



CARING FOR YOUR BABY

ARIZONA LONG TERM CARE

CUSTOMER CARE CENTER: (833) 318-4146 • TTY 711

ADDRESS: 2701 E. ELVIRA ROAD, TUCSON, AZ 85756

WEBSITE: WWW.BANNERUFC.COM/ALTCS



Banner
University Family Care

Covered Services are funded under contract with AHCCCS

Dear Member,

Congratulations on the birth of your baby!

The staff at Banner — University Family Care/ALTCS (BUFC/ALTCS) want to make sure you and your baby are healthy and happy.

We are sending you this New Parents' Handbook, a guide to keeping you and your new baby healthy. Regularly scheduled doctor visits will help to make sure your baby meets many important developmental milestones in the first year of life. Your baby should be seen by the Pediatrician at the following times:

- Newborn (*usually done in the hospital following delivery*)
- 3-5 days old
- By 1 month of age
- At 2, 4, 6, 9 and 12 months old
- The pediatrician may want to see your child more often if needed

You should also see your OB doctor for your postpartum visit at least once, 3 to 8 weeks after giving birth. At that appointment, you can ask your doctor about your health concerns, discuss any sad feelings you may have, and talk about family planning for the future.

Call your provider today to schedule a visit for you and your baby. If you need help making your appointments or getting a ride, please call our Customer Care Center at **(833) 318-4146**, TTY 711 for help. We are available Monday through Friday from 7:30 a.m. to 5:00 p.m.

Best wishes,

Maternal Child Health Department
Banner – University Family Care/ALTCS

PLEASE READ:

Talk to your healthcare provider! This packet is not a substitute for the advice of a qualified expert. Please call our Customer Care Center at (833) 318-4146 for assistance in choosing a provider.

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Taking Care of Yourself After Delivery

Getting Rest

The first few days at home after having your baby are a time for rest and recovery. Try to take it easy and rest as much as possible. You may find that all you can do is eat, sleep, and care for your baby. Try to lie down or nap while the baby naps. Allow others to help you around the house.

Physical Changes

Below are some common body changes after having a baby:

- **Vaginal bleeding, called lochia.** It is heavy and bright red at first, becoming lighter in flow and color until it goes away after a few weeks
- **Swelling in your legs and feet.** Try to keep your feet raised when possible
- **Constipation, or difficulty having a bowel movement.** Try to drink plenty of water and eat fresh fruits and vegetables
- **Menstrual-like cramping** is common, especially if you are breastfeeding
- **Your breast milk** should come in within 3-6 days after delivery. Even if you are not breastfeeding, you can have milk leaking from your nipples, and your breasts might feel full, tender, or uncomfortable
- **Follow your doctor's instructions** on how much activity, like climbing stairs or walking, you can do for the next few weeks



Postpartum Follow-up Visit

Your doctor will check your recovery at your postpartum visit, about three to eight weeks after birth (or sooner, if you had a cesarean section). Ask your doctor about having sex and birth control. Using birth control is the best way to prevent pregnancy until you are ready to have another baby.



Continue a Healthy Diet

It's still important to eat a healthy diet after your baby is born. A healthy diet helps you recover from delivery and gives you energy to care for your new baby. If you are breastfeeding, it is especially important to eat enough calories and drink plenty of fluids every day.

WIC (Women, Infants and Children) is a great resource for new moms and babies to help get healthy foods. Call WIC to learn more **(800) 2525-WIC (942)**



Feeling Blue

After childbirth you may feel sad and overwhelmed for a few days. Many new mothers have the “baby blues” after giving birth. Changing hormones, anxiety about caring for the baby, and lack of sleep, all affect your emotions. You may feel:

- Tired after delivery
- Overwhelmed with a new baby
- Stress from changes in work and home routines
- An unrealistic need to be a perfect mom
- Loss of who you were before having the baby
- Less attractive
- A lack of free time



What is the Difference Between “Baby Blues” and Postpartum Depression?

Many women have the baby blues in the days after childbirth. If you have the baby blues, you may:

- Have mood swings
- Feel sad, anxious, or overwhelmed
- Have crying spells
- Lose your appetite
- Have trouble sleeping



The baby blues most often go away within a few days or a week. The symptoms are not severe and do not need treatment.

Be patient with yourself. These feelings are normal and usually go away quickly. But if sadness lasts more than two weeks, go see your doctor. Don't wait until your postpartum visit to do so. You might have a serious but treatable condition called postpartum depression. Postpartum depression can happen any time within the first year after birth.

Depression

What Should I Do if I Have Symptoms of Depression After My Baby is Born?

Your doctor can ask questions to test for depression. Your doctor can also refer you to a behavioral health professional who specializes in treating depression. You can call **Postpartum Support International at (888) 434-MOMS (6667)** or the **Arizona Postpartum warm line (888) 434-MOMS (6667)** for help finding information, postpartum depression support, and support groups near you.

If you have thoughts of harming yourself or your baby call 911 or the Crisis Help Line in your area

Here are some other helpful tips:

- Rest as much as you can. Sleep when the baby is sleeping
- Don't try to do too much or try to be perfect
- Ask your partner, family, and friends for help
- Make time to go out, visit friends, or spend time alone with your partner
- Discuss your feelings with your partner, family, and friends
- Talk with other mothers so you can learn from their experiences
- Join a support group. Ask your doctor about groups in your area
- Remember to drink plenty of water and continue to eat a healthy diet
- Don't drink alcohol, use street drugs or use harmful drugs. These can affect your mood, make you feel worse, or make it hard for you to take care of your baby

Call your doctor if:

- Your baby blues don't go away after 2 weeks
- Symptoms of depression get more and more intense
- It is hard for you to perform tasks at work or at home
- You cannot care for yourself or your baby
- **DON'T WAIT UNTIL YOUR SCHEDULED APPOINTMENT TO DISCUSS WITH YOUR DOCTOR**



FOR BEHAVIORAL HEALTH CRISIS ASSISTANCE IN THE FOLLOWING COUNTIES CONTACT:

Gila or Yavapai County

Crisis Response Network (877) 756-4090

Cochise, Graham, Greenlee, La Paz,
Pima, Pinal, Santa Cruz, or Yuma County

Nursewise (866) 495-6735

Maricopa County

Crisis Services (800) 631-1314

When Should I Call My Doctor?

Your doctor will want to see you at least once after you give birth.

For the first year after delivery, anytime you see a doctor (including specialists, urgent care clinics, an Emergency Department, etc.), be sure to tell them when you gave birth.

You should call your doctor if you have any of these warning signs:

- Bleeding that is soaking through one pad/hour, or blood clots the size of an egg or bigger
- Wound drainage, pain or redness that doesn't go away or gets worse. These could be from stitches near the vagina if you had a vaginal delivery, or from the incision on your lower belly if you had a C-section
- Feeling sad for longer than two weeks after giving birth
- Fever of 100.4 higher
- Pain or burning when you go to the bathroom
- Pain, swelling and redness in your legs, especially around your calves
- Red streaks on your breasts or painful lumps in your breast
- Severe pain in your lower belly that does not go away with pain medicine
- Vaginal discharge that smells bad
- Severe or persistent headaches, blurred or other vision changes
- Pain in your chest
- Shortness of breath or obstructed breathing
- Seizures



OB Case Manager Assistance

Call our Customer Care Center at (833) 318-4146 and ask to speak with Maternal and Child Health Department. TTY users should call 711.



Need Help?

- ✓ **Birth to Five Help Line:**
www.birthtofivehelpline.org
(877) 705-KIDS (5437)
- ✓ **Postpartum Support International AZ Warmline:** psiarizona.org
(888) 434-MOMS (6667)
- ✓ **24/7 Breast Feeding Hotline:**
(800) 833-4642

Taking Care of Your Newborn



Handling a Newborn

- ✓ Wash your hands (or use a hand sanitizer) before handling your baby
- ✓ Be careful to support your baby's head and neck
- ✓ Be careful not to shake your newborn
- ✓ Make sure your baby is securely fastened into the carrier, stroller, or car seat
- ✓ Avoid any activity that could be too rough or too bouncy (such as being bounced or jiggled on a knee, or thrown up in the air).

Bonding and Calming Techniques

Babies communicate their needs by crying. When a baby cries, they are usually telling you they are hungry, tired, or need a diaper change. If your baby is still fussy after feeding, a nap, and a diaper change, here are few ways to calm your baby:

- ✓ Hold your baby "Skin-to-Skin": with your baby wearing just a diaper, hold your baby against your bare chest, covered by a light blanket. *Babies love to cuddle with Dad, too!*
- ✓ Sing and talk to your baby
- ✓ Read your baby a book
- ✓ Take your baby outside in a stroller for a short walk

Improper swaddling may lead to hip dysplasia. If you choose to swaddle your baby, use hip-healthy swaddling that allows freedom of hip motion and avoids positions that may cause hip problems.

For a video on how to safely swaddle your infant, go to: www.hipdysplasia.org/developmental-dysplasia-of-the-hip/hip-healthy-swaddling/

For additional information on the general care and handling of your newborn, please visit: <http://kidshealth.org/en/parents/guide-parents.html>

Feeding Your Baby

Your baby is growing fast! Your newborn needs to eat often and some may need to be awakened every few hours (especially at night) to make sure they get enough to eat.

Call your baby's doctor if you need to awaken your newborn frequently or if your baby doesn't seem interested in eating or sucking.

- ✓ Your baby may let you know it's time to eat by crying, putting fingers in their mouth, making sucking noises, or turning their head with their mouth open
- ✓ Newborns will typically eat 8-12 times every 24 hours, but they may feed closer together in the beginning
- ✓ Nurse on each breast as long as your baby is doing well. Sometimes babies will nurse only on one breast per feeding. For more info call the 24/7 WIC Breastfeeding hotline at (800) 833-4642
- ✓ Whether breast or bottle feeding, follow your pediatrician's recommendations about how often and how much to feed your baby
- ✓ Try to burp you baby one or two times during each feeding. Do this by holding baby upright, supporting baby's head and neck and gently patting baby on the back

Is My Baby Getting Enough?

How often should my baby eat?

Many moms wonder how often they should feed their babies. Babies should eat 8-12 times per day. Babies do not have a fixed schedule or hour of when they want to eat; the timing of their feeding may be different every day. Some babies breastfeed every 1-3 hours day and night; others breastfeed every hour for 3-5 feedings then sleep 3-4 hours in between. Every baby is different. Therefore, it is important to watch your baby and not the clock. Remember that sometimes a sleepy baby will not show that they are hungry; you will need to wake him to breastfeed. During the first 4-6 weeks, you will want to wake a baby if they sleep longer than 4 hours. It is important that he eats at least 8 times in 24 hours.

Signs of Hunger

Babies show that they are hungry, in different ways. Some signs include squirming, wiggling, smacking their lips, sucking on their hands or clinched fists held close to their body. The last hunger sign is when the baby begins to cry and fuss. It is a good idea to position and latch your baby at the earliest signs of hunger to make breastfeeding a little easier.

How do I know when my baby is full?

Your baby will let you know when he is done eating. Watch your baby and not the clock. Feedings can vary in length. A feeding can last as short as 5-10 minutes and as long as an hour. Your baby may want a snack or a big meal. When your baby stops suckling and swallowing, burp him and offer the second breast. If he breastfeed poorly or for a short amount of time, put him back to the first breast prior to offering the second breast. Sometimes babies will only take one breast and that is okay.

Other ways that babies show that they are full is that they will fall off the breast, your baby's hands will be open, and your baby will be content. Remember that babies cry for many reasons and hunger is one of many possibilities.

How do you know if your baby is getting enough?

- ✓ Your baby is gaining weight
- ✓ Baby is producing dirty and wet diapers
- ✓ Baby is breastfeeding 8-12 times per day
- ✓ Do you hear your baby swallowing at the breast?
- ✓ Your breasts feel firm or full prior to feeding and feel soft after the feeding. If you are experiencing pain, call your health care provider and/or The 24 Hour Breastfeeding Hotline (800) 833-4642.
- ✓ Your baby will be content after feeds.

For additional information on feeding your baby, please visit:
<https://kidshealth.org/en/parents/feednewborn.html?WT.ac=p-ra>

Never prop a bottle up. Propping a bottle might cause choking, ear infections and tooth decay. Holding your baby close during feedings is a great way to bond.



Help is available!
If you have questions about breastfeeding, want to attend a breastfeeding class, and for tips for keeping a healthy milk supply, contact the Arizona 24-Hour Breastfeeding Hotline at (800) 833-4642. La Leche League international at (800) LA-LECHE (800) 525-3243.

Website for breastfeeding guide: <https://www.womenshealth.gov/files/documents/your-guide-to-breastfeeding.pdf>



The American Academy of Pediatrics recommends only breast milk or infant formula for the first 6 months of life. Talk to your child's pediatrician about when to start offering your child solid food.

Diaper Changing and Diaper Rash

Your baby will need to have a diaper change around 10 times per day. Before you change your baby's diaper, make sure you have all of the supplies within reach.



YOU WILL NEED

- » a clean diaper
- » clean washcloth, diaper wipes, or cotton balls
- » diaper ointment if the baby has a rash
- » a clean outfit, if needed

DIAPER RASH

Diaper rash is a common concern. The rash is red and bumpy and will go away in a few days with warm baths, some diaper cream, and a little time out of the diaper. Most rashes are because a baby's skin is sensitive and becomes bothered by the wet or dirty diaper.

To prevent or heal diaper rash:

- Change your baby's diaper frequently, and as soon as possible after bowel movements
- After cleaning the area, apply a diaper rash or "barrier" cream. Creams with zinc oxide are preferred because they form a barrier against moisture
- Let the baby go for part of the day without a diaper. This gives the skin a chance to air out

If the diaper rash continues for more than 3 days or seems to be getting worse, call your baby's doctor — it may require a prescription.

Never leave your baby unattended on the changing table.

- Lay your baby on his or her back and remove the dirty diaper
- Remove a boy's diaper slowly because the air touching his skin may make him urinate
- Use the wipes to gently wipe your baby's diaper area clean
- When wiping a girl, wipe her bottom from front to back to avoid a bladder infection
- To prevent or heal a rash, apply ointment
- Apply a clean diaper
- Always remember to wash your hands thoroughly after changing a diaper



Bathing Basics

A bath two or three times a week in the first year is fine, as long as their diaper areas are clean. More frequent baths may dry out your baby's skin. An infant's umbilical cord ("belly button") area shouldn't go under water until the cord stump falls off and the area has healed. Until it falls off, the cord stump will change color from yellow to brown or black — this is normal. Call your baby's doctor if the belly button area becomes red, has a foul odor, or discharge develops.

Give your baby a **sponge bath** until the umbilical cord falls off at around two weeks of age.

SPONGE BATHS

- For a sponge bath, choose a safe, flat surface (such as a changing table, floor, or counter) in a warm room
- Fill a sink or bowl with warm (not hot!) water
- Undress your baby and wrap him or her in a towel
- Wipe your infant's eyes with a washcloth dampened with water only, starting with one eye and wiping from the inner corner to the outer corner. Use a clean corner of the washcloth to wash the other eye. Clean your baby's nose and ears with the damp washcloth. Then wet the cloth again and, using a little soap, wash his or her face gently and pat it dry
- Next, using baby shampoo, create a lather and gently wash your baby's head and rinse. Pat your baby's hair dry
- Using a wet cloth and soap, gently wash the rest of your baby, especially the creases under the arms, behind the ears, around the neck, and in the diaper area
- Once you have washed those areas, make sure they are dry and then diaper and dress your baby

TUB BATHS

When your baby is ready for tub baths, the first baths should be gentle and brief. If he or she becomes upset, go back to sponge baths for a week or two, then try the bath again.

In addition to the supplies for a sponge bath, you will need an infant tub (a plastic tub that can fit in the bath tub).

- Fill the infant tub with 2 to 3 inches of warm — not hot! — water (to test the water temperature, feel the water with your elbow or the back of your hand)
- Place your baby in the warm water quickly after undressing. Use one of your hands to support the head and the other hand to guide the baby in feet-first. Slowly lower your baby up to the chest into the tub
- Use a washcloth to wash his or her face and hair. When you rinse the soap or shampoo from your baby's head, cup your hand across the forehead so the suds run toward the sides and soap doesn't get into the eyes
- Gently wash the rest of your baby's body with water and a small amount of soap.
- Throughout the bath, regularly pour water gently over your baby's body so he or she doesn't get cold
- After the bath, wrap your baby in a towel immediately, making sure to cover his or her head. Baby towels with hoods are great for keeping a freshly washed baby warm
- Apply a clean diaper, warm outfit, and a hat if needed
- Never use cotton swabs to clean your baby's ears. This can cause damage

HAVE THESE ITEMS READY BEFORE BATHING YOUR BABY

- A soft, clean washcloth
- Mild, unscented baby soap and shampoo
- A soft brush
- Towels or blankets
- A clean diaper
- Clean clothes and hat

While bathing your infant, *NEVER* leave the baby alone. If you need to leave the bathroom, wrap the baby in a towel and take him or her with you.

Medical Care and Your Newborn

Routine office check-ups with your child's pediatrician are very important.

Your child should see their pediatrician several times during the first year to check on feedings, growth, and development.



A common office visit should include:

- Measuring your baby's weight and length
- A physical exam
- Questions about development
(for example, head control, "baby talk", and smiling)
- Questions about how you are doing with your baby
- Information about feeding your baby
- Discuss what to expect with your baby's development
- Immunizations during some visits
- Answer any questions you have about your baby's growth and health

Most pediatricians will want to see your child at the following ages:

- Newborn (usually done in the hospital following delivery)
- 3-5 days old
- By 1 month of age
- At 2, 4, 6, 9 and 12 months old
- The pediatrician may want to see your child more often if needed

Your child's doctor may want to see him or her more often. Your baby's doctor is available for questions or if you think your baby is sick. You do not need to wait for office hours if you are worried. You can call your baby's doctor anytime day or night.

When to Call the Doctor

Call your baby's doctor right away if you think your baby is sick. Some signs your baby is sick may include:

Loud breathing | Fever in a newborn (temperature of 100.4 F [38C] or higher) should be reported to your doctor right away | Less wet and dirty diapers | Fussiness that does not go away | Not wanting to eat | A dry mouth | Changes in skin color (yellow, blue, or pale) | Earache – baby holds, pulls, or rubs one or both ears | Forceful vomiting (other than spit up) | Heavy eye discharge | Very sleepy, hard to wake up to feed | Watery bowel movements | Blood in diaper.



Do not give your baby medicine until you talk to your baby's pediatrician first.

Keeping Baby Safe

Below are a few ways to keep your baby safe around your home

Car seat

The safest place for your baby is in a rear-facing, approved child safety car seat, placed in the center of the back seat of your vehicle. Check the car seat manual for installation instructions. It's a good idea to have your baby's car seat installed by a certified safety seat technician. Call **1-866-SEAT-CHECK (1-866-732-8243)** for more information about car seat safety and locations to install your baby's car seat.

Learn CPR

It's a good idea for all parents and anyone caring for your baby to learn CPR (cardiopulmonary resuscitation) in case of an emergency. Ask your health care provider about classes.

Choking hazards

Keep small items out of baby's reach. Foods like sliced hot dogs, peanuts, grapes, popcorn, candies, marshmallow and carrot pieces can become stuck in a babies mouth. Toys, pet food, and other small items that can fit into your baby's mouth can be swallowed or cause choking. Also remove cords on the floor or hanging near windows, and keep sharp objects out of baby's reach.

Always watch

Never leave your baby alone on a high-surface (such as a counter), near stairs, or in a car – even for a minute! Never leave your baby alone in the bath tub or around any standing water. Put away any buckets of water such as those used for cleaning.

Prevent burns

Use warm, not hot, water to bathe your baby and always check the temperature with your elbow or back of your hand. In the kitchen, keep pots toward the back of the stove with the handles turned inward, and keep hot liquids away from baby. For added safety and help preventing burns, turn down the temperature of your hot water heater to below 120 degrees.

Cabinets

Install safety latches on cabinets and drawers that your baby can reach. Make sure to keep medicines and cleaners locked up and out of reach.

Never Shake Your Baby – No matter how you are feeling, always handle your baby gently. Shaking or hitting your baby can cause life-long problems or even death. If you are feeling upset or frustrated, place your baby in the crib or other safe place and leave the room for a moment. Take slow, deep breaths to help calm down. It's ok if your baby cries while you calm down. Call a friend if you need to talk. You can also call the **Childhelp National Child Abuse Hotline at (800) 4-A-CHILD (800-422-4453)**.

Sleeping Basics and Sudden Infant Death Syndrome (SIDS)

Safety gates

Prevent injuries and drowning by installing security gates around stairs and pools. Make sure gates do not have openings that could trap your baby's hands, feet, or head.

Sudden Infant Death Syndrome (SIDS) is the sudden and unexplained death of a baby under 1 year of age. Even though there is no way to know which babies might die of SIDS, there are some things that you can do to make your baby safer:

- Always place your baby on his or her back to sleep, even for naps. This is the safest sleep position for a healthy baby to reduce the risk of SIDS
- It is recommended that infants sleep in the parents' room, close to the parents' bed, but on a separate surface designed for infants (such as a safety-approved crib), for at least the first 6 months and up to the first year of life
- Remove soft, fluffy, and loose bedding, pillows, and stuffed toys from your baby's sleep area
- Do not use infant sleep positioners. Using a positioner to hold an infant on his or her back or side for sleep is dangerous and not needed
- Make sure your baby's face and head stay uncovered during sleep
- Don't let your baby get too warm during sleep. Too many layers of clothing or blankets can overheat your baby
- Talk to your family, child care providers, and babysitters about putting the baby to sleep on his or her back and removing soft bedding
- Do not allow smoking around your baby

For more information about safe sleep, visit the March of Dimes website at: <https://www.marchofdimes.org/baby/safe-sleep-for-your-baby.aspx>



For more information on crib safety, contact the US Consumer Product Safety Commission at (800) 638-2772. Research has shown that placing a baby to sleep on soft mattresses, sofa cushions, waterbeds, sheepskins, or other soft surfaces raises the risk of SIDS.

EPSDT

EPSDT visits are important for all infants, children, and young adults under 21. These visits can help prevent illness and detect serious problems early!

An EPSDT visit includes:

- A complete health history and physical exam
- A growth and development check
- Immunization services (*or shots*)
- Other tests, such as blood and urine tests, if needed
- Health education
- Vision and hearing tests (*eyeglasses are provided too*)
- A nutrition checkup
- Behavioral Health services



A well-child visit/check is synonymous with EPSDT.

EPSDT covers immunization services or shots that protect against the following serious illnesses, and more:

- Polio
- Measles
- German measles
- Mumps
- Whooping cough
- Chickenpox
- Hepatitis
- Hib (*haemophilus influenzae type b*)
- Pneumonia

EPSDT also covers dental benefits!

- Preventative care
- Fluoride treatment
- Dental X-rays
- Sealants
- Emergency care
- Regular maintenance
- Two professional teeth cleanings every year

Make sure your child gets all his/her needed shots according to schedule.

Each time you visit, be sure to bring your AHCCCS ID card and your child's shot records.

There are no charges or co-payments for EPSDT or related services.

Transportation for EPSDT services are provided at no charge.

Please contact Customer Care Center for help getting a ride to your appointment.

Call today and we will help you set up an EPSDT or a dental appointment.

Customer Care Center: (833) 318-4146, TTY users should call 711.

Transportation

As a member of University Family Care/ALTCS, you can receive a ride to your doctor's appointments. A ride can be scheduled by calling Customer Care.

HERE ARE SOME HELPFUL DO'S AND DON'TS:

DO:

- Call our Customer Care Center at **(833) 318-4146** and select the transportation option
- Call during normal business hours (7:30 a.m. to 5:00 p.m. Monday thru Friday)
- Call at least 72 hours in advance or as soon as possible for same day transportation needs (Same-day transports may require approval)
- Be ready when the taxi or van arrives to pick you up so that you arrive on time
- Notify our Customer Care Center if you have any special needs related to your child's transportation (needing to take other children to the appointment or sending your child with a trusted family member to the appointment)
- Call our Customer Care Center right away if you have a problem with your transportation
- Call 911 for a ride to the hospital if you are in labor or having complications.

DO NOT:

- Call the transportation vendor directly to set up your ride, please call our Customer Care Center at **(833) 318-4146** and select the transportation option
- Call your PCP to set up your ride
- Forget to call our Customer Care Center and tell them to cancel your ride if:
You find another ride or you cancel or reschedule your appointment



Family Planning

Family Planning services are available to both male and female members of reproductive age. "Family Planning can help you make the best choice for you, about when to have more children. Our providers can help you choose birth control methods that will work for you. Family Planning services are available from any network PCP or gynecologist. No referral is needed from your PCP.

You may not want to get pregnant if you:

- Are not ready to have another child
- Already have the number of children you want

The following birth control methods are provided at no cost to you:

- Birth control pills or shots, condoms, diaphragms, foams
- Natural family planning and referrals to qualified health professionals
- Post-coital emergency contraception (also known as the morning after pill)
- Sterilization (male and female) only for members 21 years of age or older
- Intrauterine devices
- Subdermal Implantable Contraceptives

The following services are not covered under family Planning:

- Infertility services including testing, treatment, or reversal of a tubal sterilization or vasectomy
- Pregnancy termination counseling
- Pregnancy termination - unless you meet specific conditions
- Hysterectomies, if done for family planning only

How long should I wait to get pregnant again:

It's best to wait at least 18 months (1½ years) between giving birth and getting pregnant again. Your body needs time to fully recover before it's ready for your next pregnancy.

Too little time between pregnancies also increases your risk of premature birth, low birth weight or other complications. The shorter the time between pregnancies, the higher your risk.



REFERENCES

Special thanks to the U.S. Department of Health and Human Services Office of Women's Health, KidsHealth from Nemours, and March of Dimes for content.

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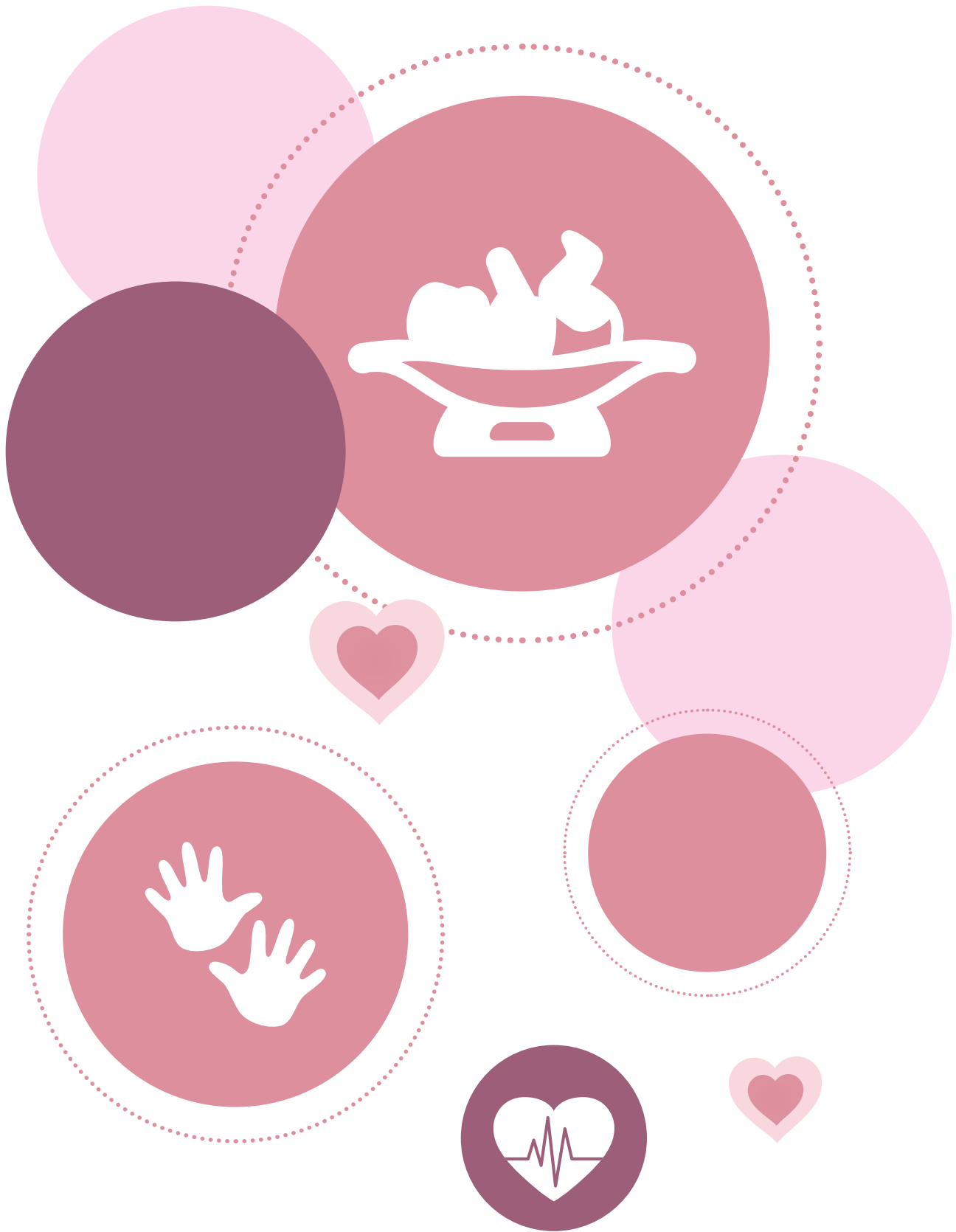
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American Academy of Pediatrics - <https://www.aap.org>



www.BannerUFC.com/ALTCS
fb.com/bannerufc