



Kaiser Permanente

healthy beginnings

PRENATAL NEWSLETTER

► TODAY'S APPOINTMENT

Today, your practitioner will review your prenatal chart with you, including your medical history, physical exam, and lab test results. If this is your first visit, your practitioner will review your health history questionnaire and do a complete physical exam, including an ultrasound. This exam and ultrasound will determine your due date or estimated delivery date (EDD) and how far along you are in your pregnancy. You may also get a pelvic exam and a Pap test if you did not have one before.

► NEXT APPOINTMENT

Date: _____ Time: _____

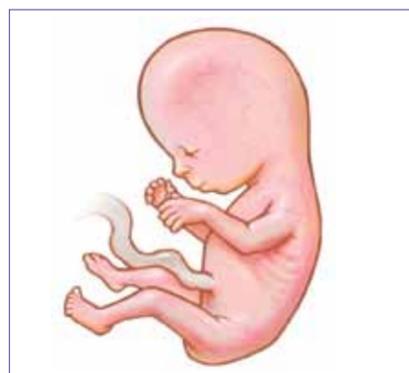
Day: _____

Practitioner: _____

Notes: _____

Please arrive for your appointment on time. If you need to cancel, call at least 24 hours in advance.

► Your baby: at 12 weeks



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Near the end of your first trimester of pregnancy (at 12 weeks), your baby is about 3 inches long and weighs about 1/2 to 1 ounce. The head is quite large compared to the rest of your baby's body—about one-half of the total length. The brain and spinal cord are developing rapidly. Sex organs are developing (testicles on a boy and ovaries in a girl), although they cannot be seen yet. Your baby can squint, frown, open and shut its mouth, turn its head, make a fist, and kick. Amniotic fluid (the bag of waters) cushions your baby and allows it to move around easily, but you cannot feel these movements yet.

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Now that the placenta has formed (inside the uterus), blood is circulating to and from the mother through the baby's umbilical cord. It is possible to hear the baby's heartbeat as early as week 12 of pregnancy. Your practitioner will listen to your baby's heartbeat with a doppler, which is a highly sensitive ultrasound device. When this device is held on your abdomen, your baby's heartbeat can be heard. A fast or slow heart rate does not mean that your baby is a girl or a boy. The baby's heart rate is faster when the baby moves and slower when the baby rests.

► Your next prenatal appointment and tests

FUTURE VISITS

The rest of your individual medical appointments will be much shorter than today's visit. At each clinic appointment, your practitioner will:

- Check your blood pressure and weight.
- Check your urine specimen.
- Check your baby's growth by measuring the size of your abdomen (starting at about 20 weeks).
- Listen to your baby's heartbeat.

It's a good idea to bring a list of your questions to each visit and to take notes so you'll remember what you talked about.

NEXT PRENATAL APPOINTMENT

Once you've had your physical exam, your next visit will be scheduled to take place between weeks 16 and 20 of pregnancy. At this visit, you'll receive an ultrasound or possibly an appointment for an ultrasound. You'll also receive your final lab slip for screening (if you're having a screening test).

► Prenatal testing for birth defects

Your practitioner will offer you a choice of prenatal tests to look for certain birth defects. This testing is optional.

There are two types of testing available: screening tests and diagnostic procedures. Screening tests can help identify women who may be at higher risk for having a baby with certain birth defects. Screening tests cannot tell for certain if a baby actually has a birth defect. Diagnostic procedures are able to accurately diagnose certain birth defects, but have a small risk for miscarriage related to the procedure.

The decision about prenatal testing for birth defects is yours. You may choose to have a screening test before deciding whether you want a diagnostic procedure. Or you may choose to have a diagnostic procedure without having a screening test first. You can also choose not to have any prenatal testing for birth defects at all.

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▶ PARTNER'S CORNER

You're encouraged to be actively involved in your partner's pregnancy. It's great to share the joys and concerns of pregnancy with your partner during the entire process.

- If possible, go to prenatal appointments with your partner. It helps to write these dates in your calendar (especially towards the end of the pregnancy, when the visits occur every few weeks).
- Tell your partner if you're feeling left out during these visits. It can help if you spend time together each night to talk about your daily experiences, including what you notice about the pregnancy.
- Listen to the baby's heartbeat in the doctor's office. Hearing your baby makes the pregnancy more "real."
- Tell your partner about your feelings and ask her about her feelings, too. Don't withdraw when you're feeling bad.
- Talk about your partner's weight and appearance in a positive way.

TAKE CARE OF YOURSELF

Your emotions will probably go through many changes during the pregnancy. Find time to take care of yourself and let off steam.

- Take a walk or drive by yourself.
- Exercise or do something else you enjoy.
- Spend time with a friend.
- Talk to new parents about their experiences.
- If you feel very angry, upset, or sad for more than a week, ask your practitioner to refer you to a counselor.



▶ Safer sex for you and your partner

- You can protect yourself and your partner by using condoms and oral dams (latex squares used for oral-vaginal and oral-anal sex).
- Remember to continue to practice safer sex to prevent the spread of HIV (the virus that causes AIDS) and other sexually transmitted diseases (STDs).
- STDs can be present without symptoms, but if you have symptoms they may include: sores, bumps, or blisters near your penis, vagina, rectum, or mouth; burning or pain when you urinate; and itching or swelling around your genitals.
- If you have any of these symptoms, avoid having sex until you see a practitioner and get tested.
- You can get tested for HIV and other STDs even without symptoms. Talk to your practitioner about getting tested.

▶ Staying healthy during pregnancy and beyond

Being well-nourished during pregnancy means more than just choosing the right amounts from each food group. It's also important to choose certain types of foods in each group to get the vitamins and minerals that you and your baby need. Pregnancy increases your need for calories, protein, vitamins, and minerals.

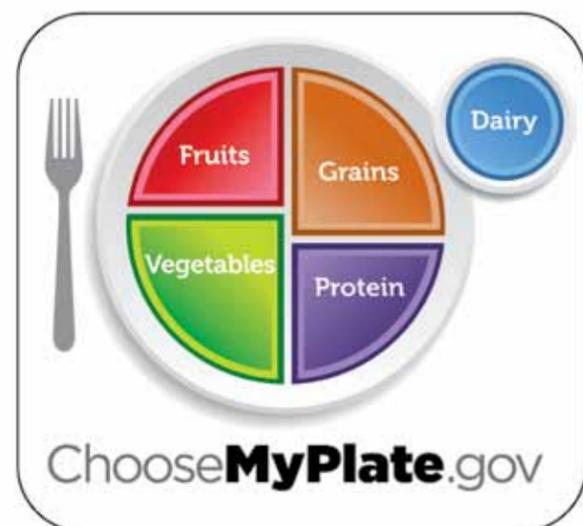
Choose foods from the list of calcium-rich foods, iron-rich foods, and folate-rich foods listed in *Healthy Beginnings*, Issue 1. A diet based on the "MyPlate" guide to food choices can help you meet these needs. Try to eat the daily recommended amounts from each group to help ensure a healthy pregnancy. It's up to you to make good food choices for you and your baby.



MyPlate

A guide to daily food choices

Source: U.S. Department of Agriculture (choosemyplate.gov)



BALANCING CALORIES

- Enjoy your food, but eat less.
- Avoid oversized portions.

FOODS TO INCREASE

- Make half your plate fruits and vegetables.
- Make at least half your grains whole grains.
- Switch to fat-free or low-fat (1 percent) milk.

FOODS TO REDUCE

- Compare sodium in foods like soup, bread, and frozen meals—and choose the foods with lower numbers.
- Drink water instead of sugary drinks.

When you call your practitioner



PLEASE BE READY TO PROVIDE:

- Your name.
- Your Kaiser Permanente health or medical record number.
- Your practitioner's name.
- Your due date.

CALL NOW IF YOU HAVE:

- Any vaginal bleeding or blood clots (clumps of blood).
- Abdominal or pelvic pain, other than mild cramping.
- Pain or fever with vomiting more than 2 to 3 times a day or that lasts more than an hour.
- Fever (temperature of 100.4° or greater).
- Pain with urination.

► What you can do about common discomforts

APPETITE CHANGES

You may be very hungry or you may find it hard to eat much at all; both are normal. Be sure to choose quality “baby-building” foods. Cut down on sweets like candy, cakes, donuts, and other high-fat, empty-calorie foods. At this point, a healthy weight gain is about ½ pound per week. The recommended amount of weight you should gain throughout your entire pregnancy is about 25 to 35 pounds. This varies depending upon your weight before you became pregnant. Read “Nutrition and Pregnancy” in *Healthy Beginnings*, Issue 1, and see “The food pyramid” on the opposite page for tips on eating well. Ask your practitioner for help if you think you’re gaining too much weight or too little weight.

FEELING TIRED

Your body is working hard throughout your pregnancy. If you feel tired, that’s your body’s way of telling you to slow down. Don’t ignore your need for extra rest and sleep. You’ll find your energy returning during the middle months of pregnancy (the second trimester).

ROLLER-COASTER EMOTIONS

Pregnancy can be an emotional roller-coaster for some. You’re not alone if you have mood swings, cry quickly, feel easily annoyed, or feel disorganized and have trouble concentrating.

Accept your feelings and share them with someone who cares. Talk to your practitioner if you need help coping with your feelings.

DIZZINESS AND FAINTING

Women often feel dizzy when they’re pregnant, but dizzy spells should lessen or disappear as your blood supply increases to meet the baby’s growing needs. If you feel faint, try these suggestions:

- Sit down immediately and put your head down, as low as possible, between your legs.
- If you can’t sit, kneel down and bend your head down, as if you were going to tie your shoelace.
- Lie down and keep your legs higher than your head (use pillows to prop your feet up).

To reduce the likelihood of feeling dizzy, try these suggestions:

- Stand up slowly. Move slowly, especially when changing from a lying or sitting position.
- Eat frequently to ensure that your blood sugar stays constant and you don’t feel lightheaded or faint. Eat healthy snacks like fruits, vegetables, whole wheat bread, or crackers.
- Drink plenty of fluids, especially water.
- If you sit in the sun, wear a hat.
- Avoid closed-in spaces and get plenty of fresh air.
- Fainting is rare. Be sure to report fainting. If you fall to the ground or hit an object, you’ll need to be examined right away.

HEADACHES

Lie down and relax if possible. Put a cool cloth on your head and neck and ask your partner to give you a neck and shoulder massage.

Don’t take aspirin, ibuprofen (such as Advil and Motrin), or migraine medication while you’re pregnant unless directed by your practitioner.

Call your practitioner if:

- You have severe headaches after week 20 of pregnancy.
- You have headaches along with muscle weakness, visual disturbance, or fever.
- Acetaminophen (such as Tylenol) doesn’t help your headache.

STUFFY NOSE AND NOSEBLEEDS

You may have a stuffy nose, fluid dripping into your throat (post-nasal drip), or frequent sinus headaches. Increased hormones make the mucous membranes inside your nose and sinuses swell. The tiny blood vessels in your nose have more blood while you’re pregnant. They can break with the slightest strain or no pressure at all. You can even get nosebleeds from blowing your nose too hard. This will get better after your baby is born. In the meantime:

- Try using saline nose sprays to moisten dry nasal passages.
- Try a small dab of Vaseline in each nostril and a cool mist vaporizer to help control your stuffy nose and nosebleeds.
- Don’t use a nasal decongestant spray, which can actually make stuffiness worse.
- Don’t use any drugs (except for the natural remedies and safe over-the-counter medications listed in *Healthy Beginnings*, Issue 1) without asking your practitioner first.

Call your practitioner if:

- You can’t control the bleeding from a nosebleed or if the bleeding gets too heavy.

BLEEDING GUMS

Bleeding gums are common during pregnancy.

- Try switching to a soft toothbrush, floss gently, and use a mild toothpaste.
- See a dentist for a checkup early in pregnancy. Report any painful or swollen gums.
- Most dental care can be safely performed during pregnancy, but be sure to tell your dentist you’re pregnant. Getting your teeth cleaned can help if you’re experiencing bleeding gums.

VAGINAL DISCHARGE

Whitish vaginal discharge is normal throughout pregnancy. You can also get yeast infections that come back (or don’t go away easily). You can treat the yeast infection and itching with over-the-counter drugs that don’t require a prescription.

- Monistat or Gyne-Lotrimin (7-day treatment) will treat a yeast infection. Make sure to follow the instructions.
- 1% hydrocortisone cream can calm vaginal itching or burning. (The cream should not be used inside the vagina.)
- Wear cotton underwear and keep them clean and dry.
- Wash thoroughly during baths or showers, but avoid strong soaps. Remember that baths should be warm but not too hot.
- Don’t douche or use soap inside the vagina.
- Avoid sweets and sodas. They encourage yeast to grow.
- Let your provider know if your yeast infection does not go away after treatment.

► You and your baby have the right to be safe

If someone is hurting you, making you feel afraid, making threats, putting you down, or pushing or hitting you, it’s not right and it’s not your fault! Abuse occurs when someone attacks you with words, objects, hands, or fists. Abuse usually happens when one person tries to control another person.

- If you’re having problems with someone who threatens or hurts you, tell your practitioner. You and your baby can be helped.
- Remember: It’s not your fault, no matter what anyone tells you. Nobody deserves to be abused.
- You need to take care of yourself because if you are hurt, your baby is affected.

You’re not alone. Help is available. In an emergency, call the police, your local domestic violence hotline, or a women’s shelter in your community.

If someone has hurt you before, it may happen again while you’re pregnant or after the baby is born. Sometimes abuse starts when you become pregnant.

HAVE A SAFETY NET

- Talk to someone you trust about what’s going on.
- Call the police in an emergency.
- Keep a set of car keys and money stashed where only you can find them.
- Keep important papers (like birth certificates, photo ID, and checkbook) in a safe place.
- Get the phone number of your local domestic violence hotline and keep it for an emergency. You can find the number from the National Domestic Violence Hotline at ndvh.org or 1-800-799-7233. If you need to talk or if you need help, you can call the National Domestic Violence Hotline 24 hours a day. The hotline has counselors who speak English, Spanish, and other languages, and can give you information about local resources. For more information, visit kp.org/domesticviolence.

► Care of your breasts during pregnancy

BREAST CHANGES

Your breasts will continue to grow throughout your pregnancy and may feel tender when touched. This tenderness should decrease after the third or fourth month. The area around the nipples (the areola) will get darker, and the bumps on the areola (Montgomery glands) and the veins in your breasts will become more visible. These changes are preparing your body for breastfeeding and will likely disappear after childbirth and breastfeeding. Wearing a good supportive bra during pregnancy helps you stay comfortable and protects the breast tissue from over-stretching. No special preparation is needed to “toughen” your nipples. During your hospital stay, your nurse or a certified lactation consultant will assist you with the proper position and “latch-on” for breastfeeding. This will increase your confidence and will help to reduce any nipple soreness that you might experience as your baby and you adjust to breastfeeding.



► Breastfeeding

While you’re pregnant, you can decide how you will feed your new baby after his or her birth. Your team at Kaiser Permanente recommends that you exclusively breastfeed your baby (giving only breast milk) for the first 6 months of life, and continue breastfeeding for at least the first year of life.

After a year, you may breastfeed for as long as both you and your baby would like to continue. Breastfeeding benefits both baby and mom. It may take some time for your body to get into a rhythm, so be patient and persistent. Breastfeeding is a learned skill. It takes practice!

BREASTFEEDING IS GOOD FOR BABY AND MOM

Breastfeeding creates a very unique bond between mother and baby. Breast milk is the perfect food for babies and cannot be equaled by any formula.

- Breast milk is the easiest food for new babies to digest.
- Unlike formula, which can cost \$1,000 to \$2,000 for a year’s supply, breast milk is basically free—a big plus for a new family’s budget.
- Breast milk is the best food for your baby and provides all the nutrition your baby needs for the first 6 months of life.
- Breastfeeding is good for the environment.

The longer you breastfeed, the greater the benefits will be for you and your baby.

BENEFITS FOR BABY

- Breast milk contains antibodies, special substances made by the mother’s immune system, that help a baby fight infection while the baby starts making his or her own antibodies.
- Because of these antibodies, breastfed babies are less likely to develop ear infections, colds, diarrhea, and pneumonia.
- Breastfed babies are also less likely to develop diabetes, obesity, and heart disease at any time in their life.

- Breastfed babies are less likely to develop asthma and allergies or have less severe symptoms than formula-fed babies.
- Overall, breastfed babies are healthier than formula-fed babies. They are sick less often and hospitalized less often.
- Breastfeeding lowers the risk of Sudden Infant Death Syndrome (SIDS).

BENEFITS FOR MOM

- A mother who breastfeeds may bleed less after giving birth, and her uterus will shrink back into shape faster.
- A breastfeeding mother may lose weight more quickly than a mother who bottle-feeds because she uses calories while breastfeeding.
- A mother who breastfeeds reduces her own risk of getting breast cancer and ovarian cancer. She is also less likely to develop diabetes and osteoporosis (bone loss that occurs in older women) than a mother who bottle-feeds.

BREASTFEEDING RESOURCES

Our Health Education Center has many videos and books to help you learn about breastfeeding. Some facilities have a special class for pregnant women (and partners) who are interested in breastfeeding, and/or breastfeeding centers with lactation consultants. Please call or drop by your local Health Education Center or visit lalecheleague.org for more information.

SOME GOOD BOOKS ON BREASTFEEDING

- *The Nursing Mother’s Companion* by Kathleen Huggins (Harvard Common Press, revised 2005).
- *Breastfeeding Pure & Simple* by Gwen Gotsch (La Leche League International, revised 2000).

► Prenatal testing for birth defects

(continued from page 1)

WHEN TESTING IS DONE			
SCREENING	First trimester blood test	NT ultrasound (if performed)	Second trimester blood test (Quad testing)
Timing is approximate. Check with your OB for the best timing in your pregnancy.	10 weeks to 13 weeks 6 days	11 weeks 2 days to 14 weeks	15 weeks to 20 weeks
DIAGNOSTIC PROCEDURES	Chorionic Villus Sampling (CVS)	Amniocentesis	
	10 weeks to 13 weeks 6 days	15 weeks to 20 weeks	

For more information about prenatal testing, see *Healthy Beginnings Newsletter*, Issue 1.

The information in *Healthy Beginnings* is not intended to diagnose health problems or to take the place of medical advice or care you receive from your practitioner. If you have persistent health problems, or if you have further questions, please consult your practitioner. If you have questions or need additional information about your medication, please speak to your pharmacist. Kaiser Permanente does not endorse the medications or products mentioned. Any trade names listed are for easy identification only.