

WESTWOOD OB-GYN PRENATAL INFORMATION

WELCOME

We at Westwood Obstetrics and Gynecology would like to congratulate you on your pregnancy and thank you for allowing us to be a part of your prenatal and birthing experience. The following is a summary of many of the frequent concerns that pregnant women have. Please keep this packet and refer to it often as many of the most common questions are answered below.

Visit our website www.westwoodobgyn.com for a more complete list of pregnancy questions.

THE PRACTICE

Our practice consists of four board certified physicians, Dr. Taylor, Dr. Lewicky, Dr. Sanders, and Dr. Goldfain, along with Patricia Lynch, Board Certified Nurse Practitioner, and Jennifer Klump, Board Certified Nurse Midwife. Your prenatal care will be managed primarily by the four physicians and nurse midwife. Your baby will be delivered by the physician on call that day, or the nurse midwife. We ask that you meet each of the physicians and nurse midwife at least once during your pregnancy. It is to your benefit to get to know each of them and allow them to get to know you. It is nice to see a familiar face when it comes time for delivery.

Our providers are on staff at Riverside Medical Center and Provena St. Mary's hospitals. You may deliver at the hospital of your choice but please check to be sure your preferred hospital is contracted with your insurance company. Both hospitals offer birthing rooms, various birthing classes, and allow sibling visitation. Both also allow father's to be present during cesarean births at the physician's discretion. Please note: **We do not perform or condone home deliveries.**

TO AVOID

A healthy lifestyle is the single most important factor necessary for a healthy baby. However, there are several things you should avoid during pregnancy. We strongly recommend that you:

1) **DO NOT SMOKE.** If you are a smoker, now is the time to quit. Smoking is proven to be associated with a higher frequency of miscarriage and bleeding in pregnancy. Smoking can interfere with normal fetal growth causing babies to be born smaller than they should. With heavy smoking there is an increased chance of damage to the placenta which increases your chances of fetal distress during labor and intrauterine fetal growth retardation.

2) **DO NOT DRINK ALCOHOL.** Alcohol abuse during pregnancy causes a birth defect called Fetal Alcohol Syndrome which can result in mental retardation. Currently there is no known safe dose of alcohol that can be ingested in pregnancy; therefore, it should be avoided.

3) **AVOID X-RAYS.** If you must be x-rayed, the technician must be informed that you are pregnant and your abdomen should be double shielded.

4) **AVOID HOT TUBS AND SAUNAS.** Please avoid anything that raises the body temperature and sustains it for a prolonged period of time.

5) **AVOID HIGH IMPACT EXERCISE.** We strongly recommend exercising during pregnancy to avoid excessive weight gain and ease labor and delivery. We do ask you to avoid high impact aerobics, running, jogging etc.

6) **AVOID LIFTING MORE THAN 40 LBS.**

7) **DO NOT TAKE ASPIRIN, IBUPROFEN, ALEVE, ADVIL, MOTRIN, OR ANY NON-STEROIDAL ANTI-INFLAMMATORY MEDICATIONS.** You MAY take Extra or Regular Strength Tylenol for pain or fever.

8) **AVOID HERBAL SUPPLEMENTS/PRODUCTS** unless approved by one of our physicians.

FOR COLD OR FLU

Extra Strength Tylenol, Datril, and Anacin 3 can be taken for minor aches and pains, headache, or fever. Regular strength Sudafed is safe for colds and congestion and Robitussin DM is safe for cough. Halls or Screts throat lozenges are also safe.

If you have a fever that remains at 100 degrees or higher **while** taking Tylenol, please call the office and speak to a nurse regarding your condition.

Bed rest and increasing fluid intake is recommended for cold and flu symptoms.

EMERGENCY CARE

We ask our patients to refrain from going to the emergency room without first contacting our office. Our staff is available by phone between the following hours:

Monday – Thursday 9am-12pm and 1pm-5pm

Friday 9am-12pm and 1pm-4pm

If an emergency occurs, please inform the receptionist that answers your call. There is a physician on call for our practice to respond to **EMERGENCIES** after office hours. Please use good judgment before calling the on-call physician as he or she is typically in the hospital performing deliveries and surgeries while on call. If a life threatening emergency arises, never hesitate to go to the nearest emergency room.

NON EMERGENCY CARE

Non-emergency questions and concerns should be answered at your next prenatal visit. If you feel that you cannot wait you may call the office during regular hours and ask to speak to a nurse. We ask for your patience when calling as calls are taken in the order they are received.

WEIGHT GAIN

Proper weight gain is important during pregnancy. We expect a minimum gain of at least 15 pounds. For a patient of average pre-pregnancy weight, 20 to 25 pounds is considered ideal, whereas 30 pounds is preferable for the very thin patient. Massive weight gain (more than 50 pounds) can cause larger than average babies making delivery more difficult.

EXERCISE

Moderate exercise is desirable but high impact forms such as jogging should be avoided. Walking, biking and swimming are excellent choices. Sexual activity is not restricted and may be continued as long as it is comfortable. If you experience bleeding, preterm rupture of membranes, or are being followed closely for preterm labor, sexual activity should stop.

BLEEDING IN PREGNANCY

If bleeding occurs at anytime during your pregnancy, get off your feet and call the office.

RUPTURE OF AMNIOTIC MEMBRANES - "WATER BREAKS"

If your "water breaks" or you experience regular contraction at ANYTIME during your pregnancy, please go to the Labor and Delivery department of your delivery hospital. If you are unsure that either has occurred, you may call the office.

LABOR

You should come to the hospital when you are experiencing contractions every 5-7 minutes consistently for one hour. **Do not call the on call provider or the office.** The labor and delivery nurse will call the doctor once you are assessed.

ROUTINE TESTING

There are currently many more screenings available to pregnant women than in years past. In early pregnancy we require Complete Blood Count, Syphilis (required by the state), Blood Type and Rh factor, Hepatitis B, and STD screenings. We also order HIV testing on all pregnant patients.

The American College of Obstetrics and Gynecology recommends that a screening for Cystic Fibrosis be done on women who are at high risk for carrying the gene. Those at high risk include those with a family history of cystic fibrosis, Caucasian women of northern European descent, and women of Ashkenazi Jewish heritage. Your doctor will discuss this with you and testing is optional.

At 16 weeks gestation we offer an Alpha-Fetoprotein blood test. This is a screening test to detect a fetus with an increased risk of a neural tube defect or Down's Syndrome.

Between 18 and 20 weeks gestation a routine ultrasound will be ordered to assess fetal development. Additional ultrasounds may be ordered at any other time during pregnancy if indicated.

At 24 weeks gestation all patients are screened by blood test for gestational diabetes.

At 36 weeks a vaginal culture is done to screen for Beta-hemolytic strep bacteria.

Please do not hesitate to ask your provider if you have any questions about the tests that are ordered for you during your pregnancy.

CONCLUSION

Despite all of the above warnings and advice, pregnancy is a safe, healthy, and happy experience. We look forward to caring for you during this special time and appreciate the trust you have placed in us to care for you and your unborn child.