



BOOKLET 1

**Miriam F. Acheson  
Family Birth Place  
Guide to Pregnancy  
and Birth**

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**FIRST  
APPOINTMENT**



PORT HURON

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DOING WHAT'S BEST.®

## CONGRATULATIONS!

This series of educational handouts provides you with information as you progress through your pregnancy. It will follow along with you as you go through your prenatal appointments, routine tests, labor, delivery, caring for and feeding your baby, and your baby's care with their own doctor. It is recommended that those who will care for you and your baby read this book as well.

At McLaren Port Huron you are part of a special tradition of family-centered maternity care that has been trusted for generations. The skilled physicians, nurses and other health care providers you meet at the offices and the staff at McLaren Port Huron strive to provide a safe, comfortable, first-class experience for you and your family.

## IMPORTANT PHONE NUMBERS

Health Care Provider: \_\_\_\_\_

Newborn Doctor: \_\_\_\_\_

Preregistration: 810-989-3270

Miriam F. Acheson Family Birth Place: 810-989-3439

Educational Classes: 810-989-3270 / toll free 1-800-228-1484

[www.mclaren.org/phfbp](http://www.mclaren.org/phfbp)

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**RECORD OF PRENATAL VISITS**

Date	Provider	BP	Weight	Weeks	Questions/Concerns

## GREAT EXPECTATIONS CHILDBIRTH EDUCATION CLASSES

For up-to-date class days and times or to register for a class, call HealthAccess at 1-800-228-1484 or visit [www.mclaren.org/phevents](http://www.mclaren.org/phevents) and search for Childbirth Education classes.

Great Expectations childbirth education classes are offered at McLaren Port Huron, the area experts in caring for moms and babies. All classes are taught by an experienced registered nurse.

### **Breastfeeding 101**

This class teaches the basics for becoming a breastfeeding mom. Learn how to establish your milk supply, determine if your baby is getting fed enough, pumping, and preparing to go back to work.

*Cost: \$30*

### **Comfort and Relaxation During the Birthing Process**

A two-hour class that focuses on personal pain management. Participants will learn a wide variety of labor management options, including basic breathing techniques, positioning, and using a labor ball. Please bring a pillow to class.

*Cost: Free*

### **Saturday Express**

One all-day class that provides condensed information regarding general childbirth preparation, including an overview of the birthing process, labor preparation, birth videos, cesarean birth, medical pain management, and limited basic relaxation and breathing techniques. This class includes a tour of the Miriam F. Acheson Family Birth Place.

*Cost: \$40/couple*

### **Online Childbirth Education**

Our online childbirth education class, provided by InJoy, is ideal for expecting parents who prefer an online learning style or who are unable to attend an onsite class due to work schedules, time constraints, or medical conditions. This user-friendly program guides you through at your own pace, covering all the essential information parents need to know to prepare for birth.

*Cost: \$40*

### **Miriam F. Acheson Family Birth Place Tour**

A tour is included in the Saturday Express class or by special arrangement by calling 810-989-3439. An online tour is also available at [www.mclaren.org/phfbp](http://www.mclaren.org/phfbp).

## PREPARING SIBLINGS FOR BABY

When mom starts to look pregnant, it's time to begin talking about the new baby.

- Let them feel mom's belly when the baby is moving
- Say "our baby" when talking about the baby
- Read them books about baby brothers or sisters
- Show them pictures of when they were a baby and talk about their birth
- Answer questions they may have about the baby
- Make any big changes, like beds/bedrooms or babysitters, months before the baby is born

When coming home from the hospital, have dad/partner or someone else carry the baby inside so mom is free to greet the big brother or sister.

Expect some acting out when you bring the new baby home. Give siblings one-on-one time every day with mom and/or dad. Sometimes it just takes some extra love and attention to let them know they are still loved as much as before the new baby came home.



## PREPARING PETS FOR BABY

Before baby meets your pet for the first time, ensure the following:

- Your pet's vaccinations and check-ups are up-to-date
- Have your pet spayed or neutered if possible. According to the Humane Society, spayed and neutered pets are more docile, have fewer health issues, and are less likely to bite.
- Take an object or piece of clothing that has the baby's smell to your pet before baby comes home.

When baby arrives home:

- Do not leave your baby and pet alone together. Always supervise their time together.
- Never let your baby and pet sleep together, as there is a risk of suffocation.

## PARTNERS

They may not have gone through the pregnancy, but a partner's role is very important. They may have many unexpected feelings about becoming a parent. Take time to talk with other parents to find out how they adjusted to this change. During pregnancy, many partners/dads find ways to be involved, such as:

- Attending prenatal appointments with mom.
- Meal planning.
- Grocery shopping.
- Attending childbirth classes with mom.
- Supporting and encouraging mom.

Becoming a parent is a big change, but being a parent is an amazing experience.



### Ways Partners Can Help

Your role is even more important after the baby is born. Children need both parents. You will become closer to your baby by helping to care for him/her and being involved in your baby's life.

- Get up with baby at night. Even if mom is breastfeeding, you can change baby's diaper and take the baby to her. (It is recommended to delay bottle feeding until breastfeeding is well established, about 3-4 weeks of age.)
- Give baby a bath.
- Take baby for a walk. Mom will enjoy the break, and you will enjoy the time with your baby and the exercise.
- Bond with your baby through Kangaroo Care. Unwrap your baby and lay him/her on your chest (skin to skin). This is also very calming for baby.
- Make sure there is plenty of healthy food for you and mom. You'll need the energy.



## CHOOSING YOUR BABY'S DOCTOR

Choosing a doctor for your baby is one of the many decisions you must make during your pregnancy. Pediatricians are doctors who only care for babies and children. Their education includes four years of medical school plus three additional years working with children and babies. Family medicine physicians who have had training in pediatrics may also care for your baby.

### Things to consider when choosing a doctor:

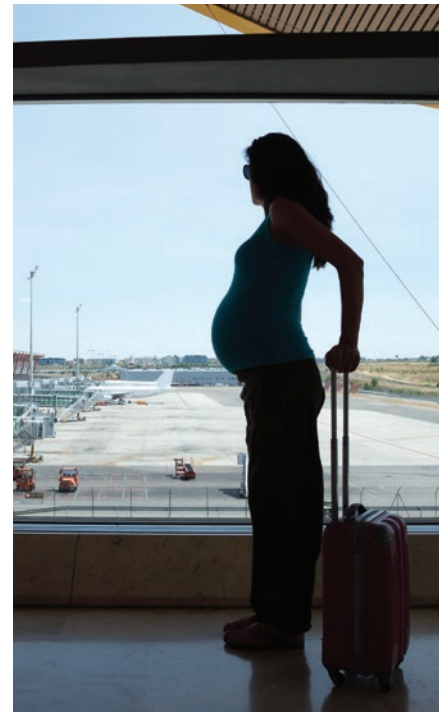
- Begin the search during your last trimester and make your decision before the baby is born.
- Check with your health insurance company for a list of doctors who participate with your insurance.
- Ask for recommendations from family, friends, or your obstetrician.
- Decide on a male or female doctor.
- Does the practice have a nurse practitioner or other partners who may be seeing your baby?
- Does the practice have more than one location?
- What are the office hours?
- How do you reach the doctor after office hours, evenings and weekends?
- Do well and sick children wait in the same area, or are they separated?

## TRAVELING

Traveling while you are pregnant can be safe and enjoyable when you plan ahead. Talk with your doctor before traveling. He/she will have tips to help you and your baby travel safely and comfortably.

### Suggestions for traveling:

- Always wear your seatbelt. Tuck the lap part of the belt under your belly and continue to use the shoulder strap.
- Stretch and walk around every two hours.
- Wear comfortable shoes and clothing.
- Drink plenty of fluids.
- Wear support hose if you have varicose veins or leg swelling.
- Don't cross your legs.
- Lift your feet and rotate your ankles regularly.
- Pick a safe destination.
- Find a health care provider at your destination in case you have an emergency. Take copies of your medical records and insurance card.
- Check with your health insurance to see if you will be covered for medical care you may need while traveling.
- Do not drink or swim in the water if you travel to a country with questionable water standards.
- Check with your doctor and the airline if you are flying. Most airlines do not want pregnant women to fly past 36 weeks.



## TRAVEL (CONT'D.)

### Zika Virus Information

Zika is a viral infection that is spread through bites from infected mosquitoes. This virus can be spread from an infected mother to her unborn baby, from an infected man to his sex partners, and possibly through a blood transfusion from a donor with the Zika infection.

- If you must travel to a Zika virus outbreak area while you are pregnant, talk to your doctor first and meticulously follow steps to prevent mosquito bites.
- For general Zika outbreak information, visit the CDC website: [www.cdc.gov/zika](http://www.cdc.gov/zika).

## EXERCISE DURING PREGNANCY

Regular, moderate exercise is encouraged for healthy pregnant women. Pregnant women who exercise regularly report less discomfort and quicker recoveries than those who do not exercise regularly. Exercise during pregnancy can have the following benefits to your health:

- Increases energy
- Improves sleep
- Improves posture
- Lifts your spirits
- Helps you relax
- Promotes muscle tone and stamina
- Relieves constipation, leg cramps, bloating and swelling
- Helps control gestational diabetes
- Shortens labor

Make sure your doctor knows you are participating in an exercise program. Exercise increases strength and flexibility and improves self-awareness and self-confidence. Exercise, along with breathing and relaxation techniques, will help you meet the challenges of childbirth, life with your new baby, and beyond.

- Regular exercise (at least 3 times a week) is healthier than intermittent activity.
- Begin exercising gradually if you have never exercised before.
- Begin with a 5- to 10-minute warm up; finish with a 10-minute cool down.
- Stretch gently after exercise.
- Drink plenty of fluids before, during and after exercise.
- Avoid overheating.
- Eat enough to meet the needs of both pregnancy and exercise. Make sure it's a healthy, well-balanced diet.
- Strenuous exercise should not exceed 30 minutes. If you can't talk at a normal level while exercising, you are working too hard.
- Do not lie flat on your back to exercise after week 20 of pregnancy.
- Don't do exercises that include bearing down (Valsalva maneuver).





## EXERCISE DURING PREGNANCY (CONT'D.)

Safe exercises are partially determined by changes to your body during pregnancy. The extra weight of pregnancy makes your body work harder than it did before pregnancy. Hormones are released that cause the ligaments supporting the joints to stretch, making the joints more prone to injury. The shift of your center of gravity places stress on muscles and joints, especially in the pelvis and lower back. You may feel less stable because of the extra weight of carrying the baby in the front of your body. Vigorous exercise shifts oxygen and blood flow from the uterus to the muscles you are working during exercise.

If you have a regular exercise routine, ask your doctor if it is safe to continue during pregnancy.

Safe exercises (with doctor's permission):

- Walking
- Cycling (stationary bike)
- Low-impact aerobics
- Swimming
- Jogging
- Yoga/Pilates

Avoid these activities during pregnancy:

- Contact sports
- Racquet sports
- Horseback riding
- In-line skating
- Surfing
- Gymnastics
- Snow or water skiing
- Diving
- Scuba diving
- Any activity in which you might fall



## BIOMECHANICS (BODY MOVEMENTS)

### Standing

- Stand up completely before turning your body. Do not twist through the spine.
- While standing, keep one foot on a footstool. Alternate the foot on the stool regularly.
- Keep your posture tall and lower abdominal muscles slightly contracted.

### Lifting

- Bend through the hips and knees, keeping your posture tall and lower abdominals contracted. Pick up the item while holding it close to your body.
- Use the same techniques in reverse to set it down.
- Lift completely before turning your body. Do not twist through the spine.
- Exhale as you lift.

### Holding your child

- Alternate which hip your child sits on. Do not shift hips to one side when doing so.

### Changing positions

- Change positions frequently, especially if you are sitting or standing for a long time.
- Move every 30-45 minutes.

### Sleeping

- When sleeping on your side, place a pillow between your knees and under your belly.
- If you sleep on your back, place pillows under your knees for support.
- Make sure you have adequate neck support, keeping your neck and spine aligned.

### Sitting and breastfeeding

- Support the small of the back with a pillow to avoid slouching.
- Use a pillow support under baby to ensure good posture.



## NUTRITION

Healthy nutrition, weight gain and calorie intake during pregnancy is essential, not only for your health but for the growth and development of your baby. If you ate healthy foods before pregnancy, continue to eat them. If not, having a baby is the perfect reason to improve your diet. Food choices should include fruits, vegetables, proteins, grains, dairy and fat. You may also include small portions of sweets and desserts into your daily diet.

Certain stages of pregnancy can present challenges to eating well. Morning sickness can affect your appetite in the early stages of pregnancy. In the later stages, indigestion, heartburn and constipation may alter your food choices. During the middle part of pregnancy, a woman's appetite usually increases. However, keep in mind that "eating for two" doesn't mean eating twice as much.

The following guide can help you determine how much weight you should gain during pregnancy. Ask your doctor about the right amount of pregnancy weight gain for you.

WEIGHT BEFORE PREGNANCY	WEIGHT GAIN (POUNDS)
Underweight (BMI < 20)	28-40
Normal Weight (BMI 20-25)	25-35
Overweight (BMI 26-29)	15-25
Obese (BMI > 29)	11-20 or as advised by your doctor

**Discuss your BMI with your doctor.**

Source: [cdc.gov](http://cdc.gov)

You may wonder why you are advised to gain 25-35 pounds when the average newborn weighs 7.5 pounds. Most of the remaining pounds comes from the various ways your body nurtures your baby. The chart below is a breakdown of the weight gain of a normal-weight woman who gains 28-30 pounds during pregnancy.

POUNDS GAINED	28-30
Baby	7.5
Amniotic Fluid	2
Blood	4
Body Fluids	3
Breasts	2
Placenta	1.5
Uterus	2
Fat, Protein, Other Nutrients	6-8

Source: [marchofdimess.org](http://marchofdimess.org)

## NUTRITION (CONT'D.)

### Caffeine

Limit your daily intake of caffeinated beverages to 12 ounces. Limit chocolate.

### Calcium

Calcium helps build strong bones and teeth for both you and your baby. If you don't get enough calcium in your diet, your baby must get the calcium he/she needs from your bones. This could lead to osteoporosis, a disease that weakens bones and makes them more likely to break.

Some tips to prevent osteoporosis include:

- Stop smoking
- Eat calcium-rich foods
- Exercise
- Limit foods high in fat
- Limit carbonated and caffeinated beverages
- Avoid alcohol during pregnancy
- Breastfeed your baby

Ways to increase calcium in your diet include:

- Drink 3 (8 oz) glasses of milk or soymilk daily
- Have yogurt as a snack
- Drink cocoa made with low fat or nonfat milk instead of coffee or tea
- Add low fat cheese to salads
- Use tofu (made with calcium sulfate) in stir fry dishes
- Add nonfat milk to low fat, low sodium canned soups
- Choose low fat puddings, frozen yogurt or ice cream for dessert

### Fish and Shellfish

Fish and shellfish are good sources of high-quality protein and other nutrients. However, certain kinds of fish should be avoided during pregnancy because they contain methyl mercury and could potentially harm your baby's nervous system. These include swordfish, king mackerel, shark and tilefish. Albacore tuna is also high in mercury, so choosing a light tuna packed in water is preferred. You can safely eat 12 ounces of other types of fish and shellfish per week. Check with local authorities about fish from local rivers, lakes and streams.

### Fluids

Drink 8-10 (8 oz) glasses of fluids a day, including juice, water, milk and non-caffeinated beverages. Do not wait until you are thirsty to drink. By the time you feel thirsty, you are already becoming dehydrated. Water is especially important to drink during pregnancy. It helps build new tissue, circulates nutrients and waste products within and out of the body, aids in digestion and helps form amniotic fluid. It is important to replace water that is lost through sweat, urine and breathing, so drink water throughout the day.

### Folic Acid

Folic acid helps make the extra blood you need during pregnancy. Pregnant women should consume 400 mcg of folic acid daily. Lack of folic acid can increase the risk of neural tube defect, a birth defect characterized by abnormalities in your baby's spine and skull. A supplement may be required during pregnancy if you are deficient in folic acid.

Folic acid has been added to many foods through the request of the government to help lower the incidence of birth defects. It has been added to most breads, cereals, pasta, rice and flour. Folic acid is also found in dark green, leafy vegetables, beans and citrus fruits.

## NUTRITION (CONT'D.)

### Iron

Iron is used by the body to make hemoglobin, the protein in red blood cells that carries oxygen to your organs, tissues and your baby. Blood cells die and are replaced in a constant process. The iron from blood cells is used to make more hemoglobin.

You need more iron in your diet during pregnancy so your body can produce the additional blood necessary to support the growth of your baby. If you do not have enough iron stored in your body before pregnancy, you could become anemic. A blood test during early pregnancy and again early in the third trimester is used to assess for anemia. If you are anemic, you will be encouraged to add more iron-rich foods to your diet and a supplement may be prescribed by your doctor.

#### Common Food Sources for Calcium

FOOD W/ CALCIUM	SERV.	CALCIUM
Low fat fruit yogurt	1 cup	345 mg
Canned sardines with bone	3 oz	325 mg
Low fat milk	1 cup	305 mg
Calcium fortified orange juice	1 cup	300 mg
Boiled collard greens	1 cup	266 mg
Cooked Cream of Wheat cereal	1 cup	232 mg
Cheddar cheese	1 oz	204 mg
Boiled white beans	1 cup	191 mg
Canned salmon	3 oz	181 mg
Boiled soybeans	1 cup	138 mg
Low fat cottage cheese	1 cup	138 mg
Boiled kale	1 cup	94 mg
Boiled pinto beans	1 cup	79 mg
Almonds	1 oz	75 mg
Boiled broccoli	1 cup	62 mg
Dried figs	2 figs	62 mg
Raw oranges	1 med.	52 mg

Source: USDA Nutrient Database

#### Top Food Sources for Iron

FOOD W/ IRON	SERV.	IRON
Cooked soybeans	1 cup	345 mg
Cooked white beans	1 cup	325 mg
Cooked lentils	1 cup	305 mg
Cooked spinach	1 cup	300 mg
Braised beef liver	3 oz	266 mg
Cooked black beans	1 cup	232 mg
Cooked black-eyed peas	1 cup	204 mg
Sesame seeds	1 oz	191 mg
Cooked lima beans	1 cup	181 mg
Cooked swiss chard	1 cup	138 mg
Cooked oats	1/2 cup	138 mg
Cooked kidney beans	1 cup	94 mg
Cooked chickpeas	1 cup	79 mg
Braised beef chuck	3 oz	75 mg
Cooked collard greens	1 cup	62 mg
Cooked eggs	2 lrg	62 mg
Almonds	1 oz	52 mg

Source: USDA Nutrient Database

## FOOD SAFETY PRACTICES

### Foodborne Illnesses

Some foods can cause serious illness or even death to you or your baby. These foodborne illnesses occur when food is contaminated with harmful bacteria, parasites, or chemicals.

#### **Listeriosis**

Listeriosis is caused by listeria, a harmful germ that grows at refrigerator temperatures (40°F). It is found in many ready-to-eat foods such as hot dogs, lunch meats, unpasteurized milk, and certain soft cheeses made with unpasteurized milk. About 2,500 Americans become ill with listeriosis each year, with 1 out of 5 cases resulting in death. One-third of listeria cases happen during pregnancy, and can cause miscarriage, premature delivery, stillbirth, serious sickness or death for a newborn baby.

To lessen your risk for listeriosis:

- Reheat lunch meats and hot dogs to steaming hot or 165°F
- Avoid unpasteurized (raw) milk and products made with it
- Choose hard or processed cheeses instead of soft cheeses
- Use pasteurized eggs in recipes containing raw or undercooked eggs
- Do not eat refrigerated meat spreads
- Avoid raw or undercooked seafood, including refrigerated smoked fish

#### **Toxoplasmosis**

Toxoplasmosis is caused by a parasite found in foods such as raw and undercooked meat and unwashed fruits and vegetables. It is also found in dirty cat litter boxes and other areas where cats may leave their waste. Toxoplasmosis can cause hearing loss, blindness and brain damage in babies.

To lessen your risk for toxoplasmosis:

- Always wash fruits and vegetables
- Cook meat to a safe internal temperature
- If you have a cat, have someone else clean the litter box.  
If you must clean it, wash your hands thoroughly afterwards.

#### **Methylmercury in Fish**

Methylmercury is an organic form of mercury that can be found in certain kinds of fish, including large fish, fish with long life spans, and fish that eat other fish. High levels of methylmercury can harm a baby's brain and nervous system development.

During pregnancy and when breastfeeding, avoid bigeye tuna, king mackerel, marlin, orange roughy, shark, swordfish and tilefish. They have the highest levels of methylmercury. You can consume between 8-12 ounces of a variety of fish and other seafood per week, from choices that have low levels of methylmercury.

For a list of good fish choices, visit <https://www.fda.gov/food/consumers/advice-about-eating-fish>

## FOOD SAFETY PRACTICES (CONT'D.)

### Four Steps to Food Safety

#### 1) **Clean**

- Wash hands thoroughly with soap and warm water before and after handling food, after using the restroom, changing diapers and handling pets
- Wash utensils, dishes, cutting boards and countertops with hot soapy water after preparing food
- Rinse fresh fruits and vegetables with water

#### 2) **Separate**

- Separate raw meat, poultry and seafood from other foods
- Use one cutting board for fresh produce and a separate one for raw meat, poultry and seafood
- Place cooked food on a clean plate, not one that previously held raw meat, poultry or seafood

#### 3) **Cook**

- Cook food thoroughly to a safe minimum internal temperature. Use a meat thermometer to check the temperature.
- Bring gravy, sauces and soups to a boil when reheating
- Cook eggs until the yolks and whites are firm

#### 4) **Chill**

- Keep your refrigerator at 40°F or below and freezer at 0°F or below
- Refrigerate or freeze perishables within 2 hours of cooking or purchasing
- Always marinate foods in the refrigerator

## COMMON DISCOMFORTS

### **Backache**

Backache is very common during pregnancy due to various causes. As your uterus grows, your back muscles may be strained. Try wearing comfortable shoes and certain exercises to reduce back pain.

*Medication: Tylenol® (acetaminophen)*

### **Breast Changes**

Your breasts may increase in size and be sore, and the areola (nipple area) may darken. During the second half of pregnancy, your breasts may leak a fluid called colostrum, the early form of breast milk. This is normal. Keep nipples clean with warm water only.

*continued...*



## COMMON DISCOMFORTS (CONT'D.)

### **Constipation**

Drink plenty of fluids, like water, fruit juices or prune juice. Add more raw vegetables, fruits and whole grains to your diet. You may need to take a stool softener or fiber supplement daily. Do not take over-the-counter medications without talking with your doctor.

*Medications: Natural fiber products - Benefiber<sup>®</sup>, Fibercon<sup>®</sup>, Metamucil<sup>®</sup>;*

*Stool softeners - Colace<sup>®</sup>, Pericolace<sup>®</sup>, Senekot<sup>®</sup>. Drink extra fluids when taking fiber products.*

### **Dizziness**

During the early months of pregnancy you may experience dizziness, lightheadedness or fainting. This could be caused by changes in circulation, dehydration, blood sugar issues, or overheating. Always let your doctor know. Get up slowly from a sitting or lying position, drink plenty of fluids and eat small, frequent meals. During the second half of pregnancy, lie on your side to help the circulation of blood to your heart.

### **Emotional Changes**

Mood swings are very common during pregnancy due to hormonal changes. You may be happy one moment and sad or anxious the next. Talk about your feelings with someone, like your partner, family member or a friend. Pregnancy can be overwhelming, so ask for help and emotional support when you need it. If you have persistent feelings of depression or anxiety, talk with your doctor.

### **Fatigue (Tiredness)**

Your body experiences many changes during the first trimester of pregnancy. Your baby is growing, and your body and hormone levels are changing. It's no wonder why you are tired! Listen to your body. Rest when you are tired, eat healthy foods, drink healthy fluids, and take your prenatal vitamin. Your doctor may check your iron level. By the beginning of the second trimester, most women have their energy back.

### **Headaches**

Headaches are common during pregnancy, especially early pregnancy. If medication is needed, talk with your doctor about what medications are safe to take. If your headache is severe, causes changes in vision or sensitivity to light, or has nausea and vomiting associated with it, call your doctor immediately.

### **Heartburn**

Heartburn is related to stomach indigestion and is common during pregnancy. Avoid fried, fatty and spicy foods and carbonated beverages. Eat smaller meals more frequently. When lying down, elevate your head with extra pillows so the stomach acid stays below your throat.

*Medications: Antacids, such as Maalox<sup>®</sup>, Mylanta<sup>®</sup>, Rolaids<sup>®</sup> or Tums<sup>®</sup>*

### **Hemorrhoids**

Hemorrhoids, enlarged veins in the rectal area, can be caused by the increased weight you carry as your baby grows or by straining while constipated. Hemorrhoids can cause bleeding, itching and pain. Add more fiber and water to your diet to avoid constipation. Soak in a warm tub or apply witch hazel pads for relief.

*Medications: Anusol<sup>®</sup>, Preparation H<sup>®</sup>*



## COMMON DISCOMFORTS (CONT'D.)

### Leg Cramps

Lower leg cramps can happen during pregnancy, especially at night. Try stretching your legs before bed. If you experience a painful cramp at night, straighten the leg and bend your foot toward the ceiling. Lower calcium and potassium levels can also lead to cramping. Talk to your doctor about checking these levels.

### Lower Abdominal Pain

As your baby grows, you may experience pain on one or both sides of the lower part of the uterus toward the groin. It is known as round ligament pain and happens when the ligaments are stretched. Changing positions and leaning into the pain, using a pregnancy support belt or applying heat to the area may help lessen the pain. Call your doctor if the pain gets severe.

### Nosebleeds

During pregnancy, nosebleeds can occur due to your extra blood supply or nasal congestion. To slow the blood flow, apply pressure to the side of your nose that is bleeding. Using a humidifier or over-the-counter nose drops may be helpful.

### Shortness of Breath

As your baby grows, it is common to feel short of breath. Your baby is taking up more space and your lungs have less room to fill with air, and your body is working harder. Rest when you can and drink plenty of fluids.

### Nausea

Nausea is common in the early weeks of pregnancy, occasionally resulting in vomiting. Medication is usually not prescribed unless the problem is severe. Try eating foods high in carbohydrates. They are easier to digest and less likely to worsen nausea. Experiment with different foods to see what works for you.

- **Before bed:**  
Keep your bedroom a little cooler than the rest of the house and make sure there is fresh air. Keep some crackers or dry cereal near you to snack on before you go to sleep or if you wake up in the middle of the night.
- **Getting up:**  
Sudden movements can make nausea worse, so get up slowly. Eat a few crackers or dry cereal before you get up.
- **Cooking:**  
Get rid of the odors in the kitchen by opening a window or burning a cinnamon-scented candle. Cook extra portions on the days you feel less nauseated and freeze them. You can reheat them on the days you don't feel well enough to cook.
- **Mealtime:**  
If your stomach is empty, you are more likely to feel nauseated. Eat several smaller meals throughout the day instead of three large meals. Drink fluids 30 minutes before or after eating. **DO NOT** overeat. Avoid greasy foods, overly spiced foods, and foods that produce gas, such as beans, broccoli, brussels sprouts, cauliflower and cabbage. Ginger tea may help settle your stomach but talk with your doctor about safe amounts of caffeine first.
- **Any time:**  
Try sucking on peppermints or hard candy, sip flat cola or ginger ale, or consider wearing seabands. Vitamin B6 (25 mg every 8 hours) or a ginger capsule (250 mg every 6 hours) may also alleviate nausea.

## COMMON DISCOMFORTS (CONT'D.)

### **Nausea (cont'd.)**

If you are experiencing nausea, the following food plan may help. This plan does not give you all the foods you need during pregnancy, so as soon as you start to feel better, gradually add the foods from your pregnancy nutrition plan back into your diet.

- Before getting up – dry cereal, plain crackers or toast with a little jelly or jam
- Breakfast – cereal with ¼ cup milk, dry toast, poached or boiled egg (not fried)
- Midday – plain bagel or granola bar, serving of fruit (applesauce, pear or banana for example), sips of flavored water or juice
- Lunch – peanut butter and jelly sandwich or a sandwich made with lean meat, serving of fruit
- Dinner – lean meat, fish or poultry, baked, boiled or mashed potato, dark green or yellow vegetable and a serving of bread
- Before bed – bread with a little jelly or jam or cereal with milk or another liquid taken sips at a time

If you can't keep any food or liquid down for 24 hours, call your doctor.

### **Skin Changes**

Temporary changes in skin during pregnancy are common. Stretch marks (reddish, discolored lines) often appear on your abdomen, breasts or buttocks. Creams will not lighten stretch marks. They will fade after pregnancy. Acne may occur due to hormonal changes. Use a mild, over-the-counter facial wash. Some acne medications are not recommended for use during pregnancy.

Talk with your doctor about which medications are safe.

### **Swelling**

Weight gain and fluid retention during pregnancy can cause swelling, especially in the lower legs, ankles, feet and hands. Elevating your legs and resting may help. Avoid salt and add extra water to your diet. If you wear rings, check daily to make sure they are not getting too tight on your fingers.

### **Swollen Gums**

Your body is experiencing hormonal changes and producing extra blood while you are pregnant. This can lead to swollen, bleeding gums. Continue brushing and flossing your teeth. If your gums continue to be problematic, see your dentist.

### **Vaginal Discharge**

Increased vaginal discharge that is clear, white, sticky or odorless is normal during pregnancy and does not need to be treated. If your discharge is watery, discolored, has an odor, or you have itching or soreness, call your doctor.

### **Varicose Veins**

Varicose veins occur when veins in your legs weaken and circulation is altered. They can be painful. If you stand or sit for long periods of time, exercise and moving around for short intervals can help. Resting, propping up your legs and wearing support stockings may also help.

## ILLNESS

You may develop a cold or flu during your pregnancy. Because your immune system is affected while you are pregnant, symptoms can last longer than usual. Cold symptoms can include cough, sore throat, sinus congestion and sneezing. Flu symptoms include body aches, chest congestion and an elevated temperature. Stomach flu (gastroenteritis) is not really the flu. Symptoms include vomiting and diarrhea, sometimes with body aches and pains.

Nasal stuffiness is also common during pregnancy because of hormonal effects on your nasal passages. If other cold symptoms are not present, you probably don't have a cold.

If you do get a cold or flu during pregnancy, the following tips can help you feel more comfortable:

- Drink at least 8-10 glasses of liquids each day (water, juices, broth, some soda pop).
- If your appetite is decreased, try eating 6 small meals throughout the day instead of 3 normal meals.
- Rest more often. Elevate your head to help breathing.
- Monitor your temperature. If your temperature rises above 100.4°F, call your doctor.
- Use a steamer or vaporizer to help loosen congestion. If you begin to cough up green or yellow mucus, call your doctor.
- To reduce sinus pain, apply warm compresses to help alleviate congestion.
- Suck on hard candy to relieve cough.

***Call your doctor if you cannot keep any food or liquid down for more than 24 hours.***

## VACCINATIONS

These vaccinations protect you and your baby from serious illness:

### ***Flu Vaccine***

The flu vaccine safely protects you and your baby from serious illness and complications from the flu. Changes in your immune system during pregnancy make you more prone to severe illness from the flu, which can lead to hospitalization, premature delivery or even death. Receiving the flu vaccine during pregnancy protects both you and your baby (up to six months after birth) from the flu.

### ***Tdap Vaccine***

The Tdap vaccine protects against tetanus, diphtheria, and pertussis (whooping cough). Pertussis is a highly contagious disease that spreads when an infected person coughs. It can cause severe coughing that can lead to vomiting, pneumonia, broken ribs or death. It is recommended that you get the Tdap vaccine in your third trimester or, if available, in the hospital after birth. To keep your baby safe, it is recommended that family members (dad, siblings) be vaccinated.

## SAFE MEDICATIONS

There are many safe medications that can be used during pregnancy. Other doctors may be involved in your care for non-pregnancy related health issues. Let them know you are pregnant so they can be sure to prescribe medications that are safe for you and your baby. The over-the-counter medications listed below are safe for you during pregnancy. If you have questions about any of the medicines or if a medication is not on the list, please call your doctor.

***If your symptoms do not improve with 24-36 hours, call your doctor.***

PREGNANCY WEEKS	ILLNESS	MEDICATION
Before 12 weeks	Cold/Cough	Zicam <sup>®</sup> and throat lozenges: Cepacol <sup>®</sup> , Halls <sup>®</sup> , Ludens <sup>®</sup>
	Constipation	Natural fiber products such as Benefiber <sup>®</sup> , Fibercon <sup>®</sup> , Metamucil <sup>®</sup> , and stool softeners such as Colace <sup>®</sup> , Pericolace <sup>®</sup> , or Senekot <sup>®</sup> <i>Remember to drink extra fluids when taking fiber products.</i>
	Hemorrhoids	Anusol <sup>®</sup> , Preparation H <sup>®</sup>
	Indigestion	Antacids: Maalox <sup>®</sup> , Mylanta <sup>®</sup> , Rolaids <sup>®</sup> , Tums <sup>®</sup>
	Nausea/Sleep	Unisom <sup>®</sup> for sleep or nausea. For sleep, 1 tablet at bedtime. For nausea, you may take an additional 1/2 tablet in the morning.
	Pain (headache)	Acetaminophen (Tylenol <sup>®</sup> )
		<i>In addition to medications listed above:</i>
After 12 weeks	Cold/Cough	Cough syrups: Formula 44 <sup>®</sup> , Robitussin <sup>®</sup> (plain or DM), Vicks <sup>®</sup>
	Diarrhea	Imodium <sup>®</sup> , Kaopectate <sup>®</sup>
	Indigestion/Gas	Gas-X <sup>®</sup> or Mylicon <sup>®</sup>
	Nasal Congestion	Benadryl <sup>®</sup> , ChlorTrimeton <sup>®</sup> , Claritin <sup>®</sup> , Sudafed <sup>®</sup> , Triaminic <sup>®</sup>

### Medications NOT to take during pregnancy

- Advil<sup>®</sup>, Aleve<sup>®</sup>, Aspirin, Ibuprofen, or Motrin<sup>®</sup> at any time during pregnancy, unless instructed to by your doctor.
- Combination products (ie: Tylenol<sup>®</sup> Cold & Flu).
- Herbal supplements, unless you have permission from your doctor.



## SMOKING

If you smoke while pregnant, you are exposing your baby to harmful chemicals like carbon monoxide, tar and nicotine. Nicotine narrows blood vessels, which results in less oxygen and nutrients reaching your baby. Carbon monoxide also limits the amount of oxygen your baby receives.

The following issues are more common in women who smoke:

- Tubal pregnancy
- Vaginal bleeding
- Premature birth
- Stillbirth
- Low-birth-weight babies (less than 5.5 lbs)
- Issues with the way the placenta attaches to the uterus
- Increased risk of cleft lip or palate

Smoking is also harmful to newborns and children. Mothers who smoke have children with more frequent ear infections and upper respiratory infections. Children who breathe second-hand smoke have a higher risk of asthma and sudden infant death syndrome (SIDS), and behavioral problems, such as hyperactivity.

If you are a smoker, cutting down or quitting at any time during pregnancy is a positive step towards better health for you and your baby. Decreasing you and your baby's exposure to second-hand smoke is also important.

## HOUSEHOLD POISONS

The most common poisons ingested by children are household plants. Know the names of all the plants in your house and yard. If you think your baby has ingested a poison, call the Poison Control Center at [1-800-222-1222](tel:1-800-222-1222). Trained personnel are on duty 24 hours to answer your questions and help with poison exposure. They use a special library that is continuously expanded and updated with new products.

## EXPOSURE TO CHEMICALS

Certain chemicals and medications can cause birth defects if a woman is exposed to them during pregnancy. If you have been exposed or prescribed any of the following, tell your doctor:

- ACE inhibitors (i.e. enalapril or captopril)
- Alcohol
- Androgens and testosterone byproducts (i.e. danazol)
- Anti-folic acid drugs (i.e. methotrexate or aminopterin)
- Carbamazepine
- Cocaine
- Coumadin byproducts (i.e. warfarin)
- Diethylstilbestrol (DES)
- Lead
- Lithium
- Organic mercury
- Paramethadione
- Phenytoin
- Streptomycin/Kanamycin
- Tetracycline
- Thalidomide
- Trimethadione
- Valproic acid
- Vitamin A byproducts

## ALCOHOL USE

Using alcohol during pregnancy can be harmful to your baby because your baby's liver cannot break down the alcohol. Alcohol can affect babies in many ways, including:

- Fetal alcohol syndrome, which causes major physical, mental and behavioral issues in exposed babies. There is no cure for fetal alcohol syndrome.
- Small babies
- Joint and limb problems
- Heart defects
- Abnormal facial features
- Behavioral problems, including hyperactivity, anxiety and a poor attention span
- Low IQ

## NARCOTICS/OPIOIDS

Narcotics or opioids are sometimes prescribed for short term use. Using them for a long period of time or when they are not prescribed can have negative effects on both you and your unborn baby. Talk with your doctor about narcotic and opioid use.

## USE OF ILLEGAL DRUGS

Illegal drug use during pregnancy can harm your baby. Many illegal drugs are highly addictive to both you and your baby, and the lifestyle associated with them can be harmful as well.

**Cocaine** – use can cause the placenta to tear away, bleeding, preterm delivery, and death to mother and/or baby. Babies can have problems with withdrawal, slow growth, brain injury, fussiness, and long-term behavioral, emotional and learning problems.

**Ecstasy** – the user can experience mood changes, sleep problems and loss of appetite. Babies may have long-term learning and memory problems.

**Glues/Solvents** – inhalants make the user feel lightheaded and dizzy. They can damage the bone marrow, liver, kidneys and brain, and can cause sudden death. Using inhalants during pregnancy can cause miscarriage, slow growth and preterm delivery.

**Heroin** – babies can be born too soon, be born addicted, or die. They may also have low birth weight, developmental delays and behavioral problems. Sudden withdrawal from heroin can harm a woman and her baby.

**Marijuana** – stays in the body for weeks and releases carbon monoxide into the body, preventing baby from getting enough oxygen, which may result in brain damage.

**Methamphetamine** – use during pregnancy can cause the placenta to tear away, and baby to die. Babies who survive may have behavioral problems, such as trouble bonding with others or fussiness.

**PCP/Ketamine/LSD** – users of PCP or angel dust may lose touch with reality, become violent, and experience flashbacks, seizures, heart attacks or lung failure. Babies may have withdrawal symptoms, low birth weight and poor control of movements.

**Ts and Blues** – this is the street name for a mixture of prescription drugs and allergy medications which can cause slow growth and withdrawal symptoms after delivery.

## TESTS

During your pregnancy, your doctor will order lab tests to check for infections and diseases. Blood tests will determine your blood type, iron level, and whether you have infections or diseases like syphilis, rubella, HIV and hepatitis B. Your urine will be checked for signs of a urinary tract infection, diabetes and signs of high blood pressure. A cervical test will check for changes that could lead to cancer and check for sexually transmitted infections such as gonorrhea and chlamydia.

You will also have the opportunity to be tested to see if your pregnancy has, or is at risk for, a genetic disorder. Different tests are offered at various times in your pregnancy.

### ***Diagnostic/Screening Tests***

#### **Nuchal Translucency Test and Quad Test**

These tests determine if your baby is at risk for a chromosomal problem or birth defect. These are not done on all women, but your doctor may recommend it.

#### **Chorionic Villus Sampling (CVS)**

This procedure takes a sample of cells from the placenta and tests them to detect birth defects, genetic diseases and other problems during pregnancy. It is usually done between weeks 10-13 of pregnancy.

#### **Amniocentesis**

A small amount of amniotic fluid is taken from the sac around your baby. Early in pregnancy, the test is used to see your baby's cells and chromosomes. Later in pregnancy, the test can determine if there is a blood incompatibility, for lung maturity, or to check for infections.

#### **Cell-free Fetal DNA Testing**

A blood sample from the mother is taken between 10-22 weeks of pregnancy. It is used to detect some fetal chromosome abnormalities.

### ***Other Tests***

#### **Cystic Fibrosis Carrier Testing**

Cystic fibrosis is a genetic condition that causes thick, sticky mucus and makes breathing difficult. Cystic fibrosis carrier testing determines whether a couple is at risk for having a child with cystic fibrosis. Certain ethnic groups have higher chances of being carriers, with Ashkenazi Jewish couples having the highest chance of being carriers. If you are interested in testing, talk with your doctor.

#### **Group B Streptococcus**

Group B streptococcus (GBS) is a type of bacteria found in approximately 30% of women. In most cases, women who have GBS are not in any health danger. However, the bacteria can be passed on to the baby during labor. If the baby becomes infected, serious health problems can occur with the baby's lungs, blood or brain. All women are tested for GBS between 35-37 weeks using a simple vaginal swab. If you test positive for GBS, you will be treated with antibiotics during labor to protect your baby.

## TESTS (CONT'D.)

### **Gestational Diabetes**

One of the biggest health concerns during pregnancy is gestational diabetes. It is a type of diabetes that only pregnant women get. All women are tested between weeks 24-28 of their pregnancy. If you are at high risk you may be tested earlier.

You may be high risk if:

- You had gestational diabetes in a previous pregnancy
- You are overweight
- You have close family members with diabetes
- You had a very large baby with a past pregnancy
- You are African American, Asian, Hispanic or Native American

A blood test is used to determine if you have gestational diabetes. At the time of testing, you will drink a special sugary drink, then have your blood drawn about an hour later to check the amount of glucose (sugar) in your blood. If your glucose is high, you may have to schedule another test that checks your glucose level over a three-hour period.

Gestational diabetes is treatable. Most women can control gestational diabetes with diet and exercise. If the problem is more severe, you will need to check your blood sugar levels at home and you may need medication to help control your blood sugar. If you are not treated for this condition, you are at risk for developing high blood pressure and having a very large baby. Very large babies could have many health problems, including low blood sugar, jaundice and breathing problems.

Most of the time, gestational diabetes goes away after your baby is born. If you are diagnosed with gestational diabetes, it is important for you to meet with your primary care doctor after delivery to form a plan to reduce your risk of developing diabetes later in life.

### **Ultrasound**

Ultrasounds create pictures of your baby using sound waves. Most women have an ultrasound during their first visit to their doctor, then again between 19-21 weeks. It can be used at any point during pregnancy and is not harmful to mom or baby. Ultrasound is used to:

- Confirm pregnancy
- Determine the baby's age
- Measure the length of the cervix
- Measure the baby's growth
- Determine the location of the placenta
- Check the baby's position, breathing, movement and heart rate
- Look for birth defects
- Determine the amount of fluid around the baby



## PREGNANCY LATER IN LIFE

More couples are choosing to start a family later in life. There is no set age for when a woman should not become pregnant. Most women over 35 will have healthy pregnancies and babies. However, certain medical issues are more likely to occur in women over 35. Your doctor will watch closely as your pregnancy progresses for the development of potential problems, such as:

- High blood pressure
- Gestational diabetes
- Miscarriage and stillbirth
- Low birth weight baby
- Need for a cesarean section
- Birth defects or chromosomal problems

As you get older, the chance is greater for having a baby with certain chromosomal conditions, like Down Syndrome. For example, at age 35 your chances of having a baby with a chromosomal condition are 1 in 192. At age 40, your chances are 1 in 66. Testing for genetic issues is offered to all women who will be 35 or over at delivery. Discuss this testing with your doctor.

## WARNING SIGNS

You will see your doctor on a regular basis during your pregnancy to make sure you and your baby are doing well. However, there are some things that you will need to let your doctor know if they occur during your pregnancy.

- If you fall or are in a motor vehicle accident (even a fender bender), call your doctor immediately.
- Signs of preterm labor (prior to 37 weeks): change in vaginal discharge, leaking fluid and/or contractions
- Any bright red bleeding from the vagina, with or without pain
- Pain or burning when urinating
- Sudden swelling of face, hands and ankles
- Blurred vision or spots before your eyes
- Dizziness
- Constant, severe headaches
- Severe abdominal pain

Once you start to feel your baby move, you'll feel movement often during pregnancy. After 28 weeks, if you do not feel your baby moving as usual, call your doctor. Some things you can do if you are concerned are:

- Drink a cold, sugary beverage (unless you have blood glucose issues)
- Eat a healthy snack or meal
- Empty your bladder
- Rest on your side if you have been up; walk around if you haven't
- Record how many times your baby moves by using the Fetal Movement Record at the end of this packet
- If you are still concerned, call your doctor

## FETAL MOVEMENT RECORD

### Instructions:

1. Eat and drink before test
  2. Select a one-hour period in the morning and evening
  3. Lie comfortably on your side
  4. Count each movement until you reach 10 movements in one hour
- If you do not have 10 movements in one hour, repeat the test for another hour
  - If you still do not have 10 movements or there is a significant decrease from normal, call your doctor's office



### FIRST COUNTING PERIOD

### SECOND COUNTING PERIOD

FIRST COUNTING PERIOD				SECOND COUNTING PERIOD				Daily Totals
Date	Time	# of Movements	AM Totals	Date	Time	# of Movements	PM Totals	



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