



Pregnancy Guide 2025



Welcome to Wombkeepers

Congratulations on your new pregnancy! We are honored that you have chosen us to care for you during this special time in your life. At Wombkeepers Scottsdale, we view the care of pregnant women and their growing families as an amazing privilege and feel a great sense of responsibility to provide the highest level of care for our patients. To this end, we really hope to get to know you as a person and support you in whatever ways you need. To better service our patients who are expecting, this guide will serve as a handy reminder for you throughout the pregnancy. The birth of a baby is always exciting and beautiful, but it is also a time of your life that you might have many questions and concerns, especially if this is your first baby.

We encourage all our patients to make full use of the Maternity Wellness Center that is included with your care. There will be a monthly schedule of classes, including childbirth, lactation, parenting and yoga classes. There will be support groups, with different special topics. Please arrange a meeting with our Director of Wellness and Practice Manager to discuss the Wellness Center and to obtain information about your doula services for labor and delivery.

Table of Contents

Prior to your First Visit	Page 2
Contact Information	Page 3
Appointment Overview	Page 4
Testing Overview	Page 6
Ultrasound Information	Page 7
Medication Information	Page 8
Diet Recs	Page 10
Exercise Recommendations	Page 11
When to call	Page 13
Disability Information	Page 14
Hospital Information/ Packing Recommendations	Page 15
Pediatrician & Other Recommendations	Page 17
Financial Information	Page 18
General Office Policies	Page 21
Postpartum Guide	Page 28

Prior to your First Visit

- Please fill out all new patient OB forms, including our patient medical history, HIPAA, and financial forms. These are available **on the portal** or on our website at www.wombkeepers.com. New patient forms must be received by your first appointment.
- Review our office policies and financial agreement for obstetrics. Wombkeepers works with your insurance company to provide an ALL INCLUSIVE, COMPREHENSIVE program for obstetrics care which includes:
 - Complete Pregnancy, Labor and Delivery, and Postpartum Care in a low volume, integrative practice
 - Doula/ Labor Support During Labor at our Birth Center or Hospital
 - Support Group and Counseling for Prenatal and PostNatal Care. Limited individual counseling *dependent on insurance at reduced rate or billed to insurance
 - Prenatal yoga three times weekly
 - Post Natal Baby and Me Yoga twice monthly until 6 months postpartum
 - Comprehensive Maternity Education Program: Including childbirth, breastfeeding, nutrition, and parenting education.
 - Completion of any disability paperwork, request for medical records
 - Additional ultrasounds, performed by the doctor or midwife, not covered by insurance
 - NST and other ultrasounds as needed, billed to insurance
 - Weekly Lactation Group Support. Limited individual lactation support *dependent on insurance coverage or at a reduced rate.

Working with your insurance benefits allow us to offer a superior care model for all our patients at a reasonable cost. Your contribution, which might include deductibles and coinsurance, and a fee for concierge level of service, is often far less than paying for any of these services as cash pay. This system of billing is a true benefit to our patients and their families. WE ARE AN IN NETWORK PROVIDER WITH AETNA, BLUE CROSS, BLUE SHIELD, CIGNA, AND UNITED HEALTH CARE AT THIS TIME. Other commercial insurance is accepted if you have out of network benefits, and we DO NOT ACCEPT ANY STATE FUNDED OR MEDICAID PLANS. Cash pay options are available for those with no insurance.

Wombkeepers apply a “Concierge Fee” for our comprehensive services not covered by a standard maternity care agreement IN NETWORK. This fee will be due and payable by 32 weeks of pregnancy. Please discuss details with our Practice Manager. The first \$1000 deposit on this is due by the 12th week of pregnancy unless other arrangements have been made, or four weeks after you transfer your care to Wombkeepers. This fee is not prorated for time under our care, and only under very strict circumstances do we refund this fee, or waive this

fee. We expect that all our patients will make use of the many wellness services which are part of their care.

- Your initial visit to Wombkeepers can include a tour of our facilities and the birth center. We will offer you a full review of your eligibility and benefits with your insurance. You will receive an estimate of all out of pocket costs for your services at this time. You may choose to have this visit prior to meeting with the doctor or midwife and establishing care with the practice if you prefer.
- **VBAC Patients:** If you had a previous cesarean and are hoping for a vaginal delivery with this pregnancy, please also obtain your operative reports from previous deliveries prior to your first appointment. All VBAC patients will be seen by Dr. Aristizabal MD, who specializes in VBAC deliveries, and are not eligible to give birth in the low risk birth center.
- Prior to your appointment, please start taking a prenatal vitamin, if you have not already, with a DHA and Vit D supplement as well. Call the office if you experience any significant vaginal bleeding, abdominal pain, or vomiting preventing you holding liquids down for >6 hours. Light spotting, mild cramping, and mild to moderate nausea and vomiting 3-4x per day is normal in early pregnancy.

Contact Information and General Practice Information

Address: 16700 N. Thompson Peak Parkway, Unit 130 Scottsdale AZ 85260

Parking Available in any uncovered spot, covered spots are reserved

Telephone: 480-454-4490 **Fax :**480-546-5433 **Email:** staff@wombkeepers.com

Please note, we are a small office, with a large volume of calls, and to better handle this volume, we have an **auto attendant phone system** that answers our phone every time.

Please listen carefully. Messages are retrieved on a regular basis, so please leave one detailed message with your name, phone number and date of birth. Please do not keep recalling without leaving a message. If you have an urgent medical concern or are in labor, please do not leave a message on any of the main office extensions, call the emergency line:

Emergency/Labor Calls:

- **You may text the Doctor or Midwife.** Text your Name, DOB, telephone number and concern to the number below. If you put in your phone number, wait for 3 beeps and then enter the number. It is easier to send a text. Please put these numbers in your phone after your first visit.
 - **Direct Physician Pager: 602-201-0865 for Emergencies and Labor Calls**
 - **Direct Midwife Pager: 602-201-1385**
 - **Brenlie Nagy Doula 602-662-7551**
 - **Catherine Galle 480-285-8314 Cell or Direct line home office 480-590-8221**
 - **Amber Parker RN Breastfeeding counselor and First Assist 503-840-7380**
 - **Aylssa Sandoval Doula and 1st Assist 217-550-8155**

Please call the emergency line only for **truly urgent medical concerns and labor calls and allow up to 20 minutes for a response.** If truly urgent, you may also go straight to HonorHealth Shea and the hospital will contact the doctor or midwife directly for you. Appointment requests, prescription refills, and routine questions that can be addressed during normal office hours will not be answered from the emergency line.

Office Hours: Office hours vary throughout the week and only patients with scheduled appointments are permitted in the building during clinic hours and hours in which Wellness Classes are scheduled to maintain a quiet, secure space for our patients. If you need to speak with our administrative staff outside of office hours, please set up an appointment with them ahead of time.

Billing:

staff@wombkeepers.com

Please include any correspondence from insurance companies or labs with your email.

Remember that an Explanation of Benefits is not a bill.

Catherine Galle: Practice Manager, Director of Wellness, Doula & CLC

Please contact Catherine for questions about childbirth education, doulas for labor support, or any other concerns you have regarding your pregnancy care and or bills from the office.

cathie@wombkeepers.com

Personal Cell: 480-285-8314

Appointment Information

- **Initial Visit:** Your initial visit with your doctor or midwife will be about 60 minutes long and consist of a complete review of your medical history, confirmation of your pregnancy, review of diet and exercise recommendations, and explanation of testing and prenatal care, as well as addressing all your questions. An ultrasound and bloodwork to confirm your pregnancy will either be performed during this visit or prior to this visit.
- **Monthly Antepartum Visits:** You will have monthly visits throughout the remainder of your first and second trimesters (9-28wks). These visits will be approximately 30 minutes in duration with the provider and may be combined with your formal ultrasounds for Down Syndrome Screening or Anatomy. If you are having a formal ultrasound in combination with your routine appointment, plan to spend up to 1.5 hours in our office that day. If you are seeing an outside MFM Doctor for your 12 and 20 week Ultrasounds you will have a visit with the Doctor there assigned to your care and you will not see our providers for those visits.
- **Twice Monthly Visits:** In your third trimester, starting at 30 wks, we will see you more frequently for 30 minute checkups.
- **Weekly Visits:** Starting at 36wks. If you are 40 y/o or older or have a high risk condition, such as diabetes, hypertension, or an elevated BMI, these visits will also be combined with Antepartum testing, which will include an ultrasound and fetal monitoring. Please plan to spend up to 1.5 hr in our office if you have antepartum testing. Low risk patients do not require formal testing unless their pregnancy extends beyond their due date.
- **PostPartum Visit:** 1-2 days after delivery. You will be seen weekly during your first postpartum month and then have a final **Postpartum Annual and Birth Control Consult** 7-10 weeks after the birth of your child. This final appointment is not part of your comprehensive fee and will be billed to your insurance separately.

Scheduling: Each follow-up appointment should be made at the conclusion of your previous appointment to ensure availability. **Please know you can book your appointments in advance with our Practice Manager** and we will be happy to assist you and give you a printout of all future visits. **Please make sure you add these to your calendar and note if you are more than 15 minutes late, you will be rescheduled, as it is essential for patients to be on time to avoid delaying other patients.**

Overview of Screening Tests during Pregnancy

*Please note: Wombkeepers DO NOT insist on our patients undergoing any diagnostic or screening tests. It is a personal choice whether or not to have testing performed and we respect your right to make that decision. Please also note that the purpose of genetic testing is for **informational purposes only**, it is against Arizona State Law to seek a termination of pregnancy on the basis of a known genetic defect as determined by prenatal genetic testing.*

- **Initial Visits: Pap smear**, if not done within the last 3 years, **Prenatal Panel** Blood Work: Blood Type, Screening for: Abnormal antibodies, Thyroid dysfunction, Infections, Anemia, **Recessive Genetic Disorder Carrier Screening**: for conditions such as cystic fibrosis, SMA, fragile X. Genetic screening panels can be ordered through Natera Lab and Labcorp, and BioReference Labs. **Ultrasound**: to confirm the due date and viability of pregnancy.
- **11-14 weeks:**
 - **Diagnostic Testing for Down Syndrome and other Chromosomal Abnormalities**: Diagnostic tests are the only 100% accurate tests for chromosomal abnormalities. These tests include CVS and Amniocentesis and are **invasive tests** that carry a risk of miscarriage of 1 in 300 procedures.
 - **Screening Tests for Down Syndrome and other Chromosomal Abnormalities**: This testing is **offered to all women, regardless of age**, and includes a Nuchal Translucency Ultrasound and Blood work. All screening tests are **non-invasive**. The purpose of screening is to inform you whether your baby is at high risk for a chromosomal abnormality, compared to other women your age. This is not a diagnostic test (not 100% accurate) and any positive, high risk result should be confirmed with a diagnostic test (CVS or amnio).
 - **NIPT Blood Work** (Brand Name: Qnatal (Quest), Panorama (Natera), and Maternity 21 (Labcorp): This test can find portions of fetal DNA in the maternal bloodstream and **detects 99.9% of chromosomal abnormalities**. It can also determine the gender of your baby with comparable accuracy. It is considered standard of care for **all women at this time** and is covered by most insurance companies. *It may not be covered by insurance for women under 35, however you may utilize the cash pay option for low risk women under 35 for \$299.00 out of pocket.*
- **16 weeks:**
 - Blood Work: AFP (alpha-fetoprotein), screening for Spina Bifida
 - Early Gestational Diabetes Screening: for patients with a history of gestational diabetes, PCOS, or elevated BMI or HgbA1C on initial prenatal blood work

- **20 weeks:**
 - **Level 2 Anatomy Ultrasound**, screening for abnormalities of all organ systems. Performed at a Perinatology/MFM center of your choice
- **28 weeks:**
 - Blood Work: One Hour Glucose Test, screening for Gestational Diabetes, repeat screening for HIV and Anemia
 - Rhogam Injection if RH neg
- **36 weeks:**
 - GBS vaginal culture, screening for prevention of neonatal GBS sepsis

Test Results: Available via the Patient Portal once they have been reviewed by the physician. Please note, many results “flag” as abnormal by standard lab values in pregnancy when they are, in fact, normal for pregnancy. Your doctor or midwife will inform you of anything abnormal and direct proper follow up, if needed. If you are not informed that a test is abnormal, then rest assured, that is because it is not. Normal results will be reviewed at your next appointment.

We will notify you with **Down Syndrome Screening results** when these become available, as we know patients are anxious for these results. Please **allow up to 12 business days** from when you had your blood work drawn before calling the office for these results. They take a minimum of ten days to reach us. If there is any concern after the perinatologist reviews your images, we will contact you right away, otherwise we will review your ultrasound findings at your next appointment.

Lab Information:

In general, all patients can have blood work collected and managed by BIOREFERENCE LABS. THEY ARE BEING PURCHASED BY LAB CORP AND ESTIMATED TIMING FOR THIS IS SEPTEMBER 2024. Please understand **we are not responsible for billing related to your prenatal blood work. Please direct any billing questions directly to the lab, rather than Wombkeepers Billing. It is your responsibility to know if your policy dictates a particular lab for better pricing and to contact your member services if you have questions about what is and is not covered.** Natera is a boutique lab that only handles genetic recessive carrier screening and Panorama NIPT tests. Billing questions for these tests should also be directed to their lab. Please also note **if you have a deductible**, you will receive bills for your blood work until your deductible is met. This does not mean these tests were not covered, it simply means you had not yet met your deductible. The bloodwork in the first trimester alone costs nearly \$3,000, so most patients meet their deductible within the first trimester from blood work alone. If your pregnancy extends between two insurance years, you will unfortunately meet your deductible twice in the pregnancy, once for antepartum care and testing and once for costs related to delivery. Both labs we are working with will be an “in network” cost for blood work, though you may choose to have your blood work performed at an outside lab. This may delay receipt of your results, however.

Ultrasounds

Ultrasounds are an incredibly safe way for us to make sure your baby is healthy. Official Level 2 ultrasounds or growth u/s are performed by perinatology services in their offices or at satellite locations. We work with these groups in order to provide formal ultrasounds for our patients throughout pregnancy, however, Wombkeepers does not interpret their ultrasounds or perform billing for their services. All images are reviewed by their maternal fetal medicine specialists and if any concerns arise during their imagining or a high risk condition, such as hypertension or diabetes, develops during pregnancy, you will be referred back to their MFM doctor for an in person consultation with that high risk specialist and for all of your follow-up ultrasounds. High risk patients will be referred directly at the start of pregnancy for MFM consultation and follow-up ultrasounds. Dr. Aristizabal may also perform smaller ultrasounds to confirm pregnancy, check fluid or fetal position, and test fetal well-being, however she is unable to perform ultrasounds for down syndrome screening, level 2 anatomy, or formal growth scans. These must be performed with an outside perinatology office.

Medications During Pregnancy

Medications that may be used during Pregnancy:

Allergy

- Benadryl (diphenhydramine), Claritin, Zyrtec, Allegra
- Neti Pot used according to directions

Cold and Flu

- Flu/Covid Vaccination- recommended in pregnancy, all current data indicates that this is the best way to protect both you and your baby from these infections
- Benadryl (diphenhydramine), Claritin, Zyrtec, Allegra
- Robitussin, Guaifenesin, Mucinex
- Decongestants (Sudafed) should only be used sparingly, as they can increase both mom and baby's heart rate
- Neti Pot according to directions

Constipation

- Colace
- Metamucil
- Increase intake of fresh fruits and vegetables, eat dried prunes, figs, raisins
- Alfalfa
- Increase fluid intake

Gas Discomfort

- Gas X
- Smaller meals eaten at slower pace
- Cardamom, cinnamon, bay
- Fennel tea after meals

Hemorrhoids

- Avoid Constipation with above recommendations and use a Squatty Potty
- Witch Hazel pads
- Preparation H
- Rhoid Cream from MotherLove

Nausea

- Acupuncture, acupressure, ginger root (250 milligram capsules 4 times a day), and vitamin B6 (pyridoxine, 25 milligrams two or three times a day) works well. Sipping the thick syrup from inside a can of peaches, pears, mixed fruits, pineapples, or orange slices may also help.
- Diclegis, class A medication used to prevent symptoms (prescription)
- Zofran, class C medication only used with protracted cases of vomiting (prescription)

Heartburn

- Eat Smaller meals with less grease and fat

- Slippery elm lozenges
- Alfalfa, Milk, yogurt
- Coriander, cumin, fennel seeds, cardamom, cinnamon, bay
- Tums
- Pepcid, Zantac, and Nexium for prevention (not Prilosec)

Musculoskeletal Pain

- Tylenol- should only be used sparingly in pregnancy
- Massage, Warm Shower or Bath
- Chiropractic Care and Acupuncture
- Practice Yoga and Ball Exercises

First Aid Ointment

- Bacitracin
- Neosporin, Polysporin
- Green Salve from MotherLove

Rashes

- Benadryl cream
- Caladryl lotion or cream
- Hydrocortisone cream or ointment
- Oatmeal bath (Aveeno)

Skin Care during Pregnancy

During Pregnancy your skin may feel dry and stretched. We carry two natural products which will help with this from Motherlove: Pregnant Belly Oil and Pregnant Belly Salve

Perineal Massage and Primrose Oil

In the last weeks of pregnancy we recommend you use Primrose oil as a Perineal Massage. This is available in our small pharmacy.

Primrose Oil tablets are also available. Both products can be used from 37 weeks on.

Medications/Supplements to Avoid:

Medications: Aspirin products, including skin products containing Salicylic Acid, Bismuth subsalicylate (Pepto-Bismol), Brompheniramine, Chlorpheniramine, [Ibuprofen](#), [Naproxen](#), Pseudoephedrine

Supplements: Arbor vitae, beth root, black cohosh, blue cohosh, cascara, chaste tree berry, Chinese angelica (dong quai), cinchona, cotton root bark, feverfew, ginseng, goldenseal, juniper, kava kava, licorice, meadow saffron, pennyroyal, poke root, rue, sage, St. John's wort, senna, tansy, white peony, wormwood, yarrow, yellow dock

Essential Oils: Calamus, mugwort, pennyroyal, sage, wintergreen, basil, hyssop, myrrh, marjoram, and thyme

* Note: This is meant as an informative guide only, no medication or treatment can ever be determined 100% safe and list of medications to avoid is in no way comprehensive. If you are uncertain of the safety of something you are taking, always ask!

Foods To Avoid During Pregnancy/Diet Recs/Exercise

Foods to Avoid During Pregnancy

- **Raw Meat:** Uncooked seafood and rare or undercooked beef or poultry should be avoided because of the risk of contamination with coliform bacteria, toxoplasmosis, and salmonella.
- **Deli Meat:** Deli meats have been known to be contaminated with listeria, which can cause miscarriage. Listeria has the ability to cross the placenta and may infect the baby leading to infection or blood poisoning, which may be life-threatening. Cook all deli meat prior to eating.
- **Fish with Mercury:** Fish that contain high levels of mercury should be avoided. A sample of these types of fish include: shark, swordfish, king mackerel, and tilefish. Canned, chunk light tuna generally has a lower amount of mercury than other tuna, but still should only be eaten in moderation. Generally speaking, limit fish to less than 12 oz per week or 3 average sized portions
- **Smoked Seafood:** Refrigerated, smoked seafood often labeled as lox, nova style, kippered, or jerky should be avoided because it could be contaminated with Listeria. (These are safe to eat when they are in an ingredient in a meal that has been cooked, like a casserole.) This type of fish is often found in the deli section of your grocery store. Canned or shelf-safe smoked seafood is usually OK to eat.
- **Raw Shellfish:** The majority of seafood-borne illnesses are caused by undercooked shellfish, which include oysters, clams, and mussels. Cooking helps prevent some types of infection, but it does not prevent the algae-related infections that are associated with red tides. Raw shellfish pose a concern for everybody, and they should be avoided altogether during pregnancy.
- **Raw Eggs:** Raw eggs or any foods that contain raw eggs should be avoided because of the potential exposure to salmonella. Some homemade Caesar dressings, mayonnaise, homemade ice cream or custards, and Hollandaise sauces may be made with raw eggs. If the recipe is cooked at some point, this will reduce the exposure to salmonella. Commercially manufactured ice cream, dressings, and eggnog are made with pasteurized eggs and do not increase the risk of salmonella. Restaurants should be using pasteurized eggs in any recipe that is made with raw eggs, such as Hollandaise sauces or dressings.
- **Unpasteurized Soft Cheeses:** Imported soft cheeses may contain bacteria called Listeria, which can cause miscarriage. You should avoid soft cheeses such as Brie, Camembert, Roquefort, Feta, Gorgonzola and Mexican style cheeses that include queso blanco and queso fresco, unless they clearly state that they are made from pasteurized milk.
- **Pate:** Refrigerated pate or meat spreads should be avoided because they may contain the bacteria listeria. Canned pate, or shelf-safe meat spreads can be eaten.
- **Caffeine:** Although most studies show that caffeine intake in moderation is OK, there are others that show that caffeine intake may be related to miscarriages. Avoid caffeine during the first trimester to reduce the likelihood of a miscarriage. As a general rule, caffeine should be limited to fewer than 200 mg per day during pregnancy, or less than 20z of a caffeinated beverage. Caffeine is a diuretic, which means it helps eliminate fluids from the body. This can result in water and calcium loss. It is important that you are drinking plenty of water, juice, and milk rather than caffeinated beverages.
- **Alcohol:** There is NO amount of alcohol that is known to be safe during pregnancy, and therefore alcohol should be avoided during pregnancy.
- **Unwashed Vegetables:** Yes, vegetables are safe to eat, so you still need to eat them. However, it is essential to make sure they are washed to avoid potential exposure to bacteria.

General Diet Recommendations

1. 65-80 gm. of protein daily, which can include up to 12 oz of fish weekly (three normal size servings)
2. Lots of fruits and veggies including green leafy veggies such as spinach and kale, 10 servings per day
3. 2L of water daily
4. Avoid the “white stuff” such as white breads, pastries, sugar, white rice, starchy potatoes and other foods that raise your blood sugar. Go for whole grain, high fiber alternatives and limit carbohydrates to a cup per meal. Make desserts a once or twice weekly treat as opposed to a daily event.

Exercise in Pregnancy

Can pregnant women exercise? The answer is a resounding yes! They can, and in most cases they should. Even three small exercise sessions weekly can reduce C-Section rates by 20%. The benefits of exercise during pregnancy include: Reduced back pain, Decreased constipation, bloating and swelling, Can prevent or treat gestational diabetes, Improved energy, Improved mood, Improved posture, Better muscle tone, strength and endurance, Better sleep. Decreased incidence of Cesarean section, decreased time in the hospital and increased Apgar scores in infants

30 minutes for at least three days of the week is recommended for all women, regardless of fitness level prior to pregnancy. Great forms of exercise include yoga, walking, jogging, swimming, light weight lifting, stationary bike riding, light aerobic classes, and pilates. Try to incorporate cardiovascular exercise, activities that stretch and open the pelvic floor like yoga and pilates, and strengthening into your routine.

Exercises that are NOT safe during pregnancy include:

- Scuba diving and mountain climbing – these activities involve low-oxygen environments that are not safe for the developing fetus
- Downhill skiing – the change in balance experienced during pregnancy increases the likelihood of injuries and falls
- Contact sports such as baseball, football, hockey and soccer – after 15 weeks these sports should be avoided due to the potential for injury
- Mothers should be careful with high impact calorie burners such as spin classes because of the need for additional calories for the growing baby.

Do not exercise if you have without discussing with your doctor or midwife:

- High blood pressure or Preeclampsia
- Have threatened or been treated for preterm labor
- Second or third trimester bleeding/Placenta Previa
- Incompetent cervix
- Signs of growth restriction in the baby

Recommendations for exercising safely in pregnancy

- Drink water before, during and after exercise to prevent dehydration
- Wear clothing that is not restrictive and allows you to move and keep cool
- Wear a bra that fits well and is supportive to protect your breasts
- Avoid exercise in hot, humid weather or if you have a fever
- Avoid inverted exercises that place your head or heart below the level of your uterus
- After the first trimester, avoid doing any prolonged exercises on your back
- Avoid exercises that have repetitive bouncing or jerky movements, or require you to change direction suddenly – especially in the third trimester
- Avoid weight lifting exercises that require significant core strength, especially during the third trimester
- Consume adequate complex carbohydrates to replace the muscle glycogen lost during exercise (this will minimize the risk of fetal ketosis)

Warning Signs: If you experience any of the following, stop exercising and contact us:

- Vaginal bleeding
- Dizziness or feeling faint
- Increased shortness of breath
- Chest pain
- Headache
- Calf pain or swelling
- Uterine contractions
- Decreased fetal movement
- Fluid leaking from the vagina

When to Call the Doctor or Midwife

Up through week 16:

- **Bright red vaginal bleeding** (Some brownish pinkish discharge can be normal in the first trimester or after a bowel movement or intercourse)
- **Bad cramping/abdominal pain** (Small tightening, pulling, and mild cramping is normal, but call if the pain is keeping you from your normal activities)
- **Fever greater than 100.4**
- **Protracted Nausea and Vomiting** keeping you from eating or drinking > 6 hours

Weeks 16 through 28:

- Any vaginal bleeding
- Tightening, cramping, abdominal pain, or back pain that is coming and going more than four times per hour for more than two hours in a row
- Any leakage of clear fluid that soaks through underwear or clothing or seems excessive beyond that of your normal discharge
- Any fall, car accident, or trauma to the belly
- Any headache not going away with Tylenol or changes in your vision
- Fever greater than 100.4

Weeks 28 through 34:

Call for **all of the same reasons you called from 16-28 weeks** and also for:

- **Decreased Fetal Movement:** From now on, one time per day, you should sit down with your hands on your belly and count your baby's movements. The baby should move at least 10 times in one hour. Choose a time when the baby tends to be the most active and once you get to ten, you are done. The importance of the counts is to make you pay attention to the way the baby moves, so if there was ever a day that it was not normal, you would try to get your counts and if you could not, we would send you to have the baby monitored right away.

Weeks 34 through delivery:

- Any vaginal bleeding (Some brownish discharge or mucus with small amounts of blood is normal in early labor or with the passage of your mucus plug. ***You do NOT need to alert the doctor when you pass your mucus plug (baby gel).***)
- Leakage of clear fluid like your water broke
- Any fall, car accident, or trauma to the belly
- Any headache not going away with Tylenol or changes in your vision
- Fever greater than 100.4
- When your contractions are lasting between 30s to 1 minute, coming every 3-5 minutes, for at least an hour, it is time to notify the doctor that you are likely in labor if you are a first time mom. Second time moms should notify the doctor when contractions are coming every 5-7 minutes, as second labor can be faster.

DISABILITY PAPERWORK REQUIREMENTS

Please check with your employer for forms required

ARIZONA DOES NOT HAVE A MANDATED MATERNITY LEAVE FOR EMPLOYERS. YOU WOULD BE APPLYING FOR LEAVE BASED ON THE FEDERAL GUIDELINES. The Family and Medical Leave Act (FMLA) requires private employers with 50 or more employees and all state, local, and federal government employers to give qualified employees up to 12 work weeks of unpaid leave a year for specific reasons. To take the leave, you must have recently given birth or adopted a child, have a serious health condition, including pregnancy-related health conditions or incapacities, or be taking care of a family member with a **serious health condition**. In these situations, any leave you take from work will be “job-protected,” which means that at the end of your leave, you must be allowed to return to your original job or be given another job with similar benefits, pay, and terms and conditions. The FMLA also requires that your employer continue to supply you with group health insurance benefits during your leave. You cannot get unemployment during this time, because you have to be ready to work and accept a job if you are receiving unemployment. Individual employers may have a short term policy you can buy and then apply for benefits but the state does not contribute to this.

We are happy to assist you in filling out your paperwork for disability, short or long term, as well as FMLA paperwork. Most of this paperwork is very time consuming and requires a great deal of information from you. **We need at least two weeks to complete any paperwork requests, so make sure you know when you need your paperwork submitted.** Before we accept any forms to be signed by the doctor we need all the patient portions to be filled out and signed. Many companies want a “medical release” permission form signed by you before the doctor can release any of your information. Please know that most want your current weight and Blood pressure, dates of pregnancy and evidence of all appointments.

Please see your Human Resources official at your office for help in filling out these forms. Asking to go on disability prior to the birth of your baby might also require you to use personal time, vacation time or sick leave, if you want to maintain full pay. This is why it is best to discuss your options with Human Resources. If your spouse or another family member is wishing to take leave because of your pregnancy and childbirth, they too will need to discuss their options before bringing us any forms. If your employer will fax these, make sure you sign your portions and give us a copy. They should be sending a set of paperwork to you and to us.

Do not email us paperwork, please bring it in person and provide the following information:

- 1)DATE YOU WILL TAKE OFF (LAST DAY)**
- 2)DATE YOU PLAN ON RETURNING (ACTUAL DATE MAY VARY BASED ON DELIVERY DATE) PLEASE ESTIMATE BASED ON ESTIMATED DUE DATE IF YOUR FORMS ARE REQUIRED PRIOR TO DELIVERY.**

HOSPITAL INFORMATION AND PACKING GUIDE

Available Hospitals:

We perform our deliveries at **Honorhealth Scottsdale Shea**, and are also credentialed at **HonorHealth Sonoran Crossing**

Holiday/Vacation Coverage:

If you deliver on a major holiday, especially THANKSGIVING DAY, CHRISTMAS EVE OR CHRISTMAS DAY, or during one of Dr. Aristizabal's vacations, we do on occasion utilize our coverage group to provide care. It is a rare occasion that a doctor unknown to you would be involved in your care. 97% or more of our patients are delivered by our doctor or midwife.

You should always notify us via the emergency line before you head to any hospital and you should only go to one of the hospitals where we have privileges.

HONORHEALTH SCOTTSDALE SHEA	HONORHEALTH SONORAN HOSPITAL
Scottsdale, Arizona	Phoenix, Arizona
Private Rooms for Labor, Delivery, and PostPartum:	Private Rooms for Labor, Delivery and Postpartum
24/7 In-house obstetrician, anesthesiologist, and neonatologist coverage	24/7 In House anesthesiologist, off-sight neonatologist and OB on-call 24/7
https://www.honorhealth.com/medical-services/maternity/family-birthing-center-shea#sheatours	https://www.honorhealth.com/medical-services/maternity/labor-delivery-sonoran-crossing#sonoranvirtualtour
Level 3 NICU: 23 week on	Level 2 NICU: Air vac to Level 3 if needed
Hospital was opened over 25 years ago	Opened in 2020

Hospital Bag Packing Recommendation:

- Backless slip-on slippers that are easy to get on and off.
- Socks. Believe it or not, your feet can get cold during labor. The hospital will supply these too.
- Flip Flops for Shower, Bathing suit or something if you want clothing for shower during labor
- Old nightdress or T-shirt to wear in labor. Birthing skirt and tank top, or birthing dress of your choice. You can also wear hospital gowns if you prefer.
- Massage oil or lotion if you would like to be massaged during your labor.
- Birth ball. This can help you to labor effectively (Remember your pump to blow it up)
- Lip balm. Your lips can dry out quickly on a warm labor ward.
- Snacks and drinks for you while you are in labor. Isotonic sports drinks are good, or honey sticks. Make some easy digestible high sugar treats, or have on hand Protein bars or Rice Krispy Treats if you don't bake.
- Hair bands or a clip. If you have long hair, you may want it tied up.
- Pillows. The hospital will not have enough to make you really comfortable. A V-shaped pillow can give you extra support when breastfeeding your baby.
- TENS pain relief machine, if you are planning to use one.
- Music. Take your Iphone, MP3 player or a CD player and some CDs and bring speakers.
- Electric or battery candles for your room
- Aromatherapy items
- Hot and Cold packs

Things Your Partner should pack:

- Water spray or a hand-held fan
- Comfortable shoes. They may be pacing the corridors!
- A change of clothes. Your birth partner might not get the chance to have a shower for quite a while!
- Bendy straws, to help you to have a drink during labor.
- Swimwear, if they want to join you in the shower.
- Mobile phone and charger. If their mobile has a stopwatch/timer function, they can use it to help time your contractions. Or if they have a smartphone, there are apps available that can do the job for them.
- Digital camera or camera phone to take photos or a short film of the birth
- Snacks and drinks. You don't want a dehydrated, hungry birth partner looking after you. If they bring some snacks and drinks with them, they can stay with you, rather than leaving the room to search for food!

Items for After Delivery:

- A going-home outfit. You'll need loose comfortable clothes to wear while you're in hospital and for the journey home. It will take a while for your tummy to go down, so you'll probably still need your maternity clothes when you get home.
- Handouts about how to get breastfeeding started, which you received at your childbirth education classes
- Nursing bras & camis. Bring two or three.
- Breast pads.
- Nightshirt or T-shirt. Front-opening shirts are useful in the early days of breastfeeding.
- Toiletries. Decant these into smaller bottles, or buy travel versions, to save on space in the postnatal ward. You may sweat more after birth, so take a deodorant.
- Towels, hairbrush, toothbrush and toothpaste.
- Baby blanket. Your baby may need a blanket if it's chilly outside when you leave.
- One pair of socks or booties.
- Going home outfit and hat.
- Baby car seat.

Pediatricians

You need to decide on a pediatrician prior to the delivery of your baby and this should be indicated on your birth plan.

Some pediatrician groups commonly used by our patients include:

- **Agave Pediatrics**
 - Offices in Glendale, Phoenix, Scottsdale, Chandler
 - In-office breastfeeding support, tongue tie revision. Vaccines required, some leniency in schedule
- **North Scottsdale Pediatrics**
 - Offices in Scottsdale
 - See babies in-house at HH Shea, lactation consultants in practice, strongly recommends normal vaccination schedule
- **Pediatrix**
 - Offices in N. Phoenix (near Sonoran)
 - No vaccination requirement per previous patients
- **Pimri Pediatrics- Dr. Nick Peters**
 - Offices in Mesa
 - Integrative Physician, lactation support in practice and no vaccine requirements
- **Camelback Pediatrics**
 - Offices in Central Phoenix, quality MD provided care, more conventional medicine approach, vaccines required
- **Pax Pediatrics**
 - Offices in Phoenix, Cactus and Tatum
 - Small office, vaccine choice supported

Home Care/ Concierge Peds: highly personalized care, support for vaccine choice

- **Holistic Home Pediatrics:** <https://www.holistichomepediatrics.com/>
- **Birdie Pediatrics:** <https://www.birdiepediatrics.com/>
- **At Home Pediatrician:** <https://www.athomepediatricmedicine.com/about-us>

Other General Recommendations from Wombkeepers

- Consider purchasing a **“birth ball” or exercise ball at the onset of pregnancy.** Ask our staff for size recommendations, though most average moms will use a 65cm ball, while shorter moms may need a 55 cm and taller moms might need a 75 cm. Begin circling your hips and doing pelvic tilts while on the ball. It will strengthen your core, help ease back pain and prepare your pelvis for better labor.
- **Vaccines:** There are four vaccines that you should consider during pregnancy and

are recommended by the American College of Obstetrics and Gynecology and CDC:

1. **Flu Vaccine:** given starting September of each year and significantly reduces the risk of pregnancy complications from flu, as well as protects your baby from flu for the first six months of life if mom received it in pregnancy. Especially recommended for mothers who will have babies during cold and flu season
2. **COVID vaccine:** given according to guidelines and now large amount of data demonstrating safety and significant reduction in pregnancy complications related to COVID
3. **Tdap:** given 28-36 weeks to protect your baby during the first six months of life from Pertussis
4. **RSV:** given at 28-36 weeks to protect your baby from RSV during the first six months of life. Especially recommended for mothers who will have babies during cold and flu season

These vaccines can be obtained at your local Walgreens or CVS pharmacies. Wombkeepers knows that vaccines can be controversial and the information can be confusing. We respect your decisions regarding vaccines and, if you have concerns, we welcome the chance to discuss them with you and provide guidance. As an integrative practice, we only recommend treatments that offer significant benefits to you and your baby and have strong medical evidence to support them.

- **Travel:** Patients may safely travel up to 36 weeks of pregnancy, but please be aware that the farther you are in your pregnancy, the greater the likelihood of a complication or delivery during your travel. We do not recommend transcontinental flights after 32 weeks and we do not recommend travel to locations without comparable medical care after 24 weeks. If you are taking a flight longer than 4 hours, you should take a baby aspirin prior to your flight to minimize the risk of blood clots. You should also avoid total body scanners during pregnancy. Please see the office staff for a note okaying air travel prior to your trip. Also please refer to the ZIKA and COVID VIRUS UPDATES from the CDC. We do not recommend you or your partner travel to any of the sites listed on the CDC website, but if you must travel to one of these locations, please take all recommended precautions and inform our staff.

Financial Policy for Obstetric Patients

All questions about your individual coverage should be directed to your member services department at your individual company and this phone and or address is usually located on the back of your insurance card. Our office is in-network with AETNA, BLUE CROSS BLUE SHIELD, CIGNA AND UNITED HEALTH CARE. PLEASE DISCUSS WITH OUR PRACTICE MANAGER THE WAY WE WORK WITH OUR PATIENTS WITH THIS IN NETWORK COVERAGE. With other plans, we will bill your insurance using your OUT OF NETWORK benefits. Our billing department will do a verification of eligibility and benefits with your insurance provider before your first visit. It is good for you to know if there are things your policy will not cover as standard OB care and if you have any deductible to meet before they start paying your claims. Insurance companies may also deny your claim for lack of demographic information, so please insure all information supplied to us is correct. Should your claim be denied for any reason, we will bill you for the entire amount of your care, due within 30 days of receipt. WE DO NOT ACCEPT ANY STATE MEDICAID PLANS OR MEDICAID FROM OUT OF STATE.

- We will submit your bill for our full global fee for obstetrics care to your insurance within one week from the date of your delivery.
- We offer a 30% prepayment discount for our fees that are settled in full by 36 weeks of pregnancy, in which case we will not submit to your insurance, but will provide a detailed receipt (superbill) that you may submit to your insurance on your own for reimbursement.
- You may also elect to enter into a three year payment plan at the beginning of your pregnancy. Payment plans are inclusive of our entire fee and include a service charge. If you are interested in either a prepayment discount or payment plan, please contact our staff. These options make the most sense for patients who do not have out-of-network insurance benefits.

Please note, **WE DO NOT ENTER INTO PAYMENT PLANS AFTER 36 WEEKS.** If you have a large deductible you will need to make a deposit on your care. You must discuss this with our Practice Manager and sign a formal agreement for this deposit before your second visit with us. All final obstetrics bills must be settled within 30 days after receipt, otherwise late fees and/or interest may be charged, and after 120 days any bill that remains unpaid may be sent to collection. Collections can also include the cost of collections and other fees associated with the collection of payment. Contact staff@[wombkeepers.com](mailto:staff@wombkeepers.com) with all questions about your bill.

During your pregnancy you will receive services for ultrasounds and prenatal blood work, either with our affiliated groups or outside groups. These are private companies and they do their own billing. If you receive a bill or explanation of benefits from this company please call them with any questions, as Wombkeepers does not have access to your information for these types of bills. The hospital also has its own billing services. You can speak with them about their charges and an estimate prior to your due date. If you plan to birth within the Wombkeepers Birthing Center, a separate facility fee will be charged to your insurance and a separate financial form will be signed for that service closer to your delivery date.

Guide to Understanding Insurance for Prenatal Care: Please Initial

Global Obstetric Fee for Visits from discovery of Pregnancy through Postpartum

It consists of three components: antepartum visits, delivery, and postpartum care. This fee is submitted to your insurance after your baby is born. The hospital, pediatrician staff, and other departments at the hospital will bill your insurance for your care while in labor and delivery and post delivery care while you are staying with them. Typically you have a 1-2 day stay after a vaginal birth and a three to four day stay if it is a surgical birth. Your baby will be a patient as well and you will see bills for the baby directly. If you are birthing in The Renewal Center for Birth your insurance will be billed for the Facility Fee which includes the midwives and nurses working in the center. Your insurance will also be billed for Infant care, bloodwork and follow up visits with our staff. **We also bill a concierge fee (\$3000) for services not included in your global fee paid by insurance.**

 Patient Responsibility: We bill your insurance as a courtesy to you, **but you are responsible for all costs associated with your medical care.** We do not assume the responsibility of verifying your coverage, ensuring your insurance is active throughout your pregnancy, or confirming specific benefits which may or may not be covered or change throughout the period of your care. Any costs not covered by your insurance will be billed to you directly. If your insurance changes or you modify your policy you must alert us with those changes immediately.

 Circumcision: Circumcision is an additional procedure. You may choose to have this performed either by our physicians, within the birth center with local anesthesia, or with your pediatrician, within their office at a later date. Our doctor will bill separately for this. Some insurance companies now consider this a cosmetic procedure and will NOT COVER THIS PROCEDURE. **Our Doctor charges \$350** for this surgical procedure and you will be responsible for any costs not covered by your policy, up to and including the entire amount. This fee is due and payable at time of service.

 Coordinating Benefits: Each insurance carrier may take 30-40 days to process a claim. The doctor may not receive the insurance payment for many months after your treatment. You may receive the check for our GLOBAL FEE, depending on your coverage. You may later receive a bill for additional copayments, deductibles or co-insurances not covered by your insurance for this claim. These charges are your responsibility and are due and payable within 30 days. **WE DO NOT BILL SECONDARY INSURANCE. THIS IS SOMETHING YOU WILL HAVE TO DO.** Many companies want to be informed initially of all insurance claims. You should call your member services once your pregnancy is confirmed and let them know you will be an OB patient and have a pending hospitalization. **YOU SHOULD ALSO DISCUSS HOW AND WHEN TO ADD THE NEW BABY TO YOUR EXISTING POLICY.**

 Additional Information For Insurance: Some insurance plans request that the insured submit additional information for review before they will process a claim. If you do not respond to their request, the claim will be denied. It is your responsibility to provide your insurance this information. They will sometimes ask that we provide this information directly, and we will do so when asked. We will verify and ask you to submit your current cards several times during your pregnancy and always at the onset of a new year.

_____ **Lab Charges:** Wombkeepers DOES NOT bill blood work that is drawn in our office or by their mobile services. You will receive a separate bill from the lab facility associated with our office that performs your lab work. These charges are separate from our billing. They are NOT part of the global fee. Any lab billing inquiries should be discussed directly with the lab facility. Most OB patients have several thousand dollars in blood work and lab work throughout the pregnancy. A large amount is due in early pregnancy. Again, if you have not met a deductible, you will be billed directly by the lab and you pay them directly.

_____ **Insurance Changes:** During your pregnancy, please notify us of any changes in your insurance carrier and present us with a CURRENT insurance card. You are responsible to contact the insurance company to verify that we are participants in your plan. If you elect to change to a plan Wombkeepers does not accept, we have a right to inform you that we do not take your insurance and ask you to complete your care with another provider who will accept your coverage. Please check with us if you are considering modifying or changing insurance during your pregnancy. Please read carefully the general FINANCIAL POLICY for new patients. All services billed are your personal responsibility and if your insurance will NOT pay your claim., we will bill you directly for services you received.

_____ **Late Fees:** Late charges will be added to your bill if your payment is not received in a timely fashion.

30 days: \$25

60 days: \$50

90 days: \$100

After 120 days: You will be charged 18% interest on your account balance, which will accrued monthly, and your account may be sent to collections

_____ **Personal Information:** Provide us with any changes in address and phone numbers as soon as possible. If you plan a move during or soon after the birth and have not received final bills, please call and update your information so that we will not be receiving rejections based on your new demographic information which is always changed at your employer level.

I certify that I have read and understand this financial policy and that I have had the opportunity to ask questions and all questions have been answered. I agree to all terms and conditions and agree that WOMBKEEPERS may send me updated information on my account by both email, mail and by calling should I have an outstanding balance or problem with my claim.

Patient Name	Patient Signature	Date
Staff Name	Staff Signature	Date

Acknowledgement of Wombkeepers Policies for Obstetrics Care

1. I have read and signed the FINANCIAL AGREEMENT and understand and agree to abide by all those terms.
2. I understand the best way to contact the office and my doctor during my pregnancy.
3. I understand the appointment system and know that I am responsible for being on time and can be rescheduled if I am more than 15 minutes late. I understand how often I should be seeing my provider during pregnancy. I am responsible for scheduling and keeping all recommended appointments and if I am unable to attend a recommended appointment, I will inform staff so they can best arrange any needed testing and follow-up.
4. I understand the hospital policy and that I must contact the emergency line before going to any hospital or emergency room.
5. I understand that the practice utilizes occasional HOLIDAY and VACATION COVERAGE, especially on Thanksgiving, Christmas Eve, and Christmas Day. I will still contact the Wombkeepers emergency line, so that my providers may reach out to the covering doctor.
6. I understand that medical advice should not be sought online.
7. I understand that, while Wombkeepers has an online presence and posts general information our community may find interesting, we do not solicit comments online and expect that our patients will respect our staff's privacy and reputation in on-line formats, in the same way we respect that of our patients. I understand that staff and providers are not permitted to "friend" me on social media. I agree not to discuss medical matters or opinions involving my care or others in social format settings or review sites, such as Yelp, Facebook, or on-line groups, as this can dramatically affect our ability to continue to do business. If you wish to provide feedback about your experience or medical care, please do so through our website. We are always happy to hear when you are happy with your care and are always eager to improve in those areas in which we fall short, but request that this is done in a private format. All patients will receive a confidential survey at the completion of their pregnancy care as well.
8. If I elect to use professional photography at my birth, my photographer must obtain written consent from Wombkeepers before taking pictures or publishing pictures of our staff or pictures of your birth. Professional photographers are not allowed to tag or use the Wombkeepers name or information in their websites and or business materials without written permission.
9. I understand that during my pregnancy Wombkeepers serves as my primary Doctor and all medications and procedures should be approved through the Doctor including any and all dental work.
10. In group classes and support group settings, I agree to respect all other patients and maintain their confidentiality at all times. I will treat other members with kindness and help create a safe space, in which members feel free to share their feelings. I will be mindful of the diversity of our members and keep any particularly polarizing views regarding politics, parenting choices, birthing choices, or vaccines to myself.

11. If I use an “outside” source for Doula care the Doula may or may not be permitted to attend or be present for all of my labor and delivery. Depending upon hospital rules, Birth Center guidelines and taking into consideration that the “doula” is not a medical professional offering a “medical” opinion or advice. Wombkeepers support staff are highly trained and support not only the mother in labor but work as part of a support team. They do not assume any responsibility nor serve in an advocate role for the laboring mother.
12. If I do not participate in wellness programs, call for doula coverage or use any of the programs offered by Wombkeepers I know and understand that this does not guarantee a refund or discount on the concierge fee. The fee charged is for the additional time and services the medical providers allocate per patient and the team that serves in the wellness capacity are an additional bonus for being a patient at Wombkeepers. The only exception to this would be a planned repeat C section, a patient who is recommended by an outside doula and comes to Wombkeepers already contracted with that doula, or a late transfer of care after 36 weeks.

I acknowledge and agree to all above mentioned policies as an obstetrics patient at Wombkeepers.

Name	Signature	Date

EFFECTIVE 1/10/2024
FINANCIAL POLICY FOR BLUE CROSS, BLUE SHIELD,
AETNA, CIGNA AND UHC
BIRTHS FOR 2025

When your insurance is a part of a par network agreement with
Wombkeepers.

1. Your initial OB confirmation of pregnancy visit will be reimbursed by your insurer at about one third our billed amount. You will not be “balance billed” for this appointment. We will accept the rate agreed upon with your insurance for this service and it may be subject to your individual deductible and copays, etc. as outlined in your policy agreement. If your deductible remains at the time of your first visit, we will collect a \$250.00 fee as deposit for your services and then the bill will be submitted. The \$250.00 fee will then be applied towards your concierge fee if the full amount is reimbursed. BCBS of Arizona processes all out of state BCBS as well as ANTHEM BCBS and other out of state BCBS plans that are claims paid through Arizona BCBS.
2. In accordance with our agreement with your insurance, Wombkeepers can bill your insurance for additional fee reimbursement if you are a high risk patient, have a multiple pregnancy, need an induction of labor, and any additional ultrasounds, Venipuncture, BPP’s or NST are also billed performed by the Doctor or Midwife for medical reasons. These are extra bills outside of the global fee. Your insurance will also be billed for your postpartum annual treatment, which is completed outside the global fee period of six weeks. Your insurance will also be billed for IUD placements or withdrawal, birth control consultations, breast issues for treatment. All of these services will have an in network rate and may be subject to deductibles and copays. You should review your personal policy for your contributions towards deductibles and or co pays and co insurance.
3. YOUR GLOBAL FEE WHICH INCLUDES ALL PRENATAL CARE, LABOR AND DELIVERY AND POSTPARTUM CARE WILL BE BILLED AFTER YOUR BABY IS BORN. WE CAN GIVE YOU THE EXACT DOLLAR AMOUNT PAID AS SOON AS IT IS COMPLETED BY YOUR INSURER (14 DAYS ESTIMATED). YOU ARE RESPONSIBLE TO PAY WOMBKEEPERS ANY PORTION OF THAT BILL THAT ARE CONSIDERED CO PAYMENTS, COINSURANCE, DEDUCTIBLES OR ANY OTHER BENEFIT SHARING COSTS. YOU WILL OWE THAT PORTION WITHIN 15 DAYS OF YOUR INSURANCE PROCESSING. ALL MONIES OWED ARE SUBJECT TO FINANCE CHARGES AFTER 30 DAYS. YOU CAN SEE ALL RECONCILIATIONS OF CLAIMS ON YOUR OWN PORTAL ACCESS FOR YOUR INSURANCE POLICY. PLEASE MAKE YOURSELF FAMILIAR WITH YOUR OWN PORTAL FOR BENEFITS SO THAT YOU CAN FOLLOW HOW

YOUR INSURANCE IS PROCESSING YOUR CLAIMS.

4. **Your insurance will also be billed during your pregnancy by other providers such as labs, hospitals, our birthing center facility fee, and special testing, etc. These would be line item bills by other companies and not included in the Doctor or Midwife Professional fee (Global Fee). Questions regarding these bills should be addressed to the individual companies generating the bill.**

5. **If your policy has reimbursement programs for childbirth education, doula fees, lactation consultant, behavioral health counseling, or any other wellness fees, Wombkeepers reserves the right to bill for these services as well, but there is no balance billing if insurance does not cover any of these costs. This is not a guarantee that there will be payments or discounts for receipt of the same. If insurance will not cover these items, the practice absorbs these costs as part of the concierge level of service. If we are able to collect a substantial portion of these types of services there will be a discount offered at the close out of your global fee period. This is a rare circumstance with most major insurance companies but billing them encourages them to begin to offer these types of programs for their insured.**

6. YOUR CONTRIBUTION: ITEMS NOT COVERED BY YOUR POLICY

Most insurance will not allow additional payments for additional time spent with providers, courtesy ultrasounds, and bedside care during inductions and labor. Your insurance does not cover wellness services as provided in our total program of care. THEREFORE YOU HAVE A PERSONAL CONTRIBUTION for our concierge level of care. In addition to maternity care that is covered by insurance, there will be a concierge fee of Three Thousand dollars (\$3000.00) for all maternity care, and these are for all the things insurance does not cover with our concierge level of care. This is a one time *per pregnancy* fee. Payments can be made from an HSA or any major credit card. The first one third of the concierge fee is due by 12 weeks, the second one third is due by 28 weeks, and the final one third is due by 36 weeks. This is not an optional fee and it cannot be discounted if you do not attend the programs that are offered to you unless approved by Dr. Aristizabal. This is due and payable for all patients who are late transfers of care in two installments, two weeks from transfer of care appointment and by 36 weeks. There are no additional Concierge care fee once you return to us for gynecological services outside of a pregnancy. Maternity Concierge fees can vary from year to year based on our true expenses for all these services so there are no “grandfathered” concierge fees established with the practice. These fees may be adjusted annually. If you see us for a second pregnancy please check with management for the current fee schedule.

Please understand that concierge fees are not covered by insurance, but may be

covered through HSA funds. They are also tax deductible as a medical expense if you meet criteria for tax deductions.

By signing below you acknowledge and agree that you have been informed of rates and payment structure and agree to the new financial agreement, in total. A payment of Three Thousand dollars (\$3000.00) will be added to your account and the payment structure of being fully satisfied by 36 weeks gestation is mutually agreed by all parties.

Date: _____

Insurance Plan

Owner: _____

Patient: _____

—

Practice

Manager: _____

—

Reviewed and approved by

Date: _____



PostPartum Guide



Instructions for Going Home

From all of us at Wombkeepers, we want to congratulate you again on welcoming the newest member of your family. While we know you are going to be busy caring for your little one, we want to remind you to take care of yourself as well.

Maternal PostPartum Care:

Some things to look out for and call the doctor with if they occur:

- 1. Fever greater than 100.4**
- 2. If you are saturating a pad more frequently than every 2 hours. Bleeding can be expected to continue for up to six weeks, but should get a little less with each passing day. Sometimes around ten days after delivery there may be an increase in bleeding as the placental site heals, but this should be short in duration.**
- 3. Severe headaches not responding to tylenol, chest pain, shortness of breath, nausea and vomiting**
- 4. Redness or severe pain in the breasts**
- 5. Feeling overly sad or overwhelmed, especially if this is interfering in your ability to care for or bond with your baby**

If you need **pain medication** and are not allergic to aspirin, ibuprofen (Motrin) 600mg (3 regular strength tabs) every 6 hours is preferred, otherwise you can use Tylenol 650mg every 4-6 hours

Continue to use Tucks pads (Witch hazel) and hemorrhoid cream as needed for vaginal and rectal discomfort.

Nothing should be placed in the vagina for 6 weeks, including intercourse and tampons.

No exercise until cleared

Warm baths or sitz baths can even be soothing if you suffered a vaginal tear.

Newborn Care

Breastfeeding/Chestfeeding

If you are breastfeeding/ chestfeeding your baby, you are giving your baby a great start. Your milk is tailored specifically to your baby at every age and for every environment. It changes as they grow to suit their nutritional needs, and provides antibodies specific to the germs to which you and your baby are exposed! Here are some things to keep in mind:

- It is important to be patient with yourself and your baby as you begin this journey.

Remember that your baby is programmed to nurse and that your body is programmed to make milk, but that breastfeeding/ chestfeeding is a learned skill. We are meant to spend this time in the red tent, surrounded by many experienced hands. It is crucial that you reach out for help when you need it. If you are having trouble with breastfeeding, call our **Lactation Counselor, Amber Parker, 503-840-7380.**

- Newborn babies need to be fed **at least 8 times in 24 hours**. Offer feeding opportunities at least every 2-3 hours by putting your baby skin to skin on your chest. This also encourages bonding!

- A baby should have **at least 5 wet diapers and at least 5 poopy diapers a day starting around day 5**, after your milk has come in. If you think your baby isn't having enough dirty diapers, or if they are inconsolable, there is a chance they are not getting enough milk, and you should contact their provider and a lactation consultant.

Bottle Feeding If you are bottle-feeding your baby, it is important to carefully read and follow the instructions on the formula container.

- If mixing powdered formula, be sure your water is from a safe source. If using tap water, you can contact your local health department. Always measure the water before adding the powdered formula.

- Babies do not need their milk to be heated, but some parents choose to do this. Never use a microwave to heat milk as it can create uneven hot spots that burn your baby's mouth and throat.

- Formula that has been opened or mixed with water is good at room temperature for two hours, or in the fridge for 24 hours. Do not save an unfinished bottle for later, as saliva mixed with formula can cause bacterial growth.

- Clean and sanitize bottles between use.

- It is possible to overfeed your bottle-fed baby. A good way to figure out how many ounces of formula your baby needs in 24 hours is to multiply their weight in pounds by 2.5. For example, if your baby weighs 8 pounds: $8 \times 2.5 = 20$, so your baby needs 20 ounces of formula over a 24 hour period.

Umbilical Cord Care

- Keep umbilical cord dry.

- The cord will turn from yellow to brown to black and should fall off in one to three weeks. • If the area around the cord becomes red, or if you notice any discharge, call your baby's provider.

Bathing and Skin Care

- It is not necessary to bathe a newborn baby. Babies are born covered in a protective substance called vernix which contains beneficial anti-bacterial enzymes. Delaying bathing also helps your baby's skin to establish a healthy microbiome.

- When you are ready to give your baby a bath, you may do a sponge bath or bathe them in a small tub. If you use a tub, keep in mind that it may take longer for the

umbilical cord to dry up and fall off. Be sure your baby is well supported while in the water! If doing a sponge bath, keep areas that are not actively being washed dry and warm. Babies lose heat quickly. Some areas of your baby's body require more frequent cleaning. Once a day, take a warm, damp washcloth to your baby's neck and hands. Milk can dribble down and become trapped in the neck creases, and this can create irritation. Keep your baby's bottom clean and dry as well.

- For a tub bath, make sure the water is warm (not hot). Use only water or mild, fragrance-free soaps; babies have very sensitive skin! NEVER LEAVE YOUR BABY UNATTENDED IN THE TUB, EVEN FOR A MOMENT!
- Limit lotions or other skin-care products. Pure coconut oil is a good option, as it is 100% natural, a great moisturizer and has anti-bacterial properties.

Comforting a Fussy Baby

- Babies cry to tell us they need something. If your baby is fussy, make sure they are fed, warm, dry and burped. Sometimes they need a change of environment, and just walking outside can help!
- Responding promptly to your baby's cries helps them feel secure. You cannot spoil a baby by comforting them.
 - Sometimes, starting around 3 weeks and lasting until 10-12 weeks, babies may cry for no obvious reason. Often referred to as the "witching hour", it frequently occurs in the evening. It may be due to overstimulation, or gas pain, or something else entirely. It remains a bit of a mystery.
- Run through the 5 S's of comforting a fussy baby:
 1. Swaddling makes baby feel snug and calm.
 2. Side- or Stomach Position is NOT safe for sleeping but can help soothe your babe while awake.
 3. Shushing/white noise may replicate the sounds baby heard in the womb and has a calming effect.
 4. Swinging may also replicate womb life. Be sure to support your baby's head and neck and bob quickly up and down with your babe in your arms.
 5. Sucking on a pacifier or on a parent's clean finger can also help your baby to calm down or fall asleep.

• If you have tried everything and your baby is still fussy, it is ok to put them down in a safe place and walk away for a few minutes. Take some deep breaths and remind yourself that this will not last! Your baby is doing their best and so are you.

- Never shake your baby. Shaken baby syndrome can cause brain damage and death.

Shaken Baby Syndrome

- Shaken baby syndrome is a form of whiplash that causes head trauma and, in 25% of cases, results in death.

- It most often occurs when a baby will not stop crying and the caregiver is exhausted and frustrated. Because babies cannot support their heads, forcefully shaking a baby causes brain swelling and brain cell death.

- Symptoms may include • Irritability/extreme fussiness • Feeding problems • Vomiting • Breathing problems • Lethargy • Pale/bluish skin • Paralysis/coma • Seizures

- Long term damage may include blindness, developmental delays, seizure disorders, and cerebral palsy. • If you believe your baby may have been injured from shaking, seek medical assistance immediately. Babies cannot manipulate you; if they are crying, it is because they truly need your help.

Newborn Developmental Needs/ Technology

- Your baby's brain is developing rapidly. Positive interactions promote healthy brain growth; gentle touch is so important!

- Talk and sing to your baby! Their brain is absorbing all the sounds they hear, and this is laying the foundation for speech.

- Babies express their needs and their feelings through sound and facial expressions. It is important to respond promptly to your baby when they are telling you they need something! This will help them feel secure and loved.

- The American Academy of Pediatrics recommends that children under age two avoid digital media altogether. In order to promote healthy brain development, it is important for your baby to have face to face interactions- it is you who will make your baby smarter, not Baby Einstein.

- YOU CANNOT SPOIL A BABY WITH TOO MUCH LOVE! The more snuggles, the better.

Safe Sleep/SIDS Risk Prevention

- Sudden Infant Death Syndrome (SIDS) is the unexplained death of a seemingly healthy baby, often during sleep. While we may not understand the reason for a SIDS occurrence, there are factors that we do know to increase SIDS risk as well as ways to help protect your baby from SIDS.

- Practicing Safe Sleep is the number one way you can help prevent SIDS.

Remember the ABCs of safe sleep:

- ALONE: Babies should sleep in their own crib or bassinet, not in bed with you. There should be no pillows, crib bumpers, soft bedding or toys in the crib.
- BACK: A baby up to one year old should be placed to sleep on their back- not their belly nor their side.
- CRIB: Babies should sleep in a crib with a firm mattress and a tight fitting bottom sheet. Never let your baby sleep on sofas or arm chairs.

- Other factors that help reduce SIDS risk are breastfeeding, room sharing (but not bed sharing), and pacifier use during sleep (once breastfeeding has been established).
- Factors that increase SIDS risk are maternal drug and alcohol use,

secondhand smoke exposure, and overheating (babies only need one layer more than an adult- and it is not recommended to put hats on babies for sleep).

Taking a Temperature

- Normal newborn temperature ranges from 97.5-99.5 F, or 36.5-37.5 C.
- Under the armpit is the best place to take a baby's temperature. Do not take a rectal temperature, due to risk for injury.
- Be sure to call your baby's provider if they have a temperature of 100.4 or above.

Your Newborn's Appearance

- Babies have soft spots called fontanelles on the top and back of their skull. The fontanelles will become smaller and gradually disappear as the skull bones fuse. The top fontanelle should close around 3 months and the back fontanelle between 18 and 36 months. It is fine to gently touch and wash around these areas.
- Contact your baby's provider if you notice that the fontanelles look sunken or bulging. Sunken fontanelles may indicate dehydration; bulging may indicate fluid build-up, which is a medical emergency.
- It is normal to see your baby's pulse in their fontanelle.
- Babies are born covered in a waxy substance called vernix. As the vernix is absorbed, your baby's skin may start to peel. This does not mean your baby's skin is dry and you do not need to use lotion.
- You may notice a red rash called erythema toxicum, or newborn rash. This is normal; it might appear within 3 days of birth and usually resolves in 1-2 weeks.
- It is also normal for babies to have small white or yellow bumps, called milia, on their face. These are caused by blocked pores, so creams and ointments may make them worse. By 1-2 months your baby's pores will open up and the milia should resolve.
- Newborn acne may appear when babies are 3-5 weeks old; this may look like a red, oily rash. Just continue to wash your baby's face with water; oils, creams and ointments will make the rash worse. This should also resolve as skin pores open, around 1-2 months.
- You may also notice a waxy, scaly substance on your baby's head. This is cradle cap, a build-up of your baby's natural oils. While it is harmless, some parents are bothered by the way it looks. You may loosen it with a soft toothbrush dipped in olive oil; follow up with a mild baby shampoo.
- Try to avoid soaps. If you need to wash your baby, just use warm water.

Newborn Jaundice

- Jaundice occurs when bilirubin (a normal byproduct of the breakdown of red blood cells) builds up in a baby's bloodstream. It is a common condition, but can require treatment. It appears as yellowing of the skin and/or eyes. Your baby will be screened for jaundice in the hospital or birth center.

- Signs of jaundice are yellow discoloration of the skin when pressing lightly on their forehead or nose. Signs of worsening jaundice include lethargy, trouble feeding and a high pitched cry.

- Call your baby's provider if you think your baby has jaundice.

Car Seat Safety

- Children should ride rear facing until they are at least two years old. They need time for their soft bones to strengthen!
- NEVER put your baby in the front seat unless advised by a professional.
- The shoulder harness straps should be placed at or below the shoulders. Straps should be snug; you should be able to place just a finger between your baby's shoulder and the strap. The retainer clip should be at armpit level, not at the belly or the neck.
- Be sure to check the owner's manual for installation information and for tips on properly fitting the harness to your baby.
- Car seats and their installation may be inspected free of charge at various locations. BeSeatSmart.org has a list of car seat inspection sites and lots of other important car seat info.

Protecting Your Baby From Illness

- The best way to protect your baby from illness is to wash your hands. Be sure to wash hands thoroughly for 20 seconds and have others do the same before touching your baby.
- Stay away from people who are sick. Newborns have under-developed immune systems, and their little bodies have a low threshold for fevers (you should call the provider for a temperature of 100.4°F and above). Make sure all visitors are healthy, and that they wash their hands before holding the baby.
- Do not smoke near the baby. Secondhand smoke weakens the immune system, and can make it more likely that your baby will get sick.
- Strongly consider annual flu vaccines and Tdap boosters for those in close contact with your baby.

Sibling Adjustment

- Bringing a new baby home changes the dynamic in your family, and it may take a little while for your other children to adjust. It is important to be compassionate and patient, and to give them time to work out their complicated feelings.
- Jealousy is, of course, a common response when a new baby enters the fold. This is completely normal, and you may need to help your older kiddo(s) manage these big emotions. Validate what they are feeling, and let them know your love for them has not changed. Give lots of extra snuggles.
- Expect regressions in things like sleeping, eating and toilet training. This is a sign that your older child doesn't feel like they are getting enough attention. Try to

provide opportunities for alone time with the big sister(s) or brother(s), and create opportunities for them to be recognized and feel special. Enjoy your baby, and please don't hesitate to reach out to us or to your baby's provider with any questions!

Follow-Up appointments:

- **Birth Center patients** will be seen at **24-36 hours post delivery** for an exam and newborn screening. Time to be arranged by your midwife prior to discharge.
- **All postpartum patients**, hospital and birthing center, **will be seen weekly on Wednesdays for the first four weeks after delivery**, as needed. We do this in a group setting we call **"Weigh-in Wednesdays."** Lactation, counseling, and a provider (either Dr. A or our midwife) are available during this time and hold **open office hours from 12-2pm**. An **appointment is not necessary**, however please come with enough time to see the providers you need to see, as some of the postpartum staff leave the office at 2 and the provider will leave by 3. If you need to be seen privately for any complaint or to have your incision or laceration checked, the provider will see you in this time window.
- A complete **postpartum annual** will be performed at **6-8 weeks postpartum**, where any contraception needs will be addressed.
- If you are unable to come during our "Weigh-in Wednesday" please call Cathie to schedule an appointment on another day.