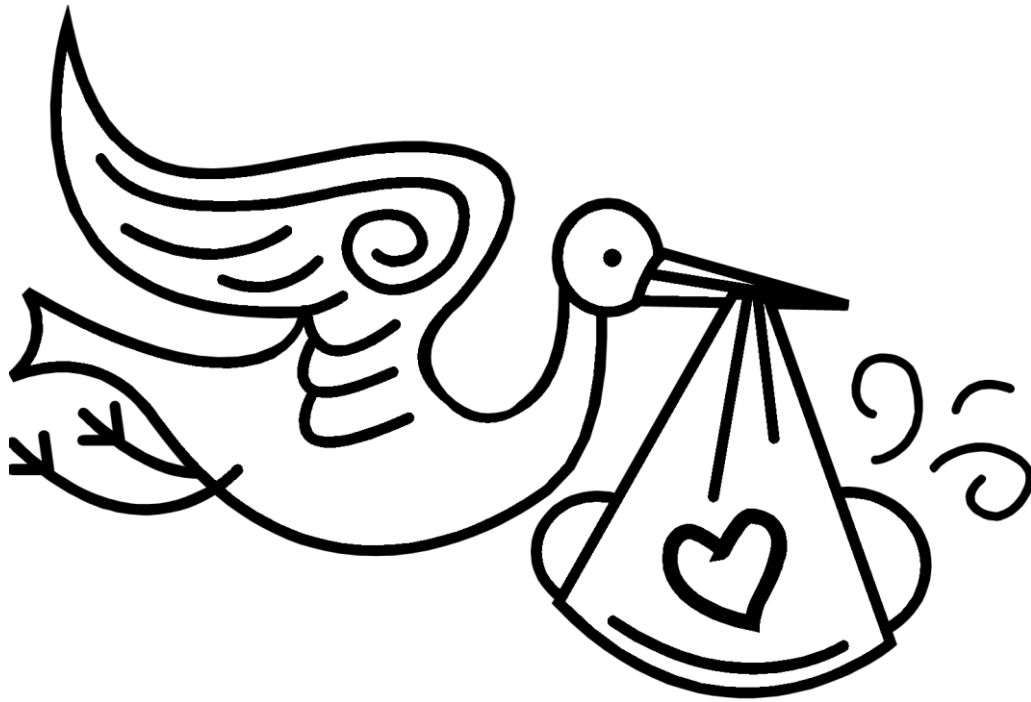




**You're Expecting!**



**CONGRATULATIONS!**

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Dr. Sabrina Harrison

1875 Old Alabama Rd Ste. 210

Roswell, GA 30076

Phone 770-670-6145

Fax 770-670-6146

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## Congratulations on your pregnancy!

Congratulations and thank you for inviting Sovereign Women's Healthcare to be part of this amazing journey with you. We will do everything we can to make your pregnancy and birth experience positive, healthy, and memorable.

You probably have lots of questions, especially if this is your first baby, we hope you can find some quiet time to read this packet which contains important information about the journey ahead.

Most of the changes you will experience over the next nine months are normal. This packet will help you navigate them. It also includes information to help you decide if something isn't going right, and when to call us.

Congratulations, again, to you and your family! Thank you for trusting us to be part of your pregnancy and birth experience.





## Emergencies

In the event of any motor vehicle accident, fall, abdominal trauma, severe pain, lack of fetal movement, leaking of fluid, regular contractions, vaginal bleeding, or any other medical emergency, **please call the answering service and go to Northside Hospital.**

To reach Dr. Harrison after office hours for emergencies, please call the answering service at 404-935-7873 (Press option 1)

If you are going to the hospital for any reason, please call the answering service number prior to arriving to ensure quality care.

**\*Please reserve after-hour phone calls for emergencies only**

**\*If you are having a life threatening emergency please call 911**



## Hospital Affiliation and Deliveries

Dr. Harrison is affiliated with Northside Hospital – Atlanta(only), which is where your delivery will take place. She attends majority of her deliveries. However, if for any reason she is unavailable for a delivery or hospital visit, she is a part of a well trusted call group. If you have a scheduled c-section or induction, you will be given a date and the hospital will contact you regarding your arrival time.

**Northside Hospital Atlanta 1000**

**Johnson Ferry Road Atlanta, GA**

**30342**

**404-851-6733**

**Please complete the hospital preregistration form: [Northside Pre-Registration Forms](#)**

### **FMLA**

Our office may complete any FMLA paperwork that your employer requires. You may bring your forms with you or email ([info@sovwhc.com](mailto:info@sovwhc.com)) and/or fax (770-670-6146) them to our office. Please allow 7-10 business days for paperwork to be completed. Please note that there is a \$50 fee for each form completed. If for any reason you need your forms expedited there will be an additional fee of \$25 to be completed within 2-3 days. Payment must be made before the release of any forms. Any letter needed from this office will have the same charge. Forms will not be completed if there is a balance due to the office.

Our providers can only write you off work during your pregnancy if there is a legitimate medical reason. After delivery, 6 weeks of medical leave is given for a vaginal delivery and 8 weeks for a c-section. Leave greater than 6 or 8 weeks without medical indication is considered Family Leave and is between you and your employer. We cannot extend your postpartum medical leave if there is no medical reason.

**OB Deposit:** Please note the OB Deposit is due in full before 32 weeks of pregnancy. Please verify with your insurance company for information regarding your responsibility. It is the patient's responsibility to inform the office of any insurance changes. **Please report all insurances you may be under to our office. Failure to do so will result in your insurance company denying all medical claims and all balances will become patient responsibility.** \*If you have a second insurance and fail to report BOTH insurances, you may be responsible for the non-negotiated rate.

**Circumcision Deposit:** Circumcisions are optional. If you are having a baby boy and wish to have him circumcised a \$100 deposit will be due by 36 weeks. After the birth of your baby, please contact our office with your baby's name and insurance information. Circumcision deposits may be refundable after insurance payment. Failure to provide necessary information will result in the full payment of \$400 and no refund. Please be aware circumcisions are at the providers discretion. *\*\* Please note that deposits are only an estimate and are subject to change. Once insurance claims are processed and remittances are issued, you may end up owing a portion more or a refund may be owed to you.*



## WHAT TO EXPECT WEEK BY WEEK (normal pregnancy)

At each appointment, we will weigh you, take your blood pressure, listen to the baby's heartbeat, and measure the growth of your uterus after 20 weeks of pregnancy. We will also check your urine for protein and sugar at each visit. For uncomplicated pregnancies, prenatal visits will occur according to the following schedule:

- Every 4 weeks until 26-28 weeks
- Every 2 weeks until 36 weeks
- Weekly until delivery

### Initial visit -

- Your pregnancy will be confirmed with a urine pregnancy test and/or blood draw.
- You may have possible physical exam/pap smear.

*Depending on your estimated gestational age, an ultrasound may not be done on your first visit. First trimester sonograms are for dating purposes only.*

### 8-12 Weeks –

- Ultrasound confirming due date (this ultrasound may be done using a vaginal probe)
- Prenatal lab work will be completed, including STD screening.

Lab Work Drawn at this visit - Depending on your individual needs, you may receive additional lab work.

**Complete Blood Count (CBC)** – To check your hemoglobin and hematocrit levels to identify women who are anemic and may need extra iron supplements. This blood draw can also detect any possible infections and/or blood clotting disorders.

**Blood type and RH screen** – To know your blood type and detect potentially harmful antibodies. **If your blood is Rh negative, then you may be at risk for Rh disease. Rh disease is a pregnancy complication in which your immune system attacks the baby's blood and can result in a life-threatening situation you're your baby. Fortunately, it can be prevented with a shot called Rhogam which is given at 28 weeks. If you are Rh negative, contact our office immediately if you develop bleeding or trauma to your belly.**

**Rubella** – To make sure you have immunity to rubella. If you grew up in the United States, you most likely received the MMR vaccine and have immunity. If you are rubella nonimmune, you may be vaccinated after the pregnancy.

**STD Screen - HIV, Hepatitis B, Hepatitis C, Gonorrhea/Chlamydia/ Trich, RPR/VDRL**

**Urinalysis/Urine culture** – to detect a urinary tract infection (UTI)

**Cystic Fibrosis (CF)** – To detect if you are a carrier of the cystic fibrosis gene. Cystic fibrosis is a progressive, genetic disease that causes persistent lung infections and limits the ability to breathe over time. Depending on your ethnicity, your risk of being a carrier can be as high as 1 in 29. If you are a carrier, we may test the father of the baby. If the father of the baby is a carrier, there is a 25% chance the baby will be affected.

**Sickle Cell Screening** – to detect if you are a carrier of the sickle cell trait. Sickle cell disease is an inherited group of disorders in which red blood cells contort into a sickle shape. With sickle cell trait, a child receives the sickle cell gene mutation from only one parent. In this case, the child doesn't get the disease, but can pass the defective gene on to future generations.



## 15 – 20 Weeks -

- Weight, blood pressure and fetal heart tones
- Second Trimester Genetic Screen- AFP (Optional blood work)
- A referral will be sent to our well trust perinatologist (Georgia Perinatal Consultants) for your anatomy scan. Please be on the lookout for their call to schedule your scan.
- Attend your prenatal classes (optional) [Nothside Hospital Maternity Classes and Tours](#)

**Anatomy Scan** - You will see a perinatologist to view the baby's organs and measure the growth of the baby and the placenta (fetal anatomy scan). The ultrasound also examines the placenta, cervix, and amniotic fluid. Fetal sex may also be determined at this time.

**AFP-** You will be offered the Quad Screen (AFP4) test, which is an indirect screen for genetic and spinal cord abnormalities.

## 24 – 28 Weeks -

- Weight, blood pressure and fetal heart tones
- Screening for Gestational Diabetes

**1 Hour Glucose Test-** To test for gestational diabetes. Gestational diabetes occurs when your body can't make enough insulin during your pregnancy. Mandatory for all of our expectant mothers to complete 1 hour test in office. **You do not have to fast for this test, but we recommend that you should not eat or drink anything containing large amounts of sugar.**

**3 Hour Glucose Test-** If your 1 hour glucose test results to be abnormal, a 3 hour glucose test is mandatory. This is a fasting test. Do not eat or drink anything for 8 hours prior to this appointment. This test does take 3 hours so please schedule appointment appropriately. *Most people with gestational diabetes return to normal blood sugar after delivery.*

*Declining glucose testing is **NOT** recommended. Patients who decline glucose testing will be treated as a gestational diabetic and will be recommended to attend diabetes education classes as well as blood sugar finger sticks. Patient may also be marked as non-compliant.*

**RH Negative** – If you are RH negative, expect to be receiving a RhoGAM injection during this time.

## 32-36 Weeks:

- Weight, blood pressure and fetal heart tones
- Your visits will be scheduled every week.
- Group Beta Strep vaginal culture
- Complete Blood Count (CBC)
- STD Screen (HIV, RPR, Chlamydia, Gonorrhea, Trichomoniasis)
- OB Deposit- Due by 32 weeks of pregnancy
- Circumcision is Deposit (Optional) – Due by 36 weeks of pregnancy.
- **GBS CULTURE-** Group B Strep can be normal for women but may be serious for your newborn exposed at birth. If you are a carrier of GBS (positive result), antibiotics will be administered during labor. Third trimester labs (HIV & Syphilis) will be drawn.



**Complete Blood Count (CBC)** – To check your hemoglobin and hematocrit levels to identify women who are anemic and may need extra iron supplements. This blood draw can also detect any possible infections and/or blood clotting disorders.

**STD Screen** – This will be the last routine STD screen for most patients.

*\*\* Please note that deposits are only an estimate and are subject to change. Once insurance claims are processed and remittances are issued, you may end up owing a portion more or a refund may be owed to you.*

### 37-40 weeks:

- Cervical Exams
- Copy of medical records will be sent to the hospital

**Cervical exam** - Cervical exams will be done at each visit to check if the cervix is starting to dilate. If you are scheduling an induction, we will also schedule that around this time.

**Medical Records** – You will be given a copy of your medical records, please add them to your hospital bag.

### 40 weeks and over:

- Cervical Exam
- Discuss Induction



**If you have passed your due date, Dr. Harrison will discuss an induction of labor with you. An induction may be necessary to prevent any complications for you and your baby and/or cesarean section.**



## BMI and Weight Gain

**How much weight you should gain during pregnancy is based on your body mass index (BMI) before pregnancy?**

BMI is a measure of body fat calculated from weight and height. Gaining more than the recommended amount during pregnancy increases your risk for cesarean section, diabetes, and a large baby. Also, it may be more difficult to lose weight after your baby is born. These excess pounds increase your lifelong health risks of Obesity, Diabetes and Heart disease.

### Weight Gain Recommendations For Women Pregnant With One Baby

If before pregnancy, you were...	You should gain...
<b>Underweight</b> BMI less than 18.5	28-40 pounds
<b>Normal Weight</b> BMI 18.5-24.9	25-35 pounds
<b>Overweight</b> BMI 25.0-29.9	15-25 pounds
<b>Obese</b> BMI greater than or equal to 30.0	11- 20 pounds

### Weight Gain Recommendations For Women Pregnant With Twins

If before pregnancy, you were...	You should gain...
<b>Underweight</b> BMI less than 18.5	50-62 pounds*
<b>Normal Weight</b> BMI 18.5-24.9	37-54 pounds
<b>Overweight</b> BMI 25.0-29.9	31-50 pounds
<b>Obese</b> BMI greater than or equal to 30.0	25-42 pounds



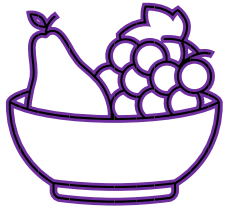


## Nutrition

When you're pregnant, you need more of certain nutrients —protein, iron, folic acid, iodine, and choline. It's also important to get enough calcium, vitamin D, potassium, and fiber.

Making smart food choices can help you have a healthy pregnancy and a healthy baby. Here are some ideas to help you eat healthy during pregnancy.

**Good Food Choices:** Incorporate a well-balanced diet to include lean protein, vegetables, fruits, and complex carbohydrates. Simple carbohydrates like white bread or white rice and sugar should be limited or avoided in pregnancy. Eating healthily is important for both you and your infant.



- Whole fruits —apples, berries, oranges, mango, and bananas
- Veggies —broccoli, sweet potatoes, beets, okra, spinach, peppers, and jicama
- Whole grains —brown rice, millet, oatmeal, bulgur, and whole-wheat bread
- Proteins —lean meats and chicken, eggs, seafood, beans and lentils, nuts and seeds, and tofu
- Low-fat or fat-free dairy —milk, yogurt, cheese, lactose-free dairy, and fortified soy beverages(soy milk) or soy yogurt
- Oils — like vegetable oil, olive oil, and oils in foods such as seafood, avocado, and nuts

Excessive weight gain during pregnancy can lead to backaches, leg pain, fatigue, varicose veins, difficult birth or cesarean section. It also makes measuring and assessing your baby's growth more difficult. Too little weight gain increases your risk of pre-term birth or having a low birth weight baby.

**In general you should eat a well-balanced diet, which should include:**

- 4 servings of milk, cheese, or yogurt (skim or low-fat milk is fine)
- 3-4 servings of protein - meat, eggs, poultry, legumes
- 5 servings of fruits and vegetables
- 4-6 servings of grains, cereal, rice, bread, pasta (4 whole grain servings)
- Limit sweets and sugary drinks such as juice, soda or sweet tea

**Water:** Water is vital for you and your baby. Your goal should be to drink at least 8-10 eight-ounce glasses of water a day.

**Food Choices to Avoid:** Avoid nitrites in processed meats such as bacon, hot dogs, salami, and pepperoni. Avoid unpasteurized cheese such as brie, feta, or blue cheeses. Avoid any raw or undercooked meat.



**Women who are pregnant or nursing should NOT eat the following fish: KING MACKEREL, SHARK, SWORDFISH, TILEFISH, TUNA STEAK (AHI) and any mother fish high in mercury.**



## Exercise

Unless otherwise directed by your provider, it is recommended that you walk at least 20-30 minutes a day. Exercise during pregnancy can help to decrease some common discomforts, make labor faster, make vaginal birth easier and help to keep you healthy and feel your best.

If you already exercise it is safe to continue. If you have not been exercising, you may exercise but do not start very strenuous activity. The safest exercises to perform during pregnancy are swimming, walking, stationary cycling, and low impact aerobics. Jogging is safe if done in moderation. Try to keep your heart rate below 140 beats per minute. Your sense of balance will change as the pregnancy progresses, so be careful with sports that require balance such as tennis.

### **You should not exercise if you experience any complications during your pregnancy such as:**

- Bleeding or spotting
- A low placenta
- History of miscarriage
- Previous pre-term birth or labor

### **Exercises to avoid include:**

- Any exercise that requires you to hold your breath
- Skiing
- Horseback riding
- Any activity where falling may occur
- Contact sports
- Any activity that may cause trauma to the abdomen
- Deep knee bends
- Full sit-ups
- Double leg raises
- Straight-leg toe touches
- Activity that requires lying on your back for more than 3 minutes
- Excessive jumping, hopping, skipping, bouncing or running
- Exercising in hot humid weather



ALWAYS drink plenty of water while exercising. Stop any activity and call the office if you feel pain, nausea, light headedness, short of breath, have vaginal bleeding or spotting, or if you are not feeling fetal movement. If you have a pre-existing medical condition such as diabetes, asthma or heart disease, consult your healthcare provider before beginning ANY exercise regimen.



## Substance Use During Pregnancy

**Alcohol:** The harmful effects of alcohol consumption during pregnancy are well-known and include physical defects, learning disabilities, and emotional problems in children. Experts have not yet defined a safe level of alcohol for women who are pregnant, nor do they know whether or how babies differ in their sensitivity or reaction to alcohol. Therefore, you should abstain from any further consumption and avoid all alcoholic beverages during your pregnancy. Let your health care provider know if you are finding it difficult to stop drinking alcohol.

**Tobacco:** When you smoke, the placenta is deprived of nutrients and oxygen, which means that less of these get to the developing fetus. Babies born to mothers who smoke are more likely to be at a low birth weight and have health problems such as poor lung function. Smoking can also lead to pre-term labor and an increased risk of placenta previa, or which is when the placenta covers the opening to the uterus. If you need assistance with quitting smoking, please let your health care provider know.

**Illegal Drugs:** Using drugs such as marijuana, heroin, cocaine, meth, and other illegal substances during pregnancy has adverse effects on the developing fetus and newborn. These drugs cross the placenta and enter the fetal blood stream. Use of these drugs can affect central nervous system functioning and can lead to premature delivery, growth retardation, withdrawal symptoms in the newborn, behavioral problems, or even stillbirth. If you use illegal drugs, please notify your health care provider so that we may help you.

### Traveling



Traveling while pregnant is permitted up until 32 weeks for a single gestation as long as there have been no complications during the pregnancy. The exact cut-off time for traveling if pregnant with multiples is at the providers discretion. Keep in mind the travel restriction will be earlier than 32 weeks.

Should you experience complications such as bleeding, spotting, high blood pressure, pre-term labor or any other condition that requires close monitoring, you will be advised NOT to travel at any time during pregnancy. If permitted to travel and you will be traveling long distances, it is advised that you move around frequently and avoid sitting for long periods. This may result in blood clots.

If you do not experience any complications, please inform your provider if you plan to travel at any time during pregnancy. A copy of your records will be given to you just in case you go into labor while out of town.





## Approved Medications

*The following over-the-counter medications and home remedies have no known harmful effects during pregnancy when taken according to package directions*

<b>Seasonal Allergies</b>	Cetirizine (Zyrtec), Loratadine (Claritin), Fexofenadine (Allegra), Diphenhydramine (Benadryl).  Nasal Sprays: Nasacort, Flonase, Afrin
<b>Cold and Flu</b>	Sudafed, Actifed, Dristan, Neo-synephrine, Tylenol Cold & Sinus, Robitussin DM, Vicks Cough Syrup  <b>**DO NOT TAKE "MULTI-SYMPTOM" FORMS OF THESE MEDICATIONS**</b>
<b>Constipation</b>	Metamucil, Citrucel, Fibercon, Colace, Senekot
<b>Diarrhea</b>	Kaopectate, Imodium
<b>First Aid Ointment</b>	Bacitracin, Johnson & Johnson, Neosporin
<b>Headache</b>	Acetaminophen (Tylenol) (Avoid Ibuprofen)
<b>Heartburn</b>	Maalox, Mylanta, Tums, Riopan, Gaviscon
<b>Hemorrhoids</b>	Preparation H, Anusol, Tucks, Witch Hazel
<b>Nausea &amp; Vomiting</b>	Unisom ¼ or ½ tablet at bedtime, Vitamin B6 25MG 2-3x/day, Emetrol (DO NOT TAKE IF DIABETIC), Ginger Root 250MG 4x/day, Sea Bands
<b>Rashes</b>	Hydrocortisone cream or ointment, Caladryl lotion or cream, Benadryl cream, Aveeno Bath
<b>Tooth Pain</b>	Orajel, Acetaminophen (Tylenol)
<b>Yeast Infections</b>	Miconazole, Monistat 3 day or 7 day

**We cannot advise ANY OTC herbal supplements due to limited research studies and limited regulation by the FDA.**



## Common Pregnancy Related Symptoms

**Braxton Hicks:** Painless, random contractions of the lower abdomen and groin, often a tightening feeling of the uterus. These are “warm-ups” to labor contractions and may occur during the 2nd and 3rd trimester. On the other hand, if you experience timeable, and/or regular contractions, try to lay down and drink fluids, and call if they do not decrease or resolve with these measures.

**Constipation:** An increase in progesterone often causes constipation during pregnancy. To minimize constipation, please hydrate with water, walk 30 minutes daily, eat foods high in fiber, eat foods high in magnesium. Please see “Safe Medication list.”

**Headaches:** Ensure you are drinking at least 8-10 eight-ounce glasses of water a day. Oftentimes, headaches are due to dehydration. Avoid triggers - staring at a cellphone, computer or TV for prolonged periods, and exposure to hot climates. Tylenol can be taken for relief, but avoid NSAIDs such as Motrin or Ibuprofen. If your headache becomes severe or symptoms are worsening, please notify the office.

**Heartburn:** Your hormones and growing baby belly contribute to this pregnancy symptom. Eat small meals and snacks instead of large portions. Avoid eating before bed and trigger foods (ex. spicy foods, fried foods, fatty foods, citrus foods, and tomato based foods). Please see “Safe Medication List.”

**Nausea:** Nausea tends to peak at or around week 11 and gets better around 16 weeks. Make sure to notify your provider if you are unable to tolerate food or liquids. To help: Eat small meals and snacks throughout the day, eat crackers before you get out of bed in the morning or during the middle of the night, keep something bland on your stomach every 1-2 hours, carbonated beverages including ginger ale, peppermint tea, and ginger tea or candy. Please see “Safe Medication List.”

**Round Ligament Pain:** There are two main ligaments that grow, support, and hold the uterus as your baby gets bigger. As these ligaments stretch, you may feel a sharp pain on either side of the lower pelvis region. Sometimes the feeling can be dull or originate in the lower groin area. To help: stretching, hydration, or a heating pad or a warm compress to the area. In addition, a pregnancy support pillow can often be very beneficial in relieving these aches and pains.

**Hip pain and backaches:** As pregnancy advances, the baby gains weight and puts more pressure on your back, during this time hormones relax the joints between your pelvic bones. It is recommended to sit in chairs with good back support, apply heat and/or ice to painful areas. Contact the office if the pain does not go away or is accompanied by other symptoms.

**Sciatica:** As your baby grows, you may notice some pain in your buttocks area or radiating down the back of your thighs. Sciatica occurs as a result of compression on your spinal column from your growing baby. To help: Sciatica stretches, hydration, walking, a pregnancy pillow, a maternity support belt, and limiting prolonged standing and/or sitting.

**Swelling:** It is common to notice some swelling in your lower legs, ankles, and feet. Be sure to drink plenty of water and elevate your legs at nighttime. If you stand for prolonged periods of time at work, you may want to invest in compression stockings to help alleviate some swelling. If you notice your swelling is not getting better, or becoming worse, please call the office.



## What to expect financially



You're not alone if the cost of having your baby is top of mind! We've put together the following information to help answer the most common questions we hear. However, no two insurance companies are the same, and ultimately, your specific policy will determine your out-of-pocket costs.

### How does my insurance company find out I'm pregnant ?

It's a good idea to let your insurance company know that you're pregnant. We recommend you call the member services number that can be found on your insurance card. They will probably ask you for the following information: your estimated delivery date, your provider's name, the hospital where you plan to deliver, and if you are planning a vaginal or cesarean delivery. This is a great time for you to ask questions about your maternity benefit as well as where you stand with your deductible for the year.

**Global fees:** It simply means that after your first visit; your office visits, the delivery of your baby, and your post-delivery visit are billed to your insurance company as one fee after you welcome your new baby. Depending on your policy, you may be responsible for a portion of the "global fee".

**Out of pocket cost:** The best way to avoid a surprise down the road is to contact your insurance company now so they can explain your pregnancy benefit and help you estimate any out-of-pocket costs. Your costs will likely fall into two categories: your co-insurance and your deductible and /or out of pocket maximum. If you are responsible for a portion of the global fee, also called co-insurance, you will pay this amount by 32 weeks of pregnancy.

**Additional Charges:** Other than routine urine screens, ultrasounds, non stress tests, and injections are examples of additional services you may need or want to have done during your pregnancy. Also, any visits with any complaints other than routine OB visits, will be part of the global fee. Since these services aren't included in the global fee, we will bill your insurance company if we provide the service. If there is an unpaid balance, you are financially responsible, and payment is due at your next visit.

**Hospital fees:** Although we're not involved in these bills, they should count towards your deductible. You should talk with the hospital before your delivery about their charges and what to expect.

**Pregnancy Transfer:** If for some reason, you need to transfer your care during your pregnancy, we will bill your insurance company for the services provided prior to the transfer. Any balance not paid by insurance remains your responsibility. You will be responsible for the cost of transferring the record.

**Let us know as soon as possible if your insurance changes. Having the correct insurance information helps us both and reduces the likelihood of billing issues after your delivery.**

**Failure to turn in any additional insurance you have will result in a claim denial and all balances will become *patient responsibility*.**





## What To Pack For The Hospital

- Your prenatal records that our office will provide for you after your Group B Strep screening
- Bathrobe and slippers
- Hair brush
- Toothbrush and toothpaste
- Lip balm, gum or hard candy your mouth will be dry.
- Something comfortable to wear home
- Nursing bra — the cups open for breast feeding.
- Phone numbers for your doctor and the baby's doctor
- Cell Phone/Charger
- Insurance Card/Number—to call after delivery in order to add the baby

## PACK FOR BABY

- Car seat (have it installed prior to delivery)
- Baby's clothes
- Baby's Socks
- A special outfit for first pictures
- light blanket and a warmer blanket

## Videotaping



Videotaping is NOT permitted until the newborn has transitioned to the incubators after being delivered. It is NOT permitted during delivery under any circumstance. This may pose as a distraction and compromise patient care.

Your understanding and cooperation is greatly appreciated. Please check the hospital policy, as well and advise friends/family.

## Labor Signs & Symptoms Contractions

**Contractions:** Contractions are often described as cramping sensation, usually starting in the lower back and radiating to your belly. During a contraction, your belly will become hard. When it is over, the abdomen becomes soft again.

- To time contractions: (1) Time the interval (start counting at the beginning of one contraction to the beginning of the next). This is how far apart the contractions occur. **Once your contractions are about 5 minutes apart for 1 hour, call the office.** (2) Time the contraction duration (how long they last). You start counting at the beginning of a contraction to the end of the same contraction.

**Rupture of Membranes:** The amniotic bag is leaking or "water breaks." Some women will experience a gush of fluid, but sometimes it is a recurrent trickle. If you are not sure, call the office.

Please keep in mind that these are only guidelines and every expectant mother's body is different. If you have any questions or believe you may be in labor, call the office. After hours, the doctor on call will be contacted.



## Post Partum instruction

Congratulations on the birth of your baby! Here are some general instructions to guide you from delivery until your postpartum appointment.

1. Make an appointment to see your doctor for a checkup:
  - Vaginal delivery—Six (6) weeks for your Post-Partum Exam
  - Cesarean Section—Two (2) weeks for an Incision check
2. Refrain from douching, tampons, and swimming until after your post-partum checkup.
3. No driving for two weeks after delivery; for C-Sections until you have had your Incision Check appointment.
4. If breastfeeding, continue your prenatal vitamins daily, eat a well-balanced diet, and increase your fluid intake to 10-12 glasses of water per day. With any signs of a breast infection (fever, flu-like symptoms, pain or redness) call the office for further evaluation.
5. If not breastfeeding, continue to wear a good supportive bra, use ice packs, and Tylenol for pain.
6. Vaginal bleeding may continue for 6-8 weeks after delivery while the uterus is returning back to pre-pregnancy state. You may have spotting and or a menstrual like flow. Increased activity increases the flow. If bleeding is persistently heavy call the office for further evaluation.
7. Constipation is very common. Drink 6-8 glasses of water or 100% fruit juice. Citrucel, Metamucil, and stool softeners (Colace) may be used. Include foods like bran cereal, fresh fruits and vegetables in your diet. Stool softeners are recommended while taking pain medication.
8. Exercise—Avoid sit ups, jumping jacks and any aerobics until after your post-partum exam. You may walk; do kegels, and simple abdominal tightening exercises.
9. Post-Partum blues is a normal response to the hormonal changes your body is experiencing. Please let us know if you need additional assistance.
10. Abstain for sexual intercourse until the post partum visit is completed and you are cleared.
11. You may climb stairs twice a day for the first two weeks. Too much activity will delay your healing.
12. Call the office if you have a fever greater than 100.4 degrees and/or swelling or tenderness in the lower legs.
13. For C-Sections, keep your incision clean with soap and water. Call the office if the incision is swollen, red, or has any unusual drainage. Remove any steri-strips after 7 days. Before your 1-2 week incision check.
14. Showering is permitted.





## HELPFUL TIDBITS

There are quite a few of helpful websites that track the baby's approximate growth during pregnancy. Apps are available for your smart phone as well that will send weekly alerts updating you on your beautiful blessing.

Try these:

[www.whattoexpect.com](http://www.whattoexpect.com) (app available)

[www.thebump.com](http://www.thebump.com) (allows you to make a personalized website dedicated to your baby)

We are always here for any questions or concerns. No question or concern is silly to us so please feel free to call anytime during office hours.

And once again, congratulations!

