

**ALL ABOUT WOMEN, OBSTETRICS AND  
GYNECOLOGY**

Stephen G. Smith, M.D.  
Tricia M. Percy, D.O.  
Roslyn V. Mallory, M.D.  
Katie M. Webb, D.O.  
Charlie N. Kelly, ARNP-BC

**PRENATAL PAMPHLET**



*All About Women* **OBGYN**  
OBSTETRICS & GYNECOLOGY

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70 Doctors Drive  
Panama City, FL 32405  
850-785-1517  
Fax 850-784-1271

## **CONGRATULATIONS**

On behalf of the physicians and staff at ALL ABOUT WOMEN OG/GYN we would like to congratulate you on your new addition and welcome you to our practice! We are pleased to have you and your baby as patients and look forward to going through this journey with you. Our goal is to provide you and your family with the highest quality prenatal care.

We feel that the more informed you are, the less stress and anxiety you will have about your pregnancy, thus is the reason for this prenatal booklet. This booklet contains a lot of helpful information that will guide you throughout your pregnancy and after childbirth. In this you will find information such as: over the counter medications that are safe to take during pregnancy, signs and symptoms of labor, traveling, etc. We encourage you to bring this with you to all your appointments.

## **LOCATION**

We are located across from Gulf Coast Regional Hospital Emergency Room which gives convenient access from our office to the hospital.

## **STAFF**

Our front office staff: Stephanie, Roselyn and Christi are friendly and courteous and will help you with scheduling appointments and with any financial matters. Our nurses: Tiffany, RN (Office Manager), Jessica, LPN, Sarita, LPN, Amy, LPN, Gisele, LPN and Courtney, LPN are caring, experienced, dedicated, and sensitive to the special needs of pregnancy. Other staff include: Sonographers, Kay and Kayla, Medical assistants Kellie, Clara, and Taylor. Hilliary is our Healthy Start Navigator. We hope that you feel comfortable with trusting them as part of our health care team.

## **SCHEDULING APPOINTMENTS**

We believe that there is great value in establishing a trusting relationship between patient and physician. We want you to have every opportunity to develop a relationship that makes you feel confident in the care you are receiving. It is our intention that you develop a comfortable "patient to doctor" relationship through your scheduling of appointments with each one of us during the course of your prenatal visits. A sincere attempt is made to keep on schedule with your appointment. Of course, people do not become sick or go into labor on schedule. If major schedule changes are necessary, we will try to inform you as soon as possible. Likewise, if you need to change your appointment, we appreciate you notifying us as soon as possible.

## **OFFICE HOURS AND TELEPHONE NUMBERS**

Our office opens at 7:00a. m. and closes at 4:00p. m. each normal week day except Wednesday when we close at 12:00p.m. Beginning with 7:00 a.m. until 4:00p. m, telephone calls are answered in the office. After the office is closed, you can contact us for **EMERGENCIES ONLY** through our on call nurse.

The telephone number for scheduling appointments and all regular activities is 785-1517. After regular business hours, telephone calls are forwarded to an answering machine. Although the office is still open, any call to the nurse after 3:00p.m will be answered on the next regular working business day. An office nurse can be contacted after regular business hours for **EMERGENCY QUESTIONS ONLY** by calling the nurse's phone at 866-3445. If you have a medical emergency please go to the nearest emergency room.

## **GULF COAST REGIONAL MEDICAL CENTER HOSPITAL**

To avoid deliveries or emergencies at two separate hospitals our hospital privileges are exclusively with Center Gulf Coast Regional Medical Center. If you go to another hospital, you will have to be evaluated by a physician with privileges there. To expedite hospital paper work that will be required when you go into labor it is recommended that you pre - register at Gulf Coast Hospital's Admission Office located on the ground floor at the main entrance, before the 9 month or the 36th week of pregnancy.

## VISITS

You will be asked to give a urine specimen at each visit. If you need to go to the restroom when you get here just let the front staff know so that you can go ahead and leave your specimen. We will also get your blood pressure and weight each visit. We ask that you arrive **10-15 minutes early to help keep your appointment on time.**

During your FIRST visit information will be asked about your past medical and surgical history. We will also ask you questions about your family history, social habits (such as smoking, drinking and drug use), past pregnancies, as well as current medications. This information is very important and could affect the outcome of your pregnancy.

After this information has been answered you will meet with one of our nurses for new OB counseling to discuss lab work that will be ordered, and a more in depth look at social habits, and any medical problems. It is very important that an accurate history be given in order that we may counsel you on any possible risk that the baby may have of developing similar or related problems. A few examples of an inheritable condition are: Sickle Cell Anemia, Tay-Sachs, Cystic Fibrosis, Hemophilia and Huntington's chorea. Notify us as soon as possible if you or the baby's father suspect one of these or any other possible inherited problems. We can provide or arrange for genetic counseling.

## ULTRASOUND

Ultrasound (2D, 3D and 4 d) is useful for accurately dating your pregnancy and for diagnosing certain problems. It is not able to identify every problem of pregnancy. An ultrasound examination is requested by your physician in response to pregnancy or medical indications. A 2-D or 3-D ultrasound may also be done by patient request or for sex diagnosis, but insurance carriers generally cover only those that are performed for medical or pregnancy indications. If you would like an ultrasound to determine gender you may do so at a charge of \$280.00. If you like, you may also purchase a DVD/CD for \$5.00 cash ONLY.

## **PRENATAL LABORATORY BLOOD TESTS**

A number of blood tests are recommended at various times during your pregnancy for either routine screening or for indicated reasons. Generally, these tests help us identify problems that may not otherwise be obvious. If you know or think you are 15 weeks and pregnant and have not yet done the initial laboratory tests, come to the office as soon as possible to make the necessary arrangements. The following is an explanation of some of the more routine blood tests that are often recommended.

**PRE NATAL PROFILE**-Standard collection of screening tests that are lumped together which includes:

- \* CBC-Checks for anemia which could be caused from nutritional or hereditary reasons.
- \* BLOOD TYPE, Rh FACTOR, & ANTIBODY SCREEN-Checks for possible incompatibility between maternal and fetal blood.
- \* HEPATITIS B & C- Checks for unsuspected Hepatitis B and Hepatitis C viruses that could be transmitted to the fetus, newborn baby or others
- \* RUBELLA TITER- Checks for evidence of previous Rubella immunization
- \* RPR- State required test checking for syphilis
- \* HIV- Detects possible carriage of the Human Immunodeficiency Virus which may lead to AIDS. If this test is positive it must be confirmed by additional testing before a diagnosis is made because there may be false positives
- \* URINALYSIS- Checks for infection in the urine
- \* PAP- If you have not had one in the last year.
- \* GONORRHEA/CHLAMYDIA- Checks for STD
- \* SICKLE CELL or THALASSEMIA- Screen for African American, Asian or Greek ethnicity
- \* HARMONY TEST- Screens for possible birth defects and gender
- \* CYSTIC FIBROSIS- Optional test for all patients--Screens for the carrier gene for Cystic Fibrosis

## **LABORATORY TESTS DONE LATER**

**I.SERUM PREGNANCY SCREENING**- Tests for the risk of a certain few genetic related developmental birth defects. It cannot be used to confirm a problem but only to draw more attention to an increased risk. This test requires accurate estimation of the gestational age of the fetus. If the result of this test is dramatically

increased then further testing using ultrasound and/or amniocentesis may be recommended.

**II. GLUCOSE TOLERANCE TEST** - Screening test that is performed to detect a common condition called Gestational Diabetes, if the 1 hour glucose test is abnormal. This test is done fasting and takes 3 hours to complete. You will need an appointment with the lab for this test. The major risk with this is that the extra sugar will go to the baby making the baby large and more difficult to deliver. Gestational Diabetes can usually be managed by diet.

**III. TEST FOR Rh NEGATIVE WOMEN**- If your blood type is Rh negative, it will be necessary for you to have a RhoGam injection. RhoGam is a medication given to you in a shot to prevent any incompatibility between you and your baby's blood by preventing sensitization. Since the baby's blood circulation is in very close proximity to your circulation there is a chance that some of the baby's blood can transfer to you, especially during delivery. Subsequent pregnancies are at increased risk. By giving RhoGam after delivery (the most important time) 96% of sensitizations are prevented. If RhoGam is given at 28 weeks of pregnancy, prevention of sensitization increases to 98%.

**IV. GBS** - GBS is short for Group B Streptococcus; which is a normal bacteria found in the vagina. It is NOT a STD nor will it cause you any problems. However, a positive GBS can affect your baby since they have not yet developed immunity. A swab for culture will be performed between 35-37 weeks. If you test positive or have a history of testing positive you will get antibiotics during labor and delivery.

## **MENSTRUAL AGE & WHAT TO EXPECT**

When discussing how far along you are in the pregnancy, obstetricians use menstrual age in weeks. We estimate how many completed weeks it has been since the first day of your last menstrual period. In cases where the date of the last menstrual period is uncertain, irregular, or undependable, we usually use ultrasound to help estimate the number of menstrual weeks. Ultrasound helps us measure the size of the fetus and it estimates weeks by computer comparison to an average growth rate. Since fetal growth is more consistent and relatively rapid early in pregnancy, early ultrasounds are usually more accurate for dating purposes than those done later in the pregnancy.

## **PREGNANCY TIPS**

### SEE THE DOCTOR REGULARLY

It is very important that you keep regular appointments during pregnancy in order for us to monitor how you are doing and to spot potential problems. Your weight, blood pressure and urine will be checked. The interval growth of your baby will be evaluated and additional tests may be requested during certain visits. You may receive advice about healthy habits to adopt during pregnancy.

### EAT WELL

It is important to eat 3 balanced meals and 3 snacks when possible. A healthy diet, rich in proteins, vitamins, iron, calcium and fiber help give your body and the baby's body what they need for normal function and development. Quality protein is present in cow's milk, soy milk, cheese, eggs, nuts and meat. Vitamins in fruits and vegetables and from your prenatal vitamin pill are necessary for normal development of the baby. Iron from meats and from your vitamin is essential for new additional blood formation that occurs in normal pregnancy. Iron supplementation in your prenatal vitamin helps prevent anemia. During your pregnancy you should be drinking **8-12 glasses** of water a day to stay well hydrated. Milk is a good source of Calcium but should not replace water. If you don't like milk or have an allergy you can take plain calcium supplements like: Os Cal (no added Vitamin D) TUMS, Caltrate. Avoid excessive amounts of foods that are mostly sugar like soda, juice, sweetened cereals, crackers, cakes, bread, pasta, and foods that are over processed with saturated fats and as a result have empty calories. Natural fresh foods usually provide the best nutrition during pregnancy. While pregnant certain types of fish should be avoided such as: Shark, Swordfish, King Mackerel, Tilefish, Sushi, and Tuna due to the risk of Mercury. You should limit you intake of cooked freshwater fish to 6 ounces per week and 12 ounces of store bought or canned tuna per week.

### EXERCISE MODERATELY

During pregnancy, exercise is beneficial for cardiovascular fitness, muscle tone and strength. Your overall well-being and tolerance of labor may be enhanced if you are physically fit. On the other hand it is important to know that during pregnancy your tendons and ligaments are more susceptible to strains and injury. For these reasons it's best to check with s before continuing or starting an exercise program.

### GET SUFFICIENT REST

Take time to lie down and rest with your feet up whenever you feel tired or fatigued. Getting into a habit of regular afternoon napping is a good way for you to maintain normal energy levels during your pregnancy. After delivery, the habit can be continued by napping while you baby naps.

### AVOID ALCOHOL

Alcoholic beverages may lead to birth defects and mental retardation and should be avoided. If you have a drinking habit, please tell us immediately so that the proper treatment and support can be given.

### QUIT SMOKING

Smoking cigarettes during pregnancy exchanges some of your vital oxygen for poisonous carbon monoxide and other toxins. This may lead increased risk of miscarriage, premature delivery, placental separation and other problems. For this reason, it is advised that you stop smoking as soon as possible.

## PROBLEMS

If you have an URGENT EMERGENCY go straight to Gulf Coast Hospital for evaluation. If you are having minor problem or question please call during regular hours to schedule an office appointment. If the office is closed, emergencies are evaluated and managed at Gulf Coast Hospital by the physician on call.

### FOR THE FOLLOWING PROBLEMS PLEASE CALL OUR OFFICE

- \* Slight spotting or minimal bleeding without pain.
- \* Mild pain or burning with urination can be a urinary tract infection.
- \* Persistent dizziness or fainting.
- \* Mild abdominal pain with no other symptoms.
- \* Vaginal discharge that may be a sign of early infection.
- \* Severe abdominal pain that does not subside, accompanied by vomiting or bleeding.
- \* Fever of 100.5 degrees F usually represents an infection and is best diagnosed and treated immediately.
- \* Severe vomiting, severe diarrhea.
- \* Sudden severe headache, unrelieved by Tylenol
- \* Increase in contractions (5 per hour) before 37 weeks. In some people contractions may feel like intermittent low abdominal tightening or cramps. This may be a sign of premature labor
- \* Absence of fetal movement for 12 to 24 hours after 26 weeks. You should feel baby move 10 times in 2 hours if you carefully observe it



by lying still in a quiet room without any disturbances. Babies will have normal sleep cycles lasting an hour or so during which time they do not noticeably move.

### **NORMAL LABOR AND DELIVERY**

If you know that you're in labor, or if your bag of water breaks immediately to Gulf Coast Hospital. If you are unsure whether labor has started and it is not office hours go to Gulf Coast Hospital Labor and Delivery to be evaluated. Our office does offer scheduled Induction of labor, but not before 39 weeks, unless medically necessary. While an induction of labor is elective we do have four providers and there is no guarantee that your preferred provider will be the one who delivers your baby, although every attempt will be made to accommodate.

### **EPIDURALS**

Epidural anesthesia can be very helpful to some people through labor and delivery. Many times relief of pain and tension relaxes the pelvic floor muscles and will speed up labor. Medicine is infused through your back to numb labor pains from contractions. Before recommending whether you have an epidural placed the risks and expected benefits are discussed. Alternatively, we can administer medication intravenously to help make labor and delivery less painful.

### **CESAREAN DELIVERY**

Cesarean deliveries are usually scheduled for around 39 weeks unless it is medically indicated to do sooner. After delivery, your incision should be kept clean every day by washing with mild soap and water and pat dry. Notify your doctor immediately if you develop a fever

greater than 101, drainage from your incision, severe pain or redness. NO heavy lifting greater than 10 pounds. If other small children are in the home have them climb up and sit next to you rather than picking them up.

### **POSTPARTUM FOLLOW UP**

You should follow up in the office 1 week after cesarean delivery and 2 weeks after a vaginal delivery. This appointment is important because you need to be evaluated to make sure your episiotomy (if necessary) or incision is healing properly.

**Birth control after delivery-** There are many different options available for birth control. These options will be discussed at your 6 week follow up appointment.

**CIRCUMCISIONS- SOME INSURANCE COMPANIES DO NOT COVER CIRCUMCISIONS.** -If you want your baby circumcised, it is preferred to perform this one or two days after deliver before you go home. Please check with the front office staff to see if you're insurance covers circumcision. If it is not covered we will still do the procedure for \$200.00 which must be paid full before discharge from the hospital. To care for circumcision clean with warm soapy water and apply Vaseline to prevent the diaper from sticking to the penis. Make sure to keep the skin pulled back each diaper change to help with healing.

### **EDUCATIONAL SOURCES**

We recommend that you buy one of the several pregnancy guides available in many book stores, for example, "What to Expect When You're Expecting". These books will help make you more informed about fetal development, proper diet, breastfeeding, normal physiological changes and what to look for as far as potential problems. It can also be useful, especially if this is your first pregnancy, to attend prenatal classes.

### **PRE NATAL & CHILD BIRTH CLASSES**

Our office offers prenatal classes taught by Kay Hankins, RN, BSN to explain the changes you are experiencing during your pregnancy and to prepare you for a healthier childbirth experience. Class topics include: managing your pregnancy, gestational diabetes, preparation for labor and delivery and postpartum, breastfeeding and newborn

care. To reserve a seat in the classes go to our website [www.aawob-gyn.com](http://www.aawob-gyn.com) or call 850-785-1517. All class schedules are available online at [www.aawob-gyn.com](http://www.aawob-gyn.com).

## **HEALTHY START**

This state program offers special services for women who need extra help during pregnancy and after. The services may include home visits, assistance with transportation, nutritional counseling, smoking cessation, and breast feeding education, childbirth classes, and others. Hilliary is our Healthy Start Navigator located in the front of our office, she can also be reached by calling 850-785-1517 Ext. 130.

## **FREQUENTLY ASKED QUESTIONS**

1. Can I get a flu shot? We recommend that all women receive the influenza vaccination. However, we do not recommend the nasal form because it is a live vaccine. You can get at any local pharmacy.
2. Can I travel? You can travel during pregnancy until 36 weeks. You may travel by air up to 34 weeks. When traveling stay well hydrated, make frequent stops to allow you to stretch your legs. Always make sure to check with your doctor before traveling.

## **OTHER IMPORTANT NUMBERS**

Gulf Coast Regional Medical Center-Labor and delivery - (850)  
747-7990  
Pregnancy center resources-(850) 763-1100  
745 Grace Ave.

## **CONCLUSION**

Although this booklet is written to help you become familiar with us and to offer a few suggested pregnancy guidelines, reaching our goal of a healthy mother and healthy baby means we will care for you individually with sensitivity. There may be growing pains that are mental or emotional and not just physical. How you feel about your body may change. There may be new stresses that require new or

renewed coping strategies. In most pregnancies we are given a healthy and wonderful newborn baby and a healthy new mother. Since it is a loving God in whom we trust, all outcomes are ultimately in his hands and we pray that you will have a positive, fulfilling, and joyful, pregnancy experience.

### **PREGNANCY MEDICATION LIST**

Generally no medication should be taken unless they are known to be safe, will help remedy a problem, and are prescribed.

**\*Common Cold-** For low-grade fever, less of 100.5 take up to 1000 mg of **Acetaminophen (Tylenol)**. Follow the

instructions on the box. Generic brands are also acceptable: Equate, CVS, Wal-Greens, etc. NO Aspirin or Ibuprofen  
**\*Sinus/Allergy Congestion-** Regular Sudafed, Claritin, Allegra, Zyrtec, Benadryl or any Tylenol product. Follow the instructions on the box.

**\*Cough and Congestion-** Robitussin, Dimetapp, Delsym, Mucinex. Follow the instructions on the box, be sure to increase fluids for hydration. If symptoms persist for more than 48 hours, make appointment to see the doctor.

**\*Sore Throat-** Throat sprays, lozenges such as Cold-Ez

**\*Heartburn/Acid Indigestion/ Reflux-**Tums, Mylanta, Riopan, Maalox TC, Zantac, Pepcid AC, Prilosec. Tums provides extra calcium.

**\*Morning Sickness-** Eating small frequent meals, crackers and taking extra Vitamin B6 50mg four times a day may help, Ginger capsules 250mg every 6-8 hours every day, Dramamine 50-100mg every 4-6 hours

**\*Body Pain/Headache/Ligament pain-** Ligamentous stretching pains of lower back, groin, abdomen, or pubic area can take Tylenol

**\*Constipation-** Take Metamucil, Fibercon, Surfak, Colace, Senekot. Follow directions on box

**\*Hemorrhoids-**Use Tucks pads, Preparation H, Anusol

**\*Intolerance of Prenatal Vitamins-** Vary the foods you take with the vitamins, drink an extra glass of your favorite beverage or water. If you are still having side effects or trouble with taking your prescribed prenatal vitamins, remind the office to try a different prescription. An over the counter multi vitamin with iron or children's chewable can be a last alternative.

**\*Diarrhea-** Imodium Follow directions on box