

Important Numbers

NORMAL WORKING HOURS (8 a.m. to 4 p.m.)

If you need to be seen during normal working hours, please call the clinic you have been assigned to and book and acute care sick call appointment:

Medical Home Port: Base: 727-3618 or 727-3606

Spanish Cell: 956-82-3618 or 3606

US Cell: +34 956-82-3618 or 3606

OG/GYN Clinic: Base: 727-3511 or 727-3512

Spanish Cell: 956-82-3511 or 3512

US Cell: +34 956-82-3511 or 3512

AFTER NORMAL WORKING HOURS, HOLIDAYS, and WEEKENDS:

If you are **before 20 weeks gestation**, please report to the Emergency Room:

Emergency Room: Base: 727-3307 or 727-3308

Spanish Cell: 956-82-3307 or 3308

US Cell: +34 956-52-3307 or 3308

If you are **after 20 weeks gestation**, please call or report to the Maternal Child Infant Unit (MCI).

****This is the Labor and Delivery Unit****

MCI: Base: 727-3600 or 727-3601

Spanish Cell: 956-82-3655 or 3656

US Cell: +34 956-82-3655 or 3656

* For questions during working hours please feel free to call and speak with the OB/GYN clinic nurse

* For questions after working hours, please feel free to call and speak with the nurse on the Maternal Child Infant Unit.

Emergency number **on-base**: 911 from landline, or:

From Spanish cell: 956 82 2911

Form U.S. cell: +34 956 82 2911

Emergency number **off-base**:

From Spanish cell: 112

From U.S. cell +34 112

<https://www.tricare-overseas.com/beneficiaries/resources/beneficiary-app>

+44-20-8762-8384 (overseas) or 1-877-678-1207 (stateside)

What Features and Capabilities Does the MyCare Overseas™ Beneficiary Mobile App and Web-Based Portal Offer?

- 24/7 Assistance
- Health Care Finder
- My Appointments & Referrals
- Country Information (Emergency Numbers, Medical Risk Ratings, Cultural Tips)
- Translation Help & Local Language Support
- ChatBot FAQs & Direct Link to the BSC
- My Plan & Claims
- My Medical Translations

Download the **MyCare Overseas™** Beneficiary App Fact Sheet to learn more!



QR Code for
MyCareOverseas

How Can I Access MyCare Overseas™?

To access the **MyCare Overseas™** beneficiary app, scan the QR code below or click on the App Store or Google Play buttons.

*Note: After you download or install the **MyCare Overseas™** app on your mobile device, please remember to complete the registration process to begin enjoying the features of the app right away!*



QR Code for
DS Logon

Alternatively, to access the **MyCare Overseas™** web-based portal using your personal computer or laptop, visit <https://top.internationalosos.com/beneficiary>!

MHS GENESIS

- **Create or update your DS Logon account:** <https://www.dmdc.osd.mil/identitymanagement/app/login>
 - To use online portal services, you will need to have an active DS Logon, with updated profile.
- **Update DEERS:** <https://milconnect.dmdc.osd.mil/milconnect/>
 - Ensure email, phone number, duty station and dependent information is correct
- **Schedule appointments in advance.** Please consider scheduling appointments prior to our go-live date or after October to ensure routine medical needs are met without delays.
- **Request refills in advance.** We recommend a 90-day supply, if possible.
 - Learn more at www.tricare.mil/CoveredServices/Pharmacy/ManageScripts/Refills or call the pharmacy at +34-956-82-3565/727-3565 for additional assistance.
- **Consider home delivery.**
 - Learn more at tricare.mil/CoveredServices/Pharmacy/FillPrescriptions.

Alternate health care options and resources:

- In case of an emergency, dial **911 or 112**
- If you have an emergency DO NOT delay care. Before you leave or as soon as possible all TRICARE PRIME OVERSEAS beneficiaries should contact **International SOS Medical Assistance at +44 20-8762-8133**.
- **For questions regarding healthcare needs and advice, contact: MHS Nurse Advice Line** from US number (1-800-TRICARE (874-2273)) or Spanish line (Toll Free: 900-931-193)
- Download the MyCareOverseas smartphone application:
 - Learn more at <https://www.tricare-overseas.com/beneficiaries/resources/beneficiary-app>
- If requiring an urgent care and enrolled as a TRICARE OVERSEAS plan beneficiary, you must get pre-authorization from the TRICARE overseas contractor. Otherwise, you may have to pay the provider up front and file a claim for reimbursement later. **Please call International SOS Medical Assistance at +44-20-8762-8384.**
 - Learn more at <https://www.tricare-overseas.com/beneficiaries/resources/beneficiary-app>
- If requiring an urgent care and enrolled as a TRICARE OVERSEAS plan beneficiary, you must get pre-authorization from the TRICARE overseas contractor. Otherwise, you may have to pay the provider up front and file a claim for reimbursement later. **Please call International SOS Medical Assistance at +44-20-8762-8384.**

Cystic Fibrosis and Spinal Muscular Atrophy Prenatal Screening

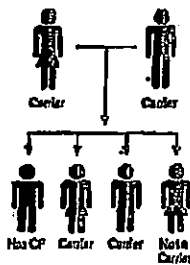
What is Cystic Fibrosis (CF)?

Cystic fibrosis is an inherited disease that causes increased mucous production in the body. It causes lifelong problems with the lungs and digestive tract. In general, people with CF have a shortened lifespan and there is no cure for this disease. It is passed down in a recessive manner, meaning that a child with CF will have a gene from each parent for the disorder. However, this is not always the case.

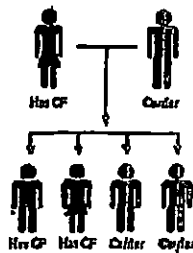
How a Person Gets CF

To have CF, you must get one copy of the CF gene from each parent. That means that each parent must be a carrier of the CF gene.

When two people who are carriers have a child, there is a 25 percent chance of having a child with CF.



When one parent has CF and one parent is a carrier, there is a 50 percent chance of having a child with CF.



- The risk of carrying the CF gene varies based on your ethnic background.

- If you are found to be a carrier, we will recommend that your partner be tested to determine the risk that the baby has CF.

Ethnic Group	Carrier Risk
Caucasian American	1 in 29
Hispanic American	1 in 46
African American	1 in 65
Asian American	1 in 90

What is Spinal Muscular Atrophy (SMA)?

Spinal muscular atrophy is an inherited disease that affects the control of muscle movement. It is caused by a loss of specialized nerve cells in the spinal cord and part of the brain. This leads to weakness and loss of muscles used for activities such as crawling, walking, sitting up, and controlling head movement.

There are several types of SMA. The most severe form is evident at birth or the first few months of life. Affected infants are developmentally delayed; most are unable to support their heads or sit unassisted. Children with this type have breathing and swallowing problems that may lead to choking or gagging. The life expectancy of the most severely affected children is 2 years. Children with less severe forms may survive into their teens.

Like CF, it is passed down in a recessive manner, meaning that a child with SMA will have a gene from each parent for the disorder. However, this is not always the case.

- The risk of carrying the SMA gene varies based on your ethnic background.
- If you are found to be a carrier, we will recommend that your partner be tested to determine the risk that the baby has SMA.

Ethnic Group	Carrier Risk
Caucasian American	1 in 47
Hispanic American	1 in 68
African American	1 in 72
Asian American	1 in 59

Benefits of CF and SMA Carrier Testing:

- The family and medical team can prepare for the birth of a baby with special health needs.
- The baby may benefit from early treatment for these conditions.
- Decisions regarding future pregnancy and prenatal care can be made, sometimes with the help of a genetic counselor.

Please read and complete the following informed consent:

1. I understand that the decision to be tested is completely mine.
2. I understand that the test does not detect all CF and SMA carriers.
3. I understand that if I am a carrier, additional testing can help determine the chances that my baby could have CF or SMA.
4. I understand that if one parent is a carrier and the other is not, it is still possible that the baby could have CF or SMA.
5. I understand that if both parents are carriers, additional testing can be done to know whether or not the baby will have CF or SMA.

I have read and understand the information above and my questions have been answered:

I _____ do want CF carrier testing

I _____ do want SMA carrier testing

I _____ do not want CF carrier testing

I _____ do not want SMA carrier testing

Signature: _____

Date: _____

Problem	Safe to take
Heartburn, gas and bloating, upset stomach	Antacids for heartburn (Maalox, Mylanta, Rolaids, Tums) Simethicone for gas pains (Gas-X, Maalox Anti-Gas, Mylanta Gas, Mylicon)
Cough or cold	Guaifenesin, an expectorant (Hytuss, Mucinex, Naldecon Senior EX, Robitussin) Dextromethorphan, a cough suppressant (Benylin Adult, Robitussin Maximum Strength Cough, Scot-Tussin DM, Vicks 44 Cough Relief) Guaifenesin plus dextromethorphan (Benylin Expectorant, Robitussin DM, Vicks 44E) Cough drops Vicks VapoRub Not safe to take: Cold remedies that contain alcohol The decongestants pseudoephedrine and phenylephrine, which can affect blood flow to the placenta
Pain relief, headache, and fever	Acetaminophen (Anacin Aspirin-Free, Tylenol)
Allergy relief	Chlorpheniramine, an antihistamine (Chlor-Trimeton allergy tablets) Loratadine, an antihistamine (Alavert, Claritin, Tavist ND, Triaminic Allerchews) Diphenhydramine, an antihistamine (Banophen, Benadryl, Diphenhist, Genahist)
Constipation, hemorrhoids, and diarrhea	Psyllium (Konsyl-D, Metamucil, Modane Bulk, Perdiem) Polycarbophil (Equalactin, Fiber-Lax, FiberNorm, Konsyl-Fiber, Mitrolan) Methylcellulose (Citrucel, Unifiber) Other laxatives and stool softeners (Colace, Dulcolax, Maltsupex, milk of magnesia) Hemorrhoid creams (Anusol, Preparation H, Tucks) Loperamide, anti-diarrhea medication (Imodium, Kaopectate II, Maalox Anti-Diarrheal, Pepto Diarrhea Control)
Yeast infections and other fungal infections such as athlete's foot	Clotrimazole (Cruex, Gyne-Lotrimin 3, Lotrimin AF, Mycelex 7) Miconazole (Desenex, Femizol-M, Micatin, Monistat 3) Terbinafine (Lamisil AT) Tioconazole (Monistat 1, Vagistat 1) Butoconazole (Femstat 3, Mycelex 3) Butenafine (Lotrimin Ultra)

	<p>Tolnaftate (Absorbine Athlete's Foot Cream, Absorbine Footcare, Genaspor, Tinactin)</p> <p>Undecylenic Acid and derivatives (Cruex, Desenex, Fungi Cure, Tinacide)</p> <p>Not safe to take: Certain antifungal products not listed here (Certain Cruex, Desenex, and Fungi Cure products may contain other antifungal agents not listed here that should not be used during pregnancy. Check labels carefully.)</p>
Insomnia	<p>Diphenhydramine (Benadryl, Maximum Strength Unisom SleepGels, Nytol, Sominex)</p> <p>Doxylamine succinate (Unisom Nighttime Sleep-Aid)</p>
Itching	Hydrocortisone (Cortaid, Lanacort)
Cuts and scrapes	Polysporin



5. What if I am pregnant and have been drinking?

If you drank alcohol before you knew you were pregnant or before you knew that alcohol could harm your baby, stop drinking now. Every day matters. The sooner you stop drinking, the better for your baby.

6. How can I stop drinking?

If it is hard for you to stop drinking, talk with your healthcare provider about getting help. There are a variety of treatments that can help you. Options for pregnant women include behavioral treatments and mutual-support groups. Your healthcare provider may be able to help you determine the best option for you.

Treatment is an ongoing process. Even if you have been through treatment before, don't give up.

FOR HELP AND INFORMATION

You can get help from your doctor or other healthcare professionals, your religious adviser, a mutual-support group, or other support people.

National Institute on Alcohol Abuse and Alcoholism (NIAAA)

301-443-3860, <https://www.niaaa.nih.gov>

NIAAA Alcohol Treatment Navigator

<https://alcoholtreatment.niaaa.nih.gov>

FASD United

202-785-4585, <https://fasdunited.org/>

The Circle of Hope: A Mentoring Network for Birth Mothers

<https://fasdunited.org/circle-of-hope/>

Recovering Mothers Anonymous

<https://recoveringmothers.org>

Centers for Disease Control and Prevention

1-800-CDC-INFO (1-800-232-4636)

<https://www.cdc.gov/ncbddd/fasd>

Substance Abuse and Mental Health Services Administration's National Helpline

1-800-662-HELP (1-800-662-4357)

<https://www.samhsa.gov/find-help/national-helpline>

MotherToBaby

<https://mothertobaby.org>

American College of Obstetricians and Gynecologists

<https://www.acog.org/womens-health>

American Academy of Pediatrics

<https://www.healthychildren.org/English/health-issues/conditions/chronic/Pages/Fetal-Alcohol-Spectrum-Disorders-FAQs-of-Parents-and-Families.aspx>

NIH Publication No. 21-AA-4101

Updated August 2022



National Institute
on Alcohol Abuse
and Alcoholism



ALCOHOL AND YOUR PREGNANCY

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
National Institutes of Health
National Institute on Alcohol Abuse and Alcoholism



PRENATAL ALCOHOL EXPOSURE...



...is associated with an increased risk of miscarriage, stillbirth, prematurity, and sudden infant death syndrome (SIDS), as well as fetal alcohol spectrum disorders (FASD).

FASD is a term for a range of lifelong conditions that can occur in individuals who were exposed to alcohol before birth and often lead to disability.

Children with FASD are more likely to:

- Have low birthweight.
- Have problems eating and sleeping.
- Have problems with vision and hearing.
- Have trouble following directions and accomplishing everyday tasks.
- Have difficulty paying attention and learning in school.
- Have cognitive and academic problems and need special educational services.
- Have trouble controlling their behavior and getting along with others.
- Have behavioral and medical issues that can become apparent at different life stages.
- Be prone to develop alcohol and other substance use disorders later in life.
- Often need extra medical and behavioral care, assistance, and social support throughout life.

HERE ARE SOME QUESTIONS YOU MAY HAVE ABOUT ALCOHOL AND DRINKING WHILE YOU ARE PREGNANT

1. Is it all right to drink alcohol if I am pregnant?

No. A developing baby is exposed to the same concentration of alcohol as the mother during pregnancy. There is no known safe amount of alcohol consumption for women who are pregnant, including early in pregnancy when a woman may not know that she is pregnant.

2. Are some kinds of alcohol less harmful than others?

No. Exposure to alcohol from all types of beverages—including beer, wine, hard seltzer, hard cider, alcopops, distilled spirits (liquor), and mixed drinks—is unsafe for developing babies at every stage of pregnancy. A glass of wine, a can of beer, and a shot of liquor all have about the same amount of alcohol. Cocktails (mixed drinks) may have twice as much alcohol as these other beverages.

3. What if I drank during my last pregnancy and my child was fine?

Every pregnancy is different. Alcohol exposure before birth may harm one child more than another. You could have one child born healthy and another child born with problems. Some intellectual and behavioral problems related to FASD may not be apparent initially and can appear at any time during childhood.

4. Does FASD have lifelong effects?

Yes. Although some of the lifelong effects of FASD can be recognized early, other issues become apparent later in life. While early diagnosis and treatment can improve the child's health and behavior, there is no cure for FASD currently.

Tobacco and Pregnancy

Smoking during pregnancy is dangerous for you and your fetus. If you use cigarettes or e-cigarettes, now is the time to quit.



RISKS FOR YOUR FETUS

- Delayed growth
- Higher chance of being born too early
- Permanent brain and lung damage
- Higher risk of stillbirth



RISKS FOR YOUR NEWBORN

- Smaller size at birth
- Colic with uncontrollable crying
- Sudden infant death syndrome (SIDS)
- Development of obesity and asthma during childhood



RISKS FOR YOU

- Ectopic pregnancy (a pregnancy outside of the uterus)
- Problems with the placenta
- Problems with your thyroid
- Water breaking too early



QUITTING SMOKING
will help you
have a healthy
pregnancy and a
healthy baby.

Did You Know?

- Nicotine is only one of 4,000 toxic chemicals in cigarettes.
- Using e-cigarettes (vaping) is not a safe substitute for smoking cigarettes.
- Other smokeless tobacco products, like snuff and gel strips, also are not safe.
- Secondhand smoke can cause growth problems for your fetus and increase your baby's risk of SIDS.

**If you need help quitting, talk with your obstetrician–gynecologist (ob-gyn).
Or call the national smoker's quit line at 1-800-QUIT-NOW.**

The American College of Obstetricians and Gynecologists believes that pregnant people who use tobacco should receive counseling to help them quit. Your ob-gyn can offer advice about quitting at your first prenatal visit or at any time throughout your pregnancy.

PFSI014: This information is designed as an educational aid for the public. It offers current information and opinions related to women's health. It is not intended as a statement of the standard of care. It does not explain all of the proper treatments or methods of care. It is not a substitute for the advice of a physician. For ACOG's complete disclaimer, visit www.acog.org/WomensHealth-Disclaimer.

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Marijuana and Pregnancy

If you use marijuana during pregnancy, you may be putting your health and your fetus's health at risk.



Possible Effects on Your Fetus



Disruption of brain development before birth



Smaller size at birth
Higher risk of stillbirth



Higher chance of being born too early, especially when you use both marijuana and cigarettes during pregnancy



Harm from secondhand marijuana smoke
Behavioral problems in childhood and trouble paying attention in school

Possible Effects on You



Permanent lung injury from smoking marijuana



Dizziness, putting you at risk of falls



Impaired judgment, putting you at risk of injury



Lower levels of oxygen in the body, which can lead to breathing problems

Did you know?

- Medical marijuana is not safer than recreational marijuana. Recreational and medical marijuana may be legal in some states, but both are illegal under federal law.
- There's no evidence that marijuana helps morning sickness. Ask your obstetrician–gynecologist (ob-gyn) about safer treatments.
- You should also avoid marijuana before pregnancy and while breastfeeding.

Marijuana and pregnancy don't mix. If you're pregnant or thinking about getting pregnant, don't use marijuana.



If you need
help quitting
marijuana, talk
with your
ob-gyn.

Research is limited on the harms of marijuana use during pregnancy. Because all of the possible harms are not fully known, the American College of Obstetricians and Gynecologists (ACOG) recommends that anyone who is pregnant, planning to get pregnant, or breastfeeding not use marijuana. ACOG believes people who have a marijuana use problem should receive medical care and counseling services to help them quit.

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Naval Station – Rota, Spain
FITNESS CENTER
Physician Clearance

Dear Dr. _____

Date _____

_____ has joined our facility for the purpose of preventive exercise. Our exercise programs may include individual cardiovascular endurance training (treadmill, rower, recumbent, and upright stationary bicycle, etc.), group cardiovascular endurance training (low-impact aerobics, step aerobics, strenuous group cycling, etc.), strength training (Nautilus and Body-Masters OR Cybex isotonic equipment, free weights), and flexibility training (static stretching, Yoga.)

Due to the following coronary risk factors, other listed conditions, or medications, we are requiring the above-listed individual to receive clearance from you to participate in an exercise program here at the Naval Air Station:

Please check off one of the following recommendations:

☐ There is no contraindications to participation in a moderately vigorous general exercise program, which may include the activities described above.

☐ Participation in a moderately vigorous general exercise is advisable, however with the following limitations:

Keep Heart Rate Below: _____ Other: _____

☐ Participation in an exercise program is inadvisable at this time.

Physician Signature: _____ Date: _____

Physician Name (Please print): _____

Address: _____ Telephone: _____

Please return to: MWR Fitness Center, NAS Rota
PSC 819 Box 14
FPO AE 09645
Phone: 727-2864

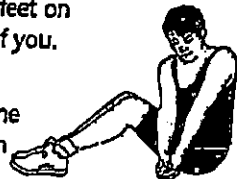
Instructor/Trainer: _____

Exercises During Your Pregnancy

Diagonal Curl

Strengthens your back, hips, and abdomen. If you have not been exercising regularly, skip this exercise.

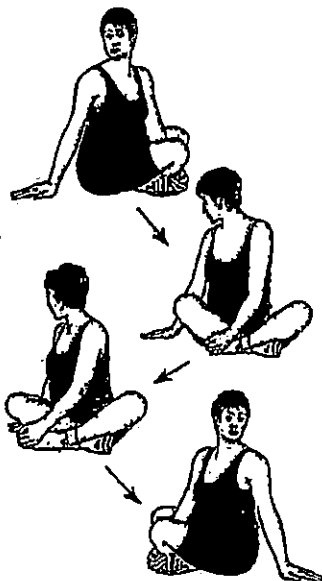
1. Sit on the floor with your knees bent, feet on the floor, and hands clasped in front of you.
2. Twist your upper torso to the left until your hands touch the floor. Do the same movement to the right. Repeat on both sides 5 times.



Trunk Twist

Stretches the muscles of your back, spine, and upper torso.

1. Sit on the floor with your legs crossed.
2. Hold your left foot with your left hand using your right hand for support.
3. Slowly twist your upper torso to the right.
4. Switch hands and repeat on the left. Repeat on both sides 5-10 times.



Forward Bend

Stretches and strengthens the muscles of your back.

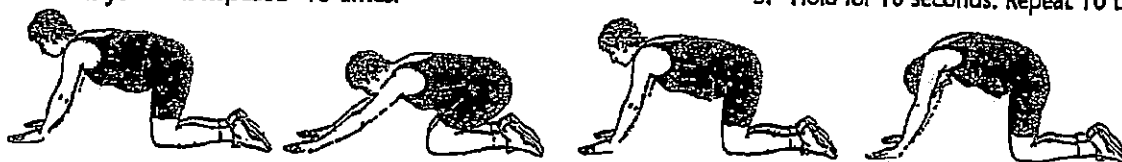
1. Sit in a chair in a comfortable position. Keep your arms relaxed.
2. Bend forward slowly, with your arms in front and hanging down. Stop bending if you feel any discomfort on your abdomen.
3. Hold for 5 seconds, then sit up slowly without arching your back. Repeat 5 times.



Rocking Back Arch

Stretches and strengthens the muscles of your back, hips, and abdomen.

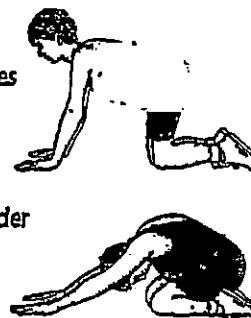
1. Kneel on hands and knees with your back straight.
2. Rock back and forth for a count of 5.
3. Return to the original position and curl your back up as far as you can. Repeat 5-10 times.



Backward Stretch

Stretches and strengthens the muscles of your back, pelvis, and thighs.

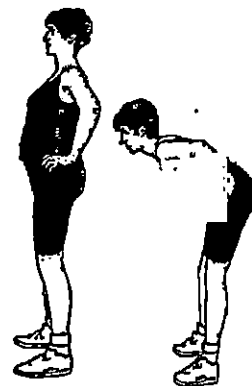
1. Kneel on hands and knees, with your knees 8-10 inches apart and your arms straight (hands under your shoulders).
2. Curl backward slowly, tucking your head toward your knees and keeping your arms extended.
3. Hold for 5 seconds, then return to all fours slowly. Repeat 5 times.



Upper Body Bends

Strengthens the muscles of your back and torso.

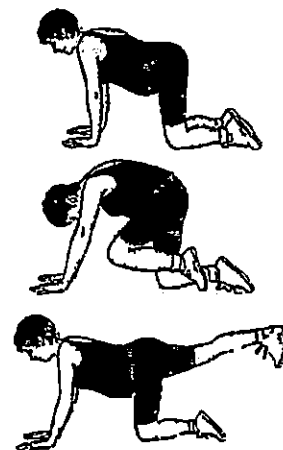
1. Stand with your legs apart, knees bent slightly, with your hands on your hips.
2. Bend forward slowly, keeping your upper back straight, until you feel the muscle stretch along your upper thigh. Repeat 10 times.



Leg Lift Crawl

Strengthens the muscles of your back and abdomen.

1. Kneel on hands and knees with your arms straight (hands under your shoulders).
2. Lift your left knee and bring it toward your elbow.
3. Straighten your leg back. Do not swing your leg back or arch your back. Repeat on both sides 5-10 times.



Back Press

Strengthens the muscles of your back, torso, and upper body and promotes good posture.

1. Stand with your back against a wall with your feet 10-12 inches away from it.
2. Press the lower part of your back against the wall.
3. Hold for 10 seconds. Repeat 10 times.

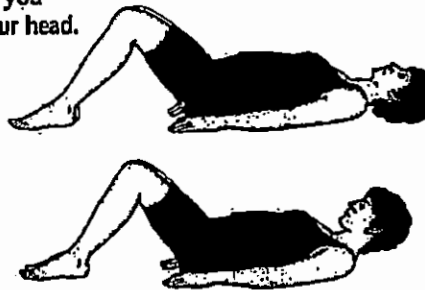


Exercises After Your Baby Is Born

Head Lifts

Head lifts can progress to shoulder lifts and curl-ups, all of which strengthen the abdomen. When you can do 10 head lifts at a time, proceed to shoulder lifts.

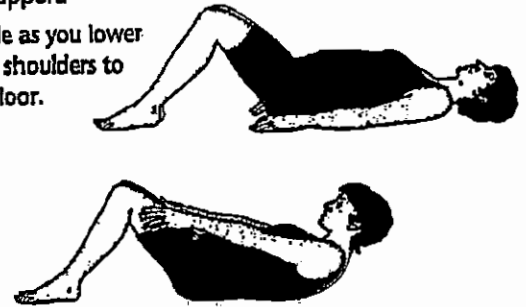
1. Lie on your back with your knees bent, your feet flat on the floor, and your arms along your sides. Inhale.
2. Exhale slowly as you lift your head off the floor.
3. Inhale as you lower your head.



Shoulder Lifts

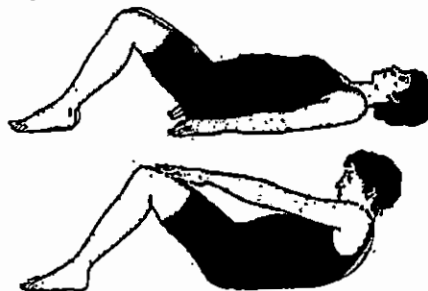
When you can do 10 shoulder lifts at a time, proceed to curl-ups.

1. Lie on your back with your knees bent, your feet flat on the floor, and your arms along your sides. Inhale.
2. Exhale slowly and lift your head and shoulders off the floor. Reach with your arms so you do not use them for support.
3. Inhale as you lower your shoulders to the floor.



Curl-ups

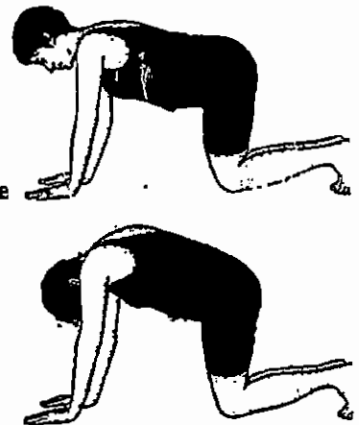
1. Lie on your back with your knees bent and your feet flat on the floor.
2. Exhale. Reach with your arms, and slowly raise up halfway between your knees and the floor.
3. Inhale as you lower yourself to the floor.



Kneeling Pelvic Tilt

Strengthens your abdominal muscles.

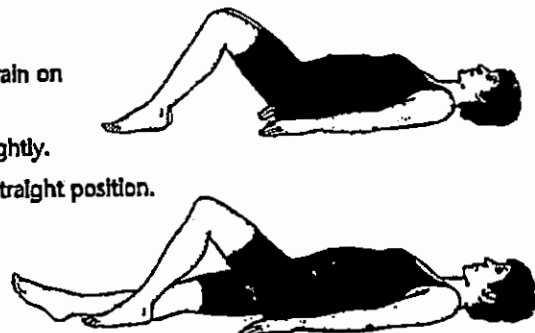
1. Kneel on your hands and knees with your back straight. Inhale.
2. Exhale and pull your buttocks forward, rotating the pubic bone upward.
3. Hold for 3 seconds. Repeat 5 times.



Leg Slides

Tones abdomen and legs. Does not put much strain on your incision if you've had a cesarean birth.

1. Lie flat on your back and bend your knees slightly.
2. Inhale. Slide your right leg from a bent to a straight position. Exhale, and bend it back again.
3. Keep both feet relaxed on the floor.
4. Repeat with left leg.



The American College of Obstetricians and Gynecologists
Women's Health Care Physicians

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ADVICE ABOUT EATING FISH

For Those Who Might Become or Are Pregnant or Breastfeeding and Children Ages 1 – 11 Years

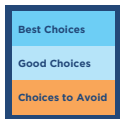


Fish† provide key nutrients that support a child's brain development.

Fish are part of a [healthy eating pattern](#) and provide key nutrients during pregnancy, breastfeeding, and/or early childhood to support a **child's brain development**:

- Omega-3 (called DHA and EPA) and omega-6 fats
- Iron
- Iodine (during pregnancy)
- Choline

Choline also supports development of the **baby's spinal cord**. Fish provide iron and zinc to support **children's immune systems**. Fish are a source of other nutrients like protein, vitamin B12, vitamin D, and selenium too.



Choose a variety of fish that are lower in mercury.

While it is important to limit mercury in the diets of those who are pregnant or breastfeeding and children, many types of fish are both nutritious and lower in mercury.

This chart can help you choose which fish to eat, and how often to eat them, based on their mercury levels.

What is a serving? As a guide, use the palm of your hand.



Pregnancy and breastfeeding:
1 serving is 4 ounces

Eat 2 to 3 servings a week from the "Best Choices" list
(OR 1 serving from the "Good Choices" list).



Childhood:

On average, a serving is about:

- 1 ounce at age 1 to 3
- 2 ounces at age 4 to 7
- 3 ounces at age 8 to 10
- 4 ounces at age 11

Eat 2 servings a week from the "Best Choices" list.

Best Choices

Anchovy	Herring	Scallop
Atlantic croaker	Lobster,	Shad
Atlantic mackerel	American and spiny	Shrimp
Black sea bass	Mullet	Skate
Butterfish	Oyster	Smelt
Catfish	Pacific chub	Sole
Clam	mackerel	Squid
Cod	Perch, freshwater	Tilapia
	and ocean	
Crab	Pickering	Trout, freshwater
Crawfish	Plaice	Tuna, canned light
Flounder	Pollock	(includes skipjack)
Haddock	Salmon	Whitefish
Hake	Sardine	Whiting

Good Choices

Bluefish	Monkfish	Tilefish
Buffalofish	Rockfish	(Atlantic Ocean)
Carp	Sablefish	Tuna, albacore/
Chilean sea bass/	Sheepshead	white tuna, canned
Patagonian toothfish	Snapper	and fresh/frozen
Grouper	Spanish mackerel	Tuna, yellowfin
Halibut	Striped bass (ocean)	Weakfish/seatrout
Mahi mahi/dolphinfish		White croaker/
		Pacific croaker

Choices to Avoid HIGHEST MERCURY LEVELS

King mackerel	Shark	Tilefish
Marlin	Swordfish	(Gulf of Mexico)
Orange roughy		Tuna, bigeye

What about fish caught by family or friends? Check for [fish and shellfish advisories](#) to tell you how often you can safely eat those fish. If there is no advisory, eat only one serving and no other fish that week. Some fish caught by family and friends, such as larger carp, catfish, trout and perch, are more likely to have fish advisories due to mercury or other contaminants.

www.FDA.gov/fishadvice
www.EPA.gov/fishadvice

FDA U.S. FOOD & DRUG
ADMINISTRATION

EPA United States
Environmental Protection
Agency



ADVICE ABOUT EATING FISH

For Those Who Might Become or Are Pregnant or Breastfeeding and Children Ages 1 – 11 Years



The *Dietary Guidelines for Americans* recommends eating fish as part of a healthy eating pattern.

The [Dietary Guidelines for Americans](#) recommends:

- At least 8 ounces of seafood (less for children§) per week based on a 2,000 calorie diet.
- Those who are pregnant or breastfeeding consume between **8 and 12 ounces per week** of a variety of seafood from choices that are **lower in mercury**.



Eating fish can provide other health benefits too.

Fish intake during pregnancy is recommended because moderate scientific evidence shows it can help your baby's cognitive development.

Strong evidence shows that eating fish, as part of a healthy eating pattern, **may have heart health benefits**. [Healthy eating patterns](#) that include fish may have other benefits too. Moderate scientific evidence shows that eating patterns relatively higher in fish but also in other foods, including vegetables, fruits, legumes, whole grains, low- or non-fat dairy, lean meats and poultry, nuts, and unsaturated vegetable oils, and lower in red and processed meats, sugar-sweetened foods and beverages, and refined grains are associated with:



Promotion of bone health – decreases the risk for hip fractures*



Decreases in the risk of becoming overweight or obese*



Decreases in the risk for colon and rectal cancers*

A **healthy eating pattern** consists of choices across all food groups (vegetables, fruits, grains, dairy, and protein foods, which includes fish), eaten in recommended amounts, and within calorie needs. Healthy eating patterns include foods that provide vitamins, minerals, and other health-promoting components and have no or little added sugars, saturated fat, and sodium.

This advice supports the recommendations of the [Dietary Guidelines for Americans](#), which reflects current science on nutrition to improve public health. The *Dietary Guidelines for Americans* focuses on dietary patterns and the effects of food and nutrient characteristics on health.

§ For some children, the amounts of fish in the *Dietary Guidelines for Americans* are higher than in this FDA/EPA advice. The *Dietary Guidelines for Americans* states that to consume those higher amounts, children should only be fed fish from the “Best Choices” list that are even lower in mercury – these fish are anchovies, Atlantic mackerel, catfish, clams, crab, crawfish, flounder, haddock, mullet, oysters, plaice, pollock, salmon, sardines, scallops, shad, shrimp, sole, squid, tilapia, trout, and whiting.

* There is [moderate scientific evidence of a relationship](#) between the eating pattern as a whole and the potential health benefit.

‡ This advice refers to fish and shellfish collectively as “fish” / Advice revised October 2021

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