

Pregnancy guide



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You’ve got this

WIC is here for you

Your pregnancy is one of a kind. Learning you are pregnant can be life-changing. Take things one day at a time, and know that WIC is here to support you. What’s right for you may be different from what worked for your sister or best friend. This guide offers tips, information, and general advice—but for care that’s tailored to you and your baby, your doctor is your best resource.

WIC can help you:

- Keep you and your baby healthy and safe.
- Make healthy food choices.
- Buy healthy foods.
- Cook healthy meals without spending a lot of money.
- Learn about breastfeeding.
- Get referrals to healthcare, dentists, and other community programs.

There’s a lot to learn before your baby is born—even if this isn’t your first time. Each pregnancy is different, just like each baby.

It’s normal to have questions. If any come up while reading this guide, write them down so you can ask your doctor at your next visit.

There are many **free or low-cost services** in Utah to help women through pregnancy, childbirth, and after. Open your phone and scan the QR codes or go to:

Baby Your Baby: babyyourbaby.org/pregnancy/before-pregnancy/where-to-find-help/

Maternal Resource Guide: mihp.utah.gov/maternal-resource-guide-utah



Prenatal care keeps you and your baby healthy—now and later

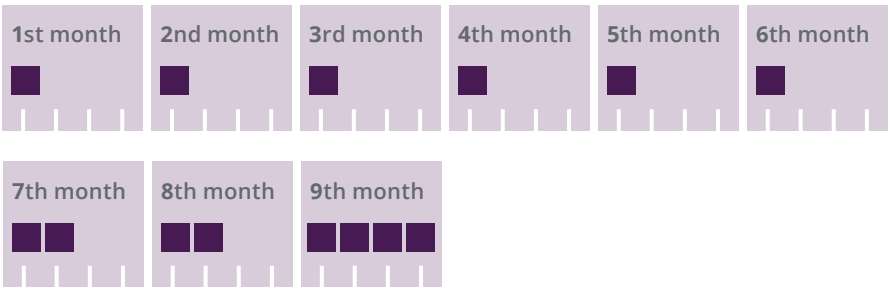
Prenatal care is healthcare for pregnant women. A doctor, midwife, or nurse who’s trained to take care of you while you’re pregnant will check to see how you and your baby are doing. They’ll answer questions about how your baby is growing and how your body is changing. They look for possible problems early on and help you stay healthy and supported. **Get prenatal care as soon as you think you’re pregnant.**

How many prenatal care appointments do I need?

1 each month for the first 6 months—Your provider will check your blood pressure, weight, and your baby’s heartbeat. They’ll answer your questions and talk about how your body is changing.

2 each month in months 7 and 8—These visits are closer together so your provider can keep a closer eye on your baby’s growth and watch for any signs of a problem.

Every week in month 9—Weekly checkups let your provider see how your baby is positioned and help make sure you’re ready for delivery.



After your baby is born, you’ll need 1 more appointment **just for you**. This will be 2 to 6 weeks after your baby is born (postpartum) and helps make sure you’re healing well and getting the support you need.



Worried about paying for prenatal care?

Baby Your Baby can help. If you qualify, they cover some costs and share free resources for pregnant women.

Go to babyyourbaby.org/ or call them at 1-800-826-9662.



How long should my pregnancy last?

Your baby needs at least **39 weeks** to grow and develop before they’re born. Babies born too early may have more health problems. If you have signs of labor before then, call your doctor right away.

How will I know when I’m in labor?

5 common signs of labor are:

- 1. **Tightening in your belly**—it may not hurt, but can be a sign of contractions.
- 2. **Cramps that feel like your period.**
- 3. **A heavy feeling down low**—like your baby is pressing on your pelvis or vagina.
- 4. **A low, dull backache**—the kind that doesn’t go away, even if you change positions.
- 5. **Leaking fluid or some bleeding** from your vagina.

13th week and 13 visits

See your healthcare provider before the 13th week of your pregnancy, and at least 13 times during your pregnancy.

Your baby's size



How you and your baby will grow

First trimester (weeks 1 to 13)

The first weeks of pregnancy can be a whirlwind of emotions and changes. You may feel:

- More emotional
- Constipated
- Tired
- Nauseous (especially in the morning)

Your baby at:

Week 4:

- The developing embryo attaches to the soft lining inside your uterus and is about the size of a poppy seed.
- The placenta starts to form—this is the organ that feeds your baby and gives them oxygen through the umbilical cord.

Week 8:

- All of your baby's major organs and external body structures—arms, legs, ears, eyes—are forming.
- Your baby's heart beats regularly.

Week 12:

- Your baby can open and close its fists and mouth.
- Your baby is about 2.5 to 3 inches long—the size of a plum.

Second trimester (weeks 14 to 27)

Many women start to have more energy. You may feel:

- More hungry
- Your belly begin to grow
- Flutters of your baby moving
- Some ankle swelling, leg cramps, or backaches

Your baby at:

Week 16:

- Your baby starts doing things on purpose, like sucking their thumb or smiling.
- Ears are developed enough that your baby can hear you talk.

Week 20:

- Your baby is more active and you may feel them kick or punch.
- Fingernails and toenails start to grow more.

Week 24:

- Your baby's lungs are fully developed, but not well enough to work outside your body.
- Your baby is about 12 inches long and weighs about 1.5 to 2 pounds—the size of an ear of corn or an eggplant.

Third trimester (weeks 28 to 40, or until birth)

The last weeks of your pregnancy can bring excitement—and some discomfort—as your baby gets ready to arrive. You may feel:

- Lots of movement from your baby
- Heartburn
- Uncomfortable when you try to sleep
- Short of breath

Your baby at:

Week 32:

- Your baby can control their own body heat.
- Skin is smoother, less wrinkled, pink, and soft.

Week 36:

- Your baby's brain continues to grow, but only weighs 2/3 of what it should at birth.
- Some babies have hair on their head.

Weeks 37 to 40:

- Your baby gains about 0.5 pounds each week.
- Your baby usually moves into a head-down position near your due date to get ready for delivery.





Gaining weight—what’s normal and why it matters

Your body goes through many normal changes during pregnancy—including weight gain. Gaining weight is a healthy and important part of helping your baby grow. The right amount depends on your body before pregnancy, how many babies you’re having, and any medical conditions you may have.

Gaining the right amount of weight can help:

- Your baby grow and be born at the right time.
- You deliver your baby and recover a little easier.

The recommended weight gain ranges below are based on guidelines from the Institute of Medicine (IOM). These were created after reviewing research on pregnancy and maternal health. How tall you are and your starting weight—shown by your pre-pregnancy body mass index (BMI)—can affect how much weight gain is healthy. If you’re not sure what your pre-pregnancy BMI is, your doctor or a WIC nutritionist can help you find out.

Pre-pregnancy BMI	Recommended weight gain*
< 18.5	28 to 40 pounds (lb)
18.5 to 24.9	25 to 35 lb
25 to 29.9	15 to 25 lb
> 30	11 to 20 lb

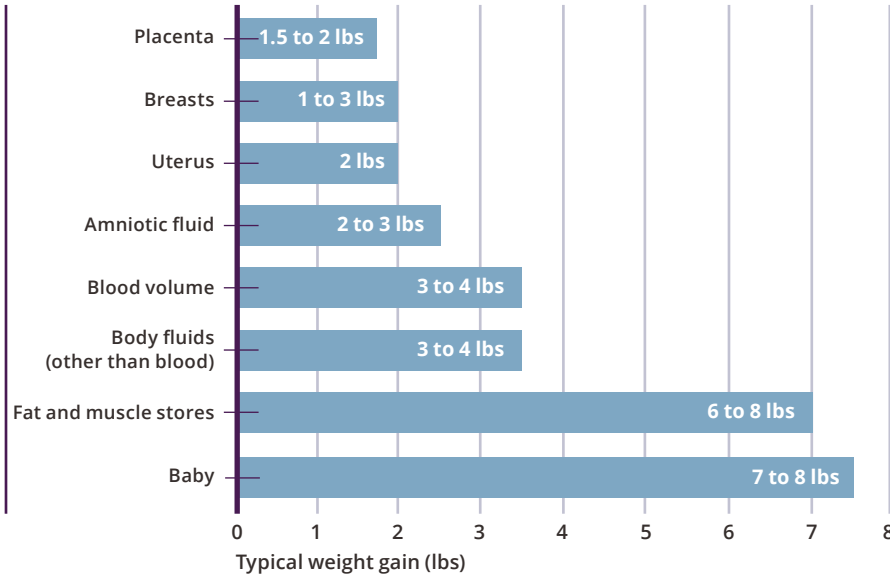
*The recommended weight gain ranges are for women pregnant with **1 baby**. If you’re expecting more than 1 baby, talk with your doctor or a WIC nutritionist to learn what amount of weight gain is healthy for you.

When and where your pregnancy weight goes

Most weight gain happens in the **second and third trimesters**. You may gain only a few pounds (or none at all) in the **first trimester**.

Here’s a typical breakdown of where the weight goes for a woman pregnant with 1 baby:

Pregnancy weight gain by area*



These amounts are based on a woman who gains 25 to 35 lb (the recommended amount for a pre-pregnancy BMI between 18.5 and 24.9).

*Area description

- Placenta** - The organ that gives your baby food and oxygen.
- Breasts** - Your breasts prepare to feed your baby by growing milk-making tissue, increasing blood flow, and storing a small amount of fat.
- Uterus** - The strong muscle in your belly that stretches and grows to hold your baby.
- Amniotic fluid** - The fluid that surrounds and protects your baby.
- Blood volume** - Your body makes a lot more blood than usual to support your growing baby.
- Body fluids (other than blood)** - These extra fluids support your growing baby, helps your body adjust to the changes of pregnancy, and helps you prepare to breastfeed.
- Fat and muscle stores** - Your body stores extra energy to help you during pregnancy, delivery, and recovery.
- Baby** - Weight of your baby at birth.

Gaining more or less weight than recommended can increase the chance of complications during pregnancy and delivery.

Not enough weight gain may lead to:

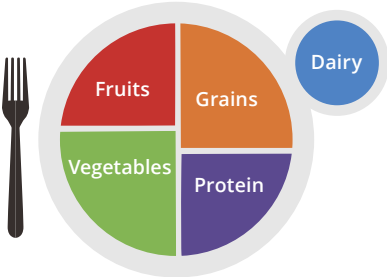
- A baby born too small (low birth weight)
- Early delivery (premature birth)
- Trouble breastfeeding after birth
- More time in the hospital for your baby (NICU care)
- Low energy levels or nutrient deficiencies for you

Too much weight gain may lead to:

- High blood pressure
- Gestational diabetes
- Early delivery (premature birth)
- A larger baby, which can make delivery harder
- A higher chance of needing a c-section

Choose healthy foods for you and your baby

Your baby grows best when you eat well. You'll feel better too. It'll help you gain the right amount of weight and get all the nutrients you need during your pregnancy. Try to eat foods from all 5 food groups each day.



MyPlate is a guide that shows you how to build a healthy meal using the 5 food groups. To learn more about the 5 food groups or make a daily food plan just for you, open the camera on your phone and scan the QR code or go to myplate.gov/.



The United States Department of Agriculture (USDA) recommends that if you were at a healthy weight before pregnancy, you may need about **1,800 to 2,800 calories each day** during pregnancy. The exact amount depends on how active you are and which trimester you're in. The recommendations below are based on a 2,000-calorie diet:

Grains — 6 to 8 ounce-equivalents each day (try to make at least half of these whole grains)

- 1 ounce-equivalent is:
- 1 slice bread or 6-inch tortilla
 - 1/2 bagel or whole wheat bun
 - 1/2 cup cooked cereal, rice, or noodles
 - 1 cup cold cereal

Whole grains include foods like oatmeal, brown rice, or whole wheat tortillas or bread. A food is considered whole grain if it uses the entire grain seed. Whole grains have more fiber and nutrients. They help you feel full longer, keep your blood sugar steady, and prevent constipation better than refined grains.

Vegetables — 3 to 3 ½ cups

- 1 cup is:
- 1 cup of raw, cooked, frozen, or canned vegetables
 - 2 cups of raw leafy salad greens
 - 1 cup of 100% vegetable juice

Eat a variety—dark green, red, orange, beans, peas, starchy, and more.

Fruits — 2 to 2 ½ cups

- 1 cup is:
- 1 cup of fresh, frozen, or canned fruit
 - ½ cup of dried fruit
 - 1 cup of 100% fruit juice

Fresh, frozen, canned (in 100% juice or water), and whole fruits are best.

Dairy — 3 cups

- 1 cup is:
- 1 cup of milk, yogurt, or soy milk
 - 1 ½ ounces of natural cheese

Low-fat (1%) and non-fat dairy is recommended for most pregnant women.

Protein — 5 ½ to 7 ounce-equivalents

- 1 ounce-equivalent is:
- 1 ounce of meat, poultry, or fish
 - ¼ cup cooked beans
 - 1 egg
 - 1 tablespoon of peanut butter
 - ½ ounce of nuts or seeds
 - ¼ cup (about 2 ounces) of tofu

Protein-rich foods like meat, beans, and eggs have iron too. Iron helps carry oxygen to your baby and gives you energy.

Fats and oils

- Choose healthy fats—nuts, seeds, avocados, and oils such as olive or canola oil.
- Limit saturated fats—these are found in butter, high-fat dairy, and fatty meats.
- Avoid trans fats—usually found in processed or packaged foods.

Sweets and added sugars

- Enjoy foods and drinks with added sugars less often and in small amounts—they don't offer much nutrition for you or your baby.
- Have smaller portions or choose naturally sweet foods like fruits if something sweet sounds good.

Sample menu for the day

Eat every 2 to 3 hours to keep your blood sugar steady and energy up. Here’s an example of 3 meals and 3 snacks that totals about 2,000 calories and has foods from each food group. Drink water throughout the day to stay hydrated.

You can buy most of these foods or ingredients with your WIC benefits.



Breakfast — Egg on toast with a banana and milk

- 1 banana
- 1 cup skim or 1% milk
- 1 slice whole grain toast
- 1 cooked, scrambled egg

Morning snack — Yogurt parfait

- 1 cup low-fat yogurt
- 1 cup berries
- ¼ cup granola

Lunch — Veggie burrito

- 1 whole wheat tortilla
- ½ cup black beans
- 1 cup sauteed onions, bell peppers, and zucchini
- ½ cup corn
- ¼ cup shredded cheese
- Salsa

Afternoon snack — Celery sticks with peanut butter

- 1 cup celery (about 4 sticks)
- 2 tablespoons peanut butter

Dinner — Baked chicken with rice, veggies, and side salad

- 1 cup cooked brown rice
- 3 ounces seasoned baked chicken
- ½ cup cooked, sliced carrots
- Side salad:
 - 1 cup leafy greens
 - ¼ cup tomato or cucumber
 - 1 hard-boiled egg
 - 1 tablespoon dressing

Evening snack — Graham crackers and milk

- 3 graham crackers
- 1 cup skim or 1% milk

Take a prenatal vitamin each day

Taking a prenatal vitamin every day helps you get the nutrients you and your baby need. Look for one that has the important vitamins and minerals listed below. **It’s okay if it doesn’t have 100% of the daily recommended amount for every nutrient**—some are easier to get from food, and too much of some can be harmful.

Eating healthy foods and taking a prenatal vitamin work together to give your body what it needs during pregnancy.

Nutrient	Recommended amount during pregnancy	Why it matters
Folic acid (or folate)	600 micrograms (mcg) Make sure your prenatal vitamin has at least 400 mcg	Helps prevent neural tube defects (brain and spine).
Iron	27 milligrams (mg)	Helps your red blood cells carry oxygen to your baby.
Calcium	Ages 14 to 18: 1,300 mg Ages 19 to 50: 1,000 mg	Builds your baby’s bones and teeth.
Vitamin D	600 International Units (IU) Some experts recommend more	Helps you absorb calcium and supports your baby’s bone and immune health.
Choline	450 mg	Important for your baby’s brain and spinal cord development.
Iodine	220 mcg	Helps your baby’s brain and thyroid develop.
Omega-3s (DHA/EPA)	200-300 mg DHA	Supports your baby’s brain and eye development.
Vitamin B6	1.9 mg	Helps you have energy and feel less nauseous.
Vitamin B12	2.6 mcg	Important for forming red blood cells and building your baby’s nervous system.
Vitamin C	Ages 14 to 18: 80 mg Ages 19 to 50: 85 mg	Helps your body absorb iron and supports your immune system.
Vitamin A	Ages 14 to 18: 750 mcg Ages 19 to 50: 770 mcg	Supports your baby’s eyes, skin, and organs as they develop.

If you prefer gummy or chewable vitamins, that’s okay—you may just need to try harder to get some nutrients from food or another supplement.

Talk with your doctor if you’re not sure which prenatal vitamin is best for you.



What kind of prenatal vitamin should I take?

Prenatal vitamins come in different forms—pills, softgels, chewables, or gummies. The best one is the kind you’ll remember to take every day.

Pill or softgel prenatal vitamins usually have the **most nutrients** you need during pregnancy, like iron, choline, and iodine. But they can be big and may cause nausea or constipation. If they upset your stomach, try taking it with food, later in the day, or before bed—it might help you feel better.

Gummy prenatal vitamins taste better and are easier to take, but they usually don’t have iron, and may have **less of other important nutrients** like choline or calcium.

Chewable prenatal vitamins are somewhere in the middle. They’re easier to take than pills and may have **more nutrients than gummy vitamins**. Some even include iron and iodine, but the taste or texture can be strong.

Snack with a purpose

Your body needs more energy and nutrients during pregnancy—but not as much as you may think. **Focus on quality, not quantity.** If you’re pregnant with 1 baby, you **usually don’t need any extra calories in the first trimester.** In the second trimester, you’ll need about **340 extra calories** each day, and around **450 extra calories** each day in the third trimester. The exact amount depends on how much physical activity you get and other health factors that are unique to you.

These snacks have essential pregnancy nutrients, are easy to make, and have around 200 to 300 calories each. As a bonus—you can buy all of these ingredients with your WIC benefits!

Apple and cheese

- 1 medium apple
- 1 string cheese



Egg and avocado on an English muffin

- 1 whole wheat English muffin
- ½ smashed avocado
- 1 fried egg



Greek yogurt parfait

- 1 cup plain Greek yogurt
- 1 cup fruit
- ½ cup Cheerios



Peanut butter banana toast

- 1 slice whole wheat bread, toasted
- 1 Tbsp peanut butter
- ½ banana, sliced



Mix and match foods from each section to create your own snack or mini meal.

Grains

- Oatmeal or grits
- Cold cereal
- Whole wheat bread
- Crackers
- Bagel
- English muffin
- Popcorn
- Noodles
- Brown rice
- Quinoa
- Pita bread
- Tortilla (corn or whole wheat)

Dairy and protein

- Cheese
- Cottage cheese
- Yogurt (regular, Greek, or soy)
- Milk (cow or soy)
- Kefir
- Pudding
- Beans
- Chicken
- Egg
- Peanut butter
- Ground turkey
- Nuts

Fruits and vegetables

- Banana
- Grapes
- Apple
- Melon
- Orange
- Raisins
- Broccoli
- Carrots
- Bell pepper
- Spinach
- Tomato
- Vegetable soup

Simple steps to avoid germs, dirt, and pesticides that could make you sick—especially during pregnancy.

- Always wash your hands with soap and water before you eat or prepare food.
- Rinse all fruits and vegetables (even pre-washed or bagged ones) with clean water before you eat or cook them.



Are there foods I shouldn't eat while I'm pregnant?

Yes. Your immune system changes during pregnancy and your body can't fight off germs the same way it did before. You're more likely to get sick from certain foods during pregnancy (even if you've had them before), and some infections can also affect your baby.

Don't eat foods that can have harmful bacteria like Listeria, Salmonella, or E. coli

These foods include:

- **Raw or undercooked meat, eggs, or seafood**—make sure they're fully cooked to kill any harmful bacteria.
- **Unpasteurized milk, cheese, or juice**—only choose labels that say "pasteurized."
- **Some soft cheeses like feta, Brie, queso fresco, and blue-veined cheeses (blue cheese, gorgonzola)**—unless they're made with pasteurized milk.
- **Deli meats and hot dogs**—if you do eat them, make sure they're cooked until steaming hot to kill any harmful bacteria.
- **Raw sprouts like alfalfa or bean sprouts.**

Other foods to limit or avoid

- **High-mercury fish like shark, swordfish, king mackerel, or tilefish.** Choose safer seafood options like salmon, canned light tuna, or cod—and only eat 2 to 3 servings each week (1 serving = 4 ounces).
- **Liver or liver products**—they're very high in vitamin A. Too much can be harmful during pregnancy.
- **Caffeine**—don't have more than 200 mg each day (200 mg is about 1 to 2 small cups of coffee, 45 to 70 ounces of caffeinated soda, or 1 energy drink).

Alcohol, herbs, and other substances—what's safe?

Everything you eat, drink, or take can affect your growing baby. Some things that seem harmless—like herbal teas or over-the-counter medicines—may not be safe during pregnancy. If you have questions or need help quitting, there are many resources available to support you—without judgement.

- **Alcohol:** There is no known safe amount of alcohol during pregnancy. Drinking alcohol while pregnant can cause lifelong physical, behavioral, and learning problems for your baby. The best way to help your baby grow strong and healthy is to avoid alcohol completely.
- **Herbs and herbal teas:** Some herbs and herbal teas can cause contractions, change your hormones, or impact your pregnancy in other ways that may not be safe. Talk with your doctor or call **MotherToBaby** before you use any herbal products, teas, or supplements.
- **Over-the-counter medicine and supplements:** Some are safe during pregnancy, others aren't. Talk to your doctor or **MotherToBaby** before you take anything new—even vitamins or medicine you can buy at the store.



Talk to a doctor or **MotherToBaby** (a free service) if you have a question about whether or not the medicine or supplement you're taking is safe while pregnant.

MotherToBaby



📞 Call: 866-626-6847

💬 Text: 855-999-3525

💬 Chat: mothertobaby.org

Available in English and Spanish





- **Tobacco:** Using tobacco products or nicotine during pregnancy isn’t safe for you or your baby. This includes smoking cigarettes, vaping, chewing tobacco, and using nicotine pouches, gum, or patches. Many people think e-cigarettes (vapes) are safer than smoking, but even the “nicotine-free” ones usually still have nicotine and other harmful chemicals in them. **Second-hand smoke** is also harmful—it can affect your baby’s growth and health even if you don’t smoke yourself. Try to avoid tobacco smoke and ask for help if you or people close to you want to quit.

The **Utah Tobacco Quit Line** offers free, private support to help you or people close to you quit tobacco, e-cigarettes, or other nicotine products.

- Talk with a coach
- Get tips
- Receive free quit aids like nicotine patches or gum
- Available in English and Spanish

 **Call:** 1-800-QUIT-NOW (1-800-784-8669)

 **Web:** waytoquit.org



- **Marijuana (cannabis):** There is no known safe amount or type of marijuana or cannabis to use during pregnancy. It’s best to avoid it completely. This includes smoking, vaping, eating, or drinking products that contain marijuana or cannabis, and using lotions or oils that contain it.

- **Other medicines, supplements, or drugs:** Using these during pregnancy—whether legal or illegal—can harm both you and your baby, even if they seem safe or were prescribed to someone else. They can pass to your baby during pregnancy and affect their growth, brain development, and overall health. Always talk to your doctor before you start, stop, or change any medications or supplements while you’re pregnant.

Talk to a doctor or **MotherToBaby** (a free service) if you have a question about whether or not the medicine or supplement you’re taking is safe while pregnant.

MotherToBaby



 **Call:** 866-626-6847

 **Text:** 855-999-3525

 **Chat:** mothertobaby.org

Available in English and Spanish



Substance Abuse and Mental Health Services Administration (SAMHSA) Helpline

This helpline provides 24-hour free and confidential help. You can get treatment referral and information about mental health and drug or alcohol use disorders, prevention, and recovery in English and Spanish.

 **Call:** 1-800-662-HELP (4357)

 **TTY:** 1-800-487-4889

 **Text your ZIP code to:** 435748 (HELP4U)

Getting started with physical activity?

Just 5 minutes of physical activity each day is a great place to start. Each week, add a few more minutes until you're moving for about 30 minutes a day.



What to know about exercise and pregnancy

If you're healthy and have a normal pregnancy, it's safe to continue or start regular physical activity. Regular movement can help you feel better, sleep better, and have a healthy body that's prepared to deliver your baby. Physical activity during pregnancy can even help you recover quicker after you give birth.

Talk to your doctor about exercise at your first prenatal care appointments. **If your doctor says it's okay, try to get at least 150 minutes of moderate-intensity aerobic activity each week.**

- **Aerobic activity** is any kind of movement that uses large muscles and you can do for a longer time—like walking, swimming, or dancing.
- **Moderate intensity** means you're moving enough to raise your heart rate and start to sweat.

Your doctor can help you find which exercises will be safe for you to do.

A walk can go a long way to help you stay healthy during your pregnancy. Walking 10 minutes after meals—breakfast, lunch, and dinner—can help you:

- **Keep your blood sugar levels normal.** This can help you prevent or manage gestational diabetes.
- **Digest your food better.** You may notice less bloating, gas, and heartburn.
- **Feel more energetic, less tired, and more focused**—no caffeine needed.
- **Have less swelling.** Moving your body helps blood flow better and can make swelling in your feet and ankles go down.
- **Boost your mood.** Feel-good hormones, like endorphins, are released and can help you feel more confident and less stressed or worried.

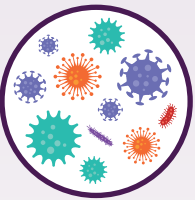
Dental check-ups are safe and important

Good oral health while you're pregnant is important for you and your baby. Your body goes through a lot of changes during pregnancy, including changes in your mouth. You may be **more likely to have tooth or gum problems** during pregnancy than you normally would.

- Get a dental checkup every 6 months.
- Tell your dentist if you have any problems like swollen gums or tooth pain.
- Brush your teeth at least 2 times each day with fluoride toothpaste.
- Floss your teeth 1 time each day.



If gum disease isn't treated, it can affect your whole body and may increase the chance your baby is born too early or too small.



Tooth decay that isn't treated means there are more cavity-causing bacteria in your mouth. After your baby is born, these bacteria can be passed on through everyday actions like cleaning your baby's pacifier with your mouth, or kissing their lips. This can make it more likely for your baby to get cavities later on.



Children of pregnant women who have untreated tooth decay are more than **3 times** as likely to get cavities compared to children whose moms have little or no tooth decay.

Need help finding a dentist?

In Utah, Medicaid covers dental services **during pregnancy and up to 12 months after delivery.** If you need help finding a dentist, go to one of these websites:

Utah Oral Health Program: ruralhealth.utah.gov/find-a-dentist-new/



Utah Medicaid: medicaid.utah.gov/dental-coverage-and-plans/



If you have more questions or can't find what you need, **call 1-866-608-9422** to talk to a Medicaid health program representative.

The Tdap vaccine helps protect against whooping cough (pertussis)—a disease that can be very serious for newborn babies.

The younger a baby is when they get whooping cough, the more likely they are to need treatment in a hospital. Some babies with this disease cough a lot, while others don't cough at all. It may still make them stop breathing and turn blue.

It's important for everyone around your baby to be protected. Older kids and adults may not even realize they have whooping cough because their symptoms can be very mild.



Getting vaccinated while pregnant helps protect you and your baby

Getting vaccines while you're pregnant helps your body create protective antibodies—proteins made by your body to fight off diseases. These antibodies protect you and can be passed on to protect your baby during their first few months of life too. **It's safe and recommended to get these vaccines while you're pregnant:**

- Flu
- Tdap (tetanus, diphtheria, and pertussis)
- Respiratory syncytial virus (RSV)
- COVID-19

Talk to your doctor, scan the QR code, or go to [acog.org/womens-health/infographics/vaccines-during-pregnancy](https://www.acog.org/womens-health/infographics/vaccines-during-pregnancy) to learn more about when you should get vaccines during your pregnancy.



Simple ways to feel your best while pregnant

Pregnancy brings a lot of changes—some you can see and others you can't. Along with a growing belly, your body goes through all kinds of shifts. Your heart works a little harder, your temperature may be slightly higher, you may sweat more, and your joints can feel looser. Hormones change too, which can affect how you feel.

Mental health

It's normal for your mood to shift. Hormones, feeling tired, and the many thoughts running through your mind—about your body, relationships, money, or becoming a parent—can feel overwhelming at times. Be gentle with yourself. You're going through a big transition.

Taking care of your mind is just as important as taking care of your body—for you and your baby. Here are some easy ways to support your mental health:

- **Talk about your feelings.** Share how you feel with someone you trust, like a partner, friend, or doctor.
- **Take time to relax.** Try deep breathing, meditation, journaling, or quiet time to help you feel calm.
- **Stay connected.** Spend time with people who make you feel good and support you.
- **Get moving.** Light exercise, like walking, can help your mood.





If changes to your mood start to feel really strong or don't go away, it may be more than just normal pregnancy hormones.

It's important to ask for help if you:

- Feel sad most of the time
- Have trouble getting out of bed
- Lose interest in things you usually enjoy
- Feel hopeless
- Have thoughts of harming yourself
- Don't know how to handle the changes you're going through

Even if you're only having trouble with one of these things, talk with your doctor or a mental health provider—they're there to support you. **Getting help can make a big difference for both you and your baby.**

Free maternal mental health resources:

- **988 Suicide & Crisis Lifeline**—Provides emotional and mental health support from trained crisis workers. It's free, confidential, and available 24 hours a day 7 days a week. Call, text, chat, or have them come to you. They can help you find safe places you can go when you need a little extra support. Learn more at 988.utah.gov. 
- **Maternalmentalhealth.utah.gov**—Find a list of providers in Utah who specialize in pregnancy and postpartum (the time after birth) mental health. Telehealth and support group options are available. 
- **National Maternal Mental Health Hotline**—Call or text 1-833-TLC-MAMA (1-833-852-6262) to talk to mental health professionals who are specially trained to help you if you're struggling during pregnancy or after giving birth.



Tips for common pregnancy problems

Pregnancy can also bring physical changes that may feel uncomfortable. Nausea, constipation, and heartburn are common, but there are simple things you can try to feel better. Here are some **tips from other moms** to help you manage these changes—and when to ask your doctor for help.

- Nausea and throwing up:
 - **Eat small meals every 2 hours**, rather than large meals.
 - **Don't skip breakfast.** If you're really nauseous in the morning, eat a few crackers before you even get out of bed—and move slowly.
 - **Cold foods and drinks** usually make you less nauseous than hot ones.
 - **Avoid smells that make you feel sick.**
 - **Sip water** throughout the day, rather than drinking a lot at once.
 - **Get plenty of rest** so you don't feel too tired.
 - **Consider wearing anti-nausea wrist bands.** They push against pressure points that may help you feel less nauseous.

Most women start to feel less nauseous by the end of their first trimester (around 12 to 14 weeks). A small number of pregnant women get a more serious condition called **hyperemesis gravidarum**. This can last much longer—and sometimes the whole pregnancy.

Call your doctor or go to the hospital right away if you're throwing up and:

- Your pee is very dark or you haven't peed in more than 8 hours.
- You can't keep any food or drinks down for 24 hours.
- You feel dizzy or weak when you stand up.
- You have stomach pain or a high fever.
- You see blood in your vomit.
- You're losing weight.



- Constipation:
 - **Eat more foods with fiber.** Vegetables, fruits, beans, whole grain products, nuts, and dried fruits all have high amounts of fiber.
 - **Drink more fluids**—especially water.
 - **Move your body every day.** Go for a walk, try yoga, or exercise with a friend.
 - **Talk to your doctor.** They can prescribe medicine to help you if nothing else helps.
- Heartburn:
 - **Eat small meals every 2 hours**, rather than large meals.
 - **Avoid fried, greasy, or spicy foods.**
 - **Wear loose-fitting clothing** that you feel comfortable in.
 - **Avoid caffeinated or acidic drinks.**
 - **Wait at least 2 to 3 hours after you eat to lie down.** When you do lie down, use pillows or supports to keep your head and shoulders higher than the rest of your body.

Sometimes, pregnancy symptoms can be serious. Some warning signs or symptoms should never be ignored. Knowing these signs—and acting quickly if they happen—can make all the difference for you and your baby. **Call your healthcare provider right away if you have any of the following symptoms:**

 Headache that won't go away or gets worse over time	 Dizziness or fainting	 Changes in your vision	 Fever of 100.4 °F or higher
 Extreme swelling of your hands or face	 Thoughts of harming yourself or your baby	 Trouble breathing	 Chest pain or fast beating heart
 Severe nausea and throwing up	 Severe belly pain that doesn't go away	 Baby's movement stopping or slowing during pregnancy	 Severe swelling, redness or pain of your leg or arm
 Vaginal bleeding or fluid leaking during pregnancy	 Heavy vaginal bleeding or discharge after pregnancy	 Overwhelming tiredness	

If you can't reach a healthcare provider, go to the emergency room. Be sure to tell them you're pregnant. Learn more at www.cdc.gov/HearHer.



The **Pregnant@Work** initiative created a **free and confidential legal hotline** to help you get answers about workplace issues related to pregnancy, breastfeeding, or caregiving responsibilities.



Email: hotline@worklifelaw.org



Call: 415-703-8276

Leave a voicemail with your name and phone number and they'll call you back.

Workplace rights during and after pregnancy

If you're pregnant, recovering from childbirth, or breastfeeding, the way you feel, move, and work can change. Federal laws help make sure you're treated fairly and have the support you need to stay healthy for yourself and your baby.

The Pregnant Workers Fairness Act (PWFA)

The PWFA is a law that says most employers must give you reasonable accommodations at work if you're pregnant or have a pregnancy-related health need. These may include:

- More bathroom breaks
- A stool to sit on
- Help with lifting
- Time off for pregnancy-related medical care
- A change in schedule or work hours

These can help you work safely without putting your health at risk. You don't need to be considered "disabled" to get these accommodations. If you ask for a reasonable change, your employer must work with you to come up with a plan, unless it would cause serious problems for the business.

The PUMP Act

The PUMP Act protects your right to pump breast milk at work. This law requires most employers to provide:

- **Break time to pump.** You can take reasonable breaks to express milk for up to 1 year after your baby is born.
- **A private space.** Your employer must give you a clean space where others can't see or interrupt you so you can pump—and it can't be a bathroom.

A Better Balance is a national nonprofit that helps people understand their rights at work. They have a **free and confidential legal helpline** that you can call if you have questions about caring for yourself or your family.

 **Call:** 1-833-633-3222



Getting ready to feed your baby

Breast milk vs. formula: What's the difference?

Both breast milk and formula can provide the nutrition babies need to grow, but they're not the same.

Breast milk is made by your body, just for your baby. It has the perfect balance of fat, protein, and other nutrients—and it changes over time to meet your baby's needs. Your body starts to make colostrum—the first form of breast milk—early in pregnancy. It's sometimes called "liquid gold" because it's thick, golden, and packed with nutrients and antibodies. Even a few days of breast milk can help lower your baby's risk of infections and other health problems.

Health benefits for you and your baby

- Helps your baby's brain develop.
- Boosts your baby's immune system. Your baby may not get sick as often.
- Helps protect your baby's health long after you stop breastfeeding.
- Lowers the risk of disease and serious health conditions for you and your baby.

Healthier weight throughout life

- Lowers your baby's risk of being overweight later in life.
- Your body burns calories to make milk, which can help support a healthy weight after birth.

No matter how you feed your baby, what matters most is that they’re growing well, getting enough to eat, and being cared for with love.

Makes your life easier

- You always have food for your baby with you—even in an emergency.
- You don’t need to make or prepare formula.
- You don’t need to remember to bring supplies or wash bottles.

Saves money

- Baby formula is expensive. You won’t need to buy formula because breast milk has the nutrients your baby needs.
- Most insurance companies will provide a breast pump.
- WIC may be able to provide a breast pump.
- Breastfeeding can reduce healthcare costs and cuts down on the days you miss from work.

Protects the environment

- Breast milk is a natural resource.
- Breastfeeding helps the planet. It reduces the number of bottles, cans, and boxes that are thrown away.

Formula is usually made from cow’s milk or soy, and is processed to be safe for babies. It’s designed to be a good choice if breastfeeding isn’t an option. Vitamins, minerals, and other nutrients are added so it’ll help your baby grow and develop, but it doesn’t have the live cells, immune support, or some ingredients only found in breast milk.

Talk with your doctor, a WIC nutritionist, or a WIC breastfeeding expert if you’re not sure what’s best for you and your baby.

Get the facts about breastfeeding

Myth: I can’t breastfeed because I have small breasts.

Truth: Breast size doesn’t affect how much milk you make. The amount of milk you make is based on how often your baby breastfeeds and how well they breastfeed. Hormones, previous breast surgeries, and some medications can affect milk supply too, so talk with your doctor or a WIC breastfeeding expert if you take medication or are worried about this.

Myth: Breastfeeding always comes naturally.

Truth: Breastfeeding is natural, but it’s also a learning process for both you and your baby. It can take time, practice, and help to figure it out.

Myth: I need to eat a perfect diet to make good milk.

Truth: A healthy diet with lots of variety helps, but your body will still make good milk even if your diet isn’t always perfect. Eat enough to feel full, stay hydrated, rest, and take a prenatal or multivitamin if recommended.

Myth: Breastfeeding always hurts.

Truth: Your breasts may feel tender for a few days, but this should pass. Pain is usually a sign that something needs to change—like your baby’s latch. Get help early on if you feel pain or think something’s wrong.

Myth: I have to stop breastfeeding if my baby or I get sick.

Truth: In most cases, it’s safe—and even helpful—to keep breastfeeding if you or your baby are sick. Breast milk gives your baby antibodies to help them get better quicker and keeps them hydrated and comforted. Wash your hands and wear a mask if needed. Talk to a doctor if you’re not sure about your specific situation.

Myth: I can’t breastfeed if I have a c-section.

Truth: You actually can breastfeed after a c-section. It may take a little extra time and support to get started, but your body can still make plenty of milk. Do lots of skin-to-skin contact and try feeding positions like side-lying or the football hold—they’ll help you stay comfortable and keep your incision protected.

Myth: Breastfeeding isn’t allowed in public—especially without a cover.

Truth: In Utah, the law says you can breastfeed your baby anywhere you have the right to be—with or without a cover. It’s your choice how and where you feed your baby.



To download or print this hospital plan, scan the QR code or go to wic.utah.gov/families/nutrition-education/breastfeeding/.



Hospital plan for breastfeeding success

A hospital plan for breastfeeding success is a **short, simple plan** that helps you share your breastfeeding goals with the nurses and doctors that help you before, during, and after birth. It helps everyone know **what’s important to you** when it comes to feeding your baby. It may look something like this:

Before birth:

- I’d like to learn more about breastfeeding before delivery.
- I want support from a lactation consultant as soon as it’s available.
- Include my partner or support person in breastfeeding education if possible.

Right after birth:

- I want to hold my baby skin-to-skin right away—unless there’s a medical reason not to.
- I want to breastfeed my baby within the first hour after birth.
- Please delay routine procedures (like weighing and bathing) until after we’ve had time to bond and breastfeed.

During my hospital stay:

- I plan to only breastfeed. Please don’t give my baby formula, water, or a pacifier unless I request it or it’s medically needed.
- I’d like to learn how to position and latch my baby.
- If my baby needs to be away from me for special care, I’d like to start pumping to protect my milk supply.
- Please support my decision to room-in with my baby 24/7.

If I have a c-section:

- I’d like to do skin-to-skin as soon as it’s safe—even in the operating room if possible.
- I’d like help breastfeeding as soon as I’m able to.

Before I go home:

- I’d like to meet with a lactation consultant.
- I’d like to know how to get WIC breastfeeding support or other help after I leave the hospital.



You can still breastfeed—even if you’re not always with your baby.

You may need to go back to work or school after you have your baby. You’ll also need time to do things for yourself, like run errands or meet up with friends. Manual or electric pumps can help you if you’ll be away from your baby longer than a couple hours.

Talk to a doctor or insurance company early in your pregnancy if you know you’ll need a breast pump after your baby is born. Each insurance company has different steps to get one. There are usually 2 ways to get a breast pump from your insurance.

1. Ask a doctor to write a prescription for a breast pump. Call your insurance to find out where you can pick up a breast pump with your prescription.
2. Many insurance companies have an option for you to submit a request online and have the breast pump shipped to your home.



WIC may be able to provide a breast pump after your baby is born. Talk to your WIC clinic if you think you may need one.

Planning ahead

Plan ahead for your baby’s insurance

It’s a good idea to make a plan now for how your baby will get health insurance after birth. Babies need coverage right away for things like checkups, vaccines, and care if they get sick.

Before your baby is born:

- Already have insurance? Call them or check their website to learn how to add your baby.
- No insurance? You may qualify for **Medicaid**, **CHIP** (Children’s Health Insurance Program), or **Baby Your Baby**.

Baby Your Baby is a Utah program that helps pregnant women get temporary health coverage and apply for full Medicaid. To learn more or apply online, go to babyyourbaby.org.



Apply for Medicaid or CHIP online at jobs.utah.gov/mycase.



- If you don’t qualify for Medicaid or CHIP yourself, **your baby** may still qualify for coverage after birth.
- If you’re on Medicaid while pregnant in Utah, your baby is covered for their first year—but you’ll still need to fill out some forms. Work with Medicaid or Take Care Utah to get these filled out.
- If you have **PEPW** (Presumptive Eligibility for Pregnant Women) or Baby Your Baby, you’ll need to apply for full Medicaid to make sure your baby is covered.

After your baby is born:

- Report your baby’s birth **within 30 days** to your health insurance. Most insurance plans give you 30 days after birth to add your baby so they’re covered from day one.
- Keep important papers like the hospital’s birth record or birth certificate in a safe place—you’ll need them to get health insurance for your baby.

Have questions or need help applying?

You don’t have to figure this out alone. Get free help from **Take Care Utah**. takecareutah.org/.



Parenting classes

- **In-person classes** are a chance to meet other parents and practice new skills together.
- **Online classes** let you learn at your own pace from home.

Both types of classes give you tips, support, and resources to help you feel more confident as a parent. Ask your healthcare provider, a WIC nutritionist, or go to dhhs.utah.gov/strong-families/ for parenting classes and support.



Car seat

A car seat is the most important way to keep your baby safe in a car. Babies should always ride in a **rear-facing car seat** until at least 2 years old or until they reach the car seat’s height and weight limits.

Hospitals want to make sure your baby is going to be safe after you leave. They usually require you to have a car seat that your baby is going to be safe in before you leave.

To learn more about the type of car seat you should get, how to install one, or to find someone who can tell you if you’re doing it correctly, go to clickit.utah.gov/car-seats-seat-belts/children/rear-facing/. Your WIC clinic can also help you get a car seat or find other resources in your area.





What to pack in your hospital bag

It’s a good idea to have your hospital bag packed and ready by around 36 weeks—just in case your baby comes early. Here are some things that many moms find helpful to bring:

For you:

- Photo ID and insurance card
- Birth plan (if you made one)
- Hospital breastfeeding plan (if you made one)
- Comfortable clothes to wear during your stay—like a loose nightgown, robe, or comfy pajamas
- Socks and slippers
- Breastfeeding bras or tank tops
- Maternity underwear and heavy-duty pads (the hospital usually has some for you too)
- Toiletries (toothbrush, toothpaste, deodorant, hairbrush, lip balm)
- Hair ties or headbands
- Any medications you need
- Phone charger
- Favorite snack or drink
- Something to help you relax—like a book, music, pillow from home, or lotion

For your baby:

- An outfit for going home
- A blanket or swaddle
- Burp cloth
- Hat and socks
- A safe car seat that’s already installed in your car—ask WIC staff where you can get help if you’re not sure how to do this

For your support person:

- Snacks and drinks
- A change of clothes
- Phone charger
- Any medications they need

The hospital usually gives you diapers, wipes, and other things for your baby while you’re there. Call your hospital ahead of time to ask what’s provided—just to be sure.

You’ve got this

Pregnancy is a big journey—full of changes, choices, and new experiences. As you get ready to meet your baby, remember to take care of yourself, ask for help when you need it, and trust your instincts. Your child has you, and you have WIC.

Find your WIC clinic’s breastfeeding peer counselor
wic.utah.gov/families/nutrition-and-breastfeeding-services/



Find your WIC clinic’s phone number wic.utah.gov/locations/





Utah Department of
Health & Human
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Utah WIC Program | 1-877-WIC-KIDS | wic.utah.gov

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