# **Pregnancy Information Packet** Gary B. Sullivan, MD - 912 - 871 - 2000 1523 Fair Road, Statesboro, Georgia, 30458



I thank you for trusting me with your care during this extraordinary journey. My highest priority is the health, safety, and comfort of you and your baby. Here's an idea of what to expect during pregnancy. (6 pages)

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### **Initial Office Visit**

At your first office visit we will do a test to confirm your pregnancy, review your medical/obstetrical history, answer your questions, and get you started on a prenatal vitamin.

Draw blood to test your blood type, check for rubella (German measles) immunity, and screen for any health conditions that might require special attention during your pregnancy.

#### Next Step

Schedule the first ultrasound to confirm your due date.

Meet with the nurse to review nutrition, your family history, and your options for labor and delivery. You will have a complete physical examination, including a pap smear.

#### **Subsequent Office Visits**

- Office visits every 4 weeks until you are 26 to 28 weeks pregnant.
- Office visits every 2 weeks until you are 35 to 36 weeks pregnant.
- Weekly office visits after you are 35 to 36 weeks pregnant until delivery.

Certain conditions require more frequent office visits, such as: diabetes or high blood pressure, if you're 35 or older, if the baby is not growing as expected, history of pre-term delivery, etc...

#### **Testing during Pregnancy**

Between 15 and 20 weeks: The Quad Screen or AFP4 Test. This is an optional test that screens for birth defects.

Between 18 and 20 weeks: Anatomy ultrasound to assess your baby's growth and organ development. You may also to find out the sex of the baby, depending on its position.

Between 24 and 28 weeks: GTT, or diabetes screening, test. Scheduled in the morning, so you don't eat or drink after midnight the night before. It takes about one hour.

At the GTT appointment, you will receive a complimentary 4D ultrasound. The quality of this view will depend on the position of the baby.

Between 34-36 weeks: The G-BS (group B Strep) screening. A simple vaginal culture used to test for a common bacteria which may require treatment during labor. Possibly another ultrasound to estimate and assess fetal weight and position.

#### **Ultrasound Schedule**

First Office Visit Following a positive pregnancy test: Pelvic ultrasound to determine likely due date

Second Office Visit If less than 12 weeks gestation: Ultrasound to determine the fetal heart rate

Between 18 and 20 weeks. Anatomy ultrasound to check baby's internal organs and health - At this time, we can usually determine the sex of your baby

**Between 24 and 26 weeks.** 4-D ultrasound is offered free of charge. If we couldn't tell the baby's sex at the previous office visit, the 4-D ultrasound should make it clear - GTT (blood sugar) test as well

Between 36 and 37 weeks. Fetal weight ultrasound to check the approximate size of your baby

Additional ultrasounds can be scheduled by request. Costs are \$69 for a gender check and \$150 for 4D ultrasound and video. \*Please let us know in advance if you'd like a video of the ultrasound image.

#### **Common Complaints and Remedies**

**Backache** As the uterus grows, the spine sways, and can make back muscles ache. Hormone changes can cause joints to soften, which can be uncomfortable. Fatigue can worsen back pain. *Remedies: Avoid high-heels, avoid heavy lifting, get extra rest, and sleep with pillows between legs, under abdomen, or under back at night.* 

Breast changes are most likely due to hormone changes that prepare breasts for lactation and breast feeding. <u>*Remedy: Wear a fitted bra with plenty of support.*</u>

**Constipation** can occur because of raised progesterone levels, increased pressure on the bowels from the uterus, poor diet, inadequate fluids, or lack of physical activity. <u>Remedies: Drink more water, eat</u> <u>more fiber, and slowly increase physical activity. (Try taking a 20-30 minute walk every day)</u>

**Emotional changes** are a very normal part of pregnancy due to changing hormones, fatigue, and stress. <u>*Remedies: stress relieving techniques such as meditation or massage. Rest. Relaxation.*</u>

**Frequent urination** is common during the first and third trimesters of pregnancy. As the baby grows, there becomes more pressure on the bladder, even early in the pregnancy. In the second trimester, the bladder should increase its capacity, and urination is less frequent. As the due date nears, the baby's weight increases faster than the bladder can increase its capacity. Causing frequent urination and possibly false sensations of needing to urinate, but unable. <u>Remedies: Drink plenty of water, but</u> <u>decrease fluid intake an hour or two before bedtime. Avoid caffeine. Call our office if you feel pain or burning when you urinate or if your urine smells foul, is cloudy, or contains blood.</u>

**Heartburn or nausea** may occur as the expanding uterus displaces the intestines and the stomach. Increasing progesterone can affect stomach movements that are critical for digestion. Progesterone may relax the muscle of the stomach, allowing stomach acid to back up into the esophagus. <u>Remedies:</u>

- Track when nausea occurs & what causes it. Try making changes in diet or schedule accordingly
- Eat small, frequent meals. Eat slowly. Avoid overeating
- Avoid eating in overheated rooms or near disagreeable odors
- Avoid foods with strong or unpleasant odors
- Avoid raw vegetables and other gas-forming foods
- Drink only small amounts of fluids, or none at all, with meals. Ideally drink before or after meals
- Drink chilled beverages
- Sit and rest after meals, as activity may slow your digestion. But avoid lying down
- Try eating dry toast or crackers before getting out of bed to ease morning nausea
- After vomiting, try small amounts of clear liquids such as ginger ale or apple juice
- Once you are able to keep down clear liquids, then try a full liquid diet (soups, ice cream, etc.)
- Once you can tolerate a full liquid diet, then gradually re-introduce solid foods.
- You can use low-sodium antacids, but avoid sodium bicarbonate. (accepted medications list below)

Leg cramps can be caused by weight gain, pregnancy-related imbalances in potassium and calcium, and from increased uterine pressure on the nerves and blood vessels that go to the legs. <u>Remedies:</u> Apply heat to affected muscles. Increase calcium in your diet.

### **Accepted Medications List**

We recommend that you avoid taking medications during pregnancy. But if your symptoms are severe, the following medications are generally considered safe when used as directed.

- Allergies: Claritin, Alavert, Zyrtec, Chlor-Trimeton
- Body aches and pains: Tylenol (Acetaminophen) Take as directed
- Colds: Saline Nasal spray or room humidifier. If no relief, Actifed, Sudafed, Dimetapp, Benadryl, or Menol Sinus
- Constipation: Increase fluids & fiber in your diet. If no relief, Senekot, fiber supplements, Citrucel
- Colace, Milk of Magnesia, Glycerine or Dulcolax suppositories, Fleets enema
- Cough: Robitussin, Robitussin DM, Mucinex DM
- Diarrhea: Kaopectate, Imodium
- Gas: Mylicon (Simethicone), Mylanta Gas, Maalox Anti Gas, Gas X, Phazyme
- Headaches: Tylenol (Acetaminophen) as directed
- Heartburn: Maalox, Mylanta, Rolaids, Tums, Gaviscon, Titralac, Pepcid AC, or Tagamet HB
- Hemorrhoids. Soak in a warm tub. If no relief, Anusol HC suppositories or cream, 'Ihlcks pads, Preparation H, Proctocort
- Nausea: Emetrol, Dramamine, Vitamin B6 25 mg 3x/day
- Insomnia: Tylenol PM or Benadryl
- Itching: Benadryl
- Sore throat: Salt water gargles, throat lozenges, chloraseptic spray
- Vaginal yeast infection: Monistat, Gyne-Lotrimin, Fem-Care

If these medications do not bring the relief you need, please contact our office for other options.

#### **Important Note on Listeriosis**

Listeriosis is a food-borne illness caused by bacteria. Pregnant women are 13 times more likely to get listeriosis than the general population. Listeriosis can cause mild, flu-like symptoms such as fever, muscle aches, and diarrhea, but it may not cause any symptoms at all. Listeriosis can lead to miscarriage, stillbirth, and premature birth. To help prevent listeriosis, avoid eating the following foods during pregnancy:

- Unpasteurized milk, and foods made with unpasteurized milk
- Hot dogs, luncheon meats, and cold cuts (unless heated until steaming hot)
- Refrigerated meat spreads
- Refrigerated smoked seafood
- Raw and undercooked seafood, eggs, and meat

If you have eaten any of these foods, please let us know as soon as possible. If you do contract listeriosis, we can prescribe antibiotics to treat your infection and to protect your unborn baby.

#### Working while Pregnant

Most women can continue working safely throughout pregnancy, but that may depend on the type of work you do. Positions that allow you to sit to do most of your job usually mean you can work the full length of the pregnancy. However, the following working conditions may be hazardous in pregnancy.

- If you are required to stand for long periods, take 5 to 10 minute rest breaks every couple of hours.
- Avoid working shifts longer than 8 hours. Nap after work and get extra rest on your days off.
- If you climb stairs on the job, you should limit climbs to 6 to 8 times per shift. Climb stairs carefully, putting your full foot on each step. It is helpful to climb stairs sideways to avoid teetering forward or backward. Avoid climbing stairs or ladders after your 28th week of pregnancy.
- Repetitive Lifting at work should be limited to 25 pounds. As you lift, bend your knees, not your waist. Keep the objects you are lifting close to your body. Do not lift more than 25 pounds after 28 weeks.
- Extreme temperatures at work. Talk to your doctor.
- Hazardous materials at work. Talk to your doctor.
- Infectious diseases. If you are exposed or likely to be exposed to disease, tell us ASAP.

#### Sick leave from work

Certain factors may increase the risk of complications during pregnancy. Examples: previous preterm delivery, heart disease, high blood pressure, and kidney problems. Your healthcare provider considers these factors when advising you on whether you should continue working while pregnant.

Generally, employers pay sickness benefits to pregnant women only if they are unable to continue working because of strenuous or hazardous job duties or pregnancy complications. If your pregnancy is normal, more than likely you will not be eligible for sick leave. Check with your employer to know your benefits and when you can take maternity leave.

#### Packing for the Birth

#### For Mother:

Hospital papers

- Insurance documentation
- Night gowns, robe, and slippers
- Nursing bra and underwear
- An outfit to wear home
- Hair brush, hair dryer, hair care products, deodorant, soaps
- Toothbrush and toothpaste
- Pillows and pillowcases (preferably not white)
- Lollipops and hard candy
- Music for relaxation
- Books or magazines
- Snacks
- **Reading material**

For baby:

Clothes & Socks for the trip home

Blankets

Nail file/clippers

Diapers

Car seat (already installed in vehicle)