



*Dunwoody OB/GYN*

# Guide to Your Pregnancy

A.L. Sermons, M.D., F.A.C.O.G. & Lisa Price, M.D., F.A.C.O.G.  
1829 Independence Square, Suite One, Dunwoody, GA 30338 • 770-551-9616  
[www.dunwoodyobgyn.com](http://www.dunwoodyobgyn.com)

# **WHAT'S IN THIS BOOK**

<b>OFFICE POLICY.....</b>	<b>3</b>
<b>PRENATAL CARE .....</b>	<b>4</b>
<b>PRE-NATAL CARE TIMELINE.....</b>	<b>5</b>
<b>VISIT SUMMARIES .....</b>	<b>5</b>
<b>SUGGESTED OPTIONAL PRENATAL SCREENING TESTS .....</b>	<b>7</b>
<b>STAYING HEALTHY DURING PREGNANCY.....</b>	<b>8</b>
<b>DIET.....</b>	<b>8</b>
<b>VEGETARIAN DIET.....</b>	<b>8</b>
<b>THINGS TO AVOID.....</b>	<b>8</b>
<b>EXERCISE.....</b>	<b>9</b>
<b>SEX.....</b>	<b>9</b>
<b>DENTAL CARE.....</b>	<b>9</b>
<b>DISABILITY DURING PREGNANCY.....</b>	<b>10</b>
<b>APPROVED MEDICATIONS DURING PREGNANCY.....</b>	<b>11</b>
<b>WHAT TO PACK FOR THE HOSPITAL.....</b>	<b>12</b>
<b>PACK FOR BABY.....</b>	<b>12</b>
<b>POSTPARTUM INSTRUCTIONS.....</b>	<b>13</b>
<b>FREQUENTLY ASKED QUESTIONS.....</b>	<b>14</b>

# Welcome To Your New Pregnancy!

Pregnancy can be an exciting time that is filled with a variety of emotions, including doubt and change. Our goal is to be by your side, providing you with the highest quality medical care and support. We will work together as a team to help guide you through your entire pregnancy and delivery. Please take some time to read through this guidebook which includes some general information to help aid you and provide a resource for you and your new baby.

## OFFICE POLICY

Although, Dunwoody OBGYN is considered a group practice, we are unlike most other modern practices in that we have only two physicians! What this means for our patients is that at *mostly* all of your scheduled appointments in our office you will only be seen by your selected physician. It also provides you with a peace of mind to know that your doctor will be with you throughout your pregnancy experience and in the delivery room when it is time for your baby's arrival. Our physicians are very dedicated to each patient. Therefore, we ask for your understanding and patience if we are not able to see you at your scheduled time. Obstetrics is not an easily scheduled practice of medicine. Occasionally, your physician could be called out unexpectedly to perform a delivery or care for a patient in the hospital. We hold your scheduled appointment in the highest regard and will make every effort to inform you as we are made aware of any emergent situations. In the event of an emergency that requires either Dr. Price or Dr. Sermons to be unavailable during your appointment time, we will offer you the option to see our other physician (*if available*) or offer the next available appointment slot that fits your schedule.

If between your regularly scheduled appointments you have questions, do not hesitate to contact the office. Our policy is to respond to you as soon as possible but definitely by the day's end. Please reserve all after hours calls for true emergencies. If you need to reach us after hours, we have an answering service that is available 24 hours a day that will page the on-call physician. You may reach our answering service by dialing our **main office number, 770-551-9616**.

Throughout your pregnancy you may require certain forms to be completed for Family Medical Leave Act (FMLA), Short Term Disability (STD), Supplemental Income, etc. We are more than happy to complete the forms for you. Upon check-in at our office, please give the forms to our front office personnel or you may **fax them to our office at 770-394-3647**. Please note that there is a \$25 fee for each form completed. Form completion takes 7-10 business days for completion. The payment for the form is expected upon our receipt of the form. To avoid delay, please ensure that you call our office to make payment or make payment when the form is presented.

# PRENATAL CARE

Pregnancy lasts about 280 days. To figure out when your baby will be born:

1. Look at a calendar
2. Find the day that your last period started (LMP)
3. Count backwards 3 months
4. Add 7 days.

That is your *estimated due date* (EDD).

***However, your baby might not be born on your due date.*** Few babies arrive on the exact date. Your due date could be off if your period does not come regularly or if you ovulate (release an egg) early or late in your cycle. Expect your baby any time within 2 weeks before or after your due date, or generally between 37 and 41 weeks.

## ***Ultrasound***

Your doctor might suggest an *ultrasound*. Ultrasound uses sound waves and a computer to make a picture of the baby. The picture shows the baby's age, and whether you have twins. Ultrasound is safe for you and Baby. Dating Ultrasounds are generally scheduled and performed at your Confirmation of Pregnancy visit (between 6 to 8 weeks) to verify your due date. Between 18-22 weeks an ultrasound will be conducted to assess fetal anatomy. These will be the only ultrasounds performed in a routine, uncomplicated, pregnancy. All other ultrasounds will be based on medical necessity. If there is not a medical indication for performing an ultrasound, your insurance will not cover the cost.

At times during your pregnancy, we will recommend an ultrasound to evaluate the health of your baby.

1. Although the ultrasound examination poses no known risk to your baby, some risk(s) may be discovered in the future. To minimize any potential harm, we will use the least amount of ultrasound energy and the shortest examination time to obtain the images we need.
2. Although we can detect many birth defects with ultrasound examinations, we cannot detect all possible birth defects. **A normal ultrasound examination does not guarantee a completely normal infant.**

## ***Things Do Go Wrong***

Having a baby is a major life event. But, from a medical point of view, almost every pregnancy is routine. Still, things do go wrong, *even when everyone does everything right*. There is a chance — a small chance — that things have gone wrong from the start and your baby has a birth defect. Tests can find most — but not all — birth defects before the baby is born. Knowing ahead of time that your baby has a birth defect may enable you and your doctor to plan for a safer birth. It might enable you to make special plans for care of the baby. If a test shows that your baby has a birth defect, talk with your doctor about your choices.

## **Flu Vaccine**

The Centers for Disease Control (CDC) recommends that women pregnant during the flu season receive the flu vaccination. We will offer this vaccine to you as part of your routine obstetrical care.

## PRE-NATAL CARE TIMELINE

### Schedule of Pre-Natal Office Visits

At each appointment, we will weigh you, take your blood pressure, listen to the baby's heartbeat, and measure the growth of your uterus and baby. 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

## VISIT SUMMARIES

### Confirmation of Pregnancy Visit

During this visit you will have a physical exam, urine pregnancy test, gonorrhea and Chlamydia cultures, and a pap smear if needed.

### 8-12 weeks: Initial prenatal visit

Your health history will be taken. **We strongly encourage that you complete our on-line assessment prior to this appointment to ensure that your history is completely accounted for.** A physical exam, including a pelvic exam will be done. Prenatal lab work will be completed, including STD screening and a PAP test if you are due for one. A **Rh factor\*** test will also be drawn at this time. You *may be able* to hear the baby's heart beat at this visit. Lastly, an ultrasound will be performed to obtain a more accurate gestational age.

\*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 for 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.**

### 11-13 weeks: Genetic Screening Tests-Sequential Screening Offered

Sequential screening is a series of tests that check for neural tube defects and genetic abnormalities. It involves two blood tests and an ultrasound. The sequential screening can test for the possibility of open neural tube defects and can also detect Down syndrome and Trisomy 18.

### 15 to 20 weeks: Sequential Screen Part 2-blood work only

At one of your appointments within this period, you will be offered the Quad Screen (AFP4) test, which is an indirect screen for genetic and spinal cord abnormalities. We will also schedule you for an ultrasound with a perinatologist between 18 and 20 weeks 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.

## **24 to 28 weeks: Glucose Testing**

You will be given a **glucose test** to screen for gestational diabetes. You will be given instructions on how to drink your glucose. We will draw your blood one hour after you drink the glucola.

***\*\*\*At this point in your pregnancy, we advise that you 1) sign up for prenatal classes 2) Complete the hospital pre-registration and 3) find a pediatrician.\*\*\****

## **28 to 36 weeks:**

### **TDAP Vaccine**

TDAP is a vaccine that helps to protect against tetanus, diphtheria and pertussis diseases in people. The American College of Obstetrics & Gynecology (ACOG) and the American Academy of Pediatrics (AAP) recommends pregnant women be immunized during their late second or third trimester of pregnancy or given post delivery as soon as possible. Vaccinating pregnant women will pass antibodies to the newborn before and during birth and should provide protection until the infant's first vaccinations at two months.

### **Rh Negative**

If you are Rh Negative, you will receive an injection of Rhogam at 28-30 weeks.

### **Genital Herpes**

For patients with *any* prior history of genital herpetic outbreak you will be treated prophylactically beginning at 36 weeks to prevent an outbreak during the time of delivery. Prophylactic treatment is important for the safety of your baby even if you have not had any symptoms during pregnancy. If you've not done so already, please advise/remind your doctor of your history of herpes.

## **35-37 weeks:**

At this visit, your doctor will do a pelvic exam, and perform a **Group B Streptococcus Test**. Group B Strep is a normal bacterium that is naturally found in approximately 20% of pregnant women, in their vagina and is not harmful to women or a developing fetus. However, it can be harmful to your infant if exposed at time of delivery. A very small percentage of babies who are exposed become infected with GBS. However, if infected it can cause major health problems or even threaten their lives. Around 35-37 weeks, a vaginal/rectal culture will be done to screen for GBS. If you test positive for this bacterium, you will receive antibiotics at the hospital during labor and delivery.

## **36 to 40 weeks:**

The usual monitoring of your weight and blood pressure, and the baby's size, position, and heart rate are done.

## **40+ weeks:**

After your due date, you may be offered what is called "post-dates" testing, including non-stress tests, ultrasound, and biophysical profiles.

## SUGGESTED OPTIONAL PRENATAL SCREENING TESTS

- **1<sup>ST</sup> Trimester Sequential Screening with nuchal translucency**- This ultrasound and blood test is performed between 11-13 weeks. It helps your doctor identify pregnancies that may be at increased risk for Down syndrome (trisomy 21) or Edward syndrome (trisomy 18). It does not diagnose birth defects but helps identify those women who may benefit from additional testing.
- **Sequential Screening** – Sequential screening is a two part test which includes the above testing around week 12 and a second part around week 18. It shows if you are at increased risk of having a baby with Down syndrome, trisomy 18, or a defect of the spinal cord and skull.
- **AFP4 (QUAD Screen)** – This is a set of blood tests performed between 15-20 weeks to assess a baby’s risk for Down Syndrome, trisomy 18, and spinal cord defect.
- **Cell-Free Fetal DNA Testing** – This test measures the relative amount of free fetal DNA in the mother’s blood. It helps determine the chance that the fetus has Down syndrome, Edward syndrome, and Patau syndrome (trisomy 13).
- **Cystic Fibrosis** – This is a genetic condition that affects the lungs and digestive system of certain individuals. This blood screening test will help determine if you are a gene carrier. If positive, then further testing is required to find out if the baby has Cystic Fibrosis. Cystic Fibrosis does not need to be repeated at each pregnancy. If you were previously tested during another pregnancy and are a gene carrier, please let us know so that we do not re-order the screening test.

**\*\*The above tests may not be considered routine by your insurance carrier. These tests may require that certain criteria be met and/or additional tests be performed. It is your responsibility to verify lab coverage with your insurance carrier. \*\***

## CORD BLOOD BANKING

The newborn stem cells found in your baby’s umbilical cord blood can be valuable because they offer lifesaving treatments today and hope for a healthier tomorrow. We strongly encourage all of our patients to research the options for cord blood banking and decide if it is a service you are interested in. The decision to bank cord blood must be made before giving birth, as it can only be collected immediately after the baby is born. Parents must register with a cord blood registry and will receive a kit for collection to give the Provider. The blood is collected after the umbilical cord is clamped off; it’s a completely safe, painless procedure. The sterile kits are also safe for c-section deliveries.

Below are companies you may wish to contact:

[www.cordforlife.com](http://www.cordforlife.com)  
[www.viacord.com](http://www.viacord.com)  
[www.cordblood.com](http://www.cordblood.com)

# STAYING HEALTHY DURING PREGNANCY

The recommendations for weight gain during a single pregnancy are as follows:

Underweight women	(BMI less than 20)	30-40 pounds
Normal weight women	(BMI 20-25)	25-35 pounds
Overweight women	(BMI 26-29)	15-25 pounds
Obese women	(BMI>29)	up to 15 pounds

*The first step to a healthy pregnancy is to look at your daily diet. Having healthy snacks that you eat during the day is a good way to get the nutrients and extra calories that your baby will need. The following guidelines should be incorporated into your diet and exercise plan:*

## DIET

- Drink 8-10 eight-ounce glasses of water**
- 1500 mg of Calcium.**
  - o 8-10 glasses of milk
  - o Yogurt, Cottage Cheese, or dairy products made with pasteurized milk
- Lots of fresh fruits and vegetables**
- Increase your fiber**
  - o Apples
  - o Raisin Bran
  - o Raw Vegetables
- 8 oz. of protein daily\***
  - o Chicken
  - o Turkey
  - o Beef
  - o Fish—limit it to 12 oz per week. Must be cooked.
    - Salmon
    - Catfish
    - Pollack
    - Shrimp
- Daily Pre-Natal Vitamin**
  - o Take two hours after a meal
  - o Take with water or 100% fruit juice; Do not take with milk

## VEGETARIAN DIET

Be sure you are getting enough protein. You will probably need to take supplements, especially iron, B12 and Vitamin D.

## THINGS TO AVOID

- Game Fish—HIGH LEVELS OF MERCURY**
  - o **Swordfish/Shark/Tilefish**
- Raw Meat or Fish**
  - o **Sushi—w/raw fish**
    - o **California Rolls are Permissible**



- ❑ **Unwashed Vegetables or Fruits**
- ❑ **Pate**
- ❑ **Deli Meat**
  - **If eaten, reheat to steaming to kill any bacteria**
- ❑ **Unpasteurized Milk or Cheese**
- ❑ **Alcoholic Beverages—There is NO amount of alcohol known to be safe during pregnancy.**
  - **This includes wine**
- ❑ **Caffeine—Limit to 200mg/day or 1 (one) cup daily**
- ❑ **Artificial Sweetener—is ok but we suggest limiting to no more than two servings daily.**

## **EXERCISE**

If your pregnancy is uncomplicated and you are in good health, you should be active and exercise. Common sense should be your guide. If you have been exercising, prior to pregnancy—that’s great, please continue. If you have not been exercising, you should start slowly. Try walking for 10 minutes a day, five times per week. Gradually increase to 40 minutes. When an activity, especially in late pregnancy, is associated with significant discomfort, it should be discontinued. Avoid any activities with a high risk of falling or trauma to your belly. After your 20<sup>th</sup> week, avoid exercising lying on your back. If you are breathing too hard, then slow down. Your heart rate should remain below 140 beats per minute. You will sweat more during pregnancy so stay hydrated.

### **Recommended:**

- Brisk walking/Jogging (if previous jogger)
- Low-Impact Aerobics
- Cycling (Stationary)
- Yoga
- No abdominal floor exercise after first trimester

## **SEX**

In an uncomplicated pregnancy, sex is safe and does not harm the baby. Thus, sexual intercourse can continue. However, sex should be avoided if any of the following occur:

## **DENTAL CARE**

Gum disease and bacteria in the gums become more prevalent during pregnancy and can have potentially negative impacts on your

<ul style="list-style-type: none"> <li>• Vaginal or abdominal pain</li> <li>• Preterm labor</li> <li>• Regular Uterine Contractions</li> <li>• Been Advised against by your doctor</li> </ul>	<ul style="list-style-type: none"> <li>• Headaches/Dizziness/Weakness</li> <li>• Decreased Fetal Movement</li> <li>• Vaginal Bleeding</li> </ul>
---	--

pregnancy. You should have your teeth cleaned by your dentist every six months during pregnancy.

If possible, postpone dental procedures until the end of the first trimester. However, it should not be postponed if the delay will result in deterioration of a problem and in turn put you or your baby at risk. When sitting in the dentist chair, avoid lying flat on your back. Take a pillow and place it under your hip.

There are not known risks of dental x-rays. However, try to postpone routine x-rays until your postpartum period. Always use an abdominal shield.

## **DISABILITY DURING PREGNANCY**

Your pregnancy may easily affect your work. These comments were written to prevent the misunderstanding that may occur between a pregnant woman, her physician, and employer.

The usual pregnancy discomforts, nausea, tiredness, low abdominal and back pain, do not qualify as an illness requiring disability. Additionally, a complication or illness unrelated to your pregnancy does not qualify. If you are unable to carry out certain tasks necessary for your work, first speak to your employer. Your physician may authorize physical restrictions on your job after they have received a complete and specific job description form your employer.

If the restrictions written for your employment prevent you from performing your job, it is the responsibility of your employer either to find you a less demanding position, or, if no such position is possible, to give you disability. If you become too uncomfortable to work, you may want to discuss a leave of absence with your employer.

**PLEASE DO NOT ASK YOUR PHYSICIAN FOR DISABILITY UNLESS THEY HAVE RESTRICTED YOU FROM ALL WORK.**

Most employers will give disability two weeks prior to your due date through six weeks after your delivery. We will happily furnish a letter with those dates. The decision to grant medical disability any earlier in pregnancy will be made honestly, carefully, and only with proper justification. Disability will be granted only for medical illnesses that may jeopardize a mother's ability to safely nurture, protect, and promote the development of her unborn child. Disability will not be granted for symptomatic complaints that stem from the normal physical or emotional changes of pregnancy.

Please note that there is a \$25 fee for each form completed. Our forms are completed weekly and sent per your instructions. The payment for the form is expected upon our receipt of the form. To avoid delay, please ensure that you call our office to make payment or make payment when the form is presented.

## APPROVED MEDICATIONS DURING PREGNANCY

Below is a list of common complaints during pregnancy and a list of over-the-counter medications approved by our office. **If you do not see a medication listed here, it is NOT approved by our physician.** If there are any questions please call our office for further assistance. Please follow the directions on the package, start with the minimum suggested dose, increase only if needed and do not exceed the recommended dose. If you call/visit another healthcare provider during your pregnancy, always make them aware that you are pregnant. Always make our office aware of any new medications that you are taking.

<p><b>COLD/HAYFEVER/CONGESTION</b></p> <ul style="list-style-type: none"> <li>• Actifed**</li> <li>• Tylenol/Tylenol Cold &amp; Sinus**</li> <li>• Triaminic</li> <li>• Chlor-Trimeton</li> <li>• Claritin/Claritin-D**</li> <li>• Zyrtec</li> <li>• Sudafed**</li> <li>• Robitussin (plain &amp; DM)**</li> <li>• Vicks Vapor Rub</li> <li>• Saline Nasal Spray</li> </ul> <p><b>**Avoid if problems w/Blood Pressure</b></p>	<p><b>CONSTIPATION</b></p> <p>Colace-100mg, twice daily</p> <p>Metamucil, Fibercon, Citracil</p> <p>Metamucil, Senakot</p> <p>Miralax</p> <p>Increase fluid intake and fiber in your diet.</p>	<p><b>COUGH</b></p> <p>Actifed</p> <p>Sudafed</p> <p>Cough Drops</p> <p>Robitussin (plain &amp; DM)**</p> <p>Pseudophedrine**</p> <p><b>**Avoid if problems w/Blood pressure</b></p>
<p><b>GAS</b></p> <ul style="list-style-type: none"> <li>• Gax-X</li> <li>• Mylicon</li> <li>• Phazyme</li> </ul>	<p><b>HEADACHES</b></p> <ul style="list-style-type: none"> <li>• Tylenol (regular or extra strength)</li> <li>• Acetaminophen</li> <li>• Cold Compresses</li> </ul> <p><b>*Avoid Ibruprofen</b></p>	<p><b>HEARTBURN</b></p> <ul style="list-style-type: none"> <li>• Mylanta</li> <li>• Maalox</li> <li>• Tums/Roloids</li> <li>• Milk of Magnesia</li> <li>• Pepcid AC</li> <li>• Prevacid</li> <li>• Try eating 5-6 smaller meals a day/avoid lying down immediately after.</li> </ul>
<p><b>HEMORRHOIDS</b></p> <ul style="list-style-type: none"> <li>• Preparation H</li> <li>• Tucks</li> <li>• Vaseline applied to tissue</li> </ul> <p>• Sitz baths 3-4 four times daily for 10-15 minutes each time.</p>	<p><b>LEG CRAMPS</b></p> <ul style="list-style-type: none"> <li>• Benadryl</li> <li>• Magnesium</li> </ul> <p>• Eat bananas and increase your intake of low-fat milk, stretch your leg with your foot extending towards your body.</p>	<p><b>NAUSEA</b></p> <ul style="list-style-type: none"> <li>• Unisom 1/4 or 1/2 tablet at bedtime</li> <li>• Vitamin B6 25 mg 3 times per day</li> <li>• Ginger Root 250 mg 4 times daily</li> <li>• High complex carbs at bedtime</li> <li>• Sea Bands (Accupressure)</li> <li>• 5-6 smaller meals a day</li> <li>• Sucking on peppermint.</li> </ul>
<p><b>PAIN</b></p> <ul style="list-style-type: none"> <li>• Tylenol (plain 1 or 2 tabs every six hours as needed)</li> </ul> <p><b>Avoid Aspirin, Aleve, Ibuprofen</b></p>	<p><b>RASH</b></p> <ul style="list-style-type: none"> <li>• Benadryl</li> <li>• Hydrocortisone Cream1%</li> </ul>	<p><b>SLEEP AIDS</b></p> <ul style="list-style-type: none"> <li>• Benadryl</li> <li>• Chamomile Tea</li> <li>• Unison</li> <li>• Tylenol PM</li> <li>• Warm milk</li> </ul>
<p><b>TOOTH PAIN</b></p> <ul style="list-style-type: none"> <li>• Orajel</li> </ul>	<p><b>THROAT</b></p> <ul style="list-style-type: none"> <li>• Cepacol</li> <li>• Cepastat</li> <li>• Throat Lozenges</li> <li>• Salt water gargles</li> </ul>	<p><b>YEAST INFECTIONS</b></p> <ul style="list-style-type: none"> <li>• Monistat-3 or 7,</li> </ul> <p><b>Avoid 1-Day creams</b></p>

## WHAT TO PACK FOR THE HOSPITAL

Pack about a month before your due date. Here is all you will need:

- 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.
- Music to play during labor
- Phone numbers for your doctor and the baby's doctor
- Phone numbers for people you want to tell about the baby
- Camera-Video Recording will not be allowed during the delivery*
- Cell Phone
- 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
- A light blanket and a warmer blanket

## POSTPARTUM INSTRUCTIONS

- 1.** Make an appointment to see your doctor for a checkup:
  - a.** Vaginal delivery—Six (6) weeks for your Post-Partum Exam
  - b.** Cesarean Section—Two (2) weeks for an Incision Check and then Six (6) weeks later for your Post-Partum Exam (*eight weeks after delivery*).
- 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 or cramping increases to greater than a period, take two Advil (ibuprofen) and rest. 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 for 2-3 weeks after delivery. If you have stitches in place, you will need to wait until they are removed.
- 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 101 degrees, 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 10 days.
- 14.** Tub bathing and showering are permitted.

# FREQUENTLY ASKED QUESTIONS

## **When should I pre-register for my delivery?**

We advise that you pre-register for your delivery at Northside Hospital soon after your 24<sup>th</sup> week of pregnancy. The pre-registration form is contained in the Northside Hospital packet that our office will give you. Online registration is also available at <https://www.northside.com/gettingready> . You will also find other valuable information here as well.

## **Where can I find information on parenting classes, breastfeeding classes and preparing for baby?**

Northside Hospital has invaluable resources to help the entire family. Please visit <https://www.northside.com/maternityresources> for additional information.

## **Can I have sex during pregnancy?**

For most women with uncomplicated, low-risk pregnancies sex is extremely safe. Approaching the third trimester, a pregnant woman should avoid lying on her back due to the extra pressure placed on her veins—this could lead to a drop in blood pressure and dizziness--other, more comfortable positions should be utilized.

## **When can I tell my baby's gender?**

Between your 18th and 22nd week of pregnancy, you will have a second trimester Ultrasound. During this time the gender of your baby should be able to be determined. Prior to this time your baby may not be well enough developed to determine its gender, and after this time it may be too cramped in the womb to get a good view.

## **What are cord blood stem cells?**

Stem cells are immature cells that can transform into other kinds of cells and reproduce themselves. Cord blood stem cells are collected in the umbilical cord at birth and can produce all of the blood cells in the body. Cord blood stem cells can be used to treat blood-related diseases, such as leukemia, lymphoma, and sickle cell anemia. They can also treat people whose bone marrow has been damaged by chemotherapy or radiation. During treatment, these cells are injected into the bloodstream. Once there, doctors hope that they will make new, healthy blood cells.

## **How are cord blood stem cells collected?**

The procedure is simple. It's safe and painless for both mother and child. Right after birth, the umbilical cord is clamped and cut, and the baby is passed off to a pediatrician. Meanwhile, your doctor uses a sterile solution to wash a small area of the umbilical cord, two to four inches that is still attached to the placenta. Then he will stick a needle into the cord's umbilical vein. The blood will flow by gravity through the needle, through a tube, and into a collection bag. The whole process takes two to four minutes. Three tubes of the mother's blood is also drawn for testing. It is important to remember that cord blood can only be collected at birth.

## **Can I travel during pregnancy?**

Every pregnancy is different. It is important to discuss any travel plans with your doctor before traveling. The American College of Obstetricians and Gynecologists (ACOG) says that the second trimester is the safest time for air travel, when you're at the lowest risk of miscarriage or premature labor. Generally, if you have a healthy, uncomplicated pregnancy, there's no special risk posed by commercial air travel. (ACOG recommends that pregnant women stop flying at 36 weeks gestation.) Be sure to stay hydrated during the flight by drinking plenty of fluids, particularly water. If you are traveling by land, please make frequent stops in order to keep good circulation.

Although not encouraged, if you must travel in your third trimester, please obtain a copy of your medical records to keep with you.

## **What are some safe travel tips?**

Whether traveling by plane, car or train it is important to stay hydrated. Make frequent stops to keep the blood circulating through your body—be sure to stretch your legs and back and always wear your safety belt.

**What are Braxton Hicks contractions and what is their purpose?**

Braxton Hicks contractions are irregular contractions that happen even in very early pregnancy. However, in early pregnancy, they often go undetected. When most women reach around 24 to 28 weeks, they will actually feel these contractions. They're not painful; they're very low in pressure. Women typically notice a tightening that quickly passes.

**Should I circumcise?**

If you have a son, you will be asked if you want him to be *circumcised*. In other words, do you want him to have surgery to remove the foreskin from his penis? This surgery often is done before you leave the hospital. There is no medical reason to cut away the foreskin from a boy's penis. The benefit to health is very small. Boys may get the same benefit by washing well. The chance of harm from the surgery is small. But sometimes there can be a serious problem. The surgery is painful; however, it does not last very long and there is no memory of it. Medical experts do not agree on the best pain relief. In the United States many parents choose circumcision for their sons. In other countries almost no one does. If you choose circumcision, it must be done in the hospital, before your son is discharged after birth. Our doctor does not perform circumcision after this time. If you will have this procedure, it is imperative that you add your son to your insurance policy and provide our office with that information by your post-partum visit. Otherwise, if we are not reimbursed by your insurance carrier, it will become your responsibility.





*If you are having a medical emergency,  
please call 911, or go to your local  
hospital emergency room for  
immediate care.*

*Our physicians deliver at  
Northside Hospital Atlanta  
1000 Johnson Ferry Road  
Atlanta, GA 30342*

*Your doctor, or their representative,  
can be reached 24 hours a day by  
calling our main phone number  
770.551.9616. Please reserve after hour  
phone calls for emergencies.*