




Metropolitan
OB.GYN

PRENATAL PACKET

"Serving women of all nations with excellence and compassion."

Your Prenatal Journey

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 metroobgynnj.com





FOR EMERGENCIES:

Please call
(973) 313- 2501
and then press “1”
day or night.

If your call is not
returned within 15
minutes, please
call again or go to
Overlook Medical
Center or the
nearest ER if you
are not in the state

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WELCOME! 02

Dr. Parchment and the Metropolitan OB/GYN Team
Welcome you on your exciting prenatal journey!
We are here ready and prepared to serve you!

PLEASE VISIT OUR WEBSITE: www.metroobgynnj.com
for additional information and resources.

We admit only Overlook Medical Center
99 Beauvoir Ave, Summit, N.J. 07901
Visit: www.atlantichealth.org/Overlook

PRENATAL CARE OVERVIEW:

Your due date is established from your last menstrual period and/or based on your first-trimester ultrasound.

Your prenatal visit schedule is as follows:

Every 4 weeks until 28 weeks

Every 2 weeks until 36 weeks

Every week until delivery

More visits may be scheduled if medically necessary.
Your first prenatal visit was quite comprehensive!
We reviewed your medical history, performed blood work, and shared a large amount of information. In this packet, you will find a summary of what can be expected in each trimester, as well as further information regarding your pregnancy.

Prenatal classes and Breastfeeding support groups are available at Overlook Medical Center.



First TRIMESTER

03



Baby is just beginning to form! The baby's food source, known as the placenta, develops, and as early as 6 weeks, a heartbeat can be detected by ultrasound. By the end of the first trimester, all of your baby's major organs have taken shape. All the fetal development can cause some unwanted complaints such as nausea, headaches, and fatigue. We recommend small, frequent meals throughout the day.

APPOINTMENT MILESTONES:

- Viability ultrasound prior to the initial visit
- Initial blood work



1. Total blood count (to check for anemia)
2. Screening for STDs (Hepatitis B, Gonorrhea and Chlamydia, HIV, Syphilis)
3. Blood type
4. Urine screen for infection
5. Metabolic panel and hgA1c to screen for diabetes
6. Hemoglobin electrophoresis (to screen for sickle cell trait and other inherited blood abnormalities)
7. Genetic Carrier Screening

- Prenatal vitamins
- Nuchal translucency ultrasound to measure fluid behind the baby's neck (12-14 weeks)
- Noninvasive genetic testing with consent form (10+ weeks) to screen for Down syndrome, trisomy 18 and trisomy 13. Most of the time this test tells us the baby's gender
- Depending on your risk factors, and "early glucola" test for diabetes may be necessary



Second TRIMESTER

04



You will likely start feeling the baby move around 18-22 weeks!

A common complaint in the second trimester is round ligament pain. This pain is described as a jabbing, sharp pain, or slow ache to the groin area and lower abdomen. A lot is going on inside your body, and this is a sign of your uterus stretching to accommodate your growing baby. A heating pad and exercise may help relieve the discomfort.

APPOINTMENT MILESTONES:

- Blood work AFP (screen for spina bifida (15-21 weeks))
- Anatomy ultrasound (19-21 weeks)

Third TRIMESTER



The baby is growing big and strong in the third trimester! You may notice more rapid weight gain - do not be alarmed. If there is an issue with your weight gain, it will be addressed with a provider.

A common concern in the third trimester is known as **Braxton Hicks contractions**. These are often referred to as "false labor." You may feel a tightening of your uterine muscles. The cramping is often irregular, every 10-20 minutes, and may go away with walking and drinking fluids.

APPOINTMENT MILESTONES:

- Glucose test to screen for gestational diabetes (26-28 weeks) if you do not have diabetes
- Group B Strep and STD cultures, HIV test, and growth ultrasound (36 weeks)
- Additional ultrasounds are recommended if there is a concern about your baby's growth, placenta location and if you pass your due date



DIET IN PREGNANCY



05

The recommended weight gain for the pregnancy depends on your starting BMI (Body Mass Index). For women (carrying one child) who are of average weight, 25-30 lbs are recommended. Underweight women should gain 35 lbs and overweight women should gain less: 10-15 lbs.

FOODS TO AVOID IN PREGNANCY

For more information, please go to the following websites:

- <https://www.foodsafety.gov/people-at-risk/pregnant-women>
- <https://www.fda.gov/media/129959/download>

1. Soft CHEESE made from UNPASTEURIZED milk.
2. Raw EGGS such as in cookie dough and cake batter; cook eggs until yolks are firm.
3. FISH with high levels of MERCURY such as shark, swordfish, and tilefish - limit consumption of albacore tuna to 6oz per week.
4. RAW or undercooked FISH (including shellfish)
5. UNPASTEURIZED JUICE, cider, or MILK
6. RAW or undercooked SPROUTS such as alfalfa, clover, mung bean, and radish
7. ALCOHOL consumption in pregnancy can lead to severe complications.

FOODS TO BE CAREFUL WITHIN PREGNANCY

1. HOTDOGS, COLD CUTS, DRY SAUSAGE - reheat to steaming hot or 165 degrees Fahrenheit prior to consumption.
2. MEAT products should be cooked well-done.
3. SMOKED seafood - avoid refrigerated versions unless cooked to 165 degrees Fahrenheit.
4. COFFEE - you may consume up to two 8oz cups of coffee daily.





EXERCISE 06

IN PREGNANCY

Exercise is encouraged in pregnancy unless you are specifically advised not to do so by a medical provider. We recommend 30 minutes of moderate exercise 3 times per week.

BREASTFEEDING

The American Academy of Pediatrics recommends exclusive breastfeeding for the first 6 months of a child's life. After 6 months, you will introduce foods into your baby's diet, and the recommendation is to continue breastfeeding as long as it is desired by both mother and baby. Breast milk contains all the necessary nutrients for your baby in the first 6 months of life.

Breastfeeding may not come easy to every mother and infant. It takes practice and patience on behalf of both mother and infant. In the beginning, you may experience painful and sore breasts and nipples. With time, this will resolve, and in a few weeks, this will likely become a natural and easy method to feed your newborn.

If you need more assistance, you may find a breastfeeding specialist helpful. While you may need to pay out of pocket for most breastfeeding specialists, some insurance companies will reimburse you for all or a portion of the cost. Overlook Medical Center has a FREE lactation in-person support group on Tuesdays, registration is not required.

Not every mother is able to breastfeed. This does not make you any less of a mother and "FED IS BEST"!

SIGNS OF LABOR

How do you know you are in labor?

Labor the hard work that your body does to birth your baby. The mouth of your womb (the cervix) needs to open to 10 cm for you to give birth vaginally. Once fully dilated, you will push your baby out into the world.

Early labor contractions feel like menstrual-type cramps for most women, or sometimes as an intense backache. They start slowly and get progressively longer, closer together, and more intense.



SIGNS OF LABOR

07

DEFINITE SIGNS OF LABOR:

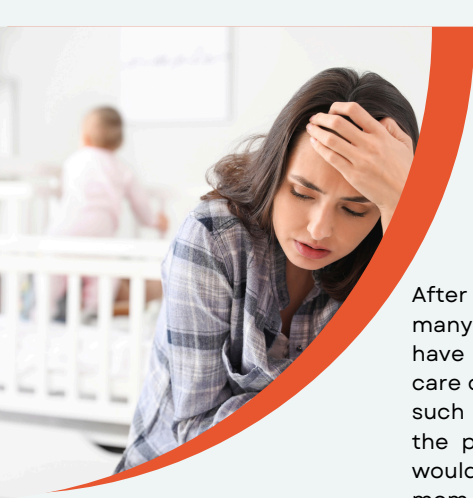
1. Your contractions are getting more intense, are lasting longer, and are getting closer together.
2. Your contractions are not going away after many hours despite changes in position.

PLEASE CALL THE OFFICE:

1. If your water breaks, please call immediately.
2. Your water breaks and the color is greenish-brown (the baby may have passed meconium) – this may indicate a problem, and you should call us immediately.
3. If this is your first pregnancy and your contractions occur every 5 minutes or less and last a full minute for 1 hour.
4. If this is your second or more pregnancy and your contractions are progressively getting stronger and more painful.
5. Your contractions become so painful that you cannot walk or talk.
6. You have vaginal bleeding that soaks your underwear.
7. You are less than 37 weeks and feel your labor has started.
8. Your baby is moving less than usual or not at all.
9. You have a medical or obstetric condition that warrants you to call sooner as instructed by a medical provider.

ADDITIONAL RESOURCES AVAILABLE UPON REQUEST:

- PEDIATRICIAN LIST
- BREASTFEEDING SPECIALIST
- DOULAS AND CHILDBIRTH EDUCATORS
- BREAST PUMP INFORMATION: usually free through your insurance plan every 2-3 years. Applications are at the front desk
- WIC Forms are available at the front desk



PERINATAL 08 MOOD DISORDER

After giving birth, your body and mind go through many changes. Your hormones are on fire, and you have this new life that you are responsible to take care of. You may have thought that you would be on such a natural high after meeting your baby that all the positive emotions of happiness, joy, and love would come naturally. This does not occur for every mom.

If two weeks after giving birth you feel sad and are fit with frequent crying spells, you are not alone. One in nine mothers will experience postpartum mood disorder.

The following are some signs that you may have a perinatal mood disorder:

- Persistent sad, anxious, or "empty" mood
- Irritability
- Feelings of guilt, worthlessness, hopelessness, or helplessness
- Loss of interest or pleasure in hobbies and activities
- Fatigue or abnormal decrease in energy
- Feeling restless or having trouble sitting still
- Difficulty concentrating, remembering, or making decisions.
- Difficulty sleeping (even when the baby is sleeping), awakening early in the morning, or oversleeping.
- Abnormal appetite, weight changes, or both
- Aches or pains, headaches, cramps, or digestive problems that do not have a clear physical cause or do not ease even with treatment.
- Trouble bonding or forming an emotional attachment with the new baby.
- Persistent doubts about the ability to care for the new baby.
- Thoughts about death, suicide, or harming oneself or the baby – Immediately go to the nearest Emergency Department

If you have any concerns, please reach out to our office to make sure you have the support you need.

If you need immediate assistance, please reach out to one of the following:



National Suicide Prevention Lifeline 1-800-273-8255

Suicide Prevention Hotline 1-800- 784-2433

National Postpartum Depression Warmline: 1-800-773-6667



FREQUENTLY 09 ASKED QUESTIONS

1. Are there any vaccinations recommended in pregnancy?

It is recommended that pregnant women receive the **Tdap & RSV vaccines** every pregnancy after 28 weeks to allow the antibodies to cross the placenta and protect the baby when it is born. The **Influenza & COVID-19** vaccines are recommended in pregnancy.

2. Are there any vaccinations you recommend family members receive before my baby is born?

Yes, we recommend all family members with close contact with the newborn receive the flu and the Tdap vaccines. Adults need the flu vaccine every year and the Tdap vaccine every 10 years.

3. How long until I can have sex after giving birth?

Generally, you are cleared to have intercourse as early as 6 weeks postpartum (after the office visit).

4. How long until I can drive after giving birth?

You may drive immediately after a vaginal delivery. For an uncomplicated cesarean section, you may drive 2-3 weeks after your cesarean section if you are no longer on narcotic pain medication.



SAFE OVER THE COUNTER MEDICATIONS IN PREGNANCY



	MEDICATIONS	LIFESTYLE CHANGES
Allergies	<ol style="list-style-type: none"> 1. Benadryl (Diphenhydramine) 2. Claritin 3. Zyrtec. 	Avoid aggravating factors.
Back Pain	Tylenol (650mg every 6 hours)	<ol style="list-style-type: none"> 1. A heating pad or ice pack 2. Massage 3. Acupuncture 4. Chiropractor 5. Maternity belt 6. Shoes with arch support 7. Sleep with a pillow between legs
Bloating	Gas-X (simethicone)	Avoid gas-causing foods
Cold Symptoms	Sudafed (pseudoephedrine) - AFTER FIRST 12 WEEKS	<ol style="list-style-type: none"> 1. Saline nasal spray 2. Vicks (mentholated) 3. Humidifier 4. Hydration!
Constipation	<ol style="list-style-type: none"> 1. Colace (docusate sodium) 2. Senokot, Dulcolax, Metamucil, Fibercon, Citrucel, Konsyl 3. Milk of magnesia 4. Fleets enema 5. Glycerin suppository 	<ol style="list-style-type: none"> 1. Increase fluid intake 2. Prunes, prune juice, pears 3. Exercise
Cough	<ol style="list-style-type: none"> 1. Robitussin D.M. 2. Dextromethorphan 	
Diarrhea	<ol style="list-style-type: none"> 1. Immodium A.D. 2. Kaopectate (NO PEPTO - BISMOL)	<ol style="list-style-type: none"> 1. Best to let run its course. 2. Clear liquid diet 24-48 hours then increase to BRAT diet (banana, rice, apple, toast)
Fever (>100.4 F)	Tylenol	Adequate hydration & call the office
Gas	<ol style="list-style-type: none"> 1. Gas X - max 6 in 24 hours 2. Mylicon 80 - max 6 in 24 hours 	

SAFE OVER THE COUNTER MEDICATIONS IN PREGNANCY

	MEDICATIONS	LIFESTYLE CHANGES
Headache	Tylenol 650mg every 6 hours	<ol style="list-style-type: none"> 1. Adequate hydration 2. Stress reduction. 3. Acupuncture 4. Chiropractor 5. Does not resolve with Tylenol you MUST call the office
Heart burn	<ol style="list-style-type: none"> 1. Rolaids - max 24 in 24 hours 2. Tums - max 16 in 24 hours 3. Maalox - 2-4 teaspoons 4 times per day, best 20 min to 1 hr post-meal and at bedtime 4. Pepcid - 2x daily 	<ol style="list-style-type: none"> 1. Frequent, small meals 2. Decrease fat intake 3. Wait 30 minutes before lying down after eating 4. Pineapple, papaya, raw almonds
Hemorrhoids	<ol style="list-style-type: none"> 1. Preparation H 2. Anusol HC 3. Tucks 4. Colace (docusate sodium) 100mg 3x/day 	<ol style="list-style-type: none"> 1. Avoid straining by increasing fiber and fluids 2. Sitz bath
Insomnia	<ol style="list-style-type: none"> 1. Benadryl 2. Unisom (doxylamine succinate) 	<ol style="list-style-type: none"> 1. Warm baths 2. Essential oils 3. Daily exercise 4. Avoid caffeine
Leg Cramps	<ol style="list-style-type: none"> 1. Calcium 1000mg at bedtime 2. Magnesium 400mg daily 	<ol style="list-style-type: none"> 1. Flex the foot and elevate when cramping 2. Increase fluids
Ligament Pain	Tylenol	Maternity belt
Nausea / Vomiting	Unisom (doxylamine succinate) 25mg at bedtime AND vitamin b6 25 mg three times daily	<ol style="list-style-type: none"> 1. Peppermint/ginger 2. Sea bands for acupressure 3. Small, frequent meals
Nosebleed	Saline nasal spray	Humidifier
Sore Throat	<ol style="list-style-type: none"> 1. Tylenol 2. Throat lozenges 	<ol style="list-style-type: none"> 1. Saline gargle 2. Adequate hydration
Yeast Infection	<ol style="list-style-type: none"> 1. Monistat 2. Mycelex 7 (do not use before 13 weeks) 3. Gyne-Lotrimin (do not use before 13 weeks) 	



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