



Comprehensive Women's Care *of Paramus*

Pregnancy Information Packet

2 Sears Drive Suite 104

Paramus, NJ 07652

201-262-0075 *FOR AFTER HOURS EMERGENCIES DIAL 9*

Congratulations on your pregnancy!

In the event of any motor vehicle accident, fall, abdominal trauma, severe pain, decreased fetal movement, leaking of fluid, regular contractions, or vaginal bleeding - call the office and go to the hospital immediately.

Do not hesitate to call our office with any questions. In the event of an emergency, please call our office regardless of time, weekend, or holiday - one of our staff is always on call to speak with you over the phone. Follow the prompts for after hours, so that you can be directed to the appropriate hospital. 201-262-0075 *dial 9 for emergencies after hours*

IMPORTANT: Before your first OB visit, you are strongly encouraged to call your insurance regarding your coverage. This is also a good time to ask questions regarding your deductible, coinsurance, maternity coverage and hospital network participation. You must tell us which lab your insurance prefers if you want to have maximum coverage.

There is a LabCorp phlebotomist in the office for patient convenience, however if your insurance prefers a different lab we can accommodate that as well. Occasionally labs may be drawn and sent to our In-House lab. If your insurance offers coverage through LabCorp, we will draw your blood in the office during your visit provided it is within LabCorp's available hours, if insurance prefers a different lab, we will give you a script to go to a lab for your blood work after your visit.

Basics

Hospital Affiliations

Dr. Craig B. Wiener is on staff at Hackensack Meridian Health Pascack Valley Medical Center in Westwood, New Jersey and Hackensack University Medical Center in Hackensack, New Jersey. If you go to another hospital for an ER visit or delivery, he may not be able to manage your care.

Hackensack Meridian Health Pascack Valley Medical Center

250 OLD HOOK RD, WESTWOOD, NJ 07675 - EAST ENTRANCE

(p): 201-383-1035

www.pascackmedicalcenter.com

Pre-Registration: <https://www.pascackmedicalcenter.com/services/maternity>

Hackensack University Medical Center

30 PROSPECT AVENUE, HACKENSACK, NJ 07601

(p): 551-996-2000

www.hackensackmeridianhealth.org

Useful links

Comprehensive Women's Care of Paramus <https://www.womenscareparamus.com/>

ACOG (American College of Obstetrics and Gynecology): www.ACOG.org

FAQ regarding routine labs in pregnancy: <https://www.acog.org/womens-health/faqs/routine-tests-during-pregnancy>

AIUM (American Institute of Ultrasound in Medicine): www.AIUM.com

Lactation Help (LactMed): <https://wicworks.fns.usda.gov/resources/lactmed>

Kellymom (Mom Blog): www.KellyMom.com

CDC (Center for Disease Control): www.CDC.gov

La Leche League International: www.llli.org

Count the Kicks: www.countthekicks.org

Quest: www.questdiagnostics.com

LabCorp: www.labcorp.com

Invitae: www.Invitae.com/en/pregnancy

SMFM (Society for Maternal Fetal Medicine): www.SMFM.org

What To Expect Week By Week (routine pregnancy)

The following schedule follows the ACOG standard of care. Your care will be customized to your needs. You may incur a copay for any visit outside of “routine”

At every visit:

- Please collect a urine sample to check for protein, glucose, and ketones.
- Fetal heart rate (FHR), blood pressure (B/P), and maternal weight assessed at each visit

Viability (6-8 weeks from date of Last Menstrual Period (LMP)):

- Blood draw to check the progesterone and HCG (quantitative) levels as well as blood group and RH
- Possible ultrasound to confirm dates

OB Intake (12-13 weeks from LMP):

- Intake visit with detailed medical history and paperwork
- Nuchal translucency ultrasound checking for anatomically visible neural tube defect in the baby
- Routine Blood work: CBC, Type and Screen, Rubella Immunity, RPR (syphilis), Hepatitis Panel, HIV, Hemoglobin Electrophoresis, Urine Culture, Gonorrhea, Chlamydia, Vitamin D, and NIPS (Noninvasive Prenatal Screening). If medically indicated, genetic carrier screening (if not done in prior pregnancy), TSH, A1c, and Progesterone

15-20 Weeks:

- Second trimester genetic screen - msAFP (16 weeks)
 - Maternal Serum Alpha-fetoprotein (msAFP) screens for neural tube defect such as spina bifida
- Fetal anatomy ultrasound (20 weeks)
 - We recommend eating and adequate hydration prior to the ultrasound
- You may find out the sex of the baby if you haven't already

Glucose test (24-28 Weeks):

- 1 hour glucose tolerance test to screen for gestational diabetes (blood work)
 - We recommend a light breakfast (light carbs, light sugar, heavy protein) 2-3 hours before coming in
- Repeat CBC, RPR, HIV and antibody screen (if indicated) blood work
- 3 hour glucose test if the 1 hour glucose test was abnormal (requires fasting)
- Rhogam injection if indicated for RH negative patients
 - We recommend husband's blood type to be checked

32-36 Weeks: (visits every 2 weeks)

- Possible fetal monitoring by ultrasound for fetal weight and position, if indicated
- Group Beta Strep (GBS) vaginal culture
- Tdap vaccine offered, FLU & RSV vaccine offered seasonally
- Discuss signs and symptoms of preterm labor, pain management in labor, circumcision, and options for feeding

36-40 Weeks: (visits weekly)

- Sign consent forms for delivery
- If indicated, you can expect to discuss scheduling your c-section during this time

FETAL KICK COUNTS/MINDFULNESS

You will begin to feel your baby move sometime between 18-25 weeks of pregnancy. You will get to know your baby's movements and when they are most active. Starting around 28 weeks, you can count fetal movements to assess fetal well-being. **Fetal monitoring is the single most important measurement of fetal well-being.** Start by finding a comfortable position during the time of day when your baby is most active. It is recommended that you feel 10 movements (kicks, flutters, swishes, or rolls) within about 2 hours. If your baby does not meet this goal, try again in a few hours after eating or drinking. If your baby still does not move 10 times in about 2 hours, call our office. Monitoring fetal movement is a great way to begin the bonding process. For more information on fetal movements, visit www.countthekicks.org

GROUP BETA STREP (GBS)

Group B streptococcus (GBS) is one of the many types of bacteria that live in the human body and usually does not cause serious illness. It can be found in the reproductive tracts of men and women. GBS is not a sexually transmitted infection. If you are planning on a vaginal delivery, you will be tested in the 3rd trimester of pregnancy to see if your vagina is colonized with GBS. If you are positive, there is a potential risk of passing GBS to the baby during delivery. Therefore, if you test positive, you will be treated with antibiotics in labor to minimize risk to the baby. About 1 in 4 women will be positive for GBS in the vagina or rectum during pregnancy.

UMBILICAL CORD AND/OR CORD BLOOD BANKING

Cord blood is the blood from the baby that is left in the umbilical cord and placenta after birth. It contains stem cells that can be used to treat certain types of diseases that may occur later in life. You have the option of banking your baby's cord tissue/cord blood for future use. Please talk with one of your providers and see the CBR insert for more information.

Discomforts During Pregnancy

NAUSEA AND VOMITING - "Morning Sickness"

- Eat small frequent meals every 2 hours
- Eat dry crackers or toast before getting up in the morning
- Avoid brushing teeth immediately after eating
- Avoid eating or preparing food with strong or offensive odors
- Decrease fats in diet (fat decreases gastric emptying)
- You can try ginger candies or vitamin B6 lollipops for relief as well
- Severe cases of hyperemesis may benefit from IV hydration
- Certain supplements like B6 and can be especially helpful. Discuss these and medication options.

HEARTBURN

- Consume small, frequent meals, eaten slowly to avoid overfilling the stomach
- Avoid food that triggers symptoms: greasy/fried foods, coffee, citrus, soda, and tea
- Avoid lying down within 3 hours after eating (A semi-reclined position is okay)
- Elevate head of the bed by 10 to 30 degrees
- Avoid over the counter remedies unless recommended by your provider

ROUND LIGAMENT PAIN

- Pelvic exercises, positions that place less tension on the round ligament
- Avoid crossing your legs, lie on your side, and use a heating pad for relief

DYSPAREUNIA (painful intercourse)

- Vaginal sensitivity and vascular engorgement may cause dyspareunia
- Simple positional changes to alleviate problems that are caused by enlarged abdomen or pain from deep penetration
- Changes in sexual technique that will bring greater comfort and pleasure

LEG CRAMPS

- Gentle stretch of the affected leg and dorsiflex ankle
- For a foot cramp, stand on the affected foot
- For a calf cramp, straighten knee, pull foot toward head then relax, repeat if necessary
- For a cramp in the front of the thigh, stretch leg backward
- For a cramp in the buttock, stretch leg forward
- Magnesium supplement 350-400 mg at bedtime
- If the area is hot or red please see your provider
- For a cramp in the lower leg, try pinching your upper lip for 20 seconds
- Magnesium supplements may be helpful for gentle muscle relaxation

BACK PAIN

- Do pregnancy specific exercises such as pelvic tilt, PT, yoga, or indoor cycling
- Wear supportive low-heeled shoes
- Use a maternity girdle or supportive elastic “belly band”
- Apply heat to the back: heating pad, warm bath, shower with warm water running on back
- Apply an ice pack
- Use a supportive mattress with pillows positioned to straighten the back

CONSTIPATION

- Ensure adequate fluid intake - consume a minimum of 3L of water daily
- Consume prunes or prune juice as they are natural laxatives
- Warm liquids (e.g. water) on rising to stimulate peristalsis
- Diet high in nutritious sources of fiber (20-30 grams of fiber daily)
 - E.g. greens, celery, and bran
- Exercise, daily walks, good posture and body mechanics
- Ask your provider about Magnesium or OTC Colace

HEMORRHOIDS

- Do Kegel exercises to stimulate circulation in the pelvic area
- Apply a cold compress, i.e. ice or witch hazel
- Applying a topical cortisone cream is safe in pregnancy
- Increase hydration and fiber intake to avoid constipation

VARICOSE VEINS

- Change position frequently and avoid sitting or standing for long periods of time
- Frequent walks
- Wear an elastic support stockings or compression stockings

TINGLING AND NUMBNESS OF FINGERS

- Due to an enlarged and heavy uterus which causes you to assume a posture in which the shoulders, head, and neck are out of normal alignment
- Also due to pressure or traction on nerves in the area from an enlarged or heavy uterus
- Good posture - good body mechanics and ergonomics
- Some women obtain relief simply by lying down

EDEMA (swelling)

- Elevate legs periodically throughout the day
- While laying or sitting, elevate legs.
- Graduated compression or support hose can reduce venous pooling in the lower extremities
- Regular exercise and avoid prolonged periods of sitting or standing
- Decrease or completely eliminate salt from your diet
- Monitor swelling and note any pitting edema with your provider

INSOMNIA AND SLEEP DISORDERS

- Warm bath or shower to help promote relaxation
- Consume a warm, non-caffeinated beverage before going to bed
- Keep a consistent sleep and wake time schedule
- Reduce stimulants prior to bedtime (i.e. avoid television, computers, or phones before bedtime)
- Avoid caffeine and simple sugars
- Regular exercise during the day will promote a better night's sleep
- Promote relaxation with breathing exercises
- Regulate temperature in the bedroom (cooler temperature is found to help with sleep)

VAGINAL DISCHARGE

- Avoid douching or using feminine hygiene sprays to clean the perineal and vaginal areas (Use only water or a gentle, mild soap)
- Frequent changes of unscented, cotton panty-liners and cotton underwear

Nutrition

- **Prenatal Vitamin** - in addition to eating healthy, take a high quality (NSF/USP certified) prenatal vitamin daily. It is recommended to take a prenatal vitamin that has 200 mg of DHA to support your baby's brain development. During pregnancy, you need more metfolate and iron. It is recommended that pregnant women get at least 1000 mcg of metfolate daily (from all sources) and 27 mg of iron daily. In addition to taking a prenatal vitamin containing iron, it is recommended to eat iron rich foods such as lean red meat, poultry, fish, dried beans, chickpeas, peas, iron-fortified cereals, and prune juice.
- **Water** - Aim to drink at least 10 eight ounce glasses of water daily (or 5 water bottles). You can tell if you are drinking enough water if your urine looks pale yellow or colorless.

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- **Caffeine** - most experts say that consuming fewer than 200mg of caffeine (approximately one 12 ounce cup of coffee) a day during pregnancy is safe. Sources of caffeine include: coffee, tea, soda, energy drinks, and chocolate.
 - **Fish** - Omega-3 fatty acids are a type of fat found naturally in many kinds of fish. To get the most benefits from omega-3 fatty acids, women should eat at least two servings of fish or shellfish per week while pregnant or breastfeeding (about 8-12 ounces per week, max 20 ounces per week). Some types of fish have higher levels of mercury than others. Mercury has been linked to birth defects. Choose fish and shellfish low in mercury such as shrimp, salmon, catfish, pollock, cod, and tilapia. Avoid shark, swordfish, king mackerel, marlin, orange roughy, bigeye tuna, or tilefish. Limit white (albacore) tuna to 1 can per week.
 - **Foods to avoid:**
 - Raw meat, uncooked seafood, or rare or undercooked beef or poultry
 - Sushi
 - Unpasteurized cheeses (most cheeses in the United States are pasteurized, check package labels).
 - Runny or undercooked eggs
 - Freshly cut lunch meat is okay to eat in moderation, from a clean deli slicer

Lifestyle Changes During Pregnancy

WEIGHT GAIN

The amount of weight gain depends on your health and body mass index (BMI) prior to pregnancy. If your BMI was between 18-25 before pregnancy, you should aim to gain between 25 to 35 pounds. If you started off pregnancy with a BMI under 18, it is recommended that you gain 25 pounds or more. If your BMI was greater than 25 before pregnancy, it is recommended that you gain less than 20 pounds. Eating healthy and staying active are the most important things you can do to control your pregnancy weight gain for you and your baby's health.

SLEEP POSITIONS

All sleep positions are fine in pregnancy. Sleep however you are most comfortable. You may lay on your back up to 20 weeks of gestation as long as it does not make you feel dizzy, nauseous, or short of breath (adding a long pillow to one side behind your back to create a slight tilt may help you feel more comfortable with back sleeping).

CAR SAFETY

Wear a lap and shoulder belt every time you travel. Buckle the lap belt below your belly. Place the shoulder belt across your body (between your breasts). If your car has airbags - keep 10 inches between the steering wheel and your breastbone. If your car has an airbag "on/off" switch, make sure it is turned to "on".

TRAVEL

We do not recommend airplane travel after 34 weeks of pregnancy. If your pregnancy is considered high risk, recommendations may be different so please consult a provider. If you are going on a car trip, try to limit driving to no more than 5-6 hours/day. Plan to make frequent stops to move around and stretch your legs. Plan to get up, use the bathroom, and walk around every 2 hours.

SPA ACTIVITIES

Manicures, pedicures, and massages with a certified prenatal massage therapist are okay during pregnancy. Be aware of applications of acupressure. Some facilities may require a doctor's letter for a pregnancy massage. Hot tubs, saunas, steam rooms, tanning beds, and spray tans should be avoided in pregnancy.

EXERCISE

Most types of moderate exercise are considered safe during pregnancy, especially if you were exercising regularly prior to pregnancy. It is recommended that pregnant women get at least 150 minutes of moderate-intensity aerobic exercise each week. Moderate intensity means you are moving enough to raise your heart rate and start sweating - you can still talk normally, but cannot sing. If you are new to exercise, start out slowly and gradually increase your activity. Good examples of exercise include: walking, jogging, swimming, and water workouts, stationary bicycling, yoga, and pilates. Stop exercising and call our office if you develop any of the following symptoms: vaginal bleeding, significant cramping, feeling dizzy or faint, chest pain, headache, muscle weakness, calf pain or swelling, regular contractions of the uterus, or fluid leaking from the vagina.

HAIR CARE

Highlighting or dying hair is considered safe during the second and third trimesters of pregnancy. Hair dying in pregnancy poses no known risks to the fetus, however, some women choose to wait until after the first trimester to dye their hair or just get highlights to limit the amount of dye absorption.

ACUPUNCTURE AND CHIROPRACTOR

It can be helpful to get care from a professional trained in prenatal care for acupuncture or a professional trained prenatal chiropractor during pregnancy. Make sure you tell them that you are pregnant. Our office is not responsible for the care that you would receive through a chiropractor or acupuncturist. It is important you ask if the person you will be seeing is a professional trained in prenatal care.

DENTAL CARE

It is recommended to brush and floss your teeth during pregnancy. It is also recommended to see your dentist for regular annual or semi-annual cleanings. Your gums may become more sensitive and bleed easier during pregnancy. Dental cleanings and necessary dental work is fine. Please notify the dentist that you are pregnant. If medically necessary, dental x-rays are okay as long as an abdominal shield is used. Novocain and most antibiotics for dental infections are safe. If antibiotics are prescribed, please call our office to make sure that they are safe in pregnancy. Please realize that untreated dental disease can put you at risk for many pregnancy complications including preterm labor and preterm delivery.

Behaviors To Avoid

The following activities are NOT recommended in pregnancy:

- ⊘ Extreme sports that are out of the norm for you
- ⊘ Roller coasters / bumper cars
- ⊘ Water skiing, rollerblading, ice skating, snowmobile riding, or horseback riding
- ⊘ Jacuzzis, tanning beds, spray tans/artificial tanning, steam rooms, saunas, hot tubs
- ⊘ Direct exposure to pesticides, fertilizers, or toxic chemicals. Please wear gloves when cleaning with household cleaners that contain bleach or other strong chemicals

CATS AND TOXOPLASMOSIS

You can live with, work with, and be around cats in pregnancy. **Please inform us if you have a cat at home.** You should not change a litter box during pregnancy due to the risk of being exposed to cat feces that could potentially be infected with toxoplasmosis. Toxoplasmosis can also be transmitted through raw or undercooked meat, raw fruits or vegetables that are not washed thoroughly, and gardening. Always cook meat thoroughly, wash fruits and vegetables, and wear gloves while gardening.

TOBACCO, ALCOHOL, AND ILLICIT DRUGS

- It is recommended that you do not smoke during pregnancy. If you smoke during pregnancy, your fetus is exposed to harmful chemicals such as tar, nicotine, and carbon monoxide. The risk of preterm birth and problems with the way the placenta attaches to the uterus are increased in women who smoke during pregnancy. Also, infants born to women who smoke during pregnancy tend to be smaller. They are also more likely to have asthma, colic, and childhood obesity. They also have an increased risk of SIDS. Breathing secondhand smoke can increase the risk of having a low birth weight baby by as much as 20%.
- There is no known safe level of alcohol consumption during pregnancy. It is best to not drink at all while you are pregnant. Heavy drinking in pregnancy can result in fetal alcohol syndrome which causes growth problems, mental or behavioral problems, and abnormal facial features.
- Do not use illegal drugs while pregnant. Illegal drug use includes the use of heroin, cocaine, methamphetamines, marijuana, and prescription drugs for non-medical reasons. Drug use can interfere with the growth of the baby and cause preterm birth or death of the baby during the pregnancy or after birth.

Immunizations

THE FLU VACCINE

The CDC recommends that all pregnant women receive a flu vaccine. The flu is more likely to cause severe illness in pregnant women than in women who are not pregnant due to decreased immunity in pregnancy and changes in your lungs during pregnancy. There is an increased chance for pregnant women with the flu to experience premature labor, require hospitalization, or even life-threatening complications. Getting the flu vaccine is the most important step in protecting against the flu. The flu vaccine has not been shown to cause harm to pregnant women or their babies.

TDAP VACCINE

The CDC also recommends that pregnant women receive the Tdap (Tetanus, diphtheria, and pertussis) vaccine in the 3rd trimester (preferably at 36 weeks of pregnancy). Pertussis is another name for whooping cough which is a disease that can be deadly for babies. Babies cannot be vaccinated until two months old. If you receive the Tdap vaccine in your 3rd trimester, you pass antibodies to your baby before birth. These antibodies can protect your baby for the first few months of life. It is recommended that you receive a Tdap vaccine in each pregnancy. Caregivers and close family members of the baby should also make sure they are up to date with the Tdap vaccine. They can be obtained from most local pharmacies.

THE COVID-19 VACCINE

The CDC recommends that all pregnant women get vaccinated *and boosted* against COVID-19. The COVID-19 vaccine and boosters are safe during any trimester of pregnancy and safe while breastfeeding. It is recommended that any caregivers or close family members also receive and stay up to date on the COVID-19 vaccine. For more information on the COVID vaccines in pregnancy, visit the CDC website. <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/pregnancy.html>

THE RSV (Respiratory Syncytial Virus) VACCINE

The CDC has approved a single dose RSV vaccine for pregnant women between 32-36 weeks gestation, to be administered seasonally. Currently, Abrysvo is the only RSV vaccine recommended during pregnancy. This vaccine is administered at specific pharmacies and primary care offices only, we DO NOT administer this vaccine in the office. For more information visit the CDC website. <https://www.cdc.gov/vaccines/vpd/rsv/index.html>

How To Tell If Labor Begins

- It is important to know your body throughout your pregnancy. At each visit be sure to learn your baby's estimated weight and if you had a cervical exam, it is important to know what the exam showed as this will assist in managing your labor. Additionally, knowing your most recent exam could help you avoid unnecessary exams during labor.
- As labor begins, the cervix opens (dilates). The uterus will begin to contract at regular intervals. When it contracts, the abdomen becomes hard (like your forehead). Between contractions, the uterus relaxes and your abdomen becomes soft again.
- Your uterus may contract on and off before labor begins. These irregular contractions are called false labor or Braxton Hicks contractions. They are completely normal but can be painful at times. False labor contractions are usually less regular and not as strong as true labor contractions.
- To time a contraction, note how long it is from the beginning of one contraction to the beginning of the next. **You may download a contraction timing app on your smartphone.**
- You could be in labor if you are having contractions every 5-10 minutes consistently for 2 hours. If you are in labor or are unsure, please call our office or go to the hospital.
- Call the office immediately if your water breaks, you have vaginal bleeding, or your baby is not moving like normal.
- Follow the 3-1-1 rule. If contractions are happening 3-4min apart lasting over a minute each for one hour or more call the office immediately. If you call between the midnight and 7am, you will likely be advised to go straight to HMH at Pascack Valley Hospital. If you feel like you or your baby's life is in danger please go to your nearest emergency room immediately.

The Postpartum Period a.k.a. The 4th Trimester

During pregnancy and the postpartum (after baby is born) period, your body will experience various changes both physically and emotionally that will require a bit of extra insight and patience. Below are a few common feelings you may find yourself dealing with after birth:

- Feelings of alternating sadness, weepiness, and emotional oversensitivity
- Overwhelming feelings of fear and worry
- Feelings of anger in the days after delivery is also common
- Feeling on edge (easily startled, very tense, or even very anxious)
- Heightened sensitivity
- Feelings of doubt
- Feeling exhausted (physically and emotionally)-

Understanding baby blues vs. postpartum depression:

- Baby blues is common and affects up to 80% of mothers. Emotional symptoms are mild and typically last anywhere from a week to two weeks and diminish on their own within that time frame.
- Postpartum depression impacts one in every seven women. Postpartum depression includes extreme feelings of emotional distress interfering with a mom's ability to care for herself or for her family. Symptoms are most prevalent a week to a month postpartum but may begin up to a year postpartum. Please call the office if you are experiencing these symptoms.
- Postpartum psychosis is a rare illness that usually happens suddenly within the first two weeks after delivering. Symptoms may include: delusions, hallucinations, hyperactivity, insomnia, paranoia, harmful thoughts to yourself/baby/others, and difficulty communicating with others. **Please go to the ER immediately if you are experiencing any of these symptoms.**
- Seek help from a support system and mental health professionals.

If you are experiencing severe mood and/or anxiety symptoms such as loss of motivation, sleep disturbances, disturbing thoughts, or feelings of hopelessness call our office to schedule a visit.

If you are having harmful or suicidal thoughts, go to the ER immediately. If you have experienced any of the symptoms listed above, please know you are not alone and there is support for you. Talk therapy and medication can also be helpful tools for relief.