

A Guide to Your Prenatal Care

We're with you every step of the way.



UR
MEDICINE

Welcome

Thank you for choosing our practice for your prenatal care.

This is a special time in your life, as each pregnancy has its own set of memories. We are happy that you have chosen our practice for your prenatal care. We want to assist you in making the birth of your baby a special, family-centered event and a time that you will treasure in years to come. Our goal is to provide you and your family with the highest quality care available personalized for your individual needs.

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Common Questions

Caffeine Use

Studies on caffeine use and what amount is safe in pregnancy are limited. Because there is just not enough information, the experts suggest pregnant women limit caffeine consumption to one cup of coffee per day. Limiting or eliminating other high caffeine foods such as soda and tea is also a good idea.

Tobacco Use

Smokers have a higher risk of developing high blood pressure, having a baby that has trouble growing, preterm delivery, and miscarriage. After delivery, infants are at a greater risk for Sudden Infant Death Syndrome (SIDS). Please talk to your provider about a smoking cessation program if you wish to quit smoking.

Drug Use

Illegal drugs should not be used in pregnancy. There is information available that these substances are harmful for you and your baby. Examples of drugs include but are not limited to marijuana, cocaine, ecstasy, methamphetamines, heroin, synthetic drugs and even the misuse of prescribed medication. These substances can cause preterm birth, birth defects, interfere with fetal growth or cause future learning and behavioral problems.

Alcohol

Drinking alcohol in pregnancy can lead to mental disabilities and birth defects in babies. No one is certain what amount of alcohol (if any) is safe in pregnancy. Alcohol use is a leading cause of developmental disabilities in children – and because of this, women should not drink alcohol in pregnancy.

Travel

Women can travel until the last four to six weeks of pregnancy, if the pregnancy is uncomplicated. Patients with complications in pregnancy should check with their provider about any travel plans. If you do travel, it is important to get up to stretch and move your legs every two hours. This helps limit the risk of blood clots.

- Contact the airline, train or bus company to find out if they have rules for when they will not allow a pregnant woman to travel with them.
- Have insurance card handy.
- Obtain current records of pregnancy.
- When possible, inquire about healthcare facilities en route in case there is an emergency.
- Please discuss with your provider where you are traveling, as some locations are not recommended in pregnancy due to risks of infection.

Sexual Activity

Sexual activity may continue in pregnancy as long as you do not have risk factors (like a short cervix, abnormal bleeding and problems with the placenta or early labor). Please talk to your provider if you have questions about sex in pregnancy.

Work

Many working women become pregnant every year. Women who are healthy and have a healthy fetus are often able to work up until their due date. Women who have jobs that require heavy lifting or strenuous work may need to make arrangements to change their work hours, work environment or the type of work they do. You should talk to your provider about any work concerns.

Pregnancy Screening and Testing

Common Tests Done During Pregnancy

(First Trimester)

Blood Count (CBC): checks for anemia or infection

Blood Type/Rh Factor: determines if you are RH negative and require Rhogam

Antibody Screen: detects any unusual antibodies that may harm your baby

Rubella Titer: determines if you are immune to Rubella

Serology: screens for Syphilis (required by state law)

Hepatitis B Screen: detects recent or old Hepatitis infection

Pap Smear: screens for abnormal or pre-cancerous cells on the cervix

Cervical Cultures: screens for Gonorrhea and Chlamydia

Urine Culture: screens for urinary tract infection (bladder)

Urine CDS: screens for harmful substances such as marijuana or cocaine

HIV: screens for antibodies against HIV (virus causing AIDS)

Genetic Screening Tests (Optional)

Cystic Fibrosis Carrier Screen

Hemoglobin Electrophoresis

First Trimester Screen for Down Syndrome and Trisomy 18

Second Trimester Quad Screen (AFP) for Neural Tube and Chromosomal Defects

NIPT cell free DNA

Ultrasound

Ultrasounds may be done throughout your pregnancy. This exam uses ultrasound waves to see the baby, placenta, and amniotic fluid. When done early in pregnancy, an ultrasound helps to determine when the baby is due. Between 18 and 20 weeks an ultrasound will be done to see that the baby is developing normally and where the placenta is attached.

Glucose Screen for Gestational Diabetes

(24-28 weeks)

What is a glucose screen?

A glucose screen is a blood test to find out if you have gestational diabetes, which is a condition that occurs in about four percent of women during pregnancy. It causes high glucose levels in your blood. Glucose is the simplest form of sugar. Higher than normal blood sugar can be harmful to the mother and to the unborn baby.

How do I get ready for the test?

Your caregiver will tell you when to have your blood test done. Unlike other blood sugar tests, this one may be done before or after eating. You will be given a sugar drink and your blood is taken one hour later. The results of this test can tell if you have gestational diabetes or need further testing.

Group B Strep Testing

(36 weeks)

What you need to know.

Group B streptococcus (GBS) infection is a common bacterial infection that is generally not harmful in adults but can be life-threatening to newborns. GBS affects about one in every 2,000 babies born in the United States. Anyone can carry GBS and between 10 and 30 percent of pregnant women carry it.

If a pregnant woman carries the GBS bacteria in her vagina or rectum at the time of labor, there is a one percent chance that her baby will become infected. Babies infected with GBS can get pneumonia, sepsis (blood infection) or meningitis (infection of the membranes surrounding the brain). Infected babies can be treated with antibiotics. Most have no long-lasting damage, but about five percent die and some babies who develop meningitis suffer later neurologic damage.

What you can do.

You can be screened for GBS infection during the last few weeks of pregnancy. If you carry GBS, or your provider determines you are at risk for GBS infection, you will be treated with intravenous antibiotics during labor and delivery.

If you have any questions about GBS, ask your healthcare provider near the end of your pregnancy.

The Centers for Disease Control & Prevention has a website devoted to Group B strep; visit www.cdc.gov/groupbstrep/index.html

Exercise During Pregnancy

Benefits of Exercise

You are tired. You're gaining weight. You may not feel your best. Although these symptoms are normal during pregnancy, there is a way to find relief. Becoming active and exercising on most, if not all days, of the week can benefit your health in many ways:

- Helps reduce backaches, constipation, bloating and swelling.
- Gives you energy.
- Improves your mood.
- Improves your posture.
- Promotes muscle tone, strength and endurance.
- Helps you sleep better.

Regular activity also helps keep you fit during pregnancy and may improve your ability to cope with the pain of labor. This will make it easier for you to get back in shape after the baby is born. You should not, however, exercise to lose weight while you are pregnant.

Changes in Your Body

Pregnancy causes many changes in your body. Some of these changes will affect your ability to exercise.

Joints

The hormones produced during pregnancy cause the ligaments that support your joints to become relaxed. This makes the joint more mobile and more at risk of injury. Avoid jerky, bouncy or high-impact motions that can increase your risk of injury.

Balance

Remember that during pregnancy you are carrying extra pounds – as much as 20-30 pounds at the end of pregnancy. The extra weight in the front of your body shifts the center of gravity and places stress on joints and muscles, especially those in the pelvis and lower back. This can make you less stable and cause back pain and make you more likely to lose your balance and fall, especially in later pregnancy.

Heart Rate

The extra weight you are carrying will make your body work harder than before you were pregnant. Exercise increases the flow of oxygen and blood to the muscles being worked and away from other parts of your body. So, it's important not to overdo it. Try to exercise moderately so you don't get tired quickly.

Getting Started

Before beginning your exercise program, talk with your provider to make sure you do not have any health conditions that may limit your activity. Ask about any specific exercises or sports that interest you. Your healthcare provider can offer advice about what type of exercise routine is best for you.

Women with one of the following conditions may be advised by their provider not to exercise during pregnancy:

- Pregnancy induced hypertension.
- Symptoms or history of preterm labor (early contractions).
- Vaginal bleeding.
- Premature rupture of membranes.

Pregnant women with certain other medical conditions, such as high blood pressure, heart disease and lung disease, will be advised by their provider when and if exercise is appropriate.

Choosing Safe Exercises

Most forms of exercise are safe during pregnancy. But some types of exercise involve positions and movement that may be uncomfortable, tiring or harmful for pregnant women.

Walking is considered the best exercise for anyone. Brisk walking gives a good total body workout and is easy on the joints and muscles. Other good activities for pregnant women include swimming, stationary biking, and yoga.

Your Routine

Exercise during pregnancy is most practical during the first 24 weeks. During the last three months, it can be difficult to do many exercises that once seemed easy. This is normal.

If it has been some time since you've exercised, it is a good idea to start slowly. Begin with as little as five minutes a day and add five more minutes a week until you can stay active for 30 minutes a day.

Always begin each exercise session with a warm-up period for five to 10 minutes. This is light activity, such as slow walking, that prepares your muscles for activity. During the warm-up, stretch your muscles to avoid stiffness and soreness. Hold each stretch for at least 10 to 20 seconds.

After exercising, cool down by slowly reducing your activity. This allows your heart rate to return to normal levels. Cooling down for five to 10 minutes and stretching again also helps you to avoid sore muscles. Hold each stretch for 20 to 30 seconds.

Things to Watch

The changes your body is going through can make certain positions and activities risky for you and your baby. While exercising, try to avoid activities that call for jumping, jarring motions or quick change in direction that may strain your joints and cause injury.

There are some risks from becoming overheated during pregnancy. This may cause loss of fluids and lead to dehydration and problems during pregnancy. Overheating in the first eight weeks of pregnancy may be a contributing factor to the development of birth defects.

Exercise During Pregnancy

When you exercise, follow these general guidelines for a safe and healthy exercise program:

- Avoid brisk exercise in hot, humid weather or when you are sick with a fever.
- Wear comfortable clothing that will help you to remain cool.
- Wear a bra that fits well and gives lots of support to help protect your breasts.
- Drink plenty of water to help keep you from overheating and dehydrating.
- Make sure you consume the extra 300 calories a day you need during pregnancy.

Pay attention to your body while you exercise. Do not exercise to the point that you are exhausted. Be aware of the warning signs that you may be exercising too strenuously. If you notice any of these symptoms, stop exercising and call your provider.

Warning Signs

Stop exercising and call your provider if you get any of these symptoms:

- Pain.
- Vaginal bleeding.
- Rapid heartbeat.
- Difficulty walking.
- Dizziness or feeling faint.
- Increased shortness of breath.
- Uterine contractions and chest pain.
- Fluid leaking from the vagina.

Oral Health During Pregnancy

Facts about oral health you should know:

- Puffy, bleeding gums and gums that feel tingly are typical signs of pregnancy gingivitis that many women experience during pregnancy because of raised hormone levels.
- Poor oral health during pregnancy could increase your risk for a low birth weight baby or premature delivery.
- Dental decay is a contagious, infectious disease caused by cavity-causing germs in the mouth.
 - Germs in the mouth can be passed from mother to child by any saliva sharing activity (kissing, sharing utensils or licking the pacifier before placing in baby's mouth).
 - A mother's poor oral health can put her baby at risk for early childhood tooth decay.
 - A baby is more likely to get cavity-causing germs if his or her mother has untreated tooth decay.

Visit a dentist and have a check-up and a cleaning during pregnancy.

- Routine dental visits (every six months) will help you maintain healthier teeth and gums by detecting problems when they are small and easily fixable.
- The longer you wait before seeking care for any tooth or gum

After the Baby is Born

Having a baby and taking care of a newborn is hard work. It will take a while to regain your strength after the strain of pregnancy and birth. Taking care of yourself physically and allowing your body time to recover is important. If you had a cesarean delivery, a difficult birth or complications, your recovery time may be longer. Check with your provider before starting or resuming an exercise program.

Walking is a good way to get back into exercising. Brisk walks several times a week will prepare you for more strenuous exercise when you feel up to it. Walking has the added advantage of getting both you and the baby out of the house for exercise and fresh air. As you feel stronger, consider more vigorous exercise.

You will want to pick an exercise program that meets your own needs. Your doctor, nurse or community center can help. There are also special post-partum exercise classes that you can join.

Finally ...

Exercise during pregnancy can help prepare you for labor and childbirth. Exercising afterward can help get you back in shape. Before you begin an exercise program, talk to your provider. Then, follow the guidelines given here to help maintain a safe and healthy exercise program during pregnancy.

problem, the larger the problem can become. As a result, the treatment can become more complicated and invasive.

- The New York State Department of Health has stated that it is safe to have dental treatments during pregnancy. If there is a problem in your mouth during pregnancy, you should seek care as soon as possible.

Eat a balanced diet and avoid frequent intake of carbohydrates between meals:

- What a mother eats during her pregnancy provides the nutrients that form her baby's teeth and gums.
- Limit starchy foods (chips and cookies), soft drinks (soda and juice) and sweets (candy bars and lollipops) in between meals. Fresh fruits, vegetables, milk and cheese are excellent snacks with their high nutritional value and lower risk for causing cavities.
- Chew xylitol chewing gums (Koolerz, Trident, Orbit, etc.) after snacking if you don't have time for brushing. Xylitol is a sugar alcohol that has been proven to decrease cavities.

Brush your teeth at least twice a day and floss daily:

- Use fluoride toothpaste.
- Make sure to remove plaque (a sticky layer of germs that form on teeth) from all the surfaces of your teeth while brushing.

Common Discomforts & Tips

First Trimester (1-13 weeks)

Pregnancy can cause a lot of changes to happen in your body. Here are some common discomforts and tips for how to deal with them. Talk to your provider if these tips do not help or if you have other concerns.

Nausea and Morning Sickness

Nausea is a common complaint of early pregnancy. It is usually caused by hormonal changes. Things that help with nausea include the following:

- Do not let your stomach be completely empty, eat small frequent meals.
- Keep crackers or dry toast at your bedside and eat before getting up.
- Eat a small snack before going to bed.
- Do not drink large amounts of liquid at one time.
- Avoid foods that are greasy, spicy or have odors that bother you.
- Take your prenatal vitamins at night if taking in the morning upsets your stomach.
- Try ginger – ginger tea or ginger candies.

Fatigue

Feeling tired is common in early pregnancy due to the increased needs of your body. Your amount of sleep needs to increase by several hours. It is important to take naps and go to bed earlier. Even just putting up your feet for a few minutes every hour or so helps.

Heartburn

Heartburn is a burning feeling in your chest. During pregnancy, stomach acid can back up into your esophagus due to a change in your hormone levels. Things you can do to help relieve heartburn:

- Avoid eating large meals and greasy or spicy foods.
- Avoid chewing gum.
- Do not lie down or bend over for two hours after eating.
- Raise the head of your bed about six inches (blocks or pillows under the mattress).
- Avoid tight clothing around your abdomen or waist.
- Check with your provider about an antacid that is safe to use.
- Do not drink a lot of liquid with meals, but rather between them.

Constipation

Constipation (going too long without having a bowel movement) happens because your hormone levels slow down your intestinal tract. Things that can help are:

- Increasing “roughage” or fiber that you eat. Eat more fruits, vegetables, dried fruits and bran or whole grain foods.
- Drinking more fluids – at least eight glasses of liquids each day. Water is best, but any fluids will help.
- Increasing your activity. Even taking an extra 15-30 minute walk each day can help.
- Maintaining regular bowel habits. Try to have a bowel movement the same time every day.
- Check with your provider about using stool softeners: medications that make your bowel movement easier. Do not use laxatives or enemas unless your provider has prescribed them.

Frequent Urination

During early pregnancy, you will notice that you have to go to the bathroom to urinate more often. This is due to hormones in your body and the growing uterus pushing on your bladder. Although this frequency in urination is normal, please notify your provider of any burning or pain.

Breast Tenderness

Your breasts get larger during pregnancy as the milk glands develop.

Sometimes you feel a tingling or a throbbing sensation.

These changes are normal. A good supportive bra, that is not too tight, will help.

Vaginal Discharge

The change in your hormone levels changes the cells in your vagina. This causes an increase in vaginal secretions. The discharge is usually clear or white in color with no odor. Things that can make you feel more comfortable include the following:

- Keep your private area clean and dry.
- Try to avoid tight or layered clothing.
- Wear cotton underwear.
- Do not douche or use strong smelling soaps.
- Report irritation, odor or colored discharge to your provider.

Common Discomforts & Tips

Second Trimester (14-26 weeks)

You have made it through the first third of your pregnancy. The second trimester is usually the easiest. Although some women still have nausea and fatigue, most women usually feel much better. Your baby and uterus can still cause some discomforts. Here are some common ones and ways to deal with them.

Back Pain

Lower back pain can be caused by muscle strain (from bending, stretching or lifting). Sometimes your hormones change and leave you more at risk for back pain. Here are some tips that can lessen your discomfort:

- Use proper body mechanics when lifting by keeping your back straight and bending your knees. Do not twist while lifting or pulling. Stand and sit with your back as straight as possible.
- Avoid standing too long in one spot. If you can, rest one foot on a footstool or step while you are standing. Change which foot you are leaning on every few minutes.
- Wear a special support girdle for pregnant women. You can find these at maternity shops or a medical supply store. Sometimes a written prescription will cover the cost of these.
- Use a footstool while sitting to keep feet from dangling.
- Ask your partner or a friend for a back rub, or use a heating pad on low setting to relieve aches. Sometimes a warm (not hot) bath will help as well.
- Try to sleep on a firm mattress, use lots of pillows! Wedge a pillow between your knees and place one under your belly. Avoid sleeping on your back by putting a pillow under your back so you are tilted.
- Do pelvic exercises. On your hands and knees like an angry cat, rock back and forth to stretch out your back. On your back, bend your knees and lift your bottom off the floor so only your feet, shoulders and head are touching the floor. Hold this position for a few seconds and then relax. Repeat this as long as comfortable.
- Wear good shoes! Try not to wear shoes with a higher heel (greater than two inches).

Hemorrhoids

Hemorrhoids are painful varicose veins around your rectum. They are common in pregnancy due to extra blood flow in the pelvis and pressure from the uterus. They can itch and sometimes bleed. Some things to help are:

- Avoid constipation. Eat lots and lots of fruits and vegetables so you have a bowel movement every day if possible. Ask your healthcare provider if you need a laxative to help regulate your bowel movements.

- Do not strain or push when having a bowel movement.
- Refrain from having anal sex (this can be painful and make any hemorrhoids worse).
- Drink a lot of fluids.
- Try soaking in a warm tub a few times a day (or a sitz bath that you can sit in, usually available at your local drug store).
- Do Kegel exercises. The best way to learn these is to stop your stream of urine by tightening up the muscles in your bottom. After that, only do them when you are not urinating because it can lead to an increase in urinary tract infections.
- Ice packs and Witch Hazel (any drug store will have this) will help with swelling.
- Do not sit for long periods of time. Get up and stretch or shift positions when you can.

Leg Cramps

Leg cramps (or charlie horses) are very common in pregnancy. Although no one really knows the cause of them, here are some things to help:

- Stretch your legs before bedtime.
- If you get a leg cramp, flex your foot and massage the muscle in a downward fashion.
- Drink lots of fluid.

Third Trimester (27- 40 weeks)

This last part of your pregnancy is often the most uncomfortable. Carrying around all that extra weight is difficult and can cause multiple discomforts. Some discomforts from your second trimester may continue or may resolve themselves as time goes by. Every pregnancy is different. Here are some common discomforts.

Edema

Edema is the swelling of any part of your body. This could be hands, feet, face and ankles. Swelling happens when hormones cause extra fluid in your body to leak into the tissue and swell, especially in areas that are below the waist (hips, legs, ankles and feet).

- Cut down on salt and stay well hydrated.
- Use support socks or hose (you may need a prescription for these).
- Elevate your feet as much as possible.

If you notice severe or rapid swelling in your upper body, especially hands and face, please contact your provider for further assessment.

Common Discomforts & Tips (cont.)

Insomnia

Insomnia is not being able to sleep. Most women have changes in their sleep pattern (difficulty falling to sleep, or frequent periods of wakefulness after falling asleep). Pressure on your bladder, as well as stress or worry, can often interrupt sleep.

Tips for better sleep:

- No computer or devices before bed.
- Avoid exciting activities before bedtime.
- Take a warm bath.
- Try the side lying position for rest and relaxation.
- Read a dull book.
- Have someone give you a back rub or massage!
- Exercise before dinner or at least three hours before bedtime.
- Avoid caffeine (coffee, tea, cola, chocolate, etc.).
- Do meditation/mindfulness exercises.
- Play soft music/or noise machine.
- Some sleep medications are okay to use in pregnancy, if you have concerns please speak to your provider.

Sexual Discomfort

Sex in pregnancy is safe and you can keep having sex right up until the baby arrives. The baby is well protected in the uterus and amniotic sac, and in most pregnancies, there is little to no concern. In the third trimester, sex can be uncomfortable due to the size of your belly, general tiredness or lack of mood. If you have concerns about sex, please speak to your provider.

Frequent Urination

Going to the bathroom more frequently is common in the third trimester. Baby is now pushing down on your bladder and your kidneys are also making more urine due to increased blood flow.

If you notice burning when you go to the bathroom or your urine looks cloudy or has an odor, please notify your provider. Things that can help with urinary frequency:

- Drink fluids often throughout the day. At this point in your pregnancy, you need a lot! Small sips from a water bottle will help with frequency.
- Cut back on caffeine. It has a diuretic effect which will make you urinate more.
- Kegel exercises may help with holding your bladder. Often in pregnancy women have urinary leakage, and these may help.

Shortness of Breath

Often in the third trimester, catching your breath can be hard to do. As the baby gets bigger and pushes up into your lungs, it may be harder for you to take a deep breath. If you have a cold or a fever or any heart/lung problems, you should notify your provider. Things that can help with shortness of breath:

- Pace yourself. Do not bend over for long periods of time and take your time when exercising and walking so you do not have trouble catching your breath.
- Wear loose, comfortable clothing.
- Prop extra pillows under head/back at night.
- Rest more!

Numbness and Tingling

It is common to develop numbness or tingling in the hands/fingers and sometimes toes at this point in your pregnancy. Changes in posture and swelling in the extremities in pregnancy make this happen. Here are a few things that may help:

- Check your posture and try not to slouch.
- Raise your hands over your head for a few minutes if tingling or numbness occurs.
- Do some stretching/relaxation exercises for the shoulders, arms and hands.
- Sleep with your arms propped up on a pillow.
- Try a wrist pad if you work at a computer.
- Speak to your provider if swelling occurs or if you start experiencing pain in your hands or wrists.

Before Labor Begins

There is no way to know when labor will start, but there are some signs/symptoms that will let you know your body is getting ready.

Lightening

The baby drops lower and puts pressure on your back or pelvis. Less pressure below the rib cage makes it easier to breathe.

Loss of Mucous Plug

A thickened mucus layer forms a seal at the opening of the cervix. As the cervix softens and gets ready for labor, the mucus may come out in a clump or just as increased vaginal discharge. Sometimes it is red or brown tinged.

Braxton Hicks Contractions

These are often crampy (although they can be stronger) uterine contractions. Usually they are irregular in timing and do not get stronger or longer in duration.

Cervical Ripening (softening)

The cervix will begin to thin and become very soft before it begins to open (dilate).

Labor

Labor is the process where your body prepares to give birth. It will begin with a tightening of the uterus (contractions) that will get closer together and becomes stronger and more intense. These contractions, along with cervical change, are the definition of labor. Notify your provider if any of the following occur.

- Contractions that are every five minutes, last for about a minute for about an hour (time these contractions from the beginning of one contraction to the beginning of the next).
- If you notice any leaking of fluid or a large gush, this could be your water breaking. It should be clear or pink tinged with no odor. If it is green or bloody, you should immediately notify your provider.
- Change in the fetal movement. It is normal when labor starts to be unsure if the baby is moving like usual. If you are not sure how much movement you are feeling, perform kick counts. Less than 10 movements in two hours is an indication for fetal monitoring.
- Spotting and increased vaginal discharge is normal when labor begins, this is from the cervix softening and beginning to open. However, any bright red bleeding could be an indication that something is wrong. Please notify your provider as soon as possible.

Three Stages of Labor

First Stage of Labor

- Begins with regular uterine contractions and ends when your cervix is 10 centimeters dilated.
 - Latent phase (also known as early labor) – begins with mild, irregular contractions, but the contractions will become stronger, more regular and more painful.
 - Active phase – begins with consistent cervical change (about five to six centimeters) and descent of the fetal part. This phase ends when your cervix is fully dilated (10 centimeters).

Second stage of labor

- This stage is the delivery of the baby. You will begin to push with contractions. As you push, the baby will come through the cervix, into the vagina and then is delivered.

Third stage of labor

- This stage is the delivery of the placenta, often called afterbirth.

After delivery ...

- After the baby is born, the umbilical cord is clamped and cut.
- The provider will be checking for any tears that may need to be repaired.
- The nurse or provider may push on the top of your uterus at this time. Pushing on your uterus helps it to stay firm and contracted down. This keeps you from bleeding too much.

Depression

Having a baby can be a wonderful and exciting new experience. But it is common for women to feel emotional and overwhelmed. These feelings can range from anxiety, sadness, anger and confusion. For most women, these feelings are short-lived, but for others, these feelings may linger or become progressively worse. Partners or family members may recognize these symptoms first.

Depression

This affects between 10 to 20 percent of pregnant women. Symptoms usually last two weeks or longer and include some, if not all of the following:

- Crying and frequent sadness.
- Sleep problems.
- Fatigue.
- Appetite disturbance.
- Loss of enjoyment in activities.
- Anxiety.
- Feeling disconnected from the baby as it grows.

Baby Blues

Baby blues may develop after delivery and affect as many as 80 percent of new mothers. Symptoms usually go away within two to four weeks of delivery and can include:

- Feeling overwhelmed.
- Irritability.
- Frustration.
- Anxiety.
- Mood swings.
- Crying, weepy.
- Sleep disturbances.
- Fatigue, exhaustion.

Post-partum Depression

Post-partum depression affects 10 to 20 percent of new mothers with the following symptoms that continue longer than two to four weeks:

- Frequent episodes of crying.
- Sadness.
- Fatigue.
- Feeling inadequate or guilty.
- Hallucinations.
- Sleep or appetite disturbances.
- Recurrent thoughts of death/suicide.
- Irritability/mood swings.
- Overly intense worries about the baby.
- Lack of interest in baby, family or activities.
- Difficulty concentrating, remembering things or making decisions.

Anyone can experience depression during the pregnancy or after delivery but factors that can place you at a higher risk include:

- Current, past or family history of depression.
- High stress level.
- Limited social support from family, friends or partner.
- Lack of sleep.
- History of post-partum depression.

Please note: depression is treatable and manageable. If you are feeling any symptoms of depression, please let your provider know. We want what is best for you and your baby and can discuss options for treatment.

Resources

Behavioral Health Services at Women's Health Practice
(585) 275-7604

Parenting Village (local resource)
www.ourparentingvillage.org

New York State Department of Health
www.health.ny.gov

Office on Women's Health
www.womenshealth.gov

Post-partum Resource Center of New York
www.postpartumny.org

Infant Needs

Choosing a Provider for Baby

A pediatric provider is a physician who specializes in the care of infants and children. You may also decide to choose a family medicine doctor or nurse practitioner as your child's primary care provider. It is important to have a pediatric provider lined up before your baby is born. After delivery, the pediatric office will be notified of the baby's arrival.

Things to consider when choosing a pediatric provider:

- Where are they located?
- What hospital are they affiliated with?
- What insurance coverage do they accept?
- What are the office hours? Do they offer weekend/evening hours?
- How long does it take to get a well/sick visit?
- Is office staff friendly? Do they have the same philosophy of parenting as you?
- Ask other parents! Most parents are willing to share their experiences and recommendations.

Car Seat Safety

Your new baby should ride in a properly installed, rear-facing car seat in the back of the car. For the best protection, keep your baby's car seat rear-facing as long as possible, about two years of age. Check height and weight limits on the car seat. For current child car seat laws, please visit dmv.org.

Buying a used car seat is not recommended unless you know its full history. Once a car has been in a crash, the car seat needs to be replaced, even if it was not damaged. There is also an expiration date, double-check the label to make sure it is still safe and replace if expired. To make sure your car seat is installed properly:

- **Inch test.** Once the car seat has been installed, give it a good tug at the base where the seat belt goes through. If the base doesn't move more than an inch either way, it is properly installed.
- **Pinch test.** Make sure the harness is tightly buckled and coming from the correct slots (check the manual). With the chest clip placed at armpit level, pinch the strap at your child's shoulder. If you are unable to pinch any excess webbing, you are good to go.
- **For both rear- and forward-facing child safety seats,** use either the car seat's belt or the lower anchors – and for the forward-facing seats, use the tether to lock into place. Don't use both the seat belt and anchors together. Just use whichever gives you the best fit.
- **Visit a certified technician** to make sure you installed your car seat correctly. Most local fire departments are able to check car seat placement.
- **Register your car seat.** You can do this online or with the mail-in card that comes with the car seat. This will alert you to any recalls.

- **Do not leave your child alone in the car!** It can be tempting if you are running into the store to grab something, but can be very dangerous. The temperature in your car can rise and cause heatstroke very quickly. Leaving your child alone in a car is against the law in many states.

Feeding Your Baby

Deciding whether to breast or bottle feed your infant is an important decision that parents must make. Medical experts say breastfeeding is the best choice for feeding your infant because of the nutritional benefits. However, breastfeeding is not right for everyone. If you are having a tough time deciding, have concerns about medications that you are taking or are concerned about physical limitations, please discuss with your provider.

Breastfeeding

- Breast milk is available with no preparation time and contains the highest level of nutrients.
- Baby has reduced risk of ear infections, asthma, diabetes, allergies and obesity.
- Mom has decreased risk of ovarian and breast cancer, diabetes, heart disease, osteoporosis and post-partum depression.
- Although milk is free, supply costs include: nursing bras, pump, nursing pads.

Bottle Feeding

- Preparation time for formula can vary and you need to carry supplies with you at all times.
- Nutrition content depends on proper preparation.
- Some babies have difficulty tolerating certain formulas.
- Pediatrician/caregiver determines amount.
- Formula can range from 50-200 dollars a month depending on the brand. Supplies needed include bottles and nipples.

Family Maternity Center: Breastfeeding Services

Highland Hospital has certified lactation consultants available to assist you and your baby. Our goals include promoting breastfeeding comfort, confidence, and education. Prenatal classes are offered and encouraged. During your hospital stay, lactation consultants will visit to observe feedings, answer questions or concerns. After leaving the hospital, please call (585) 341-6808 to speak with a lactation consultant about any questions or difficulties.

Community Resources

Eastman Dental

General Dentistry
625 Elmwood Ave.
(585) 275-5051

Urgent Dental Care
(585) 276-5532
Monday – Friday, 8:30 a.m. – 5:00 p.m.

Domestic Violence

Willow Domestic Violence Center

Willow Domestic Violence Center has provided services for the Greater Rochester area for nearly 40 years. In 2015, Willow Center changed its name from Alternatives for Battered Women (ABW). The agency's mission is to prevent domestic violence and ensure every survivor has access to the services and supports needed along the journey to a safe and empowered life. Willow Center provides a full continuum of free, confidential services including:

- 24/7-crisis and support hotline, (585) 222-SAFE.
- Short term counseling.
- Court accompaniment.
- 40-bed emergency shelter.
- Children's programming.
- Prevention education and training.

Resolve

Resolve of Greater Rochester, Inc. is a non-residential resource and support center that serves women rebuilding their lives after domestic abuse and violence. Resolve is located in an eastern suburb of Rochester, NY. Services include safety planning, individual counseling, community resource coordination, life skills training, community and teen violence/abuse prevention education and more. (585) 425-1580.

Transportation

If transportation assistance is needed to attend your appointments, please let us know. We will try to assist you in any way we can.

Nutrition

The Women, Infants and Children's Program (WIC)

The Women, Infants and Children's Program is a supplemental food and nutrition education program that serves pregnant, breastfeeding, post-partum women, infants and children up to the age of five. WIC provides nutritious foods, including low-fat or fat-free milk, cheese, eggs, whole grains, peanut butter/beans, vegetables and fruits. WIC offers breastfeeding support through their Peer Counselor Program at (585) 753-5640. Formula is also available for infants who are either partially breastfed or fully formula fed. If you would like to apply for WIC, please call the Monroe County WIC program at (585) 753-4942.

Supplemental Nutrition Assistance Program (SNAP)

SNAP is a state administered federal nutrition assistance program. Federal Law governs the criteria for eligibility and levels of benefits. Each state is responsible for determining and documenting eligibility, issuing benefits and maintaining records. To apply for SNAP please visit us at 691 St. Paul St. and apply in person or go to mybenefits.ny.gov to apply online. You will be screened that day for expedited benefits and, if eligible, they will be discussed within five business days.

Smoking Cessation

The Quitline is a free and confidential program providing evidence-based stop smoking services to New York State residents who want to stop smoking or using other forms of tobacco. The Quitline is located at Roswell Park Cancer Institute and is supported through the New York State Department of Health.

Quitline Service

- Tobacco-free coaching.
- Free (NRT) nicotine replacement therapy.
- Easy provider referral programs.

The Quitline provides services for English and Spanish speaking clients, and in other languages upon request. **1-866-NY-QUITS** (1-866-697-8747), www.nysmokefree.com.

APPROVED MEDICATIONS IN PREGNANCY

Analgesia (Pain Relief)

- Tylenol

Antibiotics

- Amoxicillin
- Penicillin
- Macrobid
- Erythromycin
- Keflex

Asthma

- Isoproterenol, Proventil, Beconase
- Ventolin, Cromolyn

Cold Remedies

- Sudafed (after 14 weeks)
- Robitussin (guaifenesin)
- Vic's Vapor Rub
- Throat Lozenges
- Afrin Nasal Spray (three-day limit)

Constipation

- Milk of Magnesia, Metamucil
- Colace (docusate sodium)
- Miralax, Senna

Diarrhea

- Kaopectate, Imodium

Hemorrhoids

- Proctoform, Anusol
- Witch Hazel
- Preparation H
- Anusol
- Tucks

Indigestion

- Tums, Maalox, Rolaids, Mylanta
- Pepcid, Zantac, Tagamet or Prevacid

Miscellaneous

- Sulfacetamide Eye Drops
- Hydrocortisone Cream

- Novocain-Lidocaine (with epinephrine, if necessary)
- Benadryl

Nausea and Vomiting

- Doxylamine, 12.5 mg
- Gatorade
- Vitamin B6, 25mg
- Motion sickness wristbands
- Peppermint and/or ginger tea
- Phenergan
- Zofran

Highland Women's Health

Community OB/GYN
909 Culver Road
Rochester, NY 14609

Phone: (585) 341-6732
Fax: (585) 341-8381

Hours: Monday – Friday, 8:00 a.m. – 4:30 p.m.

Part of Highland Hospital

990 South Avenue, Suite 103
Professional Office Building
Rochester, NY 14620

Phone: (585) 341-0101
Fax: (585) 341-0161

Hours: Monday – Friday, 8:00 a.m. – 4:30 p.m.

Part of Highland Hospital

800 Ayrault Road
Perinton Medical Center
Fairport, NY 14440

Phone: (585) 602-0440
Fax: (585) 425-0216

Hours: Monday – Friday, 8:00 a.m. – 4:30 p.m.

Part of Highland Hospital

UR Medicine Midwifery Group

Midwifery Group • R.A.M.P.
(Rochester Adolescent Maternity Program)
909 Culver Road, Suite 2b
Rochester, NY 14609

Phone: (585) 275-7892
Fax: (585) 482-1666

Hours: Monday – Friday, 8:00 a.m. – 4:30 p.m.

Part of Highland Hospital

125 Lattimore Road, Suite 200
Rochester, NY 14620

Phone: (585) 275-7892
Fax: (585) 442-6798

Hours: Monday – Friday, 8:30 a.m. – 4:30 p.m.

Part of Strong Memorial Hospital

