



Premier

OB/GYN

From Bump to Baby: Your Complete Pregnancy Handbook



Congratulations on Your Pregnancy!

We welcome you here at Premier Medical Group OB/GYN. Thank you for choosing us to care for you during this important time in your life.

Our obstetrical team understands having a baby is one of the most memorable and important experiences for a woman. We are dedicated to providing you with state-of-the-art compassionate care. We will do all we can to ensure your pregnancy experience is safe, healthy, and happy from conception through your postpartum care.

This booklet is provided to you to help answer common questions you may experience along the way. We encourage you to use it as a resource throughout your pregnancy. You can also visit our website at www.mypremierobgyn.com for valuable information.

Thank you for placing your trust in our care.





Your Physicians

Like many OB/GYN practices, Premier OB/GYN is a group practice. Our physicians have days they work in the office, days they are on-call, and days they are off. When possible, our physicians try to deliver their own patients' babies, but this is not always possible. If your primary physician is not available when you go into labor, the on-call physician from our group will deliver your baby.

Office Information

Office Hours and Location


Our office is open Monday through Friday from 7:30am to 5:00pm. Our address is 490 Dunlop Ln, Building 2, 2nd Floor, Clarksville, TN 37040.

How to Contact Our Office

You may call our main number 931-245-8100 Monday through Friday 7:30am-5:00pm for questions or concerns. If you have an emergency and need to contact us on weekends or after business hours, you may call the same number. Our answering service will give the on-call physician your message to return your call. If you are experiencing symptoms you believe need immediate attention, call 911 or go to your nearest emergency room.

Billing for Prenatal Care

We understand that maternity benefits can be confusing. Our billing staff is available during normal office hours to discuss any questions you may have and can be reached at 931-245-8100. You will also have a visit with our billing staff to review your insurance coverage and your financial responsibility at your first prenatal visit.





Appointment Schedule

Your First Visit

When you come to the office for your first prenatal visit, you will meet with a nurse or medical assistant to review your health history. There will be a series of prenatal labs that will test your blood type, blood count, and for infections (syphilis, hepatitis B, HIV, and rubella). All of the results will be reviewed with you at your next appointment.

After Your First Visit

We would like you to schedule a visit approximately every four weeks until you reach 28 weeks. Following your 28 week appointment your visits will increase to every two weeks then once a week after 36 weeks. We will request to see you more frequently if you are high risk. During each visit, you will have your weight, blood pressure, urine, and the fetal heartbeat checked. At approximately 20 weeks, the physician will begin checking a fundal height at each appointment. Several additional tests are done at scheduled markers throughout your pregnancy.

Testing Completed during Pregnancy

Anemia and Gestational Diabetes Screening

This screening is performed between 24-28 weeks. You will be given a sugar drink and instructions for how/when to drink it. One hour after you finish the sugar drink, your blood will be drawn.

Vaginal Culture for Group B Strep

This swab of your vaginal and rectal area is performed between 35-37 weeks. Group B strep is a bacterium naturally present in and around the vagina in many women. It can cause serious infections to newborn infants if exposed at time of delivery. If you test positive for this bacterium, you will receive antibiotics during labor and delivery.



Optional Testing

You will have the decision to test for the potential of genetic diseases. If you are interested in any optional tests, please check with your insurance plan to see if these tests are covered. Questions you may have regarding these optional tests can be discussed at your first appointment.

Genetic Carrier Screening

This blood-based test helps couples determine the risk of passing on serious genetic conditions to their child. It can be performed either preconception or during pregnancy.

Optional Testing (cont.)

Non-invasive Prenatal Testing (NIPT).

A blood-based genetic, prenatal screening test of the pregnant mother that screens for common chromosomal conditions that affect the baby's health. This test is performed after 11 weeks.

AFP-4 (Quad Screen).

This blood screening test is performed between 15-20 weeks. This test determines high or low risk for Down Syndrome, Trisomy 18, and birth defects of the spinal cord and skull.

Ultrasounds

We recommend an ultrasound around 20 weeks of pregnancy to evaluate fetal anatomy. Additional ultrasounds will be performed based on the medical need. Insurance will only cover this service if there is a medical need.

Vaccinations

The Centers for Disease Control (CDC) recommends the following vaccines: Flu, Whooping Cough, and RSV. These vaccines are available in our clinic and your provider will provide more information about vaccines at your visits.

Prenatal Vitamins

We recommend a prenatal vitamin that contains folic acid and DHA prior to conception, throughout the pregnancy, and postpartum while breastfeeding. Please check with your doctor before taking any vitamins, herbs, or other supplements as some may be unsafe during pregnancy.



Common Symptoms of Pregnancy

Nausea/Vomiting

Feeling nauseated during the first three months of pregnancy is very common. For some women, this can last longer, while others may not experience it at all. Try to eat 5-6 smaller meals a day in order to keep your stomach full at all times. Try bland foods like plain crackers, toast, dry breakfast cereal as well as carbonated drinks like ginger ale or 7-up. Ginger is a natural treatment for nausea. Peppermint can also be used. Some over-the-counter medications are also safe, such as Emetrol or Unisom. If the symptoms become severe or you are unable to keep fluids down for more than 12 hours, contact the office

Discharge


An increase in vaginal discharge that is white and milky is common in pregnancy.

Spotting

Light bleeding or spotting can be common, especially in the first 12 weeks of pregnancy. It may occur after intercourse, cervical exams, vaginal ultrasounds, or strenuous activity and exercise. If the bleeding is heavy or is accompanied by pain, go to the nearest emergency room.

Constipation

Is a common complaint which can be related to hormone changes, low fluid intake, increased iron, or lack of fiber in your diet. Try to include whole grains, fresh fruits, vegetables, and plenty of water in your diet. If you develop hemorrhoids, you may use over-the-counter remedies such as Preparation H, Tucks pads, Tucks cream, or hydrocortisone ointment or cream.



Common Symptoms of Pregnancy (cont.)

Cramping

Experiencing some cramps and contractions are normal. When they occur, empty your bladder, drink 1-2 glasses of water and try to rest. If you are less than 36 weeks pregnant and having more than six contractions in an hour after trying these measures, contact the office.

Leg Cramps

Cramping in your legs or feet can also be common. Drinking plenty of water and low-fat/nonfat milk, and consuming more calcium-rich foods like dark green vegetables, nuts, grains, bananas, and beans may help. Magnesium supplements taken daily are helpful. To relieve the cramp, try to stretch your leg with your foot flexed toward your body. A warm, moist towel or heat pad wrapped on the muscle may also help.





Common Symptoms of Pregnancy (cont.)

Dizziness

You may feel lightheaded or dizzy at any time during your pregnancy. Try lying down on your left side and drink 1-2 glasses of water.

Swelling

Because of the increased production of blood and body fluids, normal swelling, also called edema, can be experienced in the hands, face, legs, ankles, and feet. Elevate your feet, wear comfortable shoes, drink plenty of fluids, and limit sodium. Supportive stockings can also help. If the swelling comes on rapidly, or is accompanied by headache or visual changes, contact us immediately.

Heartburn

You may experience heartburn throughout the pregnancy, especially during the latter part of your pregnancy when your baby is larger. Try to eat 5-6 smaller meals a day and avoid laying down immediately after eating. Some over-the-counter medications are also safe for use.

Aches and Pains

As your baby grows, backaches are common. You may also feel stretching and pulling pains in the abdomen or pelvic area. These are due to pressure from your baby's head, weight increase, and the normal loosening of joints. Practice good posture and try to rest with your feet elevated. You may also treat with Tylenol.



Suggested Over-the-Counter Medications

Acne- Benzoyl Peroxide

Cold/Allergies- Allegra, Xyzal, Benadryl, Claritin, Zyrtec, Chlor-Trimeton, Dimetapp, Mucinex (Guaifenesin), Vicks Vapor Rub

Constipation- Colace, MiraLAX, Senakot, Dulcolax Suppository, Fibercon, Metamucil, Fiber pills

Cough- Mucinex, cough drops, Robitussin (plain and DM)

Crab/Lice- RID

Gas- Gas-x, Mylicon, Phazyme

Headaches/Fever- Cold Compress, Tylenol (regular or extra strength)

Heartburn- Maalox, Mylanta, Pepcid, Milk of Magnesia, Pepcid Complete, Prevacid, Prilosec OTC, Rolaids, Tums (limit 4/day)

Hemorrhoids- Hydrocortisone rectal (Anusol), Tucks, Preparation H

Leg Cramps- Magnesium supplements

Nasal spray- Saline nasal spray

Nausea- Vitamin B6 25mg 3 times a day and Unisom (doxylamine) at bedtime, Dramamine, Emetrol, Ginger capsules 250mg 4 times a day, high complex carbs at bedtime, Sea bands (acupressure)

Pain- Tylenol, Tylenol Extra Strength

Rash- Benadryl, Benadryl cream, Hydrocortisone cream or Hydrocortisone ointment

Sleep Aids- Benadryl, Chamomile tea, Unisom (doxylamine), Tylenol PM

Throat- Cepacol, Cepastat, Chloraseptic throat spray, salt water gargle with warm water, throat lozenges

Tooth pain- Orajel

Yeast infection- Gyne-Lotrimin, Monistat 3 or 7 day

Prenatal vitamins- Any over-the-counter prenatal vitamin with DHA and folic acid



Nutrition and Pregnancy

Recommendation for Weight Gain

Underweight women with a low weight gain during pregnancy appear to have an increased risk of having a low birth weight infant and preterm birth. On the other hand, obese women have an increased risk for having a large for gestational age infant, post term birth, and other pregnancy complications.

There is an increased risk for small for gestational age birth in women who gain less than the recommended weight, based on pre-pregnancy weight. Women who exceed the weight gain recommendations double their risk of having a very large infant which increases the risk for C-section and birth trauma. It may also increase the risks of childhood obesity and makes weight loss more difficult after delivery.

Recommendation for weight gain during a single pregnancy is as follows:

Underweight women (BMI less than 18.5): 28-40lbs

Normal weight women (BMI 18.5-24.9): 25-35lbs

Overweight women (BMI 25-29.9): 15-25lbs

Obese women (BMI > 30): 11-20lbs

Healthy Diet

The first step toward healthy eating is to look at your daily diet. Having healthy snacks that you eat during the day is a good way to get the nutrients and add extra calories that you need. Pregnant women need to eat an additional 100-300 calories per day, which is equivalent to a small snack such as half of a peanut butter and jelly sandwich and a glass of low-fat milk.

Key Nutrients during Pregnancy.

Calcium (1200mg): Helps build strong bones. Sources: Milk, Cheese, Yogurt, and Sardines.

Iron (27mg): Helps create the red blood cells that delivery oxygen to the baby and also prevents fatigue. Sources: Lean red meat, dried beans and peas, and iron-fortified cereals.

Vitamin A (770 mcg): Forms healthy skin, helps eyesight, helps with bone growth. Sources: carrots, dark leafy greens, and sweet potatoes.

Vitamin C (85mg): Promotes healthy gums, teeth, and bones. Helps your body to absorb iron. Sources: oranges, melon, and strawberries.

Vitamin B6: Helps form red blood cells, helps the body use protein, fat, and carbohydrates. Sources: beef, liver, pork, ham, whole grain, cereals, and bananas.

Vitamin B-12 (2.6 mcg): Maintains nervous system, needed to form red blood cells. Sources: liver, meat, fish, poultry, and milk (only found in animal foods, vegetarians should take a supplement).

Folate (600 mcg): Needed to produce blood and protein, helps some enzymes. Sources: green leafy vegetables, liver, orange juice, legumes and nuts.

Food to Avoid during Pregnancy

Raw meat- avoid uncooked seafood and undercooked beef or poultry due to risk of bacterial contamination, toxoplasmosis, and salmonella.

Fish with Mercury- avoid fish with high levels of mercury including shark, swordfish, king mackerel, and tilefish. For other fish, limit consumption to two servings per week.

Smoked seafood- refrigerated, smoked seafood should be avoided due to risks of listeria contamination.

Raw shellfish- including clams, oysters, and mussels can cause bacterial infections. Cooked shrimp is safe.

Raw eggs- raw eggs or any food containing raw eggs can be contaminated with salmonella. This includes some homemade Caesar dressings, mayonnaise, and homemade ice cream. Cook eggs thoroughly, until the yolk is firm.

Soft cheeses- imported soft cheeses may contain listeria. Soft cheeses made with pasteurized milk are safe.

Unpasteurized milk- may contain listeria which can lead to miscarriage

Pate- Refrigerated pate or meat spreads should be avoided due to risks of listeria.



Food to Avoid during Pregnancy (cont.)

Caffeine- limit caffeine intake to the equivalent of 1 cup of coffee a day or less. Excessive caffeine may be associated with miscarriage, premature birth, low birth weights, and withdrawal symptoms in infants.

Unwashed fruits and vegetables- wash all produce well to avoid exposure to toxoplasmosis which may contaminate the soil where vegetables are grown.

Deli meats- can be safely eaten if warmed to the point of steaming.

Avoid spilling fluids from raw meat and hotdog packages on other foods, utensils, and food preparation surfaces. In addition, wash hands after handling hot dogs, luncheon meats, delicatessen meats, and raw meat (such as chicken, turkey, seafood, or their juices).

Special Concerns

If you are on a vegetarian diet, be sure you are getting enough protein. You will probably need to take supplements, especially iron, B 12 and Vitamin D.

Lactose Intolerance

During pregnancy, symptoms of lactose intolerance often improve. If you are still having problems after eating or drinking dairy products, remember, calcium can also be found in cheese, yogurt, sardines, certain types of salmon, spinach, and fortified orange juice.

Artificial Sweeteners

These are OK to use but we would recommend limiting to 1-2 serving per day. If you have diabetes, artificial sweeteners are better than sugar to help control your blood sugars. Splenda is preferred over NutraSweet.



Common Questions

When will I feel my baby move?


Sometime between 16-25 weeks of pregnancy, mothers will begin to feel movement. Initially, movements will be infrequent and may feel like butterfly flutters. As your baby grows, you will feel movement more often. It is recommended to start counting fetal movements beginning at 18 weeks once daily until you get 10 movements within two hours. A good time to do this is 20-30 minutes after breakfast or dinner. If you are concerned about movements, eat or drink something with sugar or caffeine, lie on your side, and press your hands on your belly. If you have concerns about feeling baby movements or notice a decrease in movements, contact the office. Note that an active baby is generally reassuring.

Why am I so tired? What's the best sleep position?

It's normal to feel more tired. You may also notice you need more sleep than usual. Try to get at least 8-10 hours per night. Listen to your body. Feel free to sleep in the position most comfortable for you. You may also find it helpful to put pillows behind your back and between your knees to improve comfort. As your pregnancy progresses, use more pillows and frequent position changes to stay comfortable.

Can I travel?

Traveling is safe during pregnancy for uncomplicated pregnancies. After 36 weeks, we recommend staying close to home. When you do travel, be sure to take breaks to stand up/walk around at least every two hours. If traveling by vehicle, wear a seatbelt, positioning it under your abdomen as your baby grows. If you are involved in a car accident, go to the nearest emergency room where you will be directed to labor and delivery for fetal monitoring.





Common Questions (cont.)

Can I use a hot tub?

Using a hot tub is not recommended.

What do I need to know about dental care?

Teeth cleanings and dental x-rays are safe in pregnancy. Your teeth and gums may experience sensitivity throughout the pregnancy. Inform the dentist of your pregnancy and shield your abdomen if x-rays are necessary.

Can I go to the salon for treatments?

Hair treatments such as coloring and permanents can be done after 13 weeks. Manicure and pedicure are fine through pregnancy, but all of these services should be done in well-ventilated areas. Prenatal massages are safe, but salons often require a note from your provider.

Common Questions (cont.)

Can I care for my pets?

If you have cats, avoid changing the litter box or use gloves and a mask when changing it. Toxoplasmosis is a rare infection that you can get from cat feces.

Can I exercise?

Yes! At least 30 minutes of daily exercise is recommended and encouraged in uncomplicated pregnancies. This could include walking, jogging, aerobic classes, yoga, swimming, ect. Weight training is also safe, though it is important to use good form to prevent injury to your joints, which can relax during pregnancy. Listen to your body during exercise and drink plenty of fluids. After 24 weeks, avoid lying flat on your back. Always avoid activities with a high risk of falling or trauma to your belly (e.g., snow skiing, water skiing, kickboxing, horseback riding).

Can I have sex?

You can have sex unless you are having pregnancy complications or sex becomes too uncomfortable. There are times when exercise and sex should be avoided. This includes vaginal bleeding, leaking amniotic fluid, preterm labor, and placenta previa.



Alcohol, Smoking, Drugs, and Medications

Alcohol- there is no safe amount of alcohol you can consume while you are pregnant, we advise avoiding all alcohol during your entire pregnancy. Drinking alcohol can cause birth defects, mental retardation, and abnormal brain development.

Smoking- if you smoke, so does your baby. This is a very important fact of pregnancy. The nicotine in cigarettes can cause contractions in the blood vessels of your baby's umbilical cord and decrease the amount of oxygen available to him or her. Here are some known complications of smoking during pregnancy.

- Low birth rate: babies of mothers who smoke during pregnancy have lower birth weights, which is a leading cause of infant deaths
- Premature rupture of membranes: if your water breaks before 37 weeks of pregnancy, your baby is at risk of problems from a premature delivery. Some issues associated with this are infections, life-long problems with lungs, kidney, or other organs, cerebral palsy, and learning disabilities.
- Sudden Infant Death Syndrome (SIDS): babies whose mothers smoke before or after delivery are at three to four times greater risk of dying from SIDS.

Stillbirth- maternal smoking during pregnancy is a known risk factor for stillbirths.

Drugs- drug use during pregnancy is dangerous for you and your baby. This includes marijuana, heroin, cocaine, methamphetamines ("meth"), and others. These drugs can be harmful to the developing fetal brain and will increase your risk for stillbirth, low birth weight, placental abruption, and mental retardation.

Alcohol, Smoking, Drugs, and Medications (cont.)

Narcotics- occasional use of narcotics during pregnancy can be safe for you and your baby, but frequent or daily use puts the baby at risk for becoming addicted to these medications. Unborn babies that are chronically exposed to narcotics are at risk for developing Neonatal Abstinence Syndrome and must go through withdrawal from these medications in the hospital after delivery.

Medications- many medications are safe to continue during pregnancy, but please discuss ALL medicines you take with your doctor, whether they are prescribed by a physician or obtained over-the-counter.





Contacting Our Office

Please try to contact our office during business hours if at all possible. We are available Monday through Friday, 7:30am - 5:00pm. Prescription refills are never done on weekends or after hours.

If you have questions or concerns about your pregnancy and you do not feel comfortable waiting until your next appointment, you may call our main office number at (931) 245-8100 and leave a message for your nurse. Our nurses make every effort to call patients back throughout the day.

Always call our office if you are experiencing any of the following:

- Fever > 101 degrees
- Decreased fetal movement past 24 weeks of pregnancy
- A headache with vision changes (seeing spots, floaters, etc)
- Light bleeding



Contacting Our Office (cont.)

Go directly to the hospital if you are experiencing any of the following:

- If you are over 36 weeks and think you are in labor; having painful contractions every 5 minutes lasting at least 1 minute for over 1 hour (5-1-1).
- You are less than 36 weeks and having 6 or more contractions in an hour for several hours.
- You are experiencing heavy bleeding/leaking fluid; either a gush or a constant trickle.
- You have had any type of abdominal trauma or a car accident.

Light bleeding and spotting in the first trimester of pregnancy is common. If you are less than 12 weeks and are spotting, please call the office during business hours to be evaluated. If your bleeding becomes heavy (soaking through a maxi pad every hour), please call our office at any time or go to the ER.






Preparing for Labor & Delivery

Our physicians deliver at Tennova Healthcare Clarksville with one physician on-call at all times. Please pre-register at the hospital as this will make admitting you to the hospital smoother. You can pre-register online or in person. You may also schedule a tour of the hospital at your convenience.

Tennova Healthcare Clarksville
651 Dunlop Lane
Clarksville, TN 37040
(931) 502-1000
www.tennovaclarksville.com

Pain Relief

If desired, there are several options to provide pain relief while you are in labor. We are supportive of whatever you choose.

- Narcotics- Pain medication can be given through injection or IV and helps take the edge off strong contractions. It can make you sleepy if given early in labor. We avoid giving this near delivery time.
 - Epidural- This safe and popular option is administered by an anesthetist and requires a fine, thin catheter or tube to be placed in your back during active labor. Medicine slowly drips through the tubing to provide pain relief.
 - Local- Many patients deliver without pain medication. Sometimes we need to give a small injection of numbing medicine for stitches called lidocaine. It feels like a small pinprick.
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Preparing for Labor & Deliver (cont.)

Researching Cord Blood Banking

Your baby's blood is a valuable source of cells that could be used by your baby or another family member to treat some life-threatening disease. It can easily and safely be obtained immediately after delivery. Parents can choose to have their baby's blood saved; however, the decision must be made before birth. Insurance does not generally cover this. If interested, you can order a kit through the various cord blood banking companies and bring it with you to delivery.



Choose a Physician for your Baby

You will need to decide on a physician for your baby (Pediatrician) by the time you deliver. The hospital will send your baby's information and test results to your chosen physician. Your baby is commonly seen within one week after birth. You will need to contact the physician's office prior to delivery and make sure they are accepting your insurance and are taking new patients. We can provide you with a list of doctors if you have trouble locating one.



Preparing for Labor & Deliver (cont.)

Obtain and Install a Car Seat

You must have a car seat installed in your vehicle before taking baby home. By law, children must be in a federally approved, properly installed, crash-tested car seat for every trip in the car beginning with the trip home from the hospital.

Learn More about Breastfeeding

Human milk is perfectly designed nutrition for babies. Babies who are breastfed get fewer infections and are hospitalized less. Mothers that breastfeed burn 500 calories a day which can help lose extra weight and reduce a woman's risk of developing breast cancer. After delivery, the nurses and a lactation specialist are there to help you learn the art of breastfeeding.

Attend Educational Courses

There are educational courses on labor and delivery. Breastfeeding, infant CPR, and baby care are available. Consider these classes especially if you are a first time parent!

Labor & Delivery

When will I know I'm in labor? If you have signs of true labor, or if your water breaks, go to labor and delivery.

True Labor

- Contractions are regular, get closer together, and lasts 40-60 seconds.
- Contractions continue despite movement
- Pain/discomfort usually felt in back and moves around to front
- Contractions steadily increase in strength
- Cervix dilates
- Bloody show may be present

False Labor

- Contractions are irregular, do not get closer together, and last 20-40 seconds.
- Contractions may stop when you walk or rest or may change with change of position pain/discomfort often felt in abdomen.
- Contractions usually are weak and do not get much stronger
- Cervix does not dilate
- Usually no bloody show is present

Cesarean Birth and Recovery.

A Cesarean birth may be planned or unplanned. Your support partner, nurses, anesthesia staff, and your physician will be with you in the operating room. If necessary, a group of neonatal health care providers will also be there with you. Your blood pressure and heart rate/rhythm will be monitored, and a nurse will listen to your baby's heart rate. Your baby will be delivered in a short period of time once surgery begins. Once delivered, it will take approximately 45 minutes to complete surgery. Your incision will be closed with staples or sutures. You will then be moved to the recovery room.

Labor & Delivery (cont.)

Initial Recovery after Cesarean Birth

The immediate recovery period is similar to the recovery period of a vaginal birth. Rest to conserve your strength. You, your baby, and your support partner will remain in the Labor and Delivery Recovery Room for approximately one hour. During this time you and your baby will be monitored closely.

Vaginal Birth after Cesarean (VBAC)

If patients with a history of prior cesarean delivery, we schedule repeat C-sections during the 39th week. Though exceptions are occasionally made. Not all physicians perform VBACs.

Episiotomy/Forceps/ Vacuum

We plan to help you deliver your baby with the least amount of intervention. Episiotomies are not routinely needed and many deliver without the need for any stitches. Sometimes we need to make a small incision at the vaginal opening to help delivery. If you don't have an epidural, we will place local numbing medication to the episiotomy and stitch the area after delivery. The stitches dissolve over time and do not need to be removed. We provide you with medicine to help keep you comfortable after delivery.

We are skilled in the use of vacuum and forceps for deliveries. We will recommend using them only if medically indicated. Our goal is to deliver you baby in the safest manner. There are definitely times when this is the safest way to help your baby into this world.


Postpartum Instructions

1. Make an appointment to see the doctor for a check-up 6 weeks after delivery unless instructed to do so sooner.
2. Refrain from douching, tampons, and swimming until after your postpartum check-up.
3. If you have had a C-section, you may ride in a car but should not drive for at least the first 2 weeks you are at home. If you are still using narcotics beyond 2 weeks, we advise you not to drive.
4. If breastfeeding, continue your prenatal vitamins daily, eat a well balanced diet, and increase your fluid intake to 10-12 glasses of water per day. With any signs or symptoms of a breast infection (fever, flu-like symptoms, pain or redness in the breast) call the office for further instructions.
5. If not breastfeeding, continue to wear a good supportive bra, bind if necessary, use ice packs, take Tylenol for discomfort, and call the office if the problem persists or worsens.





Postpartum Instructions (cont.)

6. Vaginal bleeding may continue for 6-8 weeks while the uterus is involuting back to pre-pregnancy state. You may have spotting and/or menstrual-like flow. Increased activity increases the flow. If bleeding or cramping increases to greater than a period, take two Advil and get off your feet. If bleeding is persistently heavy, call the office for further instructions.
 7. If you have had a C-section, avoid lifting anything heavier than your baby until after your postpartum check-up.
 8. Exercise- avoid sit-ups, jumping jacks, and aerobics until after your postpartum checkup. You may do Kegel exercises and walking.
 9. Constipation is very common. Drink 6-8 glasses of liquids every day. Citrucel, Metamucil, and stool softeners (Colace) may be used. Include food like bran cereal, fresh fruits, and vegetables in your diet. Stool softeners are recommended while taking Percocet or Norco.
 10. Hemorrhoids usually are more symptomatic after delivery. If they are a problem for you, try Preparation H and Tucks pads.
 11. Postpartum blues is sadness, crying, and blues are normal responses to hormonal changes in your body after the baby is born. Please let us know if you need additional assistance or if you are concerned that the blues have turned into depression.
 12. Abstain from intercourse for 6 weeks or longer if your stitches are still painful. Contraception options will be discussed with your doctor at your postpartum visit.
 13. You may climb stairs 2-3 times a day in the first 2 weeks. Too much activity delays episiotomy and incisional healing.
 14. Please call the office if you have a fever or 101 F or greater, swelling, tenderness, or redness in the lower leg.
 15. If you had a cesarean delivery, keep your incision clean with soap and water. Bandage with gauze only if instructed. Call the office if the incision is swollen, red, or has any unusual drainage. Remove and Steri-strips after 10 days.
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Postpartum Instructions (cont.)

16. Showering is permitted in the first 6 weeks after your delivery. If you have had a C-section, however, make sure you dry your incision completely after you finish.
17. It is common to have both legs swell in the first 2 weeks after delivery. Please call the office if one leg is significantly larger than the other or is painful.
18. Call the office for severe headache unrelieved with Tylenol or pain medication or if you have a change in vision or facial swelling.

Postpartum Depression

40-80% of women experience mood changes after their delivery, often referred to as “baby blues.” This most commonly starts 2-3 days after delivery, and usually goes away by 2 weeks. During this time it is important to try to eat properly, get adequate sleep, and reduce stress. Postpartum depression, however, can be more serious, and may require treatment. If you feel you are not bonding or enjoying your baby, you are unable to care for yourself or your baby, or you are feeling excessive sadness, depression, or anxiety, please call our office right away for an appointment. If at any time you have thoughts of hurting yourself or your baby, go seek immediate care at an ER.

We hope this pregnancy handbook has provided you with valuable insights and helpful guidance throughout your journey. At Premier Medical Center, we are committed to offering exceptional care, ensuring you feel supported, informed, and confident every step of the way.

Pregnancy is a unique and personal experience, and our dedicated team of OB/GYN specialists is here to assist with any questions, concerns, or needs you may have. Your health and the health of your baby are our top priorities. Remember, you're not alone in this journey. We're here to help you have a safe, healthy, and positive experience. Don't hesitate to reach out to us for additional support or resources.

Thank you for choosing Premier Medical Center. We look forward to being a part of your exciting and joyful path to parenthood.

