

Congratulations On Your Pregnancy!

We are honored that you have chosen us to care for you during your pregnancy. This can be an exciting, and sometimes apprehensive time in your life. We will do our best to guide you through this monumental time to achieve the healthiest pregnancy possible. Our ultimate goal is for a healthy baby, healthy mom.

We encourage you to ask many questions. Bring in a list to your office visits if necessary. Listed below is a list of contact numbers. If you have a question or concern about anything related to your pregnancy or health, don't be afraid to call. Our nurses are well versed in answering the routine questions relating to pregnancy. If the nurse does not know the answer to the question, then a physician will be notified of the question. If a problem arises after office hours, please call your physician's exchange number. **This is an emergency contact number.**

We have enclosed a copy of the "Obstetric Visit Outline." This is a guideline as to what to expect at each visit. In general, we see you every 4 weeks until 28 weeks of pregnancy. We then see you every 2 weeks until 36 weeks of pregnancy and then weekly thereafter. We may ask to see you on a more frequent basis if there are any other medical concerns.

After the 8 week visit, a representative from our office will contact you in regards to insurance coverage and payment plans. Every insurance plan is different, so payment plans can be tailored to meet your financial situation. Our goal is to have anticipated balances paid by the end of the 7th month of pregnancy. If the cost of your care is less than what was paid, you will be issued a reimbursement from the office following your delivery.

Contact Information

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Do's and Don'ts of Pregnancy

Alcohol

There is no safe limit of alcohol in pregnancy. Complete avoidance is best.

Caffeine

Although most studies show that caffeine intake in moderation is OK, there are others that show that caffeine intake may be related to miscarriage. If a person decides to consume caffeine, it should be limited to fewer than 200mg per day during pregnancy. (A cup of brewed coffee has approximately 100mg of caffeine while a can of soda has about 50 mg.)

Cheese

Unpasteurized cheeses and deli meats can carry *Listeria*, a bacteria that can cause miscarriage or fetal infection. While this is uncommon in our country it is wise to avoid unpasteurized products. If it doesn't say "pasteurized" on the label, don't eat it.

Cat Care

Outdoor cats can be exposed to Toxoplasmosis and can pass this parasite to humans through the feces. One could acquire it through changing the litter box of an infected cat. If your cat goes outside it would be wise to have someone else clean the litter box (darn) or make sure to wear gloves and wash your hands well. If your cat only lives inside and eats processed cat food he/she cannot get the disease. Cuddling your cat is safe and will not expose you to the disease. Dogs are not affected.

Dentist

Routine dental work is safe in pregnancy and you are encouraged to keep up with your normal dental health routine. If more extensive dental work is needed your dentist may require a letter from us saying it is safe – contact the office if needed.

Exercise

Staying active is great for you and the baby. If you have an uncomplicated pregnancy you can continue your current exercise regimen with a few modifications. When doing cardiovascular exercise (walking, running, elliptical etc) a good guideline is to keep your heart rate at a maximum of 140-150 beats per minute. If you are working out with weights, modify your exercises so that you will not be lying flat on your back after 12-15 weeks. Routine exercise is a good way to prevent excessive weight gain, reduce stress, and keep the physical strength necessary to deliver and take care of a new baby.

Fish

While most fish are rich in omega 3's and safe and encouraged during pregnancy some accumulate high levels of mercury which could be considered unsafe. The FDA recommends avoiding shark, tilefish, swordfish, and mackerel. Shellfish, shrimp and smaller fish such as snapper, catfish, and salmon are lower in mercury and up to 12 ounces a week is recommended. Canned tuna is low in mercury and can be included in

the 12 ounces a week. Tuna steak is higher in mercury than canned and should be limited to 6 ounces a week. Raw fish such as sushi should not be consumed in pregnancy.

Hair Color

Hair color is safe during pregnancy. The portion of hair that is outside the scalp is dead tissue and does not absorb anything into the bloodstream.

Hot Tubs and Saunas

Exposure to very high temperatures (more than 103 degrees F) for long periods of time in baths, hot tubs, or saunas can increase the risk of spina bifida in the first two months of pregnancy. Normal temperature baths are safe and can be very relaxing.

Intercourse

Sex is safe in pregnancy unless you have complications such as bleeding, preterm contractions, a low lying or placenta previa. While sex may induce mild contractions, it will not make an otherwise healthy pregnant woman go into premature labor.

Painting

Painting with latex-based paints is acceptable. Try to maintain good ventilation in the room while you are painting.

Smoking

As always – smoking is highly discouraged during pregnancy and after. Smoking in pregnancy can lead to lower birth weight babies, high blood pressure, premature separation of the placenta (abruption) and fetal death. There are multiple ways to help you quit and we will be more than happy to help you.

Tanning

Tanning bed use is not considered safe during pregnancy.

Travel

Travel is usually safe during pregnancy. Whether you are traveling by car or plane, it is important to get up and walk about every three hours to prevent a blood clot from developing in your leg. Compression stockings or TED hose can be purchased at a pharmacy or by prescription. Always know where the closest hospital is to your final destination in case medical attention is needed. Please notify your healthcare provider of any big trips you are planning. A copy of your prenatal labs will be provided for you to travel with. We do not advise airplane travel after 32 weeks.

Obstetric Visit Outline

Initial Visit (~ 6 weeks)

- Establish due date
- Perform ultrasound
- May draw bloodwork to determine pregnancy hormone value or progesterone level
- Discuss prenatal vitamins / medications

2 weeks after: Follow-up OB Visit

- Possible repeat ultrasound if dating is questionable
- Discuss pregnancy expectations
- Order your prenatal panel (blood draw)- Complete blood count, rubella titers, HIV status, Hepatitis B status, blood type, antibody screen, syphilis screen, thyroid screen, Chlamydia and Gonorrhea cultures and a urine culture
- Complete physical exam
- Pap smear if your yearly screening is due
- Conduct a comprehensive pregnancy and family history. It would be wise to gather information regarding your family history from a reliable member if you don't know.
- Discuss Down Syndrome screen and well as other common genetic carrier screens (Cystic fibrosis, Fragile X, Spinal Muscular Atrophy, and screening specifically for patients of Ashkenazi Jewish descent)

Early pregnancy through 28 weeks: Visits will be approximately every 4 weeks

From 30-36 weeks: Visits will be every 2 weeks

36 weeks until delivery: Visits will be weekly

Post-Partum Visit: 6 weeks following vaginal delivery

2 weeks and 6 weeks following cesarean delivery

Milestones and Testing

- We generally can not hear the fetal heartbeat until after 10-12 weeks
- Cervical exams begin around 35-36 weeks for most women

First Look (Nuchal Translucency + blood test): 11 – 14 weeks

This is the first time Down Syndrome and Trisomy 18 screening can be offered. The screen consists of a vaginal ultrasound that evaluates the thickness of the baby's neck. A measurement greater than the average can be associated with babies that have abnormal chromosomes. A finger-prick blood stick is also performed at this time to evaluate 2 different hormone values. All information is then sent off to an independent laboratory and a risk

assessment is given for chances of having a baby with Down Syndrome or Trisomy 18. This is an **optional screen**. If the screen is reported as "increased risk," we will refer you for genetic counseling as well as a level II ultrasound. At this time, you will be given the option for an amniocentesis after risks and benefits are discussed. An amniocentesis is when a needle is placed into the fluid surrounding the baby and collected. This fluid contains fetal cells and the genetic make-up of the baby can be determined. The First Look has a 5% false positive rate by itself (reported as increased risk when there is not a problem).

Insurance may or may not pay for this screen depending on maternal age, history or insurance coverage. If interested in this screen, double check with your insurance for coverage.

Quad Screen: 16 - 20 weeks

The quad screen is an optional blood test. This blood test is a screening test used to determine your baby's risk of having Downs Syndrome, Trisomy 18, or neural tube defects (when the spine does not close properly). If this test returns as abnormal it does not necessarily mean your baby has that disorder. The "Quad Screen" has a 5% false positive rate by itself (reported as increased risk when there is not a problem). If the screen is reported as "increased risk," we will refer you for genetic counseling as well as a level II ultrasound. At this time, you will be given the option for an amniocentesis after risks and benefits are discussed. An amniocentesis is when a needle is placed into the fluid surrounding the baby and collected. This fluid contains fetal cells and the genetic make-up of the baby can be determined.

Insurance usually will cover this screen regardless of age or medical history.

Diagnostic Ultrasound: 18 - 20 weeks

This is typically known as your "big" ultrasound. We will confirm your dating and very carefully look at the structures and size of the baby. If you do not wish to know the sex of your baby, please let the sonographer know. While ultrasounds can detect abnormal anatomy, it is not 100%. Your doctor will review the results of your ultrasound with you at your visit.

If you are going to be over 35 years old at the time of delivery, you have the option to have a "comprehensive ultrasound" by a perinatologist in a perinatal center instead of an office ultrasound.

3-D Ultrasound: Ideally around 30 weeks

Modern technology has allowed enormous developments in the area of ultrasound. Our office is able to provide you with a 3D ultrasound at your request. This is however not a substitute for your routine ultrasound done at 20 weeks. This ultrasound does not check for anatomical abnormalities of the baby and is not generally covered by insurance. Patients wishing to have a 3-D ultrasound, will be charged \$125, as this is not a medically indicated ultrasound. The optimal time for the ultrasound is approximately 30 weeks.

Gestational Diabetes Screen: 26-30 weeks

Everyone is screened for gestational diabetes in pregnancy. You will be given a bottle of sweet liquid and directions at your 24 week visit. Follow these directions for your next office visit. If your test is abnormal you will be required to return for a three-hour test.

Rhogam: Typically around 28 weeks

If your blood type is Rh negative you will be given a prescription for Rhogam to have filled and bring to the office with you at your 28-week visit. This will help protect the baby if his/her blood type happens to be Rh positive. The baby's blood will be drawn from the umbilical cord at delivery to determine his/her blood type. If he/she is negative like you, you will not receive any more Rhogam. If the baby is positive you will receive another dose prior to your discharge. **If you have any bleeding earlier than 28 weeks of pregnancy, please notify our office. You will need RhoGam earlier than 28 weeks if you have a negative blood type.**

Group B Strep: 35-36 weeks

This is a simple cotton swab culture at the edge of the vagina. Group B Strep is a normal bacteria for up to one third of women. It is not an infection for you but if exposed the baby could suffer from a severe bacterial infection. If your Group B Strep is positive you will be given antibiotics at the time of labor.

Safe Over the Counter Medications in Pregnancy

Although you should try to minimize medication during your pregnancy, sometimes it is necessary for your health and comfort to take some type of medication. This list includes medicines that are considered safe for limited use during pregnancy. If you are concerned or your symptoms worsen please call the office during normal business hours. Utilize the after hours exchange for emergencies only. If you think you are needing a prescription when you call please be sure to have your pharmacy number immediately available.

Cold/Flu/Allergies

Always check over-the-counter cold medications for alcohol, sugar, caffeine, or aspirin. Medications should be taken as directed and for no longer than seven days. If symptoms persist, call our office. If you develop a fever over 101.0 call the office.

- Benadryl (tablet, capsule, and liquid form), Benadryl Plus
- Chlor-Trimeton, Chlor-Trimeton LA
- Claritin or Zyrtec
- Flonase
- Comtrex
- Robitussin DM
- Sudafed (tablet and liquid form) – do not take if you have high blood pressure
- Throat lozenges
- Triaminic, Triaminic Nite Lite, Triaminic PM, Triaminic 12 Hour
- Tylenol Sinus
- Nasopure Sinus Lavage or netipots

Constipation

- Colace 50mg (one or two, twice daily)
- Dulcolax (oral or suppositories)
- Fibercon
- Metamucil
- Milk of Magnesia
- Miralax
- Fleets Enema

Other helpful suggestions:

- Increase water intake to 8-10 eight-ounce glasses daily
- Eat plenty of fresh fruits, green leafy vegetables, and fiber
- Get adequate exercise; walking is a good exercise during pregnancy

Hemorrhoids

- Keep stools as soft as possible

- Sitz baths
- Preparation H
- Tucks
- Anusol

Diarrhea

If diarrhea is accompanied by fever, weakness or dizziness, please call the office. If symptoms are not improved in 2-3 days, contact our office.

- Immodium AD (use no longer than 48 hours and no more than four caplets or 8 teaspoons in a 24-hour period)
- Kaopectate
- BRAT diet – bananas, rice, applesauce, tea or toast

Aches/Pains

- Tylenol, Extra Strength Tylenol, or generic acetaminophen

Heartburn/Indigestion/Upset Stomach

- Mylicon
- Maalox
- Mylanta
- Rolaids
- Gas-X
- Tums

If you find the above do not suffice you may try over the counter

- Pepcid (20-40 mg daily)
- Zantac (75 to 150 mg daily)

Nausea/Morning Sickness

If you are unable to keep liquids down for more than one day or you have symptoms of weakness or dizziness, call the office.

- Vitamin B6 (25-50mg up to 4x/day as needed)

Other helpful suggestions:

- Small frequent meals
- 8-10 eight-ounce glasses of water a day

Headaches

Call the office if you are experiencing the worst headache of your life, the pain is not getting better or you have concurrent symptoms on vision changes or dizziness.

- Tylenol or Extra Strength Tylenol (do not exceed 4 grams in 24 hours)

Nose Bleeds

- Ocean Spray – nasal spray
- Afr gel

Leg Cramps

Call the office if pain and swelling is isolated in one leg.

- Oscal 500mg twice a day (or similar over the counter calcium)
- Maginex for leg cramps

Yeast Infections

- Monistat
- Gyne-Iotrimin

Insomnia (difficulty sleeping)

- Benedryl
- Tylenol PM
- Unisom