

# When to worry and when to call...

Tips and Answers to Frequently Asked Questions

for Patients of

Marietta OB-Gyn Affiliates, P.A.

(770)422-8505



"WHAT DO YOU MEAN YOU CAN'T HELP MY  
MOM? ISN'T THIS THE DEPARTMENT OF LABOR?"

**BEFORE  
CALLING THE  
DOCTOR,**

If it is an emergency call  
911, if not, please see  
frequently asked  
question on pages 3-4.

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## CHECK LIST OF TESTS, PROCEDURES, VISITS, AND DOCUMENTS DURING YOUR PREGNANCY

Check box	WEEK IN PREGNANCY	TEST/TASK/PROCEDURE TO BE DONE
	Initial OB visit	Prenatal Blood work, Pap smear, Gonorrhea and Chlamydia testing.
	7-8 weeks	Ultrasound to confirm dates (if one has not been done earlier). Needs specific appointment.
	11-15 weeks	Listen for heart tones with Doppler. Make sure you have checked with your insurance provider regarding genetic screening by this visit (cystic fibrosis, cell free DNA, Quad 4) You will be required to sign a consent form accepting or declining these tests at this visit.
	11.1-13.6 weeks	Ultrasound for neural tube defects (NTD). Needs specific appointment.
	15-21 weeks	AFP/Quad Screen (blood draw) This test is time dependent with regard to where you are in your pregnancy and can only be done during these weeks of pregnancy.
	20 weeks	Anatomy ultrasound. Arrange for a tour of the hospital and child birth classes if you are interested in doing them.
	24-28 weeks	One-hour glucose tolerance test (blood draw). Hemoglobin test to check for anemia. If you are planning on Cord Blood banking, this is the time to contact the companies and ask for information.
	28-30 weeks	If you have Medicaid and desire a tubal ligation, you MUST sign consent form at this visit. These forms MUST be signed at least 30 days before delivery to have your tubes tied.
	34 weeks	Hemoglobin check via finger-stick to test for anemia. Consent form review with physician to discuss delivery, circumcision, cord blood banking and sterilization if desired. You should have already obtained a cord-blood-kit if you are planning on cord-blood-banking.
	36 weeks	Group B strep testing (vaginal culture), and pelvic exam to check cervical dilatation. Possible Hemoglobin check via finger-stick.
	38-40 weeks	Pelvic exam to check for cervical dilatation
	41-42 weeks	Induction depending on individual situations and physician recommendation.

**\*Cystic fibrosis, AFP/Quad screen, cell free DNA and nuchal translucency coverage information may be obtained from your insurance company. The approximate costs are: \$800 for CF, \$419 for AFP4. Listed below are the CPT codes that will be billed by the laboratory. Your insurance plan will need them to give you coverage information.**

**CPT code for CFT: 81220.**

**CPT code for AFP only: 82105**

**CPT code for AFP/Quad Screen: 82150, 82677, 84702, 86336**

**CPT codes for First Trimester Screening: 84704, 84163 Plus Nuchal Translucency Ultrasound (billed by our office) 76813**

**CPT code for cell free DNA: 81420**

**Diagnosis Code: Z34.01 First Pregnancy or Z234.81 for history of more than one pregnancy.**

# FREQUENTLY ASKED QUESTIONS

**What do I do about:**

**1. Vomiting?**

This is due to hormonal and emotional changes that occur with pregnancy.

Before rising in the morning, eat a dry cracker, a piece of toast, a handful of dry cereal or a handful of popcorn. Allow extra time for your morning chores and avoid rushing.

Keep a protein and carbohydrate snack (such as peanut butter crackers) near you at all times and eat it every 1-2 hours. Avoid fried, greasy and or spicy foods.

Try small amounts of non-carbonated liquids, should nausea occur between meals. Drink beverages that are either very cold or hot in temperature. Room-temperature drinks can induce more nausea. If you are experiencing abdominal pain or Fever please contact your physician.

**2. Frequent urination?**

This is due to the pressure of the enlarging uterus on the bladder. DO NOT limit fluid intake. If frequency disturbs your sleep, finish taking full amount of liquids your doctor recommends before 7:00 pm. If there is painful urination present, please contact your physician.

**3. Constipation?**

This is due to elevated hormone levels and decreased bowel motility permitting greater absorption of nutrients but resulting in decrease in bulk.

Drink 8-10 glasses of liquid daily (water and unsweetened fruit juices are best).

Eat natural laxative foods and additional roughage (whole grains, fresh and dried prunes and raw vegetables). Exercise daily.

**4. Heartburn (indigestion)?**

This is caused by food that is combined with gastric juices from the stomach flowing backwards from the stomach into the esophagus.

Eat small, frequent meals. Avoid rich, spicy foods and fried foods. Drink fluids BETWEEN meals (preferably prior to them), NOT with meals.

Use two or more pillows to elevate your head and chest when you lie down.

If these methods are not effective, please contact your physician.

**5. Gas?**

This is caused by bacterial action which occurs in the bowel. Chew your foods well. Avoid gas-producing foods, fatty foods and large meals.

**6. Dizziness upon sitting or getting up?**

This is due to a sudden change in blood pressure. Avoid lying flat on your back; left side is preferred.

Assume standing posture SLOWLY.

Avoid standing and sitting for long periods of time.

If these changes do not alleviate your dizziness, please contact your physician.

**7. Varicose veins?**

These are brought on by pressure in the pelvis due to increasing size of uterus compressing veins and preventing blood return from legs.

Avoid restricting clothing.

Elevate legs ABOVE HEART 10 minutes out of each hour. Avoid sitting with legs crossed or sitting or standing without moving for long periods of time.

Wear ted hose.

**8. Hemorrhoids?**

Pressure in the pelvis due to enlarging uterus pressing on veins and preventing return of blood from legs causes hemorrhoids.

Avoid constipation (see above).

Notify physician should pain and bleeding persist.

**9. Breast changes during pregnancy?**

Breast changes are due to hormonal effects. Nipples become erect and dark in color. Breasts increase in size and tenderness. Colostrum becomes present, and pimple-like bumps on areola appear.

Wear comfortable, well-fitting bras. Avoid nipple stimulation and other forms of nipple preparation. Avoid soaps, creams, lotions, etc.

If you have any changes that you are not sure about with regard to your breasts, please have one of our physicians evaluate them.

**10. Increased vaginal discharge?**

It is caused by increased mucus production due to the pregnancy hormones.

Wear cotton panties and change frequently. DO NOT DOUCHE.

Should burning, itching or odor develop, notify physician.

**11. Leg cramps that come and go?**

These are usually caused by increased fluid retention in the tissues of the legs which cause pressure on the nerves and vessels.

DO NOT MASSAGE.

Flex toes toward head and stretch calf muscles. Apply ice if necessary.

Please have physician evaluation if these measures are not effective.

**12. Backache?**

This is caused by the posture of pregnancy along with a shift in the center of gravity.

Use good posture and proper body mechanics.

Do pelvic rock (see page 37 of accompanied Great Expectations booklet).

Avoid tiredness. Exercise regularly.

## **APPROVED OVER-THE-COUNTER MEDICATIONS IN PREGNANCY**

It is best to avoid all medications while pregnant. There may be instances where you wish to use the drugs listed below to alleviate the following conditions. All these medications are safe in breast feeding as well.

### **“HEAD-COLD” – UPPER RESPIRATORY INFECTION:**

This is usually caused by a virus and will last 10-14 days. It does not harm the baby, though it does make you feel uncomfortable. Get plenty of rest. Increase fluids, water, Gatorade, popsicles. Run a cool vaporizer or humidifier. The following over-the-counter drugs may be used:

- \*Sudafed
- \*Robitussin Cough Syrup, Plain or DM
- \*Delsym
- \*Ocean Mist Nasal Spray
- \*Cough drops, gargles, throat spray
- \*Claritin
- \*Zyrtec
- \*Benadryl

### **INDIGESTION OR HEARTBURN**

- \*Maalox
- \*Rolaids or TUMS – These products, even though not harmful to pregnancy, may contribute to anemia because of their high calcium content. Calcium interferes with iron absorptions. So do not use except for occasionally or rarely.
- \*Mylanta
- \*Riopan
- \*Gaviscon
- \*Pepcid AC or Zantac

## **HEADACHE OR FEVER**

\*take 2 Tylenol (extra strength is OK) tablets every 4 hours as needed.

\*Benadryl, Zyrtec, or claritin for sinus discomfort

## **DIARRHEA**

Drink Gatorade to help replace lost liquids. You may take:

\*Donnagel

\*Kaopectate

\*Imodium AD

## **CONSTIPATION**

Include a bran cereal in your diet. Eat high fiber foods such as apples, bananas, lettuce, carrots, cabbage. Drink more liquids, juices, and water.

You may take:

\*Colace

\*Metamucil

\*Surfak

\*Milk of Magnesia

\*Senekot

## **HEMORROIDS**

Try to avoid constipation by eating high fiber foods and drinking 6-8 glasses of fluid daily (preferably water). Soak in warm water 3-4 times daily for 20 minutes for relief.

\*Tucks

\*Anusol suppositories and or cream



**\*Preparation H suppositories or cream**

**\*Medicated tucks**

## **INSOMNIA**

Warm tub bath helps relax muscles and helps your body to relax.

**\*Tylenol PM**

**\*Unisom**

## **YEAST INFECTIONS**

You may use Monistat suppositories and gently insert with your finger for vaginal yeast infections.

**DO NOT TAKE ANY ASPIRIN PRODUCTS, INCLUDING ADVIL, ALEVE, IBUPROFEN, MOTRIN, GOODIES POWDER, ETC WHILE PREGNANT. THEY CAN CAUSE HEART PROBLEMS FOR THE FETUS.**

**YOU CAN USE THESE PRODUCTS POST PARTUM WHEN BREAST-FEEDING.**