



# Congratulations!

## You are going to have a baby!

During these special months of pregnancy, we hope you will allow Elite Women's Care to provide you with excellent medical care. The best possible health care always involves an active partnership among you, your family and supporters, and your health care team.

*This information packet will answer some of the most common questions regarding your self-care, prenatal care, delivery, hospitalization, and going home after delivery.*

Please feel free to talk to us at any time. Thank you for choosing us for this milestone in your life.

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### **APPOINTMENTS / 24-HOUR MEDICAL ADVICE**

6161 Kempsville Circle Suite 340  
Norfolk, VA 23502  
(757) 395-4455

### **HOSPITAL OF DELIVERY**

Sentara Leigh Hospital  
830 Kempsville Road  
Norfolk, VA 23502  
(757) 261-8695

### **PRENATAL CLASSES**

Sentara Leigh Hospital offers prenatal classes in Chesapeake, Virginia Beach, and Norfolk area. There are 6-week courses, 4-week courses, weekend classes, and 1 day classes available. You may schedule an appointment by calling 1-800-SENTARA (736-8272) or by going online [www.sentara.com](http://www.sentara.com) under Services – Maternity. Please try to register for your classes around the 4<sup>th</sup> month of pregnancy as classes fill up quickly.

### **WEBSITES**

[www.elitewomenscare.com](http://www.elitewomenscare.com)  
[www.babycenter.com](http://www.babycenter.com)  
[www.acog.org](http://www.acog.org)  
[www.marchofdimes.org](http://www.marchofdimes.org)

La Leche League (breastfeeding) – [www.lllusa.org](http://www.lllusa.org)

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# Prenatal Care Schedule

During each prenatal visit we will answer your questions, examine you, perform any necessary tests, and talk with you about how to stay healthy during your pregnancy. The following is a general schedule of your prenatal visits. Please remember that these are guidelines and your individual needs may differ.

You will have a prenatal visit every 4 weeks until you are about 28 weeks, every 2 weeks until about 34 weeks then weekly until you deliver.

## Your First Prenatal Visit:

- History and physical exam
- Prenatal blood work
- PAP smear and vaginal cultures
- Estimation of due date
- Schedule dating sonogram

## Every Prenatal Visit:

- Check your weight, blood pressure and perform urinalysis
- Measure growth of baby by checking fundal height
- Listen for baby's heartbeat

## 15 to 20 Weeks Gestation:

- Quad/Tetra screen: A blood test to assess fetal risk for chromosomal abnormalities (such as Down's Syndrome) or Spina Bifida

## 18 to 20 Weeks Gestation:

- Sonogram to check fetal anatomy

## 24 to 28 Weeks Gestation:

- Glucose tolerance blood test to check for diabetes
- Blood test to screen for antibodies if your blood type is Rh negative and receive a Rhogam injection

## 35 to 36 Weeks Gestation:

- Blood test to check for anemia and platelets
- Vaginal culture to test for Group B Strep

# Personal Care

## SMOKING

Tobacco use is a serious health hazard for you and your unborn child. Smoking during pregnancy passes nicotine and cancer causing drugs to the fetus. It also impairs the nourishment your baby receives while in the uterus. This prevents optimal fetal growth, increases the chance of premature separation of the placenta from the uterine wall, raises the risk that the baby will be born prematurely, and/or die. Smoking while breastfeeding passes chemicals through your milk to the baby and may decrease the amount of milk you are able to produce. If you are a smoker, now is the time to quit. Talk to us about how to stop a smoking habit.

## ALCOHOL

The quantity of alcohol required to cause abnormalities in your baby is not known. However, daily drinking of alcohol, binge drinking (drinking a lot but only once in a while), and social drinking have all been shown to have harmful effects on the fetus. Because we do not know how much alcohol is safe, we recommend that you do not drink alcohol during your pregnancy. Feel free to discuss this topic with us.

## DRUGS

When you become pregnant, be certain to tell your OB provider if you are taking any prescription, over-the-counter medications or illicit drugs. Some drugs and medicines can be harmful to the baby's development. For this reason, from the earliest stages of your pregnancy, medicines prescribed or approved by us. These include antibiotics, antihistamines, stimulants, pills for weight reduction, tranquilizers, or sleeping pills. Do not take any medications from a health food store or take "homegrown remedies" until you talk with us. Even if your grandmother or neighbor did great taking the medication, it may not be good for you or your baby. Check page 10 for a list of over-the-counter medications safe during pregnancy. It is essential that you avoid drugs such as marijuana, cocaine, heroin, speed (amphetamines), barbiturates, LSD or other hallucinogens. Talk with us if you need help to stop a drug habit.

## WORK

Most women can continue their jobs throughout their pregnancy. In fact, keeping active may help you stay healthier and help pass the time more quickly. If you have a question about your particular job, we can talk it over at your prenatal visit. If you are at risk for preterm labor or other high risk factors, we will talk with you about any necessary changes to your work schedule.

## BATHING

You may take baths as well as showers throughout pregnancy. A word of caution regarding hot tubs or saunas: they can cause fainting. Some small studies have found that the risk of miscarriage increases among women who use a hot tub or Jacuzzi more than once a week. Also try to avoid frequent bubble baths or baths with perfumed products which may increase your chance of getting a yeast infection. Do

not use douches. Vaginal discharge tends to be heavier during pregnancy. If you have vaginal itching, burning, abnormal odor or heavy discharge, please make an appointment to see us.

## EXERCISE

Regular exercise (30 minutes at least three times a week) is healthier than intermittent activity. Limit strenuous activity to less than 15 minutes. Drink plenty of fluids before and after exercise. Precede exercise with a five-minute warm-up such as slow walking. Always gently stretch before and after exercising. Avoid heart pounding exercise that drives the pulse past 140 beats per minute. Avoid vigorous exercise in the heat. Avoid jerky, “bouncy” motions. Do not perform any exercise while flat on your back after the fourth month of pregnancy. Avoid extreme flexing of joints (deep knee bends or exercises that arch the back). Wear good support shoes. Do not exercise employing the Valsalva maneuver (bearing down as with a bowel movement); e.g. weightlifting.

## DENTAL

Because teeth and gums need special care at this time, have your teeth cleaned early in your pregnancy and every 6 months. Remember to tell your dentist that you are pregnant. Your gums are softer and spongier than normal, so brush with a soft toothbrush and floss gently at least twice a day. If necessary, teeth may be safely treated and extracted. Local anesthesia can be used, but please ask us before agreeing to general anesthesia or X-rays.

## TRAVEL

Travel is not usually harmful and does not normally increase complications of pregnancy. However, due to the unpredictability of preterm labor, we do not recommend any travel during the third trimester.

## SEXUAL RELATIONS

You can have sexual intercourse throughout your pregnancy unless you experience pain, bleeding, or leaking of water from the vagina. As the uterus increases in size, you may find side-by-side position to be more comfortable. Your sexual desires may vary during the course of pregnancy and this is normal. If you have a history of repeated miscarriages, or if the current pregnancy is complicated by abnormal bleeding, intercourse should be avoided until your practitioner tells you it is ok.

To minimize the risk of uterine infection, you should avoid intercourse following delivery until all stitches have healed and you have come back for your 6 weeks post-partum visit. Have your partner use a condom until you have started birth control.

## PETS

If you have any cats, please let us know. We will need to check for toxoplasmosis, a disease carried in the cat litter. Please avoid all cat litter duties during your pregnancy. For more information, please ask us at your next prenatal appointment.

# Nutrition

## WEIGHT GAIN

Depending on your weight when you begin pregnancy, you can gain from 15 pounds up to 40 pounds. If you are normal weight, the average amount of weight gain is 20-30 pounds. Your pattern of weight gain is also important. Usually the first three months you gain about 1 pound per month. Then you should gain 1 pound per week for the next six months. Aim for at least three meals a day. Six small meals and a bedtime snack may suit you better if you experience nausea or heartburn.

## DAILY FOOD GUIDE

### Fish and Seafood

Fish consumption during pregnancy may be beneficial since fish contain large amounts of essential fatty acids, which are important in fetal brain development.

Mercury exposure, primarily through ingestion of contaminated fish, can cause severe central nervous system damage, as well as milder intellectual, motor, and psychosocial impairment. **ALL PREGNANT WOMEN SHOULD AVOID EATING SHARK, SWORDFISH, KING MACKEREL, OR TILEFISH.**

Eat up to 12 ounces (2 average meals) a week of variety of fish and shellfish that are lower in mercury. Commonly eaten fish that are low in mercury include shrimp, canned light tuna, salmon, pollock, and catfish. Make sure all fish are well-cooked.

Albacore (white) tuna has more mercury than canned light tuna, therefore you should limit to 6 ounces per week or avoid in your diet. Tuna steak should be avoided.

Check local advisories about the safety of fish caught in local lakes, rivers, or coastal areas. If no information is available, up to 6 ounces per week can be consumed but additional fish consumption should be avoided that week.

### Milk and Dairy Products

These foods are a good source of calcium which is needed to build strong bones and teeth in your baby. It is also important for normal muscle activity, heart rhythm, nerve action and blood clotting. If you are lactose intolerant, or have difficulty digesting dairy products, try lactose-reduced milk or soy milk. Other sources of calcium include dark green leafy vegetables, dried beans, peas, nuts, seeds, salmon, sardines, and tofu.

Eat hard cheeses instead of soft cheeses during pregnancy. Certain soft cheeses can become contaminated with bacteria called Listeria. This can cause your baby to become sick or die. If you do use soft cheeses while pregnant, cook them until they are boiling. Use only pasteurized dairy products.

Soft cheeses to avoid:

- Feta
- Goat cheese
- Brie
- Camembert
- Blue-veined cheeses, like Roquefort
- Queso blanco, - fresco, - de hoja, - de crema
- Asadero

Pregnant or nursing women need four to five 8 oz glasses of milk or 1200-1500 mg of calcium per day.

Alternate food choices for a serving of milk:

- 1 cup (8 ounces) of yogurt
- 1 ¼ ounce of cheese (Cheddar, Swiss, Jack, etc)
- 4 ounces of soy bean cake or tofu
- 1 ½ cup ice cream
- 1 ½ cup cottage cheese

## Breads and cereals

Foods in this group furnish energy, vitamin B, iron, minerals, and supplementary protein. It is best to eat whole grains as they contain more vitamins and minerals and also provide fiber. Pregnant women will need 4 or more servings per day.

Examples include:

- 1 slice of bread or 1 roll
- 1 ounce of ready-to-eat cereal
- ½ - ¾ cup cooked cereal
- ½ - ¾ cup cooked pasta, rice or cornmeal
- 1 tortilla, ½ bagel, or 4 crackers
- 1 medium pancake or waffle

## Protein

Protein builds muscle, enzymes, hormones, and antibodies to resist disease for you and your baby. Protein-rich foods provide vitamin B, iron and other minerals. Iron is the oxygen-carrying component of hemoglobin in red blood cells. Pregnant women need 2-3 servings and nursing mothers will need 3-4 servings daily.

Examples include:

- 2-3 ounces of lean cooked meat, poultry, or fish
- A medium patty
- 2 thin slices of a roast
- ½ cup of tuna or diced chicken

- 2 eggs
- 1 cup cooked dry beans, lentil, or peas
- 4 tablespoons of peanut butter
- 2 slices of cheese (cheddar or swiss)
- ½ cup of cottage cheese

## Vegetables and Fruits

Vitamin C rich fruits and vegetables are needed for healthy gums, blood vessel walls, and other body tissue. They also help heal wounds and increase iron absorption. Dark green leafy vegetables are excellent sources of iron, vitamin A, and folic acid. Your daily requirement should include 2 servings of Vitamin C rich food, 1 serving of dark green leafy vegetable, and 2 other servings of any fruits or vegetables.

Vitamin C foods:

- Strawberries, grapefruit, guava
- Mango, melons, papaya
- Oranges, tangerines
- Broccoli, cabbage, green peppers
- Potatoes, tomatoes

Dark Green Vegetables

- Broccoli, spinach, brussel sprouts
- Chard, beet, collard, kale
- Mustard, turnip

Serving size examples:

- ½ cup of vegetable, fruit, or juice
- 1 medium fruit or ½ grapefruit
- ½ cup chopped raw or cooked vegetable
- 1 cup leafy raw vegetables

## Liquids

Be sure to drink plenty of fluid. You will need at least 9-10 glasses (8 ounces) daily during pregnancy and 10-12 glasses while nursing. Water is best, but you can also drink milk, fruit or vegetable juices, soups, and non-caffeinated drinks.

## Folate

Folic acid is an essential supplement to prevent neural tube defects (spinal cord problems) in the fetus. The preconceptual period (or before you get pregnant) is the optimal time for folic acid supplementation. Women should be taking at least 0.4 mg per day. If a woman is at increased risk or had a previous baby with neural tube defects, the recommended dose is 4 mg per day.

## Caffeine

Some studies have shown that excessive caffeine intake may be related to complications of pregnancy including inadequate growth, miscarriage, and preterm labor. We do not recommend any caffeine intake but if you do, please keep your caffeine intake to less than 200 mg per day.

<b>Source</b>	<b>Caffeine (mg)</b>
<b>Coffee</b>	
Drip	146
Percolated	110
Regular Instant	53
Decaffeinated Instant	2
Espresso (1-2 oz)	45 to 100
Starbucks coffee grande (16 oz)	550
<b>Cocoa and Chocolate</b>	
Cocoa from mix (6 oz)	10
Milk Chocolate (1 oz)	6
Baking Chocolate (1 oz)	35
<b>Soft Drinks</b>	
Dr. Pepper	39.6
Regular cola	46
Diet cola	46
<b>Tea</b>	
1 minute brew	9 to 33
3 minute brew	20 to 46
Instant	12 to 28
Canned iced tea (12 oz)	22 to 36

## **Vaccinations**

You are encouraged to get the influenza vaccine while you are pregnant during the flu season. It is safe during pregnancy during all trimesters. Please ask your doctor where you can get the flu shot. If you are considering any other vaccinations, please consult with us first.

# Over The Counter Medications Safe for Pregnancy

## COMMON COLDS

- Afrin nasal spray
- Saline spray
- Robitussin (sugar free for diabetes)
- Actifed
- Chlor-Trimeton
- Delsym
- Dimacol Capsules
- Formula 44
- Mucinex DM
- Sinex decongestant nasal spray
- Tussin diabetic formula
- Throat lozenges
- Triaminic (diabetic cough formula)
- Triaminic (decongestant cough syrup)
- Tylenol cold formula or sinus formula
- Vicks
- TheraFlu

## NAUSEA & VOMITING

- Ginger capsules 340mg, 3 times per day
- Ginger Root (boil root in water to make tea add Splenda)
- Vitamin B6 25 mg tab, 3 times per day
- Unisom 25 mg tab. Can be cut in half and taken 1/2 tab 3 times per day
- Unisom 25 mg at night
- Relief Band® wrist band

## CONSTIPATION

- Increase oral fluid and fiber intake (bran, green leafy vegetables and apples)
- Colace
- Citrucel powder
- Dulcolax tablets and suppositories
- Metamucil
- Milk of Magnesia
- Miralax

## PAIN

- Tylenol

## FLATULENCE (GAS)

- Mylicon
- Gas-X

## HEARTBURN

- Gelusil
- Maalox
- Milk of Magnesia
- Mylanta liquid and tablets
- Tums (up to 10 per day)
- Zantac
- Pepcid

## ITCHING

- Benadryl
- Topical Caladryl lotion
- Aveeno bath salts

## TOPICAL YEAST

### Skin

- Monistat cream
- Mycostatin powder
- Nystatin powder

### Vaginal

- Monistat 1, 3, or 7 day formula
- Gyne-Lotrimin

## HEMORRHOIDS

- Anusol HC
- Anusol Suppositories & ointment
- Tucks pads
- Witch hazel
- Preparation H ointment

## SINUS ALLERGIES

- Claritin (Not Claritin-D)
- Benadryl
- Zyrtec (Not Zyrtec-D)

# Possible Discomforts During Pregnancy

## ACHES AND PAINS

You may feel stretching and pulling pains in the abdomen that sometimes run down the groin into the thighs or vagina. These may be due to the pressure of the uterus on nerves running through the pelvis. These pains are usually made worse by standing and are relieved by lying down.

Backaches and aching over the pubic bone are due to the pressure of the baby's head, your weight increase, and the normal loosening of joints in this area. Maintain good posture and use lumbar support whenever possible. Heat over the area may give some relief. Use an abdominal support or binder if necessary. If these symptoms do not resolve, please come in for a visit for further evaluation.

## CONSTIPATION

Constipation results from relaxed intestinal muscles and from pressure caused by a growing uterus. To help prevent constipation, eat fruits (fresh or dried), raw vegetables, whole grain breads and/or cereals every day. Drink 9-10 glasses of liquids daily. Water is best but you can drink fruit and vegetable juices for variety. Caffeine tends to cause your body to lose fluids so avoid liquids such as coffee, tea, and colas. If necessary, you can use Metamucil, Citrucel, or Colace. It is not necessary to have a bowel movement everyday as long as the stool is soft.

## DIZZINESS, FAINTING, LIGHTHEADEDNESS

These conditions can occur at any time during the pregnancy. These symptoms are usually relieved by lying down on your left side and hydration. To avoid feeling dizzy or lightheaded, avoid standing up quickly, or standing in any one position for long periods of time. If the symptoms persist, please contact us.

## HEARTBURN

Heartburn or indigestion may present as a burning feeling in your chest. It can happen after a burp of bitter fluid especially during the latter part of your pregnancy. You may use antacids in liquid or tablet form such as Tums, Gelusil, Mylanta, or Maalox. You may want to avoid sodium bicarbonate products as they can cause you to hold water.

- Try to eat 5-6 small meals daily.
- Do not lie down or bend over after meals. When resting after a meal, prop yourself up with pillows in bed or sit in a chair.
- Avoid fatty and fried foods
- Avoid black pepper, chili powder, caffeine, tomato based products and meat extracts (bouillon or broth)

## HEMORRHOIDS AND VARICOSE VEINS

The pregnant uterus causes increased pressure on the large veins in the pelvis. This causes decreased blood return to the heart that can lead to varicose (dilated) veins in the legs, vulva (lips of the vagina) and anus (hemorrhoids).

- Avoid tight garments, knee highs or garters
- Sit with your legs raised whenever possible
- Wear support hose. If you shower at night, put them on as soon as you wake up. If you shower in the morning, put them on after you elevated your feet for 5 minutes.
- Avoid constipation. Warm tub baths and Tucks pads will help relieve hemorrhoid discomfort
- Do not sit with your legs crossed, especially at your knees.
- When standing, keep legs moving so the blood can be pumped back upwards. You can shuffle the feet, raise the knees up, or walk in place.

## LEG CRAMPS

Cramps in your legs or feet may be due to a change in calcium metabolism during pregnancy. One way to prevent muscle cramps is to drink more low fat or nonfat milk or eat more calcium-rich foods such as dark green vegetables, nuts, grains, and beans. If you do get a cramp, relieve it by gently stretching the muscle. Stretch your leg with your foot flexed toward your body. Pointing the foot away from the body can make it worse. A warm, moist towel or heat pad wrapped on the muscle may also help.

## NAUSEA AND VOMITING

Nausea and vomiting, often called “morning sickness,” are common in early pregnancy. Usually morning sickness resolves after the first 3 months of pregnancy. Unfortunately, many women have nausea and vomiting all day, not just during the morning, and throughout their entire pregnancy. To help avoid and treat nausea and vomiting in pregnancy try the following:

- Eat frequent small meals whether you are hungry or not
- Try starchy foods such as plain crackers, toast, rice cakes, zwieback, dry breakfast cereals, or a sandwich.
- Avoid fatty, fried, or spicy foods
- Keep sleeping and working areas well ventilated to get rid of odors
- Drink liquids between meals rather than with the meals. Sometimes carbonated drinks such as ginger ale, 7-up, Sprite or seltzer water will help

If symptoms are persistent and you cannot hold down any food or liquids, please notify us right away.

## SKIN CHANGES

You may have changes in your skin color during pregnancy. Your nipples darken and you may notice a dark line down your abdomen running from your umbilicus (belly button) through the pubic area. You may also have blotchy brown pigmentation (discoloration) on your forehead or cheeks. Stretch marks are common and present as pink, red, or purple streaks in the skin over the breasts, abdomen, thighs, or buttocks. Creams and lotions do not prevent them. Most of these changes will fade after delivery but may not disappear completely.

## TINGLING AND NUMBENSS

Tingling and numbness of the fingers and a feeling of swelling in the hands are common during pregnancy. They are probably due to the swelling of nerves in the narrow passages in your wrists and will disappear after pregnancy. If they affect your muscle strength or motor skills, please let us know immediately.

## FREQUENCY OF URINATION

Frequency of urination is common in pregnancy. The growing uterus presses on the bladder and causes you to urinate more frequently. Later in pregnancy, there is pressure from the baby's head on the bladder. Drink less fluid after your evening meal if you are having trouble getting enough sleep because of getting up in the night to urinate. Sometimes the maternity band will help take the pressure off your pelvis and bladder. If you have painful urination, or blood in your urine let us know as soon as possible so we can test you for a bladder infection.

# Getting Ready for Delivery

If you experience any of the following, please go directly to the hospital

- If this is your first baby, when your contractions are every 5-10 minutes apart and regular for at least 2 hours
- If this is not your first baby, when your contractions are 5-10 minutes for an hour, regular or stronger in intensity from your usual contractions
- If you are experiencing bleeding from the vagina
- If your water bag breaks even if you do not have contractions
- If you notice a decrease in fetal movements

What to bring to the hospital:

For Mother:

- Important phone numbers
- Insurance card and photo ID
- Light-weight, washable nightgowns and a robe (you can wear hospital gowns if you prefer)
- Nonskid slippers
- Socks
- Hair band or barrette to keep hair away from face
- One or two supportive bras, sports bra if you are not planning to breast feed
- Toiletries (toothbrush, toothpaste, shampoo, shower cap)
- 3-4 pairs of panties
- Eyeglasses, even if you wear contacts
- Books, magazines, music

For Baby:

- If you do not want to use hospital disposable diapers when you take the baby home, bring diapers and diaper pins
- Undershirt
- An outfit such as stretch suit, nightgown, or sweater set
- An outfit for pictures if you desire
- One pair of socks or booties
- Receiving blanket and cap
- Outer heavy blanket or bunting, if weather is cold
- Car seat when ready to leave hospital

For Father or support person:

- Watch with second hand to time contractions
- Toiletries
- Change of clothing
- Snacks
- Camera and film if needed

**Do NOT bring to the hospital any valuables such as jewelry, large amounts of money, and credit cards.**

# At The Hospital

## IN THE LABOR ROOM

Your doctor will follow your progress carefully and give you support and medication as needed. Usually fetal monitoring during labor is performed to provide continuous minute-to-minute evaluation of your baby's well being.

An intravenous (IV) line will be started. Fluids will be given through the IV to prevent dehydration and it will be used to administer medication. We do not recommend that you eat anything while in labor, but you may have some ice chips, popsicles and minimal fluids.

When it is time for delivery, you will be assisted into a position that best helps you deliver your baby. Staff and your support person will help you with your legs. Your doctor will give you instructions on how to deliver the baby. Your support person is encouraged to participate in the childbirth process and may be present during labor and delivery, including Cesarean section. Cameras and video cameras are allowed in the hospital BUT the actual birth cannot be videoed or photographed.

## AFTER DELIVERY

If there are no complications, your doctor may place your baby on your abdomen while clamping and cutting the umbilical cord. You may hold the baby and perform skin to skin (when baby is placed directly on your chest) for usually the first hour of life. The nurse will place identification bracelets on you and your baby.

## DELIVERY BY CESAREAN SECTION (C-SECTION)

A C-section is a surgical method for delivery of a baby. The operation involves making an incision in the lower abdomen and removing the baby from the uterus.

Generally, a C-section is done whenever a vaginal birth would be unsafe for mother or for baby. Your doctor may know of certain conditions that will require a C-section before you start labor and will schedule you for this procedure around your due date. At other times, you may start labor before the problem becomes apparent and a C-section is necessary. Very rarely, a C-section is done because of an emergency to prevent further complications for mother or baby.

If you have a C-section, you can expect a few differences after delivery. For instance, you will experience more abdominal discomfort. Your doctor will discuss these with you so you will know what to expect and what you can do to help speed your recovery. Recovery from the surgery may take from 6-8 weeks.

## ROOMING IN

“Rooming in” means having your baby in a crib right beside your bed while you are in the hospital. You will be able to feed, diaper, hold, and cuddle your baby whenever you wish instead of on the nursery schedule.

Your baby will be brought to the nursery sometimes for pediatrician checks when necessary or for a short observation period in the nursery after a circumcision. The nurses will help you care for the baby whenever you are tired or need help.

## THINGS TO DO IN THE HOSPITAL

Sentara Leigh Hospital offers to take your baby’s pictures. There are several packages with different prices. This service is completely your choice.

If you have a boy, he can be circumcised on the day after delivery. You will get instructions for any necessary care before you leave the hospital. A circumcision is an elective procedure.

## BREASTFEEDING

The American Academy of Pediatrics identifies breastfeeding as the best method of feeding and nourishing infants to achieve optimal infant and child health, growth and development. Although breastfeeding is natural and normal, most women need some assistance in order to succeed. You may want to attend a class or contact breastfeeding educational and support groups, such as La Leche League. Some women choose to breastfeed for a short period of time and some not at all. Your baby can be well nourished with baby formula at some or all the feedings. If you have any questions, there are lactation consultants on staff at the hospital to answer all of your questions. The labor and delivery nurses will also help you with breast feeding in the hospital.

## GOING HOME

If you have a vaginal delivery, and you and your baby do not have any medical problems, the usual hospital stay is 1-2 days.

If you have a cesarean section, and you and your baby do not have any medical problems, the usual hospital stay is 2-3 days.

All new moms need a visit with their OB provider 6 weeks after delivery and all newborns need a visit with the pediatrician at 2 weeks of age. Moms who had a cesarean section will need a 2 week follow up visit at the OB office for evaluation of their C-section incision.

If you are Rubella non-immune, you will need a vaccine injection prior to your discharge. If you have an Rh negative blood type, you may need a Rhogam injection before you leave the hospital if your baby is Rh positive. You will also be offered the Tdap vaccination for whooping cough.

If you have any questions about what is on this pamphlet please ask your practitioner.