Congratulations
And Welcome to DDEAMC

AGENDA

- OB services provided
- Lab tests
- Pregnancy care
- Ultrasounds
- Delivery
- Body changes
- Warning signs
- Q&A

AGENDA

Obstetrical Services/Goals	1300-1345
Physical Therapy	1345-1415
TRICARE	1415-1430
Nutrition Service	1430-1500
Army Community Services	1500-1515

LET'S GET STARTED!!

OBSTETRIC SERVICES

- Complicated pregnancies
- Routine pregnancies

- Antepartum
- Intrapartum
- Postpartum
- Lactation Consultation

PREVENTIVE HEALTH

- Bring your **immunization record**
- **Tdap** (Pertussis = whooping cough)
  - 2013 CDC guideline:

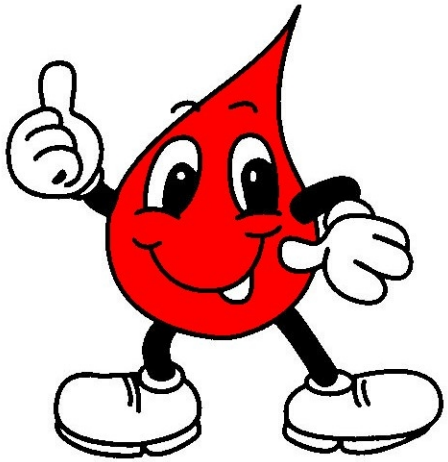
    every pregnancy 27-36 weeks
  - Individuals who have close and regular contact with baby
- **Influenza** vaccination
  - Sept through May

PREVENTIVE HEALTH

- **Gardasil** vaccine is available after delivery.
  - Aids in prevention of cervical cancer
  - Series of 3 injections:
    - 1st injection after delivery
    - 2nd injection is given 2 months after 1st injection
    - 3rd injection is given 6 months after 1st injection

WHY DO I NEED SO MUCH LAB WORK?!?!

- Complete blood count
  - Blood disorder
  - Anemia
- Blood type (If Rh- will receive Rhogam at 28 weeks)



- Sexually Transmitted Infections
  - Hepatitis B
  - Gonorrhea / Chlamydia
  - HIV
  - Syphilis
- Urinalysis

OTHER LAB TESTING:

- Screening for certain genetic diseases
  - One-time testing for:
    - Cystic Fibrosis
    - Sickle Cell
  - Based on your particular risks, your physician will discuss other available genetic testing during your pregnancy.

24-28 WEEKS LABS

- Glucola screening for Gestational Diabetes
- Rhogam is given at 28 weeks for Rh-negative mothers

Glucola: Gestational Diabetes Screening

- Screen for gestational diabetes
  - 1 hour Glucola
  - Should be less than 135
  - If greater than or equal to 135, then 3-hour glucose tolerance testing will be done

- Also done during the beginning of pregnancy if there are risk factors

RISK FACTORS FOR GESTATIONAL DIABETES IN PREGNANCY:

- Body mass index (BMI) greater than 30
- Previous pregnancy with gestational diabetes
- Multiple first degree relatives with type 2 diabetes
- Baby's birth weight greater than 8.8 pounds or 4000 gm
- Previous pregnancy with stillbirth

RHOGAM

- Given to a Mother with Rh-negative blood type because her body can produce cells to attack baby with Rh-positive blood type.
- Rhogam is given:
  - At 28 weeks
  - After delivery <u>if</u> baby is Rh positive
  - If bleeding occurs during pregnancy

36 Weeks

- Group beta streptococcus (GBS)
  - It is a bacteria commonly found in 1 / 3 of all adults
  - Has potential to infect baby when baby passes through birth canal.
  - A sample is taken from inside the vagina and outside the rectum using a cotton swab. The procedure is painless. The samples are sent to the lab for testing.

ULTRASOUND IN PREGNANCY

- Uses:
  - **To confirm/establish Due Date**
  - To check baby's growth
  - To check for certain type of defects (anatomy), only 85% accurate
  - To check placenta
  - To check fluid around baby
  - To check position of baby whether head down or breech

ULTRASOUND IN PREGNANCY

- First trimester ultrasound done between 7 and 12 weeks to establish/confirm due date.
- Routine ultrasound done between 20 and 22 weeks here in hospital in US department.
- Other ultrasounds done as needed based on situation.
- In healthy pregnancies, 1-2 ultrasounds are usually done.

ULTRASOUND IN PREGNANCY

- Keepsake ultrasound is discouraged by ACOG and FDA.
  - Baby is exposed to sound waves for longer periods of time
  - Keepsake US is not done by a medical sonographer

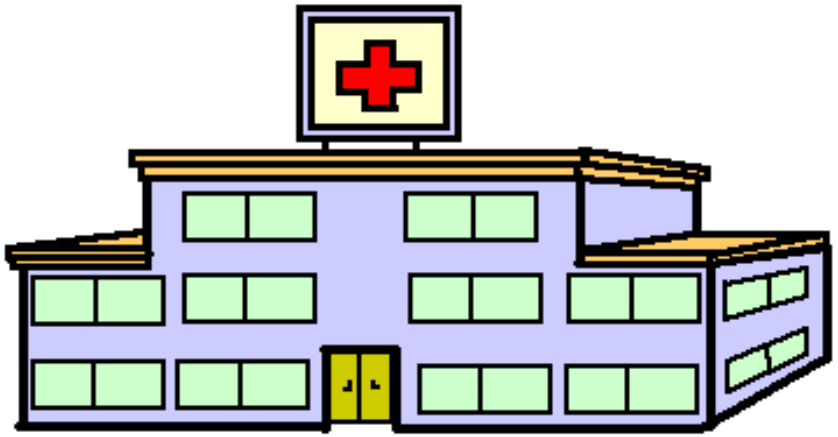
SCHEDULE OF OB VISITS

- Goal oriented OB visits
- Weeks 6-8
  - OB registration appointment once positive pregnancy test is confirmed in EAMC hospital lab
  - OB intake nurse will order initial prenatal labs
  - OB class
- Weeks 10-12
  - First visit with OB provider
  - Ultrasound to establish due date
  - Go over lab results

SCHEDULE OF OB VISITS

- 16-20 weeks
  - Quad screen to test for Trisomy 21, Trisomy 18 (Down Syndrome), neural tube defect (Spina Bifida) **if desired**

Routine ultrasound is ordered (best done 20-22 weeks)



SCHEDULE OF OB VISITS

- 24 weeks
  - Go over ultrasound result
  - Go over quad screen results
  - Doctor will answer any questions
  - Education provided on symptoms of labor
  - Counseling given for cesarean section or trial of labor after cesarean section

SCHEDULE OF OB VISITS

- 28 weeks
  - Glucola test for Diabetes
  - Receive Rhogam if blood type is Rh-negative
  - Tdap for EVERY pregnancy between 27-36 weeks
  - Preterm labor education
  - Fetal kick count sheet given with instructions on use

SCHEDULE OF OB VISITS

- 32 weeks
  - Talk about birth control afterward
  - Start thinking about birth plan
  - Lamaze, Birthing Class, Infant CPR , etc
  - Preterm labor precautions

SCHEDULE OF OB VISITS

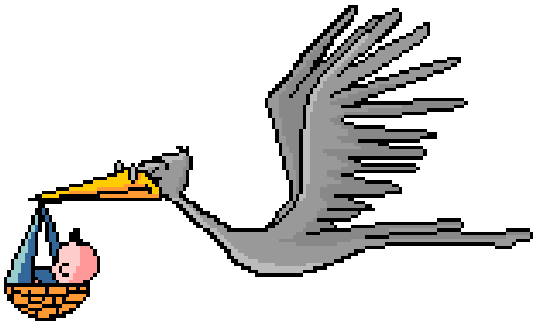
- 36 weeks
  - GBS
  - Lamaze, Birthing Class, Infant CPR , etc
  - Talk about birth control afterward
  - Start thinking about birth plan
  - Fetal kick count
  - Labor precautions

SCHEDULE OF OB VISITS

- 38 – 40+ weeks
  - Membrane stripping to help labor begin if desired
  - Talk about birth control
  - Fetal kick count
  - Education on signs and symptoms of labor

DELIVERY OF BABIES

- Trinity Hospital
  - All private rooms
- Level II NICU
  - As needed for infants born after 32 weeks
- *Family Centered Care*



DELIVERY OF BABIES

- Augusta University
- Level IV NICU

For high-risk deliveries as needed

FAMILY MEDICINE CLINIC HOURS

- (706) 787-9355
- MONDAY-THURSDAY
  - 0800-1630
- FRIDAY
  - 0900-1630

OBGYN CLINIC HOURS

- (706) 787-7228 or (706) 787-7445
- MONDAY - TUESDAY -WEDNESDAY-FRIDAY
  - 0800-1600
- THURSDAY
  - 0900-1600

TRINITY HOSPITAL L&D

- Open 24 x 7
- EAMC has an OBGYN doctor and a Family Medicine doctor on-call at Trinity 24 x 7!

URGENT CARE ISSUES

- After clinic hours:
  - EAMC Emergency Room
    - Less than 20 weeks
  - Trinity Hospital L&D
    - After 20 weeks

For Acute Care During Pregnancy

BEFORE 20 weeks gestation:

- For ALL concerns, go to DDEAMC Emergency Department.

AFTER 20 weeks:

- For pregnancy-related concerns: go to **LABOR and DELIVERY** at Trinity Hospital.
- For all other concerns: go to **DDEAMC Emergency Department**

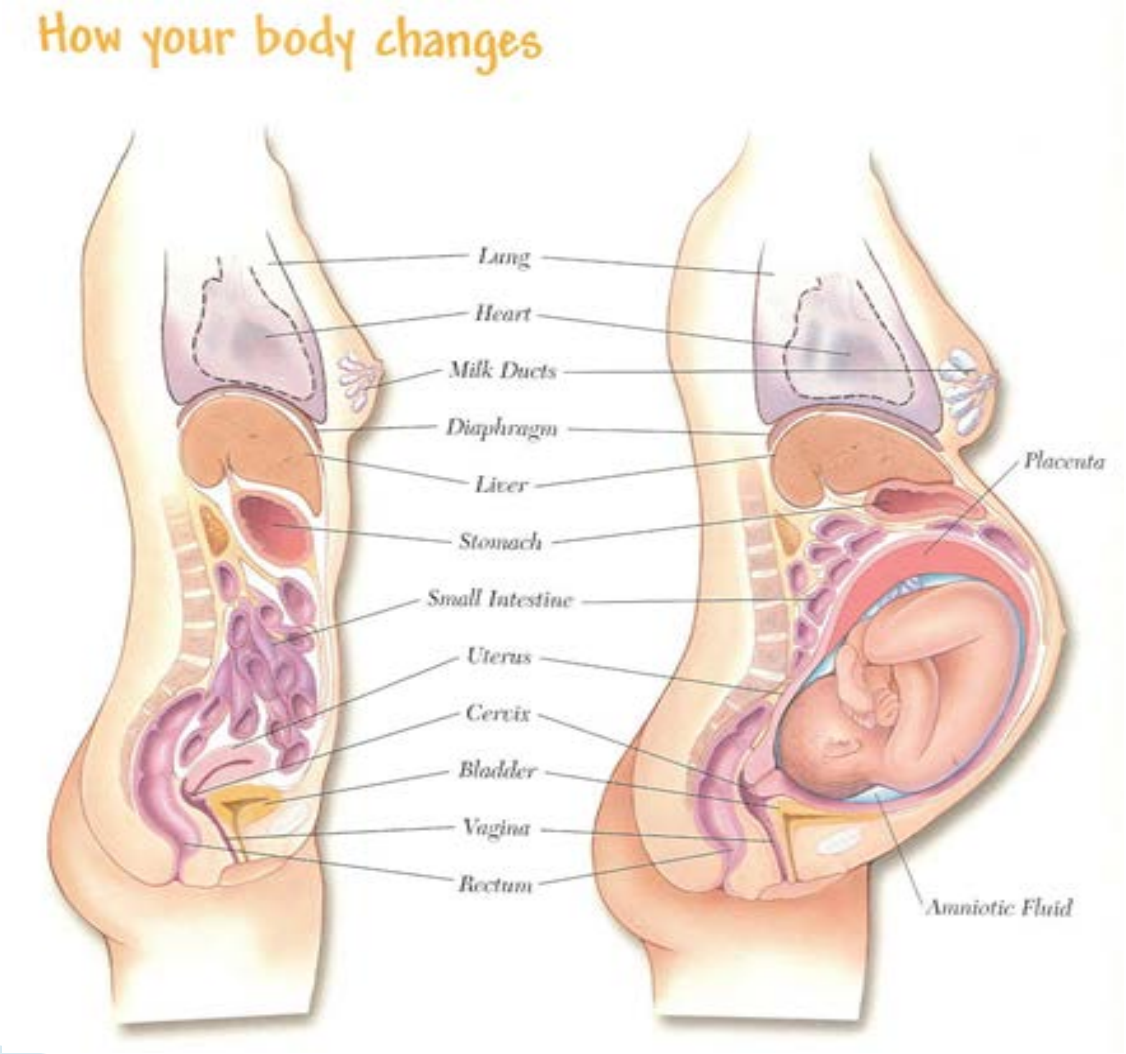
Do NOT go to the Emergency Room at Trinity unless you need their help to get up to Labor and Delivery after 20 weeks! You will be billed for the cost of the ER visit.

FREE CLASSES: Trinity Hospital

- Lamaze
- Daddy Boot Camp
- Baby Care Basics & Breastfeeding
- Infant CPR
- “Hug” Your Baby
- Our New Baby Sibling Class
- Childbirth Education 101

- http://www.trinityofaugusta.com

PREGNANCY CHANGES EVERYTHING!!



Common Changes…

- Weight gain
- Headaches
- Dizziness
- Fatigue/sleeplessness
- Vision changes
- Nosebleeds
- Bleeding gums
- Nausea
- Breast swelling/tenderness/leaking
- Heartburn
- Back pain (especially lower back)
- Numbness/tingling in hands and fingers
- Constipation/gas
- Braxton Hicks contractions
- Ligament pain
- Hemorrhoids
- Increased vaginal discharge
- Frequent urination
- Leg cramps
- Varicose veins
- Ankle/foot swelling

WARNING SIGNS !!!

- Bright red bleeding
- Severe pelvic cramping
- Vomiting and unable to keep liquid down
- Temp over 101° for more than 24 hours

QUESTIONS??

W oman

I nfant

C hildren

Program

WHAT IS WIC?

- WIC IS A SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, & CHILDREN
- WIC PROVIDES NUTRITIOUS FOODS, NUTRITION EDUCATION AND REFERRALS
- WIC SERVES LOW-INCOME PREGNANT, POSTPARTUM AND BREASTFEEDING WOMEN, AND INFANTS AND CHILDREN UP TO AGE 5 WHO ARE AT NUTRITION RISK
- WIC IS A FEDERAL GRANT PROGRAM ADMINISTERED BY STATE AGENCIES

WHO IS ELIGIBLE?

- PREGNANT, POSTPARTUM, AND BREASTFEEDING WOMEN, INFANTS, AND CHILDREN UP TO AGE 5
- THEY MUST MEET INCOME GUIDELINES, A STATE RESIDENCY REQUIREMENT, AND BE INDIVIDUALLY DETERMINED TO BE AT "NUTRITION RISK" BY A HEALTH PROFESSIONAL

WHAT IS "NUTRITION RISK?"

- TWO MAJOR TYPES OF NUTRITION RISKS:

1. MEDICALLY-BASED RISKS SUCH AS ANEMIA, UNDERWEIGHT, OVERWEIGHT, HISTORY OF PREGNANCY COMPLICATIONS, OR POOR PREGNANCY OUTCOMES

2. DIETARY RISKS, SUCH AS FAILURE TO MEET THE DIETARY GUIDELINES OR INAPPROPRIATE NUTRITION PRACTICES

WHAT FOOD BENEFITS?

- WIC PARTICIPANTS RECEIVE CHECKS/VOUCHERS/EBT FOR SPECIFIC FOODS

- WIC FOODS INCLUDE:

1. INFANT CEREAL, IRON-FORTIFIED ADULT CEREAL
2. VITAMIN C-RICH FRUIT OR VEGETABLE JUICE
3. DAIRY PRODUCTS: EGGS, CHEESE,MILK
4. PEANUT BUTTER
5. CANNED BEANS/PEAS, CANNED FISH
6. SOY-BASED BEVERAGES, TOFU
7. FRUITS AND VEGETABLES
8. BABY FOOD
9. WHOLE-WHEAT BREAD/WHOLE GRAINS

HOW DO I CONACT WIC?

706-721-5930

PLEASE CALL AND MAKE APPOINTMENT

NECESSARY DOCUMENTS:

1. PROOF OF RESIDENCY
2. HAVE A CHILD UNDER 5 YEARS OLD OR ARE PREGNANT OR BREASTFEEDING
3. PROOF OF INCOME

Preventing and Treating Low Back Pain During Pregnancy

Barbara Gunnells, PT, MSPT

Spring, 2012

Common complaints during pregnancy

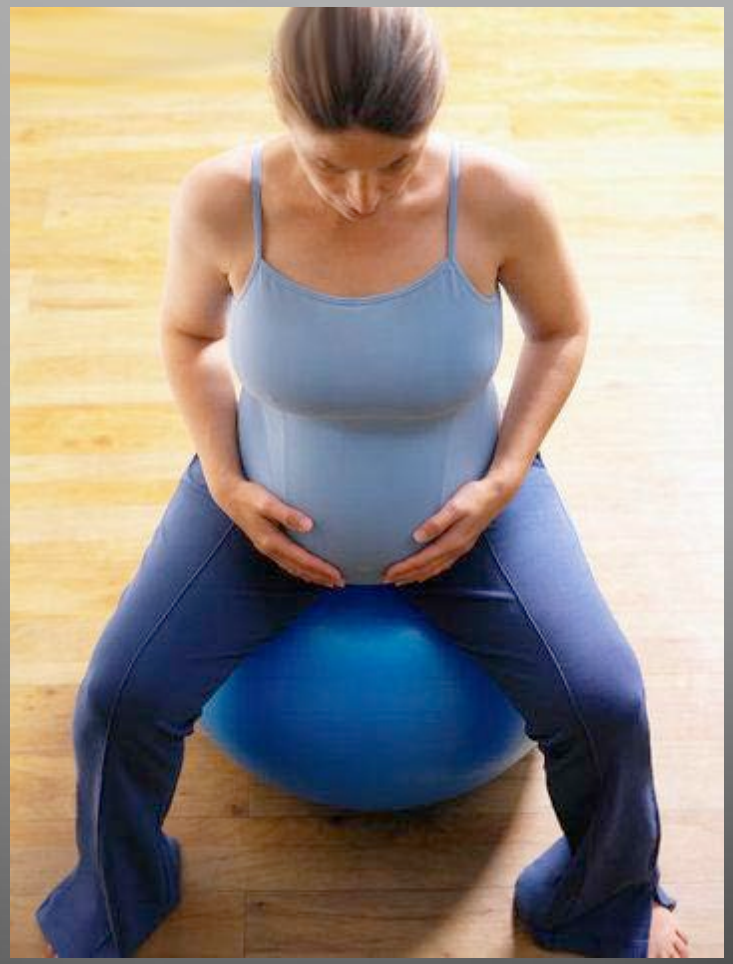
- Low back pain
- Hip pain
- Foot pain
- Upper back pain
- Neck pain

"I can now relate to what you're going through. I had to carry my clubs for all 18 holes today."

Prevention is the best treatment!

Prevention

- Continued physical exercise/activity
- Emphasis core stabilization from the first trimester
- PREGNANCY DOES NOT EQUAL AN EXCUSE TO STOP EXERCISING



Prevention = Daily Exercise

- 30 minutes or more of moderate exercise a day – most, if not all, days of the week.
- Use the “talk test”

Prevention = Core Stabilization

- Hip, abdominal and low back muscles are core stabilizing muscles
- New research supports improved functional stabilization & decreased back pain (transverse abdominus)
- Core stabilization can be performed into and throughout the 3rd trimester (except exercises performed lying on your back)

Benefits of exercise

- Increased endurance during labor/delivery
- Control excess weight gain
- Improved mental outlook and increased energy
- Improved appearance and posture
- Improved sleep patterns
- Less backache
- Decreased varicose veins
- Easier to get back into shape after child birth

Exercise Precautions

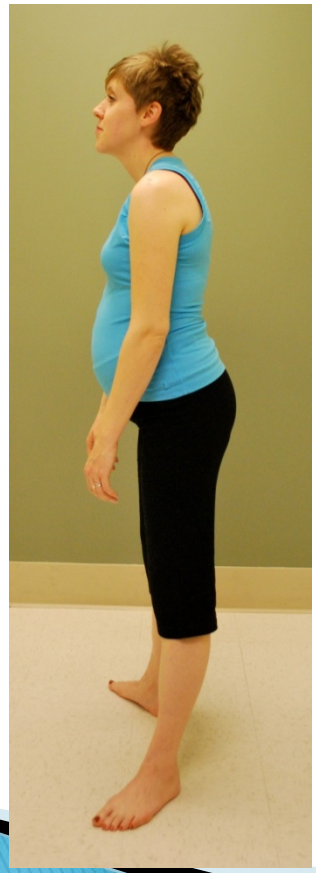
- Chronic hypertension
- Active Thyroid, cardiac, vascular, or pulmonary disease
- History of sedentary lifestyle

Exercise Contraindications

- Pregnancy complications currently or previously (must be cleared by your Doctor)
- Exercising to exhaustion/fatigue
- Exercises that challenge balance or involve potential for abdominal trauma

Prevention = good posture

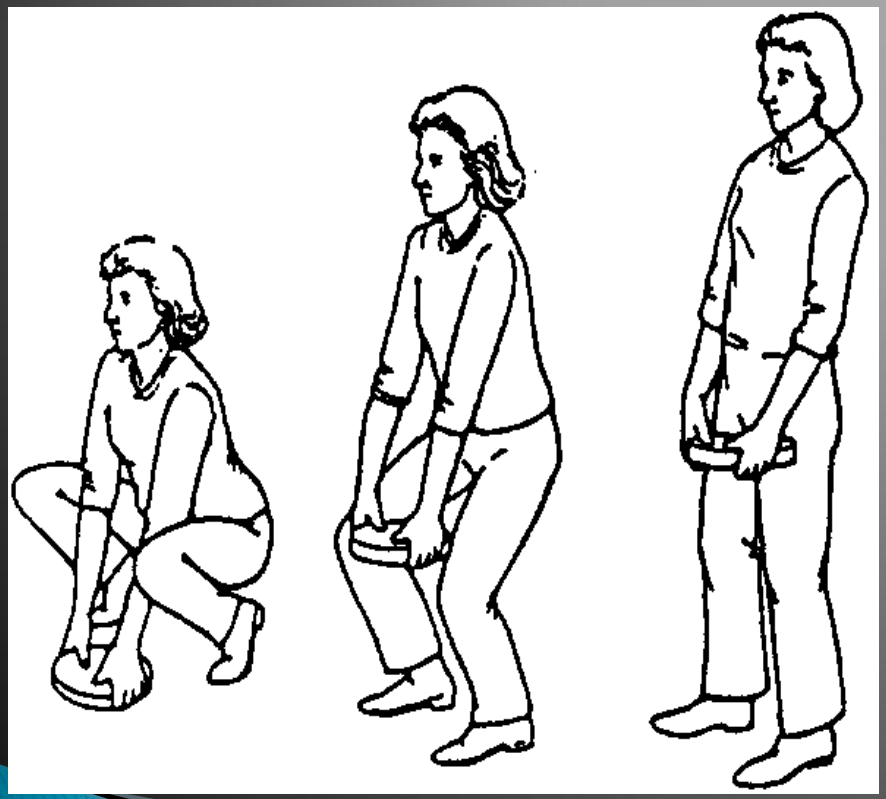
- Poor Posture
  Posture



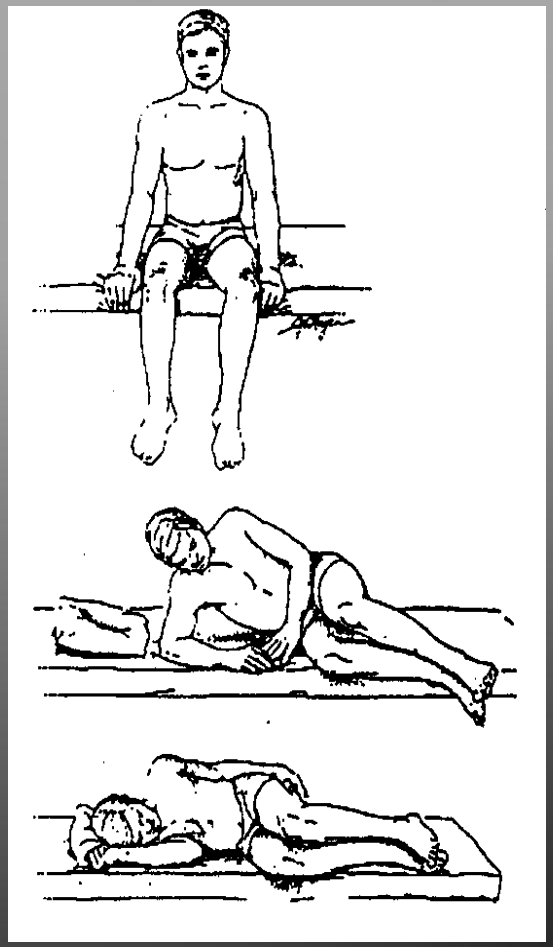
Good

Other methods to prevent, minimize, or eliminate Low Back Pain

- Proper Lifting

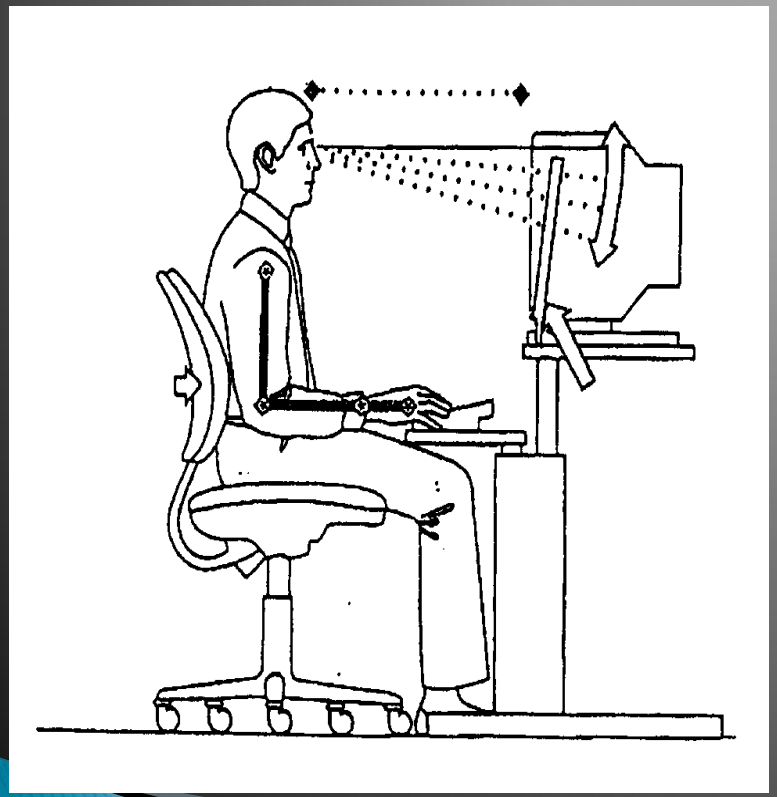


- Getting out of Bed

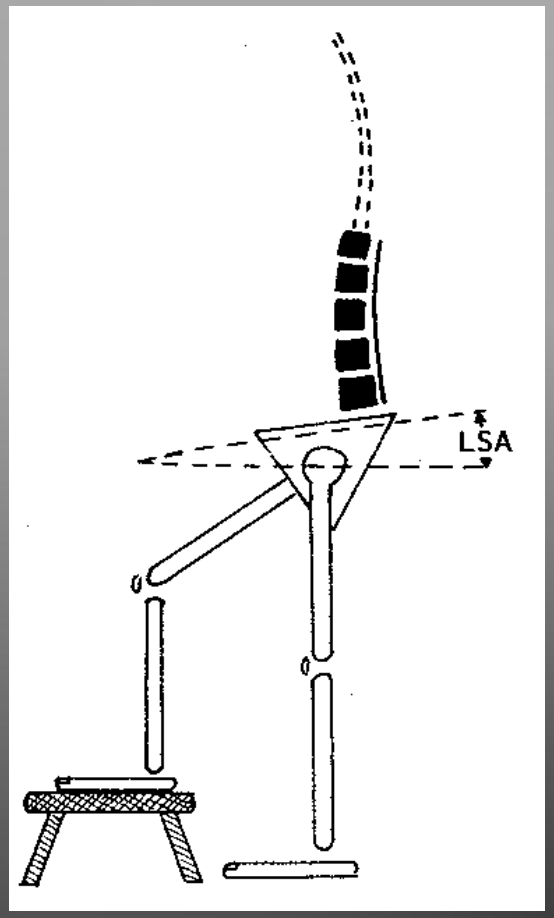


Other methods….

- Counter/Desk Work

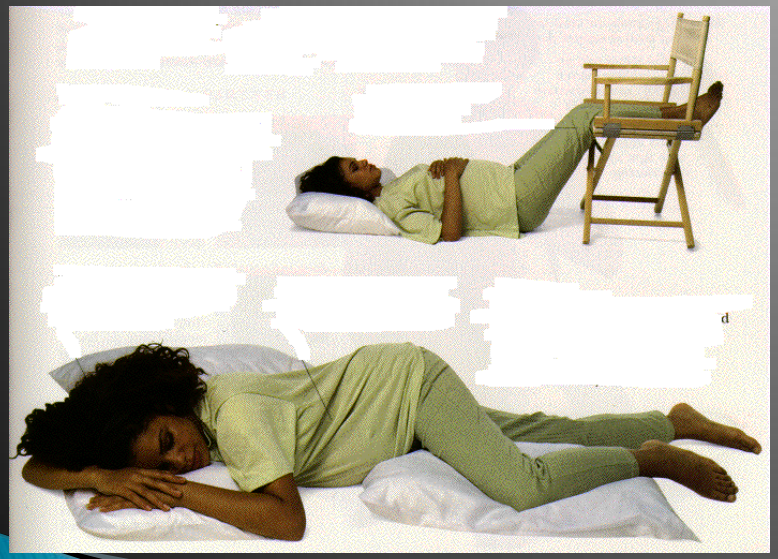


- Counter/Desk Work

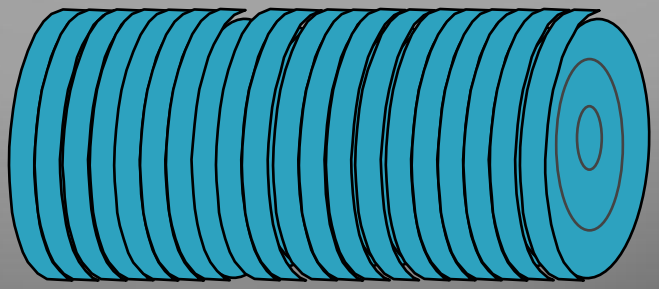


Other methods…..

Sleeping and Resting Positions……

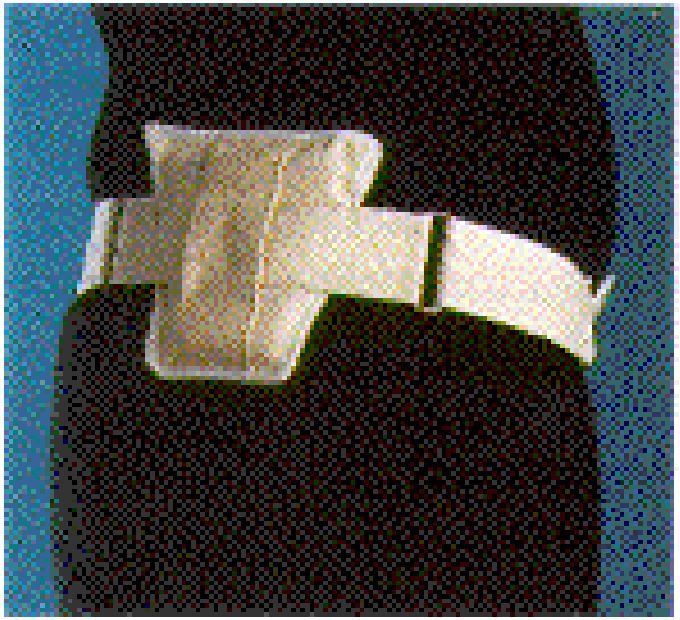


Towel Roll



Other methods…..

- SI Belt (belly bra)

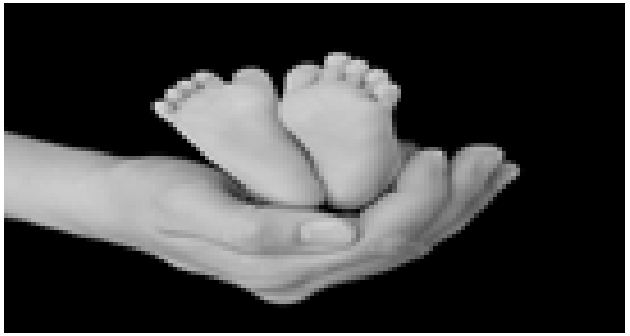


Activities to avoid

- Prolonged periods of motionless standing
- Bending forward from low back
- Twisting
- Heavy lifting
- Amusement Park Rides
- Running – if you weren't a runner before, don't take it up while pregnant
- Wearing high heels
- Sleeping on your back – especially during third trimester

Questions…..

TRICARE - OBSTETRICS BENEFITS



Brief Overview

Nasharo Lowe

Today's Agenda

- Maternity Care
- Newborn and Well-Child Care
- Other Benefit Information
- For Information and Assistance

TRICARE

What is TRICARE?

TRICARE is…

… the **health care program** supporting active duty service members (ADSMs), active duty family members (ADFMs), National Guard and Reserve members, retirees and retiree family members, survivors, and certain former spouses worldwide.

… a **network of military and civilian health care professionals** working together to foster, protect, sustain, and restore health for those entrusted to their care.

TRICARE®

TRICARE Stateside Regions

TRICARE is available worldwide and managed regionally.

Who is Covered?

- TRICARE-covered expectant mothers:
  - Active duty service members and their family members
  - Retired service members and their family members
  - National Guard and Reserve members and their family members who have TRICARE coverage
- Must be registered in the Defense Enrollment Eligibility Reporting System (DEERS)

TRICARE

Register Your Family in DEERS

Registration in DEERS is key to TRICARE eligibility

- Register your family members in DEERS
  - In person at a uniformed services ID card-issuing facility: www.dmdc.osd.mil/rsl
  - By sending changes and required documentation to:
    Defense Manpower Data Center Support Office
    400 Gigling Road
    Seaside, CA 93955-6771

Register Your Family in DEERS

- Proper documentation is required
- To verify eligibility:
  - Go to www.tricare.mil/deers
  - Visit your local military treatment facility's (MTF's) Patient Administration Office
  - Contact your service's personnel office

Updating DEERS

- Remember to register/update in DEERS whenever there is a change in the family (*e.g. marriage, birth, adoption, divorce, death*) or when you move
- Keep your contact information up to date
  - Online: www.dmdc.osd.mil/appj/address/
  - By phone: 1-800-538-9552
  - By fax: 1-831-655-8317
  - By visiting a uniformed services ID card-issuing facility: www.dmdc.osd.mil/rsl
  - More information: www.tricare.mil/deers

aternity Care

What is Covered?

Obstetric visits

Medically necessary fetal ultrasounds (2 during pregnancy)

Hospitalization for labor, delivery, and postpartum care

Anesthesia for pain management during labor and delivery

Medically necessary cesarean sections

Management of high-risk or complicated pregnancies

Deliveries at TRICARE-certified/authorized birthing centers

If enrolled in the TRICARE Dental Program three cleanings are covered during pregnancy

What is NOT Covered?

- Fetal ultrasounds that are not medically necessary
- Unproven procedures
- Non-medical support during labor and childbirth
- Non-registered nurse midwives
- Education classes
- Non-emergency Ambulance Services

- Question on coverage, see your TRICARE Representative or call 1-800-444-5445

TRICARE Prime: Care Away from Home

- Routine Care: Seek Care before you travel
- Urgent Care:
  - Contact your PCM
  - Prior authorization is required
- Emergency Care:
  - Call 911 or go to the nearest emergency room
  - No prior authorization is required
  - Contact your PCM or regional contractor within 24 hours
  - Does **not** include regular deliveries
- Extended trips: Transfer enrollment

TRICARE

TRICARE Prime: Point-of-Service (POS) Option

- Available to non-ADSMs
- See a civilian provider without authorization or referral for additional costs:
  - Fiscal year outpatient deductible: $300/individual or $600/family
  - 50% cost-share after deductible is met
  - Up to an additional 15% above the TRICARE-allowable charge from nonparticipating providers
  - NOT counted toward catastrophic cap
- Provider must be TRICARE-authorized

TRICARE

TRICARE Standard and TRICARE Extra: Getting Care

- See any TRICARE-authorized provider for care
- No referrals necessary
- Deductibles may apply if you choose to deliver in an outpatient setting
- Cost-shares and copayments
  - Network provider = lower costs
  - Non-network provider = higher costs

Switching from TRICARE Prime to TRICARE Standard

- ADSMs must stay enrolled in TRICARE Prime
- Dependents may disenroll at any time by submitting a disenrollment form available at www.tricare.mil/forms
- Possible lockout from TRICARE Prime
  - Only applies if sponsor is in pay grade E-5 or above and changes TRICARE Prime enrollment status more than twice in a year
- Increases out-of-pocket costs
- Lower priority for access to MTFs

Maternity Care

Active Duty Service Members

- **ALL ADSMs** are required to receive prenatal and postpartum maternity care at EAMC and delivery at Trinity Hospital of Augusta

- Maternity care while in a leave status **(leave signed by your Commander does not authorize delivery in a civilian hospital)**

- **Delivery in another MTF is okay as long as they deliver babies**

Maternity Care

Dependent Daughters and Their Newborns

- Dependent daughter is eligible for maternity care as long as she is eligible for TRICARE benefits
- Infant is not eligible for care under the Military Health Care Program after delivery
- INFANT IS ELIGIBLE FOR **ONE** VISIT AT EAMC FAMILY MEDICINE CLINIC WITHIN THE FIRST 14 DAYS OF LIFE.

Loss of TRICARE Eligibility During Pregnancy

- You may lose TRICARE eligibility if:
  - You or your spouse separates from the military
  - You and your sponsor get divorced
  - You are an unmarried daughter of a service member and reach age 26

- You may lose maternity coverage unless you qualify for:
  - Transitional Assistance Management Program (TAMP)
  - Continued Health Care Benefit Program (CHCBP)

DEERS Registration and New Child Coverage

- Register your child in DEERS as soon as possible
  - Obtain a birth certificate or record of adoption
  - Apply for your child's Social Security number
  - The sponsor must submit an *Application for Uniformed Services Identification Card DEERS Enrollment* (DD Form 1172)
- If eligible, enroll your child in TRICARE Prime within 60 days
  - TRICARE Prime coverage is automatic for 60 days, if another family member is enrolled
  - TRICARE Standard and TRICARE Extra coverage is automatic from days 61 to 365
- Children of TRICARE Standard beneficiaries are automatically covered under TRICARE Standard once they are registered in DEERS

Enrolling Your Child in TRICARE Prime

- Take Certificate of Live birth to DEERS
  - Power of Attorney, if sponsor is not available.
- Visit www.tricare.mil or call 1-800-444-5445
  - Enroll within the first 60 days of birth.

Hurry and get your newborn put into DEERS, because claims will soon start coming in on the baby.

TRICARE

What's Covered

- Circumcision
- Routine newborn care
- Health-promotion and disease-prevention exams
- Vision and hearing screenings
- Height, weight, and head circumference measurements
- Routine immunizations
- Developmental and behavioral appraisals

Other Health Insurance and Supplemental Insurance

- TRICARE serves as the secondary payer to all other health benefits and insurance plans, except for Medicaid, TRICARE supplements, the Indian Health Service, and certain other federal and state programs.
- Other Health Insurance (OHI): Pays **before** TRICARE
  - Fill out a *TRICARE Other Health Insurance Questionnaire*
  - Follow the rules for your OHI
  - Tell your provider
  - Show your insurance card at your provider's office
- Supplemental insurance: Pays **after** TRICARE

Your Child's Dental Care

- TRICARE Dental Program (TDP): https://mybenefits.metlife.com/tricare
- TRICARE Retiree Dental Program (TRDP): www.trdp.org
- Initial visit by child's first birthday
- Ongoing care: Two exams and two cleanings per year

New and Expecting Parents—Helpful Resources

eCareConnect:
www.theparentreview.com/DoD

text4baby:
www.text4baby.org

For Information and Assistance

Stateside Regional Contractors

TRICARE North Region
Health Net Federal Services, LLC
1-877-TRICARE (1-877-874-2273)
www.hnfs.com

TRICARE South Region
Humana Military Healthcare Services, Inc.
1-800-444-5445
www.humana-military.com

TRICARE West Region
UnitedHealthcare Military & Veterans
1-877-988-WEST (1-877-988-9378)
www.triwest.com

Overseas Regional Contractor

International SOS Assistance, Inc.
Eurasia-Africa:
+44-20-8762-8384 (*overseas*)
1-877-678-1207 (*stateside*)
Latin America & Canada:
+1-215-942-8393 (*overseas*)
1-877-451-8659 (*stateside*)
Pacific:
Singapore: +65-6339-2676 (*overseas*)
1-877-678-1208 (*stateside*)
Sydney: +61-2-9273-2710 (*overseas*)
1-877-678-1209 (*stateside*)
www.tricare-overseas.com

Connect with TRICARE Online!

www.tricare.mil/mediacenter

Good Luck

&

HAPPY PARENTING

Title Slide

GUIDELINES FOR A HEALTHY PREGNANCY

Laura Obert RD, LD

DDEAMC, Nutrition Care Division
706-787-2243

AGENDA

- Dietary guidelines
- Weight gain guidelines
- Special nutrition considerations based on condition
- Exercise

Dietary Guidelines

- Milk Products: 3-4 servings
  - Low Fat Milk
  - Yogurt
  - Cheese
- Meat, Fish, Eggs: 2-4 servings
  - Fatty fish 2-3x per week
- Fruits: 3 servings
  - NOT JUICE
- Vegetables: 4-5+ servings
- Whole grains/nuts or seeds: 6-7 servings
  - 1 ounce nuts/seeds per day

Modern Processed Foods: are these on the list?

Other Foods to Minimize/Avoid

- Hot dogs/lunch meat
  - Should be heated
- Raw/soft cheeses
  - Feta, goat, brie, Roquefort, camembert, Mexican soft
- High mercury foods
  - Swordfish, shark, tilefish, king mackerel
- Sugar sweetened beverages
- Be on the side of caution
  - Caffeine, artificial sweeteners

Appropriate Weight Gain

- **IOM goals based on pre-pregnancy BMI**
  - Underweight (BMI≤18.5): 28-40 lbs
  - Normal (BMI≥18.5-25): 25-35 lbs
  - Overweight (BMI=>25-29.9): 15-25 lbs
  - Obese (BMI≥30): 11-20 lbs
- Only 1-4 lbs gained in 1st Trimester
- Gain 1 lbs per week during 2nd and 3rd Trimester

Weight Gain In Pregnancy

- What if I am not gaining enough weight?
  - Risk of low birth weight infant, premature delivery, can restrict the baby's growth
  - Tips to help you gain weight: choose full fat dairy products, heart healthy fats (nuts, avocado, nut butters, etc.), eat 5-6 small meals per day.
  - Request to see a Dietitian if you continue to have difficulty gaining weight.
- What are the risks of gaining too much weight?
  - Puts you at a greater risk of developing Gestational Diabetes, high blood pressure
  - Makes it more difficult to return to pre-pregnancy weight

Where the Weight Comes From

Breasts:	1.1 lbs
Placenta:	1.6 lbs
Amniotic fluid:	2 lbs
Uterus:	2.4 lbs
Blood:	3 lbs
Other fluid:	6.1 lbs
Energy stores:	8.5 lbs
Fetus:	8.3 lbs
TOTAL:	**33 lbs**

Morning Sickness

- Common (70% of pregnancies)
- Guidelines
  - Avoid strong smells/odors
  - Keep log of “offending foods”
  - Eat small, frequent meals
  - Drink 8-10 glasses of water daily
  - Separate liquids & solids
  - Try ginger (ale, tea, or fresh)
  - Try B6 (pyridoxine) (also available from physician)
  - Rest, relax, avoid stress
  - See physician for more treatments

Gestational Diabetes

- Occurs in 3-5% of pregnancies
- Diagnosed after 3-hour Glucose Tolerance Test
- Guidelines
  - Carbohydrate control: approx. same amount at breakfast, lunch, and dinner
  - Simple sugars should be eliminated
- Track blood sugars daily
  - Fasting: less than 95
  - 2-hours after meal: less than 120
- Take medication exactly as prescribed

Benefits of Exercise

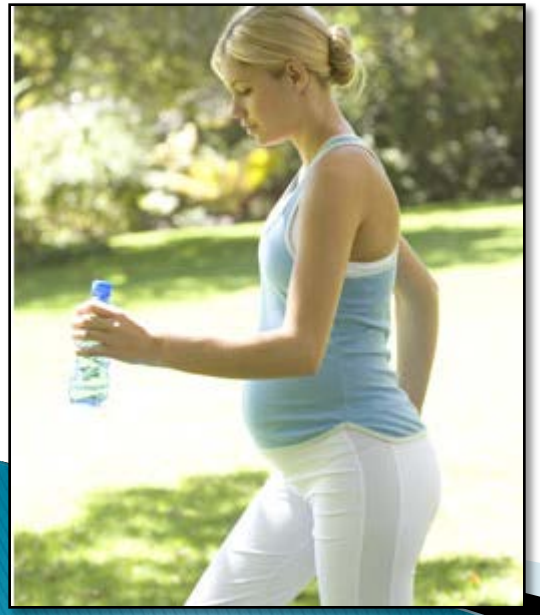
- Helps with boredom & depression
- Helps control blood sugars
- For excess weight gain…
  - Stabilizes weight gain
  - Go for a stroll when having cravings
- For poor weight gain…
  - If you don't exercise at all, can stimulate appetite
  - If you exercise quite a bit, limit to lighter activities

About Exercise

- Always consult your provider first
  - Especially if you have HTN, vaginal bleeding, or history of pre-term labor
- Start slow
- Don't overheat…stay hydrated!!
- After 20 weeks gestation, avoid exercises where you lie flat on your back
- Avoid jumping or changing directions quickly

Best Exercise

- Walking
- Swimming
- Stationary biking
- Running…depending on prior fitness level



QUESTIONS

ARMY MEDICINE

Serving To Heal...Honored To Serve

ARMY COMMUNITY SERVICE

BLDG 33720, SUITE 224
706-791-3579

MISSION

Our mission is to facilitate a commander's ability to provide comprehensive, coordinated and responsive services which support readiness of Soldiers, civilian, employees, and their Families. We equip Families with the skills and support to face military life today and tomorrow.

ACS Resources

- Information and Referral
- Relocation Services
- Financial Readiness
- Family Advocacy Program
- Employment Readiness
- Mobilization and Deployment Program
- Exceptional Family Member Program (EFMP)
- Outreach
- Army Family Team Building (AFTB)
- Army Family Action Plan (AFAP)
- Army Volunteers Corps (AVC)
- Soldier and Family Assistance Center (SFAC)
- Survivor Outreach Service
- Swap and Assist
- Christmas House

FAMILY ADVOCACY PROGRAM (FAP)

- The program works to strengthen individuals and Family relationships utilizing education and prevention strategies.
  - Emergency Shelter
  - Emergency Transportation
  - Respite Child Care
- New Parent Support Program (NPSP)
- Domestic Violence Advocacy

NEW PARENT SUPPORT PROGRAM

- **New Parent Support Program (NPSP)** work with individuals and Families in promoting safety through education and training.
  - Information and Referrals (WIC, Car seat,Financial)
  - Support Groups (Breastfeeding and Single-Parent)
  - Hospital Visitation
  - Tots and Toddler Playgroup
  - Semi-Annual Baby Shower
  - Parenting Classes (Baby Basics, ScreamFree, Dads101, and 1-2-3-4 Parents)

SEMI-ANNUAL BABY SHOWER

- Educational games
- Exposure to safety issues for children
- Learn new and exciting things about parenting
- Prizes to help with parenting
- Surprises to tickle your funny bone
- Usually held in March and September

PRENATAL SURVEY

NPSP.DDEAMC.Survey.B.11.2.09.doc [Compatibility Mode] - Microsoft Word

NPSP.DDEAMC.Survey.B.11.2.09.pdf - Adobe Reader

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New Parent Support Program Prenatal Survey

On behalf of the New Parent Support Program, CONGRATULATIONS! Whether this is your first baby or not, we know each pregnancy has its own triumphs and challenges. The New Parent Support Program (NPSP) is here to support you every step of the way!

NPSP is especially designed to meet the needs of the military family; to help educate and strengthen the bonds that already exist. We offer parenting classes and playgroups at the Family Outreach Center, Fort Gordon, GA. We can also come to your home and meet with you individually to discuss your specific concerns. We can also arrange for you to meet with us at our office.

Date:
Name:
Sponsor Name/Rank:
Sponsor's Unit:
Address:
Phone: Home Work:
Email address:
Is this your first baby?: yes no Due Date:
Do you have other children?: yes no
If yes, what are their ages?:
Are you a Single Parent?: yes no
Would you prefer the NPSP Home Visitor to follow up with you via: ☐ Telephone ☐ E-mail ☐ No additional follow up requested

Please complete this form and give it to the OB Nurse at the end of your orientation. Indicate which classes and activities best meet your needs (Place an x in front of the activity you have selected):

	Free Baby Bundle (Home Visit Required)
	Parenting Class
	Baby Basics Class
	Dad's Workshops
	Breast Feeding Support Group (Offered by the Wellness Center)
	Single Parent Support Group
	Information about :
	Depression, anxiety or substance abuse
	Stress/Relaxation Techniques
	Playgroup/Tots and Toddlers (0-4yrs old)
	Need Emergency Assistance:
	Comments:
	Access to the Resource Library

New Parent Support Program
547 Rice Road Building 33512
Fort Gordon, GA 30905
706-791-5220

Suite 224 Darling Hall
Fort Gordon, GA 30905
706-791-3579

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QUESTIONS

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NEW PARENT SUPPORT PROGRAM
FAMILY OUTREACH CENTER (FOC) BEHIND WOODWORTH LIBRARY

DARLING HALL, STE. 224

706-791-5220 OR 706-791-3579