

Congratulations — You're having a baby!

This news may be met with excitement or feelings of anxiety. You may feel happy, nervous, scared or a combination of all of these. This is normal. Whatever you are feeling, we want you to know your GHC-SCW care team is here to support you and share this journey with you.

We've put together some useful information for you, and we encourage you to keep this folder in a place where you can easily find it. You never know when a question may come up, like "What did my doctor say about that, again?" or "Is it ok for me to take this cold medicine?" or "What should I be eating?"

In the coming months:

- Your scheduled appointments are important and our care team staff are there to help support you every step of the way. If you're having any problems getting to your appointments, please let your care team know so we can try to help.
- Your body is changing, not just in the way it looks, but how you feel. Hormonal changes can sometimes make you more tearful or sad than usual. All people are different, so it's important to tell your Primary Care Provider (PCP) how you're feeling and if you have a history of depression.
- We encourage you to take childbirth classes, and UnityPoint Health - Meriter has several to choose from. For your convenience, there is more information in this folder.
- Create a birth plan with your provider. A birth plan includes items like how you want to manage comfort during delivery, which provider you want to care for your baby and if you want your baby to be circumcised (if your baby has a penis). You should also talk about who you want in the room when you deliver your baby.
- Feel free to ask questions. We're here to help.

Best Wishes,

GHC-SCW Prenatal Coordinators



Bryan Geigler
PA-C



Emily Lee
PA-C



Lauren Schmick
APNP



Clare Shinnars
PA-C



Avery Spencer
APNP, DNP



Katie True
APNP

BETTER TOGETHERSM

Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK19-99-3(12.23)O - Updated December 2023

 **Group Health
Cooperative**
of South Central Wisconsin

GHC-SCW Family Medicine with Obstetrics (FMOB)

The Continuity Model of Care

At Group Health Cooperative of South Central Wisconsin (GHC-SCW), we're committed to building a relationship and providing personalized care.

Our FMOBs work with a comprehensive team that includes prenatal coordinators, a genetic counselor, an international board-certified lactation consultant (IBCLC) and nurses who are experienced in whole-family care. **This team of professionals is there every step of the way to provide support to you and your growing family.**

What is the Continuity Model of Care?



When it is time for your delivery, we'll work hard to make sure your chosen primary obstetric provider is there to welcome your new baby into the world. With our continuity model, there is a **90% chance** that you will be delivered by your chosen primary obstetric provider.



During your delivery, our FMOBs will be focused on **low-intervention practices** for a healthy parent and baby. Our low complication rates show that this philosophy works for our patients! And, in the event that your care becomes more complex, we partner with our local OB/GYN specialty partners at UW Health.



After your baby is born, your primary obstetric provider can follow your baby to provide pediatric care, or you can choose from our **best-in-class primary care providers** to continue your experience with GHC-SCW.

GHC-SCW FMOB Providers



Stefen McVoy, MD
Capitol Clinic



Eric Hilquist, MD
Hatchery Hill Clinic



Amy Kaleka, MD
East Clinic



Robert Luchsinger, DO
Sauk Trails Clinic



Katherine Porter, DO
Capitol Clinic



Elizabeth Schaefer, MD
Capitol Clinic



Stephanie Skladzien, MD
Capitol Clinic



To learn more about our providers, visit ghcsw.com and select "Find a Provider."

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GHC-SCW Pediatric Care

Nurturing Bright Futures

This page features Primary Care Providers who specialize in the care of newborns.



Carol Ballweg, APNP
Hatchery Hill Clinic



Amanda Bartholomew, MD
East Clinic



Marcia Bolles, PA-C
Sauk Trails Clinic



Matthew Brown, MD
Madison College Clinic



Alison Craig-Shashko, MD
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Tsetan Dolgar, APNP
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Annie Dutcher, PA-C
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Robert Edwards, MD
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Kyoko Felland, PA-C
Capitol Clinic



Bryan Geigler, PA
Sauk Trails Clinic



Kari Gordon, MD
Sauk Trails Clinic



Donna Harrison, APNP
Hatchery Hill Clinic



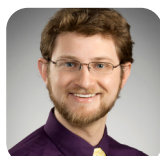
Nathan Hayes, DO
Hatchery Hill Clinic



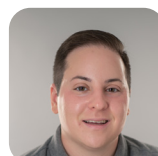
Kathryn Ledford, DO
Capitol Clinic



Emily Lee, PA-C
Sauk Trails Clinic



Andrew Lewandowski, DO
East Clinic



TJ Lewin, PA-C
Capitol Clinic



George Leydon, DO
Capitol Clinic



Stephen Lo, MD
Hatchery Hill Clinic



Elizabeth Lucht, PA-C, LCSW
Capitol Clinic



Kristin Millin, MD
Hatchery Hill Clinic



Brittany Paramore, APNP
Sauk Trails Clinic



Ashley Przybilla, MD
Capitol Clinic



Lavanya Rajagopalan, MD
Hatchery Hill Clinic



Carolyn Rank, MD
Capitol Clinic



Jordyn Schultz, PA-C
East Clinic



Renee Schutte, PA-C
Hatchery Hill Clinic



Clare Shinnars, PA-C
Capitol Clinic



Avery Spencer, APNP, DNP
Sauk Trails Clinic



Sarah Spolum, PA-C
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Sarah Straka, MD
Madison College Clinic



Katie True, NP
Hatchery Hill Clinic



Francesca Vash, APNP
Capitol Clinic



David Vogt, DNP
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Julie Vander Werff, PA-C
East Clinic



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Prenatal Care Visit Schedule

FIRST TRIMESTER (UP TO 13 WEEKS)

- 7-9 Weeks Dating and/or viability ultrasound
- 8 Weeks Prenatal visit with OB coordinator
- 10 Weeks Genetic counseling and genetic screening (if desired)
- 12 Weeks First OB visit with chosen family medicine provider (OB, OB/GYN or CNM)

SECOND TRIMESTER (13 - 27 WEEKS)

- Every 4 Weeks (16, 20, 24 Weeks) Follow-up OB visit
- 20 Weeks Ultrasound — organ development
- 24 - 28 Weeks Glucose tolerance test (1 hour)

THIRD TRIMESTER (27 WEEKS +)

- Every Other Week
- (28, 30, 32, 34 Weeks) Follow-up OB visit
- Every Week (36 Weeks +) Follow-up OB visit

POSTPARTUM

- 6 Weeks After Delivery Follow-up visit with delivery provider



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Nutrition Tips During Pregnancy

Feeding your baby right begins during pregnancy.

Healthy Foods will make you feel better and help your baby grow.

Each day, your meals should include: vegetables, fruits, whole grains, lean protein and low-fat dairy products. You should gain weight while pregnant, but check with your provider about what is healthy for you.

Follow this nutrition guide for a healthy parent and baby:

→ DO

- Do make half your plate vegetables and fruits. Choose dark greens, red and orange vegetables, green beans and peas. These are full of vitamins and minerals for you and your baby!
- Do choose whole grains, like wheat bread and brown rice instead of white bread or white rice. They help with nausea, constipation and give you an energy boost!
- Do choose low- or non-fat dairy to help build strong bones, without the extra calories.
- Do eat different types of protein, like lean meat, eggs, unsalted nuts and seeds. Protein is very important to your baby's health and development, including brain growth.

→ DON'T

- Don't drink alcohol, smoke or use drugs. These go into your baby's body and can lead to mental or physical problems or death.
- Don't eat raw or undercooked meat, poultry, fish or shellfish.
- Don't eat any swordfish, tilefish, king mackerel or shark. They contain high levels of mercury (a harmful metal).
- Don't eat refrigerated, smoked seafood.
- Don't eat refrigerated meat spreads or pâté.
- Don't eat hot dogs or lunch meats.
- Don't drink raw or unpasteurized milk or juice or eat foods that use unpasteurized milk.
- Don't eat soft cheeses like feta, brie, queso blanco, queso fresco, bathtub cheese or queso panela. Make sure the label says it's pasteurized or made from pasteurized milk.
- Don't eat unwashed fruits and vegetables.
- Don't eat raw sprouts of any kind, including alfalfa, clover, radish or mung bean.



Want more information? Call your primary care clinic to schedule a visit with a dietician.

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Nausea During Pregnancy

In early pregnancy, it's not uncommon to feel sick to your stomach or to throw up. This is sometimes called "morning sickness," but it can happen at any time of the day. Symptoms can begin as early as the fourth week of pregnancy. Usually, you start feeling better around your 11-12th week of pregnancy. Symptoms vary from person to person. They are usually mild but can still sometimes be very challenging.

What can I do to feel better?

- Eating first thing in the morning can help prevent nausea from getting worse during the day.
Tip: Try eating a small amount of healthy food before getting out of bed in the morning. Examples include a quarter of a peanut butter sandwich, a handful of nuts or seeds or healthy leftovers.
- Follow your early morning snack with a nutritious breakfast that has protein.
Tip: Instead of cereal (which usually contains a lot of sugar), try eggs, apple slices with cheese, a banana with peanut butter or toast with peanut butter.
- Try to eat throughout the day.
Tip: Eat small portions and healthy foods every 1-2 hours.
- Eat healthy foods that taste good to you. They are easiest on your stomach.
Tip: Avoid fast food, fried foods, greasy foods, TV dinners.
- Dehydration can worsen nausea. Even if you don't feel hungry, try to sip liquids regularly.
Tip: Every hour sip small amounts of water, broth, tea (ginger, chamomile) or sparkling water. Sometimes squeezing a lemon or lime into your water can help make it easier to drink.
- Take your prenatal vitamin with a high-protein food before bed.
Tip: Examples include eggs, nuts, nut butters and white meat (chicken or fish).
- Remember to get more sleep and rest during early pregnancy.

Is there anything I can take to help?

- Vitamin B6 (Pyridoxine) - Take 10 to 25 mg three times per day with food.
- Unisom (doxylamine 25 mg) - Take half a tablet two times per day. Try one-half tablet later afternoon and one-half tablet at bedtime.
- Try ginger tea or ginger capsules (250 mg four times per day).

When to call us:

- You're not able to eat or drink for 12 hours
- You have not urinated in more than 8-10 hours
- You're vomiting many times per day
- If you're still struggling after trying all of these tips

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Over-the-Counter Medications During Pregnancy

PROBLEM/ ISSUE	OVER-THE-COUNTER MEDICATIONS (Follow package directions for adult dosage if not instructed below)	WHEN TO CALL YOUR PROVIDER
Morning Sickness/ Nausea	<ul style="list-style-type: none"> ▪ Ginger Capsules: Take 250 mg, four times daily ▪ Vitamin B6 Tablets: Take 25 mg every 6-8 hours [may take alone or with Unisom (Doxylamine)] ▪ Doxylamine (Unisom): Take one-half tablet, twice daily ▪ Diphenhydramine (Benadryl) 	<ul style="list-style-type: none"> ▪ Vomiting one to two times per day for more than one week ▪ Weight loss of more than five pounds in last two weeks ▪ Unable to keep ANY liquids down without vomiting in more than 24 hours
Constipation	<ul style="list-style-type: none"> ▪ Docusate (Colace) ▪ Magnesium ▪ Methylcellulose (Citrucel) ▪ Polycarbophil (Fibercon) ▪ Psyllium (Metamucil) ▪ Polyethylene glycol (Miralax) 	<ul style="list-style-type: none"> ▪ No bowel movement for more than four days ▪ Severe straining to have bowel movement ▪ Severe rectal pain
Hemorrhoids	<ul style="list-style-type: none"> ▪ Chilled witch hazel packs ▪ Sitz bath 	<ul style="list-style-type: none"> ▪ Bleeding or severe pain
Mild Headache or General Aches and Pains	<ul style="list-style-type: none"> ▪ Try comfort measures ▪ Acetaminophen (Tylenol) 	<ul style="list-style-type: none"> ▪ Severe or excruciating headache with or without additional symptoms (especially if it comes on suddenly) ▪ Severe pain (unable to do normal activity) and not improved two hours after taking acetaminophen (Tylenol) ▪ Moderate headache not improved after two hours of pain medicine ▪ Any general pain that lasts longer than two weeks
Nasal Congestion Due to Allergy or Sinus Problem	<ul style="list-style-type: none"> ▪ Saline nasal spray or irrigation (neti pot) ▪ Chlorpheniramine (Chlor-Trimeton) ▪ Loratadine (Claritin) ▪ Cetirizine (Zyrtec) ▪ Diphenhydramine (Benadryl) ▪ Fluticasone (Flonase) nasal spray ▪ Triamcinolone (Nasacort) nasal spray ▪ Budesonide (Benocort) nasal spray 	<ul style="list-style-type: none"> ▪ Fever of more than 100.5 for more than three days ▪ Sinus pain and pressure for more than 10 days ▪ Yellow or greenish nasal discharge for more than 10 days ▪ Using nasal washes and acetaminophen (Tylenol) for more than 24 hours and pain persists
Cough or Cold Symptoms	<ul style="list-style-type: none"> ▪ Alcohol-free cough drops or lozenges ▪ Guaifenesin (Robitussin) — helps reduce coughing up phlegm ▪ Guaifenesin with Dextromethorphan (Robitussin DM) — helps suppress cough 	<ul style="list-style-type: none"> ▪ Severe sore throat and difficulty swallowing saliva ▪ Sore throat lasting more than three days ▪ Cough lasting more than two weeks ▪ Any difficulty breathing
Heartburn or Indigestion	<ul style="list-style-type: none"> ▪ Aluminum hydroxide (Maalox) ▪ Calcium carbonate (Tums) ▪ Calcium carbonate (Mylanta) ▪ Famotidine (Pepcid) ▪ Magnesium hydroxide (Gaviscon) ▪ Magnesium hydroxide (Rolaids) 	<ul style="list-style-type: none"> ▪ No improvement from over-the-counter medication

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Baby on the way? Hooray!

We're happy to guide your care each step of the way.

SIGN UP RIGHT AWAY!

UnityPoint Health - Meriter offers classes to help prepare you for childbirth and caring for your newborn baby.

Learn more and register for classes by scanning the QR code to the right or by visiting unitypoint.org/madison/classes-and-events.aspx. If you have questions, please call their Family Health Education department at (608) 417-8446.



Currently, classes are offered in-person and virtually. Here are some of the classes that are offered:

Understanding Birth

This class will provide information you can trust as you prepare for your upcoming birth and early parenting journey. In this class, you will learn all about the birthing process, labor coping techniques and medical interventions.

Preparing for Childbirth

In the class, you will learn about labor and birth as we discuss recognizing contractions, other signs and symptoms of labor, when to call your provider or come to the hospital.

Basics of Breastfeeding

A breastfeeding specialist will guide you through the basics of breastfeeding in the early days and weeks to help ensure a positive and enjoyable experience for your family.

Basics of Infant Care

Covers the characteristics, sensory skills and abilities of a newborn, along with basics of infant care, car seat safety, common concerns and when to seek medical advice.



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Depression During Pregnancy

You're not alone; depression during pregnancy is more common than you think.

- An estimated 14-23% of women develop depression during their pregnancy, which is much higher than the 6% of women who will suffer from depression at some point during their lifetime.
- Pregnancy has an impact on your hormone levels, affects your brain chemicals and causes other physical and emotional changes to your body. These changes can sometimes lead to depression during pregnancy.

What are common symptoms of depression during pregnancy?

Depression can develop slowly and the symptoms can vary from person to person. You may have depression if you experience any of the following symptoms for two weeks or longer:

Changes in your feelings:

- Feeling sad, hopeless or overwhelmed.
- Feeling restless or moody.
- Crying a lot.
- Feeling worthless or guilty.

Changes in your everyday life:

- Eating more or eating less than you usually do.
- Having trouble remembering things, concentrating or making decisions.
- Sleeping too much or not being able to sleep.
- Withdrawing from friends and family.
- Losing interest in things you usually like to do.

Changes in your body:

- Having no energy or feeling tired all the time.
- Having headaches, stomach problems or other aches and pains that don't go away.

Help is available:

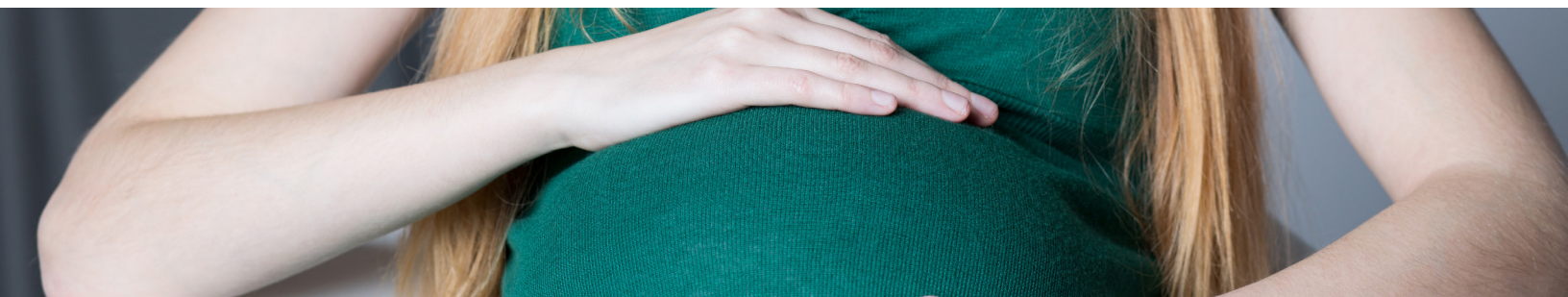
If you're pregnant and have any of these symptoms, or if the symptoms get worse, call your health care provider.

For Urgent and Emergency Behavioral Health Crisis:

Behavioral Health 24/7 Crisis Line: For immediate help with an urgent mental health crisis, 24-hour crisis intervention services are available for GHC-SCW members.

- **Monday - Friday Business Hours:** If you are experiencing a behavioral health emergency including thoughts of suicide, call GHC-SCW at (608) 441-3290 from 8 a.m. - 5 p.m., Monday - Friday.
- **Nights and Weekends:** For crisis intervention services outside of business hours, call **(608) 257-9700**. You will be assisted by a nurse or an on-call crisis counselor who will help you to address your behavioral health emergency and any safety concerns.

If your situation is immediately life-threatening, call 911 or safely get yourself to the nearest emergency room.



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How Do I Get My Breast Pump?



At your first OB visit, your provider will place an order for your breast pump and advise you on where and when to pick it up. The cost of the breast pump is included as an insurance benefit.

Your breast pump will come with instructions for use. If you need additional help with how to use and fit your breast pump, please call GHC-SCW at **(608) 257-9700**.

If you have problems with your breast pump, please call the manufacturer's 1-800 number listed in the instruction booklet. It is a helpline to assist you with any breast pump issues.

If you desire a second breast pump from GHC-SCW, you will be responsible for the full cost of that breast pump, including tubing, valves and backflow protectors.

Replacement parts for breast pumps are available for purchase at any of the GHC-SCW Pharmacies. Additional items are available at local stores or directly from the manufacturer.

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Your Delivery and Hospital Stay

Giving birth is a natural, healthy process.

Most people who have a vaginal birth stay in the hospital for about two days. If you have surgery (a cesarean section) to deliver your baby, you may stay in the hospital for about three or four days. However, if there are any concerns, your provider may ask you to stay longer.

If you want to leave the hospital earlier, talk with your provider before delivery.

Please note that prior authorization is needed if you are 36 weeks or more pregnant and plan to travel outside of the insurance coverage area. If you travel without prior authorization and give birth, you may be responsible to pay for the cost of the delivery.



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Postpartum Depression: More Than Sadness

If you are having thoughts about hurting yourself or your baby, get help now by calling 911.

Are you a new parent who is...

- Feeling sad, down or hopeless?
- Having problems eating or sleeping?
- Having trouble focusing or making decisions?
- Feeling overwhelmed?
- Feeling nervous, panicky or out of control?
- Having upsetting thoughts or worries that won't go away?
- Having problems bonding with your baby?
- Feeling fearful you might hurt your baby or yourself?

If you're having any of these problems, you may be experiencing postpartum depression, which is common after giving birth.

Why is mental health important?

Depression can change your and your baby's health.

You may...

- Have difficulty meeting your baby's needs.
- Not have energy to interact and bond with your baby.

Your baby may have:

- Trouble gaining weight.
- Slowed or stunted growth in their body or brain.
- A hard time connecting with you.

Baby blues or postpartum depression:

Many new parents have "baby blues" in the first couple of days after delivery. The symptoms may include crying, mild sadness and mood changes. With support and time, the "blues" will go away within one to two weeks.

Postpartum depression includes strong feelings of hopelessness, deep anxiety and helplessness that get in the way of daily life. It is a medical illness that needs to be treated like any other physical illness. With the right treatment, parents recover from postpartum depression.

YOU'RE NOT ALONE. Postpartum depression can happen to parents who are of any age, race or culture and at any time around pregnancy. It also happens to first-time parents and those with more than one baby.

What can help you feel better:

- Be kind to yourself. Eat healthy foods, get sleep, rest and exercise.
- Ask others for help.
- Talk about your feelings with family, friends or a professional.
- Take a break from the baby. Let someone you trust care for your baby while you rest.
- Do something for yourself once a day.
- Play with your baby.

What your partner, family and friends can do:

- **Call the Maternal and Child Health Hotline at (800) 722-2295 for a 24-hour statewide resource.**
- Get information, find support groups and encourage the parent to find help.
- Be patient; recovery takes time.
- Make an appointment to see a health care provider.
- Listen and be understanding.
- Be a part of the treatment process.
- Ask questions and take notes.
- Be caring and loving.
- Offer to help with the baby and other children.
- Help with tasks around the house.
- Give parent time to be alone.
- Spend time as a couple.
- Ask the new parent how they are doing.

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Postpartum Depression: More Than Sadness (Cont.)

If you are having thoughts about hurting yourself or your baby, get help now by calling 911.

Add up the numbers shown after each response you selected on the mood scale. If your score is 10 or higher, make an appointment with your health care provider to discuss possible postpartum depression and treatment.

Mood Scale

Choose the answers that come closest to how you've felt in the past seven days.

1. I have been able to laugh and see the funny side of things:

- a. As much as I always could (0) b. Not quite so much now (1) c. Definitely not so much now (2)
d. Not at all (3)

2. I have looked forward, with enjoyment, to things:

- a. As much as I ever did (0) b. Less than I used to (1) c. Definitely less than I used to (2)
d. Hardly at all (3)

3. I have blamed myself unnecessarily when things went wrong:

- a. Yes, most of the time (3) b. Yes, some of the time (2) c. Not very often (1) d. No, never (0)

4. I have been anxious or worried for no particular reason:

- a. No, not at all (0) b. Hardly ever (1) c. Yes, sometimes (2) d. Yes, very often (3)

5. I have felt scared or panicky for no particular reason:

- a. Yes, quite a lot (3) b. Yes, sometimes (2) c. No, not much (1) d. No, not at all (0)

6. Things have been getting to me:

- a. Yes, most of the time I haven't been able to cope at all (3)
b. Yes, sometimes I haven't coped as well as usual (2)
c. No, most of the time I have coped quite well (1)
d. No, I have been coping as well as ever (0)

7. I have been so unhappy that I have had difficulty sleeping:

- a. Yes, most of the time (3) b. Yes, sometimes (2) c. No, not very often (1) d. No, not at all (0)

8. I have been feeling sad or miserable:

- a. Yes, most of the time (3) b. Yes, quite often (2) c. Not very often (1) d. No, not at all (0)

9. I have been so unhappy that I have been crying:

- a. Yes, most of the time (3) b. Yes, quite often (2) c. Only occasionally (1) d. No, never (0)

10. The thought of harming myself has occurred to me:

- a. Yes, quite often (3) b. Sometimes (2) c. Hardly ever (1) d. Never (0)

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Postpartum Depression & Steps to Healthy Living



Make time for the activities you enjoy. When you are depressed, it is easy to lose motivation to do certain activities. Start getting involved in these things again, even if you are just “going through the motions” at first.



Eat healthy and avoid junk food. Eat a variety of fruits and vegetables and monitor your blood sugar. Don't rush; take your time when you eat.



Don't drink alcohol. Limit caffeine to one or two drinks per day, and drink plenty of water (eight cups per day).

Alcohol has a depressant effect, and caffeine can increase anxiety and sleep problems that come with depression.



Exercise with guidance from your primary care provider. 20 minutes or more of brisk exercise a day can help to ease anxiety.



Spend time with people who have a positive effect on you.



Do something kind for someone each day.



Be conscious of your thoughts. Negative thinking can become a habit and can make depression worse. Be kind to yourself. Replace each negative thought with a positive one.



Set simple goals and take small steps. It's easy to feel overwhelmed when you are tired and depressed. Break problems down into small steps and give yourself credit for each step you take.

Developed by Migrant Clinicians Network, (512) 327-2017. Funding provided by Texas Department of State Health Services. Elaborado por Migrant Clinicians Network, (512) 327-2017. Financiado por el Programa de Diabetes del Departamento Estatal de Servicios de Salud de Texas.



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Postpartum Depression Resources

If you're experiencing postpartum depression, you're not alone; help is available. Contact your Primary Care Provider (PCP), OB provider or the GHC-SCW Behavioral Health department for support and resources.

GHC-SCW Capitol Regent Behavioral Health Clinic
(608) 257-9700
700 Regent St., Suite 302
Madison, WI

GHC-SCW Sauk Trails Clinic
(608) 257-9700
8202 Excelsior Dr.
Madison, WI

GHC-SCW Capitol Clinic
(608) 257-9700
675 W. Washington Ave.
Madison, WI

GHC-SCW Hatchery Hill Clinic
(608) 257-9700
3051 Cahill Main
Fitchburg, WI

GHC-SCW East Clinic
(608) 257-9700
5249 East Terrace Dr.
Madison, WI

Madison College Community Clinic
(608) 441-3220
1705 Hoffman St.
Madison, WI

Additional support and resources are available to you through the organizations listed below:

Dane County Behavioral Health Resource Center (BHRC)

(608) 267-2244

danebhrc.org/

818 West Badger Road Suite 102

Madison, Wisconsin 53713

BHRC helps all Dane County residents access behavioral health services in Dane County, regardless of insurance status, financial status, age, identity, ability or legal status.

Hours: Mon – Fri, 7:45 a.m. – 4:30 p.m.

Fees: None (eligibility requirements)

Public Health Madison & Dane County

(608) 266-4821

publichealthmdc.com/health-services/pregnancy

East Washington Ave Clinic:

2705 E. Washington Ave., 2nd floor

Madison, WI 53704

South Clinic:

2230 S. Park St.

Madison, WI 53713

Public Health Madison & Dane County offers a variety of programs that support pregnant people in Dane County.

Hours: Mon – Fri, 8 a.m. – 4:30 p.m.

Fees: None (eligibility requirements)

Respite Center

(608) 250-6634

risewisconsin.org

The Respite Center provides respite and crisis child care to families experiencing high levels of stress.

Hours: 24 hours a day, 7 days a week

Fees: There is a sliding fee scale for child care but no one is turned away for an inability to pay.

United Way 211

Download the App or Call 211

unitedwaydanecounty.org/get-help/2-1-1/

United Way 211 provides live, local help and resources, right from your mobile device.

Hours: 24 hours a day, 7 days a week

Fees: None

Well Badger Resource Center

(800) 642-7837

wellbadger.org

Well Badger Resource Center helps connect people, pregnant people, families, adolescents, children and health professionals with health care services and resources throughout the state.

Hours: Mon – Fri, 7 a.m. – 6 p.m.

Fees: None

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Group Health Cooperative of South Central Wisconsin (GHC-SCW)
MK19-99-3(12.23)O - Updated December 2023

 **Group Health Cooperative**

of South Central Wisconsin