

MAYBE a BABY

Your Guide to Pregnancy Planning





CONGRATULATIONS

Going from Maybe a Baby to Definitely a Baby is a big decision. We're glad you chose Floyd Valley Healthcare to help you on this journey. This binder is yours to keep as a guide to the important questions and details to consider as you and your partner discuss parenthood.

Our staff is dedicated to answering your questions and caring for you and your family. Thank you for allowing us to join you during this exciting time in your life.



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GETTING READY FOR BABY QUESTIONS FOR YOUR PROVIDER

PRECONCEPTION

- What should I do before I get pregnant (i.e., vitamins) to ensure a healthy pregnancy for me and my baby?
- What should I do if I am having trouble getting pregnant?
 - Should I schedule a preconception visit with my doctor?
 - What is covered at this visit?
- How long should we try before considering counseling?
- How can my spouse be involved and supportive before and during pregnancy?
- What if I have a chronic condition? Who is available to help me manage it before and during pregnancy?

QUESTIONS TO ASK WHEN CHOOSING A BIRTHING PROVIDER

- What is your philosophy of childbirth?
- What is your philosophy on exercise during pregnancy?
- How does the physician/patient relationship work in your practice?
- If I have a question or problem during my pregnancy, what do I do? How does your office handle these calls?

PREGNANCY AND BIRTH

- What happens during my OB visits? How many will I have?
- Who will be taking care of me when it is time to deliver my baby?
- Will I see providers other than you during my pregnancy?
- What are my options for birth? Can I have a doula?

MY QUESTIONS

PREPARING FOR BABY QUESTIONS FOR YOUR PROVIDER

- What Childbirth Classes are Available To Me?
- What immunizations do my partner and I need before baby arrives?
- How can I prepare for breastfeeding my baby after childbirth?
- What services are offered?

QUESTIONS TO ASK WHEN CHOOSING PEDIATRIC CARE

- How will you provide care for my baby?
- What if I have questions/issues after regular office hours?
- What if my baby needs specialty care after birth?
- How are you and the hospital prepared?

COST

- What is the total cost of having a baby? What is the cost for the clinic care and the hospital care?
- How do I figure out what my insurance will pay/cover?
- Does it cost more to have a cesarean section?

HEALTH AND WELLNESS

- What should and shouldn't I eat while I'm pregnant or before?
- Are there other activities I should steer clear of while pregnant?
- Do more of?
- How much weight should I gain during pregnancy?

MY QUESTIONS



THE JOYS OF RAISING A CHILD

1. Finding the perfect name.
2. Making memories as a family.
3. Unconditional family love.
4. Unlimited hugs and kisses.
5. Learning about things for the first time.
6. Holding tiny hands and feet.
7. A partner for blowing bubbles, flying kites, building sandcastles and skipping down the sidewalk in the pouring rain.
8. Someone to laugh with no matter how your day is going.
9. Being able to relive your childhood memories with your child.
10. Finger-painting, carving pumpkins, playing hide-and-seek, catching lightning bugs and believing in Santa Claus.
11. Reading books, watching Saturday morning cartoons, going to movies, and wishing on stars.
12. Treasuring their first masterpieces.
13. Being a hero for your kids.
14. A front row seat to history in witnessing the first step, first word, first date and first time driving.
15. Adding to your family tree.
16. Helping your kids when they need you most.

CONSIDERATIONS BEFORE CHOOSING PARENTHOOD

Having a child requires accepting many new obligations. Choosing to become a parent represents a lifetime commitment. When deciding whether or not to have a baby, consider these points:

- Are you willing to make a lifetime commitment?
- Do you have the emotional capacity to nourish your child's self-esteem for the rest of his or her life?
- How stable is your relationship with your partner?
- Are you willing to commit yourself to day-to-day child care?
- Are you healthy?
- Do you like the idea of being pregnant?
- Do you enjoy children?
- What is your relationship with your extended family?
- How does having a child fit with your views on the state of the world? Are you optimistic about the potential for your child's future?
- Have you been able to accomplish some of your lifetime goals? How will a baby affect your plans?
- Are family and friends supportive? Would you have emergency backup for child care?
- Can you afford the cost of a child? Can you afford child care?
- Do you and your partner share similar ideas about religion, education and discipline?
- Are you and your partner committed to sharing parenthood - both child care and household tasks? Are you ready to share your lives with another person?
- How flexible is your job? Are you ready to make any necessary adjustments to your career plans? Do you have options at work that would make this a good time to get pregnant (e.g., child care, maternity leave)? Will you be able to limit travel?

There is never a perfect time to have a baby, but answering these questions will help you determine your readiness to start a family.

ACHIEVING PREGNANCY

For some couples, getting pregnant may happen very easily. For others, it may be a difficult process.

Here is some basic information on getting pregnant if you decide a baby is in your future:

- Discontinue pregnancy prevention methods at least two to three months prior to conception, such as pills, IUD, etc.
- Female fertility
 - Fertility depends on time of ovulation - when an ovary releases an egg.
 - An egg can only survive 12-24 hours.
 - Conception must occur in that 12-24 hour time frame.
- Male fertility
 - Men always produce sperm.
 - Given the right conditions, sperm can live three to five days after release.
- In a perfect world, ovulation occurs on day 14 of a 28-day period.
 - Pregnancy is only possible when sex takes place around ovulation, when both a sperm and an egg can meet.
- Irregular cycles
 - If you have irregular cycles, predicting ovulation becomes more difficult.
 - Ovulation always occurs 14 days before the menstrual period starts. But it is impossible to count backwards to time intercourse.
 - For example, if your cycles are usually every 40 days - ovulation would occur on day 26, 14 days prior to menstruation beginning.
 - Check with your provider if you have questions about determining ovulation.



- Determining ovulation
 - Some women experience acne flares.
 - Some women gain water weight.
 - Most women notice cervical mucous changes.
 - The wet, clear, slippery and stretchy fluid that is usually produced close to ovulation helps the sperm to survive and to transport it through the cervix.
 - There are kits you can purchase to determine ovulation, but they are costly and can only be used one time.
- It may easily take up to one year to achieve pregnancy.
 - You are not considered to have infertility problems until one year of unsuccessful attempts to conceive. If you are over age 35, you may consider infertility treatment after six months of unsuccessful conception.

PRE-PLANNING: HEALTHY LIVING CONSIDERATIONS

BEFORE YOU GET PREGNANT

- Folic Acid
 - Begin taking a prenatal vitamin with 400 mcg. of folic acid well before you become pregnant.
- Caffeine
 - Limit your caffeine consumption before conception to avoid depleting your body of important nutrients, especially calcium and vitamin B.
- Gain/Lose Weight
 - Underweight women tend to have more difficulty conceiving and supporting a pregnancy.
 - Overweight women tend to have more complications such as gestational diabetes, high blood pressure and more back and joint pain.
- Stop Smoking
 - Smoking causes a higher chance of infertility, miscarriage, low birth weight babies and birth defects, as well as increasing the parents' chance of lung cancer, emphysema, asthma and other breathing-related illnesses.
 - Smoking may also damage sperm, increasing chances of infertility, miscarriage or birth defects.
- Drinking Alcohol
 - Abstain from alcohol when you are trying to get pregnant.
 - Alcohol in early pregnancy can cause birth defects as well as miscarriage.
 - Sperm can be hurt by alcohol, medications, street drugs as well as smoking, but can still fertilize an egg!
- Medications
 - Discuss with your care provider any medications you are currently taking.
 - Some medications need to be changed if you are attempting to get pregnant.
 - Some medications are dangerous to quit but may need changing to be safe in pregnancy. Ask your provider.

- Consider Work Environment
 - What precautions should you take at work before trying to get pregnant?
 - Limit exposure to harmful chemicals, radiation and contagious diseases.
- Pre-Pregnancy Counseling With Provider
 - If you are aware of a family history of genetic problems, birth defects or recurrent miscarriages, you may choose to get genetic counseling before trying to get pregnant.

PRE-CONCEPTION VISIT WITH YOUR CARE PROVIDER

- Get a physical checkup before conception to ensure you are healthy.
 - Make sure a Pap smear is obtained.
- Discuss family planning and fertility options.
- Review medical conditions.
 - This includes diabetes, heart conditions, high blood pressure, STDs, thyroid issues, etc.
- Discuss medications you are currently taking.
- Update immunizations.
- Discuss family history.
 - This includes anyone in the family with any conditions listed above that may be a concern for you.
- Discuss genetic counseling.
- Discontinue pregnancy prevention methods.
- Begin a prescription of vitamins and folic acid.
- Interview your care provider to be sure you are comfortable with his or her philosophy of care.

FINANCIAL PLANNING

As you prepare physically and emotionally for the prospect of having children, you also need to prepare financially. Having a baby is expensive - but so worth the cost!

HOSPITAL CARE

You will receive two statements for your care and your baby's care during delivery and postpartum. Charges for mom may vary greatly depending on whether you have a vaginal or cesarean section delivery, use pain relief (such as epidural) and other personal decisions that are contained in your birthing plan. As with all hospital stays, we encourage you to contact your insurance company to discuss your coverage for obstetric services. You may also make an appointment with Floyd Valley's Patient Financial Services to discuss payment plans if needed.

ANCILLARY CARE

- Includes office and in-hospital lab work, pathology charges
- Ultrasound fees and other prenatal testing like non-stress tests or sampling of the amniotic fluid, etc.
- Surgery charges, anesthesia charges, pediatric care, etc.
- Charges may vary greatly depending on risk factors and patient choices
- Examples: \$100 for quad screen (blood test for genetic abnormalities), \$200 - \$500 or more for an ultrasound, up to \$1,000 for amniocentesis, \$60 for pathologist to read Pap smear

Hopefully, these costs will be covered, if not fully, then at least partly by your insurance company. This is something you should discuss with your insurance agent before getting pregnant. You may also request a meeting with a patient financial services representative.

PREGNANCY EXPENSES

- Maternity clothes - variable expense
- Prenatal vitamins - \$15/month
- Childbirth classes - Free for moms delivering at Floyd Valley Healthcare, but other facilities may charge up to \$70
- Other

SETTING UP A NURSERY

- Crib, mattress and bedding - \$100 - \$1,000+
- Dresser, changing table - \$200 - \$800+
- Car seat - \$100 - \$600+
- Stroller - \$30 - \$300+
- Swing, bouncy seat, baby monitor, diaper bag, toys, etc . - \$200 - \$2,000+
- Other

FEEDING OPTIONS

- Breast pump and supplies if breastfeeding - \$300+
- Bottles and formula for one year - \$1,500+

FIRST YEAR OF LIFE

- Diapers and wipes - \$1,200+/year
- Clothes - variable expense
- Child care - full-time is a minimum of \$5,000/year
- Health care - well-baby and sick-baby care of \$500+/year
- Other

WEBSITES FOR ESTIMATING THE COSTS OF RAISING A CHILD

- babycenter.com
- surebaby.com
- parenthood.com
- pregnancy-info.net

OTHER ADVICE AS YOU CONTEMPLATE PARENTHOOD

- Establish a budget
- Set up a college savings fund
- Write your will
- Get disability insurance
- Participate in a flexible spending account

CHOOSING A PROVIDER AND HOSPITAL

WHO WILL BE YOUR HEALTH CARE PROVIDER?

- Family practice physician
- Baby doctor
- Pediatrician

WHAT IS YOUR CRITERIA IN CHOOSING A PROVIDER?

- Philosophy of childbirth
- Preconception visit
- Fees and what they include
- Your insurance coverage
- If group practice, consider if you need to meet with other providers
- Experience with high risk
- Recommendations from family and friends

IN CHOOSING THE HOSPITAL?

- Consider if their philosophy is similar to yours
- Consider the atmosphere you would like
- The location of your labor, delivery and recovery
- Availability of epidurals and cesarean section
- 24-hour OB coverage
- Nursery policies
- Who can be present during your labor
- Insurance company

THE OB UNIT AT FVH OFFERS:

- Private rooms
- Recliners
- TV
- Wireless internet access
- Whirlpool tubs

CHOOSING YOUR CARE PROVIDER

A Family Medicine/OB physician can provide care for the entire family, including your newborn, so you have one doctor whom you know and trust. They are residency trained and board-certified physicians who specialize in the full spectrum of care for people at any age. Because they have additional training in obstetrics, they also can manage your pregnancy, including medications and complications that may occur. Their services include managing labor and delivery for vaginal births, as well as partnering with our general surgeons for a cesarean section.

FLOYD VALLEY HEALTHCARE PROVIDERS

- Dr. Ellen Aquino - 546-3610
- Dr. Andrew Geha - 546-3680
- Dr. Sheila Holcomb - 546-3630
- Dr. Destiny Miller-Mancuso - 546-3636
- Dr. Ashley Powell - 546-3620
- Dr. Sean Sutphen - 546-3677

You may learn more information about each provider at FloydValleyClinics.org

WHY CHOOSE FLOYD VALLEY HEALTHCARE?

Floyd Valley Healthcare offers board-certified physicians who work together to provide expertise in pregnancy, labor and delivery (both vaginal delivery and C-section). At Floyd Valley Healthcare, you will always have a team of people ready for you when delivery time arrives. You will be confident knowing that 99% of our moms deliver with their preferred physician. Floyd Valley Healthcare also has a pediatrician and three certified lactation counselors on our staff.

We work closely with pediatricians, OB-GYNs, neonatologists and maternal-fetal medicine specialists to ensure that you and your family experience the very best and safest delivery.

BIRTH PHILOSOPHY

Pregnancy is a special phase in a woman's life and Floyd Valley Healthcare believes that physicians and patients are partners in this process. We foster a collaborative relationship with our patients to create birthing plans that follow the wishes of the patient with guidance from the providers, making the best possible health care decision for both you and your baby.

PREGNANCY AND OBESITY

Women who have a body mass index of 30 or higher are considered obese and have increased health risks during pregnancy for themselves and baby.

WHAT IS YOUR BODY MASS INDEX?

Calculated using weight and height

Normal: 18-24.9

Overweight: 25-29.9

Class 1 obesity: 30-34.9

Class 2 obesity: 35-39.9

Class 3 obesity: 40 or higher

Your current BMI is _____

We recommend you gain a maximum of 15 pounds.

Risks for Mom

If your BMI is 30 or higher, increased risks include:

- Gestational hypertension (15 percent)
- Gestational diabetes (10 percent)
- Preeclampsia - high blood pressure and increased protein in urine (15 percent)
- Cesarean section (60 percent)
- All of the above risks increase with BMI higher than 40



RISKS FOR BABY (INCREASE AS BMI INCREASES)

- Early delivery, large fetal size (15 percent), intrauterine fetal death
- Birth defects: neural tube defects (abnormality in the spine), omphalocele (defect in the abdominal wall), heart defects, hydrocephalus (trapped fluid in the brain), cleft lip and palate
- Unable to obtain first trimester ultrasound screening (nuchal translucency) for abnormal chromosomes in 10 percent of patients with BMI higher than 40
- Inadequate ultrasound assessment (visualizing fetal heart, brain and spine structures) in 50 percent of fetuses in patients with BMI higher than 40; difficulty continues during reevaluation 20 percent of time
- Difficulty diagnosing birth defects with ultrasound due to increased fatty tissue, making it difficult to see the fetus
- Difficult delivery due to large fetal size and maternal obesity
- Increased risk for lifelong complications, including obesity, diabetes, high blood pressure, heart disease

DELIVERY CONSIDERATIONS

- Difficulty to estimate fetal weight - can increase risk of fetal and maternal complications
- Difficult to monitor fetal well-being during labor can increase risk of fetal death
- Increased maternal risks makes emergency cesarean sections difficult
- Success rate of spontaneous vaginal delivery is 40 percent in patients with a BMI higher than 40

C-SECTION COMPLICATIONS

- Increased rate of blood loss
- Longer time in the operating room
- Increased risk of wound infection (30 percent)
- Increased rate of infection after birth in the uterus
- Difficult to place spinal anesthesia (numbing of the area for medical procedures) and increased risk with general anesthesia

COMPLICATIONS AFTER DELIVERY

- Increased risk of bleeding (postpartum hemorrhage)
- Increased risk of blood clots in veins or lungs (thromboembolism)
- Increased risk of depression

WE ENCOURAGE YOU TO BEGIN AN EXERCISE PROGRAM AS FOLLOWS:

WE RECOMMEND THE FOLLOWING ACTIONS DURING YOUR FIRST TRIMESTER:

Nutrition consultation _____

Baseline 24-hour urine protein collection_____

Baseline labs_____

Diabetes screen_____

Sleep study (with symptoms of sleep apnea) _____

EKG, cardio echo (with chronic hypertension or diabetes)_____

Anesthesia consultation_____

Breastfeeding Consultation_____

10 TIPS FOR GREAT NUTRITION DURING PREGNANCY

1. **Multivitamin:** Take a daily multivitamin to ensure you and your baby get enough important nutrients. Start taking one even before you get pregnant.
2. **Find a good source of omega-3 fatty acids:** Infants exposed to adequate levels of omega-3s showed better eye and brain development and had less chance of developmental or behavioral problems. Eat fish two times per week and include choices like salmon, tuna, herring, sardines, anchovies, pollack and catfish. Non-aquatic sources of omega include eggs, canola oil, flaxseed and walnuts. If you aren't a fish eater, consider taking a fish oil supplement.
3. **Get enough of these nutrients in your diet: folic acid, choline, zinc, iron and calcium.**
 - **Folic acid:** A shortage of folic acid is the most common nutrient deficiency in women of child-bearing age and can cause nervous system defects in babies. The best sources are beans, orange juice, spinach and broccoli. Take a multivitamin with folic acid if you are sexually active, as the majority of pregnancies are unplanned.
 - **Choline:** This nutrient is needed in larger amounts during pregnancy for brain and memory function. Best food sources include egg yolks, flaxseed, soybeans, oats and lentils.
 - **Zinc:** Levels that are too low may increase the risk of problems with the baby's eyes, heart, lungs and other organs. Food sources include beef and wheat germ.
 - **Iron:** You need this to build red blood cells to carry oxygen to the cells for energy and for growth. Combine animal and plant sources such as beef, lentils, spinach and iron-fortified cereal.
 - **Calcium:** This nutrient is vital for developing strong bones and teeth, healthy nerves, heart and muscles. Best sources include milk, calcium-fortified orange juice, yogurt, corn tortillas and sardines.
4. **Value variety:** Be sure to include a variety of vibrant colors in your fruit and vegetable selection. Each color contains different health benefits, so try to include all the colors of the rainbow. Aim for a total of five to nine fruit and vegetable servings per day.

5. Stay active: Exercise is an important part of staying healthy during pregnancy. Include activities you enjoyed before you were pregnant.
6. Gain weight, but not too much: Keep weight gain gradual with 2-4 pounds in the first trimester and 3-4 pounds per month in the second and third trimesters.
 - Normal pre-pregnancy weight - gain 25-35 lbs.
 - Underweight before pregnancy - gain 28-40 lbs.
 - Overweight before pregnancy - gain 15-25 lbs.
 - Having twins, depending on your pre-pregnancy weight - gain 35-45 lbs.
7. Up your protein intake: Pregnant women need an extra 2-5 grams of protein per day.
8. Eating for two? During pregnancy a woman's metabolism increases by up to 15 percent. That doesn't make pregnancy an opportunity to indulge as much as you want. No extra calories are needed in the first trimester. In the second and third trimesters, you need to add about 300-400 calories to your diet each day (one to two small snacks per day).
9. Fill up on fiber: Eat at least 25-35 grams of fiber per day. Fiber can help relieve constipation and help keep your weight gain in check. Foods high in fiber include fruits and vegetables, whole grains, beans, nuts and seeds.
10. Breastfeed: Breastfeeding protects babies from infections and illnesses that include diarrhea, ear infections, pneumonia and asthma. Children who are breastfed for six months are less likely to become obese. Breastfeeding also reduces the risk of Sudden Infant Death Syndrome (SIDS). Mothers who breastfeed have a decreased risk of breast and ovarian cancers. The American Academy of Pediatrics recommends exclusive breastfeeding for approximately the first six months and support for breastfeeding for the first year and beyond.



FloydValley.org

Floyd Valley Healthcare's mission is to be a progressive healthcare partner serving you with compassion, integrity and excellence.