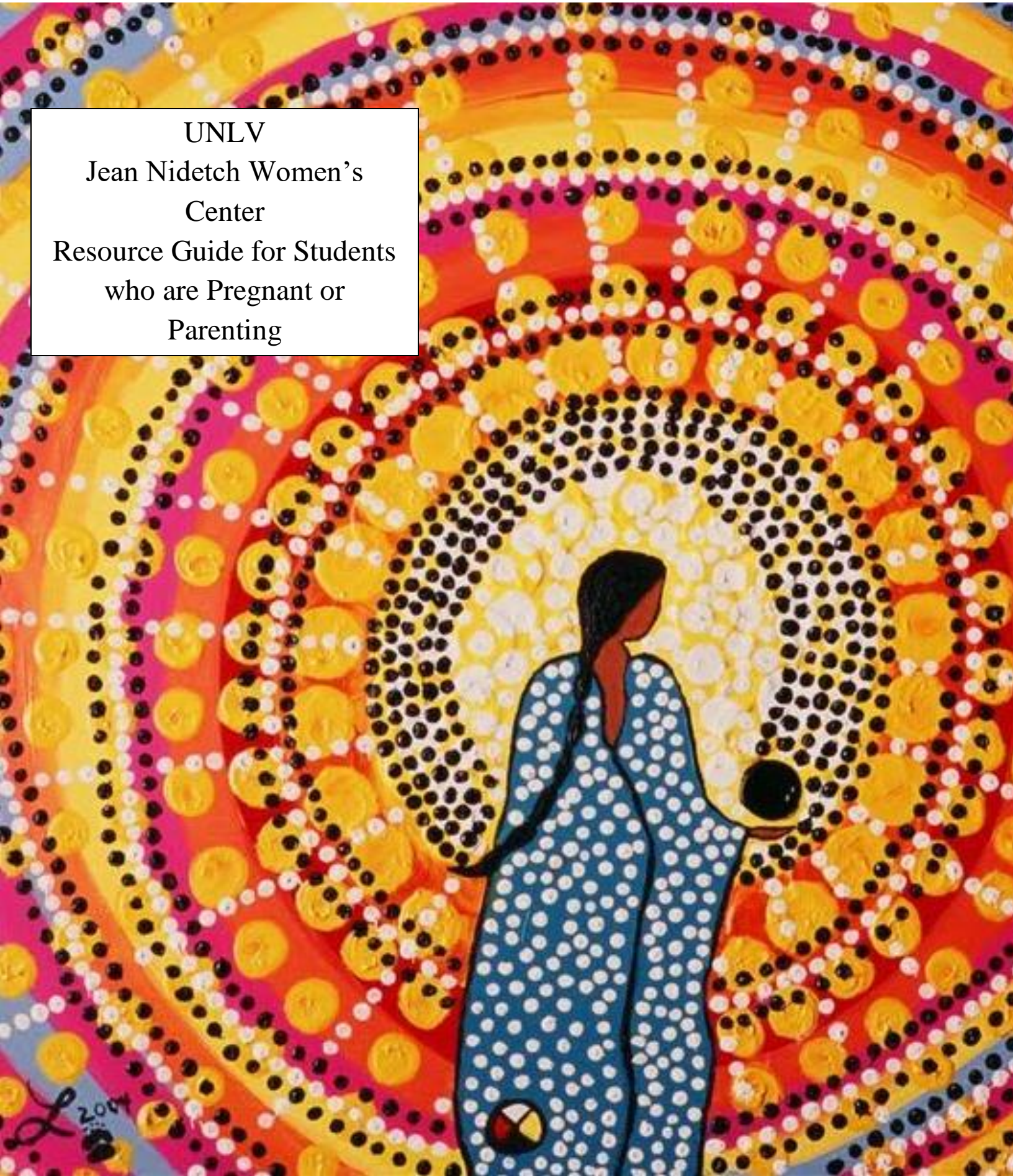


UNLV  
Jean Nidetch Women's  
Center  
Resource Guide for Students  
who are Pregnant or  
Parenting



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# Types of Contraceptives

## **Birth Control Pill:**

Birth control pills are a kind of medicine with hormones that prevent pregnancy. It is safe, affordable, and effective if it is taken every day on time.

The pill stops sperm from meeting an egg which is called fertilization. The hormones in the pill stop ovulation and thicken the mucus in the cervix. Thicker cervical mucus makes it hard for the sperm to swim to the egg.

*Where can I get the pill?*

Birth control pills are easy to get, but you need a prescription. You can get a prescription from a private doctor or nurse, a health clinic, or your nearest Planned Parenthood health center.

## **Birth Control Shot:**

The birth control shot (Depo-Provera) is an injection given by a nurse or doctor once every 3 months. It is safe, private, and works well if received on time.

The birth control shot contains the hormone progestin which stops pregnancy by preventing ovulation. It also makes cervical mucus thicker. Its affects are very similar to the birth control pill, the difference is the way it is applied.

*How do I get the shot?*

The birth control shot is easy to get. Visit a doctor or the nearest Planned Parenthood health center to get the shot. Cost varies from case to case.

## **The Male Condom:**

Male condoms are thin, stretchy pouches that are worn on the penis or toy during sex. They provide protection from pregnancy and STIs.

Male condoms prevent sperm from entering the vagina, so sperm does not meet the egg and cause pregnancy. They prevent STIs by covering the penis or toy, limiting contact.

\*Only synthetic condoms (latex or plastic) prevent the spread of STIs. Lambskin condoms do not.

*Where can I get condoms?*

You can get condoms from drugstores, Planned Parenthood health centers, doctor's office etc. You do not need a prescription, there are no age restrictions, and most of the time they are free except for drugstores.

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**The Female Condom:**

Female condoms provide protection from pregnancy and STIs. Instead of going on the penis or toy, female condoms go inside the vagina for pregnancy prevention or into the vagina or anus for protection from STIs.

Female condoms are little nitrile (soft plastic) pouches that are placed inside the vagina. They cover the inside of the vagina, creating a barrier that stops sperm from reaching an egg.

*Where can I get Female condoms?*

Female condoms can be harder to find compared to traditional male condoms and the only brand that is FDA approved and available in the U.S is the FC2 Female Condom. They are available in stores, online, and some health centers. They usually cost around \$3, but sometimes you can get them for free.

**Birth Control Sponge:**

The birth control sponge is a small, round sponge made from soft, squishy plastic. It is placed deep inside the vagina before sex. The sponge covers the cervix and contains spermicide to help prevent pregnancy. Each sponge has a fabric loop attached to it to make it easier to take out.

*Where can I get a contraceptive sponge?*

The birth control sponge can be purchased at pharmacies without prescription. Currently, the only brand of sponge sold in the U.S is Today Sponge.

**Birth Control Patch:**

The transdermal contraceptive patch is a safe, simple, and an affordable birth control method that is worn on the skin of the belly, upper arm, butt, or back. A new patch should be worn every week for three weeks. The patch releases hormones that prevent pregnancy. After the three week cycle the patch is not worn for a week and then the cycle is repeated.

*How do I get the birth control patch?*

A prescription from a nurse or doctor is needed to get the birth control patch. Three birth control patches (one month's supply) can range from \$0-\$80.

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*Are there other forms of contraceptives that don't require me to take medicine?*

### **Fertility Awareness Methods**

Fertility Awareness Methods (FAMs) are ways to track the menstrual cycle so it is made aware of when the ovaries release an egg every month (ovulation). The days near ovulation are the fertile days. Many people avoid having sex or use contraception (condoms) during those days to prevent pregnancy.

*There are a few different FAMs that help keep track of fertility signs. Only one method is necessary to predict when ovulation is happening:*

**The Temperature Method:** take your temperature in the morning every day before you get out of bed.

This method helps predict ovulation by tracking the changes in your body temperature during your menstrual cycle since body temperature changes throughout. It is lower during the first part of the cycle and rises during ovulation.

**The Cervical Mucus Method:** check the cervical mucus (vaginal discharge) every day.

The cervical mucus changes color, texture, and amount during the menstrual cycle (especially around ovulation). The changes in the mucus help to figure out when it is time to ovulate. During those days it is recommended to not have vaginal sex to prevent pregnancy or to use another form of contraception.

**The Calendar Method:** Chart menstrual cycle on a calendar.

For the calendar method to be effective as a way of birth control it is recommended to track the menstrual cycle for at least 6 periods.

*How do I track my menstrual cycle?*

Mark the first day of your period as day one. Then mark the first day of your next period. Count the total number of days between each cycle (the number of days between the first days of each period).

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\*If all your cycles are shorter than 27 days, the calendar method **will not** be accurate for you.

Combining all 3 methods is the most effective and that is called the **Symptothermal method.**

**The Standard Days Method:** Menstrual cycle is tracked for several months to figure out if it is always between 26 and 32 days long — this method cannot be used if it's longer or shorter. Once established that the cycle is in the right range, use another form of birth control (or don't have vaginal sex) on days 8-19, which is when fertility is happening.

FAMs are about 76-88% effective. It is best to visit a health center and have a nurse, doctor, or counselor who understands FAMs give you instructions and help you use them correctly.

It is important to remember that FAMs are safe for everyone, but only work to prevent pregnancy for certain people.

FAMs will not work if:

- Periods are irregular.
- Avoiding unprotected vaginal sex for a certain number of days each cycle is difficult.
- You have a sexually transmitted infection, vaginitis, or a lot of discharge that is not normal.
- Tracking your fertility daily and keeping careful record is difficult.

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# I think I may be pregnant:

*Has it been 3 days or less since contraceptive failure or unprotected sex?*

## **I need Plan B:**

Health Center on campus (UNLV) \$10-20

Planned Parenthood \$45

Walgreens/CVS \$35-60

*Has it been longer than three days?*

## **I need a pregnancy test:**

Health Center on campus

Planned Parenthood

Drug stores

*I want to talk to someone:*

UNLV Jean Nidetch Women's Center  
(702) 895-4475

Bridge Counseling Associate  
(702) 474-6450

UNLV the Practice  
(702) 895-1532

Center for Individual, Couple &  
Family Counseling  
(702) 895-3106

Community Counseling Center  
(702) 369-8700

Mojave Mental Health  
(702) 258-0818

Please see page 46 for more counseling services.

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# Emergency Contraception

*“Accidents happen. That’s why there’s emergency contraception — a safe and effective way to prevent pregnancy up to 5 days after unprotected sex.”-Planned Parenthood*

There are 2 ways to prevent pregnancy after unprotected sex:

- 1.) A ParaGard IUD within 120 hours (5 days) after having unprotected sex. This is the most effective type of emergency contraception.
- 2.) Take an emergency contraceptive pill (AKA the morning-after pill) within 120 hours (5 days) after having unprotected sex.

*What types of morning-after pills are there?—There are two types.*

## **Ella Morning-after Pill:**

Ella emergency contraception prevents pregnancy up to five days after unprotected sex. It’s more effective than other morning-after pills, but a prescription is needed in order to get it.

Ella lowers your chances of getting pregnant by 85% if you take it within five days after unprotected sex and does not become less effective as time passes after having unprotected sex.

## **Plan B:**

The Plan B pill works best when taken within three days after unprotected sex. Plan B lowers the chance of getting pregnant by 75-89%. Although, it may be taken up to five days after unprotected sex, the longer the wait time the less effective it becomes.

\*See page 7 for cost of Plan B and where to find it.

Emergency contraception is effective if it is used correctly after having unprotected sex. It is not recommended to use regularly as the only protection from pregnancy, because it is not as effective as regular, non-emergency birth control methods (like the birth control pill or condoms).

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# Resources for Contraceptives

## **Planned Parenthood**

*There are only two locations in Las Vegas, NV:*

1.) 3300 E Flamingo Rd #25, Las Vegas, NV 89121

(702) 547-9888

2.) 3220 W Charleston Blvd. Las Vegas, NV 89102

(702) 878-7776

For more information on contraceptives, you may visit their website at:

<https://www.plannedparenthood.org/>

## **Student Health Center UNLV**

Located in the Student Recreation and Wellness Center.

(702) 895-3370

For more information on their services visit their website at:

<https://www.unlv.edu/studentwellness>

*Where can I get **free** condoms on campus?*

## **Jean Nidetch Women's Center at UNLV**

Located in the SSC-A building on the second floor down the hall from financial aid.

(702) 895-4475

<https://www.unlv.edu/womenscenter>

## **Rebel Wellness Zone UNLV**

Located on the second floor in the Student Recreation and Wellness Center.

(702) 895-4400

<https://www.unlv.edu/studentwellness/rwz>

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# Terminating Pregnancy

## Considering Abortion

*Is abortion the best option for me?*

Only you know what is best for you, but good information and support can help you make the decision that is best for your own health and well-being.

*How many people decide to have an abortion?*

If you've thought about abortion you are not alone. Millions of people face unplanned pregnancies every year, and about 4 out of 10 of them decide to get an abortion. Some people with planned pregnancies also get abortions because of health or safety reasons. Overall, 3 in 10 women in the U.S. will have an abortion by the time they're 45 years old.

***“Everyone has their own unique and valid reasons for having an abortion.”***

*What can I think about to help me decide and who can I talk to?*

People think carefully about: family, relationships, school, work, life goals, safety, and personal beliefs when deciding about abortion. Ask yourself questions like: *Am I ready to be a parent?, What would it mean for my future if I had a child now?, Would having an abortion change my life in a way I do or don't want?, and What kind of support would I need and get if I decided to get an abortion or carry the pregnancy to term?*

Talk to people who you know are understanding and supportive of you. It is ok to lean on people to help you decide. Most importantly, remember you're the only person walking in your shoes, and the only person who can decide whether to have an abortion. The decision is **100%** yours, so take the time you need to make the best decision for you.

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# Terminating Pregnancy

## *I am having an abortion - what are my options?*

There are two ways to end a pregnancy in the U.S: in-clinic abortion and the abortion pill. Both are safe and very common.

### **What Are In-Clinic Abortions?**

In-clinic abortion procedures are safe and effective and are also referred to as surgical abortions.

They work by using a suction to take a pregnancy out of the uterus.

*There are two kinds of in-clinic abortions:*

**Vacuum aspiration:** Also called suction abortions are the most common kind of in-clinic abortion. Gentle suction is used to empty the uterus of the pregnancy. Usually, it is used until about 14-16 weeks after the last period.

**D&E — Dilation and Evacuation** — is another kind of in-clinic abortion. Suctions and medical tools are used to empty the uterus of the pregnancy. D&E can be performed if has been 16 weeks or longer since the last period.

### **What Is the Abortion Pill?**

"Abortion pill" is the popular name for using two medicines to end a pregnancy – mifepristone and misoprostol. First, the doctor or nurse will give you the first pill (mifepristone) at the clinic and the second pill (Misoprostol) is taken 6-48 hours later at home. In general, it's used up to 70 days — 10 weeks — after the first day of the last period.

### **Law in Nevada:**

[NRS 442.2555](#), a physician shall not knowingly perform or induce an abortion upon an unmarried and unemancipated woman who is under the age of 18 years unless a custodial parent or guardian of the woman is personally notified before the abortion. If the custodial parent or guardian cannot be so notified after a reasonable effort, the physician shall delay performing the abortion until the physician has notified the parent or guardian by certified mail at the last known address of the parent or guardian.

<https://www.leg.state.nv.us/NRS/NRS-442.html#NRS442Sec250>

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# Self-Care after Terminating Pregnancy

## Emotional & Mental Care

How am I supposed to feel emotionally after an abortion?

There is no right way to feel after an abortion.

You may have strong feelings or you may not feel very much.

You may feel a sense of relief, a sense of loss, sadness, anger, or guilt.

You may feel many different things at once, or be confused about how you feel.

\*Make Yourself a Self-Care Package for during and after your procedure

\*If possible have a list of people to reach out to and someone who can be there during the procedure.

## Physical Care

How to Take Care: depending on procedure

Do not take a pregnancy test in the first few weeks after your abortion - it will be positive. It can take up to 6 weeks after the abortion for a pregnancy test to become negative. Bleeding and cramping may stop soon after the abortion and then resume three to five days later.

To relieve discomfort or pain in your abdomen:

- Take a warm bath.
- Apply a heating pad to your lower abdomen or place a hot water bottle filled with warm water on your abdomen.
- Take over-the-counter painkillers as instructed.

Follow these activity guidelines after your procedure:

- Rest as needed.
- DO NOT do any strenuous activity the first few days. This includes not lifting anything heavier than 10 pounds (about the weight of a 1-gallon milk jug).
- Also, DO NOT do any aerobic activity, including running or working out.

How will my body react to an abortion and what should I do?

- Cramping usually starts one to four hours after taking the second medication- misoprostol.
- Bleeding usually starts between 30 minutes to four hours after taking misoprostol.
- However, it can take up to 24 hours for some women.

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- Heavy bleeding and strong cramps usually last between one and four hours. Call the clinic if you soak through more than two large maxi-pads per hour for two hours in a row.
- Use pads to absorb bleeding and drainage from your vagina. Change the pads every 2 to 4 hours to avoid infection.
- DO NOT use tampons or put anything in your vagina, including douching.
- DO NOT have vaginal intercourse for two to three weeks, or until cleared by your healthcare provider.
- Take any other medicine, such as an antibiotic, as instructed.
- Begin using birth control right after your procedure. It is possible to get pregnant again even before your normal period resumes. Birth control can help prevent unplanned pregnancies.

For resources for support after Termination see page 20.

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# Terminating a Wanted Pregnancy

## *What does it mean to terminate a wanted pregnancy?*

*Terminating a wanted pregnancy is having an abortion on a pregnancy that was expected, planned, or wanted, due to specific reasons that may include health issues.*

Expecting parents may have to terminate a wanted pregnancy for many reasons:

- Diagnosis of a serious fetal or maternal health problem.
- Experienced a sudden and drastic change in circumstances.
- Significant health issue or accident to a partner or existing child
- Breakdown of a relationship, an escalation in violence, a sudden change in financial situation, or other big and significant life events.

Birth Parent's health issues that may cause termination of a wanted pregnancy:

- Cancer, heart disease, organ disorders, hyperemesis gravidarum, clinical depression, and so on.

*Everyone's reasons are different and valid.*

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## *I am pregnant, but I am not ready for a baby?*

*What are my options if abortion is not one?*

Unexpected pregnancies can be overwhelming - here are some options:

**Adoption:** Some people who are pregnant and are not ready decide to carry the baby to term can put the baby up for adoption for another family to raise them. There are different types of adoptions: open, closed, semi-open, private adoption.

If you are wanting to place your baby up for adoption you may reach out to:

**Heart to Heart Adoptions:**

(877) 437-3424 or text (801) 871-5773

<https://hearttoheartadopt.com/#intro>

To learn more about adoption please see page 23.

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# Resources to Terminate Pregnancy

## **Planned Parenthood**

3300 E Flamingo Rd #25 Las Vegas, NV 89121

(702) 547-9888

<https://www.plannedparenthood.org/health-center/NV#sthash.eQVL2p2C.dpuf>

## **Planned Parenthood**

3220 W Charleston Blvd. Las Vegas, NV 89102

(702) 547-9888

<https://www.plannedparenthood.org/health-center/NV#sthash.eQVL2p2C.dpuf>

## **A-Z Women's Center**

1670 E Flamingo Rd. Suite C, Las Vegas, NV 89119

(702) 892-0660 | (877) 892-0660 Toll Free

<https://www.drramoslasvegas.com/abortion-services/>

## **Birth Control Care Center**

872 E. Sahara Avenue Las Vegas, NV 89104

(702) 733-7889 / (800) 255-7889

<https://www.birthcontrolcarecenter.com/>

## **Summit Family Planning**

872 E Sahara Ave, Las Vegas, NV 89104

(702) 853-2281

<https://www.summitcenters.com/>

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# Resources to Terminate Pregnancy

To learn more about abortion visit the following websites:

## **MedlinePlus**

<https://medlineplus.gov/ency/patientinstructions/000658.htm>

## **Comprehensive Women’s Health Center**

<https://cwhccolorado.com/services/medication-abortion/aftercare-medication-abortion/>

**National Abortion Federation Hotline:** Provides information about abortions

1-800-772-9100 (financial assistance)

Weekdays: 7:00 A.M.-11:00 P.M. Eastern time

Saturdays and Sundays: 9:00 A.M.-9:00 P.M.

1-877-257-0012 (No financial assistance)

Weekdays: 9:00 A.M. – 9:00 P.M.

Saturday: 9:00 A.M. – 5:00 P.M.

Visit their website at <https://prochoice.org/think-youre-pregnant/naf-hotline/> or

<https://abortionfunds.org/fund/national-abortion-federation-hotline/>

To learn more about ending a wanted pregnancy visit:

**Ending a Wanted Pregnancy at** <https://endingawantedpregnancy.com/ending-wanted-pregnancy/about-ewp/>

## **Children by Choice Association Incorporated**

<https://www.childrenbychoice.org.au/forwomen/ending-a-wanted-pregnancy>

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To talk to someone after an abortion reach out to:

**All about Abortion**

<http://www.fwhc.org/abortion/aftercare.htm>

**After Abortion talk line**

1-866-4-EXHALE

Mon-Fri: 5pm-10pm PT

Sat-Sun: 12pm-10pm PT

**All Options Talk line:**

1-888-493-0092 Toll Free

<https://www.all-options.org/find-support/talkline/>

Online private peer support group for ending wanted pregnancies:

<https://endingawantedpregnancy.com/private-support-group/>

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# Pregnancy

*I am having trouble getting pregnant. What can I do?*

Causes for having trouble getting pregnant:

In females:

- Blocked fallopian tubes (Tubes along which eggs travel from the ovaries to the uterus).
- Ovulatory Dysfunction-Anovulation (Not ovulating): Trouble releasing eggs.
- Hostile cervical mucous: Mucus is too thick to allow the sperm to penetrate the cervix.
- Polycystic Ovarian Syndrome: caused by an imbalance of reproductive hormones which creates problems in the ovaries. Such as: the egg may not develop as it should or it may not be released during ovulation.

In males:

- Low numbers of sperm or absent sperm in the ejaculate.
- Trauma or surgery to the testicles or vas deferens, the tubes which transport the sperm.
- Previous history of mumps or chemotherapy which has led to sterility.
- Vasectomy.

\* If you are unsure why you are having trouble conceiving, it is recommended to try for 6 months before consulting with a professional. If the difficulty continues, contact your doctor.

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## *What options do I have if I can't get pregnant?*

**Intrauterine insemination (IUI):** (Artificial insemination) where sperm is matched with the egg inside the uterus—the person looking to get pregnant can work with a partner, donor, or sperm bank. Cost varies, but is expected to be \$300-\$800.

**In Vitro Fertilization (IVF):** Process of fertilization by extracting eggs, retrieving a sperm sample, & manually combining them in a laboratory dish. The embryo(s) is then transferred to the uterus.

**Surrogate or Carrier Services:** *There are two types*

**Traditional Surrogate:** It's a person who gets artificially inseminated with the father's sperm and carries and delivers the baby.

A traditional surrogate is the baby's biological parent, because it was their egg that was fertilized by the father's sperm. Donor sperm can also be used.

**Gestational surrogates:** A technique called "in vitro fertilization" (IVF) now makes it possible to gather eggs from the mother, fertilize them with sperm from the father, and place the embryo into the uterus of a gestational surrogate.

The surrogate has no genetic ties to the child because their egg was not used.

The biological mother, though, is the woman whose eggs were fertilized.

In the U.S., gestational surrogacy is less complex legally, because both intended parents have genetic ties to the baby.

*Who uses Surrogates? - There are many reasons why someone would use a surrogate.*

- Medical problems with uterus.
- Hysterectomy: removal of uterus
- Conditions that make pregnancy impossible or risky, such as severe heart disease.
- Personal choice.

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**Adoption:** *There are different forms of adoption*

1. Domestic vs. international adoption.
2. Private Infant Adoption
3. Foster care vs. Adopting
4. Open, semi-open, or closed adoption.

**Domestic vs. International Adoption:** *Some differences include cost, travel, ages, countries, and background information.*

**Cost:** Domestic is less costly compared to international. Depending on the agency that assists with the adoption process they can create a packet to estimate the cost of the adoption.

**Travel:** Domestic adoption is limited to U.S travel while international may require you to travel out of the country.

**Countries closing:** Some countries do not allow international adoption from the U.S, like Russia.

**Ages of children available for adoption:** Adopting infants is simpler domestically. It is a longer process when you try to adopt infants internationally, because of the paperwork. Therefore, you may not be able to adopt an infant.

**Limited Medical/Background information:** International adoptees may be under-immunized and be at risk for infections due to often-crowded living conditions, malnutrition, lack of clean water and exposure to endemic diseases that are not common in the US. Medical histories and biological family histories are often unavailable or very limited for international adoptees.

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**Private Infant Adoption:** The first step to begin the process is to locate a potential birth mother. That can be done in various ways depending on the agency, some examples include taking out ads in newspapers or creating websites that showcase your desire to adopt.

Once a match is made an adoption plan will be created. This is a plan that ensures both parent's (adoptive parents and expectant parents) needs are met. This plan can include providing the expectant parents care until delivery, covering their hospital stay, and outlining ongoing contact after the adoption has been finalized.

**There is one major difference in choosing a private adoption vs. not:** You have the choice of an adoption attorney vs. an adoption agency.

*What is the difference?*

A lawyer will interpret laws, advise on strategy, and facilitate communication between the adoptive parents and the birth parents, instead of an agency filling this role.

**Here are some reasons why parents might consider private adoption:**

- Private infant adoption is one of the few types of adoption that guarantees adoptive parents a newborn baby. Other types of adoption, such as foster care adoption or international adoption, often involve older babies and children.
- Private infant adoption takes less time than other types of adoption.
- Private infant adoption offers more flexibility for adoptive parents to be specific about the gender of the child they are interested in adopting. However, this may increase the length of time the adoption takes, as waiting for a match with a mother carrying a certain or known gender may detain the process.
- Private infant adoption often facilitates the possibility of learning more about the birth mother's pregnancy, medical history, and family background. Additionally, this provides the opportunity to pursue an open adoption.

To learn about open adoptions please visit page 26.

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**Foster Care vs. Adopting:** *It is important to understand the differences between becoming a foster parent and adopting.*

**Foster Care:** Occurs when a child welfare worker confirms that a child is living in a neglectful or abusive environment or their biological or primary caregivers are unable to care for them. This results in the child being removed temporarily or permanently into a foster environment.

The minor (child) may be made a ward of the state, or court (court takes responsibility of an individual's legal protection). The placement of the child is usually arranged through the government or a social service agency. The child is placed in an institution, group home, or private home.

Often a relative or a teacher of the child will step in to parent them, but many are placed with foster families, a facility, or group home, either waiting for adoption, a reunion with their biological family, or until they reach the age of 18.

Foster parents are given monthly stipends by the government to cover the expenses of raising the children that are placed in their care.

**Adoption:** When a person is granted legal and permanent parental custody of a child along with all rights, responsibilities, and filiation. The adoptive parents take on **all** responsibilities of raising the child.

Adoptions can occur between family members or strangers. Adoptions happen privately or through public adoption agencies, adoption attorneys, or through an adoption facilitator.

**Open, Semi-open, Closed Adoptions:** *It is important for Adoptive Parents and Birth Parents to connect with their adoption agencies/professionals and be honest of what their expectations are for the relationship as well as discuss any questions or any fears that they may have.*

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**Open Adoption:** Adoptive Parents and Birth Parents share contact during the pregnancy and after the birth.

**Semi-Open Adoption:** Birth Parents and Adoptive Parents will share non-identifying information and the communication will typically be handled by their adoption agency/professional.

**Closed Adoption:** No information or contact is shared between the Adoptive Parents and Birth Parents.

**Post Adoption Contact Agreement (PACA):** An agreement that allows for certain, specified contact between the Birth Parents and Adoptive Parents. Laws on PACAs vary from state to state.

\*Cost and process vary depending on the type of adoption as well as the agency.

**Keep in mind:** *Same-Sex Couples are allowed to adopt in the U.S. This is not just for couples of the opposite sex.*

*The best type of adoption is the one that best suits your needs.*

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# Educational Resources for Pregnancy

**To learn more about why you may be having trouble getting pregnant you may visit:**

Huggies.com at <https://www.huggies.com.au/conception/getting-pregnant/pregnancy-how-to/having-trouble>

Womenshealth.gov at <https://www.womenshealth.gov/a-z-topics/polycystic-ovary-syndrome>

**To learn more about fertility treatments you may visit:**

Fertility Treatment Abroad at <http://fertility.treatmentabroad.com/about-infertility/faqs/what-are-my-options-if-i-cant-get-pregnant>

WomensHealth at <https://www.womenshealthmag.com/mom/alternative-pregnancy-options>

Advanced Fertility Center of Chicago at <https://www.advancedfertility.com/ivf.htm>

American Pregnancy Association at <http://americanpregnancy.org/infertility/in-vitro-fertilization/>

**To learn more about Surrogacy you may visit:**

The Fertility Center of Las Vegas at <https://fertilitycenterlv.com/diagnosis-treatment-care/gestational-carriers-surrogacy/>

WebMD at <https://www.webmd.com/infertility-and-reproduction/guide/using-surrogate-mother#1>

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*Where can I go if I am considering fertility treatment?*

**Red Rock Fertility Center**

(702) 262-0079

9120 Russell Rd #200, Las Vegas, NV 89148

<http://redrockfertility.com/>

**The Fertility Center of Las Vegas**

(702) 254-1777

8851 Sahara AV #100, Las Vegas, NV 89177

<https://fertilitycenterlv.com/>

**Green Valley Fertility Partners**

(702) 722-229

2510 Wigwam Pkwy #201, Henderson, NV 89074

<https://greenvalleyfertility.com/>

**Nevada Fertility Institute**

(702) 936-8710

8530 W Sunset Rd Suite 310, Las Vegas, NV 89113

<http://fertilitynevada.com/>

*Where can I go to get a sperm donor?-You can get a sperm donor at a fertility center, but there are other options.*

Visit **NW Cryobank** at <https://www.nwcryobank.com/contact-us/> for more information on obtaining a sperm donor.

*Where can I get egg donors?-Fertility centers are also helpful in this situation.*

*You may also visit:*

**Las Vegas Egg Donation**

(702) 990-3807

3960 Howard Hughes Pkwy #500, Las Vegas, NV 89169

<http://lasvegaseggdonation.com/>

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# Adoption Resources

Agencies to reach out to if wanting to adopt in Las Vegas, NV:

## **A Child's Dream of Nevada INC.**

(702) 399-3274

4550 W Oakey Blvd, Downtown, NV 89102

<https://achildsdream.org/>

## **Premier Adoptions Agency**

(702) 459-5918

3320 Sunrise Ave #107. Downtown, NV 89101

<https://www.premieradoption.org/>

## **Adoption Choices of Nevada**

(702) 221-2400

222 S Rainbow Blvd #115, Downtown, NV 89145

<https://www.adoptionchoicesofnevada.org/>

## **Catholic Charities of Southern Nevada**

(702) 385-3351

1511 N Las Vegas Blvd, Downtown, NV 89101

<https://www.catholiccharities.com/>

## **SAFY of Nevada**

(702) 385-5331

4285 N Rancho Dr. #130, Downtown, NV 89130

<http://www.safy.org/>

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**Open Arms Adoption Agency, a Program of Jewish Family Services Agency**

Ann Coleman

Director of Adoption Services

702-732-0307

[annc@openarmslv.org](mailto:annc@openarmslv.org)

<http://www.jfsalv.org/services/adoption/>

For more information on the adoption process you may look at:

**Division of Child & Family Services-Adoption**

<http://dcfs.nv.gov/Programs/CWS/Adoption/> - This website will also provide you with a “Nevada Adoption Guide.”

To take a guided orientation of what the adoption process might look like you may visit:

Heart to Heart Adoption at <https://hearttoheartadopt.com/hoping-to-adopt/>

For a **detailed** explanation on the IVF process you may visit: American Pregnancy Association at <http://americanpregnancy.org/infertility/in-vitro-fertilization/>

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# Carrying Pregnancy to Term

*What does this mean? Are there different circumstances?*

The words “carrying to term” refers to staying pregnant the full nine months or until a baby is ready to be born, but the phrase has also come to mean the choice to continue with a pregnancy despite a terminal fetal diagnosis.

Many pregnant parents face prenatal diagnosis of life-limiting conditions. No matter the choice they make it is difficult.

Here are some resources for support:

Carrying To Term: <http://carryingtotermin.org/about/>

For more resource go to:

<https://40daysforlife.com/media/40DFLpregnancyresourcepage11.pdf>

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## Carrying Pregnancy to Term Resources

### **Prenatal Care:**

#### **UMC Hospital: Baby Steps, Bright Beginnings**

(702) 383-7353

<https://www.umcsn.com/Medical-Services-at-UMCSN/Family-Resource-Center-Baby-Steps.aspx?intMenuID=211&intPageID=212>

#### **Sunny Babies: Sunrise Children’s Hospital, Mountain View Hospital, Southern Hills Hospital**

(702) 731-8703

<http://sunrisechildrenshospital.com/service/sunny-babies>

#### **Baby Care (Clark County Nevada)**

(702) 455-5295

<http://www.clarkcountynv.gov/family-services/services/Pages/ParentingProject.aspx>

#### **Las Vegas OBGYN Center**

7160 Smoke Ranch Road

Las Vegas, NV 89128

(702) 254-8900

<http://www.lasvegasobgyncenter.com/>

#### **Women, Infant, and Children (WIC)**

1.800.8.NEV.WIC

<http://nevadawic.org/>

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## Resources for Pregnancy and Parenting

\*Keep in mind that it is important to receive prenatal care as soon as you find out you are pregnant. “Go Before You Show:” <http://www.gobeforeyoushow.org/the-campaign-message.html>

**Baby Ur Mine:** <http://babyurmine.org/>

**Family to Family Connection:** Program that strengthens families through interactive classes for parents and children up to four years old. Each child is assessed to determine her or his own childhood needs. Classes for mom and child cover a wide variety of subjects, such as motor skills, interactive play, music, art, socialization, appropriate discipline, and proper health and nutrition. Other needs, such as diapers, formula, and clothing are also provided. Workshops and activities such as infant CPR, infant massage, infant socialization, parent support groups, and interactive play are also provided.

Family to Family Connection classes and programs are offered at various locations throughout Clark County. Each location serves residents who live in a particular geographic area.

### **North Las Vegas (Olive Crest)**

3825 W. Cheyenne Ave., Suite 604  
North Las Vegas, NV 89032  
(702) 685-3459

### **East/Central Las Vegas (East Valley Family Services)**

1800 E. Sahara Ave., Suite 112  
Las Vegas, NV 89119  
(702) 631-7098

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**West Las Vegas (Lied Memorial Boys and Girls Club)**

2850 S. Lindell Road  
Las Vegas, NV 89146  
(702) 932-1880

**South Las Vegas (Hope Link)**

178 Westminster Way  
Henderson, NV 89015  
(702) 566-0576

**Early Head Start:** Early Head Start is child development program for very low-income young children, children with disabilities, and their families. The program prepares low-income, preschool-aged children for success in school. The program offers activities for infants, toddlers, and two-year-olds; as well as home visits, especially for families with newborns; and parent education and parent-child activities.

**702-387-0179**

**Department of Family Services Parenting Classes:** The Clark County

Department of Family Services offers a series of free programs to help parents be more effective in raising their children. Programs are located at various times, days and locations throughout Clark County. The programs include: Baby Care (for expecting or new parents with children ages birth to 6 months), Nurturing Parents and Families (for parents of children ages 6 months to 5 years), ABC's (for parents of children ages 5 to 10 years), ParenTeen Solutions (for parents and youth 11 to 17 years), and Blended Families (for parents and step parents with children of all ages).

**(702) 455-5295**

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**Nevada 2-1-1:** Helpline for resources available for pregnant people and new parents in Southern Nevada. You can discuss your needs with live operators who speak your language and will refer you to organizations that provide help with medical care, food and baby supplies, parent education, family planning, and more. Dial 2-1-1 to talk with an operator, or text your 5-digit zip code to 898211 (**Standard message and data rates may apply, text HELP for help, or STOP to opt out. For privacy policy and standards related to 898211 services, go to: <http://www.preventionpays.org/policies.htm>**).

**Text 4 Baby:** Free mobile information service that sends free text messages to pregnant parents & new parents, to help them through their pregnancies and their babies' first year. Parents who sign up for the service by texting BABY (or BEBE for Spanish) to 511411 will receive messages each week, timed to their due date or baby's date of birth.

**Nevada Health Centers:** Nevada Health Centers Clinics offer services to women of all ages, including:

- Annual Pap Exams
- Breast Exams
- Birth Control
- Family Planning
- IUD insertion and removal
- Lab Tests
- Medical Counseling
- Prenatal care
- STI Testing

**(702) 253-7802**

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**Baby Steps and Bright Beginnings:** UMC’s Family Resource Center is home to two programs dedicated to serving expectant and new parents. Baby Steps assists mother in obtaining financial assistance for prenatal care, referral to a physician, transportation to prenatal visits, emotional support and childbirth education. This program is offered free of charge to any pregnant woman. Bright Beginnings provides education in childbirth preparation, breastfeeding, sibling classes, baby basics, infant massage, infant and child CPR, a “boot camp” for new dads and babysitter classes.

**(702) 383-2229**

**Baby Rose:** St. Rose Dominican Baby Rose program encourages early, continuous prenatal care through free services to uninsured women, including referrals to doctors, prenatal vitamins, and childbirth education. Also available at St. Rose Dominican is the Kickin’ it with Baby program, a relaxed, eight-week group for pregnant teens and teen moms.

**(702) 568-9074**

**Baby First:** HELP of Southern Nevada’s Baby First service provides pregnant women with health care information and guidance before and after the baby comes; mother-to-mother support; and assistance with diapers, formula, wipes and prenatal vitamins.

**(702) 759-0883**

**Babies Are Beautiful:** Valley Hospital, a community leader in [maternal-child health](#), specializes in caring for high-risk mothers-to-be and their babies. The hospital offers many specialty services, including an antepartum unit to monitor pregnancy-related complications, a maternal triage area to assess expecting mothers, two operating suites located within the department and Level II and III Neonatal Intensive Care Units.

**(702) 671-8501**

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**Nurse-Family Partnership:** The Southern Nevada Health District Nurse-Family Partnership Program helps low-income, first-time moms with the care and support they need to have a healthy pregnancy, provide competent care for their children, and achieve a better life for themselves and their families. A specially trained nurse will make visits to your home and create a partnership with you to help you throughout your pregnancy and the first two years of your child's life.  
**(702) 759-0779**

**Sunny Babies:** Sunrise Children's Hospital Sunny Babies program encourages pregnant women to seek early and continuous prenatal care, beginning in the first trimester of their pregnancy. Sunny Babies helps you find a doctor, apply for Medicaid insurance, and register for free childbirth classes.  
**(702) 731-8703**

**Well Rounded Mama:** Well Rounded Momma (WRM) has been empowering women through service and education since 2007. We are dedicated to offering women mind & body awareness during the transition to motherhood. We take a holistic and fact based approach to childbirth and wellness services. Our team of birth professionals came together to create a safe and nurturing environment that offers a variety of premium services, classes, workshops, and products to expecting mothers and their families.  
**(702) 478-5080**

**PinkPeas:** Pinkpeas Pregnancy and Parenting Care Center is a family-centered, community-based, nonprofit pregnancy and parenting care group. We are a group of midwives, doulas, childbirth educators, lactation educators, and other facilitators who provide complete pregnancy, birth, and parenting care to families who are "healthy and low risk." Christian based.  
**(702) 822-BABY (2229)**

**WIC – Women, Infants, and Children:** The WIC target population are low-income, nutritionally at risk:

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- Pregnant women (through pregnancy and up to 6 weeks after birth or after pregnancy ends).
- Breastfeeding women (up to infant's 1<sup>st</sup> birthday)
- Non Breastfeeding postpartum women (up to 6 months after the birth of an infant or after pregnancy ends)
- Infants (up to 1<sup>st</sup> birthday). WIC serves 53 percent of all infants born in the United States.
- Children up to their 5<sup>th</sup> birthday.

**1-800-863-8942**

### **Woman to Woman Gynecology:**

#### Family Planning:

- All forms of birth control.
- Wide variety of hormonal contraception.
- IUDs (intrauterine devices) including Paragard and Mirena.
- Surgical contraception including ESSURE devices.
- Laparoscopic tubal ligation.
- Outside referrals for male contraception and vasectomies.
- Ultra-private pregnancy termination services.

**(702) 531-5400**

**Dr. Curtis Boyd:** 3<sup>rd</sup> Trimester abortion requests handled on a case-by-case basis.

Located in Albuquerque, New Mexico.

**(800) 777-7630**

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**Spring Valley Women's Health:** Spring Valley Women's Health offers compassionate and comprehensive women's health care in Las Vegas, NV. Our friendly and professional obstetricians, gynecologists, and specialists take your personal needs into consideration as we provide you with quality and complete reproductive health care.

Services Include:

- Complete prenatal care and delivery for normal and high-risk pregnancy
- Annual exams and pap smears
- In-office ultrasound
- STD screening, UTI, and yeast infections
- Family planning and birth control
- Medical and surgical treatment of all gynecologic conditions

**(702) 222-3223**

**Community Outreach Medical Center:** Community Outreach Medical Center provides comprehensive prenatal services from pregnancy testing (urine and blood) to 26 weeks of pregnancy for women ages 16 to 40. Prenatal services include laboratory tests, ultrasounds, office visits, breastfeeding classes and medications. We have partnerships with the University of Nevada School of Medicine and University Medical Center Hospital Baby Steps Program to ensure our patients receive the best care available in Southern Nevada. Payment plans are available.

**(702) 657-3873**

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# Birth & Postpartum

*There are a couple childbirth and delivery methods you should know about.*

**Vaginal Delivery:** In a vaginal birth, the baby is born through the birth canal.

Usually, pregnant parents give birth at around 38-41 weeks of pregnancy, but it is different for everyone.

**Cesarean Section (C-Section):** The delivery of a baby through a surgical incision in the pregnant parent's abdomen and uterus. In certain circumstances, a C-section is scheduled in advance. In others, it's done in response to an unforeseen complication.

**Vacuum Extraction:** procedure sometimes done during the course of vaginal childbirth. A health care provider applies the vacuum (a soft or rigid cup with a handle and a vacuum pump) to the baby's head to help guide the baby out of the birth canal.

**Forceps Delivery:** type of operative vaginal delivery. It's sometimes needed in the course of vaginal childbirth. A health care provider applies forceps (an instrument shaped like a pair of large spoons or salad tongs) to the baby's head to help guide the baby out of the birth canal.

## **Support during pregnancy, birth, or postpartum can include:**

Midwives: The traditional care providers for birthing persons and infants.

Midwives are trained professionals with expertise and skills in supporting birthing persons to maintain healthy pregnancies and have optimal births and recoveries during the postpartum period.

- **Certified Nurse Midwife (CNM):** Is a midwife who exceeds the International Confederation of Midwives essential competencies for a midwife and is also an advanced practice registered nurse having completed registered nursing and midwifery education.
- **Certified Professional Midwife (CPM):** A midwife who has completed a degree in midwifery at a credentialed educational institution.

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Doula: A person who is trained to assist a laboring person during childbirth and to support families in the days and weeks after a baby (ies) is/are born.

- Antepartum: A doula trained to work with families who are facing pregnancy concerns such as bedrest or medical complications.
- Labor: A doula trained to work with families during pregnancy, during labor and in the birth process, and in the immediate postpartum time, offering support, encouragement, information, comfort, and referrals as needed.
- Postpartum: A doula trained to provide evidenced based information on things such as infant feeding, emotional and physical recovery from birth, mother-baby bonding, infant soothing, and basic newborn care.
- Full-Spectrum: A doula trained to support individuals and families through all pregnancy outcomes, including abortion, miscarriage, and adoption.

Doulamatch.com: To find local independent doula support.

**Trauma informed/experienced in working with survivors Doulas:**

Kayleigh Mancha

(702) 886-0479

4580 S Eastern Ave suite #33, Las Vegas, NV 89119

<http://www.kayandme.com/>

Cristina Hernandez

(702) 338-1874

Find her on Facebook at Cristina Hernandez Doula Services.

**Local Organizations:**

Well Rounded Momma

(702) 478-5080

8826 S Eastern Ave Suite 111, Las Vegas, NV 89123

<https://www.wellroundedmomma.com/>

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Douglas of Las Vegas

(702) 476-8998

2298 W Horizon Ridge Pkwy suite 215, Henderson, NV 89052

<http://www.douglasoflasvegas.com/>

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## *After Birthing what comes next?*

*What is postpartum?*

*What can happen during postpartum?*

**Baby Blues:** Confined to the period of 2-3 weeks post birth, “baby blues” refers to the emotional vulnerability and mood swings that are a normal and expected part of a health postpartum adjustment. The baby blues affects about 80% of parents who have recently given birth, and it goes away on its own.

*What are the different types of postpartum mood and anxiety disorders?*

**Depression:** Affects up to 10-15% of people after giving birth. It can also happen many years following the birth of a baby, but typically signs of postpartum depression surface in the first three months after birth.

**Anxiety:** Constant worrying, feeling that something bad is going to happen, racing thoughts, disturbances or sleep or eating habits, the inability to sit still, and/or panic attacks.

**Psychosis:** Is a rare illness. The onset is usually sudden, most often within the first two weeks postpartum. A person with postpartum psychosis experience severe and alarming symptoms. These include hallucinations, extreme agitation, paranoia, and the desire to harm oneself or the baby/family.

*If you are experiencing any of this it is best to reach out to a practitioner.*

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## Support Groups

### Weekly Online Support Groups

- (English/Spanish) Wednesday Chats for Moms  
<http://www.postpartum.net/chat-with-an-expert/>  
Chat Number: (800) 944-8766  
Participant Code: 73162
- Doulas of Las Vegas  
1<sup>st</sup> & 3<sup>rd</sup> Monday of every month at 7:30pm

### Lactation Services:

#### Lactation Consultants

Jollina Simpson

Breastfeeding and babies, yeah!

<https://www.breastfeedinglv.com/>

Lisa Weinschenker 702-944-7437

Well Rounded Momma

<https://www.wellroundedmomma.com/breastfeeding-support>

La Leche League International

[www.llli.org](http://www.llli.org)

### Loss/Miscarriage:

<https://stillbirthday.com/>

<https://www.kenyathedoula.com/loss-miscarriage/>

<http://nationalshare.org/>

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## Veteran Specific Resources

**Parenting for Service Members and Veterans:**

<https://www.veterantraining.va.gov/apps/veteranparenting/index.html>

**Parenting2Go Mobile App:** An app to help veterans and service members reconnect with their children and provides tools to strengthen parenting skills.

<https://itunes.apple.com/us/app/parenting2go/id804311274?mt=8>

Only available for IOS devices.

**Babies on the Homefront:** <http://babiesonthehomefront.org/>

**Center for Parent Information & Resources:**

<http://www.parentcenterhub.org/military/>

**Veteran Families United:** <http://veteranfamiliesunited.org/childrens-and-youth-resources/>

**Women's Veteran Health Care:**

<https://www.womenshealth.va.gov/WOMENSHEALTH/outreachmaterials/GeneralHealthandWellness/maternity.asp>

Women veterans who are expecting a baby can get a breast pump and nursing bras for free! Also the VA covers healthcare for the first 7 days of life.

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## Counseling Services

**On Campus: Free to full-time UNLV Students**

**College of Education: The Practice at UNLV:**

CEB 226, 4505 S. Maryland Parkway, Box #453033, Las Vegas, NV 89154

Individual Counseling only

(702) 895-1532

<https://www.unlv.edu/thepractice>

**UNLV Center for Individual, Couple & Family Counseling:**

900 E Harmon Ave, Las Vegas, NV 89119

(\$10 or less for students & staff)

(702) 895-3106

<https://www.unlv.edu/cicfc>

**Student Counseling & Psychological Service (CAPS):**

4505 S. Maryland Pkwy. Las Vegas, NV 89154-2005

Located: Student Recreation and Wellness Center (Room 1500)

(702) 895-3627

<https://www.unlv.edu/studentwellness/caps>

**Off Campus:**

**Resource Family Services:**

2235 E. Flamingo Rd. Ste. 234 Las Vegas, NV 89119

(702) 331 5608

<http://www.resourcefamilyservices.com/>

**Center for Compassionate Care:**

4131 Swenson St. Las Vegas, NV 89119

(702) 733-0320

<https://www.nah.org/what-we-do/center-for-compassionate-care>

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## Lactation Rooms

### *What are lactation rooms and where can I find them?*

Lactation rooms are spaces around the UNLV campus that provide a place for parents to breastfeed/chestfeed or pump in private.

These spaces are located here:

- **Jean Nidetch Women's Center:** SSC-A Room 225
- **Carlson Education Building:** Third floor across from work room 321.
- **UNLV/CSUN Preschool:** Ask for the key at the front desk.
- **Boyd School of Law:** Second floor room 210, please visit BSL Room 211  
For key to access the room.
- **Center for Social Justice:** Please check-in with front desk.

**For more information on lactation rooms you may call the Jean Nidetch Women's Center.**

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# Title IX and Accommodations

Title IX of the Education Amendments of 1972 (Title IX”), 20 U.S.S §1681 *et seq.*, is a Federal civil rights law that prohibits discrimination on the basis of sex- including pregnancy and parental status-in educational programs and activities. All public and private schools, school districts, colleges, and universities receiving any Federal funds (“school”) must comply with Title IX.\*

Here are some things you should know about your rights:

Classes and School Activities-your school **MUST**:

Allow you to continue participating in classes and extracurricular activities even though you are pregnant. This means that you can still participate in sports, honor societies, student leadership opportunities, and other activities, like after-school programs operated at the school.

Allow you to choose whether you want to participate in special instructional programs or classes for pregnant students. You can participate if you want to, but your school cannot pressure you to do so. The alternative program must provide the same types of academic, extracurricular and enrichment opportunities at your school’s regular program.

Allow you to participate in classes and extracurricular activities even though you are pregnant and not require you to submit a doctor’s note unless your school require doctor's note from all students who have physical or emotional condition requiring treatment by a doctor. Your school also must not require a doctor’s note after you have been hospitalized for childbirth unless it requires a doctor’s note from all students who have been hospitalized for other conditions. Provide you with reasonable adjustments, like a larger desk, elevator access, or allowing you to make frequent trips to the restroom, when necessary because of your pregnancy.

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## *What are the accommodations that can be provided?*

**Excused absences and medical Leave-**UNLV is required to excuse all pregnancy-and/or-childbirth-related absences for as long as your doctor verifies that it is necessary. That absences cannot have any adverse effect on grades and/or status as a student in the University.

UNLV must allow you to return to the same academic and extracurricular status as before your medical leave began, which must include giving you the opportunity to make up any work missed while you were out on any medically verified, Title IX-related leave of absence.

UNLV must ensure that faculty understand the Title IX requirements related to excused absences/medical leave. Your professors cannot refuse to allow you to submit work after a deadline you missed because of pregnancy or childbirth. If your professor's grading is bases in part of class participation and/or attendance and you missed class because of pregnancy and/or childbirth, you must be allowed to make0-up participation or attendance requirements for any course in the same manner as for all students enrolled in the class,

It is the responsibility of UNLV to provide pregnant students with the same special services that it provides to students with temporary medical conditions, upon the students notification to the university of a need for assistance. (Please refer to the section entitled ("Title IX Academic Adjustments: How the Disability Resource Center Can Assist You"))

**Harassment-**your school **MUST** protect you from any harassment based on sex, pregnancy or related conditions, including harassment by any student, staff, faculty member and/or community member affiliated with UNLV. Comments that constitute prohibited harassment include: making sexual comments or jokes about your pregnancy; calling you sexually charged names; spreading rumors about your sexual activity; and/or making sexual propositions r gestures, if the comments are sufficiently serious that it interferes with your ability to benefit from or participate in your UNLC academic program, services and/or extracurricular activities.

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**Policies and Procedures**-your school **MUST** have in print, and online for dissemination a policy against sex discrimination. It is recommended by the United States Office of Civil Rights, Department of Education, that the policy make clear that prohibited sex discrimination covers discrimination against pregnant and parenting students. It is the responsibility of UNLV to adopt and publish in print and online and have readily available Title IX grievance procedures informing students and the entire UNLV Community of the civil rights afforded to them under Title IX. The university must provide instructions as to the filing of complaints of sex discrimination, including discrimination related to pregnancy and/r parental status. UNLV must identify at least one employee to implement, execute and enforce its responsibilities under Title IX (sometimes called a “Title IX Coordinator”) and in addition, notify all students, staff, faculty and the public of the name, title, and contact information of it Title IX Coordinator. The responsibilities of a Title IX Coordinator must include investigating, reporting and adjudicating complaints of discrimination against pregnant and parenting students.

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## **Title IX Academic Adjustments: How the Disability Resource Center (DRC) Can Assist You**

**Academic Adjustments:** Students who are expecting or have recently given birth are eligible to receive academic adjustments under Title IX. Every student's needs are different, depending on their circumstances, so it is important that the student complete the following steps before their appointment with a DRC Specialist:

1. Log on to [www.unl.edu/drc](http://www.unl.edu/drc).
2. Cursor down to the bottom of the screen on the DRC website.
3. Click on the big, orange Square that reads "Register with the DRC."
4. Complete the DRC Application-follow the prompts and click "submit."
5. Obtain medical documentation from your obstetrician verifying your pregnancy, and indicating any limitation you currently have or may have during your pregnancy, and/or after childbirth.
6. Submit the medical documentation to the DRC.

### **What happens next?**

The student will be contacted by email to call the office to schedule an appointment for a new student intake with a DRC disability specialist. At the appointment, which takes approximately one-hour, the specialist will discuss academic adjustments and services available. The specialist will also instruct the student on how to use the DRC'S Rebel Access Portal (RAP) which is where they will be able to request and access individual services that have been authorized by their disability specialist.

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## What Types of Academic of Adjustments?

Each student's needs are different, and the types of services available to them can vary from student to student.

Some of our services include:

- **Attendance Consideration**-The DRC will work with the student and their professors if additional absences become medically necessary.
- **Examination Rescheduling**-If pregnancy or recent childbirth impacts a student's ability to take exams, the DRC may be able to provide exam rescheduling.
- **Adapted Furniture Modification**-If a student needs a chair and/or adapted table to accommodate them while in classes, the DRC will provide them with one in each classroom for their use.
- **Alternative Testing**-If the fatigue associated with pregnancy, or any other complication affects the student's ability to test in class, the DRC may arrange for them to take their examinations in a distraction educed environment. Restroom facilities, the ability to take short breaks "off the clock" during exams, and the ability for the student to consume snacks and beverages during the exam are also allowed.
- **Technology-Assisted Note Taking**-If the student tires easily, then they may be allowed to use technology to supplement their lecture notes.
- **Time Extensions on Assignments**-Should pregnancy, childbirth, or medical complications affect a student's ability to turn in assignments by the specified due dates, the DRC may work with their professor to determine if there can be some flexibility in assignment deadlines if medically necessary.
- **Advocacy**-The DRC will assist student with advocacy services should their professor(s) require clarification and/or additional information on working with students under Title IX.

If a student feels that they may need academic adjustments for their pregnancy and/or immediately after, or if they have further question regarding the services of the DRC, they are encouraged to contact them at 702-895-0866. The DRC is located in the Student Services Complex (SSC), Building A, Room 143, on the

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first floor. The hours of the DRC are M-F 8:00am-5:00pm. Please contact their office for assistance.

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We hope you found this handbook helpful and enjoyable. This could not have been created without the help of the previous contributor, Desiré Galvez (Parenting Intern), the contributions of the Disability Resource Center as well as the Parenting Program Assistant of the Jean Nidetch Women's Center, Monserrat Acosta Gomez.

