Your Guide Through A Happy and Healthy Pregnancy



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LOCATIONS

Kempsville Office 880 Kempsville Road, Suite 2200 Norfolk, Virginia 23502



Chesapeake Office 300 Medical Parkway, Suite 308 Chesapeake, Virginia 23320

Brambleton Office 250 W. Brambleton Avenue, Suite 202 Norfolk, Virginia 23510

HOURS

Monday - Friday 8am - 5pm

We are always available to answer questions or concerns! If you have a need outside of your scheduled appointment, please give us a call at the office or message us on the patient portal during normal business hours.



CONTACT

Phone: (757)466-6350 Fax: (757)466-9262 www.thegroupforwomen.com

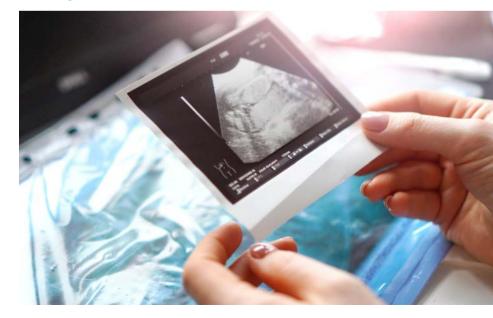
CONGRATULATIONS ON YOUR PREGNANCY!

Dear Patient,

It is a pleasure to have you as an obstetrical patient with The Group for Women. We look forward to taking care of you and helping you and your family to have a healthy and well-informed pregnancy experience. We have developed a comprehensive program of prenatal care which incorporates all of the techniques of modern obstetrical medicine to ensure you health and the well-being of your baby without losing respect and attention for each individual patient's needs. Likewise we support the current philosophies of natural childbirth and family-centered birthing, and we strive to make your delivery a satisfying and safe event.

Should problems or questions arise, the staff of The Groups for Women will be available at all times to assist in an appropriate fashion. We look forward to taking care of you and we hope you will find this experience pleasurable and meaningful.

Sincerely,



Physicians of The Group for Women

MEET Your team



Holly Puritz MD, FACOG



Martha Fernandez MD, FACOG



Denise Harris-Proctor MD, FACOG



Zach Wohlgemuth MD



Mehdi Parva MD, FACOG



Giniene Pirkle MD, FACOG



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Alexa Pascioni MD



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Katie Rapp CNM-BC

The Group for Women's physicians and certified nurse mid-wives participate in the Virginia Birth- Related Neurological Injury Compensation program. For more information visit https://www.vabirthinjury.com

PRENATAL VISIT Schedule

Prenatal care is very important to keep you and your baby as healthy as possible. It is very important that you keep your scheduled appointments.



1-32 weeks we will see you in the office every four weeks.

- 6-8 weeks we will complete an ultrasound to confirm your due date, draw prenatal labs, and complete other required testing.
- 10-16 weeks we will listen to baby's heart beat and draw labs for genetic testing
- 20 weeks a detailed ultrasound that examines all systems and body parts of your baby. Gender can also be seen at this scan. If you DO NOT want to know your baby's gender please let us know
- 28 weeks 1 hr glucose test to screen for gestational diabetes & your t-dap vaccine

32-26 weeks we will see you in the office every two weeks

- 32–34 weeks we will listen to baby's heart beat
- 36 weeks we will do GBS screening

36+ weeks we will see you in the office weekly until delivery

• 38 weeks we can check you cervix to see your cervical status

This schedule may be altered if your provider needs to see you more frequently. Please feel free to ask any questions that concern you!



During the first trimester your body undergoes many changes. Hormonal changes affect almost every organ system in your body. These changes can trigger symptoms even in the very first weeks of pregnancy. Your period stopping is a clear sign that you are pregnant.

Other changes may include:

- Extreme tiredness
- Tender, swollen breasts. Your nipples might also stick out.
- Upset stomach with or without throwing up (morning sickness)
- Cravings or distaste for certain foods
- Mood swings
- Constipation (trouble having bowel movements)
- Need to pass urine more often
- Headache
- Heartburn
- Weight gain or loss

As your body changes, you might need to make changes to your daily routine, such as going to bed earlier or eating frequent, small meals. Fortunately, most of these discomforts will go away as your pregnancy progresses. And some women might not feel any discomfort at all! If you have been pregnant before, you might feel differently this time around. Just as each woman is different, so is each pregnancy.

Second Trimester (week 13–week 28)

Most women find the second trimester of pregnancy easier than the first. But it is just as important to stay informed about your pregnancy during these months. You might notice that symptoms like nausea and fatigue are going away. But other new, more noticeable changes to your body are now happening. Your abdomen will expand as the baby continues to grow. And before this trimester is over, you will feel your baby beginning to move!

As your body changes to make room for your growing baby, you may have:

- Body aches, such as back, abdomen, groin, or thigh pain
- Stretch marks on your abdomen, breasts, thighs, or buttocks
- Darkening of the skin around your nipples
- A line on the skin running from belly button to pubic hairline
- Patches of darker skin, usually over the cheeks, forehead, nose, or upper lip. Patches often match on both sides of the face. This is sometimes called the mask of pregnancy.
- Numb or tingling hands, called carpal tunnel syndrome
- Itching on the abdomen, palms, and soles of the feet. (*Call your doctor if you have nausea, loss of appetite, vomiting, jaundice or fatigue combined with itching. These can be signs of a serious liver problem.*)
- Swelling of the ankles, fingers, and face. (If you notice any sudden or extreme swelling or if you gain a lot of weight really quickly, call your doctor right away. This could be a sign of preeclampsia.)



You're in the home stretch! Some of the same discomforts you had in your second trimester will continue. Plus, many women find breathing difficult and notice they have to go to the bathroom even more often. This is because the baby is getting bigger and it is putting more pressure on your organs. Don't worry, your baby is fine and these problems will lessen once you give birth.

Some new body changes you might notice in the third trimester include:

- Shortness of breath
- Heartburn
- Swelling of the ankles, fingers, and face. (If you notice any sudden or extreme swelling or if you gain a lot of weight really quickly, call your doctor right away. This could be a sign of preeclampsia.)
- Hemorrhoids
- Tender breasts, which may leak a watery pre-milk called colostrum (kuh-LOSS-struhm)
- Your belly button may stick out
- Trouble sleeping
- The baby "dropping", or moving lower in your abdomen
- Contractions, which can be a sign of real or false labor

As you near your due date, your cervix becomes thinner and softer (called effacing). This is a normal, natural process that helps the birth canal (vagina) to open during the birthing process. Your doctor will check your progress with a vaginal exam as you near your due date. Get excited — the final countdown has begun!



- 01. Eating a Balanced Diet
- 02. Drinking 640z of Water a Day
- 03. Exercising Daily
- 04. Getting Enough Sleep
- 05. Practicing Stress Management

1 Eating a Balanced Diet

Eating well is one of the best things you can do during pregnancy. Good nutrition helps you handle the extra demands on your body throughout your pregnancy. The goal is to balance getting enough nutrients to support the growth of your baby and maintain a healthy weight.

The popular saying is that pregnant women "eat for two," but now we know that it's dangerous to eat twice your usual amount of food during pregnancy. Instead of "eating for two," think of it as eating twice as healthy. If you are pregnant with one baby, you need an **extra 340 calories per day** starting in the second trimester (and a bit more in the third trimester). That's roughly the calorie count of a glass of skim milk and half a sandwich. Women carrying twins should consume about 600 extra calories a day, and women carrying triplets should take in 900 extra calories a day.

A great resource for healthy foods and meal ideas is the U.S. Department of Agriculture's MyPlate food planning guide. MyPlate shows you the foods and the amounts that you should eat each day during each trimester of your pregnancy. Please scan the QR Code below to be taken to the website, you can also download the MyPlate app to your phone.







Making sure you are getting enough water during pregnancy is very important. You want to drink consistently throughout the day, not just when you are thirsty. You should **aim to drink 8 to 12 cups (64–960z) of water** every day. If you're making frequent trips to the restroom, your urine is light yellow or colorless, you're doing a great job at staying hydrated!

Water has many benefits for you and for baby. It carries nutrients, aids in digestion as well as flushes out waste and toxins from the body. It helps form the amniotic fluid around your growing baby, helps produce extra blood, and builds new tissue.

There are many benefits to staying hydrated during pregnancy:

- Decreases constipation/hemorrhoids
- Reduces swelling
- Softens skin
- Increases energy
- Keeps you cooler
- Decreases risk of urinary tract infections
- Decreases risk of preterm labor and preterm birth

If you have a hard time drinking just water, here are a few tips to help keep your intake up. 1.Add fruits such as lemons, limes, and frozen raspberries to your water.

2.Increase your fruit and vegetable intake (they have water, too!).

3. Milk, juice, sparkling water, tea, and soups all count as water or fluid intake.

3 Exercising Daily

Regular exercise during pregnancy is beneficial to your and your baby. It is safe to continue or start regular physical activity. Physical activity does not increase your risk of miscarriage, low birth weight, or early delivery. However, it is important to discuss exercise with your provider during your early prenatal visits. If your provider gives you the OK to exercise, you can discuss what activities you can do safely.

What are the benefits of exercise during pregnancy?

- Reduces back pain
- Eases constipation
- May decrease your risk of gestational diabetes, preeclampsia, and cesarean delivery
- Promotes healthy weight gain during pregnancy
- Improves your overall general fitness and strengthens your heart and blood vessels
- Helps you to lose the baby weight after your baby is born

Ideally, you should get **at least 150 minutes** of moderate-intensity aerobic activity every week. An aerobic activity is one in which you move large muscles of the body (like those in the legs and arms) in a rhythmic way. Moderate intensity means you are moving enough to raise your heart rate and start sweating. You still can talk normally, but you cannot sing. Examples of moderate-intensity aerobic activity include brisk walking and general gardening (raking, weeding, or digging). You can divide the 150 minutes into 30-minute workouts on 5 days of the week or into smaller 10-minute workouts throughout each day. If you are new to exercise, start out slowly and gradually increase your activity. Begin with as little as 5 minutes a day. Add 5 minutes each week until you can stay active for 30 minutes a day. If you were very active before pregnancy, you can keep doing the same workouts with your obstetrician's approval.

4 Getting Enough Sleep

Sleep is a key part of staying healthy - especially when you're pregnant!

Sleep plays a major role in memory, learning, appetite, mood, and decision-making – all very important parts of your every day life. The amount of sleep you get while you're pregnant not only affects you and your baby, but could impact your labor and delivery as well. When you become pregnant, one of the first symptoms you may notice is being overwhelmingly tired, even exhausted. Sleep will be irresistible to you. According to the National Sleep Foundation, the amount of sleep necessary for good health varies by age, however it is recommended to get between **7 and 9 hours of sleep** each day during pregnancy.

Sleep hygiene is more important than ever during pregnancy. In addition to pregnancy sleep aids such as specialized pillows or eye masks, the following habits may help reduce insomnia and improve overall sleep quality:

- Keep a cool, dark, quiet bedroom and limit the bed to sleeping and sex
- Prioritize sleep and stick to a consistent bedtime, scheduling naps earlier in the day so they don't interfere with nighttime sleep
- Read a book, take a bath, or indulge in another calming activity in preparation for bedtime
- Use a nightlight to make it easier to get back to sleep after bathroom breaks
- Avoid caffeine, spicy foods, and heavy meals too close to bedtime to reduce the risk of GERD
- Avoid taking technology into the bedroom, and turn off screens at least an hour before bed
- Get regular exercise earlier in the day
- Drink plenty of water throughout the day, but reduce liquid intake before bed to reduce nighttime bathroom
- breaks
- If you can't sleep, get out of bed and do something else until you feel sleepy
- Write down thoughts in your journal, or seek help from your partner, friends, doctor, or childbirth classes if you're feeling stressed

5 Practicing Stress Management

Preparing for baby, navigating pregnancy, and even just life in general can all add stress to your day. Yet when it comes to staying healthy, managing your daily stress is just as important as eating well and exercising. Stress management can also help you toward your specific pregnancy, labor, and birth needs and goals-from pain relief in labor to fighting for every extra week of your pregnancy.

Here are some good building blocks to get you started:

- Talk to you provider about your pregnancy discomforts and know they are temporary.
- Eat healthy foods, get plenty of sleep and exercise (with your provider's OK).
- Cut back on activities you don't need to do or ask your partner to help with chores.
- Try relaxation activities, like prenatal yoga or meditation.
- Take a childbirth education class so you know what to expect during pregnancy and when your baby arrives. Practice the breathing and relaxation methods you learn in your class.
- If you're working, plan ahead to help you and your employer get ready for your time away from work. Use any time off you may have to get extra time to relax.

The people around you may help with stress relief too. Here are some ways to reduce stress with the help of others:

- Have a good support network, which may include your partner, family and friends. Or ask your provider about resources in the community that may be helpful.
- Figure out what's making you stressed and talk to your support network about it
- If you think you may have depression or anxiety talk to your provider right away.
- Ask for help from people you trust. Accept help when they offer. For example, you may need help cleaning the house, or you may want someone to go with you to your prenatal visits.

Emergencies arise all the time and you may be unsure what to do. Our triage team is available to answer your questions from 8am to 5pm. The team is comprised of nurses that are an extension of your provider's team and available during operating hours when your providers and their nurses are seeing patients in office.

When calling in an emergency, please tell the operator that you would like to speak to someone in triage and you will be transferred directly to a triage nurse. For non-emergencies, your call may be transferred to our voicemail system if a triage nurse is not available. Please be as detailed as you can when leaving a message be sure to include your name, date of birth, and a good call back number. If you are calling for prescriptions please call your pharmacy first and they will contact us. If you are calling for test results, we will need your name, date of birth, type of test, date performed, and a good call back number.

We always want to be available to assist you, every effort is made to return calls within 24hours. If you need to reach us outside of the standard office hours, we do have an on call answering service that will assist you with getting in touch with our on-call physician. To reach our answering service dial our main number, (757) 466-6350. In the event that our phone lines are down or if you are unable to get through from our main number please use their direct number at 1-800-815-0976.

URGENT MATERNAL WARNING SIGNS



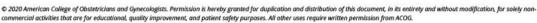
If you have any of these symptoms during or after pregnancy, contact your health care provider and get help right away.

If you can't reach your provider, go to the emergency room. Remember to say that you're pregnant or have been pregnant within the last year.



to learn more

Learn more: safehealthcareforeverywoman.org/urgentmaternalwarningsigns



Standardization of health care processes and reduced variation has been shown to improve outcomes and quality of care. The Council on Patient Safety in Women's Health Care disseminates patient safety tools to help facilitate the standardization process. This tool reflects emerging clinical, scientific, and patient safety advances as of the date issued and is subject to change. The information should not be construed as dictating an exclusive course of treatment or procedure to be followed. Although the components of a particular tool may be adapted to local resources, standardization within an institution is strongly encouraged.

The Council on Patient Safety in Women's Health Care is a broad consortium of organizations across the spectrum of women's health for the promotion of safe health care for every woman.



No one knows exactly when they will go into labor. The average length of pregnancy is 280 days, or 40 weeks. Most women give birth between 38 and 41 weeks of pregnancy. The more you know about what to expect during labor, the better prepared you will be once it begins.

Certain changes may signal that labor is beginning. These changes include:

- *Lightening* baby has dropped and no longer pressing on your diaphragm.
- *Loss of the mucus plug* You may notice an increase in vaginal discharge that is clear, pink, or slightly bloody.
- *Rupture of membranes "water breaking"* You may feel this as fluid that trickles or gushes from your vagina.
- *Contractions* As your uterus contracts, you may feel pain in your back or pelvis. This pain may be similar to menstrual cramps. Labor contractions happen in a regular pattern and get closer together over time

You might or might not notice some of these changes before labor begins. If you think you are in labor (or are not sure), call our office and speak to a triage nurse or if after hours leave a message for the on-call physician. You should go to the hospital if you have any of these signs:

- Your water has broken and you are not having contractions.
- You are bleeding heavily from the vagina.
- You have constant, severe pain with no relief between contractions.
- You notice the fetus is moving less often.

We are excited to partner with Sentara Leigh Hospital. Please scan the QR Code below to visit the hospital website for more information and to take a virtual tour!





Postpartum

The postpartum period can be a time of mixed emotions and a time of physical changes. Before your baby is born, take time to build a postpartum care team. These are the people who will support you and your baby in your first months together. These people can include friends, family, your provider, your pediatrician, and other professionals. No matter how your labor and delivery go, your body will need time to heal after giving birth so do not rush back into your normal routine use your postpartum care team during this time.

There are many ways to control pain, including self-help treatments, over-the-counter medications, and prescription medications. Talk with your obstetrician-gynecologist (ob-gyn) about your options for pain relief before you leave the hospital. Here are some common postpartum symptoms that are normal but call if severe or persist.

- Normal Vaginal bleeding
- Normal Cramping
- Pain in your back, neck, or joints
- Pain in your perineum (the area between your vagina and anus)
- Pain around your incision (if you had a cesarean birth)
- Swollen breasts
- Bladder problems
- Bowel problems
- Hemorrhoids

Postpartum depression can occur up to 1 year after having a baby, but it most commonly starts about 1–3 weeks after childbirth. Women with postpartum depression have intense feelings of sadness, anxiety, or despair that prevent them from being able to do their daily tasks. If you think you may have postpartum depression, or if your partner or family members are concerned that you do, it is important to see your obstetrician–gynecologist (ob-gyn) or other health care professional as soon as possible. Do not wait until your postpartum checkup!





Maggie Lane SE Virginia: Chesapeake, Virginia Beach, Norfolk, Portsmouth, Suffolk Counties 757-932-1565 TEXT OR CALL maggielanepsi@gmail.com

As always, if you need direct support or find yourself overwhelmed, please call or text the PSVa warm line for virtual support at 703-829-7152.

POSTPARTUM ____EXERCISES

There can never be one exercise program that is perfect for everyone...the following exercises can be used as guidelines- make them easier if they seem too difficult – ramp them up if they feel too easy. But no matter what – take the time to learn how to correctly contract and engage your abdominal muscles. This can help prevent pelvic floor prolapse and lower back pain. It does not take long to do these exercises...and while your are doing these exercises you can let this be your baby's "belly time"- so important for normal development! If you have had a C-section delivery wait until your health care provider gives you the OK to start these exercises.

Finding your TA (Transversus abdominus)- Lie on your back with your hands gently resting on your belly. Gently inhale through your nose and then as you exhale through your mouth gently draw in your belly. (sometimes it helps to say "Hah"). Repeat this until it feels natural and you can feel the lower abdomen draw inward with your exhalation. With every exercise you should always feel the belly draw in- you never want to feel the muscles dome out.





Imprinting (This is a Pilates technique)- Taking this a step further- with your next exhale think of sliding your ribcage downward towards your waist- you may feel the lower back move towards the floor- but do not do a full pelvic tilt. Hold this imprinted position as you inhale. Exhale and then relax. See if you can repeat and hold the contraction as you breathe in and out 5 times. Repeat this for 5 cycles. This exercise can be started immediately post-partum.

The Hundreds (This is a Pilates technique) – Start with the imprint as above and maintain throughout exercise. Inhale to prepare and as you exhale raise left leg to a 90/90 position. Inhale and with next exhale raise right leg. With your next exhale tuck chin and lift head. Hold this position as you pulse the arms up and down in a small arc. Inhale for 5 arm movements and exhale for 5 arm movements for up to 5 breaths. (can build up to this). On 5th exhale lower legs down. Repeat 3 times.



POSTPARTUM EXERCISES____



The Plank - Start on hands and knees. Draw the belly up and in (use imprint) and come in to a high push-up position. Keep the imprint as you breath in and out for 5 slow breaths. Relax back to hands and knees position. Repeat 5 times. Can make this more difficult by lifting one leg at a time approx. 3" off ground- lengthen the leg to the back wall as you lift. Hold this for 5 breaths and then repeat for opposite side.

Taking Your Exercises Upright

Let's face it- we use our core mainly in the upright position- so it is imperative that you strengthen it in standing as well. For the exercise below you will utilize a pelvic brace. A pelvic brace is an exercise that combines the pelvic floor contraction (aka Kegel) with the cinch of the tranverse abdominus (TA) (lower belly muscle).

The Pelvic Brace (standing) -

Standing with a ball, towel roll or yoga block (4-6" wide) between your upper thighs. Gently contract your inner thighs as you feel a zip-like lift in your belly and pelvic floor. Holding this contraction take 2 -3 slow breaths in and out. It is very important not to hold your breath. Repeat 5 times- 3-4 times a day.





The Pelvic Brace Squat - Standing with feet wide and slightly turned out. As you exhale cinch your waist (lift and zip) as you lower into a squat. Repeat 10 times- focusing your exhale with the cinch of your belly. Can hold your baby for extra resistance!!

PREGNANCY SAFE MEDICATIONS

<u>Allergy Medications</u>

- Allergy Shots
- Benadryl
- Claritin
- Claritin D
- Zyrtec

Cold Medications

- Chloraseptic throat spray
- Coricidin HBP
- Coricidin HBP Night Time
- Mucinex Plain
- Robitussin Plain (alcohol free)
- Sudafed
- Tylenol Sinus Allergy

Cough Medications

- Any Cough Drops
- Mucinex DM
- Robitussin DM

Headache Medications

• Tylenol (Regular or Extra Strength)

<u>Sleep Medications</u>

- Benadryl
- Unisom

Other Medications

- Insect Repellent
- Sunblock

Indigestion Medications

- Mylanta
- Maalox
- Pepcid
- Tagamet
- Tums
- Zantac

Nausea Medications

- B6
- Emetrol
- Ginger Products
- Unisom

Diarrhea Medications

- Imodium
- Kaopectate

Constipation Medications

- Metamucil
- FiberCon
- Colace/Peri-Colace
- MiraLax

Yeast Infection Medications

- Clotrimazole
- Monistat (3 day)

VACCINES DURING _____PREGNANCY

Immunization is an essential part of care for adults, including pregnant women. Vaccines provide maternal protection from severe morbidity related to specific pathogens such as pneumococcus, meningococcus, and hepatitis for at-risk pregnant women. There is no evidence of adverse fetal effects from vaccinating pregnant women with inactivated virus, bacterial vaccines, or toxoids, and a growing body of data demonstrate the safety of such use. OBGYN and other OB care providers should routinely assess their pregnant patients' vaccination status. Based on this assessment they should recommend and, when possible, administer needed vaccines to their pregnant patients.

> <u>Recommended</u> <u>during every</u> <u>pregnancy</u>

Influenza

- Tdap
- Covid-19

<u>May be given during</u> <u>pregnancy in certain</u> <u>populations</u>

- Pneumococcal
- Meningococcal
- Meningococcal Serogroup B
- Hepatitis A
- Hepatitis B

<u>Not recommended</u> <u>during pregnancy</u>

- Measles, Mumps, Rubella
- Varicella

RESOURCES

WIC – WIC gives healthy foods to pregnant moms, babies and growing children. WIC supports breastfeeding moms. Contact your local WIC department or ask for help from your Medial Outreach Representative.

VDH Car Seat Safety Program – For car seat safety or to obtain a car seat from the Virginia Department of Health visit http://www.vdh.virginia.gov or call 1-800-732- 8333.

Text4Baby – Sign up for Text4Baby and you will receive free text messages throughout your pregnancy and your baby's first year. Topics include prenatal care, baby, health parenting and more.

Sentara Breastfeeding Hotline - For information on breastfeeding or help from a lactation specialist call (757) 388-MILK (757-388-6455).

Aeroflow Breastpump - Sign up for your free breast pump through insurance at www.aeroflowbrestpumps.com

Online Childbirth Class by BabyCenter - Learn the signs and stages of labor, explore ways to manage your pain, discover the keys to a positive birth, and much more. https://www.babycenter.com/pregnancy/birth-class

Virginia Child Care - Learn more about the benefits of choosing a licensed provider, as well as tips to help find the right child care provider for you, by visiting www.childcareva.com

CHKD Medical Group - With more than 120 CHKD pediatricians from Elizabeth City to Williamsburg, you're sure to find the right doctor for your new baby. Visit CHKD.org/Pediatricians to learn more

Enfamil - Whether you plan to feed your baby breast milk, infant formula, or both, Enfamil is dedicated to helping you at each stage of your baby's development. Scan Me Visit https://www.enfamil.com/baby-feeding-guide/ for more information or scan the QR code.



