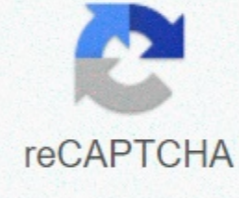




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What is a group of baby raccoons called

Stay up with the latest daily buzz with the BuzzFeed Daily newsletter! Bernie Duhamel/Moment Open/Getty Images A group of raccoons are called a look. Raccoons are sociable animals in the family group. They will remain in the family group for a year before venturing to look for a mate. Raccoons are found almost everywhere in the United States and southern Canada. They make dens in cave logs or trees in the wild, but in suburban and urban areas, raccoons can choose to stay in attics or under homes. Raccoons tend to stay in their dens through the colder months of winter, just venturing out on warmer days. Raccoons have a wide variety of foods that they eat, including fruits and nuts, frogs, fish, mussels and insects. In suburban and urban areas, raccoons will enjoy cat food, chips and what they can find in trash cans. Predators of adult raccoons include bobcats, coyotes, cougars and domestic dogs. Young raccoons are preyed upon by eagles and large owls. Raccoons also die in the hands of trappers and hunters or from encounters with vehicles. Others may die of hunger or disease. Although captive raccoons have been reported to have lived up to 13 years, the average lifespan of the raccoon living in the wild in its natural habitat is two to three years. The raccoon can eat almost anything, even if their favorite food is aquatic animals, including fish, frogs, crayfish and clams. They feed on snails, insects, birds, bird eggs and carrion. Nuts, seeds, vegetables and fruits are also foods that the raccoon consumes if they are available. The raccoon feeds on animal food when it is left within reach and is known to rum through the trash to find food there. Although the raccoon is not a large hunter, it often preys on small animals. Rats, mice, squirrels and gophers are all hunted by the raccoon. With the exception of a female raccoon with young, most raccoons live a lonely life and eat together only if a large amount of food is available in a particular place. SolStock/Getty Images Group B Streptococcus (GBS), also known as beta strep or group B strep, is a type of bacteria that live in the human body. GBS is usually harmless. In fact, you may have GBS and not know it because you do not feel sick or have

symptoms of an infection. However, if you plan to become pregnant, you need to know if you are a GBS operator. Sending GBS to your baby during childbirth can make them very ill. Here's what you need to know about how GBS is diagnosed and treated during pregnancy and labor, as well as how to protect your baby after birth. There are some common misconceptions about group B strep, including how it is transmitted and what type of disease it causes. Group B strep is not an infection that you get through sexual activity, by sharing food or drink, or through touching objects that have GBS bacteria on B strep is not passed through breast milk; a person with GBS can safely breastfeed their child if they choose to do so. Group B strep is not the same as the bacteria that cause strep throat (Group A strep). Group B strep is found in the human body, especially the intestinal and genitals. It usually does not cause disease. Group B strep that invades other parts of the body (such as the lungs, brain or blood) can make a person very sick; this is called GBS disease. Group B strep can be in your body at any time, but it may not be in your body all the time. You can test positive at some points during pregnancy and not on others. That's why you need to be tested when you're close to delivering because that's when your baby is at the highest risk of infection. Babies can come into contact with group B strep bacteria as they pass through the vagina during childbirth. Being diagnosed with GBS and treated with intravenous (IV) antibiotics while at work reduces the risk of transmitting the infection to your baby from one in 200 to one in 4,000. According to the American College of Obstetricians and Gynecologists (ACOG), GBS is sent to a baby in 1 to 2 of every 100 deliveries in which a person who tests positive does not receive antibiotics during labor. The Centers for Disease Control and Prevention (CDC) recommends that pregnant women be tested for GBS at weeks 35 to 37 weeks. For the test, a sterile swab is used to collect a sample from the vagina and rectum. Then the sample is sent to the lab and grown to see if group B bacteria grow. The process can take a few days, which means that the results are not immediate. If a baby shows signs of GBS, testing them will require a sample of blood or spinal fluid. If you have certain symptoms or risk factors, you will be given IV antibiotics during labor even if you were not tested for GBS. NS was detected in the urine at any time during pregnancy You had a previous baby with GBS You tested positive for GBS in a previous pregnancy YYYYYY Yes not known You go into labor until 37 weeks You have a fever of 100.4 or higher during work Water your has been destroyed for more than 18 hours Experts do not recommend having a cesarean section (C-section) solely because you tested positive for GBS. If you have a planned C-section, you will receive antibiotics as part of the operation and do not need additional antibiotics if you have GBS. You should still be tested for GBS even if you have a C-section. It will be important for the health team to know if you are positive for GBS in case you go into work and deliver before the scheduled procedure. GBS infection can cause inflammation of the baby's lungs, spinal cord, or brain. These infections can cause hearing or vision loss. GBS is also associated with cerebral palsy. If there are complications from infection, such as sepsis or pneumonia, GBS can be fatal. According to the CDC, 4% to 6% of babies with GBS will die. Early infections are more likely to be fatal than late infections. Babies who have GBS will have symptoms similar to other (more common) conditions or infections. If your child is known to be at risk of GBS, your healthcare professional will monitor them for signs and symptoms of an infection. Signs and symptoms that may indicate GBS include: Fever Poor feeding Lethargy or limpness Fussiness, irritability Hard to wake up from sleep Problems, rapid breathing or periods of non-breathing in blood pressure Seizures or convulsions moving one or more limbs less often Of red skin on the body Blue color tone to the skin (cyanosis) Early GBS infections tend to occur within the first 48 hours after birth, but can occur up to seven days after birth. Early infection can be prevented with antibiotics given during labor. Babies with early onset GBS usually have symptoms shortly after birth. Late GBS infections develop after the first week of life and are not prevented by antibiotics given during birth. Babies with late-onset GBS often are healthy at birth and develop symptoms later. The frequency of early and late-erupted GBS is similar. According to data from the Centers for Disease Control and Prevention (CDC) about 930 babies get early onset GBS each year and about 1,050 babies receive late outbreak GBS. The main concern for babies with late GBS is meningitis, an infection that causes inflammation of the brain and nervous system. While early infections occur from exposure during delivery, late infections are not always acquired at birth. In fact, half of them come from other sources, such as contact with people in the hospital or at home who are GBS carriers. Penicillin (given through an IV instead of a pill taken by mouth) is the main antibiotic given to prevent early GBS. The most important thing you can do to protect your baby is to get tested for GBS while you are pregnant, and if you are positive, get antibiotics during your work. Some babies receive GBS even though antibiotics were given during labor. Scientists aren't sure why this is happening, but they're working on developing better ways to treat - and even vaccines to prevent GBS. There are no additional steps you can take to specifically protect your baby from GBS when they are born. The most important thing you can do is learn the signs and symptoms of GBS infection and know how to recognize them. If you're worried about GBS or think your child may show signs of the infection, contact your provider right away. Thanks for the feedback! What are your concerns? Verywell Family uses only high-quality sources, including peer-reviewed studies, to support the facts of our articles. Read our editorial to learn more about how we fact-check and keep our content accurate, reliable and reliable. The Centers for Disease Control and Prevention (CDC), The National Center for Immunization and Respiratory Diseases, division of bacterial diseases. GBS: Types of infection. 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