your Guide to Pregnancy





Central Iowa
OB/GYN Specialists, PLC

515-267-8300 | www.centraliowaobgyn.com



Our offices are open **Monday through Thursday 8 am – 5 pm, and Friday 8 am – 12 pm** for office visits. 2501 Westown Parkway, Suite 1101, West Des Moines, IA 50266

How to Contact Our Office

You may call our main number at 515-267-8300, Monday through Thursday, 8 am - 5 pm, and Friday 8 am - 12 pm for emergency and non-emergency questions or concerns. A nurse can be reached for any questions or concerns. If you need to contact the office on weekends or after business hours, you may call the same number. Our answering service will give the on-call provider a message to return your call.

Billing for Prenatal Care

We understand that maternity benefits can be confusing. It is your responsibility to know your maternity benefits. Our staff is available during normal office hours to discuss any questions you may have.

Your First Visit

When you come to the office for your first visit, we ask that you bring your medical history forms and other completed registration materials. During this visit, you may have a physical exam and a pap test. Prenatal labs will also be drawn. All of the results will be reviewed with you at your next appointment.

After Your First Visit

Between now and 28 weeks, we would like you to schedule a visit every four weeks. Around 28-30 weeks, your visits will increase to every two weeks, then after 36 weeks your visits will be once a week until you deliver. We will request to see you more frequently if you are high risk. During each visit, you will have your weight, blood pressure, urine and baby's heartbeat checked. At approximately 24 weeks, the provider will start to measure the height of the uterus to assess baby's growth. Several additional tests are done at scheduled times throughout your pregnancy.

These include:

Gestational diabetes screening – this screening is performed between 24-28 weeks. You will be given a sugar drink and instructions for how/when to drink it. One hour after you finish the sugar drink, your blood will be drawn. You do not need to fast.

Vaginal culture for group B strep – this swab of your vaginal area is performed at your 36 week appointment. Group B strep is a normal bacteria that is naturally found in the vagina and is not harmful to women or a developing fetus. However, it can be harmful to your infant if exposed at the time of delivery. If you test positive for this bacteria, you will receive antibiotics during labor and delivery to decrease the risk to the baby.

Optional Testing

You will have the decision to test for certain genetic diseases and chromosomal abnormalities. If you are interested in any optional testing, please check with your insurance carrier to see if it is covered. Questions you may have regarding these optional tests can be discussed at your first appointment.

Genetic Disease Screening:

Genetic diseases can happen to anyone, but a small number of genetic diseases happen more often in specific ethnic and racial groups. Genetic carrier screening is targeted to the groups that have the highest risk for these conditions. Most of the time, there is nothing in your family's medical history. One way to identify risks is by considering where your ancestors lived before they came to the United States. Each condition is more common in people from certain parts of the world.

Southeast Asian - consider testing for hemoglobinopathies (including Thalassemia)

African (Black) - consider testing for hemoglobinopathies (including sickle cell)

European (Caucasian/White) - consider testing for cystic fibrosis

Eastern European Jewish (Ashkenazi Jewish) – consider testing for Tay-Sachs disease, Canavan disease, and familial dysautonomia.

Prenatal Screening Tests:

Prenatal screening tests gather information about the possibility of a chromosome abnormality in your developing baby. The screening provides an estimate of risk for Down's syndrome, trisomy 18, open neural tube defects, abdominal wall defects and Smith-Lemli-Opitz syndrome.

Non Invasive Prenatal Testing - This is a non invasive test done by drawing the mother's blood. These tests can determine, with a high degree of accuracy, whether your baby may have genetic disorders including Down syndrome, Trisomy 18, Trisomy 13, and Monosomy X. You may also screen for Cystic Fibrosis, Spinal Muscular Atrophy, and Fragile X Syndrome. This can be done as early as 9 weeks and done up until delivery. This type of testing identifies the baby's DNA. This type of testing is covered by your insurance if you are 35 years or older and high risk. If you are low would like to do this testing, many insurance companies are covering it, please ask the office staff if you have any questions.

Full Integrated Screen - This test uses an ultrasound to measure the nuchal translucency (a fold on the back of the neck) of the fetus between 11 to 13 weeks. It also uses two blood tests to measure fetal proteins naturally found in the mother's blood. The first blood test is done at the same time as the nuchal translucency measurement and the second blood test is done between 15 and 20 weeks. If you are at increased risk based on the results, you may be offered further ultrasounds or diagnostic testing.

Quad Screen - This test uses a single blood test to measure four fetal proteins naturally found in the mother's blood. The blood test is done between 15 and 20 weeks. If you are at an increased risk based on the results, you may be offered further ultrasounds or diagnostic testing.

Diagnostic Testing for Chromosomal Abnormalities:

Chorionic Villus Sampling (CVS) – This is a test performed between 11 and 13 weeks of pregnancy. Under ultrasound guidance, a small sample of the placenta is removed by inserting a small flexible tube through the cervix. The tissue from the placenta is then sent to the laboratory for chromosome analysis.

Amniocentesis – This test is typically performed between 15 and 20 weeks of pregnancy. Under ultrasound guidance, a thin needle is inserted into the abdomen and uterus. This allows a small amount of amniotic fluid to be removed. The amniotic fluid is then sent to the laboratory for chromosome analysis.

Ultrasounds

At some point during your first trimester you will have an ultrasound of your baby depending on the screening tests you have selected to do. Another ultrasound will be done between 20-22 weeks to evaluate the anatomy of the baby. Additional ultrasounds may be performed based on the medical need. Insurance will typically cover additional ultrasounds only if there is a medical need. The ultrasounds are performed here at the office.

The Rh Factor

We will test your blood type at your first prenatal visit. If your blood type is Rh negative, then you may be at risk for Rh disease. Rh disease is a pregnancy complication in which your immune system attacks the baby's blood and, if left unknown, can result in a life threatening situation for the baby. Fortunately, it can be prevented with a shot called Rhogam which is given routinely at 28 weeks. Rhogam is also given if there is vaginal bleeding at any time in the pregnancy or if there is any trauma. If you are Rh negative, contact our office immediately if you develop bleeding or have any trauma (even if you do not hit your belly).

Vaccinations

The Centers for Disease Control (CDC) recommends that pregnant women receive the Tdap (tetanus, diphtheria, pertussis) vaccine in each pregnancy. The optimal timing for Tdap administration is after 27 weeks of pregnancy. Receiving the vaccine in pregnancy gives your baby protection from whooping cough in the newborn period.

The CDC also recommends the influenza vaccine for all pregnant women (in any trimester) during influenza season.

It is recommended that other household contacts and childcare providers get the Tdap booster and get vaccinated with the flu shot (during flu season).

Prenatal Vitamins

We recommend a prenatal vitamin that contains folic acid and DHA prior to conception, throughout pregnancy and in the postpartum period. Please check with your provider before taking any other vitamins, herbs or over the counter supplements, as some may be unsafe during pregnancy.

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Nausea/Vomiting – feeling nauseous during the first three months of pregnancy is very common. For some women, it can last longer, while others may not experience it at all. Try to eat 5-6 smaller meals a day, that consist of a protein and carbohydrate, in order to keep your stomach full at all times. Try bland foods like plain crackers, toast, dry breakfast cereal as well as carbonated drinks like ginger ale or 7-Up. Ginger is a natural treatment for nausea. Peppermint can also be used. Some over-the-counter medications are also safe. If the symptoms become severe or you are unable to keep fluids down without vomiting for more than 12 hours, contact the office.

Discharge – an increase in vaginal discharge that is white and milky is common in pregnancy. If the discharge is watery or has a foul odor, call the office.

Spotting – light bleeding can be common, especially in the first 12 weeks of pregnancy. It may occur after intercourse, cervical exams, vaginal ultrasounds or strenuous activity or exercise. If the bleeding is heavy or is accompanied by pain, contact us immediately.

Constipation – is a common complaint which can be related to hormone changes, low fluid intake, increased iron or lack of fiber in your diet. Try to include whole grains, fresh fruit, vegetables and plenty of water. There are also safe over-the-counter medications. If you develop hemorrhoids, try sitz baths three to four times per day for 10-15 minutes each time. If the pain persists, contact the office.

Cramping – experiencing some cramps and contractions are normal. When they occur, empty your bladder, drink 1-2 glasses of water and try to rest. If you are less than 36 weeks pregnant and having more than six contractions in an hour after trying these measures, contact the office.

Leg cramps – cramping in your legs or feet can also be common. Eating bananas, drinking more lowfat/ nonfat milk and consuming more calcium-rich foods like dark green vegetables, nuts, grains and beans may help. To relieve the cramp, try to stretch your leg with your foot flexed toward your body. A warm, moist towel or heat pad wrapped on the muscle may also help.

Dizziness – you may feel lightheaded or dizzy at any time during your pregnancy. Try eating a protein/carbohydrate snack or lying down on your left side and drink 1-2 glasses of water. If symptoms persist, contact the office.

Swelling – because of the increased production of blood and body fluids, normal swelling, also called edema, can be experienced in the hands, face, legs, ankles and feet. Elevate your feet, wear comfortable shoes, drink plenty of fluids and limit sodium. Supportive stockings can also help. If the swelling comes on rapidly, or is accompanied by headache or visual changes, contact us immediately.

Heartburn – you may experience heartburn throughout the pregnancy, especially during the latter part of your pregnancy when your baby is larger. Try to eat 5-6 smaller meals a day and avoid laying down immediately after eating. Some over-the-counter medications are also safe for use.

Aches and pains – As your baby grows, backaches are common. You may also feel stretching and pulling pains in the abdomen or pelvic area. These are due to pressure from your baby's head, weight increase and the normal loosening of joints. Practice good posture and try to rest with your feet elevated. You may also treat with heat and Tylenol®.

During pregnancy, women can be more susceptible to ailments like cold and flu and other conditions. Only certain medications are safe during pregnancy. The following are considered safe. Follow the labels for dosage and directions.

Contact the office with questions.

| Tooth Pain Orajel | Yeast Infection Gyne-lotrimin, Monistat-3 Terazol-3 | Prenatal Vitamins Any over the counter prenatal vitamins that contain DHA. | |
|---|---|---|--|
| Rash Benadryl 1% Hydrocortisone Cream Aveeno | Sleep Aids Benadryl Chamomile Tea Unisom, Tylenol PM Warm milk-add vanilla/sugar for flavor | Throat Cepacol Cepastat Salt Water Gargle w/ warm water Throat Lozenges | |
| Nasal Spray Saline Nasal Spray | Nausea Vitamin B6 25mg 3 times daily Unisom 1/4 or 1/2 tablet at bedtime Vitamin B6 and Unisom at bedtime Dramamine, Emetrol Ginger Root 250mg 4 times daily High complex carbs @ bedtime Sea Bands - Acupressure | Pain Tylenol, Tylenol 3**, Vicodin**, Norco** **Narcotic medications should only be used when prescribed for a legitimate medical problem by a doctor for a short period of time. | |
| Hemorrhoids Anusol/Anusol H.C. (RX: Analapram 2.5%) Hydrocortisone OTC Preparation H, Tucks Vaseline lotion applied to tissue | Herpes Acyclovir Famvir Valtrex | Leg Cramps Benadryl | |
| Gas Gas-X Mylicon Phazyme Simethicone | Headaches Cold Compress Tylenol (regular or extra strength) Acetaminophen Avoid: Ibuprofen Aleve Aspirin | Heartburn (Avoid lying down for at least 1 hour after meals) Aciphex, Maalox, Mylanta, Pepcid, Milk of Magnesia Pepcid Complete Prevacid Zantac Tums (limit 4/day) Pepto Bismol | |
| Constipation Colace, Miralax, Senakot Dulcolax Suppository Fibercon, Metamucil | Cough Actifed, Sudafed Cough Drops Phenergan w/Codeine if prescribed Robitussin (plain & DM) | Crab/Lice RID Nix Avoid: Kwell | |
| Acne Benzoyl Peroxide Salicylic Acid Clindamycin (topical) Erythromycin (topical) Avoid: Accutane Retin-A Tetracycline Minocycline | Antibiotics Ceclor Cephalosporins E-mycins Keflex Macrobid/Macrodantin Penicillin Zithromax Avoid: Cipro Levaquin Tetracycline Doxycycline Minocycline | Colds/Allergies Benadryl, Claritin, Zyrtec Chlor-Trimeton, Dimetapp Mucinex (guaifenasin) Sudafed**/Sudafed-12 Hour** Sudafed PE Pseudoephedrine** Tylenol Cold & Sinus** **AVOID if problems With Blood Pressure Avoid: NyQuil | |

Recommendation for weight gain

It is not necessary to "eat for two" during programmy It is true that you need not a solaring for two during programmy.

It is not necessary to "eat for two" during pregnancy. It is true that you need extra calories from nutrient rich foods to help your baby grow. You generally need to consume only 100-300 more calories per day than you did before you became pregnant to meet the needs of your growing baby.

Excessive weight gain in pregnancy increases the risk of several pregnancy complications, including gestational diabetes, high blood pressure, preeclampsia (toxemia), cesarean delivery, and postpartum weight retention. Similarly, babies of women who are overweight or obese are at increased risk of prematurity, stillbirth, birth defects, macrosomia (large infant) with possible birth injury, and childhood obesity.

Recommendation for weight gain during a single pregnancy are as follows:

Underweight women (BMI less than 20): 28-40 lbs Normal weight women (BMI 20-24.9): 25-35 lbs Overweight women (BMI 25-29.9): 15-25 lbs Obese women (BMI >30): less than 15 lbs

Healthy Diet

The first step toward healthy eating is to look at your daily diet. Having healthy snacks that you eat during the day is a good way to get the nutrients and extra calories that you need. Pregnant women need to eat an additional 100-300 calories per day, which is equivalent to a small snack such as half of a peanut butter and jelly sandwich and a glass of low fat milk.



Key nutrients during pregnancy

| Nutrient | Reason for Importance | Sources | |
|-----------------------|--|--|--|
| Calcium (1000 mg) | Helps build strong bones and teeth | Milk, Cheese, Yogurt, Sardines | |
| Iron (27 mg) | Helps create the red blood cells that deliver oxygen to the baby and also prevents fatigue Lean Red Meat, Dried Beans and Peas, Iron-Fortified Cereals | | |
| Vitamin A (770 mcg) | Forms healthy skin, helps eyesight, helps with bone growth Carrots, Dark Leafy Greens, Sweet Potatoes | | |
| Vitamin C (85 mg) | Promotes healthy gums, teeth, and bones. Helps your body absorb iron. Oranges, Melon and Strawberries | | |
| Vitamin B6 | Helps form red blood cells, helps body use protein, fat and carbohydrates Beef, Liver, Pork, Ham, Whole Grain Cereals, Bananas | | |
| Vitamin B12 (2.6 mcg) | Maintains nervous system, needed to form red blood cells Liver, Meat, Fish, Poultry, Milk (only found in animal foods, vegetarian should take a supplement) | | |
| Folate (600 mcg) | Needed to produce blood and protein, helps some enzymes | Green Leafy Vegetables, Liver, Orange Juice, Legumes and Nuts | |

Foods to Avoid in Pregnancy

Caffeine – Limit caffeine intake to the equivalent of 1 cup of coffee a day or less (200 mg or less daily). Excess caffeine may be associated with miscarriage, premature birth, low birth weight, and withdrawal symptoms in infants.

Fish with mercury - Avoid fish with high levels of mercury including shark, swordfish, king mackerel and tilefish. For other fish, you may consume up to two servings per week.

Raw shellfish - Avoid raw shellfish, including clams, oysters and mussels due to the chance of bacterial contamination. Cooked shrimp is safe.

Raw and undercooked seafood, eggs, and meat – Avoid uncooked seafood and undercooked beef or poultry due to the risk of bacterial contamination, toxoplasmosis and salmonella. Do not eat sushi made with raw fish (cooked sushi is safe). Food such as beef, pork, or poultry should be cooked to a safe internal temperature. Raw eggs or any foods containing raw eggs can be contaminated. This includes homemade Caesar dressings and mayonnaise.

Unpasteurized milk and foods made with unpasteurized milk (imported soft cheeses) - These may contain listeria. Soft cheeses made with pasteurized milk are safe.

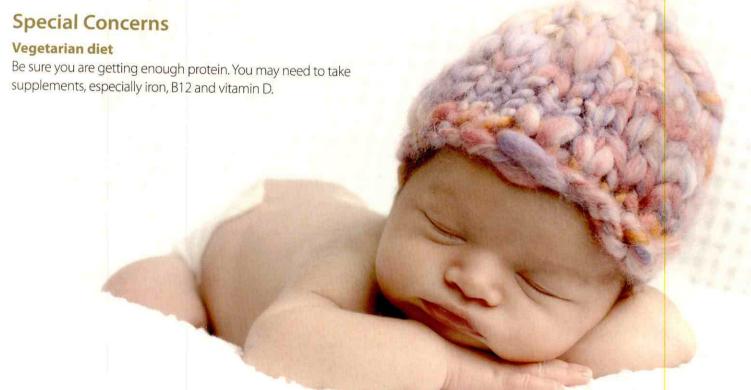
Lunch meats and hot dogs - Avoid lunch meats and hot dogs, unless they are heated until steaming hot just before serving.

Pate and meat spreads - Refrigerated pate or meat spreads should be avoided due to risks of listeria contamination.

Smoked seafood - Refrigerated, smoked seafood should be avoided due to risks of listeria contamination.

Listeriosis is a type of food-borne illness caused by bacteria. Listeriosis can cause mild, flu-like symptoms such as fever, muscle aches, and diarrhea. Listeriosis can lead to miscarriage, stillbirth and premature delivery.

Food poisoning in a pregnant woman can cause serious problems for both mom and baby. Vomiting and diarrhea can cause your body to become dehydrated and can disrupt your body's chemical balance. To prevent food poisoning, you should rinse all raw produce under running tap water before eating, cutting or cooking. Wash your hands, knives, countertops, and cutting boards after handling and preparing uncooked foods.



Common Questions

When will I feel my baby move?

Sometime between 16-25 weeks of pregnancy, mothers will begin to feel movement. Initially, movements will be infrequent and may feel like butterfly flutters. As your baby grows, you will feel movement more often. It is recommended to start counting fetal movements beginning at 28 weeks once daily until you get 10 movements within 2 hours. A good time to do this is 20-30 minutes after breakfast and dinner. If you are concerned about movement, eat or drink something with sugar or caffeine, lie on your side and press your hands on your belly. If you have concerns about feeling baby movements or notice a decrease in movements, contact the office.

Why am I so tired? What's the best sleep position?

It's normal to feel more tired. You may also notice you need more sleep than usual. Try to get at least 8-10 hours per night. Listen to your body.

Try to sleep on your side to allow for maximum blood flow to baby. Lying on your back can cause your blood pressure to drop. You may also find it helpful to put a pillow behind your back and between your knees to improve comfort. As your pregnancy progresses, use more pillows and frequent position changes to stay comfortable.

Can I use a Jacuzzi?

Using a Jacuzzi or whirlpool bath is not recommended.

Can I travel?

Traveling is safe during pregnancy for uncomplicated pregnancies. After 32 weeks, we recommend staying close to home. When you do travel, be sure to take breaks to stand up/walk around at least every two hours. If traveling by vehicle, wear a seat belt, positioning it under your abdomen as your baby grows. If you are involved in a car accident, please call the office immediately. You may need to be monitored.

Can I care for my pets?

If you have cats, please let us know. Avoid changing the litter box or use gloves to change it. Toxoplasmosis is a rare infection that you can get from cat feces.

What do I need to know about dental care?

Your teeth and gums may experience sensitivity throughout the pregnancy. Inform the dentist of your pregnancy and shield your abdomen if x-rays are necessary. Contact our office with any questions about dental care.

Can I go to the salon for treatment?

Hair coloring and nail care should always be done in large, well-ventilated areas.

Can I exercise?

30 minutes of exercise is recommended daily in uncomplicated pregnancies. This could include walking, jogging, biking, aerobic class, yoga, swimming, etc. Weight training is acceptable. Listen to your body during exercise and drink plenty of fluids. After 20 weeks, avoid lying flat on your back and avoid activities with a high risk of falling or trauma to your belly (i.e. snow skiing, kickboxing, horseback riding).

Can I have sex?

You can have sex unless you are having complications or sex becomes too uncomfortable. There are times when exercise and sex should be avoided. This includes vaginal bleeding, leaking amniotic fluid, preterm labor, chest pain, regular uterine contractions, decreased fetal movement, growth restricted baby, headache, dizziness or general weakness.

Alcohol and Smoking

There is no safe amount of alcohol so we recommend avoiding all alcohol during pregnancy. Drinking alcohol can cause birth defects, mental retardation and abnormal brain development.

If you smoke, so does your baby. This is a very important fact of pregnancy. Here are some known complications from smoking during pregnancy:

- Low birth weight baby: Low birth weight can be caused by prematurity (birth less than 37 weeks), poor growth, or
 a combination of both. Prematurity is increased in pregnant smokers and is the number one cause of neonatal death
 and chronic illness in babies. Problems such as cerebral palsy, life-long lung, kidney, or other organ problems, mental
 retardation and learning disabilities are much more common in premature and low birth weight babies.
- Placenta previa: Low-lying placenta that covers part or all of the opening to the uterus. Placenta previa blocks the exit of the baby from the uterus causing the baby and mother to bleed.
- Placental abruption: The placenta tears away from the uterus causing the mother and baby to bleed.
- Preterm premature rupture of membranes: The water breaks before 37 weeks of pregnancy, which is associated with an increase of preterm and low birth weight births.
- Stillbirth: The fetus has died in the uterus.



If you experience any of the following, please contact us immediately as these are considered emergency:

- Continuous leaking of fluid (water broken)
- · Abdominal trauma or car accident
- Heavy bleeding
- Fever greater than 101°
- Decreased fetal movement

- Urinary tract infection
- · Headache with vision changes
- Painful contractions greater than 6 times an hour if less than 36 weeks

Please use this chart to determine how you should treat certain illnesses or symptoms throughout your pregnancy. If in doubt, call the office at **515-267-8300**.

| ILLNESS/SYMPTOM | CALL THE OFFICE IF: | CALL THE DOCTOR IMMEDIATELY IF: | HOME TREATMENT: |
|--|---|--|---|
| Bleeding/Cramping Some bleeding/spotting may occur after an internal exam | Bleeding is less than a period with mild cramping; common in 1st trimester | Bleeding is heavy (using a pad every 2 hours) 2nd & 3rd trimester cramping or painless heavy bleeding Cramping is equal or worse than menstrual cramps | Rest Avoid heavy lifting (more than 20 pounds) |
| • Common in 1st trimester | Unable to keep down liquids and solids for more than a 24 hour period Weight loss of more than 3-5 pounds | Signs of dehydration occur (e.g. dry mouth, fatigue/lethargy, poor skin turgor) Abdominal pain accompanied with vomiting | Vitamin B6 25 mg three times a day Separate liquids from solids (e.g. dry cereal followed by a glass of milk 1 hour later) Plain popcorn Rest Avoid hot sun |
| Decreased fetal (baby) movements after 24 weeks | Baby moves less than 4 times in a 30 minute period while you are resting, during a normally active period of baby | No fetal movement if accompanied by severe abdominal pain | Rest Drink juice or soft drink Eat a small snack |
| Labor | Contractions stronger than Braxton-Hicks (mild, irregular contractions), but may not be regular If less than 36 weeks, call if contractions are every 15 minutes | Contractions are every 5 minutes apart for 1 hour Water breaks; small leak or as a gush Bleeding is more than a period Pain or contractions won't go away | Rest (you'll need energy for real labor) Increase fluids to 8-12 glasses daily Dehydration can cause contractions especially in the summer |
| Urinary Urgency and/ or Pain With Urination • Frequency is common in early and late pregnancy | Pain with urination Feeling of urgency to void with little urine produced | Temperature of 101°F or higher Pain in upper back Contractions occur Blood in urine | Urinate at regular intervals Increase fluid intake to 8-12 glasses daily |
| Swelling | Recent, noticeable increase in feet and ankles Swelling of face and hands | Swelling accompanied with headache or upper abdominal pain Swelling with decreased fetal movement Elevated blood pressure if using home monitoring | Lie on left side and elevate legs Avoid salty foods (e.g. ham, pizza, chili) |
| Cold and Flu | Temperature of 101°F or higher Green or yellow mucus develops Persistent cough for more than 5 days Temperature of 101°F or higher Temperature of 101°F or higher Temperature of 101°F or higher | Breathing is difficult or wheezing occurs | Tylenol, Actifed, Sudafed, and any Robitussin Increase fluids Rest Use vaporizer Ibuprofen ok in 2nd trimester only |
| Rupture of membranes | | Water breaks; small leak or as a gush | |

Preparing for Labor and Detivery

Hospital Affiliation

We are affiliated with Marcy Modical Contagnation of the Avenue Decimal Affiliation

We are affiliated with Mercy Medical Center, 1111 6th Avenue, Des Moines, IA 50314. Contact us at 515-267-8300. You may pre-register with Mercy to expedite the admitting process when in labor.

Pain Control and Labor

Nubain /Stadol - These narcotics are given through an injection or IV and help to take the edge off strong contractions. The medications can make you sleepy. We avoid giving this near the time of delivery.

Epidural – This safe and popular option is administered by an anesthesiologist and requires a fine, thin catheter or tube to be placed in your back during active labor.

Medicine slowly drips through the tubing to provide pain relief throughout labor. It is removed after delivery.

Local – Many patients deliver without pain medication. Sometimes we need to give a small injection of numbing medicine for stitches called lidocaine. It feels like a small pinprick.

Attend educational courses

There are educational courses on labor and delivery, breastfeeding, infant CPR and baby care available. Consider these classes especially if you are a first time parent!

Choose a pediatrician for your baby

You will need to decide on a pediatrician for your baby by the time you deliver. The hospital will send your baby's information and test results to your chosen doctor. Your baby is commonly seen within 1 week after birth. You will need to contact the doctor's office prior to delivery and make sure they are accepting your insurance and are taking new patients. We can provide you with a list of doctors if you have trouble locating one.

Obtain and install a car seat

You must have a car seat installed in your vehicle before taking baby home. By law, children must be in a federally approved, properly installed, crash-tested car seat for every trip in the car beginning with the trip home from the hospital.

Learn more about breastfeeding

Human milk is perfectly designed nutrition for babies. Babies who are breastfed get fewer infections and are hospitalized less. Mothers that breastfeed can burn up to 500 calories per day, which can help with weight loss. Breastfeeding can also reduce a woman's risk of breast cancer. After delivery, the nurses and a lactation specialist are there to help you learn the art of breastfeeding.

Consider circumcision

A circumcision is the removal of excess foreskin from the penis of baby boys. We can perform this optional procedure in the hospital after the baby is born. Please let your provider know your wishes.



Labor and Delivery

When will I know I'm in labor?

The chart below will help determine if you are in labor. If you have signs of true labor, contact the labor and delivery unit. If your water breaks, notify labor and delivery immediately, day or night.

| True Labor | False Labor Contractions are irregular, do not get closer together and last 20 to 40 seconds. | |
|--|--|--|
| Contractions are regular, get closer together and last 40 to 60 seconds. | | |
| Contractions continue despite movement. | Contractions may stop when you walk or rest or may change with change of position. | |
| Pain/discomfort usually felt in back and moves around to front. | Pain/discomfort often felt in abdomen. | |
| Contractions steadily increase in strength. | Contractions usually are weak and do not get much stronger. | |
| Cervix dilates. | Cervix does not dilate. | |
| Bloody show may be present. | Usually no bloody show is present. | |

Induction

Your due date is considered 40 weeks. Anticipate delivery sometime the week before or after your due date. We recommend additional testing for your baby after 41 weeks. We want labor to happen spontaneously, but if it doesn't we will discuss induction of labor after 41 weeks. Induction is a process where we give medication to soften the cervix and then a medication to stimulate contractions. It can take more than 24 hours to work and can increase the chance of cesarean delivery, especially if it is your first baby.

Cesarean birth and recovery

A Cesarean birth may be planned or unplanned. Nurses, anesthesia staff and your physician will be with you in the operating room. If necessary, a group of neonatal health care providers also will be with you. Your blood pressure and heart rate/rhythm will be monitored, and a nurse will listen to your baby's heart rate. Your baby will be delivered in a short period of time once surgery begins. Once delivered, it will take approximately 45-60 minutes to complete surgery. Your incision will be closed with staples or sutures. You will then be moved to the Recovery Room.

Initial recovery after Cesarean birth

The immediate recovery period is similar to the recovery period of a vaginal birth. Rest to conserve your strength. You, your baby and your support partner will remain in the Labor and Delivery Recovery Room for approximately one hour. During this time you and your baby will be monitored closely.

Episiotomy/forceps/vacuum

We plan to help you deliver your baby with the least amount of trauma. Episiotomies are not routinely needed and many deliver without the need for any stitches. Sometimes we need to make a small incision at the vaginal opening to help deliver the baby. We make sure you are numb if you don't have an epidural, and will stitch the area after delivery. The stitches dissolve over time and do not need to be removed. We provide you with medicine to keep you comfortable after delivery.

We are highly skilled in the use of vacuum and forceps for deliveries. We will recommend using them only if medically indicated. Our goal is to deliver your baby in the safest manner. There are definitely times when this is the safest way to help your baby into this world.

Postpartum Instructions

- 1. Make an appointment to see the doctor for a check-up 6 weeks after vaginal delivery, 2 weeks after cesarean for an incision check and then at 6 weeks postpartum.
- 2. Refrain from douching, tampons and swimming until after your post-partum check-up.
- 3. You may ride in a car but no driving for about 2 weeks.
- 4. If breastfeeding, continue your prenatal vitamins daily, eat a well balanced diet, and increase your fluid intake to 10-12 glasses of water per day. With any signs or symptoms of a breast infection (fever, flu-like symptoms, pain or redness in the breast) call the office for further instructions.
- 5. If not breastfeeding, continue to wear a good supportive bra, bind if necessary, use ice packs, take Tylenol* for discomfort, and call the office if the problem persists or worsens.
- 6. Vaginal bleeding may continue for 6-8 weeks while the uterus is involuting back to pre-pregnancy state. You may have spotting and/or menstrual-like flow. Increased activity increases the flow. If bleeding or cramping increases to greater than a period, take two Advil and get off your feet. If bleeding is persistently heavy, call the office for further instructions.
- 7. Avoid lifting anything heavier than your baby until after your post-partum check-up.
- 8. Exercise Avoid sit-ups, jumping jacks and aerobics until after your post-partum check-up. You may do simple abdominal tightening exercises, kegal exercises, and walking.
- 9. Constipation is very common. Drink 6-8 glasses of liquids every day. Citrucel, Metamucil, and stool softeners (Colace) may be used. Include food like bran cereal, fresh fruits and vegetables in your diet. Stool softeners are recommended while taking Percocet or Vicodin.
- 10. Hemorrhoids usually are more symptomatic after delivery. If they are a problem for you, we can prescribe medication to relieve symptoms.
- 11. Post-partum blues Sadness, crying and blues are normal responses to hormonal changes in your body after the baby is born. Please let us know if you need additional assistance or if you are concerned that the blues have turned into depression.
- 12. Abstain from intercourse until your 6 week postpartum visit. Contraception options will be discussed with your doctor at your postpartum check-up.
- 13. You may climb stairs 2-3 times a day in the first 2 weeks. Too much activity delays episiotomy and incisional healing.
- 14. Please call the office if you have a fever of 101°F or greater, swelling, tenderness or redness in the lower leg.
- 15. If you had a Cesarean delivery, keep your incision clean with soap and water. Bandage with gauze only if instructed. Call the office if the incision is swollen, red or has any unusual drainage. Remove any steristrips after 10 days.
- 16. Tub bathing and showering are permitted.

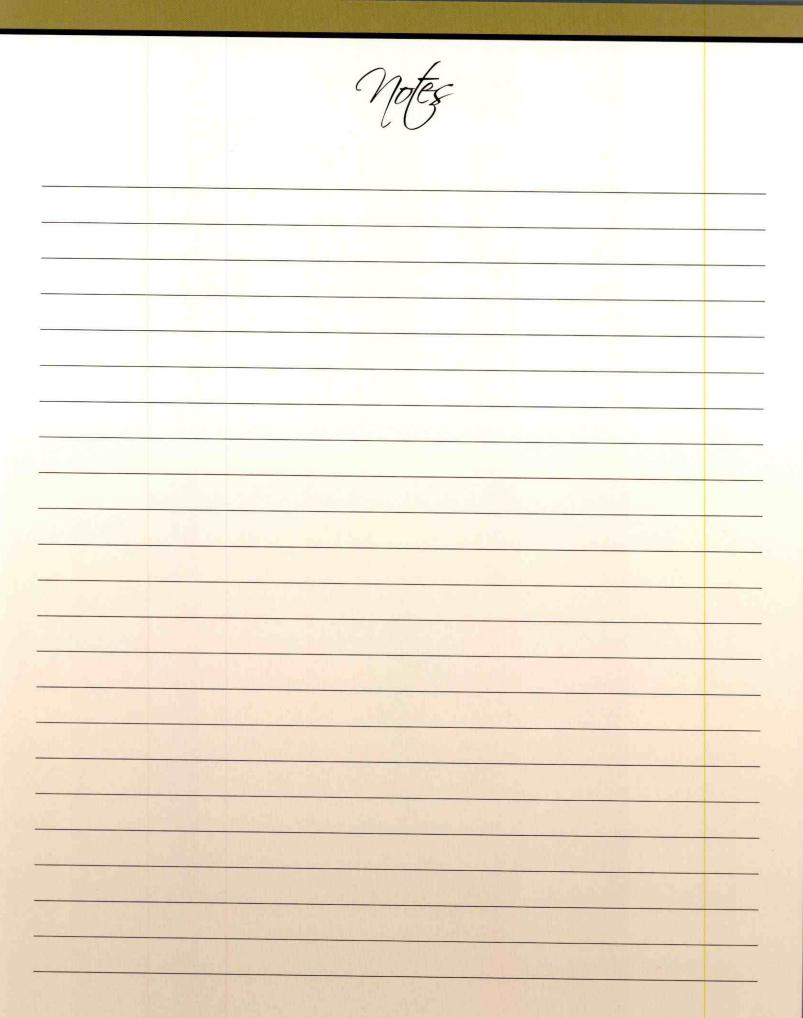
Postpartum Depression

40-80% of women experience mood changes after their delivery. This most commonly starts 2-3 days after delivery and usually goes away by 2 weeks. It is important to eat properly, get adequate sleep and reduce stress during this time to help with the symptoms. Sometimes the symptoms require treatment especially if mom is not bonding or enjoying her baby; unable to care for herself or the baby; feeling excessive sadness, depression or anxiety. Please schedule an appointment if you feel a problem is occurring. We are known for our compassionate care and have effective treatments for postpartum depression.

Resources

For additional information visit:

www.yourpregnancyandchildbirth.com



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