
WOMEN'S HEALTH AND SURGERY CENTER

YOUR HEALTH • YOUR BABY • YOUR LIFE

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Congratulations on your pregnancy! We are delighted you chose our office to share this wonderful experience. While this packet is not a substitute for your routine pre-natal visits, the answers will act as a guide to some of the questions you may have. Please contact the office if you have further questions or need to speak to a nurse (540)720-7340.

MEDICAL FACILITIES

Our physicians deliver at Stafford Hospital Center which is available to you 24 hours a day.

SHC (540)741-9000

OB On-Call (540)720-7340

PRE-NATAL VISITS

A complete medical examination will be done at the time of your first prenatal visit. At this time, a prenatal profile, blood test, urinalysis, and cervical culture will be obtained. It is very important that you make every effort to keep your scheduled appointments for your obstetrical care. Our physicians will want to see you on the following routine pre-natal visit schedule:

4-28Weeks	Every 4 weeks
28-36 Weeks	Every 2 Weeks
36-Delivery	Every week

At each of your pre-natal visits you will be asked for a urine sample and your weight and blood pressure will be recorded. The following is an estimated schedule of labs/sonograms that will be completed during your pregnancy.

15-19 th Week	Quad Screen Blood Test
20 th Week	Sonogram
27 Weeks 1 Day	1 Hour Glucose Test-CBC/Blood Test
35-36 Weeks	CBC/STS/GBS Culture

*Your due date is determined based on your last menstrual period or first sonogram.

RH NEGATIVE BLOOD TYPE

If you have the RH negative factor in your blood type, our office will monitor you closely with additional blood work throughout your pregnancy. If a Rhogam injection is needed your doctor/nurse will give more information.

CHILDBIRTH EDUCATION CLASSES

For information on childbirth education classes, please contact SHC Labor and Delivery @ (540)741-9299.

OBSTETRIC MEDICATION INFORMATION

At some time during your pregnancy you may become sick with a common illness such as a cold, headache, nausea, vomiting or sore throat. When this happens, you may want to take an over the counter (non prescription) medication to make you more comfortable. It is best to use little or no medications during pregnancy, especially during the first three months. However, if you do choose to take medication, the following list will help you make the best decision for you and your baby. If you ever have a question or are uncertain about taking a medication, even one prescribed by another doctor, please call (540)720-7340 and speak with a nurse before taking the medication.

The following is a list of medications considered to be safest during pregnancy. These are to be taken as instructed on the package. They have all been studied in either animals or humans and not found to cause birth defects. Please note that the generic name is listed in parenthesis.

Headache	Tylenol(Acetaminophen)
Nausea/Vomiting/Upset Stomach	Mylanta, Tums, Sea Bands (wrist bands) or ask the office nurse for prescription medication.
Stuffy Nose	Salt water or nasal spray
Sore Throat	Cepacol Lozenges, Hall's cough drops or salt water
Leg Cramps	Viactive Chewable Calcium, Tums
Hemorrhoids	Preparation H, Tucks
Diarrhea	Imodium, Kaopectate, please call the office if more than one does is necessary.
Constipation	Colace(docusate sodium), Metamucil, Fibercon
Insomnia/Trouble Sleeping	Unisom (Doxylamine)

COMMON DISCOMFORTS

SYMPTOM/CAUSE	REMEDIES	THINGS TO AVOID
Backache -Caused by strain of increased uterine weight on back muscle, aggravated by poor posture.	Good Posture, rest with weight off back, wear flat-heeled shoes, sleep on a firm mattress, try pelvic rock exercise	Avoid high-heeled shoes, fatigue

Bladder Infection- May be caused by a preexisting asymptomatic infection or by catheterization at delivery.	Drink plenty of water and acidic fruit juices. Cranberry juice is best. Increase vitamin C. Strict attention to feminine hygiene, wear cotton underwear, and consult doctor if symptoms persist to avoid development into kidney infection.	Avoid tight underwear or underwear that is made of synthetic “non-breathing” materials. Avoid drinking coffee or black tea. Avoid catheterization, if possible.
Constipation- Progesterone relaxes smooth muscles of gut making it less effective, intestines compressed.	Increase roughage in diet, daily walk, increase water, eat prunes, raise feet on foot stool and relax pelvic floor when on the toilet.	Avoid laxatives, mineral oil, and enemas.
Heartburn- Enlarging uterus presses on stomach, forcing stomach fluids back up into esophagus.	Eat several small meals instead of three large ones, sit up straight, elevate ribcage, sleep with upper body propped up, and sip milk or tea.	Avoid antacids; check with health care provider before use. Avoid greasy, spicy food, coffee and alcohol.
Hemorrhoids- Pregnancy hormones relax smooth muscles of veins, causing vasocongestion, may be aggravated by straining over bowel movements.	Elevate feet, relax pelvic floor, drink plenty of fluids, eat roughage assume knee chest position, apply cold compresses with witch hazel. Hot bath	Avoid straining and pushing too hard when having a bowel movement. Avoid developing constipation or diarrhea.
Insomnia- Often hard to sleep in the last months of pregnancy due to difficulty getting comfortable, frequency of urination, worries and fetal movements.	Hot bath, drink hot milk or soothing herb teas at bedtime, use relaxation techniques, exercise daily, increase vitamin B intake, use massage, avoid caffeine.	Avoid sleeping pills and tranquilizers. Avoid chamomile tea if you are allergic to ragweed.
Nausea- Possibly caused by hormonal changes and/or emotional factors.	Increase intake of vitamin B6, eat 4-6 small meals per day, drink peppermint teas, and snack on toast or crackers before getting up in the morning, non-caffeinated ginger ale helps as well.	Avoid cigarette smoking, greasy spicy food, and either an empty stomach or an over full stomach.
Shortness of Breath- Caused by pressure of enlarging uterus on diaphragm and lungs	Maintain good posture; sit up straight, sleep with upper body propped up.	Avoid Anemia Stop Smoking Avoid Over-Exertion
Varicose Veins- Decreased efficiency of venous return from the leg aggravated by enlarging uterus.	Elevate legs frequently, use support stockings, and walk daily.	Avoid prolonged standing, avoid sitting with crossed legs, constrictive clothing or garters.

MORNING SICKNESS:

The following recommendations are some things you can do in order to alleviate the discomfort of morning sickness.

1. Eat several small meals daily as opposed to 3 large meals
2. Eat dry crackers with juice before rising from bed in the morning.

COUGH AND COLD:

The following medications are labeled as “class A”. This means that many women have used them in pregnancy and there was no significant increase in birth defects.

Unisom (Doxylamine) – For sneezing, allergies.

Saline (Salt Water) – Nasal spray – for stuffy nose.

The following medications are labeled as “class B”. This means that research studies on animals have not shown any birth defects or studies in humans have not shown birth defects. However, not enough women have used these medications to make them “class A”.

Tylenol (acetaminophen) – Headache, sore throat

Benadryl (diphenhydramine) – Allergies, sneezing, colds

Chlor-Trimeton (chlorpheniramine) – Allergies, colds

The following medications are labeled as “class C”. This means there is little information available about the effects of this medication on an unborn baby. However, nothing harmful has been seen so far.

Sudafed (pseudoephedrine) – Stuffy nose, cold

Robitussin (guaifenesin) – Cough

Dextromethorphan – Common ingredient in cough and cold medications.

IF YOU DO NOT DRINK MILK:

OsCal 500-Calcium Supplement, non-prescription: take one tablet three times daily

Tums-2 per day

GENERAL INFORMATION:

1. Pregnant women may take some antibiotics. Penicillin, Ampicillin, Erythromycin, Amoxicillin, Macro bid and Zithromax (Azithromycin) are a few of the more common ones. If someone outside of our office prescribes an antibiotic other than one of these and you are concerned, please call us at (540)720-7340 and speak to a nurse before taking it.
2. **DO NOT TAKE** Motrin, Advil, Ibuprofen, Aleve, Naproxen, Aspirin or any product containing these drugs during your pregnancy, unless specifically directed by your obstetricians.
3. Novocain without epinephrine may be used to numb your gums for dental work during pregnancy.

SHOWERS AND BATHS

Showers and baths may be taken. However, you **may not** be in a hot tub that is over 100°.

BREAST SECRETIONS

Breast secretions are normal during pregnancy. This commonly begins during the fourth month.

DENTAL CARE

Regular dental visits are encouraged. Be sure that the dental staff is aware of the pregnancy. There are certain precautions that must be taken during pregnancy.

REST

Enough rest is imperative. Increased tiredness during the early part of your pregnancy should subside your 12th week.

PLEASE CALL THE OFFICE IF YOU HAVE:

1. CONTRACTIONS that are timed ten minutes apart for at least an hour.
2. A gush or slow leaking watery fluid from the vagina. This usually indicates that there is a rupture in the membranes of the bag of water surrounding the baby. It is very important to call our office even if this is not accompanied by contractions.
3. Any vaginal bleeding is considered abnormal. Call our office immediately.
4. Decreased fetal movement.
5. Any questions or concerns please call the office. *(if after hours please have the physician on-call paged)*

FETAL MOVEMENT COUNTS:

Once or twice per day

1. Lie on your left side in a quiet place, no TV, radio, etc.
2. Count the number of times your baby moves.

-Your baby should move at least five times per hour. Small movements count as much as big movements.

-If the baby moves more than five times in the first 20 minutes, you may stop counting.

-If the baby moves only once or not at all in 20 minutes, try drinking something with sugar in it. (orange juice, soda, etc)

-Lie back down and start counting again.

-If the baby still does not move five times in an hour call the office. *(if after hours please have the physician on-call paged)*