

Congratulations!



Notes

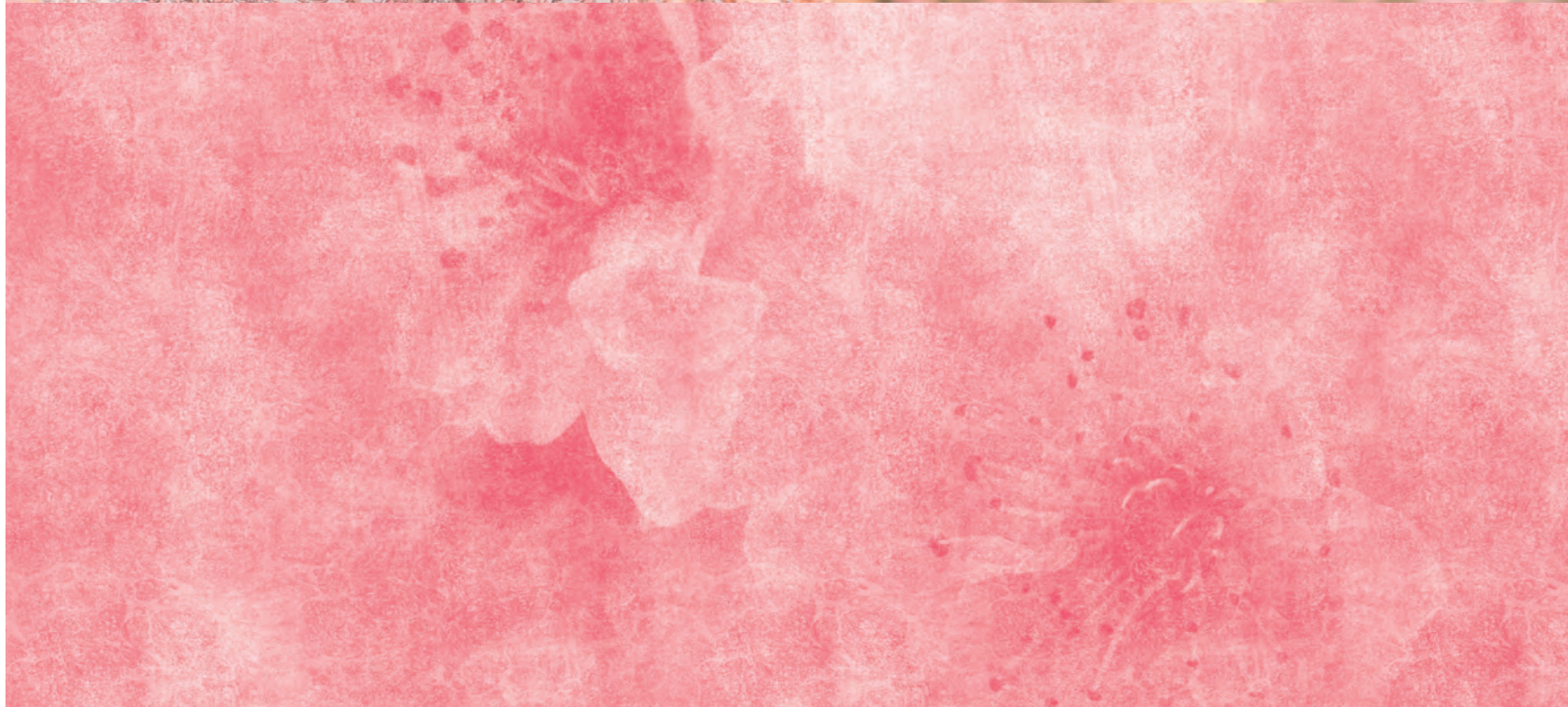
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Wc *The Women's Center*



Your Guide to
Pregnancy

(407) 857-2502
www.wcorlando.com



Postpartum Instructions

1. Make an appointment to see the doctor for a check-up following your provider's instructions.
2. Refrain from douching, using tampons and swimming until after your 6 week post-partum check-up.
3. Please call the office if you have a fever of 100.4°F or greater, swelling, tenderness or redness in the lower leg, chest pain or shortness of breath. If you experience severe pain, redness or swelling at your incision site, notify your provider.
4. Vaginal bleeding may continue for 6-8 weeks while the uterus contracts back to its 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, please visit our website at: wcorlando.com to schedule an appointment. If bleeding is persistently heavy, call the office for further instructions.
5. Avoid lifting anything heavier than your baby until after your post-partum check-up.
6. Exercise - Avoid sit-ups, jumping jacks and aerobics until after your post-partum check-up.
You may do simple abdominal tightening exercises, kegel exercises, and walking.
7. Constipation is very common. Drink 6-8 glasses of water each day. Citrucel, Metamucil, Miralax, 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 Vicodin.
8. Please use over-the-counter Tucks pads or hemorrhoid cream. If they are still a problem, we can prescribe medication to relieve symptoms.
9. Abstain from intercourse until evaluation at your 6 week postpartum check-up. Contraception options may be discussed with your provider at your check-up.
10. 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 any steristrips after 10 days. If you have dermabond/glue on your incision, you may use Vaseline to remove the glue after 2 weeks. Avoid baths until evaluation at your 2 week postpartum visit. Showers are ok. Pat dry incision.
11. Tub bathing and showering are permitted following vaginal births.
12. Follow up with your dietician if you have any questions regarding weight loss, breastfeeding, etc.

Postpartum Blues and Depression

40-80% of women experience mood changes after their delivery. Post-partum blues, sadness, crying are normal responses to hormonal changes in your body after the baby is born. This most commonly starts 2-3 days after delivery and usually goes away by 2 weeks. It is important to eat properly, get adequate sleep and reduce stress during this time to help with the symptoms. Sometimes the symptoms require treatment especially if mom is not bonding or enjoying her baby; unable to care for herself or the baby; feeling excessive sadness, depression or anxiety. Please schedule an appointment if you feel a problem is occurring. We are known for our compassionate care and have effective treatments for postpartum depression.

Breast Issues

- 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) please visit our website at: wcorlando.com to schedule an appointment.
- If not breastfeeding, continue to wear a good supportive bra, bind if necessary, use ice packs, cabbage leaves for engorgement, take Acetaminophen or Ibuprofen for discomfort, please visit our website at: wcorlando.com to schedule an appointment if the problem persists or worsens.
- Mastitis is a breast infection that can be very serious if not treated. Symptoms include; severe breast pain, red streaks, fever and body aches. If you develop these symptoms call your doctors office right away.
- For engorged breasts or clogged ducts apply warm moist compresses, massage your breasts, continue to breastfeed or pump. If symptoms persist, please visit our website at: wcorlando.com to schedule an appointment.

Appointment Schedule

Your first new OB visit

When you come to the office for your first visit, we ask that you bring your medical history forms and other registration materials completed. During this visit, you will have a physical exam. There will also be a series of prenatal labs that will test your blood type and blood count for infections (syphilis, hepatitis B and C, HIV and rubella). Your provider may also screen you for immunity to Varicella (Chicken Pox virus) if applicable. All of the results will be reviewed with you at your next appointment. HIV testing is recommended for all pregnant women to provide the best care for you and your baby.

After your first visit

Between now and 28 weeks, we would like you to schedule a visit every four weeks. We will perform a dating ultrasound during your first trimester and a second ultrasound around 20 weeks to check the anatomy of your baby. Around 28-30 weeks, your visits will increase to every two weeks, then once a week after 36 weeks until delivery. 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 fetal heartbeat checked. Several additional tests are done at scheduled markers throughout your pregnancy.

These include:

Anemia and gestational diabetes screening - this screening is performed at the office between 28-30 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. You do not need to fast.

Vaginal culture for group B strep - this swab of your vaginal area is performed at approximately 36 weeks. Group B strep is a normal bacteria that is naturally found in the vagina and is not harmful to women or a developing fetus. However it can be harmful to your infant if exposed at time of delivery. If you test positive for this bacteria, you will receive antibiotics during labor and delivery.

BPP (Biophysical Profile) or NST (Non Stress Testing) - Towards the end of your pregnancy your providers may request this testing to evaluate the movement of your baby.

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. Please discuss with your provider.

Carrier Screening - this blood screening test will determine if you are a gene carrier for Cystic Fibrosis. Patients who are of Ashkenazi Jewish descent or other ethnicities, may be screened for additional diseases.

Integrated Screening - combines first and second trimester blood test results with nuchal translucency (NT) ultrasound results. This is a two-part test that screens for fetal Down Syndrome, Trisomy 18 and open neural tube defects.

Second-Trimester Serum Screening (AFP-4) - this is a blood test that screens for spina bifida, Down Syndrome and Trisomy 18. This blood test is performed between 15-20 weeks.

Prenatal Genetic Testing - if you and your provider determine additional screening is needed, tests available include Cell Free DNA Testing (NIPS), CVS or amniocentesis.

Routine Testing/Preventative Care

Ultrasounds

We recommend an ultrasound around 20 weeks in the 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. Ultrasounds will be performed in the office.

The Rh factor

We will test your blood for the Rh factor. If your blood type is Rh negative, then you may be at risk for Rh disease, which affects about 10% of people. Rh disease is a pregnancy complication in which your immune system attacks the baby's blood and can result in a life threatening situation for the baby if left untreated. Fortunately, it can be prevented with an injection called Rhogam which is given at 28 weeks or anytime if vaginal bleeding occurs. If you are Rh negative, contact our office immediately if you develop bleeding or trauma to your belly.

Vaccinations

Flu Shots - The Centers for Disease Control (CDC) recommend that pregnant women receive a flu shot if pregnant during flu season. Although a flu shot can be given at any time during pregnancy, it is best to get vaccinated as soon as possible. Family members and caregivers should also get a flu shot to further protect your baby. Flu vaccines are safe for pregnant women as determined by American Congress of Obstetricians and Gynecologists and the preservatives used in some vaccines will not harm you or your baby. The only flu vaccine that you should avoid is the nasal spray because it contains the live flu virus.

Tdap - This vaccine protects you and your baby from tetanus, diphtheria and pertussis (whooping cough). Pertussis is a highly contagious disease that causes severe coughing and can be life-threatening to newborn babies. Babies under two months old are not able to get the vaccine so it is also important that family members and caregivers get vaccinated at least two weeks prior to contact with your newborn baby. It is recommended that all pregnant women get the Tdap vaccine during the third trimester (between 27 and 36 weeks).

Many women have concerns about the safety of vaccines and breastfeeding. It is not only safe to breastfeed after getting vaccinated, but helpful to the baby because your antibodies can be passed through the breast milk which can further protect your baby from getting sick. It is important to discuss with your healthcare provider what, if any, vaccinations you have had before conception. Your provider will then determine which vaccines you will need based on your medical history and lifestyle. For more information, visit www.immunizationforwomen.org, www.cdc.gov, and www.flu.gov.

Prenatal vitamins

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

Let's connect on the **Patient Portal!**

Follow these steps to sign up:

- 1** Visit our website: www.wcorlando.com
- 2** Click the "Patient Portal" button near the top
- 3** On the "Don't Have an Account?" line under the login button, click the "sign up" link and follow the steps

Once Registered and Logged on you will be able to:

- Exchange messages with our practice
- Review and pay billing statements
- Request appointments
- Research health topics
- Review Personal Health Information
- Complete and update medical forms
- Update your profile and contact information

Common Symptoms of Pregnancy

Nausea/Vomiting - feeling nauseous during the first three months of pregnancy is very common. For some women, it 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 and increase your daily water intake. 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. Safe medications include: Vitamin B6, 10 to 25 mg and Unisom 1/2 tablet every 6 to 8 hours. If the symptoms become severe or you are unable to keep fluids down without vomiting for more than 12 hours, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

Discharge - an increase in vaginal discharge that is white and milky is common in pregnancy. If the discharge is watery or has a foul odor, visit our website at: wcorlando.com to schedule an appointment on-line.

Spotting - light bleeding can be common, especially in the first 12 weeks of pregnancy. It may occur after intercourse, cervical exams, vaginal ultrasounds or strenuous activity or exercise. If the bleeding is heavy or is accompanied by pain, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

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 fruit, vegetables and plenty of water. There are also safe over-the-counter medications. If you develop hemorrhoids, try sitz baths three to four times per day for 10-15 minutes each time. If the pain persists, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

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 for more than 5 hours after trying these measures, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

Leg cramps – cramping in your legs or feet can be common. Eating more magnesium rich foods, such as whole grains, beans, dried fruits, nuts and seeds may help. Also, stretching, hydrating, wearing proper footwear, staying active and applying warm compresses will also help.

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. If symptoms persist, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

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/salt. Supportive stockings can also help. If the swelling comes on rapidly, or is accompanied by headache or visual changes, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

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 treat backaches with ice or heat. Acetaminophen may be taken for all aches and pains.

Safe Medications

During pregnancy, women can be more susceptible to ailments like cold, flu and other conditions. Only certain medications are safe during pregnancy. The following are considered safe. Follow the labels for dosage and directions. Contact the office with questions.

Acne Benzoyl Peroxide Clindamycin Topical Erythromycin Salicylic Acid Avoid: Accutane Retin-A Tetracycline Minocycline	Antibiotics Cecloer Cephalosporins E-mycins Keflex Macrobid Penicillin Zithromax Avoid: Cipro Tetracycline Minocycline Levaquin	Colds/Allergies Benadryl, Claritin, Zyrtec Chlor-Trimeton, Dimetapp Drixoral-Non-Drowsy Mucinex (guaifenesin) Sudafed**/Sudafed-12 Hour** Sudafed PE Phenylephrine HCL** Tylenol Cold & Sinus** Vicks Vapor Rub **AVOID if problems with blood pressure and only allowed after 12 weeks
Constipation Colace, Miralax, Senokot Dulcolax Suppository Fibercon, Metamucil Perdium	Cough Actifed, Sudafed Cough Drops Robitussin (plain & DM)	Crab/Lice RID Avoid: Kwell
Gas Gas-X Mylicon Phazyme	Headaches Cold Compress Tylenol (regular or extra strength) Acetaminophen	Heartburn (Avoid lying down for at least 1 hour after meals) Aciphex, Maalox, Mylanta, Pepcid, Milk of Magnesia Pepcid Complete Prevacid, Prilosec, Rolaids Tums (limit 4/day)
Hemorrhoids Anusol/Anusol H.C. (RX: Analapram 2.5%) Hydrocortisone OTC Preparation H, Tucks Vaseline lotion applied to tissue	Herpes Acyclovir Famvir Valtrex	Leg Cramps Benadryl Caltrate, Citracal, Tums, Viactiv, Oscal 500 Magnesium Oxide 400mg nightly Stay Hydrated
Nasal Spray Saline Nasal Spray	Nausea Vitamin B6 10-25mg every 6-8 hours Unisom 25 mg tablets 1/2 tab every 6-8 hours (take with Vitamin B6) Dramamine, Emetrol Ginger Root 250mg 4 times daily High complex carbs @ bedtime Sea Bands - Acupressure	Pain Tylenol Lortab**, Percocet** Tramadol**, Tylenol 3** Ultram**, Vicodin** **Narcotic medications should only be used when prescribed for a legitimate medical problem by a doctor for a short period of time. Avoid NSAIDS (Ibuprofen, Advil, etc.)
Rash Benadryl 1% Hydrocortisone Cream	Sleep Aids Benadryl Chamomile Tea Unisom, Tylenol PM Warm milk-add vanilla/sugar for flavor	Throat Cepacol Cepastat Salt Water Gargle w/ warm water Throat Lozenges
Tooth Pain Orajel	Yeast Infection Gyne-Lotrimin, Monistat-3 or 7 Terazol-3 or 7 Mycelex Avoid 1 day creams	Prenatal Vitamins Any over the counter prenatal vitamins. DHA – is an optional addition to your prenatal vitamin and can be obtained in a separate pill. DHA can be found in fish oil, some plant based vitamins and Expecta DHA.

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 of small for gestational age births 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. 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 are as follows:

Underweight women (BMI less than 20): 30-40 lb

Normal weight women (BMI 20-25): 25-35 lb

Overweight women (BMI 26-29): 15-25 lb

Obese women (BMI >29): 11-20 lb

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 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.

Hydration

Adequate hydration is essential to healthy pregnancy, as a woman accumulates 6 to 9 L of water during gestation. The total water Adequate Intake for pregnancy (including drinking water, beverages and food) is 3 L/day. This includes approximately 2.3 L (approximately 10 cups) as total beverages.

Physical Activity

Physical activity during pregnancy benefits a woman's overall health. In a pregnancy with no complications moderate to intense physical activity is recommended. Even walking 30 minutes a day can help reduce complications such as preeclampsia and gestational diabetes, especially for women who started their pregnancy at a higher weight.

Key Nutrients During Pregnancy

Nutrient	Reason for Importance	Sources
Calcium (1000 mg)	Helps build strong bones and teeth	Milk, Cheese, Yogurt, Sardines
Iron (27 mg)	Helps create the red blood cells that deliver oxygen to the baby and also prevents fatigue	Lean Red Meat, Dried Beans and Peas, Iron-Fortified Cereals
Vitamin A (770 mcg)	Forms healthy skin, helps eyesight, helps with bone growth	Carrots, Dark Leafy Greens, Sweet Potatoes
Vitamin C (85 mg)	Promotes healthy gums, teeth, and bones. Helps your body absorb iron.	Oranges, Melon and Strawberries
Vitamin B6 (1.9 mg)	Helps form red blood cells, helps body use protein, fat and carbohydrates	Beef, Liver, Pork, Ham, Whole Grain Cereals, Bananas
Vitamin B12 (2.6 mcg)	Maintains nervous system, needed to form red blood cells	Liver, Meat, Fish, Poultry, Milk (only found in animal foods, vegetarians should take a supplement)
Folate (600 mcg)	Needed to produce blood and protein, helps some enzymes	Green Leafy Vegetables, Liver, Orange Juice, Legumes and Nuts
Omega 3	Necessary for healthy brain development. Fish oils have been shown to extend the length of the pregnancy	Fatty fish low in mercury (limit to twice per week), Walnuts, Canola oil, Flax Seeds
Vitamin D (600 IU)	Needed for organ development and development of strong bones	Fatty fish low in mercury, Cod-liver oil, Fortified Milk, Egg Yolk, Other fortified foods as well as sunlight
Fiber (28 g)	Provides adequate nutrition for the baby, reduces complications, and decreases constipation	Whole grains such as oats, wheat, barley, brown rice; and all fruit and vegetables

Foods to Avoid in 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. *Albacore tuna has more mercury than other tuna.

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 foods 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.

Caffeine - Limit caffeine to less than 200 mg per day (equal to about 2 small cups of coffee or a few sodas) Excessive caffeine may cause increased heart rate, increased blood pressure and dehydration which are not recommended in pregnancy.

Trans Fat and Saturated Fat - can be found in processed food, baked goods, high fat cheeses and meats, coconut oil, bacon, stick butter and margarine, creamers, and sour cream. These fats can inhibit healthy development of the brain and other organs.

Sugar Sweetened Drinks - such as sodas, iced teas, juices, fruit drinks, energy drinks and sports drinks should be limited during pregnancy. These drinks contain no nutritional value and are a source of added sugars.

Unwashed vegetables - Wash all vegetables well to avoid exposure to toxoplasmosis which may contaminate the soil where vegetables are grown.

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 or seafood or their juices.)

Special concerns

Vegetarian diet

Be sure you are getting enough protein. 20-30 % of your diet should be protein. Also be sure to get enough B vitamins in your diet. Discuss options with your provider.

Lactose intolerance

During pregnancy, symptoms of lactose intolerance often improve. If you are still having problems after eating or drinking dairy products, talk with us. We may prescribe calcium supplements if you cannot get enough calcium from other foods. 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 it to 1-2 servings per day. If you have diabetes, the artificial sweeteners are better than sugar to help control your blood sugars.



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 28 weeks once daily until you get 10 movements within 2 hours. A good time to do this is 20-30 minutes after breakfast and dinner. If you are concerned about movement, 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, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation.

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.

Try to sleep on your side to allow for maximum blood flow to baby. Lying on your back can cause your blood pressure to drop. You may also find it helpful to put a pillow 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 use a Jacuzzi?

Using a Jacuzzi or whirlpool bath is not recommended during the first trimester and should be limited to 15 minutes or less in the second and third trimester with the water temperature not exceeding 100 degrees.

Can I travel?

Traveling is safe during pregnancy for uncomplicated pregnancies. Around 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 and stay well hydrated. If traveling by vehicle, wear a seat belt, positioning it under your abdomen as your baby grows. If you are involved in a car accident, please seek immediate emergency care and call the office immediately. You may need to be monitored. Always have access to your medical records while traveling.

Can I care for my pets?

If you have cats, please let us know. Avoid changing the litter box, but if necessary, use gloves to change it. Toxoplasmosis is a rare infection that you can get from cat feces.

What do I need to know about dental care?

Dental care is very important 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. Contact our office with any questions about dental care. A letter authorizing treatment can be faxed to your dentist.

Can I go to the salon for treatments?

Hair coloring and nail care should always be done in large, well-ventilated areas. There are no studies to definitely say it is safe, some suggestions if necessary are to highlight instead of a full color, use vegetable-based color instead of harsh chemicals, and use gloves if coloring at home.

Can I exercise?

30 minutes of exercise is recommended daily in uncomplicated pregnancies. This could include walking, jogging, biking, aerobic class, yoga, swimming, etc. Weight training is acceptable. Listen to your body during exercise and drink plenty of fluids. After 20 weeks, avoid lying flat on your back and avoid activities with a high risk of falling or trauma to your belly (i.e. snow skiing, kickboxing, horseback riding).

Can I have sex?

You can have sex unless you are having complications or sex becomes too uncomfortable. There are some medical reasons that your provider may request that you abstain from sex, these include: unexplained vaginal bleeding, leaking amniotic fluid, cervical incompetence, placental issues, history of preterm birth or carrying multiples.

What is FMLA?

Family and Medical Leave Act (FMLA) protects an employee's job, seniority and your employer-provided health insurance for 12 weeks unpaid to address your own medical issues related to pregnancy, childbirth and recovery or to care for your new baby. This may be taken all at once or in increments if needed due to complications. If you have paperwork that needs to be filled out by your provider there may be a nominal fee.

Zika Virus and Pregnancy

Zika virus spreads to people primarily through the bite of an infected *Aedes* species mosquito. People can also get Zika through sex with a partner infected with Zika and it can be spread from a pregnant woman to her fetus.

Zika during pregnancy has been associated with birth defects, specifically microcephaly (abnormal smallness of the head associated with incomplete brain development). Transmission of Zika to the fetus has been documented in all trimesters. The rate of transmission from the mother to her unborn child and the rate with which infected experience complications is still largely unknown. The absence of this important information makes management and decision making difficult. Currently, there is no vaccine or treatment for this infection.

How to prevent Zika:

1. Avoid travel to an area with Zika.
 - Avoid travel to any area where Zika virus is spreading. Visit www.cdc.gov/zika/geo to see the current list of impacted regions including the status of local transmission in Florida and the U.S.
2. Prevent mosquito bites.
 - Cover exposed skin; wear long-sleeved shirts and long pants
 - Stay in places with air conditioning and window and door screens to keep mosquitoes outside.
 - Use EPA-approved bug spray with DEET, picaridin, IR3535, or oil of lemon eucalyptus or para-menthane-diol. It is safe for pregnant or nursing women to use EPA-approved repellants if applied following the package instructions.
 - Treat clothing with permethrin or wear pre-treated items.
3. Prevent sexual transmission.
 - For patients that live in an area affected by Zika, have traveled or have a partner who has traveled to an area with Zika use a condom every time you have vaginal, anal or oral sex during pregnancy or don't have sex during pregnancy.
4. See your healthcare provider to discuss possible need for screening if:
 - You already traveled to an area where Zika virus is spreading. Visit www.cdc.gov/zika/geo to see the current list of impacted regions.
 - You are currently experiencing symptoms. Symptoms include fever, rash, joint pain, and red eyes.
 - You have had unprotected sex with a partner who has symptoms of Zika or has traveled to an area where Zika virus is spreading.

Talk to your health care provider if you have any questions. For additional information, visit www.cdc.gov/zika.



Alcohol, Smoking and Drug Abuse

There is no safe amount of alcohol so we recommend avoiding all alcohol during pregnancy. Drinking alcohol can cause birth defects, mental retardation and abnormal brain development.

If you smoke or abuse drugs, including marijuana, so does your baby. This is a very important fact of pregnancy and breastfeeding. Here are some known complications from smoking during pregnancy:

- **Low birth weight baby:** Low birth weight can be caused by prematurity (birth less than 37 weeks), poor growth, or a combination of both. Prematurity is increased in pregnant smokers and is the number one cause of neonatal death and chronic illness in babies. Problems such as cerebral palsy, life-long lung, kidney, or other organ problems, mental retardation and learning disabilities are much more common in premature and low birth weight babies.
- **Placenta previa:** Low-lying placenta that covers part or all of the opening to the uterus. Placenta previa blocks the exit of the baby from the uterus causing the mother to bleed.
- **Placental abruption:** The placenta tears away from the uterus causing the mother to bleed.
- **Preterm premature rupture of membranes:** The water breaks before 37 weeks of pregnancy, which is associated with an increase of preterm and low birth weight births.
- **Stillbirth:** The fetus has died in the uterus.
- **SIDS:** (Sudden Infant Death Syndrome)

Ways to Quit Smoking

No matter what your approach to quitting, a conversation with us can make the difference between success and failure. Quitting cold turkey is a great way. If you want to try a quitting aid such as a nicotine patch, gum, or the medication Zyban or Wellbutrin, we can help you choose a method right for you.

The March of Dimes recommends women stop smoking prior to becoming pregnant and remain smoke-free throughout pregnancy and once the baby is born. The more a pregnant woman smokes the greater the risk to her baby. However, if a woman stops smoking by the end of her first trimester (first three months), she is no more likely to have a low birth weight baby than a woman who never smoked. Even if a woman is not able to stop smoking during her first or second trimester, stopping during the third trimester (the last three months) can improve her baby's growth.

The effects smoking has on your baby continue when you take him/her home. Children exposed to smoke in the home have higher levels of lung problems such as asthma, pneumonia, or bronchitis. They also suffer from more ear infections than children not exposed to smoke. Even more troubling is the increased incidence of Sudden Infant Death Syndrome (SIDS) found in children exposed to smoking in the home. A child exposed to smoking in the home during the first few years of life are at an increased risk of developing asthma.

Florida Quitline: 877-U-CAN-NOW or 877-822-6669

TobaccoFreeFlorida.com - free services, tools & tips to help stop smoking

Domestic Violence

Love is caring, trusting, secure, accepting. Love is not controlling what you do, who you see or where you go, stopping you from seeing your family and friends, shoving, slapping, choking, hitting, intimidating, or threatening you with weapons. If you are a victim of domestic violence, tell a trusted friend, coworker or neighbor about your situation. Hide a bag at a neighbor or friend's house with keys, identification, money and copies of important documents. Have a phone accessible at all times and know which numbers to call for help. Call the National Domestic Violence Hotline for help at 1-800-799-SAFE (7233) or go to www.theHotline.org, Anonymous and Confidential help 24/7.

When to Call the Doctor

If you experience any of the following, please visit our website at: wcorlando.com to schedule an appointment or go to your local emergency room for evaluation:

- Continuous leaking or a gush of fluid that is not urine (water broken)
- Abdominal trauma or car accident
- Heavy bleeding
- Fever greater than 100.4°
- Decreased fetal movement
- Urinary tract infection
- Headache with vision changes
- Painful contractions greater than 5 times an hour if less than 36 weeks



Preparing for Labor and Delivery

Pre-register with hospital

We are affiliated with the hospital(s) listed on the back of the insert located in the front pocket of this booklet. One of our providers is on-call at all times. You will be provided a registration packet from the hospital. Please register before you are in labor as this will make admitting you to the hospital smoother. You may schedule a tour of the birthing suites at your convenience.

Preparation for Labor

If you have a birth plan, please share it with your provider. If desired, there are several options to provide pain relief while you are in labor. We are supportive of whatever you choose.

Nubaine (Stadol) - This narcotic is 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 throughout labor. It is removed after delivery.

Local Anesthesia - 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.

Nitrous Oxide - Pain management option using a mask that goes over your mouth. May be available depending on the hospital.

Research 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 diseases. 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 from the company you chose for cord blood banking and bring it with you to delivery. In some cases, cord blood can be donated. Ask your provider for information.

Attend educational courses

There are educational courses on labor and delivery, breastfeeding, infant CPR and baby care available. Consider these classes especially if you are a first time parent! Please ask the office for details.

Choose a Pediatrician for your baby

You will need to decide on a doctor for your baby by the time you deliver. The hospital will send your baby's information and test results to your chosen doctor. Your baby is commonly seen within 1 week after birth. You will need to contact the doctor'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.

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. Your insurance may cover a breast pump for you at no charge, you should contact your insurance company for instructions.

Consider circumcision

A circumcision is the removal of excess foreskin from the penis of baby boys. Please let your provider know if you would like to schedule. We respect your choice if you decide not to.

Labor and Delivery

When will I know I'm in labor?

The chart below will help determine if you are in labor. If you have signs of **true labor**, go to your hospital. If your water breaks, report to labor and delivery **immediately**, day or night.

True Labor	False Labor
Contractions are regular, get closer together and last 40 to 60 seconds.	Contractions are irregular, do not get closer together and last 20 to 40 seconds.
Contractions continue despite movement.	Contractions may stop when you walk or rest or may change with change of position.
Pain/discomfort usually felt in back and moves around to front.	Pain/discomfort often felt in abdomen.
Contractions steadily increase in strength.	Contractions usually are weak and do not get much stronger.
Bloody show may be present.	Usually no bloody show is present.

Induction

Your due date is considered 40 weeks. Anticipate delivery sometime before or after your due date. We recommend additional testing for your baby after your due date. We induce labor in your 41st week or sooner if there are concerns. Induction is a process where we give medication to stimulate contractions. It can take more than 24 hours to work and can increase cesarean delivery, especially if it is your first baby. It is important to allow your baby to fully grow and develop before we schedule a delivery.

Cesarean birth and recovery

A Cesarean birth may be planned or unplanned. Nurses, anesthesia staff and your physician and possibly a midwife will be with you in the operating room. If necessary, a group of neonatal health care providers also will be with you and the person you choose. 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 45-60 minutes to complete surgery. Your incision will be closed with staples or sutures. You will then be moved to the Recovery Room.

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 two hours. During this time you and your baby will be monitored closely.

Vaginal birth after cesarean (VBAC)

If you have had a Cesarean delivery in a previous pregnancy and are now preparing for the birth of another child, discuss the option to deliver vaginally with your provider. We do not offer this service.

Episiotomy/forceps/vacuum

We plan to help you deliver your baby with the least amount of trauma. 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 deliver. We make sure you are numb if you don't have an epidural, and will stitch the area after delivery. The stitches dissolve over time and do not need to be removed. We provide you with medicine to keep you comfortable after delivery.

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

Locations & Hospitals

Locations

Main Phone: 407-857-2502

Fax: 407-857-1855

Delivering Hospitals:

AdventHealth Celebration

400 Celebration Place | Kissimmee, FL 34747

HCA Florida Osceola Hospital

700 W Oak Street | Kissimmee, FL 34741

Winnie Palmer Hospital

83 W Miller Street | Orlando, FL 32806

AdventHealth for Women

601 E Rollins Street | Orlando, FL 32803

UCF Lake Nona Hospital - HCA Florida Healthcare

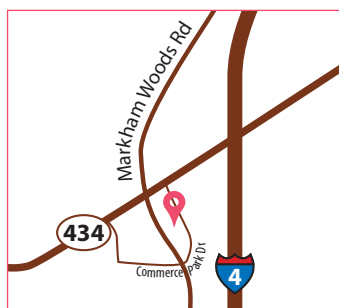
6700 Lake Nona Boulevard | Orlando, FL 32827

Oviedo Medical Center - HCA Florida Healthcare

8300 Red Bug Lake Road | Oviedo, FL 32765

AdventHealth Winter Park

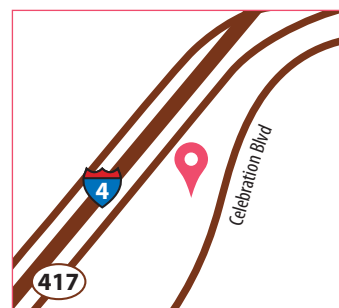
200 N Lakemont Avenue | Winter Park, FL 32792



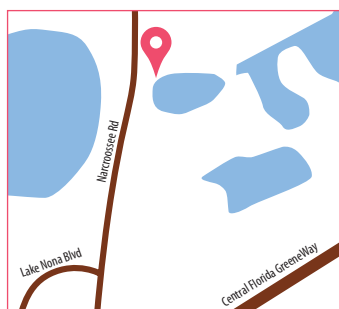
Altamonte Springs, FL
1188 Commerce Park Drive, Unit 3001
Altamonte Springs, FL 32714



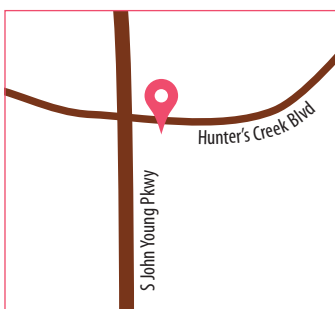
Altamonte Springs, FL
630 Main Street
Altamonte Springs, FL 32701



Celebration, FL
1148 Celebration Boulevard
Celebration, FL 34747



Lake Nona, FL
10775 Narcoossee Road, Suite 200
Orlando, FL 32832



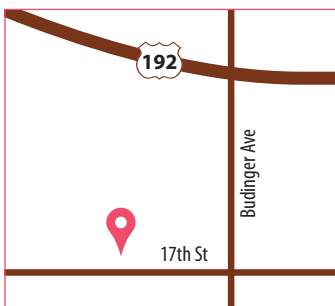
Orlando, FL
3000 Hunter's Creek Boulevard
Orlando, FL 32837



Orlando, FL
820 Lucerne Terrace
Orlando, FL 32801



Oviedo, FL
2572 West State Road 426, Suite 3000
Oviedo, FL 32765



St. Cloud, FL
2916 17th Street
St. Cloud, FL 34769



Winter Park, FL
147 Moray Lane
Winter Park, FL 32792



The Women's Center offers a wide range of services, including obstetrics, gynecology, medical aesthetics, cancer screenings and treatment, and birth control. The practice also offers many procedures and minimally invasive surgeries on-site.

Services

Mammogram
Ablation
Menopause
Birth Control
Breast Cancer
Osteoporosis

Ovarian Cysts
PCOS
PMS
Cervical Cancer
Colposcopy
Pregnancy

Endometriosis
Fibroids
Gynecology
Tubal Ligation
Hysterectomy
Hysteroscopy

IUD
Incontinence
Laparoscopy
Menstrual Bleeding
STD & STI
MonaLisa Touch

News From Dr. Gearity



Douglas Gearity, MD
OB-GYN

Dr. G Women's Center Newsletter will be published regularly to provide a concise and relevant message on health facts, health challenges and health solutions that affect both women and men. There is a huge amount of health information and "misinformation" that is available online. Quite often this makes it extremely challenging for individuals to know where to turn for accurate information that they can trust. One of this newsletter's goal is to provide accurate and impacting information to the public.

We encourage all of our readers to contact us with thoughts, comments, and suggestions so that we can provide what people are looking for in health information. Every day in our Women's Center and Gearity Wellness Center offices we take the time to respectfully discuss health issues with our patients so they can inform decisions about their health. This newsletter avails us that same opportunity "outside our offices" via the internet.

Visit our website at: www.wcorlando.com to see the many topics listed under our News tab. Thank you for reading our newsletter. We will try to keep our future issues as informative and interesting as we can.

Mammograms and Breast Ultrasounds

Routine mammograms are the best way to find breast cancer early when it's most treatable.

Types of Mammograms

The team at The Women's Center uses mammography for both screening and diagnostic purposes.

■ Screening mammogram

This type of mammogram checks for changes in breast tissue in women who don't have signs or symptoms of breast cancer. The goal of screening mammography is to detect cancer before noticeable signs and symptoms develop.

■ Diagnostic mammogram

A diagnostic mammogram takes more time than a screening procedure and involves additional X-ray images. This type of mammogram investigates existing symptoms such as a new breast lump, pain, or nipple discharge.



The expert OB/GYN team at The Women's Center offers mammograms and breast ultrasounds at:

Hunter's Creek:
3000 Hunter's Creek Blvd.
Orlando, FL 32837

Saint Cloud:
2916 17th St.
St. Cloud, FL 34769

Altamonte Springs:
630 Main St.
Altamonte Springs, FL 32701

Lake Nona:
10775 Narcoossee Rd., Ste 200
Orlando, FL 32832

Mammogram and annual in same visit
Early weekday hours and open on Saturdays

