

## You and Your Pregnancy

### ***Important Information from Your Doctors***

#### **Introduction**

Congratulations on your pregnancy! All of us in the office want to do everything we can to make this experience as safe and pleasant as possible.

The information in this folder should answer most of the common questions that occur during pregnancy. Otherwise, you can call the office at (972) 938-3493, Monday through Friday, 8:00 am to 12:00 pm and 1:00 pm to 5:00 pm. We are closed for lunch from 12:00 pm to 1:00 pm. You may also reach out to us using the secure messaging feature on the patient portal. After hours, for emergencies only, you may speak to someone from our answering service by calling our office.

The doctors of our group deliver at Methodist Mansfield Medical Center and Baylor Scott & White Medical Center at Waxahachie. You are asked to pre-register by 20 weeks gestation at the hospital where you will be delivering. We encourage you to consider registering for prenatal and breastfeeding classes, especially if this is your first pregnancy. You will also need to make arrangements for a Pediatrician or Family Medicine doctor to take care of your baby after dismissal from the hospital.

Please be aware that our physician charges include care for a normal, uncomplicated pregnancy and delivery. Any additional problems, testing, visits, or hospital admissions will incur additional charges. Also, be aware that these charges **do not** include **hospital** or **anesthesia** costs. Financial arrangements should be made separately for these services with the hospital and the anesthesia group.

Since it is impossible for one physician to be available 24 hours, 7 days per week, our physicians participate in a rotating on-call schedule for deliveries and work with a team of hospital-based obstetricians. Rest assured, on your special delivery day, a highly trained obstetrician will be taking care of you.

#### **Prenatal Visits**

After your first prenatal visit, you will be seen every four weeks until approximately 28 weeks, then every two to three weeks until 36 weeks. Beginning at 36 weeks, you will be seen weekly until your delivery. We will keep track of your pregnancy in weeks rather than months since this is more accurate. Full term is 40 weeks. Patients who are at high risk for complications (i.e., high blood pressure, diabetes, etc.) will be seen on a more frequent basis.

## **Prenatal Vitamins**

It is recommended that you start taking prenatal vitamins once you find out that you are pregnant. Over-the-counter prenatal vitamins are acceptable. There are also prescription prenatal vitamins as well. Docosahexaenoic acid (DHA) is a supplement that is available over-the-counter and is recommended during pregnancy to help with growth and development of the fetus.

## **What to Avoid During Pregnancy**

- Smoking (cigarettes, vape, e-cigarettes)
- Drinking any type of alcohol (liquor, beer or wine)
- Drugs that are for recreational purposes
- Exposure to X-ray, if possible (Microwaves and computer terminals have not been shown to have detrimental effects on the unborn fetus.)

## **Emergencies to be Reported Immediately During Pregnancy**

- Constant severe headache
- Blurred vision (constant)
- Bleeding from vagina (more than spotting)
- Fever greater than 100.4°
- Persistent severe abdominal pain
- Burning or pain with urination
- Decreased fetal movement (See "Fetal Movement" for more information)
- Water breaks (See "When to Go to the Hospital" for more information)
- Contractions **as described below** (See "When to Go to the Hospital" for more information)

## **When to Go to the Hospital**

- **Contractions:**
  - ❖ *35 weeks and above* - contractions that last 30-60 seconds and occur every 3-5 minutes for at least one hour
  - ❖ *Less than 35 weeks* – contractions that last 30-60 seconds and occur every 10 minutes or less for at least one hour
- **Water breaks:** Signs are either a sudden gush of clear, watery fluid from the vagina or a constant leaking of fluid from the vagina. (**Do not wait for contractions to start.**) If you are not sure if your water broke or if it is the normal increase in vaginal secretions that occurs in pregnancy, put on a pad (not a panty liner). If the fluid soaks the pad, it may be your water and this should be evaluated at the hospital.
- **Bleeding from the vagina:** Bleeding heavier than a period should be investigated at the hospital.

## **How to Time Contractions**

Contractions may be perceived as pain or cramps in your abdomen or your low back. The key is that they come and go, even when lying down. To time your contractions, place your hand on the uterus and feel when it starts to tighten. Time the contractions from the beginning of one contraction to the beginning of the next contraction, and how long each lasts.

## **Fetal Movement**

You will first feel movement sometime between the 16<sup>th</sup> to 20<sup>th</sup> weeks of pregnancy. Healthy babies are active babies. Each baby has a routine for sleep and activity; get to know your baby's routine. If you notice a significant decrease in your baby's activity, let your doctor know. If you are not sure, lie still for about an hour and count the number of baby's movements you feel. Drinking or eating something sweet may cause activity to increase or start. If your baby is still moving less than normal after paying closer attention, call the office or go to the hospital.

## **Laboratory Tests**

**Blood Work:** During early pregnancy, blood will be drawn and a complete blood work-up will be performed including: a complete blood count (CBC), blood type and Rh antibody screen, sickle cell (if necessary), Rubella titer, RPR (syphilis check), hepatitis screen, and HIV. Periodically during your pregnancy, we will check for anemia. Patients who are Rh negative will be checked for Rh antibodies. A blood sugar test will be done on one or two occasions during your pregnancy.

**Group B Strep Test:** At 36 to 38 weeks, we do a culture for Group B Strep (or GBS). This is a vaginal culture that determines if you have this bacteria which can harm your baby after birth. If this is positive, we will give you antibiotics during labor so it is not passed to the baby.

**Cervical Tests:** Gonorrhea and chlamydia cultures of the cervix may be performed on your first visit. A pap smear will be performed at your initial visit if you are due for one.

**Urine Samples:** Urine samples will be checked each visit for the presence of protein and sugar. A urine culture will be performed in early pregnancy.

**Early Screening:** A test for chromosomal defects is available and can be performed as early as 10 weeks gestation. Some tests can also determine the gender of the baby.

### **Ultrasound**

An ultrasound, also known as a sonogram, is recommended for all patients, usually at 18-22 weeks. In specific cases, additional sonograms will be performed.

### **Medication for Pregnant Patients**

#### **Allergies**

Benadryl, Zyrtec, Claritin, Allegra, Flonase

#### **Aches and Pains**

Tylenol (avoid Motrin/ibuprofen, Aleve/naproxen, aspirin)

#### **Cold Symptoms**

Congestion: Mucinex plain or DM

Cough: Robitussin, Nyquil, throat lozenges (DO NOT take medications with phenylephrine or pseudoephedrine)

#### **Constipation**

Milk of Magnesia, MiraLAX, Metamucil, Benefiber, Colace

#### **Diarrhea**

Imodium AD

#### **Fever**

Tylenol

#### **Heartburn**

Mylanta or Maalox (liquid works best), Pepcid AC, TUMS, Rolaids

#### **Hemorrhoids**

Anusol, Preparation H

#### **Nausea and Vomiting**

Doxylamine Succinate (Unisom) 12.5 mg which is half of the 25mg tablet PLUS Vitamin B6 25mg, Ginger Capsules, Emetrol, Benadryl

\*ALL MEDICATIONS LISTED ARE AVAILABLE AT YOUR DRUGSTORE WITHOUT A PRESCRIPTION\*.

### **Dealing with the Discomforts of Pregnancy:**

**Abdominal or Groin Pain (Round Ligament Pain):** Pain that only occurs with movement is usually not dangerous. Application of a pregnancy support belt may help. Avoid sudden movement. Sit down and get up slowly. Tylenol may help.

**Backache:** Careful attention to correct posture and body mechanics can help with this problem. Sleep on a firm mattress. Do not wear high heels.

**Colds and Flu:** These will usually run their course without medications. Fluids and rest are the most helpful remedies. However, if medication is needed, you can refer to the "Medication for Pregnant Patients" section above. If you are vomiting or have diarrhea, try managing these problems with diet. Go on clear liquids for 24 hours (hot tea, broth, Jell-O, Popsicles, 7-Up, or Gatorade). Avoid milk. Call if your temperature goes over 100.4°.

**Dizziness, Fainting, Lightheadedness:** Avoid sudden changes in posture, especially after lying down. Get up slowly: roll to your side and then push up to a sitting position using arms. Avoid standing or lying flat on your back for long periods of time. Don't skip meals and try to eat healthy foods. Drink plenty of water.

**Headache:** You may use Tylenol but avoid aspirin, ibuprofen (Advil or Motrin), and Aleve.

**Heartburn or Gas:** Avoid spicy foods and overeating. Do not eat immediately before lying down. Pillows elevating your head at night may help. If you need an antacid, you may use Maalox, Mylanta, Tums or Roloids.

**Leg Cramps:** The object is to stretch the cramped muscle, thus improving circulation. Stretching should be gentle and constant, not jerky. Warm baths may help.

**Nausea and Vomiting:** This may occur during the early months of pregnancy. Although it's frequently referred to as "morning sickness," it can occur any time of the day or night. It usually disappears after 12 weeks. Try the following suggestions:

- Take Ginger capsules, one every 6-8 hours.
- Wristbands to decrease nausea are available and sometimes help.
- Eat a piece of bread or a few crackers when you feel nauseated or before you get out of bed in the morning. You can set some crackers close to your bed the night before.
- Get out of bed slowly. Avoid sudden movements.
- Eat several small meals during the day so your stomach doesn't remain empty for very long.
- Avoid greasy or fried foods.
- Avoid spicy, heavily seasoned foods.

If unable to keep solids or liquids down for more than 24 hours, call the office or the hospital.

**Numbness and Tingling:** Common in the fingers. This may occur from time to time but usually goes away after the pregnancy. Some swelling is normal.

**Shortness of Breath (Dyspnea):** Sleep with your head well propped up with a pillow. Concentrate on taking slow, deep breaths if this feeling occurs. Please report wheezing or severe difficulty with breathing.

**Tiredness (Fatigue):** During pregnancy, women are often more tired. You should go to bed earlier, and try to take a nap during the day. Fatigue often lessens in the second trimester. But in general, most women need additional rest during pregnancy.

**Urinary Frequency:** This occurs normally during the first 3 months of pregnancy because the growing uterus places increased pressure on the bladder. It will usually improve as the uterus rises out of the pelvis during the second trimester. It may return near the time of delivery as the baby's head engages and presses against the bladder. However, pain during urination or blood in your urine is not normal and should be checked by your doctor if it occurs.

### **Diet Guidelines**

High levels of mercury may harm an unborn baby's developing nervous system. DO NOT eat shark, swordfish, king mackerel or tilefish while pregnant as they contain high levels of mercury. Shrimp, canned light tuna, salmon, pollock and catfish are low in mercury, and can be safely consumed. Albacore ("white") tuna has more mercury than canned light tuna, so do not eat more than 6 ounces of albacore tuna per week.

For more information about the current FDA recommendations, please visit our website at [www.whsnt.com](http://www.whsnt.com). Look under the "Resources" section for more information.

### **Travel**

Travel is discouraged in the last 4 weeks of your pregnancy, especially for more than one hour's travel time from the hospital. If you do any traveling during pregnancy, it is wise to stop and walk or stretch your legs every 1-2 hours. Be sure to wear a seat belt at all times. Place it under your abdomen as your pregnancy advances.

### **Sexual Activity**

No restrictions need to be placed on sexual intercourse. You may find changes in comfort and sexual desires due to pregnancy. Rarely, certain conditions may exist which require you to limit sexual activity. If so, you will be advised as such by your physician.

### **Exercise**

Exercise during pregnancy is important. It is key to your well-being and comfort during pregnancy, labor and delivery. It also affects how quickly you recover in the postpartum period. Swimming, 30 minutes of fast walking, or aerobic classes are good for you and your baby. Only activities that risk direct injury to the abdomen or cause exposure to extreme heat need to be avoided. Avoid any activity that seems to strain your back or that might lead to a fall or other injury. Also, after the first trimester, avoid exercises that require you to lie flat on your back.

## **Dental Care**

When you visit a dentist, tell the dentist and office staff that you are pregnant. Your teeth can be X-rayed if your abdomen is shielded. You can have local anesthesia, but epinephrine injected into a blood vessel should be avoided. Most dental pain medications prescribed by dentists for pregnant women are okay to take after the 12<sup>th</sup> week of pregnancy. Call our office if you have any questions.

## **Working During Pregnancy**

Most expectant mothers can continue to work until late in pregnancy without any problems. There are specific medical conditions that could require a woman to reduce her hours at work or to stop work and be on bedrest. When medically appropriate, we will recommend that a pregnant patient be placed on disability leave from her job. However, **such leave is rarely required**. In the absence of a serious condition that would endanger the health of the mother or baby, medical ethics prevent us from making such a recommendation. But if the physical changes that occur in pregnancy or the demands of your job creates workplace difficulties, we can make recommendations to your employer about helpful adjustments to your duties.

In general, avoid heavy lifting, which is considered more than 25 pounds, due the increased risk of injury.

## **Packing Your Suitcase**

Chapstick or Carmex

Camera

Nursing bra

Toothbrush/toothpaste

Deodorant

Car seat for your baby

Cell phone charger

Going home clothes

Baby clothes/Diapers

Gown, robe & slippers

Non-Skid Socks

Shampoo/conditioner

Baby book

## **Video Recording**

It is our policy that we do not allow video recordings at the time of delivery. You may record during labor and afterwards during recovery. However, no video recording is allowed during the actual delivery or the initial medical care of the baby.



## **Hospital Information**

### **Baylor Scott & White Medical Center at Waxahachie**

2400 North Interstate 35  
Waxahachie, TX 75165  
(469) 843-4000

### **Methodist Mansfield Medical Center**

2700 E. Broad Street  
Mansfield, Texas 76063  
(682) 622-2499