

Welcome to CMWH!!!

First, let me just say that we are absolutely HONORED to be invited to participate in this very special time of your life. Birth is a sacred space, and a vulnerable one, and we are humbled to be allowed to share this with you!

Your First Prenatal Visit

We like to see our clients as early as possible, preferably at least within 8 weeks after your LMP (last menstrual period). Please do not worry if you're not sure how far along you are, or if you're joining us much later in your pregnancy - we're just happy that you're here!

Even if you are not a first-time mother, prenatal visits are still important since every pregnancy, every baby, even *every placenta* is different. This initial visit will probably be one of the longest. It will be helpful if you arrive prepared with vital dates and information. This is also a good opportunity to bring a list of questions that you and your partner have about your pregnancy, prenatal care, and birth options. Please don't worry if you have questions you forgot to ask, however – you are encouraged to text/call any time!

What to Expect at Your First Prenatal Appointment:

Your midwife will ask for your medical history (you should have filled out an intake form with most of these questions). We'll discuss any obstetric, medical and/or psychosocial problems, including: Blood pressure, height, and weight

- Last breast and pelvic/pap exam
- Date of your last menstrual period (an accurate LMP is helpful when determining gestational age and due date)
- Birth control methods
- History of abortions and/or miscarriages
- Hospitalizations

- Medications you are taking
- Medication allergies
- Your family's medical history

In accordance with ACOG and ACNM guidelines, we recommend a physical exam at your first visit, including:

- Pap smear (if due)
- Pelvic exam
- Ultrasound
- Breast exam
- Evaluation of lungs, heart, thyroid, etc. (like you would get in a routine physical)

*For your exam – We want you to be comfortable. You may have anyone you like with you, and your midwife will not <u>ever</u> do sensitive exams without another person in the room, be it your spouse, a friend or relative, or one of our trained assistants. We provide soft, comfortable bathrobes to change into for the exam. We can also use a blanket, etc, to keep you as covered as possible.

Blood will be drawn and several laboratory tests will also be recommended, including:

- Hemoglobin/ hematocrit
- Rh Factor and blood type (if Rh negative, rescreen at 26-28 weeks)
- Rubella screen
- Varicella or history of chickenpox, rubella, and hepatitis vaccine
- Cystic Fibrosis carrier screen (done at 10 weeks or later)
- Hepatitis B surface antigen
- Sickle Cell carrier screen (Done at 10 weeks or later)
- HIV screen
- Vitamin D, B12 and folate levels
- Thyroid function panel
- Specific tests depending on the patient, such as testing for tuberculosis and Hepatitis C
- STI screening
- Urinalysis
- Urine Culture

Your midwife will probably want to discuss:

- Informed consent and rights of all women in childbirth
- Recommendations concerning dental care, cats, raw meat, fish, and gardening
- Fevers and medications
- Environmental hazards

- Travel limitations
- Miscarriage precautions
- Prenatal vitamins, supplements, herbs
- Diet, exercise, nutrition, weight gain

Possible questions to ask your provider during your prenatal appointment:

- If I experience bleeding or cramping, what do I do?
- What do you consider an emergency?
- Will I need to change my habits regarding sex, exercise, nutrition?
- When will my next prenatal visit be scheduled?
- What type of testing do you recommend and when are they to be done? (In case you want to do research the tests to decide if you want them or not.)
- Do penguins have knees? (Just checking to see if you're still reading this ☺)

If you have not yet discussed labor and delivery issues with your midwife, this is a good time. This helps reduce the chance of surprises when labor arrives. Some questions to ask include:

- What does a home birth look like?
- What situations would warrant a transfer/Cesarean?
- What situations would warrant an episiotomy?
- How long past my expected due is it safe to wait before intervening?

<u>IMPORTANT: Please save my cell # (253) 777-7501, and April's cell (360) 868-7026</u>

Again, thank you! It is truly an honor to be entrusted with your care.