

Patient Information

Name: _____

Due Date: _____

Blood Type & Rh: _____

Initial BMI: _____

Resources

DOULA ~ Our physicians will work with select Doulas as labor coaches. You will need to check with our physicians to get your Doula choice approved. Inquire about further details regarding this information.

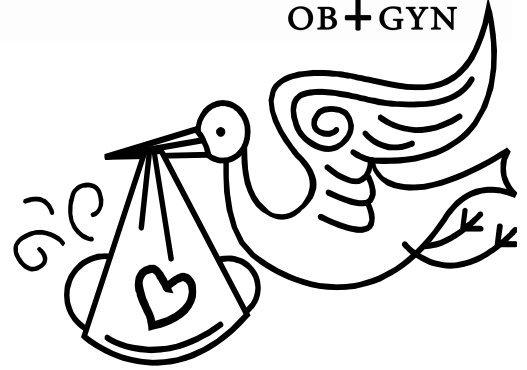
INTERNET RESOURCES:

- health4mom.org
- acog.org >Select 'For Patients'
- Beaumont.org/services/women-services/maternity

FREE APPS:

- What to Expect Pregnancy & Baby Tracker
- Text4Baby
- The Bump
- Lact Med@NIH (National Library of Medicine)
- Medications & Mother's Milk
- Vaccines On The Go: What You Should Know
- Resuscitate! CPR, AED, Choking

GENERATIONS OB + GYN



GUIDE TO YOUR Pregnancy

This brochure references to and reviews some commonly asked questions and concerns that may arise during pregnancy.

Please refer to this before calling the office –
if something is not answered or is not clear,
please ask at your next visit or call the
'medical question' line if it cannot wait.

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NON-EMERGENCY | NURSE QUESTIONS

(248) 647-9860

follow prompts

EMERGENCY | LABOR

DURING business hours

(248) 647-9860

follow prompts

AFTER Hours, Weekends, Holidays

*This service is available for
medical emergencies and labor questions only!*

(248) 584-6142

Our physicians are on staff and only deliver babies at
Corewell Health Beaumont Hospital, Royal Oak

35046 Woodward Ave Ste 100
Birmingham, MI 48009-0932
Phone 248.647.9860
Fax 248.647.9864
www.myobgyn.biz



Schedule of OB Visits

1st Appointment - OB Intake (4-8 weeks)

OB Nurse Specialist takes history; orders necessary lab work, your pregnancy is discussed.

OB I Appointment & Ultrasound (8-10 weeks)

Ultrasound with technician, physical exam, review of all lab work, answer questions, additional testing (if any) discussed.

Monthly Appointments Until 30 Weeks

(This is approximate and if no complications occur)

Sequential Screen & Genetic Testing Labs

(Optional)

Time varies depending on which screening, or test is requested

Amniocentesis/Chorionic Villus Sampling

(Optional)

15 ½ -18 weeks – Amnio, 10+ weeks - CVS

Complete Obstetrical Ultrasound

19-20 weeks with ultrasound technician ~

You must have a full bladder

Anatomy and growth are analyzed. Sex of baby can usually be determined at this time

4D Ultrasound (Optional & additional fee)

25-28 weeks with ultrasound technician

Glucose (Sugar) Screening

26-28 weeks (nurse visit)

This is a one-hour appointment with the OB nurse - review questions about pre-registration, hospital stay, labor, breast-feeding and more. Additional lab work will be drawn.

(Eat a good breakfast that day - fasting NOT required).

Group B Strep Testing

36 weeks

Bi-Weekly Appointments 30-36 Weeks

Starting at approximately 30-36 weeks.

Weekly Appointments 36 Weeks Until Delivery

Starting weekly appointments approximately 36 weeks up until you deliver.

Fetal Non-Stress Testing

After 32 weeks if indicated, and weekly after due date.

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Please note these are general guidelines

*IF THERE ARE MEDICAL ISSUES OR COMPLICATIONS,
YOUR APPOINTMENT SCHEDULE WILL BE ADJUSTED*

Cancellation Policy

A \$50 fee is charged for appointments not cancelled within a 24-hour notice.

~ COMMON ~

Ailments & Treatments

ANEMIA – or low iron count is common in pregnancy. To increase your iron intake, eat iron rich foods such as liver, meat, beans, prunes, and prune juice. It also helps to eat foods rich in Vitamin C at the same time (citrus fruits), as they help your body to absorb iron better.

COLDS/CONGESTION/COUGH/SORE THROAT –

Most are viral and do not require antibiotics. The best treatment is rest and fluids. Call if you have a fever of 101 degrees or greater. For symptom relief, many common products can be used. Avoid products with aspirin or alcohol in them. You can use Allegra, Benadryl, Claritin, Zyrtec, Zicam, Emergen-C, ChlorTrimeton, Vicks Vaporub, Singular, Atrovert (Rx only), Mucinex, Flonase, NasalCrom, Saline rinses and Neti-pots may relieve nasal congestion. Robitussin with expectorant (non-drowsy) or cough drops, saltwater gargles are ok to use.

HERBAL REMEDIES – Most are untested in pregnancy. It is best to avoid those remedies which have unknown effects. Zinc glycine lozenges, zinc tablets have no data to show they are beneficial but there has been no harm shown either. Use Echinacea with caution.

CONSTIPATION – Increase the fiber in your diet and exercise regularly to help prevent it. It is safe to use prune juice, Milk of Magnesia, Metamucil, MiraLAX, Fibercon or Citrucel. You may also use a stool softener (Colace) daily if needed.

DIARRHEA – If this occurs, it is important to stay well hydrated. You can also use Imodium as directed on the label. Do NOT use Pepto-Bismol or Kaopectate as they contain aspirin products. Call if it persists or worsens.

HEADACHES – Aspirin-free products (like Tylenol) are the drug of choice to use for headaches, muscle aches and/or fever. The total dose should not exceed 3500mg per day. Do not use any of the non-steroidal anti-inflammatory drugs like aspirin, Motrin, ibuprofen, or Aleve. Biofreeze is ok to use but Butterbur (Petaoblex) should not be used for migraines in pregnancy.

HEARTBURN – You may use Tums, Roloids, Mylanta, Maalox, Phazyme, or GasX in tablet or liquid form. If those do not work, you may use Pepcid AC or Tagamet. The FDA recommends avoiding Prilosec OTC in pregnancy.

HEMORRHOIDS – Are varicose veins of the rectum. When symptomatic (pain, burning, itching or bleeding) you may use Tucks, Preparation H or Anusol HC to relieve symptoms.

NAUSEA/VOMITING/MORNING SICKNESS – Almost 50% of pregnant women experience some nausea & vomiting. It usually peaks at 8 wks and resolves between 12 & 16 weeks. You may try eating small frequent meals. Vitamin B6 50mg daily, ½ tablet of Unisom, Relief or Sea Bands, Benadryl, Dramamine, or even acupuncture. If you are unable to keep anything down for over 24 hours or show signs of dehydration (cracked lips, dry mucous membranes, decreased urination) you may need additional medical treatment.

YEAST INFECTIONS – It is best to be examined to accurately diagnose yeast infections. There are over the counter & prescription medications that are safe and effective in treating infections.

Infections

For most common infections, if you had it as a child, you are probably not at risk and, thus, your baby is not at risk.

FIFTH'S DISEASE ~

This virus is caused by parvovirus B19 and is called fifth's disease because it is the 5th of 6 causes for childhood fever and rash. 50-75% of reproductive age women have immunity from past infections. A woman exposed to parvovirus can be tested for immunity and if no prior exposure is documented, the fetus may be monitored with ultrasounds.

GROUP B STREPTOCOCCUS (GBS) ~

About 1 in 4 pregnant women have the Group B Strep bacteria, yet very few babies become ill with it. A vaginal/rectal culture is done between 35 and 37 wks on all pregnant women. If it is positive, we recommend IV antibiotic treatment during labor.

INFLUENZA (Flu) ~

There are many different strains of influenza virus. Influenza pneumonia is the most serious and potentially fatal complication in pregnant patients. The flu vaccine(s) (inactivated) are recommended for all pregnant women in any trimester.

LISTERIOSIS ~

This food-borne illness is the result of bacteria transmitted when eating certain foods. Prevention includes washing all fruits and vegetables before eating them, avoiding non-pasteurized milk/cheeses, raw or undercooked protein sources, and processed meats (hot dogs/deli meats) unless reheated to steaming. Juices/Cider should be pasteurized.

LYMPHOCYTIC CHORIO MENINGITIS ~

The CDC recommends that women who are pregnant or planning pregnancy avoid all contact with rodents such as hamsters, gerbils, guinea pigs and mice, due to the possibility of the virus in these animals. In most healthy people, it causes no symptoms, but infected pregnant women can transmit the virus to the fetus, leading to fetal death or birth defects.

TOXOPLASMOSIS ~

This infection caused by a parasite that can threaten the health of an unborn child. The infection comes from handling soil or cat litter that contains cat feces infected with the parasite, eating undercooked meat from animals infected with the parasite or from uncooked foods that have come in contact with contaminated meat. Indoor cats are far less likely to carry toxoplasmosis than cats that are let outdoors. If you have been infected with *Toxoplasma* once, you usually will not become infected again. If there is a suspicion of infection, blood testing can be performed and, if confirmed, the pregnancy monitored closely.

COVID-19

This is a respiratory disease caused by the SARS-CoV-2 virus. It can be very contagious and can spread quickly. A Covid-19 vaccination can help reduce the risk of illness from COVID-19 and its potentially serious complications. It remains the best protection for pregnant patients.

~ IMPORTANT ~ Things To-Do!

First Trimester

♥ READ ABOUT GENETIC TESTING

♥ INSURANCE COVERAGE BENEFITS

Check right away regarding obstetric coverage including ultrasounds & genetic testing

♥ EDUCATIONAL CLASSES

On-line classes sign-up at www.myobgyn.biz

- Patient service desk
- Educational classes

~ **Nutrition in Pregnancy** (*any trimester*)

~ **Childbirth Preparation** (*3rd trimester**)

~ **Breastfeeding Classes** (*3rd trimester**)

~ **CPR** (*3rd trimester**)

*Between 24-28 weeks

♥ PRE-REGISTER FOR DELIVERY

Between 26-28 weeks

♥ SELECT PEDIATRICIAN FOR BABY

Between 26-34 weeks

♥ DECIDE ABOUT CORD BLOOD BANKING

Between 26-34 weeks

Reference www.parentsguidecordblood.org

♥ CHECK ABOUT WORK DISABILITY

Between 26-34 weeks

Allow 2 weeks for processing

(*Administrative Processing fee is \$10*)

♥ TAKE A VIRTUAL HOSPITAL TOUR

Go to: beaumont.org/maternity

♥ INFANT CAR SEAT OBTAINED

Must have at hospital for discharge with the baby

♥ BAGS PACKED FOR THE HOSPITAL

- ♥ A month or so before due date
- ♥ Things mom needs
- ♥ Things coach/partner needs
- ♥ Things baby needs

♥ VACCINATIONS TO CONSIDER

- ♥ Influenza flu (*anytime if in season*)
- ♥ Tdap (*27-36 wks*)
- ♥ RSV (*32-36 wks*)

Second and Third Trimester

Diet

WEIGHT GAIN ~ We use body mass index (BMI) to assess if your weight is healthy to start. It is a score based on your height and weight. Weight gain recommendations are:

UNDERWEIGHT: BMI of <18.5 is 28-40 lbs

NORMAL BMI of 18.5-24.9 is 25-35 lbs

OVERWEIGHT BMI of 25-29.9 is 15-25 lbs

OBESE BMI of 30 or greater is 11-20 lbs

Obesity can increase your risk for high blood pressure, diabetes, and cesarean delivery. Research has shown that poor prenatal nutrition and maternal obesity before and after pregnancy are associated with infant and pregnancy complications. Prenatal nutrition, therefore, is important because it influences the health of a pregnant woman and her baby. "Super Tracker" is a great interactive tool to teach prenatal patients about nutrition and pregnancy goals. To access go to <http://www.choosemyplate.gov> and search pregnancy.

CALORIES ~ A pregnant woman requires an additional 350-450 calories per day in the 2nd and 3rd trimester – totaling about 2000 calories per day. You should eat small, frequent meals, and not skip meals.

ALCOHOL ~ There is no safe lower limit for alcohol intake in pregnancy. A fetus does not have a fully functioning liver and thus, is not able to break down the alcohol. Heavy drinking during pregnancy is associated with birth defects, mental retardation, and developmental problems in the fetus. We recommend that you do NOT drink alcohol while pregnant.

CAFFEINE ~ Intake should be limited to 200mg/day (equivalent to about 1 – 12oz cup of coffee). Studies have shown that more caffeine than that can increase risk of miscarriage. There are lists of caffeine-containing foods/liquids on the internet. (Source: March of Dimes). A 12oz. can of Coke/Pepsi have about 50 mg.

CALCIUM ~ Requirements in pregnancy are 1000 mg/day. Most prenatal vitamins have 200-300 mg – so you need to have 3-4 servings of additional calcium containing foods per day. Our body can only absorb about 500-600mg at one time, so spread servings out.

FISH ~ The FDA recommends that women who are pregnant or nursing avoid eating certain fish that may contain high levels of mercury including shark, swordfish, king mackerel and tilefish. Canned albacore tuna is restricted to one 6 oz serving per week. COOKED sushi is safe to eat. Limit all fish and seafood to less than 12 oz per week. Specific Michigan fish advisories can be found at: www.mi.gov/eatsafefish

SMOKING/NICOTINE/VAPING/MARIJUANA ~ Smoking is dangerous to your health whether you are pregnant or not. It can increase risk of miscarriage, small babies, and placental problems. Nicotine patches and gum are considered acceptable when trying to quit smoking in pregnancy. Vaping and e-cigarettes have not been studied enough to determine if safe in pregnancy and some may have increased nicotine amounts over regular cigarettes. For those reasons, you should not use e-cigarettes or vape. Marijuana use in pregnancy should be avoided due to concerns about fetal brain development. There are also concerns about the variations in potency and by products that may be in marijuana.

SWEETENERS ~ Nutrasweet (*aspartame*), Splenda (*Sucralose*), Sweet & Low (*Saccharin*) & Truvia (*Stevia*) are considered artificial sweeteners and should be used with caution since they affect your glucose metabolism. Pregnant women should make sure to get adequate amounts of healthy foods and fluids, aside from diet products.

Activity | Exercise

ALLERGY SHOTS ~ You may continue to get your allergy shots while pregnant.

TB TESTING ~ TB testing is safe at any time during pregnancy.

DENTAL CARE ~ Routine dental care can and should be done during pregnancy, including cleaning, fillings, root canals, and extractions. Dental x-rays can be done with abdominal and thyroid shielding. Local anesthesia can be used.

EXERCISE ~ Most women can continue to exercise during pregnancy with minor adjustments. 20 to 30 minutes of moderate intensity exercise, 4 to 5 times weekly is recommended. There is no need to ensure that the heart rate is below a certain number.

- Avoid breathlessness (can you speak a sentence during your exercise?)
- Drink plenty of fluids before, during and after exercising
- Wear sun protection
- Avoid any contact sports such as softball, soccer, volleyball, and activities that increase risk of falling such as bike riding, horseback riding, skiing, or rollerblading

HAIR COLOR/PERMS/HIGHLIGHTING ~ There is no evidence that any of these can cause birth defects. Although data is limited, because systemic absorption is minimal, these are presumed to be safe in pregnancy.

NAILS ~ You may paint your nails yourself or have them done professionally. Shellac is acceptable.

HOT TUBS OR BATHS ~ It is safe to use a bathtub or hot tub if the water is 100 degrees or lower. Saunas are not recommended.

PAINTING ~ It is safe for pregnant women to paint (latex or oil-based) or supervise painting in a well-ventilated area. The major risk for painting is possible falls from a ladder. If remodeling an older home and there is a question about the paint base (lead or mercury), it is better not to be around when sanding, etc is done.

SEXUAL ACTIVITY ~ May continue in pregnancy unless certain conditions exist, such as bleeding, premature labor, threatened miscarriage. You should not have sexual intercourse if you think your water has broken.

TRAVEL ~ It is ok to travel by car or air until 36 wks if there are no complications. Trips of any type, more than 2 hours, require rest stops to get up & stretch, to decrease risk of blood clots. Use of seatbelts in cars is mandatory! Current global travel advisories can be found at cdc.gov/travel.

VACCINES ~ There is no evidence of risk with inactivated vaccines in pregnancy. Generally, live-virus vaccines are not given in pregnancy. An annual Influenza vaccine is recommended for all pregnant women regardless of trimester (*unless a severe egg allergy*). A one-time booster of tdaP (tetanus, diphtheria, and pertussis) is recommended for all adults over 18. The CDC recommends a dose of tdaP in the 3rd trimester for women with every pregnancy. Check with your provider for recommended vaccines specific to you.

SLEEPING ~ In early pregnancy, you can sleep in any comfortable position. As the baby grows, sleeping on your side is recommended as it can help uterine blood flow for the baby. It is not harmful to your baby if you wake up on your back; just roll back onto your side and go back to sleep.