

COMMONWEALTH OB-GYN
1 BROOKLINE PLACE, SUITE 305
BROOKLINE, MA 02445
617-732-1510 (P)/617-732-0986 (F)

Congratulations on your pregnancy and **thank you for choosing Commonwealth OB-GYN** for your prenatal care! We are dedicated to providing you with excellent care in a personal and compassionate manner. Our practice is affiliated with Brigham and Women's Hospital, a nationally recognized leader in healthcare for women and newborns.

Appointments:

Your first appointment will be a phone interview with our nurse practitioner between 6-8 weeks of pregnancy (unless you are transferring your care from another practice or fertility specialist). Over the phone we will review your medical/surgical/family history, discuss what to expect from our practice/providers, go over different testing options and answer any pregnancy related questions you may have.

Your first office visit will be around 10 weeks. At this time, a physical exam will be performed, lab tests will be collected (including urine, Pap smear if needed, blood work), various genetic testing options will be reviewed and any other questions will be answered. We will also attempt to listen to your baby's heartbeat to confirm the pregnancy.

Appointments for ultrasound will be discussed with the NP and are usually done between 12-14wks (optional) and 18-20wks (standard).

Contact information:

Most women have questions that come up during their pregnancy. Our office provides a **daily call-in hour Monday through Friday from 11am-12pm**. This hour is set aside by our NPs to address any concerns that cannot wait until your next appointment. She can be reached directly during this time at 617-732-0068.

You may also call the main office number during **normal business hours (Monday through Friday from 9am-5pm)** to leave a message for one of our providers. Urgent messages will be returned ASAP and we do our best to return all non-urgent calls by the next business day. Also, feel free to send a NON-URGENT message directly to your provider using the Patient Gateway (see below).

If you are having an emergency after hours, please call the **main office number at 617-732-1510** and briefly tell the answering service your problem. They will page the doctor on-call for our practice. If you do not get a response within 15 minutes, please try again. In an emergency, if you still haven't received a response or you simply cannot get through to the answering service, please call the Labor and Delivery department at Brigham and Women's Hospital directly at 617-732-5435 and ask for the nurse in charge. Explain your situation and they will contact one of our physicians.

More information:

Below you will find several brochures, links to reliable websites and educational sheets we think you will find helpful. Please try to review this information prior to your first visit. Also, if you have not yet registered for the **Partners Patient Gateway please do so by visiting:**

<https://www.patientgateway.partners.org>

We look forward to seeing you soon!

PRENATAL VITAMINS:

Prenatal vitamins are known to prevent certain birth defects and can help to supplement your nutrition during this important time.

It is recommended that women begin taking a prenatal vitamin about 3 months prior to conception and throughout the prenatal and postpartum period. The vitamin can be discontinued at your 6 week postpartum visit, or if you are breastfeeding, once you have completely weaned your child.

Several prescription and over-the-counter options are available and are equally acceptable. All **prenatal vitamins should contain 400-800 mcg of Folic Acid and 18-30 mg of Iron**. A daily **200-300 mg DHA supplement** is also something to consider if your diet is lacking in Omega-3 fatty acids (i.e. low-mercury fish, canola/soybean/olive oils, walnuts, avocados, green leafy vegetables -- spinach/kale/broccoli or fortified eggs/milk). If you would prefer a prescription prenatal vitamin, please contact our office.

Pregnant women should also make sure to get **at least 1000 mg of Calcium and 2000 IU of Vitamin D** per day, ideally through the diet, but a combination of supplements and dietary intake is acceptable.

MEDICATION USE DURING PREGNANCY:

Some medications are considered safe to use during pregnancy. However, the effects of many medications on your unborn baby may be unknown. If you were taking a prescription medication before you became pregnant, please ask your prescribing provider about the safety of continuing this medication as soon as you find out that you are pregnant.

The risks and benefits must be considered before making a recommendation about a particular medication. In some cases, the risk of NOT taking a medication may be more serious than the potential risk associated with continuing a medication. If you are prescribed any new medications, please inform your healthcare provider that you are pregnant and notify us of any changes.

If you are not allergic to them, many antibiotics are considered to be safe for use during pregnancy. Please consult the prescribing provider for further information.

Topical antibiotic creams are also safe (i.e. Neosporin, Bacitracin, Clindamycin).

Unless instructed by your provider, **avoid all products containing Aspirin and Ibuprofen** (i.e. Motrin, Advil, Aleve, and Pepto Bismol).

The table below can be useful to reference when trying to manage different symptoms during your pregnancy:

Problem:	Over the counter or alternative remedy:	Call our office if:
Nausea, vomiting	Ginger ale, Coca-cola, Ginger tablets 1000mg/day, lemon, mint, Vitamin B6 50mg 4x/day, "Sea-bands", acupressure, acupuncture, Diphenhydramine HCL 25mg (Benadryl), Doxylamine succinate 12.5-25mg (Unisom)	Persistent vomiting, weight loss, inability to tolerate fluids for >24 hours, dark/concentrated or infrequent urination
Headaches, general pains, fever >100.4, restlessness	Warm compress, ice, rest, massage, Acetaminophen (Tylenol up to 1000mg 4x/day, max dosing 4000mg/day), Caffeine up to 200mg/day, Magnesium aspartate, citrate or lactate up to 300mg per day (avoid Magnesium oxide)	Severe or persistent headache or fever; or if you have been taking Tylenol 4000mg/day for >7 days
Nasal congestion or allergies	Saline nasal spray, humidifier, "Breathe Right Strips", sleeping with head of bed elevated, warm compress, Diphenhydramine HCL (Benadryl), Loratidine (Claritin), Cetirizine HCL (Zyrtec), Acetaminophen (Tylenol); After 14wks gestation the following medications are also considered to be safe -- Oxymetazoline HCL (Afrin), Pseudoephedrine HCL (Sudafed), Fluticasone (Flonase)	Symptoms persist for >7 days, or you develop a fever >100.4F
Cough or chest congestion	Humidifier, "Vicks Vapor Rub", Guaifenesin (Mucinex), Dextromethorphan HBr (Delsym), or a combination product (Robitussin DM Cough & Chest Congestion -- check ingredients list, tablets preferred over liquid as many contain small amounts of alcohol)	Severe, painful or persistent cough for >7 days, acute shortness of breath, coughing blood, or you develop a fever >100.4F

Sore throat	Gargle with salt water, hot tea with honey or lemon, menthol cough drops, Acetaminophen (Tylenol), Chloraseptic throat spray, Cepacol drops	Severe or persistent sore throat for >7 days, or you develop a fever >100.4F
Diarrhea	Loperamide HCL (Immodium AD)	Diarrhea that persists for >48 hours, or with fever or dehydration
Constipation	Increased fluids, fiber supplements (Benefiber, Citrucel, Metamucil), prunes/prune juice, Probiotics, Docusate Sodium (Colace), Senna (Senokot), Milk of Magnesia, Miralax	Severe straining, rectal bleeding, or no bowel movement for >5 days
Hemorrhoids	Avoid straining or passing hard stool (see constipation management above), sitz baths, witch hazel pads (Tucks), Preparation-H	Rectal bleeding or severe pain
Gas or bloating	Simethicone (Gas-X)	
Heartburn	Ranitidine 150mg 2 times/day (Zantac), Famotidine 20mg 2 times/day (Pepcid), Omeprazole 20mg/day (Prilosec)	
Insomnia	Warm milk, Caffeine-free tea, relaxing nighttime routine, avoidance of TV/computer/mobile phone, journaling, reading, Vitamin B6 50mg, Diphenhydramine HCL 25mg (Benadryl), Tylenol PM, Doxylamine succinate 25mg (Unisom)	
Itching, rash	Oatmeal bath (Aveeno), Sarna lotion, Gold Bond lotion, Eucerin cream, Hydrocortisone ointment 1% (Cortaid), Calamine Lotion (Caladryl), Diphenhydramine HCL 25mg (Benadryl)	Severe or spreading rash, especially to abdomen, palms of hands or soles of feet

DIETARY MODIFICATIONS:

Avoid or limit these foods:	Risks:	Safe alternatives or proper handling techniques:
Cheeses made from UNPASTEURIZED milk, including Brie, feta, Camembert, Roquefort, queso blanco, and queso fresco	May contain E. coli or Listeria.	Eat hard cheeses, such as cheddar or Swiss, OR, check the label and make sure that the cheese is made from PASTEURIZED milk (i.e. not raw milk).
Raw or undercooked eggs	May contain Salmonella.	Cook eggs until yolks are firm. Cook casseroles and other dishes containing eggs or egg products to 160° F.
Certain kinds of fish, such as shark, swordfish, king mackerel, and tilefish (golden or white snapper)	Contain high levels of mercury.	Eat up to 12 ounces a week of cooked fish and shellfish that are lower in mercury, such as shrimp, scallops, crab, lobster, salmon, haddock, cod and tilapia. Limit consumption of albacore tuna to 6 ounces per week.
Raw or undercooked fish (sushi)	May contain parasites or bacteria.	Avoid all cooked sushi products as well due to potential cross contamination.
Unpasteurized juice or cider	May contain E. coli.	Drink pasteurized juice. Bring unpasteurized juice or cider to a rolling boil and boil for at least 1 minute before drinking.

Store bought salads, such as chicken salad or seafood salad	May contain Listeria.	Make salads at home, following basic food safety techniques.
Raw sprouts	May contain E. coli or Salmonella.	Avoid or cook sprouts after washing thoroughly.
Hot dogs, cold cuts, fermented or dry sausage, and other deli-style meat	May contain Listeria.	Reheat these meats to steaming hot or 165° F before eating.
Caffeine	Can cross the placenta and affect fetal heart rate and respiration.	Moderate consumption of 200-300 mg per day appears to be safe in pregnancy.
Herbal teas	May cause adverse reactions if very highly concentrated. Generally these products are not regulated.	Avoid medicinal teas from herbalist or Chinese Medicine specialist. Commercial brands available at most supermarkets are generally considered to be safe (Ginger, Peppermint, Chamomile).
Artificial sweeteners	In large quantities, may cross placenta.	Avoid Saccharin. Moderate consumption (2-3 servings per day) of Splenda, Equal, Stevia appears to be safe in pregnancy.
Undercooked meat or poultry	May contain bacteria such as E. Coli, Campylobacter or Salmonella.	Cook beef, veal, and lamb steaks and roasts to 145° F. Cook pork to 160° F. Cook all ground meats to 160° F. Cook poultry to 165° F. If the poultry is stuffed, cook the stuffing to 165° F. Better yet, cook the stuffing separately.

Smoked seafood or pates	May contain parasites or bacteria.	Eat canned versions, which are safe, or cook to 165° F.
Alcohol	May cause birth defects, learning disabilities, behavioral problems and can increase the risk for miscarriage and stillbirth	No amount of alcohol has been studied and shown to be safe during pregnancy. Because of this we encourage you to abstain from alcohol for the duration of pregnancy.
Smoking	Increased risks for ectopic pregnancy, miscarriage, premature birth, low birth weight, birth defects, SIDS	Quitting or reducing the number of cigarettes smoked per day can improve outcomes.

RELIABLE ON-LINE PATIENT RESOURCES:

- GENERAL PREGNANCY INFORMATION:

<https://www.brighamandwomens.org/obgyn/connors-center-for-women-and-newborns/parent-and-childbirth-education-classes>

Mayo Clinic Guide to a Healthy Pregnancy

Your Pregnancy and Childbirth: Month to Month, The American College of Obstetrics and Gynecology

- INFORMATION ABOUT COMMON EXPOSURES DURING PREGNANCY (CHEMICALS, MEDICATIONS, FOODS, ILLNESSES, ETC):

Mother-To-Baby

www.mothers-to-baby.org

- PRENATAL SCREENING TESTS (for Down's Syndrome, Trisomies 13/18 and other chromosomal abnormalities):

Eurofins Clinical Diagnostics 1st trimester screen -- optional, offered to everyone

<https://www.ntd-eurofins.com>

Myriad/Counsyl Prequel NIPT -- optional, available only for patients over the age of 35 or with qualifying history

<https://myriadwomenshealth.com/patient/prequel-prenatal-screen/>

- GENETIC CARRIER SCREENING (for autosomal recessive disorders): Myriad/Counsyl Foresight Carrier Screen

<https://myriadwomenshealth.com/patient/foresight-carrier-screen/>

- WIC:

www.mass.gov/wic

- CORD BLOOD DONATION:

<https://www.brighamandwomens.org/obgyn/cord-blood-donation>

- HEALTH CARE PROXY INFORMATION:

<https://www.brighamandwomens.org/patients-and-families/patients/health-care-proxies-and-living-wills>