**Pilot Handbook: Navigating Maternity and Postpartum**  
**Template Guide**

This ***Pilot Handbook: Navigating Maternity and Postpartum*** template was created to help pilots industry wide. This fill in the blank style template should help leaders expedite and streamline a guide for your specific companies policies and procedures. We have written in red some recommendations. \***\_\_\_\_\_\_\_\_\_\_\_\_**\* are places that need additional company specific information.

We hope that by collaborating industry wide on these subjects we will increase awareness, support attraction, and retention of more female pilots.   
  
Thank you for volunteering your time and support to help this objective move forward!

For suggestions, feedback, and networking on these topics please contact us at:  
[skwwomenpilotmentoring@hotmail.com](mailto:skwwomenpilotmentoring@hotmail.com)

***Pilot Handbook:***

***Navigating***

***Maternity & Postpartum***

***\*Name of your committee that is writing this specific guide\****

**Congratulations!**

If you are reading this guide, you are most likely either preparing for having children or have found out recently that you are pregnant. If so, we extend a huge congratulations and want to offer this guide to support you through the process. If you are reading this to help educate yourself to support a pregnant pilot, we cannot thank you enough for your care! Our children are our future and it takes a community to raise a child.   
This guide will help you understand obstacles some women face while balancingflying with pregnancy and postpartum. We hope it helps build safety awareness and supports retention/attraction of pilots.   
For further mentoring and support on these subjects, please contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (insert your committee/group contact information).   
To all the inspirational pilots who have helped write this guide, mentored, supported, and dedicate to this: thank you!!!

To those using this guide, please send us feedback. Additional ideas to add in or anything that needs updating would be greatly appreciated.   
   
Happy Safe Flying Mamas and Babies,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(insert leaders contact information)

*\*\*Disclaimer: This guide is unofficial and has been written by unpaid volunteer pilots. We are NOT official representatives of management, union, insurance, medical field, nor any other aspect discussed. Use this guide to help you find information for your particular circumstances. This guide is NOT an official policy.*

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**SECTION 1: QRC'S**

\*In this section we recommend each carrier details the simplified version of all of the vital things a pilot will need to do chronologically while pregnant and after the baby is born. Ensure to verify that all company policies are adhered to in the checklist as a good quick reminder for the pilot. The rest of the handbook will have more detailed information about each of these items. We left some examples that could be universal to each carrier/pilot\*

**Pregnancy:**

* Notification requirements of pregnancy...................\_\_\_\_\_(Insert policy on notification)
* Discuss with doctor job description...........................Verify doctor agrees fit to fly
* Doctor awareness on IMSAFE requirements.............Throughout pregnancy
* Contact \_\_\_\_\_\_\_(committee name)…....................... Anytime
* Fill out Intermittent FMLA LOA Request................. If applicable
* Research Insurance Options...................................... Switch if/when applicable
* Research disability eligibility.................................... Read \_\_\_(Insurance)\_\_\_\_

--------------------------------------------No longer IM SAFE--------------------------------------------

* LOA request/medical paperwork..............................Doctor fill out/submit to**\_\_\_\_\_**
* Take leave.................................................................When no longer fit for duty
* Healthy Baby Healthy Mama...................................Put top priority on this

**After Baby is Born:**

* Update **\_\_\_\_\_** Dept of Date of Birth............................DOB starts\_(length)\_leave period
* Add baby to insurance..................................................**\_\_** days from DOB
* Add baby to beneficiary information...........................**\_\_(As required)\_\_\_\_\_\_\_\_\_\_\_**
* Add baby to travel benefits..........................................**\_\_(As required)\_\_\_\_\_\_\_\_\_\_\_**
* Leave extension request if needed............................... **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* Study for requal/AQP...................................................Throughout leave

---------------------------------------------IM SAFE for Flight----------------------------------------------

* Medical return to work paperwork..............................Work with **\_\_\_\_\_\_\_\_** Department
* Requal Training...........................................................If applicable
* Bidding........................................................................**\_\_\_\_(policy Requirements)\_\_\_\_\_\_**

**SECTION 2: MATERNITY**

**A: FINANCIAL PREPARATION TIPS**

*The financial impact of going on maternity leave from the airlines can be quite shocking if you are not familiar in advance with the policies in place. This section is to provide financial considerations, committee recommendations, and how to best prepare yourself and your family members for the pregnancy ahead.*

Personal Emergency Fund Planning

**\_\_\_\_\_\_\_\_\_\_\_** highly recommends starting a personal financial emergency fund as soon as practical that can be dedicated for the cost incurred while on maternity leave. Currently all U.S. domestic airlines do not offer any paid maternity leave options for pilots. \*Update needed possibly due to American and Delta policies changing\* Disability coverage may offer some finances during this leave; however please note that not all women on maternity leave have qualified for disability to date. Simply stated, if you do not qualify nor are signed up for disability, when you go onto maternity leave while you are pregnant you are 100% UNPAID. This can be quite a surprise if not planned for ahead of time.

Another potential high expense to consider is COBRA insurance coverage. COBRA insurance covers pilot leave if leave is extended beyond regular insurance coverage. COBRA can be a very high expense each month.   
\*Verify individual companies insurance coverage on each leave applicable and insert\*

One resource you could utilize to offset high expenses during maternity leave is to use up your vacation/user hours.

Spouse's Insurance Plan

\_\_(Committee Name)\_\_\_recommends to research switching to your spouses or partners insurance plan if that is an option. This will alleviate loss of coverage and high COBRA cost potential. You may switch to your spouses or partners insurance outside of an open enrollment period as it is classified as a life changing event/loss of coverage.   
\*Verify for individual company\*

Benefits on Leave Explanation   
\*Insert company specifics\*

Short-Term Disability (STD)   
\*Insert company/Insurance specifics\*  
  
Long-Term Disability (LTD)  
\*Insert company/Insurance specifics\*

Loss of Medical Insurance Coverage Details:  
\*Insert company/Insurance specifics\*

Under FAR 61.53 you are legally obligated to remove yourself from flight duty due to the physical and medical limitations that are a result from your pregnancy. Consider how and when the following may impact your pregnancy:

* Sterile cockpit limits your time available to take bathroom breaks often, which will prevent UTIs.
* On pre-flight physically not able to crawl under an a/c wing
* Cockpit: Does the size of your abdomen prevent you from adjusting rudder pedals?; Are you able to pull the yoke fully backward when properly seated to fly?; Does climbing into the cockpit cause abdominal or back pain or cramps?; Does locking or unlocking the cockpit door cause abdominal or back pain or cramps?.
* If your doctor restricted you to not lift heavy weights, consider your crew bags and the emergency gear extension, which requires lifting **\_\_\_\_\_\_\_\_\_** lbs.
* Are you physically able to use the emergency escape hatch/window and fit through it in case of an emergency?
* Consider the reduced time of useful consciousness for pregnant women: In case of a rapid cabin decompression at 40000 feet the time of useful consciousness in only 18 seconds. and at 35000 ft 30 seconds. Our standard cruising altitudes are between 32000 ft and 37000 ft. This time is the maximum time we have to put on the oxygen masks in the cockpit and initiate necessary procedures to save the crew and passengers life. The time of useful consciousness diminishes during pregnancy. Not receiving oxygen in this critical time, which for pregnant women is less time available, will lead to hypoxia, unconsciousness, and then death.
* Gamma radiation can impact the baby's healthy growth in a negative way (see Appendix 2).
* Does sitting for longer periods of time in one position without being able to stretch your legs out or put them up cause swelling in your legs and loss of feeling in your toes and feet, which you need to control the rudder pedals?
* Are you pregnant in the middle of the summer you may consider the impact of an inop APU on your health and the babies health?
* Are you experiencing shortness of breath due to the baby pushing on your diaphragm?

All of these items are things to consider reporting in your initial paperwork if applicable for your pregnancy.

**B: DISCOVERY OF PREGNANCY**

\*Insert company specific policy. Examples: notification of pregnancy to whom at company/union. Any other procedures detailed in policy.

**C: NAUSEA AND FATIGUE**

Experiencing nausea and fatigue is very prevalent during many pregnancies, especially for most women in the first trimester. Many women often feel significant relief sometime during the second trimester. One suggestion that many of our pilots have done, is to fill out paperwork immediately upon discovery of pregnancy for Intermittent FMLA leave (Review Leave of Absence Section). We also highly recommend when you notify your chief pilot of your pregnancy that you let them know how you are feeling. For example, "My doctor and I agree I am fit to fly at this point, however I do have some days of chronic fatigue and/or nausea so I plan on using intermittent FMLA or you may see my sick/fatigue calls increase for this short time. My pregnancy related symptoms are the reason".

**\_\_\_\_\_\_\_\_\_\_\_\_\_**suggests that you first try natural approved remedies for nausea if approved by your doctor. If complications arise with nausea, there are prescription medications that your doctor can prescribe. Many are not approved for flying, so remember to contact the **\_\_\_\_\_\_\_\_\_\_\_** Committee for guidance if you have to take one. These websites are also helpful to determine if your medication is approved:

<https://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/ame/guide/pharm/>

<https://www.faa.gov/about/office_org/headquarters_offices/avs/offices/aam/ame/guide/pharm/dni_dnf/>

Natural remedies for nausea (that are approved for flying) include :

* Ginger candies
* Prego Pops or hard candies
* Pressure bracelets - Sea bands
* B-6 vitamin supplements (discuss these with your doctor)
* Eat regularly and always have a snack readily available in flight
* Stay hydrated. Many women note that Gatorade or Ginger Ale help with nausea
* Reduce stress
* Get adequate sleep - implement taking naps on off days if possible

<http://www.whattoexpect.com/pregnancy/morning-sickness/?pos=1&xid=nl_YourDailyNewsletterfromWhattoExpect_20160825>

Tips for Combating Fatigue in Pregnancy:

* As pilots we often have a lot on our schedules, both at work and in our personal lives. Many women have found relief in chronic fatigue issues while pregnant if they discontinue over scheduling and simplify life for this short time
* On your off days have a routine that focuses on adequate sleep. It is a priority for so many reasons
* Listen to your body
* Eat regular meals: takes pre-planning for work trips
* Use techniques to reduce stress. Many stretching exercises and other simple suggestions can be found online.
* Exercise: walk if able
* Ask for help

If you are experiencing nausea or fatigue while you are at work, but are fit to continue flying, we recommend you still discuss this with your fellow crew members. Minor nausea and or fatigue can be a significant threat. Develop a mitigation strategy with your crew: do walkarounds if you feel you need to get blood flowing (or if you need to take small rest break, ask other pilot to complete walk around), stretch, make sure you have good energy snacks readily available, etc. Try all of the tips above to keep yourself fit, but safety and fitness for duty is of utmost importance. Reference the IM SAFE checklist, company specific crew member fitness for duty requirements, and your doctor to determine if you are fit to continue flying while pregnant.

**D: UNIFORMS**

If you have been pregnant or are currently pregnant, you are probably very aware of the lack of maternity uniform guidance or options. This section will provide some options for both maternity pants and shirts. \*Insert companies specific policy on maternity uniforms\*

Maternity Shirts

There are basically two options that you can choose from. Option one will be buying an oversize shirt or two and tailoring the top to fit you. Tailoring a straight edge on the bottom of the untucked shirt looks nice when tucking in is no longer an option. Option two is to buy a designated maternity shirt from one of the vendors listed below. But keep in mind, depending on your body type and how you would like the shirt to fit, you may or may not have to tailor the maternity shirts also. A lot of this is just preference.

Another thing you might run into is needing to buy a couple different sizes, but you can always buy the first and see how it progresses in the pregnancy.

*Crew Outfitters*

If you decide to buy a large uniform and tailor it yourself, this will require you to either add more fabric into the shirt and/or possibly buy a couple larger sizes to carry you through the 3rd trimester.

Pro: the Crew Outfitters standard shirt is one of the easier shirts to hem, therefore keeping the costs down whether you alter yourself or send to a tailor.

Con: They may be a little too short for you depending on your torso once you get further along in the pregnancy.

*A Cut Above*

A Cut Above has maternity shirts, which cost $33.95.

Pro: Since they are made by A Cut Above they will be better fitting in general for a lot of ladies.

Con: They only have three sizes available: 4,8 and 12 which may not accommodate every woman. These shirts do not give much extra room in the tummy section, however do have a lot of stretch. Many women have noticed these shirts are good for first and second trimesters, but if you continue into third trimester you may need another option.

*M&H*

M& H does provide maternity uniforms. They have sizes SM, MED, LG.

They may not always show up on the M&H website, but you can call M&H directly and ask about the maternity shirts. I had to ask about the United maternity shirts.

These shirts usually run big and are very loose, almost tent-like. You can sew white ribbon to each side hem and then tie the ribbons in the back to make the shirt more flattering. The pro to sewing ribbons is that you can make them as loose or as tight as you need to depending on how big your belly gets.

Maternity Pants

There are many more options for maternity dress pants, but here are a couple of options with which our pilots have had success.

*Betabrand*

Work yoga pant style. These are great because they are stretchy and comfortable to wear whether you are pregnant or not. It's convenient and cost effective because you can transition them from before pregnancy, through the first part of it, and then postpartum.

Pro: Since they are so stretchy they will fit over your tummy at least at the beginning of the pregnancy without any expansion fabric, allowing you to wear it over your shirt if you would like to keep your shirt tucked in.

Con: You’ll probably have to wear a different pair of pants with a stretchy fabric over your tummy since these may not be able to stretch quite enough near the end.

*Motherhood Maternity*

Secret Fit Belly Pants have gotten good feedback from a couple of our fellow pilots. These ones will carry you through the entire pregnancy due to the stretchy top panel of fabric.

Pro: They work great for the entire pregnancy and are cost effective at $38.00 a pair. They’ve got straight leg, boot cut and flare.

Con: Website is a little hard to navigate to find the right pair

*Other options*

Old Navy, Gap, or a good old fashioned belly band to add to whatever pants you would like

**E: LEAVE OF ABSENCE**

\*Insert Policy and recommendations\*

FMLA/\*Any other leave applicable\*

Intermittent FMLA Paperwork

\*Insert specifics\*

How To Use Intermittent FMLA

\*\*

Using Intermittent FMLA Through Pregnancy:

Pro: \*

Con: \*

Notification of delivery:  
\*Who to contact and when\*

**SECTION 3: POSTPARTUM**

**A: POSTPARTUM DEPRESSION/ANXIETY:**

**FAA MEDICAL AWARENESS**

\*Insert Parental Assistance Forum AME's more up to date information in May 2017\*

If you are experiencing symptoms of postpartum depression, anxiety, or any other postpartum mood disorder (PPMD) you should discuss with your doctor and/or counselor ASAP. Studies show the sooner you get help the less long term the effects can be. Approximately 10-15% of mothers experience a PPMD, so you are not alone. There are some excellent resources below to help you decide if you are suffering from a PPMD and what it means for your FAA medical certificate. **\_\_\_\_\_\_\_\_\_** recommends you contact the \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Committee for more assistance.

Postpartum Depression/Anxiety resources:

**Understanding the signs and symptoms of postpartum depression:**   
[www.postpartum.net](http://www.postpartum.net/)www.postpatumprogress.net   
<http://www.whattoexpect.com/first-year/postpartum-depression?pos=1&xid=nl_YourDailyNewsletterfromWhattoExpect_20161023>**“Baby Blues” vs. Postpartum depression: What’s It Mean for My Medical Certificate?**   
[https://www.aviationmedicine.com/article/postpartum-depression/](https://www.aviationmedicine.com/article/postpartum-depression/http://owcp.natca.net/3Q06VFSAeromedicalNewsletter.pdf)

**Private company specializing in helping you obtain and keep your FAA medical certificate** [www.leftseat.com](http://www.leftseat.com/)

**Miscarriage:**  
While it is normal to hope that your pregnancy ends well, not all pregnancies will have a successful outcome. Miscarriage and stillbirths can and do occur. These events can cause even greater grief than the loss of a relative. Consider using leave during this time and developing a support system for healing. SHARE Pregnancy and Infant Loss Support, Inc. is national organization dedicated to helping families heal after the loss of a pregnancy or child. They can be reached at:

(800) 821-6819 and [www.nationalshare.org](http://www.nationalshare.org/)

**B: FITNESS FOR DUTY**

This section details tips on how to expedite your fitness for duty. Remember, every pregnancy and postpartum is different, so not all of these ideas work for every mother pilot. Continually check the **IM SAFE Checklist** as outlined in AIM 8-1-1.

\*When you recognize one area that you are not fit for duty, put top priority on addressing. This will help you transition back into flying.

**I**llness:

* If you experienced a complication with your child birth or suffering from postpartum mental health complications, seek advice from your doctor and discuss possibility of needing extended medical leave. Contact **\_\_\_\_\_\_\_\_\_** department to transition from pregnancy leave to medical leave.

**M**edication:

* If any medications are still needed when returning to work make sure to check with **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** on if approved for flight.

**S**tress:

* Find tools that help you manage stress. Examples: stroller walks with baby to get fresh air, meditation, deep breathing exercises, mindfulness exercises, taking a moment for yourself each day, accepting help or asking for help from family/friends.
* Connect with other mother pilots or \_\_\_\_\_\_\_\_\_pilots who can relate:   
  Unofficial \*\_\_\_\_\_\_Insert company specific FB pages or networking sites\*:   
  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  Pilot Moms FB Page: <https://www.facebook.com/groups/352672004898225/>

**A**lcohol:

* It is highly recommended to avoid alcohol, especially if you are experiencing chronic fatigue or emotion during postpartum and transitioning back to fitness for duty.

**F**atigue:

* This is one of the hardest obstacles to overcome as a new mother, especially when trying to transition yourself back into fitness for flying. Consider organizing prior to birth or after: Help from family or friends, e.g. have someone stay with you to assist with baby during the night, especially prior to returning to requal training. Hiring a postpartum doula, a babysitter or nanny to allow you to get proper naps to recover from short nights sleep. While this can be an extra cost, it can assist in speeding up physical and emotional recovery from childbirth and provide an easier transition into fitness for flying which ultimately can be an investment in the long run.
* Meal plan: hire a meal service short term or prepare meals to freeze when you are still pregnant. Have a friend or mentor set up a meal train website.
* After your mitigation efforts to combat fatigue have failed and you are still feeling fatigued prior to reporting for duty contact **\_\_\_\_\_\_\_\_\_\_**and notify them you are fatigued and can't report for duty. Ensure that your fatigue report details reason pertaining to postpartum symptoms. Examples: postpartum fatigue, infant wakings, etc.

**E**motion:

* First, we will say it again, if you are feeling any symptoms of a postpartum mood disorder etc seek help ASAP! This is not something to hide in (see postpartum depression section).
* Connect with a \*mentor or counselor (insert what is appropriate for your company)\* to talk out any challenges you are facing. Feeling support can go a long way with our emotional health and wellbeing especially during the postpartum transition.

**C: INSURANCE COVERAGE AND TRAVEL BENEFITS**

Insurance Coverage

\*\*

Travel

\*Detail if travel benefits are maintained on leave or when expired\*

**D: LEAVE OF ABSENCE EXTENSION**

\*\*

**SECTION 4: RETURNING TO WORK**

**A: WHO TO CONTACT AND MEDICAL PAPERWORK**

FMLA/\*insert other applicable company leave\* Return   
\*\*

**B: FAA MEDICAL**

Note that while on leave, you are not required to keep your medical renewed. However, when returning back to work after having a baby can be emotionally and physically challenging. In addition to that you have to consider your certificate and medical licenses. Before you return to work you will need a release back to work from your doctor and that needs to submitted to **\_\_\_\_\_\_.** You may need to renew your medical certificate, contact your AME or our **\_\_\_\_\_\_\_\_** committee for further guidance.

For the medical you will need a note from your OBGYN indicating that you are fit to return to work and that you are cleared to perform all of your job duties. The company will need this and your AME may need to see this letter too. Once you have your medical back be prepared to return to duty.

**C: TRAINING**

Returning back to work may require a series of training events. Depending on the time you have been off you may be able to request extra simulator time\*\*.

Landing Currency Past Due

\*\*

Training Past Due up to 12 months

\*\*

Following Leave from 12-35 months

\*\*

Following a Leave of 36-59 Months

\*\*

Upgrading Upon Returning from Leave

\*\*

Transitioning A/C Upon Returning from Leave

\*\*

Bidding Upon Returning from LOA

\*\*

Preparation for Training

\*\*

**D: CHILDCARE**

Child Care Resource Ideas

* Nanny/Babysitter search websites:
  + www.care.com
* In home daycare
  + Some more flexible on hours and special arrangements
* Au Pair Programs
  + www.culturalcare.com
  + <https://www.euraupair.com/>
  + <http://www.greataupair.com/>   
    \*Research thoroughly Au Pair programs details on overnight care options. Some Au Pair programs are familiar with airline pilots schedules while others are adamantly against overnight child care coverage.
* Nanny Shares
  + w[ww.care.com](http://www.care.com)
  + Post on domicile FB page to seek out possible nanny share with other crew member
* Local nanny placement agencies
* 'Pilot Moms" is a great resource to ask others about juggling child care challenges in our industry.   
  [www.facebook.com/groups/352672004898225/](https://www.facebook.com/groups/352672004898225/)

**E: PART TIME**

\*Insert part time policy if applicable\*

Tips for Flying a Reduced Schedule Upon Returning to Work   
\*\*

**SECTION 5: NURSING**

**A: PREPARATIONS**

Nursing/ Pumping guidelines for Pilots returning to work who wish to pump

Congratulations on your new bundle of joy and for having come this far …because let’s be honest, nursing your baby can have many challenges and it is not always easy. There is a definite learning curve for both mom and baby, but since you are reading this I assume you would like to try to continue supplying your breast milk to your baby while being an airline pilot and maintaining a high level of professionalism and safety for **\_\_\_\_\_\_\_\_\_\_\_\_\_\_**.

This can be a very overwhelming task but it can be done with some planning one step at a time.   
You are doing a great job Mama! Keep it up we are all here to cheer you on!

Here are some things to consider (with any advice take what works for you and leave out what does not):

Start pumping before returning to work at home

First steps will be to start pumping breast milk after some of your feedings while you are still at home. Starting around 6-8 weeks if you plan on returning at 12 weeks is not a bad idea. Also try feeding your baby some breast milk in a bottle before you return to work. If your baby adjusts to the bottle before you return to work, whoever will be feeding your baby will have it easier. If your baby refuses the bottle, try different kinds and don’t give up. Keep in mind, if they get hungry enough they will eat. Both of my kids hated the bottle and my husband finally would get them to take it once they were hungry enough (bless his heart).

**B: PUMPING & TRIP CONSIDERATIONS**

Pumping   
Buy a double electronic pump if possible. Check with your insurance, asthey may cover the cost of a pump.   
I personally like the Medela Pump and Style double pump in the black sling bag or backpack (see image below).   
<http://www.medelabreastfeedingus.com/products/573/pump-in-style-advanced> 



Pumping on the Road

Bring a nursing cover. You can pump directly into the milk bags by tying two binder clips together with some yarn and attaching the side of the opening of one breast milk bag to each binder clip and hanging it over the shield while letting the bag hang under the connector and membrane. This way you eliminate cleaning out bottles afterwards and the milk bags store flat in your lunch box.   
Electric pumps will pump either by plugging them into an outlet or using the battery pack (always carry extra batteries). When pumping on the battery pack it will take longer.

Consider buying a simple hand breast pump and bringing that. It is small and can fit in your purse to help relieve some pressure when you were not planning to pump. It can help you in case your other pump runs out of batteries too.

Hands-Free Pumping   
At the hotel, use an old tight top (e.g. tube top) and cut holes into the top at the location of your nipples. This creates a very cheap hands-free pumping bra. Put the shield on the inside of the top over your breasts and attach the connector on the outside of the top to the shield. This way you can pump while applying make-up or looking on your phone at the pictures of your baby!   
Always carry extra bags and pads for your bra when on the road.

Bidding and Trip Considerations   
\*Insert company specific bidding tips\*

Consider having a family member or friend fly out with you to training so you will not be away from the baby as long, are able to nurse for part of it, and have your family member or friend take home some of your milk.

Seniority permitting bid for **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**. Look for trips with not too many turns and longer turn times (e.g. 45 min vs MST) so you have that extra time to go pump milk. Consider pumping before you start your first leg (arrive early and pump once you get to the airport).

Keep in mind on international trips you may not be able to leave the airplane to pump unless the entire crew clears customs with you.

Always be professional. You cannot pump in public while in uniform (company specific).

Communicate with your crewabout your need to pump and look with them at your trip sheet to come up with a time that could be good for you and them. Let them know, where you plan to pump and how long it would take. Ask your crew-member to help out where needed if possible. You can never pump in flight as you cannot be pumping while you are in control of the airplane (even if the autopilot is engaged) and you cannot leave the cockpit for an extended amount of time that it would take to pump (Verify with FAA/Union).

Refer to out Station information sheet with the location of acceptable pumping rooms (company office or stock rooms, airport pumping locations, family bathrooms). If you plan to pump inside the station let them know that you have that need when you call OPS 10 min out. Many stations will be more helpful if they have a heads-up on this. We are working on a pumping location directory for the airports we service.

Remember, the Railroad Labor Act exempts us from getting regular nursing/pumping breaks.

Emotional Considerations

The thought of returning back to work and trusting your precious baby with another person can be hard. Don’t be too hard on yourself. Bring pictures of your baby and look at them while pumping as it can help you relax to achieve milk let down. Facetime or Skype often with your baby!

Be Prepared

Bring enough storage bags, nursing bra pads, cleaning wipes and sterilization bags.

**C: MILK STORAGE ON THE ROAD**

Sanitation on the Road   
Medela has Quick Clean wipes that can be used after each pumping until you can wash the parts in your hotel sink with hot water and soap (shampoo works great or fill a travel container (<3 oz) with dish soap). Further, Medela has micro steam bags that you can use to sterilize parts; all you need is some water and a microwave. The parts air-dry pretty quick.   
When you get home you can place the connector and shields in the dishwasher.   
   
Keeping the Milk   
You can keep it cool with ice pack or headache pouches (see picture below).   
Fill them at home partially ½ - ¾ way with water, squeeze the remaining air out, close it and freeze it in your freezer. It will take a while for it to defrost, but if it does you can dump the water and get ice from the flight attendant or restaurants inside the airport to fill it with. Check the ice half-way through the day, you will also notice it when you add more milk pouches after pumping. The pressure changes do not impact your breast milk pouches or ice packs, just leave some air in them when sealing them. At hotels request a fridge for medical reasons and if possible they will deliver one to your room. If it is not possible to have a fridge in your room bring the milk downstairs to their fridge. Place the headache pouch into a freezer (room fridge freezer compartment or hotel freezer) or simply fill it with ice cubes in the morning before using it to cool your breast milk.   
   
When you get home, depending on your freezer you can lay your bags flat to freeze and than stand them up sideways and put the newest milk to the back.

Here is another neat and simple trick:   
<https://www.youtube.com/watch?v=YAK-sC424Kk>When pumping, don’t pump into the same bag from multiple pumpings, if possible. If you pump smaller amounts (2-4 oz) in a bag they can be a better fit for your baby’s feeding, rather than having a bag with 7 oz of milk.

Milk Bags

There are a variety of different brands and types of bags for sale in stores and online. Most of the bags available are made from a clear plastic material.

While each person's milk will store differently, some mother's find that their milk tastes off when thawed after having been frozen in a clear bag such as the Medela bag. If this applies to you, the Purity Bag is made from a material that blocks UV rays from natural and artificial light, as well as has an oxygen blocking inner layer, which may improve the way your stored milk smells and tastes after thawing.

They are a bit on the pricey side ($14.50 for a box of 50 bags, or $20.16 for 75 bags)

<https://puritybabybrands.com/home>

If you aren't sure which bag will work for you, YouTube has countless videos with milk storage bag reviews that can be helpful.

**B: WEANING & PREVENTING MASTITIS INFECTIONS**

Weaning

The American of Academy of Pediatrics recommends breast feeding your child for the first 12 months. When you are ready to wean your child at any time, be prepared to do this in stages to prevent discomfort and possible mastitis. If your child is still fully feeding on breast milk and still requires breast milk as the main food start by slowly mixing formula into the breast milk. Once the child is used to the taste of formula and you gradually decreased the breast milk to formula ratio it is safe to start the weaning process.

For any weaning start by just eliminating one feeding off of breast milk (nursing or bottle feeding) **\_\_\_\_\_\_** recommends starting with the one your child "cares" least about. This is typically the day time one but can be any. Replace breast milk with either formula or if old enough solids or after 12 months of age cows milk. Pay attention to food allergies. Give your child at least a week to adapt to new foods (formula or cows milk).

If you are weaning around the 12 month mark skip formula and instead start by mixing a little cows milk into your breast milk. Whole cow milk has more nutrients and is recommended till about 2 years of age.

Reduce more and more feedings a day gradually. As you do this the need to pump also decreases. This will gradually reduce the production of your breast milk. If at any point you are uncomfortable pump to relieve some pressure in your breasts. Keeping your breasts comfortable will also help avoid you developing mastitis.

Mastitis

Not every discomfort in your breast has to be mastitis. You can just have a hard time and experience painful nursing because of the way your baby is latching on or the way the milk comes in.

If you experience pain and discomfort nursing you may have a clogged milk duct. Nurse often (even if painful) and apply heat to your breast (warm washcloth). In this case your breast may or may not be red.

Chamomile tea bags and lanolin ointment can help reduce tenderness in your nipples.

A sore breast or clogged milk duct can lead to mastitis. You will not only have tender breasts but very likely feel achy and even have a fever. You may want to seek out a lactation consultant to receive nursing help as well as a doctor to receive an antibiotic.

These are some guidelines from the La Leche League

* Frequent nursings serve to provide comfort, reduce inflammation and encourage opening the blocked area. Mothers find that varying breastfeeding positions drains all areas of the breast more effectively. For example, if you most commonly use the cradle hold, try the clutch ("football") hold or lying down to breastfeed. (Please note that it is a common myth that it is unhealthy for the baby to breastfeed when the mother has a breast infection. This is definitely not true. The antibacterial properties of human milk protect the baby from infection.)
* Rest is an important component in recovery from sore breasts, plugged ducts or breast infections. To do this, try resting in bed with baby cuddled next to you. This will also encourage frequent breastfeeding sessions to drain the breast. Keep supplies such as diapers, toys, books, the telephone, a glass and a pitcher of water nearby to minimize trips out of bed.
* Applying wet or dry heat with a heating pad or hot water bottle and gently massaging the sore area of the breast before breastfeeding can assist the breast in further emptying. Many mothers find that taking showers or baths and gently massaging with a warm cloth on the sore breast is a relaxing treatment during a stressful time. Another technique is to lean over a basin of warm water and soak the sore breast for about 10 minutes three times a day. This will also remove any dried milk secretions that may be blocking the flow of milk out of the nipple. Breastfeed immediately, while the breast is warm, to help unplug the blocked duct.

If the fever lasts more than 24 hrs please seek out a health care professional. Make sure than any medications prescribed are safe for nursing mothers as a part of it may come into the breast milk.

To prevent future mastitis, nurse or pump often, massage your breast if needed to prevent or help any developing clogged milk duct. Consider changing your dietary intake if you notice that it has an impact on your breast milk. Avoid using too restrictive bras (underwire bras), avoid carrying heavy purses or diaper bags, alternate baby's feeding position, drink plenty of water, maintain a balanced diet, and get lot's of rest!

**E: NURSING RESOURCES**

**Resources:**

If you have milk supply issues please check out this blog on how to increase milk supply through nutrition: <http://mamamilk.weebly.com/>

For an app with nursing/pumping room locators check out this: [Mom's Pump Here](http://www.momspumphere.com/places/list/all)

For a great blog with information on travelling with children:  
<http://flyingwithchildren.blogspot.com/>

<http://www.lalecheleague.org/faq/mastitis.html>

Again, keep up the good work. It is not easy but it can be done and please ask**\_\_\_\_\_\_\_\_\_** if you have any further questions. There are many Mamas out there who have great insights that can help!

**SECTION 6: Q & A**

**1) Will I still get paid while on maternity leave?**

No, you will not be compensated by **\_\_\_\_\_\_\_\_** while you are on maternity leave. Signing up for Short term disability may help with compensation. You may live in a state that already provides disability compensation so check with the state laws you reside in.   
\*Insert Loss of Medical Insurance Coverage Information if Applicable \* Reference the Financial Preparation Tips under the Maternity Section for further guidance

**2) How long can I fly whilepregnant?**

Your physician will determine when you are unable to perform your duties. \*Verify specific company policy\*. Or if your pregnancy adversely affects attendance, quality, and quantity of work the company can have you start your leave. Remember every pregnancy is different and so this will vary with each person and each pregnancy. Some have gone out at 20 weeks others have flown up to 38 weeks. Reference Leave of Absence section in this guide as well as Policy**\_\_\_\_\_\_\_\_\_**.

**3) Where would I find information of my rights for leave, disability, and pay in the state I reside in?**

You will need to contact the **\_\_\_\_\_\_\_\_\_\_\_\_\_** department to obtain further information on state laws. Currently California, Washington, and Oregon have special state laws pertaining to maternity. Keep in mind new laws are constantly being passed so search your local state websites for maternity/disability laws.

**4) How long will I have insurance while on leave?**

\*\*

**5) Once I no longer have insurance what options do I have for coverage?**

\*Verify company policy\*

**6) What is the company's stance on pumping and possible delays?**

\*Verify company/union stance\* The company has not expressed to us their stance on taking a possible delay do to pumping needs. We have outlined some tips to better fulfill your need to pump and also helping the operation run safely and smoothly. Reference pumping and trip consideration section in this guide.

**7) How do I obtain a good quality pump?**

Buy a double electronic pump if possible. Check with your insurance, they may cover the cost of a pump. Reference our Nursing section in this guide.

**8) When returning to flying can I come back part time?**

\*Insert if applicable company policy or techniques with schedule\*

**9) What if I am suffering from postpartum depression?**

We recommend getting help ASAP! Talk to someone and seek a professionals help. Discuss with your OBGYN and a certified counselor. The **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** is another good place to call for referrals. Do NOT hide in this because of your flight medical. Most postpartum depressions are considered situational and after getting help there can be a pathway to get your medical certificate reinstated. Review the PPMD section and link in detail.

**10) Why does the ACA not apply to me?**

In aviation we fall under the Railway labor act, which was established in 1926 and thus exempts us from the Affordable Care Act of 2010. With that said, the employer does not have to provide time and adequate space for you to pump breast milk for your nursing child.

**SECTION 7: RESOURCES**

Please stay in contact with **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** to access any updated resources that we have.

Female Aviators Sticking Together: FAST  
https://www.facebook.com/groups/827943077286832/

Pilot Moms  
https://www.facebook.com/groups/352672004898225/  
   
   
**APPENDIX 1: PUMPING LOCATIONS DOCUMENT**

Coming soon!

**APPENDIX 2: IN-FLIGHT RADIATION EXPOSURE DURING PREGNANCY**

<https://1drv.ms/b/s!AnZidILRKlSmgWXVC1uj3Zit9A7x>