

Clinica Family Health Guide for a Healthy Pregnancy

1st Trimester – 0-13 weeks



My Name: _____

My Baby's Due Date: _____

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Having a Healthy Pregnancy

At Clinica Family Health, it is our goal to provide you with all of the support necessary to have a healthy pregnancy.

While medical support is important during this special time, your baby depends primarily on YOU to make healthy choices for him/her.

Everything you eat and how you take care of your physical and mental health will affect how your baby develops. Keeping yourself healthy and following the recommendations of your Primary Care Provider (PCP) will help you have a healthy pregnancy.

This guide is a brief introduction to some things you can do to help you and your baby stay healthy during pregnancy.

Sometimes your health advisor doesn't talk about everything you want to know. Be sure to ask your PCP any additional questions and come to all scheduled appointments so that we can be of best support to you.

There is no such thing as a "dumb question". It may help to write down your questions. This way you won't forget them.

Questions I have for my provider:

When can I get pregnant again?

A woman is very fertile for the first **3 months** after having a child.

- Think about when you'd like to have kids again:
Right away? In a few years?
- Consider which birth control method you'd like to use. Have you used one before that you liked?
Would you like to try something else instead?
- Breastfeeding is *not* an effective form of birth control.
- At Clinica, we have a variety of low-cost birth control options available from our pharmacy. Ask your PCP for an info sheet.
- In the case of an emergency, Plan B emergency contraception (the "day after" pill) is available *without a prescription* at Clinica's pharmacy.

Birth control I used before this pregnancy: _____

What I thought: _____

Would I use the same one again? YES NO
 What questions do I have about birth control or fertility?

The importance of weight gain

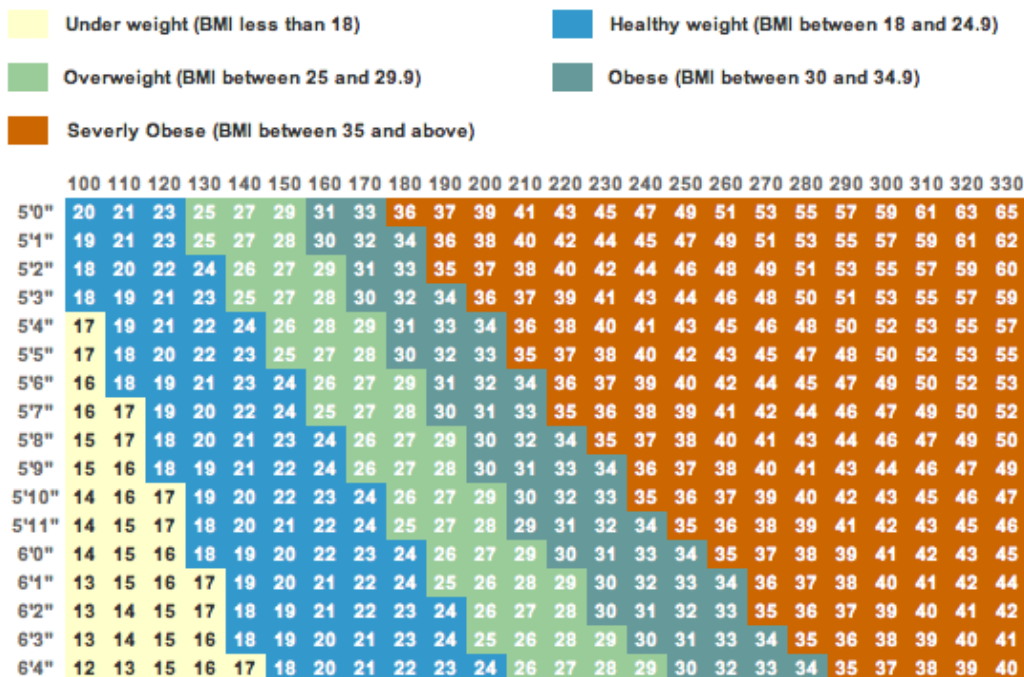
You will be weighed at **each visit** because weight gain during pregnancy is vital to having a healthy baby:

Gaining too **little** weight means that your baby will not get enough food, and it puts your baby at risk for being born prematurely, having developmental issues and being born at a low birth weight.

Gaining too **much** weight puts your baby at risk for being born prematurely, having developmental issues and having illnesses such as diabetes later in life. It also can cause complications for you or your baby at delivery.

When and how you gain your weight is important than the total amount of weight. The **patterns** of this weight gain help show if there is too much fat or too much fluid, though it is normal to store some extra fluid while pregnant.

Use the following chart to find your BMI by using your pre-pregnancy weight



My BMI is _____

Find your BMI on this scale and it will tell you how much weight you should gain.

Prepregnancy BMI	BMI* (kg/m ²) (WHO)	Total Weight Gain Range (lbs)	Rates of Weight Gain* 2nd and 3rd Trimester (Mean Range in lbs/wk)
Underweight	<18.5	28–40	1 (1–1.3)
Normal weight	18.5–24.9	25–35	1 (0.8–1)
Overweight	25.0–29.9	15–25	0.6 (0.5–0.7)
Obese (includes all classes)	≥30.0	11–20	0.5 (0.4–0.6)

My recommended weight gain: _____

** Ask to speak with a Case Manager or Dietician to discuss your weight gain.

Questions I have about weight gain:

Can I exercise?

Yes, please! Exercise is a great way to get your body ready for birth, ensure your baby is healthy, control your weight gain and manage stress. Remember to drink a lot of water before, during and after exercising.



Here are some safe exercise ideas for pregnant women:

- Walking
- Swimming
- Yoga
- Zumba
- Dancing
- Stationary cycling
- Step machines
- Elliptical machines

**if you feel dizzy, nauseous or short of breath during any exercise, please take a break.

What should I be eating for this baby?

A healthy, balanced diet is ideal. Eating some food from each food group, lots of fruits and vegetables is always a good idea. The new food pyramid is now called My Plate and is a much easier way to see if you are eating a good variety of foods.

My Pregnancy Plate



Eat often

Eating 5-6 small meals throughout the day is a great idea. It keeps your metabolism going, your body full of energy and your baby feeling satisfied.

Snacks! Eat healthy snacks. If you feel hungry, eat. It is normal to eat more than usual when you are pregnant but beware: you are not truly supposed to eat for two. Ideally you'll be eating 300 extra calories per day; this is close to an apple and a glass of milk.

Here are some ideas for healthy snacks...

- ✓ Pears and low-fat cheese
- ✓ Apples with peanut butter
- ✓ Pretzels
- ✓ 1 carton of light yogurt
- ✓ Carrot sticks
- ✓ Granola bars
- ✓ Low fat cottage cheese
- ✓ Veggies and hummus
- ✓ Dried fruit

Remember that even if you are busy or on the go, plenty of snacks can be packed to eat along the way.

Critical Nutrients for my Baby

Folic Acid, Iron and Calcium, oh my!

These are three nutrients that are *essential* during pregnancy.

1. **Folic Acid** helps with brain and eye development during the first trimester as well as avoiding serious birth defects.

You can find Folic Acid in Prenatal Vitamins, fortified cereal, whole-wheat tortillas, lentils, oranges, pineapple, grapefruit, spinach and asparagus.

2. **Iron** helps to create more blood to share with baby as well as maintaining a healthy immune system.

You can find Iron in eggs, dark leafy greens such as spinach, broccoli, kale, as well as dried fruit, lentils, beans, iron-enriched cereals.

3. **Calcium** helps baby to build strong bones and teeth. It also helps to grow the baby's heart, nerves and muscles.

You can find calcium in cheese, yogurt, milk, broccoli, kale, okra, kidney beans, green beans, baked beans, almonds, Brazil nuts, walnuts, salmon, oranges and tofu.

And don't forget to eat plenty of **Protein**, which affects your baby's growth and brain development.

You can find great protein in lean meat, poultry, fish, eggs, tofu and tempeh. Other options include nuts, beans, peas, lentils, milk, yogurt, cheese and whole cereal grains.

What can I drink?

Water! **Lots of water**. Drink 8-10 8 ounce glasses of water a day. Water helps to keep you hydrated and avoid vaginal infections.

Milk is great to get extra protein and calcium. Opting for **skim milk** is a good idea to avoid extra fat.

What about juice? Real, 100% fruit juice is a good way to get vitamins and minerals, but there is a LOT of sugar added. It's best to eat fruit instead or mix **½ glass of juice with ½ glass of water** to avoid the extra sugar.

Limit caffeinated drinks (coffee, tea and soda) to ONCE a day.

As far as tea goes, most are just fine. It's important to look for the caffeine content as well as teas with sassafras, coltsfoot, comfrey, pennyroyal and lobelia as they could possibly be harmful. If you have any questions about the tea you love to drink, please ask your doctor!

Is there anything I can't eat while I'm pregnant?

- **Fish:** some fish have a mercury content which can damage baby's nervous system. **Shark, king mackerel, swordfish and tilefish** are best to avoid while tuna, canned

salmon, shellfish and most others are fine in moderation (CFH recommends eating fish once a week)

- **Soft cheeses:** You should avoid Feta, Brie, Camembert, blue-veined or Mexican-style cheese (queso fresco and queso blanco). These cheeses can cause listeriosis. Listeriosis is an illness similar to the flu but it can be transferred to the fetus and cause miscarriage or stillbirth. It can also cause health problems for the baby. You can still eat hard/semi-soft cheeses like cheddar and mozzarella. Processed cheeses like American, cream cheese, cottage cheese and yogurt are also okay to eat.
- **Raw foods:** Avoid ceviche, sushi and all uncooked fish. Also, raw eggs, and raw meats are not good for you or your baby. Please ask for all meat to be cooked to “well done.”
- **Other foods to avoid:** Hot dogs, cold cuts, sausage and deli-style meats. The bacteria are destroyed if the foods are heated thoroughly.

How does what I eat during pregnancy make a difference?

The foods that you choose to eat while pregnancy can help your baby with many things including: growth, birth weight, bone, blood, eye, muscle, brain and cell development.

Foods on the list above that I currently eat:

What if I crave strange foods?

During pregnancy a change in taste and desire for different foods is very normal. Giving in to these desires is fine as long as the foods are healthy choices.

Craving non-food items such as dirt, ice, chalk, laundry detergent, etc may happen as well. This is a condition called **Pica** and can indicate a lack of iron in your blood. If you notice any such cravings, please let your PCP know!

Do I need to take prenatal vitamins?

Your prenatal vitamins can be picked up at the Clinica pharmacy. Be sure to take them every day. You still need to eat a good diet! Vitamins and minerals add extra nutrients, but they do not replace food!

What about the vitamins I was taking before I got pregnant?

It is a good idea to ask your PCP about any extra vitamins or herbal medications you are taking just to ensure they are safe.

Which over-the-counter medications are safe?

Even every day medications can harm your baby so it is very important to know what you are taking and if it is safe to take.

*Please see the sheet attached on **page 19** for details

Do not take any extra pain relievers, vitamins, antacids or any over the counter medications unless suggested by your PCP.

Medications I am currently taking:

- 1)
- 2)
- 3)

Why do I feel like I can't control my emotions?

Because you are pregnant. Pregnancy is a life changing event, whether it's your first or your 5th. Every pregnancy is different and new emotional challenges can arise with each one.

It is very common to have mood swings or cry for no reason.

Depression during and after pregnancy is also very common. Here are some warning signs to look out for:

- Crying every day
- Not wanting to leave your bed/home to do things you normally love to do
- No longer showering, brushing your teeth or other basic hygiene
- Someone close to you says they feel you have been acting differently
- You feel afraid of your baby
- You feel like you want to hide your baby
- You do not want to care for your baby

If you notice any of these things, please ask for support at Clinica! We would love to help and you have plenty of options as far as how to approach dealing with depression.

So what can I do to manage this emotional rollercoaster?

Stress and emotions can be intensified by pregnancy hormones.

Here are some ideas for how to manage your stress:

- Write a journal
- Talk to a friend
- Go on a walk
- Sing or dance
- Go outside and sit in the sun
- Do something you enjoy



- Ask for a Case Manager at Clinica
- Write down fun things you want to do with your baby
- Draw, paint, take photos, be creative

Three things I enjoy doing are....

- 1)
- 2)
- 3)

**all of these things could be used for stress management!

What are some ideas to help me deal with some of the usual complaints of pregnancy?

Most of the discomforts listed below are common and VERY normal. Your body has a lot of changing to do to accommodate this baby.

Being physically active, resting and eating well are the best ways to make these symptoms as easy as possible. Here are some other tips to help make your pregnancy a little more comfortable:

1. **Tender breasts:** wear a good bra. It may help to wear it to bed.
2. **Leaking breasts:** wear nursing pads or tissues in your bra.
3. **Frequent urination:** limit fluids before bedtime and when a bathroom is not close (but make sure you still are drinking enough fluid at other times).
4. **Fatigue:** try to exercise and lie down at least once a day.
5. **Constipation:** eat raw fruits, veggies, prunes and whole grain or bran cereals. Drink at least 2 quarts of fluid each day, and a cup of hot water 3 times a day helps. Also exercise and walking around helps. Never hold back a bowel movement.
6. **Hemorrhoids:** try to keep bowel movements regular. Take short rests with hips lifted on a pillow. Sit on firm chairs or tailor style on the floor, and practice the Kegel exercise.
7. **Low backache:** rest often, keep good posture, wear low heeled shoes, and move around rather than standing in one place too long. When you sit, use a footstool for your feet, keep your knees higher than your hips, and use the Pelvic Rock Exercise.
8. **Vaginal discharge with uncomfortable symptoms** (itching/odor/abnormal color): bathe the outer vagina using soap without perfume and warm (not hot) water. Do not use vaginal sprays, powders or feminine hygiene products, and do not use colored or perfumed toilet paper.
9. **Heartburn:** stay away from greasy and spicy food, and eat smaller meals, but more often. Don't lie down just after eating.
10. **Dizziness:** change your position slowly, and get up slowly when you have been lying down. Eat regular meals, don't stay in the sun too long, and report ANY dizziness to your health care advisor.
11. **Varicose veins:** avoid stockings or girdles with elastic bands, but you may use support hose which you should put on while lying down. Take short rests with your legs raised.
12. **Shooting pains down legs:** change your body position between sitting, standing and lying down.

13. **Lower leg cramps:** elevate your legs often during the day, point your toes upward, and press down on the kneecap. Use a heating pad or a hot water bottle for relief. Avoid meals at bedtime, and limit milk consumption to 2 glasses a day.
14. **Trouble sleeping:** do not eat just before sleep, though you may try drinking some milk, taking a warm bath, and practicing relaxing exercises before bed.
15. **Increased secretions** (mucous-nose/ throat/ mouth): do not take over-the-counter medicine, and check in with your health care advisor.
16. **Feeling faint when lying on your back:** lie on your left side.
17. **Feet and hand swelling:** lie on your left side for 30 min, and do this 3-4 times a day. Exercise often, drink more fluid, and eat 3 servings of protein a day. If you wake up in the morning with swelling, inform your health care advisor.
18. **Bleeding gums:** use a soft toothbrush and brush gently, drink more orange juice, and eat more foods high in Vitamin C.
19. **False labor:** change your position or activity because if it is true labor it will not stop and the contractions will become more regular and close together.

If you are losing weight, unable to sleep or the regular aches and pains are too much for you to manage, please let your PCP know and we will do our best to help you out!

Will this nausea go away?

This is normal, especially during your first trimester. Normally nausea passes in the first few months. Here are some tips for helping to ease that sour stomach...

1. Eat some crackers, bread or cereal before bed and before getting out of bed in the morning.
2. Eat 5-6 small meals throughout the day to avoid getting too hungry and feeling ill. Never go more than a few hours without some food.
3. Sip on carbonated drinks, teas, soups or juices between meals.
4. Eat as few fatty, greasy and spicy foods as possible.
5. Wear clothing that does not put extra pressure on your waist.
6. Keep your windows open to have as much fresh air as possible, especially when cooking, sleeping and driving.
7. Take any vitamins before bed instead of during the day.

What can hurt my baby or me while I'm pregnant?

There are some things that can harm the growth and development of your baby:

Any drugs, alcohol and tobacco

When you use these substances, your baby does too.

If you feel pressure to drink due to social situations, you could order a drink without alcohol, ask for soda water with lime or lemon, order fruit juice, or explain that you are growing one of the world's best babies.

If you have a habit with any of the above, please seek support from Clinica staff. We are here to help, not judge. We have plenty of programs and resources for those who struggle with habits or addictions, we would be happy to help!



What are some danger signs that I should look out for in my first trimester?

IF ANY OF THESE SIGNS OCCUR DURING PREGNANCY, CONTACT YOUR PROVIDER OR SOMEONE IN THE CLINIC IMMEDIATELY

Call CFH and ask to speak with a nurse if any of these things happen to you.
(303) 650-4460

1. Any bleeding from the vagina, no matter if it is only a little bit
2. A strong pain or cramping in the abdomen (belly) and/or a strong pain in the vagina
3. A strong headache or a headache that does not want to go away
4. Severe or continuous vomiting
5. Pain, burning, or itching when you urinate or have intercourse
6. Chills or fever
7. Back aches

One reason that we worry about these symptoms is that they may indicate **premature labor**, which occurs any time before 37 weeks gestation and can result in a premature baby.

Every pregnant woman is at risk for premature labor; even the healthiest, most relaxed mother may have premature labor.

The best way to avoid premature labor is to be proactive. Rest, drink lots of water, exercise and bring up any concerns to your PCP.

My teeth affect my baby?

Brushing and flossing twice a day is a good idea for anyone, especially if you're pregnant because an infection in your mouth can cause premature labor.



Your teeth will feel more sensitive because calcium is being pulled from your teeth to help your baby's growth

PLEASE make an appointment at our Clinica Family Health Dental Clinic or your favorite outside dental clinic.

Having at least 1 dental check up during pregnancy can help avoid complications!

How will my body and my baby's body change over the first trimester?

1st month: Your Baby

Hereditary characteristics were set when the sperm met the egg (ovum) and the father's sperm determined your baby's sex. The brain, heart, lungs and nervous system are forming.

Tiny spots for ears eyes and nose are beginning to show. Arm and leg buds are forming, and the baby is growing inside a sac of amniotic (am-nee-ot-ic) fluid (bag of water). Your baby will be about 1/4 to 1 inch long at the end of the month.

1st month: Your Body

You were 2 weeks pregnant when you missed your first period, your pregnancy test turned positive about 10 days later, and you were 6 weeks pregnant when you missed your second period. The placenta (plauh-sen-tah) is forming and making hormones that prepare you for pregnancy. You may feel nausea ("morning sickness") any time of the day.

You may feel tired, your breasts feel tender, and you probably haven't gained any weight or changed body size this month. Your uterus is growing larger but you can't feel it.

2nd month: Your Body

This is the key month in your baby's growth. Seeing and hearing structures are in a critical time of growth, facial features are forming, and the head is large since the brain grows faster than the other organs. Cartilage, skin and muscles are starting to shape your baby's body. The umbilical (um-bil-uh-kul) cord has formed, and fingers, toes and fingernails are forming. The stomach, liver, kidneys are developing and the heart is beating.

Your baby will weigh about 1/2 to 1 ounce and be about 2 1/4 inches long by the end of the month.

2nd month: Your Body

You may gain a pound or two during the month. Your waist size is likely to increase, your breast size increases, and the nipples begin to darken.

Your uterus may feel like a small lump above your pubic bone and is softer, rounder and larger now. As it crowds the bladder, you may urinate more often.

The placenta is also growing and more hormones are being produced. The tissues around the vagina become bluish as an increased blood supply nourishes the baby. Some women notice a change in vaginal discharge.

You may be more tired and have less energy this month. Nausea (morning sickness) may still occur, though it may be more noticed in the morning.

3rd month: Your Baby

The baby is still too tiny for you to feel movement. The ears, vocal cords, taste buds, arms, hands, fingers, feet and toes will be formed this month. The neck is well shaped and the head can be held up. Reflex movements allow your baby's elbows to bend, legs to kick and fingers to form a fist. The sex of the baby is easy to tell now, if you could see inside the uterus. The heart beat is 120-160 bpm, and blood is now going through the cord to the baby.

About one cup of amniotic (am-nee-ot-ik) fluid surrounds your baby. The baby's kidneys now circulate the fluid swallowed by the baby back into the amniotic sac.

By the end of the month your baby will weigh about 1/4 pound and be about 2 1/4 inches long.

3rd month: Your Body

You will begin to feel better by the end of the month: less sick to your stomach, and with more energy. You may have gained about 2-3 pounds, and begin to feel more hungry.

The placenta is now formed. Hormones are keeping your pregnancy healthy. You may be able to feel your uterus above the pubic bone and it may harden from contractions.

You may be constipated, sweat more, and be happy or sad for no reason.

What are my responsibilities during this first trimester?

- Make an appointment to start prenatal care and begin regular **checkups**
 - Ask for prenatal test results
 - Find out if you have insurance for maternity and baby benefits
- Check with your doctor or clinic before taking any **medicine**
 - Get prescribed vitamins and iron
- **Avoid** x-rays, cigarettes, alcoholic drinks, junk foods, paints (except latex), pesticides and

- aerosol sprays
- **Limit** drinks that have caffeine (colas, teas, coffee)
 - Drink 6-8 glasses of water each day
- **Eat** a balanced diet
- **Talk** with your partner about feelings you both have for this pregnancy
- **Decide** how you will tell your family, friends and employer about your pregnancy
 - Ask good friends or family about their experiences in the first few months of pregnancy
- **Exercise:** walk, swim or bike 15 minutes daily

What can I expect from my medical visits?

Health History

Your care team will want to know about your past health and can give you special care if some part of your health history could be a problem for you or your baby.

- They will ask questions about **other pregnancies** and will want to know about miscarriages and abortions. They will also want to know about menstrual periods and problems with your past periods.
- You will be asked about many other illnesses that have occurred in your **family**.

Blood Tests

Samples of your blood are taken for blood tests that help show some things about your health.

- One test checks your **blood type** and it tells if the blood is Rh positive or Rh negative.
- The tests also show anemia or an **infection** such as syphilis (sif-i-lis), which could harm your baby.
- Another test will show if you are protected against rubella (roo-bel-uh) (German Measles).
- Some of these tests may be given again during your pregnancy.

Blood Pressure

Your blood pressure will be checked to learn what is **normal** for you and will be checked often to see if it remains normal.

- Some women develop high blood pressure in pregnancy, and some begin to lose protein in the urine. This condition is called "**preeclampsia**" and can be dangerous for moms and their babies.
- **Symptoms** of preeclampsia include changes to vision, a headache that won't go away, nausea, vomiting, shortness of breath, chest pain, and pain under the right side of your ribs.
- If you have any of these symptoms in the 2nd or 3rd trimester, inform your doctor immediately.

Urine Tests

- A urine test will be done at each visit that tests sugar and protein content to show if there is diabetes, kidney or bladder infections, or other problems. These infections can occur more often when you are pregnant.

Breast Exam

- Your breast will be examined in some visits. You should also learn how to examine your own breasts.
- If you would like to nurse your baby, you should ask for directions on how to get your breasts and nipples ready.

Abdominal Exam

- The size of your uterus will be measured at each visit to show the growth of your baby.
- The baby's position and size will be checked as well, and you can hear the heartbeat just after the fourth month.

Pelvic Exam

- A pelvic or internal exam will be done at some visits in order to check the inside of the vagina, the size of your birth canal and uterus, and your pelvic bone structure.

Physical Exam

- You will have a complete physical exam in your first visit.
- You may have a complete physical exam again close to the end of pregnancy.

Special Tests

These tests may be given in order to learn important facts about your baby's growth and health.

- One test is the **ultrasound**. It is like an x-ray but sound waves are used because they are safe. They show where the baby and placenta are located in your uterus.
- Another test is an **amniocentesis** (am-nee-oh-sen-tee-sis). In this test, some of the amniotic fluid around the baby is taken out. The fluid can tell the sex of the baby, show if there are genetic abnormalities such as Down syndrome, and in some situations it may be used to see if the baby's lungs are mature enough to be born. There is seldom pain or injury to you or your baby, but there is some risk when the needle is put into the amniotic sac.

Key Points to Remember

- Follow recommendations of your PCP and be sure to come to all scheduled appointments
- Gain enough weight to help you have a healthy baby.
- Choose healthy food options while you are pregnant to help your baby be healthy.
- Drink at least 64 ounces of water each day. Limit caffeine.
- Take your prenatal vitamins every day.
- Check with your doctor before taking any medications or herbal remedies.
- Avoid alcohol, drugs, and cigarettes. Ask your provider for help quitting if you need to.
- Be active during pregnancy by walking, stretching, or swimming.
- Surround yourself with positive, supportive people

Have a happy, healthy baby!

I want my baby to be:

For a healthy pregnancy, I will focus on:

Someone who I can ask for support during my pregnancy:

Congratulations on your pregnancy!!



At **Clinica**, we are here to help you through your pregnancy as best we can.

Please do not hesitate to let us know how we can help.

Main Line: (303) 650-4460
<https://clinica.org/>

Labor and Delivery Hospital Registration and Tour Information

***You should select your delivery hospital no later than 20 weeks into your pregnancy – notify your care team once you have decided where you will deliver your baby**

Avista

100 Health Park Drive
Louisville, CO 80027
(303) 673-1000 Main Line
(303) 673-1192 Fax

To register: (303) 269-2052

Sign up for an admission consultation and fax or bring the preadmission form with you

Tours: (303) 673-1029

-Call ahead to schedule

Classes: (303) 673-1029

-Childbirth, Breastfeeding and Baby Care

-Clinica patients receive a 50% discount on all classes

St. Anthony North Health Campus

14300 Orchard Parkway
Westminster, CO 80023
(720) 627-0000 Main Line
(720) 627-3630 Labor & Delivery
(720) 627-3631 Labor & Delivery Fax

To register you have 2 options

- Fax pre-admission form to (720) 627-0141
- Online: www.stanthonynorthhealthcampus.org

Tours: (720) 627-0222

-Call ahead to schedule

****Available in Spanish****

“Birth by Design” program:

Call: (720) 627-0222

-Comprehensive birth planning

-Includes tour of the hospital

Classes: (720) 627-0222

-Childbirth, Breastfeeding, Baby Care & Infant CPR

-Free childbirth preparation class for all Clinica patient

Clinica Family Health

Medications “Safe” in Pregnancy – risk is low or drug is compatible

Cold Remedies and Allergies

Cetirizine	Zyrtec	Limited Human Data-Animal Data Suggest; Low Risk
Diphenhydramine (before 36 wks)	Benadryl	Compatible (ask provider after 36 weeks?)
Guaifenesin	Robitussin	Compatible
Loratadine	Claritin	Limited Human Data-Animal Data Suggest; Low Risk
Vitamin C		Compatible

Pain

Acetaminophen	Tylenol	Compatible
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Antacids

Calcium Carbonate	Tums	Compatible
Cimetidine	Tagamet	Compatible; potential for feminization of fetus has not been studied but warrants research
Ranitidine	Zantac	Compatible

Sleep Aids

Diphenhydramine (before 36 wks)	Benadryl	Compatible (ask provider after 36 weeks)
Doxylamine	Unisom	Compatible

Creams

1% hydrocortisone cream	Various brands	Briggs does not separate rating for topical. Review of full data shows topical likely safe if used at low dose and limited duration.
Diphenhydramine Cream	Benadryl Cream OTC	Compatible
Clotrimazole Cream OTC	Various brands	Compatible
Nystatin topical OTC	Various Brands	Compatible

Hemorrhoid Remedies and constipation

Wheat dextrin	Benefiber	No Briggs classification-Likely Safe per Natural Medicines Comprehensive Database
Hydrocortisone Topical	Preparation H, Anusol HC	Briggs does not separate rating for topical. Review of full data shows topical likely safe if used at low dose and limited duration.
Witch hazel	Tucks	No Briggs classification-Likely Safe per Natural Medicines Comprehensive Database

Stool Softeners

Docusate Sodium	Colace	Compatible
Polycarbophil	Fibercon	No Briggs Classification
Psyllium	Metamucil	No Briggs Classification; Likely Safe per Natural Medicines Comprehensive Database
Bisacodyl	Dulcolax	No human data, probably compatible

Injections and Immunizations

PPD (for TB screening)
Flu Vaccination (inactivated)
Hepatitis A and B vaccinations
Tdap (tetanus and pertussis)

Clinica Family Health Medications Not Safe in Pregnancy or ASK your doctor first		
Cold Remedies and Allergies		
Fexofenadine	Allegra	No (Limited) Human Data-Animal Data Suggest Moderate Risk
Theraflu	Theraflu	No Briggs Classification-Preparations contain multiple ingredients
Nyquil	Nyquil	No Briggs Classification-Preparations contain multiple ingredients
Pain		
Aspirin	Multiple brands	Compatible (Low Dose); Human Data Suggests Risk in 1 st and 3 rd Trimesters (Full Dose)
NSAIDS	Ibuprofen, Motrin, Advil, Aleve, Naproxen Sodium	Human (and Animal) Data Suggest Risk
Nausea		
Ginger Tea		Conflicting data, some references suggest avoiding use (effects on testosterone) No Briggs Classification Possibly Safe per Natual Medicines Comprehensive Database and Reprotox https://reprotox.org/sample/19997
Antacids		
Bismuth Subsalicylate	Pepto Bismol	Limited Human Data-Animal Data Suggest Low Risk ⁱ - Significant fetal harm has resulted from chronic exposure to salicylates. Restrict to 1 st half of pregnancy and do not exceed recommended doses.
Alka Seltzer	Alka-Seltzer	No Briggs Classification-Some preparation contain aspirin
Antidiarrheal/Constipation		
Loperamide	Imodium	Limited Human Data-Animal Data Suggest Low Risk
Polyethylene glycol	Miralax	
Sleep Aids		
Chamomile Tea		Limited Human Data-No Relevant Animal Data
Immunizations		
MMR		
Varicella		
Nasal Flu Vaccine (live)		
HPV		

1. Briggs' Drugs in Pregnancy and Lactation Monograph. In: Facts & Comparisons Web site. <http://online.factsandcomparisons.com.dml.regis.edu>. Accessed August 22, 2015.
2. Natural Medicines Comprehensive Database. <http://naturaldatabase.therapeuticresearch.com.dml.regis.edu> Accessed August 22, 2015.
3. Vaccines for Pregnant Women. <http://www.cdc.gov/vaccines/adults/rec-vac/pregnant.html>. Updated October 10, 2014. Accessed August 24, 2015.



Information of Change for Ultrasound Scheduling

- As of February 1, 2010 Clinica Family Health will no longer provide routine ultrasounds to look at the anatomy or sex of your baby. This change in service will not affect the health of your baby.
- If you come to the clinic for prenatal care **before** 12 weeks in your pregnancy, you may get a routine vaginal ultrasound. If you come to the clinic for prenatal care **after** 12 weeks you may receive a routine abdominal ultrasound.
- This early ultrasound will tell us when the baby is due, check if you have twins, maybe find a problem with the pregnancy (such as a tubal pregnancy), maybe check the location of the placenta if it is formed, and check the heartbeat of the baby if the baby is old enough . We will not be able to look carefully at the anatomy of your baby or tell you the gender of your baby with these ultrasounds.
- Clinica does recommend a 20 week obstetric ultrasound at a different location whether or not you get an early ultrasound at our clinic. Your Clinica provider can refer you to get this ultrasound outside the clinic.
- Please be aware you will be billed by the center and doctor that provides these ultrasound services and that the charge may be \$300 or more. If you have insurance, your insurance will be billed. If you do not have insurance, **you the patient** are responsible for payment. Clinica Family Health will **NOT** pay this bill for you.
- In certain high risk pregnancies your provider may recommend more detailed and frequent ultrasound studies. You will be able to arrange payment plans for these studies as well.

MARIJUANA AND YOUR BABY



March 18, 2015

Marijuana is now legal for adults over 21. But this doesn't mean it is safe for pregnant or breastfeeding moms and babies.

There is no known safe amount of marijuana use during pregnancy.

You should not use marijuana while you are pregnant, just like you should

not use alcohol and tobacco.

Tetrahydrocannabinol (THC) is the chemical in marijuana that makes you feel "high."

Using marijuana while you are pregnant passes THC to your baby.

KNOW THE FACTS

MARIJUANA AND PREGNANCY

Using marijuana while pregnant may harm your baby. Marijuana that passes to your baby during pregnancy may make it hard for your child to pay attention and learn, especially as your child grows older. This would make it harder for your child to do well in school.

Some hospitals test babies after birth for drugs. If your baby tests positive for THC at birth, Colorado law says child protective services must be notified. Talk to your doctor early in your pregnancy about any marijuana use.

MARIJUANA AND BREASTFEEDING

The American Academy of Pediatrics says that mothers who are breastfeeding their babies should not use marijuana.

Breastfeeding has many health benefits for both the baby and the mother. But THC in marijuana gets into breast milk and may affect your baby.

Because THC is stored in body fat, it stays in your body for a long time. A baby's brain and body are made with a lot of fat. Since your baby's brain and body may store THC for a long time, you should not use marijuana while you are pregnant or breastfeeding.

Breast milk also contains a lot of fat. This means that "pumping and dumping" your breast milk may not work the same way it does with alcohol. Alcohol is not stored in fat, so it leaves your body faster.

IS SMOKING MARIJUANA BAD FOR MY BABY?

Yes. Breathing marijuana smoke is bad for you and your baby. Marijuana smoke has many of the same chemicals as tobacco smoke. Some of these chemicals can cause cancer. Do not allow anyone to smoke in your home or around your baby.

WHAT IF I USE MARIJUANA WITH- OUT SMOKING IT?

THC in any form of marijuana may be bad for your baby. Some people think that using a vape pen or eating marijuana (like cookies or brownies) is safer than smoking marijuana. Even though these forms do not have harmful smoke, they still contain THC.

**Talk to your doctor if you are pregnant or breastfeeding and need help to stop using marijuana.
Or call 1-800-CHILDREN for help.**

HOW CAN I STORE MARIJUANA SAFELY?

Store all marijuana products in a locked area. Make sure your children cannot see or reach the locked area. Keep marijuana in the child-resistant packaging from the store.

WHAT HAPPENS IF MY CHILD EATS OR DRINKS MARIJUANA BY ACCIDENT?

Marijuana can make children very sick. Look for problems walking or sitting up, starting to be sleepy or having a hard time breathing.



If you are worried, call the poison control hotline as soon as possible. Calling is free and you will be helped quickly: 1-800-222-1222.

If symptoms seem bad, call 911 or go to an emergency room right away.

WHAT ELSE SHOULD I KNOW TO KEEP MY BABY SAFE?

Being high or buzzed while doing some activities can be risky. Being high while caring for a baby is not safe. Do not let anyone who is high take care of your baby.

Some marijuana can make people feel very sleepy when they are high. Marijuana can make you sleep harder. It is not safe for your baby to sleep with you, especially if you are high.

If you plan to use marijuana, make sure there is another person who can safely care for your baby.

It is not safe to drive a car while high. Do not let your baby ride in a car if the driver is high.

RESOURCES

Be sure you know Colorado's marijuana laws: Go to GoodToKnowColorado.com.

Go to Colorado.gov/Marijuana to find more information.

Call 1-800-CHILDREN for free to connect to statewide resources for parents with any concerns, including substance use.

Learn how to talk to your kids about substance use at: SpeakNowColorado.org.

MYTHS ABOUT MARIJUANA

MYTH: Marijuana is safe to use while pregnant or breastfeeding.

FACT: You cannot eat or use some foods and medicines while pregnant or breastfeeding. This is because they might harm the baby. This includes marijuana.

MYTH: Since it is legal, it must be safe.

FACT: Using marijuana during pregnancy may harm your baby, just like alcohol or tobacco. Being legal does not make it safe.

MYTH: Since it is natural, it must be safe.

FACT: Not all natural substances or plants are safe. Tobacco and poisonous berries are great examples. Marijuana contains THC, which may harm a baby.

MYTH: Since some people use marijuana as a medicine, it must be safe.

FACT: Marijuana can be recommended by a doctor in special cases. A doctor decides whether the benefits are greater than the risks. It is unsafe to use any medicines while pregnant or breastfeeding that are not recommended by a doctor. This includes marijuana. Talk to your doctor about safer choices that do not risk harming your baby.

All information on the health effects of marijuana comes from the Monitoring Health Concerns Related to Marijuana in Colorado: 2014 Report.

VISIT: colorado.gov/pacific/cdphe/retail-marijuana-public-health-advisory-committee



COLORADO
Department of Public
Health & Environment

Guidelines for recommended OB and Well Child Check visits:

<u>Appointment for:</u>	<u>Timeframe</u>	<u>Schedule an appointment</u>	<u>Appointment details</u>
Mom	12-27 weeks gestational age	*Every 4 weeks	OB check-up
Mom	28-35 weeks gestational age	*Every 2 weeks	OB check-up
Mom	36-40 weeks gestational age	*Every week	OB check-up
Baby *Mom should schedule an appointment for herself based on the hospital discharge instructions	3-5 days after delivery	3-5 days after delivery	Baby's first check-up Delivery follow-up (baby & mom*) *Schedule mom if there is a clinical reason to do so (based on hospital discharge instructions, mom has lactation concerns or desire to be seen)
Baby	2 weeks old	7-15 days old	Blood test Check-up
Mom	4-6 weeks after delivery	4-6 weeks after delivery	Post partum check-up
Baby	6-8 weeks after delivery (2 month WCC)	6-8 weeks after delivery	Physical & vaccines
Baby	4 months old	At 4 months of age	Physical & vaccines
Baby	6 months old	At 6 months of age	Physical & vaccines
Baby	9 months old	At 9 months of age	Check-up
Baby	1 year old	At 1 year of age	Physical, vaccines & lead test
Baby	15 months old	At 15 months of age	Check-up
Baby	18 months old	At 18 months of age	Check-up
Baby	2 years old	Around 2 nd birthday	Physical, vaccines & lead test
Baby	3 years old	Around 3 rd birthday	Physical & vaccines
Baby	4 years old	Around 4 th birthday	Physical & vaccines
Baby	5 years old	Around 5 th birthday	Physical & vaccines

*The frequency of appointments varies depending on the pregnancy. Unless otherwise notified, please be sure you are seen according to the timeframes listed above.

Are You Pregnant?

Buckling Up for Two

Child
Safety
Facts
2017

Protecting yourself protects your baby in a car crash.

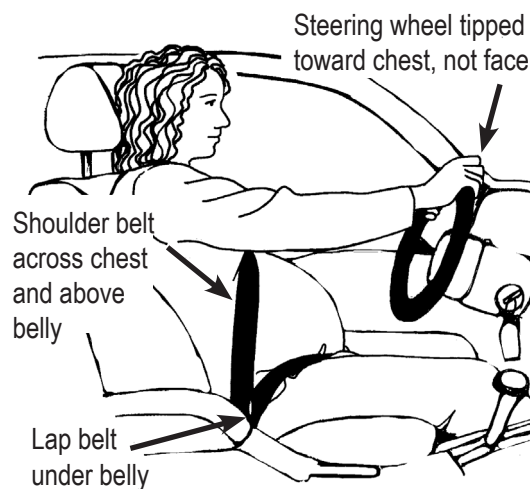
The basics

- **Get checked at a hospital emergency room if you are in any kind of crash.** Even in a minor crash, your unborn baby could be injured. This can happen even if you don't feel hurt.
- Always use a lap-shoulder belt. It gives much more protection than only a lap belt.
- Wear the seat belt correctly. (See the drawing.)
- An air bag will help you and your unborn baby in a crash. However, it is always best to sit far back from the steering wheel and dashboard.
- When driving, sit as far back from the steering wheel as you can. Tilt the steering wheel toward your chest, not up toward your face.
- **Whenever possible:**
 - Let others do the driving, especially in the last months of pregnancy.
 - Sit in the rear seat. The rear center seat is safest for you and baby, if there is a lap-shoulder belt.
 - Avoid travel, especially driving or riding in risky conditions.

A car crash is one of the most serious dangers to your unborn baby.

Car crashes kill and injure more unborn babies than babies in their first year of life. There are many things you can do to keep both of you safe.

Always use a seat belt while pregnant. Be sure to wear it the right way!



Move seat back as far as you can. Use both lap and shoulder belts on every ride.

- Push the lap belt down as far as possible below your belly. Check to be sure it stays low.
- Keep lap and shoulder belts snug. Pull up on the shoulder belt to tighten the lap belt.
- Keep the shoulder belt across the middle of your shoulder. *Never* put it under your arm or off your shoulder.
- If you are wearing a coat, open it and pull it out from under the belt and to the sides, away from your belly. This helps the lap part of the belt stay low.

Other ways to protect your unborn baby

Drive less often, if you can. Car pool to work so you are not behind the wheel. Plan your errands so you make fewer trips. Shop online. Ask people to come to you for visits. Go by air instead of by car if you must take a long trip.

Avoid crash risks. Avoid driving at night and in bad weather, when possible. Avoid driving when sleepy or using a cell phone. *Never* ride with a driver who is sleepy or has been using alcohol or drugs.

Use a safe car. Make sure your car is in good condition. Check your vehicle tires, brakes, and lights often. Check for recalls at www.safercar.gov. If you are buying a car, choose one with a roomy back seat that has good safety ratings for baby. Find crash ratings at www.iihs.org and at www.safercar.gov.

See other side for tips on how to use a child car seat correctly.

*Make
Every Ride
A Safe Ride*



Basics of car safety for newborns

Never carry a baby in your arms in the car. It is impossible to safely hold a baby in a crash.

Use a car safety seat (car seat) rear facing as long as possible, up to 24 months or more. It is the best way to protect a baby from head and neck injury in a crash.

Baby always rides in the back seat.

The back seat is much safer than the front seat. The center of the back seat is safest.

If a baby *must* ride in the front seat, be sure the passenger air bag is off. (See the car owner's manual.)

Make sure the seat belt or LATCH holds the car seat tightly. It should move less than one inch when pushed near the attachment belt.

Buckle and tighten the harness snugly over your baby's body. Do not wrap baby in a blanket. Put a blanket over the harness *after* you buckle and tighten it.

Always follow car seat instructions and the car owner's manual to install and use the car seat correctly.

Practice using your car seat before baby is born. Check with your hospital or clinic to find a car seat safety class.

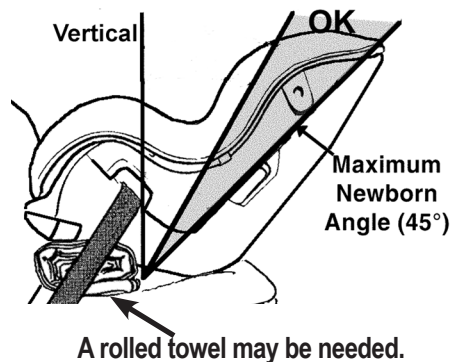
Pack for baby's first ride:

- ✓ Car seat
- ✓ Remember instructions—car and car seat
- ✓ Small baby clothes with legs
- ✓ Small blankets to pad around baby (but never under the harness)

Choosing a car seat

Car seats for newborns:

- Rear-facing-only car seats are small and must be used facing the rear of the car only. They have a handle for carrying outside the car. Most can be used with a base that stays in the car.
- Convertible car seats face the rear for a baby up to 30 pounds or more. They can be turned to face forward for an older child.
- Be sure the car seat's harness will fit baby snugly. The straps must go into the car seat at or below baby's shoulders. The lowest position for the straps should be less than 8 inches up from the seatpad.
- Use a car bed (not shown) only when a doctor says baby must ride lying flat.



Try the car seat in your car:

Be sure it can be installed correctly in the back seat using the seat belt or LATCH straps. The car seat must recline properly in your car (as shown) and be tight. Follow the instructions for the car and car seat.



Rear-facing-only seat, for a child up to 22 to 40 pounds (check label).



Convertible seat, for a child up to 30 to 50 lbs. if facing the rear (check label).

Planning to use a second-hand car seat? Keep in mind:

- Newer seats are often easier to use and have better safety features.
- Do not use a car seat after its "do not use" date. If you cannot find this date, do not use the car seat if it was made over six years ago.
- If the car seat has been in a crash, it should not be used again. If you don't know for sure, don't use it.
- If missing, get instructions from the car seat maker. Ask about recalls.

Resources

National Vehicle Safety Hotline:

888-327-4236, 800-424-9153 (tty)
or www.safercar.gov

Find a local Car Seat Checkup

Location: 866-732-8243 or
www.seatcheck.org (select "Inspection Station Locator")

SafetyBeltSafe U.S.A.:

800-745-7233 or www.carseat.org

American Academy of Pediatrics:

At www.healthychildren.org, look under Safety & Prevention, then On The Go for information on car seat models and use.



Abuse during pregnancy

Abuse, whether emotional or physical, is never okay. Unfortunately, some women experience abuse from a partner. Abuse crosses all racial, ethnic and economic lines. Abuse often gets worse during pregnancy. Almost 1 in 6 pregnant women have been abused by a partner.

What is abuse?

Abuse can come in many forms. An abusive partner may cause emotional pain by calling you names or constantly blaming you for something you haven't done. An abuser may try to control your behavior by not allowing you to see your family and friends, or by always telling you what you should be doing. Emotional abuse may lead you to feel scared or depressed, eat unhealthy foods, or pick up bad habits such as smoking or drinking.

An abusive partner may try to hurt your body. This physical abuse can include hitting, slapping, kicking, choking, pushing or even pulling your hair. Sometimes, an abuser will aim these blows at a pregnant woman's belly. This kind of violence not only can harm you, but it also can put your unborn baby in grave danger. During pregnancy, physical abuse can lead to miscarriage and vaginal bleeding. It can cause your baby to be born too soon, have low birthweight or physical injuries.

What can trigger abuse during pregnancy?

For many families, pregnancy can bring about feelings of stress, which is normal. But it's not okay for your partner to react violently to stress. Some partners become abusive during pregnancy because they feel:

- Upset because this was an unplanned pregnancy
- Stressed at the thought of financially supporting a first baby or another baby
- Jealous that your attention may shift from your partner to your new baby, or to a new relationship

How do you know if you're in an abusive relationship?

It's common for couples to argue now and then. But violence and emotional abuse are different from the minor conflicts that couples have.

Ask yourself:

- Does my partner always put me down and make me feel bad about myself?
- Has my partner caused harm or pain to my body?
- Does my partner threaten me, the baby, my other children or himself?
- Does my partner blame me for his actions? Does he tell me it's my own fault he hit me?

- Is my partner becoming more violent as time goes on?
- Has my partner promised never to hurt me again, but still does?

If you answered "Yes" to any of these questions, you may be in an unhealthy relationship.

What can you do?

Recognize that you are in an abusive relationship. Once you realize this, you've made the first step towards help. There are lots of things you can do.

Tell someone you trust. This can be a friend, a clergy member, a health care provider or counselor. Once you've confided in them, they might be able to put you in touch with a crisis hotline, domestic violence program, legal-aid service, or a shelter or safe haven for abused women.

Have a plan for your safety. This can include:

- **Learn the phone number of your local police department and health care provider's office in case your partner hurts you.** Call 911 if you need immediate medical attention. Be sure to obtain a copy of the police or medical record should you choose to file charges against the abuser.
- **Find a safe place.** Talk to a trusted friend, neighbor or family member that you can stay with, no matter what time of day or night, to ensure your safety.
- **Put together some extra cash and any important documents or items** you might need, such as a driver's license, health insurance cards, a checkbook, bank account information, Social Security cards and prescription medications. Have these items in one safe place so you can take them with you quickly.
- **Pack a suitcase** with toiletries, an extra change of clothes for you and your children, and an extra set of house and car keys. Give the suitcase to someone you trust who can hold it for you safely.

Remember: No one deserves to be physically or emotionally abused. Recognize the signs of abuse and seek help. You might feel very scared at the thought of leaving, but you've got to do it. You and your baby's life depends on it.

More information

- National domestic violence hotline: (800) 799-SAFE (7233) or (800) 787-3224 TTY