

# *Prenatal Packet*



## **Congratulations on your pregnancy!**

Thank you for choosing Eagles Landing OB/GYN as your healthcare provider.  
Please keep this packet as it contains important information regarding your prenatal care.

***Gestational Age:*** \_\_\_\_\_

***Estimated Due Date:*** \_\_\_\_\_

### **Contact Information:**

Eagles Landing Ob/Gyn: (770) 474-1919

Piedmont Henry Hospital Labor & Delivery: (678) 604-3240

# Please Read The Important Information Below:

***Insurance:*** Most insurance carriers provide coverage of obstetrical services from routine OB office visits to postpartum care. Other services such as, but not limited to, ultrasounds, nonstress tests, problem visits, hospital admissions prior to delivery, fee related services for high risk pregnancies, cesarean sections, anesthesiology fees, hospital fees, lab related fees and non medical related services *may not* be covered under your global benefits. Therefore, these services will be charged and billed separately. Payments for these services will be due at the time of service.

**It is your responsibility to *notify us of any insurance changes throughout your pregnancy.***

***Genetic Testing:*** Your insurance coverage may have certain restrictions and/or exclusions to genetic testing and labs that are recommended during your pregnancy. Please contact your insurance carrier for details or questions that you might have about your coverage and limitations for all OB services.

***Contact Information:*** Accurate contact information is vital while providing care to you. If there are changes to your information, please make the front desk staff aware. We will then update your information on file. Keep in mind, without updated information, we will not be able to reach you regarding lab results, future appointments, and important health care related information.

***Appointments:*** Please arrive 10-15 minutes before your scheduled appointment time. If you arrive after your scheduled appointment time, you may be asked to reschedule. There are **no children older than 12 weeks old allowed in our office** (this includes our waiting room area and the hallway). Please make arrangements for children prior to your appointment. If you arrive with children, you will be asked to reschedule.

***Providers:*** After your 16 week OB education visit, you will be asked to rotate future visits among providers. This will allow you the opportunity to meet all OB providers. Listed below are the providers. Please be sure to meet everyone during your pregnancy.

**Deborah Haynes, MD**

**Amanda Phillips, MD**

**Clarisa Haugabrook, MD**

**Annie Cruz, MD**

**Ann Dobry, MD**

**Kristina Louissaint, NP**

**Stephanie McElreath, NP**

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# Prenatal Appointment Timeline

Weeks Gestation	Exam Appointment
<b>6-10 Weeks</b>	Confirmation of pregnancy. Full physical exam including pap smear & pelvic exam. Information will be provided about genetic testing.
<b>10-13 Weeks</b>	<b>Initial ultrasound</b> - determine size of baby and formalize due date. <b>Genetic testing &amp; OB labs</b> - Complete blood count, Blood type, Rubella, Syphilis, Hepatitis B & C, HIV and Herpes. Also, <b>1st part of genetic screening</b> will be drawn.
<b>14-16 Weeks</b>	<b>Education visit</b> - Meet a Nurse Practitioner and discuss family history and pregnancy in more detail. <b>Second part of genetic screening</b> will also be drawn.
<b>20 Weeks</b>	<b>Anatomy and Gender Ultrasound.</b> Detailed review of fetal structures and determination of the sex of the baby. Genitalia are present at this time, but we cannot guarantee full visualization of genitalia and accuracy.
<b>24-26 Weeks</b>	<b>Gestational Diabetes Screen.</b> Mandatory for all of our expectant mothers to complete 1 hour test in office. You do not have to fast for this test, but you should not eat or drink anything containing large amounts of sugar.

<b>28-30 Weeks</b>	<p><b>Please preregister for delivery.</b> Piedmont Henry Hospital Registration is located on the 2nd floor of the North Tower. You will need the registration packet, your picture ID and your insurance card to register.</p> <p><a href="https://www.piedmont.org/patient-tools/pre-registration">https://www.piedmont.org/patient-tools/pre-registration</a></p>
<b>36 Weeks</b>	<p>Pelvic exam for cervical check and <b>Group B Streptococcus swab</b>. 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 &amp; Syphilis) will be drawn.</p>
<b>37-40 Weeks</b>	<p>Weekly appointments! It is important to keep all appointments so that we can make sure both you and your baby are healthy. If you are occasionally contracting or having Braxton Hicks contractions, your provider may check your cervix to see if your cervix is dilated.</p>

**Routine Office Visits:**

1st Trimester to 28 Weeks = Every 4 Week Appointments

28-36 Weeks = Every 2 Week Appointments

>36 Weeks = Weekly Appointments

**\*Unless otherwise ordered by your OB provider, Eagles Landing OB/GYN will only offer 2 routine prenatal ultrasounds during your pregnancy.\***

# Weight Gain During Pregnancy

1st Prenatal Appointment BMI: \_\_\_\_\_

BMI	Pregnancy Weight Gain
<18.5	28 to 40 lbs.
18.5-24.9	25 to 35 lbs.
25.0-29.9	15 to 25 lbs.
30-34.9	11 to 20 lbs.
>35.0	<10 lbs.

**Please note: Gaining more than the recommended weight during pregnancy can increase your risk of complications including Diabetes, Cesarean section, or having a large infant (macrosomia). It may also be more difficult for you to lose the weight after pregnancy and increase your lifetime risk of Obesity, Diabetes and Heart disease.**



# Nutrition & Exercise

- ***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 healthy is important for both you and your infant.
- ***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.* *Avoid fish high in mercury* during pregnancy (see handout from 16 wk OB education visit).
- ***Water:*** Water is vital for you and your baby. Your goal should be to drink at least **1 gallon of water daily.**
- ***Exercise:*** Unless otherwise directed by your provider, it is recommended that you walk *at least 20-30 minutes a day.* Forms of exercise that are encouraged include walking, swimming, prenatal pilates, and prenatal yoga. We do not want you to participate in any form of exercise that is too strenuous or increases your risk of falling or injury.

# Safe Medication During Pregnancy

<b><i>Allergies</i></b>	Cetirizine (Zyrtec), Loratadine (Claritin), Fexofenadine (Allegra), Diphenhydramine (Benadryl). Nasal Sprays: Nasacort, Flonase, Afrin
<b><i>Cold Symptoms (Cough, Sore Throat)</i></b>	<u>Fever</u> : Acetaminophen (Tylenol); <u>Congestion</u> : Saline nasal spray; <u>Cough</u> : Guaifenesin (Robitussin), Dextromethorphan (Delsym); <u>Sore Throat</u> : Halls, Cepacol, Sucrets lozenges
<b><i>Constipation</i></b>	<u>Foods</u> : Prune Juice, Dried Prunes, Coconut Oil; <u>Fiber Supplement</u> : Benefiber, Metamucil; <u>Stool Softener</u> : Docusate (Colace); <u>Laxative</u> : Polyethylene Glycol (Miralax), Milk of Magnesium, Sennosides (Senokot), Magnesium Citrate
<b><i>Diarrhea</i></b>	Loperamide (Imodium, Maalox Anti-Diarrheal, Pepto Diarrhea Control)
<b><i>Gas/Bloating</i></b>	Simethicone (Gas-X, Mylicon), Gaviscon (Mylanta)
<b><i>Headache</i></b>	Acetaminophen (Tylenol) *see common pregnancy symptoms*

# Safe Medication During Pregnancy

<p><b><i>Heartburn (Indigestion)</i></b></p>	<p>Calcium Carbonate (TUMS), Gaviscon (Mylanta); Magnesium/Aluminum Hydroxide (Maalox); Pepcid (Famotidine); Zantac (Ranitidine); Prilosec (Omeprazole); Nexium (Esomeprazole)</p>
<p><b><i>Hemorrhoids</i></b></p>	<p>Hydrocortisone Cream/Suppositories (Preparation H); Witch Hazel Pads (Tucks Pads)</p>
<p><b><i>Nausea &amp; Vomiting</i></b></p>	<p>Doxylamine (Unisom) ½ tablet three times a day <b>plus</b> Vitamin B6 100 mg three times a day; Emetrol; Ginger 250 mg four times a day <b>*see common pregnancy symptoms for additional measures*</b></p>
<p><b><i>Sore Throat</i></b></p>	<p>Warm gargles with tea, lemonade, or salt water (OK 1st trimester); Halls drops/Cepastat (OK 1st trimester); Chloraseptic</p>
<p><b><i>Sleep</i></b></p>	<p>Diphenhydramine (Benadryl, Sominex, Nytol), Unisom (Doxylamine), Tylenol PM</p>

# Safe Medication During Pregnancy

<b><i>Tooth Pain</i></b>	Orajel; Tylenol or Tylenol Extra Strength
<b><i>Rashes/Skin Irritations</i></b>	Hydrocortisone Cream (Cortaid); Diphenhydramine Cream (Benadryl)
<b><i>Yeast Infection</i></b>	Miconazole (Monistat)

# Labor Signs & Symptoms

***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.

***Bleeding:*** It is very common toward the end of pregnancy to have a pink or reddish spotting after a vaginal exam or after intercourse. In the last few weeks of pregnancy, you may notice a thick mucus vaginal discharge that may be streaked with blood (called “show”). If you notice any bright red bleeding, especially if it is running down your legs, 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. Please allow 15 minutes for a return call.**

# Common Pregnancy Related Symptoms

- ***Braxton Hicks:*** Oftentimes described as practice contractions, Braxton Hicks feel like menstrual cramps or lower back pain that is typically not consistent or repetitive. Sometimes being dehydrated can cause Braxton Hicks. Therefore, please drink plenty of water.
- ***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, a small amount of prune juice or dried prunes, and decrease caffeine consumption. Please see “Safe Medication list.”
- ***Headaches:*** Ensure you are drinking at least 1 gallon (128 ounces) of water daily. 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**. Try **Sea Bands (accu-pressure)**. Excess saliva production is common in the first trimester and managing this symptom with chewing cinnamon gum or sucking on hard candy may be of added benefit. 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 pelvic 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.
- ***Shortness of Breath:*** During the 1st trimester and especially into your 3rd trimester, you may experience shortness of breath. In your 1st trimester, the hormone progesterone causes you to breathe more frequently which may make you feel short of breath. In the third trimester, as the uterus gets bigger and pushes up on the diaphragm, your lungs have more difficulty expanding. As the baby moves down into the pelvis closer to your due date, some relief is experienced. **To help:** sit and stand tall, slow position changes, sleep with the head of the bed elevated or extend your arms above your head for a couple seconds. All of these things can allow for easier lung expansion and deep, full breaths.
- ***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.
- ***Vaginal Discharge:*** An increase in vaginal discharge is very common and a normal part of pregnancy. If it is accompanied by irritation or an odor, please call the office.

# Frequently Asked Questions

***Am I Allowed to Travel?*** Yes. Unless otherwise ordered by a physician, you may travel up to **36 weeks**. If traveling by car, stop every 2 hours for a short stretch or walk and to empty your bladder. If traveling by plane, make sure cabins are pressurized as with large planes. Helicopters and commuter planes are not usually pressurized.

## ***Should I Continue Working Throughout Pregnancy?***

Yes. We would like you to continue your regular work schedule as normal. Unless otherwise determined by your healthcare provider, we do not limit working during pregnancy.

## ***Am I Allowed to Go to the Dentist?***

Yes. If X-rays are absolutely necessary, make sure that lead apron is used to shield your abdomen. Numbing agents such as Novocaine, Carbocain, and Xylocaine are allowed. Nitrous Oxide is not permitted. If your dentist requires written consent for treatment, please contact the office 48 hours prior to your appointment for dental work. **Remember:** Daily dental care of brushing teeth twice daily, flossing, and using mouthwash are especially important during pregnancy.