

EXPLANATION OF OBSTETRICAL CARE

Welcome! We are pleased that you have chosen our office for your obstetrical care. We wish to provide you the highest quality of obstetrical care. In pursuit of this you will need regular office visits to monitor your progress and the following prenatal tests will be performed:

| <u>TEST</u> | <u>WHEN</u> | <u>PURPOSE</u> |
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| 1. Routine prenatal blood work, PAP, cervical and urine. cultures | 1 st or 2 nd Prenatal visit | Determine blood type, blood count, rubella, (measles) immunity status, HIV, thyroid, blood sugar, hepatitis and syphilis screen, PAP smear, urine culture, and gonorrhea/chlamydia screen (if you feel you are at risk, STD screening can be repeated in the pregnancy) |
| 2. Sequential Screen (2-Step) | 11-13 weeks 16-18 weeks | Optional screening test for Down's Syndrome and Spinabifida involves blood work & ultrasounds |
| 3. Cystic Fibrosis Screen | 11-18 weeks | Optional Cystic Fibrosis screening offered |
| 4. One/Two-hour glucola blood test | 24-28 weeks | Screening for asymptomatic diabetes in pregnancy |
| 5. Group B streptococcus vaginal culture | 35-36 weeks | Screen for Group B Strep carriers that will need antibiotics in labor |

Rh NEGATIVE PATIENTS ONLY:

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| 6. Antibody screening and Rhogam injection | 28 weeks | To screen and prevent Rh sensitization |
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We also recommend a screening ultrasound be performed in the second trimester around 18-20 weeks. This allows us to confirm your due date, look at the baby's major organs, placenta and amniotic fluid, and possibly pick up any problems at an early stage of the pregnancy. We also recommend an ultrasound in the first and third trimesters, but Medicaid and some insurance carriers will only cover one ultrasound in pregnancy. We will provide a black and white photo and you may bring a VHS tape to record your ultrasounds.

We now have 3D/4D ultrasounds available. This is not a covered service by insurance. The charge for this service is \$175 includes a color photo and either a CD or Flash Drive with live views of your baby's facial

expressions and movements. Appointments need to be scheduled and payment is expected at the time of service. All blood work, PAP, cultures and ultrasounds are billed separately from your obstetrical care. Some patients want cord blood storage drawn at delivery for which there is an additional charge.

We want what you want – a healthy baby; and we feel these tests are in keeping with the highest standards of care. Additional tests may be required as individually indicated. You have the right to refuse any testing.

COMMON QUESTIONS

Many of our patients have questions related to problems which commonly arise during pregnancy. Some of the most frequently mentioned concerns are discussed here. If your question is not answered here, we invite you to call the office at 593-0990 between 9:00 a.m. and 4:00 p.m. to discuss your special concern with us personally.

SPOTTING during the early months of pregnancy is quite common. If this does occur, immediately get off your feet, do not have sexual intercourse. It is common to have spotting after a vaginal exam. There may be some spotting when you pass your mucous plug as well. If the bleeding is more than spotting, call the office.

DOUCHING is not recommended during your pregnancy. You will naturally have increased secretions. Expect a white to yellow pasty discharge. If your discharge is symptomatic with itching, burning, sores etc., let us know and if an infection is present, something may be ordered.

BATHING habits can remain the same during pregnancy as they were beforehand; however, do not sit for extended periods of time in unusually hot water, i.e., hot tubs, saunas. Limit temperature to less than 101° and less than 10 minutes.

SEXUAL INTERCOURSE can be continued as long as you have had no premature labor in this pregnancy, there is no vaginal bleeding and no leakage of fluid which might suggest your water broke. You should not have intercourse if you have a partial or total previa (placenta covering cervix).

TRAVEL is usually safe. If traveling by car or plane, remember to walk at least hourly to prevent blood clots. Seat belts are mandatory. Most airlines will allow you to travel up until your last month of pregnancy. In the last month of pregnancy, it may be wise to stay reasonably close to the hospital (i.e., within 1 hour traveling time).

SWOLLEN FEET may be relieved by elevating your legs (i.e., lying on your side). Avoid prolonged standing or prolonged sitting. Avoid crossing your legs. These precautions will also prevent varicose veins. A good elastic support hose will help.

EXERCISE is permissible at levels you were used to before pregnancy. Keep your heart rate under 140. Warm up and cool down periods are recommended. Fatigue is common. You will find you need more rest. Adjust your activity as your body commands. Avoid hazardous sports such as horseback riding, snow or water skiing, etc. Avoid exercising to point of exhaustion or breathlessness. Avoid exercises that require you to be flat on your back.

NUTRITION – Eat a variety of foods from each of the four food groups daily. Try to eat 4-5 servings of a fruit or vegetable. The FDA advises NOT to eat shark, swordfish, king mackerel, tuna, and tile fish or golden or white snapper, bass, trout, or pike while pregnant. You may have other fish including shellfish, small ocean fish such as tilapia or light canned tuna, pollock, haddock, grouper, orange roughy, sardines, herring, salmon, catfish, farm-raised trout, crayfish, cod, flounder and croaker but limit to 1 serving per week. Be sure ALL meats – beef, pork, chicken, fish, lamb, etc. are thoroughly cooked. Makes sure hot dogs, deli meats are reheated and all cheeses are made with pasteurized milk. Calcium supplements (1000 – 1200 mg/day) may be needed if you are unable to provide at least 4 servings of a dairy product daily. You may add DHA supplement to your prenatal vitamin if it doesn't already have it. Animal studies show improved brain development with DHA. Limit caffeine beverage such as coffee, tea and colas to less than 300mg/day. (Coffee = 100mg, tea = 40mg, colas = 50mg). Alcohol is

discouraged. **SMOKING IS HARMFUL** to you and your “passenger” so if you are a smoker, decrease your usage to less than 5 cigarettes per day or better yet – **QUIT!!!**

ENVIRONMENTAL HAZARDS include strong chemicals, radiation exposure, contagious or infectious diseases, uncooked meats and cat feces (toxoplasmosis). If you own a cat, have someone else change the litter box. Also avoid contact with hamsters, gerbils, guinea pigs and mice.

FETAL MOVEMENT starts between 16-20 weeks. Counting fetal movements is a means of assessing fetal health. You should be able to count 10 movements per day after 28 weeks. If you perceive less movement, notify our office.

OVER-THE-COUNTER MEDICATIONS

In regards to **MEDICATIONS** in pregnancy, we ask that you try to limit your exposure to medications (including over-the-counter medications and herbal products). If, however, you find you need treatment for any of the following conditions, the medications listed below may be used.

If you experience **headaches** or **minor body aches** and pains, you may take Tylenol or Extra-Strength Tylenol (acetaminophen). Notify the office if you should develop a fever of 100.4° or higher.

For severe symptoms of **cold/sinus/allergies**, you may use an over-the-counter decongestant or antihistamine such as Claritin, Claritin-D, Sudafed, Benadryl, Tylenol Cold/Sinus/Flu, Contac, Theraflu or Triaminic products for a short period of 3 to 5 days. Commercial **cough** syrups or cough drops on a short 3 to 5 days basis is acceptable (Robitussin DM, Vicks 44E). We discourage the use of nose sprays during pregnancy. **Nose bleeds** are common in pregnancy. If you have great chest congestion or discomfort, fever or yellow, green or bloody sputum, call the office. For a **sore throat**, salt water gargles or over-the-counter sprays and lozenges are acceptable. If your throat should remain severely sore for more than 3 to 7 days, call the office for a possible throat culture.

Nausea or morning sickness can occur especially in the first trimester. An empty stomach can exacerbate this. Eat frequent small meals or snacks to keep something in your stomach; such as crackers before arising in the morning. Try taking vitamins after meals or at night. Avoid those foods that don't agree with you and take advantage of those that are better tolerated. Snacks can include crackers, pretzels, or popsicles. Tea (spearmint, raspberry, chamomile, peppermint) may be helpful. You may also try ginger found in ginger ale, ginger capsules (250 mg every 6 hours), ginger snaps, ginger spice, Vitamin B6 25mg every 8 hours, or Unisom, 1 tablet at night or ½ tablet in the a.m. and ½ tablet in the p.m., Benadryl, Emetrol, Emacheck and Bonine tablets are available in your pharmacy. You may also try wearing a “diving band” on your wrist, available in some pharmacies. For **diarrhea**, you may use Imodium AD or Kaopectate. If diarrhea should persist more than 5 days, or is **bloody**, call the office. With persistent vomiting or diarrhea watch for signs of dehydration such as decreased urination, increased thirst and dry membranes. Maintain appropriate fluids and electrolyte balance. Electrolyte solutions are available over-the-counter such as Gatorade. Please notify us if you have a high fever, show signs of severe dehydration such as lethargy or decreased urine output. Please use good hand washing to protect other household members from illness.

For an **upset stomach** or **heartburn** antacids are okay. Acceptable examples include Roloids, Maalox, Mylanta or Tums. Also Tagamet, Zantac or Pepcid may be used.

For occasional **constipation** a stool softener is acceptable (Colace, Surfak, Kaopectate Stool softener, Miralax, Flax Seed) but you should try to avoid enemas. Drink 6-8 glasses of water per day, exercise and include raw fruits and vegetables and whole grain products in your diet. Fiber products such as FiberCon, Metamucil and Citrucel are available at your pharmacy. For hemorrhoids try Preparation H with 1% hydrocortisone in ointment or suppositories. An occasional laxative (Perdiem, Dulcolax tablet, Senokot) is acceptable. We also recommend a natural “Bowel recipe” which you mix 1 cup unprocessed wheat bran or miller's bran, 1 cup apple sauce and ¼ cup prune juice. Take 2 TBSP in AM and 2 TBSP in PM.

Insomnia is common also during pregnancy. If you find the need for a sleeping aid, Unisom may be used, but only for occasional limited use.

If you have to have **dental** work done during your pregnancy, local anesthetics may be used. Be sure your dentist knows that you are pregnant so that you will be properly shielded if x-rays are taken. Bleeding from gums is common in pregnancy.

On the matter of **disability** for pregnancy, we allow four weeks before your due date if you choose to take it and six weeks postpartum for a vaginal delivery, and eight weeks postpartum for a Cesarean Section delivery. If you develop a medical complication during pregnancy, or in the postpartum period, your disability dates will be adjusted accordingly. We can only authorize disability for as long as you are “medically disabled”.

We welcome your husband, children or other family members who may accompany you for your office visits.

Childbirth classes are recommended. The hospital class is excellent. Registration starts as early as 28 weeks.

You will also need to select a pediatrician prior to delivery. They all prefer an office visit prior to delivery to get acquainted and answer your questions.

When you feel your labor has begun (usually contractions every 5 minutes for an hour), or if your bag of water has broken, proceed to Labor and Delivery. They will call us upon your arrival. You may pass a mucous plug; if you do, just watch for other signs of labor such as regular uterine contractions or leakage of fluid.

We welcome you to call the office if you have a problem or question. Please make calls between 9:00 a.m. and 4:00 p.m. Monday thru Thursday. For emergencies only, after hours, call 498-3243 and the answering service will forward the call.

We sincerely hope this is helpful to you and that your pregnancy experience with us is a pleasant one.

Sincerely,
Dr. Brothers, Dr. Humphrey, Dr. Marshall and Dr. Bevins