Congratulations on your pregnancy. We are delighted you have chosen Ochsner for your prenatal care and the delivery of your baby. This guide offers information on what you and your family can expect throughout your pregnancy.

Our goals is to provide you with the best care possible as you prepare for one of your life’s most miraculous events – the birth of your child. You have our sincerest wishes for a healthy, birth and a positive transition into your early days of parenting.

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allergies</td>
<td>1</td>
</tr>
<tr>
<td>Baby Movement Counts</td>
<td>1</td>
</tr>
<tr>
<td>Backache</td>
<td>1</td>
</tr>
<tr>
<td>Breastfeeding</td>
<td>1</td>
</tr>
<tr>
<td>Breast Tenderness</td>
<td>2</td>
</tr>
<tr>
<td>Colds and Congestion</td>
<td>2</td>
</tr>
<tr>
<td>Constipation</td>
<td>2</td>
</tr>
<tr>
<td>Contractions</td>
<td>2</td>
</tr>
<tr>
<td>Cough</td>
<td>3</td>
</tr>
<tr>
<td>Cramping</td>
<td>3</td>
</tr>
<tr>
<td>Cues</td>
<td>3</td>
</tr>
<tr>
<td>Dental Procedures</td>
<td>3</td>
</tr>
<tr>
<td>Diarrhea</td>
<td>3</td>
</tr>
<tr>
<td>Diet</td>
<td>4</td>
</tr>
<tr>
<td>Dizziness/Faintness</td>
<td>4</td>
</tr>
<tr>
<td>Exclusive Breastfeeding</td>
<td>4</td>
</tr>
<tr>
<td>Exercise and Physical Activity</td>
<td>4</td>
</tr>
<tr>
<td>Frequent Urination</td>
<td>4</td>
</tr>
<tr>
<td>Gas and Bloating</td>
<td>5</td>
</tr>
<tr>
<td>Hair</td>
<td>5</td>
</tr>
<tr>
<td>Headaches</td>
<td>5</td>
</tr>
<tr>
<td>Heart Palpitations</td>
<td>6</td>
</tr>
<tr>
<td>Heartburn</td>
<td>6</td>
</tr>
<tr>
<td>Hemorrhoids</td>
<td>6</td>
</tr>
<tr>
<td>Latch</td>
<td>6</td>
</tr>
<tr>
<td>Leg Cramps</td>
<td>6</td>
</tr>
<tr>
<td>Miscarriage</td>
<td>6</td>
</tr>
<tr>
<td>Mood Swings</td>
<td>6</td>
</tr>
<tr>
<td>Nausea and Vomiting</td>
<td>7</td>
</tr>
<tr>
<td>Nosebleeds</td>
<td>7</td>
</tr>
<tr>
<td>Pain</td>
<td>7</td>
</tr>
<tr>
<td>Preeclampsia</td>
<td>7</td>
</tr>
<tr>
<td>Prenatal Visits</td>
<td>8</td>
</tr>
<tr>
<td>Preterm Labor</td>
<td>8</td>
</tr>
<tr>
<td>Rooming-In</td>
<td>8</td>
</tr>
<tr>
<td>Round Ligament Pain</td>
<td>8</td>
</tr>
<tr>
<td>Salivation and Spitting</td>
<td>9</td>
</tr>
<tr>
<td>Sexual Intercourse</td>
<td>9</td>
</tr>
<tr>
<td>Shortness of Breath</td>
<td>9</td>
</tr>
<tr>
<td>Skin Changes</td>
<td>9</td>
</tr>
<tr>
<td>Skin-to-Skin</td>
<td>9</td>
</tr>
<tr>
<td>Support</td>
<td>10</td>
</tr>
<tr>
<td>Swelling</td>
<td>10</td>
</tr>
<tr>
<td>Tiredness</td>
<td>10</td>
</tr>
<tr>
<td>Travel</td>
<td>10</td>
</tr>
<tr>
<td>True Labor vs. False Labor</td>
<td>10</td>
</tr>
<tr>
<td>Urinary Tract Infection</td>
<td>11</td>
</tr>
<tr>
<td>Vaginal Bleeding and Discharge</td>
<td>11</td>
</tr>
<tr>
<td>Varicose Veins</td>
<td>11</td>
</tr>
<tr>
<td>Weight Gain</td>
<td>11</td>
</tr>
<tr>
<td>When to Call the Doctor</td>
<td>11</td>
</tr>
</tbody>
</table>
**Allergies**
Many women have seasonal allergies. If you experience seasonal allergies during pregnancy, you can take Benadryl®, Claritin®, or Zyrtec®. If you have an allergic skin reaction, contact your doctor.

**Baby Movement Counts**
Baby movement is an indication of your baby's health and well being. A movement may be a kick, stretch, or turn. You will begin counting baby movements after you reach 28 weeks’ gestation. Do these counts twice a day, both in the morning and evening. Several things can affect your baby’s activity, such as baby's sleeping (20-40 minutes at a time), your blood sugar levels, smoking, noise level, drugs, gestational age, placental location, decreasing space in the uterus, and the time of day. Call your doctor if your baby has NOT had 5 movements in 1 hour or 10 movements in 2 hours or there is a significant decrease in your baby’s movement.

**Backache**
Almost all pregnant women have backaches during their pregnancy. These are often related to stretching of the ligaments that hold the uterus in place. Backaches can also be caused by stretching of the back muscles that support the weight as your baby grows. Here are some comfort measures:
- Maternity belt
- Warm heating pad
- Warm bath
- Regular strength Tylenol®
- Massage

**Breastfeeding**
Your doctor should discuss breastfeeding with you before delivery. Breastfeeding is the best nutrition for your baby. Breastfeeding also protects your baby from different illnesses. Studies have shown that breastfed babies get sick less often. When they reach school age, breastfed babies perform better in school. Newborns tolerate breast milk better than formula. Breastfeeding also decreases your bleeding after delivery by shrinking your uterus. It is a natural process, but it often takes some time for you and your new infant to get the hang of things. Here are some helpful hints:
- Try breastfeeding as soon as your baby is born. Beginning immediately increases the success of breastfeeding and creates a bond between you and your baby.
- Do not get discouraged! Most women don’t produce a significant amount of milk until 3 to 4 days after delivery.
- Continue to take your prenatal vitamins while breastfeeding.
- Stay well hydrated by drinking 8 to 10 glasses of water every day.
When breastfeeding, if you have fever, redness of the breasts or fullness that is not relieved by pumping or expressing your milk, contact your doctor. Breastfeeding is not recommended for women with certain medical conditions.
Breast Tenderness
This condition is common in pregnancy, especially in the beginning. The tenderness is related to the hormone changes that occur in the first trimester. Your breasts may become larger. You may also notice darkening of the nipples. As your pregnancy continues, it is not uncommon to produce milk, even before you deliver. To relieve breast tenderness and heaviness, wear a good support bra.

Colds and Congestion
Nasal congestion during pregnancy can be normal. To relieve congestion, you may use Ocean Nasal Spray, a saline nasal spray, or Sudafed sparingly. Do not use antihistamines because they may make the congestion worse. You can also try using a humidifier.

Constipation
Constipation is very common throughout all stages of pregnancy. It can be caused by hormones that relax the muscles in your digestive system. Iron often taken during pregnancy may make the constipation worse. In addition, the growing uterus pressing on the lower intestines may also add to the problem. Here are some ways to relieve constipation:

• Drink plenty of water. Try to drink 8 to 10 glasses of water per day.
• Eat foods high in fiber such as raw fruits, vegetables, wholegrain breads, and cereals.
• Eating fruit, especially at night, such as prunes, figs, dates, raisins, peaches, and cherries because of their laxative qualities.
• Avoid cheese, bananas, and rice as they may slow down your bowel movements.
• Use Metamucil® or Citrucel® as needed.
• Try a stool softener such as Colace® or Dulcolax®.
If you go 5 days without a bowel movement or have significant pain, contact your doctor.

Contractions
Cramping or Braxton Hicks contractions are common in the second and third trimesters. Make sure you stay well hydrated. You may also find comfort from a warm bath. If you experience contractions every 5 minutes apart or closer for 2 hours, contact your doctor about an assessment.
Cough
For relief from cough, you can try regular strength Robitussin®, Chloraseptic® spray or any throat lozenges.

Cramping
Women commonly have abdominal cramping throughout their pregnancies. Cramping associated with pregnancy is often described as feeling similar to menstrual cramps. Early in the pregnancy, mild abdominal cramping is due to the growing uterus. Cramping can also be due to round ligament pain. In the late second trimester and third trimester, you may experience cramping due to Braxton Hicks. These are contractions of the uterus, but they are not associated with labor. They can be worse with activity or when you are dehydrated. Make sure you drink 8 to 10 glasses of water every day. If the cramping becomes more intense or you experience the cramping every 5 minutes apart or closer for 2 hours, contact your doctor immediately.

Cues
Babies don’t feed at regular intervals. Instead, babies use cues to tell you when they are hungry and full. You can tell when your baby is starting to get hungry when you see him or her stretch or begin waking up. Then, your baby may begin to bring hands to mouth, smack lips or stick tongue out. Hopefully, you have started to feed by now. If not, baby may start to cry, which makes feeding very difficult. When mothers respond to feeding cues, baby eats more frequently. More frequent feeding increases mom’s milk supply. More milk means that baby will be happier and healthier and mom will be more confident.

Dental Procedures
Bleeding gums are common during pregnancy. However, if you have painful gums or teeth, speak with your dentist. Most dental procedures can be performed safely during pregnancy with a local anesthetic. Keep your teeth healthy during pregnancy by brushing twice a day, using dental floss, and having regular dental exams and cleanings.

Diarrhea
Your gastrointestinal tract may be more sensitive during pregnancy. That sensitivity can cause diarrhea after you eat certain foods. Relieve diarrhea with Imodium® or Kaopectate®. Stay well hydrated. If you have blood or mucus in your stool or the diarrhea persists for more than 48 hours, call your doctor.
Diet
Maintain a healthy diet throughout pregnancy by eating grains, fruits, vegetables, dairy products, meats, and beans. Avoid fatty, greasy, and fried foods. Eat small frequent meals throughout the day and NEVER skip breakfast. There are some foods you want to avoid during pregnancy:

- Cheeses such as brie, Gouda, and feta. These soft cheeses are not completely pasteurized and can contain bacteria that can be harmful to your baby.
- Shark, swordfish, king mackerel, and tilefish can be high in mercury. Limit canned tuna and salmon to once per week.
- Packaged meat such as ham, bologna, and hotdogs. They can contain bacteria that can be harmful. Eat them only if they are fully cooked.
- Raw meat and raw fish such as sushi.

Dizziness/Faintness
During pregnancy, it is common to become dizzy or lightheaded when standing for long periods of time. You may also experience dizziness when changing positions, such as moving from sitting to standing. Dizziness usually occurs in the second trimester. Make sure you drink plenty of water, and avoid standing still for long periods of time. If it does not improve, contact your doctor immediately.

Exclusive Breastfeeding
Mother’s milk has everything a baby needs for the first six months of life. It may take time to learn to breastfeed, but you have the support you need to be successful. All major health organizations recommend exclusive breastfeeding for six months. This means no water, juice, tea, rice cereal or solids for baby until after six months.

Exercise and Physical Activity
You can and should exercise during pregnancy but do not start a new exercise routine. When you are exercising, your heart rate should not exceed 140 beats per minute. Do not lift anything heavier than 10 to 15 pounds. Do not exercise for more than 15 minutes in areas that are hot, humid, or not well ventilated. After the fourth month of pregnancy, avoid exercises that require you to lie on your back. Avoid exercises that will cause trauma to your abdomen, such as horseback riding, downhill skiing, wrestling, etc. Swimming is permissible, but diving is not. If you experience excessive contractions, bleeding, loss of fluid or decreased fetal movement, call your doctor immediately.

Frequent Urination
Hormone changes at the beginning of pregnancy increase the frequency of urination. This is normal. Pressure from the uterus and the baby at the end of pregnancy decreases the capacity of the bladder—also leading to frequent urination. Because of the increased pressure, it is not uncommon to lose urine unexpectedly.
Gas and Bloating

It is common to have gas and bloating during your pregnancy. Here are some things to do to help:

- Recognize the foods that give you gas and avoid eating them.
- Eat small, frequent meals instead of big, heavy meals.
- Don’t eat fried, fatty, and greasy foods.
- Avoid constipation (see Constipation).

Hair

Often, the hormonal changes during pregnancy cause your hair to break. You may also notice increased shedding during the post-partum period. These changes are normal. Relaxer, perms, and hair dyes can be applied after the first trimester.

Headaches

There are different causes for headaches you may have during pregnancy.

- Tension headaches are characterized by pain usually in the back and sides of the head that becomes worse with stress. Tension headaches are best treated by taking regular strength acetaminophen, drinking plenty of water, and resting.
- Sinus headaches are associated with pain under the eyes or around the face. These are best relieved with regular strength acetaminophen, alternating cold and warm compresses, or a humidifier.
- Migraine headaches are often accompanied by nausea and vomiting. Light and sound make migraine pain worse. If you experience this type of headache, consult your doctor.

Any time you experience a headache associated with blurry vision or a headache that is not relieved by acetaminophen, contact your doctor immediately. This headache may be caused by elevated blood pressure.

Heartburn

During pregnancy hormonal changes slow down your digestive system and the stomach takes longer to empty. This increases the production of gastric juices that can lead to heartburn. Here are some ways to ease the pain:

- Eat small more frequent meals.
- Avoid spicy foods.
- Avoid fried, fatty, and spicy food.
- Avoid irritants such as citrus juices, tomatoes, and sodas.
- Avoid alcohol, mint, coffee, and strong tea.
- Remain upright for at least one hour after eating.
- Use antacids such as Tums® or Rolaids®.
- Take over-the-counter Zantac® twice per day.

If your heartburn is not relieved with these, contact your doctor.
**Heart Palpitations**
During pregnancy you may feel as though your heart is racing or skipping a beat. While palpitations can be normal, if they are associated with chest pain, shortness of breath, or fatigue, contact your doctor immediately.

**Hemorrhoids**
As your pregnancy continues and you have more pelvic pressure, you may develop hemorrhoids. Hemorrhoids can be painful. Here are some hints to help with the pain:
- Avoid constipation (see Constipation).
- Use hemorrhoid creams such as Annusol® or Preparation H®.
- Use astringents such as Tucks® Medicated Pads.
If pain persists or you experience excessive bleeding, contact your doctor.

**Latch**
When it comes to latching on for breastfeeding, only two things matter: comfort and effectiveness. Breastfeeding is part instinct, and part learning. Our staff will help with the learning to make sure there is no pain and baby is getting milk.

**Leg Cramps**
Muscle spasms in the calf, especially at night, are common during pregnancy. Try massaging the calves, stretching or applying a warm heating pad. If your leg cramps do not improve or only occur in one leg, call your doctor.

**Miscarriage**
Unfortunately, miscarriage is the unhappy side of pregnancy, and it is common. Miscarriage is not your fault or your partner’s fault. Most of the time, miscarriage is the result of the genetic information not coming together in the right way. It will not affect your next pregnancy. However, if you have had two or more miscarriages, discuss this with your doctor. Also, you should be aware of the signs of miscarriage:
- Bleeding during pregnancy is a result of the increased dilation of blood vessels. However, if you have bleeding that soaks through a sanitary pad, contact your doctor.
- Cramping can be a sign of growth. However, if you have cramping associated with bleeding, contact your doctor.
Pregnancy loss is a difficult life event. If you are having difficulty coping, speak to your doctor or nurse about support groups available in your area.

**Mood Swings**
You may be happy one minute and sad the next. Mood swings are a normal part of pregnancy and caused by hormones. However, if you are extremely sad, cry a lot, cannot sleep, are not eating or if you feel like hurting yourself or someone else, call your doctor immediately!
Nausea and Vomiting
During the early stages of pregnancy, nausea and vomiting are common. These usually stop in the second trimester. Here are some things you can do to reduce feeling nauseous.  
- Eat crackers or dry toast before sitting up in the morning.  
- Avoid sudden movements. Get out of bed slowly.  
- Eat small frequent meals. Avoid eating fatty, greasy, and spicy foods.  
- Stay hydrated. If you cannot tolerate water, try Sprite.  
- Try ginger in any form: ginger ale, ginger snaps or ginger tablets.  
- Take 25 mg of Vitamin B6 twice a day with half a Unisom tablet.  
If your vomiting persists for more than 24 hours, check with your doctor for further advice.

Nosebleeds
Because of the increased dilation of the blood vessels during pregnancy, nosebleeds can occur. This condition does not usually require medical treatment. However, if the bleeding persists, contact your doctor.

Pain
Labor is hard work. When you’re making decisions about how to handle birth pain, talk with your nurses and doctors about techniques that will not interfere with breastfeeding. For example, select a support person to be with you during labor, and practice ways of moving and massaging that help you feel comfortable. Ask about our childbirth education classes if you’d like to learn more.

Preeclampsia
Preeclampsia is a disorder during pregnancy in which your blood pressure goes up above limits that are normal for you. Preeclampsia can be dangerous if not properly monitored. Possible complications are seizure, stroke, placental abruption, pulmonary edema, kidney failure, and ultimately baby’s death. Notify your doctor if you have:  
- Sudden weight gain. Weigh yourself daily before breakfast and watch for an increase of 5 or more pounds in a week.  
- Generalized swelling. Watch for your shoes not fitting, your rings being too tight, or your face getting puffy.  
- Decreased urine. Monitor your amount of urine. Is it a small amount compared to what you have drunk?  
Early detection and careful monitoring of your condition may prevent serious complications for you and your baby.
Prenatal Visits
Prenatal care is essential to having a happy, healthy pregnancy. Whether you choose a physician, a nurse practitioner, or a nurse midwife, your provider will be the guide to a healthy baby. During your prenatal visit, your provider will listen to the baby’s heart and make sure your baby is growing appropriately. You will have different laboratory tests performed, including testing your blood type, checking for anemia, and testing for different infections. You will need to see your provider every 4 weeks until you are 28 weeks pregnant. Then you will see your provider every 2 weeks until you are 35 weeks pregnant. After 35 weeks, you will see your provider every week until you deliver.

Preterm Labor
Preterm labor occurs when regular contractions begin to open your cervix before 37 weeks of pregnancy. A full-term pregnancy should last about 40 weeks. If preterm labor can’t be stopped, your baby will be born early. The good news is that doctors can do a lot to delay an early delivery. The longer your baby gets to grow inside you -- right up to your due date -- the less likely he or she is to have problems after birth. Here are some of the risks for preterm birth:

- Previous preterm labor and delivery
- Abnormally shaped uterus or uterine surgery
- Two or more second trimester miscarriages or abortions
- Incompetent cervix, cone biopsy, large fibroid
- Current pregnancy with twins, triplets, etc.
- Severe urinary tract or kidney infection
- Vaginal bleeding, placenta previa
- Too much or too little amniotic fluid

Rooming-In
Rooming-in is when mom and baby are together in the same room throughout their whole stay. The nurses and doctors provide all clinical care in the room, except for some procedures that need to be done in the newborn observation unit. Babies feel safe and secure when they are near the people who love them. Mothers and babies sleep better quality when rooming-in. Nurses are more available to be with you and baby in your room, because they are NOT busy taking care of a nursery full of babies. They will help you with feeding, diapering, bathing, etc. This way, when you go home, you will feel confident.

Round Ligament Pain
There are two ligaments (a band of tough, flexible, fibrous connective tissue) from the front of the uterus and end in the vagina. These are known as the round ligaments. As the uterus grows and stretches, these ligaments stretch. Pain is often associated with this stretching. It can be a sharp, stabbing pain usually in the lower pelvis or the vagina. The pain is worse when you move from sitting to standing or walk for long periods. You can help reducing round ligament pain with the following:

- Using a warm (not hot) heating pad
- Taking a warm bath
- Taking regular strength Tylenol®
- Wearing a maternity belt
- Staying well hydrated by drinking water
Salivation and Spitting
Some women experience increased salivation during pregnancy. This condition is known as ptyalism. Decrease your saliva by using non-medicated throat lozenges, sucking candy such as peppermint or eating crackers. Ptyalism may stop occurring by the second trimester or may last throughout the pregnancy.

Sexual Intercourse
In most cases, it is safe to continue sexual intercourse throughout pregnancy. You may find a decreased desire during pregnancy, and this is normal. You may find an increased desire during pregnancy, and this is also normal. Avoid sex if you have bleeding, your water bag is ruptured, or you have been diagnosed with a placenta previa or an incompetent cervix.

Shortness of Breath
Toward the end of pregnancy, many women experience shortness of breath. The uterus is enlarging and the diaphragms are unable to lower, making it feel like you are unable to catch your breath. However, if you experience wheezing or dizziness, or if you are unable to catch your breath, contact your doctor immediately.

Skin Changes
Hormone changes throughout the pregnancy affect the melanocytes and cause darkening of several areas of the body. Some women’s faces darken, causing a pregnancy mask. Some women have darkening of the areola around the nipple. Often, a dark line appears on the abdomen from the belly button to the pubic area. Stretch marks can also form during pregnancy. Most of these skin changes will fade after pregnancy. You may minimize the appearance of stretch marks by using cocoa butter lotion, Vitamin E oil or other over-the-counter products.

Skin-to-Skin
The first few hours after birth are sacred. As soon as your baby is born, she or he will be dried and placed on you for the first hug! As long as everyone is healthy, you will get to be skin-to-skin through your first feeding and for at least an hour. Baby has been growing inside of you and really needs to stay close after birth in order to adjust to life in the outside world. Feeling your warmth, hearing your heartbeat and voice, and receiving your milk will all ensure a smooth transition. Other loved ones will enjoy holding the baby after this important adjustment period.
Support
We are here for you. With the right support, all mothers can breastfeed. Our team of doctors, nurses and lactation consultants can help you meet your goals. Our job is to help you make informed decisions and to make sure you have the support you need to meet your goals.

Swelling
As the uterus gets larger, it lies on the inferior vena cava, diminishing the return of blood flow. This often leads to swelling in your ankles and feet, and sometimes in your hands. Swelling in your hands may lead to a condition known as carpal tunnel syndrome, resulting in pain in your wrists. You can improve swelling with these techniques:
• Avoid salty foods.
• Elevate your feet higher than the level of your heart.
• Avoid standing for long periods.
• Wear loose clothes.
• Wear wrist braces, especially at night, for carpal tunnel syndrome.
If you experience swelling in your face, headaches, blurry vision, or swelling in one calf only, contact your doctor immediately.

Tiredness
Fatigue during pregnancy can be normal. Fatigue is most pronounced at the very beginning of pregnancy and again towards the end. Make sure you get adequate sleep and rest. While most of the time fatigue is normal, it can also be a sign of anemia. Ask your doctor for more information.

Travel
Travel during pregnancy is safe. However, you should always check with your doctor first before traveling. During pregnancy, you are at increased risk for blood clots, so you should walk around every 1-2 hours during travel. Always wear a seatbelt when riding in the car. Place the shoulder strap across your chest and place the waist belt underneath your belly. You should avoid flying in an airplane after 35 weeks.

True Labor vs. False Labor
It’s important to be able to tell the difference between true labor and false labor. When labor begins, you have regular contractions every 5 minutes for 2 hours. The contractions get stronger (average is about one minute) in intensity and last longer. The cervix begins to dilate or open. A bloody show or a pink discharge may occur. A sudden gush or leaking of watery fluid from the vagina may be because your water bag has broken. When you are having a false labor, the cervix does not dilate. Contractions are not in a regular pattern. They do not get stronger in intensity and changing your activity, such as walking or lying down, may make the pain of contractions lessen. Staying hydrated with plenty of water and/or taking a dose of Tylenol makes the contractions decrease.
**Urinary Tract Infection**

Urinary tract infections can cause preterm labor. Here are some methods to help prevent getting a urinary tract infection:
- Drink 8-10 glasses of water a day.
- Drink cranberry juice every day as it lowers the pH of the urinary tract and discourages bacterial growth.
- Empty your bladder immediately before and after sexual intercourse.
- Wipe from front to back after using toilet.
- Avoid irritating bubble baths and soaps.
- Wear cotton crotch panties.

If you experience burning when you urinate, blood in your urine, fever, chills or pain associated with urination, tell your doctor.

**Vaginal Bleeding and Discharge**

Hormonal changes during pregnancy can cause vaginal discharge of varying consistencies. You may have a thick white discharge from your vagina that helps prepare your body for birth. You may also have vaginal bleeding for different reasons such as broken blood vessels in your cervix after a vaginal exam. A vaginal infection may cause bleeding. Also, having sex may cause some of the blood vessels to break and result in some spotting. If you have bleeding like a menstrual period, itching, irritation or foul odor, call your doctor.

**Varicose Veins**

Varicose veins occur because of dilation of the blood vessels during pregnancy. Varicose veins may occur on the legs or even the vulva. Avoid standing for long periods of time, elevate your feet at night, and wear support hose during the day.

**Weight Gain**

While you should not diet during pregnancy, there is an expected amount of weight you should gain during your pregnancy. This information is based on the report brief from the Institute of Medicine of the National Academies, May 2009. It is based on your pre-pregnancy weight.

<table>
<thead>
<tr>
<th>Pre-Pregnancy BMI Category</th>
<th>Total Weight Gain Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>Underweight (less than 18.5)</td>
<td>28 – 40 lbs</td>
</tr>
<tr>
<td>Normal weight (18.5 to 24.9)</td>
<td>25 – 35 lbs</td>
</tr>
<tr>
<td>Overweight (25 to 29.9)</td>
<td>15 – 25 lbs</td>
</tr>
</tbody>
</table>