



# NAVIGATING PERINATAL LOSS



St. Peter's Health



“Grief is really just love.  
It is all the love you want  
to give, but cannot.”

-Jamie Anderson



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The bereavement team at St. Peter's Health wishes to convey our deepest condolences to you and your family. We are here to hold space for any feelings that may arise, however difficult they may be. This can be at least one place where you will have no expectations and as much support as you need in the way you need it.

In this booklet, you will find information on early pregnancy loss, information about care in our Women and Children's Unit, guidance on grief and spirituality and how to navigate resources and find support. Your experience is unique, and how you use this booklet will also be unique. You may find helpful information on every page and there is likely some information that may not be specific to your situation. We hope you find support in these pages.

We hope to remind you there is no right or wrong way to feel. You may experience a range of emotions like sadness, relief, hope or anger. You may find that you need time to process or heal or you may desire to get straight back to whatever you were doing previously. Our team is available to provide ongoing support for you and your family now or any time in the future.

Take care of you,

St. Peter's Health Bereavement Team

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Scan for our  
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with more  
resources

[sphealth.org/PerinatalLoss](http://sphealth.org/PerinatalLoss)



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# Grief

You are experiencing a tremendous loss, and are likely grieving. Underneath that primary loss, you may grieve the loss of plans, hopes and dreams for your future. You may be feeling numb, angry, guilty, afraid or any other emotion—too many to name. You may experience a sense of relief or dissociation. You may be overwhelmed by the intensity of emotions. You may be fearful that this is how you are always going to feel.

Know that support and resources are available in many forms to walk with you during this time. If at any point you have thoughts of harming yourself or someone else, please seek emergency help in the ER, call 911, call/text 988 or call 1-833-TLC-MAMA.

## Grief unfolds in many forms, yet there are truths of grief that are universal:

- Each person has their own unique grief process.
- Grief takes its own time and is not subject to a time limit. While there will come a day when life will begin to take on some new feeling of normalcy again, the time it takes for that day to arrive will vary from person to person, even within the same family.
- Grief does not progress through stages in a logical or orderly way. You will experience a variety of emotions with grief. You will move back and forth among them while you are grieving. Grief occurs in waves. There is an ebb and flow to it. There are times when you may feel your loss less, and times when you feel it more intensely. You will experience what many call “good days” and what many call “bad days,” but over time, there will be longer periods of good days. Having a period of bad days after having a stretch of good days is normal. It does not mean you are backsliding into your grief or grieving incorrectly.
- There is not one right way to grieve, or a set way to grieve. There are various styles of grief. Some may need to cry, to talk about their grief, to tell the story of their baby many times and experience intense feelings. Some grieve by problem-solving and are less comfortable sharing their feelings around the loss, and express their grief in doing tasks and activities. These are all expected patterns of grief. You and your partner may grieve differently, and it is important to know that neither of these is the right way or the wrong way. Be patient with each other and kind to each other, giving each other time and space to grieve in the way that feels right.
- Grieving your baby does not mean letting go of your baby. Many bereaved parents, over time, share that a sense of connection with their baby; for example, feeling their baby present with them, lighting a candle at a special time or planting a tree or garden in their memory, can be comforting. It is healthy to maintain a connection to your baby that feels right for you. *See the “Memory Making” section of this booklet.*

## How to help yourself grieve:

- Because there is no set time limit to grief and no right way to grieve, it is important to give yourself time, space and permission to grieve in ways that feel right to you. Let yourself ask the difficult questions for which there may be no clear, easy or any answer at all.
- Be aware of your limitations and allow yourself to honor them. It is okay to say “no” to requests, events, etc. if you do not have the energy or do not feel up to it. Create an exit strategy if you do say yes and find it is too much and need to leave.
- Avoid making any major decisions while you are actively grieving.
- Allow yourself to take a break from the intensity of grief. Know that it is okay to laugh and have lighthearted moments, and that does not mean you do not long for your baby.
- Understand that people in your life may make statements that are unhelpful, unsupportive and even hurtful. Recognize the positive intent behind these statements and give yourself permission to limit your interactions with these people until you feel ready to reengage with them. Lean into the people in your life who can be present with you, who can listen without judgement, hear your questions without providing simple answers and who walk alongside without trying to fix your grief.

Remember that the only way through grief is not around it, but through it. Above all, be kind to and patient with yourself as you grieve.



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# Spirituality and Grief

Grief affects us physically, emotionally, cognitively and spiritually. In the wake of a loss, it is important to nurture and care for your whole person; body, mind and spirit. Yet in the midst of feeling overwhelmed by your loss, it can be hard to care for yourself.

Spirituality is very personal and individual. It is like a quilt, made up of beliefs, practices and community that we sew together and wrap around ourselves when we need comfort, presence, strength, healing and hope—for this moment and for the days to come. For some, spirituality may include a connection to God, a Higher Power and/or a particular religious tradition. Others may connect to the transcendent through art, music or nature.

We turn to spirituality to make sense of our lives and the world, yet when your life and world have been impacted by a miscarriage or loss, nothing may make sense at all. Your safe place to land may not feel safe, comforting or hopeful, and the connection to the transcendent may feel irrevocably broken. Your spirituality may be buried underneath the physical, emotional and cognitive aspects of loss and you may not feel like you can wrap it around you again, or how to grab hold of it.

It can be helpful to consider what spiritual practices or encounters with the transcendent have helped you feel more connected. For some, engaging in familiar practices can be a helpful touchstone. Others may feel the desire to develop new practices—new ways of connecting with their spiritual selves.

Whether connecting with the familiar or wanting to reach for something new, there is a richness of spiritual practices available. Here are just a few ideas of how caring for yourself can help you heal as you grieve.

## **Movement & Outdoor Exposure:**

- Physical movement can help you feel like you are moving to a place of calm and peace.
- Being outside or going for walks releases endorphins and can help you clear your mind.

## **Creative Expressions:**

- Sculpting, painting or making a collage of your grief. Try not to be concerned with creating a masterpiece. Simply be in the moment, making what your soul is guiding you to make in this moment.
- Needle arts. Many find the repetitive motion and calm concentration of knitting, crocheting and quilting a spiritual practice. These arts all use a different part of the brain, which can provide relief from grief.
- Gardening is an act of creation. Feeling the earth beneath your fingers is comforting.

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## Sensory Connections:

- Reflecting on an image or visualizing a special place, listening to a piece of music, prayer beads or a touchstone, are ways to center yourself, connect with your source of strength and bring comfort, strength and healing.

## Writing & Reflection:

- Journaling and writing prayers, poems and stories can be private and safe places of solace where you can fully express yourself. Writing can clear out your naturally overwhelmed mind and full heart.

## Reading:

- There is a rich diversity of books, daily devotionals and blogs available. Lighthearted books can also be a pleasant diversion.

## Silence:

- Silence contains the ingredients that can bring some peace in the midst of the wilderness. Silence lifts up our hearts and creates much-needed space to give attention to our grief.

## Thin Places:

- Thin places are places where the veil between the physical world and the spiritual world is so thin that when we are in them, we intuitively sense the timeless and the boundless. Thin places are any place that fills you with awe and wonder. Go to a thin place to walk, pray or simply sit in the presence of the sacred.

## Ritual:

- Lighting a candle and arranging a home altar are just two examples of rituals that can comfort, heal and bring a sense of peace.

## Community:

- Lean into community—whether family, friends or religious and spiritual groups—who will be present with you to listen without judgment, hear your questions without providing simple answers and walk alongside you without trying to fix your grief. This support can help you move through your grief instead of avoiding it.
- Helena has local community events to help support families. See the St. Peter's Health loss resources webpage for more information at [spealth.org/Grief](http://spealth.org/Grief)

*Whatever you choose to feed your soul, try to set aside time every day for it. Choose a time that feels right for you, whether that is one minute, five minutes or longer. Some days, you might not feel like it and that is okay. No matter how long or how often, taking time to take care of your soul will bring a measure of comfort, peace and healing to your hurt heart. Above all, be patient with and kind to yourself as you grieve.*



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# Memory Making

## *A Heartfelt Way to Honor Your Baby*

The longing to hold onto your baby's memory can feel overwhelming. Memory Making offers a meaningful way to create tangible connections to your baby, preserving their spirit and keeping them close to your heart.

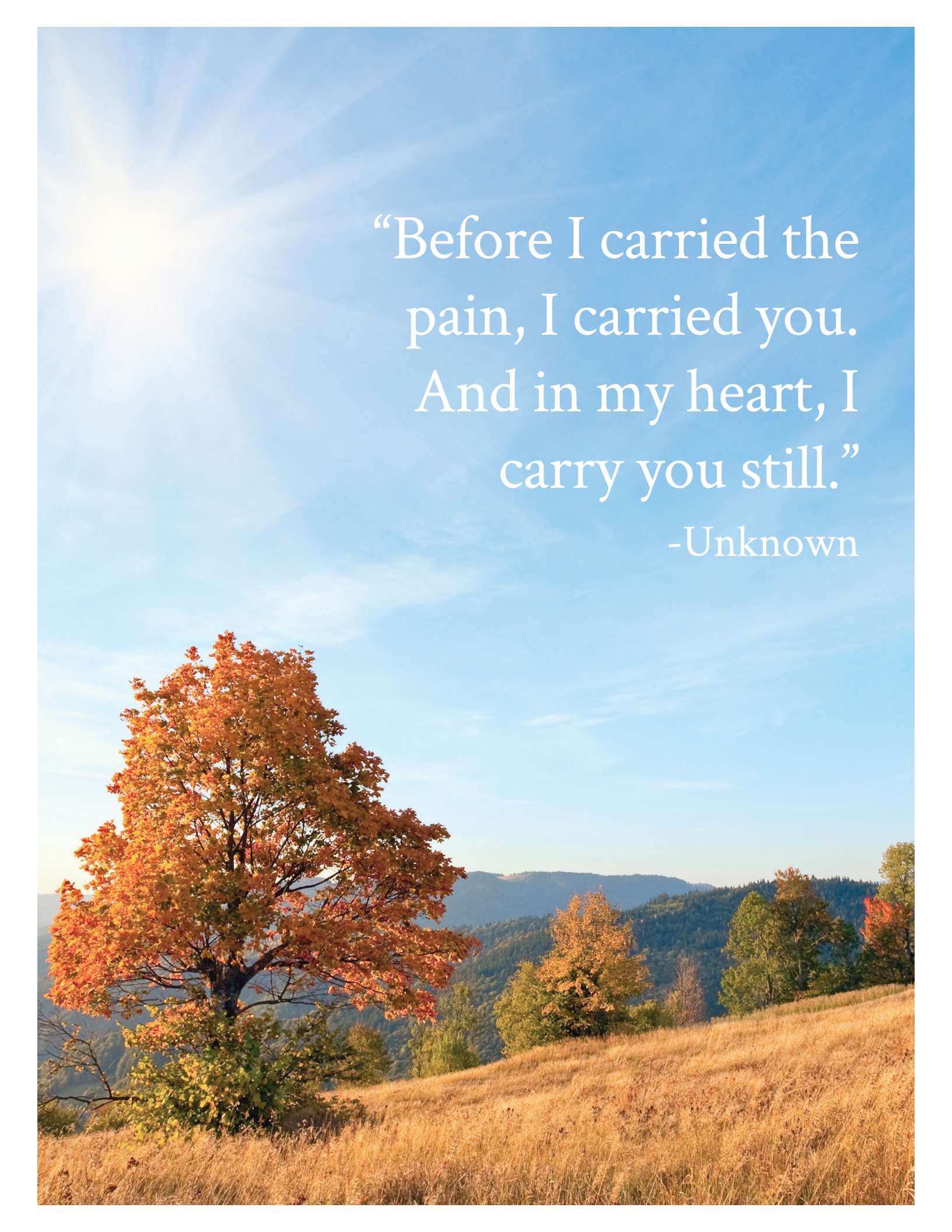
Many families who have faced the profound loss of a baby find that engaging in Memory Making helps them cope with the grief and emotional pain. The mementos you create can serve as a gentle reminder of your child's life and the love you will always carry for them. These memories can also offer comfort, helping to keep your baby's presence alive in your life as time moves forward.

At St. Peter's Health, some of the Memory Making opportunities that you may choose to participate in include taking footprints, capturing photographs and collecting precious items in a keepsake box. You may choose to include others who are part of your family—siblings, grandparents, etc.—to take part in this meaningful experience as you feel comfortable.

Memory Making can continue once you return home. As you move through your grief, Memory Making can continue to be a healing practice. Each act of remembrance can help you express your emotions and keep the connection with your baby alive in your heart.

**Here are some additional ideas to consider as you navigate your journey of healing:**

- Lighting a candle on special dates to acknowledge your child's presence
- Planting a tree or garden, creating a stepping stone or bench
- Creating a scrapbook of photos
- Purchasing special jewelry that represents your baby—a locket with their picture or a piece of jewelry monogrammed with their name or initial
- Volunteering or participating in special walks/fundraisers in your child's name
- Journaling, writing letters or poems, drawing, painting or other forms of expressive arts
- Finding a special place to place flowers or meaningful objects
- Finding special ways to celebrate your baby's birthday every year



“Before I carried the  
pain, I carried you.  
And in my heart, I  
carry you still.”

-Unknown



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# A Note for Loved Ones Providing Support for Your Family

Supporting someone grieving an infant's death involves addressing their emotional, physical and spiritual well-being with sensitivity and compassion.

Here are some ways to provide support across these dimensions:

## Mind: Emotional and Psychological Support

- **Listen Actively:** Create a safe space for them to express their feelings without judgment. Allow them to share their pain, anger or guilt.
- **Acknowledge their Loss:** Use the baby's name (if they had one) to validate their grief. Acknowledge their baby as a person, not just a loss.
- **Normalize their Emotions:** Reassure them that grief is a unique, personal journey and there is no right or wrong way to feel.
- **Encourage Professional Help:** Suggest grief counseling or therapy if needed. Specialized bereavement groups for parents who have lost infants can be particularly supportive.
- **Offer Resources:** Provide books, articles or online support communities focused on coping with infant loss.

## Body: Physical Support and Self-Care

- **Promote Rest and Nutrition:** Grief can take a toll on physical health. Encourage regular meals, hydration and rest even when they may not feel like it.
- **Support Physical Expression:** Suggest gentle activities like walking, yoga or stretching to release tension and help with emotional regulation.
- **Create Comfort:** Bring nourishing meals, offer massages or provide cozy items like blankets to bring physical ease.
- **Recognize Postpartum Recovery Needs:** Their body may still be healing physically. Offer postpartum care and understanding.

## Spirit: Addressing their Spiritual and Existential Needs

- **Hold Space for their Beliefs:** Whether they are religious, spiritual or non-religious, respect and support their personal belief system.
- **Memorialize the Baby:** Encourage rituals that honor the baby, such as planting a tree, creating a memory box or lighting a candle.

- **Offer Prayer or Meditative Support:** If appropriate, offer to pray with them, meditate or engage in spiritual practices that bring them comfort.
- **Help them Find Meaning:** Gently explore ways they can integrate their loss into their life story, such as finding purpose in advocacy or charity work related to infant loss.

### Practical Suggestions for Supporters

- **Be Present:** Sometimes, the best support is simply being there without trying to “fix” anything.
- **Respect their Timeline:** Grief does not have a timeline. Be patient and check in periodically.
- **Avoid Platitudes:** Phrases like “everything happens for a reason” can feel dismissive. Instead, say, “I’m so sorry for your loss. I’m here for you.”
- **Help with Daily Life:** Assist with errands, chores or other tasks to reduce their burden.





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# Early Pregnancy Loss (Miscarriage)

## What is pregnancy loss or miscarriage?

An early pregnancy loss or miscarriage happens when a pregnancy stops growing. A pregnancy loss at less than 20 weeks gestation is commonly referred to as a miscarriage. Sadly, this is quite common. About 1 in 10 pregnancies end in a pregnancy loss, most commonly in the first 3 months.

## What causes a miscarriage or pregnancy loss?

In most cases, the cause of a miscarriage is unknown. A pregnancy loss is almost never a result of something you did or did not do. There is no evidence to show that stress, moderate exercise, sex, mild falls, most medications or past abortions cause an early pregnancy loss.

Most types of pregnancy loss do not affect your chances of having a normal pregnancy in the future. If you have had two pregnancy losses in a row, you may be at a higher risk of future pregnancy loss. It is recommended that you talk with your provider in this case to discuss any testing that may be recommended.

## What will I see and feel if I am having a miscarriage?

The most common symptoms of a miscarriage are:

- Bleeding or spotting from the vagina
- Passing small or large blood clots
- Cramps or abdominal pain
- Back pain or pressure

Symptoms may be minor or severe. Bleeding can start light and increase, or may appear as a gush of blood. The bleeding may last a few days or a couple of weeks. The heaviest bleeding should last a short time and may be lighter for the next 1-2 weeks. Abdominal cramping may be mild or severe.

To help with the physical discomfort, it is safe to use Tylenol or Ibuprofen as directed on the box. A heating pad may also be helpful with abdominal cramping or back pain.

Emergency symptoms during a miscarriage include very heavy bleeding (saturating one sanitary pad an hour), feeling ill with fever and/or chills, uncontrollable abdominal pain, dizziness or light-headedness. Return or go to the Emergency Department for these symptoms.



### What is happening during a miscarriage?

A miscarriage may be identified from ultrasound imaging or from monitoring your levels of hCG (Human Chorionic Gonadotropin). Your provider may need to monitor these levels over a period of time to confirm a miscarriage.

Many times, the pregnancy passes on its own. If it does not, there are options that your provider can discuss with you. See chart (below) for more information on these options.



	Watch and Wait	Medication	Procedure
<b>How does it work?</b>	You wait for the pregnancy tissue to pass. This happens with cramps and bleeding with clots.	Pills called mifepristone and misoprostol can be used together to help to make the pregnancy tissue pass. You can also use misoprostol pills alone. You use these pills at home.	A clinician removes the pregnancy tissue using a simple office procedure. This can be done with local anesthesia or with sedation.
<b>What will happen?</b>	You wait for the cramps and bleeding to happen. This may occur any time. The bleeding and cramps may be much heavier than a period and lasts for a few hours. Lighter bleeding often lasts 1 to 2 weeks. It may stop and start a few times.	You will swallow a mifepristone pill. 24 hours later, you will place the misoprostol pills in your vagina. Take pain pills one hour before the misoprostol pills to ease any cramping and bleeding. Misoprostol may cause nausea, diarrhea, and/or a low fever. The bleeding and cramps may be much heavier than a period. This starts about 2 to 6 hours after taking the pills. Lighter bleeding often lasts 1 to 2 weeks and it may stop and start a few times.	The procedure takes place in the office. Your clinician puts instruments in your vagina and uterus to remove the pregnancy tissue. You will have light bleeding and cramping for 3 to 7 days.
<b>How painful is it?</b>	You will have intense cramps. Pain pills and a heating pad can help relieve painful cramps.	You will have intense cramps. Pain pills and a heating pad can help relieve painful cramps.	You may have mild to strong cramps during the procedure.
<b>How well does it work?</b>	This works 66–90% of the time. It works better if you have had some bleeding.	Pills work 65–90% of the time, depending upon the type of miscarriage you have and which pill you use.*	A suction procedure works 98% of the time.
<b>How long does it take?</b>	This may take a few weeks.	Pills empty the uterus in 84% of women within 2 days.*	The uterus is emptied during the procedure, which lasts about 5 to 10 minutes.
<b>What if it takes too long or doesn't work?</b>	If it takes too long, you can return to your clinician's office at any time for pills or a suction procedure.	If it does not work or takes too long, you can return to your clinician's office for a suction procedure or another dose of the pills.	In the rare case that it doesn't work, you can return to your clinician's office for another suction procedure.
<b>Is it safe?</b>	<b>Yes.</b> All three treatment options are safe.		
<b>Can I still have children afterwards?</b>	<b>Yes.</b> These treatments don't prevent you from getting pregnant or staying pregnant in the future. Once the early pregnancy loss is over you can start trying to get pregnant as soon as you feel ready.		
<b>What caused the early pregnancy loss?</b>	You did not make it happen. A pregnancy loss is nature's way of ending a pregnancy that would not be healthy. Early pregnancy loss is not caused by stress, sports, foods or sex.		

\* Mifepristone is not always available. With mifepristone, the success rate is 84% overall by 2 days and 89% by 8 days.  
With misoprostol alone, the success rate is 67% overall by 2 days and 84% by 8 days.

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## After a Miscarriage

Your period will likely resume in 4-8 weeks. Talk with your provider about preventing another pregnancy until you are ready, or for recommendations about becoming pregnant again.

### Miscarriage-Specific Resources:

- *It's Ok that You're Not Ok* by Megan Divine
- *At a Loss* by Donna Rothert, PhD
- *Return to Zero* (website, Instagram)
- *Postpartum Support International* (online resources/support groups)
- *Share: Pregnancy and Infant Loss* (online support group)





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# Later Term Pregnancy Loss

For later term pregnancy loss, you may need to be admitted to the Women and Children's Unit to deliver your baby. This section provides information about the unit to help make some things easier while you are here.

## Arrival

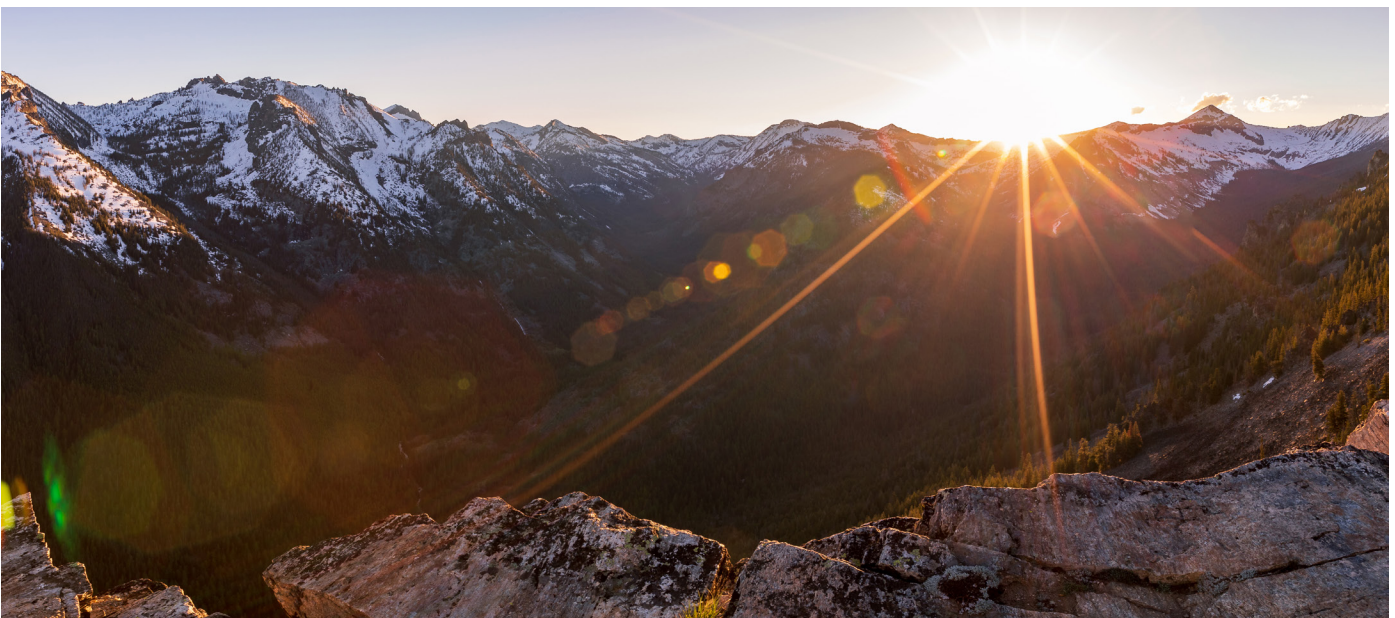
When you arrive at the unit you will notice it is a locked floor to help keep our patients and families safe. There is a doorbell at the front double doors that you or your family will ring and they will be asked for your name to be let inside.

## Labor Rooms

Each labor room is private with its own bathroom. There is a tub/shower for your use and couches that convert to a bed. Your nurse will bring bedding for your support person. The number of visitors is limited to the preference of the mother and her medical provider.

## Meals

Meals can be placed by dialing x1818 on the hospital phone next to your bed. Feel free to order at your convenience. Kitchen hours vary by meal time, so please ask your nurse if you are interested in ordering a meal. Meals are provided for the mother, but guest trays may be ordered for an additional charge that is due when the meal is delivered. The unit has some snack options available to you as well. Food from outside the cafeteria may be brought in by guests if you desire, or you can order delivery to the unit with any delivery service in town.



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## Discomfort During Labor

Continuous support is a critical component of the birthing experience and we seek to honor individual support. Please talk to your nurse about your goal for pain management and your labor process. We offer hands-on relaxation support with counter pressure, position changes, essential oils, walking, massage or use of the birthing ball. Our highly-trained anesthesia team can also provide pain management through anesthesia blocks (epidural) during your labor, if desired.

## Post-Delivery

During the first two hours after delivery, you will be closely monitored by your nurse. Blood pressure, uterine firmness, vaginal bleeding and overall well-being are continuously assessed. Usually, the provider will order oxytocin (pitocin) to help your uterus clamp down to prevent postpartum hemorrhage after delivery.

After your delivery, your baby can stay with you for as long as you would like. We have a Cuddle Cot available so your baby can remain with you. During this time, we will offer to take photos and create hand and/or footprints, providing you with meaningful keepsakes. We are here to support you in honoring and remembering your baby in a way that feels right for you.

## Complications

Unfortunately, sometimes complications can occur during and after delivery. Sometimes the placenta may not want to deliver or it may not come out in one piece. This can lead to the decision to go to the operating room for a dilation and curettage (D&C). This procedure is where the cervix is opened and the uterine lining is scraped to remove tissue.

Another complication that can occur is postpartum hemorrhage. This is when you bleed heavier than normal. The OB provider treats this by administering medications via an IV, an injection or orally. The OB provider will talk you through this as it is happening. The nurse will also be doing constant assessments during this time to monitor the bleeding.

Some complications are experienced after you are discharged from the hospital. The following page explains the signs and symptoms you need to watch out for once you are home.



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## Resources

- *What's Your Grief*, [whatsyourgrief.com](https://whatsyourgrief.com)
- *Refuge in Grief*, [refugeingrief.com](https://refugeingrief.com)
- *Healing your Grieving Soul: 100 Spiritual Practices for Mourners* by Alan Wolfelt
- *National Institutes of Health*, [nih.gov](https://nih.gov)
- *Missing Pieces*, [missingpiecesgrief.org](https://missingpiecesgrief.org)
- *Reproductive Health Access Project*, [reproductiveaccess.org](https://reproductiveaccess.org)
- *TEAMM Training, Education, & Advocacy in Miscarriage Management*, [miscarriagemanagement.org](https://miscarriagemanagement.org)
- *American College of Obstetricians and Gynecologists*, [acog.org](https://acog.org)





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