

What To Expect

Prenatal Care

Comprehensive prenatal care is critical to the birth of a healthy baby. Prenatal care should begin early in your pregnancy, usually in the first trimester, and continue until the baby's birth. During the course of your pregnancy, certain examinations and tests are performed to ensure your health and the health of your baby. Please read through this folder and review the enclosed information so that you can have an understanding of what to expect throughout your pregnancy. When you get a positive pregnancy test, please call our office right away so we can schedule you appropriately.

Ultrasound: Around 7-8 weeks after you last menstrual period we will complete an ultrasound evaluation. This is done in our office by a transvaginal method. *Measuring the baby using ultrasound is most accurate in early pregnancy.* The most accurate way to determine gestational age is using the first day of your last menstrual period and confirming this gestational age with the measurement from an ultrasound exam.¹ *Our physician will use these methods to calculate your due date (EDC or EDD) and we will give you the date. This date will not change after we give it to you despite what the measurements on future ultrasounds say.*

Typical Prenatal Visit Schedule-

- You'll be seen every 4 weeks until the 28th week of pregnancy
- After 28 weeks, every 2 weeks until the 36th week of pregnancy
- Weekly visits after 36 weeks of pregnancy
- Postpartum visit approximately 4-6 weeks following delivery
- If you are a c-section you will be seen 1-2 weeks following delivery

The following are typically performed at the initial visit or OB teach-

- Complete health history, including personal and family history
- Physical examination, including pelvic exam and PAP smear
- Prenatal blood screen/testing's, including: blood type and Rh factor, complete blood count, syphilis, HIV, rubella, hepatitis B and a urine culture.

At each of the prenatal visits for the rest of pregnancy, the following are checked:

- Your weight, blood pressure, and urine tests for sugar and protein
- Abdominal exam to measure the growth of the uterus and estimate the size and position of your baby
- Fetal heart rate

¹ (2009) Calculating your dates: gestation, conception, and due date. *American Pregnancy Association.* Retrieved December 28, 2009 from <http://www.americanpregnancy.org/duringpregnancy/calculatingdates.html>

Additional routine testing that is done during the course of pregnancy:

- At around 15-18 weeks, optional quadruple marker screening for Down Syndrome, Trisomy 18, spinal cord defects (such as spina bifida), and abdominal wall defects
- At 18-20 weeks, anatomic ultrasound scan to evaluate the baby's development and growth
- At 24-28 weeks, a two hour Glucola blood test to screen for gestational diabetes, blood test for anemia, and blood test for Rh antibodies
- At 36 weeks, Group B streptococcus vaginal culture to test for carrier status prior to delivery. If your test is positive, you will be treated with antibiotics when you are in labor.

Bleeding During Pregnancy

It is important for you to let our office know if you have any bleeding during your pregnancy. Please call us and let us know about your symptoms. After a sonogram via vaginal route, pap smear, or other vaginal examination is the only time that we would expect a small amount of red, pink, or brown spotting when you wipe while using the restroom. This is due to the fact that during pregnancy, the vaginal vault area has a very good blood supply and your cervix is very sensitive.

Should you experience any bleeding, it is important to place a pantiliner or pad in your underwear so that we will be able to monitor the approximate amount and type of bleeding that you are having. Also if you have any vaginal bleeding or spotting it is important that nothing be introduced into the vagina. This includes tampons and sexual intercourse.²

Vitamins

Prenatal vitamins with at least 0.4mg of Folic Acid should be taken every night before bedtime. Oftentimes, taking it at bedtime reduces any upset stomach that may occur. It is important to continue taking your vitamin after you deliver as well. You may also be interested in taking a DHA supplement. There is recent research that shows DHA consumption and/or supplementation in pregnancy and during breastfeeding helps with the development of a baby's brain. Other possible benefits include: decrease in depression in new mothers, decrease risk for preterm delivery, and decrease risk for allergies in your baby.³

When to Call

- Vaginal bleeding
- Ruptured membranes or any other gush from the vagina

² (2009) Bleeding during pregnancy. *American Pregnancy Association*. Retrieved December 28, 2009 from http://www.americanpregnancy.org/pregnancycomplications/bleedingduring_pregnancy.html

³ Oken, Emily. (September 2009) Risks and benefits of fish consumption and fish oil supplements during pregnancy. Last updated October 14, 2009.

Persistent dizziness, headache, or blurred vision

- Extreme swelling
- Chills and fever
- Severe nausea and vomiting
- Severe abdominal or shoulder pain

Labor

Any labor that begins before your baby is 38 weeks gestation is considered preterm labor. Signs of labor include but are not limited to:

- Vaginal discharge (watery, mucous, or bloody)
- Pelvic or lower abdominal pressure
- Low, dull backache
- Stomach cramps, with or without diarrhea
- Regular contractions or uterine tightening that are becoming more frequent and intense

FMLA/ Disability claim forms

Routine disability benefits allow coverage for 4-6 weeks time off postpartum for vaginal delivery and 6-8 weeks postoperatively for Cesarean section delivery with the return to work date calculated from the actual date of delivery. Please check with your employer to see what the specific guidelines are for your employer's insurance carrier. Many workplaces have additional unpaid leave available under the Family and Medical Leave Act.

It is your responsibility to acquire your disability forms from your employer. You should fully complete both the patient and employer portions of the form and sign the form. A stamped envelope with the name and address of the organization (your employer or insurance company) or individual who will be receiving the completed forms should accompany this form. You may also give a fax number or choose to pick up these forms to deliver yourself.

Postpartum instructions

Limit time and number of visitors. Do activities in moderation. No strenuous work, heavy lifting, or excessive social activity. Plan to have someone available to help you during the first two weeks home after delivery. Be sure to nap when the baby naps despite what work you feel needs to be done.

Reasons to call our office:

- Fever over 100°F
- Heavy bleeding; soaking a pad in an hour or less
- Passing clots larger than golf balls
- Painful urination
- Extreme pain or redness in the breasts

- Feelings of depression, severe anxiety, or thoughts of harming yourself, your baby, or others
- Fainting

Follow-up appointment: Your physician will recommend a specific time for a follow-up appointment after your delivery. Typically, for a vaginal delivery we see you in 4-6 weeks time. For a cesarean section, we have you come in when your baby is 1 week old for staple removal. If you have your staples removed in the hospital, we have you come in when your baby is 2 weeks old. Remember to bring with you a list of your current medications and any questions that you may have. Certainly, if you have a question or concern before your scheduled appointment, please feel free to call our office.

Temperature: Should you experience chills, sweating, or feel feverish, please check your temperature. If your temperature is over 100°F please call our office. If you are experiencing chills and sweats and do not have a fever, this is most likely related to your hormones as they are settling back into their normal level status-post delivery. This is normal and happens frequently as your body adjusts.

Menstrual bleeding: Reddish-brown bleeding or discharge called *lochia* is normal and is typically present 4-6 weeks after birth. Passing occasional small blood clots after delivery is also normal. If you have a clot that is the size of a golf-ball or larger, you should contact our office. If you are breastfeeding or starting prescription birth control, the start of your menstrual cycle can be unpredictable. If you have not taken prescription birth control and are bottle-feeding your baby, your menstrual cycle will typically begin about 6-12 weeks after delivery. Do not use tampons for the first 6 weeks after delivery; use pads or pantliners only.

Bathing: No baths until you have stopped bleeding vaginally. You may sit in the bathtub with the water running and the drain open for a "sitz"-type bath. You may shower as needed without restriction.

Driving: Do not drive if you are still taking pain medication other than plain Tylenol or Ibuprofen. If you have had a vaginal birth, you may drive after one week. If you have had a cesarean section, your physician will let you know when it is okay to drive. Typically this is when your baby is about 2 weeks old.

Sex: No sexual intercourse for the first 6 weeks or until you are released from your doctor. At your postpartum check-up an exam will be performed to confirm satisfactory healing. If you are breastfeeding, it is likely that you will need additional lubricant (Ex: Good Clean Love, KY) due to the shift in your hormones and vaginal dryness. There may be some discomfort with healing tissues when returning to intercourse initially, however, at no time is pain normal during sex. If this occurs, let your physician know.

Birth Control: It is possible to get pregnant any time after childbirth. Options for birth control will be discussed at your postpartum appointment. If you choose not to take

prescription contraceptives, condoms should be used if you are wishing to avoid pregnancy.

Exercise: After one or two weeks you may begin regular walking exercise. Avoid cardiovascular training until you are released by your physician. When you are cleared to resume, be patient with your body! Your body has had many changes and you may not be able to return to the same athletic level you were prior to delivery or pregnancy. High intensity exercise should be avoided until your cycle returns or until you are done breast feeding, whichever occurs first.

Choosing a Pediatrician

It is important to find a pediatrician for your baby during the pregnancy. You should strive to find a doctor or group who will be most able to meet the needs of you and your child. Important things to consider as you choose a doctor for your baby include location, office hours, and having a physician or practice who can be supportive of your decisions about child care (breastfeeding, nutrition, discipline, daycare, etc).

Kegel or Pelvic Floor exercises

Kegel/pelvic floor exercises are recommended for all women. These simple exercises strengthen the pelvic muscles which are important for controlling bladder function, improving sexual function, and holding your organs inside. While it is common to experience leakage of urine with coughing, sneezing, or exercise for 6-8 weeks after giving birth, these exercises will help you regain control and prevent long-term weakness.

- You can locate these muscles by trying to tighten around both the vaginal and anal area at the same time. Think of trying to stop from urinating and stopping from passing gas at the same time. This may feel difficult at first. With practice, these muscles will improve. Eventually, you want to do 10 reps tightening and relaxing and then 10 reps holding for 10 seconds each daily. Some suggestions might be to do 3-4 quick contractions when you feel the need to pee and you are trying to get to the bathroom to keep holding your urine in. If you continue to have problems with leaking, notify your doctor as pelvic floor physical therapy can help. We have physical therapy offered in our office.