



*n a t u r a l*  
**BEGINNING**



**OBGYN**  
*n o r t h*

Congratulations on your pregnancy and welcome to OBGYN North! We look forward to serving you and have prepared this notebook to help guide you through your pregnancy.

Our physicians and nurse-midwives work as a team and you will likely meet all of us throughout the coming months. Both the doctors and the nurse-midwives attend births across the street at St David’s Women’s Center of Texas. Our nurse-midwives also welcome babies at Natural Beginning Birth Center, located within our office. **If you are interested in having your baby at our birth center, please send an email to our nurse manager at [Lmonty@obgynnorth.com](mailto:Lmonty@obgynnorth.com) or press option 6 when calling our office so we can set up a private tour at your convenience.**

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### Contacting OBGYN North

Our office hours are 7a-4:30p Monday through Thursday and 7a-3p on Friday

**After Hours:** For emergencies or labor after business hours, please call our main office number at (512) 425-3825. Our answering service will contact us and we will usually call you back within 15 minutes. If you have not heard back, please call again.

**Patient Portal:** On the left side of our website, obgynnorth.com you will see “Patient Portal”. This allows access to email us for non-urgent issues and allows you to view your own lab results.

### When to call for Labor

**(512) 425-3825**

Please call our office if:

**You suspect your bag of water may be broken.** Sometimes the bag can leak small amounts of clear amniotic fluid or it may come in a gush that wets the bed or soaks your clothes. Put nothing in your vagina after you are leaking (no tampons, no intercourse, etc). Only 10% of women start their labor with the water breaking. If you are Group B Strep negative, you may wait at home for up to 12 hours. However, we want to talk with you as soon as your water breaks to review your symptoms and create a plan together.

**You have contractions that are regularly spaced, and getting longer, stronger and closer together.** Call us if the contractions are 5 minutes apart or closer, last for one minute and have been that way for an hour or more. If it is *not your first labor* call when the contractions are regular and strong, lasting for a full minute at regular intervals. Be guided by your body rather than the clock as subsequent labors tend to be shorter.

Some women prefer to labor at home for as long as they feel safe. Please follow the guidelines above and inform us that your water has broken or that active labor has

started. We will not require that you come to the hospital or birth center, but we still want to be involved so we can offer guidance and be prepared.

### **Prenatal Genetic Testing**

If knowing the health status of your baby in early pregnancy would change the course of your plans or provide peace of mind, you might consider prenatal genetic testing. Fortunately, 98-99% of babies are born without major birth defects.

We offer non-invasive screening for:

- Chromosomal defects including Down Syndrome, Trisomy 13 & 18
- Neural tube defects including spina bifida
- Recessive (Inherited) disease

Before you agree to any prenatal genetic testing, consider the following questions:

- Would a firm diagnosis affect how you handle the pregnancy or prepare for the baby?
- How important is the reassurance of a normal screening test?
- If the result of a screening test is worrisome, would you choose a more invasive or expensive diagnostic test to confirm?
- If you decline diagnostic testing, how will you handle the uncertainty about your baby's health?

**Chromosomal abnormalities.** These defects occur randomly (not inherited) and the chance of having a child with these conditions increases as a woman gets older.

**Trisomy 21 (Down syndrome)** is the most common single cause of human birth defects, resulting in physical and mental limitations. The level of mental retardation varies but is usually moderate. Frequency increases with maternal age, occurring in approximately 1 per 1,500 live births in women in their early 20's, 1 per 350 births at age 35 and 1 per 85 at age 40.

**Trisomy 18** (Edwards syndrome) causes serious medical and developmental problems and half of infants with this condition do not survive beyond the first week of life. It is difficult to determine the frequency of Trisomy 18 because many pregnancies affected end in an early miscarriage.

**Trisomy 13** (Patau syndrome) occurs in about 1 out of every 16,000 newborns. Like Trisomy 18, a pregnancy affected by Trisomy 13 will often end in miscarriage or stillbirth. Due to the presence of several life-threatening medical problems, most infants born with Trisomy 13 die within their first week of life.

**Spina bifida** is an incomplete development of the brain or spinal cord, occurring in the first months of pregnancy and can sometimes be detected with an ultrasound or blood test. Though rare, it is the most common neural tube defect in the United States, affecting 1,500 to 2,000 of the more than 4 million babies born in the country each year. Complications of spina bifida can range from minor physical problems including limited sensation, to more serious issues such as nerve damage, loss of muscle control, bladder or bowel control problems and sometimes paralysis. Taking folic acid (found in all Prenatal Vitamins) prior to pregnancy and during the first 3 months greatly reduces the risk of spina bifida.

**Recessive (Inherited) Diseases:** If desired, a woman only needs to be screened once in her life to determine if she is a carrier for some inherited diseases. A positive test would indicate that her child is at risk of inheriting the gene and additional testing would be suggested. These tests can be collected before a woman becomes pregnant or any time during a pregnancy. The test is also available for men and a blood sample can be collected in our office.

A complete list of diseases included is available upon request. Some of the more common diseases are listed below:

**Cystic Fibrosis (CF)** affects the mucus and sweat glands and can cause serious lung and digestive problems. It is most common in those of European descent and both parents would need to be carriers for the baby to inherit the disease. An estimated 1 in 29 Caucasian Americans has the CF gene.

**Spinal Muscular Atrophy** are a group of inherited diseases that cause muscle damage and weakness, getting worse over time and potentially lead to death. Most of the time, a child must get the defective gene from both parents. About 4 out of every 100,000 people have the condition.

**Fragile X** is a genetic condition involving changes in part of the X chromosome. It is the most common form of inherited mental retardation in boys. Boys and girls can both be affected, but because boys have only one X chromosome, a single fragile X is likely to affect them more severely.

**Sickle Cell Disease** results in damage to red blood cells. It can occur in any ethnicity but is most common among African Americans. The disease reduces life expectancy by thirty years, with most patients dying before they reach middle age. Approximately 10% of African Americans are silent carriers of sickle cell disease.

**Tay-Sachs** and **Canavan** diseases are most prevalent among Jewish families but can occur in any ethnicity. These progressive conditions result in the gradual loss of movement and mental function and are often fatal early in childhood.

## Pregnancy Calendar

Your **estimated** due date is calculated 40 weeks (280 days) from the last menstrual period, or 38 weeks from conception. Although we calculate a due *date*, your baby actually has a due *month*, with arrival occurring anytime between 38-42 weeks gestation. We honor your body's natural schedule and do not induce for non-medical reasons. However, certain medical issues including high blood pressure or diabetes or can weaken the placenta and early delivery is often beneficial. The following schedule can be used as a *guide* but individual circumstances may warrant deviations.

### 8 weeks (from last period)

**Prenatal Care:** Your first visit includes a health history and counseling, examination, ultrasound and lab tests. This appointment usually lasts 1 hour.

**Testing:** Prenatal lab work (blood type, complete blood count, rubella immunity, HIV, hepatitis B, syphilis, antibody screen, urine culture and other testing as indicated)

Pap Smear (if due) and tests for sexually transmitted infections

**Baby's Development:** Conception usually occurs 14 days after the last menstrual period with implantation into the uterus 10 days later. The placenta forms by 4 weeks and heart begins to beat by 6 weeks. By 10 weeks your baby is fully formed, with a tiny face, arms and legs.

### 12-13 weeks

**Optional Testing/Screening:** If you elect to do genetic testing you will be seen during 12-13 weeks of pregnancy for a blood test and ultrasound.

### 14-16 weeks

**Prenatal Care:** Your baby's heartbeat can be heard with a hand held doppler.

**Optional testing /screening:** Blood screening for neural tube defects and Down syndrome if desired.

**Baby's Development:** Placenta has formed and is fully functioning by 12 weeks. Arms, hands, legs, feet and internal organs are fully formed.

### 20 weeks

**Prenatal Care:** An ultrasound is done in our office to examine the baby's anatomy and the location of the placenta. If your baby cooperates, you can likely learn the gender of your baby during this ultrasound if you choose. This visit generally lasts one hour.

**Baby's Development:** You usually feel your baby's movements consistently now. Your baby is 8-10 inches long and weighs approximately one pound. The

baby begins to hear sound at about 20 weeks and vernix begins to cover and protect the baby's delicate skin, which is covered in fine hair.

#### **24 weeks:**

**Prenatal care:** If you are expecting your first child, please sign up for childbirth classes. We believe the classes are so beneficial for emotional preparation that we do *require* them for first time parents. Select the method and location of your choice. Experienced parents may take a refresher class if desired but it is not required. It is highly recommended for first time parents to take a breastfeeding class. Also, if you're attempting a vaginal birth after c-section we highly recommend our VBAC class.

At each visit a doctor or midwife will now begin to assess the growth of the uterus (fundal height) with a tape measure, and the baby's heart beat will be heard with a doppler.

**Baby's Development:** A 24 week baby generally weigh nearly 2 pounds and fingernails and toenails are present. Hiccups begin around this time and your baby's eyes can open. Your baby begins to put on weight and its size is now determined by genetics and maternal diet, rather than just gestational age.

#### **28 weeks**

**Prenatal Care:** As your baby grows, we may be able to determine your baby's position simply by feeling your abdomen with our hands. The baby may already be head down but it is another two months or more before it will be important to be positioned for birth.

**Testing/Screening:** Blood tests to screen for gestational diabetes, anemia, syphilis and HIV are drawn in our office. There are two methods for testing for gestational diabetes. **The first is a 2 hour blood glucose tolerance screening completed at the same time as your other blood tests listed above. Alternately, you may choose to check your blood sugars with a glucometer 4 times a day for one week.** However, you must complete gestational diabetes testing to continue prenatal care with our practice. Expectant mothers with an Rh negative blood type will receive additional screening and an injection of Rhogam will likely be given.

**Baby's Development:** Begin noticing the baby's active times of day. Most babies have 3-4 active times each day and sleep/rest in between. Please call us right away you do not feel 10 movements in 2 hours at his/her usual active times.

#### **31 weeks**

**Prenatal Care:** Plenty of time will be allowed to discuss your birth plans to help create realistic expectations and support your vision of labor and birth.

**Baby's Development:** Taste buds are formed and your baby is forming layers of healthy body fat.

### 34 weeks

**Prenatal Care:** We are carefully assessing your blood pressure and baby's growth at each visit. It is normal at this point in pregnancy to have more aches, pains and pressure as your body expands and posture changes to accommodate your growing baby.

### 36-37 weeks

**Prenatal Care:** If you have written a birth plan after finishing your birthing classes this is a good time to review it with one of our doctors or midwives.

**Testing/screening:** We screen all pregnant women for Group Beta Strep or "GBS". Approximately 1/3 of women carry this bacteria. It usually does not cause an infection to the mother, but can have serious consequences to her baby during labor or shortly after birth. The exam is done by sliding a sterile swab in the vagina and anus and results take about 3-5 days to return. If the bacteria is present you will receive antibiotics during labor to protect your baby. You may not deliver at Natural Beginning Birth Center if you chose to decline antibiotics.

Women over 35 years old will begin weekly testing at approximately 37 weeks to assess the health of the placenta. This includes a weekly ultrasound to measure the volume of amniotic fluid and a "non-stress test" or NST, where we listen to the baby's heartbeat for approximately twenty minutes. Once your baby is 37 week gestation, you are eligible to deliver at our birth center.

**Baby's Development:** The last month of pregnancy is a time of rapid growth. Most babies weigh approximately five pounds, have developed a suck reflex and are putting on fat to stabilize their body temperature and blood sugar after birth.

### 38 weeks

**Prenatal Care:** We will listen to your baby's heartbeat and discuss when and how to contact us for labor.

**Baby's Development:** Your baby is now term and ready for delivery any time in the next month. Most babies will have strong lungs and a coordinated suck and swallow for efficient feeding by 38 weeks.

### 40 weeks

This is only the estimated due date, which is really a due *month* and many healthy babies are born 7 to 10 days after the estimated date.

### 41 weeks

**Prenatal Care:** You will likely be seen twice a week and your provider will discuss holistic means of encouraging labor. We generally like to examine your cervix for dilation to help make recommendations.

**Testing/screening:** You will have two tests in our office to help determine if it is safe to continue waiting for labor to start on its own. A non-stress test (NST) is performed by monitoring the baby's heart beat for 20-30 mins while you relax in a recliner. An ultrasound is done to measure the amniotic fluid volume, a test we refer to as an Amniotic Fluid Index (AFI). If both are normal, we usually recommend repeating the tests in 3-4 days if labor has not started. If either test is not normal, an induction of labor may be recommended.

**Baby's development:** Ripe, plump, and ready for birth! Vernix is nearly gone and the baby's skin may begin to peel.

#### **41 ½ weeks**

Your cervix will likely be examined, an NST and AFI will be done and a plan to induce at 42 weeks will be created *with* you. Most women start labor on their own so induction is not a common occurrence at OBGYN North. However, an important part of our job is to be prepared and protect the safety of you and your baby. There are increased risks to the baby if pregnancy continues beyond 42 weeks gestation, so we generally recommend natural means of encouraging labor at this time.

#### **42 weeks**

It is time for the baby to be born (if it has not already). Different means of medical inductions will be discussed with you if natural means have not brought on contractions. Natural Beginnings Birth Center patients will begin an out of hospital induction and if those means are not successful will transfer to the hospital with one of our providers.

### **SCREENING FOR GESTATIONAL DIABETES**

#### **2 hour Glucose Tolerance Test**

- Stop eating 8 hours before you start the test and try to avoid sugar/sweets/ high carbohydrate foods
- Once you start the test you may not have **gum, candy, coffee, tea, or food** of any kind.
- You may eat and drink after your 2 hour blood draw, please bring a snack to eat after the test is complete.

- You may use the bathroom as needed. It does not effect the test.
- If you need to drink water you may have sips while fasting (the 8 hours prior to your test) but **you may not drink anything during the test.**
- Your tests results will be available within 1 week of the test.

### **When you arrive at OBGYN North**

- You will have your blood drawn while you are fasting
- After your blood draw, you will be given a bottle of glucose solution. Drink it as fast as you can; in 5 minutes or less.
- We will draw your blood at 1 hour and at 2 hours from the time you finish drinking the glucose

### **A few more things:**

- Please let your medical assistant know if you would like a tDap (pertussis) vaccine. You will receive it at your 28 week visit
- **If** you are RH Negative you will receive a Rhogam shot following your glucose tolerance screening

### **Prenatal Nutrition**

The amount of weight gained during pregnancy varies but averages approximately 25-35 pounds. Balanced nutrition and exercise and steady growth of the baby are more important than the reading on the scale. However, excessive weight gain can increase complications with pregnancy and birth, including the likelihood of a cesarean birth.

Avoid substances that may be harmful to your baby including alcohol, illegal drugs and smoking. Limit your intake of caffeinated drinks. It is generally considered safe to drink one cup of coffee per day. Hydration is important and water is always preferred over soda, sports drinks, juice and tea. We recommend drinking at least 64 ounces of water a day.

In pregnancy, it is necessary to increase calories from high quality foods such as whole grains, fruits, vegetables, protein foods and food high in calcium and iron.

Taking a prenatal vitamin with 400-1000 mcg (.4mg-1 gm) of folic acid daily reduces the incidence of certain birth defects. If prenatal vitamins worsen nausea, replace them with a 400 mcg folic acid supplement, which is usually well tolerated. Once the nausea subsides, the folic acid can be replaced with a prenatal vitamin.

**Protein Rich Foods:** Think of protein in pregnancy as the hub of the meal and have a serving of protein food at least three times per day. These foods include

(Approximate serving size)

- |                        |                               |
|------------------------|-------------------------------|
| • Meats, poultry, fish | size of the palm of your hand |
| • Eggs                 | 1-2 eggs                      |
| • Beans and Peas       | 1 cup                         |
| • Nuts and Seeds       | ¼ cup                         |
| • Nutritional Yeast    | 2-4 tablespoons               |
| • Cheese               | ¼ cup                         |
| • Yogurt               | 1 cup                         |
| • Tofu or tempeh       | size of the palm of your hand |

**Iron:** Iron needs increase significantly while pregnant, due in part to a 40% to 60% expansion in blood volume that occurs primarily in the second trimester. Iron is needed to produce hemoglobin, the protein in your red blood cells that transports oxygen to other cells. A test for anemia is usually performed near the beginning of pregnancy and again around 28 weeks.

Increasing iron and iron absorption:

- **Foods rich in iron:**
  - Green leafy vegetables (spinach, broccoli, kale, sea weeds)
  - Red meats, oysters, clams
  - Dried fruits like apricots, peaches, prunes and raisins
  - Beans
  - Egg yolks
  - Blackstrap molasses
  - Whole grains
  - Alfalfa
- **Cast Iron:** Cooking with cast iron can increase the iron content by 50% including a cast iron skillet or an “iron fish” dropped into boiling water for at least 10 minutes
- **Vitamin C containing foods increase iron absorption:** Oranges, tomatoes, red bell peppers, strawberries, broccoli, mango, guava, and papaya.
- **Avoid caffeinated drinks, dairy, and calcium supplements when taking iron or the prenatal vitamin because they decrease iron absorption.**

**Folic Acid:** Folic acid (Vitamin B 9) gets its name from foliage and is concentrated in leafy greens. Folic acid is essential to your baby’s development because it helps in the formation of the developing brain and spinal cord. A healthy diet will provide adequate folic acid and a supplement of 400 mcgs/day (included in prenatal vitamins) is recommended. Dietary sources of folic acid include:

- Lentils, beans, peas, chickpeas
- Green leafy vegetables, broccoli
- Papaya

- Strawberries

**Calcium:** Calcium is an essential mineral for normal muscle and nerve function and for building and maintaining bones and teeth. Eat four servings of calcium rich foods per day.

- Foods rich in calcium
  - Hard cheeses, yogurt and milk
  - Leafy green vegetables, sea vegetables
  - Nuts and seeds
  - Canned fish with soft bones such as sardines, mackerel and salmon
  - Blackstrap molasses
- Supplements
  - Need to be balanced with phosphorus and magnesium which occur naturally in most foods. If you take a calcium supplement, it is best to take one that contains these minerals as well.
  - Avoid taking calcium supplements at the same time as iron supplements
- Herbal sources of calcium
  - Alfalfa
  - Red Raspberry
  - Nettles
  - Dandelion

**Herbs:** Please check with us before using herbal supplements while you are pregnant or breast feeding. A general guideline is listed below.

- Safe
  - Herbs generally used for cooking such as basil, oregano, rosemary etc. in cooking doses only (do not take capsules)
  - Red Raspberry Leaf
  - Pregnancy Tea in moderation
- Avoid
  - Angelica
  - Black Cohosh
  - Blue Cohosh
  - Dong quai
  - Licorice
  - Siberian ginseng
  - Uva ursi
  - Yarrow
  - Elderberry
  - Melatonin
  - Chicory tea
  - Kombucha
  - Evening primrose oil

\*Other products to avoid:

- Ibuprofen/Motrin – all Non-Steroid Anti-inflammatory Drugs (NSAIDs)
- Naproxen/Aleve – all Non-Steroid Anti-inflammatory Drugs (NSAIDs)
- Aspirin
- Retin-A, Retinol, Salicylates
- Tetracycline, Sulfa and Floxin drugs

- Saccharin

### Food Precautions

- **Do not eat raw or undercooked meat, fish, shellfish, or eggs** (sometimes raw eggs are in homemade mayonnaise or Caesar salad dressing).
- To prevent listeria infection, heat all luncheon meat, pate' and hotdogs (even if the label says precooked) until hot. Microwave cooking can be patchy and may not completely kill listeria unless steaming hot throughout.
- Avoid fish that concentrate mercury: swordfish, tilefish, king mackerel, albacore tuna, and shark.
- Eat other seafood such as shrimp, salmon, catfish, oysters, and dark tuna only 2-3 times per week (no more than 12 ounces per week).
- To prevent listeria infection cook all soft/cultured cheese such as Feta, Brie, Blue, and Camembert thoroughly. Do not eat these cheeses unless cooked.
- 

### Safe Over the Counter Remedies and Medications

Over the counter medications that are safe in pregnancy:

| Symptom          | Medication Options   |
|------------------|--|
| Headache         | Acetaminophen (Tylenol) extra strength, 1 gram (two tabs) every 6 hrs<br>Aspirin free Excedrin Tension 1 tab every 6 hrs   |
| Sinus Congestion | Neti Pot (use sterile water)<br>Mucinex<br>Pseudoephedrine (Sudafed) 60 mgs, 2 tablets every 4 hrs<br>Phenylephrine (Sudafed PE) 10 mg every 4 hrs<br>**Use Sudafed sparingly  |
| Allergies        | Diphenhydramine (Benadryl) 50 mgs (2tabs) every 4 hrs<br>Loratadine (Claritin) 10 mgs (1 tab) daily<br>Cetirizine (Zyrtec) 10mgs (1 tab) daily<br>Chlorpheniramine (Chlor-Trimeton) 4 mgs (1 tab) every 4 hrs<br>Clemastine(Tavist-1)1.34 mgs every 12 hrs                               |
| Cough            | Dextromethorphen (Robitussin) 20 mgs every 4 hrs<br>Guaifenisin (Mucinex) 400 mgs every 4 hrs<br>Tylenol Cold and Sinus 2 capsules every 4 hrs   |
| Sore Throat      | Cepacol lozenges<br>warm salt water gargles  |
| Nausea/Vomiting  | Doxylamine (Unisom) 12.5 mgs every 12 hrs + 50mg Vitamin B6<br>Dimenhydranate (Dramamine) 100 mgs every 4 hrs<br>Emertrol<br>Sea Bands   |
| Heartburn        | Papaya Enzymes<br>Tums 1000-3000 mgs every 2 hrs<br>Ranitidine (Zantac) 150 mgs every 12 hrs<br>Cimetidine (Tagamet) 300 mgs every 6 hrs<br>Famotidine (Pepcid) 20 mgs every 12 hrs<br>Prevacid  |
| Upset stomach    | Maalox, 4 tabs as needed<br>Mylanta, 4 tabs as needed  |
| Diarrhea         | Loperamide (Imodium) 4 mgs initially, then 2 mgs after each unformed stool   |
| Constipation     | Natural Calm – 2tsp. 1-2 doses/day<br>Docusate (Colace) 250 mgs every 12 hrs<br>Methylcellulose (Citrucel) 1 TBSP in 8 oz water every hrs 8 hrs<br>Polycarbophil (FiberCon) 1 mg every 6 hrs<br>Magnesium hydroxide (Milk of Mag) 60 mls daily<br>Magnesium Citrate 150 mgs every 12 hrs |
| Gas              | Mylicon<br>Gas-X<br>Phazyme  |

|                                   |   |
|-----------------------------------|---|
| Hemorrhoids                       | Pramoxine (ProctoFoam)  |
|                                   | Anusol  |
|                                   | Witch Hazel (Tucks pads)  |
| Yeast Infections                  | Miconazole (Monistat 5 day or 7 day cream)  |
| Insomnia<br>(difficulty sleeping) | Diphenhydramine (Benadryl) 50 mgs (2tabs) at bedtime                              |
|                                   | Doxylamine (Unisom) 25 mgs at bedtime   |
| Skin rashes                       | Hydrocortisone (Cortaid) up to 4 times daily                                      |
|                                   | Diphenhydramine (Benadryl) spray or cream, several times daily<br>Calamine lotion |

If symptoms do not resolve in 48 hours please call our office during business hours.

### **Exercise**

Exercise should be continued during pregnancy. It enhances mood and helps stabilize blood sugar. Once the nausea and vomiting of early pregnancy subsides, most women can continue their normal exercise routine. We encourage all women to walk at least 30 minutes a day as a form of low impact beneficial exercise. Once your “baby bump” begins to show, avoid abdominal exercises such as sit-ups or crunches. As pregnancy progresses, sometime around 24 weeks, you will want to start avoiding running due to the repetitive jarring motion. You will not harm your baby but it puts undue stress on your loose joints and pelvic floor and bladder. Walking, stationary bike, elliptical, swimming and yoga are wonderful forms of exercise that can be done throughout pregnancy. If it feels good, you can work out hard and break a sweat, but avoid the sensation of being winded. Drink plenty of water during and after your workouts.

### **Dental Care**

Good dental hygiene should be continued throughout pregnancy. Dental cleanings, fillings, root canals and even x-rays can be done while you are pregnant. It is normal for your gums to become more engorged with blood and bleed easily while you are pregnant. This is a normal change and not associated with gum disease. If you are having extensive dental work done, your dentist may request a letter from us prior to beginning your dental work.

### **Travel**

Traveling during your pregnancy is generally considered safe during the first and second trimester for women with uncomplicated pregnancies. We generally do not recommend traveling more than a few hours away after 35 weeks gestation. If you are planning to travel, please let us know so we can make proper assessments and recommendations. Drink plenty of water to help avoid bladder infections and walk around for a few minutes at least every 2-3 hours to help prevent blood clots. If you are flying, please be aware that the change in barometric pressure with landing can cause contractions that occur intermittently for a couple of hours. These are not usually labor contractions, but stay hydrated, allow others to haul your luggage and rest when you get to your destination. If the cramps of contractions do not go away after a few hours rest, please call us.

### **Warning Signs**

Most pregnancies are healthy and uncomplicated. The following are symptoms that require attention and a call to our office:

- Temperature above 101 degrees that has not be relieved with hydration and Tylenol
- Vomiting or diarrhea that persists longer than 24 hours
- Fainting on more than one occasion
- Leaking amniotic fluid
- Contractions or rhythmic cramping more frequent than every 10 mins prior to 36 weeks gestation. First hydrate and rest and if cramping persists longer than two hours, please call us.
- Vaginal bleeding. Spotting lightly (requiring panty liner or less) is normal after intercourse, a cervical exam or as labor begins. If it is not related to these events, or is heavy, please notify us.
- Signs of pre eclampsia:
  - Sudden or severe swelling of hands, lower legs and/or face
  - Sudden or severe headache, unrelieved with rest, hydration and Tylenol (acetaminophen)
  - Blurred vision or other visual disturbances
  - Persistent and sudden upper right abdominal pain unrelated to the baby's movements
  - Generally feeling sick or "toxic"
- Signs of cholestasis:
  - Excessive itching, especially on palms and/or soles of feet
  - Pain in your abdomen
- Lack of fetal movement during the baby's *active* time
  - By 28 weeks most babies have established fairly predictable periods of rest and activity. Most babies are awake at their mother's bedtime and sleep quietly for stretches of several hours at a time.
  - If your baby has not been active for most of the day (after 28 weeks), rest and pay attention to the movements. Please call us if your baby is not moving (flutters, rolls and gentle movements count) at least 10 times in 2 hours at his/her usual active time.

### **Preparing for Delivery**

**Childbirth Classes:** Labor can be one of the most powerful experiences you will ever encounter. It can be empowering or overwhelming. To help make it a positive event, we

**require** all first time parents to take a childbirth education class. There is no single best method to prepare you for to labor but knowledge is power. Removing the mystery and feeling confident about this normal process can create a better birth experience. Select a method of teaching that best suites your philosophy and schedule. We recommend that you start investigating options around 20 weeks (5 months) and plan to complete a series around 36 weeks. Sign up early (many classes are full two months before they start) but don't attend classes too early in your pregnancy. You may consider the following types of classes.

### **Classes offered at OBGYN North**

Conveniently held in our waiting room and are taught by Shelley Scotka and Amanda Wyszowski both certified childbirth educators and highly experienced labor doulas. To register please call our office (512) 425-3825 or email [mvaldez@obgynnorth.com](mailto:mvaldez@obgynnorth.com).

**Prepared Childbirth: Four week series:** This class is perfect for **first time parents** who need a comprehensive preparation for childbirth. We'll cover the physiology of labor and delivery, recognizing signs of labor, when to call your care provider, and the normal stages of labor. We'll learn and practice with your support person a variety of methods to cope with labor pain including breathing, relaxation, visualizations/meditation, touch and massage, positioning, and water therapy. We'll discuss what happens at the birth both in a hospital and birth center setting. What if medical interventions become necessary? We'll look at the possible interventions that are common, and cover the risks and benefits of each, including cesarean birth. We'll also review the recovery and postpartum periods, and what to expect for both you and your baby during that time. It's recommended you sign up for this series by 24 weeks and plan to begin the series by 32 weeks. \$200

**Labor Skills: One time 2.5 hour workshop:** This workshop is designed for those who want to focus exclusively on natural ways to cope with labor pain, ideal for **those who have birthed before** and need a "refresher" or for those who just want to work on their labor skills with their partner. We'll discuss and practice relaxation, breathing, using visualizations/meditation, touch and massage, positioning and water therapy. We'll discuss the importance of the birth environment and creating an "oxytocin friendly" space for your labor. We'll give your support person plenty of ideas, tools and suggestions to help you get through labor, and review typical "challenging" scenarios during birth and how to get through them. Ideal anytime during the last trimester. Plan to sign up by 24 weeks. \$50.

**Planning your VBAC: One time 2.5 hour workshop:** This class is designed for those planning a Vaginal Birth After Cesarean. We'll discuss the most up to date research on VBAC and review the benefits and risks. We'll look at ways to prepare for a successful VBAC both physically and emotionally, and offer you and your support person an opportunity to explore the emotions surrounding your previous birth experience. We'll talk about hospital protocols and learn what to expect during a VBAC labor. What if another cesarean becomes necessary? We look at the reasons why a repeat cesarean may become a necessity and ways to make that birth family centered. Ideal during the second trimester. \$50.

### **Other Childbirth Education Classes and Programs offered in the Community**

**1.Lamaze:** The mission of Lamaze International is to “promote, support and protect natural, safe and healthy birth through education and advocacy through the dedicated efforts of professional childbirth educators, providers and parents.” Lamaze holds to six Healthy Birth Practices:

- Let labor begin on its own,
- Walk, move around and change positions throughout labor,
- Bring a loved one, friend, or doula for continual support,
- Avoid interventions that are not medically necessary,
- Avoid giving birth on your back and follow your body’s urge to push,
- Keep mother and baby together – It’s best for mother, baby and breastfeeding.

Lamaze class are offered across the street from our office at St. David’s North Austin Medical Center. Additional hospital based classes include breastfeeding, newborn care and infant CPR . To register call (512) 544-4226 or visit the following site:

<https://stdavids.com/service/register-for-classes>.

Free Lamaze classes are offered at **Any Baby Can**, 6207 Sheridan Ave Austin, TX 78723, [www.abcaus.org](http://www.abcaus.org) or (512) 454-3743. Any Baby Can also offers free classes for baby care, breastfeeding, safety and child development.

**2.Bradley Method** ([www.bradleybirth.com](http://www.bradleybirth.com)): The Bradley Method is a system of natural labor techniques in which a woman and her coach play an active part. It is a method of increasing self-awareness, teaching a woman how to deal with the stress of labor by tuning in to her own body. The Bradley Method encourages mothers to trust their bodies using natural breathing, relaxation, nutrition, exercise, and education. The basic goals of the Bradley Method are:

- Natural childbirth.
- Active participation by the husband as coach.
- Excellent nutrition (the foundation of a healthy pregnancy and baby).
- Avoidance of drugs during pregnancy, birth, and breastfeeding, unless absolutely necessary.
- Relaxation and NATURAL breathing - can be effective pain management techniques with training according to the National Institutes of Health.
- "Tuning-in" to your own body and trusting the natural process.
- Immediate and continuous contact with your new baby.
- Breastfeeding, beginning at birth provides immunities and nutrition.

**3.Hypnobirthing** ([www.hypnobirthing.com](http://www.hypnobirthing.com)): The HypnoBirthing® method of childbirth education is as much a philosophy as it is a technique. It is a rewarding, relaxing, and stress-free method of birthing that teaches a mother, along with her birthing companion, the art and joy of experiencing birth in an easier, more comfortable, and often pain-free manner that most nearly mirrors nature. HypnoBirthing proponents subscribe to the belief that when a woman is given the proper preparation for childbirth, she and her birthing companion can experience a safe, serene, and satisfying birthing, free of the fear that causes tension and pain. When mind and body are in harmony, nature is free to function in the same well-designed manner that it does with all other creatures.

**4. Birthing From Within ([www.birthingfromwithin.com](http://www.birthingfromwithin.com)):** This method of preparation offers a soulful and holistic approach to birth preparation that integrates intuitive and acquired knowledge. The primary principles are:

- Childbirth is a profound rite of passage, not a medical event, even when medical care is part of the birth.
- The essence of childbirth preparation is self-discovery, not assimilating obstetric information.
- Parents' individual needs and differences determine class content.
- Active, creative self-expression is critical to childbirth preparation.
- The purpose of childbirth preparation is to prepare mothers to give birth-in-awareness, not to achieve a specific birth outcome.
- Pregnancy and birth outcome are influenced by a variety of factors, but can't be controlled by planning.
- In order to help parents mobilize their coping resources, it is critical for childbirth classes to acknowledge that unexpected, unwelcome events may happen during labor.
- Parents deserve support for any birth option which might be right for them (whether it be drugs, cesarean, home birth, or bottle-feeding).
- Pain is an inevitable part of childbirth, yet much can be done to ease suffering.
- Pain-coping practices work best when integrated into daily life, rather than "dusted off" for labor.
- Fathers and birth partners help best as birth guardians or loving partners, not as coaches; they also need support.

**5. Advanced Comfort Strategies for Labor:** This 2.5 hour hands-on workshop at St. David's Medical Center on 38<sup>th</sup> street, is designed for the expectant families who want to build on their natural pain management skills. Thought by a certified doula and childbirth educator, couples will learn tried and true strategies to manage pain including:

- Reviewing basic relaxation and breathing strategies
- Using visualization, meditation, vocalization and mantras
- Creating a peaceful environment for labor and birth
- Practicing positions that promote comfort and progress in labor
- Using massage, touch and acupressure
- Managing "back labor" and other challenges in labor
- Helping your support person feel confident and prepared

For schedule and registration call (512) 544-4226 or visit <https://stdavids.com/service/register-for-classes>

- **Pediatrician:** Please select a pediatrician by the 34 week of your pregnancy. The best resources can be your friends whose parenting styles you respect. The pediatrician you select does not need to come to North Austin Medical Center. There is team of wonderful doctors who will help take care of your newborn during your hospital stay. Most pediatric offices offer an opportunity to meet their staff prior to your baby being

born. Do not assume they are accepting new clients. Call *before* your baby is born to establish a relationship.

- **Preregistration:** Expectant mothers can save time and preregister at St David's North Austin Medical Center by visiting <https://stdavids.com/patients-visitors/patient-services/hospital-pre-registration.dot>. A link is also provided via our website, obgynnorth.com. Preregistration is ideally done anytime from 20-36 weeks gestation.
- **Hospital Tour:** Taking a tour of the Women's Center at North Austin Medical Center is highly recommended if this will be your first birth there. Being familiar with the environment can help alleviate anxiety and finding your way around *before* labor starts makes the check-in process less stressful. Tours last approximately 60mins and are offered every Saturday at 10:00 a.m., 12:00 p.m. and 2:00pm. To register for a tour, please call (512) 478-3627 or register online at <https://stdavids.com/calendar/index.dot>.
- **Meet and Greet** – Please see our website for the dates of our provider Meet and Greet and Hospital tour with one of our providers. These alternate months and the scheduling staff can assist you in signing up.
- **Doula:** You have the option of hiring a doula for additional labor support. A doula is a trained labor support person (not a medical professional) who provides continuous physical, emotional, and informational support during labor. A doula does not replace the labor partner but provides experienced guidance and an additional set of hands. Post partum doulas are available to provide support at home in the early weeks after your baby arrives. A list of over 50 local doulas can be found at [www.centexdoulas.org](http://www.centexdoulas.org).
- **Circumcision:** If you are having a son, you will need to decide if you want him circumcised. This is an optional procedure and often a personal decision. Some of the physicians at OBGYN North offer this service. We do not circumcise at the hospital prior to discharge, and instead we complete the procedure in our clinic in the early weeks after birth. Please call our office to schedule this after you deliver.
- **Lead Provider Program:** OBGYN North is proud to offer a Lead Provider Program to all obstetrical patients. As a collaborative practice, our patients have always visited with all providers – both physicians and midwives – who could possibly be at their birth. We also want to help patients feel continuity of care and grounding with a provider who sees them more consistently. The Lead Provider will see a patient every other visit, while the intervening appointments will be with the other providers in the practice. This offers both continuity and collaboration. Each provider will have a limit to how many patients may be assigned to them per due date month to ensure equal distribution of patients. We ask that patients identify who they would prefer as their

Lead Provider by their 20 week appointment or earlier. If you have questions about this program, please let us know.

- **Cord Blood Banking:** If you are considering donating or saving your baby's stem cells or tissue from the umbilical cord, arrangements need to be made before labor begins. Screening and registration can take a few weeks so we recommend contacting the company of your choice prior to 35 weeks gestation.

Cord blood stem cells have been used to treat some metabolic disorders, cancer and blood disorders. Promising research suggests stem cells may be used to treat immune disorders, brain injury, hearing loss, juvenile diabetes and spinal cord injuries. State law requires information be available to expectant parents. Their brochure is available on line at: <http://www.dshs.state.tx.us/mch/#Umbilical2>. We are happy to provide a published version upon request. The State suggest the following resources:

National Marrow Donor Program-**Lists of hospitals that accept cord blood donations.**  
Phone: 1-800-627-7692  
Web Address: [www.marrow.org](http://www.marrow.org)

Parent's Guide to Cord Blood Banks-**Information** for parents on cord blood banking, and lists private and public cord blood banks.  
Web Address: [www.ParentsGuideCordBlood.com](http://www.ParentsGuideCordBlood.com)

South Texas Blood & Tissue Center-Information on the process and benefits of cord **blood banking and donation.**  
Phone: 1-800-292-5534  
Web Address: [www.bloodntissue.org/texascordbloodbank](http://www.bloodntissue.org/texascordbloodbank)

We do not recommend any one company and encourage you to explore your options. This may not be an all-inclusive list. Please visit their websites for information, pricing and current discounts.

- Cord Blood Registry (CBR)
- Cryo-Cell International
- ViaCord
- StemCyte
- CorCell
- Lifebank USA
- Family Cord Blood Services
- Stembanc

**8.** Our websites have a lot of wonderful information beyond what is listed here. Please visit us at [www.obgynnorth.com](http://www.obgynnorth.com) and click on patient education and visit us at [www.natural-beginning.com](http://www.natural-beginning.com) and click on patient education.

### **Labor at the hospital and birth**

At the hospital...

- After you speak to us on the phone, WE will call the hospital and notify the nursing staff that you will be arriving. We will meet you in Labor and Delivery.
- The nurses will monitor the baby's heart for 30 minutes and ask you questions about your health history and labor.
- We will likely examine your cervix to assess labor progress. Once it is confirmed that labor is well under way, a saline lock (base of an IV) will be placed and your blood will be drawn.
- We will likely encourage you to be out of bed, walking, showering, sitting on the birth ball etc. We generally do intermittent monitoring of the baby's heart beat for 5 minutes out of every 30 minutes. You are encouraged to bring a birth ball, music, essential oils or your own gown/clothes for comfort. Your own pillow may also provide great comfort.
- We want you to drink liberally because you will not likely have IV hydration. You may bring whatever drinks you enjoy including both those with and without sugar to provide energy. Many women prefer not to eat during labor because they are either not hungry or are nauseated. If you are hungry during early labor, we encourage you to eat foods that are easily digested and not spicy or acidic.
- We will likely not check your cervix again until you or your baby show signs of labor progression. We try to avoid exams after your water is broken due to risk of infection.
- A nurse will assist you during labor and we will be in to check on you frequently (at least every two hours). We are available when you need us.
- When you are ready to push, you will be free to try multiple positions to determine what works best for you. We are comfortable assisting mothers standing, squatting (squat bars available), hands-knees or side-lying. We will usually be with you the entire time you are pushing.
- We can use warm compresses and olive oil to assist the stretching of your tissue to help decrease tearing. Episiotomies are rare and we allow time for your perineum to stretch. Occasionally an episiotomy is beneficial in an emergency.

#### When you give birth...

- At each birth there are usually three healthcare professionals. A doctor or midwife from OBGYN North will be there with you. There will be two registered nurses; a nurse to take care of you as well as a nurse to care for your baby. You may have as many support people with you as you wish, but we encourage you to include only those who are supportive of your birth preferences and will offer encouragement, not bring stress. If you want to have a young child in the room, you need to have a

specified support person for the child so they can leave the room together if the child finds the birth too intense.

- Immediately after delivery your baby will be placed on your abdomen and dried off. We prefer to leave the umbilical cord attached until it stops pulsating, usually one to five minutes after delivery. If you are collecting your baby's stem cells for banking, we need to cut the cord while it is still pulsing to obtain an adequate volume of cord blood.
- Your baby will be assessed while resting on your chest or abdomen unless intervention is needed to help your baby make the transition to breathing for himself.
- We assess your individual situation to determine if Pitocin would be beneficial after delivery to assist with decreasing vaginal bleeding.

#### After delivery...

- You and your baby will remain in your labor room for 1-2 hours for recovery and evaluation. The nurse will check your vital signs and bleeding frequently. The baby will be quickly weighed in the room and the nurse will help you with breastfeeding.
- When you are ready to go to the postpartum room, your partner and baby usually go to the nursery for a full physical exam and bath. You may accompany your partner if you choose. Most women settle in their postpartum room and entrust their partner with these responsibilities. The vitamin K injection and erythromycin eye ointment are hospital and state standards respectively and must be given in the first two hours of life. You may decline both if you are strongly opposed. Hepatitis B vaccination is optional for your newborn during the hospital stay. It can be declined or delayed.
- Because your placenta is an organ, Texas law requires the hospital to properly dispose of it. If you want to keep it, you must get a court order before labor starts. Please see our website for a detailed description of how this is accomplished.
- The standard hospital stay is two days after delivery. If you prefer to leave sooner than 36 hours, you should make arrangements with your pediatrician in advance as it is the baby's discharge that generally causes the delay.
- One of our providers will see you each day you are in the hospital. We ask you to return to our office six weeks after your baby is born, or sooner for certain circumstances. At this time we will discuss contraceptive options for those who desire it.

## **Labor and birth at Natural Beginning Birth Center**

- After you speak to us on the phone, we will meet you at the office of OBGYN North to evaluate you and your labor. If you are comfortable with an exam, we will check your cervix to assess labor progress.
- The midwives will monitor the baby's heart for 20 minutes as long as you are not imminently delivering. Together you will determine if it is the right time to be admitted to the birth center.
- Once admitted to the birth center, your baby's heart rate is monitored every 30 minutes using a doppler ultrasound and more frequently as labor progresses.
- You are encouraged to move freely throughout your room. We have birth balls, peanut balls, and other birth tools to help with positioning and comfort.
- When you are ready, your bath will be drawn and you are welcome to labor in the tub. Our tubs have santi-jets for your comfort and numerous items to make laboring in the water comfortable.
- We encourage you to eat and drink throughout the labor process. You may bring whatever you enjoy including drinks and snacks with and without sugar to provide energy. We encourage you to eat foods that are easily digested and not spicy or acidic. The birth center has a kitchenette for your convenience. Please bring food for both you and your partner.
- We will likely not check your cervix again until you or your baby show signs of labor progression. We try to avoid exams after your water is broken due to risk of infection.

- When you are ready to push, you will be free to try multiple positions to determine what works best for you. We are comfortable assisting mothers standing, squatting, hands-knees or side-lying. Many mothers enjoy pushing in the tub as well.

#### When you give birth...

- At each birth there are usually two healthcare professionals; your midwife and a nurse. You may have as many support people with you as you wish, but we encourage you to include only those who are supportive of your birth preferences and will offer encouragement, not bring stress. If you want to have a young child in the room, you need to have a specified support person for the child so they can leave the room together if the child finds the birth too intense.
- Immediately after delivery your baby will be placed on your abdomen skin to skin and dried off. We prefer to leave the umbilical cord attached until it stops pulsating, usually one to five minutes after delivery.
- Your baby will be assessed while resting on your chest or abdomen unless intervention is needed to help your baby make the transition to breathing for himself.
- We assess your individual situation to determine if Pitocin would be beneficial after delivery to assist with decreasing vaginal bleeding.

#### After delivery...

- Following delivery, you and your baby will be evaluated often to ensure a safe recovery from birth. The nurse will check your vital signs and bleeding frequently. She will also regularly evaluate baby's status and vital signs. Both your nurse and your midwife will be continuously available to assist with breastfeeding and any other need.
- At approximately 1-2 hours of life our midwives will assess baby from head to toe, determine baby's weight, and administer birth medications if you would like.
- After mother's recovery is complete, approximately 2 hours after delivery of your placenta, we will draw an herbal bath for you to relax in. Some families also like baby to join mom in the herbal bath which they are welcome to do.
- Often our families rest together for 2-3 hours then gather their things to prepare to go home together.

#### At home...

- We will come to your home at 24-48 hours of life to evaluate how you are transitioning to life together. We will preform a full assessment of mom and of baby,

re-check baby's weight, perform a lactation consultation, and complete the Texas Newborn Screen if you would like.

- At 3 days of life you and baby return to the birth center for another evaluation. We complete a full assessment of mom and of baby, re-check baby's weight, perform a lactation consultation, and if agreeable we will complete a hearing screen and cardiac screen on baby.
- We will see you again in 6 weeks after delivery at OBGYN North to evaluate healing and discuss contraceptive options if you desire it.

## **Postpartum Care**

- **Exercise:** You may start gentle walking for exercise at two weeks postpartum. Take the baby in a sling or stroller and enjoy some fresh air. Wait until 6 weeks post partum to start an exercise program such as running, biking, weights, swimming, or yoga. Pilates is excellent for restoring the vaginal tone and preventing incontinence.
- **Intercourse:** We recommend waiting until after your 6 week postpartum visit to resume intercourse. We will make sure your body is healed and discuss contraception with you. Throughout your breastfeeding journey, it may help you to feel more lubricated to use a nice oil during intercourse like coconut oil or a lubricant such as Astroglide or KY Liquid.
- **Read the section on Post Partum Depression and Anxiety.** Share it with your partner and anyone else near you after baby is born so they know the signs and symptoms to watch for. Isolation and sleep deprivation can increase the likelihood of experiencing depression and anxiety. Seek out other parents with children to socialize with; look for playgroups, postpartum exercise/yoga classes, or La Leche League meetings. Austin has a lot of parents eager to network in person or online groups. Contact our office immediately if you feel like you are experiencing signs or symptoms of postpartum depression or anxiety so we can help you.
- **Sleep deprivation is hard.** Breastfeeding moms usually need a daily naps for several months. Recharge yourself with rest, having your partner and family/friends care for the baby at times in the early weeks of motherhood.
- **If you have a son and it is your desire to have him circumcised,** it will be in our office during the first month of life.

## **Postpartum Depression and Anxiety**

Having a new baby is a life altering event. Although it is often a joyful period, there may be times when it is not. These are some tips to help you understand feeling sad, overwhelmed, anxious, and help you to recognize when you should ask for help.

## Maternity Blues/Baby Blues

Most women will have short periods of mood swings, tearfulness, or irritability during the first weeks after birth, which can be worse when you are tired. This is a normal adjustment to new parenthood. If you are not sleeping, or you are becoming increasingly upset, you should call our office.

## Postpartum Depression and Anxiety

About 1 of every 10 women will develop serious depression or anxiety during the first year after birth, more often in the first few months. Having any of the symptoms below doesn't mean that a woman is weak or a failure as a mother. Mothering is a learning process with each child. If you have several of these symptoms that persist or recur, please call our office.

- Feelings of panic
- Loss of appetite
- Fear that you will hurt yourself or your baby
- Feeling guilty
- Feelings of anxiousness and insecurity
- Feeling overwhelmed
- Crying daily
- Feeling like you are not normal or real anymore
- Difficulty sleeping—you can't sleep, even when the baby is sleeping
- Angry; feeling like you might explode
- Feeling lonely
- Can't make decisions
- Inability to concentrate or focus
- Thinking the baby might be better off without you
- Racing thoughts, you feel you can't settle down or relax
- You are afraid to be alone with your baby
- You are worried all the time and nothing anyone says seems to help

## Postpartum Psychosis

A small number of women will experience a more severe postpartum reaction in which they lose touch with reality. Women who develop postpartum psychosis may hear or see things that are not there, or exhibit strange and sometimes dangerous behavior. **This is a true emergency and requires immediate help.**

## Who Does this Happen to?

Postpartum depression and anxiety affect women from all walks of life. The cause is probably a combination of factors, including hormone changes that occur after birth, which can affect how the brain functions. Women with a history of depression and anxiety (even times of just "feeling low"), a family history of depression or anxiety, or stressful life events are more likely to develop postpartum depression and anxiety. Childbirth is a major life event, and it can trigger reactions to past trauma. If you think that any of these risks apply to you, talk with us about it *before* your labor and birth.

## More Information

- We are here to help. Please call our office if you are experiencing any of the above symptoms. (512) 425-3825.
- Pregnancy and Postpartum Healthy Alliance of Texas is accessible 24 hours a day and connects women with healthcare providers who can assist them.  
<http://pphatx.org>.
- Depression After Delivery, Inc. 91 East Somerset Street Raritan, NJ 08869 1-800-944-4773 (4PPD) [www.depressionafterdelivery.com](http://www.depressionafterdelivery.com)
- Postpartum Support International 927 N. Kellogg Ave. Santa Barbara, CA 93111  
CALL: (805)967-7636 FAX: (805)967-0608 [www.postpartum.net](http://www.postpartum.net)
- American College of Nurse-Midwives [www.midwife.org/focus](http://www.midwife.org/focus)

## SAMPLE BIRTH PLAN

It is our desire to have a natural, non-medicated, intervention-free childbirth .

It is our desire to have epidural anesthesia.

We understand the need to be flexible. Our goal is to have a safe, healthy birth. Thank you for informing us of all changes in mother or baby's condition that would warrant any intervention or cause a change in our plans. We desire to be as involved in the decision-making process as possible.

We request that we be notified of any visitor prior to allowing them into the labor room.

I prefer to walk, change positions, have access to my birthing ball and shower as desired.

I prefer to remain in bed to rest and conserve my energy.

I prefer a saline lock, take oral fluids, and only have an IV if necessary.

I prefer to have an IV for hydration.

I prefer intermittent fetal monitoring, only continuous monitoring if necessary.

I prefer continuous fetal monitoring, hearing the baby's heartbeat is comforting.

I prefer not to be questioned regarding the pain scale. If I feel the need for drugs, I will ask.

I would like a mirror available if I choose to view the birth.

I would like to be given the option of touching my baby's head as s/he crowns.

My partner would like the option of cutting the baby's cord after pulsating stops.

\_\_\_ My partner would like the option of helping with the baby's birth, if possible.

\_\_\_ We plan to bank our cord blood, we will bring the kit. \_\_\_ plan to donate cord blood

\_\_\_ I prefer to avoid an episiotomy: warm compresses, olive oil, and slow delivery if possible.

After the birth, if possible, I prefer:

\_\_\_ Baby placed skin-to-skin                      \_\_\_ Clean baby prior to placing in my arms

\_\_\_ Breastfeed as soon as possible            \_\_\_ I need time to recover, breastfeed later

\_\_\_ I decline a pacifier, formula, or sugar water for baby

\_\_\_ Yes \_\_\_ No Hepatitis B injection. Yes \_\_\_ No \_\_\_ If baby is a boy, plan circumcision



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## Genetic Testing Consent



natural  
BEGINNING

The following genetic and spina bifida screenings are offered at OBGYN North. The testing is optional and specific tests are determined by the age of the mother. Please indicate if you prefer to accept or decline genetic and spina bifida screenings.

|                          | Accept                   | Decline |   |
|--------------------------|--------------------------|---------|---|
| <input type="checkbox"/> | <input type="checkbox"/> |         | <p><b>Between 11 and 13 weeks</b> a <u>combination of blood test and ultrasound</u> is offered to help determine your baby's risk for <b>chromosomal disorders</b>, such as Trisomy 13, 18 and 21.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;"> <p>Additional testing is available to families whose initial screening indicates potential issues. These include invasive procedures such as <b>Amniocentesis</b> and <b>Chorionic Villi Sampling (CVS)</b>. Because these procedures are not risk-free to the baby, they are not routinely offered to low risk women and will be discussed only if other testing indicates they could be useful.</p> </div> <p><b>Recessive Carrier Testing</b> is a blood test to determine if a person is a carrier of certain <b>inherited</b> diseases. It is available prior to or during a pregnancy. This blood test determines with 99.9% accuracy if a person carries the</p> |
| <input type="checkbox"/> | <input type="checkbox"/> |         |   |

|  |  |  |   |
|--|--|--|---|
|  |  |  | gene for over 100 inherited diseases, including Cystic Fibrosis, Spinal Muscular Atrophy, Fragile X, Tay-Sachs and Sickle Cell Disease. Results are available in 2-3 weeks. |
|  |  |  |   |

I have been given an opportunity to discuss genetic testing. I understand additional information about the testing I have selected will be provided to me upon request.

---

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

Provider initials \_\_\_\_\_



## Facility Fee

We maintain contracts with most major insurance companies  
Please contact our billing department for a personalized estimate

### Prenatal, Childbirth, and Breastfeeding Education

- **Prepared Childbirth Class** – A four week class series Mondays or Tuesdays from 6:30p-9:00p required for all first time parents and available to all mothers delivering at NBBC. We recommend you start the series at 32 weeks.
- **Labor Skills Class** – this is a single session class on Sundays from 3:30p-6:00p for repeat clients or mothers who have delivered before.
- **Getting Ready Class** – required class for all clients who are not participating in Beginning Together. This class should be completed before your 37<sup>th</sup> week and is offered every 3<sup>rd</sup> Wednesday of the month from 6:30p-8:00p.
- **Prenatal Breastfeeding Class** – this is a 2 hour class lead by Stork Maternity Consulting IBCLC.
- Access to comprehensive referral network of providers who support unmediated childbirth – including chiropractors, acupuncturists, pediatricians and more.

### Labor Support and Management

- 24 hours a day 7 days a week access to the on call Certified Nurse Midwife (CNM) starting at 37 weeks and continuing after baby is delivered.

- Minimal intervention care of mother and baby through labor, birth, and postpartum recovery including Sanijet birth tubs, aromatherapy, IV hydration, oxygen therapy, Nitrous Oxide therapy, infant immediately placed skin to skin, delayed cord clamping, breastfeeding support, and a herbal LeBoyer Bath following delivery.
- All Natural Beginning Birth Center (NBBC) CNMs have privileges to continue your labor management and birth at St. David's Women's Center of Texas at North Austin Medical Center which is directly across the street (less than 5 minute by wheelchair) in the event of a transfer.
- Because NBBC is a part of OBGYN North, you have the peace of mind having met the all female OBGYN staff who would assist in the event they are needed such as a cesarean section or assisted delivery. Furthermore, you will not have to locate a new practice if your pregnancy becomes higher risk and requires a higher level of care either during the prenatal period or while in labor.
- All newborns are offered standard newborn medications including Vitamin K and Erythromycin ointment if you choose.
- A full head to toe assessment and Ballard scoring are completed on baby exactly as he or she would receive in the hospital.
- Natural Beginning is fully accredited by CABC and therefore maintains the highest standards of quality and evidence based midwifery care.
- We maintain a fully equipped birth center with all necessary emergency medications and equipment as well as a staff of highly trained and CNMs and nurses.

## **Postpartum Support**

- 24 hour, 7 day a week access to the CNM on call.
- At approximately 24 hours of life one of our experienced nurses will come to your home to perform a full assessment of mother and baby, provide a lactation consultation, perform a weight check, and complete the infant metabolic screening if you choose.
- 3 days after baby is born you will have a follow-up visit at the birth center with one of our midwives. They will complete a full assessment of mother and baby, provide a lactation consultation, perform a weight check, complete a hearing screen, and complete a newborn cardiac defect screen, if you choose.
- All records are provided to your pediatrician of choice.
- Access to a comprehensive referral network of postpartum resources including breastfeeding, counseling, and parenting support groups.

## **Pregnancy Resources**

This is not an exhaustive list. Forgive us if we left you off. If you would like your company added please contact [LMonty@obgynnorth.com](mailto:LMonty@obgynnorth.com)

## Websites:

- The Child Birth Connection <http://www.childbirthconnection.org/>
- Evidence Based Birth <https://evidencebasedbirth.com/>
- Le Leche League <https://www.llli.org/>
- Kelly Mom <https://kellymom.com/>

## Books

- The Birth Partner: A Complete Guide to Childbirth for Dads, Doulas, and all other labor Companions by Penny Simkin
- Spiritual Midwifery by Ina May Gaskin
- Birth Matters by Ina May Gaskin
- Ina May's Guide to Childbirth by Ina May Gaskin
- Bountiful, Beautiful, Blissful by [Gurmukh HYPERLINK "https://www.amazon.com/Gurmukh-Kaur-Khalsa/e/B001KDGDSO/ref=sr\\_ntt\\_srch\\_lnk\\_1?qid=1530908052&sr=1-1" Kaur Khalsa](https://www.amazon.com/Gurmukh-Kaur-Khalsa/e/B001KDGDSO/ref=sr_ntt_srch_lnk_1?qid=1530908052&sr=1-1)
- Into these hands; wisdom from midwives by Geradine Simkins
- Birthing From Within by Pam England and Rob Horowitz
- Expecting Better by Emily Oster
- The Thinking Woman's Guide to a Better Birth by Henci Goer
- The Ultimate Breastfeeding Book of Answers by Jack Newman
- The Nursing Mother's Companion by Kathleen Huggins
- Breastfeeding Made Simple: Seven natural laws for nursing mothers by Nancy Mohrbacher and Kathleen Kendall-Tackett

## Doulas

- Stork Maternity <http://storkmaternityconsulting.com/>
- Central Texas Doulas - Doula Directory <http://centxdoulas.org/>
- <https://www.matriarchmothercare.com/>
- Sally Pierce-Leissner [www.sallyleissner.org](http://www.sallyleissner.org)
- The Living Well <http://www.the-living-well.com/>
- ATX doulas <https://www.atxdoulas.com/>
- Austin Doula Care <http://austindoulacare.com/>
- Austin Born <http://www.austin-born.com/>
- Doulas of Austin <http://www.doulasofaustin.com/>
- Birth 360 <https://www.birth360.net/>

- GALS <http://www.givingaustinlaborsupport.org/>

#### Postpartum Doulas

- Central Texas Doulas - Doula Directory <http://centxdoulas.org/>
- The Living Well <http://www.the-living-well.com/>
- ATX doulas <https://www.atxdoulas.com/>
- Austin Doula Care <http://austindoulacare.com/>
- Austin Born <http://www.austin-born.com/>
- Stork Maternity <http://storkmaternityconsulting.com/>
- Doulas of Austin <http://www.doulasofaustin.com/>
- Birth 360 <https://www.birth360.net/>
- GALS <http://www.givingaustinlaborsupport.org/>

#### Lactation Support

- Stork Maternity <http://storkmaternityconsulting.com/>
- The Milk Maven <http://www.mamamilkmaven.com/>
- Austin Born <http://www.austin-born.com/>
- Mama Mantra <http://www.themamamantra.com/>
- Special Addition Maternity and Nursing Boutique <https://www.maternityandnursing.com/#>

#### Community Support/ Mom Groups

- Partners in Parenting <https://www.pipaustin.org/>
- Austin Born <http://www.austin-born.com/>
- Stork Maternity <http://storkmaternityconsulting.com/>
- Mama Mantra <http://www.themamamantra.com/>

#### Prenatal Music

- Center for Prenatal Music- Giselle E, Whitwell, certified music therapist. [www.prenatalmusic.com](http://www.prenatalmusic.com)  
Prenatalmusic@yahoo.com

#### Prenatal Yoga/Fitness

- Jill Birt <https://www.jillbirtyoga.com/>
- Soul Strong Yoga <https://www.soulstrongyogatx.com/>

- Summer Grenlees <https://summergreenlees.com/>
- Yoga Yoga <https://www.yogayoga.com/>
- Fit for Mom <https://austin.fit4mom.com/>
- Hello My Tribe <http://www.hellomytribe.com/>
- Online courses specific to prenatal yoga we recommend Stephanie Snyder <https://www.yogaglo.com/>
- Lilian June Wellness <http://lillianjunewellness.com>

#### Acupuncture

- Sage Acupuncture <https://reproductiveacupuncture.com/>
- Songbird Acupuncture <http://songbirdacupuncture.com/>
- Bona Dea Healing <http://bonadeahealing.com/>
- Light Family Acupuncture <http://lightfamilyacupuncture.com/>
- Lotus Chiropractic and Acupuncture <http://www.lotusatx.com/>

#### Chiropractors

- Thrive Chiropractic Center <http://www.thrivechiroctr.com/>
- Pure Light Chiropractic <https://www.purelightchiro.com/>
- Lotus Chiropractic and Acupuncture <http://www.lotusatx.com/>
- Vibrant Life Chiropractic <https://www.vibrantlifecc.com/>
- Austin Chiropractic and Acupuncture <http://www.austintxchiro.com/>
- Active Live Healing Center <http://www.activelifemedicalcenter.com/>

#### Craniosacral Therapy and Massage

- Sally Leissner <http://www.sallyleissner.org/>
- Nina Davis <http://www.ninafdavis.com/>
- GB Khalsa <http://www.gbkhalsa.com/>
- Summer Grenlees <https://summergreenlees.com/>
- Mantis Massage <https://www.mantismassage.com/>

#### Placenta Encapsulation

- Hill Country Placentas <http://www.hillcountryplacentas.com/>

- Woman Craft <http://www.womancraftaustin.com/>
- Mama Peace <http://www.mamapeace.com/>

#### Birth and Pregnancy Photography

- Mosaic Birth Stories <http://mosaicbirthstories.com/>
- Austin Birth Photos <https://austinbirthphotos.com/>
- Leilani Rodgers <https://www.photosbylei.com/>
- Paige Wilks <http://www.paigewilks.com/>

#### Pelvic Floor Therapy

- Sullivan Physical Therapy <https://www.sullivanphysicaltherapy.com/>
- Holistic Pelvic Floor Health and Woman's Empowerment <http://www.awakenempowerheal.com/>
- Central Texas MFR <https://centraltexasmfr.com/>
- Humanae Physical Therapy

#### Frenotomy Referrals

- Green Apple Pediatric Dentistry [www.greenapplepediatricdentistry.com](http://www.greenapplepediatricdentistry.com)
- Capital Otolaryngology pediatric ENT [www.capolo.com](http://www.capolo.com)
- Austin Pediatric Dentistry [www.atxkidsdentist.com](http://www.atxkidsdentist.com)
- Julie A Martinez D.D.S, P.C. <http://childrensdentistwoodlands.com/frenotomy.php>
- Tiny Texans Pediatric Dentistry <https://www.tinytexassteeth.com/>

## **Post-Partum Resource List**

### **Resources**

Pregnancy and Postpartum Health Alliance of Texas <http://pphatx.org/>

Postpartum Support International <http://www.postpartum.net/>

Postpartum Progress <http://www.postpartumprogress.com/>

### **Online Counseling Services**

www.betterhelp.com – Better Help is an online counseling service with sessions from the comfort of your home. New families can find this option convenient and practical. Your plan includes unlimited online chats with your counselor, a journal, and 1 session each week.

### **In-Person Counseling Providers**

**Kelli Foulkrod, LPA, LPCI**

<http://www.counselingfornewmoms.com/>

512-200-3359

**Dr. Karen Seroussi** (psychiatrist), former LC and patient educator

<http://vibrantmindsclinic.com/kBio.html>

512-330-0428

**Elizabeth-Anne Rains**, MA, LPC

2525 Wallingwood Bldg 1, Suite 216

Austin, Texas 78746

[Earains\\_lpc@yahoo.com](mailto:Earains_lpc@yahoo.com)

**Megan Barnes Zesati**

[www.meaganbarneszsesati.com](http://www.meaganbarneszsesati.com)

[mbztherapy@me.com](mailto:mbztherapy@me.com)

512-590-2714

**J Worth Kilcrease**, MBA, MA, LPC, FT

Specializes in perinatal loss, child loss, or pregnancy after loss

4833 Spicewood Springs Road, Suite 101

Austin, Texas 78759

**June Williams**, MA, LPC

1101 Arrowpoint Drive, Suite 207

Cedar Park, Texas 78613

940-613-3733

[June.k.williams@gmail.com](mailto:June.k.williams@gmail.com)

**Lynn Spillar**

2224 Walsh Tarelton Lane, Suite 110

Austin, Texas 78746

512-329-9294

**Denae Rickenbacker**, Psychiatrist

11901 West Parmer Lane, Suite 310

Cedar Park, Texas 78613

512-690-2075

[www.cedarparkpsych.com](http://www.cedarparkpsych.com)

**Diane Nguyen**, Psychiatrist

1010 RR 620 Suite 107

Lakeway, Texas 78734

512-502-4556

[www.drdianenguyen.com](http://www.drdianenguyen.com)

**Lindsey Irons**, LPC

Irons counseling & Supervision

13625 Pond Springs Road Suite 105

Austin, Texas 78729

512-925-7766

[lkirons@yahoo.com](mailto:lkirons@yahoo.com)

**Dr. Sara Griesmer**

Licensed Psychologist

512-553-1563 office

512-900-8994 cell

[www.psychologycenterofaustin.com](http://www.psychologycenterofaustin.com)

[www.counselingfornewmoms.com](http://www.counselingfornewmoms.com)

**Katie Pendleton**, LCSW

N/W Austin Location

13625 Pond Springs Road Suite 105

Austin, Texas 78729

Lakeway Location

1901 Ranch Road 620

Lakeway, Texas 78734

512-517-7975

[Katiependletonlcs@gmail.com](mailto:Katiependletonlcs@gmail.com)

**Anna Francis**, LCSW

603 W. 14<sup>th</sup> Street

Austin, Texas 78701

512-925-7766

[www.annafrancislcs.com](http://www.annafrancislcs.com)

[anna.francis.lcs@gmail.com](mailto:anna.francis.lcs@gmail.com)

**Ellie Gamble**, LCSW

5\*926 Balcones Drive, Suite 200

Austin, Texas 78751

512-971-7029

**Elaine Cavoazos**, LCSW

8401 Shoal Creek Blvd, Suite 102

Austin, Texas 78757

512-472-7878 ext. 304

**Margery Segal**

Margery Segal @ Whole Movement Center

Specializing in movement therapy, developmental movement re-patterning, psychotherapy, healing from birth trauma

## **Support Groups: Community Building**

**PIP Partners in Parenting** [www.pipaustin.org](http://www.pipaustin.org)

**Any Baby Can**

- Weekly on Thursday 10-11:30
- No cost or appointment necessary, walk in welcomes, babies welcome
- Facilitated by Dr. Kelly Boyd Psy. D.

- Address: 6207 Sheridan Ave. Austin, Texas 78723
- Phone: 512-454-3743
- Website: [www.anybabycan.org](http://www.anybabycan.org)
- New Parent Helpline 512-334-4444

**Hello My Tribe** <https://www.hellomytribe.com/>

**The Mama Mantra** <http://www.themamamantra.com/>

**Austin Born** <http://www.austin-born.com/>

**Circle C Community Center Post-Partum Support Group**

MONDAY evenings 6:30-8:00 @ Circle C Community Center 512-791-5886

**Austin- "Mamas for Mamas"**

Mondays; Contact 512-920-3737 or email [info@melissabentley.net](mailto:info@melissabentley.net)

**HOPE group at Ronald McDonald House:** Led by J Worth Kilcrease, MBA, MA, LPC, FT Specializes in perinatal loss, child loss, pregnancy after loss