

## OFFICE VISITS DURING YOUR PREGNANCY

- Initial Visit:** This appointment can be made anytime following a positive home pregnancy test. You will be scheduled between 8-10 weeks. At this appointment you will have a sonogram, we will review your history, discuss pregnancy screenings, draw your blood for lab work, and perform a physical exam. Please allow 2 hours for this appointment.
- 12 Wk Visit:** Routine visit. Review labs and listen for baby's heartbeat. NIPT testing optional any time after 10 weeks of pregnancy.
- 16 Wk Visit:** Routine visit. Listen to baby's heartbeat. Optional-Quad screen & gender sonogram
- 20 Wk Visit:** Routine visit. Listen to baby's heartbeat and sonogram survey.
- 24 Wk Visit:** Routine visit. Listen to baby's heartbeat. You will also receive your glucola for the next visit.
- (3D sonogram is available between 25-30 weeks)
- 28 Wk Visit:** Routine visit. Listen to baby's heartbeat, Tdap vaccine, EPDS screening, glucose testing, and iron testing. Rhogam if needed.
- 32 Wk Visit:** Routine visit. Listen to baby's heartbeat & EPDS screening.
- 34 Wk Visit:** Routine visit. Listen to baby's heartbeat.
- 36 Wk Visit:** Routine visit. Group B strep culture, EPDS screening, and listen to baby's heartbeat. Cervical check possible. If interested in an IUD after delivery, discuss with provider so that the pre-certification process can be started.
- 37-40 Wks:** Weekly visits until delivery will include a pelvic exam at each visit & listening to the baby's heartbeat.

## Common Questions about Nutrition & Pregnancy

### **What about raw food and cheese?**

- All meat and eggs should be fully cooked
- Cheese should be pasteurized

### **Which fish should I avoid?**

- Avoid fish high in mercury such as: shark, mackerel, tilefish, swordfish and marlin
- Fish with lower levels of mercury are: shrimp, canned light tuna, salmon, pollack and catfish
- Limit albacore tuna to 6 ounces per week due to higher amounts of mercury
- Avoid sushi
- 12 ounces of other fish per week is acceptable

### **How much caffeine can I have?**

- Limit total intake to 300mg per day or 1-2 cups of coffee

#### Average Caffeine Content in Common Beverages

Beverage	Serving size (oz)	Caffeine Contents (mg)
Drip Coffee	8oz	234mg
Instant Coffee	8oz	85mg
Brewed Tea	8oz	9-46mg
Hot Chocolate	6oz	10mg
Soda	12oz	40-55 mg

### **What about artificial sweeteners?**

- Recommend to use in moderation

### **What about processed meats like lunchmeat and hotdogs?**

- You may eat these foods in moderation

### **Are there any herbs I should avoid?**

- Avoid the use of flax seed oil-it has been linked to pre-term labor
- Avoid green tea in the 1<sup>st</sup> trimester-it has been linked to decreased folate absorption

Weight Before Pregnancy	Recommended Weight Gain During Pregnancy (Pounds)
Underweight	28-40
Normal weight	25-35
Moderate Weight (120%-135% of standard)	15-25
Severely overweight (more than 135% of standard)	15

Nutrients	Nonpregnant	Singleton	Twins
Proteins, fats, calories And carbohydrates Per day	2200	2500	3500
Recommended weight gain Before 24 weeks	n/a	½ lb/wk	1 lb/wk
Recommended weight gain After 24 weeks	n/a	1 lb/wk	2 lb/wk
Optimal total weight gain	n/a	25-30 lb	40-50 lb
Average length of gestation	n/a	40 wk	36 wk

Food group	serving size	Singleton	Twins
<b>Dairy</b>	8 oz milk 8 oz cottage cheese 8 oz ice cream 1 oz hard cheese 1 cup of yogurt	6 servings per day	8 servings per day
<b>Meats, fish, poultry</b>	1 oz	6 servings per day	8 servings per day
<b>Eggs</b>	1	1 per day	2 per day
<b>Vegetables</b>	½ cup cooked or 1 cup fresh	4 servings per day	4 servings per day
<b>Fruits</b>	½ cup or 1 fresh	4 servings per day	7 servings per day
<b>Grains and Breads</b>	1 oz; ½ cup, Cooked or 1 slice	8 servings per day	10 servings per day
<b>Fats, oils and nuts</b>	1 T oil 1 pat butter 1 oz nuts	5 servings per day	6 servings per day

**Fats and oils are heroes, not villains, for expectant moms. Stock cupboards, refrigerator and freezer with the basics.**

GUIDELINES FOR CONTINUATION OF VARIOUS LEVELS OF WORK DURING PREGNANCY.

<b><u>Job Functions</u></b>	<b><u>Week of Gestation</u></b>
Secretarial and light clerical	Up to 40 wks
Professional and managerial	Up to 40 wks
Sitting with light tasks, prolonged or intermittent	Up to 40 wks
Standing	
Prolonged (more than 4 hours) without a break	Up to 24 wks
Intermittent	
(More than 30 minutes per hour)	Up to 32 wks
(Less than 30 minutes per hour)	Up to 40 wks
Stooping and bending below knee level	
Repetitive (more than 10 times per hour)	Up to 20 wks
Intermittent (2 to 9 times per hour)	Up to 28 wks
(Less than 2 times per hour)	Up to 40 wks
Climbing, vertical ladders and poles	
Repetitive (4 or more times per 8 hr. shift)	Up to 20 wks
Intermittent (less than 4 times per 8 hr. shift)	Up to 28 wks
Stairs	
Repetitive (4 or more times per 8 hr. shift)	Up to 28wks
Intermittent (less than 4 times per 8 hr. shift)	Up to 40 wks
Lifting	
<u>Repetitive</u> (No restrictions medically indicated due to pregnancy alone to 20 wks. Unless otherwise advised by doctor.)	
May lift up to 50 pounds from 20 to 24 wks. After 24 wks no lifting over 25 pounds.	
<u>Intermittent</u> (No restrictions medically indicated due to pregnancy alone up to 30 wks Unless otherwise advised by doctor.)	

# Women, Folic Acid and Neural Tube Defects

## What is folic acid?

- Folic acid is a water-soluble B vitamin found in most vitamin supplements

## Why is folic acid important for me?

- Studies have shown that taking 400 mcg of folic acid at least 3 months before conception can prevent 70% of neural tube defects
- Studies have also shown that folic acid may help prevent cleft lip and palate

## What is a neural tube defect?

- The neural tube is the part of an embryo that develops about 28 days after conception
- It involves the developing brain and spinal cord
- If any portion of this neural tube does not form properly, the baby can be born with a partially open spine or brain malformations

## How does folic acid help this?

- Studies have shown that folic acid helps cell growth to prevent these birth defects that often happen before you even know you're pregnant.

## Who should take folic acid?

- **Whether you are using birth control, not planning to get pregnant, or planning to get pregnant, the March of Dimes recommends that all women of childbearing age take at least 400 mcg of folic acid each day**
- As many as 50% of pregnancies are unplanned. So, by taking folic acid now you can help prevent neural tube birth defects if you do become pregnant
- If you are planning to have a baby, you should start taking folic acid at least 3 months prior to trying to get pregnant
- The March of Dimes recommends increasing your dose of folic acid to 600 mcg once you know you are pregnant
- You should not take more than 1000 mcg of folic acid daily without consulting your doctor first. Too much folic acid can hide signs of some anemia.
- If you take medication for seizure disorder you may need additional folic acid. Ask your healthcare provider.

## What are some dietary sources of folic acid?

- Folic Acid can be found in orange juice, leafy green vegetables, beans, peanuts, broccoli, asparagus, peas, lentils, fortified cereals, pastas, breads and rice

### References

Postlewaite, Debbie RNP, MPH (2003). Preconception health counseling for women exposed to teratogens: the role of the nurse.

Journal of Obstetrics, Gynecology and Neonatal Nursing, 32(4). 523-532

Tinkle, Mindy RNC, PhD, WHNP (1997). Neural tube defects: a primary prevention role for nurses. Journal of Obstetrics, Gynecology and Neonatal Nursing, 26(5). 503-512. Folic Acid (2000). (Brochure) The March of Dimes. You may visit the March of Dimes web site @ [www.marchofdimes.org](http://www.marchofdimes.org)

# **Gender Sonogram**

Schedule at 16 weeks & after

\$50

# **3D Sonogram**

Schedule between 25-30 weeks

\$100

*Includes 3D ultrasound, 4D ultrasound, 5-7 sepia prints, 7-10 black & white thermal prints, and a DVD of images to view at home on your computer.*

## Screening Options in Pregnancy

The following are tests available to detect certain problems that may affect your pregnancy. Please review the brochures provided to help you make your decision.

**1<sup>st</sup> Trimester Screening**- This test includes a blood test and ultrasound of the nuchal fold, an area at the back of the baby's neck. This screening looks for an increased risk of Down's syndrome and a chromosomal abnormality called trisomy 18. In the first trimester, the combined blood test and ultrasound may detect Down syndrome in 82-87% of cases. It may also indicate other genetic conditions. This screening is done between 11-13 weeks at a specialist office. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

**Cell-Free DNA Testing or Verify**- This test includes a blood test on the mother any time after 10 weeks gestation. This test assesses cell-free fetal DNA that is found in the mother's blood. Verfi screens for some chromosomal abnormalities which can affect the babies' health. The following is a list of the genetic disorders that are included in the results: Down syndrome (Trisomy 21), Edwards syndrome (Trisomy 18), Patau syndrome (Trisomy 13), Turners syndrome, Klinefelter syndrome, Jacobs syndrome and Triple x syndrome. It does not screen for all birth defects and there is a small risk of both false positive and false negative results. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

**Second Trimester Screening**- Also known as a Quad screen, is a blood test offered between 15-20 weeks. This is a screening test for the increased risk of Down syndrome, Neural tube defect, and other trisomies. Although less accurate, this screening may be done instead of the first trimester screening. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

**Cystic Fibrosis**- This is the most common life threatening autosomal recessive condition in Caucasian populations. Approximately 1/25 non-Hispanic whites are a carrier of cystic fibrosis. Typically, both parents would have to be a carrier in order for the baby to become affected with the disease. It is recommended that all patients be offered the test. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

## Screening Options in Pregnancy

**Spinal Muscular Atrophy**- This is an autosomal recessive disease that affects 1 in 10,000 births. Approximately 1/40 to 1/60 people are a carrier of the disease. There is no treatment available and these children often have very serious, sometimes fatal, developmental and physical problems. Currently, the American Congress on Obstetrics and Gynecology only recommends testing for patients who have a family history of the disease. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

**Fragile X Syndrome**- This is the most common inherited form of mental retardation. Approximately 1 in 3,600 males are affected and 1 in 4,000-6,000 females are affected by the disease. Currently it is recommended for patients to be screened if they have a family history of fragile x, undiagnosed mental retardation, autism or developmental delays. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

**Counsyl Test**- This is a universal genetic test which looks to see if the patient is a carrier for over 100 genetic diseases including: CF, SMA, and Fragile X. This is an elective procedure and may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

**Urine Drug Screen** – This is a screen. We screen our first new OB urine samples for a drug screen. This may or may not be covered by insurance.

- Yes, I want to schedule this test.
- No, I do not want to schedule this testing.

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Print Name

Signature

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Date

Medical Record#



# **Prenatal & Therapeutic Massages**



**30 Minutes - \$30.00**

**60 Minutes - \$55.00**

**Gift Certificates Available!**

**Must be at least 13 weeks for prenatal massages**