A FREE RESOURCE FROM THE JUNIPER FOUNDATION

Understanding Pregnancy and Infant Loss

Checked against current guidelines by the Juniper Foundation editorial team. Not yet reviewed by a clinician.

This sheet is for families whose baby has died during pregnancy, at birth, or after birth. There is no right way to grieve. Read it when you are ready, a little at a time, and share it with the people supporting you.

Words you may hear

- **Miscarriage:** the loss of a pregnancy before 20 weeks, as it is usually defined in the United States
- **Stillbirth:** the CDC defines this as the loss of a pregnancy at or after 20 weeks
- **Neonatal death:** the death of a baby in the first 28 days after birth
- **Infant death:** the death of a baby before their first birthday

Whatever the words, your baby was your baby. Your grief is real.

If you are asking what you did wrong

Many parents search for something they did wrong. Feelings of guilt are a common part of grief, and they do not mean you are to blame. Your care team can talk with you about what is known about why your baby died, and what may never be known. You can ask them directly, more than once, and as often as you need.

Time with your baby, if it feels right

Some families find comfort in these choices. Others do not. Both are okay, and you can ask for more time to decide.

- Seeing, holding, bathing, or dressing your baby
- Naming your baby
- Photographs, handprints, footprints, or a lock of hair

- Inviting family, siblings, or friends to meet your baby
- Prayers, blessings, or cultural rituals, with a chaplain or faith leader if you wish

Understanding why

Your care team may offer tests to look for a cause. These can include an examination of the placenta, genetic tests, blood tests, and an autopsy, a careful medical examination of your baby's body. Each is your choice. If you do not want a full autopsy, ask about other options, such as X-rays or other imaging. Ask what each test can and cannot tell you. Some results can take weeks or longer, and sometimes no cause is found. Ask for a follow-up visit to go over them.

Practical matters

- Ask the hospital social worker or chaplain about funeral, burial, or cremation options and any costs
- Ask what birth or death certificates your state provides
- Your body may make breast milk. Ask your care team or a lactation consultant about options for comfort or for donating milk.
- Ask about work leave for each parent
- Ask who to call about hospital bills

Your body and your heart

If you gave birth, your body still needs care. Urgent warning signs, such as heavy bleeding, a fever of 100.4°F (38°C) or higher, a headache that will not go away, trouble breathing, chest pain, or pain and swelling in one leg, apply after a loss too. If you have one, call 911 or go to emergency care and say you were recently pregnant. See the full list on our Know the Signs page.

Grief can come in waves. Partners often grieve differently. Children may need simple, honest words. If you have thoughts of harming yourself, or feel you cannot go on, call or text 988 now.

Where to learn more

- Pregnancy and infant loss
- Grief resources
- Bereavement resources
- Pregnancy loss

- Share Pregnancy and Infant Loss Support, nationalshare.org
- CDC: About stillbirth, cdc.gov/stillbirth

Juniper Foundation · juniper.org · Free to copy and share for patient education. This sheet is general information and is not medical advice. In an emergency call 911.