AMBULATORY OBSTETRIC CORE CARE PATHWAY

The ambulatory obstetric core care pathway is designed for use in the care of all obstetric patients. The pathway provides a systematic and evidence-based approach designed to address wellness, education, and key determinants to improve maternal and infant outcomes.

The pathway is divided into three distinct modules:
Module 1 is designed to be completed by a Medical Assistant or Licensed Practical Nurse.
Module 2 is designed to be completed by an Advanced Practice Nurse, Physician Assistant, or physician.
Module 3 is designed to be completed by a Nurse Case Manager or Registered Nurse.

Pathway instructions for a patient whose initial visit is beyond 14 weeks gestation or has missed appointments: The current visit for each module should be completed. Follow the instructions listed at the top of each visit for those missed components that need to be covered. If stated, the Case Manager or Registered Nurse will schedule the patient for a separate follow-up visit with a Case Manager or Registered Nurse who will complete all remaining components of missed visits for Modules 1 and 3.

Core Pathway notes:
- The pathway component completion will be documented in the EHR.
- Primary Discussion Points are points to be discussed with the patient by the designated member of the health care team.
- Action Items are the activities to be performed at the designated visit to accompany each core component. This includes literature for distribution to the patient.
- Smart Phrases: all Primary Discussion Points have a corresponding Smart Phrase associated with them for easier data input in EHR. All Smart Phrases require entry of:
  - YES: the use of YES documents that the core component was completed at the designated visit.
  - NO: the use of No documents that the core component was not completed at the designated visit.
  - NOT APPLICABLE: the use of NOT APPLICABLE documents that the core component was not applicable due to late prenatal care or missed visits.

  These standardized answers will allow for data collection. Do not free text within the (parenthesis) to allow for better data collection. Additional notes regarding the component may be written outside the parenthesis.
- Management of identified medical and social problems is addressed in separate specialized pathways (ie Tobacco Cessation).
- References are listed at the end of this document and referenced as a superscript number in the pathway.
- Patient literature source information and estimated cost are listed at the end of this document and referenced as a superscript capital letter in the pathway.

The pathway addresses the following core components:

1. Breastfeeding
2. Case Management
3. Contraception
4. Depression screening
5. Education programs
   a. Baby care basics
   b. Breastfeeding
   c. Childbirth
   d. Infant CPR and safety
   e. Text4Baby
6. Fetal movement
7. Health System Contacts
8. Home Visitation Programs
9. Immunization
   a. Tdap
   b. Influenza
10. Nutrition/Weight gain
11. Patient dental home
12. Patient medical home
13. Pediatric medical home
14. Pregnancy spacing
15. Pregnancy support groups
16. Preterm labor
17. Risk Stratification
18. Secondhand Smoke
19. Sexually transmitted infections (STI)
20. Social assistance
   a. Women, Infants and Children (WIC)
   b. Medical coverage
21. Sudden Unexpected Infant Death (SUID)
22. Tobacco Assessment: Five A’s Ask
# 1st VISIT - 0-13 Weeks

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<tr>
<th>Module 1</th>
<th>Module 2</th>
<th>Module 3</th>
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<tbody>
<tr>
<td><strong>1) Health System Contacts #1</strong>&lt;br&gt;Action Item:&lt;br&gt;➔ Distribute health center/UC Health welcome folder</td>
<td><strong>1) Immunization #1</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Discuss the risks of influenza during pregnancy and benefits of immunization</td>
<td><strong>1) Welcome packet</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Review the contents of the welcome packet and confirm that the patient knows how to contact the provider staff and access the hospital</td>
</tr>
<tr>
<td><strong>2) Anticipated course of prenatal care</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Discuss the approximate number and spacing of prenatal visits&lt;br&gt;➔ Discuss need for initial and subsequent laboratory evaluation; ultrasound between 18-20 weeks</td>
<td><strong>2) Nutrition #1</strong>&lt;br&gt;<em>Primary Discussion Point:</em>&lt;br&gt;➔ Discuss recommended weight gain for the patient during pregnancy based on patient’s pre-pregnancy BMI</td>
<td><strong>2) Home Visitation Programs #1</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Discuss the components of the Every Child Succeeds program and the Pregnancy Pathways program. Assess which program is appropriate for the patient.&lt;br&gt;<strong>Action Item:</strong>&lt;br&gt;➔ Refer patient to Every Child Succeeds or to Pregnancy Pathways program</td>
</tr>
<tr>
<td><strong>3) Patient Dental Home #1</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Determine status of patient’s dental home and when the last maintenance appointment took place&lt;br&gt;➔ Discuss the importance of twice yearly dental appointments to preserve health and well-being of the mouth, gums, and teeth</td>
<td><strong>3) Breastfeeding #1</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Review the patient’s thoughts about breastfeeding&lt;br&gt;➔ Discuss benefits to mother and infant&lt;br&gt;➔ Recommend breastfeeding and breastfeeding education classes</td>
<td><strong>3) Nutrition #2</strong>&lt;br&gt;<em>Primary Discussion Points:</em>&lt;br&gt;➔ Discuss patient’s current BMI&lt;br&gt;➔ Discuss the risks associated with excess weight gain during pregnancy</td>
</tr>
</tbody>
</table>
| **4) Social Assistance #1: Medical coverage**<br>Action Item:<br>➔ Assess whether the patient has medical coverage and determine eligibility for Medicaid managed care or UCMC financial assistance program<br>➔ If applicable: explain, distribute, and assist with completion of UCMC financial application<br>➔ If applicable: complete Proof of Pregnancy Form for Medicaid managed care and refer to social worker to assist with obtaining medical coverage | **4) Risk Stratification #1**<br>**Action Item:**<br>➔ Complete Risk Stratification form and submit to Case Manager. Case Manager evaluates score and determines eligibility for case management program<br>➔ If patient has had prior preterm birth, refer to Children’s Hospital Familial Preterm Birth Clinic | **4) SUID #1**<br>*Primary Discussion Points:*<br>➔ Assess patient’s current knowledge of SUID<br>➔ Explain SUID and infant mortality in Hamilton County<br>**Action Item:**<br>➔ Distribute “Safe Sleep for your Baby: Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and other Sleep-Related causes of Infant Death.”<br>➔ OR<br>**5) Social Assistance #2: WIC**<br>*Primary Discussion Point:*<br>➔ Discuss WIC<br>**Action Item:**<br>➔ Refer patient to WIC program and assist with...
5) Tobacco Assessment: Five A’s Ask
   Action Item:
   ➔ Determine status of patient’s tobacco use by asking the patient to choose the statement below that best describes her smoking status and enter into problem list.
   A. I have NEVER smoked or have smoked less than 100 cigarettes in my lifetime.
   B. I stopped smoking BEFORE I found out I was pregnant and am not smoking now.
   C. I stopped smoking AFTER I found out I was pregnant, and I am not smoking now.
   D. I smoke some now, but have cut down since I found out I am pregnant.
   E. I smoke about the same amount now as I did before I found out I was pregnant.

If answer A – patient will not continue to Tobacco Cessation Pathway
If answer B or C – Patient will continue with Module two and ask if the patient is interested in continuing with the Tobacco Cessation Pathway to ensure a greater chance of remaining quit
If answer D or E – Patient continues with Tobacco Cessation Pathway

6) Pregnancy Support Groups
   Primary Discussion Point:
   ➔ Discuss local support groups
   Action item:
   ➔ Refer patient to support group

7) Immunization # 2 2-8
   Action Item:
   ➔ Administer influenza vaccine per standing order. If outside influenza season, schedule patient for vaccine at earliest visit when vaccine is recommended

8) Secondhand Smoke
   Action Item:
   ➔ Discuss effects of secondhand smoke on developing fetus & distribute literature on secondhand smoke
### 2nd VISIT - 14-18 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and 1st Visit. Module 2 covers this visit.

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<tr>
<th>Module 1</th>
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</table>
| 1) **Patient Dental Home #2**  
*Action Item:*  
- Confirm that dental home has been established and the patient has a dental appointment  
- If applicable: If patient does not have a dental home, review the list of available dental providers and assist the patient with choosing a provider and scheduling a dental appointment.  
2) **Preterm labor #1**  
*Action Item:*  
- Distribute “Signs of Preterm Labor”  
3) **Social Assistance #3: WIC**  
*Primary Discussion Points:*  
- Confirm patient is enrolled in WIC and able to attend scheduled appointment and use vouchers.  
*Action Item:*  
- If applicable: Refer patient to WIC program and assist with location preference and transportation  
4) **Education Programs #1: Text4baby**  
*Primary Discussion Points:*  
- Text4baby is a free program targeted to pregnant women and mothers of infants up to 1 year. Registered users receive three free texts per week.  
- Text4baby can be accessed through its website and followed on Twitter and Facebook.  
*Action Item:*  
- Assist patient with enrolling in Text4baby using patient’s mobile phone (Text BABY to 511411; Spanish: Text BABE to 514111)  
1) **Pregnancy Spacing #1**<sup>10, 19, 20</sup>  
*Primary Discussion Point:*  
- Discuss importance of interpregnancy interval in reducing preterm labor  
2) **Preterm labor #2**  
*Primary Discussion Points:*  
- Discuss the definition of preterm labor  
- Discuss the goal of partnering with patient to achieve a gestation of 39 weeks  
- Discuss signs and symptoms of preterm labor  
3) **Contraception #1**<sup>21</sup>  
*Primary Discussion Point:*  
- Discuss reversible long-acting contraception  
*Action Item*  
- Ages 13-18:  
  - Distribute “Pocket Protector: Guide to Birth Control Options”<sup>1</sup> or “Birth Control-Especially for Teens”<sup>p</sup>  
- Ages 19-29:  
  - Distribute “Bedsider Birth Control Top Picks 2012”<sup>e</sup> or “Birth Control Method Fact Sheet”<sup>M</sup>  
- Ages 30-50:  
  - Distribute “Birth Control Method Fact Sheet”<sup>M</sup>  
1) **SUID #2**<sup>12, 13, 15, 16</sup>  
*Primary Discussion Points:*  
- Discuss safe sleep environment  
- Discuss patient’s plan for purchase and set up of crib or approved safe sleep environment  
*Action Item:*  
- Distribute “What does a safe sleep environment look like? Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death.”<sup>D</sup>  
2) **Nutrition #3**<sup>9</sup>  
*Primary Discussion Points:*  
- Review patient’s weight gain since first visit  
- Discuss nutrition and exercise  
*Action Item:*  
- Distribute “Fit for Two”<sup>G</sup>  
3) **Breastfeeding #2**<sup>11, 22, 23</sup>  
*Primary Discussion Points:*  
- Discuss patient’s view regarding breastfeeding  
- Discuss benefits of breastfeeding for patient and infant including decrease in SUID  
- Discuss the Breastfeeding Peer Helper<sup>B8</sup> program, breastfeeding assistance, and breastfeeding classes associated with WIC<sup>CC</sup> or UC Health.  
*Action Item:*  
- Distribute “Lactation Services Breastfeeding Support Center for Women & Infants” (UC Health Brochure)<sup>W</sup> and WIC breastfeeding brochure<sup>CC</sup>  
- Enroll patient in WIC or UC Health breastfeeding class
### 3rd VISIT - 19-22 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and Initial visit. Nurse or Case Manager should schedule patient for follow up visit to cover missed modules. Module 2 covers this visit & Pregnancy Spacing #1.

<table>
<thead>
<tr>
<th>Module 1</th>
<th>Module 2</th>
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<tbody>
<tr>
<td><strong>1) Health System Contacts #2</strong></td>
<td><strong>1) SUID #3</strong></td>
<td><strong>1) Pediatric Medical Home #1</strong></td>
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<tr>
<td>Confirm that the patient knows how to contact</td>
<td>Primary Discussion Points:</td>
<td>Primary Discussion Points:</td>
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<td>the provider and knows the location of</td>
<td>- Assess patient’s knowledge of SUID</td>
<td>- Discuss patient’s plans for infant’s</td>
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<td>University of Cincinnati Medical Center</td>
<td>- Inform patient how to reduce the risk of SUID</td>
<td>pediatric home</td>
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<td><strong>2) Depression Screening#1</strong></td>
<td><strong>2) Depression Screening #2</strong></td>
<td><strong>2) Patient Medical Home #1</strong></td>
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<td>Action Item:</td>
<td>Primary Discussion Points:</td>
<td>Primary Discussion Point:</td>
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<tr>
<td>➔ Complete the Edinburgh Postnatal Depression</td>
<td>- Assess depression screening score</td>
<td>- Discuss importance of and meaning of a</td>
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<td>Scale (EPSD) or practice-approved depression</td>
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<td>medical home</td>
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<td>tool with patient</td>
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<td>Action Item:</td>
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<td></td>
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<td>➔ Document planned pediatric home</td>
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<td><strong>3) Preterm Labor #3</strong></td>
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<td>Primary Discussion Points:</td>
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<td>- Review the signs and symptoms of</td>
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<td>- Discuss the importance of antenatal</td>
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<td>steroids for patients with preterm labor</td>
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<td>- Discuss the importance of contacting the</td>
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<td>provider immediately with signs or symptoms</td>
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<td>of preterm labor</td>
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<td><strong>4) Education Programs #2</strong></td>
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<td>Primary Discussion Points:</td>
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4th VISIT - 23-27 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and Initial visit. Nurse or Case Manager should schedule patient for follow up visit to cover missed modules. Module 2 covers Pregnancy Spacing #1 & SUID #3.

<table>
<thead>
<tr>
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</table>
| **1) Fetal Movement #1**  
*Primary Discussion Points:*  
- Discuss the importance of fetal movement.  
- Instruct patient to call the health center or after-hours number if baby is not moving normally  
- Discuss how to monitor fetal movement  
- Discuss the importance and urgency of decreased fetal movement  
*Action Item:*  
⇒ Distribute “UC Health Maternal Fetal Medicine Fetal Kick Count Chart”¹ | **1) Nutrition #4  
*Primary Discussion Point:*  
- Discuss weight gain during gestation thus far and overall nutrition** | **1) Contraception #3  
*Primary Discussion Point:*  
- Discuss voluntary sterilization  
*Action Item:*  
⇒ Sign Medicaid Consent for Sterilization form if patient desires voluntary sterilization** |
| | **2) Contraception #2  
*Primary Discussion Point:*  
- Discuss voluntary sterilization** | **2) Sexually Transmitted Infections #1  
*Primary Discussion Point:*  
- Discuss Syphilis  
*Action Item:*  
⇒ Distribute Syphilis Fact Sheet Brochure ⁰** |

- Discuss value of pregnancy classes (to learn and discuss important topics)
- Review list of available classes at UC Health

*Action Item:*  
⇒ Assist patient with selecting classes to attend (any or all of the following):  
  a. Baby Care Basics  
  b. Breastfeeding  
  c. Childbirth  
  d. Infant CPR and Safety
### 5th VISIT- 28-32 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and Initial visit. Nurse or Case Manager should schedule patient for follow up visit to cover missed modules.

Module 2 covers Pregnancy Spacing #1 & SUID #3.

<table>
<thead>
<tr>
<th>Module 1</th>
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</table>
| 1) Breastfeeding #3 11, 22, 23  
**Primary Discussion Points:**  
- Discuss patient’s thoughts on breastfeeding  
- Discuss benefits for both patient and infant  
2) Health System Contacts #3  
**Primary Discussion Points:**  
- Review mechanism to reach a provider with problem or questions  
3) Fetal Movement #2  
**Primary Discussion Point**  
- Assess patient’s understanding of fetal movement/kick counts  
- Discuss how to monitor fetal movement  
4) Pregnancy Spacing #2 10, 19, 20  
**Primary Discussion Point:**  
- Discuss importance of interpregnancy interval in reducing preterm labor  
Action item:  
- Distribute pregnancy spacing flyer II  | 1) Contraception #4  
**Primary Discussion Point:**  
- Discuss all hormonal birth control options  
Action Item:  
- Ages 19-50  
- Distribute Bedsider.org card F  
2) Preterm Labor #4  
**Primary Discussion Points:**  
- Discuss signs and symptoms of preterm labor  
- Discuss importance of antenatal steroids for fetal lung development  
- Discuss patient’s thoughts on preterm labor  | 1) SUID #4 12, 13, 15, 16  
**Primary Discussion Points:**  
- Assess knowledge of SUID  
- Discuss need and mechanism for safe sleep education for FOB, family members, and other care providers  
- Follow up on plans to purchase and set up crib or approved safe sleep environment  
- Discuss pacifier use to decrease SUID  
2) Immunization #3 1, 8  
**Primary Discussion Point:**  
- Discuss the transmission of Pertussis and the benefits of maternal, paternal, and primary care provider immunization  
Action item:  
- Administer Tdap immunization per standing order |

### 6th VISIT- 33-35 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and Initial visit. Nurse or Case Manager should schedule patient for follow up visit to cover missed modules.

Module 2 covers Pregnancy Spacing #1 & SUID #3.

<table>
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</table>
| 1) Fetal Movement #3  
**Primary Discussion Point:**  
- Discuss the importance of fetal movement.  
Instruct patient to call the health center or after-hours number if baby is not moving normally  | 1) Nutrition #5  
**Primary Discussion Points:**  
- Review patient’s weight gain  
- Discuss current diet/exercise plan  
2) Pediatric Home #2 |
### 7th VISIT - 36-38 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and Initial visit. Nurse or Case Manager should schedule patient for follow up visit to cover missed modules.

Module 2 covers Pregnancy Spacing #1 & SUID #3.

<table>
<thead>
<tr>
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<th>Module 3</th>
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</thead>
</table>
| 1) Fetal Movement #4  
*Primary Discussion Point:*  
- Discuss the importance of fetal movement.  
- Instruct patient to call the health center or after-hours number if baby is not moving normally | 1) SUID #5  
*Primary Discussion Points:*  
- Assess patient’s knowledge of SUID  
- Discuss risk factors for SUID  
- Discuss with patient how she can protect infant from SUID  
*Action Item:*  
- Distribute “Safe to Sleep Door Hanger”® | 1) Breastfeeding #4  
*Primary Discussion Points:*  
- Discuss benefits of breastfeeding  
- Discuss the importance of skin to skin contact after birth and breastfeeding within the first hour |

### 8th VISIT - 39-41 Weeks

*If first visit for patient, Modules 1 & 3 cover this visit and Initial visit. Nurse or Case Manager should schedule patient for follow up visit to cover missed modules.

Module 2 covers this visit, Pregnancy Spacing #1, SUID #3, & SUID #5.

<table>
<thead>
<tr>
<th>Module 1</th>
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<th>Module 3</th>
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</table>
| 1) Fetal Movement #5  
*Primary Discussion Point:*  
- Discuss the importance of fetal movement.  
- Instruct patient to call the health center or after-hours number if baby is not moving normally | 1) Fetal Movement #6  
*Primary Discussion Point:*  
- Discuss the importance of fetal movement.  
- Instruct patient to call the health center or after-hours number if baby is not moving normally | 2) Contraception #5  
*Primary Discussion Point:*  
- Review patient’s plan for contraception |
# Postpartum Visit

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<thead>
<tr>
<th>Module 1</th>
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<th>Module 3</th>
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</table>
| **1) Breastfeeding #5**<sup>11, 22, 23</sup>  
*Primary Discussion Points:*  
- Discuss the importance of continued breastfeeding  
*Action Item:*  
  ➔ If applicable, refer to lactation consultant  
| **1) Contraception #6**  
*Primary Discussion Points:*  
- Discuss the current birth control method  
- Discuss locations to obtain birth control<sup>00</sup>  
*Action Item:*  
  ➔ Distribute CHD Body Shop flyer<sup>EE</sup>  
  ➔ “Birth Control-Especially for Teens”<sup>p</sup> or iPlan: “Tips from Teens for Teens about Life, Love, and Not Getting Pregnant”<sup>q</sup>  
  ➔ Ages 13-18  
  ➔ “Birth Control Method Fact Sheet”<sup>m</sup>  
  ➔ Ages 19-29  
  ➔ “Bedside.org postcard”<sup>f</sup>  
  ➔ Ages 30-50  
| **1) SUID #6**<sup>14, 15, 16</sup>  
*Primary Discussion Points:*  
- Assess knowledge of SUID  
- Verify that crib or approved safe sleep environment is set up in home  
*Action Item:*  
  ➔ If applicable: establish a plan to have crib/safe sleep environment in home<sup>t</sup>  
  ➔ NICHD Back to Sleep Campaign, “What Does a Safe Sleep Environment Look Like?” single sheet<sup>d</sup>  
| **2) Nutrition #6**<sup>9</sup>  
*Primary Discussion Point:*  
- Discuss importance of nutrition and hydration with breastfeeding and general health  
| **2) Pregnancy Spacing #3**<sup>10, 19, 20</sup>  
*Primary Discussion Points:*  
- Discuss importance of interpregnancy interval in reducing preterm labor  
| **2) Pediatric Home #2**  
*Primary Discussion Point:*  
- Confirm infant’s pediatric home  
*Action Item:*  
  ➔ If applicable: schedule appointment in pediatric home  
| **3) Depression Screening #3**  
*Action Item:*  
  ➔ Give patient the Edinburgh Postnatal Depression Scale (EPDS) or practice-approved depression screening tool<sup>2</sup>  
| **3) Depression Screening #4**  
*Action Item:*  
  ➔ Assess depression screening score  
| **3) Patient Medical Home #2**  
*Primary Discussion Point:*  
- Confirm patient’s medical home  
*Action Item:*  
  ➔ If applicable: schedule appointment in medical home  
| **4) Risk Stratification #2**  
*Action Item:*  
  ➔ If patient had a preterm birth, refer to Children’s Hospital Familial Preterm Birth Clinic  
| **4)**  
*Action Item:*  
  ➔ If patient had a preterm birth, refer to Children’s Hospital Familial Preterm Birth Clinic  

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<sup>1</sup> Ambulatory Obstetric Core Care Pathway

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LIST OF LITERATURE AND SOURCING INSTRUCTIONS

A  **Text 4Baby information card.** Packet of posters, tear sheets and referral cards that target African American, Caucasian, American Indian, and Hispanic audiences. National Health Mothers, Healthy Babies Coalition. Available for order at [http://graphtech.myprintdesk.net/DSF/Companies/text4baby/storefront.aspx?SITEGUID=09afe492-29a2-4b8e-a05e-bdf29836f5cd](http://graphtech.myprintdesk.net/DSF/Companies/text4baby/storefront.aspx?SITEGUID=09afe492-29a2-4b8e-a05e-bdf29836f5cd); Or download and print tear sheets and referral cards from [http://www.text4baby.org/index.php/partner-resources/7-partner-resources/103](http://www.text4baby.org/index.php/partner-resources/7-partner-resources/103) **Free.**

B  **Safe Sleep for Your Baby: Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death.** This 12-page brochure explains ways parents and caregivers can reduce the risks of SIDS and other sleep-related causes of infant death and provide a safe sleep environment for infants. Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, DHHS. (2012). Order online at [https://www.nichd.nih.gov/publications/Pages/pubs_details.aspx?pubs_id=5807](https://www.nichd.nih.gov/publications/Pages/pubs_details.aspx?pubs_id=5807); Free.


D  **What does a safe sleep environment look like? Reduce the Risk of Sudden Infant Death Syndrome (SIDS) and Other Sleep-Related Causes of Infant Death.** Single sheet. This handout shows a safe sleep environment for infants and explains ways parents and caregivers can reduce the risks of SIDS and other sleep-related causes of infant death. Eunice Kennedy Shriver National Institute of Child Health and Human Development, NIH, DHHS. (2012). Order online at [https://www.nichd.nih.gov/publications/Pages/pubs_details.aspx?pubs_id=5805](https://www.nichd.nih.gov/publications/Pages/pubs_details.aspx?pubs_id=5805) for General Outreach; Set of 25 sheets Free.


H  **Lactation Services Breastfeeding Support Center for Women & Infants.** Tri-fold pamphlet. University Hospital. Contact Meg James at Meg.James@uchealth.com. [Free](#)

I  **Fetal Kick Count Chart.** Single sheet. UC Health Maternal-Fetal Medicine Antepartum Fetal Surveillance protocol dated 11/2011. [Free](#)

J  **Babies Sleep Safest on Their Backs: A Resource Kit to Reduce the Risk for SIDS in African American Communities (Includes Training Guides, 10 Brochures, 10 Doorhangers, 5 Magnets).** This kit provides background information, resources, and materials for conducting community outreach on ways parents and caregivers can reduce the risks of SIDS and provide a safe sleep environment for infants. Order online at [https://www.nichd.nih.gov/publications/Pages/pubs_details.aspx?pubs_id=5739](https://www.nichd.nih.gov/publications/Pages/pubs_details.aspx?pubs_id=5739) **Free.**


P. **Birth Control-Especially for Teens.** (AP 112) for English; (SP112) for Spanish. ACOG pamphlet. 800-762-2264. To view go to: www.acog.org/Resources_And_Publications/Patient_Education_Pamphlets, click on Patient Education and Fact Sheet. Site requires login and password Packet of 50 for $22.50 for member/$25.50 for non-members.


S. **Edinburgh Postnatal Depression Scale.** 10 question depression assessment. Scale is available online where scoring is completed automatically: http://psychology-tools.com/epds/

T. **Cribs for Kids.** Find information about local programs that provide Graco Pack n Play cribs. www.cradlecincinnati.org/resources

U. **Dental Home.** For a current list of dental providers, visit www.cradlecincinnati.org/resources

V. **Every Child Succeeds.** www.everychild succeeds.org

W. **Health Care Access Now.** Pregnancy Pathways program. www.healthcareaccessnow.org

**Pregnancy Verification for Medicaid.** Each health center has its own form; must include patient name, date of birth, address, estimated delivery date, number of fetuses, name of provider, signature of provider, date and phone number for provider.


**Pregnancy Support Groups.** A complete listing of active groups can be found at [www.cradlecincinnati.org/resources](http://www.cradlecincinnati.org/resources)


**Bedside.org: where to get birth control.** Explains all types of birth control and where to find it. [http://bedsider.org/where_to_get_it](http://bedsider.org/where_to_get_it)

**Cincinnati Health Department Body Shop birth control flyer.** Explains long term control options and CHD locations to find it. [http://www.cincinnati-oh.gov/health/personal-health/thebodyshop/]  

**Risk Stratification:** evaluates risk factors that contribute to adverse outcomes. Available at [www.cradlecincinnati.org/resources](http://www.cradlecincinnati.org/resources)

**University of Cincinnati Medical Center Women’s Services.** Lists childbirth and preparation classes available at UCMC. [http://uchealth.com/womens-health/childbirth-education-classes/](http://uchealth.com/womens-health/childbirth-education-classes/)


**Notes:**

The Back to Sleep Campaign materials: [http://www.nichd.nih.gov/sts/materials/Pages/default.aspx](http://www.nichd.nih.gov/sts/materials/Pages/default.aspx)
REFERENCES


