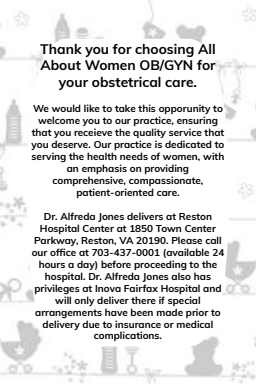


*The Pregnancy  
Guide*



The background features a light gray grid with various medical and baby-related icons. At the top, there are icons of a stethoscope, a heart, and a baby's head. On the left side, there is a baby bottle. On the right side, there is a baby's head in profile. At the bottom, there are icons of a baby stroller, a pair of scissors, a baby stroller, a baby's head, and a pair of shoes. The text is centered within this grid.

**Thank you for choosing All  
About Women OB/GYN for  
your obstetrical care.**

**We would like to take this opportunity to welcome you to our practice, ensuring that you receive the quality service that you deserve. Our practice is dedicated to serving the health needs of women, with an emphasis on providing comprehensive, compassionate, patient-oriented care.**

**Dr. Alfreda Jones delivers at Reston Hospital Center at 1850 Town Center Parkway, Reston, VA 20190. Please call our office at 703-437-0001 (available 24 hours a day) before proceeding to the hospital. Dr. Alfreda Jones also has privileges at Inova Fairfax Hospital and will only deliver there if special arrangements have been made prior to delivery due to insurance or medical complications.**

# Congratulations on your pregnancy!

We want to do everything we can to make your pregnancy and birth experience positive, healthy, and special. We are sure that you have many questions, especially if this is your first pregnancy. We have designed this packet to give you basic information about the first months of pregnancy. We will also provide you with more information about the later months further into your pregnancy.

Please use this information as your guide, but remember that no two people or pregnancies are the same. Our obstetric providers are the best source of health information that is just right for you and your baby. Talk with the providers about anything that concerns you and ask any questions you may have.

Many of the changes that you will experience are normal and natural. This purpose of this packet is to help you know what to expect. It will also give you the information you need to decide if something is not going right so that you can call our office if needed. For your convenience, a summary of the things that you should call our office about is listed here. More information about each of these things is included in the packet.

We hope you find the information in this packet helpful. We wish you and your family the happiest and healthiest pregnancy.



## WHEN TO CALL YOUR PROVIDER

Please call our office if you have any of the following.

Please call any time. Someone is always available to you by phone.

- severe nausea and vomiting (not being able to keep anything down for an entire day)
- bleeding from your vagina
- decreased fetal movement
- leaking fluid
- discharge from the vagina that smells bad, itches, or causes pain
- pain or burning on urination
- pain in the lower abdomen
- severe headache not relieved by acetaminophen (Tylenol)
- fever of more than 100 degrees
- you think you have been exposed to a contagious disease
- severe depression or emotional upset
- someone in your life is making you feel unsafe

# Although many weeks may pass before there are outward signs of pregnancy, your body is changing tremendously.

You may feel a wide range of emotional and physical reactions. Even if you have been pregnant in the past, you may find that each pregnancy is unique and that you have a different set of reactions and feelings during this particular pregnancy. We will provide you with a list of some of the things that commonly occur and include some ideas on how to manage so you feel your best. Please ask our providers any questions you may have related to the changes in your body, your emotions, and your life during this special time.

## FEELING TIRED

Many pregnant individuals feel more than usual during the first weeks of pregnancy. This is totally normal! Your body is adjusting to meeting the needs of your growing baby.

Try these tips to help balance your body's need for rest and exercise:

- Try to plan rest periods if you are able. In an important way, being tired is a signal from your body (and your baby) that rest is needed. It is important that you learn to listen to your body's signals and take action if possible.
- Plan power naps at lunch or after work. Settle in to bed as early as your schedule permits. Many find that doing mild exercise on a regular basis helps them feel more energized.
- Take your prenatal vitamins and eat a well-balanced diet. Good nutrition will help ensure that you have enough energy for you and your baby.

## NAUSEA, VOMITING OR HEARTBURN

Pregnancy hormones affect the way your stomach operates. They also affect your sense of smell and appetite. In some cases, this can lead to nausea. Some find that spicy foods or strong odors cause make nausea worse. Hormones can also affect the acid in your stomach, which leads to the classic symptoms of heartburn and indigestion.

Even though it might sound strange, one of the best ways to fight nausea in pregnancy is to keep food on your stomach. This means eating small amounts of food throughout the day.

- Eat as soon as you feel hungry
- If morning nausea is an issue, keep some high-carbohydrate foods, such as crackers or bread next to your bed as soon as you wake up.
- Take antacids as needed for heartburn. These are safe during pregnancy.
- Ginger has been shown to help relieve nausea. Try ginger ale, ginger tea, or cook with ginger.
- Please call us if you are not able to keep anything down for 24 hours!

## **FOOD CRAVINGS, FOOD AVERSIONS, AND HUNGER**

Many people experience food cravings during pregnancy. In general, cravings are not a problem. If you crave sweets, such as cake, it's okay to indulge occasionally. Try to limit your intake of foods high in sugars and fats. Cravings for more nutritious foods can almost always be fulfilled without worry.

You may suddenly find that you cannot stand the thought of food you once loved. Food aversions are common in pregnancy, and you should not worry as long as you continue to eat a wide variety of healthy foods. (Tips on healthy eating will be included later in this packet).

Some are less bothered by nausea or cravings, but they develop a super strong appetite. They find themselves wanting to eat every few hours or even around the clock. Just listen to your body's signals. If you find you need to eat frequently through the day or at night, stock up on nutritious, filling foods. It is usually best not to ignore intense hunger because this can lead to nausea.

There is one caution you should be aware of about cravings. Although it might sound strange, some pregnant individuals have a strong desire to eat non-food items during pregnancy.

This phenomena is called, *pica*. And it causes women to eat things like dirt, ice freezer frost, clay, or paint. It is not known why this happens sometimes. Talk with a provider if this happens to you! Together you can plan ways to avoid eating substances that are not good for you and your baby.

## **HEADACHES**

Pregnancy hormones can trigger headaches in some individuals. This may be especially true if you were prone to headaches before you became pregnant. Some have headaches that cause vision changes during pregnancy. It's a good idea to have your eyes examined during pregnancy. If you wear glasses or contacts, your prescription could change. It is good to have your eyes checked even if you have never worn glasses as well.

If your headaches are severe, be sure to call our office!

You can try taking acetaminophen (Tylenol) for your headache. Never take more than the recommended dose of any product containing acetaminophen. Do not take other pain relievers such as aspirin, ibuprofen (Motrin or Advil), or naproxen (Aleve) unless approved by a provider. Be sure to tell your provider if you've been asked by another doctor or nurse to take aspirin or another medicine each day to prevent blood clots.

## **GAS AND CONSTIPATION**

Early in pregnancy, hormone changes affect your stomach and bowels, causing more gas and, in some cases, constipation. Later in your pregnancy, the pressure of the baby on your intestines can interfere with moving the bowels.

All the usual diet and exercise remedies for these problems also help when you are pregnant. Drink plenty of fluids, get enough exercise, and make sure you have fiber in your diet.

If needed, you may take a stool softener, such as Colace (docusate sodium) or a fiber supplement like Metamucil or Fibercon. Please talk with your provider about whether taking a laxative is right for you.

Kegel exercises as later detailed in this packet can sometimes help if you have problems with gas. Gentle heat to the abdomen can help as well.

## **FREQUENT URINATION, LEAKING URINE WHEN YOU LAUGH OR COUGH**

Early in pregnancy, hormones can cause you to urinate more often than usual. They also relax the muscles in your genital area, which can lead to leakage of urine. Later, your baby's weight puts pressure on the bladder, which can also cause frequency and leakage.

Do not be concerned about going to the bathroom often, unless there is pain or burning when you urinate. If this happens, call the office for advice, you could have an infection.

If you are getting up a lot during the night to use the bathroom, try to stop drinking fluids a few hours before bed time.

If leakage is an issue, try learning Kegel exercises, which strengthen the muscles in your genital area. These are further described later in the packet.

Empty your bladder often to avoid problems.

You can use a panty-liner or pad throughout pregnancy to help with leakage when they laugh or cough.

The moisture from leakage of urine, combined with an increase in vaginal discharge during pregnancy, causes some to develop irritation in the genital area. Keep the area as dry as you can. If you wear a pad, be sure to change it frequently. Allowing the area to air-dry is helpful as well. You can do this for part of each day by sleeping without underwear.

If urine leakage becomes a severe or ongoing issue, now or in the future please be sure to tell a provider. Treatments are available that can help.

## **BREAST TENDRNESS OR LEAKING FLUID FROM THE BREASTS**

Hormones cause your breasts to get larger during pregnancy, and can also sometimes cause fluid to leak from your breasts even before delivery.

Wear a supportive bra that is the right size; make sure it fits well.

You may go up two or three bra sizes during your pregnancy. If the cost of bras is a concern, do not buy too many in-one-size until you get a sense of how large your breasts will get.

Many find sports bras comfortable during pregnancy. They provide support while also allowing room for your breasts to grow.

Underwire in bras may increase discomfort and constrict your breasts as they grow; however, for some people that added support of the underwire could be important. Choose what is most comfortable for you.

## **VAGINAL DISCHARGE**

Your body naturally increases the secretions in your vagina during pregnancy. These secretions can help prevent bacteria from entering the uterus. The secretions should be white or pale yellow. They should NOT be bloody, smell bad, or cause pain or itching.

Remember, more wetness in your genital area is normal now. Practice a good hygiene routine and wear cotton underwear to help feel fresh.

Do not douche.

Sleeping without your underwear helps promote drying of your genital area.

Call the office and inform a provider if your discharge is bloody, smells bad, or causes itching or pain.

## **HEMORRHOIDS**

Hormones cause the walls of the blood vessels in your rectum to relax, which can lead to hemorrhoids. Later the pressure of the baby can intensify the problem. Constipation can also worsen hemorrhoids.

Follow the advice we give you earlier in the packet on avoiding constipation.

Use hemorrhoid creams such as Preparation H which you can purchase at the drug store.

## CHANGES IN YOUR LEGS

The weight of your baby can have an effect on the blood vessels in your legs. For some, varicose veins become an issue during pregnancy. Others have issues with the swelling on ankles and feet.

For mild swelling, elevate your feet and legs whenever you can is the best treatment. Try not to sit or stand without moving for long periods of time and do not cross your legs or ankles when you are sitting. If you are traveling and need to be in a car or a plane for a long period of time, make sure to fit in a short walk at least every two hours.

For more severe swelling, or to treat the swollen veins in your legs (varicose veins), you may want to try compression stockings. These are specifically made to help move fluid and blood out of your legs and back into your circulation. The stockings come in various weights depending on the amount of support they provide. The lightest weights can be bought without a prescription. In more severe cases, ask about giving you a prescription for stockings of a higher weight for better support. Be sure to talk with a provider if leg swelling is a serious issue for you.

## EMOTIONAL CHANGES

Hormones can significantly affect your mood and emotions. The hormone changes of pregnancy will have some effect on how you feel. In addition, just being pregnant is bound to cause strong emotions, which can vary depending on each individual's unique factors.

While mood swings are normal to a certain extent, some people are prone to develop issues such as depression during this time. This is especially true for those who have depression or other mental problems prior to pregnancy. Those who have close relatives with mental health issues may be higher risk for developing these conditions as well.

Be sure to talk with a provider about any feelings you are having that are causing you concern.

If you were taking antidepressants or another mental health medication prior to your pregnancy, talk with a provider about the medication you have been taking. Try to have this conversation as soon as possible during the course of your pregnancy. In general, it is not a good idea to stop taking antidepressants without supervision.

If you have seen a therapist or counselor in the past, think about scheduling an appointment to talk over how you are feeling as your pregnancy develops.

## CHANGES IN RELATIONSHIPS

Pregnancy is a time when relationships shift and change in new ways. Some partners pull together as they prepare for the birth of their baby - spending more time together, going to appointments, looking for baby clothes and equipment. Pregnancy can also increase the stress or tension in a relationship. The pregnant partner may be very tired and unable to attend to other family duties. The pregnant individual may not be available in the same way during the pregnancy. The other partner could feel resentful or possibly jealous of the attention focused on the baby or the upcoming birth. If there has been violence or controlling behavior in the relationship, this may get worse during pregnancy.

## RESOURCES

It is important that you feel safe and supported during your pregnancy and otherwise. Therefore, we have provided you with a few numbers you might need.

- **National Domestic Violence Hotline: 1-800-799-7233**
- **Suicide and Crisis Line: Dial 988**
- **Family Services Support:**
  - **Fairfax County: 703-324-1500**
  - **Loudoun County: 703-777-0353**
  - **Prince William County: 703-361-8277**

"If you do not live in one of these counties, ask a staff member to help you find the family services contact information for your county."

# Prenatal Care Overview

## ROUTINE PRENATAL CARE AND TESTING

As your pregnancy progresses you will see us for routine obstetrical visits more frequently. At each appointment we will check your weight, blood pressure, and urine. We will also check the baby's heart rate. We will answer any questions you have pertaining to your progress and what to expect as your pregnancy continues.

## APPOINTMENTS

Depending on how many weeks you are at your initial appointment we may check bloodwork to confirm the pregnancy and perform or order a dating ultrasound.

Once your pregnancy is confirmed, we will begin seeing you based on the following schedule:

- First Trimester - Up to 26-28 weeks: appointments every **four weeks**
- 26-28 weeks-35-36 weeks: appointments every **two weeks**
- 36 weeks and beyond: appointments **every week**

## ROUTINE PRENATAL LAB WORK AND GENETIC TESTING OPTIONS

- At your first prenatal appointment we will collect lab work that is standard for every pregnancy patient. The labs are broken down for you on the next page.
- You also have the option to do prenatal testing to screen for chromosomal abnormalities and open neural tube defects during your first and second trimester as follows (more information on genetic testing is included later in this packet).
- In the late second trimester, you will have blood work collected to screen for gestational diabetes and anemia.
- Finally, in the home stretch around 36 weeks the last lab performed on all patients is a rectovaginal swab to screen for group beta streptococcus bacteria. This bacteria is normal for women to have but can cause some babies to become very sick if the bacteria is not treated with antibiotics in labor.

## ULTRASOUNDS

During pregnancy, we generally recommend performing 4 ultrasounds:

- **Bating Ultrasound (7-13 weeks):** confirms due date and location of pregnancy
- **Nuchal Translucency (-13 weeks):** measures the thickness of a space at the back of the fetus's neck. **(Optional)**
- **Anatomy (Level III) Ultrasound (20-22 weeks):** involves thorough evaluation of fetal anatomy and organ systems, including identification of fetal sex if you would like to know.
- **Third Trimester Ultrasound (36 weeks):** evaluates position of the baby, amount of amniotic fluid around the baby, and estimated fetal weight (please note not all insurance companies cover a sonogram at 36 weeks, and a sonogram at 36 weeks is not necessary for every patient).

**IF AT ANY POINT YOUR PREGNANCY BECOMES HIGH RISK, YOU MAY NEED ADDITIONAL VISITS, LAB WORK, ULTRASOUNDS, OR FETAL MONITORING TO ENSURE THE SAFETY AND HEALTH OF YOU AND YOUR BABY.**



# Routine Lab Work

## **PRENATAL LABS DONE AT FIRST VISIT:**

- HIV, hepatitis B, immunity to rubella, varicella, syphilis
- Blood type and Rh status, antibody screen
- Assessment for anemia, or hemoglobin disorders like sickle-cell disease
- Swab or urine test for gonorrhea, chlamydia
- Screening of urine to check for asymptomatic urinary tract infections
- Pap test to screen for cervical cancer if not up-to-date

## **28 WEEK LABS:**

- Recheck blood levels for signs of anemia
- Recheck for blood type/antibody testing
- Recheck RPR (screening for syphilis)
- Screening for gestational diabetes

## **36 WEEK LABS:**

- Recheck for signs of anemia
- Swab for group B streptococcus (GBS)

## **GESTATIONAL DIABETES SCREENING/TESTING**

Gestational diabetes (or diabetes of pregnancy) is a condition of impaired glucose (sugar) metabolism. It occurs due to decreased insulin function in the setting of pregnancy hormones. It is a common condition during pregnancy and often does not have any symptoms. Gestational diabetes occurs in approximately 6-9% of pregnancies in the United States.

The main risks of gestational diabetes include:

- **Macrosomia** (i.e., large baby): This can make vaginal delivery more difficult and cesarean delivery more likely.
- **Placental insufficiency:** This is a situation in which the placenta cannot adequately support the pregnancy.
- **Neonatal Hypoglycemia:** This is a condition of low blood sugar during the baby's first hours of life.
- **Hypertensive disorders:** Women with gestational diabetes are more likely to develop high blood pressure in pregnancy.

There are two tests for gestational diabetes: a glucose screening test and a glucose tolerance test. Both tests are described in detail below.

### **1-Hour Glucose Screening Test:**

Screening for gestational diabetes involves a blood test. The test is done between 24-28 weeks gestation.

- Drink a provided 50-gram bottle of flavored glucose 30 minutes before your appointment.
- Finish the drink within 5 minutes. For example, if you start drinking at 8:30 am, the drink should be finished by 9:30 am.
- The blood test must be drawn one hour after you finish the drink. When you check-in for your appointment, be sure to inform the front desk the time at which you finished your drink.
- This is NOT a fasting test, but do not have anything to eat or drink between drinking the drink and having your blood drawn.

**Results:** if the screening test result is normal, no further testing is required. If the screening test result is abnormal, a follow-up 3-hour glucose tolerance test (GTT) will be done.

### **3-Hour Glucose Tolerance Test (GTT):**

This test is done after an abnormal screening test result. It can be done on a walk-in basis without an appointment. You will receive more information about it from your healthcare provider.

- This IS A FASTING TEST. Do not eat or drink anything except plain water for 8-10 hours before the test.
- You will have a fasting blood glucose level drawn before drinking a 100-gram glucose solution.
- You will have blood levels drawn at 1 hour, 2 hours, and 3 hours after finishing the drink.

**Results:** if the 3-hour test is abnormal, a diagnosis of gestational diabetes is made. Once diagnosed, a patient will be referred to Maternal Fetal Medicine for further evaluation and management. Specific counseling regarding diet/lifestyle modifications and increased fetal testing will be given.

# Genetic Testing

The purpose of genetic testing is to achieve early insight into a baby's development, attain more information, and screen for or diagnose a birth or genetic defect. Genetic testing also assists our providers in caring for your pregnancy and determining if a baby may need special care immediately after birth. Early genetic testing can also give parents time to research and prepare for a baby who might have specific genetic problems, acquire early specialist care, make informed decisions about the method of becoming pregnant or about continuing an existing pregnancy. Even if you would not terminate a pregnancy that was found to be abnormal, many people undergo genetic testing for the knowledge that is acquired. All genetic testing is optional.

## **CARRIER SCREENING: BEACON INHERITEST CARRIER SCREEN**

You can be a "carrier" for a genetic disease and not know it. Even if a parent is not affected, they may carry a gene for a disease that is then passed on to their child. This is called being a "silent carrier." These conditions are usually autosomal recessive. This means that both parents must be carriers in order to have a child affected with the disease. Since carriers are often healthy, most do not know they are carriers until they have a child born with the disease. These diseases may cause birth defects, shortened lifespan, and intellectual disability. Unlimited complimentary Genetic Counseling is provided.

**Genetic testing is available to determine your risk.** The LabCorp Beacon Inherited Carrier Screen allows you to screen for mutations associated with over 175 genetic diseases. The test is for both men and women who are planning to have children now or in the future. The carrier screen is noninvasive, requiring only a blood or saliva sample. Knowing your genetic risk allows you to find out whether you are a "carrier" for genetic conditions. Most recent data show that 1 in 100 pregnancies are affected with one of the diseases on the carrier panel.

- Testing can be done at any point during or before a pregnancy. The testing only needs to be done once, since the genes that you carry do not change. Many patients choose to have testing done on themselves first, and then only have their partner tested if something is abnormal because, again, both parents would need to be carriers in order for a baby to be affected.
- **Your results are important for family planning.** You might be wondering what your results will mean, if you are found to have a high reproductive risk, you have options. You may decide to have pre-implantation genetic diagnosis (PGD), a process that assures that a child will not inherit the genetic disease, or undergo testing during your pregnancy. Some individuals consider adoption or opt not to have children. Even if you would not choose any of these options, you can use the information to better prepare for the possibility of having a child with a genetic disorder, such as seeking out a specialist or selecting a place of birth that can provide care specialized to the baby's needs. The information you learn can also give you an opportunity to connect with local community resources or create a custom birth plan.

## **Limitations to Genetic Carrier Screening:**

All genetic carrier screening tests have limitations. The primary limitation is that some individuals who are truly carriers will not be identified. These carriers may have rare genetic variants that are not screened for by commercial genetic tests, which typically look for the most common variants. Further genetic testing may be helpful, depending on individual circumstances, family history, and foresight results. For this reason, you may be recommended to consult with a genetic counselor, available through Myriad or locally.

## **Results and Genetic Counseling:**

**Results & Genetic Counseling:** Your results will be delivered to All About Women approximately 1-3 weeks after LabCorp receives your sample. Genetic counseling is available, free of charge, to discuss your results. Our practice strongly recommends that anyone with abnormal results contact a genetic counselor. When your results are ready, you will receive an email notification with included instructions on how to view your results and initiate an on-demand complimentary consultation with a genetic counselor. You can also schedule a consultation at any time through your LabCorp Portal.

If you would like to speak with a genetic counselor, call (215)-670-2078.

# Genetic Testing

## THE FIRST TRIMESTER SCREEN:

### Also called?

- FTS, NTD, NT, Nuchal Translucency + Blood Work

### What is it for?

- Screening test to assess a mother's risk for having a baby with Trisomy 21 (Down syndrome), Trisomy 18 (Edwards Syndrome), and Trisomy 13 (Patau Syndrome)
- Optional testing for presence of Y-chromosome (Male sex chromosome)

### Who is it for?

- Offered to all pregnant women
- Particularly those at lower risk for genetic abnormalities (i.e., women under age 35)

### When can it be done?

- Only during the first trimester

### How is it done?

- Blood test (between 9 1/7 weeks - 13 6/7 weeks gestation)
- ultrasound measurement (11 0/7 weeks - 13 6/7 weeks gestation)

### Additional information: First Trimester Screen

- The maternal blood test measures levels of specific biochemical hormones, including:
  - Human chorionic gonadotropin (beta-hCG) and pregnancy-associated plasma protein A (PAPP-A).
- beta-hCG is a hormone made by the placenta. High or low levels may be related to certain birth defects. PAPP-A is a protein in the blood. Low levels may be related to certain birth defects.
- The ultrasound detects the presence of a nasal bone and measures the amount of fluid accumulation behind the fetal neck.
- Also called the nuchal translucency or NT ultrasound
- An increased NT can be indicative of genetic abnormalities, or other structural defects
- Absent nasal bone can be indicative of genetic abnormalities and other structural defects
- Additional screening can also be added to screen for presence of the Y-chromosome to determine fetal sex. (Note: this is usually at an increased cost.)
- The results of the ultrasound are combined with the results of the blood test and maternal age to give a risk assessment of having a baby with trisomy 21, 13, or 18.
- These combined biochemical and biophysical markers yield very sensitive results, achieving a 93% detection rate at a 5% false-positive rate for Down syndrome, and a 96% detection rate at a 6.1% false-positive for Trisomy 18 and Trisomy 13. If the fetal nasal bone assessment is included, the detection rate for Down syndrome increases to 94% at a false positive rate of just 3%.

### What if a screen comes back positive or indicates elevated risk?

- If a screen comes back positive, you have the option of being referred for genetic counseling and of doing additional testing, including:
- Additional blood work for non-invasive prenatal testing (NIPT)
  - Diagnostic testing, including chorionic villus sampling or amniocentesis

# Genetic Testing

## NON-INVASIVE PRENATAL SCREENING

### Also called?

- NIPT, non-invasive prenatal testing (NIPT), cell-free DNA (cfDNA), MaterniT21 Plus Core + SCA

### What is it for?

- Screening test to assess a mother's risk for having a baby with Trisomy 21 (Down syndrome), Trisomy 18 (Edwards Syndrome), and Trisomy 13 (Patau Syndrome)
- Optional screening for presence of and abnormalities of the sex chromosomes
- Optional screening for chromosomal microdeletions

### Who is it for?

- Offered to all pregnant women, particularly those at higher risk for genetic abnormalities (i.e., women over age 35), or who have a personal or family history of chromosomal abnormalities.
- Women with twin pregnancies and donor gametes
- Women who have had a previous positive First Trimester Screen

### How is it done?

- Maternal blood test any time after 9 weeks

### Additional information: Non-Invasive Prenatal Screening (MaterniT21 Plus Core + SCA)

A blood sample is analyzed in the lab to measure fragments of fetal DNA in the maternal bloodstream (cell-free DNA). It looks for abnormalities in the amount of DNA from chromosomes 21, 18, 13, and the sex chromosomes. It can also detect some forms of microdeletions, or missing parts of chromosomes.

Prequel screening is about 97-99% accurate, with a small chance of false positive and a very small (0.1%) chance of a false negative. Prequel screening includes individualized positive predictive values (chance of a true positive) and residual risk based on age.

### Limitations to Non-Invasive Prenatal Screening:

All non-invasive prenatal screens have limitations. A normal result reduces, but does not eliminate, the chance of chromosomal abnormalities. It is important to know that these tests are NOT diagnostic and that any positive results should be followed up by CVS or amniocentesis (diagnostic tests) for confirmation, as well as referral to a genetic counselor.

# Safety During Pregnancy

## TOBACCO/SMOKING/VAPING

Smoking puts both the mother and fetus at risk. The fetus is exposed to chemicals such as carbon monoxide and nicotine. Studies show that smoking during pregnancy can lead to complications like vaginal bleeding, miscarriage, premature delivery, neurologic impairment, stillbirth, and Sudden Infant Death Syndrome (SIDS). Additionally, smoking reduces the oxygen available to the mother and fetus. Babies of mothers who smoke are likely to weigh less and be smaller. Infants and children who are exposed to environments where adults smoke can also have adverse effects. We encourage that you abstain from smoking and avoid second hand smoke when possible.

## DRUGS AND MEDICATIONS

Drugs of any type, including illicit drugs, prescriptions, or over-the-counter medications may affect the fetus. Some may cause severe problems, while others may have no adverse effect. Consult a provider about any medication you have been taking or plan to take to ensure that it is safe for you and your baby. If you have been taking medication regularly, check with your provider before stopping it, as the underlying condition treated by the medication may worsen upon sudden cessation. If you have been seeing a specialist for a particular condition, we will likely ask you to make a maintenance appointment with that physician during your pregnancy.

### Common medications that are dangerous for your baby:

- Accutane, Thalidomide (Thalomid), Acetretin (Soriatane)

### Medications that are safe to use during pregnancy:

#### Heartburn:

- Pepcid, Maalox, Mylanta, Tums, Zantac, Rolaids

#### Headache and Pain Remedies:

- Acetaminophen (Tylenol) only
  - Ask a provider what dose you should take and never take more than the recommended dose

#### Constipation:

- Colace
- Metamucil

#### Vitamins:

- Prenatal vitamins
  - Please take only the recommended dose. Do not take additional vitamins or supplements without asking a provider.

#### Colds:

- You may use any brand of cough drop or saline nasal spray
- Certain cough and cold remedies are okay, but some should be avoided.
  - Ask a provider about specific products and recommended cold medications.

## CHEMICAL EXPOSURE

It is common to be exposed to chemicals in the house and at work. However, anything you breathe or come into contact with could enter your bloodstream and reach your baby. It may be helpful to ask for assistance when handling particular substances during the following activities:

**-Hair color/dye:** Hair color and permanents are considered to be low risk. If you are considering any hair treatments, be sure to have them performed in a well-ventilated area. Have someone else apply the dye to your hair and make sure your scalp is rinsed thoroughly. If possible, try to avoid use during the first trimester.

**-Cleaning:** There is little evidence to suggest that the use of everyday cleaning supplies causes significant harm. It is best to avoid certain cleaning products such as ammonia and bleach, especially in an area that is not well ventilated. Instead, try using alternative cleaning solutions such as vinegar or baking soda, or switch to products that do not contain harsh chemicals.

**-Gardening:** Chemicals frequently used in gardening, such as insecticides, weed killers, and fertilizers, should be avoided.

**-Painting:** Oil- and lead-based paints are particularly dangerous. Use caution when painting while pregnant and avoid using paint removers/strippers, varnish, shellac, and turpentine.

**-X-Rays:** Minimal exposure to x-rays during pregnancy is considered safe. X-rays are thought to pose at most a remote risk to the baby. Most x-ray exams are performed on the legs, arms, chest, head, and teeth, minimizing radiation exposure to the reproductive organs. Wearing a leaded apron or collar can protect against any scattered radiation.

**-Cat litter:** Do not change cat litter. Have someone else change it for you, toxoplasmosis is transmitted through cat feces.

# Safety During Pregnancy

## HOT TUBS/SUNBATH:

Maternal exposure to extremely hot temperatures has been shown to cause birth defects. While comfortably warm tub baths and showers are safe, hot tubs and saunas are not. Avoid using them and engaging in other activities that raise core body temperature above 100° F.

## FALLS

It is important that your body remains a safe space for your baby to grow in. We recommend that you avoid any activity that increases your risk of falling or suffering abdominal trauma.

## PETS:

- **Dogs:** Dogs pose little to no threat to pregnant women. However, there is concern if a dog jumps on the abdomen of a pregnant woman. Although the likelihood of developing complications from this is low, it is best to train your dog not to jump and to avoid jumpy dogs. Also, avoid walking dogs that tend to pull forcefully on their leashes, as this could lead to a fall.

- **Cats:** Cats can carry toxoplasmosis, a parasite that is transferred to humans through contact with cat feces. Toxoplasma is most often found in outdoor cats, but can be found in indoor cats as well. It is best to have someone else at home change litter boxes; however, if you must be the one to clean the litter be sure to wear protective gloves and wash hands thoroughly after.

- **Amphibians/Reptiles:** Reptiles and amphibians, such as iguanas, turtles, snakes, and lizards, can transmit salmonella to humans who are exposed to their feces. Wash your hands after handling these pets, avoid having these pets around the kitchen/food preparation area, do not bathe them or clean the cage in the kitchen sink, and do not let them roam freely around the house.

- **Birds:** Birds are generally safe but can carry bacteria like salmonella and campylobacter. A visit to the veterinarian to determine the health status of your bird is helpful. Wash your hands after handling your pet and avoid being the one who cleans the cage if possible.

## VACCINES DURING PREGNANCY

There are two vaccines that we recommend pregnant women get during each pregnancy:

### Influenza Vaccine (Flu shot)

- Pregnant women are at greater risk of becoming severely ill from the flu due to decreased immunity and decreased lung capacity. It is recommended that pregnant women receive a flu shot during each flu season.
- The Fluzel nasal flu vaccine is NOT recommended in pregnancy as it contains live virus.

### Tdap Vaccine (Tetanus, Diphtheria, Pertussis)

- We recommend that pregnant women receive the Tdap vaccine during each pregnancy, ideally between 27-36 weeks gestation. This helps ensure that antibodies are passed from mom to baby to help protect against whooping cough (pertussis) after the baby is born. Newborns cannot be vaccinated themselves for pertussis until several months of age. It is recommended that anyone who may have close contact with a newborn ensure that they are up to date on their Tdap vaccine.

### COVID-19 Vaccine

- Pregnant women are more susceptible to severe illness from COVID-19 compared to nonpregnant women. The vaccine is 90% effective in protecting against severe illness, hospitalization, and death from COVID-19. Therefore, getting vaccinated against the virus may protect you and your baby from serious illness.

# Safety During Pregnancy

## INFECTIONS DURING PREGNANCY

Infections may be minor and have no effect on the fetus (e.g., a cold) or they may cause a serious, life-threatening illness for the mother and/or fetus. If you believe you have been exposed, or have symptoms of infection, please contact our office.

We routinely screen pregnant women for exposure or immunity to the following diseases, as they may be particularly hazardous to a fetus:

- HIV/AIDS - Syphilis
- Hepatitis B
- Rubella (German measles)
- Varicella (Chickenpox)
- Group B Streptococcus

## GROUP B STREPTOCOCCUS (GBS)

This is a common bacterium that usually colonizes the gastrointestinal tract and also the vagina/genitals in some people. It is estimated that up to 33% of pregnant women are carriers. While GBS generally does not cause any ill effects to pregnant women, in rare cases, if a baby is exposed to the bacteria during labor and delivery, it can cause severe effects such as sepsis or meningitis. We routinely screen women for GBS at 36 weeks gestation, and prophylactically treat women who are positive for the bacteria in labor with IV antibiotics to reduce the chance of neonatal infection.

## LISTERIA

Listeria is a serious infection caused by eating food contaminated with the bacterium *Listeria monocytogenes*. The disease primarily affects pregnant women, newborns, and adults with weakened immune systems. Symptoms of listeria include high fever, general malaise, and muscle aches. Please call the office if you are experiencing these symptoms.

## CYTOMEGALOVIRUS (CMV)

CMV is a common virus that, once in a person's body, can reactivate. CMV is passed through body fluids, and can also be transmitted from mother to child during pregnancy. CMV symptoms include fever, sore throat, fatigue, and swollen glands. If you think you may have CMV, contact our office for more information.

## TOXOPLASMOSIS

Toxoplasmosis is an infection caused by a parasite called *Toxoplasma gondii*. Of those who are infected, very few have symptoms because a healthy person's immune system usually keeps the parasite from causing illness. However, pregnant women and individuals who have compromised immune systems should exercise caution. Wear gloves and wash hands after gardening or handling soil, wear gloves or have someone else change the cat's litter box, cover outdoor sandboxes, and follow good food safety practices.

## HERPES

Herpes is caused by the herpes simplex virus. A primary infection in pregnancy or having an outbreak close to the time of delivery can have negative effects on the fetus. Inform a provider if you or your partner have ever been exposed to genital herpes, you have ever had a herpes outbreak, or you have a new genital lesion during pregnancy.

## ZIKA

Zika virus infection during any trimester of pregnancy has been found to cause adverse birth outcomes such as pregnancy loss, microcephaly, and other brain and eye abnormalities. The virus spreads through infected mosquitoes, from a mother to fetus during pregnancy, and through sexual contact. However, it may also be spread through blood transfusion and other laboratory exposure. Symptoms of the virus include acute onset of fever, rash, joint pain, and conjunctivitis. Currently, there is no vaccine or treatment for Zika virus. It is advised that pregnant women DO NOT TRAVEL to areas where Zika outbreaks are documented.

## COVID-19

At this time, pregnant women are not considered a high-risk population for the novel coronavirus. However, pregnant women have changes in their bodies that may increase their risk of some infection, and pregnant people have had a higher risk of severe illness when infected with viruses from the same family as COVID-19 and other viral respiratory infections, such as influenza.



## **Good eating habits during your pregnancy will help make sure both you and your baby are as healthy as possible.**

Here are some common questions about eating and drinking during pregnancy. We have provided you a chart telling you what foods you need for healthy eating and how much of each food is recommended daily. If you have special concerns or needs regarding nutrition, as always, talk with a provider.

### **HOW MUCH WEIGHT SHOULD I GAIN?**

Most sources recommend that you gain between 25 and 35 pounds during pregnancy. Individual's who were unweight before becoming pregnant may gain more, those who started out overweight may be able to safely gain less. Check with our providers about the amount of weight gain that is right for you. In general, it is not the number of pounds you are gaining that is important - it is whether you are eating well and whether your baby is growing as it should.

Most people gain 3-5 pounds in the first 12 weeks, and a little less than a pound a week after that. Remember, you should not diet to lose weight during pregnancy.

If you are concerned that you are gaining too much weight or not gaining enough, please talk with a provider. Your pattern of weight gain may be normal for you. Our providers can help you determine what is normal for you and your baby, and help you decide the correct course of action based on your specific pregnancy.



## WHAT PRECAUTIONS MUST I FOLLOW REGARDING FOODS OR DRINKS?

There are some precautions you must take regarding what you eat and drink while pregnant. There are foods which may contain bacteria or other organisms that could be harmful to you or your baby. Additionally, there are foods or drinks that have toxic materials that could have harmful effects on your baby's growth and development.

**Please follow the guidelines below regarding foods and fluids. Ask a provider if you have any questions.**

Do not drink alcohol at all. It is not known how much alcohol is safe for the unborn baby. We recommend that you do not drink, if you are having trouble abstaining from drinking, please discuss this with a provider.

Do not eat raw or undercooked meat, eggs, poultry, or fish. Do not eat raw clams, oysters or any other uncooked fish or sushi. These may contain bacteria or other organisms that could be harmful to your baby. Please wash hands, cooking surfaces, and utensils well if they have been exposed to raw meat, eggs, fish, or poultry.

Please wash all fruits and vegetables before eating. Wash the skin of all fruits and vegetables, including bananas or melons, even if you will be peeling the skin off before eating.

Do not eat cheese made with unpasteurized milk. Be especially careful of the following types and check the label to see if unpasteurized or raw milk was used: brie, Camembert, blue-veined cheese such as Roquefort, Mexican-style cheese such as queso blanco, queso fresco, queso de hoja, queso de crema, and asadero. Semi-soft and hard cheese, such as mozzarella, parmesan, Swiss, and cheddar, are okay. Processed cheeses and cottage cheese are also safe.

Do not drink unpasteurized milk or fruit juice.

You must heat until steaming hot all hot dogs, lunch meats, or deli meats (such as bologna) as these can also contain bacteria that could be harmful.

Do not eat non-cooked, processed (smoked), or refrigerated pate or meat spreads.

Do not eat refrigerated smoked seafood, (most often labeled "novastyle," "lox," "kippered," "smoked," or "jerky").

Although fish is an excellent source of protein, that is low in fat, pregnant individuals need to be cautious about the different types of fish that they eat because of mercury and PCB contamination. Nearly all fish contains some amount of mercury some just have more than others. Long-lived larger fish have the highest levels of mercury and should not be eaten during pregnancy. These include shark, swordfish, king mackerel, blue fish, tuna steak, and tile fish. Lobster tomalley - the soft green substance found in the tail and body section of a lobster - should not be eaten by anyone.

Canned tuna may be eaten, but please limit your intake to two servings a month.

Pregnant women should not eat freshwater fish.

Please ask a provider if you have questions about fish consumption. Please note that your total intake of any safe fish should be limited to two servings a week.

Please limit the amount of caffeine in your diet to less than 300 milligrams (mg) per day. Most people get caffeine from coffee or soda drinks. However, caffeine is also chocolate, tea, and some over-the-counter medications.

## SAFE FOOD PREPARATION PRACTICES

1. Wash your hands and cooking surfaces often
2. Keep raw meat away from fruit and vegetables and cooked meat
3. Cook your food until it is steaming hot
4. Cook meats until no pink remains
5. Keep uneaten food cold or frozen
6. Keep your refrigerator at 40°F or less
7. Keep your freezer at 0° or less
8. Throw away food that is left at room temperature for 2 hours or more
9. Do not eat foods if they are past the expiration date on the label

## **I HAVE A LOT OF NAUSEA AND VOMITTING. WHAT SHOULD I DO?**

Many have nausea and vomiting early in pregnancy. In most cases, this is easily managed with some changes in diet; in severe cases, the use of anti-nausea medication (if prescribed by a provider) is used. Nausea and vomiting usually pass after about 12 weeks.

People sometimes feel that eating dry carbohydrates like toast, crackers, or rice, helps decrease nausea. You may want to try an acupressure wristband (available at many pharmacies), which is designed to treat nausea and is often used to prevent motion sickness.

Ginger in your diet could also be beneficial for preventing nausea. You may want to try ginger ale, ginger hard candy, or ginger tea. Keeping a small amount of food on your stomach at all times works well for some. Try to eat something any time you feel hungry. Listen to your body and do not be overly concerned about gaining weight. Taking in small, healthy snacks every few hours throughout the day may help you avoid nausea. Try to stay away from strong odors and spicy, greasy, or acidic foods. In rare cases, these measures might not help you prevent nausea and vomiting. However, as mentioned, call our office if you are unable to hold down anything down for 24 hours. You could become dehydrated and that is not good for you or your baby.

Try to remember that nausea and vomiting is normal in the first weeks of pregnancy and normally subsides once you are further along. Stay in touch with our providers for additional advice about how to manage this until this phase of pregnancy passes.

## **WHAT IS W.I.C.?**

If you find that buy enough nutritious food is difficult on your budget, the W.I.C. program may be able to help you. W.I.C. stands for "Women, Infants, and Children." It is a nationally funded program that helps ensure pregnant or breast-feeding mother's and their children get the nutrition they need. There are income guidelines for W.I.C. enrollment.

If you are interested in this program, our providers can fill out a referral form for you. Call **800-WIC-1007 (800-943-1007)** to find out where this is a W.I.C. office near you, or visit your state health departments website. You will need to make an appointment at the W.I.C. office to be enrolled in the program.

## A SPECIAL NOTE ABOUT VITAMIN SUPPLEMENTS, IRON, AND FOLIC ACID (FOLATE)

Prenatal vitamins are recommended by almost all obstetric providers as a way of making sure you get the nutritional support that both you and your baby need. They come in tablets, chewable tablets, liquids, or gummy preparations.

Some people prefer not to take prenatal vitamins, or find that certain types of vitamins (such as those with iron) cause unpleasant side effects. Most individuals are able to take in nearly everything they need for a healthy pregnancy by following a healthy, well-balanced diet, as described in the attached chart. However there are two important exceptions.

### FOLIC ACID

Folic acid or folate, has been found to be important in preventing the development of a group of birth defects called neural tube defects such as spina bifida and anencephaly. Folic acid is also needed by both you and your baby to form red blood cells.

While you are pregnant, your need for folic acid is at least 600 micrograms (mcg) per day. It can be difficult to take in this much folic acid through diet alone. This is one important reason why prenatal vitamins, which contain the full requirement of folic acid (or more) are almost always recommended in pregnancy.

### IRON

Your need for iron starts in the first trimester and continues through child birth. Iron is an important part of the body's blood cells. It is needed during pregnancy to form red blood cells in both you and your baby. Many women begin their pregnancy with low iron. This can lead to low red blood cell counts, which is not good for you or your baby.

We may recommend that you take an iron supplement or a prenatal vitamin containing a certain amount of iron. If you are not taking iron supplements, please ensure that your diet include many high iron foods. Some foods rich in iron are listed in the chart to the right. Our providers will routinely check your red blood cells to make sure you are getting enough iron.

#### Facts about folic acid

You need at least 600 micrograms per day.

Most prenatal vitamins have 600 micrograms; some have 1 milligram, which is 1,000 micrograms. You do not need to take 1,000 micrograms unless directed to do so by one of the providers.

#### Food sources of iron

beef, chicken, and turkey	broccoli
tuna	enriched breads and cereals
shrimp	egg yolk
beans - black, navy, pinto, kidney, and chick peas	blackstrap molasses
tofu	pumpkin seeds
apricots	prunes
spinach	raisin
swiss chard	wheat germ
collard greens	whole grains

# Eating well during pregnancy

## PROTEIN



### Where to find it:

Meat, chicken, fish, liver, eggs, soybeans, peanut butter, dried beans, peas, tofu

### Why you need it:

Protein is the building material for the body. It supplies energy and promotes healthy growth and development.

### How much you need:

3 OR MORE SERVINGS PER DAY

#### One serving:

- 3-3 ounces of cooked meat, fish, or poultry (limit fish to 2 servings per week)
- 1 cup of cooked dried beans or peas
- 2 eggs
- 1 cup of tofu
- 4 tablespoons of peanut butter

## GRAIN



### Where to find it:

Bread, cereal, crackers, pasta, rice, cornbread, pancakes, tortillas, wheat germ, grits

### Why you need it:

Whole grain products, such as whole wheat bread, bran cereal, and whole-wheat crackers, contain B vitamins. They help your baby to grow and help your body use energy as well. Try not to use highly processed grains, like white bread and white rolls. These have lost a lot of their nutrition.

### How much you need:

6 TO 9 SERVINGS PER DAY

#### One serving is:

- 1 slice of bread
- 1 cup of ready-to-eat cereal
- 1/2 cup cooked cereal, rice, or pasta

## FLUIDS



### Where to find it:

Water, milk, herbal teas

### Why you need it:

There are fluids in every cell of your body, and a lot of fluid in your growing baby as well. You must be sure to drink enough during your pregnancy.

### How much you need:

8 TO 10 GLASSES A DAY

- 8 ounces each glass

## MILK PRODUCTS



### Where to find it:

Milk, buttermilk, yogurt, cheese (no cheese made with unpasteurized milk)

### Why you need it:

Milk is an excellent source of vitamins, minerals, and protein. It also has calcium, which builds healthy bones and teeth. It is important for the baby's bone development.



## SOURCES OF VITAMIN C

### Where to find it:

Citrus fruits (oranges and grapefruits), strawberries, tomatoes, peppers, and cantaloupe

### Why you need it:

Vitamin C is needed to build strong body cells, blood, and healthy gums and teeth.

### How much you need:

AT LEAST 1 SERVING PER DAY  
of a high-vitamin C fruit or vegetable

## LEAFY GREEN OR DARK ORANGE VEGETABLES



### Where to find it:

Spinach, broccoli, carrots, sweet potatoes, dark lettuce, kale, cabbage, collard greens, yams

### Why you need it:

These vegetables are an important source of vitamin A. This is needed for the healthy development of bones, hair, skin, glands, and vision for your baby.

### How much you need:

AT LEAST ONE SERVING PER DAY  
of a leafy green or dark orange vegetable

## OTHER VEGETABLES AND FRUIT



### Where to find it:

All other vegetables (cooked or raw), and all other fruit (fresh, canned, frozen)

### Why you need it:

Also good sources of vitamin A and other vitamins and minerals.

### How much you need:

AT LEAST 5 SERVINGS PER DAY

#### One serving is:

- 1 cup raw vegetables
- 1/2 cup cooked vegetables
- 3/4 cup fruit or vegetable juice
- 1/2 cup cooked or canned chopped fruit
- 1 medium-sized piece of fruit

# Anti-Reflux Diet

A provider may advise you begin an anti-reflux. This type of diet is actually easy to follow, requiring you to cut-out a few foods and beverages that either relax the lower part of the esophagus or increase the amount of acid in the stomach.

Here are some dietary suggestions:

## BEVERAGES

### Good to drink:

- Water
- Fruit juices (except citrus)
- Decaffeinated tea or coffee

### Drinks to Avoid:

- Mint tea
- Regular coffee or tea
- Citrus juice
- Cocoa
- Alcohol in any form
- Carbonated drinks with or without caffeine

## DAIRY PRODUCTS

### Good to eat:

- Milk—skim or low fat
- Low-fat yogurt
- Low-fat or fat-free sour cream and cream cheese
- Low-fat cottage cheese

### Good to Avoid:

- Whole milk
- Butter
- Chocolate milk
- Full fat sour cream
- Cream cheese
- Ice cream
- High-fat cheeses, such as cheddar
- Full-fat dips

## VEGETABLES

### Good to Eat:

- Plain raw, baked, broiled, or steamed vegetables

### Good to Avoid:

- Fried, creamed, or spicy vegetable dishes
- Tomatoes
- Onions

## FRUITS

### Good to Eat:

- Plain raw, baked, or broiled fruit

### Good to Avoid:

- Oranges, tangelines, tangelos
- Grapefruit
- Lemons and limes
- Any fried fruit
- Any creamy fruit dishes

## MEATS

### Good to Eat:

- Any plain, baked, or broiled lean beef, pork, chicken, poultry
- Some plain, baked, broiled fish

### Good to Avoid:

- Lunch meat
- Hot dogs
- Sausage, bacon, and fat back
- Any fried or pan-fried meat
- Any dish with gravy or sauce
- Chili
- Pizza
- Tacos
- Anything marinated spicy
- Tomato or barbecued sauces

## BREADS

### Good to Eat:

- Any low fat bread or cereal
- Plain rice or pasta

### Good to Avoid:

- Any high-fat bread or cereal
- Any bread made with milk
- Creamy, tomato or cheesy rice or pasta dishes

## DESSERTS

### Good to Eat:

- Low-fat baked goods (less than 3 grams of fat)
- Low or fat-free puddings and fruit pops

### Good to Avoid:

- Chocolate desserts
- Creamy desserts
- High-fat desserts—cheesecake, pie, ice cream

## SOUPS

### Good to Eat:

- Any fat-free or low-fat soups without tomatoes or onions

### Good to Avoid:

- Full fat soups
- Tomato, onion, or french onion soup
- Creamy soups

# Healthy Snack Ideas

## CRUNCHY

- Apples
- Frozen grapes
- Rice cakes with nut butter, avocado, or cheese
- Carrots
- Popcorn
- Veggies and dip
- Celery and nut butter
- Hummus toast, veggies, or crackers

## SWEET

- Fresh and dried fruit
- Yogurt
- Nut butter, especially almond butter
- Bread with jelly/jam
- Oatmeal with maple syrup
- Smoothies
- Frozen bananas
- Fresh fruit juice
- Sweet vegetables
- Dates
- Chocolate chips

## SALTY

- Olives
- Pickled vegetables
- Tabouli, hummus
- Steamed vegetables with tamar or soy sauce
- Tortilla chips with salsa or guacamole
- Sauerkraut
- Cheese
- Jerky

## CREAMY

- Smoothies
- Yogurt
- Avocados
- Rice pudding
- Hummus
- Soup
- Mashed sweet potato
- Coconut milk



# Exercise

## IS EXERCISE DURING PREGNANCY SAFE?

If your pregnancy is normal and you are healthy, it is safe to continue or start some types of exercise. However, you may need to make accommodations. Physical activity does not increase your risk of miscarriage, low birth weight, or early delivery. Just make sure you consult with a provider during your visits about exercising, so you can decide together on an exercise routine that fits your needs and is safe for your pregnancy.

## CONDITIONS THAT MAKE EXERCISE DURING PREGNANCY UNSAFE

Women with the following conditions or pregnancy complications should refrain from exercising during pregnancy:

- Certain types of heart or lung disease
- Cervical insufficiency or cerclage
- Being pregnant with twins or triplets (or more) with risk factors of preterm labor
- Placenta previa after 36 weeks of pregnancy
- Preterm labor or ruptured membranes (your water has broken) during this pregnancy
- Preeclampsia or pregnancy-induced high blood pressure
- Severe anemia

## BENEFITS OF EXERCISE DURING PREGNANCY

Regular exercise can have excellent benefits for you and your baby.

- Reduces back pain
- Eases constipation
- Potentially decreases your risk for gestational diabetes, preeclampsia, and cesarean delivery
- Promotes healthy weight gain
- Improves overall general fitness and strengthens your heart and blood vessels
- Helps you to lose the baby weight after your baby is born

## HOW MUCH SHOULD YOU EXERCISE DURING PREGNANCY?

It is recommended that pregnant women get at least **150 minutes** of moderate-intensity aerobic activity every week. An aerobic activity is one in which you move large muscles of the body (arms and legs) in a rhythmic way. Moderate intensity means you are moving enough to raise your heart rate and start sweating.

You can divide your 150 minutes a week into 5 days of 30 minute workouts or into smaller 10 minute workouts throughout each day.

If you are new to exercising, begin slowly and gradually increase your activity. Start with as little as 5 minutes a day and then add 5 minutes each week until you can stay active for 30 minutes a day.

If you were very active prior to pregnancy, you can continue with the same workouts with a provider's approval. If you start to lose weight, you may need to increase the number of calories that you eat.

## CHANGES IN THE BODY THAT MAY AFFECT YOUR EXERCISE ROUTINE

Your body goes through many changes during pregnancy, be sure to choose exercises that take these changes into account.

- **Joints**- The hormones made during pregnancy cause the ligaments that support your joints to become relaxed. This makes the joints more mobile and at risk of injury. Avoid motions that can increase your risk of getting hurt.
- **Balance**- During pregnancy, the additional weight in the front of your body shifts your center of gravity. This puts stress on your muscles and joints, especially those in your pelvis and low back. Since you are less stable, you are more likely to lose your balance, and you are at a greater risk of falling.
- **Breathing**- When you exercise, oxygen, and blood flow are directed to your muscles and away from other areas of your body. While you are pregnant, your need for oxygen increases. As your belly grows, you may become short of breath more easily because of increased pressure of the uterus on the diaphragm (a muscle that aids in breathing). These changes may affect your ability to do strenuous exercise, especially if you are overweight or obese.



# Exercise

## PRECAUTIONS TO TAKE WHEN EXERCISING

There are some precautions that pregnant women should keep in mind when exercising:

- Drink plenty of water before, during, and after your workout. Signs of dehydration include dizziness, a racing or pounding heart, and urinating only small amounts of having urine that is dark yellow.
- Wear a sports bra when exercising, so you have lots of support to help protect your breasts. Later in pregnancy, a belly support may reduce discomfort while walking or running.
- Avoid becoming overheated, especially in the first trimester. Drink plenty of water, wear loose-fitting clothing, and exercise in room temperature-controlled room. Do not exercise outside when it is very hot or humid.
- Avoid standing still or lying flat on your back as much as possible. When you lie on your back, your uterus presses on a large vein that returns blood to the heart. Standing motionless can cause blood to pool in your legs and feet. Both of these positions can decrease the amount of blood returning to your heart and may cause your blood pressure to decrease for a short time.

## EXERCISES TO DO DURING PREGNANCY

Whether you are new to exercise or you have been exercising forever, choose activities that experts agree are safest for pregnant women:

- Walking- Brisk walking gives a total body workout and is easy on the joints and muscles.
- Swimming and water workouts- Water workouts use many of the body's muscles. The water supports your weight so you avoid injury and muscle strain. If you find brisk walking difficult because of low back pain, water exercise is a good way to stay active.
- Stationary biking- With your belly growing larger, it is easy to lose your balance and you are more prone to fall. Therefore, riding a standard bike might be risky. Cycling on a stationary bike is a safer choice.
- Modified yoga and modified Pilates- Yoga reduces stress, improves flexibility, and encourages stretching and focused breathing. There are even prenatal yoga and Pilates classes designed for pregnant women. These classes often teach modified poses that accommodate your pregnancy. You should also avoid any poses that require you to be still or lie on your back for long periods of time.
- If you are a runner, jogger, or racket-sports player, you may be able to continue with those exercises. However, consult with a provider about these activities first.
- Kegels- The pelvic floor refers to the muscles in your genital area. It includes the muscles around vagina, urethra (urinary opening), and anus (bowel opening). Doing Kegels helps strengthen these muscles and support the area under the weight of your baby. They may assist you in keeping control of your bladder during and after pregnancy, and they can help prepare you for labor.

## EXERCISES TO AVOID

While pregnant, avoid activities that put you at risk for injury, such as:

- Contact sports and sports that put you at risk for getting hit in the abdomen. These sports include ice hockey, boxing, soccer, and basketball.
- Skydiving
- Activities that may result in a fall, such as downhill snow skiing or snowboarding, water skiing, surfing, off-road cycling, gymnastics, and horseback riding.
- "Hot yoga" or "hot pilates," which may cause you to become overheated
- Scuba diving
- Activities performed above 6,000 feet (if you do not already live at a high altitude)

## WARNINGS TO STOP EXERCISING

Stop exercising and call our office if you have any of the following signs or symptoms:

- Vaginal bleeding
- Feeling dizzy or faint
- Shortness of breath prior to exercise
- Chest pain
- Headache
- Muscle weakness
- Calf pain or swelling
- Regular, painful contractions of the uterus
- Fluid leaking

## WHY IS IT IMPORTANT TO KEEP EXERCISING AFTER YOUR BABY IS BORN?

Exercise after the baby is born can potentially help lift your mood and decrease the risk of deep-vein thrombosis, a condition that can occur more frequently in women in the weeks after childbirth. In addition to these health benefits, exercise after pregnancy can help you lose the extra pounds that you may have gained during your pregnancy.

# Common Questions You May Have

## THE PROVIDER HAS RECOMMENDED A TEST FOR HIV, THE VIRUS THAT CAUSES AIDS. WHY IS IT IMPORTANT?

Many people are infected with the HIV virus and do not know it. You contract the virus by engaging in sexual activity with an HIV +. You can also acquire it from sharing needles or blood with an HIV + individual.

The HIV virus can be passed on to the baby during pregnancy and birth. However, research has shown that if an individual who has the HIV virus takes certain medicines during pregnancy, the chance of passing the virus to the baby is greatly decreased. This is why the HIV test is now recommended for pregnant individuals.

## MAY I GO TO THE DENTIST?

It is safe to continue routine dental care during pregnancy. In fact, there is a good reason to make sure you have at least one visit to the dentist during your pregnancy. Hormones can cause a more-resistant form of plaque to develop on your teeth. You may be more prone than usual to cavities and gum disease.

It is okay to have Novocaine if you need it for a filling or another reason. Even dental x-rays are alright during pregnancy as long as you wear a lead shield on your abdomen. If you have been advised to take antibiotics before any dental work, continue this practice as well.

## CAN YOU HAVE SEX?

It is okay to have sex while you are pregnant! However, it's common to have some concerns when it comes to engaging in sexual activity during pregnancy. As long as your pregnancy is proceeding normally, and you and your partner feel up to it, you can have sex whenever you like.

Keep in mind that your body is going through changes, such as hormonal fluctuations and fatigue, that could make having sex less desirable. There is considerable variety in sexual interest and expression during pregnancy: some women find it enhanced, while others find that the discomforts of pregnancy diminish their desire for physical intimacy. Many psychological factors also affect women and their partners' interest in sexual expression during pregnancy, including feelings about changes in the woman's body and about becoming parents. Feel free to discuss any questions and concerns about sexual issues with your care provider.





# Contact Information

## **Regular Business Hours:**

**Monday-Thursday: 9AM-4PM**

**Friday: 9AM-12PM**

**Main Line: 703-437-0001**

**Nurses Line: 703-437-0001 Ext. 2757**

**In the case of an emergency: Dial 911**

**[www.all-about-women.com](http://www.all-about-women.com)**