



a guide to
pregnancy



THE VERANDA

Having a baby is one-of-a-kind experience.
Regardless of how many times a woman gives birth,
every baby is different...every pregnancy is different...
every patient is different.

Everything revolves around mothers-to-be at our
Obstetrical Care Center. Here you will find physicians
backed by a team of highly-skilled healthcare professionals
committed to providing personalized care.

**Our team is excited to be a part of this special
time in the life of your family.**



OFFICE HOURS

Monday - Thursday | 8:30 a.m. to 4:30 p.m.

Friday | 8:30 a.m. to 12:00 p.m.

Please call 229-883-7010 to make or change appointments.



TELEPHONE NUMBERS AND POLICY

To more efficiently handle your concerns, we ask that you call during office hours to address routine questions. We will be able to review your history and address your issues quickly. Our direct phone number for Obstetrics is 229-430-9215.



EMERGENCY TELEPHONE AFTER HOURS

We are always available after hours to address urgent concerns and emergencies. After hours, please call our answering service at 229-432-8559. We will return your call and address any questions you may have. Our physicians are always available to address any significant concerns. Please remain near your phone and be available to speak with us when your phone call is returned. As always, if you feel the problem is an emergency, and you need immediate attention, please go directly to Labor and Delivery at the hospital. They will perform an initial evaluation and contact us.

BACK PAIN

Back pain may increase noticeably. Remember, as your uterus grows and protrudes more, your center of gravity changes. At the same time, your pelvic joints are relaxing. Strengthening your muscles through exercise, especially walking, may be very helpful. Practice good posture, proper lifting, wearing low-heeled shoes, and resting whenever possible is also beneficial. A warm bath, not hot, or a heating pad may help. Tylenol every four hours may also be used as needed.

BLADDER

Your bladder function will certainly change. Early on, you will have frequency caused by pressure of the growing uterus on the bladder. This will occur again late in pregnancy. Urinary frequency may also be caused by bladder infections, which could progress to kidney infections which could then cause pre-term labor and require hospitalization. Therefore, if you are suspicious of a urinary tract infection, please contact us. To help prevent infections, drink large volumes of water, urinate frequently, wash before and after intercourse, and wear cotton underclothes. Signs of urinary tract infections include frequency, burning or difficult urination, low abdominal pain or pressure, blood in the urine, fever or a strong odor. Call us as soon as possible. We can treat urinary tract infections with antibiotics after it is confirmed with a urinalysis or a urine culture.

DENTAL CARE

It is important that you continue to see your dentist on a routine basis. Notify the dentist that you are pregnant, and then any x-rays that he or she thinks are necessary are perfectly okay provided that your abdomen is shielded. We have no problem with the dentist using Novocain with any work that needs to be done in your mouth. However, we do ask that gas is not used.

DIABETES SCREENING

Some healthy women during their pregnancies will develop problems with dealing with sugar. This is called gestational diabetes. This condition can potentially be very dangerous to you and to your baby. Therefore, we test all our patients for this problem. This is very simply done. At about 28 weeks, we will have you come to the office for a blood test. No special instructions must be followed. Eat and drink as normal. Once here, you will be asked to drink a sweet drink called glucola. You will then wait one hour and then blood will be drawn. We ask that you not eat, drink, chew gum, or smoke during that hour. If abnormal, you will be notified and a three-hour glucose tolerance test will be scheduled. Specific instructions will be given to you at this time. If this test is normal, you will proceed with your pregnancy as usual. If it is abnormal, you will be enrolled in our gestational diabetic group.

DIZZINESS

A possible cause is a sudden drop in blood pressure when changing positions from sitting to standing. Pregnancy hormones contribute to the phenomenon by causing blood vessel walls to relax, and thus allowing blood to pool in the lower extremities. Sometimes the growing uterus simply lies on the aorta and causes a faint feeling. This is remedied by leaning forward, supporting the upper body, and taking slow deep breaths. The feeling should pass rapidly. Avoid lying on your back after 20 weeks. Let us know if you do lose consciousness. To help prevent this, move slowly, drink plenty of fluids, and as stated, avoid laying flat on your back after 20 weeks. The most important thing is to be careful to avoid falls and accidents.

EARLY SYMPTOMS

Some of the first things that you will notice in pregnancy are fatigue, sleeplessness, nausea, vomiting, and headaches. These may be caused by the changes in hormone levels. Most of these symptoms will go away by the fourth month. Try to arrange your schedule to allow extra rest times, go to bed earlier, and take a nap if possible. Nausea and vomiting, while distressing, will also usually subside after three to four months. Helpful hints would include eating smaller meals, avoid spicy foods, and avoid strong odors. Keeping something in your stomach, such as crackers, especially before rising in the morning may be helpful. Drink as much as possible. It is important to keep from getting dehydrated. Vitamin B-6 200mg daily or Imitrol over-the-counter may be helpful. Headaches are usually caused by changes in the circulatory system. Try Tylenol. If none of the above suggestions are helpful, please call our office to discuss this with the doctor.

EXERCISE

We ask that you continue to exercise as long as your pregnancy is uncomplicated. Anything that you are use to doing should be permitted with a few notable exceptions. Try not to push yourself to the point you become overtired. Stay hydrated, drink six to eight glasses of water daily. Swimming is an excellent form of exercise, and if you are not physically active already, we would suggest that you start a walking program. It is very important for you to stay as healthy and in the best shape possible for you, not only for your own well being but it may improve the labor and delivery portion of this pregnancy.

GROUP B STREP INFECTION

Group B strep is a normal bacterium found in some pregnant women. It most often is found in the vagina and rectum. While this does not affect the mother, GBS can be very dangerous and even fatal to the baby. We therefore follow the guidelines of the American College of Obstetrics and Gynecology. We give antibiotics during labor to those mothers with GBS. Group B strep cultures will be done at 35 weeks gestation. If you have any questions regarding this, please discuss them with your physician.

HEARTBURN OR INDIGESTION

Heartburn or indigestion will also be noticed from mid-to-late pregnancy. This is caused by the uterus crowding the stomach and pushing it upward. This can cause some stomach contents to escape back up into the esophagus, causing a burning sensation. The best way to treat this is to eat small amounts of food, avoid fried or spicy foods, try not to over distend your stomach with a lot of liquids at one time, wait to drink fluids 30 minutes or more after eating or finishing medication, chew food more thoroughly before swallowing, elevate the head of your bed by an inch or so, and using over-the-counter medications such as Pepcid, Zantac, Prilosec, Tagamet, Maalox, Tums, or Mylanta.

LOWER ABDOMINAL PAIN

This is a common complaint. There can be numerous reasons for this. One of the most common is “round ligament pain.” This is a sharp, pulling, stabbing pain low on either side of the abdomen near the groin. They usually increase with movement, getting up from a sitting position, sneezing, laughing, etc. Moist heat applied to the areas, Tylenol, lying on the opposite side, and changing positions slowly may help. A pregnancy abdominal support (such as the Prenatal Cradle or Mom-Ez) may be helpful. If you have bothersome vaginal varicose veins, we should perform an examination and tight-fitting undergarments may help (such as the V2 Supporter). The second cause of abdominal pain could be Braxton-Hicks contractions. These are mild, irregular tightening of the uterus. They do not intensify or increase in frequency. They may be more intense after intercourse or with dehydration. They usually disappear spontaneously. Drinking lots of fluids also helps. Constipation can also cause abdominal discomfort. Pregnancy hormones, as well as prenatal vitamins with iron can slow the digestive tract and create constipation. Several over-the-counter medicines and increasing liquids, as well as bran cereals, can be helpful with this. Contact us if the problem persists.

MEDICATIONS

Routine medications that patients take on a daily basis will be discussed with you at the time of your history and physical during the early part of pregnancy. You will be told whether or not we feel it is important that you continue these. While we try to discourage any over-the-counter medication usage in the first trimester of pregnancy, there are occasions when it is necessary for patients to take medication. Below is listed some of the common causes of reasons for medications and what we deem as safe for you to take in your first trimester of pregnancy without calling us.

Cold, Sinus & Flu	Chlor-Trimeton, Robitussin plain, Halls*, saline nasal drops or spray, Romilar, Trind-DM, Vicks Cough Syrup, Dristan, Neosynephrine*, warm salt water gargles, Tylenol, Tylenol Cold or Extra Strength Tylenol, Mucinex, Sudafed or Actifed, Robitussin DM. <i>*Do not take "SA" (sustained action) forms or "Multi-Symptom" forms of these drugs.</i>
Constipation	Colace, Surfak, Metamucil, Citrucil, Fiberall/Fibercon, Milk of Magnesia, Senekot, Doxidan after the first trimester. No stimulants such as Ex-Lax or Correctol should be used.
Heartburn	Maalox, Mylanta (either tablets or liquids), Gaviscon, Titralac, Pepcid, Zantac, Prilosec, Tagamet or Riopan. Tums one hour before meals, or one hour after meals.
Nausea	Emitrol, Emetrex, Sea Bands, Unisom ½ tablet, Vitamin B6 (100 mg tablet) and Benadryl 25mg tablet.
Yeast Symptoms	Monistat, Terazol or other over-the-counter medicine after the first Trimester.
Diarrhea	Imodium AD, Donnagel PG, Kaopectate, Parepectolin
Insomnia	Tylenol PM, Unisom or Benadryl
Hemorrhoids	Preparation H, Witch Hazel or Anusol, along with Tucks pads.
Allergy	Antihistamines including: Zyrtec, Chlorpheniramine (Chlor-Trimeton, Efidac, Teldrin), Diphenhydramine (Benadryl), Loratadine (Alavert, Claritin, Loradamed, Tavist ND Allergy)
First Aid Ointment	Bacitracin, J & J, Neosporin
Headaches	Tylenol (acetaminophen)
Rashes	Benadryl cream, Caladryl lotion or cream, Hydrocortisone cream or ointment, Oatmeal bath (Aveeno)

NOTE: It is ok for you to rub Bengay or Icy Hot on someone else. Be sure to wash your hands thoroughly afterwards.

MEDICATIONS TO BE AVOIDED

Full-strength Aspirin, Accutane, egison or Etretnate, and Thalidomide. Discuss vitamin supplements other than a Prenatal Vitamin with us before use. Avoid Vitamin A above the RDA.

ALTERNATIVE MEDICINES WHILE PREGNANT

Alternative therapy, such as herbal medicines, is becoming more popular and readily available at most health food stores, supermarkets and drug stores. While herbal medicines may have usefulness, it is extremely important that you become knowledgeable about the affect any product can have on your unborn child. Some herbs can even effect your reproductive cycle and decrease your chances of conception, or cause miscarriage. While it is correct that these products may be “natural,” it is incorrect to assume the products have no adverse side effects particularly if you are pregnant or have an underlying chronic illness. Some herbs can be safe and useful during pregnancy. Below is a list of “safe” herbs and the symptoms for which they are helpful.

SAFE HERBS

Some herbs can be safe and useful during pregnancy. Below is a list of “safe” herbs and the symptoms for which they are helpful.

Leg Cramps	Consider Black Haw
Morning Sickness	Consider Chamomile, ginger, raspberry leaf
Heartburn	Consider Chamomile in moderation, ginger in moderation
Headache	Consider Lavender Flower bath
Urinary Tract Infection	For prevention consider cranberry pills

SAFE ALTERNATIVE THERAPIES

Nausea in early pregnancy: Acupuncture, acupressure, ginger root (250 milligram capsules 4 times a day), and vitamin B6 (pyridoxine, 25 milligrams two or three times a day) work well. Sipping the thick syrup from inside a can of peaches, pears, mixed fruits, pineapples, or orange slices may also help.

Backache: Chiropractic manipulation

UNSAFE HERBS

Aloe	Ura Ursi	St. John's Wort
Golden Seal	Senna	Chaste Tree (vitex)
Licorice	Black Cohosh	Pennyroyal
Feverfew	Kava Kava	Arbor Vitae
Beth Root	Blue Cohosh	Cascara
Cinchona	Cotton Root Bark	Chinese Angelica (dong quai)
Ginseng	Juniper	Meadow Saffron
Yarrow	Poke Root	Rue
Sage	Slippery Root	Tansy
White Peony	Wormwood	Yellow Dock

AVOID THESE AROMATHERAPY ESSENTIAL OILS

Calamus	Mugwort	Pennyroyal
Sage	Wintergreen	Basil
Hyssop	Myrrh	Marjoram
Thyme		

RH FACTOR

RH testing is done at your first office visit. If you are Rh positive, you have nothing to be concerned about. If you are Rh negative, we will ask to type the baby's father's blood. If he is also Rh negative, the chances of problems are very small. If, however, he is Rh positive, we will be giving you a shot of RhoGam (Rh immune globulin) at approximately 28 weeks. If the paternity is uncertain and you are Rh negative, then you will need to receive RhoGam. This is because we do not know the baby's blood type. During any pregnancy, small amounts of Mom's and baby's blood can be mixed. If the baby's blood is Rh positive, Mom's blood could recognize this as an invader and send antibodies to fight the baby. Since the development of RhoGam, this problem has dramatically lessened, and we almost never hear of "blue baby" or Rh hemolytic disease anymore. The RhoGam neutralizes the baby's blood that has entered the mother's circulation. That helps prevent any fighting between blood types. After your baby is born, his or her blood will be typed. If your baby is Rh negative, no more RhoGam is needed. However, if your child is Rh positive, a bigger shot of RhoGam will be given to you, thus protecting you during your next pregnancy. Rh negative Moms should have small amounts of RhoGam given to them after miscarriages, after blood transfusions, amniocentesis, turning of breech babies, tubal pregnancies, or pregnancy terminations. after blood transfusions, amniocentesis, turning of breech babies, tubal pregnancies, or pregnancy terminations.

SAUNAS AND HOT TUBS

You could harm your baby if you raise the temperature of his or her environment over 100 degrees for prolonged periods of time. Therefore, very hot water and steam should be avoided during the early parts of pregnancy. We would recommend that you avoid hot tubs while you are pregnant, and saunas are out completely.

SEAT BELTS

We strongly suggest that you continue wearing seat belts now that you are pregnant. You not only are protecting yourself, but you are protecting your baby also. It is best that you wear both a shoulder and a lap belt. Place the lap belt under your abdomen across your pelvis (where the legs meet the abdomen, at the level of your waist, you can press down and feel the pelvic bone on each side; this is where the seat belt lap strap goes). The shoulder belt should be kept above the high point of the abdomen, but low enough to avoid having it cross over your neck. Remember, wearing a safety belt makes you 60% less likely to be injured or killed in an accident.

SEX

There is absolutely no reason to interrupt your normal sex life in an uncomplicated pregnancy. As long as it is desirable and comfortable to you, this should not cause a problem. Should you be at risk for pre-term labor or have bleeding problems, we may ask you to refrain. Otherwise be assured your child is well protected and sexual activity will not harm him or her. The only sexual activity known to be dangerous during pregnancy is intentional blowing of air into the vagina, and this must be stopped if practiced.

SHORTNESS OF BREATH

Shortness of breath is usually noted later in pregnancy. This is caused by pressure of the growing uterus on the diaphragm. If bothersome, concentrate on relaxing, taking deep breaths, reaching your arms up to help expand the chest sometimes helps. Try not to exert yourself. Sleep with your head elevated. Avoid tight fitting clothing. Indigestion can sometimes give you this sensation. Tums or Maalox may help. Remember that a mildly bothersome or noticeable shortness of breath especially in the 2nd and 3rd trimesters may be normal. However, shortness of breath that significantly limits your activity, is distressful, or makes you feel that you cannot breathe well should be evaluated immediately.

SKIN CHANGES

Multiple skin changes will be noted throughout the pregnancy. Moles that you have had all your life will appear to darken. You may develop some dark brown patches on your face or the rest of your body. Most women will develop a dark line from the belly button to the pubic hair. Stretch marks may also develop with rapid growth of the body. These are seen on the breasts, on the buttocks, and the lower abdomen. While these stretch marks are generally upsetting to most women, there is no evidence-based way to prevent or decrease stretch marks. Using moisturizers or creams does not prevent or decrease stretch marks. Excessive weight gain does make it worse so if you can keep your weight under control, this will help prevent the stretch marks. Just remember, stretch marks, with time, will fade and may not be as noticeable as they are right now.

STRONG CHEMICALS

You should avoid contact with any strong chemicals. With household chemicals, it is recommended that you use rubber gloves when these are unavoidable. As far as hair care goes, you can have perms or hair coloring or hair stripping done, provided that you are in a well ventilated area. Painting at the house is not a problem, again provided that you are in a well ventilated area. Latex paint is recommended. Avoid any exposure to lead-based paints.

SWELLING

This may also be seen in the latter half of pregnancy. This may be due to the abdominal pressure trapping fluid in your legs and feet. To help, elevate your feet or lie on your left side. Do not stand or sit for long periods of time. Limit your salt intake. Most normal meals contain adequate salt, and supplemental salt can be avoided. Swelling in the morning when arising that is as bad as when you went to bed at night should be reported to us. New or increasing swelling in the upper arms, hands or face should also be reported to us, especially after 20 weeks of pregnancy. This may be an indicator of concern for toxemia or hypertension.

TRAVEL

Traveling is usually no risk for you or your baby, particularly during the 1st and 2nd trimesters. We do ask that after 35 weeks of pregnancy, that you don't plan to go far from home as complications could develop and it would be easier for us to handle these since we have taken care of you during the pregnancy and know the full picture. If, however, it is a necessity for you to travel near the end of pregnancy, if you will notify our office, we can make a copy of your records that you can hand carry with you, in case you need to be seen by another doctor while you travel.

VAGINAL DISCHARGE

This will increase during pregnancy. This is also due to the pregnancy hormones. If this discharge itches, burns, or has a foul odor, please contact us. You may notice some vaginal spotting, especially early in pregnancy, after a vaginal exam, Pap smear, or intercourse. This should be minimal. Any heavy bleeding should be reported to us.

WORKING

Pregnancy is a completely normal and healthy state. It is not a sickness, although you may have tiredness, nausea, vomiting, pelvic discomfort, back pain, dizziness, or minor swelling of hands or feet. You should be able to carry on with normal activities that you are accustomed to. We can discuss your work to determine if you may need modifications of your work. To certify either partial or complete disability, the physician must find a definite medical indication that either a patient's health or her baby's health would be endangered by continuing normal activities. Such indications might be, for example, high blood pressure, excessive swelling, severe anemia, kidney or heart disease, severe diabetes, or a previous history of selected complications during pregnancy. We will consider disability or work-modification requests on a case-by-case basis.

