



Third Trimester and Hospital Stay

Your Guide to Meeting Baby

SANFORD[®]
WOMEN'S

Third Trimester & Hospital Stay

Third Trimester - Week 29 Through Week 40

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Third Trimester

Your Third Trimester To-Do List

- Schedule a tour of the hospital
- Share the visitor's information with friends and family who plan to visit you during your hospital stay
- Complete the Birth Wishes checklist and return to your pregnancy navigator or nurse
- Complete gestational diabetes screening
- Learn signs of preterm labor
- Do [kick counts](#) daily
- Pack hospital bags for you and your support person
- Learn the [signs of labor](#)
- Attend prenatal classes
- Find a good car seat – check for proper installation
- [Prepare siblings](#) and/or pets for baby's arrival
- Complete FMLA paperwork
- Decide about circumcision
- Review breastfeeding education
- Prepare a safe sleep environment at home

Prenatal Care

You will visit provider 2 times a month during months 7 and 8. In month 9, plan to see your provider each week until your baby arrives. You and your provider will decide the timing and number of visits based on your health needs.

These visits are needed to learn how the baby is growing. You will also be able to talk with your provider about your feelings, any physical changes, and medical tests you are offered. At each visit, your weight, blood pressure, the growth and position of your baby, and your baby's heart rate will be checked. Your provider will also begin checking your cervix for softening, thinning (effacement) or opening (dilation). Your care team will talk with you about what else needs to be done to make sure we know your wishes for labor and delivery.

Vaccinations

You can receive the vaccines from your primary care provider, a walk-in clinic, or a local pharmacy.

Tdap Vaccine

This vaccine prevents the spread of pertussis, more commonly known as whooping cough, to your baby. Tdap vaccination is recommended between 27 and 36 weeks of pregnancy and for all those who will be spending time with your baby, including grandparents and daycare providers who have not received a booster in 10 years.

Gestational Diabetes

Toward the end of the second trimester, or beginning of the third trimester, you will have a glucose tolerance test. This test will see if you have developed gestational diabetes. This condition can affect your health and the health of the baby. This form of diabetes often goes away after pregnancy, but it is also important to care for yourself and your baby during pregnancy. Some moms can manage gestational diabetes with diet and exercise, some will need oral medicines, and some will need to use insulin.

Getting Ready for the Test

Eat and drink normally but avoid high sugar foods. How is the test done? At your appointment, you will be given a special sweet flavored drink that is approved by the lab. After an hour, we will check your blood sugar. If the results are high, you may need a second test.

Getting Ready for the Second Test

Do not eat or drink anything but water for 8 to 12 hours before your test.

How is the second test done? Your blood sugar will be checked 4 times.

1. Your blood sugar will be checked when you arrive at the clinic after not eating for 8-12 hours. Then you will drink the same sweet flavored drink as before.
2. Blood sugar test after 1 hour
3. Blood sugar test after 2 hours
4. Blood sugar test after 3 hours

You will need to be at the clinic for up to four hours. You cannot eat anything until after the final blood sugar test. You may want to bring a snack for when the test is complete.

Fetal Movement Counts

It is normal to worry about your baby's health. One way you can know your baby is doing well is to record the baby's movements one time each day. This is called a kick count.

When to Start Kick Counts

- Start at 28 weeks for an average pregnancy
- Start earlier as directed by your provider for high-risk pregnancy

How to Do a KickCount

Here are tips for counting kicks:

- Choose a time when the baby is active, such as after a meal
- Sit comfortably or lie on your side
- The first time the baby moves, write down the time
- Count each movement until the baby has moved 10 times. This can take from 20 minutes to 2 hours. The movements can be kicks, twists, turns, swishes, or rolls
- Try to do it at the same time each day
- Get to know what is normal for your baby

Helpful Hints

- Babies are usually most active between 9 p.m. and 1 a.m.
- Babies sleep an average of 20 to 40 minutes at a time
- Lay down in a quiet, undisturbed area
- Every woman and baby is different when it comes to feeling movement
- Hiccups do not count as movements

Call your provider or go to the hospital right away if you notice any of the following:

- Your baby moves fewer than 10 times in 2 hours while you are doing kick counts
- Your baby moves much less often than on the days before
- You have not felt your baby move all day



Preterm Labor

Preterm labor starts when you go into labor and are still 3 weeks or more away from your due date. An early delivery can cause your baby to have problems with breathing, eating, and keeping normal body temperature. Knowing the signs of preterm labor can help you know when to get help and avoid a possibly serious situation.

Early Warning Signs of Preterm Labor (Before 37 Weeks)

- Contractions (the belly tightens like a fist) every 10 minutes or more often
- Change in vaginal discharge
- Large increase in the amount of discharge
- Leaking fluid
- Bleeding
- Pelvic pressure – the feeling that the baby is pushing down
- Low, dull backache
- Cramps that feel like a menstrual period
- Belly cramps with or without diarrhea

If you have any of these symptoms, call your health care provider to decide if you may be having preterm labor.

Pregnancy Warning Signs

- Headache that does not go away
- Swelling in your face, eyes, or hands
- Sudden weight gain over 1 to 2 days
- Pain or burning when you urinate
- Not urinating very much at a time
- Vomiting or diarrhea lasting 24 hours or more
- Vision changes – such as blurry vision, seeing spots or flashing lights, dimming vision, or sensitive to light
- Pain in your belly below your ribs
- Vaginal bleeding
- Less or no fetal movement

Signs of Labor

When it is time for baby to arrive, they will let you know. True labor contractions are regular, get stronger, last longer, and get closer together. False labor contractions will remain irregular. Here are some signs that it is time for baby to be born.

Counting Contractions

You may have contractions during the last few months of pregnancy. Read the Understanding Birth book for more information. An easy way to remember when it is time to go to the hospital is 5-1-1. Contracts are:

- 5 minutes apart
- Last 1 minute each
- Going on for 1 hour

If you live more than a one hour drive from the hospital or you have any complications, talk with your care team about when to come to the hospital.

Mucous Plug

When you are pregnant, the center of your cervix is filled with thick mucous called a mucous plug. Losing your mucous plug means that your body is preparing for labor in the next days or weeks.

- Most women do not notice when the mucus plug passes.
- If you do notice it, do not worry. You do not need to call the hospital or your provider. Losing the mucus plug is a normal process.

Recognizing True Labor

- Contractions are your uterine muscles tightening. If you place your hand over your abdomen you can feel your uterus get hard. That is a contraction.
- Your contractions may start out feeling like menstrual cramps or gas pains, but they may be more painful.
- Take a warm bath or rest. If contractions continue, you may be in labor.
- If you are still unsure, change positions or take a walk. If contractions continue and become stronger, labor has probably begun.



When to Come to the Hospital

- If your due date is more than 4 weeks away and you are having what you think is true labor, call the hospital.
- When your contractions are every 5 minutes or if you are too uncomfortable to stay home.
- When your water breaks, even if no contractions are present. This could be a gush or just a small trickle of fluid.
- If you have constant, severe pain.
- If you have bright red vaginal bleeding.

Tell Your Provider

Let your provider know if you have any of the following:

- Headache
- Dizziness
- Changes in vision
- Severe pain in the abdomen
- Sudden swelling in hands, feet, or face
- Sudden weight gain
- Chills or fever
- Problems urinating or a burning sensation when you urinate
- Your baby moves less

[Go to the Resources page to find the phone number for the hospital near you.](#)

Car Seat To-Do List

- Find a car seat.
- Make sure the car seat is new or from someone you trust.
- If used, make sure the car seat has not been involved in an accident, not recalled, and not expired.
- Read the instruction manual to learn how to install your seat.
- Install your car seat before going to the hospital. Get your seat checked at Sanford's free car seat checks.
- [To find a car seat inspection resource in your community, visit our Parenting Resources page.](#)

Time to Pack Your Bags

Packing in advance can help you feel ready for the arrival of your baby whenever they decide to come. We recommend having your bags packed by your eighth month. Some items are provided.

Provided for mom: prescription medicines, pain medicine, sanitary pads, towels, sheets and blankets, items for breastfeeding like breast pads for breasts milk leaking and water bottle.

Provided for baby: diapers, baby wipes, bulb syringe, thermometer, a few days' supply of 4x4 gauze and Vaseline for circumcision care. You can put baby in clothes you bring or the baby can wear a hospital shirt.

Packing Lists

Mom

- Breast pump, if desired
- Clothes to wear home
- Clothes, nightgowns, or pajamas to wear in the hospital if you do not want to wear the hospital gowns
- Deodorant
- Eyeglasses/contact lenses
- Hair care items such as a brush, comb, and hair bands
- Makeup
- Nursing bras
- Breastfeeding pillow
- Phone and charger
- Slippers and socks
- Toothbrush/toothpaste

Baby

- Baby book
- Onesie and socks if preferred
- Clothing to wear home such as pull on pants or pants with snaps or zips up legs, to fit in the car seat (no snowsuits or blanket sleepers)
- Installed car seat
- Receiving blankets, a thick blanket or a snuggly car seat cover to go over the top of the car seat

Support Person

- Photo ID
- Phone and charger
- Camera or video camera with accessories
- Clothing to sleep in if staying at the hospital
- Money or a charge card for food - may need change for vending machines
- Pillow
- Snacks
- Toiletries
- Toothbrush/toothpaste

Why Wait Until at Least 39 Weeks

Your baby needs a full 39 weeks of pregnancy to grow and develop. Labor should only be induced for medical reasons—not for convenience or scheduling concerns. Until then, here are the top reasons to go at least 39 weeks of pregnancy.

1. There are fewer complications and risks for both you and baby through a vaginal birth.
2. Recover faster – A vaginal birth has a faster recovery time than a cesarean birth, which is a major abdominal surgery.
3. Birth a brainier baby – At 35 weeks your baby’s brain is only two-thirds the size it will be at full term.
4. Boost breastfeeding – Term babies are better at sucking and swallowing than babies born earlier.
5. Reduce your baby’s risk – Babies born early have a higher risk of jaundice, low blood sugar and infection.
6. Maximize those little lungs – Babies born just 2 or more weeks early can have far more problems breathing.

Inducing Labor

Sometimes labor needs a little help to get started. Your provider may recommend inducing labor for several reasons, most often if there is concern for the mother’s or baby’s health. Labor can be induced by:

- **Ripening the cervix:** As you get closer to labor, your cervix begins to soften, thin out, and open. These changes allow the baby to move through the birth canal. To ripen your cervix, your provider may use a balloon catheter or apply the hormone prostaglandin to your cervix.
- **Stripping the membranes:** Your provider inserts a finger through the vagina and cervix. Then swipes their finger across the thin membrane that connects the amniotic sac to the wall of your uterus. When the membranes are stripped, your body releases natural prostaglandins.
- **Breaking your water** (also called rupturing the membranes): If your cervix has started to open and your baby’s head is down close to the cervix, your provider may use a small plastic hook to break the amniotic sac.
- **Stimulating contractions:** If other methods have not started regular contractions, you may be given the medication Pitocin through an intravenous (IV) line. Contractions should start within 30 minutes. Pitocin is always given in the hospital.

Hospital Stay

Labor Starts

When labor begins call the hospital and let them know you plan to come in. This will allow us to prepare for your arrival.

Arrive at the Hospital

Your first stop when arriving may be to our triage room. Here our expert nurses will check your progress and make sure your baby is ready for labor. It is common for patients to be sent home. Remember, babies come at their own time.

If it is time for you to stay, we will have you fill out any needed forms to admit you to the hospital. We will also review your wishes for birth. This is to make sure your experience is centered on what you feel is best for you and your baby.

If you are being induced, your health care team will give you instructions on how to prepare for delivery.

Labor and Delivery

Your next stop will be the labor and delivery room. This room is where you will stay until after you deliver your baby. Here you will meet your expert labor and delivery nurse, who will care for you. Communication between you and your care team is very important. Things can happen quickly, open communication helps ensure we are able to best support you.

Feel free to share how you feel or your wishes at any time.

Below are some things that happen to most moms:

- You will be asked to wear a hospital gown or a personal clothing item that you brought with you that is comfortable and supports care.
- Physical exams will be done as needed to monitor progress.
- A blood sample will be taken.
- An IV may be placed in your arm.
- Your contractions will be monitored by either feeling your abdomen or with an electronic monitor.
- The provider will be involved during your labor to understand your needs and wants, and to check on your progress. They will also be present during your baby's delivery.



Birth Experience Options

Birth

Birth options differ. Talk with your healthcare team about the options available in your area.

Pain Management

- Comfort positions
- Whirlpool tub bath or shower
- Oral pain medication
- Pain medication in IV
- Nitrous oxide
- [Labor epidural](#)

There are lots of positions and ways to help you be comfortable during labor including using a birthing ball. Learn more about all possible comfort choices by speaking with your care team.

Hospital Visitor Policies

Being sure that our patients are cared for in a safe and healthy environment is our highest priority. Our visitor policy follows guidance from the U.S. Centers for Disease Control. Please check with your care team about having visitors during your hospital stay. To keep all our moms and babies safe, all visitors to our unit will need to check in at our main guest services desk.

Each unit has a family room waiting area. Our staff is happy to help visitors find the waiting room and help you with your privacy needs.

Video/Photography Policy

A camera or video equipment can only be used during labor and after birth when the mother and baby are in stable condition.

The Hospital

All of our hospitals are designed to make your experience of bringing a baby into the world as special as possible. Each space gives you comfort and convenience as you prepare to welcome the newest member of your family. Sanford Health also offers the latest in care and technology at our neonatal intensive care units (NICUs) in Bismarck, Fargo and Sioux Falls. Our NICUs are staffed with experts should your baby need extra care.

Features

- Dedicated, just-for-you nurse
- Specialized lactation experts
- Comfort choices to manage pain
- Special in-room nutrition menus for new moms
- State-of-the-art infant security

Click here to take a virtual tour of the birth suites in [Bemidji](#), [Fargo](#), [Sioux Falls](#), [Bismarck](#), and [Luverne](#) or talk with your care team to find out how to arrange a tour!

Suggested Learning

Topics that may be of interest to learn about this trimester are:

Medical Care	<ul style="list-style-type: none"> • Kick counts • Warning signs • Cesarean birth • Vaginal birth after a cesarean (VBAC)
Pregnancy Discomforts	<ul style="list-style-type: none"> • Insomnia • Constipation • Hemorrhoids • Leg cramps • Varicose veins • Swelling (edema)
Learning About Labor	<ul style="list-style-type: none"> • Signs of true labor • Labor comfort positions • Labor induction and cesarean • Pain management
Prepare for Baby	<ul style="list-style-type: none"> • What to expect at delivery • Prepare your family and pets for baby
Breastfeeding	<ul style="list-style-type: none"> • Breastfeeding basics • Going back to work
Recovery	<ul style="list-style-type: none"> • Rest • Exercise • Nutrition • Incision care • Bleeding • Parenting • Recovery from gestational diabetes • Watching for preeclampsia even after delivery • What are the baby blues • Mood disorders of pregnancy - postpartum depression and/or anxiety • Sex • When to call the provider for mom and baby
Normal Newborn	<ul style="list-style-type: none"> • Many topics
Videos to Watch	<ul style="list-style-type: none"> • How to prepare for childbirth • How to know you are in labor • What happens during labor: stage 1 • What happens during labor: stages 2 and 3

Hospital Stay

Meeting Your Baby

The first few hours after birth are a special time for new parents and their baby to start bonding. While all are eager to welcome the new baby, the first few hours are reserved for the new parents and baby to adjust to this new life. You will be encouraged to hold your baby skin to skin giving your baby the best start in life.

How Does This Help My Baby?

- Provides bonding time
- Allows time for the first breastfeeding

Helps to control:

- Body temperature
- Blood sugar levels
- Heartbeat
- Breathing
- Less crying
- Release of fewer stress hormones
- More comfort when getting vitamin K and Hepatitis medication

How Does This Help the Mother?

Provides:

- Time for bonding
- Warmth and relaxation
- Comfort

Starts the release of:

- Maternal hormones
- Colostrum/breast milk

Holding your baby skin to skin also helps shrink the uterus for less bleeding and reduces the chance of postpartum depression.



Care for Baby

After baby is born, a provider will evaluate your new baby and talk with you about any concerns. They will also check on your baby throughout your stay in the hospital. Some general tests and screenings for baby include:

- Immunizations
- Hearing test
- Lab tests, such as for [jaundice](#)
- [Circumcision](#), if desired
- [Vitamin K](#)
- Erythromycin eye gel

If any concerns or problems arise, the neonatal intensive care unit (NICU) specialists are trained to provide the best care for babies who need extra help.

If you have selected a primary care provider for your baby, we will work with you to schedule their first clinic appointment before you leave the hospital.

Bonding

We work with you to best support bonding between you and your baby. In most cases, this means skin-to-skin contact between baby and parent immediately after birth and often throughout your hospital stay.

During your stay, we encourage “rooming in”, which is keeping your baby with you in your room. Spending those first few days together help with breastfeeding, learning your baby’s cues and adapting to each other’s schedules. Should the nursery be needed, it is available and staffed 24 hours a day by registered nurses.

Breastfeeding

If you choose breastfeeding, we have dedicated lactation experts as well as nurses trained in breastfeeding. They will spend time with you during your stay for support and guidance. They are also available for you after you go home. For a list of breastfeeding services near you, visit sanfordhealth.org.

Getting Ready for Home

The average length of stay is one to two days after a vaginal delivery and two to three days for a c-section delivery. Before you leave, you will want to review your discharge checklist and make sure you have everything ready to go. The staff will walk you through the needed paperwork and birth certificate information.

Postpartum

Your Postpartum To-Do List

- Make a nutrition, exercise, and rest plan
- Stock up on supplies for the first days at home
- Make a plan for meals or have several days of meals prepared and frozen
- Let others help with household chores

Care for Mom

Some moms adjust to having a new baby easier than others. We are here to support you. Your provider will want to see you between 2 and 6 weeks after delivery to make sure you are recovering well and address any concerns.

Care for Baby

Your baby's primary care provider will want to see your baby within a few days of leaving the hospital and when your baby is 2 weeks old. If this appointment was not made while you were in the hospital, you can make this appointment by contacting the office of the provider you choose.

Life With Baby

Getting used to life at home with a new baby can be a challenge. We are here to support you and answer your questions. We offer resources and education for new moms. If you have questions or concerns before your scheduled appointment, please reach out to your care team through My Sanford Chart or call our office.

Insurance Coverage for Your Newborn

Please notify your insurance provider to add your newborn to your insurance plan **within 30 days** of birth. If you have Medicaid, please notify your county worker within 15 days. If you have any questions about applying for Medicaid, please ask to speak with a hospital social worker.

Parenting Resources

Every parent, every pregnancy, and every baby is different. If you need help or have questions, reach out to your care team. We can help put you in contact with parenting groups, education materials, or anything else you may need during your journey through parenthood. Check out our [Parenting Resource](#) page for more information on the services provided.

Preparing for Life at Home

We want you and your baby to have a safe and successful move home. At the hospital, the nurses will work with you to make sure you know how to care for your baby. Here are a few things you need to do and understand before you leave the hospital.

- [Proper way to swaddle](#)
- [Bathing baby](#)
- [Changing baby](#)
- [Cord care](#)
- [Circumcision care](#), if done
- My baby's birth certificate is completed and signed
- I know the side effects of my medications
- I know when I should call the provider after I go home for myself and my baby
- I know how to manage my pain
- I know the results of my [baby's hearing test](#)
- I have made the follow-up appointments for my baby and me
- My provider and my baby's provider have seen us and approved us to go home
- I understand the [immunizations](#) provided to my baby and me and received my Rhogam, if needed
- I am aware of the breastfeeding hotline and lactation clinic appointments
- I can tell you what screening/lab tests my child is getting and what they are for
- I know the importance of [SAFE sleep](#)
- [Back to sleep](#), alone in a crib
- No toys, bumper pads, or fluffy blankets
- My baby and I are signed up for [My Sanford Chart](#)

