



The Woman's Clinic

28 Week Checklist

- ___1. Register with your hospital. Fill out pre-registration forms and take them with a copy of your insurance card and photo ID to the hospital.

- ___2. Receive Rhogam Injection IF your blood type is RH Negative.

- ___3. Sign Tubal Ligation Consent for Medicaid, if applicable.

- ___4. Choose a Pediatrician for after delivery.

- ___5. Register for Childbirth and Breastfeeding Classes. Check with the local hospitals for dates and times.

- ___6. Sign all consents needed for delivery at your next appointment with your MD.

- ___7. Get the Tdap Vaccination for you and your immediate family.

- ___8. Let us know your baby's last name.

Kick Counts

Count your baby's movement

1. Start monitoring your baby's movement at 28 weeks. You should feel your baby move after each meal, or approximately every 4 hours. Depending on where your placenta is can affect you feeling your baby's movements. An anterior placenta can affect how much movement you feel, because it provides an extra cushion between the uterus and abdomen. If you have not felt the baby move or kick much throughout your pregnancy up to this point, you need to discuss this with your MD at your appointment.
2. If you have any concerns, you need to do "KICK COUNTS"
 - a. Lie down on your side.
 - b. Count the number of times your baby moves in 30 minutes.
 - c. You should feel the baby move at least 4 movements in 20 minutes.
 - d. If you don't feel movement, eat a snack, drink something cold, and repeat this process **immediately**.
 - e. If you have not felt 4 kicks in 30 minutes, go straight to the hospital. **DO NOT WAIT! GO TO LABOR AND DELIVERY IMMEDIATELY.**

Prenatal Classes

St. Francis Medical Center:

- Childbirth Basics
- Breastfeeding Class
- ABCs of Baby Care
- Prenatal Hospital Tour

Free classes are open to the public. If you have questions, call (318) 966-4075. Class schedules can be found at: www.stfran.com/patients-and-visitors/classes-and-events

Glenwood Regional Medical Center:

- Breastfeeding Class
- Childbirth 101
- Newborn Care Class

Information on these classes and schedules can be found at: <https://www.glenwoodregional.org/> under Events & Classes

Breast Pumps

Contact your Insurance Company or WIC Office to see if you qualify for a breast pump. If you need an order, please ask your physician at your next appointment.

Breastfeeding Resources

St. Francis FREE 24-hour Breastfeeding Hotline: (318) 966-4043

Saint Francis is a GIFT certified hospital and has an internationally board-certified lactation consultant (IBCLC) on staff.

La Leche League of Ruston: (877) 452-5324

Amanda (318)513-2238 OR Marcella, IBCLC (318) 251-1148. Local website: www.lllruston.org or International website: www.lli.org. They are a nonprofit volunteer-based organization with little overhead operating by donation. Help and monthly meetings are free to all. 24/7 troubleshooting by phone. This helpline provides information, education, and support for women who want to breastfeed, and to healthcare providers and others. They have in person latch help by request (Pain is not normal). They also have books and DVDs that you can borrow. Also provide help with carriers or slings.

Dr. Hale (Breastfeeding Pharmacologist) Infant Risk Center FREE Hotline:

(806) 352-2519 Monday-Friday 8am-5pm Central Time. They help provide more information on medicines and possible risk to the baby while breastfeeding than your typical pharmacy. The Infant Risk Center will be dedicated to providing up-to-date evidence-based information on the use of medications during pregnancy and breastfeeding. Their goal is to provide accurate information regarding the risks of exposure to mothers and their babies.

Mississippi Breastfeeding Medicine Clinic: (601) 898-7979

Breastfeeding Medicine Doctor www.msbfmedclinic.com. They prescribe medicine and complementary medicine. They have several helpful notes on Facebook. Your visit may be able to go towards your insurance. If needed, they may offer you a low monthly payment plan. Monday-Friday 1-5 pm by appointment only.

Ouachita Parish WIC Office: (318) 361-7370

Breastfeeding peer counselors, full-time breast pumps, and hospital-grade breast pumps. If you qualify for WIC, the local office has breastfeeding peer counselors to help answer any questions you may have. You may also be eligible to receive a free breast pump or be lent a hospital-grade breast pump. Call and ask to speak with Claire or Bonnie to find out more information.

Milk and Honey Lactation Consultant: (318) 446-2007

The Liquid Gold Prenatal Breastfeeding Class is open for all pregnant mothers and their support partners. The class covers latching, milk supply, breast pumps, what to expect at the hospital, breastfeeding supplies and supplements, and diet and medication.

Breastfeeding Resource Websites:

www.breastfeedingnela.com
www.louisianabreastfeeding.org
www.breastfeeding.com
www.zipmilk.org
www.infantrisk.com
www.ilca.org
www.kellymom.com
www.usbreastfeeding.org
www.dol.gov/whd/nursingmothers

What to Take to the Hospital**For Mom:**

Robe and nightgown, nursing bra or sports bra if not nursing, lounge clothes, warm socks and slippers, roomy outfit to wear home, comfortable panties (dark color and bring extra), sanitary napkins, toiletries such as shampoo, deodorant, toothbrush and toothpaste, hair clips/rubber bands, hairbrush, hairdryer, etc.

For Your Partner:

Change of clothes, pillow, books and magazines, toothpaste and toothbrush.

For Baby:

Car seat, 2 receiving blankets, 2 outfits/onesies, first picture outfit, going home outfit, baby book, and newborn diapers with wipes.

Documents:

Insurance cards, ID, and family phone numbers/emails.

Extras:

Cell phones, chargers, books, extra pillow, hard candy to suck on, snacks/ money for vending machine.

Pediatrician List

Legacy Pediatrics: (318) 324-0111

- Cindy Bimle, M.D.
- Kadie Frost, M.D.

Rosales Children's Clinic: (318) 807-1360

- J.P. Rosales, M.D.

Oliver Road Family Practice Clinic: (318) 329-9202

- Margot Bell Eason, M.D.

Pediatrics Plus: (318) 325-6311

Prior registration not necessary

- Bonita Dyess, M.D.
- Nancy Zukowski, M.D.

Pediatric Associates: (318) 323-8824

- Barry Ricks, M.D.
- Gary Stanley, M.D.
- Marilyn Bivens, M.D.

Monroe Pediatrics: (318) 322-7999

- Munira Yusuf, M.D.

Ruston

Green Clinic: (318) 255-3690

- David W. McGehee, M.D.
- Candace F. Moak, M.D.
- Tonya K. Slusher, M.D.

St. Francis Pediatrics- Ruston: (318) 966-8370

- Dayanny Langiulli, D.O.

Please call the Pediatrician's office before delivering to verify that they are a provider for your insurance company.



The Woman's Clinic

Tdap (Tetanus, Diphtheria, Pertussis), Immunization Consent Form

Screening Questions

- | | Yes | No |
|---|--------------------------|--------------------------|
| 1. Are you allergic to preservatives, neomycin, thimerosal, streptomycin, or latex? | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Do you have a history of Guillain-Barre Syndrome or an active neurologic disorder? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Are you sick today? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever had an allergic reaction to any previous vaccine? | <input type="checkbox"/> | <input type="checkbox"/> |

Possible Vaccine Side Effects

1. Local Reactions, local redness and swelling with or without tenderness.
2. Itching, rash, headache, body aches, and tiredness.
3. Transient fever may develop

Consent for Service

- I have been given and have read a copy of the Vaccine Information Statement (VIS).
- I understand the risk and benefits of the Tdap vaccination and have been given the opportunity to ask any questions I have regarding the Tdap Vaccine.
- I understand that I may be held responsible for charges that are NOT covered by my insurance. I understand that if I do not provide the proper insurance information, I may also be held responsible for charges.
- I am requesting that I be vaccinated with Tdap at The Woman's Clinic.
- I have been given a prescription to be taken to a pharmacy to have them administer the Tdap Vaccine
- I decline to take the Tetanus, Diphtheria, Pertussis Immunization and have been informed of risk.

Patient Signature

Date

Nurse Signature

Date

Tdap Vaccine

What You Need to Know

(Tetanus,
Diphtheria and
Pertussis)

Many Vaccine Information Statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1 Why get vaccinated?

Tetanus, diphtheria and pertussis are very serious diseases. Tdap vaccine can protect us from these diseases. And, Tdap vaccine given to pregnant women can protect newborn babies against pertussis.

TETANUS (Lockjaw) is rare in the United States today. It causes painful muscle tightening and stiffness, usually all over the body.

- It can lead to tightening of muscles in the head and neck so you can't open your mouth, swallow, or sometimes even breathe. Tetanus kills about 1 out of 10 people who are infected even after receiving the best medical care.

DIPHTHERIA is also rare in the United States today. It can cause a thick coating to form in the back of the throat.

- It can lead to breathing problems, heart failure, paralysis, and death.

PERTUSSIS (Whooping Cough) causes severe coughing spells, which can cause difficulty breathing, vomiting and disturbed sleep.

- It can also lead to weight loss, incontinence, and rib fractures. Up to 2 in 100 adolescents and 5 in 100 adults with pertussis are hospitalized or have complications, which could include pneumonia or death.

These diseases are caused by bacteria. Diphtheria and pertussis are spread from person to person through secretions from coughing or sneezing. Tetanus enters the body through cuts, scratches, or wounds.

Before vaccines, as many as 200,000 cases of diphtheria, 200,000 cases of pertussis, and hundreds of cases of tetanus, were reported in the United States each year. Since vaccination began, reports of cases for tetanus and diphtheria have dropped by about 99% and for pertussis by about 80%.

2 Tdap vaccine

Tdap vaccine can protect adolescents and adults from tetanus, diphtheria, and pertussis. One dose of Tdap is routinely given at age 11 or 12. People who did *not* get Tdap at that age should get it as soon as possible.

Tdap is especially important for healthcare professionals and anyone having close contact with a baby younger than 12 months.

Pregnant women should get a dose of Tdap during **every pregnancy**, to protect the newborn from pertussis. Infants are most at risk for severe, life-threatening complications from pertussis.

Another vaccine, called Td, protects against tetanus and diphtheria, but not pertussis. A Td booster should be given every 10 years. Tdap may be given as one of these boosters if you have never gotten Tdap before. Tdap may also be given after a severe cut or burn to prevent tetanus infection.

Your doctor or the person giving you the vaccine can give you more information.

Tdap may safely be given at the same time as other vaccines.

3 Some people should not get this vaccine

- A person who has ever had a life-threatening allergic reaction after a previous dose of any diphtheria, tetanus or pertussis containing vaccine, OR has a severe allergy to any part of this vaccine, should not get Tdap vaccine. Tell the person giving the vaccine about any severe allergies.
- Anyone who had coma or long repeated seizures within 7 days after a childhood dose of DTP or DTaP, or a previous dose of Tdap, should not get Tdap, unless a cause other than the vaccine was found. They can still get Td.
- Talk to your doctor if you:
 - have seizures or another nervous system problem,
 - had severe pain or swelling after any vaccine containing diphtheria, tetanus or pertussis,
 - ever had a condition called Guillain-Barré Syndrome (GBS),
 - aren't feeling well on the day the shot is scheduled.



4 Risks

With any medicine, including vaccines, there is a chance of side effects. These are usually mild and go away on their own. Serious reactions are also possible but are rare.

Most people who get Tdap vaccine do not have any problems with it.

Mild problems following Tdap

(Did not interfere with activities)

- Pain where the shot was given (about 3 in 4 adolescents or 2 in 3 adults)
- Redness or swelling where the shot was given (about 1 person in 5)
- Mild fever of at least 100.4°F (up to about 1 in 25 adolescents or 1 in 100 adults)
- Headache (about 3 or 4 people in 10)
- Tiredness (about 1 person in 3 or 4)
- Nausea, vomiting, diarrhea, stomach ache (up to 1 in 4 adolescents or 1 in 10 adults)
- Chills, sore joints (about 1 person in 10)
- Body aches (about 1 person in 3 or 4)
- Rash, swollen glands (uncommon)

Moderate problems following Tdap

(Interfered with activities, but did not require medical attention)

- Pain where the shot was given (up to 1 in 5 or 6)
- Redness or swelling where the shot was given (up to about 1 in 16 adolescents or 1 in 12 adults)
- Fever over 102°F (about 1 in 100 adolescents or 1 in 250 adults)
- Headache (about 1 in 7 adolescents or 1 in 10 adults)
- Nausea, vomiting, diarrhea, stomach ache (up to 1 or 3 people in 100)
- Swelling of the entire arm where the shot was given (up to about 1 in 500).

Severe problems following Tdap

(Unable to perform usual activities; required medical attention)

- Swelling, severe pain, bleeding and redness in the arm where the shot was given (rare).

Problems that could happen after any vaccine:

- People sometimes faint after a medical procedure, including vaccination. Sitting or lying down for about 15 minutes can help prevent fainting, and injuries caused by a fall. Tell your doctor if you feel dizzy, or have vision changes or ringing in the ears.
- Some people get severe pain in the shoulder and have difficulty moving the arm where a shot was given. This happens very rarely.
- Any medication can cause a severe allergic reaction. Such reactions from a vaccine are very rare, estimated at fewer than 1 in a million doses, and would happen within a few minutes to a few hours after the vaccination.

As with any medicine, there is a very remote chance of a vaccine causing a serious injury or death.

The safety of vaccines is always being monitored. For more information, visit: www.cdc.gov/vaccinesafety/

5 What if there is a serious problem?

What should I look for?

- Look for anything that concerns you, such as signs of a severe allergic reaction, very high fever, or unusual behavior.
- Signs of a severe allergic reaction can include hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, and weakness. These would usually start a few minutes to a few hours after the vaccination.

What should I do?

- If you think it is a severe allergic reaction or other emergency that can't wait, call 9-1-1 or get the person to the nearest hospital. Otherwise, call your doctor.
- Afterward, the reaction should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your doctor might file this report, or you can do it yourself through the VAERS web site at www.vaers.hhs.gov, or by calling **1-800-822-7967**.

VAERS does not give medical advice.

6 The National Vaccine Injury Compensation Program

The National Vaccine Injury Compensation Program (VICP) is a federal program that was created to compensate people who may have been injured by certain vaccines.

Persons who believe they may have been injured by a vaccine can learn about the program and about filing a claim by calling **1-800-338-2382** or visiting the VICP website at www.hrsa.gov/vaccinecompensation. There is a time limit to file a claim for compensation.

7 How can I learn more?

- Ask your doctor. He or she can give you the vaccine package insert or suggest other sources of information.
- Call your local or state health department.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/vaccines

Vaccine Information Statement Tdap Vaccine

2/24/2015

42 U.S.C. § 300aa-26



Glenwood Regional Medical Center

A STEWARD FAMILY HOSPITAL

Steward

PRE ADMISSION FORM FOR OB

PATIENT INFORMATION

Name _____
Address _____
City _____ State _____ Zip _____ Parish _____
Marital Status _____ Religion _____ Email _____
Employer _____ Employer Phone _____
PCP _____ OB Doctor _____ Due Date _____

SPOUSE OR SIGNIFICANT OTHER

Name _____
Address _____
City _____ State _____ Zip _____ Parish _____
Cell _____ SSN _____ Birth Date _____ Race _____
Marital Status _____ Religion _____ Email _____
Employer _____ Employer Phone _____

EMERGENCY CONTACT 1

Name _____
Address _____
City _____ State _____ Zip _____ Relationship _____

EMERGENCY CONTACT 2

Name _____
Address _____
City _____ State _____ Zip _____ Relationship _____

INSURANCE INFORMATION

Primary Insurance _____ Insured Name _____
Policy Number _____ Group _____
Insured SSN _____ Insured Date of Birth _____
Secondary Insurance _____ Insured Name _____
Policy Number _____ Group _____
Insured SSN _____ Insured Date of Birth _____

Fax to 318-329-3877



PATIENT INFORMATION

Name _____

Address _____ City _____ State _____

Zip _____ Parish _____ SSN _____ DOB _____

Marital Status _____ Religion _____ Email _____

Employer _____ Employer Phone _____

PCP _____ OB Physician _____ Due Date _____

SPOUSE OR SIGNIFICANT OTHER

Name _____

Address _____

City _____ State _____ Zip _____ Parish _____

Cell _____ SSN _____ DOB _____ Race _____

Marital Status _____ Religion _____ Email _____

Employer _____ Employer Phone _____

EMERGENCY CONTACT 1

Name _____ Email _____

Address _____ Phone _____

City _____ State _____ Zip _____ Relationship _____

EMERGENCY CONTACT 2

Name _____ Email _____

Address _____ Phone _____

City _____ State _____ Zip _____ Relationship _____

INSURANCE INFORMATION

Primary Insurance _____ Insured Name _____

Policy Number _____ Group _____

Insured SSN _____ Insured DOB _____

Secondary Insurance _____ Insured Name _____

Policy Number _____ Group _____

Insured SSN _____ Insured DOB _____