

EMPOWERED OBGYN
WOMEN'S HEALTH AND WELLNESS

OB Education

1st appointment between 6- 10 weeks:

- Confirmation of pregnancy with urine pregnancy test
- How Prenatal care visits are scheduled to include an Ultrasound at 20 weeks
- Tests that will be ordered throughout the pregnancy
- Nursing will discuss topics such as:
 - Travel
 - Exercise
 - Seatbelts
 - Fluid intake
 - Breastfeeding
 - Vitamins
 - Hospital of delivery
- Nutritional assessment
- Prenatal lab tests ordered
- Viewing the OB video-welcome visit

**Depending on when you have your first visit you may have more visits in between your first visit and your routine 12-week visit. Heart tones are not performed until your 12-week visit.

12 Weeks:

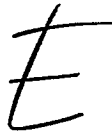
- Prenatal Visit—
 - Heart tones
 - Fundal height
 - Lab tests reviewed
 - Pap smear (if needed)
 - Urine dip

16 Weeks:

- Prenatal Visit—
 - Heart Tones
 - Fundal Height
 - Urine Dip
- Discuss possible AFP (Quad Screen) testing
- Counsel on weight gain
- Smoking cessation
- Seatbelt usage

20 Weeks:

- OB ultrasound w/ ultrasonographer
- Prenatal Visit—
 - Heart Tones (on US)



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- Fundal height
- Urine dip
- Discuss AFP results (if applicable)
- Prenatal classes encouraged
- Ultrasound discussed

24 Weeks:

- Explain glucose tolerance test
- Blood count urine testing
- Fetal kick counts
- No smoking
- Sterilization options
- Drinking water
- Eating habits
- Seatbelts
- Discussed Rhogam injection (if needed)
- Traveling restrictions
- Prenatal visit—
 - Heart tones
 - Fundal height
 - Urine dip

28 Weeks:

- Prenatal Visit—
 - Heart tones
 - Fundal height
 - Urine dip
- Travel Counseling
- Fetal Movement Discussed with kick count sheet given
- Preterm labor signs and symptoms discussed
- Prenatal classes encouraged

32 Weeks: Same as 28 weeks PLUS:

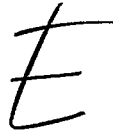
- Discussion of pediatrician
- Circumcision if applicable
- Classes attending
- Breast or bottle feeding

34 Weeks: Same as 28 weeks PLUS:

- Smoking discouraged
- Travel discussed
- Reassurance give about delivery

36-40 weeks: Same as 28 weeks PLUS:

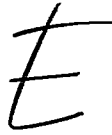
- Labor Instructions given
- Car seat for the baby discussion
- Review labor symptoms
- Delivery plan
- Reassurance given



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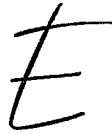
Over the Counter Medications Safe for Pregnancy

- For Allergies:
 - Benadryl
 - Claritin (if no high blood pressure)
 - Zyrtec
 - For Cold & Flu:
 - Tylenol (acetaminophen) or Tylenol Cold
 - Warm salt/water gargle
 - Saline nose drops or spray
 - Sudafed
 - Actifed
 - Dristan
 - Neosynephrine
 - Robitussin DM
 - Trind-DM
 - Vicks cough syrup
 - Romilar
 - Halls
 - Chlorpheniramine (Chor-Trimeton)
 - Clemastine fumarate (Tavist)
 - Mucinex or Mucinex DM
 - WARNING: do not take SA (sustained action) forms of these drugs or the Multi symptoms.
 - For Constipation:
 - Metamucil (any fiber supplement)
 - Senekot
 - Colace
 - Milk of Magnesia
 - Fiberall/Fibercon
 - Citrucil
 - For Diarrhea: (For 24 hours only, and only after the 12 the week of pregnancy)
 - Immodium
 - Parepectolin
 - First Aid Ointment:
 - J & J, Bacitracin
 - Neosporin
 - Polysporin
 - For Headaches:
 - Acetminophen (Tylenol)
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- For Heartburn:
 - Riopan
 - Maalox
 - Mylanta
 - Tums
 - Titalac
 - Gaviscon
 - Prilosec
 - Zantac
 - Tagamet
 - Pepcid
 - Rolaid
 - Nexium
 - Prevacid
- For Hemorrhoids:
 - Preparation H
 - Anusol
 - Tucks
 - Witch Hazel
- For Nausea & Vomiting:
 - Vitamin B 6 100 mg tablet
 - Emetrol (if no diabetes)
 - Emetrex
 - Sea Bands
 - Ginger (but not in large quantities)
- For Rashes:
 - Hydrocortisone cream or ointment
 - Caladryl lotion or cream
 - Benadryl cream
 - Oatmeal bath (Aveeno)
- For Yeast Infections:
 - Monistat
 - Terazol
 - ***WARNING: do not insert applicator too far.



Nausea & Vomiting During Pregnancy

WHEN: First three months and should be over by the 16th week of pregnancy. **WHY:**

- 1) The body reacting to the change in hormones.
- 2) Decreased vitamin B6 or glycogen (the sugar stored in your liver).
- 3) Slowed gastric emptying.
- 4) Gastric overloading.
- 5) Psychological stress and fatigue.

TRY THIS:

- If you have morning sickness, nibble on some crackers or dry cereal placed at your bedside. If you do not have trouble with Crohn's or irritable bowel syndrome, you can also have ginger ale and ginger snaps at the bedside. Eat this about 20-30 minutes before you get out of bed.
- Try some peppermints.
- Take prenatal vitamin at night instead of the morning.
- Eat small frequent meals every two to four hours, and a high protein snack before bedtime (lean meat or cheese). Protein takes longer to digest.
- Eat slowly and chew your food completely.
- Avoid spicy, rich foods, high fat foods, or any foods that seem to give you indigestion.
- Avoid strong smells or cooking odors if they bother you.
- Try spearmint oil (drops 1-2), on your pillow.
- Take extra Vitamin B6 50 mg a day while nauseated.
- Drink liquids between meals instead of with them.
- Try applying firm deep pressure to the inner forearm about two inches above the wrist crease. Massage for two minutes one arm and then the other.
- Antinausea bracelets (Sea band), fits snugly around your wrist and applies pressure to the above designated area. These can be found at drug stores, health food stores, and boating supply shops.
- Ask about the relief band that works on a principal of a TENS unit with electrical stimulation that blocks the nausea urge.

****WARNINGS****

- Report weight loss over two months, dry mouth and dark colored urine.
 - If you can keep down fluids the baby will take the nutrients it needs. However, if you can not keep down food or fluids for six hours or more, due to dehydration, this must be reported.
 - Report any vomiting beyond 16 weeks gestation as this may be an indication of an underlying medical condition.
 - Report if you have tried all the steps above, without relief. In severe nausea and vomiting there are medications that can be used.
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Fetal Movement Instructions

Helpful Hints

Many babies are most active after their mothers have eaten. So, often the fastest way to complete this test is within one hour after a meal. Also, many mothers find it helpful to lie down on their side with their hands on their abdomen to do the fetal movement count.

To Do the Count

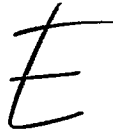
Healthy babies are usually active babies. Although, each baby has a unique activity pattern, the baby should have at least one 2-hour period each day that it moves at least 10 times.

When to Call the Doctor

1. Note the time you start.
2. Count until the baby moves 10 times.
3. Mark how many minutes it took the baby to move 10 times.
4. If you have trouble getting the baby to move, get up and move around a few minutes.
5. Then, lay down and count again.
6. If your baby still has not moved 10 times, call your doctor.

Warning Signs of Preterm Labor

1. Fluid gush or leaking from the vagina.
 2. Any bleeding from the vagina.
 3. Swollen face, hands or legs.
 4. Spots before your eyes or your eyes blur.
 5. Dizziness or bad headache.
 6. Sudden chills or fever.
 7. Pain or burning when you urinate.
 8. Continuous, severe pain in your abdomen.
 9. Vomiting for 2 days in a row.
 10. Abdominal/menstrual-like cramping may be constant or come and go. May be with or without diarrhea. Feels like the baby is "balling up" in the uterus.
 11. Low, dull backache-constant or comes and goes.
 12. Pressure-feels like the baby is pushing down or feels heavy.
 13. Increase or change in vaginal discharge-pink or bloody or watery.
 14. Fluid leaking from the vagina.
 15. Uterine contractions 10 minutes apart or closer.
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Labor Instructions

1. If the water around the baby leaks or breaks (gush of water) whether contractions are present or not, go directly to the hospital without waiting. The nurses there will contact us.
 2. If bleeding occurs heavier than just a small spot on a peri pad (larger than quarter size), whether contractions are present or not, go directly without waiting to the hospital. The nurses there will contact us.
 3. If you have contractions (without water breaking or bleeding) you may wait until contractions are regular and 3-7 minutes apart and lasting approximately one minute, then go to the hospital. If you are contracting more than four times per hour and your baby is not due, go directly to the hospital. The nurses there will contact us.
 4. If the baby has not moved, eat something, and lay down. If the baby has not moved five times in 45 minutes, then go directly to the hospital. The nurses there will contact us.
 5. If you have questions, call the office during office hours or the answering service after hours to contact us. If you are unsure about when to go to the hospital, call the Answering Service and we will talk with you directly. The number for the Answering Service is 702-457-5111.
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