

MATERNITY INFORMATION

WHASN SOUTHWEST

8285 W. Arby Avenue, Suite 380
Las Vegas, NV 89113
702-366-1268

www.singhobgyn.com
www.whasn.com

**Congratulations on Your Pregnancy and Welcome to
WHASN Southwest Care Center!**

Thank you for choosing us for your prenatal care. We want to help you and your family have a healthy, exciting and well-informed pregnancy experience. This information is provided as a resource for you to use throughout your pregnancy. Inside, you will find a contact list, information on when to go to the hospital, medications that are safe, food to avoid during pregnancy, and a brief overview of what will happen at each visit. We hope that this brief introduction to pregnancy and our practice will help reduce some of the anxiety involved with being pregnant. Please do not hesitate to ask questions of the medical and clinical staff here at the WHASN Southwest Care Center. It is important that your individual needs are met. You are encouraged to write down your questions so that you will remember to ask them at your next visit.

Contact List

Singh Women's Care

WHASN Southwest Care Center

Office Phone Number: 702 - 366-1268
Office Fax Number: 702 - 616-3099
Nurse, Prescriptions: 702 - 366-1268
WHASN Corporate Billing Office: 702 - 476-5595
Website: www.singhobgyn.com
www.whasn.com

Office Hours

Monday 8:00 am - 5:00 pm
Tuesday 8:00 am - 5:00 pm
Wednesday 8:00 am - 5:00 pm
Thursday 8:00 am - 5:00 pm
Friday 8:00 am - 12noon

Our Physician delivers babies at the following hospitals:

- Southern Hills 702-880-2220
- St. Rose San Martin 702-492-8622

In the event of a Problem

After Hours & Weekends

Call 702-366-1268

An operator at the Answering Service will put you in touch with

Dr Singh or the On-call physician.

IMPORTANT NUMBERS:

- EMERGENCY 911
- SAFE NEST 646-4981 OR 1-800-486-728

When to Go to the Hospital

FOR ANY OF THE FOLLOWING EMERGENCIES, PLEASE GO DIRECTLY TO THE HOSPITAL. THE DOCTOR WILL BE CONTACTED BY THE HOSPITAL STAFF.

- Vaginal bleeding
- Vaginal gush of watery fluid or continuous dripping of fluid which you cannot control
- Severe fall or accident with possible injury
- Severe difficulty with breathing
- Seizures
- Onset of labor (contractions or severe menstrual cramping) see below
- No fetal movement in 6 hours (After you've felt movement daily, usually after 24 weeks)
- Change in consciousness (passed out or unexplained behavior)
- Persistent or recurring abdominal pain
- Severe headaches that will not go away, even after taking Tylenol

PLEASE CALL THE OFFICE IF YOU HAVE ANY OF THE FOLLOWING:

- Temperature of 100 degrees or greater
- Dizziness or blurred vision
- Swelling of hands, feet or face that does not go away after rest
- Foul smelling vaginal discharge
- Pain or burning when urinating
- Bloody or cloudy urine
- No bowel movement in more than 3 days
- Severe vomiting, unable to keep any fluids down for 24 hours

If you have been involved in a serious fall, motor vehicle accident, or any trauma to your abdomen, go to the nearest Emergency Room to be evaluated.

Note: When calling the doctor, please have a pharmacy phone number available.

Important Information Regarding the Patient Portal: **Messaging should be limited to non-emergency/non-urgent communications and requests. In case of an emergency, call 911 or go to the nearest emergency room**

Physician Coverage:

If our Physician is unavailable, there will be another OB/GYN physician covering our practice. The office and Answering Service will put you in touch with that physician.

After Hours Care:

Please limit routine calls to regular office hours, as our physician on call is frequently performing deliveries and attending to gynecological emergencies after hours. If you have

a medical concern that cannot wait until business hours, please do not hesitate to contact us through our office phone number 702-366-1268. Be sure to keep your phone line open and have a pharmacy number available when calling. You may get a call from a blocked phone number please answer this call.

If your phone does not accept calls from anonymous callers, please disable that feature when paging a physician to call you. You will need to listen for a dial tone and press *87 to disable this feature. You may press *77 to reactivate your anonymous caller block.

Is This Labor?

The following symptoms may indicate that you are going into labor and should go to the hospital:

| <u>SYMPTOM</u> | <u>DESCRIPTION</u> | <u>ACTION</u> |
|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Show | Blood-tinged mucous discharge may indicate that the cervix is starting to thin and open in preparation for delivery. | If less than 37 weeks or the bleeding is like a menstrual period, then call the on-call physician. If 37+ weeks, no action necessary. |
| Backache | Backache can be common during pregnancy, but if intermittent and recurring, it may be early labor, particularly if associated with cramping or increased pelvic pressure | If less than 37 weeks, then call the on-call physician |
| Contractions | Tightening of the uterus(womb), usually begins irregularly and far apart | Time contractions, and once contractions are regular and at least 5 min apart, lasting 1 minute in duration, and happening for at least 1 hour, then go to the hospital. Immediate notification is necessary if you are less than 37 weeks pregnant. |
| Breaking of the bag of waters | Fluid leaks, gushes from the vagina | Go to the hospital immediately regardless of gestational age and proceed directly to labor and delivery, note the time, amount, and if you have any contractions. |

MEDICATIONS

Every medication carries with it risks and benefits. It is important to discuss with your doctor all prescriptions and non-prescription medications you are, or may consider, taking. This includes vitamin supplements, herbal and so called “natural” supplements. We would prefer that it not be necessary for you to take any medications during your pregnancy, however we do realize that this is not possible for many patients.

DO NOT discontinue any medications prescribed for significant medical problems unless you have first spoken with the physician who prescribed the medication for you, and with Dr Singh. It is often far more dangerous for you and for the baby to suffer the effects of a disease than it is to take the medication used to treat the disease. If you are prescribed a medication during pregnancy, please take the entire course of the prescription.

Listed below are common conditions and medications that are thought to be safe to use on an occasional basis for these conditions. If you find that you need one of these medications frequently, please discuss with your doctor or the medical assistant.

During your pregnancy, avoid any mega dose vitamins, especially those containing high doses of Vitamin A.

Discuss with your doctor any and all over-the-counter medications, vitamins and herbs you may be taking.

Absolutely do not take any form of Accutane.

MEDICATIONS ALLOWED DURING PREGNANCY:

Pain Relievers/Headache/Fever

Tylenol (Acetaminophen)

Tylenol PM

Extra Strength Tylenol

Codeine, Lortab, Percocet- by prescription only

Do Not Use: Aspirin Motrin Aleve Advil

Cold/Flu/Allergies

Flonase Nasal Spray (green top)

Robitussin (Plain or DM- Alcohol free)

Tylenol Cold & Sinus

Actifed

Throat Sprays

Cough Drops

Chlor-Trimeton

Benadryl

Claritin

Decongestants

Flonase Nasal Spray (green top)
Robitussin CF
Tavist D
Ocean Mist nasal spray (saline solution)
Actifed
Benadryl

Antihistamines

Zyrtec
Claritin
Benadryl
Dimetapp

Insomnia

Unisom
Benadryl

Nausea

Small frequent meals
Ginger Ale or Ginger Tea
Vitamin B6 (50-100mg twice a day)
Sea Bands
Unisom (twice a day- works best when used with Vitamin B6)
Emetrol

Diarrhea

Imodium (2 doses-if it persists notify the office)
Follow the BRAT diet (bananas, rice, applesauce, tea, toast)

Constipation

Colace
Metamucil
FiberCon
Milk of Magnesia
Citrucel
Surfak
Fiberall

Hemorrhoids/Topicals

Preparation H (cream or suppository)
Tucks
Anusol (cream or suppository)

Heartburn/Indigestion, Gas

Tums

Rolaids

Prilosec OTC

Gas-X

Mylanta

Tagamet

Gaviscon

Riopan

Do Not Use: Pepto-Bismol (contains aspirin) Alka-Seltzer

Yeast Infections

Monistat

Vagistat

Toothache

Orajel

May see dentist and have cavity filling with Novacaine, have dental x-ray with lead shield

Sweetners

Nutrasweet

Splenda

Stevia

Do Not Use: Sweet and Low (Aspartame)

First Aid Preparations

Polysporin

Cortaid

Lanacort

Lice Treatments:

Rid

Do Not Use: Kwell

Smoking, Alcohol, and Street Drugs:

DO NOT SMOKE, USE MARIJUANA, OR CONSUME ALCOHOLIC BEVERAGES. This is probably the single most important thing you can do for your baby!! If you smoke, even a small amount, please discuss with your doctor ways you can quit. Smoking not only causes prematurity, low birth weight and decreased intelligence in babies, it can create lifelong problems for your baby. It is also important that you not be exposed to “second hand” smoke. No one should smoke around you. Take this opportunity to encourage everyone in the family to quit smoking. Alcohol can cause birth defects and poor fetal growth and should be avoided. If you are in the habit of having even an occasional drink, please stop and discuss with the doctor.

DO NOT USE METH, MUSHROOMS, COCAINE, ECSTACY OR OTHER STREET DRUGS. These drugs are extremely dangerous to both you and your baby. If you are taking these drugs, please discuss with the doctor ways you can quit.

FOODBORNE RISKS IN PREGNANCY

Certain soft cheeses, ready-to-eat meats (including packaged luncheon meats and deli meats) and unpasteurized milk (and products made from it) can cause a form of food poisoning called Listeriosis. Listeriosis is caused by a bacterium and can be especially dangerous during pregnancy. Pregnant women should follow these guidelines from the FDA:

- Do not eat hot dogs or luncheon meats (including deli meats such as ham, turkey, salami, and bologna) unless they are reheated until steaming hot.
- Avoid soft cheeses such as feta, brie, Camembert, Roquefort, blue-veined, queso blanco, queso fresco or Panela, unless it is labeled as made with pasteurized milk. Hard cheeses, processed cheeses, cream and cottage cheeses are safe.
- Do not eat refrigerated pates or meat spreads. (Listeria thrives at refrigerator temperatures.) Canned and shelf-stable versions are safe.
- Do not eat refrigerated smoked seafood unless it has been cooked (as in a casserole). Canned and shelf-stable versions can be eaten safely.
- Do not consume unpasteurized juices, milk, or foods made from it.
- A pregnant woman who eats liver regularly may consume enough vitamin A to pose a risk to her baby. Though it is not proven that eating liver cause's birth defects, the safest approach is for pregnant women to minimize their consumption of liver.
- Always wash vegetables and fruits before eating and refrigerate unused cooked foods promptly.

Advice on Mercury in Fish & Shellfish (FDA & EPA)

Fish and shellfish contain high-quality protein and other essential nutrients, are low in saturated fat, and contain omega-3 fatty acids. A well-balanced diet that includes a variety of fish and shellfish can contribute to heart health and children's proper growth and development. Yet, some fish and shellfish contain higher levels of mercury that may harm an unborn baby or young child's developing nervous system. The risks from mercury in fish and shellfish depend on the amount of fish and shellfish eaten and the levels of mercury in the fish and shellfish. By following these recommendations for selecting and eating fish or shellfish, women and young children will receive the benefits of eating fish and shellfish and be confident that they have reduced their exposure to the harmful effects of mercury.

- DO NOT eat Shark/Swordfish/King Mackerel/Tilefish because they contain high levels of mercury.
- DO eat up to 12 ounces (2 average meals) a week of a variety of fish & shellfish that are lower in mercury.

- Five of the most commonly eaten fish that are low in mercury are shrimp, salmon, pollock & catfish.
- Another commonly eaten fish, albacore ("white") tuna, has more mercury than canned light tuna. So, when choosing your two meals of fish and shellfish, you may eat up to 6 ounces (one average meal) of albacore tuna per week.
- Check local advisories about the safety of fish caught by family and friends in your local lakes, rivers & coastal areas. If no advice is available, eat up to 6 ounces (one average meal) per week of fish you catch from local waters, but don't consume any other fish during that week.
- Follow these same recommendations when feeding fish and shellfish to your young child but serve smaller portions.

For more information, toll-free at 1-888-SAFEFOOD or
www.cfsan.fda.gov/seafood1.html

Prenatal Appointment Schedule

First Visit:

- Orientation Visit
- Assign due dates
- Discuss prenatal vitamins
- Order labs and first ultrasound

About 12 weeks (or second visit-with Physician)

- Discuss prenatal laboratory testing and Ultrasound
- Check weight, BP, and urine
- Discuss genetic screening
- Obtain history and physical exam
- NT Ultrasound, screening test for genetic disorders

About 16 weeks:

- Listen for fetal heart tones and check uterine size
- Discuss/Order additional Genetic Screening
- Check weight, BP, and urine

About 20 weeks:

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine
- Anatomy Ultrasound

About 24 weeks:

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine

About 28 weeks:

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine
- Bloodwork: One-hour glucose test (fasting is not necessary), CBC, syphilis test, Vitamin-D level
- Information on cord blood banking
- A Rhogam injection is given to patients who have
Rh negative blood type

About 30 weeks:

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine
- Discuss glucose test results
- Order Third Trimester Ultrasound
- Pre-register at hospital
- Discuss Pediatrician and birthing classes
- Sign narcotic consent form

About 32-36 weeks (every 2 weeks):

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine

About 36-37 weeks:

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine
- Group B strep culture of the vagina/rectum

About 37-39 weeks (weekly):

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine
- Discuss labor and delivery
- Cervical examination

About 40-41 weeks:

- Listen for fetal heart tones and check uterine size
- Check weight, BP, and urine
- Ultrasound Biophysical Profile fetal testing
- Cervical examination
- Discuss management plan for delivery on an individual Basis

After C-Section:

- 2 week - Post-op incision check
- 6 week – Postpartum visit, discuss birth control options

4 weeks after Vaginal Birth

- Postpartum visit, discuss birth control options

During your pregnancy, you may periodically be scheduled to see our Physician Assistant at our Care Center, or you may be given the option to see her, if the doctor has to leave for a delivery.

Pregnancy consists of 13 visits on average: monthly visits until 28 weeks, then every 2 weeks until 36 weeks, and then weekly until delivery. As you can see above, many important tests are performed at specific weeks of pregnancy. Attending all your OB appointments (even routine) is your part of ensuring a safe pregnancy and optimal outcome. Keep in mind that problems or high-risk factors may warrant additional visits.

Our clinical staff will contact you with any laboratory results that are abnormal and need attention. Normal results will be discussed at your next visit. If you have any concerns or questions at times other than your routine visits, you may call our office.

Thank you for allowing us to be part of this incredible time in your life!