

- Menstrual-like cramps (usually in the lower abdomen). These cramps may come and go, or remain constant. They can also occur with or without nausea, diarrhea, or indigestion.
- Contractions every 15 minutes or closer.
- Low, dull backache below the waist that does not go away when you change positions or rest on your side. Or a rhythmic backache that comes and goes in a pattern (back labor).
- Pelvic pain or pressure that comes and goes in a rhythmic pattern in the lower abdomen, back, and/or thighs. This is sometimes described as a "heaviness in the pelvis."
- Intestinal cramping or flu-like symptoms, with or without diarrhea.
- Increase or change in vaginal discharge. It can be heavy or mucous-like, watery, or a light bloody discharge.
- Your bag of waters breaks.

In labor

It is recommended you stay at home during early labor for as long as you are comfortable. This depends on any medical issues that may mean you need to come sooner. Speak with your clinician to see if this applies to you.

These memory aides can help you decide when to call and what information to share.

First baby:

- **5** contractions are 5 minutes apart
- 1 each contraction lasts 1 minute
- 1 this pattern has been going on for 1 hour

Not first baby:

- **7** contractions are 7 minutes apart
- 1 each contraction lasts 1 minute
- **1** this pattern has been going on for 1 hour

Your water breaks

This may be experienced as a gush or trickle. Be prepared to share this information:

- **C** color of the fluid
- O odor of the fluid
- A approximate amount (gush or trickle)
- **T** time you noticed the fluid

Calling for consultation may or may not end up with your coming in right away. You may also call for consultation at any time during early labor.

If at any time you experience bright red vaginal bleeding, come in right away, and call while you're on the way.

If you are less than 20 weeks pregnant, or are postpartum and need advice, please call 1-855-285-4246 (toll free).

What to bring

Your labor bag

Personalize your labor bag with items important to you.

Kaiser Permanente card

- Birth preferences and positions information
- Loose, comfortable clothing Robe, slippers, socks
- Basic toiletries
- Hairbands, ties, clips
- Lip balm
- Lotion, oil, massage tools
- Focal point, pillows, blanket Music, camera, laptop, phone
- Preferred snacks

Partner

Change of clothes **Basic toiletries** Mints, breath freshener Swimwear Sleepwear Snacks, easy meals Postpartum Sleepwear (if desired) Going home clothes Nursing bra/pads Baby outfits and blankets Breast pump Car safety seat What not to bring Expensive jewelry Candles

Anything with no battery option for power Aromatherapy scents

Safety seat information

It is recommended that you have your safety seat installation checked by a Certified Safety Seat Technician. According to a study conducted by Chrysler, 96 percent of parents and caregivers believe their child safety seats are installed correctly. But research shows that 7 out of 10 children are improperly restrained. This puts them at risk for serious injury or death in a crash.

For more information, contact:

- oregonimpact.org
- Doernbecher Children's Hospital, 503-494-3735
- 800bucklup.org (Washington)

The impact of a car crash can pull a baby from an adult's arms with a force exceeding 300 pounds. To make travel as safe as possible for your child, please remember:

- The law requires that you use a child safety seat for your baby's first ride home from the hospital, and for all trips afterward.
- Never place a child safety seat in the front seat of a vehicle. If the air bag goes off, it could injure or kill your child.
- Your baby is safest when the child safety seat is secured in the middle of the back seat.
- The law says that babies and toddlers must ride rear-facing until they reach 2 years of age. Child passengers must use a safety seat until they weigh 40 pounds. They must use a booster seat until they reach 4'9" or age 8, and the adult seat belt fits them correctly.