



MOORE CARE
FOR WOMEN

Patient Packet

Prenatal visits

You can expect to see the doctor every 4 weeks during the first 2 trimesters of your pregnancy. Starting in the third trimester, you will have appointments every 2 weeks and when you reach full term (37 weeks), you will be seen weekly. If any complications arise in your pregnancy, you may be seen more frequently.

At each visit we will check your weight, blood pressure, urine, the size of your uterus and your baby's heart rate. We will also discuss what to expect at that time in your pregnancy and answer any questions you may have.

Routine tests in pregnancy

There are several tests performed on all pregnant women at the beginning of pregnancy.

- Pap smear (if you are 21 or older)
- Screening for sexually transmitted diseases

- Blood type and antibody screen- your blood type can be A, B, AB or O. It will also be Rh positive or Rh negative

- Hematocrit and Hemoglobin – to check for anemia
- Rubella – to check for past infection or vaccination
- Hepatitis
- Syphilis
- HIV

Between 24 and 28 weeks, you will be tested for gestational diabetes. You will receive instructions for this test.

Between 35 and 37 weeks you will be tested for a bacteria called group beta strep (GBS).

Normal pregnancy symptoms

There are many things that you may experience as a normal part of pregnancy. These things are caused by the increased hormones during pregnancy and by the physical changes of carrying a baby.

Morning sickness:

This can occur any time of day and usually improves in your 3rd or 4th month. To improve morning sickness:

- Get plenty of rest
- Stay hydrated
- Eat small frequent meals
- Eat a few crackers before you get out of bed in the morning
- Ginger: ginger ale, ginger tea or ginger capsules (three 250mg capsules per day)
- B6 vitamins (over the counter, as directed)

If you have severe nausea and vomiting, speak with your doctor.

Back pain:

To help minimize back pain:

- Wear low-heeled (but not flat) shoes with good arch support
- Ask for help when lifting heavy objects
- When standing for long periods, place one foot on a stool or box
- If your bed is soft, have someone place a board between your mattress and box spring
- When picking things up squat or bend your knees (do not bend from the waist)
- Sit in chairs with good back support or use a small pillow behind your back
- Sleep on your side with a pillow between your legs

Breast tenderness:

This is usually worse in the first trimester. Some women have a substantial increase in the size of their breasts. Also, occasionally women leak milk prior to delivery.

Pelvic pain:

Many women experience pelvic pressure or discomfort in pregnancy. Round ligament pain is also frequent and feels like a stretching or pulling sensation on your sides.

Swelling:

This is common and often normal in pregnancy. Swelling can occur in feet, legs, hands and labia. Support hose can help with leg swelling. If you have significant pain in your calf or if one leg is much more swollen than the other, call your physician.

Numbness in your hands:

Normal swelling in pregnancy can cause temporary carpal tunnel syndrome. This will cause numbness in your first three fingers of either or both hands. It is usually worse at night or early in the morning. The

best treatment is wearing soft wrist splints while you sleep. These can be purchased at any pharmacy. The numbness usually resolves after delivery.

Nasal congestion:

You can try breathing strips at night if this is bothersome.

Nose bleeds:

Place Vaseline in each nostril at night and use a humidifier.

Bleeding gums:

Use a soft toothbrush and brush teeth gently.

Heartburn:

Many changes in pregnancy contribute to heartburn. Avoid lying down within 2 hours of eating. Avoid spicy foods, caffeine, carbonated beverages and acidic foods (citrus, tomatoes). You may take over the counter medications (see list) or discuss a prescription with your doctor.

Headaches:

Women who are prone to headaches often have headaches in the first trimester. You should drink plenty of water and consult the list provided for over the counter medications. If you have new or persistent headaches, especially later in your pregnancy, or if you have vision changes, please call your doctor.

Vaginal discharge:

Discharge is increased as a normal part of pregnancy. Call your physician if you have itching or your discharge has a foul odor.

Constipation:

This is due to hormones in pregnancy, iron in your prenatal vitamin, and your baby occupying space in your abdomen. Increase your water intake and eat a diet high in fiber to improve constipation. Check your medication list for over the counter options.

Hemorrhoids:

Take measures to avoid constipation and straining (see above). Cold compresses, Tucks pads and Preparation H may be used.

Bleeding in pregnancy

Bleeding can occur any time in pregnancy and has many causes. Sometimes bleeding is concerning and sometimes it is a normal side effect of pregnancy. Light bleeding or spotting can be common in the first

trimester and should resolve in 1-2 days. Spotting from the cervix is common, especially after intercourse. Signs of miscarriage include heavy bleeding, intense cramping or passage of tissue. If you experience these signs, you should call your doctor.

Bleeding later in pregnancy can be caused by a problem with your placenta which is usually detected by ultrasound. Labor can also cause some bleeding. If it is more than a month before your due date and you are having contractions, you should call your doctor. Also, if at any time you have heavy bleeding you should call your doctor.

Nutrition in pregnancy

You should avoid alcohol, cigarettes and illegal drugs in pregnancy because they are harmful to your growing baby. Take a prenatal vitamin daily. If you have difficulty swallowing your vitamin or it causes significant nausea, speak to your physician for alternatives.

It is important to maintain a healthy diet during your pregnancy. Increase your intake of fruits and vegetables and limit foods that are fatty, fried or high in sugar. If you would like additional help planning a balanced diet, please visit www.choosmyplate.gov

Things you should limit or avoid:

- Avoid raw meat or seafood including raw sushi (cooked sushi is safe)
- Avoid undercooked eggs
- Avoid unpasteurized "raw" milk or cheese made with unpasteurized milk
- Avoid eating shark, swordfish, king mackerel or tile fish. Limit Albacore Tuna to one small can per week
- Hot dogs and deli meat should be heated until steaming hot
- Limit caffeine to less than 200mg per day (12-ounce cup of coffee)

Weight gain

The recommended weight gain depends on your health and body mass index prior to pregnancy. If you were normal weight before pregnancy, you should gain between 25 and 35 pounds during your pregnancy. You should increase your calorie intake by approximately 300 calories per day. You should gain more weight if you were under weight prior to pregnancy. If you are overweight, you should gain less. Please discuss specifics with your physician.

It is important to maintain a normal weight during pregnancy. Being overweight increases your risk of several pregnancy problems. These problems include gestational diabetes, high blood pressure, preeclampsia, preterm birth and cesarean delivery. Babies born to overweight mothers are at increased risk of birth defects, macrosomia (very large baby), birth injury and childhood obesity.

Exercise

Exercise is very beneficial in pregnancy. Try to get at least 30 minutes of exercise per day. Regular exercise:

- Reduces backaches, constipation, bloating and swelling
- May help prevent or treat gestational diabetes
- Increase your energy, mood and posture
- Promotes muscle tone, strength and endurance
- Improves sleep

The hormones produced during pregnancy cause the ligaments that support your joints to become relaxed. This makes you more prone to injury. The extra weight in front of your body shifts your center of gravity making you more prone to fall.

Exercises that are safe include:

- Walking, swimming, cycling, aerobics, elliptical and running (if you were a runner prior to pregnancy)

Exercises to AVOID:

- Activities with a high risk of falling (gymnastics, skiing, horseback riding, etc)
- Contact sports (hockey, basketball, soccer, etc)
- Do NOT scuba dive in pregnancy

Make sure you are well hydrated and do not get overheated. Stop exercising if you have chest pain, shortness of breath, muscle weakness, contractions, calf pain or swelling or decreased fetal movement.

Travel

The best time to travel is during the middle of your pregnancy (14-28 weeks). It will become increasingly uncomfortable to travel the further you are in your pregnancy. Avoid travel after 36 weeks (the last month of pregnancy). The office can provide you with a copy of your prenatal record to take on your trip in case of emergency.

When traveling by car: limit car rides to 5 or 6 hours per day. Make frequent stops to walk and stretch your legs. This will help prevent blood clots. Wear your seat belt at all times in the car.

When traveling by air: check with your particular airline for restrictions or requirements for pregnant women. If possible, book an aisle seat so you can easily get up. Walk up and down the aisle every 1-2 hours if you have a long flight. Always wear your seat belt when seated.

Dental care

Good oral hygiene is important in pregnancy. If you visit the dentist during your pregnancy, let them know you are pregnant. X-rays should be performed with an abdominal shield to protect your baby.

Local anesthesia is safe however you should avoid inhaled medication if possible. The front desk at our office can provide you with a note for your dentist before your visit.

Questions and Concerns

If you have routine questions, it is helpful to write them down and bring them to your appointments. This ensures all your questions are answered and any concerns are discussed.

If you have a question that needs to be addressed in between appointments, please call the office (793-2229) Monday-Thursday from 8am-4:30pm and Friday from 8am-11:30am.

If you have an urgent question or concern, you can call the office number and the answering service will page the on-call doctor. Alternatively, you can call labor and delivery at the Healthplex hospital (515-3500) and speak with a nurse.

If you have an emergency, please go directly to the emergency room or dial 911.

Approved Over the Counter Medications for Pregnant Women

The following over-the-counter medications may be taken safely during pregnancy. Please remember that “non-drug” treatment should be attempted first, if no relief, you may use the following guidelines:

Cold or Sinus problems

- Tylenol products (1-2 every four hours)
- Sudafed
- Actifed
- Robitussin DM
- Benadryl
- Tylenol Cold and Sinus
- Claritin
- Claritin D
- Alavert
- Mucinex

Heartburn

- Riopan Plus (or any low sodium antacid)
- Maalox
- Tums (do not take with prenatal vitamin, the calcium prevents absorption of iron)
- Mylanta
- Pepcid Complete
- Zantac
- Prilosec OTC

Nausea

- Vitamin B6 (100mg three times a day)
- Emetrol
- Sea Bands
- Ginger tea
- Dramamine

Vomiting

- Bowel rest, then clear liquids. Consult your doctor for any other recommendations

Headaches

- Tylenol or Tylenol Extra Strength (1-2 every four hours)

Sore Throat

- Chloraseptic
- Cepacol lozenges
- Sucrets

Constipation

- Surfak stool softener
- Senakot
- Doxidan
- Metamucil
- Fibercon
- Milk of Magnesia (limited, only use if severe)
- Pericolace

Diarrhea

- Bowel rest, then clear liquids
- Immodium AD
- Fibercon

Hemorrhoids

- Tucks
- Anusol suppositories
- Preparation H
- NO HEAT, use room temperature sitz bath