

Congratulations on your pregnancy!

Now that you know you're pregnant, you probably have a few questions. The information below provides answers to some commonly asked questions. Often, patients find it helpful to write down their questions prior to their appointments. In addition, many of our patients find it helpful to email their questions in advance so that we can be prepared to discuss them at the next prenatal visit. You may email the Certified Nurse-Midwives – Marianne, Rachel, Nicky, Erin, Karen, Tonya – at NurseMidwife@fertilityandmidwifery.com or Dr. Stroud at DrStroud@fertilityandmidwifery.com, Dr. Stalling at DrStalling@fertilityandmidwifery.com, or Dr. Cly at DrCly@fertilityandmidwifery.com. Please feel free to post questions or comments on our Facebook page (www.facebook.com/stroudobgyn). Most importantly, please know that we are always available to answer any questions you have. During regular business and/or after hours you may reach us at 260-222-7401.

Q: How often will I have appointments?

A: Typically, you will be seen every four weeks at the start of your pregnancy, every two weeks beginning at 28 weeks, and every week beginning at 36 weeks. On your “due date” you will be 40 weeks pregnant. Of course, things may occur during your pregnancy that require you to be seen more frequently.

Q: What does “eating for two” mean?

A: Contrary to popular belief, when you are pregnant, you do not need to eat an extra pint of ice cream every day! The extra calories you need add up to only about an apple and a glass of milk per day. Your diet, when you are “eating for two,” should include healthy, nutritious foods with fresh fruits, vegetables, and good protein sources. Specifics regarding your diet during pregnancy include:

- **Caffeine:** Try to limit yourself to the equivalent of 1-3 cups of coffee per day and remember that most dark colored sodas contain caffeine.
- **Alcohol:** There is no amount that we can say is safe during pregnancy, so it is generally recommended to abstain from all alcohol during your pregnancy.
- **Tobacco products:** It is recommended to abstain from all tobacco products, including smoking, vaping, and chewing, during your pregnancy. If you would like to quit, please talk with your provider so we can recommend tobacco cessation options.
- **Non-prescription/Illegal drugs:** It is recommended to abstain from all non-prescription medications and illegal drugs, including opioids (e.g. Percocet), benzodiazepines (e.g. Xanax), crack/cocaine, methamphetamines, and marijuana, during your pregnancy. If you are struggling with quitting any of these, or others, please talk with your provider so we can recommend abuse and addiction counseling services.
- **Seafood:** Fish and shellfish can contain mercury, a substance that can negatively affect your baby's brain development in high levels. Some types of fish are fine, and others should be avoided completely. For more information, please see the attached handout taken from www.womenshealth.gov. Also, if you eat fish caught in a local body of water, please contact Department of Natural Resources for more information about the mercury content in that area.

Q: I have a cat. Can I keep my cat now that I am pregnant?

A: Yes. You will just need to have someone else change the litter box. Cat stool can have an organism called toxoplasma that can cause birth defects should you become infected during pregnancy. Also keep in mind that if you work in a garden, a cat could be using your garden as a litter box. We suggest wearing gloves while working in the soil during your pregnancy.

Q: How many ultrasound exams will I have during my pregnancy?

A: Ultrasound has become an important of prenatal care. It is standard in our practice to have an ultrasound exam early in the pregnancy (often done at the initial visit) and again at approximately 20 weeks of pregnancy. The purpose of these two exams is to establish the due date of your pregnancy and to evaluate the baby's anatomy – including the gender if you elect to know. In some cases, it is necessary to perform ultrasound exams later in the pregnancy to re-evaluate something detected at the 20-week ultrasound or to make certain the baby is growing properly.

Q: How much weight should I expect to gain during pregnancy?

A: The appropriate amount weight gain depends on several things, but most notably where you begin the pregnancy in relation to your ideal body weight. Generally, slender women should gain 20-35 pounds and overweight women should try to limit their weight gain to 10-20 pounds. If you have twins, your weight gain recommendation will be different. Weight gain and nutrition are topics we will discuss at each of your prenatal visits. Keep in mind that excessive weight gain will not only make you very uncomfortable as the pregnancy progresses, it may also increase the chance that you will require a c-section for delivery.

Q: Before I got pregnant, I exercised and went to the gym regularly. Can I continue exercising during my pregnancy?

A: As long as your pregnancy is uncomplicated, we encourage you to exercise 4-6 days a week at the same or similar level of intensity as you did before pregnancy. You may need to modify the intensity of your exercise as your pregnancy progresses. If you are new to exercise, we encourage you to walk briskly for 30 minutes, at least four times each week. As you gain strength you may find that you are capable of even more. The bottom line: pregnancy and labor are physically demanding, and you need to be at your best in order to have the most positive experience possible. Please feel free at your prenatal visits to ask questions about your specific exercise routine(s).

Q: Where will I deliver my baby?

A: We deliver at both Dupont Hospital and Holy Family Birth Center. At your prenatal visits we can discuss the nuances of each and how one facility over the other may best meet your unique needs based on your birth preferences.

Q: Will I meet other providers at Fertility & Midwifery Care Center during my pregnancy?

A: Yes. In addition to Drs. Stroud, Stalling, or Cly we have Certified Nurse-Midwives: Marianne Stroud, CNM, Rachel Maio, CNM, Nicky Schwanz, CNM, Erin Morris DeFields, CNM, Karen Holdheide, CNM, and Tonya Fenzl, CNM who work in the office and attend births at both Dupont and Holy Family Birth Center. Our patients begin OB care with one of the providers and will see that provider for the first several visits. Then patients begin

alternating between each of the providers visit-by-visit so that by the end of the pregnancy, you feel very comfortable with all providers. We work as an integrated team of obstetricians and certified Nurse-Midwives. Drs. Stroud, Stalling, or Cly are always on-call and are responsible for all our births. Often, one of the Nurse-Midwives is on-call in addition to Drs. Stroud, Stalling, or Cly.

Q: How often should I feel my baby move during pregnancy?

A: In general, after around the 20th week of pregnancy women, begin to feel regular movements – although there are many things that can affect how often women feel their baby move. As the pregnancy progresses, you should feel the baby more regularly. As a rule, you should feel the baby move about 10-12 times over the course of an average day. If, at the end of a day, you do not feel your baby has moved 10-12 times you may do a simple, “Movement test,” by drinking something cold and/or sweet and then lying down on your left side. During the hour following the drink, the baby should move 4 times. If he/she does not, then call us.

Q: Is it safe to use a tanning bed during pregnancy?

A: Pregnancy can sensitize your skin to the effects of the sun in much the same way as several medications can. As a result, it may be much easier to sunburn during pregnancy. With respect to tanning salons specifically, there is nothing unique about the ultraviolet radiation produced and therefore the same pregnancy precautions apply regarding the likelihood of sunburn. Please understand, we are not suggesting it is safe to visit the tanning salon during pregnancy. Rather, we are pointing out that the risks are the same regardless the source of the ultraviolet radiation. Indoor tanning is no less safe during pregnancy than any other time. Visiting the beach and visiting your tanning salon are the same: they both pose significant risks of skin damage and cancer.

Q: What is the “AFP” test I’ve heard about?

A: After 14 weeks we will offer you an optional blood test that assesses your relative risk for certain chromosomal abnormalities such as Down’s syndrome and birth defects such as Spina bifida. The test is called the “**Quad screen**” because it tests for four (4) chemical markers in the blood and it is offered at 14 and 21 weeks of pregnancy. It is important to understand that the Quad test only assesses your *risk* of having a child with an abnormality; it does not provide a definite “yes” or “no.” If the results of your test suggest an increased risk for a specific abnormality, we will discuss your options regarding further testing to determine if that abnormality is present. Most importantly, the Quad screen is completely optional and many of our patients elect not to have the test performed because they feel the information gained from the test will not be beneficial. We will discuss this at length during your prenatal visits and help you come to the decision that is right for you and your family.

Q: What other tests will I be offered during the pregnancy?

A: We will discuss an optional blood test to determine if you have the genetic mutation responsible for cystic fibrosis. If you test positive for the mutation, it is possible that your baby will have cystic fibrosis if his/her father also has the mutation. Like the Quad screen, this test is completely optional, and we will discuss it in detail during your prenatal visits. We recommend that all our patients undergo a glucose tolerance test at approximately twenty-eight weeks of pregnancy to determine if you have a special form of diabetes induced by pregnancy called gestational diabetes. This involves drinking a glucose-containing solution and having your blood drawn afterwards. We will also discuss your family history of certain cancers to determine if you are a candidate for genetic testing related to that history.

Q: Should I wear a seatbelt while I'm pregnant?

A: Yes, absolutely wear your seatbelt during pregnancy. It should fit tightly and low across your hips.

Q: Are there restrictions on travel during pregnancy?

A: For most women, traveling is safe during pregnancy; however, there are a few things to consider. In general, the best time to travel is during the middle weeks of your pregnancy (14-28 weeks). When traveling by car, remember to wear your seatbelt tight and low around your hips. You should get out of the car and walk around frequently to prevent the formation of blood clots in your legs which could have serious consequences. For healthy pregnant women, travel by commercial airline is almost always safe. You should check with your specific airline about any restrictions on travel during pregnancy as there are some carriers that have specific restrictions on travel by pregnant women and others require a letter from a physician clearing a woman for travel.

While pregnant, you should avoid travel to areas of the world where there is risk of malaria, including Africa, Central and South America, and Asia. If you must travel to these areas, you will need to take an antimalarial drug such as chloroquine or mefloquine. While traveling outside the U.S., you must be particularly careful to avoid foods that cause traveler's diarrhea such as unbottled water, fresh vegetables, ice made from unboiled water, and raw or undercooked meats.

There is no reason to avoid travel during your pregnancy as long as you are not having complications. We should discuss your travel plans early and often during the pregnancy.

Q: Is it safe to have sex during pregnancy?

A: If you are not experiencing cramping suggestive of uterine contractions or vaginal bleeding it is generally safe to engage in sexual activity. There are a few exceptions to this guideline that involve special conditions with the placenta which we would discuss with you, if applicable.

Q: Is it safe to keep working during my pregnancy?

A: With very few exceptions, it is safe to continue working throughout the course of your pregnancy. Depending on the nature of your job, you may find that fatigue limits your ability to work your usual schedule in the latter stages of the pregnancy. Every patient and every pregnancy are different. We will talk with you about your specific activity level as your pregnancy progresses.

We look forward to caring for you during this most exciting time in your life. Again, always feel free to contact us with any questions or concerns that may arise.