



Pregnancy Guide

ArnotHealth
It's what we do

Welcome

We are happy you chose AMS OBGYN and Midwifery for your obstetrical care.

Our goal is to provide you with high-quality evidence-based care while maximizing your physical, emotional, social and spiritual health of you and your family.

The practice has a variety of providers including board certified obstetricians, laborists, midwives, physician assistants, nurse practitioners and nurses.

We are part of Arnot Medical Services.

Patients seen in our practice will delivery at Arnot Ogden Medical Center.



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Community Resources

CIDS Positive Parenting

161 Sullivan St. Elmira (607) 733-6533
www.cidsfamilies.org

Economic Opportunity Program Chemung and Schuyler County

650 Baldwin St. Elmira (607) 734-6174

Family Services of Chemung County

1019 E. Water St. Elmira (607) 733-5696
www.familyservicesofchemung.com

YWCA

211 Lake St. Elmira (607) 733-5575

Dentistry

Able 2 Article 28 Dental District

1118 Charles St, Elmira (607) 734-9503

Aspen Dental

1643 County Route 64, Horseheads (607) 539-5491

Chemung Family Dental

1007 Broadway St, Elmira (607) 734-2045

Domestic Violence

Catholic Charities of Chemung/Schuyler (607) 734-4898

Domestic Violence 24-hour Hotline (607) 732-1979

National Child Abuse Hotline NYS Child Abuse and Maltreatment

English (800) 942-6906

Spanish (800) 942-6980

www.ocfs.state.ny.us/main/cps

Safehouse and Chemung County Domestic

Violence Program (24-Hour) (607) 732-1979

The Salvation Army of Elmira (24-Hour) (607) 732-1979

NYS Domestic Violence Crisis Counseling and Referrals (800) 527-1757

Planned Parenthood of Greater New York

Sexual Assault Resource Center (888) 810-0093

[https://www.plannedparenthood.org/planned-parenthood-greater-new-york/
get-care/survivor-services](https://www.plannedparenthood.org/planned-parenthood-greater-new-york/get-care/survivor-services)

Immunizations

Call (607) 737-2488 to schedule an appointment. For an overview of immunizations needed for children, visit:

<https://www.chemungcountyny.gov/734/Public-Health-Clinics>

Nutrition

The Women, Infants and Children's Program (WIC)

The Women, Infants and Children's Program is a supplemental food and Nutrition Education program that serves pregnant, breast-feeding, postpartum women, infants and Children up to the age of 5. We provide nutritious foods, including low-fat or fat free milk, cheese, eggs, whole grains, peanut butter/beans, vegetables and fruits. WIC strongly encourages breast-feeding as best we to feed her baby. Breastfeeding support is available through the WIC nutritionist and the peer counselors program. Formula is also available for infants who are either partially breastfed or fully formula fed. To apply, call the Chemung/Schuyler WIC Program at (607) 737-2039, Steuben WIC Program at (607) 776-1151.

Supplemental Nutrition Assistance Program (SNAP)

SNAP is a state-administered federal nutrition assistance program. Federal Law governs the criteria for eligibility and levels of benefits. Each state is responsible for determining and documenting eligibility, issuing benefits and maintaining records. To apply for SNAP, please visit us at 425 Pennsylvania Avenue, Elmira, NY and apply in person or go to mybenefits.ny.gov to apply online. You will be screened that day for expedited benefits and, if eligible, they will be issued within five business days. Call (607) 737-5309.

Smoking Cessation

The Quitline is a free and confidential program providing evidence-based stop smoking services to New York State residents who want to stop smoking or using other forms of tobacco. The Quitline is supported through the New York State Department of Health. Quitline Services include

- Tobacco-free coaching.
- Free nicotine replacement therapy (NRT)
- Easy provider referral programs

The Quitline provides services for English and Spanish speaking clients, and in other languages upon request. 1-866-NY-QUITS (1-866-697-8747), www.nysmokerfree.com

Transportation

If you need assistance with transportation to your appointments and you have health insurance through Medicaid or a Medicaid managed care plan (Blue Choice Option, Fidelis, MVP Option or United), please contact Medical Answering Services at 1-866-932-7740

Chemung County Transportation (CTRAN)

1201 Clemens Center Parkway, Elmira
For information on bus routes and scheduling, please call (607) 734-5212 or go to www.ridectran.com

Alcohol/Substance Abuse

Alcohol and Drug Abuse Council of Chemung County

451 E. Market St. Elmira (607) 734-1567
www.allaboutcounseling.com

Trinity of Chemung County

Lake Street, 2nd Floor, Elmira
Treatment..... (607) 737-5215
Prevention..... (607) 442-1507
<http://www.trinityofchemungcounty.org/>

Housing

Chemung & Schuyler Catholic Charities

215 East Church St. Suite 100, Elmira (607) 734-9784

Chemung County Department of Social Services

425 Pennsylvania Ave, Elmira (607) 737-5302

Car Seat Resources

Arnot Ogden Medical Center Certified Car Seat Technician,
to register call..... (607) 737-4499

Comprehensive Interdisciplinary Developmental Services, INC (C.I.D.S.)

C.I.D.S. has several voluntary programs designed to provide expectant and new parents in Chemung County with referrals, resources, information and support. The programs are free of charge. The primary focus is to promote healthy pregnancies, birth outcomes, childhood development, and much more!

1580 Lake Street, Suite 1, Elmira, (607) 733-6533

Common Questions

Caffeine Use

Studies on caffeine use and what amount is safe in pregnancy are limited. There is concern that caffeine use can cause bad outcomes, including miscarriage, preterm birth and impaired fetal growth. Because there is not enough information, the experts agree it's safe to drink about one cup of coffee a day—that's 12 ounces (200 milligrams) of caffeine. Limiting or eliminating other caffeine foods such as tea, chocolate, and soft drinks is also a good idea.

Tobacco Use

Smokers have a higher risk of developing high blood pressure, having a baby that has trouble growing, fetal loss and miscarriage. Babies have a higher risk for sudden infant death syndrome (SIDS) and allergies if they are in contact with cigarette smoke including secondhand smoke. Talk to your provider

Drug Use

Illegal drugs should not be used in pregnancy. Information is available to suggest women not use drugs in pregnancy because of harmful effects on themselves and the baby.

Marijuana

The American College of Obstetrics and Gynecologists discourages marijuana use during pregnancy. There are concerns that Marijuana can effect brain (neurological) development in the baby.

Alcohol

Drinking alcohol in pregnancy can lead to mental disabilities and birth defects in babies. No one is certain what amount of alcohol can cause problems in pregnancy. Alcohol use is the leading cause of intellectual disability in children, and because of this, women should not drink any alcohol in pregnancy.

Cocaine and Heroin

Cocaine/Heroin can cause:

- Fetal death
- Miscarriage
- Premature birth
- Stunted growth
- Placental abruption (placenta tears away from the wall of the uterus)

Travel

pregnancy if the pregnancy is uncomplicated. Patient's with complications in pregnancy should check with their provider about any travel plans. If you will be traveling, it's important to get up and stretch and move your legs every two hours to limit the risk of blood clots forming. Emptying your bladder and having a snack and fluids available will be important for long travel. Be sure to follow rules if you are traveling on an airplane.

- Contact the airline, train or bus company to find out if they have rules for when they will not allow a pregnant woman to travel with them
- Have insurance card handy
- Bring your last office visit summary (with office number and general information about you).
- When possible, inquire about healthcare facilities en route in case there is an emergency.

Sexual Activity

Sexual activity may continue as long as you do not have risk factors (like a short cervix, abnormal bleeding and problems with the placenta or early labor).

There are many changes that can occur in pregnancy that may change your sex pattern. You should check with your provider if you have questions about sex in pregnancy

Work

Many working women become pregnant every year. Women who are healthy and have a healthy fetus are often able to work up until their due date. Women that have jobs that require heavy lifting or strenuous work may need to make arrangements to change their work hours, the type of work they do or the place of employment. You should talk to your provider about any work concerns.

Common Discomforts in the First Trimester

1-13 Weeks

Pregnancy is an exciting time in your life. Even though you planned to have this baby, your body's changes may not be something you planned on. Here are some of the more common discomforts that women have during pregnancy. Talk to your healthcare provider (HCP) if these tips do not seem to help, or if you have other concerns.

Nausea/Vomiting/Morning Sickness

Nausea is the most common discomfort of early pregnancy. It is usually caused by hormonal changes from progesterone (the hormone of pregnancy). Things

that help with nausea include the following:

- Eating small frequent meals. Do not let your stomach get completely empty
- Keep crackers at your bedside and eat before rising in the morning
- Eat a small snack prior to going to bed at night
- Do not drink large amounts of liquids at one time
- Avoid foods that are greasy, spicy or have odors that bother you
- Take your prenatal vitamin at night if taking it in the morning upsets you

Fatigue

Feeling tired is common in early pregnancy due to the increased needs of your body. Your amount of sleep needs to increase by several hours. It is important to take naps and go to bed earlier.

Heartburn

Heartburn is a burning feeling in your chest. During pregnancy, stomach acid can back up into your esophagus due to a change in your hormone levels.

Things you can do to help relieve heartburn are:

- Avoid eating large meals and greasy, spicy, fatty foods
- Avoid chewing gum
- Do not lie down, bend over or stoop for two hours after eating
- Raise the head of your bed six inches
- Avoid tight clothing around your abdomen or waist
- Check with your healthcare provider about an antacid that is safe to use

Constipation

Constipation (going too long without having a bowel movement) happens because your hormone levels slow down the normal activity of your gestational (GI) tract, especially your intestines.

- Increasing the “roughage” or fiber that you eat. Eat more fruit, vegetables, dried fruits and bread or whole grain foods.
- Drinking more fluids - at least 8 oz of liquid every hour while awake. Water is best, but any liquids will help.
- Increasing your activity. Even taking an extra 15-30 minute walk each day can help.
- Maintaining regular bowel habits. Try to have a bowel movement at the same time every day, but do not strain (push really hard) to get it out. Sometimes a hot drink helps.
- Checking with your HCP about using a stool softener; medications that may cure bowel movement easier. Do not use laxatives or enema unless your HCP has ordered a special kind for you.

Frequent urination

During early pregnancy, you will notice that you will have to go to the bathroom to urinate more often. This is due to hormones in your body and to the growing uterus pushing on her bladder. This frequency is normal, but tell your HCP if you notice any burning or pain when you urinate.

Vaginal discharge

The change in your hormone levels makes a change in the cells in your vagina. This causes an increase in vaginal secretions. The discharge is usually thin and clear or white in color. It should not have any odor. Things you can do to help yourself feel more comfortable include the following:

- Keep your vulva (private area) clean and dry.
- Do not wear tight clothing or too many layers of clothing.
- Wear cotton underwear.
- Do not douche or use feminine hygiene products or Strong soaps.
- Report irritation, odor or a color discharged to your HCP.

Warning Signs

Most women do not have problems during their pregnancy; however, sometimes a problem can occur. Be sure to call your HCP right away so that any possible treatment can be started. Warning signs in the 1st trimester include:

- Leakage of fluid from the vagina.
- Bleeding from the vagina, with or without passing any blood clots or tissue.
- Fever of more than 100.4 degrees F or 38.0 degrees C.
- Abdominal or pelvic (area between your hips) pain.
- Severe back pain that does not go away with rest.
- Nausea and vomiting that last more than 24 hours
- Tea-colored urine or not urinating often enough.
- Severe headache.
- Fainting or blackouts.

If you have any of the symptoms, call our office right away.

Common Discomforts in the Second Trimester

14-26 Weeks

You have made it through the 1st 3rd of your pregnancy! The middle 3 months - the 2nd trimester - are usually the easiest. Although some women still have nausea and feel especially tired for the whole pregnancy, most women are

feeling much better. Your growing baby and uterus can cause some discomforts, though. Here are some common ones and ways to deal with them:

Back pain

Lower back pain can be caused by muscle strain (from stretching, bending or lifting). Sometimes O hormones change in leave you more at risk for back pain. Weak muscles also string in her more easily. Here are some things that can lessen your discomfort:

- Use proper body mechanics by lifting with your back straight and your knees bent. Do not twist while lifting or pulling. Stand and sit with your back as straight as possible.
- Avoid standing too long in one spot. If you can, rest one foot on a foot stool or step while you are standing. Change which foot you willing on every few minutes.
- Where a special support girdle for pregnant women. You can find these at maternity shops or a medical supply store.
- Use a foot stool when you have to sit for long periods, so your legs are not dangling.
- Ask your partner or friend for back rub, or use a heating pad on low setting to relieve aches. Sometimes a warm, not hot, bath feels good, too.
- Try to sleep on a firm, supportive mattress. Put a board under your mattress if it is too soft. Use lots of pillows! Wedge one under your belly when you are on your side in use one between your knees while on your side, too. Avoid lying flat on your back. Leading into a pillow placed under your side instead.
- Do pelvic tilt exercises. On your hands and knees like an angry cat, rock forward and backward a little to stretch out your back. On your back, bend your knees, then lift your bottom up in the air so only your head, shoulders and feet touch the floor. Hold this position for a few seconds, then relax and do it again.
- Wear good walking shoes as much as possible. Try not to wear shoes with a heel higher than two inches. If your backache “comes and goes” in a regular pattern, or if you have leakage or bleeding from your vagina, call your HCP right away.

Hemorrhoids

Hemorrhoids are also called piles. They are extra-large blood vessels in your rectum (where you have bowel movements) that itch and sometimes bleed. They were caused by the increased pressure of your baby in your pelvis. The pressure of the baby blocks off the blood vessels and causes them to get too big. Things that will help keep hemorrhoids from getting too bad include the

following:

- Avoid constipation. Eat lots of fruits and vegetables so you have a bowel movement every day, if possible. Ask your HCP if you need a laxative to help you have regular bowel movements.
- Do not strain or push when having a bowel movement. Breathe slowly, relax and let it come out without pushing.
- Drink more fluids and eat foods high in fiber, like whole grains.
- Do not have anal sex (in which the man puts his penis in your anus, where bowel movements come out).
- Take sitz baths with cool water two to three times a day. A sitz bath is a little tub that fits on your toilet and lets you sit in the water without getting the rest of your body wet. You can buy a sitz bath kit at a drugstore or medical supply store.
- Use ice packs or witch Hazel pads (Tucks) to take the swelling down.
- Do Kegel exercises. A Kegel exercise is when you tighten the muscles in your bottom. Next time you urinate, try to stop the urine. The muscle tightening you do to stop your urine is a Kegel exercise. After you figure out how, only do Kegel exercises when you are not urinating. Starting and stopping your urine flow too much can lead to infections or bladder problems.
- If you notice bleeding when you go to the bathroom, talk with your HCP

Leg Cramps

Leg cramps happen in pregnancy, but it is unclear why. Things that can help prevent or lessen them include the following:

- Get more calcium in your diet. In addition to dairy products, there was calcium fortified orange juice. Ask your HCP if you can take a calcium supplement (like Tums).
- Exercise. Even walking 30 minutes a day can help. And you can walk for 10 minutes 3 times a day for the same benefit.
- If you get a cramp, try straightening your leg. Sometimes pointing your toe to order knee helps. Standing a foot or so from a wall and lean toward it keeping your knee straight and your feet flat on the floor.
- Massage or apply mild heat with a warm washcloth or heating pad on low to the cramping area. If you feel a hard knot or hot spot on your leg, especially in the calf (back of the lower leg) that does not go away, call your HCP right away.

Many women never have any of these discomforts during their pregnancy. Others have a lot of discomforts. Be sure to tell your HCP about anything that you find uncomfortable. Write down your questions as they come up so you will remember to ask them during your next office visit or phone call.

Warning Signs

No woman wants something to go wrong during her pregnancy. It can be really tempting to not tell anyone when something happens; you just hope it will go away on its own. Usually something that worries you is not a big problem, but it is important to talk to your HCP any time you have a worry. Most of the time, bigger problems can be prevented if you get help early enough. There were 3 warning signs that you should call your HCP about:

Bleeding

After your 28th week or 5th month of pregnancy, bleeding can be due to several causes. There can be problems with the placenta. Placenta previa is when the placenta forms across the cervix (opening to the uterus); placenta abruption is when the placenta pulls away from the inside of the uterus. Sometimes sores or scratches on your cervix or vagina can cause bleeding. Vaginal infections or polyps can cause bleeding. Preterm labor may also cause bleeding.

You may or may not have pain with vaginal bleeding. It is very important to call your HCP or go to the hospital to be examined any time you have vaginal bleeding during your pregnancy.

Pain

Abdominal or pelvic pain during her pregnancy needs to be checked out by your HCP.

Non pregnancy causes of pain need to be considered along with pregnancy causes. Back pain that comes and goes in a pattern or does not go away at all needs to be checked out. Call your HCP, or if the pain is really bad or sudden, go to the hospital where you plan to deliver so you can be examined.

Infection and fever

When you are pregnant you can have “normal” cold and infections. But it is important to tell your HCP if you have:

- A fever of more than 100.4 degrees F or 38.02 C.
- A burning sensation or pain when you urinate, or in need to go to the bathroom often.
- Green or yellow drainage from your nose, or tendency to cough of green or yellow phlegm.
- Tooth aches, bleeding gums or sores in the mouth that do not go away.
- Vomiting or diarrhea that last more than an hour or so.
- Any symptoms that worries you.

If you have a fever, you need to increase the amount of fluid you drink. Fluids help you flush infection out of your body. They also help keep you from getting dehydrated, which is bad for you and the baby. If you have an infection, it is also best to get more rest so that your body has energy to fight the germs. Antibiotics (medicines that treat infections) are safe during pregnancy and may be necessary to protect your baby from any possible harm from your infection. Your HCP will order Medicine if you need it.

Remember-you and your HCP are working together to help you have a safe pregnancy and a healthy baby. Be sure to let your HCP know of anything that concerns you. AP nor in or worrying about a problem will not help it go away! Getting help right away can make a big difference in your health and your baby safety.

Your Baby's Growth

Month 1 (First Trimester)

At the end of 4 weeks:

- Baby is 1/4 inch long.
- Heart, digestive system, back bone and spinal cord began to form. Placenta begins to develop.
- The single fertilized egg is now 10,000 times larger than it was at conception.

Month 2 (First Trimester)

At the end of 8 weeks:

- Baby is 1-1/8 inches long.
- Heart is functioning.
- Eyes, nose, lips, tongue, ears and teeth are forming.
- Penis begins to appear in boys.
- Baby is moving, although the mother cannot feel movement.

Month 3 (First Trimester)

At the end of 12 weeks:

- Baby is 2-1/2 to 3 inches long.
- Weight is about 1/2 to 1 oz.
- Baby develops recognizable form.
- Nail start to develop and ear lobes are formed.
- Arms, hands, fingers, legs, feet and toes are fully formed.
- Eyes are almost fully developed.
- Baby has developed most organs and tissues.
- Baby's heart rate can be heard at 10-12 weeks with a special instrument called a Doppler.

Month 4 (Second Trimester)

At the end of 4 months:

- Baby is 6-1/2 to 7 inches long.
- Weight is about 6-7 oz.
- Baby is developing reflexes, such as sucking and swallowing and may begin sucking thumb.
- Tooth buds are developing.
- Sweat glands are forming on palms and soles.
- Fingers and toes are well defined.
- Gender is identifiable.
- Skin is bright pink, transparent and covered with soft, Downey hair.
- Although recognizably human in appearance, the baby would not be able to survive outside the mother's body.

Month 5 (Second Trimester)

At the end of 5 months:

- Baby is 8-10 inches long.
- Weight is about 1 lb.
- Hair begins to grow on baby's head.
- Soft lanugo hair called limb new go covers the baby's body. Some may remain until a week after birth when it is shed.
- Mother begins to feel fetal movement.
- Internal organs are maturing.
- Eyebrows, eyelids and eyelashes appear.

Month 6 (Second Trimester)

At the end of 6 months:

- Baby is 11-14 inches long.
- Weight is about 1-3/4 to 2 pounds.
- Eyelids begin to part and eyes open sometimes for short periods of time.
- Skin is covered with protective coating called vernix.
- Baby is able to hiccup.

Month 7 (Third Trimester)

At the end of 7 months:

- Baby is 14-16 inches long.
- Weight is about 2-1/2 to 3-1/2 pounds.
- Taste buds have developed.
- Fat layers are forming.
- Organs are maturing.

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- Skin is still wrinkled and red.
 - If born at this time, the baby will be considered premature and requires special care.

Month 8 (Third Trimester)

At the end of 8 months:

- Baby is 16-1/2 to 18 inches long.
- Weight is about 4-6 lb.
- Overall growth is rapid this month.
- Tremendous brain growth occurs at this time.
- Most body organs are now developed, except for the lungs.
- Movements or “kicks” are strong enough to be visible from the outside.
- Kidneys are mature.
- Skin is less wrinkled.
- Fingernails now extend beyond fingertips.

Month 9 (Third Trimester)

At the end of 9 months:

- Baby is 19-20 inches long.
- Weight is about 7 to 7-1/2 pounds.
- The lungs are mature.
- Baby is now fully developed and can survive outside the mother’s body.
- Skin is pink and smooth.
- The baby settles down lower in the abdomen to prepare to birth and may seem less active.

Regular exercise build bones and muscles, gives you energy and keeps you healthy. It is just as important when you are pregnant. Exercise helps to look and feel better during a time when your body is changing.

Exercise in Pregnancy

You are tired. You’re gaining weight. You may not feel your best. Although these symptoms are normal during pregnancy, there is a way to find relief. Becoming active and exercising on most, if not all, days of the week can benefit your health in many ways:

- Helps reduce backaches, constipation, bloating and swelling.
- Gives you energy.
- Improves your mood.
- Promotes muscle tone, strength and endurance.
- Helps you sleep better.

Regular activity also helps keep you fit during pregnancy and may improve your ability to cope with the pain of labor. This will make it easier for you to get back in shape after the baby is born. You should not, however, exercise to lose weight while you are pregnant.

Changes in Your Body

Pregnancy causes many changes in your body. Some of these changes will affect your ability to exercise.

Joints

The hormones produced during pregnancy cause the ligaments that support your joints to become relaxed. This makes the joint more mobile and more at risk of injury. Avoid jerky, bouncy or high-impact motions that can increase your risk of injury.

Balance

Remember that during pregnancy you are carrying extra pounds-as much as 20-30 pounds at the end of pregnancy. The extra weight in the front of your body shifts the center of gravity and places stress on joints and muscles, especially those in the pelvis and lower back. This can make you less stable and cause back pain and make you more likely to lose her balance and fall, especially in later pregnancy.

Heart Rate

The extra weight you are carrying will make your body work harder than before you were pregnant. Exercise increases the flow of oxygen and blood to the muscles being worked and away from other parts of your body. So, it's important not to overdo it. Try to exercise moderately so you don't get tired quickly. If you are unable to talk normally while exercising, your activity is too strenuous.

Getting Started

Before beginning your exercise program, talk with your provider to make sure you do not have any health conditions that may limit your activity. Ask about any specific exercises or sports that interest you. Your HCP can offer advice about what types of exercise routine is best for you.

Women with one of the following conditions may be advised by other provider not to exercise during pregnancy:

- Pregnancy-induced hypertension.
- Symptoms or history of preterm labor (early contractions).

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- Vaginal bleeding.
 - Premature rupture of membranes.

Pregnant women with certain other medical conditions, such as high blood pressure, heart disease and lung disease, will be advised by their provider when and if exercise is appropriate.

Choosing Safe Exercises

Most forms of exercise are safe during pregnancy. But some types of exercise involved positions and movement that may be uncomfortable, tiring or harmful for pregnant women. For instance, after 20 weeks of pregnancy, women should not do exercises that required them to lie flat on her back, because it may be more difficult for the blood to circulate.

Walking is considered the best exercise for anyone. Brisk walking give a good total body workout and is easy on the joints and muscles. Other good activities for pregnant women includes swimming and stationary biking.

Your Routine

Exercise during pregnancy is most practical during the first 24 weeks. During the last 3 months, it can be difficult to do many exercises that once seemed easy. This is normal.

If it has been some time since you've exercised, it is a good idea to start slowly. Begin with as little as 5 minutes a day and add 5 more minutes a week until you can stay active for 30 minutes a day.

Always begin each exercise session with a warm-up period for 5-10 minutes. This is light activity, such as slow walking, that prepares her muscles for activity. During the warm up, stretch your muscles to avoid stiffness and soreness. Hold each stretch for at least 10-20 seconds- do not bounce.

After exercising, cool down by slowly reducing your activity. This allows your heart rate to return to normal levels. Cooling down for 5-10 minutes and stretching again also helps you to avoid sore muscles. Hold each stretch for 20-30 seconds- do not bounce.

Things to Watch

The changes your body is going through can make certain positions and activities risky for you and your baby. While exercising, try to avoid activities that call for jumping, jarring motions or quick changes in direction that may strain your joints and cause injury.

There are some risks from becoming overheated during pregnancy. This may cause loss of fluids and lead to dehydration and problems during pregnancy. Overheating in the first 8 weeks of pregnancy may be a contributing factor to good development of birth defects.

When you exercise, follow these general guidelines for a safe and healthy exercise program:

- After 20 weeks of pregnancy, avoid doing any exercises on your back.
- Avoid brisk exercise in hot, humid weather or when you are sick with a fever.
- Wear comfortable clothing that will help you to remain cool.
- Wear a bra that fits well and gives a lot of support to help protect your breasts.
- Drink plenty of water to help keep you from overheating and dehydration.
- Make sure you consume the extra 300 calories a day you need during pregnancy.

Pay attention to your body while you exercise. Do not exercise to the point that you are exhausted. Be aware of the warning signs that you may be exercising too strenuously. If he notices any of the symptoms, stop exercising and call your provider.

Warning Signs

Stop exercising and call your provider if you get any of the symptoms:

- Pain.
- Vaginal bleeding.
- Dizziness or feeling faint.
- Increased shortness of breath.
- Rapid heartbeat.
- Difficulty walking.
- Uterine contractions and chest pain.
- Fluid leaking from the vagina.

After the Baby is Born

Having a baby and taking care newborn is hard work. It will take a while to regain your strength after the strain of pregnancy and birth. Taking care of yourself physically and allowing her body time to recover is important. If you had a Caesarean delivery, a difficult birth or complications, your recovery time may be longer. Check with your provider before starting or resuming an exercise program.

Walking is a good way to get back into exercising. Risk walks several times a week will prepare you for more strenuous exercise when you feel up to it.

Walking has the added advantage of getting both you and the out of the house for exercise in fresh air. As you feel stronger, consider more vigorous exercise.

You will want to pick an exercise program that meets your own needs. Your doctor, nurse or community center can help. There are also special postpartum exercise classes that you can join.

Finally...

Exercise during pregnancy can help repair you for labor and childbirth. Exercising afterward can help get you back in shape. Before you begin an exercise program, talk to your provider. Then follow the guidelines given here to help maintain a safe and healthy exercise program during pregnancy.

Oral Health During Pregnancy

Facts About Oral Health That You Should Know:

- Puffy, bleeding gums, that feel tingly are typical signs of pregnancy gingivitis that many women experience during pregnancy because of raised hormone levels.
- Poor oral health during pregnancy could increase your risk for a low birth weight baby or premature delivery.
- Dental decay is a contagious, infectious disease caused by cavity-causing germs in the mouth.
- Germs in the mouth can be passed from mother to child by any saliva sharing activity (kissing, sharing utensils or leaking the pacifier before placing in baby's mouth).
- A mothers poor oral health can put her baby at risk for early childhood tooth decay.
- ABD is more likely to get cavity-causing insurance if his or his mother has on treated tooth decay

Dos During Pregnancy:

Visit a dentist and have a checkup and a cleaning during pregnancy.

Routine dental visits (every six months) will helping maintain healthier and happier teeth and gums by detecting problems when they are small and easily fixable.

The longer you wait before seeking care for any tooth or gum problem, the larger the problem can be come. As a result, the treatment can become more complicated and invasive.

The New York State Department of Health has stated that it is safe to have dental treatments during pregnancy. If there is a problem in your mouth during pregnancy, you should seek care as soon as possible.

Eat a Balanced Diet and Avoid Frequent Intakes of Carbohydrates Between Meals:

- What a mother eats during her pregnancy provides the nutrients that for her babies teeth and gums.
- Limit starchy foods (chips and cookies), soft drinks (soda and juice) and sweets (candy bars and lollipops) in between meals. Fresh fruits, vegetables, milk and she has are excellent snacks with their high nutritional value and lower risk for causing cavities.
- Chew xylitol chewing gum (Koolerz, Trident, Orbit, etc.) after snacking if you do not have time for brushing. Xylitol is a sugar alcohol that has been proven to decrease cavities.

Brush Your Teeth at Least Twice a Day and Floss Daily:

- Use fluoride toothpaste.
- Make sure to remove plaque (a sticky layer of germs that form on teeth) from all the surfaces of your teeth while brushing.

Approved Medications in Pregnancy

Allergies

- Benadryl
- Claritin
- Saline Nasal Spray
- Throat lozenges (any brand)
- Vaporizer or Humidifier at Bedside
- Warm Mint Tea
- Zyrtec

Analgesia (Pain Relief)

- Acetaminophen (Tylenol)

Antibiotics

- Amoxicillin
- Erythromycin
- Keflex
- Macrobid
- Penicillin

Asthma

- Isoproterenol, Proventil, Beconase
- Ventolin, Cromolyn

Cold Remedies

- Afrin Nasal Spray (Three-day limit)
- Gualfenesin (Robitussin, Mucinex)
- Sudafed (after 14 weeks)
- Throat lozenges (any brand)
- Vicks VapoRub

Constipation

- Colace (docusate sodium)
- Fiber laxatives
- Milk of Magnesia
- Psyllium (Metamucil, Fibercon, Citrucel, Fiberall)

Diarrhea

- Kaopectate
- Imodium (after 14 weeks)

Headaches

- Acetaminophen (Tylenol)
- Magnesium supplement

Hemorrhoids

- Proctofoam
- Preparation H
- Anusol
- Tucks

Indigestion

- Tums
- Maalox
- Rolaids
- Mylanta
- Riopan Plus (magaldrate/simethicone)

Nausea & Vomiting

- Emetrol
- Gatorade
- Vitamin B6, 25mg tablets (one-half tablet, three times a day)
- Peppermint and ginger tea
- Peppermint

Pain

- Acetaminophen (Tylenol)

Miscellaneous

- Sulfacetamide eye drops
- Hydrocortisone cream 0.5%
- Novacaine-lidocaine (with epinephrine, if necessary)
- Benedryl

