Ready, Set, Baby
A guide to welcoming your new family member
Ready, Set, Baby

A guide to welcoming your new family member
Welcoming your new family member

- Ready Set Baby is designed to help you get ready for your baby, even if you’ve had a baby before.

- We will have a conversation about infant feeding, and provide you with the latest science and recommendations, so that you can make informed decisions.

- You will learn about the best ways to be cared for at the maternity center after delivery, and what to expect for once you arrive back home.

INSTRUCTIONS FOR THE EDUCATOR
Please use your own words wherever possible to make the education conversational. Talk with mothers, not at them. This will help them to listen well and stay engaged in the educational conversation. Important words are bolded.

ℹ️ This icon represents a note, rather than suggested text.

Each content page contains the following components:

- **Title and Conversation Starter** (suggested question for engaging mothers at the beginning of each topic)
- **Main Message** (suggested text about the most important idea to convey)
- **Points to Cover** (suggested text: includes any definitions, rationale and other helpful information to convey the topic accurately to mothers)
- **Teachable Moment** (not suggested text: this section highlights an opportunity to teach mothers a particularly poignant fact related to the topic)
Let’s get started!

**Staying healthy during pregnancy and beyond**

**Infant feeding - Find out the facts!**

**While you are at the maternity center**
- Your labor and delivery
- Skin-to-Skin
- Rooming-In
- Feeding On Cue/ delayed pacifier use

**Breastfeeding information & tips**
- Early and exclusive breastfeeding
- Benefits for mothers and babies
- Position and latch
- Making and maintaining your milk supply
- Signs your baby is getting enough milk

**Back home with your new baby**
- The first few weeks
- Preparing for other caregivers
- Just for partners
- Addressing common concerns
- Resources for support
Let’s get started!

**Breastfeeding information & tips**
- Early and exclusive breastfeeding
- Benefits for mothers and babies
- Position and latch
- Making and maintaining your milk supply
- Signs your baby is getting enough milk

**Staying healthy during pregnancy and beyond**

**Infant feeding - Find out the facts!**

**While you are at the maternity center**
- Your labor and delivery
- Skin-to-Skin
- Rooming-In
- Feeding On Cue/ delayed pacifier use

**Back home with your new baby**
- The first few weeks
- Preparing for other caregivers
- Just for partners
- Addressing common concerns
- Resources for support
Staying healthy during pregnancy and beyond
Staying healthy during pregnancy and beyond

What are some things you do to stay healthy? Do you have concerns about your current lifestyle?

MAIN MESSAGE

Overall eating recommendations don’t change when you’re pregnant but there are some important things to consider. In addition to eating a balanced and healthy diet, be sure to take a daily prenatal vitamin.

POINTS TO COVER

- Always wash your hands well before making food or eating.
- Avoid deli meats, undercooked foods, and unpasteurized soft cheeses like blue cheese - they can cause illness.
- Limit your intake of large fish to avoid ingesting mercury. Refer to page 3 of the patient booklet for a list of large fish.
- If your provider says it’s okay for you to exercise, aim for at least 30 minutes every day.
- Weight gain recommendations vary based on your current weight. All women need to gain weight during pregnancy.

TEACHABLE MOMENT

Many women have questions once they become pregnant about their lifestyle choices and whether or not they need to change their diet or behaviors. Use this time to discover what concerns she may have about her lifestyle.

- Some medications can be safely taken during pregnancy and most are safe with lactation. Suggest she ask her healthcare provider about her medications soon if she hasn’t already.
- Refer her to additional resources, if necessary, about things like smoking, alcohol, marijuana, and other street drugs.
- Refer to the last fact in the section titled Infant Feeding - Find Out The Facts! for information about breastfeeding and medications and/or smoking, if relevant.

INFANT FEEDING - FIND OUT THE FACTS!
What have you heard about infant feeding?
What have you heard about infant feeding?
Have you or anyone that you’ve known breastfed before?

MAIN MESSAGE
Each of us have a unique opinions on infant feeding formed from our own experiences and those of others we know. As part of your healthcare team, we want you to know the facts.

POINTS TO COVER
• Knowing the facts will help you make informed choices that are best for your family. Together, we can help you meet your own personal infant feeding goals.

• Take a look at the facts on pages 4 and 5 of the booklet - do any of these facts surprise you? Let’s talk about the ones that caught your attention.

i Refer to Pages 4-5 of the patient booklet, “Find Out the Facts!” Allow time for review and discussion. Share with her that these facts are based on the most common misbeliefs parents have - she is not alone.

TEACHABLE MOMENT
This discussion is perhaps the most important part of this counseling curriculum. Please allow adequate time for her feelings to be revealed. Establish a mutual trust through unbiased active listening. What you learn will help you tailor the education you provide to her unique needs.

• Listen attentively and thank her for sharing what she’s heard about breastfeeding.

• Be sure to validate her experience and affirm that you heard what she shared.

• Remember there are no right or wrong opinions - corrections may stifle expression.

• Do not judge her comments from your own experience or perception. Just listen and affirm.

• Remember, skin-to-skin, rooming-in, and feeding on cue are important best practices for all babies, regardless of how they are fed.

PREPARING FOR YOUR MATERNITY CENTER STAY

Infant Feeding
Preparing for your maternity center stay
Your labor and delivery
Your labor and delivery
What have you heard about the early stages of labor?

MAIN MESSAGE
There are many ways to help cope with the pain of labor that do not involve medication. Many women find it easier to cope with early labor at home.

POINTS TO COVER
• Call your provider when labor starts, and follow their guidance for when to come into the hospital.
• To reduce the discomforts of early labor, try deep breathing, movement and walking, massage, heat or cold compresses, and continuous support from someone you trust.
• A Doula is someone who provides continuous support throughout labor and delivery.
• Before you deliver, talk to your healthcare provider about your options for pain relief during labor. Know the benefits and concerns for each method.

TEACHABLE MOMENT
Non-medicated vaginal birth with immediate skin-to-skin contact is optimal for getting breastfeeding off to a good start. Women who have received epidurals or other anesthesia can still breastfeed. Encourage mothers to ask for extra support in the beginning, as it may take longer to get breastfeeding started.

US statistics suggest that in 2016, 73.6% of mothers giving birth received epidurals. Younger mothers, those with more education, and those with fewer children are more likely to receive epidural anesthesia.

Be sure mothers know that there are medication-free ways to help cope with the pain of labor, and encourage her to use these methods as a first line of comfort measures, even if other medications are planned.
Skin-to-Skin contact
Keep your baby warm and secure
Skin-to-Skin Contact
Let’s imagine you’ve just given birth. How do you think your baby will feel?

MAIN MESSAGE
Skin-to-skin keeps your baby warm and secure - it’s the best place for your baby to be after birth, with as little interruption as possible. Your baby should be placed skin-to-skin with you right at the time of birth.

POINTS TO COVER
• Immediate skin-to-skin means your newborn baby is placed on top of you after being dried (with a blanket to cover).
• How do you feel about having your naked baby placed right on top of you after delivery? Validate her response.
• The cream on their skin helps protect them from infection.
• Skin-to-skin helps with bonding, makes the early breastfeeds go easier, and helps to calm your baby.
• It also helps steady their breathing and blood sugars. Be sure you can always see your baby’s face to look for good color and normal breathing.

TEACHABLE MOMENT
Some mothers may have mixed feelings about having their baby on their belly or chest before they’ve both been cleaned up. Assure these moms that others often have similar concerns, and then share why this practice is recommended and practiced in the best hospitals.

While skin-to-skin is most important immediately after delivery during those first hours, the benefits extend beyond the immediate postpartum period. Encourage her to spend as much time skin-to-skin as possible in the early weeks. Partners can practice skin-to-skin, too! It is a great way for them to bond with their baby.

Encourage moms to inquire with their provider about whether skin-to-skin would be possible in the event of a cesarean section.
Rooming-In during your stay
Rooming-In
How do you feel about having your baby with you 24/7 while you’re at the hospital?

MAIN MESSAGE
It’s good for you and your baby to stay in the same room throughout your entire maternity stay, unless a medical need requires separation.

POINTS TO COVER
- Rooming-in helps you learn how to care for your baby before you get home. It also helps you learn to respond to your baby’s feeding cues and feed right when your baby is ready.
- It also makes bonding easier - smelling you and hearing your voice help to make your baby more secure and comfortable.
- Even the first bath can be done in your room. It is good to delay the first bath until your baby is used to life outside the womb.
- Have you considered who could stay with you at the hospital to help support you? It should be an adult who is a trusted family member or friend. If you ever feel unable to safely care for your infant, ask hospital staff for help.

TEACHABLE MOMENT
It is natural for some mothers, especially first-time mothers, to have some anxiety about suddenly caring for an infant 24/7. **Assure mothers that they can use this time at the maternity center to learn how to care for their infants**, while nurses are nearby, ready to help and educate as needed. Encourage mothers to be sure to tell a staff member if they feel unable to safely care for their infant. Help mothers learn to **self-advocate** for the practices they know to be beneficial. When they take part in the decisions made about their baby’s care, they will feel more confident in their parenting skills when they leave the maternity center.

FEEDING “ON CUE”

Maternity Center
Feeding “On Cue”
Follow your new baby’s lead

DAY 1
= grape.
5-7ml

DAY 3
= cherry tomato.
22-27ml

DAY 7
= strawberry.
45-60ml

MONTH 1
= lime.
80-150 ml
Feeding "On Cue"
How will your baby tell you when he or she is hungry?

MAIN MESSAGE
Babies communicate with easy-to-recognize signs that tell us when they’re hungry or full. Learn your baby’s signs to know when to begin and end a feeding: watch your baby, not the clock!

TEACHABLE MOMENT
Encourage mothers to trust the signs they notice in their infants. Even if her baby just fed less than an hour ago when she shows cues of hunger, it’s still okay to feed again. While in the maternity center, a baby’s tummy holds only about a teaspoon full! Help her to trust that frequent and small amounts throughout the day and night are the best way to hydrate and satisfy her newborn.

Moms should calm crying newborns before trying to feed so they are more organized. She can try cuddling, rocking, talking or humming to her baby, or skin-to-skin contact.

POINTS TO COVER
• Let’s look at page 9 together for some of the common signs babies show for hunger and fullness. Refer to the patient booklet.
• Responding to hunger cues prevents underfeeding your baby. Responding to fullness cues prevents overfeeding.
• Feeding “On Cue” helps your baby feel safe, cared for, content, and satisfied. And, it helps bring in a good milk supply!
• Crying or very fussy babies are disorganized and will have a harder time eating well. Try to calm your upset baby before feeding, or start feeding before your baby becomes upset.
Early and exclusive breastfeeding
Your milk and nothing else
Early and exclusive breastfeeding

How do you feel about giving only your milk and nothing else to your baby?

MAIN MESSAGE
Breastfeeding soon after birth helps you to recover quicker and slows bleeding. Doctors recommend that you feed only your milk for the first 6 months.

POINTS TO COVER
• Exclusive breastfeeding protects your baby from sickness and disease, and it helps keep your milk supply up.
• Human milk is the perfect nutrition for your baby. Refer to your healthcare provider for Vitamin D recommendations.
• Did you know that your milk changes to meet your baby’s needs that very moment? It is a living food that responds to our environment!
• Some moms cannot breastfeed for medical reasons. Some breastfeeding babies may need extra milk for medical reasons. Together, you and your healthcare team will find the best infant feeding plan for your family.

TEACHABLE MOMENT
Once a mother understands what it means to exclusively breastfeed, she may be overwhelmed. Before continuing with the education, listen to how she feels about the idea of exclusive breastfeeding/breastmilk feeding for 6 months. Affirm her feelings and explain that any amount of breastmilk will be beneficial to her baby. Also, explain that while six months is the recommended goal, her goal for exclusive breastfeeding may be less than that, like 6 weeks or even 6 days of exclusive breastfeeding.
Support each mother individually and help her determine her goals for breastfeeding. It is important to offer this knowledge to each mother, even those who plan to formula feed. It is our job as her healthcare team to ensure she has all the information so that her choices are informed.

BENEFITS OF BREASTFEEDING
Benefits of breastfeeding

As you look at the benefits listed on page 11, which of these surprise you the most?

MAIN MESSAGE

We have learned a lot in recent years about how beneficial breastfeeding is not only for the baby, but also for the mother.

POINTS TO COVER

- For you, breastfeeding is associated with lower risk of diseases like diabetes and breast and ovarian cancers.
- For babies, breastmilk is easy to digest and protects them from ear infections and stomach bugs.
- Breastfeeding is convenient and smart - your milk is always warm and ready, and there is nothing to buy or prepare.
- Continuing to breastfeed for at least a year and beyond is good for both you and your baby’s health.
- Breastfeeding is worthwhile, yet it doesn’t come easy for all women. It is a new skill that will take practice and support.

TEACHABLE MOMENT

The benefits of breastfeeding extend well beyond the first year of life. Let her know she may breastfeed as long as both she and her baby desire. Breastmilk continues to provide nutritional and protective benefits to both mom and baby.

There is no recommended time to stop providing breastmilk.

Follow-up milks or staged formulas marketed for infants >6 months and toddlers are costly and high in sugar. The World Health Organization has published concerns stating that follow-up formula is unnecessary and unsuitable as a replacement for breastmilk. Mothers should avoid use of these products.

POSITION AND LATCH

Tips & Information
Position and latch
Laid back position: a great way to start!
Position and latch
Which position looks good to you?

MAIN MESSAGE
A good position helps your baby get a deep latch, or attachment, which prevents nipple damage and pain. A good latch also helps your baby get more milk.

POINTS TO COVER
- **Laying belly-to-belly** helps facilitate your baby’s natural instincts that help him or her to initiate breastfeeding.
- Laid-back breastfeeding is when you lean back comfortably, at a slant, and it’s a great position to try first. If you use upright positions, be sure to lean back once you’ve latched.

**i** Go over each of the other positions pictured on page 12. Point out that page 13 contains tips for latching and getting off to a great start, including instructional videos on hand expression for later use.

- Latching your baby will take practice and patience as you both learn. It is important to be comfortable and relaxed.

TEACHABLE MOMENT
Breastfeeding discomforts are often alleviated when the mother relaxes and leans back comfortably. When babies are able to feel gravity and weight on their front body, they’re able to utilize their instinctive reflexes that help them attach to the breast in a self-organized way.

Emphasize importance of mother’s comfort and patience as she and her baby learn together. It may be worth repeating that breastfeeding is a skill that takes time and support to learn. She will need to be patient with herself and confident that with every challenging experience, she is learning how to best take care of her baby.
Making and maintaining your milk
Move it or lose it
Making and maintaining your milk

What have you heard about the process of making milk for your baby?

MAIN MESSAGE
Your first milk (colostrum) is thick and golden. It comes in very small amounts yet is full of nutrients and immunities - just what your baby needs.

TEACHABLE MOMENT
Many women fear they will not have enough milk. Help mothers trust in the natural process of milk production as a supply and demand phenomenon. As her baby suckles in the early hours and days, her colostrum slowly changes to larger amounts of mature milk (usually over the first 3-5 days). This is often referred to as milk “coming in”, but this is misleading because breasts are not empty before this time and have the right amount of nourishment for the baby.

Assure mothers that frequent feedings of her colostrum is the perfect way to nourish and hydrate her baby. Colostrum will mature to larger quantities with more water content to meet the hydration needs of her baby. Some babies may need extra milk for medical reasons. Introducing formula can decrease her milk supply due to the missed breast stimulation and milk removal.

POINTS TO COVER
- Your milk will change after a few days into larger amounts of mature milk which has more water content.
- When your baby removes milk from your breast, your brain gets the signal to make more milk. Making milk requires frequent feedings (at least 8-12 in 24 hours).
- If you do not remove milk from the breasts, your body will not make more milk, and this can lower your overall potential milk supply. You’ve got to move it or lose it.
- If you are separated from your baby, your nurse can show you how to hand express or pump your milk. There are also video tutorials on page 13 of your booklet.

SIGNS YOUR BABY IS GETTING ENOUGH MILK

• Your milk will change after a few days into larger amounts of mature milk which has more water content.
• When your baby removes milk from your breast, your brain gets the signal to make more milk. Making milk requires frequent feedings (at least 8-12 in 24 hours).
• If you do not remove milk from the breasts, your body will not make more milk, and this can lower your overall potential milk supply. You’ve got to move it or lose it.
• If you are separated from your baby, your nurse can show you how to hand express or pump your milk. There are also video tutorials on page 13 of your booklet.
Signs your baby is getting enough milk
Signs your baby is getting enough milk

What are some things you might look for to know that your baby is getting enough milk?

**MAIN MESSAGE**

There is no need to measure how much milk your baby eats. Keeping track of wet and dirty diapers and weight gain tells you he or she is getting enough.

**TEACHABLE MOMENT**

The perception of insufficient milk is the #1 reason that women stop breastfeeding. It is a normal concern, but it is often unnecessary. Paying attention to the signs listed in the booklet will help her evaluate feedings and prevent unnecessary supplementation or anxiety about low milk supply. That said, a mother’s concerns should be validated, and if she is not confident her baby is getting enough, she should make an appointment with her provider for evaluation.

Refer mothers to page 15 for additional signs to look for, including those that indicate she should get some help. Many mothers don’t realize that babies typically lose weight in the first week of life but should regain their birth weight by 10-14 days of life. **Encourage her to keep her Ready Set Baby booklet to refer to after delivery.**

**POINTS TO COVER**

- It is actually common for babies to lose weight in the first week of life, but they should regain it by 10-14 days.
- Good signs to watch for include:
  - A deep latch that feels like a comfortable tug
  - Steady sucking and swallowing with the whole jaw moving (with short pauses)
  - A content and more relaxed baby after a feeding
  - Breasts feel softer and lighter after a feeding
  - A gradual change in your baby’s poop from greenish black to a lighter color is a good sign (**stools should be pale yellow, soft and seedy by the end of the first week if breastfeeding**).
Let's review what we've learned
These maternity practices matter. WHY?
Reviewing what we’ve learned

MAIN MESSAGE
We’ve gone over a lot of information. Let’s review what we’ve learned by brainstorming reasons why these practices are so important.

POINTS TO COVER
• Let’s take a look together at the list on page 16 in your booklet.

Draw her attention to the questions about the sections you have covered thus far - it may not be all of these if you have split up the education. Once she sees the page, try a question/answer game.

• Let’s try it without looking first, and then we’ll review together. Why is it important to ... [stay healthy, practice skin-to-skin, room-in 24/7, feed on-cue, breastfeed, feed only breastmilk, get a good latch]?

Watch for any confusion and allow time for mothers to clarify any questions they may have about the reasons why to do these practices.

TEACHABLE MOMENT
Reviewing education helps mothers retain the information they are receiving from you. This section is a great place to tailor your education to individual mothers. Use the knowledge you have gained about what this mother knows and is comfortable with to decide which topics to focus the review on. Where does she need extra support and encouragement? Focus there. Did she have concerns or questions about one of the topics? Include that review topic here.
The first few weeks
Changes for the whole family
The first few weeks
What plans have you made for help after delivery?

MAIN MESSAGE
Responding to your new baby’s needs can be challenging in the beginning. Be patient with yourself during this time. It does get easier!

POINTS TO COVER
• Plan to nest in with your family after getting home and limit visitors and phone calls. Give yourself permission to take care of yourself and your baby and do nothing else.
• Taking good care of yourself will help you take good care of your baby. Be sure you get plenty of fluids, foods, and rest.
• Create a network of support BEFORE your baby is born. What friends, neighbors, or family can you ask to help?
• Be mindful of your mood. Some change in mood is normal, but you should ask for help if you experience unusual sadness, worry, anxiety or depression.

TEACHABLE MOMENT
Mothers do better with a lot of support after birth. Talk through her personal situation and encourage her to consider ways to create a network of support. Her neighbors, coworkers, friends, or family may want to lend a helping hand or have recent experience with newborns. Someone could organize daily meal drop-offs, child care for older children, or transportation rides to appointments if necessary. Any family staying with her should be asked to help with household chores so she can focus on herself and her baby.

Mental health during pregnancy and postpartum should not be overlooked. About 15-20% of women experience significant depression or anxiety during this time. Encourage mothers to be mindful of their mood and to seek help for unusual symptoms. She is not alone and with the support of her provider, she can recover and feel well again.
Preparing for other caregivers
Going back to work or school
Preparing for other caregivers
What is your plan for when you go back to work/school?

MAIN MESSAGE
Many women continue to feed only their milk to their babies, even after returning to work or school. Planning ahead will help make things go easier.

POINTS TO COVER
• You’ll want to breastfeed as much as possible while you are with your baby, and pump your milk into a storage container for later use while separated from your baby.
• Pumping while you are away will help you continue to produce enough milk for your baby, and will provide the milk for feedings by other caregivers.
• Many employers provide lactation rooms or a space for mothers to use, and many insurance providers reimburse the cost of a personal breast pump.
• Continuing to breastfeed will mean less sick days for you (because your baby will be sick less often).

TEACHABLE MOMENT
Planning ahead can help this difficult transition go as smooth as possible for new mothers. It is vital that she talk to her supervisor and/or human resource office about her plans for continuing to breastfeed, after taking all of her available leave. If a lactation room isn’t already available, arrangements can be made to create one before she will need to use it.

Empower her with the knowledge that by continuing to breastfeed, she is less likely to miss days from work since her baby is less likely to get sick. There are resources listed in her booklet that she can provide to her employer that explain the laws and the rationale for supporting breastfeeding mothers at work.
Just for partners and loved ones

Breastfeeding is a team effort
Just for partners and loved ones
How do your loved ones feel about breastfeeding?

MAIN MESSAGE
Your loved ones will want to help out after delivery. Tell them ahead of time how to best support you in a way that supports you and your baby to breastfeed.

TEACHABLE MOMENT
It’s important that partners and other loved ones know that breastfeeding is a team effort and that their support is a crucial component to mom meeting her breastfeeding goals. The best support allows the mother and baby to learn breastfeeding together, and helps her recognize when she needs help. Partners or loved ones who are eager to feed the newborn can be encouraged to wait until breastfeeding is going well.

Read her the case study on Page 19 of a man who wanted his partner to formula feed because he wanted to support her in feeding and ‘be a part of the action’. Once he realized the health benefits of breastfeeding, and decided to devote himself to other ways of bonding with his baby.

POINTS TO COVER
• It is important to help partners and family feel included in newborn care since they cannot breastfeed. Share with them the information in your booklet, especially page 19.
• They can do other things to get to know your newborn like practicing skin-to-skin contact, giving baths, holding the baby in a baby-carrier, and learning infant massage.
• Encourage them to learn about breastfeeding, support you in your efforts, and provide comfort to you as you all adjust to the new baby.

COMMON CONCERNS ABOUT YOUR NEWBORN ➤
Common concerns after you are home
Common concerns after you are home

MAIN MESSAGE
Sometimes parents have concerns in the first week or two. Some of the most common concerns are addressed in this booklet. You can read them now and refer to them again once you are home with your baby.

POINTS TO COVER
• Let’s take a look together at the list on Page 20 in your booklet. Allow time for review and discussion.
• Have you considered any of these already?
• Anytime you have concerns about your baby’s health or well being, contact your healthcare provider.
• You may not have any of these concerns, yet it is important to know that many breastfeeding problems are short-lived with the proper support!

TEACHABLE MOMENT
Self-confidence plays a key role in a woman’s ability to meet her breastfeeding goals. Encourage her to take advantage of available support if she runs into difficulties. Many early breastfeeding problems can be resolved with proper support so mothers can achieve their personal infant feeding goals. It’s important that women are empowered to seek help early when they are having concerns.

Encourage her to trust her instincts. If something doesn’t seem right or normal, she should seek help immediately. It is better to have sought help and not end up needing it, than to wait too long to seek help, and put the health of her or her baby at risk.

RESOURCES FOR HELP
Resources for support
Nationwide help at your fingertips
There are many groups and organizations that exist to provide mothers confidential support when they need it most. Many maternity centers have clinics to help with breastfeeding, and your local health department is also a good resource for information and help. You are not alone.

Modern society is missing the support that the “village” lifestyle provided to new mothers. Many women feel alone with many unanswered questions during the early days and weeks of a new baby’s life. Help her realize the importance of seeking out support in her community and asking for help when she needs it. Share any local resources with her.

Your booklet lists national resources, such as toll-free hot-lines for mood disorders, depression or domestic violence.

There are also a lot of breastfeeding related resources available on-line if you are able to access a computer.

Many women find it very helpful to meet with other mothers in their community after birth – do you think it might be nice to hear stories from other mothers?
What questions do you have?
Nationwide help at your fingertips
We would like to thank the W.K. Kellogg Foundation for their generous support of this and other projects that foster a breastfeeding-supportive society. For more information please visit breastfeeding.unc.edu.

These materials were developed by the Carolina Global Breastfeeding Institute with collaboration from students in the Mary Rose Tully Training Initiative and lactation consultants at N.C. Women's Hospital.

Design: nancyframedesign.com
Version 3. English April 2018