



B3789-01

Preparing to Parent



EARLY PREGNANCY — WEEKS 10 TO 20

Getting started

So, you're going to have a baby!

Here are five things to do now

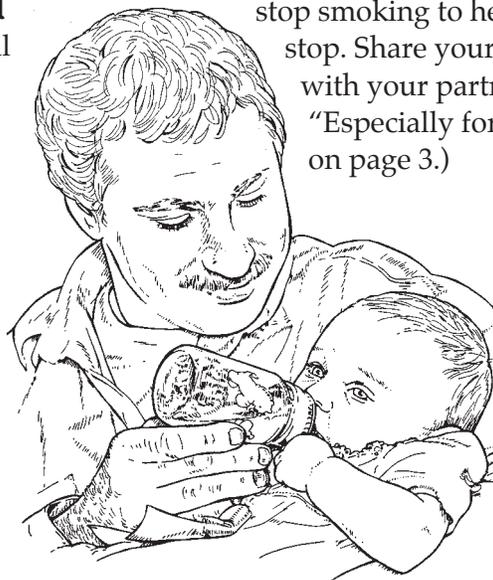
- 1. Make an appointment to see a doctor, nurse, or midwife.** Do this even if you are feeling fine, have been pregnant before, or do not have health insurance. Regular checkups now help you and baby stay healthy. (See "Choosing a doctor or nurse" on page 8 and "Money matters" on page 11.)
- 2. Eat healthy and exercise.** Good nutrition helps get your baby off to a good start. Staying active during pregnancy helps both you and your baby. (See "Staying active" on page 9 and "Eating for two" on page 10.)
- 3. Take your prenatal vitamin.** A prenatal vitamin with folic acid, taken before pregnancy and during early pregnancy, can help prevent some problems for you and baby. (See "Iron and folic acid" on page 10.)

- 4. Stop drinking, smoking, and taking drugs.** When you use drugs, alcohol, or tobacco, your baby uses them too. Even herbal remedies and medicines can harm an unborn baby. **Ask a doctor or pharmacist about baby's safety before taking any drugs, medicines, or home remedies.**

- 5. Share the news.** Let those closest to you know you are pregnant. They can share your excitement, as well as your worries.

Dad—You are part of this pregnancy too! Talk with your partner. Help her out. Keep her company on walks. Help her make healthy choices. Go with her to checkups. If you both smoke,

stop smoking to help *her* stop. Share your hopes with your partner. (See "Especially for fathers" on page 3.)



Contents

Getting started	1
Who do you want to be?	2
What have you heard about breastfeeding?	2
Especially for fathers	3
Wow, I'm going to be a parent!	3
Q and A	4-5
Mom, are you and baby safe?	6
Sex and pregnancy	6
HIV/AIDS update	6
Everyone gives you advice	7
Mom's emotional rollercoaster	7
Choosing a doctor or nurse for prenatal care	8
Your changing body	9
Staying active	9
Iron and folic acid	10
Eating for two	10
Print resources	11
Money matters	11
Safe water	12
Safe eating for you and your baby	12-13
Prevent lead poisoning	13
Wisconsin resources	14
Development at 10 to 20 weeks	14
Online resources	15

Who do you want to be?

Pregnancy is a good time for you and your partner to think about where you are in life, and where you want to be in 5 or 10 years.

Are you thinking about school?

Many communities have special programs to help pregnant women and women with young children stay in high school, community college, or university. Ask a counselor, nurse, or teacher at your school. Many of these programs include free or low-cost child care.

Would you like to change jobs?

What can you do to get started on that now?

Invest in yourself!

Education and a good career can help you take better care of yourself and your baby in the years ahead.

What have you heard about breastfeeding?

Doctors and other experts recommend that you breastfeed your baby. Breastfeeding is also called nursing.

Breastfed babies . . .

- Get sick less often.
- Have fewer painful ear infections, allergies, stomach problems, and colds.
- Are less likely to be sick when they are older.
- Are at less risk for Sudden Infant Death Syndrome (SIDS).

Breastfeeding can . . .

- Help you feel close to your baby.
- Help you recover from labor and birthing, and lose extra weight gained during pregnancy.
- Make life easier—no bottles of formula to prepare or warm up.
- Save money—breast milk is free!
- Reduce your risk of getting some forms of cancer later in life.

Most women can breastfeed...

- Even with small breasts or twins, or if they had breastfeeding problems before.
- Even after a cesarean birth or, in many cases, after breast surgery.
- Even if baby is born early.
- Even if they work outside the home or go to school.
- Even if their diet is not good or if they smoke.

If you are struggling, ask for help. You can do it!

Talk about breastfeeding with those who are close to you, and with your doctor, nurse, or midwife. Talk with women who have breastfed their babies.

La Leche League is a worldwide group with helpful breastfeeding advice, mother-to-mother support, and breastfeeding help in many languages. If you look in the phone book you may find a chapter near you. Or look online at www.lalecheleague.org.



Especially for fathers

Pregnancy can be an exciting—and overwhelming—time for fathers-to-be. This is normal. It may seem that everyone is focusing on the mother-to-be, but this is your baby too.

Here are some ways to stay involved

- Show your partner she is special and cared for.
- Go with her to the doctor, nurse, or midwife.
- Attend parenting classes together.
- Help your partner stay away from cigarettes, drugs, and alcohol. Make your home smoke-free.

Learn about fathering

Talk with other fathers about becoming a dad. Ask how their lives changed and what most surprised them.

Talk with your own father or grandfathers, or talk with others *about* them. What is the story of you and your dad? Of your dad and his dad?

What do you want the story of you and your child to be? You can read more about becoming a father in later issues of this series.

“When I found out Janelle was pregnant, I was excited and scared at the same time. It was exciting to think about being a father—but scary, because I know I want to be a different dad than my dad was. I want to be there for our baby.”

—Eric, first-time father to José

Wow, I’m going to be a parent!

Learning that you and your partner are expecting a baby can feel strange. You can feel happy, sad, scared, and excited all at once. Most parents-to-be feel this way, and most come to love their baby. But others are not so sure they want to be pregnant or raise a baby.

If you worry about whether you want this baby, you have options. Talk about your choices with your spiritual advisor, with your doctor or nurse, and with those who are close to you. Seek their advice now, early in your pregnancy.





“Should I quit drinking while I’m pregnant?”

Drinking alcohol during pregnancy can hurt your baby’s brain and body—forever—by causing **Fetal Alcohol Syndrome (FAS)**. Even small amounts of alcohol consumed during pregnancy can cause serious behavioral problems and Fetal Alcohol Effect (FAE).

You should not drink ANY alcohol during pregnancy—not beer, wine, wine coolers, mixed drinks, or hard liquor. The more you drink, the more damage you cause to your baby’s brain while it is first growing. Even an occasional drink can harm your child.

“It was hard to stop smoking. At first I cut back. Then I only smoked half of each cigarette. Finally, Scott helped me stop.”

—Brittany, mother-to-be



“Why should I avoid smoking?”

Smoking during pregnancy is bad for both you and your baby. Smoking during pregnancy can lead to premature birth, miscarriage, stillbirth, Sudden Infant Death Syndrome (SIDS), and later on to asthma, and to problems in school.

Secondhand smoke (from other people smoking) can also hurt your growing baby. Start a smoke-free life now, and make plans to have a smoke-free home when baby comes. This will help baby grow up healthy. There are some risks to using nicotine gum or patches to stop smoking—even those you can buy without a prescription. Ask your doctor or pharmacist whether you may use them. First Breath is a program that helps pregnant women in Wisconsin quit smoking. More information is available at www.wwhf.org/pg_firstbreath.asp.

“Should I avoid drugs?”

Even legal drugs can hurt your growing baby both now and while you breastfeed. Make a list of all your prescription and nonprescription medicines, supplements, herbal remedies, and home remedies. Discuss this list with your doctor or pharmacist.

Avoid **all** illegal drugs—marijuana, cocaine, crack, heroin, meth, speed (amphetamines), and everything else—while you are pregnant. These drugs can harm baby’s developing brain and body. Risk of damage to baby’s brain is greatest right now, when the brain is first forming. Baby might also be born addicted.

Quitting can be hard

It helps to know you are quitting for your baby. But quitting will still be hard!

If you cannot stop on your own, talk to your doctor, nurse, or tribal or public health department. There may be special programs to help pregnant women quit. Residential programs with overnights are often best for quitting drugs and alcohol.

Take it one day at a time. Each cigarette you don’t smoke or each drink you don’t take is one less for baby as well.

If you also stop taking prescription antidepressants during pregnancy, you may benefit from more time with a counselor.

Be good to yourself

Find fun things to do instead of smoking or drinking. Chew regular gum. Avoid places where people smoke. Save the money you would have spent on liquor or cigarettes; you may think of something else you want!

Think about your baby. Imagine holding your beautiful, healthy baby in your arms.

Good luck! You are doing the right thing.

Dad—Help your partner in her efforts to quit. Keep alcohol and smokes out of her sight so she isn't tempted. Quit yourself! Ask her what else you can do to help.

“What else do I need to avoid?”

Hot tubs, saunas, and steam rooms. These can cause your body temperature to rise too high. This can hurt your baby. They also have been linked to cerebral palsy.

X-rays. If you need an x-ray, be sure to tell the doctor or dentist that you are pregnant.

Cat litter. Cat feces can carry the parasite that causes toxoplasmosis, an infection that can cause birth defects in your growing baby. Get someone else to empty the cat box. Or wear throw-away gloves, and wash your hands well afterwards.

Garden dirt. To prevent toxoplasmosis, always wear garden gloves and wash your hands well afterwards.

Germs on the farm. Pregnant farmers can be infected with toxoplasmosis and with a form of chlamydia from sheep at lambing time. Make sure you wear protective gloves and keep them away from your face, especially your mouth.

Pesticides. Toxic sprays are often used on lawns, gardens, farm crops, roadsides, or around your home. These pose health risks to you and your baby. Some may cause birth defects.

Germs, germs, germs. Getting sick during pregnancy is hard on you and your baby. The best way to stay healthy is to wash your hands often.

“Can I keep working?”

For most pregnant women, working is fine. For others, working may not be safe. Jobs that require a lot of heavy lifting, carrying, climbing, or standing may not be safe. Working around pesticides, chemicals, cleaning solvents, x-rays, lead, or mercury may harm your baby. Some health care workers may be at risk during pregnancy. Whatever your job may be, ask your doctor, nurse, or midwife if it is safe for you to continue working.

“Is it safe to get a flu shot?” Flu vaccinations are considered safe for pregnant women. Catching the flu during pregnancy can harm your developing baby, so it's important to get vaccinated. Talk with your doctor about getting a flu shot.



Always wash your hands well . . .

- **Before** cooking or eating.
 - **When** you are around children a lot.
 - **After** using the toilet or changing diapers, or after removing gloves you wore emptying the cat box, gardening, or lambing.
- 

Mom, are you and baby safe?

Many women are hurt by their partners during pregnancy. If your partner has ever hit, shoved, threatened, or hurt you, that behavior may get worse during pregnancy. While pregnancy is often a time of happiness, it puts stress on a couple's relationship, and this stress may lead to abuse.

Abuse during pregnancy hurts you and your unborn baby. And someone who hurts you now may hurt you and your baby later. If you are in an abusive relationship, please get help!

You are not alone! There are people who will listen. Talk to your doctor, nurse, or midwife.

If something about your relationship scares you, contact **National Domestic Violence Hotline** (English/Spanish) at (800) 799-7233, or TTY (800) 787-3224, or www.ndvh.org.

Dad/partner—All the changes of pregnancy can be hard on you, too. Just remember, your partner doesn't get tired or upset just to make you feel bad. She is that way because **she** feels bad. Pregnancy is hard on her! If you feel angry or violent toward your partner, get help. Getting help is better than hurting someone you love. Call the toll-free hotline above for advice in English or Spanish.

Sex and pregnancy

Many women and their partners find that pregnancy changes their sex life. Interest in sex may increase or decrease, or may change from day to day. In most cases you can have sex during your pregnancy if both partners are interested. Exceptions may include bleeding, threatened preterm labor, and premature rupture of membranes. Talk to your doctor, nurse, or midwife if you have any questions or concerns. Talk with your partner about your feelings. Pregnancy may be a time to explore other forms of intimacy.

Sexually transmitted infections (STIs) and HIV / AIDS can harm your growing baby. Use condoms if you do not know if your partner has STIs or HIV / AIDS. Your doctor or nurse can test you for STIs if you are concerned.

HIV/AIDS update

A mother who has **HIV**—the virus that causes AIDS (Acquired Immune Deficiency Syndrome)—can pass this virus on to her unborn child. Treatment during pregnancy and special care at birth can reduce the baby's risk of having HIV / AIDS to less than 2 percent.

You can get HIV from having sex or sharing needles with an infected person—even just once! You can have HIV and not know it.

Every pregnant woman should know her HIV status.

It would be terrible to learn you have HIV. But it would be much worse to learn you had given it to your baby! You don't have to. Ask your doctor or nurse for confidential HIV testing. A healthy baby carries your life into the future.



Everyone gives you advice

Advice from friends and relatives can be a big help. But some people's advice may be out of date, or just plain wrong.

You will need to decide whose advice to follow. We know a lot more about pregnancy and healthy babies than we used to!

Talk to your doctor, nurse, or midwife about the advice you are getting. Make a list of questions for each visit. Have someone come with you to listen at your appointments. Write down what you want to remember.

DVDs and books from the library can give you current advice, too.

Mom's emotional rollercoaster

For some women, pregnancy can feel like an emotional rollercoaster. One minute you feel happy, the next you are in tears.

Your moods may be caused by . . .

- Worries about your pregnancy or about becoming a mother.
- Changing hormones in your body, making you feel sad or edgy.
- Physical changes, making you feel extra tired, irritable, or crabby.

These mood changes are usual. Talk to someone about how you feel. Stay active, eat well, and be sure to get plenty of rest. Take care of yourself! Talk to your doctor, nurse, or midwife.

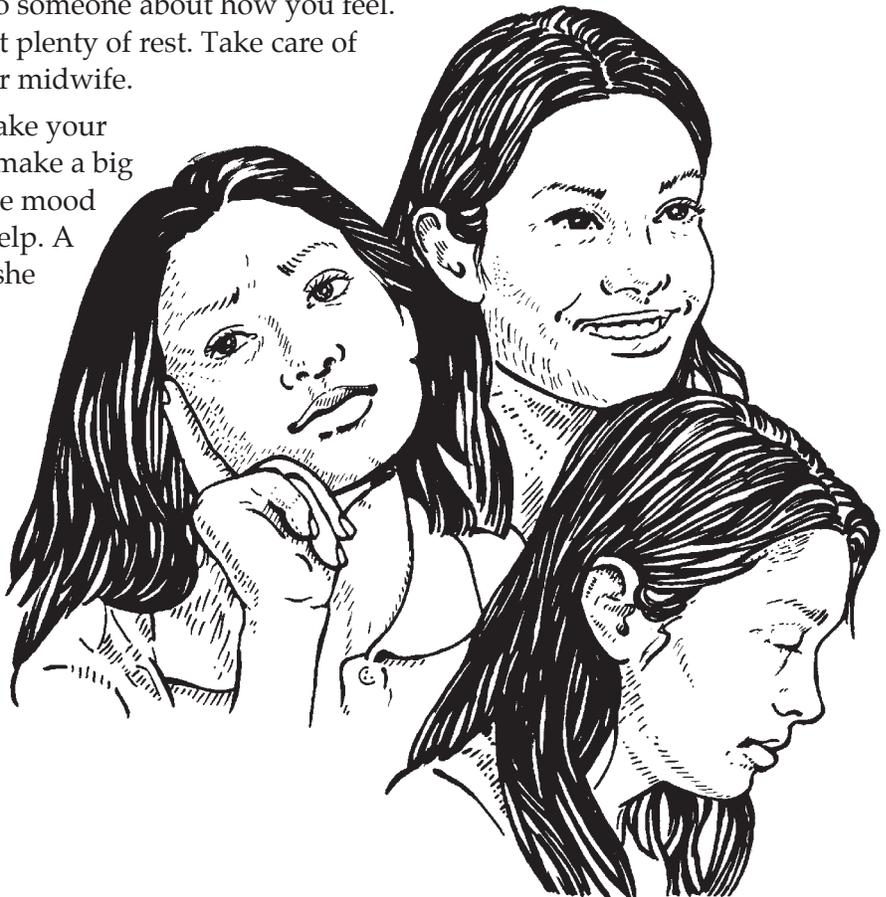
Dad—This, too, will pass. Try not to take your partner's mood swings personally or make a big deal out of them. She doesn't like these mood swings either! Ask her how you can help. A little extra help may be just the boost she needs.

“Everybody gives you advice and everyone's advice differs.”

—Carol, expectant mother

“I'm surprised at how tired I am!”

—Camille, expectant mother



Choosing a doctor or nurse for prenatal care

Checklist for choosing your doctor or nurse

- Does this person explain things clearly?
- Does he or she listen to you? Respect your concerns?
- Can this person help you learn about breastfeeding?
- Will you see this same person most visits?
- Is someone from this person's office available for you to call if you have a concern after hours or on weekends?
- Does your health insurance cover this provider?
- If you do not have insurance can you arrange to pay in monthly payments?

Also find out . . .

- What does your partner or friend think of this person?
- How does this person describe a usual labor and delivery?
- Who are the other members of the health care team who will be working with you?
- What hospital do they use?
- Who will be there when you deliver your baby?

Person's name, clinic, and date:

Make copies of this checklist to take with you on visits.

Prenatal care is the special medical care given to pregnant women, and this care can really help both you and your baby.

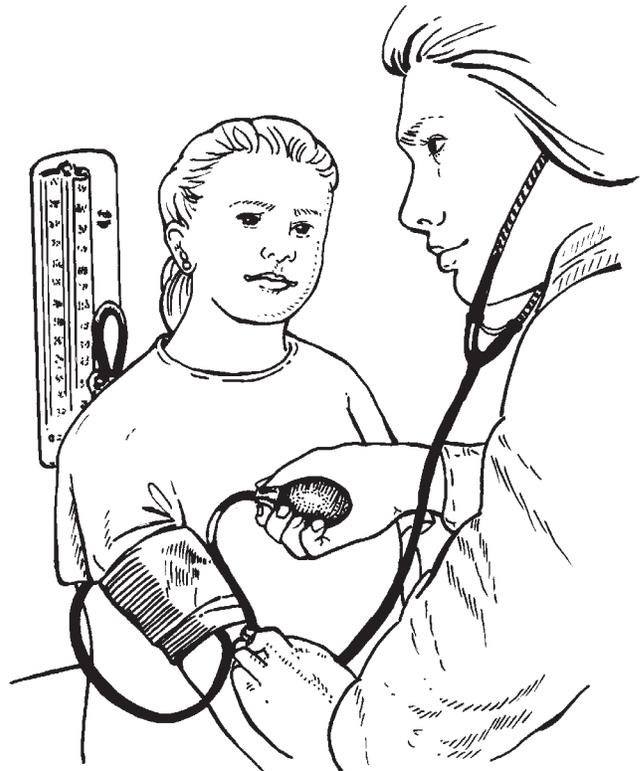
Prenatal care will help you have a healthy baby. In Wisconsin, prenatal care is free or low-cost for all women. For more information call BadgerCarePlus at (800) 362-3002 or visit www.dhs.wisconsin.gov/badgercareplus/pubs/p-10026.pdf. (See "Money matters" on page 11.)

You can choose one of the following kinds of doctors or nurses for your prenatal care:

- **An obstetrician/gynecologist** is a doctor with special training in pregnancy and childbirth.
- **A family physician** is a doctor with special training in pregnancy and childbirth, and care of newborns, children, families, and communities.
- **A certified nurse-midwife** is a nurse with special training in pregnancy, parenting, and newborn care.
- **A nurse practitioner** is a nurse with advanced training in issues related to women or families.

Visit with some doctors, nurses, or midwives using the **checklist** on this page. Ask each one about concerns you have, such as worries about childbirth, your baby, or breastfeeding. How does each person respond?

Bring your partner, a friend, or a family member with you when you visit, and ask what they think.



Your changing body

Feeling tired and sick to your stomach is common in the first and last stages of pregnancy. Morning sickness may make you vomit or feel sick to your stomach at any time of day. But if you are vomiting more than three times a day, call your doctor or nurse.

Here are some things you can do to feel better.

For tiredness, take a nap when you can; go to bed early. You are growing a baby—you deserve a break!

For morning sickness try to . . .

- Eat something before you get out of bed in the morning. For some people, saltine crackers and lemon-lime soda are helpful.
- Eat small meals or snacks every two to three hours.
- Eat plain foods like crackers and toast. Avoid fatty foods and foods with strong smells. Try foods with different flavors.
- Drink lots of healthy liquids such as water or low-fat milk.

Remember to check with your doctor, nurse, or midwife before you use any medicines or herbs to treat morning sickness or tiredness.

Early warning signs of problems

- Vaginal bleeding
- Severe headache
- Severe vomiting
- High fever
- Abdominal pains or cramping

Call your doctor, nurse, or midwife right away if you experience any of these warning signs. Catching problems early increases your chances of having a healthy baby. Vaginal bleeding and one-sided abdominal pain may be signs of a pregnancy in your fallopian tube. This can be life threatening. Seek help immediately.

If you have any questions or concerns, **call your doctor, nurse or midwife!**

Constipation and heartburn

Constipation and heartburn, which are also common during pregnancy, can take away your appetite. If either of these becomes a problem for you, there are several things you can try.

For constipation:

- Eat more foods that are high in fiber (fruits, whole grain cereals, and vegetables).
- Drink more water.
- Be more active.

For heartburn:

- Avoid spicy foods.
- Eat small meals throughout the day, rather than three large ones.
- Sit upright for at least 30 minutes after eating.

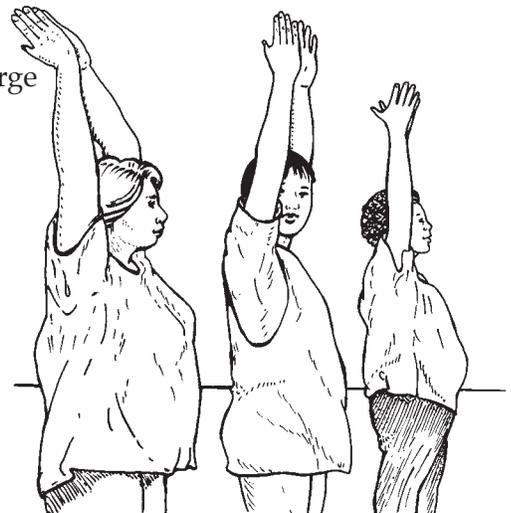
Staying active

Most pregnant women should get 30 or more minutes of moderate physical activity daily. Avoid activities with a high risk of falling or hitting your stomach. Consult your health care provider for specific advice, especially if you have a medical condition like diabetes or arthritis that could be affected by your exercise choice.

Staying active during pregnancy can ease your aches and pains and help you...

- Feel good about your growing body.
- Have a brighter mood.
- Have more energy.
- Improve your balance.
- Sleep better.
- Have a shorter labor.

You may enjoy a daily walk. Or take an exercise class for pregnant women—this is a fun way to meet other pregnant women. Ask your doctor, nurse, midwife, or tribal clinic where such classes are available. Or call your local health club, gym, YWCA, or YMCA.



Iron and folic acid **Eating for two**

Iron

During pregnancy you need more iron in your diet to make blood. Without enough iron, you may get tired or sick easily.

Daily, try to get iron from...

- **Whole-grain, enriched, or fortified breads or cereals.** Check the label to see if these have iron added.
- **Cooked dry beans or lentils.**
- **Broccoli and kale**—these are good sources of iron (spinach and Swiss chard are not).
- **Beef, pork, chicken, turkey, or fish.** Red meat has the most iron. Be sure the fish you eat does not have high levels of mercury or PCBs (see page 13).

Folic acid (folate)

Pregnant women have a special need for folic acid. Folic acid helps reduce the chances of birth defects that damage the baby’s brain and spinal cord (neural tube defects such as *spina bifida*).

If you are not already taking a vitamin with folic acid, start now. The most important time is before pregnancy and during the first two months of pregnancy, but take it throughout your pregnancy. Pregnant women need 600 micrograms of folic acid each day. You can get this by taking supplements or eating foods that are fortified with folic acid.

Folic acid is not just for pregnant women. All women who are sexually active should eat a diet high in folic acid. It is important to take 400 micrograms per day from fortified foods or supplements.

During your pregnancy it is especially important to eat healthy foods. Now you are feeding yourself AND your growing baby.

Normal weight gain in pregnancy

If your pre-pregnancy weight is normal, you should gain 25–35 pounds during pregnancy. If you start pregnancy underweight, you should gain 28–40 pounds. If you start pregnancy overweight, you should gain 15–25 pounds. Most weight gain occurs at the end of pregnancy. You should not diet to lose weight while you are pregnant.

Every day, try to eat a balanced diet; the table below is a good example.

Here are healthy eating ideas to maintain your energy level during the day:

- Blend fruit and milk (or yogurt) for a smoothie.
- Take a peanut butter sandwich to work or school.
- Eat a banana on your way home.
- Snack on fruit and cheese at bedtime.
- Drink plenty of water, low-fat milk, and other healthy liquids.

Food group	Daily amount*		Examples of food group choices
	Early pregnancy	Late pregnancy	
Milk	3 cups	3 cups	1 cup low-fat or fat-free milk 8 ounces low-fat or fat-free yogurt 1½ ounces cheese
Meat and beans	5½ ounces	6½ ounces	1 ounce of lean meat, fish, or poultry ¼ cup cooked dry beans ¼ cup tofu 1 egg- ½ ounce nuts 1 tablespoon peanut butter
Fruits	2 cups	2 cups	1 cup raw, canned, or frozen fruits (avoid added sugar) 1 cup juice (limit juice to ½ cup) ½ cup dried fruit
Vegetables	2½ cups	3 cups	1 cup cooked or raw vegetables 1 cup vegetable juice 2 cups green leafy vegetables (spinach, collard greens, kale, etc.)
Grains (Make half your grains whole grains)	6 ounces	8 ounces	Each of the following counts as 1 ounce: 1 slice of bread ½ cup cooked rice ½ cup cooked pasta ½ cup cooked cereal 1 cup ready-to-eat cereal

*These amounts are for a 2,000 calorie diet. Your own calorie needs may be more or less, depending on your age and activity level. Check with your health care provider or use the online calorie estimator at www.MyPyramid.gov. Click on MyPyramid for Moms to create your personalized nutritional plan.

Money matters

Help with medical care

If money is tight, you may be able to get free or low-cost prenatal care. You might also get help with child care and transportation to your doctor's office or clinic. To find out, contact your tribal or public health department and health insurance provider. In Wisconsin, prenatal care is free or low-cost for all women. For more information call BadgerCarePlus toll-free at (800) 362-3002 or visit www.dhs.wisconsin.gov/badgercareplus/pubs/p-10026.pdf.

Help with healthy eating

WIC is a government program called the *Special Supplemental Nutrition Program for Women, Infants, and Children*. WIC helps women eat better, receive early prenatal care, and have healthier babies.

WIC can help you learn more about . . .

- How to use WIC foods for better health.
- Healthy eating during pregnancy and breastfeeding, and tips for feeding your child.
- Breastfeeding.
- Health care and immunizations.

WIC provides checks to buy foods that have the vitamins and minerals to help keep you and your children healthy and strong. These foods include (among others) cereal, whole wheat bread, milk, and eggs. You do not need to be on public assistance to get WIC help. Half of all pregnant women qualify for WIC. Many working families qualify.

You may qualify for WIC if you meet WIC income guidelines, and if one of the following is true:

- You are pregnant or breastfeeding.
- You have recently given birth.
- You have a child younger than 5 years old.
- You and your children have a health or nutrition need.

For more information, contact your tribal or public health department, or contact your WIC—Women, Infants, and Children—office through the number in the government pages of your phone book, or online at www.dhs.wisconsin.gov/wic/. Call today to find out if WIC benefits are available to you!



Print resources

Denise and Alan Fields's *Baby Bargains* (2009) offers advice on what to buy and what not to buy.

Kathleen Huggins's *Nursing Mother's Companion* (2010) is a great breastfeeding resource.

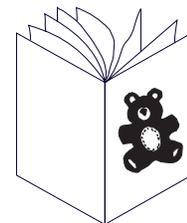
Arlene Eisenberg's *What to Expect When You Are Expecting* (also available in Spanish) covers various topics relating to early pregnancy (2008).

Penelope Leach's *Your Baby and Child: From Birth to Age Five* (also available in Spanish) covers health and child development from the start of life (2010).

La Leche League International's (www.lalecheleague.org) *Womanly Art of Breastfeeding* (2010) presents friendly, easy-to-read, factual information (also available in Spanish).

Mayo Clinic Guide to a Healthy Pregnancy (2004) provides information on pregnancy, childbirth, and your newborn.

American Academy of Pediatrics, *Caring for Your Baby and Young Child: Birth to Age 5* (2009).



Safe water

Is your drinking water safe? Lead, bacteria, and nitrates in water can harm you and your growing baby.

Safe water tips

Every morning run your water at least 90 seconds before you drink any. This helps flush water that has collected metals while standing in your pipes. Do this for every faucet you use for drinking or cooking.

Do not use hot water from the tap to cook, drink, or mix baby formula. Hot water dissolves more lead than cold water does. (See “Prevent lead poisoning” on page 13.)

If you have a private well contact your local health department about testing its water, or have a certified drinking water lab test your water now for nitrates and once a year for bacteria.

If you live in a mobile home park, ask to see the water quality report. This should be from a certified lab. If it isn’t, have your water tested by a certified drinking water lab.

For more information on safe water contact your public or tribal health department or university extension office, or call the **Safe Drinking Water Hotline** toll-free at (800) 426-4791 (Spanish help available), or go to www.epa.gov/safewater.

Safe eating for you and your baby

Pregnant women need to be extra careful about lots of things—even food. Why? Some foods may contain bacteria, viruses, or chemicals that can hurt you and your baby.

When you are pregnant, you can get sick more easily from the food you eat. Sickness you get from food can hurt your baby.

Tips for safe eating

Wash, wash, wash. Always wash your hands with soap and water before cooking or eating. Clean all utensils, dishes, and cooking surfaces with soap and hot water. Be sure to wash knives, cutting boards, and plates that you used for raw meats before you use them for cooked meat or other foods.

Wash and rinse fresh fruits and vegetables under running water. Scrub hard vegetables like potatoes with a clean brush.

Choose pasteurized milk and juices. Milk and juice you buy in the store is pasteurized. Some fresh apple cider and fruit juices are not pasteurized.

Read the labels carefully! Milk and juice that are not pasteurized can contain harmful bacteria such as *Salmonella* and *E. coli*.

Choose cheeses carefully. Any cheese you eat should be made from pasteurized milk. You can tell if the cheese was made from pasteurized milk by looking on the label. Cheeses that you can slice or shred are safe cheeses.

Here is a list of some safe cheeses:

- Cheddar
- Gouda
- Mozzarella
- Swiss
- Commercial cream cheese and cottage cheese.

Cheese that is soft or mold-ripened can contain bacteria (*Listeria*) that can make you sick and hurt your baby.

Avoid these cheeses:

- Feta
- Mexican-style cheeses like queso blanco and queso fresco
- Brie and Camembert
- Roquefort and other blue cheeses

Cook eggs well. Eggs must be fully cooked. This means that the whites are firm and the yolks are not runny. Raw or undercooked eggs may have bacteria (*Salmonella*) that can give you food poisoning. Skip foods made at home with raw eggs, like cookie dough, mayonnaise, salad dressings, sauces, eggnog, and uncooked puddings or mousses.

Cook meat fully. Beef, chicken, turkey, pork—and even hot dogs and lunchmeats from a deli or sandwich shop—must be fully cooked. Rare meat, meat juices, lunchmeats, and hot dogs can contain harmful bacteria (*Listeria*) that can make you and your baby extremely sick.

Fully cook all meats and serve on a clean plate.

Take care with fish and shellfish.

They may contain high levels of mercury and PCBs (polychlorinated biphenyls), two toxins that can harm your growing baby. Limit your intake to six ounces of cooked fish and shellfish per week. While you are pregnant or breastfeeding **never** eat albacore tuna, king mackerel, red snapper, shark, swordfish, or tilefish.

Before eating fish from local waterways, check your fish advisory bulletin. The fish advisory tells you what types and sizes of fish in your area are safe for pregnant or breastfeeding women and young children. You can get a copy from your area natural resources agency, or with a fishing license, or from your public or tribal health department.

Eating “safe” fish is good for your developing baby. Research shows that eating fish during pregnancy will benefit the unborn child’s communication skills, social skills, and IQ.

For more information on food safety, contact your county or area university extension office. You can learn more from these sources:

- www.fda.gov/Food/FoodSafety/Product-SpecificInformation/Seafood/FoodbornePathogensContaminants/Methylmercury/ucm115662.htm
- www.dhs.wisconsin.gov/eh/Fish/index.htm
- **USDA Meat and Poultry Hotline**
(800) 535-4555
English and Spanish
- **FDA Food Safety Information Hotline**
(888) 723-3366
- **Partnership for Food Safety Education**
www.fightbac.org

Prevent lead poisoning

Lead is a serious hazard! This highly toxic metal can damage the brain of your growing baby or young child. Most lead poisoning comes from the dust created by lead-based paint that is peeling or flaking. Protect yourself and your baby from exposure to lead.

Lead hazards come from...

- Old paint or varnish on cribs and other furniture, windowsills, walls, or trim. When surfaces rub against each other, they create dust that contains lead.
- Some paints for signs, boats, and outdoor use.
- Food stored in old or imported dishes and pitchers.
- Drinking water from old pipes and water mains.
- Some home remedies from other countries.
- Some brands of sidewalk chalk.
- Some materials used in hobbies like making stained glass.

Prevention tips

Keep babies and young children away from any areas with peeling or flaking paint. Wash their hands frequently. Clean up areas of damaged paint with wet paper towels. Wash window wells regularly in homes built before 1978. Wash all produce well.

For information on protecting your family from lead in your home or a caregiver’s home, contact your public or tribal health department. Or call the National Lead Information Center at (800) 424-5323 (English and Spanish).



Wisconsin resources

Wisconsin Maternal & Child Health Hotline

Provides information and links to services and resources for families before, during, and after pregnancy, and for children with special health care needs. (800) 722-2295 (24 hours/day, 7 days/week)

Public Health Information and Referral Services for Women, Children, and Families

Provides Resource House, a searchable database of more than 3,000 programs and services for women, children, and families. www.mch-hotlines.org/

Wisconsin Tobacco Quit Line

Presents free, practical guidance to help stop smoking. (800) 784-8669, (877) 266-3863 (Spanish) www.ctri.wisc.edu/quitline2.html

Wisconsin Women's Health Foundation First Breath Program

Gives information and support to help pregnant smokers quit smoking. (800) 448-5148 www.wwhf.org/pg_firstbreath_2.asp

Child Care Information Center

Offers free materials for parents on how to select and pay for child care. Available in English and Spanish. (800) 362-7353 dpi.wi.gov/ccic/mat_parents.html

Supporting Families Together Association Child Care Resource & Referral Agencies

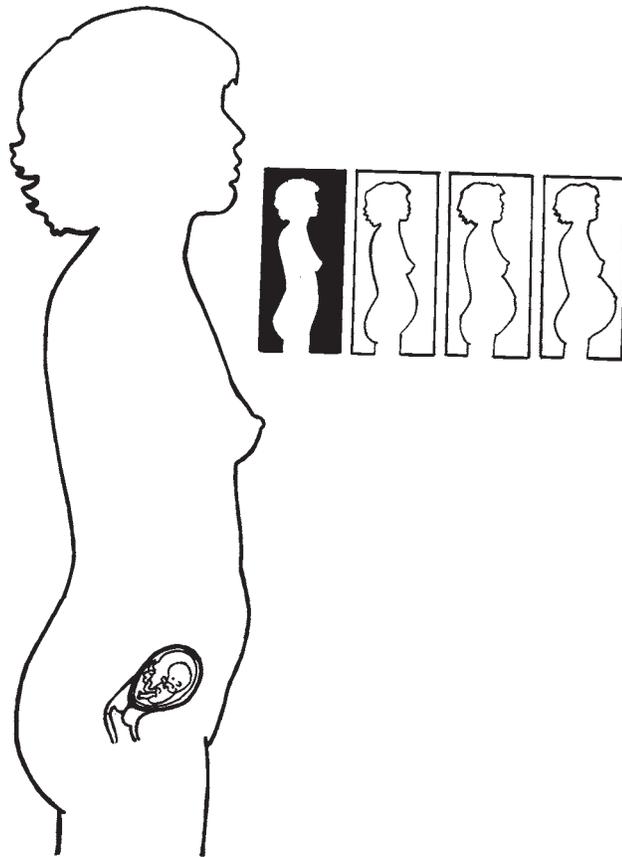
Helps parents find child care and assess child care settings. (888) 713-4537 www.supportingfamilies.together.org/CCR_R.html

The Wisconsin Department of Health Services

Provides information on popular programs and websites. www.dhs.wisconsin.gov/

Development at 10 to 20 weeks

What does baby look like now?	What is baby doing now?	How is Mom feeling?	What can partners do?
Your baby is beginning to look like a baby. Hair, fingernails, and even little toenails are forming.	At 4 months, your baby can kick, suck a thumb, squint, and frown.	Morning sickness should be ending soon, and Mom may feel hungrier. She may begin to feel more energetic than she did the first trimester. Pregnancy may not be showing, but Mom's clothes will be getting tight. She may start wearing maternity clothes.	You may be able to hear the <i>woosh, woosh, woosh</i> of your baby's heartbeat. Ask the doctor or nurse to let you listen.



Online resources

American Academy of Pediatrics

Offers advice on child health and development, immunizations, safety, and books. www.aap.org

Consumer Products Safety Commission

Offers safety alerts and recalls. Spanish help is available weekdays. (800) 638-2772. www.cpsc.gov

La Leche League

Presents breastfeeding resources. Look here to find local mother-to-mother support, good books in English and Spanish, and help in many languages. www.lalecheleague.org

March of Dimes

Provides information on pregnancy health and on preventing birth defects. (914) 997-4488 www.marchofdimes.com/ www.nacersano.org (Spanish)

National Lead Information Center

Offers resources to help you manage lead in your home. (800) 424-5323 www.epa.gov/opptintr/lead/pubs/nlic.htm

Prevent Child Abuse America

Presents local parent support groups and trusted parenting resources www.preventchildabuse.org

North American Quitline Consortium

Links you to experts who can help you stop smoking. www.naquitline.org

WIC—Women, Infants, and Children

Provides nutritious food, advice on healthy eating, and referrals to health care for women, infants, and children up to age five. www.fns.usda.gov/wic or call directory assistance for the phone number of a local office.

MyPyramid for Moms

Helps you plan healthy meals for you and your baby. www.choosemyplate.gov/mypyramidmoms/index.html

text4baby.org

This free mobile text messaging service provides information for pregnant women and new moms.

Centers for Disease Control and Prevention

Provides information on preventing problems during pregnancy. www.cdc.gov/ncbddd/pregnancy_gateway/during.html

Mayo Clinic website

Provides information for a healthy pregnancy and answers many questions you may have. www.mayoclinic.com/health/pregnancy-week-by-week/MY00331

Most libraries have a computer you can use.

Credits

Authors: Marguerite (Peg) Barratt, dean and professor, Columbian School of Arts & Sciences, George Washington University, Washington, D.C.; Kari Morgan, assistant professor of child & family studies, University of Wyoming; David A. Riley, professor of human development and family studies, University of Wisconsin-Madison and UW-Extension, and Carol Ostergren, child development specialist, University of Wisconsin-Extension. The authors thank an anonymous donor to the Child Abuse Prevention Fund of Milwaukee, whose support contributed to the production of this publication. Cooperative Extension publications are subject to peer review.

Advisory committee: Michelle Bailey, public health nurse, Burnett County Department of Health; Bev Baker, family living educator, Racine County UW-Extension; Laura Berger, public health nurse, Madison Department of Public Health; Colleen Cantlon, Wisconsin Bureau of Family and Community Health; Michael Collins, assistant professor, Department of Consumer Science, University of Wisconsin-Madison; Mari E. Douma, associate professor, Department of Pediatrics, Michigan State University; Lee Dresang, associate professor of family medicine, University of Wisconsin-Madison; Sara E. Gable, Department of Human Development and Family Studies, University of Missouri; Kate Gillespie, maternal/perinatal nurse consultant, Wisconsin Division of Public Health; Mary Gothard, Joseph Schirmer, Reghan Walsh and Anthony Zech, Wisconsin Department of Health Services; Patti Herman, family living educator, Columbia County UW-Extension; Michelle Johnson, associate outreach specialist, Nutritional Science Department, UW-Madison/Extension; Kelli Jones, public health nurse consultant, Southeast Regional Department of Health and Family Services; Dori Schattel, health writer, Madison, Wis.; Rachel Schiffman, associate dean and professor, College of Nursing, UW-Milwaukee; Michelle Snyderman, pediatrician, All Saints HealthCare, Racine, Wis.; Deborah Strong, executive director, Michigan Children's Trust Fund.

Produced under joint agreement with Michigan State University by Cooperative Extension Publishing, University of Wisconsin-Extension.

Copyright © 2011 by the Board of Trustees of Michigan State University and the Board of Regents of the University of Wisconsin System on behalf of the University of Wisconsin-Extension division of Cooperative Extension. All rights reserved. For copyright inquiries, contact Manager, Cooperative Extension Publishing, 432 N. Lake St., Rm. 231, Madison, WI 53706; pubs@uwex.edu.

Illustrations: Nancy Lynch.

To order, call toll-free (877) 947-7827 (WIS-PUBS) or visit our website, learningstore.uwex.edu.

Preparing to Parent—Early pregnancy



**Look for three more issues of
*Preparing to Parent:***

Mid Pregnancy—Weeks 20 to 30

Late Pregnancy—Weeks 30 to 40

Preparing to Bring Baby Home

Copyright © 2011 by the Board of Trustees of Michigan State University and the Board of Regents of the University of Wisconsin System on behalf of the University of Wisconsin-Extension division of Cooperative Extension. All rights reserved. For copyright inquiries, contact Manager, Cooperative Extension Publishing, 432 N. Lake St., Rm. 231, Madison, WI 53706; pubs@uwex.edu.

University of Wisconsin-Extension, Cooperative Extension, in cooperation with the U.S. Department of Agriculture and Wisconsin counties, publishes this information to further the purpose of the May 8 and June 30, 1914, Acts of Congress. An EEO/AA employer, the University of Wisconsin-Extension, Cooperative Extension provides equal opportunities in employment and programming, including Title IX and ADA requirements. If you need this information in an alternative format, contact Equal Opportunity and Diversity Programs, University of Wisconsin-Extension, 432 N. Lake St., Rm. 501, Madison, WI 53706, diversity@uwex.edu, phone: (608) 262-0277, fax: (608) 262-8404, TTY: 711 Wisconsin Relay.

This publication is available in English or Spanish (Preparación para ser padres, B3789S) from your county UW-Extension office (www.uwex.edu/ces/cty) or from Cooperative Extension Publishing. To order, call toll-free (877) 947-7827 (WIS-PUBS) or visit our website, learningstore.uwex.edu.

**Preparing to Parent: Early Pregnancy—
Weeks 10 to 20 (B3789)**

R-10-2011

^{UW}Extension
Cooperative Extension