

Your Pregnancy from A to Z

YOchsner Health

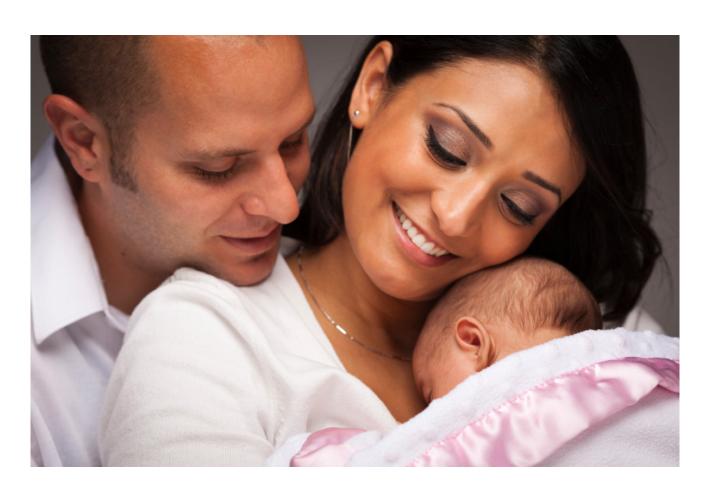
When to Call Your Provider

Look for these important warning signs. Call your doctor or midwife right away if you have any of these signs:

- Fever over 100.4 F
- Saturating a maternity pad with blood in 1 hour or passing large clots
- Foul odor from your vagina or incision
- Abdominal or incision pain not relieved with pain medicine
- Swelling, redness, pus or significant bleeding from your stitches
- Incision starts to separate
- Burning sensation when urinating
- Severe headaches, blurry vision, seeing spots
- Excessive swelling
- Pain or redness in the breast
- Pain/swelling/redness in your perineum, breasts, leg
- Dizziness/faintness
- Signs of depression
- Shortness of breath

Call 911 if you experience any of these signs:

- Chest pain or difficulty breathing
- Thoughts of hurting yourself or your baby
- Hallucinations





Allergies

Many women have seasonal allergies. During pregnancy you can take Benadryl, Claritin, Allegra, Zyrtec or use a saline spray to help with a runny nose or congestion. Make sure you increase your water intake to avoid dehydration. If you have an allergic skin reaction, contact your doctor.



Baby Movement Counts

Baby movement is an indication of your baby's health and wellbeing. 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 if there is a significant decrease in your baby's movement.

Backache

Almost all pregnant women have backaches during pregnancy. As your body changes during pregnancy, your back must work in new ways. Back pain is due to many causes. Physical changes (example- the extra sway in your back to support the growing uterus) in your body can strain your back and its supporting muscles. Also, hormones (chemicals that carry messages throughout the body) such as Relaxin, increase during pregnancy. This can affect how your muscles and joints work together, softens the cartilage between your vertebrae causing the pain. Pain may be felt in the upper and lower back or both. It can also radiate to your pelvic region or sciatic nerve, radiates through buttocks and down the back of the leg.

Here are some comfort measures to try:

- Wear a maternity belt to help support your lower abdomen and relieve the stress on your back muscles.
- Use a warm heating pad on your back as a safe option.
- Take warm baths and soaks. Epsom salt can be used in your bath water to help ease discomforts.
- Take regular strength tylenol.
- Ask your partner to massage your shoulders, neck and back.
- Limit strenuous activities or perform activities in short increments.
- Lie down on your side with your legs pulled in with pillows between your knees.
- Make sure you are drinking 8-10 glasses of water a day to ensure proper hydration.

Breastfeeding

BENEFITS OF BREASTFEEDING

- Protects baby from infection.
- Easy on their bellies (easy to digest).
- Less chance of obesity, asthma, allergies.
- Lower risk of serious intestine infection.
- Helps control mom's bleeding after baby is born.
- Burns calories (may help mom return to her weight before pregnancy).

RISKS OF FORMULA FEEDING

- Changes the number of healthy bacteria in the baby's belly.
- More difficult to digest and can make the baby constipated.
- Formula can become contaminated. This could make your baby sick.



RISK OF FORMULA SUPPLEMENTATION

- Can stretch baby's tummy.
- May lose the infection protection that breastmilk offers.
- Can decrease mom's milk supply.

Download the Coffective app to your phone. It's free!

Here are some helpful hints:

- Attend prenatal breastfeeding class, bring your partner.
- Avoid pacifiers, which can hide feeding cues, affect your baby's latch, and reduce your milk supply.
- Feed as soon after birth as possible and whenever baby is showing feeding cues.
 This will increase success of breastfeeding and may help to create a bond between you and your baby.
- Feed on demand, aim for 8-12 feedings in a 24-hour period.
- Avoid pacifiers, which can hide feeding cues, affect your baby's latch, and reduce your milk supply.
- Continue taking your prenatal vitamins and stay well hydrated.
- Stay well hydrated, drink 8-10 glasses of water every day.
- Report any fever, redness or fullness of the breasts that is not relieved by pumping or hand expressing your milk.

Breast Tenderness

Breast tenderness is common in pregnancy, especially in the early stages. The tenderness is related to the hormone changes that occur in the first trimester. Your breasts become larger and your areola, dark area around the nipples, may darken in color as well. As your pregnancy continues, it is NOT uncommon to produce milk or a clear, yellow sticky substance, even before you deliver. This is how your body prepares for breastfeeding. To relieve the tenderness, wear a good supportive bra. You may want to buy a size larger bra if purchasing early in the pregnancy to accommodate the growth.



Colds and Congestion

Nasal congestion during pregnancy can be normal. To relieve congestion, you may use Ocean Nasal Spray, a saline nasal spray, Mucinex, Plain Robitussin 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, whether taking as a separate supplement or included in your prenatal vitamin, can make constipation worse. In addition, the growing uterus pressing on the lower intestines may also add to the problem.

These lifestyle changes can help prevent constipation:

- Diet- Eat a high-fiber diet, with fresh, raw fruits and vegetables, whole grain breads and pastas, and reduce dairy intake (cheese, milk products), rice, bananas and processed foods
- Fruit with laxative qualities-prunes, figs, dates, raisins, peaches and cherries
- Fluids- It's important to get enough fluids each day- 8 to 10 glasses of water in addition to other beverages consumed throughout your day
- Regular exercise- Walking daily, 30 minutes, will help your digestive system work
- Medications- Citrucel, Metamucil or Unifiber can be used. Make sure you drink additional water when taking these medications. Additional medications-stool softeners such as Colace, Miralax, Senokot, and Mineral oil (one ounce in juice) are also safe medications to try.

If it has been 5 days without a bowel movement, please refer to provider for further recommendations

Contractions

Braxton Hicks Contractions can occur at any gestational age and are usually what we refer to as "practice contractions". They are painless, tightening sensations in your abdomen. These types of contractions are short in duration and do not have a pattern. Rest and increasing water intake will resolve Braxton Hicks contractions.

24-35 weeks' Gestation - see Preterm Labor Contractions

36-41 weeks' Gestation - see True labor vs False labor

At any gestation - active vaginal bleeding or leakage of amniotic fluid, please go to Labor and Delivery for evaluation.

Cough

For relief from cough, you can try regular strength Robitussin®, Chloraseptic® spray, or any throat lozenges.

Cramping

Any urinary symptoms-burning, pain with urination, frequency with little output? If so refer to provider for recommendations.

Women commonly have abdominal cramping throughout pregnancy. It is most often related to the stretching and growing of the uterus and ligaments supporting the uterus, the round ligaments. Sometimes the pain can be sharp, stabbing pains in lower abdomen, pelvis or vagina. Usually, these cramps will resolve with increase water intake (dehydration is the most common cause of cramping or Braxton Hicks), modifying activity-no twisting or turning of upper body without bottom half moving with it, change positions slowly, splint abdomen with a pillow if coughing or sneezing, pulling knees in with pillows between knees when lying down. Think of your belly as one big pulled muscle and treat with warm soaks in the bathtub, good body mechanics, no strenuous activities, and wear a maternity belt for support.

Cues

Babies do not 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 frequently feeding increases mom's milk supply. More milk means that baby will be happier, healthier, and mom will be more confident.



Dental Procedures

Bleeding gums during pregnancy is normal. It is ok to have routine dental cleanings or checkups during pregnancy.

How pregnancy affects oral health

During pregnancy, hormone changes can cause swollen, bleeding, and irritated gums (gingivitis). Your gums may be very sore, brushing and flossing may cause discomfort.

Keeping a healthy mouth

- Brush twice daily with fluoride toothpaste. Floss at least once a day.
- If you have morning sickness, rinse your mouth with a teaspoon of baking soda mixed with water after vomiting to neutralize the acid. Do not brush your teeth right after vomiting. The extra acidity in the saliva from vomiting can remove tooth enamel.
- See your dentist for cleanings and checkups more often if needed. This is especially true in your second and third trimesters.
- Ask your dentist if you should use a special mouth rinse to help prevent gingivitis.
- Tell your dentist about of any changes in your mouth, such as soreness or bleeding.



Safety concerns

Make sure to tell your dentist that you're pregnant. He or she can help you stay safe. If you need to have dental X-rays during pregnancy, he or she will make sure you are fully protected. You will wear a lead apron over your belly during the X-ray process. The apron helps block radiation from the X-rays.

If you need to take medicines like antibiotics, tetracyclines need to be avoided. Tylenol or Tylenol products are safe pain medicines if indicated.

Diarrhea

Your gastrointestinal tract may be more sensitive during pregnancy. That sensitivity can cause diarrhea after eating certain foods, avoid fried, greasy, spicy foods and symptoms should improve.

Women can get gastrointestinal viruses during pregnancy as well. Diarrhea is the way your body cleanses a virus. Your goal should be to stay hydrated; water, electrolyte replacement drinks such as Powerade/Gatorade and Pedialyte are great products to hydrate with during a virus. If no vomiting, try bland foods-bananas, crackers, rice, apple sauce, toast and usually after 24-48 hours the diarrhea will resolve.

If diarrhea persists for more than 48 hours, try Imodium or Kaopectate. If no improvement after medication is take, please refer to a provider.

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

Feeling dizzy or faint is very common during pregnancy and with standing for long periods of time. It is most common during the first trimester, but it can happen anytime during pregnancy. Dizziness and fainting (syncope) are often caused by a drop in blood pressure. This is from the hormones released during pregnancy that relax the body's blood vessels. Too little blood is then pumped up to the brain. When this happens, you lose consciousness (faint). Fainting is not dangerous to you or your baby unless you fall and hurt yourself. If you must stand for long periods, compression stockings can help keep your blood moving.

Home care

To help prevent dizziness and fainting:

- When you get up from sitting or lying down, do so slowly. Clench and release your leg muscles before and during standing.
- Avoid standing for too long. If you must stand for prolonged periods of time, wear compression stockings. These are special stockings that help keep blood flowing toward the heart. Most medical supply stores sell these stockings.
- Avoid long breaks between meals. Keep snacks handy in case you get hungry.
 Sometimes dizziness can be from a low blood sugar.
- Avoid hot showers or baths. Use warm water. Be careful to stand up from a bath slowly.
- After the first trimester, avoid lying on your back.

 Try to eat every few hours. Instead of eating 3 larger meals a day, try eating 6 smaller meals. Snack on healthy foods that contain some protein like nuts and peanut butter.

 If you have been told you are anemic, eating iron-rich foods may be helpful.

If you feel dizzy:

- Sit or lie down. If you sit, put your head between your knees. If you lie down, try to get your feet higher than your head.
- Take deep breaths. Breathe out slowly.
- Move toward fresh or circulating air.
- Loosen tight clothing.
- Do not eat or drink anything while you feel dizzy.





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

Regular exercise can help you adapt to the changes your body is going through during pregnancy. Exercising may help you relax, and it gets you ready for labor and delivery. If you experience excessive contractions, bleeding, loss of fluid or decreased fetal movement, call the office immediately

Get started

Even if you didn't exercise before pregnancy, it is not too late to start. Choose an activity that you like and that fits your lifestyle. Begin slowly and build up a little at a time. Be sure to check with your healthcare provider before starting any exercise program. The following tips may help you get started:

- Choose a time and place to exercise each day.
- Wear loose-fitting clothes and comfortable athletic shoes.
- Stretch before and after you exercise. (Be sure to stretch slowly and to hold stretches for 30 to 40 seconds.)

Be active

Try to exercise for 30 minutes or more most days of the week:

- Overall conditioning, like swimming (no diving), bicycling, or walking, is especially beneficial.
- Aerobics and exercises that increase your pulse rate help condition your body and strengthen your heart. Ask about special prenatal aerobics' classes for pregnancy.
 You do not want to have your heart rate exceed 140 beats per minute.

Exercise safely

These tips will help you have a safe, healthy workout:

- Stay cool. Stop exercising if you feel overheated.
- Slow down if you're out of breath. If you can't talk during exercise, lower the intensity of the workout.
- Monitor the intensity of your workout. Only do moderate-intensity (not strenuous)
 exercise.
- Stay off your back. Lying on your back can decrease blood flow to your baby.
- Drink water before, during and after your workout.
- Eat 300 extra calories a day. A light snack before and after you exercise will help keep your energy up.

- Avoid activities requiring balancing skills later in pregnancy.
- Avoid exercises that will cause trauma to your abdomen, such as horseback riding, downhill skiing, wrestling.

Do Kegel exercises

Kegel exercises strengthen the pelvic floor muscles used in childbirth. These muscles are the same ones used to stop the flow of urine. Do Kegel exercises daily:

- Squeeze your pelvic floor muscles for a count of 3.
- Relax, then squeeze again.
- Repeat 10-15 times in a row at least 3 times a day.
- You can do Kegel exercises anytime and anywhere.

Keep walking

No matter what other exercise you do, try to walk whenever you can:

- If you're working all day, take a lunchtime walk in the park with a friend.
- When you shop, park away from the store entrance and walk the extra distance.

Take the stairs instead of the elevator.



Frequent Urination

Hormonal changes in the early stages of pregnancy increase the frequency of urination. As the pregnancy progresses, pressure from the uterus and the baby decreases the capacity of the bladder which leads to more frequent trips to the restroom. And because of this increase in pressure on the bladder, it is not uncommon to lose urine unexpectedly.

If fever, burning with urination, frequency with little to no urine output, refer to provider for further recommendations.



Gas and Bloating

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

- Recognize foods that give you gas and avoid eating them.
- Eat small, frequent meals instead of big, heavy meals.
- Avoid fried, greasy, high fat content food items.
- Treat constipation (see constipation recommendations).

Medications safe in pregnancy:

- TUMS
- Gas X
- Maalox Anti Gas
- Mylanta Anti Gas



Hair Loss/Treatments

Often, the hormonal changes during pregnancy cause your hair to break, shed or thin. This may also continue or become worse during the postpartum period. Continue taking prenatal vitamins to help minimize loss or changes.

It is ok to use hair dye, perms or relaxers in your hair after the first trimester, after 12 weeks gestation. Make sure you are in an area with good ventilation and air flow when applying these products.

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 provider.

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

Non-medicinal treatments-

- Massage
- Chiropractic adjustments
- Alternating cold and warm compresses
- Resting in a quiet/dark room
- Using a humidifier

Medicines safe in pregnancy:

- Tylenol 650 mg every 4 hours as needed
- Benadryl 2 tablets every 4 hours as needed
- Drink a caffeinated beverage, make sure you are well hydrated

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 heart-burn. Here are some ways to ease the pain:

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

If your heartburn is not relieved with these interventions, contact your provider

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 provider immediately.

Hemorrhoids

Many women suffer from hemorrhoids during pregnancy related to the hormone changes that occur and affect the blood vessels. In addition, constipation is a common problem during pregnancy which will lead to hemorrhoids if not treated. (See constipation as well)

Ways to avoid hemorrhoids include:

- Eat foods that are high in fiber, exercise and drink enough fluids (8-10 glasses of water per day) to avoid constipation.
- Sleep and nap on your side. This limits pressure on the veins of your rectum.
- Try not to stand or sit for long periods.

If you get hemorrhoids - Anusol HC and Preparation H cream will help swelling and pain as well as using Tucks pads for added comfort.



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 paind baby is getting milk.

Leg Cramps

Muscle spasms in the calf, especially at night, are common during pregnancy. You can try massaging the calves, stretching or applying a warm heating pad. Compression knee socks may help with circulations to lower extremities. Taking a magnesium supplement, 400 mg, at night may help ease cramping. Make sure you maintain hydration as well, increase water intake. If any redness or warmth noted in your lower extremity, please schedule an appointment for assessment.



Mastitis

Infection may happen after a duct becomes clogged, causing milk to back up in the breast. Mastitis may also occur if bacteria enter the breast through small cracks in the nipple. Less often, mastitis occurs in women who aren't breastfeeding. If you have mastitis that is not due to breastfeeding, please schedule patient an appointment with a provider.

Mastitis may cause flu-like symptoms such as fever, aches, and fatigue. The affected breast may feel painful, warm, tender, firm, or swollen. The skin over the breast may be red (often in a wedge-shaped pattern). You may feel a burning a sensation when breastfeeding. In most cases, mastitis can be treated with antibiotics.

When you are breastfeeding

It's very important to keep the milk flowing from the infected breast. Continue breastfeeding from both breasts as usual. This will not hurt the baby. If you are not sure if your baby is latching well or draining your breasts effectively, or if breastfeeding is too painful, use a breast pump to drain your breasts frequently. This pumped milk is safe to give to your baby if you wish. Note: It is important to continue to drain the breast when you have mastitis, even if you intend to wean. The bacteria can grow in the milk that is left in your breast. This can make your infection worse.

General care

- Take any medicines you are prescribed as directed. If you are taking antibiotics, be sure to complete all the medicine even if you start to feel better. Do not use breast creams.
- Tylenol or Ibuprofen, over the counter, can be taken to help ease the body aches and fever. Please follow the directions on the bottle.
- Rest as often as needed. Also be sure to drink plenty of fluids.
- To help relieve pain and swelling, heat or ice may be used.

Heat: Place a warm compress on the breast. Use a towel soaked in hot water, a heating pad, or a hot water bottle.

Cold: Place a cold compress on the breast. Use an ice pack or bag of ice wrapped in a thin towel. Never place a cold source directly on the skin.

Contact Ochsner's Lactation Department (225-755-4448) if you are concerned that your baby might not be latching effectively to your breast.

Miscarriage

Unfortunately, miscarriage is the unhappy side of pregnancy, and it is common occurring 15% of clinically recognized pregnancies. 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 provider. 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 provider.
- Cramping can be a sign of growth. However, if you have cramping associated with bleeding, contact your provider.

Mood swings

Up to 20% of women suffer from mood disorders during pregnancy, depression and anxiety. You may be happy one minute and sad the next. Mood swings are a normal part of pregnancy and caused by hormones.

It is important to have open communication with your partner and family members. Magnesium, evening primrose oil, DHA and omega-3 supplements may help ease some of these symptoms. However, if you are extremely sad, cry a lot, cannot sleep, are not eating or if feel like hurting yourself or someone else, call your provider immediately.



Nausea and Vomiting

During the early stages of pregnancy, nausea and vomiting is common. They will usually begin to ease and stop once you enter the second trimester, 12-14 weeks gestation.

To help combat nausea:

- Eat crackers or dry toast before getting out of bed. Avoid sudden movements, get out of bed slowly.
- Eat small amounts often. This helps prevent the stomach from being empty, which can make nausea worse.
- Choose dry foods such as crackers and alternate with sipping cold, clear drinks.
 Avoid greasy, spicy foods.
- Vitamin B6 25 mg twice a day (can increase to as often as four times a day) with 1/2 Unisom tablet at night.
- Take ginger in any form: candy, ginger ale, ginger snaps, ginger tablets, ginger teas to help ease nausea.
- Emetrol or non-drowsy Dramamine are over the counter medications available
- Use Sea Bands.

If your vomiting persists for more than 24 hours, notify your provider for further advice.

Nosebleeds

Because of the increased dilation of the blood vessels during pregnancy, nosebleeds can occur. Saline spray or gels can be used to keep mucus membranes moist. Humidifiers during colder months and at bedtime may also help minimize nose bleeds. However, if the bleeding persists, contact your provider.



Pain

Labor is hard work, but it is a pain with a purpose. Discussed comfort measures available to assist you with the labor pain. Ochsner provides many options to our laboring mothers and offer childbirth classes to prepare you and your partner for labor. The midwives and labor and delivery nurses are especially skilled in supporting women as they cope with labor.

In addition, we offer.

- Movement and position changes during labor.
- Exercise and peanut balls for comfort and to facilitate labor progression.
- Hydrotherapy and water births.
- Nitrous self-administration.
- Epidural anesthesia.

Preeclampsia

Preeclampsia is a disorder during pregnancy in which your blood pressure goes up above limits 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 provider 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 had to drink for the day?

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 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 heartbeat and make sure your baby is growing appropriately. You will have different laboratory tests performed to assess your blood type, check for anemia and testing for different infections. You will need to see your provider every 4 weeks until you are 28 weeks, then every 2 weeks until you are 35 weeks, then weekly until you deliver.

Preterm Labor

Preterm labor occurs when regular, painful uterine contractions begin to open your cervix before 37 weeks of pregnancy. The good news is that providers can do a lot to delay a preterm birth if preterm labor is identified. The longer your baby gets to grow inside you, the less likely he or she is to have problems after birth.

Here are some 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, midwives and doctors provide all the 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 have better quality sleep 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 reduce round ligament pain with the following:

- Use a warm (not hot) heating pad.
- Take a warm bath.
- Take regular strength Tylenol.
- Wear a maternity belt.
- Stay well hydrated by drinking water.
- Avoid twisting or turning at the waistline.

S

Salivation and Spitting

Some women experience increased salivation during pregnancy. This condition is known as ptyalism.

Here are some ways to help:

- Sucking on hard candy-preferably sugar free to help prevent cavities.
- Chewing sugar free gum.
- Taking small, frequent sips of water.

Ptyalism may stop occurring by the second trimester, but some women experience this throughout their pregnancy.

Sexual Intercourse

Many women experience an increase in sexual desire during the first and second trimesters of pregnancy. Unless your provider has told you abstain from sex, you can enjoy this time with your partner. Some women, especially those suffering from morning sickness, may have a decrease in sexual desire and that is normal as well. Communicating these feelings with your partner is important to your relationship. Some women experience spotting and or cramping for a day or two following sexual intercourse. This is related to the small blood vessels on the cervix bleeding

Shortness of Breath

Toward the end of pregnancy, many women experience shortness of breath. The uterus is enlarging, and the diaphragm is 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 provider 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! If 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 be 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 have the birth experience that they choose and breastfeed successfully. Our team of doctors, midwives, 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 (large blood vessel that runs from the heart to lower extremities) diminishing the return of blood flow. This often leads to swelling in your ankles and feet. Swelling can also occur in your hands leading to carpel tunnel syndrome, resulting in pain and numbness in wrists and hands.

Suggestions to help minimize swelling:

- Avoid salty food.
- Elevate your feet higher than your heart, avoid prolonged sitting or standing.
- Wear good, supportive, closed toe shoes such as tennis shoes.
- Wear compression knee socks.
- Wear wrist braces to help with hand/wrist pain and swelling, hug an extra pillow or stuffed animal to keep fingers open.

If you experience swelling in your face, headaches, blurry vision, or swelling in one calf only, contact your provider immediately.



Tiredness

Fatigue during pregnancy can be normal. It is most pronounced in early pregnancy; however, some women suffer throughout, or it returns near the end. While most fatigue is normal, it can also be a sign of anemia. Ask your provider for more information.

Things to do to help decrease fatigue

- Take catnaps when you can.
- Get regular exercise.
- Accept help from others.
- Practice good sleep habits, like going to bed and getting up at the same time each day.
- Use your bed only for sleep and sex.

Getting a good night's sleep

- Take a warm shower before bed.
- Sleep on a firm mattress.
- Lie on your side with 1 leg crossed over the other.
- Use pillows to support arms, legs, and belly.
- Take Unisom and Tylenol PM which can be taken safely during pregnancy.

Travel

Travel during pregnancy is safe. However, you should always check with your provider before travelling. 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 is important to tell the difference between true labor and false labor.

If term and greater than 5 minutes apart-this may be false or early labor.

False labor contractions can be strong, frequent, and painful, but there is no regular pattern. The intensity can vary from strong to mild to strong again. False labor contractions are most often felt in the front. While true labor contractions don't stop no matter what you are doing, false labor contractions may stop on their own or when you rest or move around. When you are having false labor, the cervix does not dilate.

• Drink plenty of water and take warm baths. Do what you can ahead of time to prepare for giving birth, so you'll have less to worry about later.

 Keep a record of your contractions. Write down what time each one starts and how long it lasts. A stopwatch is helpful. Look for the pattern of regularlity.

 Don't be embarrassed about going to the hospital with a "false alarm." Think of it as good practice for the real thing.

During active labor, your contractions will be stronger and more rhythmic than with early labor. Your cervix will begin to dilate or open. A bloody show or pink discharge may occur.

Uterine contractions every 3-5 minutes apart, lasting 45-60 seconds, painful all feeling the same, for 1-2 hours no matter if at rest or walking, please refer to Labor and Delivery.

At any gestation -active vaginal bleeding or leakage of amniotic fluid- please refer to Labor and Delivery.





Urinary Tract Infections

Urinary tract infections are common in pregnancy and often without symptoms. Unfortunately, an untreated urinary tract infection can lead to 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 the 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 provider.



Vaginal Bleeding and Discharge

Spotting during the first trimester of pregnancy can be, although worrisome, normal. Implantation occurs between weeks 5-7 causing mild cramping and bleeding to occur. This is when the egg is boring into the wall of the uterus. Any period flow bleeding needs to be assessed either in the office or the ED.

Other possible causes of spotting are sex and vaginal exams. Again, it is safe to continue having sexual intercourse during your pregnancy. Some women experience spotting and or cramping for a day or two following sexual intercourse. This is related to the small blood vessels on the cervix bleeding. It is not uncommon for this to occur with vaginal exams in the office as well.

Vaginal discharge will increase during pregnancy. The hormones of pregnancy cause your body to produce a thin, white discharge known as leukorrhea. This discharge does not have a foul odor, itch or burn.

Vaginal itching with a thick white discharge is most likely due to a yeast infection. Over the counter Monistat cream is safe in pregnancy. Watching your sugar intake, increasing your yogurt intake and taking probiotics can help decrease your chances of getting a yeast infection.

Any vaginal discharge with a foul odor or green or yellow in color needs further assessment in the office.

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 Academics, May 2009.

Pre-Pregnancy BMI Category

Underweight (less than 18.5) Normal weight (18.5 to 24.9) Overweight (25 to 29.9) Obese (more than 30)

Total Weight Gain Range

28 - 40 lbs 25 - 35 lbs 15 - 25 lbs 11 - 20 lbs



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