

BC WOMEN'S
HOSPITAL+
HEALTH CENTRE
Provincial Health Services Authority



CARING FOR YOURSELF

AFTER THE LOSS OF YOUR BABY

BCWOMENS.CA



We are deeply sorry for your loss

This booklet provides information on what to expect physically and emotionally as you deal with the immediate stages of grief in the hours, days and weeks after giving birth.

This booklet is a companion to the bcwomens.ca website. Keywords have been highlighted in each section under “resources + support” to help you find related information.

**BC WOMEN'S
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FOR MORE DETAILED
INFORMATION PLEASE VISIT:
BCWOMENS.CA/HEALTH-INFO

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"It seems strange to just go on now, and sometimes feel like I will always be sad, or if I am not sad, then I am just pretending."

Danielle



AFTER THE LOSS OF YOUR BABY

Experiencing a stillbirth or the loss of your newborn is traumatic and devastating. In the days, weeks and months ahead you may feel overwhelmed by feelings of shock, numbness, sadness, and disbelief. It is important for you to have support and information to help you through this painful time as you try to make sense of what has happened.

Intense grief is a natural response after your baby dies; however every person's experience of grief is different. You and your partner have a right to grieve in your own ways and at your own pace. There is no right or wrong way to feel during this time and any feelings you may have are okay.

Grief may affect you both physically and emotionally. You may notice frequent changes in mood and that you cry often and easily. It is natural to replay events in your mind and wonder what could have been different.

- Lonely or isolated, thinking that others do not understand your feelings
- Worried this will happen again
- Guilty or responsible
- Angry
- Exhausted
- Fragile and not able to manage

You may also feel:

- You are 'losing your mind' and that simple things don't make sense anymore
- You are 'living in a fog'
- You are unable to cope with ordinary everyday tasks and have difficulty concentrating, remembering things, or making decisions
- You have a desire to be alone and avoid even close family or friends
- The future holds no hope or joy

COPING WITH GRIEF

We want you to know you are not alone and there is support available to help you during this difficult time. There are also things you can do that may help you cope with your loss.

Take time to grieve. Pay attention to your feelings and accept them, however painful. Do not try to shut them off. Allow yourself to cry freely. You can also take a break from grieving; this does not mean you are being disloyal to your baby.

Find a positive outlet. Creative activities allow you to get in touch with and express your feelings. You may wish to create a baby album, plant a tree or garden in memory of your baby, write in a journal, play music, paint, or draw. If you choose, you can send birth announcements to family and friends; raise money for a specific charity or make a charitable donation in your baby's name. Spiritual or religious practices, poetry, music, art, reading, gardening, volunteer work, and physical exercise all offer opportunities for peace and healing during this difficult time.

Put off major decisions. Try to delay major life decisions such as changing jobs or moving during the early stages of grief. When you are feeling better, you may feel differently about these decisions.

Reach out to others. Although you may not feel social, don't be afraid to lean on family and friends for practical and emotional support. When you are ready, it can also be healing to offer support to others who are grieving or experiencing difficulties. Random acts of kindness are a wonderful way to honour the memory of your baby.

Have compassion towards yourself and others. Do not blame yourself if you or others feel you are not 'getting over it' fast enough. Be as gentle and forgiving with yourself as you would be with a friend or family member grieving the loss of a loved one. As you begin to heal, think about how you can best care for your physical, mental, emotional, and spiritual wellness.

MENTAL, EMOTIONAL + SPIRITUAL WELLNESS

Hormonal changes can lead to rapid mood swings, frequent crying, or difficulty sleeping; these usually do not require medical treatment.

How you can help yourself

- Eat a well-balanced, nutritious diet
- Move your body every day (walking, stretching)
- Sleep and rest when you can
- Ask family, friends, and healthcare providers for help when you feel overwhelmed or have mood swings

RESOURCES + SUPPORT

Visit bcwomens.ca and search for these topics:

- [After the loss of your baby](#)
- [Social Work](#)
- [Reproductive Mental Health](#)
- [Eating well](#)
- [Physiotherapy](#)

Social Work
604-875-2149

Perinatal Loss
Support Group
604-875-2619

Reproductive Mental Health
604-875-2025

Many healthcare providers can be contacted 24 hours per day. Reach out to your healthcare provider regardless of the time of day for support and information.

Remember you are not alone. Use the following strategies to help you balance your mental, emotional and spiritual wellness.

Share your feelings. Allow yourself to express your emotions in as many ways as possible. Talk to friends, family members, or elders you trust. Let them know how you feel and what you need. Be honest with them if you are not ready to talk about your feelings.

Sometimes choosing a spokesperson to share news and information on your behalf can help, particularly with coworkers and your wider circle of friends. If you are not ready to talk about your feelings, let your family and friends know. When talking is hard, you may find writing or other forms of expression such as singing, dancing, deep breathing and making art helpful.

Be patient with your partner. Everyone experiences grief differently. Respect your partner's way of grieving and their timetable. If your partner is not showing grief in the same way you are or does not wish to share their feelings, it does not mean they are not grieving deeply. Try to give them time to grieve at their own pace.

Connect with a grief support group or counsellor. Sometimes it is easier to talk to someone you do not know than it is to share with a friend or family member who may also be grieving, or who may have their own ideas about how you should grieve. Participating in an in-person or online pregnancy and infant loss support group can also be helpful. Many people form deep bonds with others who have shared a similar experience and understand how it feels to lose a baby.

To join our biweekly, in-person Perinatal Loss Support Group call 604-875-2619.

Contact your healthcare provider for support if you continue to experience these feelings without improvement over time.

Your health care provider can assess for depression or other conditions which may make you feel:

- Sad or anxious
- Irritable or angry
- Guilty or worthless
- Hopeless or overwhelmed
- It is difficult to care for yourself or manage daily activities

Get help immediately if you are having thoughts of harming yourself or someone else.

**CALL 911 or GO TO A HOSPITAL
EMERGENCY ROOM**

**CALL THE FREE PROVINCIAL
DISTRESS LINE**

1-800-784-2433



CARING FOR YOURSELF

Experiencing the loss of a baby is life-changing. The hours, days and months following a stillbirth or newborn loss can be especially difficult. Delivering a baby regardless of the outcome affects the whole family physically, emotionally and mentally. It is important for everyone to take care of themselves during this time. As the person who gave birth you can expect some specific physical changes to your body. It is important to care for yourself despite your grief.

YOUR BODY

HAND HYGIENE

Hand-washing is one of the most effective ways to prevent infection. Wash with soap and water, or use hand sanitizer to prevent infection as you tend to your wounds and care for yourself.

BELLY

Cramps (after pains) are common after birth as your uterus contracts to return to its regular size. Cramping is often more intense when expressing milk. It takes about 6 weeks for your uterus to return to normal size.

To manage your cramps, take ibuprofen (Advil, Motrin) or acetaminophen (Tylenol).

If you had a c-section (caesarean) birth you may have staples or stitches in your lower abdomen. Staples may be taken out before you leave the hospital; stitches will dissolve on their own within 2 weeks. It is common to feel tender and numb around the incision (cut).

How you can help yourself

- Keep your incision clean and dry
- Shower using milk soap and warm water and only pat yourself dry

RESOURCES + SUPPORT

Visit bcwomens.ca and search for these topics:

- Social Work
- Postpartum mood
- Eating well
- Caring for yourself
- Physiotherapy
- Reproductive Mental Health

Free Provincial Distress Line
1-800-784-2433

“We lost our daughter at 3 and a 1/2 months old. You never move on from losing a child. You will always miss them and yearn to be able to celebrate all their milestones that were to come. It is inevitable that you will have your good days and your bad ones.”

Heather



- Give yourself time to heal by resting and not doing too much
- Try not to lift anything heavy (approx. 10 lbs) until after your incision heals
- Do not drive until you are able to move easily and without pain; driving may require sudden movements that cause discomfort

Call your healthcare provider if you had a c-section and notice any of the following:

- Redness around the incision (cut)
- Leaking from the incision
- Bleeding from the incision
- Opening of the incision
- Worsening pain
- Fever greater than 38°C or chills

BLADDER

Having a baby can stretch and weaken the pelvic floor and occasionally damage nerves controlling the bladder. Leaking urine is common but most problems with leaking go away within 3 months of delivery when your body heals.

How you can help yourself

- Empty your bladder frequently in the first few days after delivery
- Attend the postpartum physiotherapy class at BC Women's to learn how to find your pelvic floor muscles and do muscle strengthening exercises correctly

Call your healthcare provider if you have

- Severe pain when urinating
- Constant leaking
- Urine leaking for more than 6 weeks after delivery

BOWELS

You may feel blocked or constipated the first few days after delivery.

How you can help yourself

- Drink lots of water and eat high-fibre foods
- Take stool softeners (only use these for 5 days)
- Talk to a BC Women's physiotherapist about pelvic floor retraining

Call your healthcare provider if you have

- Not had a bowel movement for more than 3 days after delivery
- Ongoing problems with constipation
- Are unable to control your stool

HEMORRHOIDS

Swelling near your rectum/anus. It is common to develop hemorrhoids after delivery, especially after a vaginal delivery.

How you can help yourself

- Use a hemorrhoid cream
- Avoid straining during bowel movements
- Rest lying down to relieve pressure and reduce swelling or pain
- Take a sitz bath (sit in water up to the hips) for 10 minutes, 3 times a day starting 24 hours after delivery

Call your healthcare provider if you

- Blood in your stool (poo)
- Painful hemorrhoids

BLEEDING

Vaginal bleeding can last up to 6 weeks following delivery. For 2-3 days after delivery, the blood will be bright red and the flow heavy. Bleeding will slow down and change to a reddish-brown colour, then a pinky-white colour before it stops. Exercise may cause increased bleeding. This is common and not cause for concern.

How you can help yourself

- We recommend using sanitary pads; we do not recommend using tampons
- If you had a vaginal tear, change your pad every 4 hours to reduce the chance of infection

Call your healthcare provider if you have

- Bright red, heavy bleeding even when resting
- Blood clots larger than a loonie over several hours
- Bleeding that fills a large pad within 1 hour
- Bleeding that lasts beyond 6 weeks

VAGINA

You may have had vaginal tearing during delivery, or an episiotomy (cut) requiring stitches. Your vaginal area will take time to heal. It is common to feel tender and sore for a few days or longer. Stitches will dissolve on their own.

How you can help yourself

- Place a cold compress or frozen sanitary pad wrapped in a thin cloth on the sore area for 10 minutes at a time for relief
- Have warm sitz bath (sit in water up to the hips) for 10 minutes, 3 times a day to ease pain
- Take ibuprofen (Advil, Motrin) or acetaminophen (Tylenol) for pain
- Rest lying down to relieve pressure and reduce swelling

Call your healthcare provider if you have

- Vaginal pain that is getting worse
- Bad smelling discharge (fluid coming out of your vagina)
- Bleeding that fills a large pad within 1 hour



NUTRITION + EXERCISE

Start moving right away after you give birth and increase your activity gradually. Balance rest with activity. It takes time to heal.

Nourish your body. You may not feel like eating when you are grieving or, you may want to eat more than usual. However you are feeling, try to choose healthy foods to support your physical and emotional health.

How you can help yourself

- Ask for help with grocery shopping or meal planning; dropping off a meal or healthy snack can be a simple way for friends and family to show they care
- Visit Eating Well on bcwomens.ca to learn more

Exercise. Grief causes stress. Exercise can help you to relax and reduce stress. Listen to your body and give yourself a chance to regain your energy. When you are ready, exercise may help with the emotions you are feeling.

How you can help yourself

- Choose a form of exercise that you enjoy such as walking or yoga
- You can do more intense exercise when you are ready

Physiotherapists are a useful resource post-partum. **Call our physiotherapy department at 604-875-2126** to learn more about healing after pregnancy and/or delivery.

SLEEP

Normal sleep patterns can be affected when you are grieving a loss. You may:

- Find it difficult to fall asleep
- Feel that constant thoughts of your baby or specific issues related to your loss prevent you from falling sleep
- Find yourself waking up frequently during the night
- Sleep fitfully or have disturbing dreams
- Wake up not feeling refreshed
- Feel you are sleeping too much

Sleep is an important part of the recovery process but it is common for people who are grieving to experience difficulty sleeping or notice changes in their sleep patterns. For most people, this is temporary and the issue resolves itself over time.

How you can help yourself

The best option is to engage in activities that help relax you:

- Drinking chamomile tea
- Drinking warm milk and honey
- Writing in a journal
- Reading or meditating
- Eliminating screen time for at least 30 – 60 minutes before bed
- Avoiding caffeine, sugar and carbohydrates for several hours before bed
- Practicing gratitude

You can find sleep remedies online, such as mindfulness apps, and your healthcare provider can also be a good source of information.

Whether your problem is falling asleep or staying asleep, try not to force sleep by staying in bed, but rather get up and do something relaxing. This could mean listening to music, reading, doing a puzzle or practicing yoga. Try to avoid electronic devices as these may be more stimulating than relaxing.

Sleeplessness can be caused by grief, but it can also be a symptom of depression.

Call your healthcare provider if

- Your sleep problems persist
- Your sleep interferes with your ability to function
- Difficulty sleeping is accompanied by other signs of depression

SEX + BIRTH CONTROL

Some people do not want to be sexual when they feel sad; others find comfort in physical closeness. Both feelings are common. Physically, it is safe to have intercourse or other kinds of sex once your stitches or tears have healed and vaginal bleeding has lessened.

If you are not emotionally ready to be sexual, talk to your partner. Your partner may or may not feel the same way but it is important for both of you to share your feelings. Cuddling, hand-holding and back rubs are other ways to feel close.

How you can help yourself

- Use a lubricant during sex to reduce vaginal dryness
- Express milk from your breasts before sex if you want to lower the chance of your breasts leaking during sex
- Explore other ways to be intimate with your partner if you do not want to be sexual

Call your healthcare provider if you

- Have severe, ongoing pain during sex more than six weeks after delivery
- Are worried about being sexual again, or if you don't feel interested in sex

The decision to become pregnant again is personal. You can become pregnant soon after your delivery even if you are expressing milk or before your period starts again. You may wish to be pregnant again or you may want to take time before becoming pregnant again. These feelings are normal. Talk to your healthcare provider about pregnancy planning and birth control options.

It is common to feel anxious when you are pregnant after a loss, but counselling or additional support may help you manage your anxiety. Another child will not replace the one you lost. If you decide to have another baby, think of them as their own person. Every one of your children will have a unique and special place in your heart.

“These are my white tears. Every drop I pumped in the hope that [she] would be able to come home one day and I could feed her a long time. Since she is at rest in eternity, these tears can go on to bless other babies who need a fighting chance with the gentlest food source they can have. There is so much love put into this. This is in honour of her”.

Sarah



LACTATION AFTER LOSS

The arrival of your breast milk after the loss of your baby can be difficult. Throughout your pregnancy, your breasts grow and change to prepare to feed your baby. This may begin as early as 12 weeks of pregnancy. Even though your baby has died, your hormones continue to signal to your body to produce milk; initially your breasts will produce colostrum or early milk which is usually yellow in colour. Then, about 2 to 5 days after giving birth (unless you dry up your milk), your breasts will produce milk that looks bluish white and increases in volume.

This milk usually comes in after you have left the hospital. When your milk comes in, your breasts will feel very full, and the pressure in your breasts will become uncomfortable. Some bereaved parents find the presence of milk upsetting and want to dry it up as quickly as possible, while others find it to be a comforting reminder of their ability to care for the baby they so loved and wished for. There is no right or wrong way to feel and it is your choice whether to donate your milk or dry it up.

RESOURCES + SUPPORT

Visit bcwomens.ca and search for these topics:

- Provincial Milk Bank
- Breastfeeding clinic
- Lactation after loss

Breastfeeding clinic
604-875-3743

Lactation consultants
604-975-2282

DONATING MILK

Some people find that donating their baby's milk to a milk bank helps their grieving process. Donated milk may be life saving for other fragile and ill infants.

HOW TO START

After you give birth, begin expressing milk by hand about every 2-3 hours during the day and at least once at night. Use a pump once your milk production moves beyond a few drops. Collect each milk expression in a separate container – either hospital containers or milk

storage bags. If you need milk bags **call the Provincial Milk Bank at 604-875-3743**. Ask your nurse to show you how to use a breast pump.

If your milk supply is already established when your baby dies, continue pumping 6-8 times each 24 hours to maintain milk production. Expressing milk increases oxytocin levels in the early weeks which can help with your mood and decrease your risk for depression.

SCREENING FOR MILK DONATION

All donors, including bereaved donors, are screened to ensure suitability for donation. You will be asked verbal and written questions and have some blood tests. Visit bcwomens.ca Provincial Milk Bank and complete the Donor Expression of Interest form. You can also ask for the form before you leave the hospital. Keep in mind that most medications given at the time of birth do not prevent you from donating milk but check with the Milk Bank before using any herbal remedies, over-the-counter medications or dietary supplements to find out if they are ok to use while donating milk. Once screening is completed, any amount of milk that you wish to donate is accepted with gratitude.

DELIVERING YOUR MILK TO THE MILK BANK

Once your screening is complete, the Milk Bank will call you to discuss where the closest drop-off depot is. If your milk is in storage at a BC hospital NICU, it can be sent directly to the milk bank by that hospital.

HOW TO STOP DONATING

How long you continue to express and donate milk is up to you. Some prefer to donate only once, others donate for a period of time. Once you decide to stop donating, you need to slowly reduce your milk production by decreasing the number of times you express or pump each day. To do this naturally, follow the instructions in *Drying Up Your Milk*.

DRYING UP YOUR MILK

You may wish to dry up your milk supply. The most comfortable and low risk method is to allow your milk to dry up over a period of time.

NATURAL METHOD

When your baby is stillborn, here are some suggestions:

- Wear a sports bra (stretchy material) to provide support. Binding your breasts is not recommended and is very uncomfortable as your breasts will get very full and often hard. Binding can also lead to a breast infection
- Let the milk leak into your bra – use breast pads to absorb the leaking milk. Change the pads once they become wet
- If breasts are very full, express only enough milk to be comfortable
- Use warm or cold compresses for comfort. Cold reduces swelling of overly-full breasts.
- Take pain medication such as ibuprofen



- Check your breasts for signs of infection (redness, tender areas) and call your healthcare provider if you develop flu-like symptoms
- Drink when you are thirsty; restricting fluids does not decrease milk production

If your baby dies after you have established a milk supply, you need to gradually stop expressing or pumping until lactation ends on its own. This may happen over a week or so. Leaving milk in the breasts causes milk production to slow and eventually stop.

1. Start by dropping one pumping session in the middle of the day
2. Continue to reduce the number of pumping sessions until you are only pumping once in the morning and one at night
3. The evening session is usually the last pumping session you will stop

If you have a lot of milk, gradually shortening a pumping session will help ensure your breasts are not sore and you are not uncomfortable. Pay attention to how full your breasts are and pace your expressing or pumping so you do not get blocked ducts.

Stopping pumping or expression sessions abruptly is very uncomfortable and can lead to blocked ducts. If you have flu-like symptoms or reddened painful breasts, you may have a breast infection (mastitis); contact your healthcare provider to confirm and get help.

USING MEDICATION

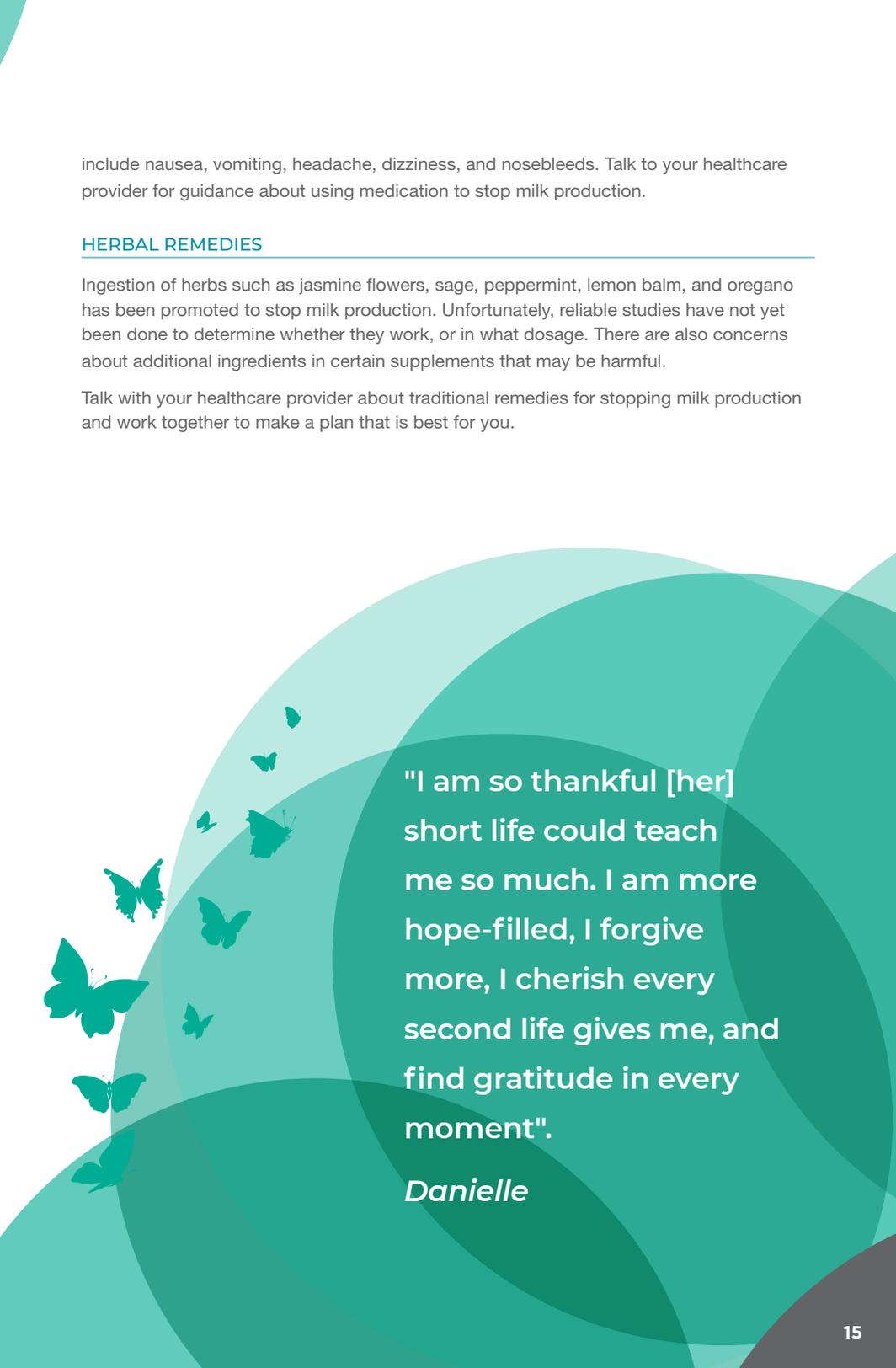
Using medication, especially in the first few days after birth, means you will not have to deal with ongoing milk production. Prescription medication used to dry up breast milk works by interfering with the production of prolactin, the hormone that causes milk production. Cabergoline is currently prescribed. Possible side effects from Cabergoline

include nausea, vomiting, headache, dizziness, and nosebleeds. Talk to your healthcare provider for guidance about using medication to stop milk production.

HERBAL REMEDIES

Ingestion of herbs such as jasmine flowers, sage, peppermint, lemon balm, and oregano has been promoted to stop milk production. Unfortunately, reliable studies have not yet been done to determine whether they work, or in what dosage. There are also concerns about additional ingredients in certain supplements that may be harmful.

Talk with your healthcare provider about traditional remedies for stopping milk production and work together to make a plan that is best for you.



"I am so thankful [her] short life could teach me so much. I am more hope-filled, I forgive more, I cherish every second life gives me, and find gratitude in every moment".

Danielle



RESOURCES + SUPPORT

We hope this booklet will help with healing after your loss. Healthcare providers at BC Women’s Hospital are here to support you. Please reach out to us when you have questions or need information. The following resources will help you find answers to questions and provide support.

VISIT BCWOMENS.CA AND SEARCH THE FOLLOWING TERMS FOR MORE INFORMATION:

• Social Work	• Caring for yourself
• After the loss of your baby	• Physiotherapy
• Lactation after loss	• Eating well
• Breastfeeding clinic	• Reproductive Mental Health
• Provincial Milk Bank	• Postpartum mood
• Indigenous Patient Liaisons	• Online Resource Library
• Miscarriage	• Spiritual Care

CALL BC WOMEN’S SERVICES FOR SUPPORT

• Social Work	604-875-2149
• Indigenous Patient Liaisons	604-875-2348
• Perinatal Loss Support Group	604-875-2619
• Reproductive Mental Health <i>*doctor’s referral required</i>	604-875-2025
• Physiotherapy	604-875-2126
• C.A.R.E. Program Short term counselling for patients who have been admitted through the CARE Program for dilation and evacuation (D&E) or induction.	604-875-2022

OTHER SUPPORT SERVICES IN BC

• BC Bereavement Hotline	604-738-9950 or 1-877-779-2223
• Chimo Crisis Line	604-279-7070
• Empty Cradle	604-525-4347
• Fraser Health Crisis Line	604-951-8855
• KUU–US Crisis Line 24/7 crisis line for all Indigenous people in BC	1-800-588-8717 across BC; 250-723-4050 on Vancouver Island
• Lower Mainland Grief Recovery Society	604-696-1060
• SUCCESS Chinese Helpline	604-270-8233 (Cantonese); 604-270-8222 (Mandarin)
• Vancouver Coastal Health Distress Line	604-872-3311 or 1-866-661-3311
• The Compassionate Friends of Canada	1-866-823-0141

PRIVATE COUNSELLING

- CounsellingBC: counsellingbc.com
- Living Through Loss: Counselling Society of BC: livingthroughloss.ca

SUPPORT GROUPS

- **Perinatal Loss Support Group**
BC Women's Hospital + Health Centre
Phone Contact: 604-875-2619
- **Empty Cradle**
Phone Contact: 604-525-4347
Email Contact: emptycradle@telus.net

OTHER WEBSITES

POSTPARTUM SUPPORT

Pacific Postpartum Support Society: postpartum.org

MISCARRIAGE, STILLBIRTH + NEONATAL LOSS SUPPORT SERVICES

Pregnancy and Infant Loss Awareness Day: october15.ca

Glow in the Woods: glowinthewoods.com

MISS Foundation: missfoundation.org/grief-education

TERMINATING PREGNANCY FOR MEDICAL REASONS

Terminating a wanted pregnancy for medical reasons is a traumatic and often misunderstood form of pregnancy loss. You may find comfort in connecting with other parents who have experienced a similar loss.

endingawantedpregnancy.com
aheartbreakingchoice.com

LOSS OF ONE OR MORE IN A MULTIPLE PREGNANCY

Centre for Loss in Multiple Birth (CLIMB); climb-support.org
Twin Loss New Zealand: twinlossnz.wordpress.com

RESOURCES FOR CHILDREN

kidsrief.ca

REMEMBRANCE PHOTOGRAPHY SERVICES

Remembrance photographers are available to create a treasured keepsake of your baby following a loss. Ask your social worker or nurse to provide you with contact information or to help arrange photography services.





**BC WOMEN'S
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**Provincial Health
Services Authority**
Province-wide solutions.
Better health.

Special thanks to the bereaved parents who generously provided feedback on this booklet in special memory of their babies. This booklet was a partnership between the Maternal Newborn Program and Population Health Promotion. Thanks to the healthcare providers at BC Women's including Reproductive Mental Health, and advisors at Perinatal Services BC who contributed their content expertise to make this booklet a reality.

bcwomens.ca

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BC Women's Hospital + Health Centre
Maternal Newborn Program